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.

DATE OF COUNTING WE MARGARET M ANDERSON FOUNDATION, MARTHA A VAN DE VEN TRUSTEE **Remarks and service 70 Date nature from the otherwise to residence of the counting of the c	For cale	ndar year 2017 or tax year beginning		, and ending		
FOUNDATION MARTHA A VAN DE VEN TRUSTEE				A Employer identification	number	
Tree matter of the continued and an one developed to see a accessory Tree			65 6054006			
176.5 MEDINA ROAD 12-475-0787 1						
City or town, State or promise, country, and 2P or friengs nostal code LONG LAKE, MN 55356-9579 6 Creek all that apply:		·	(33)	Tioonvalle		97
Cinck all that apply: I contain term			ostal code			, , ,
6 Check all that apply:			osiai coac		tr exemption application is p	ending, check here
Final return			Initial return of a f	ormer public charity	D 1. Foreign organizations	s, check here
H. Check type of organization. Section 597(b) (1) exempt rovate foundation Section 497(b) 1 nonexempt charable I rest Section 497(b) 1 nonexempt charable I rest Terr market value of all assets at end of year Terr market value of all assets at end of year Terr market value of all assets at end of year Terr market value of all assets at end of year Other (specify) Section 497(b) (1) (A), check three I the foundation on a 60-month terrimanation under section 507(b) (1)(B), check three I the foundation on a 60-month terrimanation under section 507(b) (1)(B), check three I the foundation on a 60-month terrimanation under section 507(b) (1)(B), check three I the foundation on a 60-month terrimanation under section 507(b) (1)(B), check three I the foundation on a 60-month terrimanation under section 507(b) (1)(B), check three I the foundation on a 60-month terrimanation under section 507(b) (1)(B), check three I the foundation on a 60-month terrimanation under section 507(b) (1)(B), check three I the foundation on a 60-month terrimanation under section 507(b) (1)(B), check three I the foundation on the form 500 (1)(B), check three I the foundation of t		Final return		,		
Section 497(a)(1) nonexempt charitable trials X		X Address change	Name change		2 Foreign organizations me check here and attach co	eeting the 85% test, emputation
Section 497(a)(1) nonexempt charabable russ X Other travable private loundation Y Cash Cas				110	E If private foundation sta	tus was terminated
(from Part II, col. (c), line 16) ★ 4, 796, 605 Part II, column (d) must be on cash bases. Part II Analysis of Revenue and Expenses Analysis of Revenue and Expenses				ation O		
Name				Accrual		
Part Analysis of Revenue and Expenses (a) Revenue and Expenses (c) Adjusted net income					under section 507(b)(1)	(B), check here
Ches total of arrowants in colours (a) displacements and colours ((d) D. ab
1 Contributions, grits, grants, etc., received 2 Cheek N X of insulation is not required is track in 8 of 3 calculative returning in the structure of the s	41% CT1/C	The total of amounts in columns (b), (c), and (d) may not				for charitable purposes
Check ► X I'll the bundation actor required to stack of 6 interest on awangs and temporary card in washingtons. 1	1	Contributions, gifts, grants, etc., received			N/A	1 1 2 3 3 3 4 3 4 3 4 3
Section Comparison of officers, descriptions and values Comparison of officers, descriptions and values Comparison of officers, descriptions Comparison of officers,	2			Sales Sales		
Sa Gross rents Description Sample	3	Interest on savings and temporary cash investments				
B Net rental income or (loss) 68 Net gain or (loss) from sale of assets not on line 10 b Gross sales price for all 599, 319. 7 Capital gain est income (from Part IV, line 2) 8 Net short-ferm capital gain 9 Income modifications 10a and dislovances b Liess Cost of goods sold c Gross profit or (loss) 11 Other income 12 Total Add lines 1 through 11 95, 285. 90, 319. 13 Compensation of officers, directors, structers, etc. 14 Other employee saleries and wages 15 Pension plans, employee benefits 8 16a Legal fees b Accounting fees CELYTHIT 3 c Other profissional RECELYTHIT 3 c Other profissional Receives and the sale and the sal	4	Dividends and interest from securities	71,479.	67,309.		STATEMENT 1
68 Net guin or flood) from sale of assets not on line 10 599, 319. 7 Capital gain net income (from Part IV, line 2) 23,010. 8 Net short-term capital gain 9 Income modifications 10a Gross state less returns 10a Gross state less returns 10a Gross profit or (floss) 11 Other income 12 Total Add lines 1 through 11 95,285. 90,319. 13 Compensation of officers, directors, fusities, are 14 Other employee salaries and wages 15 Pension plans, employee benefits 16a Legal fees 16 Accounting fees 17 Total Add lines 13 Inrough 23 27, 874. 27, 874. 0. 0. 17 Interest 18 Total Fees 18 Accounting fees 18 Accountin	5	a Gross rents	with contract		(() Y MANAGE ()	
Capacia sakes pince for all 599, 319.		` '	02 010			
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Net stirt tell it depleted gall Income modifications Gross sales less returns b Less Cost of goods sold c Gross profit or (loss) It Other income Type C	i iei			23 010		
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10a and allowances b Less Cost of goods sold c Gross profit or (loss) 11 Other income 796.	1.	. •		100		
