Form 990-PF Department of the Treasury

EXTENDED TO NOVEMBER 15, 2018
Return of Private Foundation

×2

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

▶ Do not enter social security numbers on this form as it may be made public.
 ▶ Go to www.irs.gov/Form990PF for instructions and the latest information.

OMB No 1545-0052 **2017**Open to Public Inspection

| | Ford | calen | dar year 2017 or tax year beginning | | | | , and e | nding | | | |
|-----------------|------------------|--------------|---|----------------|-----------|-------------------------------|---------------|-------------------------|------------------|------------------------------------|---|
| 202 | | | foundation | | , | | | | A Employ | er identificatio | n number |
| | | | | | | | | | | | |
| 4 | | | ITOWOC PUBLIC LIBR | | | DATION | | - | 39- | 1567769 | 9 |
| C 1 | | | nd street (or PO box number if mail is not deliv | ered to street | address) | | | Room/suite | B Telepho | | |
| ш | 7 | <u>07</u> | QUAY STREET | | | | | | 920 | <u>-686-30</u> | 000 |
| س | City | or to | own, state or province, country, and ZIP | or foreign p | ostal cod | te . | | | C If exempt | on application is | pending, check here |
| A LINE | _ <u>M</u> | AN | ITOWOC, WI 54220 | | | | | | | | |
| PX | G | heck | all that apply: Initial return | | | Initial return of a fo | rmer public c | narity | D 1. Forei | gn organizatior | is, check here |
| A CEL | | | Final return Address chan | ~~ | ద | Amended return Name change | | | 2. Foreig | n organizations m | eeting the 85% test, computation |
| 造り | — C | hack | type of organization: X Section 6 | | amnt nri | vate foundation | | | 1 | | |
| 8 | • | 7 Se | own, state or province, country, and ZIP ITOWOC, WI 54220 all that apply: Initial return Address chan type of organization: X Section 5 ction 4947(a)(1) nonexempt charitable tr irket value of all assets at end of year lart II, col. (c), line 16) 1723363. (f | | | kable private founda | tion | | under s | e toundation st ection 507(h)(1 | atus was terminated |
| | l Fa | ur ma | rket value of all assets at end of year J | Accounti | | | Accr | ual | | | 60-month termination |
| ટ્સ | (fr | om P | art II, col. (c), line 16) | | her (spe | | | | 1 | |)(B), check here |
| 7 —4 | | \$ | 1723363. | Part I, colum | n (d) m | ust be on cash basis | S.) | | | | |
| M | ∃Pa | <u>irt l</u> | Analysis of Revenue and Expenses (The total of amounts in columns (b), (c), and (| d) may not | | Revenue and | (b) Net in | | | djusted net | (d) Disbursements for charitable purposes |
| JAN | | | necessarily equal the amounts in column (a) | a) may not | exp | enses per books | inco | ome | | ncome | (cash basis only) |
| | | 1 | Contributions, gifts, grants, etc., receive | | | 70479. | | | <u>N</u> | /A | <u> </u> |
| 0 | | 2 | Check if the foundation is not required to at Interest on savings and temporary | tach Sch B | | | | | <u> </u> | | _ |
| 42 | | 3 | cash investments | | | 40071 | | 12071 | | | CONTRACTOR 1 |
| 4 | | 4 | Dividends and interest from securities | | | 42971. | | <u>42971.</u> | - - | | STATEMENT 1 |
| - | | | Gross rents Net rental income or (loss) | | | | | | - | | |
| © \$ | | | | 10 | | 356569. | | | | | |
| 7 | | b | Net gain or (loss) from gale of adult hot on line Gross sales place to all | , 10 | | 333333 | | | | | |
| ~ | | 7 | Gross sales plad for all sasets on line in CEIVED Capital gain nel income (from Part IV, line 2) | | | | 3 | 56569. | | | |
| C | | 8 | Net short-term central 9a 2021 | | | | | | | | |
| | | 9 | | | | | | | | | <u> </u> |
| | થ | 10a | Gross sales less returns and allowances TPR | | | | | | | | ļ <u> </u> |
| | Nb statute issue | b | Less Cost of goods sold GUEN | | | _ | | | | | 1 7 |
| | ife | C | Gross profit or (loss) | | - | | | | | | |
| | stat | 1 | Other income | | | 470019. | 3 | 99540. | | | |
| 2 | 2 | 12 13 | Total Add lines 1 through 11 | | | 0. | | 33340. 0. | | | 0 |
| 2022 | • | 14 | Compensation of officers, directors, trustees, e Other employee salaries and wages | ic | | | | | | | |
| က | | | Pension plans, employee benefits | | | | | | | | |
| 0 | Ses | l | Legal fees | | | | | | | | |
| മ | Expense | b | Accounting fees STM | т 2 | | 3133. | | 3133. | | | 0 |
| 盟 | EX | c | Other professional fees STM | т 3 | | 13787. | | 13787. | | | 0 |
| \circ | ĕ | 17 | Interest | | | | | | | | |
| SCANNED | Administrative | l . | Taxes STM | T 4 | | 95. | | 0. | - | | 0 |
| 3 | inis | 19 | Depreciation and depletion D | | | | | | | | |
| Z. | Εþ | 20 | | | | | | | ļ | | |
| S | A D | 21 | Travel, conferences, and meetings OF Printing and Fubilizations 2021 | | | | | | | | |
| | gan | 22 23 | Qther expenses | | | | | | | | |
| | ıtinç | 24 | Culei expenses | | | | . – – | | <u> </u> | | |
| | Operating and | | Total operating and administrative expenses. Add lines 13 through 23 | | | 17015. | | 16920. | | | 0 |
| | ŏ | 25 | Contributions, gifts, grants paid | Ī | | 69013. | | | | | 69013 |
| | | 26 | Total expenses and disbursements. | | | | | | | | |
| | | | Add lines 24 and 25 | | | 86028. | | <u>16920.</u> | | | 69013 |
| | | 27 | Subtract line 26 from line 12: | | | | | | | | |
| | | | Excess of revenue over expenses and disburse | T I | | 383991. | | 00600 | | | |
| | | | Net investment income (if negative, enter- | 1 | | | 3 | <u>82620.</u> | | /A | ļ |
| | | C. | Adjusted net income (if negative, enter -0-) | | | ı | | | ı N | / A | 1 |

