

See a Social Security Number? Say Something! Report Privacy Problems to https://public.resource.org/privacy Or call the IRS Identity Theft Hotline at 1-800-908-4490



Return of Private Foundation

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

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

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

FOR	caten	dar year 2016 or tax year	r beginning		, and ending		
Na	ne of	foundation				A Employer identification	on number
				UNDATION, IN	C	_39-200159	9
Nur			if mail is not delivered to street	t address)	Room/suite	B Telephone number	
		SUNSET CIRCI				920-924-9	<u> 399 </u>
			untry, and ZIP or foreign p	oostal code		C If exemption application is	pending, check here
		DU LAC, WI	54935			_	
G (heck	all that apply:	Initial return		ormer public charity	D 1. Foreign organization	ns, check here
			Final return	Amended return		2. Foreign groanizations of	neeting the 85% test
			Address change	Name change		Foreign organizations in check here and attach or a check here and attach or a check here.	computation
H (_		X Section 501(c)(3) ex		-4	E If private foundation st	
<u> </u>		tion 4947(a)(1) nonexem		Other taxable private founding method: X Cash		under section 507(b)(
		rket value of all assets at t Part II, col. (c), line 16)	end of year J Account	ther (specify)	Accrual	F If the foundation is in a	
(<i>''</i>				ımn (d) must be on cash :	basis)	under section 507(b)(T)(B), CHECK Here
	rt I	Analysis of Revenue an	nd Expenses	(a) Revenue and	(b) Net investment	(c) Adjusted net	(d) Disbursements
		(The total of amounts in colu necessarily equal the amoun	mns (b), (c), and (d) may not its in column (a))	expenses per books	income	income	for charitable purposes (cash basis only)
		Contributions, gifts, grant	ts, etc., received	61,251.		N/A	
		Check I if the foundation	n is not required to attach Sch. B				
	٦	cash investments		4 600	1 600	<u> </u>	
	[Dividends and interest fro	om sécurities	1,698.	1,698	·	STATEMENT 1
	1.	Gross rents				<u> </u>	
	l .	Net rental income or (loss) Net gain or (loss) from sale of		3,813.			<u> </u>
ī	L . (Gross sales price for all assets on line 6a	37,563.	* * *		*.	
Revenue	1	Capital gain net income (from		, ×	3,813.	· · · · · · · · · · · · · · · · · · ·	*
æ		Net short-term capital gai			***		á %.º
		Income modifications		, ,			2.35
	10a	Gross sales less returns and allowances		Sir Sur	7 37	A. 325	1 1,1
	b	Less Cost of goods sold			347 3	<i>I</i>	
	C (Gross profit or (loss)					. 1 kg . 1
	ı	Other income		66.560			<u> </u>
		Total, Add lines 1 throug		66,762.	5,511	·	
		Compensation of officers, dire		0.	0,	·	0.
		Other employee salaries a	•				
es		Pension plans, employee Legal fees	Denents				
ens		Accounting fees	STMT 2	1,250.	0.		0.
Expenses	ĺ	Other professional fees					+
		Interest					
Operating and Administrative	18	Taxes	STMT 3	246.	0.		0.
nist	19	Depreciation and depletio	n				
Ē	20 (Occupa <u>ncy</u>					
Ϋ́		Travel, conferences and	enved				
ă		Printing and publications					<u> </u>
ing		Other expenses MAY.	1 5 2017	<u> </u>		<u> </u>	
erat	24	Total operating and adm	ifnistrative .	1 406	_		
Ö		expenses. Add lines 13-4	invogn-co	1,496.	0.	 	62,771.
		Contributions, (fits (fin) Total expenses and disb	—··, • ·	04,771.	<u> </u>		02,771.
		Add lines 24 and 25	araomonia.	64,267.	0.	Į	62,771.
		Subtract line 26 from line	12:	01,207		 	02,7,12
		Excess of revenue over expens		2,495.	li	1	
		Net investment income (, = 2 3 3	5,511.	1	
	C	Adjusted net income (if ne	egative, enter -0-)			N/A	

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

Fo	rm 9	90-PF (2016) ELOISE RUEPING ATKINSON			2001599 Page 2
F	art	Balance Sheets Attached schedules and amounts in the description	Beginning of year	End o	
			(a) Book Value	(b) Book Value	(c) Fair Market Value
	,	Cash - non-interest-bearing	8,262.	4,241.	4,241.
		Savings and temporary cash investments	22,016.	1,279.	1,279.
	3	Accounts receivable			
	١.	Less; allowance for doubtful accounts			
	4	Pledges receivable -		me	•
	۔ ا	Less; allowance for doubtful accounts	<u> </u>		
		Grants receivable			
	6	Receivables due from officers, directors, trustees, and other	l		
		disqualified persons			
	7	Other notes and loans receivable			
		Less; allowance for doubtful accounts			
ş	8	Inventories for sale or use			
Assets	9	Prepaid expenses and deferred charges			
⋖	10a	Investments - U.S. and state government obligations			
	ĺt	Investments - corporate stock STMT 4	32,631.	59,884.	78,658.
	0	Investments - corporate bonds			
	11	Investments - land, buildings, and equipment basis			
		Less accumulated depreciation		* **	
	12	Investments - mortgage loans			
	1	Investments - other			
	l	Land, buildings, and equipment basis			
		Less accumulated deoreciation			Annual programme with the second with the last t
	15	Other assets (describe >			
	ı	Total assets (to be completed by all filers - see the			<u> </u>
	'`	instructions. Also, see page 1, item I)	62,909.	65,404.	84,178.
_	17	Accounts payable and accrued expenses	02,505.	03,404.	04,170.
	18	Grants payable			
	ı	Deferred revenue			* 1
Liabilities					
Ē	1	Loans from officers, directors, trustees, and other disqualified persons			
Lia.	21	Mortgages and other notes payable	<u> </u>		
	22	Other liabilities (describe)			
	l				
_	23	Total liabilities (add lines 17 through 22)	0.	0.	
		Foundations that follow SFAS 117, check here			
s		and complete lines 24 through 26 and lines 30 and 31.			
ces	24	Unrestricted			* *
Fund Balan	25	Temporarily restricted			1
Ä	26	Permanently restricted			
Ę		Foundations that do not follow SFAS 117, check here 🔻 🔀			
Ē		and complete lines 27 through 31.			4
S	27	Capital stock, trust principal, or current funds	9,250.	9,250.	
set	28	Paid-in or capital surplus, or land, bldg., and equipment fund	626,377.	626,377.	
Net Assets or	29	Retained earnings, accumulated income, endowment, or other funds	-572,718.	-570,223.	
ě	30	Total net assets or fund balances	62,909.	65,404.	ļ
_					a constant
	31	Total liabilities and net assets/fund balances	62,909.	65,404.	ĺ
P	art				
	_	net assets or fund balances at beginning of year - Part II, column (a), line	_ 		
		at agree with end-of-year figure reported on prior year's return)		11	62,909.
		amount from Part 1, line 27a		2	2,495.
		rincreases not included in Line 2 (itemize)		3	0.
		lines 1, 2, and 3			65,404.
		eases not included in line 2 (itemize)		 	03, 404.

