Return of Private Foundation
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.

rui ca	iten	ual year 2017 or lax year beginning		, and ending	
Nam	e of	foundation			A Employer identification number
KE	L	LY FAMILY FOUNDATION, I	NC.		39-2030686
		nd street (or P O box number if mail is not delivered to street		Room/suite	
40	1	CHARMANY DRIVE		320	608-274-4789
		own, state or province, country, and ZIP or foreign p	ostal code	<u>L</u>	C If exemption application is pending, check here
		ISON, WI 53719			To the state of th
		all that apply: Initial return	Initial return of a f	ormer public charity	D 1. Foreign organizations, check here
		Final return	Amended return		
		Address change	Name change		Foreign or ganizations meeting the 85% test, check here and attach computation
H Ch	eck	type of organization: X Section 501(c)(3) e			E If private foundation status was terminated
		ction 4947(a)(1) nonexempt charitable trust	Other taxable private found	ation U 🖳	under section 507(b)(1)(A), check here
I Fair			ing method: X Cash	Accrual	F If the foundation is in a 60-month termination
		· · · · · · · · · · · · · · · · · · ·	ther (specify)		under section 507(b)(1)(B), check here
▶\$		36,891. (Part I, colu	mn (d) must be on cash bas	s.)	and social social social field
Par	_	Analysis of Revenue and Expenses	(a) Revenue and	(b) Net investment	(c) Adjusted net (d) Disbursements
		The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a))	expenses per books	income	income for charitable purposes (cash basis only)
$\Box$	1	Contributions, gifts, grants, etc., received	160,323.		N/A
	2	Check if the foundation is not required to attach Sch. B			
- 1	3	Interest on savings and temporary cash investments			
1	4	Dividends and interest from securities	819.	819	. STATEMENT 1
	5a	Gross rents			
- 1	b	Net rental income or (loss)			
	6a	Net gain or (loss) from sale of assets not on line 10	2,870.		
Jie	b	Gross sales price for all 42, 685.			
Revenue	7	Capital gain net income (from Part IV, line 2)		2,870	
٣	8	Net short-term capital gain			
	9	Income modifications			
1	l0a	Gross sales less returns and allowances			
	b	Less Cost of goods sold			
	C	Gross profit or (loss)	(		
1	1	Other income	11 1	• "	
1	2	Total. Add lines 1 through 11	-1-64-,-012.	3',689	
1	3	Compensation of officers, directors, trustees, etc	[유] <b>0.</b>	0	. 0.
1	4	Other employee salaries and wages	181 MAY 212	318   51	
1	5	Pension plans, employee benefits		1.51	
S 1	6a	Legal fees	110	1 2: 3	
eus	þ	Accounting fees STMT 2	3,105	$\frac{2}{3,105}$	
	C	Other professional fees STMT 3	853.	853	. 0.
) .≥ı		Interest			
rati 1	8	Taxes STMT 4	852.	0	. 0.
, i <u>sl</u> 1	9	Depreciation and depletion		<del></del>	
<u> </u>	20	Occupancy			
′ ∦2		Travel, conferences, and meetings			
	22	Printing and publications			
2	23	Other expenses STMT 5	40.	40	. 0.
rati	4	Total operating and administrative	4 050		
a		expenses. Add lines 13 through 23	4,850.	3,998	. 0.
- ['		Contributions, gifts, grants paid	145,829.		145,829.
2	26	Total expenses and disbursements.	150 650		
+	_	Add lines 24 and 25	150,679.	3,998	. 145,829.
2	27				
		Excess of revenue over expenses and disbursements	13,333.		<del> </del>
		Net investment income (if negative, enter -0-)	<u> </u>		
	C	Adjusted net income (if negative, enter -0-)	<u></u>		N/A

723501 01-03-18 LHA For Paperwork Reduction Act Notice, see instructions.

