

Return of Private Foundation

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

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De Inte	partme ernal R	ent of the Treasury Levenue Service	➤ Do not enter s ➤ Go to www.ii		irity numbers on <i>m990PF</i> for instru					en to Public Inspection
For calendar year 2017 or tax year beginning Name of foundation						, 2017	, and endi	ng		, 20
								A	Employer identific	eation number
i	TOHN	M. KOHLER	FOUNDATION INC		_				20-	0497413
	umbe	r and street (or P O b	ox number if mail is not deliver	ed to street	address)		Room/suite	В	Telephone numbe	r (see instructions)
1	PO E	3OX 0634							92	0-459-6942 /
-6	ity or t	town, state or provinc	e, country, and ZIP or foreign p	ostal code						
								C	If exemption applicat pending, check here.	
1	MILV	WAUKEE, WI	53201-0634						,	
		ck all that apply:			Initial return of	of a former p	oublic char	ity _D	1 Foreign organization	ons, check here ►
			Final return		Amended ret	urn			2 Foreign organizati	ons meeting the
			Address change		Name change)			85% test, check he computation	
H	Che	ck type of organi	zation: X Section 50	1(c)(3) e	xempt private fo	oundation	AU		If assume forward at an	
Γ	s	ection 4947(a)(1)	nonexempt charitable trust		ther taxable p <u>ri</u>	vate foundat	tion U		If private foundation under section 507(b)	
1				counting	method: X Ca	ish Acc	crual	F		a 60-month termination
	end	of year (from Pa	art II, col. (c), line	Other (sp	pecify)				under section 507(b)	(1)(B), check here . >
	16)	▶ \$	70,509. (Part	i, column	(d) must be on ca	sh basis)				
F	art I		venue and Expenses (T	ne (a)	Revenue and	//- \		(-)	A alaa alaa	(d) Disbursements for charitable
		total of amounts	in columns (b), (c), and (d) rily equal the amounts in		kpenses per	(b) Net inv		(C)	Adjusted net income	purposes
		column (a) (see	nstructions))		books					(cash basis only)
_	1	Contributions, gifts, gra	nts, etc., received (attach schedule)		522,746.					
	2		he foundation is not required to ach Sch. B							
	3		ind temporary cash investment					_		
	4	Dividends and inte	erest from securities		1,963.		<u>1,848.</u>			STMT 1
	5a	Gross rents		•						
	b	Net rental income of	r (loss)				- B/	 	A COL	DECENTED
<u>ە</u>	6a	Net gain or (loss) fro	m sale of assets not on line 10		31,741.		09	211/	MRK	KECEIVED
Š	Ь	Gross sales price for assets on line 6a	^{all} 499,10	7.						······
Revenue	7	Capital gain net in	ncome (from Part IV, line 2)				31,741.	n e n	0.0010	1. E + + 2012
Œ	8	Net short-term ca	pital gain					0 9 0	8 2018	0 7 7 7 7 10
	9	Income modificat	ions	•						
	10a	Gross sales less retu and allowances	rns						10 00	DEN
	b	Less Cost of goods	sold .					_S	ERVICE	CENTER
	С	Gross profit or (lo	ss) (attach schedule)						-	OFFICE OF
	11		ach schedule)	í	55.		22 500			STMT 2
_	12	Total. Add lines 1	through 11	-	556,505.	·	33,589.		<u> </u>	
y.	13	•	ficers, directors, trustees, etc .				NONE		NONE	
Š	14	Other employees	salaries and wages	• -						
Ē	15	•	nployee benefits				NONE		NONE	<u></u>
X	16a		schedule)		750.		NONE		NONE	750.
نه	14 15 16a b c 17 18 19 20 21		(attach schedule) STMT 3		1,152.		1,037.		NONE	115.
Ę.	C	•	al fees (attach schedum) 4	i i	1,132.		1,037.			113.
itra	17		CATMER 5		11.		11.			
Ę	18		edule) (see instructions). 5						· · · · · · · · · · · · · · · · · · ·	
Ē	19	•	ach schedule) and depletion							
Δ	20						NONE		NONE	
7	21	· ·	es, and meetings	1			NONE	_	NONE	
7	22		ications				HOME		110111	
į	23 24 25	•	attach schedule)				-			
rate.	24		and administrative expense	1	1,913.		1,048.		NONE	865.
٥	1		ough 23	1	692,000.		1,010.		2,0112	692,000.
C		_	ts, grants paid	1	693,913.		1,048.	<u> </u>	NONE	
-	26		sbursements Add lines 24 and	(3)	. د د ر در د		<u> </u>			,
	27	Subtract line 26 f			-137,408					
	8		er expenses and disbursements . ncome (if negative, enter -(13// 100	 	32,541.			
	b		ome (if negative, enter -0-).			 	,			
	C	Aujusteu Het MC	ome in hegenite, cities 676							AAA DE

JSA For Paperwork Reduction Act Notice, see instructions.
7E1410 1 000 FMJ912 P27C 05/02/2018 13:45:11

	. 11	Poloneo Cheete	Attached schedules and amounts in the description column should be for end-of-year	Beginning of year	End o	f year
Par	t	Balance Sheets	amounts only (See instructions)	(a) Book Value	(b) Book Value	(c) Fair Market Value
T	1 (Cash - non-interest-bearii	ng	58.	55.	55.
			cash investments	8,401.	15,738.	15,738.
- 1		Accounts receivable			*	
	1	Less allowance for doub	otful accounts >			
		Pledges receivable				
			otful accounts >			
	-	Receivables due from	officers, directors, trustees, and other			
	-	disqualified persons (atta	ach schedule) (see instructions)			
		•	eceivable (attach schedule)		,	
- 1			otful accounts NONE			
ည	8	Inventories for sale or us	e			
Φ	•		eferred charges			
¥ 1			government obligations (attach schedule).			
			stock (attach schedule) . STMT .6		17,788.	18,511.
ļ			bonds (attach schedule) . STMT .7	-	36,178.	
1	1	Investments - land, building and equipment basis Less accumulated deprecia	s, >			
-		(attach schedule)	·			
- 1		Investments - mortgage	loans	199,058.		
	4	Land, buildings, and	con schedule/	177,030.	······································	<u> </u>
		equipment basis Less accumulated deprecia	ation			
1		(attach schedule)	<u> </u>	250.	22.	22.
1 1		Other assets (describe		230.		
'			completed by all filers - see the age 1, item l)	207,767.	69,781.	70,509.
1	7	Accounts payable and a	ccrued expenses			
1						
				1		
里。		Loans from officers, directo	rs, trustees, and other disqualified persons.		·	
Liabilities	1	Mortgages and other no	tes payable (attach schedule)			
ء ات:	22	Other liabilities (describe	• ▶)			
	23	Total liabilities (add line	es 17 through 22)		NONE NONE	}
		Foundations that follow	v SFAS 117, check here ▶ 🔣			
alances		and complete lines 24	through 26, and lines 30 and 31.			
E :	24	Unrestricted]
je j	25	Temporarily restricted				
뜅	26					
S		Foundations that do no	ot follow SFAS 117, check here ▶ X			
<u>-</u>		and complete lines 27	through 31.			
0	27	Capital stock, trust princ	cipal, or current funds	207,767.	69,781	
٠ او	28	Paid-in or capital surplus, o	r land, bldg , and equipment fund		<u> </u>	
Si :	29	Retained earnings, accumu	lated income, endowment, or other funds			
Net Assets or Fund B			d balances (see instructions)	207,767.	69,781	•
ž∣:			net assets/fund balances (see			
				<u>207,767.</u>	69,781	
Рâ	rt III	Analysis of Char	nges in Net Assets or Fund Bala	nces	must agree sales	<u> </u>
1	Tota	I net assets or fund	balances at beginning of year - Part	ii, column (a), line 30 (must agree with	207 767
_			d on prior year's return)			207,767. -137,408.
			line 27a			-13/,408.
						70,359.
_	Add	lines 1, 2, and 3	CPR CTA			70,339.
5	Deci	reases not included in	n line 2 (Itemize) SEE STA	ing 5) - Port II column //		69,781.
<u> </u>	lota	n net assets or fund b	alances at end of year (line 4 minus l	ine a) - rait ii, column (i	o _{I, line 30 6}	Form 990-PF (2017)

