SCANNED OCT 2 9 2018

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Return of Private Foundation

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

OMB No 1545-0052 2017

Department of the Treasury

▶ Do not enter social security numbers on this form as it may be made public.

Form **990-PF** (2017)

Intern	al Reven	ue Service	► Go to v	vww.irs.gov/Form990PF to	r instructions and	the late	st informatio	n. Open t	o Public Inspection	
For	calen	dar year 20	17 or tax year be	ginning	, 20	17, and			, 20	
	ne of fou						A Employer	identification number	-	
. Paul	I.F. and	Lois K. Hei	ss Family Foundation	on. Inc.			39-1928659			
				not delivered to street address)	Roo	m/suite	B Telephone	e number (see instruction	ons)	
241	2 W D.	viora Ct						262-242-4049		
34 14 City	or town	viera Ct. state or prov	ince country, and ZIP o	r foreign postal code			C If exempts	on application is pendi	ng check pere ▶ □	
				<u>.</u>			- ii evenibu	э., аррачалон із рения	.9, 01.00% 11010 -	
		/I 53092-520		urn Initial satura	of a former publ	ic charity	h 4 C	organizations, check h	ioro 🛌	
G	uneck	all that app				ic chanty	ו ט ז. Foreign	organizations, check r	ere ►	
			☐ Final retu					organizations meeting		
			Address			<u> </u>		nere and attach comput foundation status was t		
				ection 501(c)(3) exempt pi				07(b)(1)(A), check here	► []	
				able trust			-			
			of all assets at	J Accounting method	☑ Cash ☐	Accrual		edation is in a 60-month		
			n Part II, col. (c),	Other (specify)			under sec	tion 507(b)(1)(B), check	nere F	
	line 16	 		(Part I, column (d) must be	on cash basis.)		<u> </u>		/85	
Pa	art l			(penses (The total of	(a) Revenue and	(b) Ne	t investment	(c) Adjusted net	(d) Disbursements for charitable	
			olumns (b), (c), and (d) in column (a) (see insti	may not necessarily equal	expenses per books		ncome	income	purposes (cash basis only)	
	,				<u> </u>	- × ×			(Gasir Dasis Orny)	
	1			received (attach schedule)	95,6		1. m. j	- 12 (2)	<u> </u>	
	2			ot required to attach Sch B	2.3.24A	1 1 1 1 1 1	***	** ***	<u> </u>	
	3		•	orary cash investments		0-	-0-			
	4	Dividends	and interest from s	securities	1,1	69	1,169	1,169		
	5a	Gross rent	ts			0-	-0-	-0-		
	b	Net rental	income or (loss)	-0-	() 学 (3) .		3'	Z** 3 3	<u> </u>	
ē	6a	Net gain o	r (loss) from sale o	f assets not on line 10		o- 🐍 🙏			<u> </u>	
ĭ	b	Gross sales	price for all assets on	line 6a -0-		13.28 5	· 🕸 , 🖇			
Revenue	7	Capital ga	in net income (fron	n Part IV, line 2)	* *			<u> </u>	*** (*)	
ď	8	Net short-	term capital gain .		\\$\$\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\	17.3		-0-	· · · · · · · · · · · · · · · · · · ·	
	9	Income m	odifications		* * * /-	> 1 %		-0-		
	10a	Gross sales	less returns and allo	wances -0-	* *		10 · 32		12.3	
	b	Less, Cos	t of goods sold .	<u>-0-</u>	() 養心縣 ().	2 8 1/2 1				
	С	Gross pro	fit or (loss) (attach	schedule)		0- 💉 🕺	\$13	-0-	W. C.	
	11		•	ıle)		0-	-0-	-0-		
	12			<u> 1 </u>	96,8	24	1,169	1,169		
S	13	Compens	ation of officers, di	rectors, trustees, etc		0-	-0-	-0-	-0-	
Expenses	14		-	wages		0-	-0-	-0-	-0-	
ē	15	Pension p	lans, employee be	nefits		0-	-0-	-0-	-0-	
ά	16a	Legal fees	(attach schedule)	RECEI		38	138	138	138	
-	b	Accountin	ig fees (attach sche	edule) o		0-	-0-	-0-	-0-	
Operating and Administrative	С	Other prof	fessional fees (atta	ch sche (SEP 12		0-	-0-	0-	-0-	
<u>ra</u>	17	Interest			S	-0-	-0-	-0-	-0-	
ist	18	Taxes (atta	ich schedule) (see in:	structions)		-0-	-0-	-0-	-0-	
ä	19	Depreciat	ion (attach schedu	le) and deplet GDEN	I, UT	-0-	-0-	-0-		
φ	20	Occupano	у			-0-	-0-	-0-	-0-	
₹	21		nferences, and me	etings	16,6	10	16,610	16,610	16,610	
Ē	22		nd publications			-0-	-0-	-0-	-0-	
מ	23		enses (attach sche	edule)		-0-	-0-	-0-	-0-	
Ë	24			ninistrative expenses.						
<u>r</u>		Add lines	13 through 23.		16,7	48	16,748		16,748	
ğ	25	Contributi	ions, gifts, grants p	oaid	85,0	00	******	237 3 20	85,000	
0	26			nents. Add lines 24 and 25	101,7		16,748	16,748	101,748	
_	27		ine 26 from line 12		18 2	. 3	%	The section of the		
	a			nses and disbursements	-4.9	24				
	b			negative, enter -0-) .	1 W. : 18		-0-	14. 18 19 19.		
			net income (if ned		4 ^	¥			NY 6: 39	

