

Form 990-T

C&E
960

EXTENDED TO NOVEMBER 15, 2018

Exempt Organization Business Income Tax Return
(and proxy tax under section 6033(e))

OMB No 1545-0687

2017Open to Public Inspection for
501(c)(3) Organizations OnlyDepartment of the Treasury
Internal Revenue Service

For calendar year 2017 or other tax year beginning _____, and ending _____

▶ Go to www.irs.gov/Form990T for instructions and the latest information

▶ Do not enter SSN numbers on this form as it may be made public if your organization is a 501(c)(3)

A ☐ Check box if
address changed

B Exempt under section

☒ 501(c)(3)☐ 408(e) ☐ 220(e)☐ 408A ☐ 530(a)☐ 529(a)Print
or
TypeName of organization (☐ Check box if name changed and see instructions)

KELBEN FOUNDATION, INC.

Number, street, and room or suite no. If a P O box, see instructions

100 EAST WISCONSIN AVENUE, NO. 2280

City or town, state or province, country, and ZIP or foreign postal code

MILWAUKEE, WI 53202

D Employer identification number
(Employees' trust, see
instructions)

39-1494625

E Unrelated business activity codes
(See instructions)

900099

C Book value of all assets
at end of year

31,348,032.

F Group exemption number (See instructions) ▶

G Check organization type ☒ 501(c) corporation ☐ 501(c) trust ☐ 401(a) trust ☐ Other trust

H Describe the organization's primary unrelated business activity ▶ SEE STATEMENT 13

I During the tax year, was the corporation a subsidiary in an affiliated group or a parent-subsidiary controlled group? ▶ ☐ Yes ☒ No

If "Yes," enter the name and identifying number of the parent corporation ▶

J The books are in care of ▶ TED D. AND MARY KELLNER

Telephone number ▶ 414-226-4545

Part I Unrelated Trade or Business Income

(A) Income

(B) Expenses

(C) Net

1a	Gross receipts or sales		1c			
b	Less returns and allowances		2			
2	Cost of goods sold (Schedule A, line 7)		3			
3	Gross profit Subtract line 2 from line 1c		4a			
4a	Capital gain net income (attach Schedule D)		4b			
b	Net gain (loss) (Form 4797, Part II, line 17) (attach Form 4797)		4c			
c	Capital loss deduction for trusts		5	-239,093.	STMT 14	-239,093.
5	Income (loss) from partnerships and S corporations (attach statement)		6			
6	Rent income (Schedule C)		7			
7	Unrelated debt-financed income (Schedule E)		8			
8	Interest, annuities, royalties, and rents from controlled organizations (Sch F)		9			
9	Investment income of a section 501(c)(7), (9), or (17) organization (Schedule G)		10			
10	Exploited exempt activity income (Schedule I)		11			
11	Advertising income (Schedule J)		12			
12	Other income (See instructions, attach schedule)		13	-239,093.		-239,093.
13	Total. Combine lines 3 through 12					

Part II Deductions Not Taken Elsewhere (See instructions for limitations on deductions.)

(Except for contributions, deductions must be directly connected with the unrelated business income)

14	Compensation of officers, directors, and trustees (Schedule K)	14	
15	Salaries and wages	15	
16	Repairs and maintenance	16	
17	Bad debts	17	
18	Interest (attach schedule)	18	
19	Taxes and licenses	19	2,539.
20	Charitable contributions (See instructions for limitation rules) STATEMENT 17 SEE STATEMENT 15	20	0.
21	Depreciation (attach Form 4562)	21	
22	Less depreciation claimed on Schedule A and elsewhere on return	22a	
23	Depletion	23	
24	Contributions to deferred compensation plans	24	
25	Employee benefit programs	25	
26	Excess exempt expenses (Schedule I)	26	
27	Excess readership costs (Schedule J)	27	
28	Other deductions (attach schedule) SEE STATEMENT 16	28	12,444.
29	Total deductions Add lines 14 through 28	29	14,983.
30	Unrelated business taxable income before net operating loss deduction Subtract line 29 from line 13	30	-254,076.
31	Net operating loss deduction (limited to the amount on line 30) SEE STATEMENT 18	31	
32	Unrelated business taxable income before specific deduction Subtract line 31 from line 30	32	-254,076.
33	Specific deduction (Generally \$1,000, but see line 33 instructions for exceptions)	33	1,000.
34	Unrelated business taxable income Subtract line 33 from line 32 If line 33 is greater than line 32, enter the smaller of zero or line 32	34	-254,076.

Part III Tax Computation**35 Organizations Taxable as Corporations.** See instructions for tax computationControlled group members (sections 1561 and 1563) check here ☐ See instructions and**a** Enter your share of the \$50,000, \$25,000, and \$9,925,000 taxable income brackets (in that order)

(1) \$ (2) \$ (3) \$

b Enter organization's share of (1) Additional 5% tax (not more than \$11,750) \$

(2) Additional 3% tax (not more than \$100,000) \$

c Income tax on the amount on line 34

35c 0.