Part IV Capital Gains	and Losses for Tax on Inve	estment Income			Page 3
(a) List and de	scribe the kind(s) of property sold (for ex	xample, real estate,	(b) How acquired P - Purchase	(c) Date acquired (mo , day, yr)	(d) Date sold (mo , day, yr)
			D - Donation		
			<u> </u>		
C					
d	(a) List and describe the kind(s) of property sold (for example, real estate, 2-story brick warehouse, or common stock, 200 shs MLC Co) (b) Densition (c) Date acquired (mo, day, yr) (d) (mo, day, yr) (e) Densition (f) Depreciation allowed (g) Cost or other basis plus expense of sale (f) Perpeciation allowed (or allowable) (or allowable) (i) Perpeciation allowed (or allowable) (ii) Perpeciation allowed (or allowable) (iii) Perpeciation allowed (or allowable) (iv) Perpeciation allowed (iv) Perpeciation				
1 a PUBLICLY TRADED SECURITIES b c d d e (e) Gross sales price (f) Depreciation allowed (or allowable) (ii) EMV as of 12/31/69 (iii) Adjusted basis as of 12/31/69 (iii) Adjusted basis as of 12/31/69 (iii) Adjusted basis (iv) Excess of col (iv) over col (iv), if any (or col (iv)) (over col (i					
(e) Gross sales price	1				
a 499,107.		467,366.			31,741.
b					
С					
d					
Complete only for assets sh	rowing gain in column (h) and owned b	y the foundation on 12/31/69	(1)	Gains (Col (h) ga	ıın mınus
/i) FMV as of 12/31/69		(k) Excess of col (i)		(k), but not less t	han -0-) or
(1) 1 1117 43 01 127 3 17 03	as of 12/31/69	over col (j), if any		Losses (from co	l (h))
а					31,741.
<u>b</u>					
С					
d					
е					
· -	or (net capital loss) {	oss), enter -0- in Part I, line 7	2		31,741.
-		4	2		
Was the foundation liable for	the section 4942 tax on the distrib		ase perio	d?	Yes X No
				trion	
1 Enter the appropriate al	mount in each column for each yea		ng any en	(d)	
Base period years Calendar year (or tax year beginning in)	(b) Adjusted qualifying distributions	(c) Net value of noncharitable-use assets		Distribution ra (col (b) divided by	col (c))
2016	607,801.	263,236.	ļ <u> </u>		2.308959
2015	851,330.	453,533.			1.877107
2014	569,059.	140,428.			4.052319
2013	611,451.	146,165.			4.183293
2012	356,178.	381,135.			<u>0.934519</u>
2 Total of line 1, column	(d)		2	1	3.356197
•	tio for the 5-year base period - divid e foundation has been in existence		3		2.671239
4 Enter the net value of n	oncharitable-use assets for 2017 fr	om Part X, line 5	4		98,315.
5 Multiply line 4 by line 3			5		262,623.
	nent income (1% of Part I, line 27b)		6		325.
7 Add lines 5 and 6			7		262,948.
8 Enter qualifying distribu If line 8 is equal to or Part VI instructions.	itions from Part XII, line 4 greater than line 7, check the box	t in Part VI, line 1b, and complete	that part		692,865. x rate. See th

orm 9	90-PF (2017) 20-0497413			ge 4	
Paít	VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 - see i	nstru	ctions)	
	exempt operating foundations described in section 4940(d)(2), check here and enter "N/A" on line 1				
	Date of ruling or determination letter (attach copy of letter if necessary - see instructions)				
b i	Domestic foundations that meet the section 4940(e) requirements in Part V, check		3	<u>25.</u>	
1	here \blacktriangleright X and enter 1% of Part I, line 27b				
C .	All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of J				
	Part I, line 12, col (b)				
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only; others, enter -0-)			<u>ONE</u>	
3	Add lines 1 and 2			<u> 25.</u>	
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only; others, enter -0-)			ONE	
5	Tax based on investment income. Subtract line 4 from line 3 If zero or less, enter -0		3	<u>25.</u>	
6	Credits/Payments				
а	2017 estimated tax payments and 2016 overpayment credited to 2017 6a 60.				
b	Exempt foreign organizations - tax withheld at source				
C	Tax paid with application for extension of time to file (Form 8868)6c NONE				
	Backup withholding erroneously withheld				
	Total credits and payments Add lines 6a through 6d			<u>60.</u>	
	Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached			<u></u> -	
	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed		2	<u>65.</u>	
	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid				
	Enter the amount of line 10 to be Credited to 2018 estimated tax ▶ NONE Refunded ▶ 11				
	VII-A Statements Regarding Activities				
	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it	\vdash	Yes	No	
	participate or intervene in any political campaign?	1a		<u>X</u>	
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes? See the	_		77	
	Instructions for the definition	1b		<u>X</u>	
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials				
	published or distributed by the foundation in connection with the activities				
	Did the foundation file Form 1120-POL for this year?	1c		<u>X</u>	
	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year				
	(1) On the foundation ►\$(2) On foundation managers ►\$				
е	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed				
	on foundation managers > \$			17	
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?	2		<u> X</u>	
	If "Yes," attach a detailed description of the activities				
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of			.,	
	incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes	3		<u>X</u>	
	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	48		<u>X</u>	
b	If "Yes," has it filed a tax return on Form 990-T for this year?	4b	٠,		
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year? STMT .11	5	X		
	If "Yes," attach the statement required by General Instruction T.				
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either.		ı		
	By language in the governing instrument, or				
	• By state legislation that effectively amends the governing instrument so that no mandatory directions that		.,		
	conflict with the state law remain in the governing instrument?	6	X		
7	Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col (c), and Part XV	7	Х.		
8a	Enter the states to which the foundation reports or with which it is registered. See instructions		ļ		
	WI				
b	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General		v		
	(or designate) of each state as required by General Instruction G7If "No," attach explanation	8b	X		
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or				1
	4942(j)(5) for calendar year 2017 or the tax year beginning in 2017? See the instructions for Part XIV. If "Yes,"			v	
	complete Part XIV	9		<u>X</u>	4
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their	_		v	
	names and addresses	10	0 PC	X	
		44		20171	

