Form 990-PE

Department of the Treasury Internal Revenue Service

EXTENDED TO NOVEMBER 15, 20 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

2017

	Nan	ne of	foundation			A Employer identification	number
	W	IL]	LIAM AND JANICE GODFREY	46-6173383			
-			of street (or P O box number if mail is not delivered to street		Room/suite	B Telephone number	
	1	11	E KILBOURN AVE STE 140	0		(414) 225-	1408
	$\overline{}$		own, state or province, country, and ZIP or foreign p		<u> </u>	C If exemption application is p	ending, check here
			WAUKEE, WI 53202-6613				
			all that apply: Initial return		ormer public charity	<b>D</b> 1. Foreign organizations	s, check here
			Final return	Amended return		2 Foreign organizations me check here and attach co	eting the 85% test,
			Address change	Name change	- 1	check here and attach co	mputation
	H_C	_	type of organization: X Section 501(c)(3) ex			E If private foundation sta	
	<u> </u>			Other taxable private founda		under section 507(b)(1)	
				ng method: X Cash	Accrual	F If the foundation is in a	
			eart II, col. (c), line 16)	ther (specify)		under section 507(b)(1)	(B), check here
ı	<u> </u>		6,504,186. (Part I, colun				(d) 0
	Ра	rt I	(The total of amounts in columns (b), (c), and (d) may not necessarily equal 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)
<u> </u>		1	Contributions, gifts, grants, etc., received	27,000.		₹ N/A	
7		2	Check If the foundation is not required to attach Sch. 8	i	XX. 14	ĝ,	
		3	Interest on savings and temporary cash investments	30,605.			STATEMENT 2
11		4	Dividends and interest from securities	88,658.	87,623.		STATEMENT 3
4		5a	Gross rents				
'		b	Net rental income or (loss)	\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \		j. Ž	
	4	6a	Net gain or (loss) from sale of assets not on line 10	152,234.	\$ <b>\$</b> *	. * .	STATEMENT 1
	nue	b	Gross sales price for all assets on line 6a 1, 466, 672.	* * ** /	÷.,	* *	,
	Revenue		Capital gain net income (from Part IV, line 2)	, \$ .4\$° *	164,100.	, , ,	
88		8	Net short-term capital gain		. 3 3		
2018		9	Income modifications		, , <i>j</i> ,		
		10a	Gross sales less returns and allowances	*	*	, ,	
<b>e</b>		b	Less Cost of goods sold	,	* }		
₩		C	Gross profit or (loss)		,		
		11	Other income	41,141.	41,141	PARARI	STATEMENT 4
		12_	Total Add lines 1 through 11	339,638.	292,864.	13 P. P. C.	1550
ANNED		13	Compensation of officers, directors, trustees, etc	38,592.	23,155		acte (55,437.
y		14	Other employee salaries and wages			E JUN U 4	2010 (2)
Z		15	Pension plans, employee benefits			CODICA	
	ses	16a	Legal fees STMT 5	1,669.	1,669	OC: TEN	0.
S	ē	þ	Accounting fees STMT 6	6,125.	6,125		0.
	Expense	C	Other professional fees STMT 7	34,839.	34,839	<u> </u>	0.
		17	Interest				
	and Admınistratıve	18	Taxes STMT 8	1,370.	708		0.
	ist	19	Depreciation and depletion				
	Ē	20	Occupancy				
	Αd	21	Travel, conferences, and meetings				
	and	22	Printing and publications				
		23	Other expenses				
	Operating	24	Total operating and administrative				
	per		expenses Add lines 13 through 23	82,595.	66,496		15,437.
	Ō	25	Contributions, gifts, grants paid	285,000.			285,000.
			Total expenses and disbursements				
			Add lines 24 and 25	367,595.	66,496		300,437.
		27	Subtract line 26 from line 12				
		a	Excess of revenue over expenses and disbursements	<27,957.			
			Net investment income (if negative enter 0)		226,368		
		С	Adjusted net income (if negative enter -0-)			N/A	

15158001

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

5,688,652. Form **990-PF** (2017)

5

	20	,	-, , , -		· · · · · · · · · · · · · · · · · · ·
	2013	19,000.	373,3	52.	.05089
_	2012	0.		0.	.00000
2	Total of line 1, column (d)			2	.14305
3	Average distribution ratio for the 5-year bathe foundation has been in existence if less	'	0, or by the number of years	3	.02861
4	Enter the net value of noncharitable-use as	sets for 2017 from Part X, line 5		4	6,280,500
5	Multiply line 4 by line 3			5	179,691
6	Enter 1% of net investment income (1% o	f Part I, line 27b)		6_	2,264
7	Add lines 5 and 6			7	181,955
8	Enter qualifying distributions from Part XII	, line 4		8	300,437

If line 8 is equal to or greater than line 7, check the box in Part VI, line 1b, and complete that part using a 1% tax rate See the Part VI instructions.

Form 990-PF (2017)

723521 01-03-18

Form 990-PF (2017) WILLIAM AND JANICE GODFREY FAM FDN TR Part VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(	o) or 4	46-6	517338	3	Page 4	
	c), UI 4	<del>340 -</del>	366 111311	uctio	113)	
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)				2 2	<i>-</i> 1	
b Domestic foundations that meet the section 4940(e) requirements in Part V, check here 🕨 🗶 and enter 1%		1		4,4	64.	
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			0.	
3 Add lines 1 and 2		3		2,2		
4 Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only; others, enter -0-)		4		<del></del>	<u>0.</u>	
5 Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-		5		<u>2,2</u>	64.	
6 Credits/Payments:		ŀ				
a 2017 estimated tax payments and 2016 overpayment credited to 2017 6a 2	<u>351.</u>					
b Exempt foreign organizations - tax withheld at source 6b	0.					
c Tax paid with application for extension of time to file (Form 8868)	500.					
d Backup withholding erroneously withheld 6d 6d	0.					
7 Total credits and payments. Add lines 6a through 6d		7		2,8	51.	
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			87.	
· · · · · · · · · · · · · · · · · · ·	nded 🟲	11			0.	
Part VII-A Statements Regarding Activities	ilucu p	L			<del></del>	
1a During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate of	ıntervene	in		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	r the defin	ition	1b		X	
If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials published of						
distributed by the foundation in connection with the activities					*	
c Did the foundation file Form 1120-POL for this year?			10		Х	
d Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year:				+		
(1) On the foundation. ► \$ 0. (2) On foundation managers. ► \$	0.					
e Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation.						
managers. > \$ 0.	ition				>	
2 Has the foundation engaged in any activities that have not previously been reported to the IRS?			2		х	
If "Yes," attach a detailed description of the activities.					- X	
,						
3 Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incor	Joranon, c	)1			v	
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?		n.T	/ 3 4a	+-	<u> </u>	
b If "Yes," has it filed a tax return on Form 990-T for this year?		N		+	37	
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						
<ul> <li>By language in the governing instrument, or</li> </ul>						
<ul> <li>By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict wi</li> </ul>	h the state	law		-		
remain in the governing instrument?			6	<u> </u>	<u> </u>	
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 Pa	t XV		7	X	<u> </u>	
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 designation)	te)					
of each state as required by General Instruction G? If "No," attach explanation			8b	X	ļ	_
9 Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)	5) for cale	ndar	-			1
year 2017 or the tax year beginning in 2017? See the instructions for Part XIV If "Yes," complete Part XIV			_ 9		X	Ø
10 Did any persons become substantial contributors during the tax year? If "Yes " attach a schedule listing their names and addre	ses		10		X	

