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Form 990-PF

Return of Private Foundation

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

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▶ 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.lrs.gov/form990pf. Department of the Treasury For calendar year 2016 or tax year beginning . and ending Name of foundation A Employer identification number 1335 FOUNDATION C/O BROWN & BROWN, LLC 36-3701371 Number and street (or P O box number if mail is not delivered to street address) Room/suite B Telephone number 225 W WASHINGTON ST 1650 312-849-4546 City or town, state or province, country, and ZIP or foreign postal code C If exemption application is pending, check here CHICAGO, IL 60606 G Check all that apply: Initial return initial return of a former public charity D 1. Foreign organizations, check here Final return Amended return 2. Foreign organizations meeting the 85% test, check here and attach computation Address change Name change H Check type of organization: X Section 501(c)(3) exempt private foundation E If private foundation status was terminated Section 4947(a)(1) nonexempt charitable trust Other taxable private foundation under section 507(b)(1)(A), check here Fair market value of all assets at end of year | J Accounting method: X Cash If the foundation is in a 60-month termination (from Part II, col (c), line 16) Other (specify) under section 507(b)(1)(B), check here 4,165,250. (Part I, column (d) must be on cash basis.) ▶\$ Part | Analysis of Revenue and Expenses (d) Disbursements (c) Adjusted net (a) Revenue and (b) Net investment (The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a)) expenses per books income ıncome N/A Contributions, gifts, grants, etc., received 2 Check \(\sum \overline{X} \) if the foundation is not required to attach Sch. 8 Interest on savings and temporary cash investments 33,7**4**7. 33,727 TATEMENT 60,358 60,358 STATEMENT Dividends and interest from securities 5a Gross rents b Net rental income or (loss) 124,339 6a Net gain or (loss) from sale of assets not on line 10 481,142. 7 Capital gain net income (from Part IV, line 2) 8 Net short-term capital gain Income modifications 10a Gross sales less return and allowances b Less Cost of goods sold c Gross profit or (loss) 85 85 STATEMENT 11 Other income 218,529 218,509 Total. Add lines 1 through 11 13 Compensation of officers, directors, trustees, etc 14 Other employee salaries and wages 15 Pension plans, employee benefits 16a Legal fees **b** Accounting fees 21,998. 21,998. 0. STMT 4 c Other professional fees 17 Interest 14,102. 3,081. 18 Taxes STMT 5 19 Depreciation and depletion 20 Occupancy 21 Travel, conferences, and meetings 22 Printing and publications 0. STMT 6 1,682. 1,682 23 Other expenses 24 Total operating and administrative 37,782 26,761 expenses. Add lines 13 through 23 202,041. 202,041. 25 Contributions, gifts, grants paid 1 1 2 1 ŵ 26 Total expenses and disbursements. 202,041 239,823 26,761 Add lines 24 and 25 27 Subtract line 26 from line 12: 38 <21,294. W. À & Excess of revenue over expenses and disbursements 191,748 b Net investment income (if negative, enter -0-) 11

. V. V.

623501 11-23-16 LHA For Paperwork Reduction Act Notice, see instructions.

Form **990-PF** (2016)

N/A

c Adjusted net income (if negative, enter -0-)

<u> </u>	ا الاست	Balance Sheets Attached schedules and amounts in the description	edules and amounts in the description Beginning of year End of year		of year
	art	column should be for end-of-year amounts only	(a) Book Value	(b) Book Value	(c) Fair Market Value
_	1	Cash - non-interest-bearing	1,654.	7,217.	7,217.
	2	Savings and temporary cash investments	957,776.	967,209.	967,209.
	3	Accounts receivable	N N J: I J: N X	1 3 1 3 1 3 1 2 2	STATE OF STATE
		Less; allowance for doubtful accounts	dieni milian illiano e e milian e e e milian	1,30 m, 1001's modern all a 2 m dispates deserved	takin madili. Adda r andika dili in matin di managi dili
	4	Pledges receivable			
	1	Less; allowance for doubtful accounts	dan dan dan da dan da	landa Balliota	. Do a de a como estado de de la decembra de la literación de la lateración de lateración de la lateración de lateraci
	5	Grants receivable			
	6	Receivables due from officers, directors, trustees, and other			
		disqualified persons			
	7	Other notes and loans receivable			
	1	Less: allowance for doubtful accounts			% & & & & & & & & & & & & & & & & & & &
Ś	8	Inventories for sale or use			
Assets		Prepaid expenses and deferred charges			
Ä		Investments - U.S. and state government obligations STMT 7	100,020.	100,020.	98,735.
		Investments - corporate stock STMT 8	1,328,743.	1,388,987.	2,042,481.
	ı	Investments - corporate bonds STMT 9	557,242.	447,996.	
	l	Investments -land, buildings, and equipment basis			
	``	Less accumulated depreciation	8."3 #. //. /2. 9. 8. A.	[7 % 4° -8 6°3 38 1% [
	12	Investments - mortgage loans			
		Investments - other STMT 10	479,323.	485,207.	563,727.
		Land, buildings, and equipment basis			
	l ''	Less accumulated depreciation			
	15	Other assets (describe			
	1	Total assets (to be completed by all filers - see the			
	"	instructions. Also, see page 1, item I)	3,424,758.	3,396,636.	4,165,250.
_	17	Accounts payable and accrued expenses	0,101,700		7,200,000
		Grants payable			
s	19	Deferred revenue			
Liabilities		Loans from officers, directors, trustees, and other disqualified persons			
ğ		Mortgages and other notes payable			
ؾ	i .	Other liabilities (describe)			
					
	23	Total liabilities (add lines 17 through 22)	0.	0.	
		Foundations that follow SFAS 117, check here			
		and complete lines 24 through 26 and lines 30 and 31.			
S	24	Unrestricted			
alances	[Temporarily restricted			
Bai		Permanently restricted	ļ		
ᅙ		Foundations that do not follow SFAS 117, check here			
2		and complete lines 27 through 31.			
ō	27	Capital stock, trust principal, or current funds	3,424,758.	3,396,636.	
Net Assets or Fund B		Paid-in or capital surplus, or land, bldg., and equipment fund	0.	0.	
Ass	29	Retained earnings, accumulated income, endowment, or other funds	0.	0.	
et		Total net assets or fund balances	3,424,758.	3,396,636.	
2	-	,		- 0,000,000	
	31	Total liabilities and net assets/fund balances	3,424,758.	3,396,636.	
귿				5,550,0500	
P	ärt	Analysis of Changes in Net Assets or Fund B	aiances		
1	Total	net assets or fund balances at beginning of year - Part II, column (a), line	30		
	(mus	t agree with end-of-year figure reported on prior year's return)		1	3,424,758.
2	Enter	amount from Part I, line 27a		2	<21,294.>
3	Othei	r increases not included in line 2 (itemize)		3	0.
4	Add I	ines 1, 2, and 3		4	3,403,464.
5	Decre	eases not included in line 2 (itemize) BOOK-TO-TAX TI	MING DIFFEREN		6,828.
6	Total	net assets or fund balances at end of year (line 4 minus line 5) - Part II, co	olumn (b), line 30	. 6	3,396,636.
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C/O BROWN & BROWN, LLC

36-3701371

Page 3

(a) List and desci 2-story brick wa	ibe the kind(s) of prop rehouse; or common s	erty sold (e.g., real estate, tock, 200 shs. MLC Co.)		(b) Ho P - F D - I	w acquired Purchase Donation) Date a mo., da	cquired ly, yr.)	(d) Date sold (mo., day, yr.)
1a									
b SEE ATTACHED	STATEMENT								·
<u> </u>				<u> </u>		↓_			
d				L		╀			
e				L		ᆚ			
(e) Gross sales price	(f) Depreciation a (or allowabl		st or other basis expense of sale			(ın or (loss) (f) mınus (
a				-					
b				_+					
C									
d			355 43	- +					104 220
e 481,142.			355,43	3.					124,339
Complete only for assets showin						(I) G	ains (Ce	oi. (h) gaın ot less thar	minus
(i) F.M.V. as of 12/31/69	(j) Adjusted b as of 12/31/		xcess of col. (1) r col. (1), if any			L	osses (from col. (i	h))
<u>a</u>									
b									
С				\bot					
d									
e									124,339
2 Capital gain net income or (net ca		ain, also enter in Part I, line oss), enter -0- in Part I, line		}	2				124,339
Net short-term capital gain or (los		•		´ [
If gain, also enter in Part I, line 8,		13 1222(0) 4110 (0).		11	ł				
If (loss), enter -0- in Part I, line 8	(0).			ß	3			N/A	
Part V Qualification U	nder Section 49	940(e) for Reduce	Tax on Net	Inve	stment	nco	me		
Vas the foundation liable for the sect "Yes," the foundation does not quali Enter the appropriate amount in e	fy under section 4940	(e). Do not complete this p	art.						Yes X No
: : : - :	acii columni loi cacii y		Tore making any cr						(d)
Base period years	Admisted	(b) qualifying distributions	Net value of no	(c) ocharita	hle-use ass	ets	. ,	Distrib	(d) ution ratio ided by col. (c))
Calendar year (or tax year beginnin	ig iii) Aujustee	215,621.	1100 10100		190,5			col. (b) div	• 05145
2015 2014		185,793.	 		153,8				.04472
2013		178,268.			641,0				.04896
2013		173,200.	 		109,9				.05562
2012		240,000.	 	3,	007,3	27			.07980
2011		240,000.		٠,	001,3				.07300
Total of line 1 column (d)						- 1	ا ۽		.28057
! Total of line 1, column (d)		uda aha aadal aa luaa O bu E			_	- 1	2		. 20037
Average distribution ratio for the 5		ride the total on line 2 by 5	, or by the number	or year:	5				05611
the foundation has been in existen	ice it less than 5 years					1	_3_		.05611
Enter the net value of noncharitable	le-use assets for 2016	from Part X, line 5				1	4		3,942,249
						Į	. [001
Multiply line 4 by line 3		•				- 1	5		221,219
							. [
Enter 1% of net investment incom	e (1% of Part I, line 27	b)				[6		1,917
						ļ	. (
Add lines 5 and 6		•	•			- [7		223,136
Enter qualifying distributions from	Part XII, line 4						8		202,041
If line 8 is equal to or greater than		n Dart VI line th and com	niata that nart usin	n a 10/	tav rate	١	1		
See the Part VI instructions.		n ran vi, mie iu, anu com	picie mai pari usin	ya 170	IAA IAIC.				

