EXTENDED TO NOVEMBER 15, 2 Return of Private Foundation 2018

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

| | | nt of the Treasury evenue Service | | irs gov/Form990PF for inst | | | Open to Public Inspection |
|-------------------------|-------------|--|---|------------------------------------|-------------------------------------|--|---|
| | | | or tax year beginning | as governmosor i for misc | , and ending | THO THOUGH | 1 Open to Public Inspection |
| | | f foundation | | | , | A Employer identification | number |
| ī | v N W | ERS-WOL | FE CHARITABLE TI | RIIST | | 39-6609049 | |
| | | | ox number if mail is not delivered to stree | | Room/suite | B Telephone number | |
| 6 | 10 | 2 S HTG | HLANDS AVE | | | (608) 831- | 5208 |
| | | | ovince, country, and ZIP or foreign | postal code | | C If exemption application is p | |
| | | ISON, W | | , | | i onomphon approanom to p | oneng trees not p |
| | | call that apply | Initial return | Initial return of a fo | ormer public charity | D 1 Foreign organizations | s, check here |
| | | | Einal return | Amended return | | 2 - | |
| | | | Address change | Name change | | 2 Foreign organizations me check here and attach co | eting the 85% test imputation |
| H | Check | k type of organiza | · · · <u>· · · · · · · · · · · · · · · · </u> | | $_{\text{atten}}$. $_{\theta}\Psi$ | E If private foundation sta | tus was terminated |
| | Se | ection 4947(a)(1 | | Other taxable private found: | ation | under section 507(b)(1) | (A), check here |
| | | | assets at end of year J Accoun | | Accrual | F If the foundation is in a | 60-month termination |
| | | Part II, col (c), II | | Other (specify) | 1 | under section 507(b)(1) | (B), check here |
| | <u>\$</u> | | 1,138,936. (Part I, colu | mn (d) must be on cash basi | S) | | 1 (1) |
| P | art l | The total of amo | evenue and Expenses ounts in columns (b) (c) and (d) may not of the amounts in column (a)) | (a) Revenue and expenses per books | (b) Net investment income | (c) Adjusted net income | (d) Disbursements for charitable purposes (cash basis only) |
| | 1 | Contributions, | gifts, grants, etc , received | 75,000. | | N/A | |
| Ď | 2 | | f the foundation is not required to attach Sch. B | | | | |
| 1 | 3 | Interest on saving cash investments | s and temporary | | | | |
| | 4 | Dividends and i | interest from securities | 44,634. | 44,581 | • | STATEMENT 1 |
| | 5a | Gross rents | | | | | |
| | b | Net rental income | or (loss) | 0.5.5.5 | | | |
| ě | 6a | Net gain or (loss) f | for all | -25,559. | | DEG | |
| ĕ | b | Gross sales price assets on line 6a | | | | RECE | IVED . |
| Revenue | 7 | | come (from Part IV line 2) | | 0 | AUG 2 n | 78 |
| | 8 | Net short-term | , , | | | M AUG 2 0 | 2018 8 |
| | 9 | Income modific Gross sales less r | | | | OGDEN | 1 = 1 & S |
| | Ι. | and allowances | | | | UGUEN | + UT = |
| | ! | Gross profit or | | | | | |
| | 11 | Other income | (1000) | | | | |
| | 12 | Total Add line: | s 1 through 11 | 94,075. | 44,581 | | |
| | 13 | | officers directors trustees etc | 0. | 0 | | 0. |
| | 14 | Other employee | salaries and wages | | | | |
| (| <i>i</i> 15 | Pension plans, | employee benefits | | | | |
| Ses | ₹16a | Legal fees | | | | | |
| eu G | , b | Accounting fees | | 1,883. | 942 | | 941. |
| įŬ | , c | Other professio | nal fees STMT 3 | 4,199. | 4,199 | • | 0. |
| įį́. | 17 | Interest | | | | | |
| Signal Care | 18 | Taxes | | | | | |
| C.E. | 19 | Depreciation an | d depletion | | | | |
| هڅ | 20 | Other employee Pension plans, Legal fees Accounting fees Other professio Interest Taxes Depreciation an Occupancy Travel, conferer Printing and pu | | | | | |
| ₽₫ | 21 | Traver, conferer | nces, and meetings | | | | |
| oto Sur | 22 | Printing and pu Other expenses | | | | | |
| ţ, | 23 24 | Office expenses | and administrative | | | | |
| o⊁U Operating | 24 | | lines 13 through 23 | 6,082. | 5,141 | | 941. |
| o | 25 | Contributions, (| | 75,000. | J,141 | - | 75,000. |
| | [| | and disbursements | , | , | | , |
| | | Add lines 24 an | | 81,082. | 5,141 | | 75,941. |
| | 27 | Subtract line 26 | | | | | |
| | a | Excess of revenue | over expenses and disbursements | 12,993. | | | |
| | b | Net investment | Income (if negative enter -0) | | 39,440 | | |
| | c | Adjusted net in | come (if negative enter 0) | | | N/A | |
| | | | _ | | | | 200 DE |

