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Form **990-PF**

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

2016

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

	For ca	lenda	r year 2016 or ta	x year beginning	, 2016	, and ending				
				NSEN CHARITABLE	FOUNDAT		A	Employer identification num 20-8837127		
	723 WILDER DRIVE MADISON, WI 53704						B Telephone number (see instructions) 608 827-6400			
_							С	If exemption application is	pending, check here 🕨 🗌	
	G Ch	Check all that apply Initial return Final return			Initial return of a former public charity Amended return			1 Foreign organizations, chec	k here	
_				Address change	Name change		2 Foreign organizations meeting the 85% test, check here and attach computation			
	H Ch		pe of organization	on. \overline{X} Section 50 nonexempt charitable t	(c)(3) exempt private f	oundation orivate foundation	E If private foundation status under section 507(b)(1)(A),		s was terminated	
•		marke	t value of all assets	at end of year J Acc	counting method X C					
	(110 ► \$		II, column (c), line 1 11,405	í I 📙	Other (specify) column (d) must be or	n cash basis)	F	If the foundation is in a 60- under section 507(b)(1)(B)		
[Part	IA	nalysis of Re		(a) Revenue and	(b) Net investmen	 Դt	(c) Adjusted net	(d) Disbursements	
·		_ E:	xpenses (The	total of amounts in and (d) may not neces-	expenses per books	income		income	for charitable	
		sa	erily equal the ar ee instructions)	nounts ın column (a)					purposes (cash basıs only)	
•		T 1		s, etc., received (attach schedule)	55,000.		_	<u> </u>		
6		2	Check ► if the fou	ndation is not required to attach Sch. B						
2017		3	Interest on savings and te	mporary cash investments	11,250.	11,25	50.	11,250.		
		4	Dividends and interest fro	m securities	183,696.	183,69		183,696.		
Q. 23,		1	Gross rents Net rental income							
	R	١.	or (loss). I Net gain or (loss) from sa	ele of assets not on line 10	314,325.			 		
WAY	Ε		Gross sales price for assets on line 6a		314,323.			,		
$\overline{\cap}$	V E	7		ome (from Part IV, line 2)		314,32	25.			
ĬĬ.	E N U	8	Net short-term capital Income modification	•				53,994.		
\leq	É		Gross sales less returns and	<u>,</u>		,				
SCANNED		}	allowances.		,			1	·	
Š		"	Less Cost of goods sold	L						
		11	Gross profit or (loss) (attack Other income (attack	•				<u> </u>		
		1	outer moorne (attack	, solicatio,		,				
_		12	Total. Add lines 1	through 11	564,271.	509,27	11.	248,940.		
		13		icers, directors, trustees, etc	0.					
		14	Other employee sal Pension plans, emp	•	<u></u>					
	A	1		· /						
	D M) t	Legal fees (attach so Accounting fees (att Other professional fees (a	*(154) 1360 40 1	650.			650.		
	N	1								
	PSTR	17	Interest Taxes (attach schedule)(s	ee unstrip 8 2017	5,415.	5,41	.5.	5,415.		
	OPERAT	19	Depreciation (attach	AVISION	\			 		
	i i	20	schedule) and deple	tion						
	N Ý G E	20	Travel, conferences	no meetings						
	A E N X D P	22	Printing and publica	tions .					·····	
		23	Other expenses (atta					110		
	E N S	24	Total operating and	ee Statement 2	110.	10	<u>.</u>	110.		
	Ě		expenses Add lines	13 through 23	6,175.	5,51	5.	6,175.		
		25	Contributions, gifts, grants	•	510,424.			- '	510,424.	
_		26	Add lines 24 and 25	disbursements.	516,599.	5,51	.5.	6,175.	510,424.	
		27	Subtract line 26 from Excess of revenue of		, .	٤				
		"	and disbursements	over expenses	47,672.					
		į t	Net investment inco	me (if negative, enter 0-)		503,75	6.			
_		<u> </u>	Adjusted net incom	e (if negative, enter -0)				242,765.		

BAA For Paperwork Reduction Act Notice, see instructions.

TEEA0504L 12/16/16

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Add lines 1, 2, and 3

5 Decreases not included in line 2 (itemize)

► See Statement 4

Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b), line 30

7,886,213.

7,782,185.

104,028.