1335 FOUNDATION

Forn	n 990-PF (2016) C/O BROWN & BROWN, LLC		<u>5-370:</u>			age 4
Pa	art VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e)	, or 494	8 - see	instru	ction	s)
1a	Exempt operating foundations described in section 4940(d)(2), check here and enter "N/A" on line 1.				4.	1
	Date of ruling or determination letter: (attach copy of letter if necessary-see instructions)					<u>. 1</u>
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check here 🕨 📖 and enter 1%	<u> </u>	1		3,83	<u> </u>
	of Part I, line 27b			U 👬	dd.	\
C	: All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of Part I, line 12, col. (b).			ľ Lť		
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	<u></u>	2			0.
3	Add lines 1 and 2	ئےا	3		3,83	<u> 35.</u>
	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)		4			0.
5	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-	!	5		3,83	35.
6	Credits/Payments:	\		Mir		14
	2016 estimated tax payments and 2015 overpayment credited to 2016 6a 11,5	96.				
	Exempt foreign organizations - tax withheld at source					14
C	Tax paid with application for extension of time to file (Form 8868)		4 3 X	W.	3 %	34
d	Backup withholding erroneously withheld		4 3 N		<u> </u>	
	Total credits and payments. Add lines 6a through 6d	<u> </u>	7	1	1,59	6.
8	· · · · · · · · · · · · · · · · · · ·	⊢	8			
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed	· —	9			
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid		10		7,76	
_	Enter the amount of line 10 to be: Credited to 2017 estimated tax 7,761. Refund	ed 1	11			0.
	rt VII-A Statements Regarding Activities				· ·	
1a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or in	tervene in			Yes	
	any political campaign?			1a		<u>X</u>
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see instructions for the de			1b		X
	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.				\ .	\ \
	Did the foundation file Form 1120-POL for this year?	-		1c		X
d	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year:	^				. *
	(1) On the foundation. ▶ \$ \$ \$	0.				*
е	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation	n		1 1		
	managers. S 0.				11	X
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?			2		<u> </u>
•	If "Yes," attach a detailed description of the activities.				3.4	
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorpor	ation, or			3 %	:
4-	bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes			3		$\frac{\mathbf{x}}{\mathbf{x}}$
	Did the foundation have unrelated business gross income of \$1,000 or more during the year?		N/A	4a	\rightarrow	<u> </u>
	If "Yes," has it filed a tax return on Form 990-T for this year?		M/M	4b	}	X
9	Was there a liquidation, termination, dissolution, or substantial contraction during the year?			5	*	
۵	If "Yes," attach the statement required by General Instruction T			[1/4]	N V	<u>.</u>
0	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either:					
	By language in the governing instrument, or By containing that affectively among the property instrument as that are added as the property instrument.			1 %	1.4	
	By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the sequence that conflict with the sequence that the sequence tha	ne state law	,	الله علا الله	` x -	2
-	remain in the governing instrument?	D. 1301		6	$\frac{\mathbf{\hat{x}}}{\mathbf{x}}$	
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 F	an xv		7	A	· . 22.73
0.	Enter the states to which the foundation was to work which the resistant discussion of the states of					
oa	Enter the states to which the foundation reports or with which it is registered (see instructions)					
	IL					N
0	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate)			المُعَادِّةُ ا	*.	'لگ
_	of each state as required by General Instruction G? If "No," attach explanation		_	8b	X	\$100 m 1 1
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5)	tor calenda	.r			. L
10	year 2016 or the taxable year beginning in 2016 (see instructions for Part XIV)? If "Yes," complete Part XIV	-		9		$\frac{x}{x}$
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses	3		10 orm 990	DE /	
			10	カロ グラリ		(סו טב

Pa	art VII-A Statements Regarding Activities (continued)			
		T	Yes	No
11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of	1		
	section 512(b)(13)? If "Yes," attach schedule (see instructions)	11		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		x
12	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	X	
10	Website address N/A	19		
14	The books are in care of ▶ G. HOLZMAN C/O BROWN & BROWN LLC Telephone no.▶312-84	0_1	516	
17	Located at 225 W. WASHINGTON ST., SUITE 1650, CHICAGO, IL ZIP+4 >60		740	
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - Check here	000		Т
10		N	/A	
10			Yes	No
10	At any time during calendar year 2016, did the foundation have an interest in or a signature or other authority over a bank,	10	162	X
	securities, or other financial account in a foreign country?	16	<u>**</u>	<u> </u>
	See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes," enter the name of the			
Da	foreign country ► Int VIL B Statements Regarding Activities for Which Form 4720 May Be Required	** {	*	} ,}
<u> </u>	 	N A	Yes	No
1.	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.	1	162	140
14	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	14	X (
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from)			1
	a disqualified person?	1 %		
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? Yes X No		> V	
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?		. 🐔	K A
	(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)?			3 1
	(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.)		, N	P N
b	If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations	3 m		1. Y.
	section 53.4941(d)-3 or in a current notice regarding disaster assistance (see instructions)?	10		
	Organizations relying on a current notice regarding disaster assistance check here		3 .	, W
C	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected	i .	Si.	* 7
	before the first day of the tax year beginning in 2016?	1c		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)):		`	
а	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		, N/N ,	1 1
	before 2016? Yes X No		7.7 N	
	If "Yes," list the years		. 1	3 4
	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		23. A	
	statement - see instructions.) N/A	2b		
C	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here.		× %	,
	>	18.1		1
3a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time			
	during the year? $oxed{oxed}$ Yes $oxed{oxed{X}}$ No	\\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \		
þ	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	17 /3		
	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) N/A	3b		
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a		X
b	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that	13.2	`2 ·	t y j
	had not been removed from jeopardy before the first day of the tax year beginning in 2016?	4b		X
		rm 99 0)-PF	(2016)

Part VII-B Statements Regarding Activities for Which	rumii 4720 May be r	requireu (contini	<i></i>	
5a During the year did the foundation pay or incur any amount to:	<u>-</u> -			
(1) Carry on propaganda, or otherwise attempt to influence legislation (section	n 4945(e))?	Ye	es X No	
(2) Influence the outcome of any specific public election (see section 4955); of	or to carry on, directly or indire			
any voter registration drive?			es X No	
(3) Provide a grant to an individual for travel, study, or other similar purposes	•	Ye	s X No	
(4) Provide a grant to an organization other than a charitable, etc., organization	n described in section		_	
4945(d)(4)(A)? (see instructions)			es 🗶 No	
(5) Provide for any purpose other than religious, charitable, scientific, literary	or educational purposes, or f		[5 5]	
the prevention of cruelty to children or animals?			es X No	
b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify un		n Regulations	NT / N	
section 53.4945 or in a current notice regarding disaster assistance (see instri	•	-	N/A	5b
Organizations relying on a current notice regarding disaster assistance check in		4		
c If the answer is "Yes" to question 5a(4), does the foundation claim exemption to			🗀 🗤 📗	
expenditure responsibility for the grant?		I/A	es 🔲 No 🕍	
If "Yes," attach the statement required by Regulations section 53 494	• •		v.	
6a Did the foundation, during the year, receive any funds, directly or indirectly, to a personal benefit contract?	pay premiums on	[] v	es X No	
	Saraanal hamafit contract?		8 A 180	6b X
b Did the foundation, during the year, pay premiums, directly or indirectly, on a If "Yes" to 6b, file Form 8870	Dersonal Denemi Comiraci?		-	
7a At any time during the tax year, was the foundation a party to a prohibited tax	chalter transaction?		es X No	
b If "Yes," did the foundation receive any proceeds or have any net income attrib		· · ·	N/A	7b
Part VIII Information About Officers, Directors, Trust		nagers Highly		
Paid Employees, and Contractors	oco, i culturation me	magoro, mgm	•	
1 List all officers, directors, trustees, foundation managers and their	compensation.			
	(b) Title, and average hours per week devoted	(c) Compensation	(d) Contributions to employee benefit plans and deferred	(e) Expense account, other
(a) Name and address	to position	(If not paid, enter -0-)	and deferred compensation	allowances
	<u>-</u> -			
SEE STATEMENT 11		0.	0.	0.
SEE STATEMENT 11		0.		0.
SEE STATEMENT 11		0.		0.
SEE STATEMENT 11		0.		0.
SEE STATEMENT 11		0.		0.
SEE STATEMENT 11		0.		0.
SEE STATEMENT 11		0.		0.
SEE STATEMENT 11		0.		0.
SEE STATEMENT 11		0.		0.
				0.
SEE STATEMENT 11 2 Compensation of five highest-paid employees (other than those in			0.	
	(b) Title, and average hours per week		0.	(e) Expense account, other
Compensation of five highest-paid employees (other than those in (a) Name and address of each employee paid more than \$50,000		enter "NONE."		
2 Compensation of five highest-paid employees (other than those in	(b) Title, and average hours per week	enter "NONE."	0.	(e) Expense account, other
Compensation of five highest-paid employees (other than those in (a) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week	enter "NONE."	0.	(e) Expense account, other
Compensation of five highest-paid employees (other than those in (a) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week	enter "NONE."	0.	(e) Expense account, other
Compensation of five highest-paid employees (other than those in (a) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week	enter "NONE."	0.	(e) Expense account, other
Compensation of five highest-paid employees (other than those in (a) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week	enter "NONE."	0.	(e) Expense account, other
Compensation of five highest-paid employees (other than those in (a) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week	enter "NONE."	0.	(e) Expense account, other
Compensation of five highest-paid employees (other than those in (a) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week	enter "NONE."	0.	(e) Expense account, other
Compensation of five highest-paid employees (other than those in (a) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week	enter "NONE."	0.	(e) Expense account, other
Compensation of five highest-paid employees (other than those in (a) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week	enter "NONE."	0.	(e) Expense account, other
Compensation of five highest-paid employees (other than those in (a) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week	enter "NONE."	0.	(e) Expense account, other