2 Enter amount from Part I, line 27a
3 Other increases not included in line 2 (itemize)
4 Add lines 1, 2, and 3

Add lines 1, 2, and 3

Decreases not included in line 2 (itemize) ►

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

4 1, 213, 823.

5 0.

| (a) List and describe th | nd Losses for Tax on I ne kind(s) of property sold (for ex- ehouse, or common stock, 200 st | ample, real esta | | P-P | v acquired urchase onation | (c) Date (mo , c | acquired day, yr) | (d) Date sold (mo , day, yr) |
|--|---|--|------------------------------------|----------------|---------------------------------------|---------------------|--------------------------------|----------------------------------|
| 1a PUBLICLY TRADED | SECURITIES | | | | | | | |
| b | | | | | | | | |
| C | | | | - | | | - | |
| d | | | | | | | | |
| <u>e</u> | (f) Depreciation allowed | (n) Cos | it or other basis | 1. | | /b) (| L Gain or (loss) | |
| (e) Gross sales price | (or allowable) | | xpense of sale | | | | s (f) minus (| |
| a 19,890. | | | 45,44 | 19. | | | | -25,559. |
| b | | | | | | | | |
| С | | | | | · · · · · · · · · · · · · · · · · · · | | | |
| d | <u> </u> | | | | | | | |
| e | | <u> </u> | | | | | | |
| Complete only for assets showing | gain in column (h) and owned by | Τ' | | | | | Col. (h) gain not 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 | | C(| Losses | s (from col (l | h)) |
| | as 01 12/3 1/05 | UVEI | | | | | | 25 550 |
| a | · · · · · · · · · · · · · · · · · · · | | | | | | | -25,559 |
| <u>b</u> | | | | | | | | |
| C | | | | | · · · · · · · · · · · · · · · · · · · | | | |
| d | <u> </u> | | | | | | | |
| <u>e</u> | C 11 | | | | | | | |
| 2 Capital gain net income or (net cap | Ital loss) If (loss), enter -(| ei in Part I, line N- in Part I, line | / 7 |) 2 | | | | -25,559 |
| | | | • | | | | | |
| 3 Net short-term capital gain or (loss if gain, also enter in Part I, line 8, c | | ina (b) | |) | | | | |
| If (loss), enter -0- in Part I, line 8 | olulliif (c) | | |) ₃ | | | N/A | |
| Part V Qualification Un | der Section 4940(e) for | r Reduced | Tax on Net | Inves | tment In | come | | |
| Nas the foundation liable for the section of the section of the foundation doesn't qualify | under section 4940(e). Do not co | mplete this part | | | | | | Yes X No |
| 1 Enter the appropriate amount in ea | ch column for each year, see the | instructions bef | ore making any e | intries | | | | 71) |
| (a) Base period years | Adjusted qualifying di | stributions | Net value of no | (c) | ile-use asset | | Distrib | (d) ution ratio |
| Calendar year (or tax year beginning | , , , , | | TVCT Value of no | | | | (cor (b) divi | ded by col (c)) • 088848 |
| 2016 | | 00,397. | | | 29,98 | | | .055725 |
| 2015 | | 55,934. 55,971. | | | 83,19 34,72 | | | .053430 |
| 2014 | | 15,971. | | 1 2 | 86,81 | 1 | | .090123 |
| 2013 2012 | | 35,992. | | | 97,80 | | | .061519 |
| 2012 | | <u>• 40,000</u> | | <u>+</u> | 77,00 | <u> </u> | T | •00131 |
| 2 Total of line 1, column (d) | | | | | | 2 | | .349645 |
| 3 Average distribution ratio for the 5- | vest hase period - divide the total | on line 2 by 5 (| or by the numb | er of vest | c | | | • 34704 |
| the foundation has been in existent | · | Off fills 2 by 5 c | , or by the numb | or or year | 3 | 3 | | .069929 |
| the roundation has been in existence | ce ii iess man o years | | | | | | | .003323 |
| Enter the net value of noncharitable | -use assets for 2017 from Part X | line 5 | | | | 4 | | 1,046,759 |
| Emer the net value of nonenamasic | tion about for horr art A, | , | | | | <u> </u> | | 1,010,.05 |
| Multiply line 4 by line 3 | | | | | | 5 | | 73,199 |
| | | | | | | | | |
| 6 Enter 1% of net investment income | (1% of Part I, line 27b) | | | | | 6 | | 394. |
| | | | | | | | | |
| 7 Add lines 5 and 6 | | | | | | 7 | 1 | 73,593. |
| | | | | | | | | |
| B Enter qualifying distributions from l | Part XII, line 4 | | | | | 8 | <u></u> | 75,941. |
| If line 8 is equal to or greater than li | ine 7, check the box in Part VI. line | e 1b, and comn | lete that part usin | ga 1% ta | ıx rate | - | | |
| See the Part VI instructions | | , | 1 | ,,,,, | - - | | | |