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

65,404. Form **990-PF** (2016)

10	orm 990-PF (2016) ELOIS	E RUEPING ATKI	NSON F	OUNDATIO	N,	INC	3	9-200	T233	Page 3
F	Part IV Capital Gains and	Losses for Tax on Ir	nvestment	t Income						
_	(a) List and describe t	he kind(s) of property sold (e.g	., real estate,		क्रि	low acquired - Purchase	(c) Date	acquired	(d) Da	
	2-story brick wareho	use; or common stock, 200 sh	s. MLC Co.)			- Donation	(mo., c	lay, yr.)	(mò., d	ay, yr.)
18	100SH PROCTOR &	GAMBLE CO				P	12/0	7/02	12/1	9/16
ī	500SH GENERAL EL	ECTRIC CORP				D		2/16	06/2	
_	258SH MGE ENERGY	INC				D	06/2	2/16	06/2	3/16
_	i									
_ (8									
	(e)-Gross sales price	(f) Depreciation allowed		st or other basis				ain or (loss		
		(or allowable)	plus e	expense of sale			(e) plu	s (f) minus	(g)	
á				4,22					4	,108.
ī				15,46						-112.
_	13,872.			14,05	5.					-183.
_	i e									
_	e									
_	Complete only for assets showing gain	n in column (h) and owned by	the foundation	on 12/31/69		() Gains (C	Col. (h) gain	minus	
	(i) F.M.V. as of 12/31/69	(j) Adjusted basis		cess of col. (i)	i	co	l. (k), but I nsses	not less that (from col. (n -U-) or 'h\\	
_	(1)1.101.0. as 01 12/3 1/03	as of 12/31/69	over	col. (j), if any				(11011110011)		
_8	1									,108.
t	b				_					-112.
_										-183.
_	<u> </u>				_					_
_	·									
		∫ If gain, also enter			ال				2	010
2	Capital gain net income or (net capital	loss) 🧗 If (loss), enter -0	- ın Part I, line	7	J.	2				<u>,813.</u>
3	Net short-term capital gain or (loss) as		ıd (6);		١ ٦					
	If gain, also enter in Part I, line 8, colui	nn (c).			 	_		NT / N		
Г	If (loss), enter -O- in Part I, line 8 Part V Qualification Unde	er Section 4940(e) for	Dodugod	Tay on Not	<u> </u>	ootmont In	20000	N/A		
,	`	<u></u>					Joine			
(F	or optional use by domestic private four	dations subject to the section 4	4940(a) tax on	net investment in	come	1-)				
lf :	section 4940(d)(2) applies, leave this pa	rt blank.								
14/	as the foundation liable for the section 4	O40 toy on the distributeble on	and at any u	or in the base per	40				□ vaa	X No
	"Yes," the foundation does not qualify ur				lou r				162	LZZ NO
"					ntries					
÷	(a) Base period years	(b)			(c)		<u> </u>		(d) oution ratio	
	Base periód years Calendar year (or tax year beginning in)	مالد مشركا المراجع المحكم والمكال	tributions	Net value of no		itable-use assets	i	Distrit (col. (b) div	oution ratio rided by col.	(c))
_	2015		2,493.			84,877	_	(82825
_	2014		4,343.			81,860				19533
_	2013		2,847.			99,325				30023
_	2012		4,273.			110,833				19005
_	2011		7,151.			127,060				92389
_			. ,				1	Γ		
2	Total of line 1, column (d)						2	[1.5	43775
	Average distribution ratio for the 5-year	r base period - divide the total i	on line 2 by 5.	or by the number	of ve	ars	<u> </u>			
Ī	the foundation has been in existence if	•	, .,	,	-,,-		3	ŀ	.3	08755
		Table and an analysis of the same					<u> </u>			
4	Enter the net value of noncharitable-us	e assets for 2016 from Part X	line 5				4	Į	82	,674.
•		0 400010 101 20 10 11 0111 1 41174						<u> </u>		,
5	Multiply line 4 by line 3						5	1	25	,526.
-							ا ا	 		
6	Enter 1% of net investment income (19	% of Part L line 27h\					6			55.
•	(۲	<u> </u>		
7	Add lines 5 and 6						7		25	,581.
-							一	 		, - ,
8	Enter qualifying distributions from Part	XII. line 4					8		62	,771.
	If line 8 is equal to or greater than line	•	1b, and comp	lete that part using	g a 19	% tax rate.		<u> </u>		
	If line 8 is equal to or greater than line See the Part VI instructions.	7, check the box in Part VI, line	1b, and comp	lete that part using	g a 19	% tax rate.				