4

5

6

Part I\		osses for Tax on Investmer				
	(a) List and describe 2-story brick wareh	the kind(s) of property sold (e.g., ouse, or common stock, 200 shares	real estate, s MLC Company)	(b) How acquire P — Purchase D — Donation	(mo day, yr)	(d) Date sold (mo , day, yr)
1a 1	0500.655 VANGUARD	S		P	Various	3/21/16
	<u>932.428 VANGUARD G</u>	,		<u> P</u>	Various	3/21/16
	90.012 VANGUARD T			P	Various	3/21/16
<u>а С</u> ,	<u>apital gain divide</u>	ends			_	
	(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other bar plus expense of sa		(h) Gain or (e) plus (f) m	(loss) ınus (g)
a	554,515.		50	1,554.		52,961.
b	170,085.			6,899.		93,186.
С	79,975.		2.	5,409.		54,566.
d						
e			10/04			
		ring gain in column (h) and owned t		69	(I) Gains (Col gain minus col (k), b	
((i) F M V as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col (i) over col (j), if any		than -0-) or Losses (fr	
а						52,961.
b						93,186.
						54,566.
<u>d</u>						113,612.
е			and a Dowl Live 7			
2 Ca	ipital gain net income or (ne	t capital loss).	enter in Part I, line 7 ter -0- in Part I, line 7	· 2	2	314,325.
3 Ne	t short-term capital gain or	(loss) as defined in sections 1222(5	and (6)			
lf (gain, also enter in Part I, lin Part I, line 8	e 8, column (c) (see instructions) l	f (loss), enter -0-		,	E2 004
Part V		Section 4940(e) for Reduce	d Tay on Not Investm		<u> </u>	53,994.
		ction 4942 tax on the distributable a alify under section 4940(e). Do not o		ase period?	Yes	X No
1 En	ter the appropriate amount in	each column for each year, see the in	structions before making any	entries		
Cal	(a) Base period years endar year (or tax year beginning in)	(b) Adjusted qualifying distributions	(c) Net value of noncharitable-use as:	sets	(d) Distribution (col (b) divided	
	2015	454,097.	10,51			0.043183
	2014 -	416,141.		7,235.		0.042346
	2013	317,834.		9,022.		0.039934
	2012	254,122.		2,162.		0.039083
	2011	240,938.	5,56	7,036.		0.043279
2 To	tal of line 1, column (d)				2	0.207825
3 Av	erage distribution ratio for the mber of years the foundation	ne 5-year base period — divide the n has been in existence if less than	total on line 2 by 5, or by to 5 years	he	8	0.041565
4 Er	iter the net value of nonchar	itable-use assets for 2016 from Par	t X, line 5	4	1(,905,970.
5 Mu	ultiply line 4 by line 3				i	453,307.
6 Er	iter 1% of net investment inc	come (1% of Part I, line 27b)		-	3	5,038.
7 Ad	ld lines 5 and 6			-	,	458,345.
	iter qualifying distributions fr ine 8 is equal to or greater tha					510,424.
11 1	www. w ic could to or groater the					