Paí	I-A Statements Regarding Activities (continued)			
		Ž.	Yes	No
11	any time during the year, did the foundation, directly or indirectly, own a controlled entity within the			
	aning of section 512(b)(13)? If "Yes," attach schedule See instructions	11		\ }
12	the foundation make a distribution to a donor advised fund over which the foundation or a disqualified			
	son had advisory privileges? If "Yes," attach statement. See instructions	12] 3
13	the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	X	
	bsite address ▶ n/a			
14	e books are in care of ▶ <u>US_BANK_N.A.</u> Telephone no ▶ <u>(920) 459-</u>	694	2	
	ated at ► 605 N 8TH ST, SHEBOYGAN, WI ZIP+4 ► 53081			
15	ction 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - check here		▶	. []
	d enter the amount of tax-exempt interest received or accrued during the year			
16	any time during calendar year 2017, did the foundation have an interest in or a signature or other authority		Yes	No
		16	7	χ
	e the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes," enter the name of		7	
Dor	foreign country ► I-B Statements Regarding Activities for Which Form 4720 May Be Required	7. 4.	2.0	7 %
r al			V I	- NI -
4	e Form 4720 if any item is checked in the "Yes" column, unless an exception applies.		Yes	No
18	Engage in the sale or exchange, or leasing of property with a disqualified person? Yes X No	7	# 2 P	4
	Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a	3 2_		
	disqualified person?	4	- 3	
	Furnish goods, services, or facilities to (or accept them from) a disqualified person? Yes X No	7		1.2
	Pay compensation to, or pay or reimburse the expenses of, a disqualified person?	55		
	Transfer any income or assets to a disqualified person (or make any of either available for	4		
	the benefit or use of a disqualified person)?			
	Agree to pay money or property to a government official? (Exception. Check "No" if the		. 4	
	foundation agreed to make a grant to or to employ the official for a period after		20	
	termination of government service, if terminating within 90 days.)	2		
b	any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations		3.3	2
		1b		4
	anizations relying on a current notice regarding disaster assistance, check here▶	看	- 4	
С	the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that	2.2		
_	re not corrected before the first day of the tax year beginning in 2017?	1c	REPORT OF	<u> X</u>
2	tes on failure to distribute income (section 4942) (does not apply for years the foundation was a private		2.3	製力
	erating foundation defined in section 4942(j)(3) or 4942(j)(5))			
а	the end of tax year 2017, did the foundation have any undistributed income (lines 6d and	4		
	Part XIII) for tax year(s) beginning before 2017?			# 1
h	there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2)		C.	Ante
	ating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to	- 4	Д.	
		2b	M. S	X
c	he provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here.			
Ī				Ł
3a	the foundation hold more than a 2% direct or indirect interest in any business enterprise	.,9	囊	
	iny time during the year?	90	. 3	
b	"Yes," did it have excess business holdings in 2017 as a result of (1) any purchase by the foundation or	4		
	qualified persons after May 26, 1969, (2) the lapse of the 5-year period (or longer period approved by the		ti i	
	nmissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest; or (3) the lapse of	1.		
	10-, 15-, or 20-year first phase holding period? (Use Schedule C, Form 4720, to determine if the	50	3	
		3b		
4a		4a		Χ
b	and the second contract of the second contrac	33 .		
		4b		_X
	Form	a 990)-PF (2017

Formt 990-PF (2017)	Page 7
Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly P and Contractors (continued)	'aid Employees,
3 Five highest-paid independent contractors for professional services. See instructions. If none, e	enter "NONE."
(a) Name and address of each person paid more than \$50,000 (b) Type of set	rvice (c) Compensation
NONE	NONE
Total number of others receiving over \$50,000 for professional services	Nove
Part IX-A Summary of Direct Charitable Activities	▶ NONE
List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the	ne number of
organizations and other beneficiaries served, conferences convened, research papers produced, etc	Expenses
1NONE	
2	
3	
4	
Part IX-B Summary of Program-Related Investments (see instructions)	
Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2 1 NONE	Amount
2	
All other program-related investments See instructions	
3 NONE	
Total. Add lines 1 through 3	▶

Part X Minimum Investment Return (All domestic foundations must complete this part. Foreign foundations, see instructions.)	
1 Fair market value of assets not used (or held for use) directly in carrying out charitable, etc.,	
purposes:	
a Average monthly fair market value of securities	073.
b Average of monthly cash balances	739.
c Fair market value of all other assets (see instructions)	NONE
d Total (add lines 1a, b, and c)	812.
e Reduction claimed for blockage or other factors reported on lines 1a and	
1c (attach detailed explanation)	
2 Acquisition indebtedness applicable to line 1 assets	NONE
3 Subtract line 2 from line 1d	812.
4 Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see	
instructions)	497.
5 Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4 5 98,	315.
6 Minimum investment return. Enter 5% of line 5 · · · · · · · · · · · · · 6 4,	916.
Part XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations and certain foreign organizations, check here and do not complete this part.)	
	916.
2a Tax on investment income for 2017 from Part VI, line 5	
b Income tax for 2017. (This does not include the tax from Part VI.) 2b	
	325.
	591.
	NONE
	591.
	NONE
7 Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII,	
	591.
Part XII Qualifying Distributions (see instructions)	
1 Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes.	-
a Expenses, contributions, gifts, etc total from Part I, column (d), line 26	865.
b Program-related investments - total from Part IX-B	0001
2 Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc.,	
	NONE
3 Amounts set aside for specific charitable projects that satisfy the:	
	NONE
	NONE
4 Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4 4 692,	
5 Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income.	<u> </u>
	325.
6 Adjusted qualifying distributions. Subtract line 5 from line 4	
Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the found	
qualifies for the section 4940(e) reduction of tax in those years.	• • •

Form **990-PF** (2017)

Part XIII Undistributed Income (see instruc	(a)	(b)	(c)	(d)
1 Distributable amount for 2017 from Part XI,	Corpus	Years prior to 2016	2016	2017
line 7				4,591
a Enter amount for 2016 only		,	NONE	
b Total for prior years 20,20		NONE	1101111	
3 Excess distributions carryover, if any, to 2017			· · · · · · · · · · · · · · · · · · ·	
a From 2012				
b From 2013 607, 991.				
c From 2014				
d From 2015 828, 824.				
e From 2016				
f Total of lines 3a through e	2,458,749.			
4 Qualifying distributions for 2017 from Part XII, line 4 ▶ \$ 692,865.			,	•
a Applied to 2016, but not more than line 2a	<u> </u>		NONE	
b Applied to undistributed income of prior years		NONE		
(Election required - see instructions)		NONE		
c Treated as distributions out of corpus (Election required - see instructions)	NONB			
d Applied to 2017 distributable amount	140111			4,591.
e Remaining amount distributed out of corpus	688,274.	····-		4,001.
5 Excess distributions carryover applied to 2017	NONE			NON
(If an amount appears in column (d), the same amount must be shown in column (a).)				<i>}</i> 、
6 Enter the net total of each column as indicated below:	*	`-		*
a Corpus Add lines 3f, 4c, and 4e. Subtract line 5	3,147,023.			<u> </u>
b Prior years' undistributed income Subtract		NONE	*^	1
c Enter the amount of prior years' undistributed				······································
income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed		NONE	`	
d Subtract line 6c from line 6b. Taxable				
amount - see instructions		NONE		<u> </u>
e Undistributed income for 2016 Subtract line 4a from line 2a. Taxable amount - see instructions		* * *	NONE	
f Undistributed income for 2017 Subtract lines				
4d and 5 from line 1. This amount must be	,			MONI
distributed in 2018				NONI
7 Amounts treated as distributions out of corpus				
to satisfy requirements imposed by section				
170(b)(1)(F) or 4942(g)(3) (Election may be required - see instructions)	NONE			
8 Excess distributions carryover from 2012 not				
applied on line 5 or line 7 (see instructions)	337,650.			
9 Excess distributions carryover to 2018.				
Subtract lines 7 and 8 from line 6a	2,809,373.			
10 Analysis of line 9				
a Excess from 2013 607, 991.				
b Excess from 2014				
c Excess from 2015 828,824.				
d Excess from 2016				
e Excess from 2017 688,274 .				Form 990-PF (2017