101	m 99	0-PF (2017) KELLY FAMILY FOUNDATION,	INC.		2030686 Page 2
P	art	Balance Sheets Attached schedules and amounts in the description	Beginning of year	End of	
브		Corollin Should by for the bit year amounts only	(a) Book Value	(b) Book Value	(c) Fair Market Value
	1	Cash - non-interest-bearing	1,500.	9,579.	9,579.
	2	Savings and temporary cash investments	1,002.	472.	472.
	3	Accounts receivable			
	}	Less: allowance for doubtful accounts			
	4	Pledges receivable ►			
	ļ	Less: allowance for doubtful accounts			
	5	Grants receivable			
	6	Receivables due from officers, directors, trustees, and other			
	1	disqualified persons			
	7	Other notes and loans receivable			
	'	Less; allowance for doubtful accounts			
	8	Inventories for sale or use			
Assets		Prepaid expenses and deferred charges	<del></del>		<del></del>
Ass	9	Investments - U.S. and state government obligations	<del></del>		
•	1	<b>_</b> F	6,781.	15,534.	17,291.
			12,602.	9,633.	9,549.
	ı		12,002.	9,033.	9,549.
	11	Investments - land, buildings, and equipment basis			
	1	Less accumulated depreciation			
	12	Investments - mortgage loans			
	13	Investments - other			
	14	Land, buildings, and equipment; basis			
	1	Less accumulated depreciation			
	15	Other assets (describe)			
	16	Total assets (to be completed by all filers - see the	Į.		
		instructions. Also, see page 1, item I)	21,885.	35,218.	36,891.
	17	Accounts payable and accrued expenses			
	18	Grants payable			
s	19	Deferred revenue			
Liabilities	20	Loans from officers, directors, trustees, and other disqualified persons			
ige	21	Mortgages and other notes payable			
Ξ.	22	Other liabilities (describe ►)			
	1				
	23	Total liabilities (add lines 17 through 22)	0.	0.	
_		Foundations that follow SFAS 117, check here			
		and complete lines 24 through 26, and lines 30 and 31.			
es	24	Unrestricted	}		
Š	25	Temporarily restricted			
3ak	26	Permanently restricted			
Net Assets or Fund Balances		Foundations that do not follow SFAS 117, check here			
Ē		and complete lines 27 through 31.	Į		
ŏ	27	Capital stock, trust principal, or current funds	0.	0.	
ets	28	Paid-in or capital surplus, or land, bldg., and equipment fund	0.	0.	
SS	29	Retained earnings, accumulated income, endowment, or other funds	21,885.	35,218.	
et /	30	Total net assets or fund balances	21,885.	35,218.	
ž	٥٥	Total net assets of fully parances	21,003.	33,210.	
	31	Total liabilities and net assets/fund balances	21,885.	35,218.	
_				3372201	
٢	art	Analysis of Changes in Net Assets of Fullu Bai			
1	Total	net assets or fund balances at beginning of year - Part II, column (a), line 3	0		
	(mus	st agree with end-of-year figure reported on prior year's return)		1	21,885.
2	Enter	amount from Part I, line 27a		2	13,333.
		r increases not included in line 2 (itemize)		3	0.
4	Add	lines 1, 2, and 3		4	35,218.
		eases not included in line 2 (itemize)			0.
		net assets or fund balances at end of year (line 4 minus line 5) - Part II, col	umn (b), line 30	6	35,218.
					Form <b>990-PF</b> (2017)

		and Losses for Tax on In						33		7000	Page 3
_	(a) List and describe	the kind(s) of property sold (for example the common stock, 200 shs	mple, real esta		( <b>b</b> )	low ac - Purc - Dona	11426   .	c) Date a (mo., da		( <b>d)</b> Date (mo., da	
1a	PUBLICLY TRADE	D SECURITES-ST (F	PURCHAS	ED)							
b	PUBLICLY TRADE	SECURITES-LT (	PURCHAS	ED)							
C	CAPITAL GAINS I	DIVIDENDS				_					
d					<u> </u>						
e					L_,						
	(e) Gross sales price	(f) Depreciation allowed (or allowable)		st or other basis expense of sale					un or (loss) (f) minus (		
2		<u></u> ,		24,57	2.						056.
b				15,24	3.					<u> </u>	751.
C	63.										63.
d											
е			h = 4 d - 4	40/04/00							
	Complete only for assets snowin	g gain in column (h) and owned by t							ol. (h) gaın ı ot less than		
	(i) FMV as of 12/31/69	(j) Adjusted basis as of 12/31/69		cess of col. (i) col. (j), if any	_	_			from col. (h	ı)) ´ 	056
<u>a</u>					-+						$\frac{056.}{251}$
b	<del></del>									<u> </u>	$\frac{751.}{63.}$
<u> </u>					$\dashv$					<del></del>	03.
<u>d</u>					+						
е	<u> </u>				╗┪		· ·				
2	Capital gain net income or (net ca	pital loss) $\begin{cases} \text{If gain, also enter} \\ \text{If (loss), enter -0} \end{cases}$			}	2				2,	870.
3		ss) as defined in sections 1222(5) an	d (6):		٦١						
	If gain, also enter in Part I, line 8,	column (c).			<b>}</b> ]				N/A		
F	If (loss), enter -0- in Part I, line 8  Part V   Qualification U	nder Section 4940(e) for	Reduced	Tax on Net	nve	stme	ent Incon	ne	N/A	1	
_		foundations subject to the section 4									
ורנ	or optional use by nomestic private	Touridations subject to the section 4	340(a) lax uii	net mvestment m		,					
lf s	section 4940(d)(2) applies, leave th	nis part blank.									
		tion 4942 tax on the distributable am		•	od?					Yes [	X No
		y under section 4940(e). Do not com			atrica						
1		each column for each year; see the in	ISTRUCTIONS DEF	ore making any er				1		(d)	
	(a) Base period years	Adjusted qualifying dist	tributions	Net value of no	(c) nchar		use assets	ĺ,	Distrib	(d) ution ratio	(2))
_	Calendar year (or tax year beginnii	19 111)	9,600.	7701 74133 01 110			4,639.	۲	cui. (b) aivi	ded by col. (	0604
_	2016 2015		0,247.				$\frac{4,859.}{4,851.}$		<del></del>		9191
_	2013		9,784.				$\frac{2,031}{2,442}$		-		4625
_	2013		5,915.	_			0,482.	<del> </del>			6024
	2012		1,759.				6,653.				6685
			<u> </u>	<del>.</del>			0,0336	lт			0000
2	Total of line 1, column (d)							2		8.54	7129
		5-year base period - divide the total c	on line 2 by 5.0	), or by the number	er of v	ears					
•	the foundation has been in exister			,, o, o,	,			3		1.70	9426
4	Enter the net value of noncharitab	le-use assets for 2017 from Part X, I	ine 5					4		58,	181.
5 Multiply line 4 by line 3					5		99.	456.			
6	Enter 1% of net investment incom	ne (1% of Part I, line 27b)						6			0.
7	Add lines 5 and 6							7		99,	<u>456.</u>
8	Enter qualifying distributions from	·						8		145,	829.
	If line 8 is equal to or greater than See the Part VI instructions.	n line 7, check the box in Part VI, line	1b, and comp	lete that part usin	g a 1%	6 tax r	ate.				
										orm 000-E	\ <u></u>

