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SCANNED MAY 1 8 2017

Form **Q90-PF** Department of the Treasury Internal Revenue Service

Return of Private Foundation
or Section 4947(a)(1) Trust Treated as Private Foundation

Do not enter social security numbers on this form as it may be made public.

▶ Information about Form 990-PF and its separate instructions is at www.irs gov/form990pf

For calendar year 2016 or tax year beginning		, and ending		
Name of foundation THE KAROL FUND			A Employer Identification	number
C/O EDWARD P. MOONEY, JR.			20-0350673	\
Number and street (or P O box number if mail is not delivered to street a	ddress)	Room/suite	B Telephone number	
7038 N. BEACH ROAD			(414) 228-	5124
City or town, state or province, country, and ZIP or foreign p	ostal code		C If exemption application is p	ending, check here
FOX POINT, WI 53217				
G Check all that apply: Initial return	Initial return of a fo	ormer public charity	D 1. Foreign organizations	s, check here
Final return	Arnended return		2. Foreign organizations me	seting the 85% test
Address change	Name change		Foreign organizations me check here and attach co	proputation
H Check type of organization: X Section 501(c)(3) ex		4	E If private foundation sta	
Section 4947(a)(1) nonexempt charitable trust I Fair market value of all assets at end of year J Account	Other taxable private foundation method: X Cash	Accrual	under section 507(b)(1)	. ,
·	ther (specify)	Accrual	F if the foundation is in a under section 507(b)(1)	
(from Part II, col (c), line 16) \$\Bigsim \\$ 1,134,824. (Part I, column)		pasis)	direct section sor(b)(1)	/(D), Gleck liefe
Part I Analysis of Revenue and Expenses	(a) Revenue and	(b) Net investment	(c) Adjusted net	(d) Disbursements
(The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a))	expenses per books	income	income	for charitable purposes (cash basis only)
1 Contributions, gifts, grants, etc., received	150,000.		N/A	
2 Check If the foundation is not required to attach Sch. B				
Interest on savings and temporary cash investments			<u> </u>	
4 Dividends and interest from securities	1,123.	1,123.	<u> </u>	STATEMENT 1
5a Gross rents				
b Net rental income or (loss)	128,487.		}	
68. Net gain or (loss) from sale of assets not on line 10 Gross sales price for all 369, 322.	120,407.			
b Gross sales price for sil 369,322. 7 Capital gain net income (from Part IV, line 2)		128,487.		
8 Net short-term capital gain		120, 207.		
9 Income modifications				
Gross sales less returns 10a and allowances			ļ	
b Less Cost of goods sold RECEIVED				
c Gross profit or (1055)	<u> </u>			
11 Other Income MAY 1 5 2017	279,610.			
12 Total. Add lines diffrough 11		129,610.	 	<u> </u>
13 Compensation of officers, directors, trustees, etc. 14 Other employee salaries and wages.	0.	0.		0.
•			 	ļ- -
15 Pension plans, employee benefits		 		
b Accounting fees STMT 2 c Other professional fees	2,925.	1,462.		1,463.
c Other professional fees	2,525.	1,102.		1,203.
e 17 Interest				
17 Interest 18 Taxes STMT 3 19 Depreciation and depletion 20 Occupancy 21 Travel, conferences, and meetings	5,000.	0.		0.
19 Depreciation and depletion				
물 20 Occupancy				
21 Travel, conferences, and meetings				
물 22 Printing and publications				<u> </u>
23 Other expenses STMT 4	100,000.	0.		0.
হুব 24 Total operating and administrative]	
22 Printing and publications 23 Other expenses STMT 4 24 Total operating and administrative expenses. Add lines 13 through 23 25 Contributions of the greate paid	107,925.	1,462.	 	1,463. 280,000.
25 Continuations, girls, grants para	280,000.			280,000.
26 Total expenses and disbursements.	207 025	1 460	1	201 462
Add lines 24 and 25	387,925.	1,462.	 	281,463.
27 Subtract line 26 from line 12:	-108,315.			}
a Excess of revenue over expenses and disbursements b Net investment income (if negative, enter -0-)	-100,313.	128,148.		
C Adjusted net income (if negative, enter -0-)		120,120.	N/A	
A Vallagren lier tilentile (it nadanse, etter -0-)				- 000 DE

Fo	rm 99	THE KAROL FUND O-PF(2016) C/O EDWARD P. MOONEY, JF	₹.	20-0	0350673 Page 2
\equiv			Beginning of year	End of	
Ŀ	column should be for end-of-year amounts only		(a) Book Value	(b) Book Value	(c) Fair Market Value
•	1	Cash - non-interest-bearing			
	2	Savings and temporary cash investments	14,708.	155,713.	155,713.
	3	Accounts receivable			•
	ſ	Less: allowance for doubtful accounts			
	4	Pledges receivable -			
	}	Less: allowance for doubtful accounts			
	1 -	Grants receivable			
	6	Receivables due from officers, directors, trustees, and other			
	_	disqualified persons			
	7	Other notes and loans receivable	İ	.	• • •
		Less: allowance for doubtful accounts			
ats	8	Inventories for sale or use			
Assets	9	Prepaid expenses and deferred charges			
•	100	Investments - U.S. and state government obligations	260 140	20 020	21 400
	i i	Investments - corporate stock STMT 5	260,148.	20,828.	31,498.
	Į.	Investments - corporate bonds			
	111	Investments - land, buildings, and equipment basis			
]	Less accumulated depreciation			
		Investments - mortgage loans		- 	047 (12
	13	Investments - other STMT 6	0.	0.	947,613.
	14	Land, buildings, and equipment basis			
		Less accumulated depreciation			
	ı	Other assets (describe		}	
	16	Total assets (to be completed by all filers - see the	274 256	176 541	1 124 024
_	 	instructions. Also, see page 1, item I)	274,856.	176,541.	1,134,824.
		Accounts payable and accrued expenses			
	18	Grants payable			
es	19	Deferred revenue			
Liabiliti	20	Loans from officers, directors, trustees, and other disqualified persons			
jat	21	Mortgages and other notes payable			
_	22	Other liabilities (describe			
		T 1.1 (* 1.1 (*)	0.	0.	
	23	Total liabilities (add lines 17 through 22) Foundations that follow SFAS 117 check here			
		Total de la constitución de la c			
Ś	۰	and complete lines 24 through 26 and lines 30 and 31.		[
nces	1	Unrestricted		 -	
alai	25	Temporarily restricted			
or Fund Balan	26	Permanently restricted Foundations that do not follow SFAS 117, check here			
ş		,			
<u></u>	27	and complete lines 27 through 31. Capital stock, trust principal, or current funds	0.	0.	
şş	[~	Paid-in or capital surplus, or land, bldg., and equipment fund	0.	0.	
Assets	28 29	Retained earnings, accumulated income, endowment, or other funds	274,856.	176,541.	
Net A	30	Total net assets or fund balances	274,856.	176,541.	
Ž	30	Total fiet assets of fully paramets			
	31	Total liabilities and net assets/fund balances	274,856.	176,541.	
	_				
	art	Allalysis of Changes in Net Assets of Fund Ba			
1	Tota	net assets or fund balances at beginning of year - Part II, column (a), line 3	30		· <u> </u>
	(mus	st agree with end-of-year figure reported on prior year's return)		1	274,856.
		r amount from Part I, line 27a		2	-108,315.
3	Othe	r increases not included in line 2 (itemize) - BOOK TO TAX	DIFFERENCES	3	10,000.
		lines 1, 2, and 3		4	176,541.
5	Decr	eases not included in line 2 (itemize)		5	0.
6_	Total	net assets or fund balances at end of year (line 4 minus line 5) - Part II, co	lumn (b), line 30	6	176,541.
		· · - · - · - · - · - · · - · · · ·			Form 990-PF (2016)