Parl	990-PF (2016) ELOISE RUEPING ATKINSON FOUNDATION, INC t VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4			20015 see in			Page 4
1a E	Exempt operating foundations described in section 4940(d)(2), check here \(\bigcup \) and enter "N/A" on line 1.	7					
	Date of ruling or determination letter: (attach copy of letter if necessary-see instruct	ions)	{				
	Domestic foundations that meet the section 4940(e) requirements in Part V, check here 🕨 🛣 and enter 19		1				55.
	of Part I, line 27b						
	All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of Part I, line 12, co	ol (b).					
	Fax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	(-).	2				_0∵
	Add lines 1 and 2		3				55.
	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				55.
	Credits/Payments:		├				
	2016 estimated tax payments and 2015 overpayment credited to 2016						
	Exempt foreign organizations - tax withheld at source 6b		}				
	Fax paid with application for extension of time to file (Form 8868) 6c		ľ				
	Backup withholding erroneously withheld [6d]						0.
	Fotal credits and payments. Add lines 6a through 6d		7				
	Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached	_	8				
	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed	.	9				<u>55.</u>
	Overpayment. If Tine 7 is more than the total of lines 5 and 8, enter the amount overpaid	. ▶	10				
	Enter the amount of line 10 to be: Credited to 2017 estimated tax	Refunded -	11				
	t VII-A Statements Regarding Activities						
	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it partic	pate or intervene	ın	L		Yes	_
	any political campaign?				1a		<u> </u>
b D	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see instructions	for the definition))?	L	1b		X
lf	f the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any n	naterials publish	ned or	İ		À.	[3]
d	distributed by the foundation in connection with the activities			}			ا - شسم
	Did the foundation file Form 1120-POL for this year?			L	1c		X
d E	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year:			1	1	وُرُ	Offeredor
((1) On the foundation. ▶ \$ O . (2) On foundation managers. ▶ \$	0.		ĺ			,,,
еE	nter the reimbur sement (if any) paid by the foundation during the year for political expenditure tax imposed on	foundation		l	٠.		
m	managers. ►\$ 0.				, Š.		
2 H	las the foundation engaged in any activities that have not previously been reported to the IRS?				2		X
If	f "Yes," attach a detailed description of the activities			Γ		. X	, (
3 H	las the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles o	f incorporation, o	٢	1			X
b	oylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes				3		X
4a D	Did the foundation have unrelated business gross income of \$1,000 or more during the year?				4a		X
b If	f "Yes," has it filed a tax return on Form 990-T for this year?		N,	/A [4b		
5 W	Nas there a liquidation, termination, dissolution, or substantial contraction during the year?				5		X
	f "Yes," attach the statement required by General Instruction T			ŧ	,	* *	
	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either:			į.		N. A.	
	By language in the governing instrument, or					, m,	1
	By state legislation that effectively amends the governing instrument so that no mandatory directions that con-	flict with the state	íaw	Į.	H	*	١ . ا
	remain in the governing instrument?				6	X	
	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	
	The management of the second s	(9), 41.6 / 41.7.1		<u> </u>			
Ra F	Enter the states to which the foundation reports or with which it is registered (see instructions)						and the second s
	WI			— j	-	J	COMMON
_	f the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or d	lesionate)		—	1	1	
	of each state as required by General Instruction G? If "No," attach explanation	ooignate)			 8b	x	J
		942(1)(5) for actor	ndar	⊦	"		1
	s the foundation-claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4	342(J)(3) for cale	iiudi				X
	rear 2016 or the taxable year beginning in 2016 (see instructions for Part XIV)? If "Yes," complete Part XIV			⊢	9		X
ט ט	Old any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names an	d addresses			10		
				Form	ี ษษบ	-rr ((2016)

623531 11-23-16

	990-PF (2016) ELOISE RUEPING ATKINSON FOUNDATION, INC 39-2003	1599		Page 5
Pa	art VII-A Statements Regarding Activities (continued)			
			Yes	No
11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of	1	ļ	
	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
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	X	
	Website address ► N/A			
14	The books are in care of ► JUDY C. PIERNER Telephone no. ► 920-93			
	Located at ► 65 SUNSET CIRCLE, FOND DU LAC, WI ZIP+4 ►5	1935	-57	77
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - Check here		•	. 🔲
	and enter the amount of tax-exempt interest received or accrued during the year . 15	N	/A	
16	At any time during calendar year 2016, did the foundation have an interest in or a signature or other authority over a bank,		Yes	No
	securities, or other financial account in a foreign country?	16	}	X
	See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes," enter the name of the			
	foreign country >			
Pa	art 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
18	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?			
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from)			
	a disqualified person?			•
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?		٠,	3
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?			-3
	(5) Transfer any income or assets to a disqualified person (or make any of either available			14
	for the benefit or use of a disqualified person)?	1.42	<i>*</i>	
	(6) Agree to pay money or property to a government official? (Exception. Check "No"		3 %	
	if the foundation agreed to make a grant to or to employ the official for a period after	;	<u>(</u>	
	termination of government service, if terminating within 90 days.)	36	# <u>*</u>	
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	ā	ű :
	section 53.4941(d)-3 or in a current notice regarding disaster assistance (see instructions)?	1b	*	ا سقا
	Organizations relying on a current notice regarding disaster assistance check here		**************************************	<i>3</i>
c	Did the foundation en gage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected		- 39 2) j
	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	3900	. *	
	defined in section 4942(j)(3) or 4942(j)(5)):	ŵ		
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	3.7. I		Í
	before 2016? Yes X No	-		1,3
	If "Yes," list the years		*	\$.
b	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.) N/A	26		A
c	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here.	 •		
	b			٠.
3a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time			
	during the year?			
h	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) N/A	3b		J
42	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a	\vdash	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?	,		X