orm 990-PF (2017) KELLY FAMILY FOUNDATION, INC		<u> 39-</u>	2030686	F	Page 4
Part VI   Excise Tax Based on Investment Income (Section 4	940(a), 4940(b), 4940(e), or 4	948 -	see instruc	tions	s)
1a Exempt operating foundations described in section 4940(d)(2), check here a	and enter "N/A" on line 1.				
Date of ruling or determination letter: (attach copy of letter i	if necessary-see instructions)				
<b>b</b> Domestic foundations that meet the section 4940(e) requirements in Part V, check here	e ▶ 🗶 and enter 1%	1			0.
of Part I, line 27b		}	}		:
c All other domestic foundations enter 2% of line 27b. Exempt foreign organizations, enter	er 4% of Part I, line 12, col. (b).				
2 Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only	y; others, enter -0-)	2			0.
3 Add lines 1 and 2		3	<u> </u>		0.
4 Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations on	lly; others, enter -0-)	4			0.
5 Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-		5	L		0.
6 Credits/Payments:		1			
a 2017 estimated tax payments and 2016 overpayment credited to 2017	6a O	_	ł		ı
<b>b</b> Exempt foreign organizations - tax withheld at source	6b O				1
c Tax paid with application for extension of time to file (Form 8868)	6c O .		ļ		,
d Backup withholding erroneously withheld	6d O	<u>.                                    </u>			1
7 Total credits and payments. Add lines 6a through 6d		7			0.
8 Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is	s attached	8			0.
9 Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed	<b>&gt;</b>	9			0.
10 Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpa	id	10			
11 Enter the amount of line 10 to be: Credited to 2018 estimated tax	Refunded	11			
Part VII-A Statements Regarding Activities	<del></del>	-			
1a During the tax year, did the foundation attempt to influence any national, state, or local	legislation or did it participate or interven	e in		Yes	No
any political campaign?			1a		x
<b>b</b> Did it spend more than \$100 during the year (either directly or indirectly) for political pi	urposes? See the instructions for the defi	nition	1b		<u>x</u>
If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and cop	•				
distributed by the foundation in connection with the activities.					į.
c Did the foundation file Form 1120-POL for this year?			1c		X
d Enter the amount (if any) of tax on political expenditures (section 4955) imposed during	o the year:				
(1) On the foundation.  \$\bigs\\$ 0 \cdot (2) On foundation mana		,			
e Enter the reimbursement (if any) paid by the foundation during the year for political exp		_	ľ	i	
managers. ▶ \$ 0.			ļ		
2 Has the foundation engaged in any activities that have not previously been reported to t	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 govern	ung instrument, articles of incorporation.	or	1		
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	vear?		4a		X
<b>b</b> If "Yes," has it filed a tax return on <b>Form 990-T</b> for this year?	. ,	N	/A 4b		
5 Was there a liquidation, termination, dissolution, or substantial contraction during the y	vear?		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) satisfic	ed either		ĺ		
By language in the governing instrument, or			[	1	
By state legislation that effectively amends the governing instrument so that no mand	datory directions that conflict with the sta	e law	Ì		
remain in the governing instrument?	and desired that dorning their tild sta		_6	×	
7 Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," or	complete Part II col (c) and Part XV		7	$\frac{\pi}{x}$	
י בים מוני ויטוועם מוניוון אוני אינון אינון מוני אינון אינו	omplete i art ii, ooi. (c), and i art Av		-'-		<del></del>
8a Enter the states to which the foundation reports or with which it is registered. See instri	uctions.				
WI					
b If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to t				ıl	
in the analysi is too to inic r, has the realitation failiblied a copy of FORM 330-FF to t	the Attorney General (or designate)				
	the Attorney General (or designate)		 8b	x	 
of each state as required by General Instruction G? If "No," attach explanation		endar	8b	X	
of each state as required by <i>General Instruction G2</i> If "No," attach explanation  9 Is the foundation claiming status as a private operating foundation within the meaning of	of section 4942(j)(3) or 4942(j)(5) for cal	endar		X	
of each state as required by General Instruction G? If "No," attach explanation	of section 4942(j)(3) or 4942(j)(5) for cal complete Part XIV	endar	8b	X	X

Form **990-PF** (2017)

3b

4a

N/A

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,

b Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that

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

Form 4720, to determine if the foundation had excess business holdings in 2017.)

had not been removed from jeopardy before the first day of the tax year beginning in 2017?

during the year?