Cat No 11289X

Рa	rt II	Ralance Sheets Attached schedules and amounts in the description column		End o	<u> </u>
نظنا		Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only (See instructions)	(a) Book Value	(b) Book Value	(c) Fair Market Value
	1.	Cash-non-interest-bearing	14,110	8,017	8,017
	2	Savings and temporary cash investments	-0-	-0-	0-
	3	Accounts receivable ►	Paula Madiè e		
		Less allowance for doubtful accounts ▶ -0-	-0-	-0-	-0-
	4	Pledges receivable ► -0-			
- (Less: allowance for doubtful accounts ▶ -0-		-0-	-0-
	5	Grants receivable ,	-0-	-0-	-0-
	6	Receivables due from officers, directors, trustees, and other			
		disqualified persons (attach schedule) (see instructions)	-0-	-0-	-0-
	7	Other notes and loans receivable (attach schedule) ▶		.:	
		Less allowance for doubtful accounts ▶ -0-	-0-	-0-	-0-
ţ	8	Inventories for sale or use	-0-	-0-	-0-
Assets	9	Prepaid expenses and deferred charges	-0-	-0-	-0-
As	10a	Investments – U.S. and state government obligations (attach schedule)	-0-	-0-	-0-
	b	Investments—corporate stock (attach schedule) .	-0-	-0-	-0-
	С	Investments—corporate bonds (attach schedule)	-0-	-0-	-0-
	11	Investments—land, buildings, and equipment basis ▶			7. W. 11 - 3. 18.1
		Less, accumulated depreciation (attach schedule) ▶ -0-	-0-	- 0-	-0-
	12	Investments—mortgage loans	-0-	-0-	-0-
	13	Investments—other (attach schedule)	90,256	107,833	107,833
	14	Land, buildings, and equipment, basis ► -0-			# 1
		Less accumulated depreciation (attach schedule) ▶ -0-		-0-	-0-
	15	Other assets (describe ► -0-	-0-	-0-	-0-
	16	Total assets (to be completed by all filers-see the			
		instructions. Also, see page 1, item l)	104,366	115,850	115,850
	17	Accounts payable and accrued expenses	-0-	-0-	
S	18	Grants payable ,	-0-	-0-	
Liabilities	19	Deferred revenue	-0-	-0-	
ilic	20	Loans from officers, directors, trustees, and other disqualified persons	-0-	-0-	
ial	21	Mortgages and other notes payable (attach schedule)	-0-	-0-	
_	22	Other liabilities (describe ► -0-)	-0-	-0-	
	23	Total liabilities (add lines 17 through 22)	-0-	-0-	
ιń		Foundations that follow SFAS 117, check here ▶ □			
Balances		and complete lines 24 through 26, and lines 30 and 31.			
an	24	Unrestricted			
3al	25	Temporarily restricted			
P	26	Permanently restricted			
Net Assets or Fun		Foundations that do not follow SFAS 117, check here ▶ □			
		and complete lines 27 through 31.			
ō	27	Capital stock, trust principal, or current funds	104,336	115,850	
ets	28	Paid-in or capital surplus, or land, bldg., and equipment fund			
SS	29	Retained earnings, accumulated income, endowment, or other funds			
4	30	Total net assets or fund balances (see instructions)	104,336	115,850	
Se	31	Total liabilities and net assets/fund balances (see			
		instructions)	104,366	115,850	
Pa	rt III	Analysis of Changes in Net Assets or Fund Balances		·	
1		I net assets or fund balances at beginning of year-Part II, colu			
		of-year figure reported on prior year's return)			104,366
2					-4924
3		er increases not included in line 2 (itemize) Unrealized capital ga	ins	3	16,400
4		lines 1, 2, and 3		4	115,850
5	Deci	reases not included in line 2 (itemize) ▶		5	-0-
6	Tota	l net assets or fund balances at end of year (line 4 minus line 5)—	Part II, column (b). I	ne 30 6	115,850
					Form 990-PF (2017)

