Return of Private Foundation

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

OMB No 1545-0052

Department of the Treasury Internal Revenue Service

▶ 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.

Open to Public Inspection

		dar year 2016 or tax year beginning	,	2016, and			, 20
Na	me of fo	undation Tour-			A Employe	r identification numb	er
	Sd	noen Family Charitable Irust	<u></u>		200	771 -46	23
Number and street (or P O. box number if mail is not delivered to street address) Room/suite B Telephone number (see instructions)							es '-
	<u>35</u>	52 Detalb Lane			920	284-74	8 d
Cit	y or towi	n, state or province, country, and ZIP or foreign postal code			C If exempt	ion application is pend	ding, check here▶
	Nee	oah, WI 54956					
G	Check	all that apply: Initial return Initial return Initial return	n of a former pu	ublic charity	D 1. Foreigi	n organizations, check	here ▶
		☐ Final return ☐ Amended			2 Foreigi	n organizations meetin	in the 85% test
		Address change Name cha	nge		check	here and attach comp	utation ▶ 🗌
		type of organization: 🛛 Section 501(c)(3) exempt p				foundation status was 07(b)(1)(A), check here	
		on 4947(a)(1) nonexempt charitable trust 🔲 Other tax			300000110	or (b)(1)(r), one on the re	, , , _, ,
		narket value of all assets at \mathbf{J} Accounting method	l: 🔯 Cash 🗆	Accrual	F If the four	ndation is in a 60-mon	th termination
		f year (from Part II, col. (c), Other (specify)			under se	ction 507(b)(1)(B), chec	ck here ▶ 🗌
_	line 16	and the second s	on cash basis.)				,
P	art I		(a) Revenue ar		investment	(a) Adjusted net	(d) Disbursements for charitable
		amounts in columns (b), (c), and (d) may not necessarily equal	expenses pe books		ncome	(c) Adjusted net income	purposes
		the amounts in column (a) (see instructions).)					(cash basis only)
	1	Contributions, gifts, grants, etc., received (attach schedule)	37,811				
	2	Check ► ☐ If the foundation is not required to attach Sch B				. 11 2	
	3	Interest on savings and temporary cash investments			2 - 2	NIA	
	4	Dividends and interest from securities	41,238	41,	9 88 _		
	5a	Gross rents					
_	Ь	Net rental income or (loss)	3 15 67				
ğ	6a	Net gain or (loss) from sale of assets not on line 10	3,129		··		
Revenue	b	Gross sales price for all assets on line 6a	 	- 	130		
ě	7 8	Capital gain net income (from Part IV, line 2)			199	NΙΔ	<u> </u>
_	9	Income modifications			······································	- γ ₁ μ	
	10a	Gross sales less returns and allowances				<u>_</u>	1
	Ь	Less: Cost of goods sold					
	c	Gross profit or (loss) (attach schedule)			······································	NIA	
	11	Other income (attach schedule)				, NIA	
	12	Total. Add lines 1 through 11	89,168	40	,357		
	13	Compensation of officers, directors, trustees, etc.	34,100	1,4	1001		
Expenses	14	Other employee salaries and wages			_		TOPM MED
ë	15	Pension plans, employee benefits				R	ECEIVED
χ	16a	Legal fees (attach schedule)					
	b	Accounting fees (attach schedule)					MAR 0 6 2017
Ě	С	Other professional fees (attach schedule)	750	75	30	igi	
tra	17	Interest				<u> </u>	
Jis	18	Taxes (attach schedule) (see instructions)	848	81	18		12 6
, <u>'</u>	19	Depreciation (attach schedule) and depletion					<u> </u>
a	20	Occupancy					
ַ קַ	21	Travel, conferences, and meetings					
a	22	Printing and publications	1221				
ng I	23	Other expenses (attach schedule)	1914	119	74		
ati	24	Total operating and administrative expenses. Add lines 13 through 23	2 0 7)	0.0	ברו		
Operating and Administrative	م ا		2,872		772	1	
Ö	25 26	Contributions, gifts, grants paid	76,916) 1.1	1157	Atf A	76.616
	27	Total expenses and disbursements. Add lines 24 and 25 Subtract line 26 from line 12:	79, 788	1711	485	NA	16,616
	a a		9,389				
	b	Net investment income (if negative, enter -0-) .	913 80	41,1	JOE		
	I.	Adjusted net income (if negative, enter -0-)		- · ///·	102	NIA	1
For		work Reduction Act Notice, see instructions.	- C	at. No. 11289)	(F	form 990-PF (2016)