723511 01-03-18

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

Decreases not included in line 2 (itemize)

210153.

1498822.

| | | OC PUBLIC L | | | ON | | 3 | <u>9-1567</u> | 7769 | Page 3 |
|-----------------------------------|--------------------|---|--|---|---------------|-------------------------------------|------------------|---------------------------------|---|--------------|
| Rart IV Capital Ga | ains and Lo | osses for Tax on I | nvestmen | t Income | 7 | | | | | |
| | | s) of property sold (for ex or common stock, 200 sl | | ate, | (b) H | ow acquired Purchase Donation | (c) Date (mo., d | acquired ay, yr.) | (d) Date (mo., da | |
| 1a INVESTMENT | GAINS | | | | | | | | | |
| _b | | | | | <u> </u> | | | | _ | |
| _c | | | | | <u> </u> | | | | | |
| _d | | | | | ↓ | | | | | |
| _ <u>e</u> | | | | | 1 | | | | | _ |
| (e) Gross sales price | (f) | Depreciation allowed | | st or other basis | | | | ain or (loss) | • | |
| | | (or allowable) | pius | expense of sale | | | ((e) pius | s (f) minus (g | | 5560 |
| _8 | | | | | | | | | 356 | <u>5569.</u> |
| <u>b</u> | | | | | | | | | | |
| _ <u>c</u> | | | | | | | | <u> </u> | | |
| <u>d</u> | | | | | | | | | | |
| <u>e</u> | | | | n an 10/01/00 | | | | | | |
| Complete only for assets s | | | $\overline{}$ | | | | | ol. (h) gain r not less than | | |
| (i) FMV as of 12/31/69 | | (j) Adjusted basis as of 12/31/69 | | xcess of col. (i) r col. (j), if any | | ` | Losses | (from col. (h |)) | |
| | | as 01 12/3 1/03 | | | | | | | | |
| _ <u>a</u> | | | | | | | | | 356 | <u>5569.</u> |
| _ <u>b</u> | | | | | | | | | | |
| _c | | | | | -⊦ | | | | | |
| _ <u>d</u> | | | | | | | | | | |
| _e | ! | | <u> </u> | | _ | | | | | |
| 2 Capital gain net income or | (net capital loss | $ \begin{cases} \text{ If gain, also entity} \\ \text{If (loss), enter -} \end{cases} $ | er in Part I, line 0- in Part I, line | 7 e 7 | } | 2 | | | 356 | 5569. |
| 3 Net short-term capital gain | or (loss) as def | ined in sections 1222(5) a | ind (6): | | | ļ | | | | |
| If gain, also enter in Part I, | | | (0) | |] [| - | | | | |
| If (loss), enter -0- in Part I, | line 8 | | | | | 3 | | N/A | | |
| Part V Qualification | on Under S | section 4940(e) fo | r Reduced | d Tax on Net | Inve | stment Ir | ncome | | | |
| (For optional use by domestic | private foundati | ons subject to the section | 4940(a) tax or | n net investment ir | ncome.) | | | | N/A | |
| If section 4940(d)(2) applies, I | eave this nart hi | ank | | | | | | | | |
| | | | | | | | | , | | |
| Was the foundation liable for the | | | | | uods | | | l | Yes | L No |
| If "Yes," the foundation doesn't | | | | | | | | | | |
| 1 Enter the appropriate amou | unt in each colu | mn for each year; see the | instructions be | efore making any e | entries. | | | | | |
| (a) Base period year | s | (b) | -4h 4 | Alak calca at a | (c) | -bl |] | Distribu (col. (b) divid | d) ition ratio | |
| Calendar year (or tax year b | eginning in) | Adjusted qualifying di | stributions | Net value of no | oncharit | abie-use asse | ts (| (col. (b) divid | led by col. | (c)) |
| <u>20</u> 16 | | | | | | | | | _ | |
| <u>20</u> 15 | | | | ļ <u></u> | | | | | | |
| 2014 | | | | | | | | | | |
| 2013 | | | | | | | | | | |
| 2012 | | | | | | | | | _ | |
| | | | | | | | | | | |
| 2 Total of line 1, column (d) | | | | | | | 2 | | _ | |
| 3 Average distribution ratio for | = | • | on line 2 by 5. | .0, or by the numb | er of ye | ars | | | | |
| the foundation has been in | existence if less | than 5 years | | | | | 3 | | | |
| 4 Enter the net value of nonci | haritable-use as | sets for 2017 from Part X | Jine 5 | | | | 4 | | | |
| | | | | | | | | _ | | |
| 5 Multiply line 4 by line 3 | | | | | | | 5 | | | |
| 6 Enter 1% of net investment | income (1% of | Part L line 27h) | | | | | 6 | | | |
| | | | | | | | | | _ | |
| 7 Add lines 5 and 6 | | | | | | | 7_ | | | |
| 8 Enter qualifying distribution | is from Part XII | line 4 | | | | | 8 | | | |
| If line 8 is equal to or greate | er than line 7, ch | | e 1b, and comp | olete that part usin | g a 1% | tax rate. | | | | |
| See the Part VI instructions | | | | | | | | | | |