X

orm 990-PF (2017) KELLY FAMILY FOUNDATION,			<u> 39-203068</u>	36	Page 6
Part VII-B   Statements Regarding Activities for Which F	orm 4720 May Be R	equired (contin	ued)		
5a During the year, did the foundation pay or incur any amount to:				Yes	No
(1) Carry on propaganda, or otherwise attempt to influence legislation (section	1 4945(e))?	Y	es X No		
(2) Influence the outcome of any specific public election (see section 4955); o	r to carry on, directly or indire	ectly,		į	
any voter registration drive?		Y	es X No	1	1 :
(3) Provide a grant to an individual for travel, study, or other similar purposes	7	Y	es X No		
(4) Provide a grant to an organization other than a charitable, etc., organization	n described in section				
4945(d)(4)(A)? See instructions			es X No	1	
(5) Provide for any purpose other than religious, charitable, scientific, literary,	or educational purposes, or fo			į	
the prevention of cruelty to children or animals?			es X No		
b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify uni	ter the exceptions described i			1	١,
section 53,4945 or in a current notice regarding disaster assistance? See instru			N/A 5	ib	
Organizations relying on a current notice regarding disaster assistance, check h			▶	-	1
c If the answer is "Yes" to question 5a(4), does the foundation claim exemption fr		ned		ļ	} :
expenditure responsibility for the grant?			es 🔲 No	ŀ	} :
If "Yes," attach the statement required by Regulations section 53.4945-5(d).		.,			,
6a Did the foundation, during the year, receive any funds, directly or indirectly, to	nav pramijime on		ļ	- {	
a personal benefit contract?	Day promiums on		es X No		
b Did the foundation, during the year, pay premiums, directly or indirectly, on a p	erconal honefut contract?	L I'		 ib	X
If "Yes" to 6b, file Form 8870.	er sondr benefit contract.		1	-	<del>  ^</del>
7a At any time during the tax year, was the foundation a party to a prohibited tax s	haltar transaction?		es X No		1
		·· L		'b -	
Part VIII Information About Officers, Directors, Truste		pagers Highly	III/A /	<u> </u>	Ь
Paid Employees, and Contractors	es, i odildation wai	iagers, riigiliy			
List all officers, directors, trustees, and foundation managers and the	eir compensation.			_	
<b>-</b>	<del></del>	(c) Compensation	(d) Contributions to	(e) Ext	oense
(a) Name and address	(b) Title, and average hours per week devoted to position	(If not paid,	(d) Contributions to employee benefit plans and deferred	(e) Ext account allowa	, other
TERRY KELLY	SECRETARY/TRE	enter -0-)	compensation	allowa	11003
101 CHARMANY DRIVE, SUITE, 320	DUCKBIAKI/IKB	ABONEIN	,		
ADISON, WI 53719	0.50	0.	0.		0.
	PRESIDENT	<del></del> • •	<del>- '</del>		<del>••</del>
101 CHARMANY DRIVE, SUITE, 320	INDIDENI		,		
MADISON, WI 53719	0.50	0.	0.		0.
	VICE-PRESIDEN		- ':		<u> </u>
101 CHARMANY DRIVE, SUITE, 320	AICE-EKESIDEM	ľ			
MADISON, WI 53719	0.50	0.			٥
	VICE-PRESIDEN		0.	<del></del>	<u> </u>
	AICE-EKESIDEN	ļ.	Į Į		
101 CHARMANY DRIVE, SUITE, 320	0.50	1			^
Compensation of five highest-paid employees (other than those incl		U.	0.]		0.
. Compensation of five ingrest-paid employees totaler trial trose mor	(b) Title, and average	I IVOIVE.	(d) Contributions to	(e) Exp	nense
(a) Name and address of each employee paid more than \$50,000	hours per week	(c) Compensation	(d) Contributions to employee benefit plans and deferred	account	, other
NONE	devoted to position	<del></del>	compensation	allowa	nces
NONE			l		
	<del></del>	<del> </del>			
<del></del>			[		
			<del></del>		
		1	]		
	<del></del>	<b></b>	<b></b>		
	<u>-</u>	ļ	<b></b>		
			l		
	<u> </u>	L			
otal number of other employees paid over \$50,000					0
			Form	990-PF	(2017)

Form 990-PF (2017) KELLY FAMILY FOUNDATION, INC.	39-2	2030686 Page 7
Part VIII Information About Officers, Directors, Trustees, Foundation No. Paid Employees, and Contractors (continued)	lanagers, Highly	
3 Five highest-paid independent contractors for professional services. If none, enter "NON	E."	
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE		
	<del> </del>	
<del>-</del>		
<b>7</b> 1 1 mm h = ( + th =	<del></del>	
Total 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 info number of organizations and other beneficiaries served, conferences convened, research papers produced, et	rmation such as the	Expenses
1 N/A		<del></del> -
2		
3		
4		
<u> </u>		
Part IX-B Summary of Program-Related Investments	<u> </u>	
Describe the two largest program-related investments made by the foundation during the tax year on lines 1 a	nd 2.	Amount
1 N/A		
		<u></u>
2		
All allowance and allowed a control of the control		
All other program-related investments. See instructions.		
3		
· · · · · · · · · · · · · · · · ·		
144		
Total. Add lines 1 through 3	<b>•</b>	0.
		Form <b>990-PF</b> (2017)

