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# SCANNED SEP 2 1 2017

# INITIAL SHORT PERIOD RETURN 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

		n 10 0016		<del></del>	Open to Public Inspection
	<del></del>	B 12, 2016	, and ending	DEC 31, 2016	<del></del>
warne o	of foundation			A Employer identification	number
BRA	KEBUSH FAMILY FOUNDATIO	N TNC.		81-1198198	
	and street (or P O box number if mail is not delivered to street	<del></del>	Room/suite	B Telephone number	<del></del>
N49	93 6TH DRIVE			608.296.21	21
City or	town, state or province, country, and ZIP or foreign p	postal code		C If exemption application is p	
	TFIELD, WI 53964-8200				
<b>G</b> Chec	k all that apply X Initial return	Initial return of a f	former public charity	D 1 Foreign organization:	s, check here
	Final return	Amended return			
	Address change	Name change		2 Foreign organizations me check here and attach co	mputation
	k type of organization X Section 501(c)(3) e	1		E If private foundation sta	
		Other taxable private found		under section 507(b)(1)	(A), check here
	·	ting method X Cash	Accrual	F If the foundation is in a	
(trom ►\$	Part II, col. (c), line 16) C (Part I, col.	Other (specify)	haqia l	under section 507(b)(1)	(B), check here ►∟
Part	Analysis of Revenue and Expenses	1		(a) A divisted ant	(d) Disbursements
<u> </u>	(The total of amounts in columns (b) (c), and (d) may not necessarily equal the amounts in column (a) )	(a) Revenue and expenses per books	(b) Net investment income	(c) Adjusted net	for charitable purposes (cash basis only)
1	Contributions, gifts, grants, etc., received	5,044,000.	1 1 1 1 1 1 1 1	N/A	(00311 00313 011))
2	Check I if the foundation is not required to attach Sch. B	1 1 1 1 1	14 V A V		
3	Interest on savings and temporary cash investments			, i i i i i i i i i i i i i i i i i i i	1. 9. O. N.
4	Dividends and interest from securities				N: 10. 11. N
5a	a Gross rents				), <u>.</u> . !:
t	Net rental income or (loss)	1. Fr _ Y	* * *	3, "AA N	<u> </u>
<u>a</u> 6a	Net gain or (loss) from sale of assets not on line 10     Gross sales price for all	N. 1700	? <b>* * * *</b>		<u> </u>
Revenue 2	assets on line 6a	***	0.		10. 10. 10.
7 <u>Ke</u>	Capital gain net income (from Part IV line 2)			VA Cay / V	
- B	Net short-term capital gain Income modifications				
102	Gross sales less returns and allowances		**	, , ,	
	Less Cost of goods sold	**************************************	4 3 7 3		
	Gross profit or (loss)		*		
11	Other income				1 2 7 1
12	Total. Add lines 1 through 11	5,044,000.	0.		_ ¥ `* ′\
13	Compensation of officers, directors trustees, etc	0.	0.		0.
14	Other employee salaries and wages		ļ		
15	Pension plans, employee benefits			REC	
ζ.	Legal fees	<del></del>	ļ <del></del>		
= ≘ .	o Accounting fees other professional fees			S SFP	1 4 /11/ 11/
ш	Interest	<del></del>	<del> </del>		1 6 5011 W
Administrative 19 10 10 11 12	Taxes	<del></del>		OCT	
19 19	Depreciation and depletion			UUL UUL	
튑20	Occupancy				
	Travel, conferences, and meetings				
pug 22	Printing and publications				
	Other expenses STMT 1	73.	0.		0.
Operating 52	Total operating and administrative		_		_
웹	expenses Add lines 13 through 23	73.	0.		0.
]23	Contributions, gifts, grants paid	2,546,400.			2,546,400.
26	Total expenses and disbursements. Add lines 24 and 25	2,546,473.	0.		2 546 400
27		2,330,313.	<del>  ° ·</del>		2,546,400.
	Excess of revenue over expenses and disbursements	2,497,527.	1	ļ	
- 1	Net investment income (if negative, enter -0-)		0.		<del> </del>
	Adjusted net income (if negative, enter -0-)			N/A	
622501 11	23 18 LHA For Panerwork Reduction Act Notice	a and instructions			Form 990-PF (2016)

Form **990-PF** 

<u>Fo</u>	rm 9	90-PF (2016) BRAKEBUSH FAMILY FOUNDA						81	-1198198 Page 2
F	art	Balance Sheets   Allached schedules and amounts in the description		eginning of yea					of year
_		Column shorte as for sing of year amounts only	(	a) Book Value		<u> </u>	(b) Book		(c) Fair Market Value
	1	Cash - non-interest-bearing					2,49	<u>7,527</u>	2,497,527.
		and the same of th							
	3	Accounts receivable -	4						
		Less allowance for doubtful accounts						_	
	4	Pledges receivable -	_						
		Less allowance for doubtful accounts -							7 44 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
	5	Grants receivable							
	6	Receivables due from officers, directors, trustees, and other		-				-	
	1	disqualified persons	ł						
	7	Other notes and loans receivable				*		`.I	
		Less allowance for doubtful accounts	1	* * *	- ^		^	~ ~ ~ ~	
s	8	Inventories for sale or use	1						
Assets	9	Prepaid expenses and deferred charges			_				
AS	102	Investments - U.S. and state government obligations							<del>                                       </del>
	1	Investments - corporate stock				_			
	1	Investments - corporate bonds	_						<del>-</del>
	!	Investments - land buildings and equipment basis	48.			v%	4		<u> </u>
	' '	_ <del></del>	1 ""- }	Chan't		**.		* ** *	
	12	Less accumulated depreciation	<del> </del> -						<del>                                     </del>
	12	Investments - mortgage loans Investments - other	-	<del>-</del> ·					
	13					\$.v.			× 4 8
	14	Land, buildings, and equipment basis			7	7%	٠	***	la Sa "l
	١	Less accumulated depreciation	1						
	15	Other assets (describe	<b>—</b> —						<del> </del>
	16	Total assets (to be completed by all filers - see the							
_	<del>                                     </del>	instructions. Also, see page 1, item I)			0.		2,49	<u>7,527.</u>	2,497,527.
	17	Accounts payable and accrued expenses							
	18	Grants payable							
es	19	Deferred revenue							
abilities	20	Loans from officers, directors, trustees, and other disqualified persons	L						
аþ	21	Mortgages and other notes payable							
_	22	Other liabilities (describe )							
	23	Total liabilities (add lines 17 through 22)	<u> </u>	<del></del>	0.			0.	
		Foundations that follow SFAS 117, check here							
		and complete lines 24 through 26 and lines 30 and 31							
Ses	24	Unrestricted							
aŭ	25	Temporarily restricted							
Ва	26	Permanently restricted							
Net Assets or Fund Balances		Foundations that do not follow SFAS 117, check here	1		ĺ				
Ţ		and complete lines 27 through 31							
ō	27	Capital stock, trust principal, or current funds			0.			0.	
set	28	Paid-in or capital surplus, or land, bldg, and equipment fund			0.			0.	7 🔅 :
As	29	Retained earnings, accumulated income, endowment, or other funds			0.		2,497	7,527.	7 * 1
ě	30	Total net assets or fund balances			0.		2,497	7,527.	1 ' " \"
_									1
	31	Total liabilities and net assets/fund balances	ļ		0.		2,497	7,527.	* !
D	art		alance				_,		<u></u>
	ar t								
		net assets or fund balances at beginning of year - Part II, column (a), line	30						
		t agree with end-of-year figure reported on prior year's return)						1	0.
		amount from Part I, line 27a						2	2,497,527.
		increases not included in line 2 (itemize)						3	0.
		ines 1, 2, and 3						4	2,497,527.
		eases not included in line 2 (itemize)						5	0.
6	Total	net assets or fund balances at end of year (line 4 minus line 5) - Part II, c	olumn (b)	<u>, l</u> ine 30				6	2,497,527.
									Form <b>990-PF</b> (2016)