orm 990-PF (2016) ELOISE RUEPING ATKINSON			<u> 39-20015</u>	99	Page 6	
Part VII-B Statements Regarding Activities for Which	Form 4720 May Be	Required (contin	ued)			
5a During the year did the foundation pay or incur any amount to:						
(1) Carry on propaganda, or otherwise attempt to influence legislation (section 4945(e))?						
(2) Influence the outcome of any specific public election (see section 4955); or to carry on, directly or indirectly,						
any voter registration drive?			es 🗶 No		-	
(3) Provide a grant to an individual for travel, study, or other similar purposes		Y(es 🗶 No 📗		ł	
(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			ĺ		
the prevention of cruelty to children or animals?		-	es X No	-	ļ	
b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify un		ın Regulations			1	
section 53.4945 or in a current notice regarding disaster assistance (see instru	•		N/A	5b		
Organizations relying on a current notice regarding disaster assistance check t						
c If the answer is "Yes" to question 5a(4), does the foundation claim exemption f					1 :	
expenditure responsibility for the grant?		I/A LY	es L No		li	
If "Yes," attach the statement required by Regulations section 53 494	- ·]]		
6a Did the foundation, during the year, receive any funds, directly or indirectly, to	pay premiums on	<u> </u>				
a personal benefit contract?		Y€	es 🗓 No			
b Did the foundation, during the year, pay premiums, directly or indirectly, on a p	personal benefit contract?		<u> </u> _	6b	X	
If "Yes" to 6b, file Form 8870						
7a At any time during the tax year, was the foundation a party to a prohibited tax s		Ye	es X No			
b If "Yes," did the foundation receive any proceeds or have any net income attrib				7b		
Part VIII Information About Officers, Directors, Trust Paid Employees, and Contractors	ees, Foundation Ma	anagers, Highly	У			
List all officers, directors, trustees, foundation managers and their	compensation		_ 			
Elst all officers, directors, a ustees, foundation managers and their	(b) Title, and average	(c) Compensation	(d) Contributions to	(e) F	xnense	
(a) Name and address	hours per week devoted to position	(if not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	accou allov	xpense int, other wances	
KAREN GRUENWALD	DIRECTOR					
55 SUNSET CIRCLE			_ !			
FOND DU LAC, WI 54935	5.00	0.	0.		0.	
JUDY PIERNER	DIRECTOR					
65 SUNSET CIRCLE		_	_		_	
FOND DU LAC, WI 54935	5.00	0.	0.		<u> </u>	
STEVEN DILLING	DIRECTOR	Ì				
101 CAMELOT DR SUITE 2A		_] _		_	
FOND DU LAC, WI 54935	1.00	0.	0.		<u> </u>	
]					
2 Compensation of five highest-paid employees (other than those in	cluded on line 1) If none	enter "NONE "				
Compensation of the highest-paid employees (other than those the		Tenter NONE.	(d) Contributions to	(e) E	xpense	
(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	accou	xpense int, other wances	
NONE	devoted to position	 	compensation			
HOND						
 		 				
	1					
		 				
	1					
	<u> </u>					
	1					
			<u> </u>			
Total number of other employees paid over \$50,000			>		0	
			Form	990-P	F (2016)	

Form 990-PF (2016) ELOISE RUEPING ATKINSON FOUNDA	TION, INC 39	-2001599 Page 7
Part VIII Information About Officers, Directors, Trustees, Foun Paid Employees, and Contractors (continued)	dation Managers, Highly	
3 Five highest-paid independent contractors for professional services. If none, en	nter "NONE."	
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE		
		
Total number of others receiving over \$50,000 for professional services		<u>▶</u> 0
Part IX-A Summary of Direct Charitable Activities		
List the foundation's four largest direct charitable activities during the tax year. Include relevant st number of organizations and other beneficiaries served, conferences convened, research papers p	atistical information such as the	Expenses
3.75		
1N/A		4
-		-
2		
2		╡
		┪
3		
<u> </u>		7
		1
4		
]
Part IX-B Summary of Program-Related Investments		
Describe the two largest program-related investments made by the foundation during the tax year	on lines 1 and 2.	Amount
1 N/A		
<u> </u>		
		0.
2		4
		4
All others are related in the control of the contro		
All other program-related investments. See instructions.		
3	· · · · · · · · · · · · · · · · · · ·	-
-		-
		┥
		┥
		†
Total Add lines 1 through 2		

P	art X Minimum Investment Return (All domestic foundation	ns must co	omplete this part. Foreign fou	indations, se	e instructions.)
1	Fair market value of assets not used (or held for use) directly in carrying out chari	rtable, etc.,	purposes:		
а		1a	65,256.		
b	b Average of monthly cash balances				18,677.
	Fair market value of all other assets			1c	
d	Total (add lines 1a, b, and c)			1d	83,933.
е	Reduction claimed for blockage or other factors reported on lines 1a and				
	1c (attach detailed explanation)	1e	0.		
2	Acquisition indebtedness applicable to line 1 assets			2	0.
3	Subtract line 2 from line 1d			3	83,933.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amo	ount, see ins	structions)	4	1,259.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here an	d on Part V	, line 4	5	82,674.
6	Minimum investment return. Enter 5% of line 5		_	6	4,134.
P	foreign organizations check here and do not complete this p		private operating foundations a	nd certain	
1	Minimum investment return from Part X, line 6			1	4,134.
2a	Tax on investment income for 2016 from Part VI, line 5	2a	55.		
b	Income tax for 2016. (This does not include the tax from Part VI.)	2b		1 1	
C	Add lines 2a and 2b			2c	55.
3	Distributable amount before adjustments. Subtract line 2c from line 1			3	4,079.
4	Recoveries of amounts treated as qualifying distributions			4	0.
5	Add lines 3 and 4			5	4,079.
6	Deduction from distributable amount (see instructions)			6	0.
7	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on F	Part XIII, lin	e 1	7	4,079.
P	art XII Qualifying Distributions (see instructions)				
1	Amounts paid (including administrative expenses) to accomplish charitable, etc.,	purposes:		i i	
a	, (-), -			1a	62,771.
þ	Program-related investments - total from Part IX-B			1b	0.
2	Amounts paid to acquire assets used (or held for use) directly in carrying out cha	ırıtable, etc.,	purposes .	2	
3	Amounts set aside for specific charitable projects that satisfy the:				
	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	-	XIII, line 4	4	62,771.
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net income. Enter 1% of Part I, line 27b	ınvestment		5	55.
6	Adjusted qualifying distributions. Subtract line 5 from line 4			6	62,716.
U	Note: The amount on line 6 will be used in Part V, column (b), in subsequent year	re when col	culating whather the foundation		
	4040(a) reduction of tax in those ware	u o Wilcii Cai	colating whether the location	qualilies IVI LIK	5 9000011