| | n 990-PF (2017) MANITOWOC PUBLIC LIBRARY FOUNDATION 39-156 Int VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 - see | <u>7769</u> i nstr ւ | ıctio | Page 4 ns) |
|----|---|--------------------------------|------------|---------------|
| 1a | Exempt operating foundations described in section 4940(d)(2), check here X and enter "N/A" on line 1. | | _ | _ |
| | Date of ruling or determination letter: 08/25/21 (attach copy of letter if necessary-see instructions) | | | |
| b | Domestic foundations that meet the section 4940(e) requirements in Part V, check here and enter 1% | <u>N/</u> | <u>A</u> | |
| | of Part I, line 27b | | | , |
| | All other domestic foundations enter 2% of line 27b. Exempt foreign organizations, enter 4% of Part I, line 12, col. (b). | | | _ |
| 2 | Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only; others, enter -0-) | | | <u>0.</u> |
| | Add lines 1 and 2 | | | <u>0.</u> |
| | Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only; others, enter -0-) | | | <u>0.</u> |
| | Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0- | | | 0. |
| | Credits/Payments: | | | |
| | 2017 estimated tax payments and 2016 overpayment credited to 2017 6a 7652. | | | |
| | Exempt foreign organizations - tax withheld at source | | | |
| | Tax paid with application for extension of time to file (Form 8868) 6c 0. | | | |
| | Backup withholding erroneously withheld 6d 0. | | 76 | - 2 |
| _ | Total credits and payments. Add lines 6a through 6d | | _/6 | <u>52.</u> |
| 8 | | | | 0. |
| | Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed Overpayment If line 7 is more than the total of lines 5 and 8, enter the amount overpaid 10 | | 76 | 52. |
| | | | | 52. |
| | Enter the amount of line 10 to be: Credited to 2018 estimated tax O . Refunded 11 It VII-A Statements Regarding Activities | | 70 | <u> </u> |
| | During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in | T | Yes | No |
| ıa | any political campaign? | 1a | | X |
| h | Did it spend more than \$100 during the year (either directly or indirectly) for political purposes? See the instructions for the definition | 1b | | X |
| Ī | 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. | | | |
| C | Did the foundation file Form 1120-POL for this year? | 1c | | х |
| | Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year | | | |
| | (1) On the foundation. ► \$ 0 . (2) On foundation managers. ► \$ 0 . | | | |
| е | Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation | | | |
| | managers. ▶ \$ 0. | | | |
| 2 | Has the foundation engaged in any activities that have not previously been reported to the IRS? | 2 | | _X_ |
| | 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_ | | X_ |
| 4a | Did the foundation have unrelated business gross income of \$1,000 or more during the year? | 4a | | X_ |
| b | If "Yes," has it filed a tax return on Form 990-T for this year? | 4b | | |
| 5 | Was there a liquidation, termination, dissolution, or substantial contraction during the year? | 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: | | | |
| | 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 | | v | |
| _ | remain in the governing instrument? | 6 | <u>x</u> x | |
| ′ | Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col (c), and Part XV | 7 | | |
| 8a | Enter the states to which the foundation reports or with which it is registered. See instructions. | | | |
| | WI | | | |
| D | If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate) | 0- | v | |
| | of each state as required by General Instruction G? If "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 4942(j)(5) for calendar year 2017 or the tax year beginning in 2017? See the instructions for Part XIV. If "Yes," complete Part XIV | 9 | | y |
| 10 | Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses | 10 | | <u>x</u> _ |
| 10 | | rm 990 | -PF | |