c Gross profit or (loss) 11 Other income 12 Total Add lines 24 and 25 13 Compensation of officers, directors, rustees, etc 14 Other employee safaries and wages 15 Pension plans, employee benefits 16 Legal fees 17 Interest of Other professional feet CENTRY 3 3, 290. 1,645. 0. 17 Interest of Depreciation and depletion 22 Printing and publications 23 Other expenses 24 Total operating and administrative expenses and disbursements Add lines 24 and 25 25 Contributions, girts, grants paid 26 Total expenses and disbursements Add lines 24 and 25 27 Subtract line 26 from line 12. a Excess of revenue over expenses and disbursements b Net investment income (if negative, enter -0-) 18 Compensation of officers, directors, rustees, etc 19 Questions (in the professional depletion) 27 Subtract line 26 from line 12. 28 Excess of revenue over expenses and disbursements b Net investment income (if negative, enter -0-) 28 Contributions (if negative, enter -0-) 29 Cadjusted net income (if negative, enter -0-) 20 Adjusted net income (if negative, enter -0-) 20 Cadjusted net income (if negative, enter -0-)	108	Gross sales less returns				74.7 Table 1. 14.7
11 Other income 796. 0. STATEMENT 2	t	Less Cost of goods sold				
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13 Compensation of officers, directors, trustees, etc 14 Other employee salaries and wages 15 Pension plans, employee benefits 16a Legal fees 15 Accounting fees 17 Interest 18 Taxes 19 Depreciation and depletion 20 Occupancy 21 Travel, conferences and disbursements 22 Printing and publications 23 Other expenses 24 Total operating and administrative expenses Add lines 13 through 23 25 Contributions, gifts, grants paid 26 Total expenses and disbursements Add lines 24 and 25 27 Subtract line 26 from line 12. 28 Excess of revenue over expenses and disbursements 5 N/A 5 N/A 5 Occupancy 5 Occupancy 5 Occupancy 6 Occupancy 7 Occupancy 7 Occupancy 8 Occupancy 9 Occu	11					
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16a Legal fees b Accounting fees c Other professional fees 17 Interest 18 Taxes 19 Depreciation and depletion 20 Occupancy 21 Travel, configures and line stative expenses Add lines 13 through 23 25 Contributions, gifts, grants paid 25 Contributions, gifts, grants paid 26 Total expenses and disbursements 27 Add lines 24 and 25 28 Subtract line 26 from line 12. 29 Excess of revenue over expenses and disbursements b Net investment income (if negative, enter -0-) c Adjusted net income (if negative, enter -0-)	l l				<u> </u>	
b Accounting fees CENSTMT 3 27,874. 27,874. 0. c Other professional fee CENSTMT 4 3,290. 1,645. 0. 17 Interest 18 Taxes 19 MAY 20 STMT 5 11 2,3333. 829. 0. 19 Depreciation and depletion 220 Occupancy 21 Travel, conferences add meetings 23 Other expenses 24 Total operating and administrative expenses Add lines 13 through 23 33,497. 30,348. 0. 25 Contributions, gifts, grants paid 295,000. 295,000. 295,000. 26 Total expenses and disbursements Add lines 24 and 25 328,497. 30,348. 295,000. 27 Subtract line 26 from line 12. a Excess of revenue over expenses and disbursements b Net investment income (if negative, enter -0-) 59,971. C Adjusted net income (if negative, enter -0-)				,		
Interest NAY 2 STMT 5 2,333. 829. 0. Interest NAY 2 STMT 5 2,333. 829		Accounting tops 3	27.874.	27.874.		0.
Interest NAY 2 STMT 5 2,333. 829. 0. Interest NAY 2 STMT 5 2,333. 829	XD C	Other professional fee LLISEMT 4				
18 Taxes 19 Depreciation and depletion 20 Occupancy 21 Travel, conferences and directinus 22 Printing and publications 23 Other expenses 24 Total operating and administrative expenses Add lines 13 through 23 25 Contributions, gifts, grants paid 26 Total expenses and disbursements Add lines 24 and 25 27 Subtract line 26 from line 12. a Excess of revenue over expenses and disbursements b Net investment income (if negative, enter -0-) C Adjusted net income (if negative, enter -0-) N/A		Interest 🛱				
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22 Printing and publications 23 Other expenses 24 Total operating and administrative expenses Add lines 13 through 23 25 Contributions, gifts, grants paid 26 Total expenses and disbursements Add lines 24 and 25 27 Subtract line 26 from line 12. 28 Excess of revenue over expenses and disbursements b Net investment income (if negative, enter -0-) 29 C Adjusted net income (if negative, enter -0-) 20 N/A	19					
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25 Contributions, gifts, grants paid 26 Total expenses and disbursements Add lines 24 and 25 27 Subtract line 26 from line 12. a Excess of revenue over expenses and disbursements b Net investment income (if negative, enter -0-) c Adjusted net income (if negative, enter -0-) C Adjusted net income (if negative, enter -0-) N/A	era		33,497.	30.348.		0.
26 Total expenses and disbursements Add lines 24 and 25 27 Subtract line 26 from line 12. a Excess of revenue over expenses and disbursements b Net investment income (if negative, enter -0-) c Adjusted net income (if negative, enter -0-) N/A		•				
27 Subtract line 26 from line 12. a Excess of revenue over expenses and disbursements b Net investment income (if negative, enter -0-) c Adjusted net income (if negative, enter -0-) N/A	26					
a Excess of revenue over expenses and disbursements b Net investment income (if negative, enter -0-) c Adjusted net income (if negative, enter -0-) N/A	\perp		328,497.	30,348.		295,000.
b Net investment income (if negative, enter -0-) c Adjusted net income (if negative, enter -0-) N/A						
c Adjusted net income (if negative, enter -0-)		i	-233,212.	F0 051		
	- 1			59,971.	37/3	
			L and contractions		N/A	rem 990-DE (0047)

