# EXTENDED TO MARCH 15, 2018 Return of Private Foundation

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

2949109000903

▶ Do not enter social security numbers on this form as it may be made public ▶ Information about Form 990-PF and its separate instructions is at www.irs.gov/form990pf

		of the Treasury	▶ Info	rmation about For	social security nur n 990-PF and its o					1	Open to Public	Inspection
_		dar vear 2016 (	or tax year begin			eparate	, and e			17	Open to Fubilic	inspection
		foundation	or tax your bogin	g	2, 2010		, 4.14	umg	A Employer identific		ımber	
<u> </u>	NNI	MARIE F	OUNDATIO	N, INC.					23-73013	323		
	Number and street (or P O box number if mail is not delivered to street address)  P.O. BOX 44					Room/suite	B Telephone number 651 – 303 -		6			
City or town, state or province, country, and ZIP or foreign postal code  MEDFORD, WI 54451				<del></del>	C If exemption application	on is pendi	ing, check here	▶□				
		all that apply.	Initia	l return			ormer public	charity	D 1 Foreign organiz	ations, ci	heck here	ightharpoons
			=======================================	return ess change	Amended Name ch			·	Foreign organization     check here and att	ons meeting ach compl	ig the 85% test utation	<b>&gt;</b>
, H	_	type of organiz	ation: X S	Section 501(c)(3) ex	empt private found Other taxable priva		ation	OH	E if private foundation			ed
	air ma	rket value of all	assets at end of	year J Accounti	ng method.	Cash	X Acc	rual	F If the foundation is	s in a 60-	-month termin	ation
	rom F •\$		8,192,62	27 . (Part I, colu	her (specify) mn (d) must be c	n cash l	basis )		under section 507	(b)(1)(B) 	), check here ————	<b>▶</b> ∟
P	art l	(The total of amo	evenue and Experiments in columns (b), at the amounts in col	(c), and (d) may not	(a) Revenue expenses per		1 (-)	nvestment ome	(c) Adjusted net	t	(d) Disburse for charitable p (cash basis	urposes
	1		gifts, grants, etc.	•	121,	000.	7. %		N/A	***	- A	
	3	Interest on saving cash investments	if the foundation is not rigs and temporary	equired to attach 5ch (6	<u> </u>		***************************************	**************************************	. » W			
	4 5a	Dividends and Gross rents	interest from sec	curities	131,	248.	13	1,248.		S	TATEME	NT 1
	b	Net rental income	· · · <del></del>		217.	621.	* 1					
9	6a b	Net gain or (loss) Gross sales price assets on line 6a	from sale of assets r	560,592.		021.	2 4					
Boylonia	7 8	Capital gain net in Net short-term	ncome (from Part IV,	line 2)		<u> </u>	21	7,621.				
S	9	Income modifi	cations				W. 6	* * *				
SCANNED	10a b	and allowances Less Cost of goo	ds sold			* *	<b>N</b>	* *				
Z	11	Gross profit or Other income	(loss)				<u> </u>					
	12		es 1 through 11		469,	869.	34	8,869.		na na		, <u>4</u> , **
N/A)	13	Compensation of	officers, directors to	rustees, etc		0.		0.				0.
_	14	Other employe	e salaries and wa	iges	L							
₩,	1		employee benefi	its		<del></del> -	<del> </del>		ļ			
2018	16a	Legal fees Accounting fee	<b>1</b> C	STMT 2	2	300.	<del> </del> -	575.	<del> </del>		1	,725.
2018	D C	Other profession		STMT 3		064.	2	2,016.				,048.
		Interest	EIVED	STMT 4	3,	243.		0.				0.
ì	19	Depreciation a	nd depletion	SO-S						£'	***	
700	20 21	Occupants R Travel, confere	1 5 2018 inces, and meetin	(次 <del>)</del> 198 <b>公</b>	7,	116.		0.			7	,116.
Oscarios Same Sales	22		ublications UT			775.		0.				775.
ţ	24	Total operatin	g and administra	itive								
č	25		d lines 13 throug gifts, grants paic		39,	$\frac{498.}{250.}$	2	2,591.			362	,664. ,250.
	120		s and disbursem									
	<del> </del>	Add lines 24 a			401,	<u>748.</u>	2	2,591.	<del> </del>		375	<u>,914.</u>
						101	ļ	<del></del>				- 4
	1		e over expenses and		68,	121.	3 2	6,278.	<del> </del>		nn.	
	1		It Income (if negative		<del></del>		1	0,270.	N/A			
623				Reduction Act Notic	e see instructions		<del></del>		·		Form <b>990</b> -	PF (2016)

1 Total net assets or fund balances at beginning of year - Part II, column (a), line 30		
(must agree with end-of-year figure reported on prior year's return)	1	7,107,695.
2 Enter amount from Part I, line 27a	2	68,121.
3 Other increases not included in line 2 (itemize) ▶	3	0.
4 Add lines 1, 2, and 3	4	7,175,816.
5 Decreases not included in line 2 (itemize) ► COST BASIS ADJUSTMENT	5	21,311.
6 Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b), line 30	6	7,154,505.