Part IV Capital Gains a	and Losses for Tax on In	vestment	Income	_		91-11	98196 Page 3
(a) List and describe the kind(s) of property sold (e.g., real estate,			(b) How acquired (c		(c) Date acquired	(d) Date sold	
2-story brick warehouse, or common stock, 200 shs MLC Co )				D	- Donation	(mo., day, yr )	(mo., day, yr.)
<u>1a</u>	·			—			
b NOI	NE	<del></del>		┼			<del></del>
d d	<del></del>			+-			<del>-  </del>
e				1			
(e) Gross sales price	(f) Depreciation allowed (or allowable)		ost or other basis expense of sale	, 		(h) Gain or (lo: (e) plus (f) minu	
<u>b</u>							
C	. <del></del>						
d					<del></del> -	<del></del>	
Complete only for accets showing	g gain in column (h) and owned by t	ha foundation	on 12/21/60			#\ O= == (O=L /b) ==	
Complete only for assets showing	(j) Adjusted basis	1	xcess of col (i)			(I) Gains (Col (h) ga ol (k), but not less th	
(i) FM V as of 12/31/69	as of 12/31/69		r col (j), if any			Losses (from col	
<u>a</u>					· · · · · · · · · · · · · · · · · · ·	<del></del>	
<u>b</u>							
d d							-
e							<del></del>
2 Capital gain net income or (net cap	optal loss) { If gain, also enter If (loss), enter -0-			}	2		
3 Net short-term capital gain or (los	<b>C</b>		<i>c 1</i>	7			
If gain, also enter in Part I, line 8,		u (0)		)			
If (loss), enter -0- in Part I, line 8	. ,			<u>, 11</u>	3		
Part V Qualification U						come	27/2
(For optional use by domestic private	foundations subject to the section 4	.940(a) tax or	i net investment in	come.	)		N/A
If section 4940(d)(2) applies, leave th	ıs part blank						
Was the foundation liable for the secti	ion 4942 tax on the distributable am	ount of any v	ear in the hase ner	Shor			Yes No
If "Yes," the foundation does not quali			•				
	ach column for each year; see the in			ntries.			
(a) Base period years Calendar year (or tax year beginnin	(b) Adjusted qualifying dist	tributions	Net value of no	(c) onchar	itable-use asset	Dist	(d) ribution ratio divided by col (c))
2015	9 117		<del>-</del>			(30 (3)	
2014					······································		
2013							
2012							
2011			<u> </u>				
O Tatal of hear 4 polymon (d)							
<ul><li>2 Total of line 1, column (d)</li><li>3 Average distribution ratio for the 5</li></ul>	S-vear hace norted - divide the total o	n line 2 hy 5	or by the number	of ves	irc	2	
the foundation has been in existen	•	m mic z by o	, or by the number	OI yea		3	
4 Enter the net value of noncharitable	e-use assets for 2016 from Part X, I	ıne 5				4	
5 Multiply line 4 by line 3						5	
6 Enter 1% of net investment incom	e (1% of Part I, line 27b)					6	
7 Add lines 5 and 6						7	
8 Enter qualifying distributions from	Part XII. line 4					8	
• •	line 7, check the box in Part VI, line	1b, and com	plete that part usin	ng a 1%	% tax rate	<del></del>	