Part P	V Capital Gains and	Losses for Tax on Investme	ent inc	ome				
		nd(s) of property sold (for example real esta se, or common stock, 200 shs MLC Co)	ate,		(b) How acquired P—Purchase D—Donation		ate acquired o . day. yr)	(d) Date sold (mo , day, yr)
1a		and an analysis and an analysi						
_ <u>b</u>								
<u>C_</u>								
d								
e								
	(e) Gross sales price (f) Depreciation allowed (g) Cost or other basis plus expense of sale							or (loss)) minus (g))
a								······································
_ <u>b</u>								
<u>C</u>								
<u>d</u> _								
е	Complete only for assets sho	owing gain in column (h) and owned by	the fo	ındatıon	on 12/31/69			
	Complete only for assets site		, the lo		s of col (i)			(h) gain minus less than -0-) or
<u> </u>	(i) FMV as of 12/31/69	(j) Adjusted basis as of 12/31/69			(j), if any			om col (h))
<u>a</u>								
b								
<u>c</u>						ļ		
<u>d</u>				···				
е		(If gay of	loo ont	or in Do	rt I, line 7			
2	Capital gain net income o	r (net capital loss) { If (loss), e				2		-0
3	Net short-term capital gai	n or (loss) as defined in sections 1	222(5)	and (6)				
	If gain, also enter in Part	I, line 8, column (c) See instruct	ions.	If (loss)	, enter -0- ın)			
	Part I. line 8					3		-0
Part	V Qualification Und	ler Section 4940(e) for Reduc	ed Ta	x on N	let Investment	Inco	me	
	s," the foundation doesn't o	section 4942 tax on the distributa qualify under section 4940(e). Do r punt in each column for each year	not cor	nplete t	his part.			☐ Yes ☑ No
	(a)	(b)	, 366 11	10 111311	(c)	aking		(d)
Cale	Base period years endar year (or tax year beginning in	Adjusted qualifying distributions	N	et value o	f noncharitable-use a	ssets		ribution ratio divided by col. (c))
	2016	101,	748		12	7,229		.800
~	2015	141,				8,814		1.592
~	2014		267			0,045		1.532
	2013		359			9,605		.947
	2012	92,	560			5,184		.972
2	Total of line 1, column (d)	·				.	2	5.84
3	Average distribution ratio	for the 5-year base period-divid			•	r by [
	the number of years the fo	oundation has been in existence if	less t	han 5 ye	ears	. [3	1.169
						1		
4	Enter the net value of non	charitable-use assets for 2017 fro	m Par	t X, line	5	.	4	127,229
5	Multiply line 4 by line 3					. [5	148,68
		nt income (1% of Part I, line 27b)					6	-0
6	Furei 1 30 Ot tier investine	The modifier (170 of Fate 1, time 270)		• •		•	-	
7	Add lines 5 and 6 .					.	7	148,68
8	Enter qualifying distribution	ons from Part XII, line 4				. [8	101,74
-	If line 8 is equal to or great	ater than line 7, check the box in	Part VI	, line 1b	, and complete	that pa	art using a 1	
	Part VI instructions.							
								Form 990-PF (2017

p	a	a	۵	4

Part \		instructions)				
	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)					
	here ► 🔲 and enter 1% of Part I, line 27b					
	All other domestic foundations enter 2% of line 27b. Exempt foreign organizations, enter 4% of J Part I, line 12, col. (b).	Bertander State 1888				
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only, others, enter -0-)	-0-				
3	Add lines 1 and 2	0-				
	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only; others, enter -0-)	-0-				
5	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-	<u>-0-</u>				
	Credits/Payments					
	2017 estimated tax payments and 2016 overpayment credited to 2017 6a -0- Exempt foreign organizations—tax withheld at source 6b -0-					
b	Exempt foreign organizations—tax withheld at source Tax paid with application for extension of time to file (Form 8868) . 6c -0-					
d	Backup withholding erroneously withheld 6d -0-					
7	Total credits and payments. Add lines 6a through 6d					
8	Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached 8	-0-				
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed 9	-0-				
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid	-0-				
11	Enter the amount of line 10 to be Credited to 2018 estimated tax ▶ Refunded ▶ 11	-0-				
Part \	/II-A Statements Regarding Activities					
1a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any political campaign?	Yes No				
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes? See the					
	instructions for the definition					
	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				
d	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year: (1) On the foundation. ▶ \$					
е	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers. ► \$					
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?	2 /				
3	If "Yes," attach a detailed description of the activities Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of	13.7 7 48% 471				
J	incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes	3				
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	4a ✓				
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 7				
^	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 remain in the governing instrument?	6 7				
7	Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col. (c), and Part XV	7 /				
8a	Enter the states to which the foundation reports or with which it is registered. See instructions. ▶					
b	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General	-71				
•	(or designate) of each state as required by <i>General Instruction G</i> ? If "No." attach explanation	8b ✓				
9	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 🗸				
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their	1				
	names and addresses	10				