Form 990-PF (2017) FOUNDATION, MARTHA A VAN DE VEN,

65-6254236

TRUSTEE

Page 2

Г	art	Balance Sheets Attached schedules and amounts in the description	Beginning of year	į E	End of year
	art	column should be for end-of year amounts only	(a) Book Value	(b) Book Value	(c) Fair Market Value
	1	Cash - non-interest-bearing			
	2	Savings and temporary cash investments	98,706.	189,82	8. 189,828.
	3	Accounts receivable			
		Less: allowance for doubtful accounts			2,185.
	4	Pledges receivable			
		Less: allowance for doubtful accounts			
	5	Grants receivable			
	6	Receivables due from officers, directors, trustees, and other			
		disqualified persons			
	7	Other notes and loans receivable	, ,	ļ 	· · · · · · · · · · · · · · · · · · ·
		Less; allowance for doubtful accounts			
ets	8	Inventories for sale or use			_
Assets	9	Prepaid expenses and deferred charges			
٩	ĺ	Investments - U.S. and state government obligations	0.654.430	0 206 00	
	l	Investments - corporate stock STMT 6	2,654,430.	2,326,02	0. 4,604,592.
	1	Investments - corporate bonds	21 3112 39 39	\$ /m/	3 400 00 000000
	11	Investments - land, buildings and equipment basis			
		Less accumulated depreciation			
	12	Investments - mortgage loans			
	13	Investments - other		S00000 S0000	Y200 70 07 07 07 07 0 000 0 000 0 0 0 0 0
	14	Land, buildings, and equipment basis			
		Less accumulated depreciation			
	15	Other assets (describe			
	16	Total assets (to be completed by all filers - see the	2 752 126	0 515 04	4 506 605
_		instructions. Also, see page 1, item I)	2,753,136.	2,515,84	
		Accounts payable and accrued expenses	9,621.	5,54	<u> </u>
	18	Grants payable			
es	19	Deferred revenue			
Liabilities	20	Loans from officers, directors, trustees, and other disqualified persons			_
Liak	21	Mortgages and other notes payable		-	
	22	Other liabilities (describe)			
	00	Total liabilities (add lines 17 through 22)	9,621.	5,54	5
_	23		9,021.	3,34	
		Foundations that follow SFAS 117, check here		11	
es	24	and complete lines 24 through 26, and lines 30 and 31			
nce	25	Unrestricted Temporarily restricted		<u> </u>	
ala	26	Permanently restricted			
Assets or Fund Balanc	20	Foundations that do not follow SFAS 117, check here	<u> </u>		
F		and complete lines 27 through 31.			
ō	27	Capital stock, trust principal, or current funds	4,026,688.	3,789,50	q
ets	28	Paid-in or capital surplus, or land, bldg., and equipment fund	0.		0.
Ass	29	Retained earnings, accumulated income, endowment, or other funds	-1,283,173.	-1,279,20	
Net/	30	Total net assets or fund balances	2,743,515.	2,510,30	3.
Z		7000, 700, 2000, 01, 12, 12, 20, 20, 20, 20, 20, 20, 20, 20, 20, 2			
	31	Total liabilities and net assets/fund balances	2,753,136.	2,515,84	8.
P	art				
_	Total	and appelle as found belongs of house of the Dark Hardwarf (A) I also			Г—————
		net assets or fund balances at beginning of year - Part II, column (a), line	JU		2 742 515
		t agree with end-of-year figure reported on prior year's return)			1 2,743,515.
		amount from Part I, line 27a increases not included in line 2 (itemize)			2 -233,212.
		ines 1, 2, and 3		———	3 0. 4 2,510,303.
		pases not included in line 2 (itemize)			
		net assets or fund balances at end of year (line 4 minus line 5) - Part II, co	olumn (b), line 30	————	6 2,510,303.
ے		Tall II, Ct	7.0 10/1 min 00		2/320/330

	DATION, MARTHA				STEE		5-625	<u>4236</u>	Page 3
<u> </u>	nd Losses for Tax on li				E ATTACHE	D S	TATEM	ENT	
	ne kind(s) of property sold (for ex ehouse; or common stock, 200 sh		te,	(b) i	low acquired - Purchase - Donation		acquired Jay, yr.)	(d) Dai (mo., d	te sold lay, yr.)
1a				1 -					
b				1					
C								-	
d									
e									
(e) Gross sales price	(f) Depreciation allowed (or allowable)	10,	st or other basis expense of sale				Gain or (loss s (f) minus i		
a									
b				Ĭ					
С		<u> </u>							
<u>d</u>		ļ							
e 599,319.			576,30	19.				23	,010.
Complete only for assets showing	gain in column (h) and owned by	the foundation	on 12/31/69.				Col. (h) gaın		
(i) FMV as of 12/31/69	(j) Adjusted basis as of 12/31/69		cess of col. (1) col. (j), if any				not less that (from col. (
<u>a</u>									
Ь		-							
С									
d									
_e								23	,010.
2 Capital gain net income or (net cap	ital loss) $ \begin{cases} If gain, also entions \\ If (loss), enter - \end{cases} $	er in Part I, line 0- in Part I, line	7 7	}[2			23	,010.
3 Net short-term capital gain or (loss	•								
If gain, also enter in Part I, line 8, c		. ,		}					
If (loss), enter -0- in Part I, line 8		<u> </u>			_3		N/A	_	
Part V Qualification Un	der Section 4940(e) foi	r Reduced	lax on Net	inve	stment Incor	ne			
(For optional use by domestic private f	oundations subject to the section	4940(a) tax on	net investment in	come.)				
If section 4940(d)(2) applies, leave this	s part blank.								
Was the foundation liable for the section		. , , ,	·	lods				Yes	X No
If "Yes," the foundation doesn't qualify 1 Enter the appropriate amount in ea				ntrion					
	1	mstructions bei	ore making any ei			1	<u> </u>	(4)	
Base period years	(b) Adjusted qualifying di	stributions	Net value of no	(C) nochar	table-use assets		Distrib	(d) oution ratio	, ,,
Calendar year (or tax year beginning	,, · · · · · · · · · · · · · · · · ·	38,376.	Net value of the		207,556.		(col. (b) alv	ided by col.	
2016 2015		98,268.			362,270.				68538 68374
2013		75,000.		_	342,457.				63328
2013		12,000.			826,517.				632 <u>43</u>
2012		33,158.			536,333.				65932
2012		55,150.			, , , , , , , , , , , , , , , , , , , ,		·	• 0 (33334
2 Total of line 1, column (d)								3 '	29415
3 Average distribution ratio for the 5-	year hace nerind - divide the total	on line 2 by 5 (or by the number	or of v	oare	2		• • •	27413
the foundation has been in existence		on line 2 by 5.	o, or by the number	ci Oi y	cars	3		. 0 (65883
the realisation has been in existent	o ir icas tilari o yeara					 		•••	33003
4 Enter the net value of noncharitable	-use assets for 2017 from Part X,	, line 5				4		4,603	,522.
5 Multiply line 4 by line 3						5		303	,294.
6 Enter 1% of net investment income	(1% of Part I, line 27b)					6			600.
	,								
7 Add lines 5 and 6						7		303	,894.
8 Enter qualifying distributions from I						8		295	,000.
If line 8 is equal to or greater than I See the Part VI instructions.	ine 7, check the box in Part VI, lin	e 10, and comp	iete that part usin	g a 1%	tax rate.				