623521 11-23-16

Part VI   Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(b), or 4948 - see instructions)  1a Exempt operating foundations described in section 4940(a)(3)(2), check here		1990-PF (2016) BRAKEBUSH FAMILY FOUNDATION, INC. 8	<u>1-11</u>	<u>98198</u>		Page 4
Discretify of determation letter (attach copy of letter if necessary-see instructions)  b Dismissic foundations that meet this section 4940(e) requirements in Part V, fletch here	P	irt VI   Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 494	8 - see	instruc	tion	s)
b Domestic foundations that meet the section 4940(e) requirements in Part V, check here	18	Exempt operating foundations described in section 4940(d)(2), check here   and enter "N/A" on line 1				
of Part I, Ine 27b c All other domestic foundations enter 2% of line 27b Exempt foreign organizations enter 4% of Part I, line 12, cot. (b) 2 Tax ubder section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-) 3 Add lines 1 and 2 4 Subtitle A (incomes) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-) 5 Tax based on investment income Subtract line 4 from line 3 if zero or tess, enter -0- 5 Tax based on investment mome Subtract line 4 from line 3 if zero or tess, enter -0- 5 Tax based on investment mome Subtract line 4 from line 3 if zero or tess, enter -0- 5 Tax based on investment mome Subtract line 4 from line 3 if zero or tess, enter -0- 5 Tax based on investment mome Subtract line 6 from line 3 if zero or tess, enter -0- 5 Tax based on investment mome Subtract line 6 from line 3 if zero or tess, enter -0- 5 Tax based on investment mome Subtract line 6 from line 6 if line 6		Date of ruling or determination letter (attach copy of letter if necessary-see instructions)				
c. All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of Part I, line 12, col., (b)  2 Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)  3 Add lines 1 and 2  4 Subtile A (income) lax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)  5 Tax based on investment income. Subtract line 4 from line 3 If zero or less, enter -0-)  5 Credits/Payments  a 2016 estimated tax payments and 2015 overpayment credited to 2016  5 Exempt foreign organizations - tax withheld at source  6 Tax paid with application for extension of time to file (form 8868)  6 Backup withholding erroneously withheld  7 Total credits and payments. Add lines 6 through 6d  8 Enter any penalty for underpayment of estimated tax. Check here life form 2220 is attached  9 Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed  10 Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid  11 Enter the amount of time 10 to be. Credited to 2017 estimated tax. Part amount overpaid  11 Enter the amount of the 10 to be. Credited to 2017 estimated tax. Part amount overpaid  11 Enter the amount of the 10 to be. Credited to 2017 estimated tax. Part amount overpaid  11 Enter the amount of the 10 to be. Credited to 2017 estimated tax. Part amount overpaid  12 Enter the amount of the 10 to be. Credited to 2017 estimated tax. Part amount overpaid  13 Enter the amount of the 2010 during the year (either directly or indirectly) for political purposes (see instructions for the delinition)?  14 The answer is "Yes" to 1a or 1b. attach a detailed description of the activities and copies of any materials published or distributived by the foundation in connection with the activities.  15 Enter the rembursement (if any) paid by the foundation during the year for political purposes (see instructions for incorporation, or bylaws, or other similar instruments? if "Yes, "attach a detailed description	ŀ	Domestic foundations that meet the section 4940(e) requirements in Part V, check here and enter 1%	1			0.
2 Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-) 3 Add lines 1 and 2 4 Subtille A (incrome) lax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-) 5 Tax based on investment income Subtract line 4 from line 3. If zero or less, enter -0- 6 Credits/Payments. 2 2016 estimated tax payments and 2015 overpayment credited to 2016 6 Estimated tax payments and 2015 overpayment credited to 2016 6 Estimated tax payments and 2015 overpayment credited to 2016 6 Estimated tax payments and 2015 overpayment credited to 2016 6 Estimated tax payments and 2015 overpayment of lime to file (Form 8868) 6 Estimated tax payments and 2015 overpayment of lime to file (Form 8868) 7 Total credits and payments Add lines 5 and 8 through 6d 8 Enter any penalty for underpayment of estimated tax. The Add lines 5 and 8 is more than line 7, enter amount overpaid 10 overpayment If line 7 is more than the total of lines 5 and 8, enter the amount overpaid 10 overpayment If line 7 is more than the total of lines 5 and 8, enter the amount overpaid 11 Enter the amount of line 10 be Credited to 2017 estimated tax. Penalty International Common of line 10 be Credited to 2017 estimated tax. Penalty International Common of line 10 be Credited to 2017 estimated tax. Penalty International Common of line 10 be Credited to 2017 estimated tax. Penalty International Common of line 10 be Credited to 2017 estimated tax. Penalty International Common of line 10 be Credited to 2017 estimated tax. Penalty International Common of line 10 be Credited to 2017 estimated tax. Penalty International Common of line 10 be Credited to 2017 estimated tax. Penalty International Common of line 10 be Credited to 2017 estimated to military International Common of line 10 be Credited to 2017 estimated to section 4955 imposed during the year (1) On the foundation in Common on with the activities 2 better the amount (if any) of tax on political expenditures (section 4955) imposed during the year		of Part I, line 27b				
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3 Add lines 1 and 2 4 Subtitle A (income) tax (domestic section 4947(a)(1) trusts and laxable foundations only. Others enter -0-) 5 Tax based on investment income. Subtract line 4 from line 3 if zero or less, enter -0- 6 Credits/Payments a 2016 estimated tax payments and 2015 overpayment credited to 2016 6 Exempt foreign organizations - tax withheld at source c Tax paid with application for extension of time to file (form 8868) 6 Backup withholding erroneously withheld 7 Total credits and payments. Add lines 6a through 6d 8 Enter any penalty for underpayment of estimated tax. Check here ☐ if form 2220 is attached 9 Tax due lift total of lines 5 and 8 is more than line 7, enter amount owed 9 Tax due lift total of lines 5 and 8 is more than line 7, enter amount owed 10 Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid 11 Enter the amount of line 10 to be Credited to 2017 estimated tax. ► Retunded ► 11 11 Enter the amount of line 10 to be Credited to 2017 estimated tax. ► Retunded ► 11 11 Enter the amount of line 10 to be Credited to 2017 estimated tax. ► Retunded ► 11 12 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 intervene in any political campaign?  1a During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any political campaign?  1 Beat any political campaign?  2 But the answer is "Yes" to 1a or 1b. attach a detailed description of the activities of lines of the definition)?  1 If the answer is "Yes" to 1a or 1b. attach a detailed description of the activities c lid the foundation file Form 1120-PDL for this year?  1 Has the foundation managers I S O. (2) On foundation managers. I S O. 2 Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers. I S O. 3 Has the foundation engaged in any activit	_				~~	0.
4 Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-) 5 Tax based on investment income Subtract line 4 from line 3 if zero or less, enter -0- 6 Credits/yments a 2016 estimated tax payments and 2015 overpayment credited to 2016 b Exempt foreign organizations - tax withheld at source c Tax pad with application for extension of time to file (Form 8868) d Backup withholding erroneously withheld 7 Total credits and payments Add lines 56 through 6d 8 Enter any penalty for underpayment of estimated tax Check here if 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 Tax due if the total of lines 5 and 8 is more than line 7, enter amount owed 10 Overpayment if line 7 is more than the total of lines 5 and 8, enter the amount overpaid 11 Enter the amount of line 10 to be Credited to 2017 estimated tax ► Retunded ► 11  Part VIII-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 intervene in any political campaign?  b Did it spend more than \$100 during the year (either directly or indirectly) for political purpose (see instructions for the definition??  If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities c Did the foundation in Form 1120-POL for this year?  1b If Yes, "attach a detailed description of the activities  0. (2) On foundation managers. ► \$ 0.  Has the foundation managers or characterial individual expenditures (section 4955) imposed during the year  (1) On the foundation managers or characterial individual expenditure tax imposed on foundation managers F \$ 0.  Has the foundation managers or characterial individual expenditure tax imposed on foundation managers F \$ 0.  Has the foundation managers or characterial individual expenditure tax imposed on foundation managers F \$ 0.  Has the foundation managers or characterial individual expenditure tax individual	3					
5 Tax based on investment income Subtract line 4 from line 3 if zero or less, enter -0- 6 Credits/Payments a 2016 eshimated tax payments and 2015 overpayment credited to 2016 b Exempt foreign organizations - tax withheld at source c Tax paid with application for extension of time to file (Form 8868) d Backup withholding erroreously withheld 7 Total credits and payments. Add lines 6a through 6d 8 Enter any penalty for underpayment of estimated tax. Check here if if form 2220 is attached 9 Tax due lift the total of lines 5 and 8 is more than line 7, enter amount owed 10 Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid. 11 Enter the amount of line 10 to be. Gredited to 2017 estimated tax. ►    Part VII-A   Statements Regarding Activities. ►	4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	<u> </u>		-	
6 Credits/Payments a 2016 estimated tax payments and 2015 overpayment credited to 2016 b Exempt foreign organizations - tax withheld at source c Tax paid with application for extension of time to file (Form 8868) d Backup withholding erroneously withheld 7 Total credits and payments. Add lines 5a through 6d 8 Enter any penalty for underpayment of estimated tax. Check here I if Form 2220 is attached 8 Enter any penalty for underpayment of estimated tax. Check here I if Form 2220 is attached 8 Tax due. If the total of lines 5 and 8 is more than the 7, enter amount owed 9 Tax due. If the total of lines 5 and 8 is more than the rotal of lines 5 and 8, enter the amount owed 10 Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid 11 Enter the amount of line 10 to be. Credited to 2017 estimated tax. ► Refunded ► 11  Part VIII—A Statements Regarding Activities 1a During the tax year, did the foundation attempt to influence any national, state, or focal legislation or did it participate or intervene in any obtical campagn? b Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see instructions for the defunition)? If the answer is "Yes" to 1a or 1b. attach a detailed description of the activities or Did the foundation in connection with the activities c Did the foundation like Form 1120-P0L for this year?  1a Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year (1) On the foundation his Form 1120-P0L for this year?  2 Has the foundation made any changes, not previously seported to the IRS?  2 If "Yes," attach a detailed description of the activities 3 Has the foundation made any changes, not previously seported to the IRS?  3 If "Yes," attach a detailed description of the activities 3 Has the foundation made any changes, not previously seported to the IRS?  4 If "Yes," attach a detailed description of the activities 3 Has the foundation made any changes, not previously seported to the IRS?  5	5	F				
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remain in the governing instrument?						K
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	7	· · · · · · · · · · · · · · · · · · ·				
7 Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col. (c), and Part XV	•	bit 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		/		
On Enter the states to which the foundation reports or with which it is regulated (see instructions)	0.	Enter the states to which the foundation reports or with which it is registered (see instructions)				,
8a Enter the states to which the foundation reports or with which it is registered (see instructions)	Od			-		l
	h			-		l
b If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate)	U			,	I	
of each state as required by General Instruction G? If "No," attach explanation  9 Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for calendar	n			RD		
	3		11			v
	10	·	ייחואיי		y	
10 Did any persons become substantial contributors during the tax year? If the relation is schedule listing their names and addresses STMT 2 10 X Form 990-PF (2016)	10	Dis any persons account apparatural contributors during the tax year in residence a schedule listing their names and addresses				(2016)