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Total. Add lines 1 through 3

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 1a	
WANTED TO THE PARTY OF THE PART	
a Average monthly fair market value of securities	2,935,495.
b Average of monthly cash balances	834,335.
c Fair market value of all other assets	232,453.
d Total (add lines 1a, b, and c)	4,002,283.
e Reduction claimed for blockage or other factors reported on lines 1a and	
1c (attach detailed explanation)	
2 Acquisition indebtedness applicable to line 1 assets	0.
3 Subtract line 2 from line 1d	4,002,283.
4 Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions)	60,034.
5 Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4 5	3,942,249.
6 Minimum investment return. Enter 5% of line 5	197,112.
Part XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations and certain foreign organizations check here and do not complete this part.)	
1 Minimum investment return from Part X, line 6	197,112.
2a Tax on investment income for 2016 from Part VI, line 5	
b Income tax for 2016. (This does not include the tax from Part VI.)	
c Add lines 2a and 2b	3,835.
3 Distributable amount before adjustments. Subtract line 2c from line 1	193,277.
4 Recoveries of amounts treated as qualifying distributions	0.
5 Add lines 3 and 4 5	193,277.
6 Deduction from distributable amount (see instructions)	0.
7 Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1	193,277.
Part XII Qualifying Distributions (see instructions)	
1 Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:	000 041
a Expenses, contributions, gifts, etc total from Part I, column (d), line 26	202,041.
b Program-related investments - total from Part IX-B	
2 Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes	
3 Amounts set aside for specific charitable projects that satisfy the:	
a Suitability test (prior IRS approval required) 3a	
b Cash distribution test (attach the required schedule) 3b	
4 Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4	202,041.
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	0.
6 Adjusted qualifying distributions. Subtract line 5 from line 4	202,041.
Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation qualifies for the se	

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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				193,277.
2 Undistributed income, if any, as of the end of 2016				A 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
a Enter amount for 2015 only			0.	
b Total for prior years:) Y 2 1 1 2 1 8 1 3 4
		0.		
3 Excess distributions carryover, if any, to 2016:				
a From 2011 98,553.				
b From 2012 21,247.				
cFrom 2013 4,494.				
d From 2014				
eFrom 2015 15,791.				
f Total of lines 3a through e	140,085.			
4 Qualifying distributions for 2016 from				
Part XII, line 4: ►\$ 202,041.				
a Applied to 2015, but not more than line 2a			0.	
b Applied to undistributed income of prior				
years (Election required - see instructions)		0.		
c Treated as distributions out of corpus				
(Election required - see instructions)	0.			
d Applied to 2016 distributable amount				193,277.
e Remaining amount distributed out of corpus	8,764.			
5 Excess distributions carryover applied to 2016 (if an amount appears in column (d), the same amount	0.			0.
must be shown in column (a))				
6 Enter the net total of each column as				
indicated below:				
a Corpus Add lines 3f, 4c, and 4e Subtract line 5	148,849.			
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		0		
amount - see instructions		0.		
e Undistributed income for 2015. Subtract line			•	
4a from line 2a. Taxable amount - see instr.			0.	
f Undistributed income for 2016. Subtract				
lines 4d and 5 from line 1. This amount must				۸ ا
be distributed in 2017 7 Amounts treated as distributions out of				V •
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	98,553.			
9 Excess distributions carryover to 2017.	30,333.		12 N 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	
Subtract lines 7 and 8 from line 6a	50,296.			
0 Analysis of line 9:	30,230		* 3 (A) 1 YA	
a Excess from 2012 21,247.				
b Excess from 2013 4,494.				
c Excess from 2014				
d Excess from 2015 15,791.				
e Excess from 2016 8,764.				
23581 11-23-16	1 ~ ws , sw es) sw . 30			Form 990-PF (2016)

Part XIV Private Operating Fo	oundations (see ins	structions and Part VII	A, question 9)	N/A	
1 a If the foundation has received a ruling or	determination letter that	it is a private operating			
foundation, and the ruling is effective for	2016, enter the date of t	he ruling	•		
b Check box to indicate whether the found		-	section	4942(j)(3) or 49	142(J)(5)
2 a Enter the lesser of the adjusted net	Tax year		Prior 3 years		
income from Part I or the minimum	(a) 2016	(b) 2015	(c) 2014	(d) 2013	(e) Total
investment return from Part X for					
each year listed	1				
b 85% of line 2a					
c Qualifying distributions from Part XII,				<u> </u>	
line 4 for each year listed	İ				
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.	İ				
Subtract line 2d from line 2c	1			Į,	
3 Complete 3a, b, or c for the				 	
alternative test relied upon:	'			Ì	
a "Assets" alternative test - enter: (1) Value of all assets	1			·	
` '				 	
(2) Value of assets qualifying under section 4942(i)(3)(B)(i)	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				Į.	•
investment income (interest,					
dividends, rents, payments on					
securities loans (section 512(a)(5)), or royalties)				ì	
(2) Support from general public		 		 	L
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 Info	mation (Comple	te this part only	if the foundation	had \$5,000 or me	ore in assets
at any time during the			tilo localidation	11.00 \$0,000 07 111	
1 Information Regarding Foundation					
a List any managers of the foundation who		than 2% of the total contr	ibutions received by the	foundation before the clos	se of any tax
year (but only if they have contributed m	ore than \$5,000). (See s	ection 507(d)(2).)	.samono rocorros oy ano	7001700101010101010	o or any ass
ELIZABETH K. BROWN					
b List any managers of the foundation who			or an equally large portion	on of the ownership of a pa	artnership or
other entity) of which the foundation has	a 10% or greater interes	st.			
NONE					
2 Information Regarding Contribution					
Check here 🕨 🛣 if the foundation or					
the foundation makes gifts, grants, etc. (see instructions) to indiv	riduals or organizations ui	nder other conditions, co	omplete items 2a, b, c, and	d
a The name, address, and telephone numb	er or e-mail address of t	he person to whom applic	cations should be addres	ssed:	-
		.			
b The form in which applications should be	e submitted and informat	tion and materials they sh	ould include:		
c Any submission deadlines:					
d Any restrictions or limitations on awards	, such as by geographica	al areas, charitable fields,	kınds of institutions, or o	other factors:	

Part XV Supplementary Information (continued) Grants and Contributions Paid During the Year or Approved for Future Payment If recipient is an individual, Recipient show any relationship to Foundation Purpose of grant or Amount status of recipient any foundation manager contribution Name and address (home or business) or substantial contributor a Paid during the year BETH HILLEL TEMPLE NONE 501(C)(3) GENERAL OPERATIONS 6050 8TH AVENUE KENOSHA, WI 53143 20,000. BETH HILLEL TEMPLE NONE 501(C)(3) GENERAL OPERATIONS 6050 8TH AVENUE KENOSHA, WI 53143 500. BIG BROTHERS BIG SISTERS OF RACINE NONE 501(C)(3) GENERAL OPERATIONS AND KENOSHA COUNTIES 3131 TAYLOR AVENUE RACINE , WI 53405 1,000. BOYS AND GIRLS CLUB NONE 501(C)(3) GENERAL OPERATIONS 1715 52ND STREET KENOSHA, WI 53140 2,000. CARTHAGE COLLEGE NONE 501(C)(3) GENERAL OPERATIONS 2001 ALFORD DRIVE KENOSHA, WI 53140 25,000. SEE CONTINUATION SHEET(S) 202,041. Total **▶** 3a b Approved for future payment NONE Total