Pai	rt 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 51	2(b)(13)? If "Yes," attach schedule. See instructions	11		<u>X</u>
12	Did the fou	ndation make a distribution to a donor advised fund over which the foundation or a disqualified person had advisory privileges?			
	If "Yes," att	ach statement. See instructions	_ 12	ļ	X
		ndation comply with the public inspection requirements for its annual returns and exemption application?	13	X	L
		dress N/A			
		are in care of ► WILLIAM H FRAZIER Telephone no. ► (414)		-14	<u>08</u>
		► 111 E KILBOURN AVE STE 1400, MILWAUKEE, WI ZIP+4 ►53	202		
		47(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - check here		>	•
		he amount of tax-exempt interest received or accrued during the year	<u>IN</u>	/A Yes	No
		e during calendar year 2017, did the foundation have an interest in or a signature or other authority over a bank,	40	res	-
		or other financial account in a foreign country?	16	L	<u>X</u>
	foreign coi	tructions for exceptions and filing requirements for FinCEN Form 114. If "Yes," enter the name of the			
		Statements Regarding Activities for Which Form 4720 May Be Required	ш		<u> </u>
		4720 if any item is checked in the "Yes" column, unless an exception applies.	Τ	Yes	No
		year, did the foundation (either directly or indirectly):	-		1.10
	_	e in the sale or exchange, or leasing of property with a disqualified person?		Ì	
		w money from, lend money to, or otherwise extend credit to (or accept it from)			*
		ualified person? Yes X No	*		
		h goods, services, or facilities to (or accept them from) a disqualified person?		ŀ	*
	(4) Pay co	ompensation to, or pay or reimburse the expenses of, a disqualified person?	· 40 ,		1
	(5) Transi	er any income or assets to a disqualified person (or make any of either available	1 3		
	for the	benefit or use of a disqualified person)?	1 37	4	` `
	(6) Agree	to pay money or property to a government official? (Exception Check "No"	9	3,3	
	if the f	oundation agreed to make a grant to or to employ the official for a period after		200	ĺ.
		ation of government service, if terminating within 90 days.)	ļ	\$ 3	
		ver is "Yes" to 1a(1)-(6), did <b>any</b> of the acts fail to qualify under the exceptions described in Regulations		**	
		4941(d)-3 or in a current notice regarding disaster assistance? See instructions	1b	ļ	X
		ons relying on a current notice regarding disaster assistance, check here		ì	
		ndation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected		1	X
		first day of the tax year beginning in 2017?	1c	<u> </u>	
		allure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation section 4942(j)(3) or 4942(j)(5)).	(	`	
		of tax year 2017, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning			
	before 201				
		the years >		ļ	
		ny years listed in 2a for which the foundation is <b>not</b> applying the provisions of section 4942(a)(2) (relating to incorrect			
		f 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	<u> </u>	<u></u>
C	If the provi	sions of section 4942(a)(2) are being applied to <b>any</b> of the years listed in 2a, list the years here			
	▶				
3a	Did the fou	ndation hold more than a 2% direct or indirect interest in any business enterprise at any time			
	during the	year? Yes X No		ŀ	
		It have excess business holdings in 2017 as a result of (1) any purchase by the foundation or disqualified persons after			
	-	169; (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7)) to dispose			[
		s acquired by gift or bequest; or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Schedule C,			]
		, to determine if the foundation had excess business holdings in 2017 ) N/A	_ 3b	ļ	<del> </del> -
		ndation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a		X
		ndation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that	1		\
	nau not be	en removed from jeopardy before the first day of the tax year beginning in 2017?	4b	n pr	(2017)
		Fo	rm <b>99</b> 0	U- I	(2017)

orm 990-PF (2017) WILLIAM AND JANICE GODF			<u>46-61733</u>	83	Page 6
Part VII-B Statements Regarding Activities for Which	Form 4720 May Be I	Required (contin	ued)		
5a During the year, did the foundation pay or incur any amount to:			( <del></del> )	Yes	No
(1) Carry on propaganda, or otherwise attempt to influence legislation (section			es X No		
(2) Influence the outcome of any specific public election (see section 4955);	or to carry on, directly or indir		<b>₩</b>		
any voter registration drive?	-0		es X No		
(3) Provide a grant to an individual for travel, study, or other similar purpose		Y6	es LALINO		
(4) Provide a grant to an organization other than a charitable, etc., organization	on described in Section		es X No		1
4945(d)(4)(A)? See instructions			es LALINO	Ì	
(5) Provide for any purpose other than religious, charitable, scientific, literary the prevention of cruelty to children or animals?	y, or educational purposes, or		es X No		
•	adar the avecantions described		es LALINO		
b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify us section 53 4945 or in a current notice regarding disaster assistance? See inst		iii Regulations	N/A	5b	
Organizations relying on a current notice regarding disaster assistance, check				30	+
c If the answer is "Yes" to question 5a(4), does the foundation claim exemption		unad		}	1
			es No		
expenditure responsibility for the grant?  If "Yes," attach the statement required by Regulations section 53.4945-5(d)	T,	N/A L	es L No		
. , , , , , , , , , , , , , , , , , , ,	nou promiumo oo				1
6a Did the foundation, during the year, receive any funds, directly or indirectly, to a personal benefit contract?	pay premiums on	□ v.	es X No		
<ul><li>b Did the foundation, during the year, pay premiums, directly or indirectly, on a</li></ul>	parcanal hanafit agairsat?		1	Gh	x
If "Yes" to 6b. file Form 8870.	beigougi neitetit contract.		<u> </u>	6b	+^-
7a At any time during the tax year, was the foundation a party to a prohibited tax	chalter transaction?		es X No	ί,	
b If "Yes," did the foundation receive any proceeds or have any net income attrib		10	N/A	7b	+
Part VIII Information About Officers, Directors, Trus		nagers Highly		70	
Paid Employees, and Contractors	tooo, roundation me	inagoro, riigini	•		
1 List all officers, directors, trustees, and foundation managers and	their compensation.				
	(b) Title, and average hours per week devoted	(c) Compensation	(d) Contributions to employee benefit plans and deferred	(e) Ex	rpense nt, other
(a) Name and address	to position	(If not paid, enter -0-)	and deferred compensation	accoun	ances
WILLIAM FRAZIER	TRUSTEE				
111 E KILBOURN AVE STE 1400				}	
MILWAUKEE, WI 53202	4.00	38,592.	0.		0.
				İ	
	_				
				Ì	
				l	
2 Compensation of five highest-paid employees (other than those in		enter "NONE."	(d) Contributions to		
(a) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week	(c) Compensation	(d) Contributions to employee benefit plans and deferred	(e) Ex	opense it, other
	devoted to position		compensation	allow	ances
NONE	_				
	_				
				<del> </del>	
	4				
	-	<del>                                     </del>		ļ	
	-			ļ	
				-	
	-				
Total number of other employees paid over \$50,000			<u> </u>	L	0
Total name of ania original and base and another design of			Form	990-PF	