	837127		P	age 4
Part VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 - see in	struction	s)		
1 a 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 Domestic foundations that meet the section 4940(e) requirements in Part V,	1		5,0	38.
check here. ► X and enter 1% of Part I, line 27b				
c 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	1			
foundations only Other's enter -0-)	2			<u>0.</u>
3 Add lines 1 and 2	3		<u>5,0</u>	38.
4 Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-)	4			0.
Tax based on investment income. Subtract line 4 from line 3 If zero or less, enter -0-	5		5,0	38.
6 Credits/Payments·				
a 2016 estimated tax pmts and 2015 overpayment credited to 2016 6 a 5,440.				
b Exempt foreign organizations — tax withheld at source				
c Tax paid with application for extension of time to file (Form 8868)				
d Backup withholding erroneously withheld	_ -	-		
7 Total credits and payments Add lines 6a through 6d	7		5,4	40.
8 Enter any penalty for underpayment of estimated tax. Check here X if Form 2220 is attached	8			<u> 17.</u>
9 Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed	9			0.
	10		3	85.
	11			0.
Part VII-A Statements Regarding Activities			-:	
1 a During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any political campaign?		1 a	Yes	No X
b Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see Instructions for the definition)?		1 ь		Х
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?		1 c		Χ.
d Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year	Ì			
(1) On the foundation >\$ 0. (2) On foundation managers >\$	0.		1	. !
e Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers ► \$ 0	ļ			
<u>U.</u>		٠,	-	17
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	ļ	2		Х
·				
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		Х
4a Did the foundation have unrelated business gross income of \$1,000 or more during the year?	}	4 a		X
b If 'Yes,' has it filed a tax return on Form 990-T for this year?		4 b	Ŋ	/A
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			`	l
				ļ
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	-	X
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)				
N/A				
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 <i>General Instruction G</i> ? <i>If 'No,' attach explanation</i>		8 b	X	
9 Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4 for calendar year 2016 or the taxable year beginning in 2016 (see instructions for Part XIV)? If 'Yes,' complete	1942(j)(5) 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 BAA		10 m 990	-PF (2	X
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Pa	t VII-A Statements Regarding Activities (continued)			
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)	11	Yes	No X
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had advisory privileges? If 'Yes,' attach statement (see instructions).	12		Х
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	Х	
14	Website address ► N/A The books are in care of ► CHRISTOPHER BUGG Telephone no ► 608	 327-6	400	-
15	Located at ► 701 DEMING WAY SUITE 100 MADISON WI ZIP + 4 ► 53717-29 Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - Check here	16 N/	<u></u>	
	and enter the amount of tax-exempt interest received or accrued during the year		Yes	N/A No
16	At any time during calendar year 2016, did the foundation have an interest in or a signature or other authority over a bank, securities, or other financial account in a foreign country?	16	162	X
	See the instructions for exceptions and filing requirements for FinCEN Form 114. If 'Yes,' enter the name of the foreign country.			
Pa	t 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.		Yes	No
1 a	During the year did the foundation (either directly or indirectly)			,
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person? Yes X No			
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person? Yes X No			
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? Yes X No			
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? Yes X No			
	(5) Transfer any income or assets to a disqualified person (or make any of either available for the benefit or use of a disqualified person)? Yes X No	-		
	(6) Agree to pay money or property to a government official? (Exception. Check 'No' if the foundation agreed to make a grant to or to employ the official for a period after termination of government service, if terminating within 90 days.) Yes X No			
ı	b If any answer is 'Yes' to 1a(1)—(6), did any of the acts fail to qualify under the exceptions described in Regulations section 53 4941(d)-3 or in a current notice regarding disaster assistance (see instructions)?	1 b	N.	/A
	Organizations relying on a current notice regarding disaster assistance check here			
•	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected before the first day of the tax year beginning in 2016?	1 c		X
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation defined in section 4942(j)(3) or 4942(j)(5)).		1	ē
i	At the end of tax year 2016, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning before 2016? XYes No			
	If 'Yes,' list the years ► 20 <u>15</u> , 20 , 20			Į.
I	Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2) (relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer 'No' and attach statement — see instructions)	2 b	x	
•	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here 20 , 20 , 20 , 20			
3 :	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year? Yes X No			
I	of If 'Yes,' did it have excess business holdings in 2016 as a result of (1) any purchase by the foundation or disqualified persons after May 26, 1969, (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7)) to dispose 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 4720, to determine if the foundation had excess business holdings in 2016)	3 b	N	/A
4 8	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4 a		X
	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2016?	4 b	~	<u>X</u>
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Part VII-B Statements Regarding Activit		1 4720 May Be Req	uired (continued)		
5 a During the year did the foundation pay or incu	-	- (cootion 1015(c))?	□vas ☑	A	}
(1) Carry on propaganda, or otherwise attemp	3	. , ,	Yes X	No	
(2) Influence the outcome of any specific pub on, directly or indirectly, any voter registra	ation drive?		Yes X		ı,
(3) Provide a grant to an individual for travel,	study, or other similar	purposes?	Yes X	No	
(4) Provide a grant to an organization other than in section 4945(d)(4)(A)? (see instructions	No				
(5) Provide for any purpose other than religio educational purposes, or for the prevention	us, charitable, scientific n of cruelty to children	c, literary, or or animals?	Yes X	No	
b If any answer is 'Yes' to 5a(1)—(5), did any of described in Regulations section 53 4945 or in (see instructions)?	the transactions fail to a a current notice regard	qualify under the exce ding disaster assistance	ptions	5 b	N/A
Organizations relying on a current notice rega	rding disaster assistanc	ce check here	▶ [
c If the answer is 'Yes' to question 5a(4), does tax because it maintained expenditure respon	sibility for the grant?	·	N/A Yes	No	ť
If 'Yes,' attach the statement required by Reg	ulations section 53 4945	5–5(d)			1
6 a Did the foundation, during the year, receive an on a personal benefit contract?			∐Yes X	No Ch	v
b Did the foundation, during the year, pay prem If 'Yes' to 6b, file Form 8870	iums, directly or indirec	tiy, on a personal bene	nt contract?	6 b	<u> </u>
7 a At any time during the tax year, was the found	dation a party to a proh	ibited tax shelter transa	ection? Yes X	No	
b If 'Yes,' did the foundation receive any procee	· - ·		لسا لسيا	I/A 7ь	-
Part VIII Information About Officers, D	irectors, Trustees,	Foundation Manag	gers, Highly Paid E	mployees	5,
and Contractors			···-		
1 List all officers, directors, trustees, foundation					
(a) Name and address	(b) Title, and average hours per week devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	(e) Expens other al	e account, llowances
LAURITS R. CHRISTENSEN	Director	0.	0.		0.
_723_WILDER_DRIVE _MADISON, WI 53704	0	_			
SCOTT CHRISTENSEN 5118 REYNOLDS AVENUE WAUNAKEE, WI 53597	Director 0	0.	0.		0.
CHRISTOPHER BUGG 701 DEMING WAY, SUITE 100	Director 0	0.	0.		0.
MADISON, WI, WI 53717					
2 Compensation of five highest-paid employees (of	ther than those included	on line 1 – see instructio	ns). If none, enter 'NONE	<u></u>	
(a) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week devoted to position	(c) Compensation	(d)Contributions to employee benefit plans and deferred compensation	(e) Expens	e account, llowances
None			<u> </u>		
~					
			<u> </u>		
~					
Table with a state of the state			L		
Total number of other employees paid over \$50,000	J			Form 000	0

Part VIII Information About Officers, Directors, Trustees, Foundary and Contractors (continued)	T 20-88 tion Managers, Highly Paid I	
3 Five highest-paid independent contractors for professional services (see inst	ructions). If none, enter 'NONE.'	
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
None		
		<u> </u>
		1
T. I		
Total number of others receiving over \$50,000 for professional services	-	0
List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical in organizations and other beneficiaries served, conferences convened, research papers produced, etc. 1 N/A 2 3 4		Expenses
Part IX-B Summary of Program-Related Investments (see instruction		
Describe the two largest program-related investments made by the foundation during the ta	ax year on lines 1 and 2	Amount
1		_
		_
N/A		
2		_
		_
All other program related another the Control of th		
All other program-related investments. See instructions		
3		-
		-
Total Add lines 1 through 2		<u> </u>
Total. Add lines 1 through 3		<u> </u>
BAA		Form 990-PF (2016)