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Part XVI-A Analysis of Income-Producing Activities

		ed business income		ded by section 512, 513, or 514	(e)
1 Program service revenue:	(a) Business code	(b) Amount	(C) Exclu- sion code	(d) Amount	Related or exempt function income
8	_				'
b	-		ļ	<u> </u>	
·	-				
<u> </u>	-		├		
·	-				
g Fees and contracts from government agencies	-		-		
2 Membership dues and assessments	 				
3 Interest on savings and temporary cash					
investments	}	1	14	33,747.	
4 Dividends and interest from securities			14	60,358.	
5 Net rental income or (loss) from real estate:	1 8 8	1 1 1 W 1 1 W 1	V. A	Y A Y Y Y Y Y	
a Debt-financed property					
b Not debt-financed property					
6 Net rental income or (loss) from personal					
property					
7 Other investment income			14	85.	
8 Gain or (loss) from sales of assets other					1
than inventory			18	124,339.	
9 Net income or (loss) from special events	ļ	· -			
10 Gross profit or (loss) from sales of inventory		·			
11 Other revenue:	-		()		
å	-				
<u> </u>	- 				
<u> </u>	-	 	\vdash		
⁰					
			1 1		
6 12 Subtotal Add columns (b) (d) and (e)		0	200 30	218 529	
	. N. N. 1	0.	*	218,529.	
3 Total. Add line 12, columns (b), (d), and (e)		0.	* *	218,529. 13_	
3 Total. Add line 12, columns (b), (d), and (e)	<u> </u>			13	
13 Total. Add line 12, columns (b), (d), and (e) See worksheet in line 13 instructions to verify calculations.) Part XVI: B: Relationship of Activities Line No. Explain below how each activity for which inc.	to the Acco	omplishment of Ex	emp	13_ t Purposes	218,529 218,529
13 Total. Add line 12, columns (b), (d), and (e) See worksheet in line 13 instructions to verify calculations.) Part XVI-BI Relationship of Activities Line No. Explain below how each activity for which ine the foundation's exempt purposes (other that	s to the Acco	omplishment of Ex in column (e) of Part XVI-A nds for such purposes).	contrib	t Purposes suited importantly to the accomp	218,529
Line No. Explain below how each activity for which income the foundation's exempt purposes (other that ACTIVITIES ARE SOLELY	to the Accome is reported in by providing fu	omplishment of Ex in column (e) of Part XVI-A nds for such purposes).	contrib	t Purposes suited importantly to the accomp	218,529
See worksheet in line 13 instructions to verify calculations.) Part XVI-B Relationship of Activities Line No. Explain below how each activity for which ine the foundation's exempt purposes (other that	to the Accome is reported in by providing fu	omplishment of Ex in column (e) of Part XVI-A nds for such purposes).	contrib	t Purposes suited importantly to the accomp	218,529
See worksheet in line 13 instructions to verify calculations.) Part XVI B1 Relationship of Activities Line No. Explain below how each activity for which incomplete the foundation's exempt purposes (other that ACTIVITIES ARE SOLELY	to the Accome is reported in by providing fu	omplishment of Ex in column (e) of Part XVI-A nds for such purposes).	contrib	t Purposes suited importantly to the accomp	218,529
See worksheet in line 13 instructions to verify calculations.) Part XVI B1 Relationship of Activities Line No. Explain below how each activity for which incomplete the foundation's exempt purposes (other that ACTIVITIES ARE SOLELY	to the Accome is reported in by providing fu	omplishment of Ex in column (e) of Part XVI-A nds for such purposes).	contrib	t Purposes suited importantly to the accomp	218,529
See worksheet in line 13 instructions to verify calculations.) Part XVI B1 Relationship of Activities Line No. Explain below how each activity for which incomplete the foundation's exempt purposes (other that ACTIVITIES ARE SOLELY	to the Accome is reported in by providing fu	omplishment of Ex in column (e) of Part XVI-A nds for such purposes).	contrib	t Purposes suited importantly to the accomp	218,529
See worksheet in line 13 instructions to verify calculations.) Part XVI B1 Relationship of Activities Line No. Explain below how each activity for which incomplete the foundation's exempt purposes (other that ACTIVITIES ARE SOLELY	to the Accome is reported in by providing fu	omplishment of Ex in column (e) of Part XVI-A nds for such purposes).	contrib	t Purposes suited importantly to the accomp	218,529
See worksheet in line 13 instructions to verify calculations.) Part XVI B1 Relationship of Activities Line No. Explain below how each activity for which incomplete the foundation's exempt purposes (other that ACTIVITIES ARE SOLELY	to the Accome is reported in by providing fu	omplishment of Ex in column (e) of Part XVI-A nds for such purposes).	contrib	t Purposes suited importantly to the accomp	218,529
See worksheet in line 13 instructions to verify calculations.) Part XVI B1 Relationship of Activities Line No. Explain below how each activity for which incomplete the foundation's exempt purposes (other that ACTIVITIES ARE SOLELY	to the Accome is reported in by providing fu	omplishment of Ex in column (e) of Part XVI-A nds for such purposes).	contrib	t Purposes suited importantly to the accomp	218,529
See worksheet in line 13 instructions to verify calculations.) Part XVI B1 Relationship of Activities Line No. Explain below how each activity for which incomplete the foundation's exempt purposes (other that ACTIVITIES ARE SOLELY	to the Accome is reported in by providing fu	omplishment of Ex in column (e) of Part XVI-A nds for such purposes).	contrib	t Purposes suited importantly to the accomp	218,529
See worksheet in line 13 instructions to verify calculations.) Part XVI B1 Relationship of Activities Line No. Explain below how each activity for which incomplete the foundation's exempt purposes (other that ACTIVITIES ARE SOLELY	to the Accome is reported in by providing fu	omplishment of Ex in column (e) of Part XVI-A nds for such purposes).	contrib	t Purposes suited importantly to the accomp	218,529
See worksheet in line 13 instructions to verify calculations.) Part XVI B1 Relationship of Activities Line No. Explain below how each activity for which incomplete the foundation's exempt purposes (other that ACTIVITIES ARE SOLELY	to the Accome is reported in by providing fu	omplishment of Ex in column (e) of Part XVI-A nds for such purposes).	contrib	t Purposes suited importantly to the accomp	218,529
See worksheet in line 13 instructions to verify calculations.) Part XVI B1 Relationship of Activities Line No. Explain below how each activity for which incomplete the foundation's exempt purposes (other that ACTIVITIES ARE SOLELY	to the Accome is reported in by providing fu	omplishment of Ex in column (e) of Part XVI-A nds for such purposes).	contrib	t Purposes suited importantly to the accomp	218,529
See worksheet in line 13 instructions to verify calculations.) Part XVI B1 Relationship of Activities Line No. Explain below how each activity for which incomplete the foundation's exempt purposes (other that ACTIVITIES ARE SOLELY	to the Accome is reported in by providing fu	omplishment of Ex in column (e) of Part XVI-A nds for such purposes).	contrib	t Purposes suited importantly to the accomp	218,529
3 Total. Add line 12, columns (b), (d), and (e) See worksheet in line 13 instructions to verify calculations.) Part XVI B1 Relationship of Activities Line No. Explain below how each activity for which incompared the foundation's exempt purposes (other that ACTIVITIES ARE SOLELY	to the Accome is reported in by providing fu	omplishment of Ex in column (e) of Part XVI-A nds for such purposes).	contrib	t Purposes suited importantly to the accomp	218,529
3 Total. Add line 12, columns (b), (d), and (e) See worksheet in line 13 instructions to verify calculations.) Part XVI B1 Relationship of Activities Line No. Explain below how each activity for which incompared the foundation's exempt purposes (other that ACTIVITIES ARE SOLELY	to the Accome is reported in by providing fu	omplishment of Ex in column (e) of Part XVI-A nds for such purposes).	contrib	t Purposes suited importantly to the accomp	218,529
3 Total. Add line 12, columns (b), (d), and (e) See worksheet in line 13 instructions to verify calculations.) Part XVI B1 Relationship of Activities Line No. Explain below how each activity for which incompared the foundation's exempt purposes (other that ACTIVITIES ARE SOLELY	to the Accome is reported in by providing fu	omplishment of Ex in column (e) of Part XVI-A nds for such purposes).	contrib	t Purposes suited importantly to the accomp	218,529
See worksheet in line 13 instructions to verify calculations.) Part XVI B1 Relationship of Activities Line No. Explain below how each activity for which incomplete the foundation's exempt purposes (other that ACTIVITIES ARE SOLELY	to the Accome is reported in by providing fu	omplishment of Ex in column (e) of Part XVI-A nds for such purposes).	contrib	t Purposes suited importantly to the accomp	218,529

Yes No

Rart XVII Information Regarding Transfers To and Transactions and Relationships With Noncharitable **Exempt Organizations**