| P | art VII-A Statements Regarding Activities (continued) | _ | | |
|----|--|---------------|---------|------------|
| | | | Yes | No |
| 11 | At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of | | | |
| | section 512(b)(13)? If "Yes," attach schedule. See instructions | 11 | | X |
| 12 | Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had advisory privileges? | | | |
| | If "Yes," attach statement. See instructions | 12 | | X |
| 13 | Did the foundation comply with the public inspection requirements for its annual returns and exemption application? | 13 | X | |
| | Website address ► WWW.MANITOWOCLIBRARY.ORG/EN-US/DEFAULT.ASP | | | |
| 14 | The books are in care of ► MARK MAURER Telephone no. ► 920 – 68 | 36-3 | 000 | |
| | Located at ▶707 QUAY STREET, MANITOWOC, WI ZIP+4 ▶54 | | | |
| 15 | Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - check here | | | |
| | and enter the amount of tax-exempt interest received or accrued during the year | N | /A | |
| 16 | At any time during calendar year 2017, did the foundation have an interest in or a signature or other authority over a bank, | | Yes | No |
| | securities, or other financial account in a foreign country? | 16 | | X |
| | See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes," enter the name of the | | | |
| | foreign country | | | |
| Pa | art VII-B Statements Regarding Activities for Which Form 4720 May Be Required | | | |
| | File Form 4720 if any item is checked in the "Yes" column, unless an exception applies. | | Yes | No |
| 18 | During the year, did the foundation (either directly or indirectly): | | | |
| | (1) Engage in the sale or exchange, or leasing of property with a disqualified person? | 1 | | |
| | (2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) | | | |
| | a disqualified person? | | | |
| | (3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? | | ĺ | |
| | (4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? | | | |
| | (5) Transfer any income or assets to a disqualified person (or make any of either available | | İ | |
| | for the benefit or use of a disqualified person)? | | | |
| | (6) Agree to pay money or property to a government official? (Exception Check "No" | | | |
| | if the foundation agreed to make a grant to or to employ the official for a period after | | ĺ | |
| | termination of government service, if terminating within 90 days.) | | | |
| f, | If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations | | ł | |
| | section 53 4941(d)-3 or in a current notice regarding disaster assistance? See instructions N/A | 1b | | |
| | Organizations relying on a current notice regarding disaster assistance, check here | | | |
| C | Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected | | | |
| | before the first day of the tax year beginning in 2017? | 1c | | X |
| 2 | Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation | | | |
| | defined in section 4942(j)(3) or 4942(j)(5)): | | | |
| a | At the end of tax year 2017, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning | | ļ | |
| | before 2017? | | | |
| | If "Yes," list the years > | | | |
| b | Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2) (relating to incorrect | | | , |
| | valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer "No" and attach | | ł | |
| | statement - see instructions.) N/A | 2b | | |
| C | If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here. | | | |
| | ▶ | | | |
| 3a | Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time | | - 1 | , |
| | during the year? | | | |
| b | If "Yes," did it have excess business holdings in 2017 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 2017) N/A | 3b | | |
| 4a | Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes? | 4a | | X _ |
| 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 2017? | 4b | | X |
| | Fo | rm 990 | -PF (| 2017) |

| Part VIII Information About Officers, Directors, Trustees, Foundation | 39-1567 Managers, Highly | 769 Page 7 |
|--|-----------------------------|------------------------|
| Paid Employees, and Contractors (continued) 3 Five highest-paid independent contractors for professional services. If none, enter "NONI | | |
| (a) Name and address of each person paid more than \$50,000 | (b) Type of service | (c) Compensation |
| NONE | (b) Type of dol vide | (c) componential |
| | | |
| | | |
| Fotal number of others receiving over \$50,000 for professional services Part IX-A Summary of Direct Charitable Activities | | 0 |
| List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical infor number of organizations and other beneficiaries served, conferences convened, research papers produced, etc. | mation such as the | Expenses |
| TO SUPPORT THE MANITOWOC PUBLIC LIBRARY | | |
| | | 69013. |
| | | |
| | | |
| · | | |
| 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 at | nd 2. | Amount |
| | | |
| | | |
| | | |
| All other program-related investments. See instructions. NONE | | |
| | | |
| | | |
| Fig. 1 Add base 1 Abour 6 | | 0. |
| Total. Add lines 1 through 3 | | m 990-PF (2017) |

Page 8

| P | art X Minimum Investment Return (All domestic foundations must complete this part. Foreign foundations | ndations, s | ee instructions) |
|-----------|---|-----------------|-------------------|
| 1 | Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes: | | |
| · | Average monthly fair market value of securities | 1a | 1564275. |
| | Average of monthly cash balances | 1b | 6307. |
| | Fair market value of all other assets | 1c | |
| - | Total (add lines 1a, b, and c) | 10 | 1570582. |
| | Reduction claimed for blockage or other factors reported on lines 1a and | | |
| | 1c (attach detailed explanation) 1e 0 . | | |
| 2 | Acquisition indebtedness applicable to line 1 assets | 2 | 0. |
| 3 | Subtract line 2 from line 1d | 3 | 1570582. |
| 4 | Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions) | 4 | 23559. |
| 5 | Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4 | 5 | 1547023. |
| 6 | Minimum investment return. Enter 5% of line 5 | 6 | 77351. |
| P | art XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations are | nd certain | |
| _ | foreign organizations, check here and do not complete this part.) | | 77771 |
| 1 | Minimum investment return from Part X, line 6 | 1_ | <u>77351.</u> |
| 2a | , | | |
| b | Income tax for 2017. (This does not include the tax from Part VI.) | | ^ |
| C | Add lines 2a and 2b | 2c | 77351. |
| 3 | Distributable amount before adjustments. Subtract line 2c from line 1 | 3 | |
| 4 | Recoveries of amounts treated as qualifying distributions | 4 | 77351. |
| 5 | Add lines 3 and 4 | 5 | |
| 6 | Deduction from distributable amount (see instructions) | 6 7 | 0. 77351. |
| <u>7_</u> | Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1 | | 1/351. |
| P | art XII Qualifying Distributions (see instructions) | | |
| 1 | Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes: | _ | |
| a | Expenses, contributions, gifts, etc total from Part I, column (d), line 26 | 1a | 69013. |
| b | Program-related investments - total from Part IX-B | 1b | <u> </u> |
| 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: | | |
| а | | 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 | 69013. |
| 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 | 0. |
| 6 | Adjusted qualifying distributions Subtract line 5 from line 4 | 6 | 69013. |
| | Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation of | qualifies for t | he section |

Form **990-PF** (2017)

4940(e) reduction of tax in those years.