	990-PF (2		**************************************			0497413	Page 10
Par	t XIV	Private Ope	erating Foundation	s (see instructions	and Part VII-A, quest	ion 9)	NOT APPLICABLE
1 a	If the fo	oundation has	received a ruling or o	determination letter t	hat it is a private oper	rating	
•					ng		
b	Check b	ox to indicate v		is a private operating	g foundation described i	n section 4942()(3) or 4942(j)(5)
2 a	Enter the	lesser of the ad-	Tax year		Prior 3 years		(é) Total
	justed net	income from Part	(a) 2017	(b) 2016	(c) 2015	(d) 2014	(0, 1000
		inimum investment m Part X for each					
		1					
b	85% of lin	e 2a					
С	Qualifying	distributions from Part					
	XII, line 4 fo	or each year listed .					
d		cluded in line 2c not	ĺ				
		ly for active conduct				/	
е	Qualifying	distributions made			/	/	
		r active conduct of livities Subtract line				1	1
		e 2c					
3	•	3a, b, or c for the	1		1		
а		test relied upon ernative test - enter	1				
	(1) Value	of all assets				<u> </u>	
	(2) Value	of assets qualifying					
		section j)(3)(8)(i)					
b		nt" alternative test-					
		of minimum invest-					
		n shown in Part X, ach year listed	_				ļ
c		Iternative test - enter					
	(1) Total	support other than					
	-	investment income est, dividends, rents,					
	paym	ents on securities					-
		(section 512(a)(5)),					
	(2) Supp	ort from general					
		and 5 or more pt organizations as					ĺ
	provid	ded in section 4942					
		B)(m)					
	port	from an exempt					
		investment income					<u> </u>
Pa	rt XV		ntary Information (Complete this pa	rt only if the founda	ation had \$5,000 o	r more in assets at
			uring the year - see				
1	Informa	tion Regarding	Foundation Manage	rs:			
а	List and	y managers of	the foundation who	have contributed m	ore than 2% of the tot	tal contributions receiv	ed by the foundation
	before	the close of any	y tax year (but only if t	hey have contributed	I more than \$5,000). (S	See section 507(d)(2))	
		NONE					
b	List an		the foundation who	own 10% or more	of the stock of a corp	poration (or an equal)	y large portion of the
	owners	hip of a partner	rship or other entity) o	f which the foundati	on has a 10% or greate	r interest	
		NONE					
2	Informa	tion Regarding	Contribution, Grant,	Gift, Loan, Scholars	ship, etc., Programs:		
	Check	nere ▶ if t	the foundation only	makes contribution	s to preselected char	ritable organizations	and does not accept
		ited requests f	or funds. If the found	lation makes gifts, g	grants, etc., to individu	als or organizations u	nder other conditions,
			c, and d. See instruction			-	
a	The nar	ne, address, an	d telephone number of	or email address of the	ne person to whom app	olications should be add	dressed.
		TATEMENT					
b	The for	m in which app	lications should be su	bmitted and informa	tion and materials they	should include.	
			TATEMENT FOR L		·		
	ء فقور	Inched 5					
	Anv sul	omission deadlı	ines:				
•	-		TATEMENT FOR L	INE 2			
	CLL F	·-IRCHED D	THE PORT OF THE				
d	Anv re	strictions or li	imitations on awards	s, such as by geo	graphical areas, charit	able fields, kinds of	institutions, or other
	factors:		enene	, J		•	
	SEF 7	ישרשרבר פי	TATEMENT FOR L	INE 2			
JSA	<u> </u>	TWCHED 9	INTERPRETATION II.				Form 990-PF (2017)

Part XV Supplementary Information	continued)			
Recipient Name and address (home or business)	If recipient is an individual.	Soundation	uture Payment	
Recipient	show any relationship to	status of	Purpose of grant or contribution	Amount
Name and address (nome or business)	or substantial contributor	recipient		
a Paid during the year				
SEE STATEMENT 21				692,000.
ODD STATEMENT 21				092,000.
				1
		Ì		
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				1
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		ì		}
Total		<u></u> .	▶ 3a	692,000.
b Approved for future payment				
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		[[
			}	
Total			▶_3b	
				

JSA 7E1491 1 000 Form **990-PF** (2017)