Part IV	Capital Gains a	and Losses for Tax on In	vestment	Income					
`		ribe the kind(s) of property sold (e.g irehouse; or common stock, 200 shs			(p) H	ow acquired Purchase Donation	(c) Date (mo.,	e acquired day, yr.)	(d) Date sold (mo., day, yr.)
1a PUB	LICLY TRADE				<u>- b</u> -	Donation	VARI		04/04/16
	LICLY TRADE				 	D	VAR		09/21/16
	LICLY TRADE					D	VAR		06/21/16
d CAP	ITAL GAINS I	DIVIDENDS							
e									
(e)	Gross sales price	(f) Depreciation allowed (or allowable)		st or other basis expense of sale				Gain or (loss us (1) minus	
_a	50,000.			31,68					18,318.
_b	150,000.		<u> </u>	103,72					46,275.
_c	168,930.		<u> </u>	105,42	8.				63,502.
_d	392.								392.
<u>e</u>			<u> </u>	10/01/00	-+				·
Compi	ete only for assets snowin	g gain in column (h) and owned by	T				(I)Gains (Col. (h) gain not less tha	minus
(i) F.	M.V. as of 12/31/69	(j) Adjusted basis as of 12/31/69		cess of col. (1)				s (from col. ((h))
_a									18,318.
_b									46,275.
<u>c</u>									63,502.
<u>d</u>			 						392.
_e			L		_ +				
2 Capital	gain net income or (net ca	pital loss) { If gain, also ente If (loss), enter -0			}[2			128,487.
3 Net sho	rt-term capital gain or (los	s) as defined in sections 1222(5) ar							
	also enter in Part I, line 8,		(0)		11				
If (loss)	, enter -0- in Part I, line 8	1 6 11 4646/17		- 11.41	Щ	3		N/A	·
Part V		nder Section 4940(e) for						·	
(For option	al use by domestic private	foundations subject to the section 4	4940(a) tax on	net investment inc	come.)				
If section 4	940(d)(2) applies, leave th	nis part blank.							
		·		46 - 4					
		tion 4942 tax on the distributable am		•	1007				Yes X No
		ofy under section 4940(e). Do not co each column for each year, see the in			ntries.				
1 2/10/0	_ (a)		154 40110115 001	oro making any on	(c)		\neg		(d) bution ratio
Calenda	Base periód years r year (or tax year beginnir	(b) Adjusted qualifying dis	tributions	Net value of no	nchari	table-use asse	s	Distrit (col. (b) div	bution ratio vided by col. (c))
Outchiou	2015		4,213.		1,	253,83	7.	(==:: (=) ===	.218699
	2014		0,900.			760,84			.342907
	2013		8,200.			588,52			.387752
	2012		3,075.	-		489,07			.456117
	2011		2,550.			489,84	5.		.433913
2 Total of	f line 1, column (d)						2		1.839388
3 Average	e distribution ratio for the s	5-year base period - divide the total (on line 2 by 5,	or by the number	of year	'S	İ		
the four	ndation has been in exister	nce if less than 5 years					3	<u> </u>	.367878
							Į	ļ	
4 Enter th	e net value of noncharitab	le-use assets for 2016 from Part X,	line 5				4	 	<u>1,218,341.</u>
							ł		
5 Multiply	line 4 by line 3						5	 	448,201.
							ł		. 1 201
6 Enter 1	% of net investment incom	ie (1% of Part I, line 27b)					6	 	1,281.
								j	440 400
7 Add line	es 5 and 6						7	 	449,482.
8 Enter o	ualifying distributions from	n Part XII. line 4					8		281,463.
•	, -	line 7, check the box in Part VI, line	th and come	lete that nart using	n a 1%	tay rate			
See the	Part Vi instructions	ining 1, Check the DUX III Part VI, Init	, is, and comp	ioto tiiat pait usiili	yu 1/0	MA I att.			

	1990-PF (2016) C/O EDWARD P. MOONEY, JR.		<u>-0350</u>			Page 4
Pa	art VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4	948 -	- see in	struc	tion	<u>s)</u>
1a	Exempt operating foundations described in section 4940(d)(2), check here and enter "N/A" on line 1.	1	1			
`	Date of ruling or determination letter: (attach copy of letter if necessary-see instructions)	1		_		_
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check here and enter 1%	\perp 1			<u>2,5</u>	<u>63.</u>
	of Part I, line 27b		1			
C	All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of Part I, line 12, col. (b).	1	1			
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	2				<u>0.</u>
3	Add lines 1 and 2	3			2,5	<u>63.</u>
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	4	Д—			<u>0.</u>
5	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-	5			2,5	<u>63.</u>
6	Credits/Payments:	1	[
a	2016 estimated tax payments and 2015 overpayment credited to 2016 6a 2,895	┧	1			
b	Exempt foreign organizations - tax withheld at source	4	-			
C	Tax paid with application for extension of time to file (Form 8868)	4	ł			
d	Backup withholding erroneously withheld	4	-			
7		17			2,8	<u>95.</u>
8	Enter any penalty for underpayment of estimated tax. Check here X if Form 2220 is attached	_8_	 			
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed	9	 			
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid	10				32.
11	Enter the amount of line 10 to be: Credited to 2017 estimated tax	11				0.
	rt VII-A Statements Regarding Activities				Vaa	Na
1a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or interven	e in			Yes	
	any political campaign?			1a		X
þ	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see instructions for the definition			1b		X
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials publis	hed or	•			
	distributed by the foundation in connection with the activities			1. 1		v
	Did the foundation file Form 1120-POL for this year?			10		X
ď	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year:			[]		
	(1) On the foundation. ▶ \$ 0. (2) On foundation managers. ▶ \$ 0.	<u>-</u>				
е	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation					
	managers. > \$ 0.			2		Х
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?					
	If "Yes," attach a detailed description of the activities Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation,	0.5				
3	bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes	UI		3		х
4.	Did the foundation have unrelated business gross income of \$1,000 or more during the year?			4a		X
	If "Yes," has it filed a tax return on Form 990-T for this year?	1	N/A	4b		
	Was there a liquidation, termination, dissolution, or substantial contraction during the year?		,	5		X
J	If "Yes." attach the statement required by General Instruction T.			ات		
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either:)]		
•	By language in the governing instrument, or			ļ		
	 By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the star 	ie law		1		
	remain in the governing instrument?			6	х	
7		V		7	Х	
•	on the fourth that the territory to the territory that the territory t	•				
8a	Enter the states to which the foundation reports or with which it is registered (see instructions)]		
•	WI					
b	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate)					
•	of each state as required by General Instruction G? If "No," attach explanation			- 8b	х	
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for call	endar				
•	year 2016 or the taxable year beginning in 2016 (see instructions for Part XIV)? If "Yes, " complete Part XIV			9	-	X
10	Did any persons become substantial contributors during the tax year? If "yes," attach a schedule listing their names and addresses		_	10		X
			For	m 990)-PF	