Part X Minimum Investment Return (All domestic foundations must complete this part Foreign for	undations, see	e instructions.)
1 Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes:		
a Average monthly fair market value of securities	1a	41,248.
b Average of monthly cash balances	1b	41,248.
c Fair market value of all other assets	1c	
d Total (add lines 1a, b, and c)	1d	59,067.
e Reduction claimed for blockage or other factors reported on lines 1a and	_	
1c (attach detailed explanation)		
2 Acquisition indebtedness applicable to line 1 assets	2	0.
3 Subtract line 2 from line 1d	3	59,067.
4 Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions)	4	886.
5 Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	58,181.
6 Minimum investment return. Enter 5% of line 5	6	2,909.
Part XI Distributable Amount (see instructions) (Section 4942(1)(3) and (1)(5) private operating foundations	and certain	
foreign organizations, check here 🕨 🔲 and do not complete this part.)		
1 Minimum investment return from Part X, line 6	1	2,909.
2a Tax on investment income for 2017 from Part VI, line 5		
b Income tax for 2017. (This does not include the tax from Part VI.)		
c Add lines 2a and 2b	2c	0.
3 Distributable amount before adjustments. Subtract line 2c from line 1	3	2,909.
4 Recoveries of amounts treated as qualifying distributions	4	0.
5 Add lines 3 and 4	5	2,909.
6 Deduction from distributable amount (see instructions)	6	0.
7 Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1	7	2,909.
Part XII Qualifying Distributions (see instructions)	<del></del>	
1 Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:		1.45 0.00
a Expenses, contributions, gifts, etc total from Part I, column (d), line 26	1a	145,829.
b Program-related investments - total from Part IX-B	1b	0.
2 Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes	2	
3 Amounts set aside for specific charitable projects that satisfy the:		
a Suitability test (prior IRS approval required)	3a	<del></del>
b Cash distribution test (attach the required schedule)	3b	1 45 000
<ul> <li>Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8; and Part XIII, line 4</li> <li>Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment</li> </ul>	4	145,829.
income. Enter 1% of Part I, line 27b	5	0.
6 Adjusted qualifying distributions. Subtract line 5 from line 4	6	145,829.
Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation	qualifies for the	e section

Form **990-PF** (2017)

Pa	art XIII	Undistributed Ir	ncome	(see instructions)
----	----------	------------------	-------	--------------------

,	(a) Corpus	(b) Years prior to 2016	(c) 2016	(d) 2017
1 Distributable amount for 2017 from Part XI,	Oorpus	rears prior to 2010	2010	2017
line 7				2,909.
2 Undistributed income, if any, as of the end of 2017				2,303.
a Enter amount for 2016 only			0.	
<b>b</b> Total for prior years:				
a rotal for prior yours.		0.		
3 Excess distributions carryover, if any, to 2017:		<u>_</u>	<u> </u>	
a From 2012   161,977.		1		
b From 2013 185,915.				
c From 2014 208, 254.				
d From 2015 78,004.		'		
e From 2016 58,701.				
f Total of lines 3a through e	692,851.	İ		
4 Qualifying distributions for 2017 from				
Part XII, line 4: ►\$ 145,829.				
a Applied to 2016, but not more than line 2a			0.	
<b>b</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				2,909.
e Remaining amount distributed out of corpus	142,920.			
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) )				
6 Enter the net total of each column as indicated below:		i		
a Corpus Add lines 31, 4c, and 4e Subtract line 5	835,771.			
<b>b</b> Prior years' undistributed income Subtract				
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		0		
amount - see instructions		0.		
e Undistributed income for 2016. Subtract line			0.	
4a from line 2a. Taxable amount - see instr.  f Undistributed income for 2017, Subtract	<del></del>			
lines 4d and 5 from line 1. This amount must			'	
be distributed in 2018				0.
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.			
8 Excess distributions carryover from 2012				
not applied on line 5 or line 7	161,977.			
9 Excess distributions carryover to 2018.				
Subtract lines 7 and 8 from line 6a	673,794.			
O Analysis of line 9:				
a Excess from 2013 185,915.				
<b>b</b> Excess from 2014 208, 254.				
c Excess from 2015 78,004.				
d Excess from 2016 58,701.				
e Excess from 2017 142,920.		·	L	
				Enr. 990-PF (2017)