2a is the foundation directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described in section 501(c) of the Code (other than section 501(c)(3)) or in section 527? Yes X No If Yes, complete the following schedules d satements, and to the best of my knowledge No If Yes, complete If Yes	1 Did the o	organization directly or indir	ectly engage in any	of the followin	g with any other organiz	ation (described in sect	tion 501(c) of	. ₹ Yes	No
(1) Cash (2) Other asserts (2) Other asserts (3) Retria of facilities, equipment, or other asserts (1) Sate of sasets to a noncharitable exempt organization (3) Retrial of facilities, equipment, or other asserts (3) Retrial of facilities, equipment, arrangement of services or membership or fundrising solicitations (3) Performance of services or membership or fundrising solicitations (3) Performance of services or membership or fundrising solicitations (3) Performance of services or membership or fundrising solicitations (3) Performance of services or membership or fundrising solicitations (3) Performance of services or membership or fundrising solicitations (3) Performance of services or membership or fundrising solicitations (3) Performance of services or membership or fundrising solicitations (3) Performance of services or membership or fundrising solicitations (3) Performance of services or membership or fundrising solicitations (4) Performance of services or membership or fundrising solicitations (4) Performance of services or membership or fundrising solicitations (5) Loss or loss of the graph of the following schedule. Column (b) should always show the fair market value of the goods, other assets, or services received. (a) Line ro (b) Amount involved (c) Name of noncharitable exempt organization (d) Description of resistionship (e) Amount involved (e) Name of noncharitable exempt organization (b) Type of organization (c) Description of resistionship N/A (b) Type of organization (c) Description of resistionship (c) Description of resistionship (e) Description of resistionship (the Code	e (other than section 501(c)	(3) organizations) c	or in section 52	7, relating to political or	ganıza	tions?		A 18 4 1 C 1	
(2) Other assets Other transactors: (1) Sales of assets to a nonchartable exempt organization (2) Purchases of assets from a nonchartable exempt organization (3) Rental of facilities, equipment of other assets (4) Rental of facilities, equipment of other assets (5) Loans or of band guirantees (6) Loans or of band guirantees (6) Loans or of band guirantees (6) Loans or of band guirantees (7) Sales of assets to a nonchartable exempt organizations (8) Loans or of band guirantees (9) Loans or of band guirantees (10) Loans of band guirantees (1	a Transfer	rs from the reporting founda	ation to a noncharita	ible exempt or	ganization of:					
Comparison Com	(1) Cas	sh <u>.</u>							1a(1)	
(1) Sales of assets for a noncharbable exempt organization (3) Rental of facilities, equipment, or other assets (4) Reimbursoment arrangements (4) Reimbursoment arrangements (5) Loss or Nang quistrantees (6) Performance of services or membership or fundriasing solicitations (6) Performance of services or membership or fundriasing solicitations (7) Performance of services or membership or fundriasing solicitations (8) Reimbursoment arrangement, making lists, other assets, or paid employees (1) It is answer to any of the above is 7'vs, complete the following schedule. Column (1) should always show the fair market value of the goods, other assets, or services process or new by the reporting foundation. If the foundation received sets than fair market value in any transaction or sharing arrangement, show in column (1) the value of the goods, other assets, or services received. (6) Amount involved (9) Amount involved (1) Name of nonchartable exempt organization (1) Description of transfers, and sharing arrangements (1) N/A (1) Description of transfers, and sharing arrangements (1) N/A (1) Name of organization (1) N/A (1) Name of organization (1) N/A (1) Name of organization (1) N/A (1) Name of organization (1) N/A (1) Name of organization (1) N/A (1) Name of organization (1) N/A (1) Name of organization (1) N/A (1) Name of organization (1) N/A (1) Name of organization (1) N/A (1) Name of organization (1) N/A (1) Name of organization (1) N/A (1) Name of organization (1) N/A (1) Name of organization (1) N/A (1) Name of organization (1) N/A			-							
(2) Purchases of assets from a noncharable exempt organization (3) Rental of facilities, equipment, or other assets (4) Reimbursement arrangements (5) Loans or load quarantees (6) Performance of services or membership or fundracing solicitations (7) Sharing of facilities, equipment, making lists, other assets, or paid employee (8) Performance of services or "Yes", complete the following schedule. Column (b) should always show the fair market value of the goods, other assets, or services given by the reporting foundation. If the foundation received less than fair market value in any transaction or sharing arrangement, show in column (b) the value of the goods, other assets, or services received. (a) Name of noncharitable exempt organization (b) Amount involved (c) Name of noncharitable exempt organization (d) Cascurption of transfers, transactions, and sharing arrangements. N/A (d) Name of noncharitable exempt organization (d) Description of relationship N/A (e) The Code (other than section 501(c)(3)) or in section 52?? (b) If Yes, complete the following schedule. (a) Name of generalization (b) Type of organization (c) Description of relationship N/A (d) State of generalization (e) Description of relationship N/A (a) Name of generalization or generalization or generalization or which preparer has any browdedge advantable and authority, in the best of my browdedge advantable and authority in the best of my browdedge advantable and authority in the best of my browdedge advantable and authority in the best of my browdedge advantable and authority in the best of my browdedge advantable and authority in the best of my browdedge advantable and authority in the best of my browdedge advantable and authority in the best of my browdedge advantable and authority in the best of my browdedge advantable and authority in the best of my browdedge advantable and authority in the best of my browdedge advantable and authority in the best of my browdedge advantable and authority in the best of my browdedge									10 L is 12	
(a) Remail of facilities, equipment, or other assets (b) Coats or load quarantees (c) Performance of services or membership or fundrasing solicitations (d) Performance of services or membership or fundrasing solicitations (e) Performance of services or membership or fundrasing solicitations (f) It was not load quarantees (g) It was not not be above in "Yes," complete the following schedule. Column (b) should always show the fair market value of the goods, other assets, or services received. (a) Use no (b) Amount involved (c) Name of noncharitable exempt organization (d) Description of varieties, transactions, and sharing arrangements 2a. Is the foundation directly or indirectly affiliated with, or related to, one or more tax-exempt organization (d) Description of varieties, transactions, and sharing arrangements (a) Description of relationship 2b. If "Yes," complete the following schedule. (b) Amount involved (c) Name of noncharitable exempt organizations described in section 501(c) of the Code (other than section \$51(c)(3)) or in section \$52.77\$ If "Yes," complete the following schedule. (b) Type of organization (d) Description of relationship N/A (c) Description of relationship N/A (d) Description of relationship N/A (e) PRESIDENT PRESIDENT PRESIDENT PRESIDENT PRESIDENT PRESIDENT Prints aid eventually a finite processed and information of which peptare has any knowledge in the processed and information of which peptare has any knowledge in the processed of the	• •		, ,	•						
(d) Reimbursement arrangements (5) Loans or loan guarantees (6) Performance of services or membership or fundrasing solicitations (6) Performance of services or membership or fundrasing solicitations (7) A strain of facilities, equipment, making lists, other assets, or paid employees (8) If the answer to any of the above "Yes", complete the following schedule. Column (b) should always show the fair market value of the goods, other assets, or services green by the reporting foundation. If the foundation received less than fair market value in any transaction or sharing arrangement, show in column (d) the value of the goods, other assets, or services received. (e) Iver no (b) Amount involved (c) Name of noncharitable exempt organization (d) Description of transfers, received one, and sharing arrangements. N/A (d) Description of transfers, received one, and sharing arrangements in section 501(c) of the Code (other than section 501(c))) or in section 527? Ves X No			•	organization (1
(6) Leans or loan guarantees (6) Performance of services or membership or fundraising solicitations (7) Et (10)	7.7							•		
(e) Performance of services or membership or fundrasing solicitations (e) Shamp of facilities, equipment, making bits, other assets, to paid employees (f) If the answer to any of the above is "Yes," complete the following schedule. Column (b) should always show the fair market value of the goods, other assets, or services given by the reporting foundation. If the foundation received less than fair market value in any transaction or sharing arrangement, show in column (d) the value of the goods, other assets, or services received. (e) Live rice (b) Amount involved (c) Name of noncharitable exempt organization (d) Description of transfers, Sansactions, and sharing arrangements N/A 2a is the foundation directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described in section 501(c) of the Code (other than section 501(c)(3)) or in section 527? Yes	• •	•		•						
C Sharing of facilities, equipment, mailing lists, other assets, or paid employees d if the ainswer to any of the aboves "Yes," complete the following schedule. Column (a) should always show the fair market value of the goods, other assets, or services received. (a) the value of the goods, other assets, or services received. (a) the value of the goods, other assets, or services received. (b) Amount involved (c) Name of noncharitable exempt organization (d) Description of varieties, variescions, and sharing arrangements N/A 2a is the foundation directly or indirectly affiliated with, or related to, one or more tax-exempt organization section 501(c) of the Code (other than section 501(c)(3)) or in section 527? 1 Yes, complete the following schedule. (a) Name of organization (b) Type of organization (c) Description of relationship N/A 10 Description of relationship 10 Description of relationship 10 Description of relations		=								
4 If the answer to any of the above is "Yes," complete the following schedule. Column (b) should always show the fair market value of the goods, other assets, or services given by the reporting foundation. If the foundation received less than fair market value in any transaction or sharing arrangement, show in column (g) the value of the goods, other assets, or services received. (a) Inveit it will be shown that the proposed of the same of the proposed of the proposed of the same of the proposed of			· ·	=	=					
or services given by the reporting foundation. If the foundation received less than fair market value in any transaction or sharing arrangement, show in column (4) the value of the goods, other assets, or services received. (a) Livin no (b) Amount involved (c) Name of noncharitable exempt organization (d) Description of transfers, transactions, and sharing arrangements N / A 2a is the foundation directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described in section 501(c) of the Code (other than section 501(c)3) or in section 52?? 1 yes \ X \ No 11 yes, complete the following schedule. (a) Name of organization (b) Type of organization (c) Description of relationship N / A	-		- ·	•	•	ahaa	ve chow the fair	market value of the ac	L	<u> </u>
(a) The value of the goods, other assets, or services received. (a) The value of the goods, other assets, or services received. (b) Amount involved (c) Name of noncharitable exempt organization (d) Description of bransfers, transactions, and sharing arrangements N/A 2a is the foundation directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described in section 501(c) of the Code (other than section 501(c)) 3)) or in section 52?? If Yes, complete the following schedule. (a) Name of organization (b) Type of organization (c) Description of relationship N/A Sign and bearf, it is true, correct, and complete Declaration of prepare (other than section 501) Sign and bearf, it is true, correct, and complete Declaration of prepare (other than section 501) Sign and bearf, it is true, correct, and complete Declaration of prepare (other than support of the prepare). Sign and bearf, it is true, correct, and complete Declaration of prepare (other than support of the prepare). Sign attrict of official or furtiste Date Proparer: JENNIFER J. DOBOSH Firm's name ■ BROWN & BROWN, LLC Firm's address ▶ 225 W. WASHINGTON ST SUITE 1650 Phone no. 312-327-2095										
(a) Name of nonchartable exempt organization (d) Description of vanishers, vanisactions, and sharing arrangements N/A 2a is the foundation directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described in section 50 (ic) of the Code (other than section 50 (ic) of the Code (other than section 50 (ic) of the Code (other than section 50 (ic) of ithe Code (other than					cu icas titali itali iliaiket i	aluc i	ii aiiy transactioi	i or sharing arrangen	icit, silow iii	
N/A 2a is the foundation directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described in section 501(c) of the Code (other than section 501(c)(3)) or in section 527? □ If "Yes," complete the following schedule. (a) Name of organization (b) Type of organization (c) Description of relationship N/A Sign and belief, it is true, correct, and complete Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge information of which preparer has any knowledge shown to the preparer shown below (see yes)? Sign and belief, it is true, correct, and complete Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge shown to the preparer shown below (see yes)? □ □ □ □ □ □ PRESIDENT □ □ □ □ □ PRESIDENT □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □		``			exempt organization		(d) Descriptio	n of transfers, transaction	ns, and sharing arrangem	ents
2a Is the foundation directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described in section 501(c) of the Code (other than section 501(c)(3)) or in section 527? □ Yes ■ No b If "Yes," complete the following schedule. (a) Name of organization (b) Type of organization (c) Description of relationship N/A Under penalties of perpert, idectire that I have scanned this relian, including accompanying schedules and statements, and to the best of my knowledge in the No. correct, and complete Dectardance of propare (other than scapped in a based on all information of which prepare has any knowledge Printing of preparer's name Preparer's signature 10 - 3 - 11	`		(-,							
In section 501(c) of the Code (other than section 501(c)(3)) or in section 527? Yes										
In section 501(c) of the Code (other than section 501(c)(3)) or in section 527? Yes										
In section 501(c) of the Code (other than section 501(c)(3)) or in section 527? Yes							'		··	
In section 501(c) of the Code (other than section 501(c)(3)) or in section 527? Yes										
In section 501(c) of the Code (other than section 501(c)(3)) or in section 527? Yes										
In section 501(c) of the Code (other than section 501(c)(3)) or in section 527? Yes										
In section 501(c) of the Code (other than section 501(c)(3)) or in section 527? Yes										
In section 501(c) of the Code (other than section 501(c)(3)) or in section 527? Yes										
In section 501(c) of the Code (other than section 501(c)(3)) or in section 527? Yes										
In section 501(c) of the Code (other than section 501(c)(3)) or in section 527? Yes								·		
In section 501(c) of the Code (other than section 501(c)(3)) or in section 527? Yes										
In section 501(c) of the Code (other than section 501(c)(3)) or in section 527? Yes			<u> </u>		 					
In section 501(c) of the Code (other than section 501(c)(3)) or in section 527? Yes	\longrightarrow		<u> </u>							
In section 501(c) of the Code (other than section 501(c)(3)) or in section 527? Yes			ļ		 					
In section 501(c) of the Code (other than section 501(c)(3)) or in section 527? Yes	<u> </u>					بـــــ	<u> </u>			
b if "Yes," complete the following schedule. (a) Name of organization (b) Type of organization (c) Description of relationship N/A Sign Under penalties of perjury, 1 declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete Declaration of preparer (other than/taxpayer) is based on all information of which preparer has any knowledge PRESIDENT Title Print/Type preparer's name Preparer's signature Print/Type preparer's name Preparer's signature Print/Type preparer's name Preparer's signature Print/Type preparer's name PRESIDENT Title Print/Type preparer's name Preparer's signature Print/Type preparer's name Preparer's signature Print/Type preparer's name Print/Type preparer'			•			anızat	ions described			7) n.
(a) Name of organization N/A Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge blown below (see inst)? Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge shown below (see inst)? PRESIDENT PRESIDENT)(3)) or in sect	ion 52/?	•			L Yes L <u>.∡</u>	₽] N0
N/A Sign Here Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete Declaration of preparer (other thany taxpayer) is based on all information of which preparer has any knowledge shown below (see inst.)? Print/Type preparer's name Preparer's signature Print/Type preparer's name Preparer's signature Date JENNIFER J. DOBOSH Preparer's signature Date JENNIFER J. DOBOSH Prim's name BROWN & BROWN, LLC Firm's lin Firm's EIN 36-4160073 Phone no. 312-327-2095	b if Yes, c				(h) Type of organization	n I		(c) Description of rela	ationehin	
Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge shown below (see inst)? PRESIDENT PRESIDENT PRESIDENT PRESIDENT Print/Type preparer's name Preparer's signature Date Date Print/Type preparer's name Preparer's signature Date Print/Type preparer's name Preparer's signature Print/Type preparer's name Print/Type preparer's name Preparer's signature Print/Type preparer's name Preparer's signature Print/Type preparer's name Preparer's signature Print/Type preparer's name Print/Type preparer's name Preparer's signature Print/Type preparer's name Print/Type pr					(b) Type of organization	" -		(c) Description of real	adoliship	
Sign Here Signature of officer or trustee Date Date Print/Type preparer's name Preparer's signature Date Date Print/Type preparer's name Preparer's signature Print/Type preparer's name Print/Type preparer's name Preparer's signature Print/Type preparer's name Print/Type preparer's name Print/Type preparer's name Print/Type preparer's name Preparer's signature Print/Type preparer's name		<u>N/A</u> _								
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Sign Here Signature of officer or trustee Date Title Print/Type preparer's name Preparer's signature Date Date Date Print/Type preparer's name Preparer's signature Print/Type prepa									May the IRS discuss	thie
Here Signature of officer or trustee Print/Type preparer's name Preparer Preparer Signature of officer or trustee Date Print/Type preparer's name Preparer's signature Print/Type preparer's name Preparer's signature Print/Type preparer's name Preparer's signature Date Check if self- employed Print's elin ▶ 36-4160073 Firm's address ▶ 225 W. WASHINGTON ST SUITE 1650 CHICAGO, IL 60606 Phone no. 312-327-2095	Sign and b	belief, it is true, correct, and com	iplete Declaration of pr	eparer (other than	y taxpayer) is based on all in	formati	on of which prepare	r has any knowledge	return with the prepa	rer
Paid Print/Type preparer's name Preparer JENNIFER J. DOBOSH Preparer Use Only Firm's address ▶ 225 W. WASHINGTON ST SUITE 1650 CHICAGO, IL 60606 Date Title Date Check if PTIN self-employed Print's self-employed Firm's EIN ▶ 36-4160073 Phone no. 312-327-2095	Here	Misales	in Ky	rows	10-30-1	7	PRESI	DENT		7 .
Paid Preparer Use Only JENNIFER J. DOBOSH JENNIFER J. DOBOSH JENNIFER J. DOBOSH JENNIFER J. DOBOSH PROWN & BROWN, LLC Prim's all N ≥ 36-4160073 Firm's address ≥ 225 W. WASHINGTON ST SUITE 1650 CHICAGO, IL 60606 Phone no. 312-327-2095	Sig	nature of officer or trustee	<u> </u>		Date	+ -				
Paid JENNIFER J. DOBOSH JENNIFER J. DOBOSH P00851182 Preparer Firm's name ► BROWN & BROWN, LLC Firm's EIN ► 36-4160073 Firm's address ► 225 W. WASHINGTON ST SUITE 1650 Phone no. 312-327-2095		Print/Type preparer's na	me	Preparer's si	gnature	D	ate	Check if	PTIN	
Preparer Use Only Firm's name ▶ BROWN & BROWN, LLC Firm's EIN ▶ 36-4160073 Firm's address ▶ 225 W. WASHINGTON ST SUITE 1650 Phone no. 312-327-2095				\triangle	1000	ر ا پر	احداحا	self- employed		
Use Only Firm's address 225 W. WASHINGTON ST SUITE 1650 Phone no. 312-327-2095				Jan	my coves	<u>'</u> 41	ן ון וגןט			<u> </u>
Firm's address ▶ 225 W. WASHINGTON ST SUITE 1650 CHICAGO, IL 60606 Phone no. 312-327-2095			WN & BROW	N, LLC				Firm's EIN ► 36	5-4160073	
CHICAGO, IL 60606 Phone no. 312-327-2095	Use Only									
		1			ST SUIT	Έ	1650			
Form 990-PF (2016)		CH:	ICAGO, II	60606				Phone no. 312		
									Form 990-PF	(2016)