1 Cash—non-interest-bearing 2 Savings and temporary cash investments 3 Accounts receivable ► Less: allowance for doubtful accounts ► 4 Piedages receivable ← 1 East; allowance for doubtful accounts ► 5 Grants receivable 6 Roceivables due from officers, directors, trustees, and other disqualified persons (attach schedule) ← 1 Less: allowance for doubtful accounts ► 5 Grants receivable 6 Roceivables due from officers, directors, trustees, and other disqualified persons (attach schedule) ← 1 Less: allowance for doubtful accounts ► 7 Other notes and loans receivable (attach schedule) ← 1 Less: allowance for doubtful accounts ► 8 Inventments—U.S. and state government obligations (attach schedule) 1 Investments—Corporate stock (attach schedule) 2 Investments—Corporate stock (attach schedule) 3 Investments—Corporate stock (attach schedule) 4 Investments—Corporate stock (attach schedule) 5 Other assets (describe F Total assets (to be completed by all filers—see the instructions, Aleo, see page 1, 1-mm 1) 3 Investments—Corporate stock, rust see, and other disqualified persons 4 Grants payable 2 Investments—Corporate stock (attach schedule) 3 Investments—Corporate stock (attach schedule) 4 Investments—Corporate stock (attach schedule) 5 Other assets (describe F Total schedule) 6 Investments—Corporate stock (attach schedule) 7 Investments—Corporate stock (attach	D	rt II	Ralance Shoots Attached schedules and amounts in the description column	n Beginning of year		End o	of year
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14 Land, buildings, and equipment: basis ▶ Less: accumulated depreciation (attach schedule) ▶ 15 Other assets (to be completed by all filers—see the instructions. Also, see page 1, item l) 17 Accounts payable and accrued expenses 18 Grants payable 19 Deferred revenue 20 Loans from officers, directors, trustees, and other disqualified persons 21 Mortgages and other notes payable (attach schedule) 22 Other liabilities (clescribe ▶ 23 Total liabilities (clescribe ▶ 24 Unrestricted 25 Temporarily restricted 26 Permanently restricted 27 Foundations that follow SFAS 117, check here ▶ 28 Paid-in or capital surplus, or land, bldg., and equipment funds 29 Retained earnings, accumulated income, endowment, or other funds 30 Total net assets or fund balances (see instructions) 31 Total inet assets or fund balances (see instructions) 32 Total inabilities and net assets/fund balances 33 Other increases not included in line 27 (fternize) ▶ Divility Adjustion 2017 Fot 2016 33 Valor increases not included in line 2 (fternize) ▶ Divility Adjustion 2017 Fot 2016 3 Valor increases not included in line 2 (fternize) ▶ Divility Adjustion 2017 Fot 2016 3 Valor increases not included in line 2 (fternize) ▶ Divility Adjustion 2017 Fot 2016 4 828 x 559		12	Investments—mortgage loans		,		
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Less: accumulated deprecation (attach schedule) ► 15 Other assets (describe ► 16 Total assets (to be completed by all filers—see the instructions. Also, see page 1, item i)		14	Land, buildings, and equipment: basis ▶				
Total assets (to be completed by all filers—see the instructions. Also, see page 1, item 1)			Less: accumulated depreciation (attach schedule) ▶				
Total assets (to be completed by all filers—see the instructions. Also, see page 1, item I)		15	Other assets (describe ▶)				
17 Accounts payable and accrued expenses		16	Total assets (to be completed by all filers—see the				
18 Grants payable			instructions. Also, see page 1, item I)	834,800	838559	!	1,791,434
19 Deferred revenue . 20 Loans from officers, directors, trustees, and other disqualified persons . 21 Mortgages and other notes payable (attach schedule) . 22 Other liabilities (describe ▶		17					
Other liabilities (describe 23 Total liabilities (add lines 17 through 22)	တ္	18					
Other liabilities (describe 23 Total liabilities (add lines 17 through 22)	Ę;	19					
Other liabilities (describe 23 Total liabilities (add lines 17 through 22)	=	20	• •				
Other liabilities (describe 23 Total liabilities (add lines 17 through 22)	<u>.e</u>						
Foundations that follow SFAS 117, check here and complete lines 24 through 26 and lines 30 and 31. 4 Unrestricted	_						
and complete lines 24 through 26 and lines 30 and 31. 24		23					
Foundations that do not follow SFAS 117, check here Foundations that do not follow SFAS 117, check here and complete lines 27 through 31. Capital stock, trust principal, or current funds. Retained earnings, accumulated income, endowment, or other funds Total net assets or fund balances (see instructions). Total liabilities and net assets/fund balances (see instructions). Total net assets or fund balances (see instructions). Part III Analysis of Changes in Net Assets or Fund Balances Total net assets or fund balances at beginning of year—Part II, column (a), line 30 (must agree with end-of-year figure reported on prior year's return). Enter amount from Part I, line 27a. Other increases not included in line 2 (itemize) Divious Adjust in 2017 for 2016. Add lines 1, 2, and 3.	es		Foundations that follow SFAS 117, check here ▶ □ and complete lines 24 through 26 and lines 30 and 31.				
Foundations that do not follow SFAS 117, check here Foundations that do not follow SFAS 117, check here and complete lines 27 through 31. Capital stock, trust principal, or current funds. Retained earnings, accumulated income, endowment, or other funds Total net assets or fund balances (see instructions). Total liabilities and net assets/fund balances (see instructions). Total net assets or fund balances (see instructions). Part III Analysis of Changes in Net Assets or Fund Balances Total net assets or fund balances at beginning of year—Part II, column (a), line 30 (must agree with end-of-year figure reported on prior year's return). Enter amount from Part I, line 27a. Other increases not included in line 2 (itemize) Divious Adjust in 2017 for 2016. Add lines 1, 2, and 3.	ဥ	24					
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2 Enter amount from Part I, line 27a	1					_	671 88C
3 Other increases not included in line 2 (itemize) ► Div Dist Adjustin 2017 for 2016 3 1,373 4 Add lines 1, 2, and 3. 5 Decreases not included in line 2 (itemize) ►	^						
4 Add lines 1, 2, and 3	_	⊏nte	r amount from Part I, line 27a	13. 3317 6 34	$\cdot \cdot \cdot \cdot \mid$		41380
5. Decreases not included in line 2 (itemize)	_	Othe	increases not included in line 2 (itemize) ► Dio[Dist #4]	rindui/ toide	, i.b		030 - 00
5 Decreases not included in line 2 (itemize) F	_						898,554
6 Total net assets or fund balances at end of year (line 4 minus line 5)—Part II, column (b), line 30 6 22 . 5 50	9 9	Tota	reases not included in line 2 (itemize) > I net assets or fund balances at end of year (line 4 minus line 5)-	-Part II column (b) li	ne 30		030
6 Total net assets or fund balances at end of year (line 4 minus line 5)—Part II, column (b), line 30 6 28,559 Form 990-PF (2016)	<u> </u>	· Jta	associo di fanta balandoo at ond di year (inte 4 minus inte s)-	art ii, coluitiii (D), II			