Form 990-PF (2017) <b>KELLY F</b>	AMILY FOUND	ATION, INC.		39-20	30686 Page 10
Part XIV Private Operating F	oundations (see in:	structions and Part VII-	A, question 9)	N/A	
1 a If the foundation has received a ruling	or determination letter that	t it is a private operating			
foundation, and the ruling is effective fo		=	▶ ∟		
<b>b</b> Check box to indicate whether the foun		ng foundation described in		4942(J)(3) or 49	)42(j)(5)
2 a Enter the lesser of the adjusted net	Tax year	(1) 0010	Prior 3 years		
income from Part I or the minimum	(a) 2017	<b>(b)</b> 2016	(c) 2015	(d) 2014	(e) Total
investment return from Part X for				4	
each year listed					
<b>b</b> 85% of line 2a					
c Qualifying distributions from Part XII,					
line 4 for each year listed					
d Amounts included in line 2c not					
used directly for active conduct of			ľ		
exempt activities					
e Qualifying distributions made directly					
for active conduct of exempt activities.					
Subtract line 2d from line 2c  Complete 3a, b, or c for the alternative test relied upon;				:	
a "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 2/3 of minimum investment return shown in Part X, line 6 for each year					
listed	<del></del>			<del> </del>	<del></del>
c "Support" alternative test - enter:					
(1) Total support other than gross investment income (interest, dividends, rents, payments on securities loans (section \$12(a)(5)) or payetting)					
512(a)(5)), or royalties)  (2) Support from general public	}		<del></del>	<del>                                     </del>	
and 5 or more exempt organizations as provided in section 4942(j)(3)(B)(III)	i				
(3) Largest amount of support from			-		
an exempt organization					
(4) Gross investment income	<del></del>				
Part XV   Supplementary Info	rmation (Complet	te this part only if	the foundation I	had \$5,000 or mor	e in assets
at any time during t				, ,	
Information Regarding Foundation     List any managers of the foundation whyear (but only if they have contributed in NONE	no have contributed more t		butions received by the t	foundation before the close	e of any tax
<b>b</b> List any managers of the foundation who ther entity) of which the foundation has			or an equally large portio	n of the ownership of a pa	rtnership or
NONE					
2 Information Regarding Contribut Check here ► X if the foundation	only makes contributions t	to preselected charitable o	rganizations and does n		ests for funds. If
the foundation makes gifts, grants, etc.	<del></del>		<del></del>	<del></del>	
a The name, address, and telephone num	iber or email address of th	e person to whom applica	itions should be address	ed:	
b The form in which applications should	be submitted and informat	ion and materials they sh	ould include:	<del></del>	
c Any submission deadlines;					
d Any restrictions or limitations on award	ds, such as by geographica	ıl areas, charitable fields, l	kinds of institutions, or o	other factors:	

Part XV   Supplementary Information				
3 Grants and Contributions Paid During the Ye	ar or Approved for Future F	Payment	<del> </del>	
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	or substantial contributor	recipient	oona to dion	
Paid during the year				
SEE STATEMENT 8	N/A	PC		4.5.000
				145,829.
			\	
		1	}	
		1	]	
		1		
		<u></u>		
		1		
	•	ļ		
Total	<u> </u>	L	<b>▶</b> 3a	145,829.
b Approved for future payment		<u> </u>		<u>-</u>
NONE		1		
HONE				
		<b>!</b>	1	
		<u></u>		
		Ę Į		
		)		
		<del> </del>		
		(		
Total		<u> </u>	<b>▶</b> 3b	0.
			F(	orm <b>990-PF</b> (2017)

Part XVI-A	Analysis	of Incon	ne-Producing	Activities

Enter gross amounts unless otherwise indicated.	Unrelate	ed business income		ded by section 512, 513, or 514	(e)
-	(a) Business	(b) Amount	(C) Exclu- sion	(d) Amount	Related or exempt function income
1 Program service revenue:	code	Amount	code	Amount	- Iunction income
<u> </u>		<del></del>	+-		
b		<del></del>			
c					
d			<b>↓</b> —		
e					
1		<del>,</del>			
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			14	819.	
5 Net rental income or (loss) from real estate:					
a Debt-financed property					
<b>b</b> Not debt-financed property					
6 Net rental income or (loss) from personal			7		
property			İ :		
7 Other investment income					
8 Gain or (loss) from sales of assets other					
than inventory			18	2,870.	
9 Net income or (loss) from special events					
10 Gross profit or (loss) from sales of inventory					
11 Other revenue:			1		
a					
b					
С		-			
d					
e					
12 Subtotal. Add columns (b), (d), and (e)				3,689.	0.
13 Total. Add line 12, columns (b), (d), and (e)				13	2 (22
(See worksheet in line 13 instructions to verify calculations.)					<del>-</del>

## Relationship of Activities to the Accomplishment of Exempt Purposes

ne No. ▼	Explain below now 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).
_+	
	<del></del>
	<del></del>
-+	
-+	<del></del>
$\neg \uparrow$	

Form **990-PF** (2017)