F	Part X Minimum Investment Return (All domestic foundations must complete this part. Foreign foundations	ndations	s, see instructions )
1	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	5,390,767.
b	Average of monthly cash balances	1b	121,570.
С	Fair market value of all other assets	1c	863,805.
d	Total (add lines 1a, b, and c)	1d	6,376,142.
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.
3	Subtract line 2 from line 1d	3	6,376,142.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions)	4	95,642.
5	Net value of noncharitable-use assets Subtract line 4 from line 3. Enter here and on Part V, line 4	5	6,280,500.
6	Minimum investment return. Enter 5% of line 5	6	314,025.
F	Part XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations and foreign organizations, check here  and do not complete this part )	d certain	
1	Minimum investment return from Part X, line 6	1	314,025.
2a	Tax on investment income for 2017 from Part VI, line 5		
b			
C	Add lines 2a and 2b	2c	2,264.
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	311,761.
4	Recoveries of amounts treated as qualifying distributions	4	0.
5	Add lines 3 and 4	5	311,761.
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	311,761.
P	Part XII Qualifying Distributions (see instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:		
а	Expenses, contributions, gifts, etc total from Part I, column (d), line 26	_1a	300,437.
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	
b	Cash distribution test (attach the required schedule)	3b	
4	Qualifying distributions Add lines 1a through 3b. Enter here and on Part V, line 8; and Part XIII, line 4	4	300,437.
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment		
	income. Enter 1% of Part I, line 27b	5	2,264.
6	Adjusted qualifying distributions Subtract line 5 from line 4	6	2,264. 298,173.
	Note The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation of 4940(e) reduction of tax in those years.	ualifies fo	or the section