Form 990-PF (2016) BRAKEBUSH FAMILY FOUNDATION	N, INC.	81-119819	8	Page 5
Part VII-A Statements Regarding Activities (continued)				
			Yes	No
11 At any time during the year, did the foundation, directly or indirectly, own a controll	ed entity within the meaning of			
section 512(b)(13)? If "Yes," attach schedule (see instructions)				X
12 Did the foundation make a distribution to a donor advised fund over which the found	dation or a disqualified person had adviso	ry privileges?		
If "Yes," attach statement (see instructions)		_12		X
13 Did the foundation comply with the public inspection requirements for its annual ref	urns and exemption application?	13	X	
Website address N/A				
14 The books are in care of ► CHARI SCHIEBER	Telephone	no ▶ 608.296.		
Located at ► N4993 6TH DRIVE, WESTFIELD, WI		ZIP+4 <b>▶</b> 5396	<u>4 -82</u>	00_
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		► <u>15</u>	N/A	
16 At any time during calendar year 2016, did the foundation have an interest in or a si	gnature or other authority over a bank,		Yes	No
securities, or other financial account in a foreign country?		16	1	X
See the instructions for exceptions and filing requirements for FinCEN Form 114. If	Yes," enter the name of the			1,,:,
foreign country ►  Part VII-B   Statements Regarding Activities for Which Forn	4720 May Be Required		60 X	3.3 4
		· · · · · · · · · · · · · · · · · · ·	Yes	l NIO
File Form 4720 if any item is checked in the "Yes" column, unless an e	xception applies.	<u> </u>	res	No
1a During the year did the foundation (either directly or indirectly)  (1) Engage in the color of explanes, or leagues of exposits with a deciral feet page.	-2	٦, ( <del>ك</del> ا (٠		
<ul> <li>(1) Engage in the sale or exchange, or leasing of property with a disqualified persoi</li> <li>(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it</li> </ul>		Yes X No		
a disqualified person?	10111)	Yes X No		i a
(3) Furnish goods, services, or facilities to (or accept them from) a disqualified per	son?	Yes X No	1 3 4 8	
(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified perso	<u> </u>	Yes X No	1 1	1
(5) Transfer any income or assets to a disqualified person (or make any of either as	_	163 [22] 140		
for the benefit or use of a disqualified person)?	and sic	Yes X No	12 1	
, (6) Agree to pay money or property to a government official? (Exception Check "N	0"			*
if the foundation agreed to make a grant to or to employ the official for a period				
termination of government service, if terminating within 90 days.)		Yes X No		ر الأيار
b If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the excep	tions described in Regulations		1. 1	
section 53.4941(d)-3 or in a current notice regarding disaster assistance (see instru	ctions)?	N/A 1b	_[	
Organizations relying on a current notice regarding disaster assistance check here			24.	
c Did the foundation engage in a prior year in any of the acts described in 1a, other th	an excepted acts, that were not corrected		* : %	ĺŽ.
before the first day of the tax year beginning in 2016?		10		X
2 Taxes on failure to distribute income (section 4942) (does not apply for years the fo	undation was a private operating foundati	on 3		ĵ.
defined in section 4942(j)(3) or 4942(j)(5))		' '	7 1 3	*
a At the end of tax year 2016, did the foundation have any undistributed income (lines	6d and 6e, Part XIII) for tax year(s) begin		133	4
before 2016?		Yes X No		: %
If "Yes," list the years ,,	,,	rract.		
<b>b</b> Are there any years listed in 2a for which the foundation is <b>not</b> applying the provision	1,1,7,1	ilect 5	* [14]	1
valuation of assets) to the year's undistributed income? (If applying section 4942(a)	(2) to <b>all</b> years listed, answer "No" and at		·~ ~-	
statement - see instructions)  c If the provisions of section 4942(a)(2) are being applied to any of the years listed in	On that the years have	N/A 2b		
			1	-1
3a Did the foundation hold more than a 2% direct or indirect interest in any business er	tarnrice at any time	,	i l	
during the year?	nerprise at any time	Yes X No		-
b If "Yes," did it have excess business holdings in 2016 as a result of (1) any purchase	ـــــا by the foundation or discussified persons			:
May 26, 1969, (2) the lapse of the 5-year period (or longer period approved by the C				
of holdings acquired by gift or bequest, or (3) the lapse of the 10-, 15-, or 20-year fi				
Form 4720, to determine if the foundation had excess business holdings in	·	N/A 3b		
4a Did the foundation invest during the year any amount in a manner that would jeopari	,	4a		X
<b>b</b> Did the foundation make any investment in a prior year (but after December 31, 196)			1	
had not been removed from jeopardy before the first day of the tax year beginning in		4b	_ _	Х
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FORM 990-PF (2016) BRAKEBUSH FAMILY FOUNDAT			<u>81-11981</u>	98 Page <b>6</b>
Part VII-B   Statements Regarding Activities for Which F	orm 4720 May Be R	equired <sub>(contin</sub>	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))?	Ye	es X No	
(2) Influence the outcome of any specific public election (see section 4955), or	to carry on, directly or indire	ectly,		
any voter registration drive?		Y	es X No	
(3) Provide a grant to an individual for travel, study, or other similar purposes	)		s X No	
(4) Provide a grant to an organization other than a charitable, etc., organization	described in section			
4945(d)(4)(A)? (see instructions)		Y	s X No	
(5) Provide for any purpose other than religious, charitable, scientific, literary,	or educational nurnoses, or fo			
the prevention of cruelty to children or animals?	o. 34434		s X No	
b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify unc	ler the excentions described i		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
section 53 4945 or in a current notice regarding disaster assistance (see instruc	•	n riogalations	N/A	5b   -
Organizations relying on a current notice regarding disaster assistance check he	′			
c If the answer is "Yes" to question 5a(4), does the foundation claim exemption fr		nod		
		- / -		1 .
expenditure responsibility for the grant?		I/A Y	es 🔛 No 📙	
If "Yes," attach the statement required by Regulations section 53 4945-			:	7 7 3
6a Did the foundation, during the year, receive any funds, directly or indirectly, to p	ay premiums on		<b>.</b>	
a personal benefit contract?		Y6		a. Sea.
<b>b</b> Did the foundation, during the year, pay premiums, directly or indirectly, on a pr	ersonal benefit contract?			6b X
If "Yes" to 6b, file Form 8870				`  <u>                                   </u>
7a At any time during the tax year, was the foundation a party to a prohibited tax sl		Ye	es X No	
b If "Yes," did the foundation receive any proceeds or have any net income attribu			N/A	7b
Part VIII Information About Officers, Directors, Truste Paid Employees, and Contractors	es, Foundation Mar	nagers, Highly		
_ <del></del>				
1 List all officers, directors, trustees, foundation managers and their c		I (-) Composed to	(d) Contributions to	
(a) Name and address	(b) Title, and average hours per week devoted	(c) Compensation (If not paid.	employee benefit plans and deferred	(e) Expense account, other
(a) Name and address	to position	`enter -0-)	compensation	allowances
		_	_	_
SEE STATEMENT 3		0.	0.	0.
		1		
2 Compensation of five highest-paid employees (other than those incl	uded on line 1). If none,	enter "NONE."		
(-) Name and address of each are less than 050 and	(b) Title, and average		(d) Contributions to employee benefit plans and deferred	(e) Expense account, other
(a) Name and address of each employee paid more than \$50,000	hours per week devoted to position	(c) Compensation	and deferred compensation	account, other allowances
NONE	astotoa to podition		oom pensation	and the transfer
		<b>,</b>	1	
<del></del>	·			<del></del>
<del></del>				
	<u> </u>			
···				
		<del> </del>		
		1		
		<del>                                     </del>		
		L		
Total number of other employees paid over \$50,000	_ <del></del>		▶⊥	0
			Earm	990-PF (2016)