	ganization directly or indi	rectly engage in any of the follow	ing with any other organization	n described in section 501(c)		Yes	No
(other tha		nizations) or in section 527, relatir					
		lation to a noncharitable exempt o					
(1) Cash		·	•		1a(1)		X
(2) Other					1a(2)		Х
<b>b</b> Other tran							
(1) Sales	of assets to a noncharita	able exempt organization			1b(1)		X
		incharitable exempt organization			16(2)		Х
٠,	al of facilities, equipment,	• •			1b(3)		Х
	bursement arrangements				1b(4)		Х
, ,	s or loan guarantees				1b(5)		Х
	=	embership or fundraising solicitati	ions		1b(6)		Х
		ailing lists, other assets, or paid er			10		Х
				ays show the fair market value of the god	ods, other ass	ets,	
				in any transaction or sharing arrangeme		,	
column (d	t) the value of the goods,	other assets, or services received	<b>i.</b>	•	•		
(a) Line no	(b) Amount involved	(c) Name of noncharitab	ole exempt organization	(d) Description of transfers, transactions,	and sharing arra	angemer	its
		N/A					
		<u> </u>					
		<u> </u>					
2a Is the four	ndation directly or indirec	tly affiliated with, or related to, on	e or more tax-exempt organiza	ations described			
ın section	501(c) (other than sectio	in 501(c)(3)) or in section 527?			Yes	X	No
<b>b</b> If "Yes," co	omplete the following sch						
	(a) Name of org	janization	(b) Type of organization	(c) Description of relat	tionship		
	N/A						
			<u> </u>				
				tements, and to the best of my knowledge	May the IRS of	liscuss t	าเธ
Sign and be		that I have examined this return, includin			May the IRS of return with the shown below?	prepare	*
andha					return with the	See ins	*
Sign Here		pplete Declaration of preparer (other than	Date	on of which preparer has any knowledge	shown below?	See ins	tr i
Sign Here	elief it is true, correct, and corr	pplete Declaration of preparer (other than	Date	PRESIDENT  Title	shown below?	See ins	tr i
Sign Here	elief it is true, correct, and com  May  nature of officer or trustee	pplete Declaration of preparer (other than	Date	PRESIDENT  Title	return with the shown below? X Yes	See ins	tr i
Sign Here Sign	nature of officer or trustee Print/Type preparer's na	ame Preparer's	n taxpayer) is based on all information  Date  Signature  E. ROSE, CP	PRESIDENT  Title  Check if self-employed	return with the shown below.  XYes TIN	P See ins	tr i
Sign Here Sigr	nature of officer or trustee Print/Type preparer's na	mplete Declaration of preparer (other than	n taxpayer) is based on all information  Date  Signature  E. ROSE, CP	PRESIDENT  Title  Check If Self- employed	return with the shown below.  XYes TIN	P See ins	tr i
Sign Here Sign	nature of officer or trustee  Print/Type preparer's na  JAMES E. R  Firm's name > BAK	property Declaration of preparer (other than the preparer) arms   Preparer's series    OSE, CPA JAMES    ER TILLY VIRCHO	n taxpayer) is based on all information  Date  Signature  E. ROSE, CP	PRESIDENT  Title  Check if self-employed	return with the shown below.  XYes TIN	P See ins	tr
Sign Here Sigr	nature of officer or trustee  Print/Type preparer's na  JAMES E. R.  Firm's name BAK  Firm's address PO	property Declaration of preparer (other than the preparer) arms   Preparer's series    OSE, CPA JAMES    ER TILLY VIRCHO	Date  Signature  E. ROSE, CP  W KRAUSE, LLP	PRESIDENT  Title  Check if self-employed	return with the shown below.  XYes TIN	P See ins	tr

## 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.

To Go to www.irs.gov/Form990 for the latest information.

OMB No 1545-0047

2017

Name of the organization	1	Employer identification number
K	ELLY FAMILY FOUNDATION, INC.	39-2030686
Organization type (check		
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	
<del>-</del>	on filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling y one contributor Complete Parts I and II. See instructions for determining a contributor	•
Opecial Hules		
sections 509(a)(1) any one contribut	on described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, for, during the year, total contributions of the greater of (1) \$5,000, or (2) 2% of the amount, Inne 1 Complete Parts I and II	or 16b, and that received from
year, total contrib	on described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from sutions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educated to children or animals. Complete Parts I, II, and III	_
year, contribution is checked, enter purpose Don't co	on described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from a section section, charitable, etc., purposes, but no such contributions totaled makere the total contributions that were received during the year for an exclusively religious period any of the parts unless the <b>General Rule</b> applies to this organization because it to the contributions totaling \$5,000 or more during the year	nore than \$1,000 If this box is, 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 B (Fin Part IV, line 2, of its Form 990, or check the box on line H of its Form 990-EZ or on its Fithe 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

KELLLY	FAMILY FOUNDATION, INC		39-	-2030686
Part I	Contributors (see instructions) Use duplicate copies of Part I if additional	I space is needed.		203000
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contribution	ns	(d) Type of contribution
1	TERENCE F. KELLY  1007 HILLSIDE AVE  MADISON, WI 53705	\$160,33		Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contribution	ns	(d) Type of contribution
		\$		Person Payroll Oncash (Complete Part II for noncash contributions )
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contribution	ns	(d) Type of contribution
		\$		Person Payroll Oncash (Complete Part II for noncash contributions )
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contribution	ıs	(d) Type of contribution
		\$		Person Payroll Occash Complete Part II for noncash contributions )
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contribution	ıs	(d) Type of contribution
		\$		Person Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contribution	s	(d) Type of contribution
		\$		Person Payroll Noncash Complete Part II for noncash contributions )

Employer identification number

KELLY	FAMILY	FOUNDATION,	INC.

39-2030686

art II	Noncash Property (see instructions) Use duplicate copies of Property	art II if additional space is needed	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	l ———
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
			<b>,</b>
		\$	
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		s	
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
			l
453 11-01-		\$	990, 990-EZ, or 990-PF) (