3,263.

375,682.

375,91<u>4</u>.

6

7

7 Add lines 5 and 6

See the Part VI instructions

6 Enter 1% of net investment income (1% of Part I, line 27b)

If line 8 is equal to or greater than line 7, check the box in Part VI, line 1b, and complete that part using a 1% tax rate.

8 Enter qualifying distributions from Part XII, line 4

3

Form 990-PF (2016) ANNMARIE FOUNDATION, INC.	<b>,</b>	23-7301	
Part VI Excise Tax Based on Investment Income (Section 49)	940(a), 4940(b), 4940(e), or 4	948 - see ir	istructions)
1a Exempt operating foundations described in section 4940(d)(2), check here   ■ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □			
b Domestic foundations that meet the section 4940(e) requirements in Part V, check here		1	3,263.
of Part I, line 27b	p and annot the		
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		2	0.
3 Add lines 1 and 2	,	3	3,263.
4 Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only	y Others enter -0-)	4	0.
5 Tax based on investment income Subtract line 4 from line 3 If zero or less, enter -0-		5	3,263.
6 Credits/Payments:			
a 2016 estimated tax payments and 2015 overpayment credited to 2016	6a	<u>.</u>	
<b>b</b> Exempt foreign organizations - tax withheld at source	6b		
c Tax paid with application for extension of time to file (Form 8868)	6c	<b>_ </b> &  .	
d Backup withholding erroneously withheld	6d		
7 Total credits and payments Add lines 6a through 6d		7	0.
8 Enter any <b>penalty</b> for underpayment of estimated tax. Check here X if Form 2220 is	attached	8	99.
9 Tax due If the total of lines 5 and 8 is more than line 7, enter amount owed	<b>&gt;</b>	9	3,362.
10 Overpayment If line 7 is more than the total of lines 5 and 8, enter the amount overpaints	1	10	
11 Enter the amount of line 10 to be Credited to 2017 estimated tax	Refunded ▶	11	
Part VII-A Statements Regarding Activities			I IV N.
1a During the tax year, did the foundation attempt to influence any national, state, or local le	egislation or did it participate or interven	e in	Yes No
any political campaign?			1a X
<b>b</b> Did it spend more than \$100 during the year (either directly or indirectly) for political pu			1b X
If the answer is "Yes" to 1a or 1b, attach a detailed description of the activitie	s and copies of any materials publis	hed or	
distributed by the foundation in connection with the activities			1c X
c Did the foundation file Form 1120-POL for this year?			1c X
d Enter the amount (if any) of tax on political expenditures (section 4955) imposed during			
(1) On the foundation.  \$\bigs\tau_{\text{out}}\$ (2) On foundation manages (2) On foundation manages (3) \text{out} \text		<u> </u>	
e Enter the reimbursement (if any) paid by the foundation during the year for political experimental experiments. ► \$ 0 •	enditure tax imposed on foundation		
managers. > \$0 .  2 Has the foundation engaged in any activities that have not previously been reported to the	oo IPS2		2 X
	ic mo-		
<ul><li>If "Yes," attach a detailed description of the activities</li><li>Has the foundation made any changes, not previously reported to the IRS, in its governing</li></ul>	ng instrument, articles of incorporation	or	
bylaws, or other similar instruments? If "Yes," attach a conformed copy of the cha		0.	3 X
4a Did the foundation have unrelated business gross income of \$1,000 or more during the			4a X
b If "Yes," has it filed a tax return on Form 990-T for this year?		N/A	4b
5 Was there a liquidation, termination, dissolution, or substantial contraction during the year	ear?		5 X
If "Yes," attach the statement required by General Instruction T			
6 Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfie	ed either.		
<ul> <li>By language in the governing instrument, or</li> </ul>			
By state legislation that effectively amends the governing instrument so that no manda	atory directions that conflict with the sta	te law	96.95
remain in the governing instrument?			6 X
7 Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes,"	complete Part II, col (c), and Part X	V	7 X
8a Enter the states to which the foundation reports or with which it is registered (see instru	uctions)		
WI			
<b>b</b> If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the	ne Attorney General (or designate)		
of each state as required by General Instruction G? If "No," attach explanation		i	8b X
9 Is the foundation claiming status as a private operating foundation within the meaning of		endar	
year 2016 or the taxable year beginning in 2016 (see instructions for Part XIV)? If "Yes	•		9 X V
10 Did any persons become substantial contributors during the tax year? If Yes attach a sc	hedule listing their names and addresses	F.	10   X orm <b>990-PF</b> (2016)
		F(	лип <del>330-г г</del> (2010)

3a Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year?

b 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

4a Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?

b 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?