1	Form 990-PF (2017) FOUNDATION, MARTHA A VAN I		65-625	
Discretification of determination letter:	<u> </u>		948 - see	instructions)
b Domestic foundations that meet the section 490(e) requirements in Part V, check here ▶ □ and enter 1% of Part I, line 27b All other domestic foundations enter 2% of line 27b. Exempt foreign organizations, enter 4% of Part I, line 12, cot (b). 2 Tax under section 511 (domestic section 4947(a)(1) trusts and faxable foundations only, others, enter -0-) 3 Add lines 1 and 2 3 Subtlet A (income) lax (domestic section 4947(a)(1) trusts and faxable foundations only, others, enter -0-) 5 Tax based on investment a income Subtract line 4 from line 3. It zero or less, enter -0-) 5 Tax based on investment and 2016 overpayment credited to 2017 5 Exempt foreign organizations - tax withheld at source 6 Exe past with application for excession of time to like (Form line 3. It zero or less, enter -0-) 5 Exempt foreign organizations - tax withheld at source 6 Exe past with application for excession of time to like (Form line 3. It zero or less, enter -0-) 6 Exempt foreign organizations - tax withheld at source 6 Exempt foreign organizations - tax withheld at source 7 Total credits and syments - Add lines 6 storous his interior. 8 Bacter If the total of lines 5 and 8 is more than line 7, enter annount owed 9 Tax due If the total of lines 5 and 8 is more than line 7, enter annount owed 9 Tax due If the total of lines 5 and 8 is more than line 7, enter annount owed 10 Everywhere. If line 7 is more than the total of lines and 8, vinter the annount of which the total of lines and 8, vinter the annount of which the total of lines and 8, vinter the annount of lines 10 to be Gredited to 2010 estimated tax 10 Everywhere. If line 7 is more than the total of lines and 8, vinter the annount of which the foundation attempt to influence any national, state, or local lagistation or do it patients that annount of lines 10 to	1a Exempt operating foundations described in section 4940(d)(2), check here	and enter "N/A" on line 1.		- 7
of Part I, line 27b 4 All other domestic bondishons enter 2% of line 27b. Exempt foreign organizations, enter 4% of Part I, line 12, cot (b), 2 Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only; others, enter -0-) 3 Add fines 1 and 2 3 Tax 4 Shabed on investment income Subtract line 4 from line 3.11 zero or less, enter -0-) 5 Tax have don investment income Subtract line 4 from line 3.11 zero or less, enter -0-) 5 Tax have don investment income Subtract line 4 from line 3.11 zero or less, enter -0-) 5 Tax have don investment income Subtract line 4 from line 3.11 zero or less, enter -0-) 5 Tax based on investment sand 2016 overpayment credited to 2017 6 Exempt foreign organizations - tax withheld at source 6 Do 0. 7 Total credits and payments Add lines 56 attrough 6d 7 Total credits and payments Add lines 56 attrough 6d 8 Error any penalty for andropsyment of estimated tax. Phote there in I Form 2220 is attached 9 Tax due II lite fold clines 5 and 5 is more than line 7, inter amount owed 9 Tax due II lite fold clines 5 and 5 is more than lite 100 lines 5 and 6, enter the amount owerpaid 10 Overpayment. If line 7 is more than the total of lines 5 and 6, enter the amount owerpaid 10 Overpayment. If line 7 is more than the total of lines 5 and 6, enter the amount owerpaid 10 Dovepayment. If line 7 is more than the total or lines 5 and 6, enter the amount owerpaid 10 Overpayment. If line 7 is more than the total or lines 5 and 6, enter the amount owerpaid 10 Overpayment. If line 7 is more than the total or lines 5 and 6, enter the amount owerpaid 10 Overpayment. If line 7 is more than the total or lines 5 and 6, enter the amount owerpaid 10 Overpayment. If line 7 is more than the total or lines 5 and 6, enter the amount owerpaid 10 Overpayment. If line 7 is more than 100 during the year (enter the amount owerpayment of the 10 during the year (enter the amount of the 10 during the year (enter the amount of the	Date of ruling or determination letter: (attach copy of le	etter if necessary-see instructions)		
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9 Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for calendar year 2017 or the tax year beginning in 2017? See the instructions for Part XIV. If "Yes," complete Part XIV 10 Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses 10 X		· - ,		8b X
year 2017 or the tax year beginning in 2017? See the instructions for Part XIV. If "Yes," complete Part XIV 10 Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses 10 X		ning of section 4942(i)(3) or 4942(i)(5) for cale	ndar	
10 Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses 10 X				9 X
		•		
	The state of the s		F	orm 990-PF (2017)

Form 990-PF (2017) FOUNDATION, MARTHA A VAN DE VEN, Part VII-A Statements Regarding Activities (continued) TRUSTEE

65-6254236

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	(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	<u> </u>
	Website address ► N/A			
14	The books are in care of ► MARTHA VAN DE VEN Telephone no. ► (612) 4			
	Located at ► 1765 MEDINA WAY, LONG LAKE, MN ZIP+4 ►55	356	<u> 95</u>	<u>79 </u>
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - check here			· 🔲
	and enter the amount of tax-exempt interest received or accrued during the year		/A	
16	At any time during calendar year 2017, did the foundation have an interest in or a signature or other authority over a bank,	$\overline{}$	Yes	No
	securities, or other financial account in a foreign country?	16		X
	See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes," enter the name of the	8	(,
De	foreign country	SE .		
ع دراز	art VII-B Statements Regarding Activities for Which Form 4720 May Be Required	123.57		
	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.	(4)	Yes	No
1a	During the year, did the foundation (either directly or indirectly):		1 25	
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person? Yes X No	24.	\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\	學以
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from)		:	4.1
	a disqualified person? Yes X No (2) Surpreb peeds appropriately a facilities to (as accept them from) a descripted accept?			
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? Yes X No Yes X No			
		3000		
	(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)? Yes X No	Y618	ant or at the	
	(6) Agree to pay money or property to a government official? (Exception. Check "No"			કોન્સ્ટ્રો કોન્સ્ટ્રો
	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.) Yes X No		·	
ь	If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations	1223	de Succession	
U	section 53.4941(d)-3 or in a current notice regarding disaster assistance? See instructions N/A	1b	(23m/k/	
	Organizations relying on a current notice regarding disaster assistance, check here	"	<u>, 187</u>	學公園
c	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	s.,	
·	before the first day of the tax year beginning in 2017?	1c	100	$\overline{\mathbf{x}}$
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation	777	14.50	
	defined in section 4942(j)(3) or 4942(j)(5)).	1/4		
а	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		3	3,5
	before 2017?		(4) (4)	*
	If "Yes," list the years \blacktriangleright	,	, 1	No.
b	Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2) (relating to incorrect		,	
	valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer "No" and attach	, "		
	statement - see instructions.) N/A	2b		
C	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here.			
	>			
3a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time			
	during the year?			
b	If "Yes," did it have excess business holdings in 2017 as a result of (1) any purchase by the foundation or disqualified persons after			
	May 26, 1969; (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7)) to dispose			
	of holdings acquired by gift or bequest; or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Schedule C,			
	Form 4720, to determine if the foundation had excess business holdings in 2017.) N/A	3b		
	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a		X
þ	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	لے۔	X
	Fo	rm 99 0	-PF	(2017)