Part X Minimum Investment Return (All domestic foundations must complete this see instructions.)	part. Foreign	foundations,
1 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	1 a	11,166,487.
b Average of monthly cash balances	1 b	-94,436.
c Fair market value of all other assets (see instructions)	1 c	
d Total (add lines 1a, b, and c)	1 d	11,072,051.
e Reduction claimed for blockage or other factors reported on lines 1a and		
1c (attach detailed explanation)	0.	
2 Acquisition indebtedness applicable to line 1 assets	2	<u>0</u> .
3 Subtract line 2 from line 1d	3	11,072,051.
4 Cash deemed held for charitable activities Enter 1-1/2% of line 3 (for greater amount, see instructions)	4	166,08 <u>1</u> .
5 Net value of noncharitable-use assets. Subtract line 4 from line 3 Enter here and on Part V, line	4 5	10,905,970.
6 Minimum investment return. Enter 5% of line 5	6	<u>545,299</u> .
Part XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) privation and certain foreign organizations check here ► and do not complete the		oundations
1 Minimum investment return from Part X, line 6	1	545,299.
2a Tax on investment income for 2016 from Part VI, line 5	5,038.	
b Income tax for 2016 (This does not include the tax from Part VI)		
c Add lines 2a and 2b	2 c	5,038.
3 Distributable amount before adjustments. Subtract line 2c from line 1	3	540,261.
4 Recoveries of amounts treated as qualifying distributions	4	
5 Add lines 3 and 4	5	540,261.
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	540,261.
Part 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	1 a	510,424.
b Program-related investments — total from Part IX-B	1 b	······
2 Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purp	oses 2	· · · · · · · · · · · · · · · · · · ·
3 Amounts set aside for specific charitable projects that satisfy the a Suitability test (prior IRS approval required)	3 a	
b Cash distribution test (attach the required schedule)	3 b	
4 Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII,	line 4 4	510,424.
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 (see instructions)	5	5,038.
6 Adjusted qualifying distributions. Subtract line 5 from line 4	6	505,386.
Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whe qualifies for the section 4940(e) reduction of tax in those years	ether the foundation	ו י

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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				540,261.
2 Undistributed income, if any, as of the end of 2016				340,201.
a Enter amount for 2015 only			518,553.	
b Total for prior years 20 , 20 , 20		0.		
3 Excess distributions carryover, if any, to 2016.				
a From 2011				
b From 2012	س			
c From 2013				,
d From 2014				
e From 2015				
f Total of lines 3a through e	0.			
4 Qualifying distributions for 2016 from Part				
XII, line 4. ► \$ 510, 424.				
a Applied to 2015, but not more than line 2a			510,424.	
b Applied to undistributed income of prior years (Election required — see instructions)		0.		
c Treated as distributions out of corpus	_			
(Election required – see instructions) d Applied to 2016 distributable amount	0.			
e Remaining amount distributed out of corpus	0.			0.
5 Excess distributions carryover applied to 2016	0.			0.
(If an amount appears in column (d), the	0.			<u> </u>
same amount must be shown in column (a))				
6				
6 Enter the net total of each column as indicated below:				
a Corpus Add lines 3f, 4c, and 4e Subtract line 5	0.			
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 instructions.			8,129.	
f Undistributed income for 2016 Subtract lines		,		
4d and 5 from line 1. This amount must be				E 4.0 0.00
distributed in 2017 7 Amounts treated as distributions out of				540,261.
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 (see instructions)	0.			1
9 Excess distributions carryover to 2017.				
Subtract lines 7 and 8 from line 6a	0.			·
10 Analysis of line 9				
a Excess from 2012				
b Excess from 2013				
c Excess from 2014				
d Excess from 2015				•
e Excess from 2016				

Form 990-PF (2016) LAU & BEA CHRISTE			A VIII A supplian	20-883/12/	
Part XIV Private Operating Foundat 1 a If the foundation has received a ruling or dete	•				N/A
is effective for 2016, enter the date of the	ruling	it is a private operat	ing foundation, and the	e runing ▶	
b Check box to indicate whether the foundat	ion is a private ope	erating foundation of	described in section	4942(j)(3) or [4942(j)(5)
2 a Enter the lesser of the adjusted net income from Part I or the minimum	Tax year		Prior 3 years		(e) Total
investment return from Part X for	(a) 2016	(b) 2015	(c) 2014	(d) 2013	
each year listed b 85% of line 2a					
c Qualifying distributions from Part XII,		-			
line 4 for each year listed					
d Amounts included in line 2c not used directly for active conduct of exempt activities					
e 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					
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 an exempt organization					
(4) Gross investment income					
Part XV Supplementary Information assets at any time during th	(Complete this	part only if the	foundation had	\$5,000 or more	in
1 Information Regarding Foundation Management		istructions.)			
a List any managers of the foundation who have	e contributed more t	han 2% of the total o	contributions received l	by the foundation before	ore the
close of any tax year (but only if they have None	e contributed more	than \$5,000) (See	e section 507(d)(2))		
la l	100/ of the	stack of a paragraph	on for an equally lorge	portion of the owner	ship of
b List any managers of the foundation who own a partnership or other entity) of which the None	foundation has a 1	0% or greater inter	on (or an equally large rest	portion of the owner	stilp of
2 Information Regarding Contribution, Grant, 6 Check here X if the foundation only ma requests for funds If the foundation makes gr complete items 2a, b, c, and d.	kes contributions to	preselected charitat			
a The name, address, and telephone number of	r e-mail address of t	he person to whom a	applications should be	addressed	
b The form in which applications should be	submitted and infa-	rmation and materi	als they should inclu		
• The form in which applications should be	subitinted and initol	imation and materi	ais they should filliu		
c Any submission deadlines					
d Any restrictions or limitations on awards,	such as by geograp	ohical areas, charita	able fields, kinds of i	nstitutions, or other	factors:
					· · · · · · · · · · · · · · · · · · ·