Form 990-PF (2016)

X

3b

4a

orm 990 PF (2016) ANNMARIE FOUNDATION, INC.			23 - /301	3 <u>2 3</u> Page <b>6</b>
Part VII-B   Statements Regarding Activities for Which Fo	orm 4720 May Be Re	equired (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))?	Y	es X No	
(2) Influence the outcome of any specific public election (see section 4955), or	to carry on, directly or indire	ctly,		
any voter registration drive?	☐ Ye	es X No		
(3) Provide a grant to an individual for travel, study, or other similar purposes?		es X No		
(4) Provide a grant to an organization other than a charitable, etc., organization				
4945(d)(4)(A)? (see instructions)	□ v	es 🗓 No		
(5) Provide for any purpose other than religious, charitable, scientific, literary,				
the prevention of cruelty to children or animals?	or oddodnonar purpoods, or n		es X No	
b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify und	lar the exceptions described i		23 (25) 110	
section 53.4945 or in a current notice regarding disaster assistance (see instruc		ii riegulations	N/A	5b
Organizations relying on a current notice regarding disaster assistance check he	•		<b>▶</b> □	1. 1.
		nad		
c If the answer is "Yes" to question 5a(4), does the foundation claim exemption fro				
expenditure responsibility for the grant?		1/A Y	es 💹 No	
If "Yes," attach the statement required by Regulations section 53 4945-	1 /			·   •   •
<b>6a</b> Did the foundation, during the year, receive any funds, directly or indirectly, to p	ay premiums on	<u> </u>	₩	
a personal benefit contract?		Y	es 🗴 No	
<b>b</b> Did the foundation, during the year, pay premiums, directly or indirectly, on a per	ersonal benefit contract?			6b X
If "Yes" to 6b, file Form 8870			( <del></del>	
7a At any time during the tax year, was the foundation a party to a prohibited tax st		Y <sub>1</sub>	es X No	
b If "Yes," did the foundation receive any proceeds or have any net income attribut			N/A	7b
Part VIII Information About Officers, Directors, Truste	es, Foundation Mar	nagers, Highly		
Paid Employees, and Contractors				
List all officers, directors, trustees, foundation managers and their c		1	1.60-	<del></del>
(a) Name and address	(b) Title, and average hours per week devoted	(c) Compensation (If not paid,	(d) Contributions to employee benefit plan and deferred	(e) Expense account, other
(a) Name and address	to position	enter -0-)	compensation	allowances
SEE STATEMENT 9		0.	0	0.
		-		
		]		]
		"		
Compensation of five highest-paid employees (other than those incli	uded on line 1) If none	enter "NONF "		
2 - 2 - 1 - 2 - 1 - 2 - 1 - 2 - 1 - 2 - 2	(b) Title, and average	THE ITOIL.	(d) Contributions to	(e) Expense
(a) Name and address of each employee paid more than \$50,000	hours per week	(c) Compensation	(d) Contributions to employee benefit plans and deterred	(e) Expense account, other
NOVE	devoted to position		compensation	allowances
NONE				
	<del></del>			
		l		
	<del></del>			
		l		
		_	<u>.                                    </u>	
		]		
Total number of other employees paid over \$50,000		•		0

Form 990-PF (2016) ANNMARIE FOUNDATION, INC.	23-7	301323 Page 7
Part VIII Information About Officers, Directors, Trustees, Founda Paid Employees, and Contractors (continued)	tion Managers, Highly	_
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		
	_	
	<del></del>	
Total number of others receiving over \$50,000 for professional services		▶ 0
Part IX-A Summary of Direct Charitable Activities		
List the foundation's four largest direct charitable activities during the tax year. Include relevant statis		Expenses
number of organizations and other beneficiaries served, conferences convened, research papers prod	Juced, etc.	
1 N/A		
2		
<del></del>		
3		
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		
2		
All other control of the control of		
All other program-related investments. See instructions 3 NONE		
9 WOUTH		
		0.
Total Add lines 1 through 3		0.