Part XIII Undistributed Income (see instructions)

	(a)	(b)	(c)	(d)
	Corpus	Years prior to 2015	2015	2016
1 Distributable amount for 2016 from Part XI,				
line 7				4,079.
2 Undistributed income, if any, as of the end of 2016				1
a Enter amount for 2015 only		}	0.	}
b Total for prior years;				
·	 	0.		
3 Excess distributions carryover, if any, to 2016:				
aFrom 2011 31,074.	<u> </u>	ļ		
bFrom 2012 18,935.	1			
c From 2013 18,417.				
dFrom 2014 30,494.	-			1
e From 2015 28,741.	100 661			ł
f Total of lines 3a through e	127,661.			
4 Qualifying distributions for 2016 from				
Part XII, line 4: ►\$ 62,771. a Applied to 2015, but not more than line 2a	}	!		
b Applied to undistributed income of prior			0.	
years (Election required - see instructions)		^		
c Treated as distributions out of corpus		0.		
(Election required - see instructions)	0.			
d Applied to 2016 distributable amount				1 070
e Remaining amount distributed out of corpus	58,692.			4,079.
5 Excess distributions carryover applied to 2016	0.	,	·	<u> </u>
(If an amount appears in column (d), the same amount must be shown in column (a).)		, , , , , , , , , , , , , , , , , , ,	**	0.
6 Enter the net total of each column as		\$1. *:	\$, ,
indicated below:	, "		٠ * * * *	
a Corpus Add lines 3f, 4c, and 4e Subtract line 5	186,353.			
b Prior years' undistributed income. Subtract	,30 ° VAN ° W.	<u>* *"</u> *	* * * * * * * * * * * * * * * * * * * *	
line 4b from line 2b		0.	· 4 / /	
c Enter the amount of prior years'	- <u>.</u> %			
undistributed income for which a notice of deficiency has been issued, or on which	, *			
the section 4942(a) tax has been previously	3 */ .		4000	***
assessed	, s	0.1	* ~ *^	
d Subtract line 6c from line 6b. Taxable			,	· * *
amount - see instructions		0.		,
e Undistributed income for 20 15. Subtract line				ļ
4a from line 2a. Taxable amount - see instr.			0.	*
f Undistributed income for 20 16. Subtract				
lines 4d and 5 from line 1. This amount must		1		
be distributed in 2017				0.
7 Amounts treated as distributions out of		İ		
corpus to satisfy requirements imposed by	Ì			
section 170(b)(1)(F) or 4942(g)(3) (Election may be required - see instructions)	ا م	!		
8 Excess distributions carryover from 2011	0.			
not applied on line 5 or line 7	21 074	İ		
9 Excess distributions carryover to 2017.	31,074.			
Subtract lines 7 and 8 from line 6a	155,279.	Ì	ľ	1
O Analysis of line 9:	133,2/3.			
a Excess from 2012 18,935.	1	İ	Ì	
b Excess from 2013 18,417.			İ	
c Excess from 2014 30, 494.		ĺ		!
dExcess from 2015 28,741.		1	ĺ	
e Excess from 2016 58,692.			1	
3581 11-23-16			————— <u>—</u>	Sorm 000 DE (0010)

		INSON FOUND			01599 Page
Part XIV Private Operating F			I-A, question 9)	N/A	
1 a If the foundation has received a ruling of					
foundation, and the ruling is effective for	• • • • • • • • • • • • • • • • • • • •	•		4942(j)(3) or 49	342(j)(5)
 b Check box to indicate whether the found 2 a Enter the lesser of the adjusted net 	Tax year	ig roundation described i	Prior 3 years	1 4942())(3) 01 11 45	142(<u>])(</u> 5)
income from Part I or the minimum	(a) 2016	(b) 2015	(c) 2014	(d) 2013	(e) Total
	(4)2010	(8) 20 10	(0)2011	1- 10/2010	(0) 10(0)
investment return from Part X for					
each year listed			 	 	<u> </u>
b 85% of line 2a				 	
c Qualifying distributions from Part XII, line 4 for each year listed			ļ		
d Amounts included in line 2c not	- -				
used directly for active conduct of		ļ	J	j	j
exempt activities					
e Qualifying distributions made directly			 	 	
for active conduct of exempt activities.		1		1	1
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			l		
(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			J	}	ļ
investment income (interest,		1			
dividends, rents, payments on					
securities loans (section 512(a)(5)), or royalties)		ĺ	İ	1	ł
(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 Info	rmation (Comple	te this part only	if the foundation	n had \$5,000 or m	ore in assets
at any time during t					
1 Information Regarding Foundatio	n Managers:				
a List any managers of the foundation who			ributions received by th	e foundation before the clo	se of any tax
year (but only if they have contributed n	iore than \$5,000). (See s	ection 507(a)(2).)			
NONE				 	
b List any managers of the foundation who other entity) of which the foundation has			(or an equally large port	tion of the ownership of a p	artnership or
NONE					
2 Information Regarding Contributi		• • • • •	_		
Check here if the foundation o the foundation makes gifts, grants, etc.				not accept unsolicited requ complete items 2a, b, c, and	
a The name, address, and telephone num	ber or e-mail address of t	he person to whom appli	cations should be addre	essed:	
JUDY C. PIERNER, 920					
65 SUNSET CIRCLE, FO	ND DU LAC,	WI 54935-57	77		
b The form in which applications should b					
c Any submission deadlines:	·				
NONE					_ .
d Any restrictions or limitations on awards STATE OF WISCONSIN	s, such as by geographica	al areas, charitable fields,	kınds of ınstitutions, or	other factors:	
					F 000 DE (004