DONALD W & MARGARET M AN	DERSON				
FOUNDATION, MARTHA A VAN		STEE	65-62542	36 Pa	age <u>6</u>
Part VII-B Statements Regarding Activities for Which F	orm 4720 May Be	Required (contin	ued)		
5a During the year, did the foundation pay or incur any amount to:			L	Yes	No
(1) Carry on propaganda, or otherwise attempt to influence legislation (section	1 4945(e))?	Y	es X No		- 1
(2) Influence the outcome of any specific public election (see section 4955); o	r to carry on, directly or inc				1
any voter registration drive?			es X No		
(3) Provide a grant to an individual for travel, study, or other similar purposes	?	Y	es X No		ł
(4) Provide a grant to an organization other than a charitable, etc., organization	n described in section				
4945(d)(4)(A)? See instructions			es X No		
(5) Provide for any purpose other than religious, charitable, scientific, literary,	or educational purposes, o		·		,
the prevention of cruelty to children or animals?			es X No		
b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify unit		ed in Regulations		4,	
section 53 4945 or in a current notice regarding disaster assistance? See instru			N/A	5b	
Organizations relying on a current notice regarding disaster assistance, check h					<u>.</u> ,
c If the answer is "Yes" to question 5a(4), does the foundation claim exemption fr	om the tax because it mair				1
expenditure responsibility for the grant?		N/A Y	es LNo °.		3.7° 2.73
If "Yes," attach the statement required by Regulations section 53.4945-5(d).					
6a Did the foundation, during the year, receive any funds, directly or indirectly, to	pay premiums on		, (.		32
a personal benefit contract?		Y	es X No		, °,,,,,,
b Did the foundation, during the year, pay premiums, directly or indirectly, on a p	ersonal benefit contract?	•	8 77	6b	X
If "Yes" to 6b, file Form 8870.	hallan turana at a - 0	۳.	□ ▼□	2.	1 3 X
7a At any time during the tax year, was the foundation a party to a prohibited tax s		Y(es X No X	71	Ŷ,
b If "Yes," did the foundation receive any proceeds or have any net income attributed any Detail of the foundation About Officers, Directors, Truster of the foundation About Officers, Directors, Truster of the foundation receive any proceeds or have any net income attributed and proceed and proceeds or have a proceed and proceed and proceeds or have a proceed and proceeds or have a proceed and proceed and proceeds or have a proceed and proceeds or have a proceed and proceed and proceed and proceeds or have a proceed and proceed and proceed and proceed and proceeds or have a proceed and proceed and proceed and proceed		anagere Highly	N/A	7b	—
Paid Employees, and Contractors	es, i oundation w	anagers, mgmy			
1 List all officers, directors, trustees, and foundation managers and th	neir compensation.				
	(b) Title, and average	(c) Compensation	(d) Contributions to	(e) Exper account, o	nșe
(a) Name and address	hours per week devoted to position	(If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	account, o	ither ces
MARTHA VAN DE VEN	TRUSTEE				
1765 MEDINA RD					
LONG LAKE, MN 55356-9579	1.00	0.	0.		0.
2. Companyation of five highest poid and process (attended to the state of the stat	hadadaa laa A Maaaa	INIONE II			
2 Compensation of five highest-paid employees (other than those incl	(b) Title, and average	e, enter "NUNE."	(d) Contributions to	(a) Evnor	
(a) Name and address of each employee paid more than \$50,000	` 'hours per week "	(c) Compensation	employee benefit plans and deferred	(e) Exper account, o	other
NONE	devoted to position		compensation	allowand	es
NONE					
				.	
					
					—

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

Form 990-PF (2017) FOUNDATION, MARTHA A VAN DE VEN, TRUSTEE 65-6254236 Page 7 Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors (continued)

3 Five highest-paid independent contractors for professional services. If none, enter		
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE		
Total number of others receiving over \$50,000 for professional services		▶ 0
Part IX: As Summary of Direct Charitable Activities		
List the foundation's four largest direct charitable activities during the tax year. Include relevant stati	etical information such as the	
number of organizations and other beneficiaries served, conferences convened, research papers pro-	duced, etc	Expenses
1 NONE		
INONE		
		0.
		<u></u>
2		
3		
4		
Part IX-B Summary of Program-Related Investments		
Describe the two largest program-related investments made by the foundation during the tax year or	1 lines 1 and 2.	Amount
1 NONE		
		0.
2		
All other program-related investments. See instructions.		
3 NONE		
y <u></u>		
	-	0.

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Total. Add lines 1 through 3

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P	Art X Minimum Investment Return (All domestic foundations must complete this part. Foreign four	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	4.529.290.
	Average of monthly cash balances	1b	4,529,290.
	Fair market value of all other assets	1c	
d	Total (add lines 1a, b, and c)	1d	4,673,626.
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	4,673,626.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions)	4	70,104.
5	Net value of noncharitable-use assets Subtract line 4 from line 3. Enter here and on Part V, line 4	5	4,603,522.
6	Minimum investment return. Enter 5% of line 5	6	230,176.
P	art XI. Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations an	id certain	
	foreign organizations, check here and do not complete this part.)		
1	Minimum investment return from Part X, line 6	1	230,176.
2a	Tax on investment income for 2017 from Part VI, line 5	2.7%	
b	Income tax for 2017. (This does not include the tax from Part VI.)		
C	Add lines 2a and 2b	2c	1,199.
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	228,977.
4	Recoveries of amounts treated as qualifying distributions	4	0.
5	Add lines 3 and 4	5	228,977.
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	228,977.
P	art XIII Qualifying Distributions (see instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:	2787	
a	Expenses, contributions, gifts, etc total from Part I, column (d), line 26	1a	295,000.
b	Program-related investments - total from Part IX-B	1b	0.
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes	2	
3	Amounts set aside for specific charitable projects that satisfy the:	. 34 /	
а	Suitability test (prior IRS approval required)	3a	
þ	Cash distribution test (attach the required schedule)	3b	<u>.</u>
4	Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8; and Part XIII, line 4	4	<u>295,000.</u>
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment		
	income. Enter 1% of Part I, line 27b	5	0.
6	Adjusted qualifying distributions Subtract line 5 from line 4	6	295,000.
	Note The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation g	ualifies for	the section