P	ART X Minimum Investment Return (All domestic foundations must complete this part. Foreign foundations	dations,	see instructions )
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes:	35,2	
a	Average monthly fair market value of securities	1a	7,684,327.
b	Average of monthly cash balances	1b	7,684,327.
C	Fair market value of all other assets	1c	<del></del>
d	Total (add lines 1a, b, and c)	1d	7,788,924.
e	Reduction claimed for blockage or other factors reported on lines 1a and	(8)	
	1c (attach detailed explanation)	1,84	
2	Acquisition indebtedness applicable to line 1 assets	2	0.
3	Subtract line 2 from line 1d	3	7,788,924.
4	Cash deemed held for charitable activities Enter 1 1/2% of line 3 (for greater amount, see instructions)	4	116,834.
5	Net value of noncharitable-use assets Subtract line 4 from line 3. Enter here and on Part V, line 4.	5	7,672,090.
6	Minimum investment return Enter 5% of line 5	6	383,605.
P	art XI Distributable Amount (see instructions) (Section 4942(1)(3) and (1)(5) private operating foundations an	d certain	
	foreign organizations check here   and do not complete this part.)		
1	Minimum investment return from Part X, line 6	1	383,605.
2a	Tax on investment income for 2016 from Part VI, line 5	-10	
b	Income tax for 2016. (This does not include the tax from Part VI.)		
C	Add lines 2a and 2b	2c	3,263.
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	380,342.
4	Recoveries of amounts treated as qualifying distributions	4	0.
5	Add lines 3 and 4	5	380,342.
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	380,342.
P	art XII Qualifying Distributions (see instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes	*,	
а	Expenses, contributions, gifts, etc total from Part I, column (d), line 26	1a	375,914.
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.	<b>.</b>	
a	Suitability test (prior IRS approval required)	3a	
b	Cash distribution test (attach the required schedule)	3b	
4	Qualifying distributions Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4	4	375,914.
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	3,263. 372,651.
6	Adjusted qualifying distributions Subtract line 5 from line 4	6	372,651.
	Note The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation q	ualifies foi	
	4040(a) reduction of towing those years		

Form **990-PF** (2016)

## Part XIII: Undistributed Income (see instructions)

Distributable amount for 2016 from Part XI, line 7	(a) Corpus	(b) Years prior to 2015	(c) 2015	(d)
line 7	35/pus	L round prior to 2010	z (111°)	
line 7	Y 17-9 2822		- 10 10 1/A 1 X	2016
				380,342.
2 Undistributed income, if any as of the end of 2016				300,342.
a Enter amount for 2015 only			0.	
<b>b</b> Total for prior years				
,,		0.		
3 Excess distributions carryover, if any, to 2016				
a From 2011 74,129	·  *			
b From 2012 293,314				
c From 2013				
d From 2014 65, 185 e From 2015 19, 888	4			
f Total of lines 3a through e	452,516.			
4 Qualifying distributions for 2016 from	452,516.		* *	<u> </u>
Part XII, line 4: ► \$ 375, 914.				
a Applied to 2015, but not more than line 2a	4		0	
b Applied to undistributed income of prior		<u> </u>		
years (Election required - see instructions)		0.		
c Treated as distributions out of corpus	***			* **
(Election required - see instructions)	0.			
d Applied to 2016 distributable amount				375,914.
e Remaining amount distributed out of corpus	0.			* *
5 Excess distributions carryover applied to 2016 (If an amount appears in column (d), the same amount	4,428.		Sec	4,428.
must be shown in column (a))				
6 Enter the net total of each column as				
indicated below	440,000			
a Corpus Add lines 3f 4c, and 4e Subtract line 5	448,088.	· · · · · · · · · · · · · · · · · · ·		
<b>b</b> Prior years' undistributed income Subtract line 4b from line 2b		0		
c Enter the amount of prior years'	8.63	0.		***
undistributed income for which a notice of				
deficiency has been issued, or on which the section 4942(a) tax has been previously				
assessed		0.		
d Subtract line 6c from line 6b Taxable				
amount - see instructions		0.		
e Undistributed income for 2015 Subtract line			2	
4a from line 2a Taxable amount - see instr			0.	
f Undistributed income for 2016. Subtract				
lines 4d and 5 from line 1. This amount must				
be distributed in 2017			· Mi · Agent · · ·	0.
Amounts treated as distributions out of	,		'	· 4 * 1
corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3) (Election				- "-
may be required - see instructions)	0.			
Excess distributions carryover from 2011				
not applied on line 5 or line 7	69,701.			
Excess distributions carryover to 2017	05,701.			
Subtract lines 7 and 8 from line 6a	378,387.			
Analysis of line 9				
a Excess from 2012 293,314.				
b Excess from 2013				
c Excess from 2014 65, 185.				
d Excess from 2015 19,888.				
e Excess from 2016				Form <b>990-PF</b> (2016)