Part XIII Undistributed Income (see instructions)

| | (a) Corpus | (b) Years prior to 2016 | (c) 2016 | (d) 2017 |
|---|---------------|----------------------------|---------------------|--|
| 1 Distributable amount for 2017 from Part XI, | | | | 77251 |
| line 7 | | | | <u>77351.</u> |
| 2 Undistributed income, if any, as of the end of 2017 | | | - - - | |
| a Enter amount for 2016 only | | | 69013. | <u> </u> |
| b Total for prior years: | | 0 | | , |
| | | 0. | | |
| 3 Excess distributions carryover, if any, to 2017: | | | | 1: |
| a From 2012 | | | | , |
| b From 2013 | | | | |
| c From 2014 | | | | |
| d From 2015 | | | | |
| e From 2016 | | | | |
| f Total of lines 3a through e | 0. | | | |
| 4 Qualifying distributions for 2017 from | | | | |
| Part XII, line 4: ►\$ 69013. | | | | |
| a Applied to 2016, but not more than line 2a | | | 69013. | <u>' </u> |
| b Applied to undistributed income of prior | | • | | |
| years (Election required - see instructions) | | 0. | | |
| c Treated as distributions out of corpus | | | | |
| (Election required - see instructions) | 0. | | | |
| d Applied to 2017 distributable amount | | | | 0. |
| e Remaining amount distributed out of corpus | 0. | | | |
| 5 Excess distributions carryover applied to 2017 (If an amount appears in column (d), the same amount must be shown in column (a)) | 0. | | | 0. |
| 6 Enter the net total of each column as indicated below: | | | | |
| a Corpus Add lines 3f, 4c, and 4e Subtract line 5 | 0. | | | |
| b Prior years' undistributed income. Subtract | | | | 1 |
| line 4b from line 2b | | 0. | | |
| 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 | | 0. | | • |
| d Subtract line 6c from line 6b. Taxable | | | | |
| amount - see instructions | | 0. | | ' |
| e Undistributed income for 2016 Subtract line | | | | |
| 4a from line 2a Taxable amount - see instr. | | | 0. | |
| f Undistributed income for 2017. Subtract | | | | |
| lines 4d and 5 from line 1. This amount must | | | | |
| be distributed in 2018 | | | | 77351. |
| 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) | 0. | | | į. |
| 8 Excess distributions carryover from 2012 | | | | |
| not applied on line 5 or line 7 | 0. | | | |
| 9 Excess distributions carryover to 2018 | | | | |
| Subtract lines 7 and 8 from line 6a | 0. | | | · · · · · · · · · · · · · · · · · · · |
| 10 Analysis of line 9: | | | | ; |
| a Excess from 2013 | | | | |
| b Excess from 2014 | | | | |
| c Excess from 2015 | | | | |
| d Excess from 2016 | | | | |
| e Excess from 2017 | | | | |

723581 01-03-18

| | OC PUBLIC L | | | | 67769 Page 10 |
|---|------------------------------|----------------------------|--|-----------------------------|---------------------------|
| Part XIV Private Operating F | | | | N/A | |
| 1 a If the foundation has received a ruling o | | | 1 | | |
| foundation, and the ruling is effective fo | | | ▶ └ | | |
| b Check box to indicate whether the found | | ng foundation described | | 4942(j)(3) or 4942(j) | 942(j)(5) |
| 2 a Enter the lesser of the adjusted net | Tax year | 41.0040 | Prior 3 years | (4) 0014 | (a) Takal |
| income from Part I or the minimum | (a) 2017 | (b) 2016 | (c) 2015 | (d) 2014 | (e) Total |
| investment return from Part X for | | | | | |
| each year listed | | | | | ļ |
| b 85% of line 2a | | | | | |
| Qualifying distributions from Part XII, | | | | 1 | |
| line 4 for each year listed | | | | <u> </u> | |
| d Amounts included in line 2c not | | | | | |
| used directly for active conduct of | | | | | |
| exempt activities | | | | | |
| e Qualifying distributions made directly | | | 1 | | |
| for active conduct of exempt activities. | | ı | | | |
| Subtract line 2d from line 2c | | : | | | |
| 3 Complete 3a, b, or c for the | | | | T | |
| alternative test relied upon: a "Assets" alternative test - enter: | | | 1 | | İ |
| (1) Value of all assets | | | | | , |
| ` ' | | | | | |
| (2) Value of assets qualifying under section 4942(j)(3)(B)(i) | | | į. | | |
| b "Endowment" alternative test - enter | | | | | |
| 2/3 of minimum investment return | | | | | |
| shown in Part X, line 6 for each year listed | ı | | ľ | | |
| c "Support" alternative test - enter: | | | | | |
| (1) Total support other than gross | | | | | |
| investment income (interest, | | n | | | |
| dividends, rents, payments on | | | | | |
| securities loans (section | 1 | | | | |
| 512(a)(5)), or royalties) | | | + | | |
| (2) Support from general public and 5 or more exempt | | | | | |
| organizations as provided in | | | | | |
| section 4942(j)(3)(B)(iii) | | <u> </u> | | | <u> </u> |
| (3) Largest amount of support from | | |] | | |
| an exempt organization | | | | | |
| (4) Gross investment income | | 4 11 2 | if the state of the state of | | |
| Part XV Supplementary Info | | | it the toundation | nad \$5,000 or me | ore in assets |
| at any time during t | | uctions.) | | | |
| 1 Information Regarding Foundation | | | | | |
| a List any managers of the foundation who | | | tributions received by the | e foundation before the clo | se of any tax |
| year (but only if they have contributed if | iore man \$5,000). (See si | ection 507(d)(2).) | | | |
| NONE | | | | | |
| b List any managers of the foundation who | | | (or an equally large port | on of the ownership of a p | artnership or |
| other entity) of which the foundation has | , a 10 % of greater litteres | l. | | | |
| NONE | | | | | |
| 2 Information Regarding Contributi | | - | | | |
| Check here ► X if the foundation o | | | | | ests for funds. If |
| the foundation makes gifts, grants, etc., | | | | | |
| a The name, address, and telephone number | er or email address of th | e person to whom appli | cations should be addres | ssed: | |
| | | | | | |
| | | | | | |
| b The form in which applications should b | e submitted and informat | ion and materials they s | hould include: | | |
| A | | | | | |
| c Any submission deadlines: | | | | | |
| d Any restrictions or limitations on awards | Such as by deographics | l areas, charitable fields | kinds of institutions or | other factors: | |
| 4 . my roomonomo or miniations on awards | , caun ac of goograpillea | . a. oao, onanapie neles | ,aa or manduunia, Ul | 5 radio10. | |
| | | | | | |
| 723601 01-03-18 | | | | | Form 990-PF (2017) |