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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				228,977.
2 Undistributed income, if any, as of the end of 2017				
a Enter amount for 2016 only			0.	
b Total for prior years:		_		
		0.		
3 Excess distributions carryover, if any, to 2017:				
a From 2012 60,025. b From 2013 57,773.				
b From 2013 57,773.				
c From 2014 63,684. d From 2015 83,618.				
d From 2015 83,618. e From 2016 81,246.	,			,
f Total of lines 3a through e	346,346.		٠,	,
4 Qualifying distributions for 2017 from	340,340.		, , , , , , , , , , , , , , , , , , , 	, ,
Part XII, line 4: ► \$ 295,000 .	<i>'</i> ;	· "·	141	·
a Applied to 2016, but not more than line 2a	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		0.	
b Applied to undistributed income of prior		2		
years (Election required - see instructions)		0.		
c Treated as distributions out of corpus	<u></u>			
(Election required - see instructions)	0.			
d Applied to 2017 distributable amount				228,977.
e Remaining amount distributed out of corpus	66,023.			
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	412,369.			
b Prior years' undistributed income. Subtract		The state of the s		
line 4b from line 2b		0.		
c Enter the amount of prior years'	*\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \			, A
undistributed income for which a notice of deficiency has been issued, or on which			, , , , , , , , , , , , , , , , , , ,	
the section 4942(a) tax has been previously			,	Í
assessed		0.		
d Subtract line 6c from line 6b. Taxable				
amount - see instructions		0.		
e Undistributed income for 2016. Subtract line				
4a from line 2a. Taxable amount - see instr.			0.	
f Undistributed income for 2017. Subtract				
lines 4d and 5 from line 1. This amount must be distributed in 2018				_
7 Amounts treated as distributions out of				0.
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	60,025.	•		
9 Excess distributions carryover to 2018.	· · · · · · · · · · · · · · · · · · ·	-		
Subtract lines 7 and 8 from line 6a	352,344.			
IO Analysis of line 9:				
a Excess from 2013 57,773.				
b Excess from 2014 63,684.				
c Excess from 2015 83,618.				
d Excess from 2016 81, 246.				
e Excess from 2017 66,023.				

DONALD W & MARGARET M ANDERSON Form 990-PF (2017) FOUNDATION. MARTHA A VAN DE VEN TRUSTEE 65-6254236 Page 10 Part XIV | Private Operating Foundations (see instructions and Part VII-A, question 9) N/A 1 a If the foundation has received a ruling or determination letter that it is a private operating foundation, and the ruling is effective for 2017, enter the date of the ruling 4942(1)(5) b Check box to indicate whether the foundation is a private operating foundation described in section 4942(1)(3) or Tax year Prior 3 years 2 a Enter the lesser of the adjusted net (a) 2017 (b) 2016 (c) 2015 (d) 2014 (e) Total income from Part I or the minimum investment return from Part X for each year listed **b** 85% of line 2a c Qualifying distributions from Part XII. line 4 for each year listed d Amounts included in line 2c not used directly for active conduct of exempt activities e Qualifying distributions made directly for active conduct of exempt activities. Subtract line 2d from line 2c Complete 3a, b, or c for the alternative test relied upon: a "Assets" alternative test - enter: (1) Value of all assets (2) Value of assets qualifying under section 4942(j)(3)(B)(i) b "Endowment" alternative test - enter 2/3 of minimum investment return shown in Part X, line 6 for each year listed c "Support" alternative test - enter: (1) Total support other than gross investment income (interest, dividends, rents, payments on securities loans (section 512(a)(5)), or royalties) (2) Support from general public and 5 or more exempt organizations as provided in section 4942(j)(3)(B)(iii) (3) Largest amount of support from an exempt organization Gross investment income Part XV | Supplementary Information (Complete this part only if the foundation had \$5,000 or more in assets at any time during the year-see instructions.) Information Regarding Foundation Managers: a List any managers of the foundation who have contributed more than 2% of the total contributions received by the foundation before the close of any tax year (but only if they have contributed more than \$5,000). (See section 507(d)(2).) b List any managers of the foundation who own 10% or more of the stock of a corporation (or an equally large portion of the ownership of a partnership or other entity) of which the foundation has a 10% or greater interest. NONE Information Regarding Contribution, Grant, Gift, Loan, Scholarship, etc., Programs: Check here 🕨 🛣 if the foundation only makes contributions to preselected charitable organizations and does not accept unsolicited requests for funds. If the foundation makes gifts, grants, etc., to individuals or organizations under other conditions, complete items 2a, b, c, and d. a The name, address, and telephone number or email address of the person to whom applications should be addressed: b The form in which applications should be submitted and information and materials they should include: c Any submission deadlines: d Any restrictions or limitations on awards, such as by geographical areas, charitable fields, kinds of institutions, or other factors;

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PartiXV Supplementary Information (continued) Grants and Contributions Paid During the Year or Approved for Future Payment If recipient is an individual, Recipient show any relationship to Foundation Purpose of grant or Amount any foundation manager or substantial contributor status of contribution Name and address (home or business) recipient a Paid during the year AGRACE HOSPICECARE FOUNDATION N/A PC GENERAL OPERATING 5395 E CHERYL PKWY NEEDS FITCHBURG, WI 53711 10,000. ANDERSON VALLEY ANIMAL RESCUE N/A PC GENERAL OPERATING PO BOX 188 NEEDS BOONVILLE, CA 95415 5,000. BOYS & GIRLS CLUB OF DANE COUNTY N/A PC GENERAL OPERATING 1818 WEST BELTLINE HWY NEEDS MADISON, WI 53713 5,000. CHILDREN'S DYSLEXIA CENTER N/A PC GENERAL OPERATING 301 WISCONSIN AVE NEEDS MADISON, WI 53703 5,000. DANE COUNTY HUMANE SOCIETY N/A PC GENERAL OPERATING 5132 VOGES RD NEEDS MADISON, WI 53718 2,500. SEE CONTINUATION SHEET(S) 295,000. **▶** 3a Total **b** Approved for future payment NONE Total 3Ъ