| Form 990-PF (2017) POWERS - WOLFE CHARITABLE TRUST 3 | 9-660 | 9049 | 1 | age 4 |
|---|----------|----------------|--------|--------------|
| Part VI: Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 49 | 48 - See | ınsırı | ictioi | 15) |
| 1a 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) | | | _ | 0.4 |
| b Domestic foundations that meet the section 4940(e) requirements in Part V, check here ► X and enter 1% | 1 | | | <u>94.</u> |
| of Part I, line 27b | | | | |
| c 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-) | 2 | | | <u> </u> |
| 3 Add lines 1 and 2 | 3 | | 3 | 94. |
| 4 Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only, others, enter -0-) | 4 | | | 0. |
| 5 Tax based on investment income Subtract line 4 from line 3. If zero or less, enter -0- | 5 | | 3 | <u>94.</u> |
| 6 Credits/Payments | | | | |
| a 2017 estimated tax payments and 2016 overpayment credited to 2017 6a 493. | | | | |
| b Exempt foreign organizations - lax withheld at source 6b 0. | | | | |
| c 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 | 7 | | 4 | 93 . |
| 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 | | | - |
| 10 Overpayment If line 7 is more than the total of lines 5 and 8, enter the amount overpaid | 10 | | | 99. |
| 11 Enter the amount of line 10 to be Credited to 2018 estimated tax > 99 • Refunded > | 11 | | | 0. |
| Part VII-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 | 1 | | Yes | No |
| any political campaign? | | 1a | | X |
| b Did it spend more than \$100 during the year (either directly or indirectly) for political purposes? See the instructions for the definiti | on | 1b | | X |
| 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 | | X |
| d Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year | | 1.0 | | |
| (1) On the foundation ► \$ 0. (2) On foundation managers ► \$ 0. | | | | |
| e Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation | | | | |
| managers > \$ 0. | | | | |
| | | 1 | | Х |
| 2 Has the foundation engaged in any activities that have not previously been reported to the IRS? | | 2 | | |
| 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_ | | <u>X</u> |
| b If "Yes," has it filed a tax return on Form 990-T for this year? | N/A | 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 la | łw | | | |
| remain in the governing instrument? | | 6 | X | |
| 7 Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col. (c), and Part XV | | 7 | _X_ | |
| | | | | |
| 8a Enter the states to which the foundation reports or with which it is registered. See instructions. | | | | |
| WI | | | | |
| b If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate) | | | | |
| of each state as required by General Instruction G2 If "No," attach explanation | | 8b | Х | • |
| 9 Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for calend | iar | | | |
| year 2017 or the tax year beginning in 2017? See the instructions for Part XIV. If "Yes," complete Part XIV. | | 9 | 1 | X |
| 10 Did any persons become substantial contributors during the tax year? If Yes_attach a schedule listing their names and addresses | | 10 | | X |
| | Fo | ım 99 0 |)-PF (| 2017) |