a b	(a) List and describe the l					
	2-story brick warehouse	kind(s) of property sold (e.g., real esta , or common stock, 200 shs MLC Co		(b) How acquired P—Purchase D—Donation	(c) Date acquired (mo., day, yr.)	(d) Date sold (mo., day, yr.)
b	Capital Gain O	istributions		- Ρ		
	249 shures Hant	ic Trust Disc Equity	AWEIX	D	various	7/20/16
С	955 shares Ehwal	Div Eavity Fund	SWDSX	Ρ	Various	7/36/16
d						
e						
	(e) Gross sales price	(f) Depreciation allowed		or other basis		un or (loss)
	(e) Gross sales price	(or allowable)	plus exp	pense of sale	(e) plus	(f) minus (g)
 а	1.868				1,80	68 ⁻
b	4,006		2,8	23	1,12	33
C	14,100		14,0	42		7 8
d						
e						
	Complete only for assets show	ing gain in column (h) and owne	d by the foundation	on on 12/31/69	(I) Gains (Co	of (h) gain minus
	(i) F.M.V as of 12/31/69	(j) Adjusted basis as of 12/31/69		ess of col (i) ol (j), if any	col (k), but n	ot less than -0-) or (from col (h))
a						
b _						
C	""					
đ						
e						
	Capital gain net income or (n, also enter in F s), enter -0- in P		2 3	, 129
	Net show town conital gain		-,,		2	1
	If gain, also enter in Part I,	or (loss) as defined in section line 8, column (c) (see instr	uctions). If (los	s), enter -0- in (3	_
				•	•	
ob		r Section 4940(e) for Recate foundations subject to the this part blank.				
op ecti	otional use by domestic priva on 4940(d)(2) applies, leave the foundation liable for the si	ate foundations subject to the	e section 4940(a	a) tax on net inves of any year in the	stment income.)	☐ Yes 📉
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Part '		nstru	ıctio	ns)			
1a	Exempt operating foundations described in section 4940(d)(2), check here ▶ ☐ and enter "N/A" on line 1. Date of ruling or determination letter: (attach copy of letter if necessary—see instructions)						
b							
	here ▶ ☐ and enter 1% of Part I, line 27b						
С	All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of Part I, line 12, col. (b).						
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)						
3	Add lines 1 and 2	22	30	_			
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	•					
5	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0	8:	30	_			
6	Credits/Payments:						
а	2016 estimated tax payments and 2015 overpayment credited to 2016 6a 6a						
b	Exempt foreign organizations—tax withheld at source 6b						
С	Tax paid with application for extension of time to file (Form 8868) . 6c 6c						
d	Backup withholding erroneously withheld						
7	Total credits and payments. Add lines 6a through 6d						
8	Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached	Est					
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed ▶ 9	_&:	3 <u>0 </u>				
10 11	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid ▶ 10 Enter the amount of line 10 to be. Credited to 2017 estimated tax ▶ Refunded ▶ 11						
Part	110101000 > 11			<u> </u>			
1a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it		Vec	No			
	participate or intervene in any political campaign?	1a	103	X			
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see	_ia	-	1			
	Instructions for the definition)?	1b		8			
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials						
	published or distributed by the foundation in connection with the activities.						
C	Did the foundation file Form 1120-POL for this year?	1c		7			
d	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year:						
	(1) On the foundation. ▶ \$ (2) On foundation managers. ▶ \$						
е	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers. ▶ \$						
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?	2		X			
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of						
	incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes	3		ঠ			
4a	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?		MA	<u> </u>			
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?	5		X			
•	If "Yes," attach the statement required by General Instruction T.						
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either: • By language in the governing instrument, or						
	 By state legislation that effectively amends the governing instrument so that no mandatory directions that 						
	conflict with the state law remain in the governing instrument?	6	MA				
7	Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col. (c), and Part XV	7	X	 			
8a	Enter the states to which the foundation reports or with which it is registered (see instructions) ▶	•	_	-			
	(**************************************		,				
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	Y				
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or		~				
	4942(j)(5) for calendar year 2016 or the taxable year beginning in 2016 (see instructions for Part XIV)? If "Yes,"			<u> </u>			
	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				

Part	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 section 512(b)(13)? If "Yes," attach schedule (see instructions)	1	11		X
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disquali		•••		-^-
14	·				Y
			12		<u> </u>
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application	ion?	13	MA	
	Website address ▶				
14	The books are in care of ► 32ff Moot 2 Telephone no. ► 930	0-72	1-2	248)
	Located at ▶ 3550 DeKalb Lane Neenan, W7 ZIP+4 ▶ 54	1956		904	18
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 — Check here		 · ·		▶ □
	and enter the amount of tax-exempt interest received or accrued during the year	1			_
16	At any time during calendar year 2016, did the foundation have an interest in or a signature or other aut	hority		Yes	No
.5	over a bank, securities, or other financial account in a foreign country?	· · · · ·	16	. 55	×
	See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes," enter the nar		10		
	the foreign country	5"			
D					
Part	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.	<u> </u>		Yes	No
1a	During the year did the foundation (either directly or indirectly):				
		No			
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a		1		
	disqualified person?	∮No I			
		No			
		No	- 1		
	(5) Transfer any income or assets to a disqualified person (or make any of either available for	ا ۵۰۰	1		
		No			
		4			
	(6) Agree to pay money or property to a government official? (Exception. Check "No" if the		1		
	foundation agreed to make a grant to or to employ the official for a period after	.	l		
_		No	1	İ	
b	If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulat				
	section 53.4941(d)-3 or in a current notice regarding disaster assistance (see instructions)?	. [1b	N	4
	Organizations relying on a current notice regarding disaster assistance check here	·□ 「		1	
С	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts,	that	I	1	
	were not corrected before the first day of the tax year beginning in 2016?		1c		Y
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private of the control of		· 		
_	operating foundation defined in section 4942(j)(3) or 4942(j)(5)):				
2	At the end of tax year 2016, did the foundation have any undistributed income (lines 6d and		1		
a	Co. Dest VIII) for terror control to a fine in a buffer of 00100	, , ,	l		
		J No	I		
	If "Yes," list the years ▶ 20 , 20 , 20 , 20				
þ	Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(
	(relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2				
	all years listed, answer "No" and attach statement—see instructions.)	. [2b	Ν	<i>A</i>
C	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here.	Γ			
	▶ 20 , 20 , 20 , 20		l		
3a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise	İ	1	- 1	
	at any time divide the years	ĪΝο			
L		- !		ł	
b	If "Yes," did it have excess business holdings in 2016 as a result of (1) any purchase by the foundation	n or	1		1
	disqualified persons after May 26, 1969; (2) the lapse of the 5-year period (or longer period approved by	tne]		
	Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest; or (3) the laps		1	Ì	
	the 10-, 15-, or 20-year first phase holding period? (Use Schedule C, Form 4720, to determine if	·			
_	foundation had excess business holdings in 2016.)		3b	NI)	<u> </u>
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purpos	es?	4a		X
b	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize	e its			
	charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 20)16?	4b		X