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inter gross amounts unless otherwise indicated.	Unrelated	ousiness income		ed by section 512, 513, or 514	(e)
	(a) Business	(b) Amount	Exclu- sion	(d) Amount	Related or exempt function income
Program service revenue:	code		code	7 1110 2111	Terrotton moonio
a					
b	1 1		-+		
C			-+		
d			-+		
e					- ·
- Fore and anatomic from accomment accomme					
g Fees and contracts from government agencies			-++		
Membership dues and assessments	 -				
Interest on savings and temporary cash investments			1 1		
Dividends and interest from securities			14	71,479.	
Net rental income or (loss) from real estate:				11,413.	
a Debt-financed property	**************************************	**************************************	FOR 8233378 R		\$366. ' \$256. ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' '
b Not debt-financed property					
Net rental income or (loss) from personal	 -		+		
property Other investment income			18	796.	
Gain or (loss) from sales of assets other	 	·	- - 	7,70.	
than inventory			18	23,010.	
Net income or (loss) from special events			+ = 3		
Gross profit or (loss) from sales of inventory			+		
Other revenue:			+ +		
b			\rightarrow		
С					
d					
e				·	
	17. : 33.3		. **	95,285.	
Subtotal, Add columns (b), (d), and (e)				13 _	95,28
	<u> </u>				
Total Add line 12, columns (b), (d), and (e)	<u> </u>				
Total Add line 12, columns (b), (d), and (e) se worksheet in line 13 instructions to verify calculate.	tions.)	nlishment of F	vemnt [Purnoses	
Total Add line 12, columns (b), (d), and (e) se worksheet in line 13 instructions to verify calculate.	tions.)	plishment of E	xempt F	Purposes	
Total Add line 12, columns (b), (d), and (e) ee worksheet in line 13 instructions to verify calcular Part XVIEBS Relationship of Activi	tions.)	·			plishment of
Total Add line 12, columns (b), (d), and (e) se worksheet in line 13 instructions to verify calcular Part XVI By Relationship of Activi	tions.) ities to the Accom	column (e) of Part XV			plishment of
Total Add line 12, columns (b), (d), and (e) se worksheet in line 13 instructions to verify calcular Part XVIEB: Relationship of Activities The No. Explain below how each activity for which is the columns of the c	tions.) ities to the Accom	column (e) of Part XV			plishment of
Total Add line 12, columns (b), (d), and (e) ee worksheet in line 13 instructions to verify calcular Part XVI B Relationship of Activities ine No.	tions.) ities to the Accom	column (e) of Part XV			plishment of
Total Add line 12, columns (b), (d), and (e) ee worksheet in line 13 instructions to verify calcular Part XVI B Relationship of Activities ine No.	tions.) ities to the Accom	column (e) of Part XV			plishment of
Total Add line 12, columns (b), (d), and (e) se worksheet in line 13 instructions to verify calcular art XV BB Relationship of Activity ne No. Explain below how each activity for whithe foundation's exempt purposes (other	tions.) ities to the Accom	column (e) of Part XV			plishment of
Total Add line 12, columns (b), (d), and (e) ee worksheet in line 13 instructions to verify calcular Part XVI B Relationship of Activities ine No.	tions.) ities to the Accom	column (e) of Part XV			plishment of
Total Add line 12, columns (b), (d), and (e) se worksheet in line 13 instructions to verify calcular Part XV B Relationship of Activities The No. Explain below how each activity for whith the foundation's exempt purposes (other the second columns).	tions.) ities to the Accom	column (e) of Part XV			plishment of
Total Add line 12, columns (b), (d), and (e) se worksheet in line 13 instructions to verify calcular Part XV B Relationship of Activities The No. Explain below how each activity for whith the foundation's exempt purposes (other the second columns).	tions.) ities to the Accom	column (e) of Part XV			plishment of
Total Add line 12, columns (b), (d), and (e) se worksheet in line 13 instructions to verify calcular art XV BB Relationship of Activity ne No. Explain below how each activity for whithe foundation's exempt purposes (other	tions.) ities to the Accom	column (e) of Part XV			plishment of
Total Add line 12, columns (b), (d), and (e) se worksheet in line 13 instructions to verify calcular Part XV B Relationship of Activities The No. Explain below how each activity for whith the foundation's exempt purposes (other the second columns).	tions.) ities to the Accom	column (e) of Part XV			plishment of
Total Add line 12, columns (b), (d), and (e) se worksheet in line 13 instructions to verify calcular Part XV B Relationship of Activities The No. Explain below how each activity for whith the foundation's exempt purposes (other the second columns).	tions.) ities to the Accom	column (e) of Part XV			plishment of
Total Add line 12, columns (b), (d), and (e) ee worksheet in line 13 instructions to verify calcular Part XVI B Relationship of Activities ine No.	tions.) ities to the Accom	column (e) of Part XV			plishment of
Total Add line 12, columns (b), (d), and (e) ee worksheet in line 13 instructions to verify calcular Part XVIEBS Relationship of Activities ine No. Explain below how each activity for whithe foundation's exempt purposes (other)	tions.) ities to the Accom	column (e) of Part XV			plishment of
Total Add line 12, columns (b), (d), and (e) ee worksheet in line 13 instructions to verify calcular Part XVIEB Relationship of Activities ine No. Explain below how each activity for whith the foundation's exempt purposes (other)	tions.) ities to the Accom	column (e) of Part XV			plishment of
Total Add line 12, columns (b), (d), and (e) ee worksheet in line 13 instructions to verify calcular Part XVIEB Relationship of Activities ine No. Explain below how each activity for whith the foundation's exempt purposes (other)	tions.) ities to the Accom	column (e) of Part XV			plishment of
Total Add line 12, columns (b), (d), and (e) ee worksheet in line 13 instructions to verify calcular Part XVIEB Relationship of Activities ine No. Explain below how each activity for whith the foundation's exempt purposes (other)	tions.) ities to the Accom	column (e) of Part XV			plishment of
Total Add line 12, columns (b), (d), and (e) ee worksheet in line 13 instructions to verify calcular Part XVI:B> Relationship of Activities No. Explain below how each activity for whith the foundation's exempt purposes (other).	tions.) ities to the Accom	column (e) of Part XV			plishment of
ine No. Explain below how each activity for whether the foundation's exempt purposes (other than the foundation).	tions.) ities to the Accom	column (e) of Part XV			plishment of
Total Add line 12, columns (b), (d), and (e) ee worksheet in line 13 instructions to verify calcular Part XVIEB → Relationship of Activities ine No. Explain below how each activity for when the foundation's exempt purposes (other)	tions.) ities to the Accom	column (e) of Part XV			plishment of

65-6254236

Form 990-PF (2017) FOUNDATION, MARTHA A VAN DE VEN, TRUSTEE 65-6254236

Part XVII Information Regarding Transfers to and Transactions and Relationships With Noncharitable Exempt Organizations