art XVI-A nter gross amou	ints unless otherwise indicated.	Unrela	ated business income	Excluded by	section 512, 513, or 514	(e)
1 Program serv		(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	Related or exempt function income (See instructions)
a						
b						
c						
d				- 		
<u>-</u>	contracts from government agencies					
_				+		
•	dues and assessments					
	ngs and temporary cash investments - d interest from securities			14	1,963.	
	ome or (loss) from real estate:					
-	iced property					
b Not debt-f	inanced property					
Net rental inco	ome or (loss) from personal property					
Other investr	nent income	-		 	21 741	
Gain or (loss) fr	rom sales of assets other than inventory			18	31,741.	
	r (loss) from special events · · ·			- 		
	r (loss) from sales of inventory					
Other revenu b FEDEF	e aRAL TAX REFUND			1	55.	
	CAB TAN KBI OND				33.1	
-				-		
е						
Subtotal Add	columns (b), (d), and (e)	,			33,759.	
	d columns (b), (d), and (e)					33,7
Total. Add iir e worksheet ii	ne 12, columns (b), (d), and (e) n line 13 instructions to verify calcu				13	33,7
Total. Add lir e worksheet ii art XVI-B	ne 12, columns (b), (d), and (e)	ilations)	ccomplishment of	Exempt Pur	13	
Total. Add lir e worksheet ii art XVI-B ne No.	ne 12, columns (b), (d), and (e)	ilations) to the A	ccomplishment of l	Exempt Pur	poses of Part XVI-A contribu	ited importantly to
Total. Add lir e worksheet in art XVI-B ne No.	ne 12, columns (b), (d), and (e) In line 13 instructions to verify calcu Relationship of Activities Explain below how each activity	ilations) to the A	ccomplishment of l	Exempt Pur	poses of Part XVI-A contribu	ited importantly to
Total. Add lir e worksheet in art XVI-B ne No.	ne 12, columns (b), (d), and (e) In line 13 instructions to verify calcu Relationship of Activities Explain below how each activity	ilations) to the A	ccomplishment of l	Exempt Pur	poses of Part XVI-A contribu	ited importantly to
Total. Add lire worksheet in t XVI-B	ne 12, columns (b), (d), and (e) In line 13 instructions to verify calcu Relationship of Activities Explain below how each activity	ilations) to the A	ccomplishment of l	Exempt Pur	poses of Part XVI-A contribu	ited importantly to
Total. Add lire worksheet in t XVI-B	ne 12, columns (b), (d), and (e) In line 13 instructions to verify calcu Relationship of Activities Explain below how each activity	ilations) to the A	ccomplishment of l	Exempt Pur	poses of Part XVI-A contribu	ited importantly to
Total. Add lire worksheet in t XVI-B	ne 12, columns (b), (d), and (e) In line 13 instructions to verify calcu Relationship of Activities Explain below how each activity	ilations) to the A	ccomplishment of l	Exempt Pur	poses of Part XVI-A contribu	ited importantly to
Total. Add lire worksheet in t XVI-B	ne 12, columns (b), (d), and (e) In line 13 instructions to verify calcu Relationship of Activities Explain below how each activity	ilations) to the A	ccomplishment of l	Exempt Pur	poses of Part XVI-A contribu	ited importantly to
Total. Add lire worksheet in t XVI-B	ne 12, columns (b), (d), and (e) In line 13 instructions to verify calcu Relationship of Activities Explain below how each activity	ilations) to the A	ccomplishment of l	Exempt Pur	poses of Part XVI-A contribu	ited importantly to
Total. Add lire worksheet in t XVI-B	ne 12, columns (b), (d), and (e) In line 13 instructions to verify calcu Relationship of Activities Explain below how each activity	ilations) to the A	ccomplishment of l	Exempt Pur	poses of Part XVI-A contribu	ited importantly to
Total. Add lire worksheet in t XVI-B	ne 12, columns (b), (d), and (e) In line 13 instructions to verify calcu Relationship of Activities Explain below how each activity	ilations) to the A	ccomplishment of I	Exempt Purplin column (and by providing	poses of Part XVI-A contribu	ited importantly to
Total. Add lire worksheet in t XVI-B	ne 12, columns (b), (d), and (e) In line 13 instructions to verify calcu Relationship of Activities Explain below how each activity	ilations) to the A	ccomplishment of l	Exempt Purplin column (and by providing	poses of Part XVI-A contribu	ited importantly to
Total. Add lire worksheet in t XVI-B	ne 12, columns (b), (d), and (e) In line 13 instructions to verify calcu Relationship of Activities Explain below how each activity	ilations) to the A	ccomplishment of I	Exempt Purplin column (and by providing	poses of Part XVI-A contribu	ited importantly to
Total. Add lire worksheet in t XVI-B	ne 12, columns (b), (d), and (e) In line 13 instructions to verify calcu Relationship of Activities Explain below how each activity	ilations) to the A	ccomplishment of I	Exempt Purplin column (and by providing	poses of Part XVI-A contribu	ited importantly to
Total. Add lire worksheet in t XVI-B	ne 12, columns (b), (d), and (e) In line 13 instructions to verify calcu Relationship of Activities Explain below how each activity	ilations) to the A	ccomplishment of I	Exempt Purplin column (and by providing	poses of Part XVI-A contribu	ited importantly to
Total. Add lire worksheet in t XVI-B	ne 12, columns (b), (d), and (e) In line 13 instructions to verify calcu Relationship of Activities Explain below how each activity	ilations) to the A	ccomplishment of I	Exempt Purplin column (and by providing	poses of Part XVI-A contribu	ited importantly to
Total. Add lire worksheet in t XVI-B	ne 12, columns (b), (d), and (e) In line 13 instructions to verify calcu Relationship of Activities Explain below how each activity	ilations) to the A	ccomplishment of I	Exempt Purplin column (and by providing	poses of Part XVI-A contribu	ited importantly to
Total. Add lire worksheet in t XVI-B	ne 12, columns (b), (d), and (e) In line 13 instructions to verify calcu Relationship of Activities Explain below how each activity	ilations) to the A	ccomplishment of I	Exempt Purplin column (and by providing	poses of Part XVI-A contribu	ited importantly to
Total. Add lire worksheet in t XVI-B	ne 12, columns (b), (d), and (e) In line 13 instructions to verify calcu Relationship of Activities Explain below how each activity	ilations) to the A	ccomplishment of I	Exempt Purplin column (and by providing	poses of Part XVI-A contribu	ited importantly to
Total. Add lire worksheet in t XVI-B	ne 12, columns (b), (d), and (e) In line 13 instructions to verify calcu Relationship of Activities Explain below how each activity	ilations) to the A	ccomplishment of I	Exempt Purplin column (and by providing	poses of Part XVI-A contribu	ited importantly to
Total. Add lire worksheet in t XVI-B	ne 12, columns (b), (d), and (e) In line 13 instructions to verify calcu Relationship of Activities Explain below how each activity	ilations) to the A	ccomplishment of I	Exempt Purplin column (and by providing	poses of Part XVI-A contribu	ited importantly to
Total. Add lire worksheet in t XVI-B	ne 12, columns (b), (d), and (e) In line 13 instructions to verify calcu Relationship of Activities Explain below how each activity	ilations) to the A	ccomplishment of I	Exempt Purplin column (and by providing	poses of Part XVI-A contribu	ited importantly to
Total. Add lir e worksheet in ort XVI-B ne No.	ne 12, columns (b), (d), and (e) In line 13 instructions to verify calcu Relationship of Activities Explain below how each activity	ilations) to the A	ccomplishment of I	Exempt Purplin column (and by providing	poses of Part XVI-A contribu	ited importantly to

Part	XVII	Information Exempt Or	n Regarding Ti ganizations	ransfers to and	Transaction	ns and Relation	ships With None	harital	ole
	in se organ	ction 501(c) (oth izations?	ner than section	501(c)(3) organ	izations) or i	n section 527, r	anization described elating to political	Y	es No
				o a noncharitable e	_			1a(1)	
		her assets transactions:						1a(2)	Х
_	(1) Sa (2) Pu (3) Re (4) Re (5) Lo	eles of assets to a r prchases of assets ental of facilities, e eimbursement arra eans or loan guarar	from a noncharita quipment, or othe ingements	able exempt organier assets	zation			1b(2) 1b(3) 1b(4) 1b(5)	X X X X X
c d	Sharii If the value	ng of facilities, equ answer to any o of the goods, oth	ipment, mailing li f the above is "Y er assets, or sen	sts, other assets, o 'es," complete the vices given by the	r paid employe following scho reporting four	es edule. Column (b) ndation. If the foun	should always show dation received less ds, other assets, or s	1c v the fai than fai	X r market r market
(a) Li	ne no	(b) Amount involved	d (c) Name of	noncharitable exempt o	rganization	(d) Description of trans	sfers, transactions, and sha	ring arrang	ements
			<u> </u>						
				· · · · · · · · · · · · · · · · · · ·			· · · · · · · · · · · · · · · · · · ·		
									
				···					
									
						 			
	descr		1(c) (other than se	ection 501(c)(3)) o		or more tax-exem		Yes	X No
	11 10	(a) Name of organiz			f organization		(c) Description of relation	ship	
				 	·				
				<u> </u>					
		er penalties of perjury, lect, and complete Declar	declare that I have examined the state of th	mined this return, including taxpayer) is based on all in	g accompanying sche formation of which pre	edules and statements, and eparer has any knowledge	to the best of my knowled	ge and belie	f, it is true,
Sigr Her	e Si	gnature of office for true	<i>V</i>	- 05/02/ Date		VICE PRESIDE	May the IR with the pr		vn <u>belo</u> w?
		OBERT MELZER Print/Type preparer		Preparer's signat	ure .	Date	Check X If	PTIN	
Paid		JOSEPH J.	CASTRIANO	1	lec	05/02/	2018 self-employed	P01251	
-	arer Only	Firm's name Firm's address	PRICEWATERH		LLP		Firm's EIN ► 13-	400832	24
		, iiii suddiess	PITTSBURGH,	PA	152	19		55-60(rm 990-f	

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.