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| Г | 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 | L |
| | Website address ► N/A | 31 5 | 200 | |
| 14 | The books are in care of ► THOMAS R. WOLFE Telephone no ►608-8 | | 208 | |
| | Located at ► 6102 SOUTH HIGHLANDS AVE., MADISON, WI ZIP+4 ►5 | 3/05 | | |
| 15 | Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - check here | NT | / ⊅ | |
| | and enter the amount of tax-exempt interest received or accrued during the year 15 | <u>IN</u> | /A Yes | No |
| 16 | At any time during calendar year 2017, did the foundation have an interest in or a signature or other authority over a bank, | 10 | 162 | |
| | 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 | | | |
| D | foreign country ► art VII-B Statements Regarding Activities for Which Form 4720 May Be Required | | | |
| | | | Vac | No |
| | File Form 4720 if any item is checked in the "Yes" column, unless an exception applies. | | Yes | NO |
| 16 | a 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? Yes X No | ļ | | |
| | (2) Borrow money from, lend money to, or otherwise extend credit to (or accept if from) | | | |
| | a disqualified person? | | | |
| | (3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? Yes X No | ĺ | | |
| | (4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? Yes X No | | | |
| | (5) Transfer any income or assets to a disqualified person (or make any of either available | | | |
| | 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 | | | |
| | termination of government service, if terminating within 90 days) | } | | |
| ł | o If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations | | | |
| | section 53 4941(d) 3 or in a current notice regarding disaster assistance? See instructions | 1b | | |
| | Organizations relying on a current notice regarding disaster assistance, check here | | | |
| (| Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected | | | 37 |
| | before the first day of the tax year beginning in 2017? | 1c | | <u>X</u> |
| 2 | Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation | | İ | |
| | defined in section 4942(j)(3) or 4942(j)(5)) | | | |
| 6 | 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 | | | |
| | before 2017? Yes X No | | | |
| | If "Yes," list the years | | | |
| ı | 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 | | | |
| | statement - see instructions) N/A | _2b | | |
| (| : If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here | | | |
| | ,, | | | |
| 3 | a Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time | | | |
| | during the year? | | | |
| i | of 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 | | |
| | a Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes? | 4a | | X |
| t | 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 | | Х |

Total number of other employees paid over \$50,000

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Total Add lines 1 through 3

| Р | art X Wilnimum Investment Return (All domestic foundations must complete this part Foreign foundations | ndations, | see instructions) |
|----|---|-------------|--------------------|
| 1 | Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes | | |
| a | Average monthly fair market value of securities | 1a | 963,271. |
| b | Average of monthly cash balances | 1b | 99,428. |
| С | Fair market value of all other assets | 1c | |
| d | Total (add lines 1a, b, and c) | 1d | 1,062,699. |
| е | 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 <u>.</u> |
| 3 | Subtract line 2 from line 1d | 3 | 1,062,699. |
| 4 | Cash deemed held for charitable activities Enter 1 1/2% of line 3 (for greater amount, see instructions) | 4 | 15,940. |
| 5 | Net value of noncharitable-use assets Subtract line 4 from line 3. Enter here and on Part V, line 4. | 5 | 1,046,759. |
| 6 | Minimum investment return Enter 5% of line 5 | 6 | 52,338. |
| Р | art XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations are foreign organizations, check here ▶ □ and do not complete this part.) | nd certain | |
| 1 | Minimum investment return from Part X, line 6 | 1 | 52,338. |
| 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 | 394. |
| 3 | Distributable amount before adjustments. Subtract line 2c from line 1 | 3 | 51,944. |
| 4 | Recoveries of amounts treated as qualifying distributions | 4 | 0. |
| 5 | Add lines 3 and 4 | 5 | 51,944. |
| 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 | 51,944. |
| P | art XII Qualifying Distributions (see instructions) | | |
| _ | | | |
| 1 | Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes | , | 75 0/11 |
| a | Expenses, contributions, gifts, etc total from Part I, column (d), line 26 | 1a 1b | 75,941. 0. |
| ь | Program-related investments - total from Part IX-B | ! <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: | 3a | |
| a | Suitability test (prior IRS approval required) | | |
| b | Cash distribution test (attach the required schedule) | 3b | 75,941. |
| 4 | Qualifying distributions Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4 | 4 | 75,941. |
| 5 | Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment | _ | 394. |
| | income Enter 1% of Part I, line 27b | 5 | 75,547. |
| 6 | Adjusted qualifying distributions. Subtract line 5 from line 4. Note: The amount on line 6 will be used in Part V. column (h), in subsequent years when calculating whether the foundation (in the column term). | 6 | |
| | | mannes m | tine Sections |