Part	VII-A.	Statements Regarding Activities (continued)			
,			• (Yes	No
11		me during the year, did the foundation, directly or indirectly, own a controlled entity within the			
	_	of section 512(b)(13)? If "Yes," attach schedule See instructions	11		✓
12		oundation make a distribution to a donor advised fund over which the foundation or a disqualified			
	•	ad advisory privileges? If "Yes," attach statement. See instructions	12		_
13		oundation comply with the public inspection requirements for its annual returns and exemption application?	13	✓	
		address ► None			
14			2-242-		
			3092-5	209	
15		4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 —check here			
		r the amount of tax-exempt interest received or accrued during the year		V	
16	•	me during calendar year 2017, did the foundation have an interest in or a signature or other authority		Yes	No
		ank, securities, or other financial account in a foreign country?	16	l	✓
		gn country		S. 3	\$ · ·
Dor		Statements Regarding Activities for Which Form 4720 May Be Required	· 🕸 -	<i>♣, ♣</i>	
Fall		n 4720 if any item is checked in the "Yes" column, unless an exception applies.		Yes	No
10		ne year, did the foundation (either directly or indirectly)	2 389		97 XW
1a	_	ge in the sale or exchange, or leasing of property with a disqualified person? Yes	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	, ° -	
		by money from, lend money to, or otherwise extend credit to (or accept it from) a	ŀ		
		ialified person?	2 Š	2 2 2 2	\$4,
	•	sh goods, services, or facilities to (or accept them from) a disqualified person? . Yes No		3 0	
		compensation to, or pay or reimburse the expenses of, a disqualified person? Yes No	1	` '	
		sfer any income or assets to a disqualified person (or make any of either available for		-	
		enefit or use of a disqualified person)?	2 -	44	1. 1
	(6) Agree	e to pay money or property to a government official? (Exception. Check "No" if the	rá.	\$4.	8.4
		dation agreed to make a grant to or to employ the official for a period after		100	8 3
	termi	nation of government service, if terminating within 90 days.)		* 5	
b		swer is 'Yes" to 1a(1)–(6), did any of the acts fail to qualify under the exceptions described in Regulations	100	žŴ:	
		3.4941(d)-3 or in a current notice regarding disaster assistance? See instructions	1b		<u></u>
	-	itions relying on a current notice regarding disaster assistance, check here			% ::
С		foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that	2		42.
		corrected before the first day of the tax year beginning in 2017?	1c		1
2		failure to distribute income (section 4942) (does not apply for years the foundation was a private	>		٠
		g foundation defined in section 4942(j)(3) or 4942(j)(5)):	3 /65 A	. 1	
а		nd of tax year 2017, did the foundation have any undistributed income (lines 6d and	1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1	1	·
		XIII) for tax year(s) beginning before 2017?		()	37
		list the years ▶ 20 , 20 , 20 , 20		\$.	
b		e any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2) to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to		8 78	
		listed, answer "No" and attach statement—see instructions.)	2b	.	1
_	•	ovisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here.	. \$ %		2.5
С		, 20 , 20 , 20		 &. : \$	
За	Did the f	oundation hold more than a 2% direct or indirect interest in any business enterprise		\$ 7.9°	
Ju		me during the year?	7.		
L	•	did it have excess business holdings in 2017 as a result of (1) any purchase by the foundation or	,	16	
b		did it have excess business holdings in 2017 as a result of (1) any purchase by the foundation of lied persons after May 26, 1969, (2) the lapse of the 5-year period (or longer period approved by the	کا دیا ہی		1,33
		sioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest, or (3) the lapse of		***	
		15-, or 20-year first phase holding period? (Use Schedule C, Form 4720, to determine if the		, , ` , '\	:
		on had excess business holdings in 2017.)	3b	1	
4a		oundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a		1
b		foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its	ř.	W. A	
		e purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2017?	4b		/

_	c
Page.	τ

Part	VII-B	Statements Regarding Activities	for W	hich Form	4720	May Be R	equire	d (contir	nued)			
5a		year, did the foundation pay or incur								\$.5°.	Yes	No
		on propaganda, or otherwise attempt to see the outcome of any specific public						☐ Yes	☑ No			· · · · · · · · · · · · · · · · · · ·
	directly or indirectly, any voter registration drive?											- 1
	(3) Provide a grant to an individual for travel, study, or other similar purposes?									200	,	í
	(4) Provide a grant to an organization other than a charitable, etc., organization described in section 4945(d)(4)(A)? See instructions											
	(5) Provide for any purpose other than religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals?									\$.: \$		
b		wer is "Yes" to 5a(1)–(5), did any of the is section 53.4945 or in a current notice							ibed in	5b	1.00	. 3 . 2
		ons relying on a current notice regardi							▶ □	1 77	×,	7
С		wer is "Yes" to question 5a(4), does t t maintained expenditure responsibility							☐ No	100	2	<i>}</i> **
	If "Yes," a	ttach the statement required by Regula	ations s	ection 53.49	45 – 5(d).					200	· A
6a		undation, during the year, receive any	funds, d	directly or in	directly	, to pay pre	emiums			j: 🐧		
	•							Yes	✓ No	\$,
þ		undation, during the year, pay premiun	ns, dire	ctly or indire	ctly, on	a personal	benefit	t contract	?.	6b		
_		6b, file Form 8870.								1 3 3		
		e during the tax year, was the foundation in the foundation receive any proceeds						Yes	∐ No ک		3.	
		nformation About Officers, Direc								7b		····
		and Contractors	1013, 1	rustees, r	Juliau	icioni wiani	agers,	inginy i	alu L	inpioy	cc3,	
1		ficers, directors, trustees, and found	lation n	nanagers ar	d then	compens	ation. S	See instru	ıctions) .		
		(a) Name and address		and average		mpensation		Contribution		(e) Expe	nse acr	count.
	 	(a) Name and address		s per week ed to position		not paid, nter -0-)		yee benefit erred compe			allowan	
	. Heiss											
		., Mequon, WI 53092	Preside	nt, 4		-0-			-0-			-0-
	. Heiss		Di1-	- 3		•			^			•
3412 V	v. Riviera Ci	., Mequon, WI 53092	Directo	r, Z		-0-			-0-			-0-
						v						
2	Compens "NONE."	ation of five highest-paid employed	es (oth	er than tho	se incl	uded on li	ne 1 —	see instr	uction	s). If n	one, o	enter
	(a) Name and	address of each employee paid more than \$50,00	00	(b) Title, and a hours per v devoted to p	veek ¯	(c) Comper	nsation	(d) Contribution (d) Co	benefit deferred	(e) Expe	nse acc allowan	
None												
						1						
		H. A.				ļ						
Total	number of	other employees paid over \$50,000 .			· .				. ▶		-0-	
		, , , , , , , , , , , , , , , , , , , ,								- 00	<u> </u>	