Pa	rt VII-A	Statements Regarding Activities (continued)				
					Yes	No
11	At any time	during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of	1	- 1		
		2(b)(13)? If "Yes," attach schedule (see instructions)	j	11		X
12	Did the fou	ndation make a distribution to a donor advised fund over which the foundation or a disqualified person had advisory privile	eges?	\neg		
	If "Yes," att	ach statement (see instructions)	·	12		X
13	•	ndation comply with the public inspection requirements for its annual returns and exemption application?	ŗ	13	X	
		dress ▶ N/A	• -			
14	The books	are in care of ▶ EDWARD P. MOONEY, JR. Telephone no.▶	414) 2	28	-51	24
			P+4 ▶532	17		
15	Section 49	47(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - Check here				
	and enter t	he amount of tax-exempt interest received or accrued during the year	5	N	/A	
16	At any time	during calendar year 2016, did the foundation have an interest in or a signature or other authority over a bank,			Yes	No
	securities,	or other financial account in a foreign country?		16		X
	See the ins	tructions for exceptions and filing requirements for FinCEN Form 114. If "Yes," enter the name of the	Γ			
_	foreign cou					
Pa	rt VII-B	Statements Regarding Activities for Which Form 4720 May Be Required				
	File Form	4720 if any item is checked in the "Yes" column, unless an exception applies.	L		Yes	No
1a	During the	year did the foundation (either directly or indirectly):				
			X No		1	
		v money from, lend money to, or otherwise extend credit to (or accept it from)				
	•		X No			
			X No			
	• •		X No			
		er any income or assets to a disqualified person (or make any of either available	_ਰਾ			
		, , ,	X No			
		to pay money or property to a government official? (Exception. Check "No"		-		
		oundation agreed to make a grant to or to employ the official for a period after	·▼			
_			X No			
b	-	ver is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations	N/A	.		,
		4941(d)-3 or in a current notice regarding disaster assistance (see instructions)?		1b_		
	-	ins relying on a current notice regarding disaster assistance check here		- 1		
С		ndation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected]	.		X
		first day of the tax year beginning in 2016? filure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation	-	1c_		
2		section 4942(j)(3) or 4942(j)(5)):	Ì	- 1		
•		of tax year 2016, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning		- 1		
•	before 201		X No			
		the years > , , , , , , , , , , , , , , , , , ,		- 1		
b		ny years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2) (relating to incorrect	1	- 1		
_		f assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer "No" and attach				
		see instructions.)	N/A	2Ъ	' i	
c	If the provi	sions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here.	Γ	\neg		
			1]	1	
3a	Did the fou	ndation hold more than a 2% direct or indirect interest in any business enterprise at any time		ı	· 1	
	during the		X No]		
b	If "Yes," did	It have excess business holdings in 2016 as a result of (1) any purchase by the foundation or disqualified persons after				
		69; (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7)) to dispose	şe ∣		ľ	
	of holdings	acquired by gift or bequest, or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Schedule C,]			
	Form 472	0, to determine if the foundation had excess business holdings in 2016)	N/A	<u>3b</u>		
4 a		ndation invest during the year any amount in a manner that would jeopardize its charitable purposes?		4a	I	Х
b	Did the fou	ndation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose tha	t]	ļ	ļ	
	had not bee	en removed from jeopardy before the first day of the tax year beginning in 2016?		4b		Х
			Form	990	-PF	(2016)

Part VII-B Statements Regarding Activities for Which F		equired	20-03500	13	Page 6
	Offit 4720 May be for	equirea (contin	ued)		
5a During the year did the foundation pay or incur any amount to:	4045(0))2		s X No	[ĺ
(1) Carry on propaganda, or otherwise attempt to influence legislation (section			5 A NO	ł	
(2) Influence the outcome of any specific public election (see section 4955); or	r to carry on, directly or indire		s X No		
any voter registration drive?		_		ĺ	i
(3) Provide a grant to an individual for travel, study, or other similar purposes?		L ¥0	s X No	- 1	Į.
(4) Provide a grant to an organization other than a charitable, etc., organization	i described in section	—	ा र	- 1	
4945(d)(4)(A)? (see instructions)			es X No	İ	1
(5) Provide for any purpose other than religious, charitable, scientific, literary,	or educational purposes, or to		(1 27)	- 1)
the prevention of cruelty to children or animals?			s X No		1
b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify unc		n Regulations			1
section 53.4945 or in a current notice regarding disaster assistance (see instruc			N/A	5b	
Organizations relying on a current notice regarding disaster assistance check he				ł	-
c If the answer is "Yes" to question 5a(4), does the foundation claim exemption fr		. —		- 1	ł
expenditure responsibility for the grant?	N	I/A Ye	s L No	l l	
If "Yes," attach the statement required by Regulations section 53 4945-	-5(d).			ł	-
6a Did the foundation, during the year, receive any funds, directly or indirectly, to p	pay premiums on			.	1
a personal benefit contract?		Ye	es 🛣 No		1
b Did the foundation, during the year, pay premiums, directly or indirectly, on a pi	ersonal benefit contract?		<u> </u>	6ь	<u> </u>
If "Yes" to 6b, file Form 8870				- 1	1
7a At any time during the tax year, was the foundation a party to a prohibited tax s	helter transaction?	Ye	es 🗓 No 📙		
b If "Yes," did the foundation receive any proceeds or have any net income attribu			N/A	7b	<u> </u>
Part VIII Information About Officers, Directors, Truste	es, Foundation Mar	nagers, Highly			
Paid Employees, and Contractors					
1 List all officers, directors, trustees, foundation managers and their of		(c) Compensation	(d) Contributions to	4.15	
(a) Name and address	(b) Title, and average hours per week devoted	(If not paid,	(d) Contributions to employee benefit plans and deterred	accour	xpense nt, other
	to position	enter -0-)	compensation	allov	vances
	TRUSTEE				
7038 NORTH BEACH ROAD	0.50	1			0
FOX POINT, WI 53217	0.50 TRUSTEE	0.	0.		<u> </u>
	TRUSTEE		!		
7038 NORTH BEACH ROAD	0.50	0.	0.		0.
FOX POINT, WI 53217	0.50				
		ļ	ļ		
				l	
	 	 		-	
					