Page 11

-	rants and Contributions Paid During the Y Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation		
		any foundation manager	status of recipient	Purpose of grant or contribution	Amount
	Name and address (home or business)	or substantial contributor	Toopion		
	aid during the year Statement 5		1		
see s	scatement 3				
					1
			1		
	otal			► 3a	510,424
	otal Approved for future payment			- 3a	310,424
D /	pproved for fatare payment				
			1		
	otal		1	► 3t	

	ss amounts unless otherwise indicated		l business income	Evaluded by	coction 512 513 or 514	
		(a) Business	(b) Amount	(c) Exclu-	section 512, 513, or 514 (d) Amount	(e) Related or exempt function income (See instructions.)
	gram service revenue.			code		
a	•	!				
b		<u> </u>				
		 				
d		 				
- -		 				
n Fee	s and contracts from government agencies			+		
-	nbership dues and assessments	ļ				
	est on savings and temporary cash investments	\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \		+		11,250.
	dends and interest from securities					183,696.
5 Net	rental income or (loss) from real estate:					103,030.
a Deb	t-financed property					
b Not	debt-financed property					
6 Net r	ental income or (loss) from personal property					
	er investment income					
	or (loss) from sales of assets other than inventory					314,325.
	income or (loss) from special events					
	ss profit or (loss) from sales of inventory					
11 Othe	er revenue					
a			<u> </u>			
b		<u> </u>				
<u> </u>		ļ	 -	<u> </u>		
d		-				
е		1			1	
12 Sub	total Add columns (b) (d) and (c)					
	total Add columns (b), (d), and (e)				12	509,271.
13 Tota	al. Add line 12, columns (b), (d), and (e)	ons)			13	509,271. 509,271.
13 Tota (See work	al. Add line 12, columns (b), (d), and (e) asheet in line 13 instructions to verify calculated		shment of Exem	pt Purpose	-	
13 Tota (See work	al. Add line 12, columns (b), (d), and (e) isheet in line 13 instructions to verify calculation.	Accomplis	ted in column (e) of	Part XVI-A c	es	509,271.
13 Tota (See work Part XV Line No.	al. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculated (I-B) Relationship of Activities to the Explain below how each activity for which in	Accomplis	ted in column (e) of	Part XVI-A c	es	509,271.
13 Tota (See work Part XV Line No.	al. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculated (I-B) Relationship of Activities to the Explain below how each activity for which in	Accomplis	ted in column (e) of	Part XVI-A c	es	509,271.
13 Tota (See work Part XV Line No.	al. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculated (I-B) Relationship of Activities to the Explain below how each activity for which in	Accomplis	ted in column (e) of	Part XVI-A c	es	509,271.
13 Tota (See work Part XV Line No.	al. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculated (I-B) Relationship of Activities to the Explain below how each activity for which in	Accomplis	ted in column (e) of	Part XVI-A c	es	509,271.
13 Tota (See work Part XV Line No.	al. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculated (I-B) Relationship of Activities to the Explain below how each activity for which in	Accomplis	ted in column (e) of	Part XVI-A c	es	509,271.
13 Tota (See work Part XV Line No.	al. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculated (I-B) Relationship of Activities to the Explain below how each activity for which in	Accomplis	ted in column (e) of	Part XVI-A c	es	509,271.
13 Tota (See work Part XV Line No.	al. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculated (I-B) Relationship of Activities to the Explain below how each activity for which in	Accomplis	ted in column (e) of	Part XVI-A c	es	509,271.
13 Tota (See work Part XV Line No.	al. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculated (I-B) Relationship of Activities to the Explain below how each activity for which in	Accomplis	ted in column (e) of	Part XVI-A c	es	509,271.
13 Tota (See work Part XV Line No.	al. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculated (I-B) Relationship of Activities to the Explain below how each activity for which in	Accomplis	ted in column (e) of	Part XVI-A c	es	509,271.
13 Tota (See work Part XV Line No.	al. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculated (I-B) Relationship of Activities to the Explain below how each activity for which in	Accomplis	ted in column (e) of	Part XVI-A c	es	509,271.
13 Tota (See work Part XV Line No.	al. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculated (I-B) Relationship of Activities to the Explain below how each activity for which in	Accomplis	ted in column (e) of	Part XVI-A c	es	509,271.
13 Tota (See work Part XV Line No.	al. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculated (I-B) Relationship of Activities to the Explain below how each activity for which in	Accomplis	ted in column (e) of	Part XVI-A c	es	509,271.
13 Tota (See work Part XV Line No.	al. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculated (I-B) Relationship of Activities to the Explain below how each activity for which in	Accomplis	ted in column (e) of	Part XVI-A c	es	509,271.
13 Tota (See work Part XV Line No.	al. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculated (I-B) Relationship of Activities to the Explain below how each activity for which in	Accomplis	ted in column (e) of	Part XVI-A c	es	509,271.
13 Tota (See work Part XV Line No.	al. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculated (I-B) Relationship of Activities to the Explain below how each activity for which in	Accomplis	ted in column (e) of	Part XVI-A c	es	509,271.
13 Tota (See work Part XV Line No.	al. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculated (I-B) Relationship of Activities to the Explain below how each activity for which in	Accomplis	ted in column (e) of	Part XVI-A c	es	509,271.
13 Tota (See work Part XV Line No.	al. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculated (I-B) Relationship of Activities to the Explain below how each activity for which in	Accomplis	ted in column (e) of	Part XVI-A c	es	509,271.
13 Tota (See work Part XV Line No.	al. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculated (I-B) Relationship of Activities to the Explain below how each activity for which in	Accomplis	ted in column (e) of	Part XVI-A c	es	509,271.
13 Tota (See work Part XV Line No.	al. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculated (I-B) Relationship of Activities to the Explain below how each activity for which in	Accomplis	ted in column (e) of	Part XVI-A c	es	509,271.
13 Tota (See work Part XV Line No.	al. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculated (I-B) Relationship of Activities to the Explain below how each activity for which in	Accomplis	ted in column (e) of	Part XVI-A c	es	509,271.
13 Tota (See work Part XV Line No.	al. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculated (I-B) Relationship of Activities to the Explain below how each activity for which in	Accomplis	ted in column (e) of	Part XVI-A c	es	509,271.
13 Tota (See work Part XV Line No.	al. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculated (I-B) Relationship of Activities to the Explain below how each activity for which in	Accomplis	ted in column (e) of	Part XVI-A c	es	509,271.
13 Tota (See work Part XV Line No.	al. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculated (I-B) Relationship of Activities to the Explain below how each activity for which in	Accomplis	ted in column (e) of	Part XVI-A c	es	509,271.