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Part	VII-B	Statements Regarding Activities	for V	Vhich Form	4720	May Be R	equire	d (contii	nued)			
5a	During t	the year did the foundation pay or incur a	ny am	ount to:								
		y on propaganda, or otherwise attempt to						☐ Yes	ĮΧNο			
		ence the outcome of any specific public				-	-	_	_			
		ctly or indirectly, any voter registration dri						☐ Yes	⊠ No			
		ride a grant to an individual for travel, stu-							No			
		vide a grant to an organization other than ion 4945(d)(4)(A)? (see instructions)							Nor. .			
		vide for any purpose other than religious,						Yes	No			
		poses, or for the prevention of cruelty to c							Пжо			
b		nswer is "Yes" to 5a(1)-(5), did any of the							<u> </u>			
		ions section 53.4945 or in a current notice								5b	N	A
	Organiz	ations relying on a current notice regardir	ng disa	aster assistan	ce che	ck here .			ightharpoons			
С		nswer is "Yes" to question 5a(4), does the										
		e it maintained expenditure responsibility						☐ Yes	⊠No			
_		' attach the statement required by Regula										
6a		foundation, during the year, receive any resonal benefit contract?							₩			
b	•	foundation, during the year, pay premium						☐ Yes	No.	6b		
D		to 6b, file Form 8870.	is, uii t	ony or maire	ouy, OH	a personal	Pellelli	Contract		OD		
7a		me during the tax year, was the foundation a	a party	to a prohibited	tax sh	elter transac	tion?	☐ Yes	Жno			
b	If "Yes,	did the foundation receive any proceeds								7b	2	A
Part	VIII	Information About Officers, Direct	tors,	Trustees, Fo	ounda	tion Mana	agers,	Highly F	Paid Er	nploy	ees,	
	1 int all	and Contractors					. / :	441-				
	LIST all	officers, directors, trustees, foundation		le, and average		mpensation		Contribution				
		(a) Name and address	hou	irs per week ted to position	(lf ı	not paid, nter -0-)	emplo	yee benefit erred compe	plans	(e) Expe	nse acc allowan	
	Taha	Schoen 1225 Hiawatha		ste &			una con	on ou comp	or ibation (
		2) bugge, 7L 61025	154	ors week		0		Ø		7	Q	
		0 0										
		100000000000000000000000000000000000000										
		Moot 2 3552 Dekalblar	_	Trustee(1)	ngr	~		~		>	∇	
	<i>leen</i>	n, WI 54956	<u>-5 h</u>	rs week		_0		0			<u> </u>	
									-			
2	Compe	nsation of five highest-paid employee	s (oth	er than thos	se incl	uded on li	ne 1 —	see instr	uctions). If n	one,	enter
	"NONE			<u>, </u>					_			
			_	(b) Title, and a				(d) Contribi employee		(e) Exne	nse ac	count
	(a) Name a	nd address of each employee paid more than \$50,00	0	hours per vi devoted to po		(c) Comper	nsation	plans and	deferred		allowan	
								Compon	Sullon			
												
		CC DOVE							Ţ			
						 						
												
												
Total	Total number of other employees paid over \$50,000											
										orm 99	0-PF	(2016)

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Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Emand Contractors (continued)	ployees,
3 Five highest-paid independent contractors for professional services (see instructions). If none, enter "NON	E."
(a) Name and address of each person paid more than \$50,000 (b) Type of service	(c) Compensation
	
Cane	
Lone	
	·- ·
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.	Expenses
1	
2	
N-1-4	
3	
4	
Part IX-B Summary of Program-Related Investments (see instructions)	L
Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2	Amount
1	
2 NA	
<u> </u>	
All other program-related investments. See instructions	
3	
Total. Add lines 1 through 3	
	Form 990-PF (2016)

Part	Minimum Investment Return (All domestic foundations must complete this part. Forei	gn fo	undations,
	see instructions.)		
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc.,		
	purposes:		
а	Average monthly fair market value of securities	1a	1,613,942
b	Average of monthly cash balances	1b	39,730
C	Fair market value of all other assets (see instructions)	1c	
d	Total (add lines 1a, b, and c)	1d	1653.674
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	
3	Subtract line 2 from line 1d	3	1,653,674
4	Cash deemed held for charitable activities. Enter 11/2% of line 3 (for greater amount, see		
	instructions)	4	24,805
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	1,628,869
6	Minimum investment return. Enter 5% of line 5	6	21,443
Part	Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating for	ound	ations
	and certain foreign organizations check here ▶ ☐ and do not complete this part.)		
1	Minimum investment return from Part X, line 6	1	81,443
2a	Tax on investment income for 2016 from Part VI, line 5		5,,,
b	Income tax for 2016. (This does not include the tax from Part VI.) 2b 313	1	
c	Add lines 2a and 2b	2c	U143
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	80,300
4	Recoveries of amounts treated as qualifying distributions	4	- 001300
5	Add lines 3 and 4	5	80,300
6	Deduction from distributable amount (see instructions)	6	-
7	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII,		
	line 1	7	80/3 09
			<u> </u>
Part	Qualifying Distributions (see instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes	T	
а	Expenses, contributions, gifts, etc.—total from Part I, column (d), line 26	1a	76,916
b	Program-related investments—total from Part IX-B	1b	107 (1-
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:	- -	
а	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	76,916
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income.	-	101 (10
-	Enter 1% of Part I, line 27b (see instructions)	5	830
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	76,086
•	Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating		
	qualifies for the section 4940(e) reduction of tax in those years.	A MILE	oner the foundation