		1		l	
2 Compensation of five highest-paid employees (other than those incl	uded on line 1). If none.	enter "NONE."			
		T	(d) Contributions to employee benefit plans and deferred	(e) E	xpense nt, other
(a) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week devoted to position	(c) Compensation	and deferred compensation	accour	nt, other vances
NONE	GOVERGE TO POSITION	 	componducii		
		1			
		 			
		1			
		<u> </u>	 		
 		1			
		1			
		1			
		<u> </u>			
		1			
Total number of other employees paid over \$50,000		·	▶ T		0

Form 990-PF (2016)

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Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors (continued)		
3 Five highest-paid independent contractors for professional services. If none, enter "NONE."		
(a) Name and address of each person paid more than \$50,000 (b) Type of service	(c) C	ompensation
NONE		
	l	
		
	ļ	
	<u> </u>	
Total number of others receiving over \$50,000 for professional services Part IX-A Summary of Direct Charitable Activities		
		
List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of organizations and other beneficiaries served, conferences convened, research papers produced, etc.	Expen	ses
1 N/A		
·		
2		
3		
4		
Dort IV P.L.		
Part IX-B Summary of Program-Related Investments Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2.	Amou	unt .
	Amou	JIIC
1 N/A		
2		
<u> </u>		
All other program-related investments. See instructions.	· · · · · · · · · · · · · · · · · · ·	
3		
		
Total. Add lines 1 through 3	For- 00/	0. D-PF (2016)
	LOIM 220	(ZUID)

For	m 990-PF (2016) C/O EDWARD P. MOONEY, JR.	20-	0350673	Page 8
P	art X Minimum Investment Return (All domestic foundations must complete this part Foreign for	ndations, s	ee instructions.)	
i	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes:			
a	Average monthly fair market value of securities	1a	214	<u>,291.</u>
b	Average of monthly cash balances	1b		,990.
c	Fair market value of all other assets	1¢	947	,613.
d	Total (add lines 1a, b, and c)	1d	1,236	,894.
е	Reduction claimed for blockage or other factors reported on lines 1a and			
	1c (attach detailed explanation)			
2	Acquisition indebtedness applicable to line 1 assets	2		0.
3	Subtract line 2 from line 1d	3	1,236	,894.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions)	4	18	,553.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	1,218	,341.
6	Minimum investment return. Enter 5% of line 5	6	60	,917.
P	art XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations a	nd certain		
	foreign organizations check here 🕨 🔲 and do not complete this part.)			
1	Minimum investment return from Part X, line 6		60	,917.
2a	Tax on investment income for 2016 from Part VI, line 5			
b	Income tax for 2016. (This does not include the tax from Part VI.)] }		
c	Add lines 2a and 2b	2c	2	,563.
3	Distributable amount before adjustments, Subtract line 2c from line 1	3	58	,354.
4	Recoveries of amounts treated as qualifying distributions	4		0.
5	Add lines 3 and 4	5	58	,354.
6	Deduction from distributable amount (see instructions)	6		0.
7	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1	7	58	,354.
P	art XII Qualifying Distributions (see instructions)			
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:			
a	Expenses, contributions, gifts, etc total from Part I, column (d), line 26	1a	281	,463.
b	Program-related investments - total from Part IX-B	1b		0.
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes	2		
3	Amounts set aside for specific charitable projects that satisfy the:			
a	Suitability test (prior IRS approval required)	3a		
b	Cash distribution test (attach the required schedule)	3b		
4	Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4	4	281	,463.
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment			
	income. Enter 1% of Part I, line 27b	5		0.
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	281	,463.
	Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation	qualifies for	the section	
	4940(e) reduction of tax in those years.			

Form 990-PF (2016)

Part XIII Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2015	(c) 2015	(d) 2016
1 Distributable amount for 2016 from Part XI,				
line 7				58,354.
2 Undistributed income, if any, as of the end of 2016				
a Enter amount for 2015 only			0.	
b Total for prior years:		0		
3 Excess distributions carryover, if any, to 2016:		0.		
a From 2011 212,550.				
b From 2012 198,621.				
c From 2013 198,774.				
d From 2014 222,858.				
e From 2015 213,577.				
f Total of lines 3a through e	1,046,380.			
4 Qualifying distributions for 2016 from				
Part XII, line 4: ►\$ 281, 463.				
a Applied to 2015, but not more than line 2a			0.	
b Applied to undistributed income of prior				
years (Election required - see instructions)		0.		
c Treated as distributions out of corpus				
(Election required - see instructions)	0.			
d Applied to 2016 distributable amount				58,354.
e Remaining amount distributed out of corpus	223,109.			
5 Excess distributions carryover applied to 2015 (If an amount appears in column (d), the same amount must be shown in column (a))	0.			0.
6 Enter the net total of each column as indicated below:				
a Corpus Add lines 3f, 4c, and 4e Subtract line 5	1,269,489.			
b Prior years' undistributed income. Subtract				
line 4b from line 2b		0.		
c Enter the amount of prior years'				
undistributed income for which a notice of deficiency has been issued, or on which			!	
the section 4942(a) tax has been previously		_	,	
assessed		0.		
d Subtract line 6c from line 6b. Taxable		_		
amount - see instructions		0.		
e Undistributed income for 2015. Subtract line				
4a from line 2a. Taxable amount - see instr.			0.	
f Undistributed income for 2016. Subtract				
lines 4d and 5 from line 1. This amount must				0.
be distributed in 2017				
7 Amounts treated as distributions out of				
corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3) (Election				
may be required - see instructions)	0.			
8 Excess distributions carryover from 2011				
not applied on line 5 or line 7	212,550.			
9 Excess distributions carryover to 2017.				
Subtract lines 7 and 8 from line 6a	1,056,939.			
D Analysis of line 9;				
a Excess from 2012 198,621.				
b Excess from 2013 198,774.				
c Excess from 2014 222,858.				
d Excess from 2015 213,577.			:	
e Excess from 2016 223,109.			<u> </u>	5 000-DE (0040)