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Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors (continued)		
3 Five highest-paid independent contractors for professional services. If none, enter "NONE."		
(a) Name and address of each person paid more than \$50,000 (b) Type of service		(c) Compensation
NONE		
	ļ	
Total number of others receiving over \$50,000 for professional services  Part IX-A   Summary of Direct Charitable Activities		0
List the foundation's four largest direct charitable activities during the tax year. Include relevant is statistical information such as the number of organizations and other beneficiaries served, conferences convened, research papers, produced, etc.	Γ	Expenses
1 N/A		
1		
2		
•		
3		
4		
Dort IV.B. C		
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
37/3		Amount
1N/A		
2		
All other program-related investments. See instructions		
3		
Total, Add lines 1 through 3		0.
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P	art X Minimum Investment Return (All domestic foundations must complete this part. Foreign four	ndations, s	see instructions )
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes		
а	Average monthly fair market value of securities	1a	0.
b	Average of monthly cash balances	1b	0. 654,785.
C	Fair market value of all other assets	1c	
d	Total (add lines 1a, b, and c)	1d	654,785.
е	Reduction claimed for blockage or other factors reported on lines 1a and		**
	1c (attach detailed explanation) 1e 0 •	ľ	
2	Acquisition indebtedness applicable to line 1 assets	2	0.
3	Subtract line 2 from line 1d	3	654,785.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions)	4	9,822.
5	Net value of noncharitable-use assets Subtract line 4 from line 3. Enter here and on Part V, line 4.	5	644,963.
6	Minimum investment return. Enter 5% of line 5 ADJUSTED FOR SHORT TAX PERIOD	6	28,547.
P.	art XI <sup>2</sup> Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations an	d certain	<u> </u>
	for eign organizations check here   and do not complete this part.)		
1	Minimum investment return from Part X, line 6	1	28,547.
2a	Tax on investment income for 2016 from Part VI, line 5	Ŷ,	
b	Income tax for 2016 (This does not include the tax from Part VI)  2b		
C	Add lines 2a and 2b	2c	0.
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	28,547.
4	Recoveries of amounts treated as qualifying distributions	4	0.
5	Add lines 3 and 4	5	28,547.
6	Deduction from distributable amount (see instructions)	6	0.
7_	Distributable amount as adjusted Subtract line 6 from line 5. Enter here and on Part XIII, line 1	7	28,547.
P	art XII Qualifying Distributions (see instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes		
a	Expenses, contributions, gifts, etc - total from Part I, column (d), line 26	_1a	2,546,400.
b	Program-related investments - total from Part IX-B	1b	0.
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes	2	
3	Amounts set aside for specific charitable projects that satisfy the.		<u></u> ,
а	Suitability test (prior IRS approval required)	3a	
b	Cash distribution test (attach the required schedule)	3b	
4	Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4	4	2,546,400.
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment		
	income Enter 1% of Part I, line 27b	5	
6	Adjusted qualifying distributions Subtract line 5 from line 4	6	2,546,400.
	Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation q	ualifies for	

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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	n Part XI,				
line 7					28,547.
2 Undistributed income if any as of the end	d of 2016				
a Enter amount for 2015 only				0.	
b Total for prior years		× *	0.	<b>,</b>	*
3 Excess distributions carryover, if ar	 nv_to 2016	*	, ,		
a From 2011	15, 10 20 10	,	3.2.3		,
<b>b</b> From 2012		· · · · · · · · · · · · · · · · · · ·	. ` ` ` * *		•,
c From 2013			* , 3		<u> </u>
d From 2014			\$ *	vý.	
e From 2015		i Šá		<b>*</b>	,
f Total of lines 3a through e		0.	5.		4. 1
4 Qualifying distributions for 2016 fro	nm.	\$\ \tilde{\chi_2}	77.7%	200.G	
Part XII, line 4 $\triangleright$ \$ 2,546					
a Applied to 2015, but not more than			<b>*</b>	0.	
<b>b</b> Applied to undistributed income of		1 (40)	\$ \$P\$\X	· · · · · · · · · · · · · · · · · · ·	37 3 3
years (Election required - see instru	•		0.		
c Treated as distributions out of corp	•			9 13 X A A A	\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \
(Election required - see instructions		0.	* ***	1886	
d Applied to 2016 distributable amou	•	**	( 1 PR. 1	**************************************	28,547.
e Remaining amount distributed out of		2,517,853.			20,347.
5 Excess distributions carryover applied to 2	,	2,317,033.		**************************************	0.
(If an amount appears in column (d) the sa must be shown in column (a))	ime amount				
6 Enter the net total of each column	as				
indicated below.		<u> </u>			14.
a Corpus Add lines 3f 4c, and 4e Subtract		2,517,853.	, / st.,	***	
b Prior years' undistributed income. S	Subtract			l. Š:	
line 4b from line 2b			0.	**	
c Enter the amount of prior years' undistributed income for which a no	otico of				
deficiency has been issued, or on w					
the section 4942(a) tax has been pr					
assessed		///	0.	7. Y.	* >
d Subtract line 6c from line 6b. Taxab	ole		•	, , , , , , , , , , , , , , , , , , ,	
amount - see instructions		4 %	0.	7	
e Undistributed income for 2015 Sub				_	*
4a from line 2a Taxable amount - s		* '		0.	х
f Undistributed income for 2016 Sub		^ /,	,		
lines 4d and 5 from line 1. This amo	ount must				0
<ul><li>be distributed in 2017</li><li>7 Amounts treated as distributions ou</li></ul>	ıt of				0.
					,
corpus to satisfy requirements impo	-				1
section 170(b)(1)(F) or 4942(g)(3) may be required - see instructions)		0.			
8 Excess distributions carryover from		0.			
not applied on line 5 or line 7	2011	0.			
, ,	017	0.			
9 Excess distributions carryover to 2 Subtract lines 7 and 8 from line 6a	V11.	2,517,853.			
O Analysis of line 9		2,311,033.			
a Excess from 2012					
b Excess from 2013	_				
c Excess from 2014					
d Excess from 2015					
<u> </u>	7,853.				
23581 11-23-16	,	<u> </u>		<u> </u>	Form 990-PF (2016)