### Part XIII Undistributed Income (see instructions)

1. Distributable amount for 2017 from Part XI, line / 2. Undestrobed rooms (Jan), an air travel and rest? 3. Excess distributions carryover, if any, to 2017: a From 2019 5. From 2013 6. From 2016 6. From 2015 6. From 2016 7. Total of lines 3 shrhoughe 7. Total of lines 1 shrh	_	(a) Corpus	(b) Years prior to 2016	(c) 2016	( <b>d)</b> 2017
2 Useshived received. A stay, as a time and of 2017 a Enter amount of 2019 only b Total for prior years:  3 Excess distributions carryover, if any, to 2017; a From 2019 6 From 2013 6 From 2015 6 From 2016 1 Total of lines 33 through e  4 Qualifying distributions for 2017 from Part XII, line 4; lines 33 through e  4 Qualifying distributions for 2017 from Part XII, line 4; lines 33 through e  4 Qualifying distributions for 2017 from Part XII, line 4; lines 33 through e  5 Applied to 2016, but not more than time 2a by Applied to 2016, but not more than time 2a by Applied to 2016, but not more than time 2a by Applied to 2017 distributions of corpus (Electron required - see instructions) d  4 Applied to 2017 distributions and of corpus 5 Excess activities of the server amount of t					311.761.
\$ Excess distributions curryover, trany, to 2017; \$ Excess distributions curryover, trany, to 2017; \$ From 2018 \$ From 2016 \$ From 2017 \$	2 Undistributed income, if any, as of the end of 2017				
\$ Excess distributions curryover, trany, to 2017; \$ Excess distributions curryover, trany, to 2017; \$ From 2018 \$ From 2016 \$ From 2017 \$	a Enter amount for 2016 only			283,363.	
3 Excess distributions carryover, if any, to 2017: a From 2018 from 2015 from 2016 from 2015 e From 2016 f	<b>b</b> Total for prior years:		0		
From 2013	3 Excess distributions carryover, if any, to 2017:		<u> </u>		
e From 2014 d From 2015 e From 2016 f Total of lines 3a through e  O. 4 Cualifying distributions for 2017 from Part XII, line 4 ► ► \$3.00 _ 4.37 , a Applied to undistributed more than tine 2a  Applied to undistributed more of prior years (Election required - see instructions)  (Floction required - see instructions)  O. 4 Page 10	<b>a</b> From 2012				
d From 2015	<b>b</b> From 2013				
EFrom 2018    Total of lines 3a through e   Audalying distributions for 2017 from   Part XII, line 4- P S 30,0,437, a   Applied to 2016, but not more than line 2a     Applied to 2016, but not more than line 2a     Applied to 2016, but not more than line 2a     Applied to 2017 distributions even for corpus (Efection required - see instructions)     Created as distributions out of corpus (Efection required - see instructions)     Applied to 2017 distribution amount     Emeration amount distributed out of corpus     Crease activation excreption applied to 2017 (first amount appears in extend and the same amount appears in extend appears in extend and the same amount appears in extending the sa	<b>c</b> From 2014				
1 Total of lines 3a through e 4 Oualitying distributions for 2017 from Part XII, Ind. 4f. + 5	<b>d</b> From 2015				
4. Qualifying distributions for 2017 from Part XII, line 4; \$\sim \\$ 300, 437. a Applied to 2016, but not more than line 2a 283,363.   283,363.	e From 2016				
Part XII, lime 4: No a 30.0, 43.7. a Applied to 2016, but not more than line 2a b Applied to undistributed more of prior years (Election required - see instructions) c Treated as distributions out of corpus (Election required - see instructions) d Applied to 2017 distributable amount a Remanning amount distributed out of corpus 5. Excess enterbutions carryover to 2018 c Remaining amount distributed out of corpus 5. Excess distributions carryover to 2018 c Remaining amplead in come for which a notice of undistributed income for which a notice of undistributed income for which a notice of undistributed income for 2016. Subtract line 4 from line 24.7. C Remaining and 42(2a) in kinab Even previously assessed d Subtract line 6 from line 6b Tasable amount - see instructions c Undistributed income for 2016. Subtract line 4 from line 2a. Tasable amount - see instructions c Undistributed income for 2016. Subtract line 4 from line 2a. Tasable amount - see instructions c Undistributed income for 2017. Subtract lines 40 and 5 from line 1 This amount must be distributed in 2018 7. Amounts reset as distributions out of corpus to satisfy requirements imposed by section 170(b) (1)(f) or 4942(a)(3) (Election may be required - see instructions) 8. Excess distributions carryover from 2012 not applied on line 5 or line 7 9. Excess distributions carryover from 2012 not applied on line 5 or line 7 9. Excess distributions carryover from 2012 not applied on line 5 or line 7 9. Excess distributions carryover from 2012 not applied on line 5 or line 7 9. Excess distributions carryover from 2012 not applied on line 5 or line 7 9. Excess distributions carryover from 2015 not applied on line 5 or line 7 9. Excess distributions carryover from 2015 not applied on line 5 or line 7 9. Excess form 2016 not remain the section	f Total of lines 3a through e	0.	· · · · · · · · · · · · · · · · · · ·		
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b Applied to undistributed income of prior years (Election required - see instructions) c Treated as distributions out of corpus (Election required - see instructions) d Applied to 2017 distributable amount e Remaining amount distributable amount read be above in column (b)  5 Excess detributions carryover to 2018 c Brite the ent total of each column as indicated below; a Corpus Ast limes 31 Ac, and 46 Subtract line 5 b Prior years' undistributed morme. Subtract line 40 from line 20. c Enter the amount of prior years' undistributed income for which a notice of deficiency has been sized, or on which the section 4942(a) tax has been previously assessed d Subtract line 6c from line 6b Taxable amount - see instructions c Undistributed income for 2016. Subtract line 44 from line 2a. Taxable amount - see instructions c Undistributed income for 2015. Subtract lines 4d and 5 from line 1 This amount must be distributed in 2018 A Found in terest as distributions out of corpus to satisfy requirements imposed by section 170(b)(1)(f) or 4942(b)(3) (Election may be required - see instructions)  8 Excess distributions carryover from 2012 on applied on line 5 or line 7 9 Excess distributions carryover from 2012 on Applied on line 5 or line 7 9 Excess distributions carryover from 2012 on Applied on line 5 or line 7 9 Excess distributions carryover from 2012 on Applied on line 5 or line 7 9 Excess distributions carryover from 2012 on Applied on line 5 or line 7 9 Excess distributions carryover from 2012 on Applied on line 5 or line 7 9 Excess form 2013 b Excess from 2014 Excess from 2015 Excess from 2016	Part XII, line 4: $\triangleright$ \$ 300, 437.				
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d Applied to 2017 distributable amount e Remaining amount distributed out of corpus  5. Excess extibutions carryover applied to 2017 (that amount appears in column (s), the same amount must be shown in column (s). The same amount industed by the state of the same amount industed by the same amount industed below:  a Corpus Add Ines 31.4.5, and 46. Subtract line 5. b Prior years' undistributed income. Subtract line 40 from line 2b  c Enter the amount of prior years' undistributed income for which a notice of defliciency has been ssued, or on which the section 4942(a) tax has been previously assessed d  d Subtract line 66 from line 6b. Taxable amount - see instructions  e Undistributed income for 2016. Subtract line 4a from line 2a. Taxable amount - see instructions  1 Undistributed income for 2017. Subtract lines 4d and 5 from line 1. This amount must be distributed in 2018  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)  8 Excess distributions carryover from 2012 not applied on line 5 or line 7  9 Excess distributions carryover to 2018  Subtract lines 7 and 8 from line 6a  10 Analysis of line 9:  a Excess from 2013  b Excess from 2014  c Excess from 2015  d Access from 2015  d Excess from 2015  d Excess from 2015  d Excess from 2015  d Excess from 2015	c Treated as distributions out of corpus		* *	*	
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of tran amount appears in column (d), the same amount must be shown in column (a).  Enter the net total of each column as indicated below:  a Corpus As dines at, 4c, and 4e Subtract line 5 b Prior years' undistributed income. Subtract line 4b from line 2b c Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 194(2a) tax has been previously assessed d Subtract line 6b from line 6b Taxable amount - see instructions e Undistributed income for 2016. Subtract line 4 a from line 2a. Taxable amount - see instructions e Undistributed in come for 2017. Subtract lines 4d and 5 from line 1 This amount must be distributed in 2018 7 Amounts treated as distributions out of corpus to satisfy requirements imposed by section 170(b)(1)(f) or 494(2)(3), (Eletion may be required - see instructions) 8 Excess distributions carryover from 2012 not applied on line 5 or line 7 9 Excess from 2013 b Excess from 2013 b Excess from 2014 c Excess from 2015 d Excess from 2015 d Excess from 2016	e Remaining amount distributed out of corpus	0.			
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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)  8 Excess distributions carryover from 2012 not applied on line 5 or line 7  9 Excess distributions carryover to 2018 Subtract lines 7 and 8 from line 6a  10 Analysis of line 9:  a Excess from 2013 b Excess from 2014 c Excess from 2015 d Excess from 2016					29/ 687
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10 Analysis of line 9:  a Excess from 2013  b Excess from 2014  c Excess from 2015  d Excess from 2016		0.			
a Excess from 2013 b Excess from 2014 c Excess from 2015 d Excess from 2016	ŀ				
b Excess from 2014 c Excess from 2015 d Excess from 2016	1				
c Excess from 2015 d Excess from 2016					
d Excess from 2016					