Part IV Capital Gains and Losses for Tax on Investment Income (b) How acquired P - Purchase D - Donation (a) List and describe the kind(s) of property sold, e.g., real estate, (c) Date acquired (d) Date sold 2-story brick warehouse; or common stock, 200 shs. MLC Co. (mo., day, yr.) (mo., day, yr.) 1a 50,000 SHS ABBVIE 1.750% 11/6/17 DTD P 08/22/1612/19/16 b 300 SHS ILLINOIS TOOL WORKS INC. P 06/21/1210/19/16 COM c 50,000 SHS FHLMC CD15 1.250% DUE 8/26/20 P 08/11/1508/26/16 50,000 SHS FNMA MSTEP CD16 1% DUE 12/27/18 12/17/1203/27/16 P e 50,000 SHS HEALTH NET CD16 6.375% DUE 6/1/17 P 12/17/12[2/09/16 f 50,000 SHS MANITOWAOC CD16 8.599% DUE 11/1/20 P 05/24/1303/03/16 g 1,200 SHS ILLINOIS TOOL WORKS INC. P 03/12/0910/19/16 COM h 50,000 SHS PARNERRE CD16 6.785% DUE 6/1/17 P 12/17/1212/09/16 FROM FLOW-THROUGH (MARKETABLE SECURITIES LLC) P VARIOUS 12/31/16 FROM FLOW-THROUGH (MARKETABLE SECURITIES LLC) VARIOUS 12/31/16 P m n 0 (f) Depreciation allowed (g) Cost or other basis (h) Gain or (loss) (e) Gross sales price (or allowable) plus expense of sale (e) plus (f) minus (g) 82. 50,313 50,231 15,984. 34,602. 18,618. b С 50,000. 50,008 <8.> 50,000. 50,005 <5.> d 51,300. 50,303 997. 52,125. 54,837. <2,712.>138,409. 34,200. 104,209. 54,393. 49,865. 4,528. h <904.> <466.> m n 0 Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69 (I) Losses (from col. (h)) Gains (excess of col. (h) gain over col. (k), (k) Excess of col. (ı) (j) Adjusted basis (i) F.M.V. as of 12/31/69 but not less than "-0-") as of 12/31/69 over col. (j), if any 82. 18,618. b <8.> С <5.> d 997. <2,712.> 104,209. 4,528. <904.> <466.> m п 0 { If gain, also enter in Part I, line 7 } If (loss), enter "-0-" in Part I, line 7 } 124,339. 2 Capital gain net income or (net capital loss) 2 Net short-term capital gain or (loss) as defined in sections 1222(5) and (6): if gain, also enter in Part I, line 8, column (c). If (loss), enter "-0-" in Part I, line 8 3 N/A