Part	Undistributed Income (see instruction	ons)			
1	Distributable amount for 2016 from Part XI,	(a) Corpus	(b) Years prior to 2015	(c) 2015	(d) 2016
	line 7		ļ		80,300
2	Undistributed income, if any, as of the end of 2016:				
а	Enter amount for 2015 only			<u> </u>	
b	Total for prior years: 20,20,20				
3	Excess distributions carryover, if any, to 2016.				
а	From 2011				
b	From 2012		1		
С	From 2013				
d	From 2014				
e	From 2015				
f	Total of lines 3a through e		-		
4	Qualifying distributions for 2016 from Part XII,				
•	line 4: ► \$ 76,916				
_	Applied to 2015, but not more than line 2a.		-	380	-
a	Applied to 2015, but not more than line 2a. Applied to undistributed income of prior years			500	
b	(Election required—see instructions)				ļ
_			+		
С	Treated as distributions out of corpus (Election	Ó			
_	required—see instructions)			··	7. ~
d	Applied to 2016 distributable amount				76,596
е	Remaining amount distributed out of corpus	<u>Q</u>			<u> </u>
5	Excess distributions carryover applied to 2016	0			0
	(If an amount appears in column (d), the same amount must be shown in column (a).)				
6	Enter the net total of each column as indicated below:	,			
а	Corpus. Add lines 3f, 4c, and 4e. Subtract line 5				
b	Prior years' undistributed income. Subtract				
	line 4b from line 2b				
С	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	···-	+ ~ +	······································	<u> </u>
•	amount—see instructions		1 0 1		
_	Undistributed income for 2015. Subtract line		 		<u> </u>
е	4a from line 2a. Taxable amount—see				
	instructions			\bigcirc	
					<u> </u>
f	Undistributed income for 2016. Subtract lines				
	4d and 5 from line 1. This amount must be distributed in 2017				2 7011
_				· · · · · · · · · · · · · · · · · · ·	3,704
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)			 	
8	Excess distributions carryover from 2011 not				
_	applied on line 5 or line 7 (see instructions).	Ó			<u> </u>
9	Excess distributions carryover to 2017.	l			
	Subtract lines 7 and 8 from line 6a				<u> </u>
10	Analysis of line 9:				
а	Excess from 2012				-
b	Excess from 2013				
С	Excess from 2014]			
d	Excess from 2015				
e	Excess from 2016]			

Part	XIV Private Operating Founda	tions (see instru	ctions and Part	VII-A, question 9	9)	
1a	If the foundation has received a ruling					
	foundation, and the ruling is effective for	r 2016, enter the da	ate of the ruling .	🕨		
b	Check box to indicate whether the four	ndation is a private	e operating foundat	tion described in se	ection 4942(j)	(3) or 4942(j)(5)
2a	Enter the lesser of the adjusted net	Tax year	1	Prior 3 years		
	income from Part I or the minimum investment return from Part X for	(a) 2016	(b) 2015	(c) 2014	(d) 2013	- (e) Total
	each year listed	MA	MIA			
b	85% of line 2a	, 1/-1	NIA	NA	<u> </u>	
С	line 4 for each year listed			11_		
d	Amounts included in line 2c not used directly for active conduct of exempt activities					
е	Qualifying distributions made directly for active conduct of exempt activities. Subtract line 2d from line 2c					
3	Complete 3a, b, or c for the alternative test relied upon:					
а	"Assets" alternative test—enter:					
	(1) Value of all assets	1				
	(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					
С	"Support" alternative test—enter:		1			
	(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 an exempt organization			/	X	
	(4) Gross investment income		-	/	,	
Part		n (Complete th	is part only if the	ne foundation h	ad \$5.000 or m	ore in assets at
	any time during the year-				,	
1	Information Regarding Foundation I				 	
а	List any managers of the foundation v	who have contribu	uted more than 2%	6 of the total cont	ributions received	by the foundation
	before the close of any tax year (but o	nly if they have co	ontributed more th	an \$5,000). (See s	section 507(d)(2).)	•
b	List any managers of the foundation	who own 10% o	r more of the stor	k of a corporatio	n for an equally la	argo portion of the
-	ownership of a partnership or other en	ntity) of which the	foundation has a	n or a corporation 10% or greater int	n (or an equally la erest	age portion of the
	nane			or grouter lift	J. JUL.	
2	Information Regarding Contribution	Grant Gift Los	n Scholarship e	to Programe:		
_	Check here ► ☐ if the foundation				organizations and	d door not generat
	unsolicited requests for funds. If the fo	oundation makes	aifts grants etc	(see instructions)	to individuals or o	rganizations under
	other conditions, complete items 2a, b	o, c, and d.	J, J	(,	to manuada or o	-gamzanono unger
а	The name, address, and telephone nu		Idress of the ners	on to whom applic	ations should be	addressed:
_		moor or o man ac	idioss of the perso	on to whom applic	ations should be a	addressed.
	Lauren Monta 359	52 Del6.11	h 1 000	1/222-1	W7 51	1956
b	Laura Mootz 359 The form in which applications should	be submitted and	d information and	materials they sho	vild include:	1-13-0
	Total in which applications should	Se submitted diff	a anomation and	materials triey SNC	ola molade:	
	encillan commet had	43		C . O.Co -/	£ (15
	Written reguest, inclu Any submission deadlines:	wing nam	ne + adases	> ituipase	oriexpest,	tax exemptfun
С	Ally Subillission deadilles.	J		•	U	
	Any restrictions or limitations on aw	rarde euch co hi	v goographical ==	ogo obomtoble f	oldo lunda -f	Abbutana11:
u	factors:	arus, such as D	y geograpnicai ar	eas, charitable fi	eias, kinds of ins	ititutions, or other
	nunein 2016					

3	Grants and Contributions Paid During t	ne Tear or Approve	ea for Ful	ure Payment	
	Recipient	If recipient is an individual, show any relationship to	Foundation status of	Purpose of grant or	Amount
	Name and address (home or business)	any foundation manager or substantial contributor	recipient	contribution	Anount
а	Paid during the year				
					1.
					