Part XV Supplementary Informatio				
3 Grants and Contributions Paid During the	Year or Approved for Future	Payment		
Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of	Purpose of grant or contribution	Amount
	or substantial contributor	recipient	 	
a Paid duning the year				
		ì	1	
ADULT DAY CARE	NONE	i	HOSPICE	
420 E MERRILL AVENUE				
FOND DU LAC, WI 54935				1,698
]		
BEACON HOUSE	NONE	}	ASSISTED LIVING	
166 S PARK AVENUE				
FOND DU LAC, WI 54935				492
		ł		
CONGREGATION OF SISTERS OF ST. AGNES	NONE		RELIGIOUS	
320 COUNTY ROAD K		i	!	
FOND_DU_LAC, WI_54937				1,730
		1		
	j	}]	
DIVINE SAVIOR	NONE		HOSPITAL	
2817 NEW PINERY ROAD	1.52	}		
PORTAGE, WI 53901				393
FDL CHRISTIAN SCHOOL	NONE		EDUCATION	
720 RIENZI RD	1101,2			
FOND DU LAC, WI 54935				85
Total SEE CO	NTINUATION SHEE	er(s)	▶ 3a	62,771
b Approved for future payment		-		
)]	
NONE				
			1	
		İ	1	
			}	
	1		[
		ļ		
		ļ	1	
			1	
	<u></u>	<u>L</u> _	<u> </u>	
Total			▶ 3b	0 DE (004)

Part XVI-A Analysis of Income-Producing Activities

Enter gross amounts unless otherwise indicated.	Unrelated	business income		fed by section 512, 513, or 514	(e)
•	(a) Business	(b) Amount	Exclu- sion	(d) Amount	Related or exempt function income
1 Program service revenue:	code		code	Amount	
å	~				
b	~		\rightarrow		
<u> </u>	-		 - 		
<u> </u>	-				
e	~	 -	+		
g Fees and contracts from government agencies	-		 		
2 Membership dues and assessments			- - 		
3 Interest on savings and temporary cash investments					
4 Dividends and interest from securities			14	1,698.	
5 Net rental income or (loss) from real estate:					
a Debt-financed property b Not debt-financed property					
6 Net rental income or (loss) from personal property					
7 Other investment income	-				
8 Gain or (loss) from sales of assets other			18	2 012	
than inventory			1 1 9	3,813.	
9 Net income or (loss) from special events		 _	- 		
10 Gross profit or (loss) from sales of inventory 11 Other revenue:	ļ				
			1		
a	-				
<u> </u>	-		-		
	-				
·			+ +		
12 Subtotal. Add columns (b), (d), and (e)			1/2"	5,511.	0.
12 Sublota: Add Columns (b), (d), and (e) 13 Total. Add line 12, columns (b), (d), and (e)			• ※	13	5,511.
(See worksheet in line 13 instructions to verify calculations.	١			- 13	
Open Morksheet in mile 19 menactions to serily calculations.					

Relationship of Activities to the Accomplishment of Exempt Purposes

W. ▼	the foundation's exempt purposes (other than by providing funds for such purposes).					
						
			· 			
-+						.
	· - · · -			· ····		
						
				_ ,		
_+						
						
			 ,		· ·	-
$\neg +$						
						· · · · · · · · ·
	· -					

Form **990-PF** (2016)

623621 11-23-16

1 Did the organization directly or indirectly engage in any of the following with any other organization described in section 501(c) of

the Code (other than section 501(c)(3) organizations) or in section 527, relating to political organizations?

Form 990-PF (2016)	<u> ELOISE</u>	RUEPING	ATKINSON	FOUNDATION,	INC	<u> 39-2001599</u>	Page
Part XVII	Information Reg	arding Trans	fers To and T	ransactions and F	Relationsh	nips With Noncharitable	
	Exempt Organiza	ations					

a Tra	ansfers	from the reporting found:	ation to a noncharita	ble exempt or	ganization of:				_
(1)) Cash							1a(1)	X
(2)) Other	assets						1a(2)	X
b Otl	her tran	sactions:							
(1)) Sales	of assets to a noncharita	ble exempt organiza	tion				1b(1)	X
(2)) Purci	hases of assets from a no	ncharitable exempt o	organization				1b(2)	X
		al of facilities, equipment,	•	•				1b(3)	X
	-	bursement arrangements		•				1b(4)	$\frac{1}{x}$
		s or loan guarantees						1b(5)	X
		rmance of services or me	mharchin or fundrai	eina ealiaitetia	nne			1b(6)	X
	•	f facilities, equipment, ma	•	-				10	$\frac{1}{X}$
					edule. Column (b) should al	wave about the four	market value of the ac-	<u> </u>	1 22
		-	•	-	, ,	· ·	~		
		• • •			ed less than fair market valu	ie ili aliy transactio	in or snaring arrangem	ent, Show in	
		1) the value of the goods,							
(a)Line r	10	(b) Amount involved	(c) Name of		e exempt organization	(0) Description	on of transfers, transactions	, and sharing arrangeme	ents
		<u> </u>		N/A					
				_					
					. <u></u> . <u>.</u>				
					<u> </u>				
							· -		
	$\neg \vdash$								
	+								
	+		 						
	+						<u> </u>		
			 						