Form 990-PF (2016) LAU & BEA CHRISTENSEN CHARITABLE FOUNDAT 20-8837127 Part XVII Information Regarding Transfers To and Transactions and Relationships With Noncharitable Exempt Organizations

							Yes	No
descr	he organization directl ribed in section 501(c) ng to political organiz) of the Code (c	engage in any of the following v other than section 501(c)(3) org	with any other orga janizations) or in se	inization ection 527,		163	110
	-, .		a noncharitable exempt organ	uzation of				
(1) C		ig roundation to	a nonemaritable exempt organ	ization of		1 a (1)		Х
	Other assets					1 a (2)		X
	r transactions					1 2 (2)		
	Sales of assets to a no	oncharitable exe	empt organization			1 b (1)		- X
			able exempt organization			1 b (2)		X
	Rental of facilities, equ		· -			1 b (2)		X
• •	Reimbursement arrang		455515			1 b (4)		X
	oans or loan guarante					1 b (5)		X
	_		nip or fundraising solicitations			1 b (6)		X
			sts, other assets, or paid emplo	oyees		1 c		X
		_	· · ·	•	•			
d If the the go any t	answer to any of the oods, other assets, or s ransaction or sharing	above is 'Yes,' ervices given by arrangement, s	complete the following schedu the reporting foundation. If the for show in column (d) the value of	ile Column (b) sho jundation received le the goods, other a	uld always show the fair n ess than fair market value in essets, or services receive	narket vali d	ue of	
(a) Line no	(b) Amount involved		of noncharitable exempt organization		n of transfers, transactions, and		 igement	S
N/A			· -				·	
•								
			-					
								
	ļ							
	ļ							
descr	foundation directly or i ribed in section 501(c) s,' complete the follow	of the Code (o	d with, or related to, one or more ther than section 501(c)(3)) or	tax-exempt organization section 527?	ations	Yes	X	No
	(a) Name of organiza	<u>_</u>	(b) Type of organization	on I	(c) Description of rela	ationship		
N/A		· · · · · · · · · · · · · · · · · · ·	(3)		(4)			
		· · · · · · · · · · · · · · · · · · ·						
	·	-			-			
Und	ler penalties of perjury, I decl	lare that I have exam	nined this return, including accompanying than taxpayer) is based on all information	schedules and statement	s, and to the best of my knowledge	and belief, it	is true,	
Sign Here	1/4	/ Bu	- 15/10/	Direct		May the II this return preparer	RS discunsite the shown b	uss ne pelow
S	ignature of officer or trustee	me -	Date	Title	<u> </u>	(see instr	uctions) Yes	No No
	Print/Type preparer's n	ame	Preparens sugnature	Date	Check If	PTIN	.00	
Paid	CAROL A STO	TT.AR	CAROL A STOTLA	<i> </i>	self-employed	P00897	1105	
raiu Preparer			Stotlar, S.C.			504651	103	—
Preparer Use Only			ackhawk Avenue		1 mil 5 Ein 39-13	104031		
USE UIIIY			VI 53705		Phone no (608)) 231-1	1300	
BAA		MAGESON, V	11 33103		Triblicito (808)	Form 99 0		
						1 01111 330	~ FF (/	2010)

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, 990-PF) and its instructions is at www.irs.gov/form990.

OMB No 1545-0047

2016

Name of the organization		Employer identification number
LAU & BEA CHRISTENSEN CHARITA	BLE FOUNDAT	20-8837127
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	X 501(c)(3) exempt private foundation	
	4947(a)(1) nonexempt charitable trust treated as a private trust trust treated as a private trust trust treated as a private trust trus	vate 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) orga	anization can check boxes for both the General Rule and a	Special Rule See instructions
General Rule		
[X] For an organization filing Form 990, 990-EZ property) from any one contributor. Complete	Z, or 990-PF that received, during the year, contributions to te Parts I and II See instructions for determining a contribu- tion.	aling \$5,000 or more (in money or utor's total contributions
Special Rules		
☐ under sections 509(a)(1) and 170(b)(1)(A)(vi).	11(c)(3) filing Form 990 or 990-EZ that met the 33-1/3% sup that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, he year, total contributions of the greater of (1) \$5,000 or (20-EZ, line 1. Complete Parts I and II.	16a, or 16b, and that
For an organization described in section 50 during the year, total contributions of more purposes, or for the prevention of cruelty to	11(c)(7), (8), or (10) filing Form 990 or 990-EZ that received than \$1,000 <i>exclusively</i> for religious, charitable, scientific, to children or animals. Complete Parts I, II, and III	from any one contributor, iterary, or educational
during the year, contributions exclusively for \$1,000 If this box is checked, enter here the charitable, etc., purpose Don't complete an	of (c)(7), (8), or (10) filing Form 990 or 990-EZ that received or religious, charitable, etc., purposes, but no such contributione total contributions that were received during the year for many of the parts unless the General Rule applies to this organole, etc., contributions totaling \$5,000 or more during the year	tions totaled more than an <i>exclusively</i> religious, nization because
Caution. An organization that isn't covered by 990-PF), but it must answer 'No' on Part IV. In	the General Rule and/or the Special Rules doesn't file Sche ne 2, of its Form 990, or check the box on line H of its Form filing requirements of Schedule B (Form 990, 990-EZ, or 99	dule B (Form 990, 990-EZ, or 1 990-EZ or on its Form 990-PF,