723581 01-03-18

Form 990-PF (2017) WILLIAM Part XIV Private Operating F	I AND JANICE oundations (see in			46-6	173383 Page
1 a If the foundation has received a ruling of			<del></del>	N/A	·
foundation, and the ruling is effective fo			,		
<b>b</b> Check box to indicate whether the found	•	•	f in coction	4942(J)(3) or	1942(J)(5)
2 a Enter the lesser of the adjusted net	Tax year	Ing touridation described	Prior 3 years		1342())(3)
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) 2011	(5) 2010	(0) 2010	(4) 23	1/(0/1000
each year listed					
b 85% of line 2a			<del></del>	+/	<del></del>
			<del></del>	+/	<del></del>
c Qualifying distributions from Part XII,					
line 4 for each year listed  d Amounts included in line 2c not				<del>                                     </del>	
			1		
used directly for active conduct of					
exempt activities			<del></del>	<del>/</del>	<del> </del>
e Qualifying distributions made directly					
for active conduct of exempt activities Subtract line 2d from line 2c		1			
3 Complete 3a, b, or c for the				<del> </del>	
alternative test relied upon:					
a "Assets" alternative test - enter					
(1) Value of all assets				<del> </del>	<del> </del>
(2) Value of assets qualifying under section 4942(i)(3)(B)(i)					
b "Endowment" alternative test - enter			<del></del>		
2/3 of minimum investment return					
shown in Part X, line 6 for each year					
listed  c "Support" alternative test - enter:					<del></del>
(1) Total support other than gross					
investment income (interest,					
dividends, rents, payments on					
securities loans (section		1			
512(a)(5)), or royalties)		<del>                                     </del>	<del> </del>	<del></del>	
(2) Support from general public and 5 or more exempt					
organizations as provided in					
section 4942(j)(3)(B)(III)			<del> </del>	<del> </del>	<del> </del>
(3) Largest amount of support from					
an exempt organization		<del> </del>		<del></del>	
Part XV   Supplementary Info	Emotion (Comple	to this part only	, if the foundation	n had \$5 000 or m	noro in accoto
at any time during t			i the foundation	11 11au \$5,000 01 11	iore in assets
		idedions.j		<del></del>	
1 Information Regarding Foundation	•	the ~ 00/ - 6 th - t - t - t	-11		
a List any managers of the foundation wh year (but only if they have contributed r			ntributions received by th	ie foundation before the ci	ose of any tax
	11010 (11011 40,000). (000 0	30011011 007 (4)(2):)			
NONE		as at a standard a same and a	. /		
b List any managers of the foundation when other entity) of which the foundation had			i (or an equally large port	tion of the ownership of a	partnership or
• •	da 1070 or groute. Intere	50.			
NONE					
2 Information Regarding Contribut					i f f a M
Check here <b>X</b> if the foundation of the foundation makes gifts, grants, etc.	only makes contributions	to preselected charitable	e organizations and does	not accept unsolicited rec	quests for funds. If
a The name, address, and telephone num	iber or email address of the	ne person to wnom app	lications should be addre	ssea	
h. The form in which analystications should be	be as bootted and informe	tion and materials their	abauld radiides		
<b>b</b> The form in which applications should t	submitted and informa	tion and materials they	snoula include:		
a Any gubminging deadlines					···
c Any submission deadlines					
d Any rectrictions or limitations and	la auch as hu sassas la s	al areas should be to the	o lundo of matrix	ather feeters	
d Any restrictions or limitations on award	s, such as by geographic	ai areas, charitable field	s, kinas oi institutions, or	other lactors.	
		<del>_</del>	<del></del>		Form <b>990-PF</b> (201
723601 01-03-18					Form 990-26 (20)

Part XV Supplementary Informat 3 Grants and Contributions Paid During the				
Recipient	If recipient is an individual, show any relationship to	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	any foundation manager or substantial contributor	recipient	Contribution	
FAMILY PROMISE OF OZAUKEE COUNTY P.O. BOX 499 PORT WASHINGTON, WI 53074	none	PC	UNRESTRICTED	22,500
FIRST STAGE 325 W WALNUT ST MILWAUKEE, WI 53212	NONE	PC	UNRESTRICTED	5,000
FISHER HOUSE WISCONSIN 5000 W NATIONAL AVENUE MILWAUKEE, WI 53295	NONE	PC	UNRESTRICTED	5,000.
INTERCHANGE FOOD PANTRY 130 E JUNEAU MILWAUKEE, WI 53202	NONE	₽C	UNRESTRICTED	5,000
MIAMI UNIVERSITY 501 E HIGH STREET DXFORD, OH 45056	NONE	PC	UNRESTRICTED	3,500
MILWAUKEE ART MUSEUM 700 N ART MUSEUM DRIVE MILWAUKEE, WI 53202	NONE	PC	UNRESTRICTED	10,000
MILWAUKEE PUBLIC MUSEUM 800 WEST WELLS STREET MILWAUKEE, WI 53233	NONE	PC	UNRESTRICTED	2,500
MILWAUKEE REPERTORY THEATER 108 EAST WELLS STREET MILWAUKEE, WI 53202	NONE	₽C	UNRESTRICTED	7,500,
MILWAUKEE SYMPHONY ORCHESTRA 1101 N MARKET STREET SUITE 100 MILWAUKEE, WI 53202	NONE	PC	UNRESTRICTED	12,500,
MILWAUKEE YOUTH SYMPHONY 325 WEST WALNUT STREET MILWAUKEE, WI 53212	NONE	PC	UNRESTRICTED	10,000,
Total from continuation sheets			<u> </u>	207,000

Part XV Supplementary Informatio  Grants and Contributions Paid During the				
3 Grants and Contributions Paid During the Recipient	If recipient is an individual,	1		
·	show any relationship to any foundation manager	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	or substantial contributor	recipient		
INNER BEAUTY CENTER	NONE	PC	UNRESTRICTED	
1300 S LAYTON BLVD.				
MILWAUKEE, WI 53215				2,000
NEW TRIBES MISSION	NONE	PC	UNRESTRICTED	
1000 E FIRST STREET				
SANFORD, FL 32771-1487				16,50
NEXT DOOR FOUNDATION	NONE	PC	UNRESTRICTED	
2545 NORTH 29TH STREET				2.50
MILWAUKEE, WI 53210				3,500
OUR NEXT GENERATION 3421 WEST LISBON AVENUE	NONE	PC	UNRESTRICTED	
MILWAUKEE WI 53208				3,50
				3,30
PRESBYTERIAN HOMES & SERVICES	none	PC	UNRESTRICTED	
FOUNDATION				
2845 HAMLINE AVENUE N ROSEVILLE, MN 55113				20,00
ROSEVILDE, MV 33113				20,000
STARS AND STRIPES HONOR FLIGHT, INC	NONE	PC	UNRESTRICTED	
PO BOX 636	NONE		ONRESTRICTED	
PORT WASHINGTON, WI 53074				2,50
FELLING THE TRUTH	NONE	PC	UNRESTRICTED	
309 N WATER STREET SUITE 425				
MILWAUKEE, WI 53202				17,50
THE BOYNTON SOCIETY	NONE	PC	UNRESTRICTED	
711 E BOLDT WAY				
APPLETON, WI 54911-5690			:	3,50
THE CATHEDRAL CENTER	NONE	PC	UNRESTRICTED	
845 N VAN BUREN ST MILWAUKEE, WI 53202				25,00
ALLEMANDE, HI JOZUE				23,00
THE DARK DEODLE OF VILVINGE CONTROL	YOUR		ADVIDE COMPT	
THE PARK PEOPLE OF MILWAUKEE COUNTY  1845 NORTH FARWELL SUITE 100	NONE	PC	UNRESTRICTED	
MILWAUKEE, WI 53202				2,00
Total from continuation sheets				