	E FOUNDATIO			23-73	0,1323 Page 10
Part XIV Private Operating F	oundations (see in	structions and Part VII	-A, question 9)	N/A	<u>′</u> 
1 a If the foundation has received a ruling of foundation, and the ruling is effective for			•		
<b>b</b> Check box to indicate whether the found	dation is a private operatir	ng foundation described i	n section	4942(J)(3)∠ór49	942(j)(5)
2 a Enter the lesser of the adjusted net	Tax year		Prior 3 years	/	
income from Part I or the minimum	(a) 2016	(b) 2015	(c) 2014	/ <b>(d)</b> 2013	(e) Total
investment return from Part X for				/	
each year listed					
<b>b</b> 85% of line 2a	<u> </u>		1	<del></del>	
c Qualifying distributions from Part XII,	r	<del></del>		<del> </del>	
line 4 for each year listed					
d Amounts included in line 2c not		<del> </del>		<del>                                     </del>	
used directly for active conduct of					1
exempt activities					
e Qualifying distributions made directly					
for active conduct of exempt activities.					
Subtract line 2d from line 2c			Y		
3 Complete 3a, b, or c for the			*		
alternative test relied upon					
<ul><li>a "Assets" alternative test - enter</li><li>(1) Value of all assets</li></ul>					
(2) Value of assets qualifying					
under section 4942(j)(3)(B)(i)					
b "Endowment" alternative test - enter 2/3 of minimum investment return	Į.				
shown in Part X, line 6 for each year					
listed	<u> </u>	<del></del>	<del> </del>		<del> </del>
c "Support" alternative test - enter:					
<ol> <li>Total support other than gross investment income (interest,</li> </ol>	}	<b>/</b>			
dividends, rents, payments on					
securities loans (section					
512(a)(5)), or royalties)		<del></del>	<del> </del>		ļ
(2) Support from general public and 5 or more exempt					
organizations as provided in					
section 4942(j)(3)(B)(iii) -	<del></del>				
(3) Largest amount of support from		[			
an exempt organization				<del> </del>	<b> </b>
(4) Gross investment income  Part XV   Supplementary Info	rmation (Comple	te this part only i	f the foundation	had \$5,000 or mor	re in assets
at any time during t			. the realisation	40,000 01 11101	o in accord
1 Information Regarding Foundation		<del></del>		<del></del>	
a List any managers of the foundation wh	=	than 2% of the total contr	ributions received by th	e foundation before the clos	e of any tax
year (but only if they have contributed r			Tibulions received by th	e logitaation before the clos	c or arry tax
NONE					
b List any managers of the foundation wh	o own 10% or more of th	e stock of a corporation (	or an equally large port	ion of the ownership of a pa	rtnership or
other entity) of which the foundation ha			, , , , , , , , , , , , , , , , , ,	,	r
NONE					
2 Information Regarding Contribute	on, Grant, Gift, Loan,	Scholarship, etc., Pr	ograms:	<del></del>	
Check here 🕨 🔲 if the foundation of		• • •	•	not accept unsolicited requi	ests for funds. If
the foundation makes gifts, grants, etc					
a The name, address, and telephone num	ber or e-mail address of t	he person to whom appli	cations should be addre	essed.	
SEE STATEMENT 10  b The form in which applications should be	ne submitted and informat	ion and materials they st	oould include	<del></del>	
c Any submission deadlines					
d Any restrictions or limitations on award	s, such as by geographica	al areas, charitable fields.	kınds of institutions, oi	other factors	
		,	,		

Recipient If recipient is an individual, show any relationship to any foundation manager or substantial contributor In recipient In rec	
2 Paid during the year  SEE ATTACHMENT	
2 Paid during the year  SEE ATTACHMENT	
362,	050
	250.
	•
Total ► 3a 362,	250.
b Approved for future payment	
NONE	
NONE	
Total ▶ 3b	0.