Part XIV   Private Operating F	SH FAMILY F		LNC .	N/A	1198198 Page 10
<del></del>			-A, question 9)	N/A	
1 a If the foundation has received a ruling o					
foundation, and the ruling is effective fo	·	-	n anatum P	14040(2)(2) == [	4040(-)(5)
b Check box to indicate whether the found		T Touridation described i		4942(J)(3) or	4942(J)(5)
2 a Enter the lesser of the adjusted net	Tax year (a) 2016	(b) 2015	Prior 3 years (c) 2014	(d) 2013	(e) Total
income from Part I or the minimum	(4) 2010	(0) 2013	(0) 2014	(4) 2013	(6) 10(4)
investment return from Part X for					1
each year listed <b>b</b> 85% of line 2a		-		<del></del>	<del></del>
			<del>                                     </del>		
c Qualifying distributions from Part XII, line 4 for each year listed					
d Amounts included in line 2c not					
used directly for active conduct of					
exempt activities					
e Qualifying distributions made directly		<del></del>		<del> </del>	<del></del>
for active conduct of exempt activities					
Subtract line 2d from line 2c					
3 Complete 3a, b, or c for the			<del></del>		
alternative test relied upon					
<ul><li>a "Assets" alternative test - enter</li><li>(1) Value of all assets</li></ul>					
					<del></del>
(2) Value of assets qualifying under section 4942(j)(3)(B)(i)					
b "Endowment" alternative test - enter 2/3 of minimum investment return					
shown in Part X, line 6 for each year listed					
c "Support" alternative test - enter			,		
(1) Total support other than gross					
investment income (interest,					
dividends, rents, payments on securities loans (section					
512(a)(5)), or royalties)					
(2) Support from general public					
and 5 or more exempt organizations as provided in					
section 4942(j)(3)(B)(iii)					
(3) Largest amount of support from				•	
an exempt organization					
(4) Gross investment income					
Part XV Supplementary Info			f the foundation	had \$5,000 or	r more in assets
at any time during the	<u> </u>	uctions.)			
1 Information Regarding Foundation	-				
a List any managers of the foundation who year (but only if they have contributed m			ibutions received by the	foundation before t	he close of any tax
	iore (nam \$5,000). (See S	ection 507(a)(2).)			
NONE	100/	<del> </del>		<del></del>	<del></del>
b List any managers of the foundation who other entity) of which the foundation has			or an equally large porti	on of the ownership	ot a partnership or
NONE	. = 1070 or grouter interes	••			
	O Oist 1	Cabalanata ata Ba			
2 Information Regarding Contribution Check here ► X if the foundation of					
the foundation makes gifts, grants, etc. (	iny makes contributions i see instructions) to indiv	io preselecteu charitable i iiduals or organizations u	organizations and does in order other conditions or	not accept unsolicite omolete items 22 h	d requests for funds. If
a The name, address, and telephone numb					c, and u.
a The name, address, and telephone numb	iei oi e-iliali audiess oi t	ne person to whom appin	anons should be addres	sseu	
b The form in which applications should b	e submitted and informat	ion and materials they sh	ould include		
c Any submission deadlines:					
<del></del>				-	<del></del>
d Any restrictions or limitations on awards	, such as by geographica	il areas, charitable fields,	kınds of institutions, or	other factors:	

11100805 144198 128425

Part XVI-A	Analysis of Income-Producing A	ctivities

Enter gross amounts unless otherwise indicated.	Unrelate	d business income	Exclu	ided by section 512 513 or 514	(0)
Enter group amount amount and misc material.	(a) Business	(b)	(c) Exclu-	(d)	(e) Related or exempt
1 Program service revenue	Business code	Amount	sion code	Amount	function income
a		<del></del>	<u> </u>		
b			<del>-</del>		-
c		·			
d			<u> </u>		
			ļ	-	<del> </del>
f	-		<del> </del>		<del></del>
g Fees and contracts from government agencies	-	<del> </del>		-	
2 Membership dues and assessments					
3 Interest on savings and temporary cash			<del> </del>		
investments					
4 Dividends and interest from securities					
5 Net rental income or (loss) from real estate	8	· / 4°	~ >	<b>*</b> * ,	<i>(1)</i>
a Debt-financed property					****
b Not debt-financed property	1			,	<u> </u>
6 Net rental income or (loss) from personal	_	<del></del> .	_		<u> </u>
property					
7 Other investment income		<del></del>			
8 Gain or (loss) from sales of assets other					
than inventory					
9 Net income or (loss) from special events					
10 Gross profit or (loss) from sales of inventory	-		_		
11 Other revenue	<del></del>		-		
a	1 1			,	
b			<del> </del>		
6			<b></b>		
d	-				
e	-   -	0.	<b>-</b>	0.	
13 Total. Add line 12, columns (b), (d), and (e)		0.	′ •	<del> </del>	0.
(See worksheet in line 13 instructions to verify calculations.)				13	0.
Part XVI-B Relationship of Activities	to the Accor	nplishment of Exe	empt	Purposes	
Line No Explain below how each activity for which inci	ome is reported in	column (e) of Part XVI-A		urted importantly to the accom	onlishment of
▼ the foundation's exempt purposes (other than	by providing fund	ds for such purposes)	00111112	accomportantly to the accord	ipholiment of
		·			
	•				
					<del> </del>
					·
	-				
					<u> </u>
				<del></del>	<del></del>
				·	
				-	
					<del></del>
623621 11-23-16		<del></del> -			Form <b>990-PF</b> (2016)

608.249.6622 Form 990-PF (2016)

P00089483

Firm's EIN ► 39-0859910

Paid

Preparer

Use Only

Preparer's signature

Firm's name ▶ BAKER TILLY VIRCHOW KRAUSE, LLP

MADISON, WI 53707-7398

RUSSELL L WOLFF,

Signature of officer or trustee

Print/Type preparer's name

CPA, PARTNER

RUSSELL L WOLFF,

Firm's address ▶ PO BOX 7398

Check X If self- employed

Phone no

Title

08/05/17

Date

# 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 <a href="https://www.irs.gov/form990">www.irs.gov/form990</a>.

OMB No 1545-0047

2016

Name of the organization

Employer identification number

BF	RAKEBUSH FAMILY FOUNDATION, INC.	81-1198198				
Organization type (check of	one)					
Filers of	Section					
Form 990 or 990-EZ	501(c)( ) (enter number) organization					
	4947(a)(1) nonexempt charitable trust <b>not</b> treated as a private foundation					
	527 political organization					
Form 990-PF	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					
	s covered by the <b>General Rule</b> or a <b>Special Rule.</b> (7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule	e See instructions				
General Rule						
	n filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling one contributor. Complete Parts I and II. See instructions for determining a contributor's					
Special Rules						
sections 509(a)(1) a any one contributo	n described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support to and 170(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	r 16b, and that received from				
For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I, II, and III						
year, contributions is checked, enter h purpose Don't cor	n described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from an exclusively for religious, charitable, etc., purposes, but no such contributions totaled mother the total contributions that were received during the year for an exclusively religious, implete any of the parts unless the General Rule applies to this organization because it read, etc., contributions totaling \$5,000 or more during the year	re than \$1,000 If this box , charitable, etc ,				
but it must answer "No" on	at isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (For Part IV, line 2, of its Form 990 or check the box on line H of its Form 990-EZ or on its For the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF)					