•			
	B (Form 990, 990-EZ, or 990-PF) (2016)	Page	1 of 1 of Part
Name of org	BEA CHRISTENSEN CHARITABLE FOUNDAT	' -	r identification number 837127
Part I	Contributors (see instructions) Use duplicate copies of Part I if addit	ional space is needed	
(a) Number	. (b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	LAURITS CHRISTENSEN	\$ 55,000	Person X Payroll
	MADISON, WI 53703	\$ <u>\$55,000.</u>	(Complete Part II for noncash contributions)
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		s	Person Payroll Complete Part II for noncash contributions)
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$\$	Person Payroll Complete Part II for noncash contributions)
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$ 	Person Payroll Complete Part II for noncash contributions)
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$\$	Person Payroll Noncash (Complete Part II for noncash contributions)
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
			Person Payroll

Noncash

(Complete Part II for noncash contributions)

20-8837127

1 to 1 of Part II

Name of organization

LAU & BEA CHRISTENSEN CHARITABLE FOUNDAT

Employer identification number

Part II	Noncash Property (see instructions) Use duplicate copies of Part II if additional sp	pace is needed	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
	N/A	\$	
(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
		\$ 	
BAA	Sche	 	/ 7. or 990-PF) (2016

Page

1 to

1 of Part III

Name of organization
LAU & BEA CHRISTENSEN CHARITABLE FOUNDAT

Employer identification number 20-8837127

Part III	Exclusively religious, charitable, et or (10) that total more than \$1,000 for the following line entry. For organizations of contributions of \$1,000 or less for the year. Use duplicate copies of Part III if additional	ne year from any one contributor. In properties the total of expenses the second of expenses the second of the contributor. The properties the properties of the contributor.	xclusively religious, charitable, etc , tructions)		
(a) No. from Part I	(b) Purpose of gift	(b) (c) Purpose of gift Use of gift Descri			
	N/A				
	Transferee's name, addres	(e) Transfer of gift s, and ZIP + 4	Relationship of transferor to transferee		
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held		
	Transferee's name, addres	(e) Transfer of gift s, and ZIP + 4	Relationship of transferor to transferee		
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held		
	Transferee's name, addres	(e) Transfer of gift s, and ZIP + 4	Relationship of transferor to transferee		
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held		
	Transferee's name, addres	(e) Transfer of gift ss, and ZIP + 4	Relationship of transferor to transferee		
BAA			Schedule B (Form 990, 990-F7, or 990-PF) (2016)		

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Federal Statements

Page 1

LAU & BEA CHRISTENSEN CHARITABLE FOUNDAT

20-8837127

Statement 1	
Form 990-PF, Part I, Line 16	b
Accounting Fees	

		(a) Expenses per Books	(b) Net Investment Income	(c) Adjusted Net Income	(d) Charitable <u>Purposes</u>
TAX PREPARATION	Total	\$ 650. \$ 650.	\$ 0.	\$ 650. \$ 650.	\$ 0.

Statement 2 Form 990-PF, Part I, Line 23 Other Expenses

		(a)	(b) Net	(c)	(d)
		Expenses	Investment	Adjusted	Charitable
		<u>per Books</u>	Income	Net Income	Purposes
BROKERAGE FEES		\$ 100.	\$ 100.		
WISCONSIN LICENSE		10.		10.	
	Total	\$ 110.	<u>\$ 100.</u>	\$ 110.	<u>\$ 0.</u>

Statement 3 Form 990-PF, Part II, Line 10b Investments - Corporate Stocks

Corporate Stocks	Valuation	Book	Fair Market
	<u>Method</u>	Value	Value
AMERICAN EUROPACIFIC GROWTH CLASS C FIRST EAGLE OVERSEAS CLASS C VANGUARD 500 INDEX SIGNAL SHS VANGUARD DEVELOPED MRKTS INDEX VANGUARD GROWTH INDEX VANGUARD TAX MANAGED CAP APPREC VANGUARD VALUE INDEX VANGUARD EXTENDED MARKET INDEX TRUST VANGUARD INDEX FDS VANGUARD GROWTH VANGUARD INTL EQUITY INDEX FUNDS AMERICAN NEW WORLD FUND AMERICAN WASHINGTON MUTUAL INVESTORS FIRST EAGLE GLOBAL FRANKLIN BALANCE SHEET TEMPLETON FRONTIER MARKETS FUND AMERICAN CAPITAL WORLD GRTH & INCOME AMERICAN EUROPACIFIC GROWTH CLASS F1 FRONTIER TIMPANI SM CAP VANGUARD MID CAP INDEX INVESTOR	Cost Cost Cost Cost Cost Cost Cost Cost	\$ 157,841. 360,295. 424,138. 348,728. 0. 929,646. 232,260. 237,951. 178,319. 348,960. 656,751. 493,508. 473,128. 609,867. 673,026. 644,531. 73,254. 204,172. 169,609.	\$ 149,525. 371,954. 1,547,925. 322,116. 0. 1,892,965. 459,027. 698,349. 537,891. 375,690. 589,701. 662,340. 525,096. 489,283. 441,470. 817,080. 128,222. 199,241. 566,874.
VANGUARD TOTAL STOCKMARKET INDEX	Cost	502,509.	566,827.
	Total	\$ 7,718,493.	\$ 11,341,576.