### Part XVI-A: Analysis of Income-Producing Activities

Enter gross amounts unless otherwise indicated.	Unrelate	ed business income	Excluded	d by section 512 513, or 514	(0)
Program service revenue.	(a) Business code	(b) Amount	(C) Exclu- sion code	(d) Amount	(e) Related or exempt function income
a	Code	·	-		
b			T		
С					
d					
e					·
f					
g Fees and contracts from government agencies					
2 Membership dues and assessments					
3 Interest on savings and temporary cash					
Investments			14	131,248.	
4 Dividends and interest from securities  5. Not reported income or (local) from real cetate.			14	131,240.	
<ul> <li>Net rental income or (loss) from real estate.</li> <li>a Debt-financed property</li> </ul>	37.79	<u></u>	++	· · · · · · · · · · · · · · · · · · ·	<u>'</u>
b Not debt-financed property		<del></del>	+-+		
6 Net rental income or (loss) from personal			+-+		
property					
7 Other investment income			+-+		
8 Gain or (loss) from sales of assets other		· · · · · · · · · · · · · · · · · · ·			<del></del>
than inventory	l l		18	217,621.	
9 Net income or (loss) from special events					
O Gross profit or (loss) from sales of inventory					
1 Other revenue.					
a					
b	_		+-+		
c	1 1				
d	_				<del> </del>
e		0		249 960	
2 Subtotal. Add columns (b), (d), and (e)	- 3 Mars		<u>•  </u>	348,869.	0. 348,869.
3 Total Add line 12, columns (b), (d), and (e) See worksheet in line 13 instructions to verify calculations				13	340,007.
Part XVI-B Relationship of Activities		mplishment of Ex	cempt P	urposes	
Line No Explain below how each activity for which i					dishment of
▼ the foundation's exempt purposes (other th				p,	
NOT APPLICABLE					
<del></del>		-			<del> </del>
		<del>~</del>			
				<del></del>	<del></del>
			-	<del></del>	
	<del></del>		<del>-</del>		<del> </del>
<del></del>	<del></del>	<del></del>	· -	<del> </del>	<del></del>
					<del></del>

		RIE FOUNDATION			7301323	Page 13
Part <sub>.</sub>	Information Re Exempt Organ		and Transactions ar	nd Relationships With None	charitable	
1 Di	- <del></del>	<del></del>	wing with any other organization	n described in section 501(c) of	(23)	Yes No
	Code (other than section 501(c				2.0	257 (27)
	ansfers from the reporting found				44.4	
(1	Cash				1a(1)	X
(2	Other assets				1a(2)	X
<b>b</b> Ot	ner transactions:				<u> </u>	A 1.2 %
(1	Sales of assets to a noncharita	able exempt organization			1b(1)	<u> X</u>
	Purchases of assets from a no		1		1b(2)	X
•	Rental of facilities, equipment,				1b(3)	<u> X</u>
•	Reimbursement arrangements				1b(4)	- X
•	Loans or loan guarantees				1b(5)	X
•	Performance of services or me	•			1b(6)	$\frac{X}{X}$
	aring of facilities, equipment, ma	• , , ,	, ,	ways about he few market value of the s	1c l	
				vays show the fair market value of the g e in any transaction or sharing arrangen		115,
	lumn (d) the value of the goods,			e in any transaction of Sharing arrangen	ioni, snow in	
(a) Line	<del></del>	<del></del>	able exempt organization	(d) Description of transfers transaction	is, and sharing arra	ngements
		N/A	A			
			<del></del>			
		<u> </u>				
	<del></del>					
		<del> </del>	· · · · · · · · · · · · · · · · · · ·			
		ļ		-		<del></del>
	<del></del>		<del></del>	<del>                                     </del>		
	<del></del>	<del> </del>	<del></del>	<del> </del>	<del></del>	
	<del> </del>	<del> </del>	<del></del>	+		
	<del></del>		<del></del>	<u> </u>		
2a Is	the foundation directly or indirec	tly affiliated with, or related to,	one or more tax-exempt organiz	zations described		
ın	section 501(c) of the Code (othe	r than section 501(c)(3)) or in s	section 527?		Yes	X No
b if	Yes," complete the following sch		<del></del>	<del></del>		
	(a) Name of or	ganization	(b) Type of organization	(c) Description of re	lationship	
	N/A	<del></del>				
	<del></del>					
	·	·	<del></del>	<del></del>	<del></del>	
			- · · · · -	atements, and to the best of my knowledge	May the IRS di	ecuse this
Sign		nplete Declaration of preparer (other t	<i>h</i> / /	ion of which preparer has any knowledge	return with the	preparer
Here	1 Julia	4. Kuff	3/9/2018	VICE PRESIDENT	X Yes	☐ No
	Signature of officer or truster		Date	Title		
	Print Type preparer's n		's signature		PTIN	
Delet	MICHAEL J	· •		self- employed		
Paid	CPA		AEL J PETERSO	02/12/18	P01833	
Prep	arer Firm's name ► WIF	, <sub>Ի</sub> Ր ԻՐ <sub>Ի</sub>		Firm's EIN ► 3	9-075844	<del>1</del>