3 Grants and Contributions Paid During the		T		
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	Contribution	
PIPPECANOE PRESBYTERIAN CHURCH 25 WEST SAVELAND AVENUE	NONE	PC	UNRESTRICTED	
MILWAUKEE WI 53207				15,00
				13,00
MCA OF GREATER WAUKESHA COUNTY	NONE	PC	UNRESTRICTED	
320 E BROADWAY				
VAUKESHA, WI 53186				10,00
FEITH FAMILY OZAUKEE YMCA 165 NORTHWOODS RD	NONE	PC	UNRESTRICTED	
PORT WASHINGTON, WI 53074				2,50
	:			
				<u></u>

### Part XVI-A . Analysis of Income-Producing Activities

Enter gross amounts unless otherwise indicated	Unrelated	business income		led 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		code		
a	-				
b					<del></del>
c					
d	-		-1		
e					
f	-				
g Fees and contracts from government agencies					
2 Membership dues and assessments		<del></del> -			
3 Interest on savings and temporary cash investments			14	30,605.	
4 Dividends and interest from securities			14	88,658.	
5 Net rental income or (loss) from real estate.				· \$15.5.5.5.5	```\
a Debt-financed property					
<b>b</b> Not debt-financed property		- <del></del>			
6 Net rental income or (loss) from personal					
property					
7 Other investment income			14	41,141.	
8 Gain or (loss) from sales of assets other					
than inventory			17	152,234.	
9 Net income or (loss) from special events					
10 Gross profit or (loss) from sales of inventory					
11 Other revenue:					
a					
b					
C					
d	1				
e					
12 Subtotal Add columns (b), (d), and (e)		(	) .	312,638.	0.
13 Total Add line 12, columns (b), (d), and (e)		<u> </u>		13	040 600
(See worksheet in line 13 instructions to verify calculations.)					

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

▼	the foundation's exempt purposes (other than by providing funds for such purposes)

Form **990-PF** (2017)

723621 01-03 18

Form 990-		AM AND J					46-61			ige 13
Part X	VII Information Re Exempt Organ		nsfers to a	and Transact	tions ar	nd Relation	nships With Nonch	aritable	•	
1 Did t			, of the follows	una with any other	250000000000000000000000000000000000000				Yes	No
	ne organization directly or indi r than section 501(c)(3) orgar				-	n described in s	section 50 f(c)		165	No
	sters from the reporting found				nzations.					1
(1)			and onempt o	gamzanon o.,				1a(1)		Х
	Other assets							1a(2)		X
<b>b</b> Other	transactions*									
(1) 5	Sales of assets to a noncharita	ıble exempt organız	ation					1b(1)		X
	Purchases of assets from a no		organization					1b(2)		Х
(3) F	Rental of facilities, equipment,	or other assets						1b(3)		X
	Reimbursement arrangements							1b(4)		X
	oans or loan guarantees							1b(5)		X
	Performance of services or me		-					1b(6)		X
	ng of facilities, equipment, ma				والمالية المالية			1c	<u> </u>	X
or sei	answer to any of the above is rvices given by the reporting fo	res, complete the	: IOIIOWING SCN	reaule. Column (b)	snould alw	ays snow the ta	air market value of the good	s, other ass	sets,	
	nn (d) the value of the goods,				iaiket vaiut	e iii aliy iransac	tion or snaring arrangemen	i, Show in		
(a) Line no	(b) Amount involved	<del>~· · · · · · · · · · · · · · · · · · · </del>		le exempt organiza	tion	(d) Descrip	otion of transfers, transactions, a	nd sharing ar	rangeme	nts
			N/A			<del> </del>				
_		L								
							<del></del>			
		···								
						-	<del></del>			
						-				
							<del>-</del> ·			
2a Is the	foundation directly or indirect	tly affiliated with, or	related to, one	e or more tax-exem	pt organiz	ations describe	d			
ın sec	tion 501(c) (other than section	n 501(c)(3)) or in s	ection 527?					Yes	X	No
<b>b</b> If "Yes	s," complete the following sche			<del>γ</del>						
	(a) Name of org	anization		(b) Type of orga	nization		(c) Description of relation	nship		
-	N/A						<del></del>			
	<del>-</del>					<del></del>				
				<u> </u>				<del></del>		
							······································			
U	Inder penalties of periusy, I declare t	that I have examined th	ıs return, ıncludır	I	edules and s	tatements and to	the best of my knowledge			<u>`</u>
Sign	nd belief, it is true, correct and com	nplete Declaration of pr	reparer (other tha	an taxpayer) is based o	on all informa	ation of which prep	rarer has any knowledge	May the IRS of eturn with the shown below	e prepare	er :
Here			len!	n 5/11	//2	TRUS		X Yes		No
	Signature of officer or trustee			Date		Title				,
	Print/Type preparer's na	me	Preparer's s	signature		Date	Check If PTI	٧	_	
ъ			1/011	w Khu	11 à		self- employed			
Paid	KELLY K MI					05/16/1		00562	808	
Prepare Use Or	Trim Shame > DCIC.	IBNER, CO	HEN AN	ID COMPAN	Y, S.	.C., CP	AS Firm's EIN ▶ 39-	12105	38	
USE OF		O 17 Cm 353	CON CT	DDEE	T	200				
	Firm's address ► 40			-	TTE 3	300	Db / 41 4	\ 0.71	4 17	^ ^
		<u>LWAUKEE,</u>	MT 227	. U 4			Phone no (414	, 4/1	- I / '	JU

Phone no (414) 271-1700 Form **990-PF** (2017)

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

Department of the Treasury Internal Revenue Service

# **Schedule of Contributors**

► Attach to Form 990, Form 990-EZ, or Form 990-PF. ➤ Go to www.irs.gov/Form990 for the latest information.