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	see atachnet				
	Securer				,
	Lachr.				
	al P				
			'		
			,		Į
	Total				0-
b	Approved for future payment	<u> </u>	· · ·	<u> ▶</u>	_3a
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					1
	Total	<u></u>	<u> </u>		3b
					Form 990-PF (20

Form **990-PF** (2016)

Ра	Analysis of Income-Producing Ac	tivities				
Ente	r gross amounts unless otherwise indicated.	(a)	siness income (b)	(c)	on 512, 513, or 514 (d)	(e) Related or exempt function income
1	Program service revenue:	Business code	Amount	Exclusion code	Amount	(See instructions.)
	a					<u> </u>
	b	\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \				
	c	NIH				_
	d					
	e					
	f					
	g Fees and contracts from government agencies					
2	Membership dues and assessments					
3	Interest on savings and temporary cash investments					
4	Dividends and interest from securities					
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				$\overline{}$	
7	Other investment income					
8	Gain or (loss) from sales of assets other than inventory					
9	Net income or (loss) from special events					\setminus
	Gross profit or (loss) from sales of inventory					
11	Other revenue: a					
	b					-
	<u> </u>					/- - -
	d					l <i> </i>
						
12	Subtotal. Add columns (b), (d), and (e)	1 4				<u> </u>
13 S-2	worksheet in line 13 instructions to verify calculation				13	
	t XVI-B Relationship of Activities to the A		ant of Evame	t Durmage		
					A	
	e No. Explain below how each activity for which accomplishment of the foundation's exempt pur	poses (other that	ntea in column n by providing fui	e) of Part XVI nds for such purp	-A contributed i oses). (See instru	mportantly to the ctions.)
						
						
	0 10					
	. 1010		· · · · · · · · · · · · · · · · · · ·			
	- Po					
				· <u></u>		

Part	XVII		n Regarding Trai	nsfers To and T	ransactio	ns and	Relationships V	Vith Noncha	ritabl	е	
		<u>-</u>	ganizations						, · ·		-
1			directly or indirectly						1.	Yes	
			e Code (other than	section 501(c)(3)	organization	ns) or in s	ection 527, relatir	ig to political	宝海	2 11 12 12	ign.
_	_	nizations?	د د ماهمان میران می است	- a aanab!!-!-			at.		が	المنات المنات	\[\]
а			porting foundation t	o a noncharitable	exempt org	anization	OT:		4 - (4)	الأشسا	
	. ,	Cash							1a(1)		X
		Other assets .							1a(2)	1 20%	<u>X</u>
b		r transactions:	a nanaharitahla ay	mnt organization					1b(1)	2000	لسخجة
			a noncharitable exe ets from a noncharit						1b(1)	_	Ì
			, equipment, or other						1b(3)	_	x
			rrangements						1b(4)		x
		oans or loan gua	-						1b(5)	_	-
		_	ervices or members						1b(6)	_	\$-
С			quipment, mailing li	-					1c		Ź
ď		_	of the above is "Ye			-				fair m	arket
_			ther assets, or serv								
			on or sharing arrang								
(a) Lin	e no.	(b) Amount involved	(c) Name of none	haritable exempt organ	nization	(d) Desc	ription of transfers, tra	nsactions, and sha	aring arr	angem	ents
											-
					· · · · · · · · · · · · · · · · · · ·						
		- NIH									
<u> </u>	_/										
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		_ 				ļ					_
2a	lo th	o foundation dire	ectly or indirectly at	filiated with or re	plated to a	no or mo	ro toy evempt or	assizations	_		
20			501(c) of the Code (_	∃ Yes		Nio
b			e following schedule		. 00 1 (0)(0), (, III 000ti	0.11027			• 🗀	IVO
		(a) Name of organ	_		of organization		(c) De	scription of relatio	nship		
		(4) 11		(4) (5)	garneanon		(4)	domphor of rolatio	1101110		
											
	_										
				 							
									_		
			declare that I have examin						dge and	belief, i	t is true
Sign		and complete Decl	aration of preparer (other th	nan taxpayer) is based or	n all information	of which pre	parer has any knowledge	May the I	RS disci	iss this	return
Here	1.47	MULLA I	N.M.	12/26	ゴハ) 「	T ML	ALPR	with the	oreparer	shown	below
		nature of officer or trus	stee (Date	Title	1		(see instru	ctions)?	∐Yes	∐No
Paid		Print/Type preparer	's name	Preparer's signatur	e		Date	Check If	PTIN		
				-				self-employed			
Prep Use		Firm's name ▶					Firm	s EIN ▶			
Jac	∵ iiiy	Firm's address ▶					Phor		_		

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.

2016

OMB No. 1545-0047

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

Name of the organization Employer identification number Organization type (check one): 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 501(c)(3) exempt private foundation 4947(a)(1) nonexempt charitable trust treated as a private foundation ☐ 501(c)(3) taxable private foundation Check if your organization is covered by the General Rule or a Special Rule. Note: Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions. **General Rule** For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions. **Special Rules** For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 331/3 % support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of (1) \$5,000 or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1. Complete Parts I and II. For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I, II, and III. For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions exclusively for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., purpose. Don't complete any of the parts unless the General Rule applies to this organization because it received nonexclusively religious, charitable, etc., contributions Caution: An organization that isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990, 990-EZ, or 990-PF), but it must answer "No" on Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on its

Form 990-PF, Part I, line 2, to certify that it doesn't meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

Name of (Exmen Family Charitable Trust	-	Employer identification number 20677 1963
Part I	Contributors (See instructions). Use duplicate copies o		e is needed.
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	John Schoen 1225 Hia watha East Dubugue, FL 61025-1025	\$ 18,500	Person
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
2	Laura Mootz 3552 Dekalb Lane Neenah WI 54956	\$ 2,000	Person
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
<u>3</u>	Suc Coblentz 27 W 153 West St. Naperville, IL 60565	\$ 1,000	Person
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
4	Pete Schoen 1952 Wedgewood Dr. Asbury, IA 52002	\$ 500	Person
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
5	Scott Vogg 390 Amy Ct. Glen Ellyn III 60137	\$ 500	Person
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
6	Dan Schoen 3065 castle woods Lane Outbugue, IA 52001	\$	Person Payroll Noncash (Complete Part II for noncash contributions.)