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, line 7 | | | | 51,944. |
| 2 Undistributed income if any as of the end of 2017 | | | | |
| a Enter amount for 2016 only | | | 0. | |
| b Total for prior years | | | | |
| b rotal to prior yours | | 0. | | |
| 3 Excess distributions carryover, if any, to 2017 | | <u> </u> | | |
| a From 2012 | | | | |
| b From 2013 31,589. | | | | |
| c From 2014 5,111. | | | | |
| d From 2015 7,686. | | | | |
| e From 2016 44,752. | | | | |
| f Total of lines 3a through e | 89,138. | | | |
| Qualifying distributions for 2017 from | | | | |
| Part XII, line 4 ▶ \$ 75,941. | | | | |
| a Applied to 2016, but not more than line 2a | | | 0. | |
| b Applied to undistributed income of prior | | | 0. | |
| years (Election required - see instructions) | | 0. | | |
| c Treated as distributions out of corpus | | | | |
| (Election required - see instructions) | 0. | | | |
| d Applied to 2017 distributable amount | | | | 51,944. |
| e Remaining amount distributed out of corpus | 23,997. | | - | 31/311. |
| 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 | | | | |
| a Corpus Add lines 3f 4c and 4e Subtract line 5 | 113,135. | | | |
| 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 | | | | |
| amount - see instructions | | 0. | | |
| e Undistributed income for 2016. Subtract line | | | | |
| 4a from line 2a Taxable amount - see insti | | | 0. | |
| f Undistributed income for 2017 Subtract | | | | |
| 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 | 0. | | | |
| 9 Excess distributions carryover to 2018 | | | | |
| Subtract lines 7 and 8 from line 6a | 113,135. | | | |
| 10 Analysis of line 9 | | | | |
| a Excess from 2013 31,589. | | | | |
| b Excess from 2014 5, 111. | | | | |
| c Excess from 2015 7,686. | | | | |
| d Excess from 2016 44,752. | | | | |
| e Excess from 2017 23,997. | | | | |

723581 01-03-18

723611 01-03-18

| | 3 |
|------------|---|
| Part XVI-A | Analysis of Income-Producing Activities |

| Enter gross amounts unless otherwise indicated | Unrelated I | ousiness income | | 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 | Allouli | |
| a | _ | | _ | | |
| b | | | | | |
| C | 1 | | | | |
| d | | | | | |
| e | | | | | |
| 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 | 44,634. | |
| 5 Net rental income or (loss) from real estate | | | | 11,031. | |
| Debt-financed property | | | | | |
| b Not debt-financed property | | | | | |
| 6 Net rental income or (loss) from personal | | | | | |
| property | | | | | |
| 7 Other investment income | | | | | |
| 8 Gain or (loss) from sales of assets other | | | | | |
| than inventory | | | 18 | -25,559. | |
| 9 Net income or (loss) from special events | | | | , | |
| O Gross profit or (loss) from sales of inventory | | | | | |
| 1 Other revenue | | | | | |
| a | | | | | |
| b | | | | | |
| c | | | | | |
| d | 1 1 | · | | | _ |
| e | | | | | |
| 2 Subtotal Add columns (b), (d), and (e) | | (|). | 19,075. | |
| 3 Total Add line 12, columns (b), (d), and (e) | | | | 13 | 19,07 |
| 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) |
|--------------|--|
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| | - 000 PF |