Form 990-PF (2016) C/O EDV	ARD P. MOON	EY, JR.		20-03	50673 Page 10
Part XIV Private Operating F			-A, question 9)	N/A	
1 a If the foundation has received a ruling			!		
foundation, and the ruling is effective for	•	•	▶ ∟	7	
b Check box to indicate whether the foun		ng foundation described i		4942(j)(3) or 49	(42(j)(5)
2 a Enter the lesser of the adjusted net	Tax year	(5) 2015	Prior 3 years	(4) 2012	(a) Total
income from Part I or the minimum	(a) 2016	(b) 2015	(c) 2014	(d) 2013	(e) Total
investment return from Part X for					
each year listed .					
b 85% of line 2a			<u></u>	 	
c Qualifying distributions from Part XII, line 4 for each year listed			<u> </u>		
d Amounts included in line 2c not					
used directly for active conduct of					
exempt activities	•	}	4		i
e Qualifying distributions made directly					
for active conduct of exempt activities.		[1		
Subtract line 2d from line 2c Complete 3a, b, or c for the alternative test relied upon: a "Assets" alternative test - enter: (1) Value of all assets					
(2) Value of assets qualifying under section 4942(j)(3)(B)(i)					
b "Endowment" alternative test - enter 2/3 of minimum investment return shown in Part X, line 6 for each year listed	(
c "Support" alternative test - enter:					
(1) Total support other than gross investment income (interest, dividends, rents, payments on securities loans (section 512(a)(5)), or royalties)					
(2) Support from general public and 5 or more exempt organizations as provided in section 4942(j)(3)(B)(iii)					
(3) Largest amount of support from		Į.	ļ		
an exempt organization		<u> </u>			
(4) Gross investment income					
Part XV Supplementary Info			f the foundation	had \$5,000 or mor	e in assets
at any time during t	he year-see instr	uctions.)			
1 Information Regarding Foundation	n Managers:				-
a List any managers of the foundation wi year (but only if they have contributed	o have contributed more		ributions received by the	foundation before the close	e of any tax
EDWARD P. MOONEY, JR					
b List any managers of the foundation who other entity) of which the foundation ha			or an equally large port	on of the ownership of a pa	rtnership or
NONE	a a care or growner mitorox	-			
	in Count Cit I	Caladanahin ata Du			
2 Information Regarding Contribut Check here if the foundation the foundation makes gifts, grants, etc.	only makes contributions	to preselected charitable	organizations and does i	· · · · · · · · · · · · · · · · · · ·	
a The name, address, and telephone num	` 				
SEE STATEMENT 7 b The form in which applications should	pe submitted and informat	tion and materials they sh	ould include;		
c Any submission deadlines:					
d Any restrictions or limitations on award	s, such as by geographica	al areas, charitable fields,	kınds of institutions, or	other factors:	

Part XV Supplementary Information (continued) Grants and Contributions Paid During the Year or Approved for Future Payment If recipient is an individual, Recipient Purpose of grant or contribution Foundation show any relationship to Amount any foundation manager or substantial contributor status of Name and address (home or business) recipient a Paid during the year WOMEN'S SUPPORT CENTER OF MILWAUKEE NONE PC ANNUAL SUPPORT 2051 WEST WISCONSIN AVENUE MILWAUREE, WI 53233 5,000. ST. MONICA CONGREGATION NONE ₽C DONOVAN HALL RENOVATIONS 160 E SILVER SPRING DR. WHITEFISH BAY, WI 53217 25,000. ST. JOSEPHAT BASILICA FOUNDATION NONE РC ANNUAL SUPPORT 620 W. LINCOLN AVENUE 5,000. MILWAUREE, WI 53215 ST. FRANCIS SEMINARY NONE ЬC CATHOLIC STEWARDSHIP APPEAL 3257 SOUTH LAKE DR. 45,000. ST. FRANCIS, WI 53235 ANNUAL SUPPORT ST. FRANCIS SEMINARY NONE РC 3257 SOUTH LAKE DR. ST. FRANCIS, WI 53235 1,500. SEE CONTINUATION SHEET(S) 280,000. ▶ 3a Total b Approved for future payment NONE Total 0.

Form 990-PF (2016) Part XVI-A Analysis of Income-Producing Activities

	Unrelate	d business income	Evolue	ded by section 512, 513, or 514	
Enter gross amounts unless otherwise indicated.	(a) Business	(b) Amount	(C) Exclu- sion code	(d) Amount	(e) Related or exempt function income
1 Program service revenue:	code		COG6	7 11100111	10110001110
a b	 				
	 		\vdash		
d			\vdash		
e			┝╌┤		
g Fees and contracts from government agencies	 				
2 Membership dues and assessments			 		
3 Interest on savings and temporary cash	1				
investments	1 1		1 1		
4 Dividends and interest from securities			14	1,123.	
5 Net rental income or (loss) from real estate;					
a Debt-financed property					
b Not debt-financed property					
6 Net rental income or (loss) from personal					
property	1]		
7 Other investment income					
8 Gain or (loss) from sales of assets other					
than inventory	L Ł		18	128,487.	
9 Net income or (loss) from special events					
O Gross profit or (loss) from sales of inventory					
11 Other revenue:			}		
a					
b					
c					
d	L				
e					
12 Subtotal. Add columns (b), (d), and (e)	<u> </u>	0.		129,610.	0.
13 Total. Add line 12, columns (b), (d), and (e)				. 13	129,610.
(See worksheet in line 13 instructions to verify calculations.)					
Part XVI-B Relationship of Activities to	o the Accoi	mplishment of Exe	mpt	Purposes	
Line No. Explain below how each activity for which inco			contrib	uted importantly to the accom	plishment of
the foundation's exempt purposes (other than	by providing fun	ds for such purposes).			,
					
		 			
					
					
					
					
					
					
					
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					·
					
					

Form 990-PF	(2016) C/O E	DWARD P.	MOONEY	, JR.		20-03		Page 13
Part XVII	Information Re Exempt Organ		sfers To a	ind Transactions a	and Relationsh	nips With Nonch	aritable	
1 Did the	organization directly or indi		of the followin	o with any other organizati	ion described in sect	ion 501(c) of		Yes No
	(other than section 501(c)							
	s from the reporting found							
(1) Cas			•	•			1a(1)	X
	er assets						1a(2)	Х
	ansactions:							
(1) Sale	es of assets to a noncharita	ble exempt organiza	tion				16(1)	Х
(2) Pur	chases of assets from a no	ncharitable exempt o	organization				1b(2)	Х
(3) Ren	ital of facilities, equipment,	or other assets	-				16(3)	X
(4) Rei	mbursement arrangements						1b(4)	Х
(5) Loa	ns or loan guarantees						16(5)	X
	formance of services or me	mbership or fundrai	sing solicitatio	ns			1b(6)	X
c Sharing	of facilities, equipment, ma	iling lists, other asse	ets, or paid em	ployees			1c	Х
d If the an	swer to any of the above is	"Yes," complete the	following sche	dule. Column (b) should a	lways show the fair t	market value of the good	s, other ass	ets,
or service	es given by the reporting fo	oundation. If the four	ndation receive	ed less than fair market val	ue in any transaction	or sharing arrangement	, show in	
column	(d) the value of the goods,	other assets, or serv	rices received.					
(a) Line no	(b) Amount involved	(c) Name o	f noncharitable	e exempt organization	(d) Description	of transfers, transactions, a	nd sharing arra	ingements
			N/A					
		L		·				
		<u></u>						
		l						
						· · · · · · · · · · · · · · · · · · ·		
		<u></u>						
		<u> </u>				· · · · · · · · · · · · · · · · · · ·		
		L						- <u> </u>
	 							