Form **990-PF** (2017)

Total

Page 12

| Part XVI-A | 'Analysis of Income-Producing | Activities |
|------------|-------------------------------|------------|
|------------|-------------------------------|------------|

| Enter gross amounts unless otherwise indicated. | Unrelated I | ousiness income | | ded by section 512, 513, or 514 | (e) |
|---|-----------------|-----------------|-----------------------|---------------------------------|-------------------|
| group amounts amount of more more and action. | (a) Business | (b) | (C) Exclu- sion | (d) | Related or exempt |
| 1 Program service revenue: | code | Amount | code | Amount | function income |
| a | _ | | | | |
| b | _ | | | | |
| c | | | | | |
| d | 1 1 | | | | |
| e | | | | | |
| f | _ | | | | |
| g Fees and contracts from government agencies | | | | | |
| 2 Membership dues and assessments | | | | | |
| 3 Interest on savings and temporary cash investments | | | | | |
| 4 Dividends and interest from securities | | | | | 42971. |
| 5 Net rental income or (loss) from real estate: | | | | | |
| a Debt-financed property | | | | | |
| b Not debt-financed property | | | | | |
| 6 Net rental income or (loss) from personal | | | | | |
| property | <u> </u> | | \bot | | |
| 7 Other investment income | | | | | |
| 8 Gain or (loss) from sales of assets other than inventory | | | | | 356569. |
| 9 Net income or (loss) from special events | | | | | |
| 10 Gross profit or (loss) from sales of inventory | | | | | |
| 11 Other revenue: | | | | | |
| a | 1 | | | | |
| b | | | | | |
| C | 1 | | | | |
| d | l . | | | | |
| e | | | | | |
| 12 Subtotal. Add columns (b), (d), and (e) | | 0 | | 0. | 399540. |
| 13 Total. Add line 12, columns (b), (d), and (e) | | | | | 399540. |
| (See worksheet in line 13 instructions to verify calculations.) | | | | | |

Part XVI-B Relationship of Activities to the Accomplishment of Exempt Purposes

| Line No | Explain below how each activity for which income is reported in column (e) of Part XVI-A contributed importantly to the accomplishment of | | | | | | | |
|---------|---|--|--|--|--|--|--|--|
| | the foundation's exempt purposes (other than by providing funds for such purposes). | | | | | | | |
| 3 | THE FOUNDATION USES INVESTMENT INCOME AND DONATIONS TO SUPPORT THE | | | | | | | |
| 4 | ONGOING NEEDS OF THE MANITOWOC PUBLIC LIBRARY THAT WOULD OTHERWISE | | | | | | | |
| 8 | HAVE TO BE SUPPORTED BY TAX DOLLARS COLLECTED BY THE CITY OF | | | | | | | |
| 11A | MANITOWOC. | | | | | | | |
| | | | | | | | | |
| | | | | | | | | |
| | | | | | | | | |
| | | | | | | | | |
| | | | | | | | | |
| | | | | | | | | |
| | | | | | | | | |
| | | | | | | | | |
| | | | | | | | | |
| | | | | | | | | |
| | | | | | | | | |
| | | | | | | | | |
| | | | | | | | | |
| | | | | | | | | |
| | | | | | | | | |

| Form 00 | 0-PF (2017) MANI T | OWOC DIBLIC | : LIBRARY FOUNDAT: | TON 30_1 | 1567769 | Page 1: |
|--------------|---|--|--|--|-----------------------------------|----------------|
| Part | | egarding Transfe | | nd Relationships With Non- | | age it |
| | the organization directly or indi | rectly engage in any of th | e following with any other organization | n described in section 501(c) | | Yes No |
| • | | <u>-</u> | 7, relating to political organizations? | | | |
| | insfers from the reporting found | lation to a noncharitable e | exempt organization of: | | 4-(4) | v |
| ٠, | Cash Other assets | | | | 1a(1) 1a(2) | X |
| | ner transactions; | | | | 10(2) | ^ |
| | Sales of assets to a noncharita | ible exempt organization | | | 1b(1) | x |
| | Purchases of assets from a no | · - | nization | | 1b(2) | X |
| | Rental of facilities, equipment, | | | | 1b(3) | X |
| | Reimbursement arrangements | | | | 1b(4) | X |
| (5) | Loans or loan guarantees | | | | 1b(5) | X |
| (6) | Performance of services or me | embership or fundraising | solicitations | | 1b(6) | X |
| c Sh | aring of facilities, equipment, ma | ailing lists, other assets, o | r paid employees | | 1c | X |
| | | • | • • | ays show the fair market value of the go | | ets, |
| | | | | e in any transaction or sharing arrangen | nent, show in | |
| | umn (d) the value of the goods, | | | 140- | | |
| (a) Line n | (b) Amount involved | | charitable exempt organization | (d) Description of transfers, transaction | ns, and sharing arra | ingements |
| | | | <u>N/A</u> | | | |
| | | | | | | |
| | | | | | | - |
| | | - | | | | |
| | T | | | | | |
| _ | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | he foundation directly or indirec section 501(c) (other than section | • | ed to, one or more tax-exempt organiza | ations described | Yes | X No |
| b_lf" | Yes," complete the following sch | | | | | |
| | (a) Name of org | ganization | (b) Type of organization | (c) Description of rela | ationship | |
| | N/A | | | | | |
| | | | | | | |
| | | | | | | |
| | /} | | | | | |
| | | | rn, including accompanying schedules and s r (other than taxpayer) is based on fill informa | | May the IRS dis | |
| Sign Here | | | 1/2/10/2021 | DIRECTOR | return with the shown below? Yes | See instr |
| | Signature of officer or trustee | ! - | Date ' / | Title | | |