| Part XVII | Information Regarding Transfers t Exempt Organizations | o and Transactions a | nd Relationships With Noncha | ritable | ; | | |
|---------------------|--|---------------------------------------|---|---|-----------|-----|--|
| 1 Dud the or | ganization directly or indirectly engage in any of the foll | Owing with any other organization | on described in section 501(c) | | Yes | No | |
| | n section 501(c)(3) organizations) or in section 527, re | | on described in section 30 No. | | | | |
| | from the reporting foundation to a noncharitable exemp | | | | | | |
| (1) Cash | from the reporting foundation to a nonenandole exemp | or organization of | | 1a(1) | | Х | |
| (2) Othe | assets | | | 1a(2) | | X | |
| b Other tran | | | | | | | |
| | of assets to a noncharitable exempt organization | | | 1b(1) | | X | |
| | nases of assets from a noncharitable exempt organization | on | | 1b(2) | | X | |
| (3) Rent | Il of facilities, equipment, or other assets | | | 1b(3) | | X | |
| (4) Reim | bursement arrangements | | | 1b(4) | | X | |
| (5) Loan | s or loan guarantees | | | 1b(5) | | _X_ | |
| (6) Perfo | (6) Performance of services or membership or fundraising solicitations | | | | | | |
| c Sharing o | f facilities, equipment, mailing lists, other assets, or paid | d employees | | 1c | | X | |
| | ver to any of the above is "Yes," complete the following | • • | | | sets. | | |
| | s given by the reporting foundation. If the foundation re | | ie in any transaction or sharing arrangement, | show in | | | |
| |) the value of the goods, other assets, or services recei | | | | | | |
| (a) Line no | · · · · · · · · · · · · · · · · · · · | table exempt organization | (d) Description of transfers transactions an | d sharing ar | rangeme | nts | |
| _ | N/ | <u>A</u> | | | | | |
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| | | | | | | | |
| ın section | ndation directly or indirectly affiliated with, or related to, 501(c) (other than section 501(c)(3)) or in section 527 | | zations described [| Yes | X | No | |
| u ii res, c | amplete the following schedule (a) Name of organization | (b) Type of organization | (c) Description of relation | shю | | | |
| | N/A | (b) Type of organization | (b) Seeson plasm of relation | | | | |
| | N/A | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | A-11-11-1 | | | |
| Sign Here | penalties of perjury, I declare that I have examined this return included it is true correct, and complete. Declaration of preparer (other state of officer or trustee.) | | nation of which preparer has any knowledge | lay the IRS of flurn with the novin below X. Yes | e prepare | 15 | |
| | | r's signature | Date Check if PTIN | | | | |
| | Frankryhe brehaier s name Frebatei | o signature | self- employed | | | | |
| Paid | KEITH BAUMGARTNER K | +150 + = 50A | | 0187 | 845 | | |
| Preparer | Firm's name SMITH & GESTELAN | D. TIP | Fum's EiN ► 39 - 0 | | | | |
| Use Only | THE SHARE POSTEDIAN. | -, 114 <u>1</u> 1 | Timi acin P 35 0 | J J / I | , 0 | | |
| • | Firm s address ▶ P.O. BOX 1764 | | | | · | | |
| | MADISON, WI 537 | 01 | Phone no (608) | 836 | -75 | 00 | |
| | | · · · · · · · · · · · · · · · · · · · | | orm 990 | | | |

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

Employer identification number Name of the organization 39-6609049 POWERS-WOLFE CHARITABLE TRUST 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 X 501(c)(3) exempt private foundation 4947(a)(1) nonexempt charitable trust treated as a private foundation 501(c)(3) taxable private foundation Check if your organization is covered by the General Rule or a Special Rule. Note: Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions General Rule For an organization filing Form 990, 990 EZ, or 990 PF that received, during the year, contributions totaling \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions Special Rules For an organization described in section 501(c)(3) filing Form 990 or 990 EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990 EZ), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of (1) \$5,000, or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h, or (ii) Form 990 EZ, line 1 Complete Parts I and II For an organization described in section 501(c)(7), (8) or (10) filing Form 990 or 990 EZ that received from any one contributor during the year, total contributions of more than \$1,000 exclusively for religious, charitable, scientific, literary or educational purposes or for the prevention of cruelty to children or animals. Complete Parts I, II, and III For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990 EZ that received from any one contributor, during the year, contributions exclusively for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., purpose Don't complete any of the parts unless the General Rule applies to this organization because it received nonexclusively religious, charitable, etc., contributions totaling \$5,000 or more during the year Caution. An organization that isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990, 990 EZ, or 990 PF)

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)

but it must answer "No" on Part IV, line 2, of its Form 990, or check the box on line H of its Form 990 EZ or on its Form 990 PF. Part I line 2, to

certify that it doesn't meet the filing requirements of Schedule B (Form 990, 990 EZ, or 990 PF)