Name of c	organization	164	Employer identification number 206 771 963
	Schoen Franky Charitable Tr. Noncash Property (See instructions). Use duplicate copies		
Part II	Noncash Property (See Instructions). Ose duplicate copies	r Part II II additional	space is fleeded.
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
1	250 shares I Shares IR SCAP FIF (IJR) Demorbasis 411,528	\$ 34,578	12/28/16
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
	123 shares Atlantic Trust Equity (AWEIX) Dunarbasis # 1,213	\$ 2,004	6/2/16
(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
		\$	

J. J. J. J.	m 990, 990-EZ, or 990-PF) (2016)		Page Employer identification number
	Schoen Family C	haritable Trust	$\frac{\partial \mathcal{C}}{\partial \mathcal{C}} = 77 - 196$
A	Exclusively religious, charitable, et (10) that total more than \$1,000 for the following line entry. For organizar contributions of \$1,000 or less for the contributio	tc., contributions to organization the year from any one contributions completing Part III, enter the ne year. (Enter this information on	ns described in section 501(c)(7), (8), or utor. Complete columns (a) through (e) and e total of exclusively religious, charitable, etc ce. See instructions.)
No.	Use duplicate copies of Part III if add	litional space is needed.	
rom art I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
		(e) Transfer of gift	
	Transferee's name, address, a	nd ZIP + 4 Re	elationship of transferor to transferee
No.	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
art I			
		(e) Transfer of gift	
	Transferee's name, address, a	nd ZIP + 4 Re	elationship of transferor to transferee
No.	G. D	(2) 11-2 - 6 - 1/4	
om	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
No. om art I	(b) Purpose of gift	(c) Use of gift (e) Transfer of gift	(d) Description of how gift is held
om	(b) Purpose of gift Transferee's name, address, an	(e) Transfer of gift	(d) Description of how gift is held
om art I		(e) Transfer of gift	
om	Transferee's name, address, a	(e) Transfer of gift	elationship of transferor to transferee

Schedule of Operating and Administrative Expenses Part 1

Line 16A		Le	Legal Fees			
	# *		<u>Date</u>	Vendor	Amount	Comments
Line 16C	·	ð	Other Professional Fees			
	# W	307	<u>Vendor</u> 2/10/16 Exponenent Philantrophy	<u>Vendor</u> Philantrophy	Amount \$ 750.00 Men	<u>Comments</u> Membership Fee
Line 18		Ta	Taxes			
	OK#		<u>Date</u> Ver N/A Foreign Tax Paid	<u>Vendor</u> Paid	Amount \$ 319.28 On 1	On 1099 Form for Schoen Charitable Trust
		310	3/9/16 United States Treasury	s Treasury	\$ 534.00 205	205 Taxes
Line 23	CK #	Ö	Other Expenses <u>Date</u>	Vendor	Amount	Comments
			3/7/16 US Post Offic 3/15/16 Office Max	ę	76.94 243.52	Postage Office Supplies
		312 Debit 349 350	3/15/16 Verizon 11/2/16 Win Host 11/25/16 Minuteman Press 11/23/16 Verizon Total	ress	405.36 79.35 63.00 405.36 1.273.53	Phone Office Supplies Business Cards Phone

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Part 2 Schedule of Investments (1 of 2)	• • • • • • • • • • • • • • • • • • • •
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Schedule o	
Part 2	

Fart 2 Scriedule of Line 10a	Fart & Schedule Of Investments (1 Of ∡) Line 10a U.S. and State Government Obligations	none	
Line 10b	Investments Corporate Stock		
		12/31/16	
		Cost	12/31/16
Symbol	Investment	Basis	Market Value
MO	Altria Group Inc	\$54,633	\$210,039
KFT	Kraft Foods Inc	\$3,679	\$36,762
MDLZ	Mondelez Inti	\$8,019	\$56,033
PM	Philip Morris Intl Inc	\$33,830	\$174,471
NOV	National OilWell Varco	\$4,812	\$5,429
СТ	Century Tell	\$754	\$380
PFF	ISHARES S&P US PFD FUND	\$19,980	\$20,466
EFA	ISHARES TR MSCI EAFE FD	\$47,871	\$44,452
IWO	ISHARES TR RUSSELL 2000 Growth	\$24,804	\$61,576
IWM	ISHARES TR RUSSELL 2000 Index Fund	\$64,171	\$158,718
ZXI	ISHARES TR RUSSELL 2000 Value Index	\$43,568	\$85,353
IJR	ISHARES TR SCAP ETF	\$46,087	\$137,520
SDY	SPDR S&P Dividend ETF	\$16,096	\$27,322
DWX	SPDR Intl Dividend	\$25,073	\$17,597
DIM	Wisdomtree Intl MDCP Div	\$13,115	\$13,238
VWO	Vanguard Emerging Market	\$25,038	\$23,221
INTC	Intel Corp	\$40,880	\$72,540
NSB .	US Bancorp Del New	\$22,864	\$117,171
JMCVX	Perkins Mid Cap Value Fund	\$22,610	\$18,570
SWOIX	Laudus International Mar	\$13,621	\$14,667
HPE	Hewlett-Packard Enterprises	\$8,999	\$11,471
AGG	ISHARES TR Barclays Fund	\$10,119	\$10,158
LQD	ISHARES Iboxx Investopp	\$25,938	\$27,420
JK	ISHARES S&P Mid-Cap 400	\$23,948	\$52,474
SCHC	Schwab Intl SCAP ETR	\$25,115	\$29,275

Part 2 Schedule of Investments (2 of 2)

		12/31/16	
		Cost	12/31/16
Symbol	Investment	Basis	Market Value
유	Home Depot	\$15,116	\$68,381
00	Dupont El DE Nemour &Co	\$14,246	\$26,057
PSX	Phillips 66	\$3,454	\$11,838
COP	Conoco Phillips	\$11,621	\$13,738
CAT	Catepillar	\$15,022	\$19,661
CAH	Cardinal Health	\$14,860	\$33,898
-	AT&TNEW	\$14,919	\$22,924
ABBV	Abbvie INC	\$7,811	\$19,788
НРО	HP Inc	\$10,087	\$17,887
8	Chemours Company	\$763	\$1,568
000	Powershare QQQ Trust	\$17,817	\$52,724
AWEIX	Atlantic Trust Disc Equity	\$1,213	\$2,032
LSBRX	Loomis Sayles Bond Fund	\$32,345	\$30,954
	Total	\$784.898	\$1.747.773