Go to www.irs.gov/Form990for the latest information.

OMB No 1545-0047

2017

Name of the organization Employer identification number JOHN M. KOHLER FOUNDATION INC 20-0497413 Organization type (check one): Filers of: Section: Form 990 or 990-EZ 501(c)() (enter number) organization 4947(a)(1) nonexempt charitable trust not treated as a private foundation 527 political organization Form 990-PF 501(c)(3) exempt private foundation 4947(a)(1) nonexempt charitable trust treated as a private foundation 501(c)(3) taxable private foundation Check if your organization is covered by the General Rule or a Special Rule. Note: Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions. General Rule X For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions. **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, Part VIII, line 1h; or (ii) Form 990-EZ, line 1. Complete Parts I and II 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 Caution: An organization that isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990, 990-EZ, or 990-PF), but it must answer "No" on Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on its Form 990-PF, Part I, line 2, to certify that it doesn't meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

Schedule B (Form 990, 990-EZ, or 990-PF) (2017)

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) (2017) Page 2 Name of organization Employer identification number KOHLER FOUNDATION INC $JOHN_M$. 20-0497413 Contributors (see instructions). Use duplicate copies of Part I if additional space is needed. Part I (b) (c) (a) (d) No. Name, address, and ZIP + 4 Total contributions Type of contribution WM COLLINS KOHLER Person Payroll 1211 NORTH 6TH STREET 522,746. Noncash (Complete Part II for SHEBOYGAN, WI 53081 noncash contributions) (b) (c) (d) (a) **Total contributions** No. Name, address, and ZIP + 4 Type of contribution Person Payroll Noncash (Complete Part II for noncash contributions) (c) (a) (b) (d) **Total contributions** No. Name, address, and ZIP + 4 Type of contribution Person Payroll Noncash (Complete Part II for noncash contributions) (c) (d) (a) (b) No. Name, address, and ZIP + 4 Total contributions Type of contribution Person Payroll Noncash (Complete Part II for noncash contributions) (b) (c) (d) (a) No. Name, address, and ZIP + 4 Total contributions Type of contribution Person **Payroll** Noncash (Complete Part II for noncash contributions) (d) (a) (c) Type of contribution **Total contributions** No. Name, address, and ZIP + 4 Person Payroll

Noncash (Complete Part II for noncash contributions) 20-0497413

FORM 990PF, PART I - DIVIDENDS AND INTEREST FROM SECURITIES

NET INVESTMENT INCOME	336.	95.	287.			221.	.606	111111111	1,848.
REVENUE AND EXPENSES PER BOOKS	336.	95. 72.	287.	39.	4.	221.	.606		1,963.
DESCRIPTION	USGI REPORTED AS NONQUALIFIED DIVIDENDS	FOREIGN DIVIDENDS NONDIVIDEND DISTRIBUTIONS	DOMESTIC DIVIDENDS	EXEMPT INTEREST NOT SUBJECT TO AMT - STA	EXEMPT INTEREST SUBJECT TO AMT - STATES	NONQUALIFIED FOREIGN DIVIDENDS	NONQUALIFIED DOMESTIC DIVIDENDS		TOTAL

FORM	990	PF,	PI	ART	I	-	С	TH	ER	IN	CC	ME	;
=====	===	===	===	==	==	==	==	==	===	===	==	==	:

REVENUE AND EXPENSES PER BOOKS DESCRIPTION 55. FEDERAL TAX REFUND TOTALS

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STATEMENT

FORM 990PF, PART I - ACCOUNTING FEES

CHARITABLE PURPOSES	750.
ADJUSTED NET INCOME	NONE
NET INVESTMENT INCOME	NONE
REVENUE AND EXPENSES PER BOOKS	750.
DESCRIPTION	TAX PREPARATION FEE (NON-ALLOC TOTALS

STATEMENT

FEES	
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PART	- - -
990PF, PAR	

CHARITABLE PURPOSES	115.
NET INVESTMENT INCOME	1,037.
REVENUE AND EXPENSES PER BOOKS	1,152. 1,152. ====================================
DESCRIPTION	OTHER ALLOCABLE EXPENSES - 2% TOTALS

STATEMENT 5

20-0497413

- TAXES	
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PART	i
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NET INVESTMENT INCOME	
REVENUE AND EXPENSES PER BOOKS	8
DESCRIPTION	FOREIGN TAXES FOREIGN TAXES ON NONQUALIFIED TOTALS

STOCK
CORPORATE
1
ΙΙ
PART
990PF,
FORM

JOHN M. KOHLER FOUNDATION INC

ENDING FMV 	2,857. 2,857. 2,744. 128. 3,485. 3,485. 3,98. 1,559. 1,126. 739. 739. 739.	
ENDING BOOK VALUE	779. 113. 2,739. 2,509. 122. 291. 291. 291. 3,284. 1,499. 1,499. 1,232. 713. 713. 710.	17,78
		TOTALS
DESCRIPTION	76882K306 RIVERPARK WEDGEWOOD 922038104 VANGUARD STRATEGIC E 922908710 VANGUARD 500 INDEX A 74316J458 CONGRESS MID CAP GRO 81369Y803 TECHNOLOGY SELECT SE 46434V639 ISHARES CURRENCY HED 81369Y605 FINANCIAL SELECT SEC 922908660 VANGUARD GROWTH INDE 77956H849 T ROWE PRICE INTL GR 81369Y886 UTILITIES SELECT SEC 378690606 GLENMEDE SC EQUITY P 025076209 AMERICAN CENT EQUITY P 025076209 HEALTH CARE SELECT SE 81369Y209 HEALTH CARE SELECT SE 81369Y209 HEALTH CARE SELECT SE 81369Y704 INDUSTRIAL SELECT SE 81369Y100 MATERIALS SELECT SE 81369Y100 MATERIALS SELECT SE 81369Y100 PRICE T ROWE GROWTH 922908686 VANGUARD SMALL CAP I 64128R608 NEUBERGER BERMAN LON 315910620 FIDELITY INVT TR AD 921937694 VANGUARD MIDCAP VALU 81369Y506 ENERGY SELECT SECTOR 74925K581 ROBECO BOSTON PARTNE	