				 				.
								·
		<u>l</u>						
2a Is the fo	undation directly or indirec	tly affiliated with, or	related to, one	or more tax-exempt organ	nizations described			
ın sectio	n 501(c) of the Code (other	than section 501(c))(3)) or in sect	ion 527 ?			Yes	X No
b If "Yes,"	complete the following sch				·			
	(a) Name of org	anization		(b) Type of organization	 	(c) Description of relation	onship	
	N/A				 			
	<u> </u>			<u></u>	 			
				<u> </u>	 			
				<u> </u>	 			
			1	L				
	er penal tics of perjury, ind eclare t ben ef, it is true , correct, and com-						May the IRS d	iscuss this
Sign L			^				return with the shown below	spreparer (see instr)?
Here	Onout 1	1 (cere	"	VI May 2007) PUS	12/2	X Yes	L No
Sı	nature of officer or trustee		<u>/</u>	Date	Title	<u>. </u>		
	Print/Type preparer's na	ime //	Preparer's s	ignature	Date	Check If PTI	N	
D.: 1		. //	m.	De ma	5-8-17	self- employed		
Paid	MATTHEW D.		J	00/1/12	13-8-1/		00429	
Preparer	JIIIII 3 Hallie P DDD	OITTE TAX	LLP			Firm's EIN ► 86 -	10657	72
Use Only						<u> </u>		
	Firm's address ► 38		•					
	GR	AND RAPID	S, MI	49503		Phone no. (616) 336	
							Form 990)-PF (2016)

Schedule B (Form 990, 990-EZ, or 990-PF)

Department of the Treasury Internal Revenue Service

Schedule of Contributors

▶ Attach to Form 990, Form 990-EZ, or Form 990-PF. ▶ Information about Schedule B (Form 990, 990-EZ, or 990-PF) and its instructions is at www.irs gov/form990 .

OMB No 1545-0047

Name of the organization	on THE KAROL FUND	Employer identification number					
	C/O EDWARD P. MOONEY, JR.	20-0350673					
Organization type (chec							
Filers of:	Section:						
Form 990 or 990-EZ	501(c)() (enter number) organization						
	4947(a)(1) nonexempt charitable trust not treated as a private foundation						
	527 political organization						
Form 990-PF	X 501(c)(3) exempt private foundation						
	4947(a)(1) nonexempt chantable trust treated as a private foundation						
	501(c)(3) taxable private foundation						
Note: Only a section 501 General Rule X For an organiza	on is covered by the General Rule or a Special Rule . (c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule, or (10) organization can check boxes for both the General Rule and a Special Rule.	otaling \$5,000 or more (in money or					
For an organiza sections 509(a) any one contrib	tion described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% suj (1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, utor, during the year, total contributions of the greater of (1) \$5,000 or (2) 2% of the EZ, line 1. Complete Parts I and II.	, 16a, or 16b, and that received from					
year, total contr	tion described in section 501(c)(7), (8), or (10) filling Form 990 or 990-EZ that received ributions of more than \$1,000 exclusively for religious, charitable, scientific, literary, of cruelty to children or animals. Complete Parts I, II, and III.						
year, contribution is checked, enter purpose Don't	tion described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received ons exclusively for religious, charitable, etc., purposes, but no such contributions total er here the total contributions that were received during the year for an exclusively recomplete any of the parts unless the General Rule applies to this organization becamable, etc., contributions totaling \$5,000 or more during the year	aled more than \$1,000 If this box eligious, charitable, etc ,					
but it must answer "No"	n that isn't covered by the General Rule and/or the Special Rules doesn't file Schedule on Part IV, line 2, of its Form 990, or check the box on line H of its Form 990-EZ or or et the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).						

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990, 990-EZ, or 990-PF. Schedule B (Form 990, 990-EZ, or 990-PF) (2016)

Employer identification number

Name of organization THE KAROL FUND C/O EDWARD P. MOONEY, JR. 20-0350673 Part I Contributors (See instructions). Use duplicate copies of Part I if additional space is needed. (a) (d) **Total contributions** Type of contribution No. Name, address, and ZIP + 4 EDWARD P. MOONEY, JR. 1 Person Payroll 7038 N. BEACH DRIVE 150,000. Noncash (Complete Part II for noncash contributions) FOX POINT, WI 53217 (a) (b) (c) (d) **Total contributions** Type of contribution No. Name, address, and ZIP + 4 Person Payroll Noncash (Complete Part II for noncash contributions.) (d) (a) (b) (c) Type of contribution **Total contributions** No. Name, address, and ZIP + 4 Person **Payroll** Noncash (Complete Part II for noncash contributions) (a) (c) (d) Type of contribution **Total contributions** No. Name, address, and ZIP + 4 Person Payroll Noncash (Complete Part II for noncash contributions.) (c) (d) (a) No. **Total contributions** Type of contribution Name, address, and ZIP + 4 Person Payroil Noncash (Complete Part II for noncash contributions) (c) (d) (a) (p) **Total contributions** Type of contribution No. Name, address, and ZIP + 4 Person Payroll Noncash (Complete Part II for

noncash contributions)

Name of organization

THE KAROL FUND

C/O EDWARD P. MOONEY, JR.

Employer identification number

20-0350673

(a) No. from	(b)	(c) FMV (or estimate)	(d) Date received
Part I	Description of noncash property given	(See instructions)	Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
		 \$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
		\$	
(a) No. from Part i	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
		 \$	