952.548.3400 Form **990-PF** (2016)

**Use Only** 

Firm's address ▶ 7601 FRANCE AVENUE SOUTH, SUITE 400

MINNEAPOLIS, MN 55435

#### Schedule B (Form 990, 990-EZ,

or 990-PF) Department of the Treasury Internal Revenue Service

Name of the organization

#### **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 irs gov/form990 .

OMB No 1545-0047

ANNMARTE FOUNDATION

Employer identification number

A	NNMARIE FOUNDATION, INC.	23-7301323						
Organization type (check	one)							
Filers of:	Section:							
Form 990 or 990-EZ	501(c)( ) (enter number) organization							
	4947(a)(1) nonexempt charitable trust not treated as a private foundation							
	527 political organization	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							
	us covered by the <b>General Rule</b> or a <b>Special Rule</b> . c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special	Rule See instructions						
General Rule								
	on filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totally one contributor. Complete Parts I and II. See instructions for determining a contribu							
Special Rules								
For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of (1) \$5,000 or (2) 2% of the amount on (i) Form 990-EZ, line 1 Complete Parts I and II								
year, total contrit	For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I, II, and III							
For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions exclusively for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., purpose. Don't complete any of the parts unless the General Rule applies to this organization because it received nonexclusively religious, charitable, etc., contributions totaling \$5,000 or more during the year.								
but it must answer "No" o	that isn't covered by the General Rule and/or the Special Rules doesn't file Schedule I on Part IV, line 2, of its Form 990, or check the box on line H of its Form 990-EZ or on i 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

ANNMARIE	FOUNDATION,	INC.

23-7301323

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	DEBRA A. CERVENKA  4200 MINNESOTA AVE.  DULUTH, MN 55802	\$ <u>120,500.</u>	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 Oncash 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
		\$	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 Noncash (Complete Part II for noncash contributions)

Name of organization

Employer identification number

#### ANNMARIE FOUNDATION, INC.

23-7301323

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. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
		\$	
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
		\ \$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
		\ \$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
		\$	
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
		_	

Name of organization Employer identification number ANNMARIE FOUNDATION, 23-7301323 Exclusively religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8), or (10) that total more than \$1,000 for the year from any one contributor. Complete columns (a) through (e) and the following line entry. For organizations Part III completing Part III enter the total of exclusively religious charitable etc., contributions of \$1,000 or less for the year (Enter this into once) Use duplicate copies of Part III if additional space is needed (a) No. from Part I (d) Description of how gift is held (b) Purpose of gift (c) Use of gift (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from (b) Purpose of gift (c) Use of gift (d) Description of how gift is held Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from (b) Purpose of gift (c) Use of gift (d) Description of how gift is held Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from (b) Purpose of gift (c) Use of gift (d) Description of how gift is held Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee

FORM 990-PF	DIVIDENDS	S AND INTER	EST FROM SECUR	ITIES S'	TATEMENT 1	
GROSS SOURCE AMOUNT		CAPITAL GAINS DIVIDEND	REVENUE	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	
DIVIDENDS ON SECURITIES	279,743.	218,71	0. 61,033.	61,033.		
INTEREST ON CORPORATE BONDS	70,215.		0. 70,215.	70,215.		
TO PART I, LINE 4	349,958.	218,71	0. 131,248.	131,248.		
FORM 990-PF		ACCOUNTI	NG FEES	S	TATEMENT 2	
DESCRIPTION		(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES	
TAX ACCOUNTING FEES	<del></del>	2,300.	575.		1,725.	
TO FORM 990-PF, PG 1, LN 16B		2,300.	575.	1,72		
	<del></del>	- <del></del>				
FORM 990-PF	ľO	THER PROFES	SIONAL FEES	S	TATEMENT 3	
DESCRIPTION		(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES	
ADMIN SERVICES INVESTMENT MANAGEMENT	FEES	4,048. 22,016.	0. 22,016.		4,048.	
TO FORM 990-PF, PG 1,	LN 16C	26,064.	22,016.		4,048.	
	<del></del>	<del></del>				
FORM 990-PF		TAXES		STATEMENT 4		
DESCRIPTION		(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES	
ESTIMATED TAXES		3,243.	0.		0.	
TO FORM 990-PF, PG 1,	LN 18	3,243.	0.		0.	