STATEMENT

7

JOHN M. KOHLER FOUNDATION INC

20-0497413

FORM 990PF, PART II - CORPORATE BONDS

ENDING BOOK VALUE FMV	 	36,178. 36,183.
		101AL3
DESCRIPTION	13161T401 CALVERT SHORT DURATI 464288588 ISHARES BARCLAYS MBS 057071854 BAIRD AGGREGATE BOND 922020805 VANGUARD SHORT-TERM 277923728 EATON VANCE GLOBAL M 464288646 ISHARES BARCLAYS 1 3 464288166 ISHARES BARCLAYS 1 3 464288638 ISHARES BARCLAYS INT 670690387 NUVEEN INFLATION PRO 670678622 NUVEEN CORE PLUS BON	

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JOHN M. KOHLER FOUNDATION INC

20-0497413

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OTHER	:: ::: ::: ::: :::
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- II	II II II
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ART II	

	_	BEGINNING
DESCRIPTION	C OR F	BOOK VALUE
	i	
ANCE GLOBA	ט י	20,212.
PLUS BOND	บ	8,219.
ď	บ	4,215.
CAMBIAR INTL EQUITY FD 1209	ບ	4,187.
Ē	บ	1,054.
PRTNRS	ບ	1,808.
AMERICAN CENT EQUITY INCOME CL	ບ	2,869.
	ບ	48,508.
GLENMEDE SC EQUITY PORT ADV	ບ	1,548.
Ĭ	ບ	,5
NUVEEN INFLATION PRO SEC CL I	บ	20,239.
闰	ບ	ω
STRATEGIC EQUIT	ບ	3,231.
INTERNATIONAL	บ	0
FINANCIAL SELECT SECTOR SPDR E	ບ	676.
CE INTL GR&INC	บ	3,022.
GY SE	บ	221.
500 INDEX ADMIRAL	ပ	13,891.
DISCRETI	ບ :	240.
ER STAPL	ن :	793.
SELECT SECTOR SPDR	ບ	404.
CARE SELEC	ບ	755.
BARCLAYS	บ	_`
BARCLAYS INTERMEDI	טו	12,643.
RES BARCLAYS	ပ (9,454.
THE REAL ESTATE SELECT SECTOR	ນ ເ	198. F 022
SHORT TERM INFLATI	ט נ	

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20-0497413

FORM 990PF, PART II - OTHER INVESTMENTS

JOHN M. KOHLER FOUNDATION INC

DESCRIPTION

COST/ FMV C OR F

BEGINNING BOOK VALUE

TOTALS

199,058.

41

FMJ912 P27C 05/02/2018 13:45:11

	REASES IN NET WORTH OR FUND BALANCES
DESCRIPTION	TRUOMA
PY ROC ADJUSTMENT ROUNDING ADJUSTMENT	547. 31.
	TOTAL 578.

FORM 990PF, PART VII-A, LINE 5 - LIQUIDATION EXPLANATION STATEMENT

THIS STATEMENT IS SUBMITTED IN ACCORDANCE WITH REG. 1.6043-3(A)(1) AND FORM 990-PF GENERAL INSTRUCTION T TO REPORT THE DISTRIBUTION OF CERTAIN ASSETS THAT RESULTED IN A SUBSTANTIAL CONTRACTION DURING THE YEAR. CASH WHICH REPRESENTED OVER 25% OF THE FOUNDATIONS FMV WAS DISTRIBUTED TO THE ORGANIZATIONS LISTED IN PART XV.

20-0497413

- JOHN M. KOHLER FOUNDATION INC FORM 990PF, PART XV - LINES 2a - 2d

RECIPIENT NAME:

US BANK NA

ADDRESS:

605 NORTH 8TH STREET SHEBOYGAN, WI 53081

RECIPIENT'S PHONE NUMBER: 920-459-6942

FORM, INFORMATION AND MATERIALS:

NO REQUIRED FORMAT

SUBMISSION DEADLINES:

NONE

RESTRICTIONS OR LIMITATIONS ON AWARDS:

NONE

. JOHN M. KOHLER FOUNDATION INC 20-0497413 FORM 990PF, PART XV, LINE 3a - CONTRIBUTIONS, GIFTS, GRANTS PAID _____ RECIPIENT NAME: PLOUGHSHARES FUND ADDRESS: 1100 VERMONT AVE NW WASHINGTON, DC 20005 RELATIONSHIP: NONE PURPOSE OF GRANT: GENERAL OPERATING FOUNDATION STATUS OF RECIPIENT: PC AMOUNT OF GRANT PAID 10,000. RECIPIENT NAME: BOYS AND GIRLS CLUB OF SHEBOYGAN CO ADDRESS: 733 BROADWAY AVE. SHEBOYGAN, WI 53081 RELATIONSHIP: NONE PURPOSE OF GRANT: GENERAL OPERATING FOUNDATION STATUS OF RECIPIENT: AMOUNT OF GRANT PAID 2,500. RECIPIENT NAME: STRING ACADEMY OF WISCONSIN ADDRESS: PO BOX 11941 MILWAUKEE, WI 53211 RELATIONSHIP: NONE PURPOSE OF GRANT: GENERAL OPERATING FOUNDATION STATUS OF RECIPIENT: PC

AMOUNT OF GRANT PAID

2,500.

JOHN M. KOHLER FOUNDATION INC 20-0497413 FORM 990PF, PART XV, LINE 3a - CONTRIBUTIONS, GIFTS, GRANTS PAID RECIPIENT NAME: ARTISTS WORKING IN EDUCATION INC ADDRESS: 2819 WEST HIGHLAND AVE MILWAUKEE, WI 53208 RELATIONSHIP: NONE PURPOSE OF GRANT: GENERAL OPERATING FOUNDATION STATUS OF RECIPIENT: PC AMOUNT OF GRANT PAID 3,500. RECIPIENT NAME: HMONG ASSOCIATION FBO HMONG COMMUNITY CENTER ADDRESS: 2304 SUPERIOR AVE. SHEBOYGAN, WI 53081 RELATIONSHIP: NONE PURPOSE OF GRANT: GENERAL OPERATING FOUNDATION STATUS OF RECIPIENT: AMOUNT OF GRANT PAID 5,000. RECIPIENT NAME: DOCTORS WITHOUT BORDERS ADDRESS: PO BOX 1856 MERRIFIELD, VA 22116-8056 RELATIONSHIP: NONE PURPOSE OF GRANT: GENERAL OPERATING FOUNDATION STATUS OF RECIPIENT: PC AMOUNT OF GRANT PAID 5,000. • JOHN M. KOHLER FOUNDATION INC 20-0497413 FORM 990PF, PART XV, LINE 3a - CONTRIBUTIONS, GIFTS, GRANTS PAID RECIPIENT NAME: PLAN INTERNATIONAL ADDRESS: 155 PLAN WAY WARWICK, RI 02886 RELATIONSHIP: NONE PURPOSE OF GRANT: GENERAL OPERATING FOUNDATION STATUS OF RECIPIENT: AMOUNT OF GRANT PAID 4,000. RECIPIENT NAME: NIA IMANI FAMILY, INC ADDRESS: 1353 NORTH 25TH STREET MILWAUKEE, WI 53205 **RELATIONSHIP:** NONE PURPOSE OF GRANT: GENERAL OPERATING FOUNDATION STATUS OF RECIPIENT: AMOUNT OF GRANT PAID 75,000. RECIPIENT NAME: UW MILWAUKEE FOUNDATION ADDRESS: 3230 EAST KENWOOD BLVD MILWAUKEE, WI 53211 RELATIONSHIP: NONE PURPOSE OF GRANT: GENERAL OPERATING FOUNDATION STATUS OF RECIPIENT: PC