Name and Address Two by Two Character Development A70 W. 4th Street Dubuque, IA 52001 Autism Society Northeast Wisconsin N/A	Relationship				-
		Status	Purpose	Amount	
		501 (c) 3	Toolkit of Character	1	2,500.00
DePere, WI 54115		501 (c) 3	Autism Program in NE Wisconsin		2,000.00
Hills & Dales 1011 Davis Street Dubuque, IA 52001		501 (c) 3	Community Center roof replacement	₩	2,500.00
Carnegie Stout Library Foundation N/A P.O. Box 27 Dubuque, IA 52004-0027		501 (c) 3	Maker Space Project	₩	1,000.00
Bear Necessitites Pediatric Cancer Founc N/A 55 W Wacker Drive Ste 1100 Chicago, IL 60601		501 (c) 3	Bear Hugs/Discoveries /Empower	ю Г	1,000.00
Clarke University 1550 Clarke Dr. Dubuque, IA 52001		501 (c) 3	Clarke scholarship fund	ю Г	1,000.00
Dubuque Symphony Orchestra N/A 2728 Asbury Road Suite 900 Dubuque, IA 52001		501 (c) 3	Adopt a Musician	ю	3,000.00
Camp Albrecht Acres PO Bos 50 Sherrill, IA 52073-0050		501 (c) 3	Sensory Room	м	5,000.00
Boys & Girls Club of Oshkosh P.O. Box 411 Oshkosh, WI 54903		501 (c) 3	Mentoring program & 2016 fundraiser	с	2,000.00

Part XV Supplemer 3. (2 OF 4) Grants and	ntary Ir d Contr	Supplementary Information (continued) Grants and Contributions Paid During t	ued) ng the Year	Supplementary Information (continued) Grants and Contributions Paid During the Year or Approved for Future Payment	e Payment	
Name and Address		Relatiionship	Foundation Status	Purpose	Amount	
uite 301	N/A		501 (c) 3	2 full camperships for low \$ income campers to Camp Wawbeek		1,568.00
ı Lac Ave 15	Z/A		501 (c) 3	Meals for Hungry	ь	3,500.00
	A/A		501 (c) 3	Staff safety equipment, education & medical supplies	မာ	6,000.00
lation of Iowa 322-3220	A/A		501 (c) 3	Help fund a wish	₩	5,000.00
	A/A		501 (c) 3	academic out of school learning & enrichment programs	«	3,500.00
ψ	N/A		501 (c) 3	Help at Home Program	ι ω	2,500.00
University of Wisconsin Foundation 1848 University Avenue Madison, WI 53726	N/A		501 (c) 3	Carbone Cancer Center Fund	<u>.</u>	1,000.00
National Mississippi River Museum 350 East 3rd Street Dubuque, IA 52001	A/A		501 (c) 3	Mississippi Plaza Project	с	5,000.00
DBQ Public Schools s 195	N/A		501 (c) 3	Sensory Rooms for DBQ public schools & The LEAP program	ь	3,916.41

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Part XV 3. (3 OF 4)	Supplementary Grants and Con	Supplementary Information (continued) Grants and Contributions Paid During t	nued) ing the Year	Supplementary Information (continued) Grants and Contributions Paid During the Year or Approved for Future Payment	yment
Name and Address		Relatiionship	Foundation Status	Purpose	Amount
Epworth United Methodist Church 102 East Main St Epworth, IA 52045	N/A N/A		501 (c) 3	Cobra 3 hand truck for \$ efficiency	436.00
DuRide	A/N		501 (c) 3	Surviving without driving \$	2,000.00
2728 Asbury Road Suite 330 Dubuque, IA 52001					
Wonder Work	A/N		501 (c) 3	Fund Eye Sugery for \$	1,000.00
420 Fifth Avenue				Blind	
New York, NY 10018					
Father Carr's Place 2B	A/A		501 (c) 3	help replace water heater \$	1,000.00
1062 N. Koeller St.				for Mother Teresa Center	
Oshkosh, WI 54902	İ				
Fox Valley Warming Shelter	A/N		501 (c) 3	bus tickets/residents \$	3,300.00
1928 West College Ave	,			transportation for jobs	
Appleton, WI 54912-1261				snccess	
The Gathering Place	A/N		501 (c) 3	replace flooring for menta \$	1,000.00
1001 Cherry St.				health facility	
Green Bay, WI 54301					
Holy Family Catholic Schools	N/A		501 (c) 3	Soaring Wahlert Catholic \$	2,500.00
2005 Kane St				HS campaign	
Dubuque, IA 52001-0538					

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Part XV	Supplementary Informa	nformation (continued)			
3. (4 OF 4)	Grants and Contribution	tributions Paid During the Year or Approved for Future Payment	or Approved for Futu	re Payment	
Community Foundation of Greater Dubuq N/A	Greater Dubuq N/A	501 (c) 3	Haiti Medical Pass-	ક્ક	1,000.00
700 Locust St. Suite 195		•	through Fund		
Dubuque, IA 52001					
St Stephens Food Bank	N/A	501 (c) 3	Tommy lift for safety	\$	4,400.00
3145 Cedar Crest Ridge			& efficiency		
Dubuque, IA 52003					
Professional Fire Fighters of WI Foundatic N/A	of WI Foundatic N/A	501@3	Summer Camp for	€	1,000.00
7N Pinckney St. Suite 200			burned and injured		
Madison, WI 53703			Youth		
Sisters of the Presentation	N/A	501 (c) 3	Partners in mission	æ	1,000.00
2360 Carter Rd.	Dubuque , iowa 52001				
Hillcrest Family Services	N/A	501 (c) 3	Runde Auto Group Challe \$	⇔	1,000.00
2005 Asbury Rd. Dubuque, iowa 52001			Campaign		
MACC Fund	N/A	501 (c) 3	support research for	es.	1,000.00
10000 W Innovation Dr. Suite 135	ite 135		pediatric cancers and		
Milwaukee, Wi 53226			blood disorders		
Mayo Clinic	N/A	501 (c) 3	help transform medicine	ss	1,000.00
200 First St. SW			for people everywhere		
Rochester, MN 55905					
Unbond	N/A	501 (c) 3	sponsor 3 kids in DR	မာ	1,296.00
P.O. Box 410036					
Kansas City, MO 64179-9879	928				
IMD Guest House	N/A	501 (c) 3	help provide temp housing \$	⊕	1,000.00
1933 West Polk St.			for patients & their		
Chicago, IL 60612			caregiver		
Mississippi Valley Archaeology center	ogy center N/A	501 (c) 3	Educational Endowment	ss	1,000.00
1725 State St.					
LaCrosse, WI 54601-3788					
TOTAL				\$	76,916.41

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