Form **990-PF** (2017)

P00964591

Paid

Preparer

Use Only

Preparer's signature

Proved GA

Print/Type preparer's name

JEFFREY DVORACHEK

Firm's name ► HAWKINS ASH CPAS, LLP

Firm's address ► ONE EAST WALDO BOULEVARD,

MANITOWOC, WI 54220-2912

Check

self- employed

PTIN

Firm's EIN ► 39-0912608

Phone no. 920-684-7128

Date

SUITE 5

11-30-21

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/Form990 for the latest information.

OMB No 1545-0047

| Name of the organization | | | |
|--------------------------|----------|----------|------------|
| MANTTOWOC | DIIRT.TC | T.TRRARV | FOINDATTON |

Employer identification number

| | MANITOWOC PUBLIC LIBRARY FOUNDATION | 39-1567769 |
|---|--|---|
| Organization type (check | c one)· | |
| Filers of: | Section: | |
| Form 990 or 990-EZ | 501(c)() (enter number) organization | |
| | 4947(a)(1) nonexempt charitable trust not treated as a private foundation | |
| | 527 political organization | |
| Form 990-PF | X 501(c)(3) exempt private foundation | |
| | 4947(a)(1) nonexempt charitable trust treated as a private foundation | |
| | 501(c)(3) taxable private foundation | |
| | n is covered by the General Rule or a Special Rule . (c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special | Rule See instructions |
| General Rule | | |
| = = = = = = = = = = = = = = = = = = = | ion filing Form 990, 990·EZ, or 990·PF that received, during the year, contributions tota ny one contributor. Complete Parts I and II. See instructions for determining a contribu | |
| Special Rules | | |
| sections 509(a)(1 | ion described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% supp 1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 1 utor, during the year, total contributions of the greater of (1) \$5,000, or (2) 2% of the are EZ, line 1 Complete Parts I and II | 6a, or 16b, and that received from |
| year, total contri | ion described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received fro butions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or ed f cruelty to children or animals Complete Parts I, II, and III | - |
| year, contribution is checked, ente purpose Don't c | non described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from sexclusively for religious, charitable, etc., purposes, but no such contributions totaled refer the total contributions that were received during the year for an exclusively religions to the parts unless the General Rule applies to this organization because ble, etc., contributions totaling \$5,000 or more during the year | f more than \$1,000 If this box ous, charitable, etc , |
| but it must answer "No" o | that isn't covered by the General Rule and/or the Special Rules doesn't file Schedule E on Part IV, line 2, of its Form 990, or check the box on line H of its Form 990-EZ or on its t 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) (2017)

Name of organization.

Employer identification number

MANITOWOC PUBLIC LIBRARY FOUNDATION

39-1567769

| 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 | STANGEL FOUNDATION PO BOX 2303 MANITOWOC, WI 54221-2303 | \$5000. | Person X Payroll | | | |
| (a) No. | (b) Name, address, and ZIP + 4 | (c) Total contributions | (d) Type of contribution | | | |
| 2 | WEST FOUNDATION, INC. 915 MEMORIAL DR MANITOWOC, WI 54220-2240 | \$20000. | Person X Payroll | | | |
| (a) No. | (b) Name, address, and ZIP + 4 | (c) Total contributions | (d) Type of contribution | | | |
| 3 | GRACE MEYER ESTATE 4812 NORTHWESTERN AVE RACINE, WI 53406-1504 | \$18027. | Person X Payroll | | | |
| (a) No. | (b) Name, address, and ZIP + 4 | (c) Total contributions | (d) Type of contribution | | | |
| 4 | GEOFFREY AND CARLA LIBAN 2312 RISCH LANE MANITOWOC, WI 54220-1185 | \$8228. | Person X Payroll | | | |
| (a) No. | (b) Name, address, and ZIP + 4 | (c) Total contributions | (d) Type of contribution | | | |
| | | \$ | Person Payroll Noncash (Complete Part II for noncash contributions.) | | | |
| (a) No. | (b) Name, address, and ZIP + 4 | (c) Total contributions | (d) Type of contribution | | | |
| | | \$ | Person Payroll Noncash (Complete Part II for noncash contributions) | | | |