JOHN M. KOHLER FOUNDATION INC 20-0497413 FORM 990PF, PART XV, LINE 3a - CONTRIBUTIONS, GIFTS, GRANTS PAID RECIPIENT NAME: ALLIANCE FOR PEACE BUILDING ADDRESS: 11 DUPONT CIRCLE #220 WASHINGTON, DC 20036 RELATIONSHIP: NONE PURPOSE OF GRANT: GENERAL OPERATING FOUNDATION STATUS OF RECIPIENT: PC AMOUNT OF GRANT PAID 100,000. RECIPIENT NAME: GLACIAL LAKES CONSERVANCY ADDRESS: PO BOX 258 KOHLER, WI 53044 RELATIONSHIP: NONE PURPOSE OF GRANT: GENERAL OPERATING FOUNDATION STATUS OF RECIPIENT: AMOUNT OF GRANT PAID 10,000. RECIPIENT NAME: RENAISSANCE THEATERWORKS ADDRESS: 158 N. BROADWAY MILWAUKEE, WI 53202 RELATIONSHIP: NONE PURPOSE OF GRANT: GENERAL OPERATING FOUNDATION STATUS OF RECIPIENT: AMOUNT OF GRANT PAID 10,000. • JOHN M. KOHLER FOUNDATION INC 20-0497413 FORM 990PF, PART XV, LINE 3a - CONTRIBUTIONS, GIFTS, GRANTS PAID RECIPIENT NAME: PYSICIANS FOR HUMAN RIGHTS ADDRESS: TWO ARROWS STE 301 CAMBRIDGE, MA 02138 RELATIONSHIP: NONE PURPOSE OF GRANT: GENERAL OPERATING FOUNDATION STATUS OF RECIPIENT: PC AMOUNT OF GRANT PAID 5,000. RECIPIENT NAME: GATHERING WATERS ADDRESS: 211 S PATTERSON ST STE 270 MADISON, WI 53703 RELATIONSHIP: NONE PURPOSE OF GRANT: GENERAL OPERATING FOUNDATION STATUS OF RECIPIENT: AMOUNT OF GRANT PAID 5,000. RECIPIENT NAME: MERCY CORP ADDRESS: PO BOX 2669 PORTLAND, OR 97208-2669 RELATIONSHIP: NONE PURPOSE OF GRANT: GENERAL OPERATING FOUNDATION STATUS OF RECIPIENT: AMOUNT OF GRANT PAID 5,000. JOHN M. KOHLER FOUNDATION INC 20-0497413 FORM 990PF, PART XV, LINE 3a - CONTRIBUTIONS, GIFTS, GRANTS PAID _____ RECIPIENT NAME: BOOKWORM GARDENS INC ADDRESS: PO BOX 883 SHEBOYGAN, WI 53082-0883 RELATIONSHIP: NONE PURPOSE OF GRANT: GENERAL OPERATING FOUNDATION STATUS OF RECIPIENT: PC AMOUNT OF GRANT PAID 10,000. RECIPIENT NAME: SHARON S RICHARDSON HOSPICE HOME INC ADDRESS: 1621 N TAYLOR DR SHEBOYGAN, WI 53081 RELATIONSHIP: NONE PURPOSE OF GRANT: GENERAL OPERATING FOUNDATION STATUS OF RECIPIENT: PC AMOUNT OF GRANT PAID 5,000. RECIPIENT NAME: MEDICAL COLLEGE OF WISCONSIN DEVELOPMENT OFFICE ADDRESS: PO BOX 26509 MILWAUKEE, WI 53226-0509 RELATIONSHIP: NONE PURPOSE OF GRANT: GENERAL OPERATING FOUNDATION STATUS OF RECIPIENT:

JOHN M. KOHLER FOUNDATION INC 20-0497413 FORM 990PF, PART XV, LINE 3a - CONTRIBUTIONS, GIFTS, GRANTS PAID _______ RECIPIENT NAME: ZION EVANGELICAL COVENANT CHURCH ADDRESS: 1125 N 6TH STREET SHEBOYGAN, WI 53081 RELATIONSHIP: NONE PURPOSE OF GRANT: GENERAL OPERATING FOUNDATION STATUS OF RECIPIENT: PC AMOUNT OF GRANT PAID 2,500. RECIPIENT NAME: ST LUKE CHURCH METHODIST CHURCH ADDRESS: 623 ONTARIO AVENUE SHEBOYGAN, WI 53081 RELATIONSHIP: NONE PURPOSE OF GRANT: GENERAL OPERATING FOUNDATION STATUS OF RECIPIENT: AMOUNT OF GRANT PAID 3,000. RECIPIENT NAME: ROTARY CLUB OF MILWAUKEE COMMUNITY TRUST ADDRESS: 750 N LINCOLN MEMORIAL DRIVE MILWAUKEE, WI 53202 RELATIONSHIP: NONE PURPOSE OF GRANT: GENERAL OPERATING FOUNDATION STATUS OF RECIPIENT: PC AMOUNT OF GRANT PAID 3,000.

JOHN M. KOHLER FOUNDATION INC 20-0497413 FORM 990PF, PART XV, LINE 3a - CONTRIBUTIONS, GIFTS, GRANTS PAID RECIPIENT NAME: SHEBOYGAN HISTORICAL SOCIETY ADDRESS: 3110 ERIE AVENUE Sheboygan, WI 53081 **RELATIONSHIP:** NONE PURPOSE OF GRANT: GENERAL OPERATING FOUNDATION STATUS OF RECIPIENT: PC AMOUNT OF GRANT PAID 5,000. RECIPIENT NAME: SHEBOYGAN SALVATION ARMY ADDRESS: 710 PENNSYLVANIA AVE Sheboygan, WI 53081 RELATIONSHIP: NONE PURPOSE OF GRANT: GENERAL OPERATING FOUNDATION STATUS OF RECIPIENT: AMOUNT OF GRANT PAID 4,000. RECIPIENT NAME: ETV ENDOWMENT OF SOUTH CAROLINA ADDRESS: 401 KENNEDY STREET, SUITE B-1 SPARTANBURG, SC 29302 RELATIONSHIP: NONE PURPOSE OF GRANT: GENERAL OPERATING FOUNDATION STATUS OF RECIPIENT: PC JOHN M. KOHLER FOUNDATION INC 20-0497413 FORM 990PF, PART XV, LINE 3a - CONTRIBUTIONS, GIFTS, GRANTS PAID RECIPIENT NAME: SHEB COUNTY HISTORICAL RESEARCH CNTR ADDRESS: 518 WATER STREET SHEBOYGAN FALLS, WI 53085 RELATIONSHIP: NONE PURPOSE OF GRANT: GENERAL OPERATING FOUNDATION STATUS OF RECIPIENT: AMOUNT OF GRANT PAID 2,000. TOTAL GRANTS PAID: 692,000.

STATEMENT 21