FORM 990-PF	OTHER E	XPENSES		STATEMENT 5		
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVE: MENT INC				
WEBSITE	775.		0.	775.		
TO FORM 990-PF, PG 1, LN 23	775.		0.	775.		
FORM 990-PF U.S. AND	STATE/CITY G	OVERNMENT	OBLIGATIONS	STATEMENT 6		
DESCRIPTION	U.S GOV'	• OTHER	BOOK VALUE	FAIR MARKET VALUE		
VARIOUS US TREASURY BONDS	X		87,683.	89,968.		
TOTAL U.S. GOVERNMENT OBLIGA		-	87,683.	89,968.		
TOTAL STATE AND MUNICIPAL GOTOTAL TO FORM 990-PF, PART I		- IGATIONS	87,683.	89,968.		
FORM 990-PF	CORPORAT	E STOCK		STATEMENT 7		
DESCRIPTION			BOOK VALUE	FAIR MARKET VALUE		
VARIOUS CORPORATE STOCK		-	4,924,912.	5,962,718.		
TOTAL TO FORM 990-PF, PART I	I, LINE 10B	=	4,924,912.	5,962,718.		
FORM 990-PF	CORPORAT	E BONDS		STATEMENT 8		
DESCRIPTION			BOOK VALUE	FAIR MARKET VALUE		
		-				
VARIOUS CORPORATE BONDS			2,090,779.	2,088,810.		

FORM 990-PF	PART VIII - LIST TRUSTEES AND	OF OFFICERS, DI		STAT	EMENT 9
NAME AND ADDRESS		TITLE AND AVRG HRS/WK	COMPEN- SATION	EMPLOYEE BEN PLAN CONTRIB	EXPENSE ACCOUNT
KRIS BECKER P.O. BOX 44 MEDFORD, WI 54451		MEMBER 1.00	0.	0.	0
KRISTI DEBRUYNE P.O. BOX 44 MEDFORD, WI 54451		MEMBER 1.00	0.	0.	0 .
DAVID FISH P.O. BOX 44 MEDFORD, WI 54451		MEMBER 1.00	0.	0.	0 .
DAVID FLESSERT P.O. BOX 44 MEDFORD, WI 54451		MEMBER 1.00	0.	0.	0
VICKI GJOVIK P.O. BOX 44 MEDFORD, WI 54451		MEMBER 1.00	0.	0.	0
ED LUCAS P.O. BOX 44 MEDFORD, WI 54451		PRESIDENT 1.00	0.	0.	0 .
JULIA RUFF P.O. BOX 44 MEDFORD, WI 54451		VICE PRESIDENT 1.00	0.	0.	0 .
BRIAN KIEFFER P.O. BOX 44 MEDFORD, WI 54451		SECRETARY 1.00	0.	0.	0.
TOTALS INCLUDED O	N 990-PF, PAGE 6,	PART VIII	0.	0.	0

FORM 990-PF GRANT APPLICATION SUBMISSION INFORMATION PART XV, LINES 2A THROUGH 2D

STATEMENT 10

NAME AND ADDRESS OF PERSON TO WHOM APPLICATIONS SHOULD BE SUBMITTED

PLEASE SEE ATTACHMENT

FORM AND CONTENT OF APPLICATIONS

PLEASE SEE ATTACHMENT

ANY SUBMISSION DEADLINES

PLEASE SEE ATTACHMENT

#### RESTRICTIONS AND LIMITATIONS ON AWARDS

IF A STUDENT IS RECEIVING SCHOLARSHIPS FROM OTHER SOURCES, ONLY THOSE STUDENTS RECEIVING LESS THAN \$1,000 SHOULD BE CONSIDERED FOR THE ANNMARIE SCHOLARSHIP. 2) WHILE WE RECOGNIZE THAT GOOD GRADES ARE AN INTEGRAL PART OF SELECTING A SCHOLARSHIP WINNER, WE DO NOT WANT TO RESTRICT THE SELECTION PROCESS TO ONLY THE TOP TEN OR TWENTY STUDENTS. IF THERE IS A STUDENT WHO HAS A GOOD ACADEMIC RECORD BUT HAS NOT BEEN IN THE "TOP TEN", WE WISH HIM/HER TO BE CONSIDERED ALONG WITH THE "TOP TEN". 3) EXTRA-CURRICULAR AND COMMUNITY ACTIVITIES SHOULD BE CONSIDERED ALONG WITH ACADEMICS.