2016	Federal State	ements		 Page 2
LAU &	BEA CHRISTENSEN CI	HARITABLE F	OUNDAT	20-8837127
Statement 4 Form 990-PF, Part III, Line 5 Other Decreases REINVESTED SALES PROCEEDS TAX PAYMENTS			Total	\$ 98,588. 5,440. 104,028.
Statement 5 Form 990-PF, Part XV, Line 3a Recipient Paid During the Year		Found-		
Namo and Address	Donee Relationship	ation Status	Purpose of Grant	Amount
Name and Address NATURAL RESOURCES FOUNDATION PO BOX 2317 MADISON WI 53701	NONE	Scacus	DONATION	\$ 1,500.
FRIENDS OF WHA TV 821 UNIVERSITY AVENUE MADISON WI 53726	NONE		DONATION	3,000.
CHILDREN'S THEATER OF MADISON 228 STATE STREET MADISON WI 53703	NONE		DONATION	10,000.
OPERA FOR THE YOUNG 6441 ENTERPRISE LANE MADISON WI 53719	NONE		DONATION	2,700.
CORNELL ANNUAL FUND 130 EAST SENECA STREET ITHACA NY 14850	NONE		DONATION	147,724.
PORCHLIGHT 306 N. BROOKS STREET MADISON WI 53715	NONE		DONATION	10,000.
YWCA OF MADISON 101 E. MIFFLIN MADISON WI 53703	NONE		DONATION	10,000.
UNIVERSITY OF WISCONSIN FOUNDATION 1848 UNIVERSITY AVENUE MADISON WI 53726	NONE		DONATION	92,000.
PLANNED PARENTHOOD OF WISCONSIN 302 N. JACKSON STREET MILWAUKEE WI 53202	NONE		DONATION	100,000.

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LAU & E	BEA CHRISTENSEN CI	HARITABLE	FOUNDAT	20-8837127
Statement 5 (continued) Form 990-PF, Part XV, Line 3a Recipient Paid During the Year				
Name and Address	Donee Relationship	Found- ation Status	Purpose of Grant	Amount
DRIFTLESS AREA LAND CONSERVATION 338 NORTH IOWA STREET DODGEVILLE WI 53533	NONE	Scacus	DONATION	\$ 10,000
MADISON COLLEGE FOUNDATION 3513 ANDERSON STREET MADISON WI 53704	NONE		DONATION	5,000
NATIONAL PARKS CONSERVATION 777 6TH STREET NW, 700 WASHINGTON DC 20001	NONE		DONATION	1,000
NATURAL HERITAGE LAND TRUST 303 S PATERSON STREET MADISON WI 53703	NONE		DONATION	500
UNITED WAY OF DANE COUNTY 2059 ATWOOD AVENUE MADISON WI 53707	NONE		DONATION	20,000
WAVE EDUCATION FUND PO BOX 170393 MILWAUKEE WI 53217	NONE		DONATION	5,000
CLOUD FOREST SCHOOL FOUNDATION PO BOX 3223 SEWANEE TN 37375	NONE	,	DONATION	5,000
DAIS PO BOX 1761 MADISON WI 53701	NONE		DONATION	10,000
ALDO LEOPOLD FOUNDATION E13701 LEVEE ROAD BARABOO WI 53913	NONE		DONATION	1,000
INTERNATIONAL PLANNED PARENTHOOD 4 NEWHAMS ROW LONDON SE1 3UZ United Kingdom	NONE		DONATION	15,000

DONATION

DONATION

2,000.

3,000.

WAISMAN CENTER 1500 HIGHLAND AVENUE MADISON WI 53705

TRIANGLE COMMUNITY MINISTRY NONE 755 BRAXTON PLACE, B101 MADISON WI 53715

NONE

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	LAU & BEA CHRISTENSEN CHARITABLE FOUNDAT	20-8837127

Statement 5 (continued) Form 990-PF, Part XV, Line 3a Recipient Paid During the Year

Name and Address	Donee Relationship	Found- ation Status	Purpose Grant		Amount
MADISON OPERA 333 GLENWAY STREET MADISON WI 53705	NONE	,	DONATION	\$	10,000.
OVERTURE CENTER 201 STATE STREET MADISON WI 53703	NONE		DONATION		10,000.
HABITAT FOR HUMANITY 1014 FIEDLER LANE #29 MADISON WI 53713	NONE		DONATION		10,000.
MADISON PARKS FOUNDATION 1402 WINGRA CREEK PARKWAY MADISON WI 53715	NONE .		DONATION		1,000.
LITERACY NETWORK 1118 S PARK STREET MADISON WI 53715	NONE		DONATION		10,000.
LAKEWIEW LUTHERAN CHURCH 4001 Mandrake Rd MADISON WI 53704	NONE		DONATION		5,000.
HOUSONG INITIATIVES 1110 Ruskin St MADISON WI 53704	NONE		SHELTER		10,000.
				Total \$	510,424.