Recipient If recipient is an individual, show any relationship to any foundation manager or substantial contribution Foundation fatus of recipient Purpose of grant or contribution Amount ST. FRANCIS OF ASSISI FARISH NONE SO III FI ANNUAL SUPPORT ST. FRANCIS OF ASSISI FARISH NONE SO III FI ANNUAL SUPPORT ANNUAL SUPPORT ANNUAL SUPPORT ST. FRANCIS OF ASSISI FARISH NONE PC ANNUAL SUPPORT ANNUAL SUPPORT ANNUAL SUPPORT ANNUAL SUPPORT SO III FI ANNUAL SUPPORT ANNUAL SUPPORT SO III FI ANNUAL SUPPORT	Part XV Supplementary Information 3 Grants and Contributions Paid During the Y				[
Name and address (home or business) any foundation manager or substantial contributor or succeivent or succeivent or substantial contributor or succeivent or succeive or succeive or succeive or succeive or succeive or succeive or succeive or succeive or succeive or succeive or succeive or succeive or succeive or succeive or succeive or		If recipient is an individual,	Foundation	Purpose of grant or	
ANNUAL SUPPORT MILWAUKEE PUBLIC LIBRARY FOUNDATION NONE PC ANNUAL SUPPORT MILWAUKEE PUBLIC LIBRARY FOUNDATION NONE PC ANNUAL SUPPORT MILWAUKEE, WI 53233 25, DEPENSBURG CENTRAL CATHOLIC SCHOOL NONE PC ANNUAL SUPPORT PC ANNUAL SUPPORT DEVON PREPARATORY SCHOOL - ST. JOSEPH NONE PC ANNUAL SUPPORT PC ANNUAL SUPPORT ARCHDIOCESE OF MILWAUKEE NONE PC ANNUAL SUPPORT BO ARCHDIOCESE OF MILWAUKEE NONE PC ANNUAL SUPPORT ANNUAL SUPPORT BO ARCHDIOCESE OF MILWAUKEE NONE PC ANNUAL SUPPORT BO ARCHDIOCESE OF MILWAUKEE NONE PC ANNUAL SUPPORT 36, THE ALFRED E. SMITH FOUNDATION NONE PC ANNUAL SUPPORT 25. SETON CATHOLIC SCHOOLS NONE PC ANNUAL SUPPORT	Name and address (home or business)	any foundation manager	status of		Amount
1927 NORTH 4TH STREET MILWAUKEE, WI 53212 MILWAUKEE, WI 53212 MILWAUKEE FUBLIC LIBRARY FOUNDATION NONE PC ANNUAL SUPPORT 914 W. WISCONSIN AVE MILWAUKEE, WI 53233 25, GREENSBURG CENTRAL CATHOLIC SCHOOL NONE PC ANNUAL SUPPORT 901 ARMORY DRIVE GREENSBURG, PA 15601 5, DEVON PREPARATORY SCHOOL - ST. JOSEPH NONE PC ANNUAL SUPPORT PC ANNUAL SUPPORT 80, ARCHDIOCESE OF MILWAUKEE NONE ARCHDIOCESE OF MILWAUKEE NONE PC ANNUAL SUPPORT 80, ARCHDIOCESE OF MILWAUKEE, WI 53207-0912 THE ALFRED E. SMITH FOUNDATION NONE PC ANNUAL SUPPORT 1011 FIRST AVENUE, 14TH FL NEW YORK, NY 10022 SETON CATHOLIC SCHOOLS NONE PC ANNUAL SUPPORT	ST. FRANCIS OF ASSISI PARISH	NONE	SO III PI	ANNUAL SUPPORT	
MILWAUKEE PUBLIC LIBRARY FOUNDATION 1014 W. WISCONSIN AVE MILWAUKEE, WI 53233 25, 27, 28, 28, 28, 28, 29, 21, 21, 22, 23, 24, 25, 26, 27, 28, 28, 28, 28, 29, 20, 20, 20, 21, 22, 23, 24, 25, 26, 27, 28, 28, 29, 20, 20, 20, 20, 20, 20, 20			[
MILWAUREE, WI 53233 25, GREENSBURG CENTRAL CATHOLIC SCHOOL 901 ARMORY DRIVE GREENSBURG, PA 15601 5, DEVON PREPARATORY SCHOOL - ST. JOSEPH NONE PC ANNUAL SUPPORT THE WORKER 363 N. VALLEY FORGE RD. DEVON, PA 19333-1299 80, ARCHDIOCESE OF MILWAUKEE 3501 SOUTH LAKE DRIVE, P.O. BOX 070912 MILWAUKEE, WI 53207-0912 THE ALFRED E. SMITH FOUNDATION NONE PC ANNUAL SUPPORT 36, THE ALFRED E. SMITH FOUNDATION NONE PC ANNUAL SUPPORT 25, SETON CATHOLIC SCHOOLS NONE PC ANNUAL SUPPORT 25, SETON CATHOLIC SCHOOLS NONE PC ANNUAL SUPPORT	MILWAUKEE, WI 53212	 	 	 	2,50
MILWAUKEE, WI 53233 25, GREENSBURG CENTRAL CATHOLIC SCHOOL 901 ARMORY DRIVE GREENSBURG, PA 15601 5, DEVON PREPARATORY SCHOOL - ST. JOSEPH NONE PC ANNUAL SUPPORT THE WORKER 363 N. VALLEY FORGE RD. DEVON, PA 19333-1299 80, ARCHDIOCESE OF MILWAUKEE NONE PC ANNUAL SUPPORT 3501 SOUTH LAKE DRIVE., P.O. BOX 070912 MILWAUKEE, WI 53207-0912 THE ALFRED E. SMITH FOUNDATION NONE PC ANNUAL SUPPORT 1011 FIRST AVENUE, 14TH FL NEW YORK, NY 10022 25, SEETON CATHOLIC SCHOOLS NONE PC ANNUAL SUPPORT	MILWAUKEE PUBLIC LIBRARY FOUNDATION	NONE	PC	ANNUAL SUPPORT	
SPEENSBURG, PA 15601 DEVON PREPARATORY SCHOOL - ST. JOSEPH NONE PC ANNUAL SUPPORT BOUNDARY PROBLEM AND AND A 19333-1299 BOUNDARY PROBLEM BOUNDARY PROB					25,00
SPEENSBURG, PA 15601 DEVON PREPARATORY SCHOOL - ST. JOSEPH NONE PC ANNUAL SUPPORT BE WORKER ARCHDIOCESE OF MILWAUKEE BESON SOUTH LAKE DRIVE, P.O. BOX DOYON PREPARATORY SCHOOL - ST. JOSEPH NONE PC ANNUAL SUPPORT BESON SOUTH LAKE DRIVE, P.O. BOX DOYON PREPARATORY SCHOOL - ST. JOSEPH NONE PC ANNUAL SUPPORT BESON SOUTH LAKE DRIVE, P.O. BOX DOYON PREPARATORY SCHOOL - ST. JOSEPH NONE PC ANNUAL SUPPORT BESTON CATHOLIC SCHOOLS NONE PC ANNUAL SUPPORT 25, SETON CATHOLIC SCHOOLS NONE PC ANNUAL SUPPORT					
DEVON PREPARATORY SCHOOL - ST. JOSEPH NONE PC ANNUAL SUPPORT THE WORKER 363 N. VALLEY FORGE RD. DEVON, PA 19333-1299 80, ARCHDIOCESE OF MILWAUKEE NONE PC ANNUAL SUPPORT 3501 SOUTH LAKE DRIVE., P.O. BOX 070912 MILWAUKEE, WI 53207-0912 36, THE ALFRED E. SMITH FOUNDATION NONE PC ANNUAL SUPPORT 1011 FIRST AVENUE, 14TH FL NEW YORK, NY 10022 PC ANNUAL SUPPORT SETON CATHOLIC SCHOOLS NONE PC ANNUAL SUPPORT SETON CATHOLIC SCHOOLS NONE PC ANNUAL SUPPORT	GREENSBURG CENTRAL CATHOLIC SCHOOL 901 ARMORY DRIVE	NONE	PC	ANNUAL SUPPORT	
THE WORKER 363 N. VALLEY FORGE RD. DEVON, PA 19333-1299 80, ARCHDIOCESE OF MILWAUKEE 3501 SOUTH LAKE DRIVE, P.O. BOX 070912 MILWAUKEE, WI 53207-0912 36, THE ALFRED E. SMITH FOUNDATION 1011 FIRST AVENUE, 14TH FL NEW YORK, NY 10022 SETON CATHOLIC SCHOOLS 3501 SOUTH LAKE DRIVE	GREENSBURG, PA 15601				5,000
ARCHDIOCESE OF MILWAUKEE 3501 SOUTH LARE DRIVE., P.O. BOX 070912 MILWAUKEE, WI 53207-0912 36 THE ALFRED E. SMITH FOUNDATION 1011 FIRST AVENUE, 14TH FL NEW YORK, NY 10022 SETON CATHOLIC SCHOOLS NONE PC ANNUAL SUPPORT 25 SETON CATHOLIC SCHOOLS NONE PC ANNUAL SUPPORT	DEVON PREPARATORY SCHOOL - ST. JOSEPH THE WORKER	NONE	PC	ANNUAL SUPPORT	
3501 SOUTH LAKE DRIVE, P.O. BOX 070912 MILWAUKEE, WI 53207-0912 THE ALFRED E. SMITH FOUNDATION NONE PC ANNUAL SUPPORT 1011 FIRST AVENUE, 14TH FL NEW YORK, NY 10022 SETON CATHOLIC SCHOOLS NONE PC ANNUAL SUPPORT 3501 SOUTH LAKE DRIVE			ļ		80,000
3501 SOUTH LAKE DRIVE, P.O. BOX 070912 MILWAUKEE, WI 53207-0912 THE ALFRED E. SMITH FOUNDATION NONE PC ANNUAL SUPPORT 1011 FIRST AVENUE, 14TH FL NEW YORK, NY 10022 SETON CATHOLIC SCHOOLS NONE PC ANNUAL SUPPORT 3501 SOUTH LAKE DRIVE	NACURA CONTRACTOR AND MALAYANTED	1017	DG	ANDWIN GUDDODE	
1011 FIRST AVENUE, 14TH FL NEW YORK, NY 10022 SETON CATHOLIC SCHOOLS NONE PC ANNUAL SUPPORT 3501 SOUTH LAKE DRIVE	3501 SOUTH LAKE DRIVE., P.O. BOX	NONE	PC	ANNUAL SUPPORT	36,000
1011 FIRST AVENUE, 14TH FL NEW YORK, NY 10022 SETON CATHOLIC SCHOOLS NONE PC ANNUAL SUPPORT 3501 SOUTH LAKE DRIVE					
NEW YORK, NY 10022 25, SETON CATHOLIC SCHOOLS NONE PC ANNUAL SUPPORT 3501 SOUTH LAKE DRIVE		NONE	PC	ANNUAL SUPPORT	
3501 SOUTH LAKE DRIVE		 	ļ		25,000
3501 SOUTH LAKE DRIVE	COMON CAMUOLITA COMONIA	YOUR	B C	ANNUAL CUIDDODE	
MILWAUKEE, WI 53207-0912 25,	3501 SOUTH LAKE DRIVE	NONE		ANNUAL SUFFURI	
	MILWAUREE, WI 53207-0912			 	25,000
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			-		
Total from continuation sheets		<u> </u>		<u> L</u>	198,500