OMB No 1545-0047

Name of the organization

Employer identification number

<u></u> W	ILLIAM AND JANICE GODFREY FAM FDN TR	46-6173383
Organization type (check	one)	
Filers of:	Section:	
Form 990 or 990-EZ	501(c)( ) (enter number) organization	
	4947(a)(1) nonexempt charitable trust <b>not</b> 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	
General Rule  X For an organization	c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special F on filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totality one contributor. Complete Parts I and II. See instructions for determining a contributor.	ng \$5,000 or more (in money or
Special Rules	y one continuation Complete Faits Failuri Gee instructions for determining a continuation	or s total contributions
For an organization 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, 16 tor, during the year, total contributions of the greater of (1) \$5,000, or (2) 2% of the amount of the complete Parts I and II	a, 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 utions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educruelty 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 sexclusively for religious, charitable, etc., purposes, but no such contributions totaled here the total contributions that were received during the year for an exclusively religion amplete any of the parts unless the <b>General Rule</b> applies to this organization because the, etc., contributions totaling \$5,000 or more during the year	more than \$1,000 If this box us, charitable, etc,
but it <b>must</b> answer "No" oi	hat isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B in Part IV, line 2, of its Form 990, or check the box on line H of its Form 990-EZ or on its the filing requirements of Schedule B (Form 990, 990-EZ, or 990 PF)	

LHA For Paperwork Reduction Act Notice, see the instructions for Form 990, 990-EZ, or 990-PF. Schedule B (Form 990, 990-EZ, or 990-PF) (2017)

Name of organization

Employer identification number

### WILLIAM AND JANICE GODFREY FAM FDN TR

46-6173383

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	JANICE GODFREY SURVIVOR'S TRUST  111 EAST KILBOURN AVE, SUITE 1400  MILWAUKEE, WI 53202	\$ 27,000.	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		-   \$	Person Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions)
(a) <b>N</b> o.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Oncash 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

## WILLIAM AND JANICE GODFREY FAM FDN TR

46-6173383

Part II Nor	ncash Property (see instructions) Use duplicate copies of F	Part II if additional space is needed		
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)  Date rec		
		\$	<del></del>	
(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 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	
Part I		(See instructions.)		
3453 11-01 17		\$	90, 990-EZ, or 990-PF) (	

Name of orga	nization		Employer identification number
WILLIAI Part III	M AND JANICE GODFREY FA Exclusively religious, charitable, etc., contr	ibutions to organizations described	46 - 6173383 in section 501(c)(7), (8), or (10) that total more than \$1,000 for
	the year from any one contributor. Complete co- completing Part III, enter the total of exclusively religious	, charitable, etc., contributions of \$1,000 or	
(a) No. from	Use duplicate copies of Part III if additiona (b) Purpose of gift	Il space is needed (c) Use of gift	(d) Description of how gift is held
Part I	(b) i dipose oi giit	(c) ose of gift	(u) Description of now girt is field
-		(e) Transfer of gift	t
-	Transferee's name, address, an	d ZIP + 4	Relationship of transferor to transferee
(a) No.			
from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
-		(e) Transfer of gif	t
-	Transferee's name, address, an	d ZIP + 4	Relationship of transferor to transferee
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
-		(e) Transfer of gif	t
-	Transferee's name, address, an	d ZIP + 4	Relationship of transferor to transferee
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
	Transferee's name, address, an	(e) Transfer of gift	Relationship of transferor to transferee
-			