FORM 990-PF	DIVIDENDS	AND INTE	REST	FROM SECUR	ITIES S	TATEMENT 1
GROSS OURCE AMOUNT		CAPITAL GAINS DIVIDENDS		(A) REVENUE PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME
US BANK-CAPITAL GAIN DISTRIBUTIONS US BANK-DIVIDENDS	63. 819.			0. 819.	0. 819.	
TO PART I, LINE 4	882.	63. 819.		819.		
FORM 990-PF		ACCOUNT	ING	FEES	S	TATEMENT 2
DESCRIPTION		(A) EXPENSES PER BOOKS		(B) T INVEST- NT INCOME	(C) ADJUSTED NET INCOME	CHARITABLE
BAKER TILLY VIRCHOW I LLP - TAX RETURN		3,105		3,105.		0.
PREPARATION AND BOOK	TUDE THO		,105. 3,105.			
TO FORM 990-PF, PG 1		3,105	 - = =	3,105.		0.
	, LN 16B	3,105		<del></del>	S	0. TATEMENT 3
TO FORM 990-PF, PG 1	, LN 16B		SSIO	NAL FEES	(C) ADJUSTED	TATEMENT 3
TO FORM 990-PF, PG 1 FORM 990-PF  DESCRIPTION	, LN 16B	HER PROFE (A) EXPENSES	SSIO	NAL FEES  (B) T INVEST-	(C) ADJUSTED	TATEMENT 3 (D) CHARITABLE
TO FORM 990-PF, PG 1  FORM 990-PF  DESCRIPTION  US BANK-INVESTMENT FI AND TAX LETTER	, LN 16B	HER PROFE  (A)  EXPENSES PER BOOKS	SSIO	NAL FEES  (B) I INVEST- NT INCOME	(C) ADJUSTED	TATEMENT 3  (D)  CHARITABLE  PURPOSES  0.
TO FORM 990-PF, PG 1  FORM 990-PF  DESCRIPTION  US BANK-INVESTMENT FI AND TAX LETTER  TO FORM 990-PF, PG 1	, LN 16B	(A) EXPENSES PER BOOKS 853	SSIO	NAL FEES  (B) T INVEST- NT INCOME	(C) ADJUSTED NET INCOME	TATEMENT 3  (D)  CHARITABLE  PURPOSES  0.
TO FORM 990-PF, PG 1  FORM 990-PF  DESCRIPTION  US BANK-INVESTMENT FI	, LN 16B	(A) EXPENSES PER BOOKS 853	SSIO	NAL FEES  (B) T INVEST- NT INCOME	(C) ADJUSTED NET INCOME	TATEMENT 3  (D) CHARITABLE PURPOSES  0.  0.  TATEMENT 4
TO FORM 990-PF, PG 1  FORM 990-PF  DESCRIPTION  US BANK-INVESTMENT FI AND TAX LETTER  TO FORM 990-PF, PG 1	, LN 16B	HER PROFE  (A)  EXPENSES PER BOOKS  853  853  TA  (A)  EXPENSES	SSIO	(B) T INVEST- NT INCOME  853.  853.	(C) ADJUSTED NET INCOME  S (C) ADJUSTED	(D) CHARITABLE PURPOSES  0.  0.  TATEMENT 4  (D) CHARITABLE

TOTAL TO FORM 990-PF, PART II, LINE 10C

9,549.

FORM 990-PF	OTHER E	KPENSES		STATEMENT 5		
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVE MENT INC		(C) ADJUSTEI NET INCOM		
US BANK - CHECKING ACCOUNT FEES	40.		40.		0.	
TO FORM 990-PF, PG 1, LN 23	40.		40.		0.	
FORM 990-PF DESCRIPTION	CORPORATI	STOCK	воок	. VALUE	STATEMENT 6  FAIR MARKET VALUE	
US BANK - STOCKS		•		15,534.	17,291.	
TOTAL TO FORM 990-PF, PART II	, LINE 10B			15,534.	17,291.	
FORM 990-PF	CORPORATI	E BONDS			STATEMENT 7	
DESCRIPTION			воок	VALUE	FAIR MARKET VALUE	
US BANK - BONDS		•		9,633.	9,549.	

9,633.

FORM 990-PF: Part XV Supplementary Information
3 Grants and Contributions Paid During the Year or Approved for Future Payment

STATEMENT 8

Recipient Name and address	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Association of Fundraising Professionals 4300 Wilson Boulevard, Suite 300 Arlington, VA 22203	N/A	РС	General Operating Expenses	1,500
Aldo Leopold Nature Center 330 Femrite Drive Monona, WI 53716	N/A	PC	Education Support	15,000
American Player's Theatre 5950 Golf Course Road Spring Green, WI 53588	N/A	PC	Arts Support	3,500
Boys and Girls Club of Dane County, Inc 1818 West Beltline Highway Madison, WI 53713	N/A	РС	Human Welfare Support	1,329
Center for Community Services 17814 Steading Road Eden Prairie, MN 55347	N/A	PC	Human Welfare Support	3,000
District Council of Society of St. Vincent de Paul 2033 Fish Hatchery Road Madison, WI 53713	N/A	PC	Human Welfare Support	10,000
Future Traditions Foundation 2911 La Combadura Road Santa Barbara, CA 93105	N/A	PC	Arts Support	5,000
Heifer International 1 World Avenue Little Rock, AR 72202	N/A	PC	Zimbabwe Project	50,000
Madison Symphony Orchestra 222 West Washington Avenue, Suite 460 Madison, WI 53703	N/A	PC	Arts Support Organ Concert	4,000
Nuclear Age Peace Foundation 1187 Coast Village Road, Suite 1 Santa Barbara, CA 93108	N/A	PC	Human Welfare Support	5,000
Overture Foundation 201 State Street Madison, WI 53703	N/A	PC	Arts Support	25,000
Ronald McDonald House 2716 Marshall Court Madison, WI 53705	N/A	PC	Human Welfare Support	7,500
United Way of Dane County 2059 Atwood Avenue Madison, WI 53704	N/A	РС	Human Welfare Support	15,000
				145,829