36 Trusts Taxable at Trust Rates. See instructions for tax computation Income tax on the amount on line 34 from☐ Tax rate schedule or ☐ Schedule D (Form 1041)

36

37 Proxy tax See instructions

37

38 Alternative minimum tax

38

39 Tax on Non-Compliant Facility Income. See instructions

39

40 Total Add lines 37, 38 and 39 to line 35c or 36, whichever applies

40 0.

Part IV Tax and Payments**41a Foreign tax credit** (corporations attach Form 1118, trusts attach Form 1116)

41a

b Other credits (see instructions)

41b

c General business credit Attach Form 3800

41c

d Credit for prior year minimum tax (attach Form 8801 or 8827)

41d

e Total credits. Add lines 41a through 41d

41e

42 Subtract line 41e from line 40

42 0.

43 Other taxes Check if from ☐ Form 4255 ☐ Form 8611 ☐ Form 8697 ☐ Form 8866 ☐ Other (attach schedule)

43

44 Total tax. Add lines 42 and 43

44 0.

45a Payments A 2016 overpayment credited to 2017

45a

27,539.

b 2017 estimated tax payments

45b

c Tax deposited with Form 8868

45c

d Foreign organizations Tax paid or withheld at source (see instructions)

45d

e Backup withholding (see instructions)

45e

f Credit for small employer health insurance premiums (Attach Form 8941)

45f

g Other credits and payments ☐ Form 2439☐ Form 4136☐ Other

Total

45g

46 Total payments Add lines 45a through 45g

46 27,539.

47 Estimated tax penalty (see instructions) Check if Form 2220 is attached ☐

47

48 Tax due If line 46 is less than the total of lines 44 and 47, enter amount owed

48

49 Overpayment. If line 46 is larger than the total of lines 44 and 47, enter amount overpaid

49 27,539.

50 Enter the amount of line 49 you want Credited to 2018 estimated tax

27,539.

Refunded

50 0.

Part V Statements Regarding Certain Activities and Other Information (see instructions)

51 At any time during the 2017 calendar year, did the organization have an interest in or a signature or other authority over a financial account (bank, securities, or other) in a foreign country? If YES, the organization may have to file FinCEN Form 114, Report of Foreign Bank and Financial Accounts. If YES, enter the name of the foreign country here

Yes No

52 During the tax year, did the organization receive a distribution from, or was it the grantor of, or transferor to, a foreign trust? If YES, see instructions for other forms the organization may have to file

Yes No

53 Enter the amount of tax-exempt interest received or accrued during the tax year \$

Yes No

Sign Here

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge.

Signature of officer

Date 7/9/18

Title Vice President

May the IRS discuss this return with the preparer shown below (see instructions)? ☒ Yes ☐ No

Paid Preparer Use Only

Print/Type preparer's name

Preparer's signature

Date

Check ☐ if self-employed

PTIN

GREGORY J. SELL

11/9/18

P01477648

Firm's name DAVIS & KUELTHAU, S.C.

Firm's EIN 39-1132468

Firm's address 111 E. KILBOURN AVENUE, SUITE 1400

Phone no 414-276-0200

Firm's address MILWAUKEE, WI 53202-6613

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Schedule A - Cost of Goods Sold. Enter method of inventory valuation **N/A**

1	Inventory at beginning of year	1		6	Inventory at end of year	6	
2	Purchases	2		7	Cost of goods sold Subtract line 6 from line 5. Enter here and in Part I, line 2	7	
3	Cost of labor	3		8	Do the rules of section 263A (with respect to property produced or acquired for resale) apply to the organization?	Yes	No
4a	Additional section 263A costs (attach schedule)	4a					
4b	Other costs (attach schedule)	4b					
5	Total. Add lines 1 through 4b	5					

Schedule C - Rent Income (From Real Property and Personal Property Leased With Real Property)
(see instructions)**1** Description of property

(1)
(2)
(3)
(4)

2 Rent received or accrued

(a) From personal property (if the percentage of rent for personal property is more than 10% but not more than 50%)	(b) From real and personal property (if the percentage of rent for personal property exceeds 50% or if the rent is based on profit or income)	3(a) Deductions directly connected with the income in columns 2(a) and 2(b) (attach schedule)
(1)		
(2)		
(3)		
(4)		
Total 0.	Total 0.	