Name of organization,

Employer identification number

MANITOWOC PUBLIC LIBRARY FOUNDATION

39-1567769

| art II No | oncash Property (see instructions) Use duplicate copies of Po | art II if additional space is needed | |
|------------------------------|---|---|----------------------|
| (a) No. from Part I | (b) Description of noncash property given | (c) FMV (or estimate) (See instructions.) | (d) Date received |
| _ | | \$ | |
| (a) No. rom art 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. rom Part I | (b) Description of noncash property given | (c) FMV (or estimate) (See instructions.) | (d) Date received |
| _ | | \$ | |
| (a) No. from | (b) Description of noncash property given | (c) FMV (or estimate) (See instructions.) | (d) Date received |
| _ | | \$ | |
| (a) No. rom Part I | (b) Description of noncash property given | (c) FMV (or estimate) (See instructions.) | (d) Date received |
| _ _ | | \$ | |

Schedule B (Form 990, 990-EZ, or 990-PF) (2017) Page 4 Employer identification number Name of organization, 39-1567769 MANITOWOC PUBLIC LIBRARY FOUNDATION 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 info once) Use duplicate copies of Part III if additional space is needed (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 (d) Description of how gift is held (b) Purpose of gift (c) Use of gift <u>Part I</u> (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 (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 DIVIDEN | DS AND INTER | EST FROM SECUR | RITIES ST | PATEMENT 1 |
|------------------------------|------------------------------|-----------------------------------|-----------------------------------|-------------------------------|
| GROSS SOURCE AMOUNT | | REVENUE | (B) NET INVEST- MENT INCOME | |
| INVESTMENTS 4297 | 71. | 0. 42971. | 42971. | |
| TO PART I, LINE 4 4297 | 71. | 0. 42971. | 42971. | |
| FORM 990-PF | ACCOUNTI | NG FEES | Si | PATEMENT 2 |
| DESCRIPTION | (A) EXPENSES PER BOOKS | (B) NET INVEST- MENT INCOME | | (D) CHARITABLE PURPOSES |
| ACCOUNTING FEES BANK FEES | 3130. | | | 0. |
| TO FORM 990-PF, PG 1, LN 16E | 3133. | 3133. | | 0. |
| FORM 990-PF | OTHER PROFES | SIONAL FEES | Si | PATEMENT 3 |
| DESCRIPTION | (A) EXPENSES PER BOOKS | (B) NET INVEST- MENT INCOME | | (D) CHARITABLE PURPOSES |
| ADMINISTRATIVE FEES | 13787. | 13787. | | 0. |
| TO FORM 990-PF, PG 1, LN 160 | 13787. | 13787. | | 0. |
| FORM 990-PF | TAX | ES | Sī | FATEMENT 4 |
| | (A) | (B) NET INVEST- | (C) ADJUSTED | (D) |
| DESCRIPTION | EXPENSES PER BOOKS | MENT INCOME | NET INCOME | CHARITABLE PURPOSES |
| DESCRIPTION TAXES | | MENT INCOME | | |

| FORM 990-PF OTHER DECRE | ASES IN NET ASSETS OF | R FIIND BALANCE | | EMENT ! | |
|--|--------------------------|-------------------|---------------------------------|--------------------|--|
| b , | | | | <u></u> | |
| DESCRIPTION | | | A | MOUNT ————— | |
| PRIOR PERIOD ADJUSTMENT TO | UNREALIZED GAINS/LOS | SSES | | 210153 | |
| TOTAL TO FORM 990-PF, PART | ' III, LINE 5 | | = | 210153 | |
| FORM 990-PF | OTHER INVESTMENT | °S | STAT | EMENT (| |
| DESCRIPTION | VALUATION METHOD | BOOK VALUI | | MARKET ALUE | |
| INVESTMENTS | COST | 14799 | 54. | 1704505. | |
| TOTAL TO FORM 990-PF, PART | 'II, LINE 13 | 147996 | 54. | 1704505. | |
| NAME AND ADDRESS | TITLE AND AVRG HRS/WK | COMPEN- SATION | EMPLOYEE BEN PLAN CONTRIB | EXPENSE ACCOUNT | |
| ALAN BOELDT 707 QUAY STREET MANITOWOC, WI 54220 | PRESIDENT 1.00 | 0. | 0. | 0 | |
| DOLLY STOKES 707 QUAY STREET MANITOWOC, WI 54220 | DIRECTOR 1.00 | 0. | 0. | 0 . | |
| MARK MAURER 707 QUAY STREET MANITOWOC, WI 54220 | TREASURER 1.00 | 0. | 0. | 0. | |
| MICHELLE KRAJNIK 707 QUAY STREET MANITOWOC, WI 54220 | VICE PRESIDE 1.00 | тит 0. | 0. | 0. | |
| LEE KUMMER 707 QUAY STREET MANITOWOC, WI 54220 | REGISTERED A | GENT 0. | 0. | 0. | |

| MANITOWOC PUBLIC LIBRARY FOUNDATION | | | 39-1 | 567769 |
|--|-------------------|----|------|--------|
| SUSAN DIRAIMONDO 707 QUAY STREET MANITOWOC, WI 54220 | SECRETARY 1.00 | 0. | 0. | 0. |
| PATRICK BRANDEL 707 QUAY STREET MANITOWOC, WI 54220 | DIRECTOR 1.00 | 0. | 0. | 0. |
| TOTALS INCLUDED ON 990-PF, 1 | | 0. | 0. | 0. |

Manitowoc Public Library Foundation Inc Amended Form 990-PF December 31, 2017

The return is being amended due to the IRS notification of the entities acceptance to terminate the private foundation classification beginning on January 1, 2016. The entity requested the 60 month advanced ruling period and paid the tax in the year of filing. The entity filed Form 872 to extend the time to assess tax. The entity is now requesting that the tax paid be refunded.

Please see the attached reclassification letter.