3 Grants and Contributions Paid During the Y	ear (Continuation)			
Recipient	If recipient is an individual, show any relationship to	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	any foundation manager or substantial contributor	recipient	CONDIDUCTOR	
		i		1
CHICAGO YOUTH CENTERS	NONE	501(C)(3)	GENERAL OPERATIONS	
218 S. WABASH AVE #600		1	1	
CHICAGO, IL 60604	 	<u> </u>		100
CUSH (WISDOM, INC.)	NONE	501(C)(3)	GENERAL OPERATIONS	1:
P.O. BOX 1324, 5605 SHERIDAN RD.			1	
KENOSHA, WI 53141	 	 	 	250
FIELD MUSEUM	NONE	501(C)(3)	GENERAL OPERATIONS	
1400 S. LAKE SHORE DRIVE CHICAGO, IL 60605				150
careas, 12 00003	 	 		
FIRST METHODIST CHURCH	NONE	501(C)(3)	GENERAL OPERATIONS	
919 60TH STREET	NOME	01(0)(3)	SENERAL OPERATIONS	
KENOSHA, WI 53140		{	- (250
		1		
FREE THE CAPTIVEES	NONE	501(C)(3)	GENERAL OPERATIONS	
2211 RAYFORD ROAD, SUITE 111-418	HONE	P01(c)(3)	SENERAL OFERATIONS	
SPRING , TX 77386		1		1,000.
	<u> </u>	1		
GATEWAY TECHNICAL COLLEGE FOUNDATION	NONE	501(C)(3)	GENERAL OPERATIONS	
3520 30TH AVENUE				
KENOSHA, WI 53144	<u> </u>	<u> </u>		3,000.
		1		
GOODWILL INDUSTRIES	NONE	501(C)(3)	GENERAL OPERATIONS	
8600 SHERIDAN ROAD		4		
KENOSHA, WI 53143	 		 	2,000.
		1		i
JEWISH COMMUNITY FOUNDATION	NONE	501(C)(3)	GENERAL OPERATIONS	
5315 CHESTNUT DRIVE				15 000
RACINE, WI 53402	 	 	 	15,000
KENOSHA ACHIEVEMENT CENTER	NONE	501(C)(3)	GENERAL OPERATIONS	
1218 79TH STREET KENOSHA WT 53143		1		2,000.
KENOSHA, WI 53143	+	 	+	2,000
KENOSHA CHRISTMAS CHARITIES	NONE	501(C)(3)	GENERAL OPERATIONS	
(GOODFELLOWS)		1		
5800 7TH AVENUE KENOSHA, WI 53140		<u>}</u>		1,000
Total from continuation sheets				153,541,
· oth nom community) silects			_ <u></u>	

3 Grants and Contributions Paid During the	fear (Continuation)			
Recipient	If recipient is an individual, show any relationship to any foundation manager	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	or substantial contributor	recipient		
KENOSHA COMMUNITY FOUNDATION	NONE	501(C)(3)	GENERAL OPERATIONS	li
5315 CHESTNUT DRIVE		1		
RACINE, WI 53402	-	 		5,000
KENOSHA COUNTY HISTORICAL SOCIETY 220 51ST PLACE	NONE	501(C)(3)	GENERAL OPERATIONS	1
KENOSHA, WI 53140		l		10,000
KENOSHA HISTORY CENTER	NONE	501(C)(3)	GENERAL OPERATIONS	
220 51ST PLACE		1		•
KENOSHA, WI 53140		<u> </u>		1,000
KENOSHA LITERACY COUNCIL	NONE	501(C)(3)	GENERAL OPERATIONS	
2424 63RD STREET KENOSHA, WI 53143				2,000
PENOGUA DUDI TO LEDDADY POIDAMEON	NONE	E01/(0)/(3)	GENERAL OPERATIONS	
KENOSHA PUBLIC LIBRARY FOUNDATION P.O. BOX 1414	NONE	501(C)(3)	GENERAL OPERATIONS	
KENOSHA, WI 53143				2,000
KENOSHA PUBLIC MUSEUMS FOUNDATION	NONE	501(C)(3)	GENERAL OPERATIONS	
5500 FIRST AVENUE				ı
KENOSHA, WI 53140				3,000
RENOSHA SYMPHONY ASSOCIATION 723 58TH STREET, SUITE 301	NONE	501(C)(3)	GENERAL OPERATIONS	
KENOSHA, WI 53140				1,000
MICROGRANTS	NONE	501(C)(3)	GENERAL OPERATIONS	
1035 E. FRANKLIN AVE				
MINNEAPOLIS, MN 55404	 	 	 	50,000
MILWAUKEE PUBLIC RADIO P.O. BOX 88890	NONE	501(C)(3)	GENERAL OPERATIONS	
MILWAUKEE, WI 53288				_250
41LWAUREE PUBLIC TELEVISION	NONE	501(C)(3)	GENERAL OPERATIONS	
1036 N. 8TH STREET				
MILWAUKEE, WI 53233	1	1	1	250

3 Grants and Contributions Paid During the				
Recipient	If recipient is an individual, show any relationship to any foundation manager	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	or substantial contributor	recipient		
				
PHILLIPS EXETER ACADEMY	NONE	501(C)(3)	GENERAL OPERATIONS	
20 MAIN STREET EXETER, NH 03833		Ì		15,000
Endlin, an Oscio	 	 		13,000
PLANNED PARENTHOOD OF WISCONSIN	NONE	501(C)(3)	GENERAL OPERATIONS	
302 NORTH JACKSON STREET				
MILWAUKEE, WI 53202				1,500
PRINCETON UNIVERSITY	NONE	501(C)(3)	GENERAL OPERATIONS	
330 ALEXANDER STREET		1		
PRINCETON, NJ 08540		 		1,000
G112-112				
SHALVA, INC. P.O. BOX 46375	NONE	501(C)(3)	GENERAL OPERATIONS	
CHICAGO, IL 60646		1		5,000
		 		,
ST. JOSEPH CATHOLIC ACADEMY	NONE	501(C)(3)	GENERAL OPERATIONS	
2401 69TH STREET	NONE	701(0)(3)	Parama or area tono	
KENOSHA, WI 53143				3,000
THE CHILDREN'S ASSESSMENT CENTER	NONE	501(C)(3)	GENERAL OPERATIONS	ı
2500 BOLSOVER STREET			Ti .	,
HOUSTON, TX 77005		 -		2,000
THE SHALOM CENTER	NONE	501(C)(3)	GENERAL OPERATIONS	
1713 62ND AVENUE KENOSHA, WI 53143				7,000
THE WOMEN'S HOME	NONE	501(C)(3)	GENERAL OPERATIONS	
607 WESTHEIMER ROAD				
HOUSTON, TX 77006		 		2,000
UNIVERSITY OF WISCONSIN-PARKSIDE	NONE	501(C)(3)	GENERAL OPERATIONS	
FOUNDATION		1		[
Р.О. ВОХ 2000		1	1	
KENOSHA, WI 53141		 	 	3,250
WILLISTON NORTHAMPTON ACADEMY	NONE	501(C)(3)	GENERAL OPERATIONS	1
19 PAYSON AVENUE EASTHAMPTON, MA 01027		1	1	1,84:
Total from continuation sheets				