		_							
	——								
	بلب		L						
					or more tax-exempt organi	zations described			
ın :	section	501(c) of the Code (other	r than section 501(c))(3)) or in sect	tion 527?	-		Yes _X	No
b If "	Yes," c	omplete the following sch							
		(a) Name of org	janization		(b) Type of organization		(c) Description of rela	tionship	
		N/A							
			- 			L			
					ng accompanying schedules and			May the IHS discuss	this
Sign	and be	elief, it is true, correct, and con	nplete Declaration of pri	eparer (other than	n taxpayer) is based on all inform	nation of which prepar	er has any knowledge	return with the prepar shown below (see ins	arer 💮
Here		hidith (Pin	nev	X5-10-17	DIREC	TOR	X Yes	
	Sign	ature of officer or trustee	- 	100	Date	Title			
	1 6	Print/Type preparer's na		Preparer's si		Date	Check if P	TIN	
		, po propuror o nu				-===	self- employed		
Paid		A NUMBER ON THE REAL	TT C TT	1	4	5-10-7		P00017364	ı
Prep	aror	ANTHONY FA			9 CIV	-75-7	Firm's EIN ► 39	-0001/304	<u> </u>
-		Firm's name SCH	ENCK SC				Firm's EIN ► 39	-TT/2T2T	
Use (Unity	Formula addition in 2.2.	7 17 222		 				
		Firm's address ► 37			1006 1000			004 55==	_
		FO FO	ND DU LAC	, WI 5	<u>4936-1809</u>		Phone no. 920	<u>-921-2953</u>	
								Form 990-PF	(2016)

Part XV Supplementary Information Grants and Contributions Paid During the Year (Continuation) If recipient is an individual, Recipient show any relationship to any foundation manager Foundation Purpose of grant or Amount status of contribution Name and address (home or business) or substantial contributor recipient FDL CTY FAMILY RESOURCE CENTER NONE CIVIC 17 FOREST AVENUE, SUITE 116 FON DU LAC, WI 54935 135. NONE civic FDL POLICE DEPARTMENT 160 SOUTH MACY STREET FON DU LAC, WI 54935 155. FDL SHERIFFS DEPT NONE civic 180 S MACY ST 156. FOND DU LAC, WI 54935 FOND DU LAC LUTHERAN HOME NONE ASSISTED LIVING 244 N MACY STREET FOND DU LAC, WI 54935 42,438. FONDY FOOD PANTRY NONE civic 51 W DIVISION ST 228. FON DU LAC, WI 54935 FRIENDSHIP CORNER civic NONE 27 THIRD STREET FOND DU LAC, WI 54935 1,440. HOLY FAMILY CHURCH NONE RELIGIOUS 271 FOURTH STREET WAY FOND DU LAC, WI 54937 95. RELIGIOUS HOPE LUTHERAN CHURCH NONE 260 VINCENT STREET FOND DU LAC, WI 54935 151. HOSPICE NONE HOSPICE 400 HWY K 3,509. FOND DU LAC, WI 54935 IMMANUEL TRINITY CHURCH NONE RELIGIOUS 20 WISCONSIN AMERICAN DR FON DU LAC, WI 54937 201. 58,373. Total from continuation sheets

Part XV Supplementary Informati				
3 Grants and Contributions Paid During th	e Year (Continuation) If recipient is an individual,			
Recipient	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	 	ļ
LAKEVIEW PLACE	NONE		civic	
517 LUCO RD	1			}
FOND DU LAC, WI 54935		· 		105
]			
LINCOLN HOUSE	NONE		ASSISTED LIVING	
342 FOREST AVENUE				
FOND DU LAC, WI 54935				655
MARIAN UNIVERSITY	NONE		EDUCATION	
455 S NATIONAL, AVENUE	1		1	}
FOND DU LAC, WI 54935		· -		160
NAZARETH CENTER	NONE		ASSISTED LIVING	
375 GILLET	1			
FOND DU LAC, WI 54935			 	2,480
RESIDENTIAL SERVICES	NONE		ASSISTED LIVING	
342 FOREST AVENUE				538
FOND DU LAC, WI 54935				330
DOGENDAR HOWER WITH	NOVE		A CCT CORP. I TUTNO	
ROSENDALE TOWER VIEW VILLA 401 N GRANT ST	NONE		ASSISTED LIVING	
ROSENDALE, WI 54974				70
SERVICE LEAGUE	NONE		civic	
PO BOX 185				j
FOND DU LAC, WI 54936-0185				165
ST CLARE TERRACE	NONE		ASSISTED LIVING	
31 EVERETT STREET				
FOND DU LAC, WI 54935				125
ST ISIDORE PARISH	NONE		RELIGIOUS	
308 S CTY W				175
MT CALVARY, WI 53057	- 		 	175
ST JOHNS PARISH	NONE		RELIGIOUS	
N9288 HWY W MALONE, WI 53049				175
Total from continuation sheets				