3	Five highest-paid independent contractors for professional services. See instructions. If none, enter "NO	NE."
	(a) Name and address of each person paid more than \$50,000 (b) Type of service	(c) Compensation
lone		
otal	number of others receiving over \$50,000 for professional services	-0-
Par	t IX-A Summary of Direct Charitable Activities	
		. 1
	t the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of panizations and other beneficiaries served, conferences convened, research papers produced, etc.	Expenses
1	Grants to Christian mission agencies	
		-
		85,000
2		-
		-
3		
3		-
		-
4		
		_
_		
	t IX-B Summary of Program-Related Investments (see instructions)	Amount
1 1	scribe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2	Amount
'		-
		-
2		
		-
	other program-related investments. See instructions	
3		-
		-
ota	. Add lines 1 through 3	-0-
		Form 990-PF (2017)

Part		gn found	dations,
	see instructions.)	 	
'	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes:		
а	Average monthly fair market value of securities	1a	100,893
b	Average of monthly cash balances	1b	28,274
C	Fair market value of all other assets (see instructions)	1c	-0-
d	Total (add lines 1a, b, and c)	1d	129,167
е	Reduction claimed for blockage or other factors reported on lines 1a and	*** **	
	1c (attach detailed explanation)		
2	Acquisition indebtedness applicable to line 1 assets	2	0-
3	Subtract line 2 from line 1d	3	129,167
4	Cash deemed held for charitable activities. Enter 11/1% of line 3 (for greater amount, see		
	instructions)	4	1,938
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	127,229
6	Minimum investment return. Enter 5% of line 5	6	6,361
Part	XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating f and certain foreign organizations, check here ► and do not complete this part.)	oundatio	ons
1	Minimum investment return from Part X, line 6	1	6,361
2a	Tax on investment income for 2017 from Part VI, line 5 2ao.		
b	Income tax for 2017. (This does not include the tax from Part VI.) 2b0.		
C	Add lines 2a and 2b	2c	-0-
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	6,361
4	Recoveries of amounts treated as qualifying distributions	4	-0-
5	Add lines 3 and 4	5	6,361
6	Deduction from distributable amount (see instructions)	6	-0-
7	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII,		
	Ine 1	7	6,361
Part	XII Qualifying Distributions (see instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:	â 1. a	
а	Expenses, contributions, gifts, etc.—total from Part I, column (d), line 26	1a	101,748
b	Program-related investments—total from Part IX-B	1b	-0-
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc.,		
	purposes	2	-0-
3	Amounts set aside for specific charitable projects that satisfy the.	. 22.3	
а	Suitability test (prior IRS approval required)	3a	-0-
b	Cash distribution test (attach the required schedule)	3b	-0-
4	Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8; and Part XIII, line 4	4	101,748
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. See instructions	5	-0-
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	101,748
	Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating qualifies for the section 4940(e) reduction of tax in those years.	g whethe	r the foundation
		Го	rm 990-PF (2017)