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

Name of organization

Employer identification number

BRAKE	BUSH FAMILY FOUNDATION, INC.		1198198
Part I	Contributors (See instructions) Use duplicate copies of Part I if	additional space is needed	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	BRAKEBUSH BROTHERS INC.  N4993 6TH DRIVE  WESTFIELD, WI 53964	\$\$\$, <b>044</b> ,000.	Person X Payroll  Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash Complete Part II for noncash contributions )
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (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
123452 10-18	-18	\$Schedule B (Form	Person Payroll Noncash (Complete Part II for noncash contributions) 990, 990-EZ, or 990-PF) (2016)
	1.5	Senedale B (Form	330, 330-62, 01 330-71 / (2010)

2016.04013 BRAKEBUSH FAMILY FOUNDATI 128425\_1

Employer identification number

## BRAKEBUSH FAMILY FOUNDATION, INC.

81-1198198

art II	Noncash Property (See instructions) Use duplicate copies of P	art II if additional space is needed	
(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. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
		\$	
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
		\$	
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
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FORM 990-PF	OTHER EXPENSES		STATEMENT 1		
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES	
DELUXE BUSINESS SYSTEMS - CHECKS US BANK - ACCOUNT ANALYSIS	21.	0.		0.	
FEES	52.	0.		0.	
TO FORM 990-PF, PG 1, LN 23	73.	0.		0.	

FORM 990-PF	LIST OF SUBSTANTIAL CONTRIBUTORS	STATEMENT 2
	PART VII-A, LINE 10	

NAME OF CONTRIBUTOR

BRAKEBUSH BROTHERS INC.

ADDRESS

N4993 6TH DRIVE WESTFIELD, WI 53964

FORM 990-PF PA		LIST OF OFFICERS, I AND FOUNDATION MANA		STAT	EMENT 3
NAME AND ADDRESS		TITLE AND AVRG HRS/WK	COMPEN- SATION	EMPLOYEE BEN PLAN CONTRIB	EXPENSE ACCOUNT
CHARI SCHIEBER N4993 6TH DRIVE WESTFIELD, WI 53964		PRESIDENT 2.50	0.	0.	0.
MEGAN BRAKEBUSH N4993 6TH DRIVE WESTFIELD, WI 53964		TREASURER/SECF	RETARY 0.	0.	0.
CATHY ROBINSON N4993 6TH DRIVE WESTFIELD, WI 53964		DIRECTOR 2.50	0.	0.	0.
JUDY BRAKEBUSH N4993 6TH DRIVE WESTFIELD, WI 53964		DIRECTOR 2.50	0.	0.	0.
CAREY BRAKEBUSH N4993 6TH DRIVE WESTFIELD, WI 53964		DIRECTOR 2.50	0.	0.	0.
TOTALS INCLUDED ON 9	90-PF, PAG	E 6, PART VIII	0.	0.	0.