(c) Total income. Add totals of columns 2(a) and 2(b). Enter here and on page 1, Part I, line 6, column (A) **0.**(b) Total deductions. Enter here and on page 1, Part I, line 6, column (B) **0.****Schedule E - Unrelated Debt-Financed Income** (see instructions)

1 Description of debt-financed property	2 Gross income from or allocable to debt-financed property	3 Deductions directly connected with or allocable to debt-financed property	
		(a) Straight line depreciation (attach schedule)	(b) Other deductions (attach schedule)
(1)			
(2)			
(3)			
(4)			
4 Amount of average acquisition debt on or allocable to debt-financed property (attach schedule)	5 Average adjusted basis of or allocable to debt-financed property (attach schedule)	6 Column 4 divided by column 5	7 Gross income reportable (column 2 x column 6)
(1)		%	
(2)		%	
(3)		%	
(4)		%	
		8 Allocable deductions (column 6 x total of columns 3(a) and 3(b))	
		Enter here and on page 1, Part I, line 7, column (A) 0.	
		Enter here and on page 1, Part I, line 7, column (B) 0.	
Totals		0.	
Total dividends-received deductions included in column 8		0.	

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Schedule F - Interest, Annuities, Royalties, and Rents From Controlled Organizations (see instructions)

1 Name of controlled organization	2 Employer identification number	Exempt Controlled Organizations			
		3. Net unrelated income (loss) (see instructions)	4. Total of specified payments made	5. Part of column 4 that is included in the controlling organization's gross income	6. Deductions directly connected with income in column 5
(1)					
(2)					
(3)					
(4)					

Nonexempt Controlled Organizations

7. Taxable income	8. Net unrelated income (loss) (see instructions)	9. Total of specified payments made	10. Part of column 9 that is included in the controlling organization's gross income	11. Deductions directly connected with income in column 10
(1)				
(2)				
(3)				
(4)				
			Add columns 5 and 10 Enter here and on page 1, Part I, line 8, column (A)	Add columns 6 and 11 Enter here and on page 1, Part I, line 8, column (B)
Totals			0.	0.

Schedule G - Investment Income of a Section 501(c)(7), (9), or (17) Organization (see instructions)

1. Description of income	2. Amount of income	3. Deductions directly connected (attach schedule)	4. Set-asides (attach schedule)	5. Total deductions and set-asides (col 3 plus col 4)
(1)				
(2)				
(3)				
(4)				
		Enter here and on page 1, Part I, line 9, column (A)		Enter here and on page 1, Part I, line 9, column (B)
Totals		0.		0.

Schedule I - Exploited Exempt Activity Income, Other Than Advertising Income (see instructions)

1. Description of exploited activity	2. Gross unrelated business income from trade or business	3. Expenses directly connected with production of unrelated business income	4. Net income (loss) from unrelated trade or business (column 2 minus column 3) If a gain, compute cols 5 through 7	5. Gross income from activity that is not unrelated business income	6. Expenses attributable to column 5	7. Excess exempt expenses (column 6 minus column 5, but not more than column 4)
(1)						
(2)						
(3)						
(4)						
		Enter here and on page 1, Part I, line 10, col (A)	Enter here and on page 1, Part I, line 10, col (B)			Enter here and on page 1, Part II, line 26
Totals		0.	0.			0.

Schedule J - Advertising Income (see instructions)**Part I Income From Periodicals Reported on a Consolidated Basis**

1. Name of periodical	2. Gross advertising income	3. Direct advertising costs	4. Advertising gain or (loss) (col 2 minus col 3) If a gain, compute cols 5 through 7	5. Circulation income	6. Readership costs	7. Excess readership costs (column 6 minus column 5, but not more than column 4)
(1)						
(2)						
(3)						
(4)						
Totals (carry to Part II, line (5))		0.	0.			0.

Part II **Income From Periodicals Reported on a Separate Basis** (For each periodical listed in Part II, fill in columns 2 through 7 on a line-by-line basis.)

1 Name of periodical	2. Gross advertising income	3. Direct advertising costs	4 Advertising gain or (loss) (col 2 minus col 3) If a gain, compute cols 5 through 7	5 Circulation income	6 Readership costs	7. Excess readership costs (column 6 minus column 5, but not more than column 4)
(1)						
(2)						
(3)						
(4)						
Totals from Part I	0.	0.				0.
Totals, Part II (lines 1-5)	0.	0.				0.

Schedule K - Compensation of Officers, Directors, and Trustees (see instructions)

1. Name	2. Title	3. Percent of time devoted to business	4. Compensation attributable to unrelated business
(1)		%	
(2)		%	
(3)		%	
(4)		%	
Total Enter here and on page 1, Part II, line 14			0.

Form 990-T (2017)

FORM 990-T	DESCRIPTION OF ORGANIZATION'S PRIMARY UNRELATED BUSINESS ACTIVITY	STATEMENT 13
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UNRELATED BUSINESS ACTIVITY IS FROM TAXABLE INCOME RECEIVED FROM INVESTMENT IN LIMITED PARTNERSHIP INTERESTS.