Part :	Part XIII Undistributed Income (see instructions)								
	Details table amount for 2017 from Ded VI	(a) Corpus	(b) Years prior to 2016	(c) 2016	(d) 2017				
1	Distributable amount for 2017 from Part XI line 7	· 138 %	* %** 2 4 % .						
•	Undistributed income, if any, as of the end of 2017	**	2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2		6,361				
2	Enter amount for 2016 only								
a b	Total for prior years: 20 13 ,20 14 ,20 15	3, 4, 4, ,	-0-	U-					
3	Excess distributions carryover, if any, to 2017	2 5 %	-U-		8,56 O 200				
а	From 2012 -0-			,					
b	From 20130-								
c	From 20140-								
d	From 20150-								
е	From 20160-								
f	Total of lines 3a through e	-0-			YY Character				
4	Qualifying distributions for 2017 from Part XII,		<u>. 8. 9.</u>	-{	\$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$				
	line 4. ► \$,							
а	Applied to 2016, but not more than line 2a .	\$ \$ 2 4 4 5 40		-0-					
b	Applied to undistributed income of prior years			Section 1 decreases in					
	(Election required—see instructions)	\$ \$ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	-0-						
C	Treated as distributions out of corpus (Election								
	required—see instructions)	-0-	* *	75 1 7 8	* * * * * * * * * * * * * * * * * * * *				
d	Applied to 2017 distributable amount		, , , ,	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	-0-				
_e _	Remaining amount distributed out of corpus	-0-	A. A		· 3 · 3 3 · · · · · · · · · · · · · · · · · ·				
5	Excess distributions carryover applied to 2017	-0-			-0-				
	(If an amount appears in column (d), the same amount must be shown in column (a).)	i		,					
6	Enter the net total of each column as		** *						
U	indicated below:	, ' , \$\$ ' /	** * · · · · · · · · · · · · · · · · ·	, , ,					
а	Corpus. Add lines 3f, 4c, and 4e. Subtract line 5	, , , ,							
b	Prior years' undistributed income Subtract	-0-	· · ·	A .					
-	line 4b from line 2b	,	-0-	-,					
С	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	(\$\dagge\) \dagge\) \	-0-						
d	Subtract line 6c from line 6b. Taxable								
	amount—see instructions	14 x x 4 7 6 4 6 5	-0-						
e	Undistributed income for 2016 Subtract line		1 30 / 1						
	4a from line 2a. Taxable amount—see								
	instructions			-0-					
f	Undistributed income for 2017 Subtract lines								
	4d and 5 from line 1. This amount must be distributed in 2018			, , ,					
7		<u> </u>			6,361				
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			1 2 × 2 2 4 1 × 1					
	required—see instructions)	-0-							
8	Excess distributions carryover from 2012 not		. AV 1 4 M . D. B.						
•	applied on line 5 or line 7 (see instructions).	-0-	4						
9	Excess distributions carryover to 2018.		Ji i i i i i i i i i i i i i i i i i i						
	Subtract lines 7 and 8 from line 6a	-0-							
10	Analysis of line 9.				S ./ ./ ./ ./ ./ ./ ./ ./ ./ ./ ./ ./ ./				
а	Excess from 20130-								
b	Excess from 2014			13 x 2 4 4 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1					
C	Excess from 2015			NESSY (S. C.					
d	Excess from 2016			lidiga 🐉 🐉 🕏					
е	Excess from 20170-								
					Form 990-PF (2017)				

Part :	XIV Private Operating Founda	tions (see ınstru	ctions and Part	VII-A, question 9)	
1a	If the foundation has received a ruling foundation, and the ruling is effective for					
b	Check box to indicate whether the four	ndation is a private	operating foundat	ion described in se	ection 4942(j)(3) or 4942(j)(5)
2a	Enter the lesser of the adjusted net	Tax year		Prior 3 years		
	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		` .			
b	050/ (1 0	-0-	-0-	-0-	-0-	
	Qualifying distributions from Part XII,		-0-	-0-	-0-	0-
	line 4 for each year listed	101,748	141,429	118,262	153,267	514,707
d	Amounts included in line 2c not used directly for active conduct of exempt activities	-0-	-0-		-0-	-0-
е	Qualifying distributions made directly for active conduct of exempt activities Subtract line 2d from line 2c	101,748	141,429	118,263	153,267	514,707
3	Complete 3a, b, or c for the alternative test relied upon					
а	"Assets" alternative test—enter (1) Value of all assets					
	(2) Value of assets qualifying under section 4942(j)(3)(B)(i)					
b	"Endowment" alternative test—enter 2/2 of minimum investment return shown in Part X, line 6 for each year listed	4,241	2,961	2,995	3,335	13,532
С	"Support" alternative test—enter:					
	(1) Total support other than gross investment income (interest, dividends, rents, payments on securities loans (section 512(a)(5)), or royalties)					
	(2) Support from general public and 5 or more exempt organizations as provided in section 4942(j)(3)(B)(iii)	,				
	(3) Largest amount of support from an exempt organization					
	(4) Gross investment income .					
Part	XV Supplementary Information			ne foundation h	ad \$5,000 or me	ore in assets at
	any time during the year-	··	is.)			
1 a	Information Regarding Foundation List any managers of the foundation of before the close of any tax year (but of	who have contribu				by the foundation
Dovd 5	, ,	,		, .,,	(1,707)	
Paul F. b	List any managers of the foundation ownership of a partnership or other el					rge portion of the
None						
2	Information Regarding Contribution Check here ▶ ☐ if the foundation unsolicited requests for funds. If the f complete items 2a, b, c, and d. See in	only makes controundation makes	ibutions to prese	lected charitable		
а	The name, address, and telephone nu		dress of the person	n to whom applica	itions should be ac	ddressed [,]
Paul F.	. Heiss, 3412 W. Rıvierat Ct., Mequon, WI	53092-5209 262-2	42-4049			
b	The form in which applications should	be submitted and	d information and	materials they sho	uld include	
	nt requested, proposed use of funds, exp	ected results			<u> </u>	
	Any submission deadlines.					
None d	Any restrictions or limitations on aw factors:	vards, such as by	y geographical ar	eas, charitable fi	elds, kinds of ins	titutions, or other
<u>Chris</u> ti	an overseas missions organizations only	with U.S. 501(c)(3)	registration. Prior	ity will be given to	projects among UU	PG's.