Total

STATEMENT 4 FORM 990-PF Part XV Supplementary Information 3a Grants and Contributions Paid During the Year If recipient is an individual show iny relationship to any foundation Purpose of Foundation status of Grant or manager or substantial contributor Name and addres Recipien Abiding Care Pregnacy Center P.O. Box 445 Medford WI 54451 Not Applicable General Support 10 000 1874 Wisconsin Hwy 13 Friendship WI 53934 Not Applicable 5 000 General Support Adams Food Pantry Adams Food Pantr 1874 Wisconsin Hwy 13 Friendship WI 53934 1874 Wisconsin Hwy 13 Friendship WI 53934 Not Applicable PC General Support 5 000 General Support 5 000 Adams Food Pantry Alliance Defense Fund 15100 N 90th Street Scottedale AZ 85260 Not Applicable General Support 20 000 Alzheimer's & Dementia Alliance of Wisconsin 517 North Segoe Road Suite 301 Madison Wi 53705 Not Applicable Montello Human Services American Cancer Society North Region P O Box 776 Pewaukee WI 53072 Not Applicable Relay for Life Marguette/Columbia 3 500 2530 Park Street Crand March WI 53936 P O Box 510 Hebron KY 41048 Ame can Legion Post 273 Not Applicable 500 Not Applicable General Support 50 000 Answers in Genesis Cami Daley 1015 Millies Way Waunakee WI 53597 Not Applicable PC Airborne 1 000 General Support Camp Luwisomo WS421 Aspen Road Wild Rose WI 54984 Not Applicable PC PC 50 000 Camp Luwisomo W5421 Aspen Road Wild Rose WI 54984 Not Applicable General Support 50 000 Camp Luwisom W5421 Aspen Road Wild Rose WI 54984 4280 Underwood Ave Montello WI 53949 Not Applicable PC General Support 50 000 Not Applicable PC General Support 5 000 Care and Share Food Pantry PC PC PC Care and Share Food Pantry 4280 Underwood Ave. Montello, WI 53949 Not Applicable General Support 5 000 4280 Underwood Ave Montello WI 53949 Not Applicable General Support 5 000 Care and Share Food Pantry Care Net 1350 MacArthur Road Madison WI 53714 Not Applicable General Support 25 000 . 1350 MacArthur Road Madison WI 53714 Not Applicable PC PC General Support 40 000 Care Net 3316 Hummingbird Lane Robstown TX 78380 Not Applicable 20 000 Child Outreach International Wanda Child Outreach International Coloma Fire Department 3316 Hummingbird Lane Robstown TX 78380 383 Industrial Drive Coloma WI 54930 Not Applicable PC Water Wells/flights and Roof 25 000 Not Applicable New equipment for new truck 10 000 PC PC PC 12290 Voyager Parkway Colorado Springs CO 80921 Not Applicable Unsponsored Medical Disaster Relief 75 000 Compassion O Box 117 2420 FM 1664 Quemado State TX 78877 20 000 Cornerstone Children's Ranch Cornerstone Children's Ranch P O Box 117 2420 FM 1664, Quemado State TX 78877 Not Applicable General Support 25 000 Cornerstone Children's Ranch P O Box 117 2420 FM 1664 Quemado State TX 78877 Not Applicable PC Christmas Gifts and Food 10 000 Not Applicable General Support Crescent Lake Bible Camp 2750 Bible Camp Drive Rhinelander WI 54501 PC 50 000 Crescent Lake Ruble Camp 2750 Bible Camp Drive Rhinelander WI 54501 Not Applicable PC General Support 50 000 50 000 2750 Bible Camp Drive Rhinelander WI 54501 PC PC Crescent Lake Bible Camp Not Applicable General Support P O Box 628222, Orlando FL 32862 Not Applicable CRU (Campus Crusade for Christ) Wisconsin Campuses 40 000 Emmaus Bible College 2570 Asbury Road Dubuque IA 52001 2570 Asbury Road, Dubuque IA 52001 Not Applicable PC PC Scholorships Long Distance Learning 20 000 Not Applicable General Support 50 000 Emmaus Bible College Emmaus Mercy Meals State Rd #49 Poy Sippi WI 54967 Not Applicable PC Load of Food 30 000 1909 W Second Street Appleton WI 54914 Not Applicable PC PC 88 5 Tower 25 000 Evangel Ministries Adams Co Fundraiser to help elderly P O Box 555, Friendship WI 53934 Faith in Action Not Applicable 300 P O Box 193 Eagle Grove IA 50533 P O Box 193 Eagle Grove IA 50533 50 Peru 10 Banquet \$50 000 overhead \$19 500 Pastor Sunni Go Serve Global Not Applicable 60 000 PC PC PC PC Not Applicable Go Serve Global Gospel for Asia 1116 St Thomas Way Wills Point TX 75169 Not Applicable For Water 15 000 Harrisville Fire Dept W4570 Elk Court Montello WI 53949 Not Applicable General Support 5 000 428 Underwood Avenue Montello WI 53949 5 000 Not Applicable General Support Healthy Community Healthy Youth Marquette County Help For Haiti 1129 South B Street Lake Worth FL 33460 Not Applicable Well and Truck 32.000 PC PC PC PC PC 1129 South B Street, Lake Worth FL 33460 Not Applicable General Support 25 000 Hope for Harti P O Box 557 Baraboo WI 53913 624 Tenth Street, Huntington WV 25706 Hope House Not Applicable General Support 15 000 Huntington City Missions Not Applicable General Suppor 5.000 204 Wernett Street Del Rio TX 78840 25 000 General Support Iglesia Luthern Cristso Iglesia Luthern Cristso 204 Wernett Street Del Rio TX 78840 Not Applicable Rible and Tuition 10 000 210 S Charles Street Westfield WI 53964 Not Applicable 25 000 PC PC PC PC Immanuel Luthern Church Jews for Jesus 354 W Yellow Wood Avenue San Tan Valley AZ 85140 Not Applicable Behold Our God Campaign 30 000 354 W Yellow Wood Avenue San Tan Valley AZ 85140 P O Box 2589 Monument CO 80132 Not Applicable Not Applicable 25 000 General Support 25,000 Joshua Fund General Support Life Outreach International P O Box 982000 Forth Worth, TX 76182 Not Applicable Water/Rescue/Food 60 000 2030 American Drive Neenah WI 54956 Not Applicable PC PC Lifest and Ferris Wheel 25 000 Life Promotions Life Promotions 2030 American Drive Neenah WI 54956 Not Applicable General Support 300 000 1333 S Kirkwood Road St Louis MO 63122 Not Applicable PC PC 50.000 Lutheran Church Missouri Synoi 660 Mason Ridge Center Drive St Louis, MO 63141 Not Applicable 1st half of pledge 50 000 Lutheran Hour Ministry Lutheran Hour Ministry 660 Mason Ridge Center Drive St Louis MO 63141 P O Box 224 Montello WI 53949 Not Applicable PC PC PC 2nd Pledge 50 000 Not Applicable General Support 5 000 Marquette Co EMTS N2876 Lakeshore Drive Montello, WI 53949 500 Marquette County Veterans MCV Fundraiser, Unda Hurrer Not Applicable Veterans PO Box 604 Bramerd MN 56401 Not Applicable PC PC PC PC Cotton Tree Schools 25 000 Not Applicable New Equipment 20 Underwood Avenue Montello WI 53949 Montello Fire Dept Montello Fire Dept 20 Underwood Avenue Montello WI 53949 Not Applicable General Support 5 000 20 000 50 000 P O Box 6079 Albert Lea MN 56007 Not Applicable General Suppor Navigators New Tribes 1000 East First Street Sanford FL 32771 Not Applicable **General Support** 3003 Snelling Ave North St Paul MN 55113 3003 Snelling Ave North St Paul MN 55113 Not Applicable PC Radio Stations 102 5 and 1190 35 000 Not Applicable PC PC Radio Stations 102 5 and 1190 Northwestern Media OGT Orphan Grain Train N4993 6th Drive, Westfield WI 53964 Not Applicable Lifest Display Board 3 000 N4993 6th Drive Westfield, WI 53964 Not Applicable PC PC OGT Orphan Grain Train I load of mercy meab. \$36 000 to 66 000 \$30 000 Mercy Meals & \$45 000 Shipping 75 000 OGT Orphan Grain Train N4993 6th Drive Westfield, WI 53964 Not Applicable N4993 6th Drive, Westfield WI 53964 N4993 6th Drive Westfield, WI 53964 PC PC PC OGT Orphan Grain Train Not Applicable Water/Food Haiti Relief Loads 66 000 Not Applicable New Truck 30,000 OGT Orphan Grain Train In-Country disaster relief OGT Orphan Grain Train Inc (Norfolk) P.O. Box 1466 Norfolk NE 68702 Not Applicable 10 000 P O Box 8927 Pueblo, CO 81008 Not Applicable PC PC General Support 10 000 Open Doors 30,000 Oxford Fire Department P O Box 221 Oxford WI 53952 Not Applicable SCBA Equipment Not Applicable Not Applicable General Support General Support P O Box 221 Oxford WI 53952 5 000 Oxford Fire Department PC PC PC PC PC 5,000 Portage Food Pantry 405 E Howard Portage, WI 53901 Portage Food Pantry 405 E Howard, Portage WI 53901 Not Applicable General Support 5 000 405 E Howard Portage WI 53901 Not Applicable General Suppor 5 000 Portage Food Pantry Prison Fellowship 25 000 P O Box 1550 Merrifield VA 22116 Not Applicable General Support Not Applicable Not Applicable General Suppor E7475 Rawhide Road, New London WI 54963 5 000 5 000 108 E Pleasant Street Portage WI 53901 Fundraiser River Haven Homeless Shelter USA Curling Voice of the Martyrs 5525 Clem's Way Stevens Point WI 54482 P O Box 443 Bartleville OK 74005 PC PC PC Not Applicable General Support 8 000 Not Applicable General Suppor 25 000 Wayshara Food Panto 220A Oakridge Court, Wautoma WI 54982 Not Applicable General Support 5 000 220A Oakridge Court Wautoma, WI 54982 Not Applicable Not Applicable PC PC 5 000 Waushara Food Pantry General Suppor 5 000 220A Oakridge Court Wautoma, WI 54982 Waushara Food Pantry General Support 291 First Street SW Wells MN 56097 291 First Street SW, Wells MN 56097 PC PC Wells Area Food Pantry Not Applicable General Support 5 000 5 000 Not Applicable General Suppor Wells Area Food Pantry Wells Fire Dept 180 3rd Street SE, Wells MN 56097 Not Applicable General Suppor 5 000 General Suppor Westfield Fire Dept 124 E Third Street Westfield WI 53964 Not Applicable PC PC 5 000 20 000 W6304 Eagle Ct Westfield WI 53964 Splash Pad Westfield Lions Club Westfield Schools N7046 County Road M Westfield WI 53964 N7046 County Road M Westfield WI 53964 Not Applicable Food Pantry 2 500 2 500 PC PC PC PC Not Applicable Westfield Schools 5 000 Westfield Township Fire Dept N5656 County Rd A. Westfield WI 53964 Not Applicable **General Support** 1501 W Mineral Ave Littleton CO 80120 Not Applicable vory Coast where needed most 25,000 50 000 World Venture 1501 W Mineral Ave Littleton CO 80120 Ivory Coast 11450 Translation Way, Orlando, FL 32862 11450 Translation Way, Orlando FL 32862 Wycliff Associates Inc Not Applicable PC General Support 20 000 Not Applicable Safe Haven Middle East 75 000 Wycliff Associates Inc Youth and Family Outreach - Neshkore W5472 County Road FN Neshkoro WI 54960 Not Applicable General Support 3 000

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