TO FORM 990-T, PAGE 1

FORM 990-T	INCOME (LOSS) FROM PARTNERSHIPS AND S CORPORATIONS	STATEMENT 14
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DESCRIPTION	AMOUNT
FRED - BERGAMONT APARTMENTS LLC (ORDINARY INCOME/LOSS)	-38,332.
FRED - DOMAIN LLC (ORDINARY INCOME/LOSS)	-7,345.
FRED - THE VUE LLC (ORDINARY INCOME/LOSS)	-5,451.
FRED - WOODLANDS LLC (ORDINARY INCOME/LOSS)	-5,051.
THE HSH AIV 1 TRUST (OTHER INCOME/LOSS)	-70.
JCF II AIV K LP (ORDINARY INCOME/LOSS)	1,073.
JC FLOWERS II LP (OTHER INCOME/LOSS)	-3,973.
JUPITER JCF AIV II SPECIAL LP (OTHER INCOME/LOSS)	-2,052.
LAKEVIEW EQUITY PARTNERS I LP (ORDINARY INCOME/LOSS)	-144.
LAKEVIEW EQUITY PARTNERS II LP (1231 GAIN/LOSS)	42,570.
LAKEVIEW EQUITY PARTNERS II LP (ORDINARY INCOME/LOSS)	-94,522.
MADISON DEARBORN CAPITAL PARTNERS V-A (OTHER INCOME/LOSS)	178.
MADISON DEARBORN CAPITAL PARTNERS V-B (ORDINARY INCOME/LOSS)	8,038.
TAHOE TALLAC PARTNERS LLC (ORDINARY INCOME/LOSS)	-591.
UAS LAKEVIEW INVESTMENT LLC (ORDINARY INCOME/LOSS)	1,725.
WESTERN HIGHLAND MORTGAGE FUND I (ORDINARY INCOME/LOSS)	301.
FRED - 50 TWENTY LLC (ORDINARY INCOME/LOSS)	-13,512.
WESTERN HIGHLAND MORTGAGE FUND I (1231 GAIN/LOSS)	13,100.
ENGLISH CAPITAL PARTNERS LP (OTHER INCOME/LOSS)	-2,964.
FRED - THE JUNCTION LLC (ORDINARY INCOME/LOSS)	-75,982.
FRED - 22 SLATE LLC (ORDINARY INCOME/LOSS)	-56,089.
TOTAL TO FORM 990-T, PAGE 1, LINE 5	-239,093.

FORM 990-T	CONTRIBUTIONS	STATEMENT 15
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DESCRIPTION/KIND OF PROPERTY	METHOD USED TO DETERMINE FMV	AMOUNT
FROM SCHEDULES K-1	N/A	9.
TOTAL TO FORM 990-T, PAGE 1, LINE 20		9.

FORM 990-T

OTHER DEDUCTIONS

STATEMENT 16

DESCRIPTION

AMOUNT

MADISON DEARBORN CAPITAL PARTNERS V-B - FROM SCHEDULE K-1

5,612.

MADISON DEARBORN CAPITAL PARTNERS V-A - FROM SCHEDULE K-1

1.

LAKEVIEW EQUITY PARTNERS II LP - FROM SCHEDULE K-1

1,243.

LAKEVIEW EQUITY PARTNERS II LP - FROM SCHEDULE K-1

5,588.

TOTAL TO FORM 990-T, PAGE 1, LINE 28

12,444.

FORM 990-T

CONTRIBUTIONS SUMMARY

STATEMENT 17

QUALIFIED CONTRIBUTIONS SUBJECT TO 100% LIMIT

CARRYOVER OF PRIOR YEARS UNUSED CONTRIBUTIONS

FOR TAX YEAR 2012

FOR TAX YEAR 2013

FOR TAX YEAR 2014

FOR TAX YEAR 2015

FOR TAX YEAR 2016 81

TOTAL CARRYOVER

81

TOTAL CURRENT YEAR 10% CONTRIBUTIONS

9

TOTAL CONTRIBUTIONS AVAILABLE

90

TAXABLE INCOME LIMITATION AS ADJUSTED

0

EXCESS 10% CONTRIBUTIONS

90

EXCESS 100% CONTRIBUTIONS

0

TOTAL EXCESS CONTRIBUTIONS

90

ALLOWABLE CONTRIBUTIONS DEDUCTION

0

TOTAL CONTRIBUTION DEDUCTION

0

FORM 990-T

NET OPERATING LOSS DEDUCTION

STATEMENT 18

TAX YEAR	LOSS SUSTAINED	LOSS PREVIOUSLY APPLIED	LOSS REMAINING	AVAILABLE THIS YEAR
12/31/16	339,536.	0.	339,536.	339,536.
NOL CARRYOVER AVAILABLE THIS YEAR			339,536.	339,536.