Form **990-PF** (2017)

Supplementary Information (continued)

Part XV

Form 990-PF (2017)

Grants and Contributions Paid During the Year or Approved for Future Payment If recipient is an individual stock any relationship to Recipient Foundation Purpose of grant or status of Amount nager, m north brition, vac contribution Name and address (home or business) recipient or substant al contributor a Paid during the year Ambassadors For Christ 501c3 Evangelism 1,000 American Bible Society 501c3 Evangelism 1,000 Asia Harvest 501c3 Evangelism 1,000 Boy Scouts of America 501c3 Evangelism 500 **Bridges International** 501c3 Evangelism 3,000 Campus Crusade for Christ 501c3 Evangelism 6,000 ChinaSource 501c3 Evangelism 10,000 Crossworld 501c3 Evangelism 2.000 English Language Institute China 501c3 Evangelism 1,000 Equip India 501c3 Evangelism 2,000 Impact Foundation 501c3 Evangelism 25,000 Pioneers 501c3 Evangelism 1,000 Salvation Army 501c3 Evangelism 1,000 The Jesus Film Project 501c3 Evangelism 2,000 Thorston Educational Fund 501c3 Evangelism 2,500 Trans World Radio 501c3 Evangelism 1,000 visionSynergy 501c3 Evangelism 25,000 Total <u>85,000</u> Approved for future payment Total

Pa	t XVI-A: Analysis of Income-Producing Ac	tivities				
Ente	gross amounts unless otherwise indicated.	Unrelated bu	isiness income	Excluded by sect	ion 512, 513, or 514	(0)
		(a) Business code	(b) Amount	(c) Exclusion code	(d)	(e) Related or exempt function income
1	Program service revenue.	Busiless code	Amount	Exclusion code	Amount	(See instructions.)
	a					
	b c					
	d					·
	e	4.14.1000000000				
	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					
5	Net rental income or (loss) from real estate	₩., ₹ ·	^ ' * \$ \$ 1 2	×4247		46. 1994 P
	a Debt-financed property					
_	b Not debt-financed property					
6	Net rental income or (loss) from personal property					
7 8	Other investment income					
9	Net income or (loss) from special events					
10	Gross profit or (loss) from sales of inventory					
11	Other revenue a					
	b					<u></u>
	C					
	d					
	e					
				1 3 3		
					13	
	worksheet in line 13 instructions to verify calculation		ant of France	1 D		
	T XVI-B Relationship of Activities to the A					
Lini	 No. Explain below how each activity for which accomplishment of the foundation's exempt pur 	poses (other that	n by providing fun	ds for such purp	i-A contributed ii ioses) (See instrud	nportantly to the ctions.)
				······································		
				······································		
			· · · · · · · · · · · · · · · · · · ·			
			· · · · · · · · · · · · · · · · · · ·	····	<u></u>	
				· ···		
				·····	· · · · · · · · · · · · · · · · · · ·	

		····		——————————————————————————————————————		
				<u></u> .		
	No. of the state o				····	
						000 PF
					Fo	rm 990-PF (2017)

Form **990-PF** (2017)

Part	XVII	Information	n Regarding Tra	nsfers to and Tra	ansaction	s and Re	lationship	s With N	loncharital	ole Exe	mpt
		Organization	ons								
1				engage in any of the						Yes	No
			ther than section	1 501(c)(3) organiza	ations) or	in sectio	n 527, rel	ating to p	political 🦽	£. 1	K, J
	organiz										
а				to a noncharitable e	exempt org	anızatıon d	of.		<u> </u>	a	é.M
	• •	h							1a(
	• •	er assets .							1a(_ ✓
b		ansactions.									
				cempt organization			•		<u> 1b(</u>		✓
				itable exempt organ					1b(
				ier assets .				· · ·	[1b(✓
			-						1b(
		ns or loan gua							1b(
				ship or fundraising s					1b(✓_
C			_	lists, other assets, o					•		<u> </u>
d				es," complete the f							
				vices given by the regement, show in co							
4-31		Amount involved									
(a) Line	(a) on e	Amount involved	(c) Name of nor	charitable exempt organi	zation	(a) Descri	otion of transfe	rs, transaction	ns, and sharing	arrangeme	ints
											
											
								·			
											
											
		· · · · · · · · · · · · · · · · · · ·									——
							<u></u>				
							······································				
				<u> </u>							
22	Is the 1	oundation dire	ctly or indirectly :	affiliated with, or rel	lated to or	ne or more	e tax-exemi	ot organiza	ations		
20				section 501(c)(3)) or						es 🗸	No
h			e following schedu							C3 (E.)	10
		(a) Name of organ			organization			(c) Descriptio	n of relationship)	
											
						-		· 			
								······································	·····	······································	
							····				
				<u> </u>							
				I ned this return, including ac					my knowledge a	nd belief, it	is true,
Sign	correct.	and complete Decl	aration of preparer (otner	than taxpayers is based on a	all information of	of which prepa	irer has any kno	wledge	May the IRS di	ecuse this	return
Here		and a	منسلاء.	19/4/20	A GRIC	RESID	ENT	!	with the prepare	er shown b	elow?
11010		ure of officer or true	stee	Date	Title				See instructions	Yes	□No
		Print/Type preparer		Preparer's signature			Date		PTIN		
Paid								Chec self-e	k if employed		
Prep		irm's name		<u></u>			·	Firm's EIN	_ ````		
Use	Omy –	irm's address	· · · · · · · · · · · · · · · · · · ·					Phone no			
		c controls									