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		
ST MARYS SPRINGS	none		EDUCATION	ł
255 COUNTY ROAD K				_
FOND DU LAC, WI 54937		<u> </u>		30
CT		DD T 1/2 MB	DTI TOTOUG	}
ST. FRANCIS HOME FOUNDATION	NONE	PRIVATE FOUNDATION	RELIGIOUS	
33 EVERETT STREET FOND DU LAC, WI 54935		FOUNDATION		1,31
POND DO BAC, HI 34933				1,31.
ST. LAWRENCE SEMINARY HIGH SCHOOL	NONE		EDUCATION	
301 CHURCH ST.	1	1		{
MOUNT CALVARY, WI 53057		<u> </u>		1,05
ST. PETER'S PLACE	NONE		RELIGIOUS	ł
50 E 1ST ST				
FOND DU LAC, WI 54935		 		1,58
	\			<u> </u>
VILLA LORETTO NURSING HOME N8114 CALVARY STREET	NONE		HOSPICE	
MT CALVARY, WI 53057				63:
,				
VILLA ROSA	NONE		HOSPICE	
N8114 CALVARY STREET				1
MT CALVARY, WI 53057	_			33:
	<u> </u>	<u> </u>		
Total from continuation sheets				

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

Department of the Treasury Internal Revenue Service

Schedule of Contributors

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

OMB No 1545-0047

Name of the organization

Employer identification number

EI	LOISE RUEPING ATKINSON FOUNDATION, INC	<u> </u>
Organization type (check o	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 foundation	
	501(c)(3) taxable private foundation	
	is covered by the General Rule or a Special Rule .)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rul	le See instructions.
General Rule		
	on filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling yone contributor. Complete Parts I and II. See instructions for determining a contributor's	
Special Rules		
sections 509(a)(1) any one contribute	on described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support and 1 70(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or, during the year, total contributions of the greater of (1) \$5,000 or (2) 2% of the amount, line 1. Complete Parts I and II	or 16b, and that received from
year, total contribu	on described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from a utions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educa cruelty to children or animals Complete Parts I, II, and III	
year, contributions is checked, enter l purpose Don't co	on described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from a section	ore than \$1,000. If this box , charitable, etc ,
but it must answer "No" on	hat isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Fon Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on its Foother filling requirements of Schedule B (Form 990, 990-EZ, or 990-PF).	

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

Name of organization

Employer identification number

ELOISE RUEPING ATKINSON FOUNDATION, INC

39-2001599

Part I	Contributors (See Instructions). Use duplicate copies of Part I if addition	al space is needed	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	JUDITH PIERNER 65 SUNSET CIRCLE FOND DU LAC, WI 54935	\$61,001.	Person Payroll Noncash X (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroli Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroli Oncash Ocomplete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Oncash Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Oncash Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
623452 10-1		\$Schedule B / Form	Person Payroll Noncash (Complete Part II for noncash contributions.)

Name of organization

Employer identification number

ELOISE RUEPING ATKINSON FOUNDATION, INC

39-2001599

(a) No. from	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
Part I	1,000 SHS GENERAL ELECTRIC AND 558 SHARES MGE ENERGY INC		······
_		\$61,001.	06/22/16
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
		 _ s	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
		 _ \$	
(a) No. rom Part i	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
		 \$	
(a) No. rom 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
_]			

Name of org	ganization			Employer Identification r	number
	E RUEPING ATKINSON FOUN Exclusively religious, charitable, etc., cont	DATION, INC	od in cooling by	39-2001599)
Part III	the year from any one contributor. Complete completing Part III, enter the total of exclusively religiou. Use duplicate copies of Part III if addition	columns (a) through (e) and the fo is, charitable, etc., contributions of \$1,000	llowing line entr	. For organizations	\$1,000 tot
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift		(d) Description of how gift is h	eld
}		(e) Transfer of	gift		
}	Transferee's name, address, a	nd ZIP + 4	Relati	onship of transferor to transferee	
7.55					
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift		(d) Description of how gift is h	eld
ļ	Transferee's name, address, a	(e) Transfer of s		onship of transferor to transferee	
	Transfered Straine, address, a		Tiolaa	- Landing of Landing of the Landing of	
(a) No					
(a) No. from Part i	(b) Purpose of gift	(c) Use of gift		(d) Description of how gift is h	eld
			_		
		(e) Transfer of	jift		
	Transferee's name, address, a	nd ZIP + 4	Relati	onship of transferor to transferee	
			- <u>-</u>		
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift		(d) Description of how gift is h	eld
		(e) Transfer of	 jift		<u> </u>
-	Transferee's name, address, a	nd ZIP + 4	Relati	onship of transferor to transferee	

FORM 990-PF	DIVIDENDS	AND INTER	EST	FROM SECUR	ITIES	STATEMENT	1
SOURCE	GROSS AMOUNT	CAPITAL GAINS DIVIDEND		(A) REVENUE PER BOOKS		(C) ST- ADJUS OME NET IN	TED
WELLS FARGO	1,698.		0.	1,698.	1,6	98.	
TO PART I, LINE 4	1,698.		0 · — =	1,698.	1,6	98.	
FORM 990-PF		ACCOUNTI	NG F	EES	-	STATEMENT	2
DESCRIPTION		(A) EXPENSES PER BOOKS				(D) D CHARIT ME PURPO	ABLE
SCHENCK SC - ACCOUNT	ring	1,250.		0.			0.
TO FORM 990-PF, PG	1, LN 16B	1,250.		0.			0.
FORM 990-PF		TAX	ES			STATEMENT	3
DESCRIPTION		(A) EXPENSES PER BOOKS				(D) D CHARIT ME PURPO	
TAXES		246.		0.			0.
TO FORM 990-PF, PG	1, LN 18 =	246.		0.			0.
FORM 990-PF		CORPORAT	E ST	оск		STATEMENT	4
DESCRIPTION				воо	K VALUE	FAIR MARK VALUE	ET
EXXON MOBIL CORP PROCTOR & GAMBLE CO AUTOMATIC DATA PROCI GENERAL ELECTRIC	ESSING				4,524. 4,227. 19,654. 15,312.	8, 23, 15,	734. 408. 126. 800.
MGE ENERGY INC				<u></u>	16,167.	19,	590.