Name of organization

Employer identification number

POWERS-WOLFE CHARITABLE TRUST

39-6609049

| Part I | Contributors (see instructions) Use duplicate copies of Part I if addition | nal space is needed | |
|------------|--|----------------------------|---|
| (a) No. | (b) Name, address, and ZIP + 4 | (c) Total contributions | (d) Type of contribution |
| 1 | THOMAS WOLFE 6102 S. HIGHLANDS AVE. MADISON, WI 53705 | \$ 75,000. | Person X 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) |
| (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) |
| (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

POWERS-WOLFE CHARITABLE TRUST

39-6609049

| (a) No | (b) | (c) FMV (or estimate) | (d) |
|------------------------------|--|---|----------------------|
| from Part I | Description of noncash property given | (See instructions) | Date received |
| | | | |
| | | \$ | |
| (a) No | (b) | (c) FMV (or estimate) | (d) |
| from Part I | Description of noncash property given | (See instructions) | Date received |
| | | | |
| | | \$ | |
| (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 |
| | | | |
| | | | |
| (a) No from | (b) Description of noncash property given | (c) FMV (or estimate) (See instructions) | (d) Date received |
| | | | <u> </u> |
| | | \$ | |
| (a) No. from | (b) Description of noncash property given | (c) FMV (or estimate) (See instructions.) | (d) Date received |
| Part I | | (22222 23.07.07) | |
| <u> </u> | | | |

Page 4 Schedule B (Form 990, 990 EZ, or 990-PF) (2017) Employer identification number Name of organization 39-6609049 POWERS-WOLFE CHARITABLE TRUST Exclusively religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8), or (10) that total more than \$1,000 for Part III 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 info once) Use duplicate copies of Part III if additional space is needed (a) No. from Part I (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 (c) Use of gift (b) Purpose 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 (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 (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 DIVIDED | NDS AND INTER | EST FROM | SECUR | ITIES S | STATEMENT | 1 |
|---|------------------------------|---------------------------|--------------------------------|-----------------------------------|---------------------------------------|---------------|
| GROSS SOURCE AMOUNT | CAPITAL GAINS DIVIDEND | REV | A) ENUE BOOKS | (B) NET INVEST- MENT INCOME | | |
| BAIRD 44,63 | 34. | 0. 4 | 4,634. | 44,581 | • | |
| TO PART I, LINE 4 44,63 | 34. | 0. 4 | 4,634. | 44,581 | • | |
| FORM 990-PF | ACCOUNTI | NG FEES | | (| STATEMENT | 2 |
| DESCRIPTION | (A) EXPENSES PER BOOKS | (B) NET INV MENT IN | EST- | (C) ADJUSTED NET INCOME | (D) CHARITAI PURPOSI | |
| ACCOUNTING FEES | 1,883. | | 942. | | 9. | 41. |
| TO FORM 990-PF, PG 1, LN 161 | 1,883. | = | 942. | | 9, | 41. |
| FORM 990-PF | OTHER PROFES | SIONAL F | EES | | STATEMENT | 3 |
| | (3.) | (D) | | (C) | | |
| DESCRIPTION | (A) EXPENSES PER BOOKS | (B) NET INV MENT IN | EST- | ADJUSTED NET INCOME | (D) CHARITAI PURPOSI | |
| DESCRIPTION ASSET MANAGEMENT FEE | EXPENSES | NET INV MENT IN | EST- | ADJUSTED | CHARITA | |
| | PER BOOKS 4,199. | NET INV MENT IN 4 | EST- COME | ADJUSTED | CHARITA | ES |
| ASSET MANAGEMENT FEE | PER BOOKS 4,199. | NET INV MENT IN 4 | EST- COME | ADJUSTED NET INCOME | CHARITA | 0. |
| ASSET MANAGEMENT FEE TO FORM 990-PF, PG 1, LN 160 | EXPENSES PER BOOKS 4,199. | NET INV MENT IN 4 | EST- COME ,199. ,199. | ADJUSTED NET INCOME | CHARITAI PURPOSI | 0. 0. 4 |
| ASSET MANAGEMENT FEE TO FORM 990-PF, PG 1, LN 160 FORM 990-PF | EXPENSES PER BOOKS 4,199. | NET INV MENT IN 4 | BOOI | ADJUSTED NET INCOME | CHARITAI PURPOSI STATEMENT FAIR MARKE | 0. 0. 4 |