Schedule B

(Form 990, 990-EZ, or 990-PF)

Department of the Treasury Internal Revenue Service

Name of the organization

Schedule of Contributors

► Attach to Form 990, Form 990-EZ, or Form 990-PF. ► Go to www.irs.gov/Form990 for the latest information. OMB No 1545-0047

2017

Employer identification number

Paul F. and Lois K. Heiss Fa	mily Foundation, Inc. 39-1928659
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 .
, ,	c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule See
General Rule	
	on filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 y or property) from any one contributor. Complete Parts I and II. See instructions for determining a I contributions.
Special Rules	
regulations under 13, 16a, or 16b, a	on described in section 501(c)(3) filing Form 990 or 990-EZ that met the 331/3% support test of the sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line and that received from any one contributor, during the year, total contributions of the greater of (1) of the amount on (i) Form 990, Part VIII. line 1h, or (ii) Form 990-EZ, line 1 Complete Parts I and II.
contributor, during	on described in section 501(c)(7), (8). or (10) filing Form 990 or 990-EZ that received from any one g the year, total contributions of more than \$1,000 exclusively for religious, charitable, scientific, ional purposes, or for the prevention of cruelty to children or animals. Complete Parts I. II, and III
contributor, durin contributions tota during the year fo General Rule ap	on described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one g the year, contributions exclusively for religious, charitable, etc., purposes, but no such alled more than \$1,000. If this box is checked, enter here the total contributions that were received for an exclusively religious, charitable, etc., purpose. Don't complete any of the parts unless the colles to this organization because it received nonexclusively religious, charitable, etc., contributions or more during the year
990-EZ, or 990-PF), but it	that isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990, 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 , to certify that it doesn't meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

Name of organization
Paul F, and Lois K. Heiss Family Foundation, Inc.

Employer identification number

Paul F. and Lois K. Heiss Family Foundation, Inc. 39-1928659 Contributors (see instructions). Use duplicate copies of Part I if additional space is needed. Part f (c)
Total contributions (a) (b) (d) Type of contribution No. Name, address, and ZIP + 4 $\overline{\mathbf{V}}$ IBCC Industries, Inc. Person 1... Payroll Noncash 95,655 4630 S. Brust Avenue (Complete Part II for noncash contributions) St. Francis, WI 53235-5300 (b) (d) (a) (c) No. Name, address, and ZIP + 4 **Total contributions** Type of contribution Person **Payroll** Noncash (Complete Part II for noncash contributions) (d) (a) (b) (c) No. Name, address, and ZIP + 4 **Total contributions** Type of contribution Person **Payroll** Noncash (Complete Part II for noncash contributions) (d) (a) (b) (c) **Total contributions** Type of contribution No. Name, address, and ZIP + 4 Person Payroll Noncash (Complete Part II for noncash contributions) (d) (b) (c) (a) **Total contributions** Type of contribution No. Name, address, and ZIP + 4 Person Payroll Noncash (Complete Part II for noncash contributions.) (b) (c) (d) (a) **Total contributions** Type of contribution No. Name, address, and ZIP + 4 Person **Payroll** Noncash (Complete Part II for noncash contributions)

licate copies of Part II if additiona	39-1928659 I space is needed.
{C}	1
FMV (or estimate (See instructions.)	
\$	
\$	
\$	
\$	
\$	
	\$ (c) FMV (or estimate) (See instructions.) \$ (c) FMV (or estimate) (See instructions.)

Employer identification number

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

Name of organization

Paul F. and Lois K. Heiss Family Foundation, Inc. 39-1928659 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 completing Part III, enter the total of exclusively religious charitable, etc., contributions of \$1,000 or less for the year. (Enter this information once See instructions.) Use duplicate copies of Part III if additional space is needed. (a) No. (b) Purpose of gift (c) Use of gift (d) Description of how gift is held from Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from (b) Purpose of gift (c) Use of gift (d) Description of how gift is held Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. (c) Use of gift (d) Description of how gift is held from (b) Purpose of gift Part I (e) Transfer of gift Relationship of transferor to transferee Transferee's name, address, and ZIP + 4 (a) No. (c) Use of gift (d) Description of how gift is held (b) Purpose of gift from Part I (e) Transfer of gift Relationship of transferor to transferee Transferee's name, address, and ZIP + 4

Form 990-PF Paul F. and Lois K. Heiss Family Foundation, Inc.	39-1928659
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Part I

Schedule of Gifts Received	IBCC Industries, Inc.	\$95	,655
Schedule of Legal Fees	van Briesen & Roper s.c.	\$	138

Part II

Schedule of Other Investments	<u>12/31/17</u>	12/31/16
Northwestern Mutual Investment Services	\$ 107,833	\$ 90,256

PART VII-A

Names and Addresses of substantial contributors:

IBCC Industries, Inc. 4630 S. Brust Avenue St. Francis, WI 53235-5300 \$95,655