723454 11-01-17

CAPITAL GAINS DIVIDENDS FROM PART IV  2,123.  TOTAL TO FORM 990-PF, PART I, LINE 6A  152,234.	FORM 990	0-PF G	AIN OR (L	OSS)	FROM	SALE	OF	ASSETS		STA	TEMENT	r 1
C	DESCRIPT		•				P				DATE	SOLD
GROSS SALES PRICE OTHER BASIS  1,464,532.  1,314,438.  0.  0.  0.  150,094   MANNER ACQUIRED ACQUIRED ACQUIRED DATE SOLI  CASH IN LIEU  FURCHASED  (B) GROSS COST OR SALES PRICE OTHER BASIS  17.  0.  0.  0.  17.  CAPITAL GAINS DIVIDENDS FROM PART IV  CAPITAL TO FORM 990-PF, PART I, LINE 6A  (A) REVENUE PER BOOKS  (C) REVENUE PER BOOKS  (A) REVENUE PER BOOKS  (C) ADJUSTED NET INVESTMENT ADJUSTED NET INCOME  NORTHWESTERN MUTUAL WEALTH MANAGEMENT - MUNI  30,605.  0.	PUBLICLY	Y TRADED SECURIT	 'IES				PU	JRCHASED				
1,464,532.		GROSS	COST O		EXI	PENSE	OF		~	~		
DESCRIPTION OF PROPERTY  ACQUIRED ACQUIRED DATE SOLID  CASH IN LIEU  (B) (C) (D) (E) (F)  GROSS COST OR EXPENSE OF DEPREC. GAIN OR LOSS  17. 0. 0. 0. 0. 17.  CAPITAL GAINS DIVIDENDS FROM PART IV  CAPITAL TO FORM 990-PF, PART I, LINE 6A 152,234.  FORM 990-PF INTEREST ON SAVINGS AND TEMPORARY CASH INVESTMENTS STATEMENT 2  (A) (B) (C)  REVENUE PER BOOKS NET INVESTMENT ADJUSTED NET INCOME  NORTHWESTERN MUTUAL WEALTH MANAGEMENT - MUNI 30,605. 0.	-	<del></del>			•	SALE	0.	<del>-</del>		GAIN	-	
GROSS COST OR EXPENSE OF DEPREC. GAIN OR LOSS  17. 0. 0. 0. 0. 17.  CAPITAL GAINS DIVIDENDS FROM PART IV 2,123.  TOTAL TO FORM 990-PF, PART I, LINE 6A 152,234.  FORM 990-PF INTEREST ON SAVINGS AND TEMPORARY CASH INVESTMENTS STATEMENT 2.  (A) (B) (C) ADJUSTED NET INVESTMENT ADJUSTED NET INCOME  NORTHWESTERN MUTUAL WEALTH MANAGEMENT - MUNI 30,605. 0.		TION OF PROPERTY	, _								DATE	SOLD
GROSS SALES PRICE OTHER BASIS SALE DEPREC. GAIN OR LOSS  17. 0. 0. 0. 0. 17.  CAPITAL GAINS DIVIDENDS FROM PART IV 2,123.  TOTAL TO FORM 990-PF, PART I, LINE 6A 152,234.  FORM 990-PF INTEREST ON SAVINGS AND TEMPORARY CASH INVESTMENTS STATEMENT 2  (A) (B) (C) ADJUSTED NET INVESTMENT INCOME NET INCOME  NORTHWESTERN MUTUAL WEALTH MANAGEMENT MUTUAL WEALTH MUTUAL WEALTH MANAGEMENT MUTUAL WEALTH MUTUAL	CASH IN	LIEU					PÜ	IRCHASED				
CAPITAL GAINS DIVIDENDS FROM PART IV  2,123.  TOTAL TO FORM 990-PF, PART I, LINE 6A  FORM 990-PF INTEREST ON SAVINGS AND TEMPORARY CASH INVESTMENTS STATEMENT  (A)  REVENUE PER BOOKS  NORTHWESTERN MUTUAL WEALTH MANAGEMENT - MUNI  30,605.  0.		GROSS	COST O		EXE	PENSE	OF		c.	GAIN		ss
TOTAL TO FORM 990-PF, PART I, LINE 6A  152,234.  FORM 990-PF INTEREST ON SAVINGS AND TEMPORARY CASH INVESTMENTS STATEMENT  (A)  REVENUE PER BOOKS  NORTHWESTERN MUTUAL WEALTH MANAGEMENT - MUNI  30,605.  152,234.	_	17.		0	•		0.		0.			17.
FORM 990-PF INTEREST ON SAVINGS AND TEMPORARY CASH INVESTMENTS STATEMENT 2  (A)  REVENUE PER BOOKS  NORTHWESTERN MUTUAL WEALTH MANAGEMENT - MUNI  30,605.  (B)  NET INVESTMENT ADJUSTED NET INCOME	CAPITAL	GAINS DIVIDENDS	FROM PAR	T IV							2,	123.
SOURCE (A) (B) (C) REVENUE NET INVESTMENT ADJUSTED PER BOOKS INCOME NET INCOME  NORTHWESTERN MUTUAL WEALTH MANAGEMENT - MUNI 30,605. 0.	TOTAL TO	O FORM 990-PF, P	ART I, LI	NE 62	A						152,	234.
SOURCE PER BOOKS NET INVESTMENT ADJUSTED NORTHWESTERN MUTUAL WEALTH MANAGEMENT - MUNI 30,605.	FORM 990	0-PF INTEREST C	N SAVINGS	AND	ТЕМРО	RARY	CAS	H INVEST	MENTS	STA	темеит	. 2
MANAGEMENT - MUNI 30,605. 0.	SOURCE				REVENU		NE	T INVEST			DJUSTE	
TOTAL TO PART I, LINE 3 30,605. 0.			LTH		30,	605.			0.			
	TOTAL TO	O PART I, LINE 3	-		30,	605.			0.		<u> </u>	

FORM 990-PF	DIVIDENDS	AND INTER	REST	FROM SECU	JRITIES	STATEMENT 3
SOURCE	GROSS AMOUNT	CAPITAL GAINS DIVIDEND		(A) REVENUE PER BOOKS	(B) NET INVEST MENT INCOM	
NORTHWESTERN MUTUAL WEALTH MANAGEMENT NORTHWESTERN	89,746.	2,12	23.	87,623	87,623	3.
MUTUAL WEALTH MANAGEMENT - MUNI	1,035.		0.	1,035	5. (	).
TO PART I, LINE 4	90,781.	2,12	23. ====================================	88,658	87,623	3.
FORM 990-PF		OTHER I	NCOM	E		STATEMENT 4
DESCRIPTION			REV	A) ENUE BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME
NORTHWESTERN MUTUAL GRANT FUNDS RETURNE				39,141.	39,141. 2,000.	
TOTAL TO FORM 990-P	F, PART I,	LINE 11		41,141.	41,141.	
FORM 990-PF		LEGAL	FEE	S		STATEMENT 5
DESCRIPTION		(A) EXPENSES PER BOOKS		(B) INVEST- T INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
LEGAL		1,669.		1,669.		0.
TO FM 990-PF, PG 1,	LN 16A	1,669.		1,669.		

FORM 990-PF U.S. AND STATE/CIT	ry gove	RNMENT	OBLIGATIONS	STATEMENT	10
DESCRIPTION	U.S. GOV'T	OTHER GOV'T	BOOK VALUE	FAIR MARKE VALUE	т
BONDS-SEE ATTACHED SCHEDULE			1,378,673.	1,389,6	42.
TOTAL U.S. GOVERNMENT OBLIGATIONS		_			
TOTAL STATE AND MUNICIPAL GOVERNMENT	OBLIGA	TIONS	1,378,673.	1,389,6	42.
TOTAL TO FORM 990-PF, PART II, LINE 1	10A	=	1,378,673.	1,389,6	42.
FORM 990-PF CORPO	ORATE S	TOCK		STATEMENT	11
DESCRIPTION			BOOK VALUE	FAIR MARKE VALUE	т
STOCKS-SEE ATTACHED SCHEDULE		_	1,042,900.	1,408,09	
TOTAL TO FORM 990-PF, PART II, LINE 1	LOB	=	1,042,900.	1,408,0	91.
FORM 990-PF OTHER	INVEST	MENTS		STATEMENT	12
DESCRIPTION	VALUA METH		BOOK VALUE	FAIR MARKE VALUE	T
MUTUAL FUNDS-SEE ATTACHED SCHEDULE ANNUITY	T T			85. 29.	
	_		3,662,514.		

FORM 990-PF	ACCOUNTI	NG FEES	STATEMENT 6			
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME		(D) CHARITA PURPOS		
ACCOUNTING	6,125.	6,125.			0.	
TO FORM 990-PF, PG 1, LN 16B	6,125.	6,125.			0.	
FORM 990-PF (	OTHER PROFES	SIONAL FEES	S	TATEMENT	7	
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITA PURPOS:		
INVESTMENT ADVISOR FEES	34,839.	34,839.			0.	
TO FORM 990-PF, PG 1, LN 16C	34,839.	34,839.			0.	
FORM 990-PF	TAX	ES	S'	TATEMENT	8	
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITA PURPOS:		
EXCISE TAXES FOREIGN TAXES	662. 708.	0. 708.			0.	
TO FORM 990-PF, PG 1, LN 18	1,370.	708.			0.	