3 Grants and Contributions Paid During the	e Year (Continuation)			L
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation	Purpose of grant or contribution	Amount
Name and address (home or business)	any foundation manager or substantial contributor	status of recipient	Contribution	71/1104111
OMEN & CHILDREN'S HORIZONS	NONE	501(C)(3)	GENERAL OPERATIONS	
FOUNDATION]
21802 118TH STREET			}	}
BRISTOL, WI 53104		,	\	1,00
		 		
WOMEN & CHILDREN'S HORIZONS	NONE	501(C)(3)	GENERAL OPERATIONS	<u> </u>
2525 63RD STREET			1	{
KENOSHA, WI 53104		-	4	11,70
		 	 	
				}
			 	
			 	
	ł			
		 -		
				}
		1		
		 	 	 -
		 	 	
]
		1		
Total from continuation sheets				

FORM 990-PF INTERE	ST ON SAVING	S AND	TEMPOR	ARY	CASH	INVE	STMENTS	STATEMENT	1
SOURCE			(A) REVENUE ER BOOK		NET	(B INVE INCO	STMENT	(C) ADJUSTI NET INCO	
MARKETABLE SECURITI MARKETABLE SECURITI TAX EXEMPT PERSHING	ES, LLC -			14. 20. 28.		3	0. 5,028.		
PERSHING - ACCRUED PURCHASED PERSHING - BOND PRE AMORTIZATION				95.> 20.>			<795.>		
TOTAL TO PART I, LI	NE 3		33,7			3	3,727.		
FORM 990-PF	DIVIDENDS	AND II	NTEREST	FRO	M SEC	URIT	IES	STATEMENT	ր 2
SOURCE	GROSS AMOUNT	GA:	ITAL INS DENDS	RE	(A) VENUE BOOK		(B) ET INVEST ENT INCOM		STED
MARKETABLE SECURITIES, LLC PERSHING	3,960. 56,398.		0.		3,96 56,39		3,960 56,398		
TO PART I, LINE 4	60,358.		0.		60,35	8.	60,358	8.	
FORM 990-PF		ОТНІ	ER INCO	ME				STATEMENT	r 3
DESCRIPTION			RE	(A) VENU BOO			(B) INVEST- T INCOME	(C) ADJUST NET INC	
FROM PASS THROUGH M. SECURITIES LLC	ARKETABLE				85		85	•	
TOTAL TO FORM 990-P	F, PART I, I	INE 1	1		85.		85	•	

FORM 990-PF C	THER PROFES	SIONAL FEES	STATEMENT 4			
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES		
INVESTMENT MANAGEMENT FEES	21,998.	21,998.		0.		
TO FORM 990-PF, PG 1, LN 16C	21,998.	21,998.		0.		
FORM 990-PF	TAX	ES	S'	FATEMENT 5		
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES		
FOREIGN TAXES PAID-MARKETABLE FOREIGN TAXES	187.	187.		0.		
PAID-PERSHING FEDERAL TAXES PAID FEDEDAL UBIT PAID STATE UBIT PAID	2,894. 11,000. 14. 7.	2,894. 0. 0. 0.		0. 0. 0.		
TO FORM 990-PF, PG 1, LN 18	14,102.	3,081.		0.		
FORM 990-PF	OTHER E	XPENSES	S	ratement 6		
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES		
FROM PASS THROUGH MARKETABLE SECURITIES LLC ANNUAL REPORT FEES	1,657.	1,657.		0.		
TO FORM 990-PF, PG 1, LN 23	1,682.	1,682.		0.		

FORM 990-PF U.S. AND STATE/O	TY GOV	ERNMENT	OBLIGATIONS	STATEMENT 7
DESCRIPTION	U.S. GOV'T	OTHER GOV'T	BOOK VALUE	FAIR MARKET VALUE
50,000 FNMA 0.75% DUE 12/27/18 50,000 FHLMC 1.250% DUE 8/26/20 50,000 FED FARM CR BKS BD 1.590%	X X X		0.	0.
DUE 8/24/20 50,000 FNMA 1.25% DUE 3/23/21	x	_	50,010. 50,010.	49,041. 49,694.
TOTAL U.S. GOVERNMENT OBLIGATIONS		_	100,020.	98,735.
TOTAL STATE AND MUNICIPAL GOVERNMEN	T OBLIG	RATIONS		
TOTAL TO FORM 990-PF, PART II, LINE	10A	_	100,020.	98,735.
				
FORM 990-PF COF	PORATE	STOCK		STATEMENT 8
DESCRIPTION			BOOK VALUE	FAIR MARKET VALUE
200 SHS DIEGO PLC SPONS ADR 1,750 SHS NESTLE SA SPONS ADR 1,500 SHS ILLINOIS TOOL WORKS 3,000 SHS INTEL 3,200 SHS VISA INC. 1,800 SHS BAKER HUGHES 1,500 SHS DAIMLER ADR 3,000 SHS PRINCIPAL FINANCIAL 1,600 SHS AFLAC INC COM 2,500 SHS ORACLE CORP COM 2,500 SHS INTERPUBLIC GROUP COS INC 2,000 SHS CITIGROUP INC COM NEW 2,500 SHS BORG WARNER 2,300 SHS FLOWSERVE 1,000 SHS GENERAL MOTORS	. COM		37,880. 42,049. 0. 46,335. 61,015. 76,696. 73,780. 82,436. 80,027. 86,189. 118,926. 100,401. 102,389. 121,565. 128,090.	93,546. 125,545. 0. 108,810. 249,664. 116,946. 111,525. 173,580. 111,360. 96,125. 140,460. 118,860. 98,600. 110,515. 139,360.

FORM 990-PF CORPO	PRATE BONDS		STATEMENT	9	
DESCRIPTION		BOOK VALUE	FAIR MARKE VALUE	T	
50,000 SHS BROADRIDGE FINL SOLUTIONS,	INC	37,750.	50,8	70.	
50,000 SHS PARTNERRE FINANCIAL		0.	·	0.	
11,000 SHS YUM BRAND		10,329.	11,4	95.	
50,000 SHS MARTIN MARIETTA		46,510.	52,7	95.	
50,000 SHS BEST BUY 5.50% DUE 3/15/21		47,982.	54,5	00.	
50,000 SHS WOOLWORTH CORP DEB N/C 199		51,635.	58,6	25.	
50,000 SHS CONCHO RESOURCES 5.5% DUE	10/1/22	49,385.	51,8	13.	
50,000 SHS HEALTH NET		0.		0.	
50,000 SHS MANITOWOC INC		0.	0		
50,000 SHS GLP CAP LP/GLP FING II INC	51,885.	52,500			
50,000 SHS WILLIAM CARTER CO SR NT	52,385.	51,813			
50,000 SHS CBRE SVC INC 5% DUE 3/15/2	50,323.	51,580			
50,000 CITIGROUP INC 1.7% DUE 4/27/18	3	49,812.	49,8	90.	
TOTAL TO FORM 990-PF, PART II, LINE 1	.0C	447,996.	485,8	81.	
FORM 990-PF OTHER	INVESTMENTS		STATEMENT	10	
DESCRIPTION	VALUATION METHOD	BOOK VALUE	FAIR MARKE VALUE	T	
		221 060	221 0	74.	
14.593.55 SHS OAKMARK INTL FUND	COST	Z31,00U.	331.2		
14,593.55 SHS OAKMARK INTL FUND .311035% INT. IN MARK. SEC. LLC	COST COST	231,860. 253,347.	331,2 232,4		

	T OF OFFICERS, D FOUNDATION MANA		STATI	EMENT 11
NAME AND ADDRESS	TITLE AND AVRG HRS/WK			EXPENSE
ELIZABETH K. BROWN 6926 2ND AVENUE KENOSHA, WI 53143	PRESIDENT/TREA	SURER 0.	0.	0.
LUCILLE BROWN MINN 7 OVERHOLT PASS EDINA, MN 55439	VP/ASST SEC/AS 0.00	ST TREASUREI 0.	0.	0.
STEVEN MINN 7 OVERHOLT PASS EDINA, MN 55439	ASST SEC/ASST 0.00	TREASURER 0.	0.	0.
SARAH BROWN RUSS 3765 FARBAR STREET HOUSTON, TX 77005	VP/ASST SEC/AS 0.00	ST TREASUREI 0.	0.	0.
MARK RUSS 3765 FARBAR STREET HOUSTON, TX 77005	ASST SEC/ASST 0.00	TREASURER 0.	0.	0.
AMY BROWN TUCHLER 2983 TECHNY NORTHBROOK, IL 60062	VP/SECRETARY/A 0.00	SST TREASURI 0.	ER 0.	0.
JAMES TUCHLER 2983 TECHNY NORTHBROOK, IL 60062	ASST SEC/ASST 0.00	TREASURER 0.	0.	0.
GARY HOLZMAN 490 CARRIAGE WAY DEERFIELD, IL 60015	ASST SEC/ASST 0.00	TREASURER 0.	0.	0.
JENNIFER DOBOSH 3207 N. CLIFTON AVE. APT 202 CHICAGO, IL 60657	ASST SEC/ASST 0.00	TREASURER 0.	0.	0.
TOTALS INCLUDED ON 990-PF, PAGE 6	, PART VIII	0.	0.	0.