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FORM 990-PF	DIVIDENDS	S AND INTER	EST FROM SE	CURITIES	ITIES STATEMENT 1		
GROSS OURCE AMOUNT		CAPITAL GAINS DIVIDEND	REVENU	(B) E NET INVEST KS MENT INCOM			
JP MORGAN SECURITIES	1,515.	. 39	2. 1,1	23. 1,123	3.		
TO PART I, LINE 4	1,515.	39	2. 1,1	23. 1,123	3.		
FORM 990-PF		ACCOUNTI	NG FEES		STATEMENT 2		
DESCRIPTION				(C) - ADJUSTED E NET INCOME			
ACCOUNTING		2,925.	1,46	2.	1,463.		
TO FORM 990-PF, PG 1	, LN 16B	2,925. 1,462.		2.	1,463.		
FORM 990-PF		TAX	ES		STATEMENT 3		
DESCRIPTION		(A) EXPENSES PER BOOKS	NET INVEST	(C) - ADJUSTED E NET INCOME	CHARITABLE		
INVESTMENT INCOME TAXES		5,000.		0.	0.		
TO FORM 990-PF, PG 1, LN 18 =		5,000.		0.	0.		
FORM 990-PF		OTHER E	XPENSES		STATEMENT 4		
DESCRIPTION		(A) EXPENSES PER BOOKS	(B) NET INVEST MENT INCOM		(D) CHARITABLE PURPOSES		
LIFE INSURANCE PREMI		100,000.		0.	0.		
TO FORM 990-PF, PG 1	, LN 23	100,000.		0.	0.		

FORM 990-PF	CORP	ORATE STOCK		STATEMENT 5
DESCRIPTION			BOOK VALUE	FAIR MARKET VALUE
T-ROWE PRICE EQUITY INDEX FUND T-ROWE PRICE SMALL CAP STOCK			0. 20,828.	0. 31,498.
TOTAL TO FORM 990-PF, PART II,	LINE	10B	20,828.	31,498.
FORM 990-PF	OTHER	INVESTMENTS		STATEMENT 6
DESCRIPTION		VALUATION METHOD	BOOK VALUE	FAIR MARKET VALUE
LIFE INSURANCE POLICY		FMV	0.	947,613.
TOTAL TO FORM 990-PF, PART II,	LINE	13	0.	947,613.

FORM 990-PF

GRANT APPLICATION SUBMISSION INFORMATION PART XV, LINES 2A THROUGH 2D

STATEMENT 7

NAME AND ADDRESS OF PERSON TO WHOM APPLICATIONS SHOULD BE SUBMITTED

EDWARD P. MOONEY, JR. 7038 NORTH BEACH DRIVE FOX POINT, WI 53217

TELEPHONE NUMBER

(414) 228-5124

FORM AND CONTENT OF APPLICATIONS

APPLICATIONS SHOULD BE TYPED AND INCLUDE NAME, ADDRESS, AND PHONE NUMBER OF INDIVIDUAL SUBMITTING THE GRANT REQUEST.

ANY SUBMISSION DEADLINES

NONE

RESTRICTIONS AND LIMITATIONS ON AWARDS

NO DISTRIBUTIONS SHALL BE MADE TO ORGANIZATIONS WITH BELIEFS IN CONFLICT WITH THE HOLY ROMAN CATHOLIC CHURCH. SPECIFICALLY, AND WITHOUT LIMITATION, NO GRANTS SHALL BE MADE TO ORGANIZATIONS THAT SUPPORT ABORTION, EUTHANASIA, OR CAPITAL PUNISHMENT.