1 Di	id the org	ganization directly or indir	ectly engage in any	of the followin	g with any other organization	on described in section	on 501(c)	L	res	NO
(0	ther thar	r section 501(c)(3) organi	izations) or in section	on 527, relating	to political organizations?					
a Tr	ansfers t	from the reporting founda	ition to a noncharita	ble exempt org	janization of:					
(1) Cash							1a(1)		Х
•) Other	assets						1a(2)		X
•	•	sactions:								
		of assets to a noncharitat	nla avamnt organiza	tion				1b(1)		X
	-								_	X
•	•	ases of assets from a nor	•	n yanızanını				1b(2)		X
•	•	l of facilities, equipment, o	or other assets					1b(3)		X
•	•	oursement arrangements						1b(4)		
		or Ioan guarantees						1b(5)		X
(6	i) Perfor	mance of services or mei	mbership or fundrai	sıng solıcıtatıo	ns			1b(6)		X
		facilities, equipment, mai						1c		X
d If	the answ	er to any of the above is '	"Yes," complete the	following sche	dule. Column (b) should alv	ways show the fair m	narket value of the goods, ot	her ass	ets,	
or	services	s given by the reporting fo	oundation. If the fou	ndation receive	ed less than fair market valu	e in any transaction	or sharing arrangement, shi	חו שנ		
CC) the value of the goods, o								
1)Line	no	(b) Amount involved	(c) Name o		exempt organization	(d) Description	of transfers, transactions, and sh	arıng arra	angemen	ts
				<u> N/A</u>						
							<u> </u>			
		=.								
		-								
										
						_				
						-				
	_					 				
	_				 -					
	+									
	_				····					
	the four	idation directly or indirect	the officiated with or	rolated to one	or more tax-exempt organi	antiono decembed				
					or more tax-exempt organi.	zations described		Yes	Γ Υ	No
		501(c) (other than section		CHOII JZ/				162		טאו ל
D 11	res, co	mplete the following sche (a) Name of org			(b) Type of organization	г———	c) Description of relationsh			
			anization		(b) Type of organization	, · · · · · · · · · · · · · · · · · · ·	c) Description of relationsh	μ		
		N/A				ļ				
					· · · · · · · · · · · · · · · · · · ·		 			
			 							
										
	Liberton		hat I have everyward thus				A = 6 === 1 to === 1 = d ==			
o:				-	accompanying schedules and sta taxpayer) is based on all informat		May	the IRS d		
Sign Here		Mion		> .	15/18/18		show	n below?	See ins	
1010		PAPULEE	CH G	1/		TRUSTE	E	Yes	L	J No
	Sign	ature of officer or trustee		T	Date	Title	Observation (location		=	
		Print/Type preparer's na	me	Preparer's s	ignature	Date	Check if PTIN			
n-: •				Mulau	re Brandt, CPA	i I	self- employed	. - ·		
Paid		MELAINE BRA		MELAIN	E BRANDT	05/17/18		024		
•	arer	Firm's name ► WIP:	FLI LLP				Firm's EIN ▶ 41-19	444	16	
Use	Only									
		Firm's address ► PO								
		MA:	DISON, WI	53708	-8700		Phone no. 608.27			
							For	m 990)-PF	(2017)

Part IV Capital Gains and Los	ses for Tax on Investment Income			
	describe the kind(s) of property solo ick warehouse; or common stock, 20		(b) How acquired P - Purchase D - Donation	(c) Date acquired (d) Date sold (mo., day, yr.)
1a SCHLIMBERGER LT	D ADR		P	02/08/1711/29/17
b SCHWAB CHARLES			P	02/08/1602/08/17
c DISNEY WALT CO			P	11/19/1210/17/17
d FISERV INC			P	09/04/1302/08/17
e GENERAL ELECTRI	IC .		P	08/04/1111/30/17
GENERAL ELECTRI			P	08/05/1111/30/17
g GENERAL ELECTRI			P	08/15/1111/30/17
h GENERAL ELECTRI			P	09/14/1111/30/17
MICROCHIP TECHN	OLOGY		P	09/04/1311/29/17
UNITED PARCEL S	SERVICE		P	06/25/1302/08/17
k ALLERGAN PLC IN	1C		P	02/18/15/10/17/17
ALLERGAN PLC IN	1C		P	11/19/15/10/17/17
m ALLERGAN PLC IN	IC		P	11/20/15/10/17/17
n				
0				
(e) Gross sales price	(f) Depreciation allowed	(g) Cost or other basis		Gain or (loss)
	(or allowable)	plus expense of sale	(e)	plus (f) minus (g)
a 74,883.		97,227.		-22,344.
b 31,615.		18,793.		12,822.
c 107,997.		52,692.		55,305.
d 26,987.		12,124.		14,863.
e 10,025.		9,240.		785.
<u>1</u> 12,523.		11,500.		1,023.
g 18,793.		16,712.		2,081. 1,954.
$\frac{h}{1}$ 12,523.		10,569. 10,546.		15,521.
106,156.		85,850.		20,306.
k 90,926.		127,093.		-36,167.
$\frac{k}{1}$ 30,309.		45,433.		-15,124.
E0 E1E		78,530.		-28,015.
m 50,515.		,0,330:		20,013.
0				
	g gain in column (h) and owned by t	he foundation on 12/31/69	(1) [(1)	sses (from col (h))
(i) F.M V. as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of cot. (i) over col. (j), if any	Gains (excess	of col. (h) gain over col. (k), not less than "-0-")
2		,,,,,	· · · · · ·	-22,344.
h				12,822.
<u>c</u>				55,305.
d d				14,863.
e -				785.
1			<u> </u>	1,023.
0			-	2,081.
h				1,954.
1				15,521.
1				20,306.
k				-36,167.
1				-15,124.
m				-28,015.
<u>n</u>				
0			<u> </u>	
2 Capital gain net income or (net ca	pital loss) { If gain, also enter If (loss), enter =-0	in Part I, line 7	2	23,010.
3 Net short-term capital gain or (los		d (6):	1	
If gain, also enter in Part I, line 8, If (loss), enter "-0-" in Part I, line 8		j	3	N/A

FOUNDATION, MARTHA A VAN DE VEN, TRUSTEE 65-6254236

3 Grants and Contributions Paid During the Y				
Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager	Foundation status of	Purpose of grant or contribution	Amount
Name and address (nome or business)	or substantial contributor	recipient		
DOMESTIC ABUSE INTERVENTION SERVICES	N/A	PC	GENERAL OPERATING	
2102 FORDEM AVE			NEEDS	
MADISON, WI 53704				10,000
DOMESTIC ABUSE INTERVENTION SERVICES	N/A	PC	GENERAL OPERATING	
2102 FORDEM AVE			NEEDS	
MADISON, WI 53704				5,000
EDGEWOOD COLLEGE	N/A	PC	GENERAL OPERATING	
1000 EDGEWOOD COLLEGE DR			NEEDS	
MADISON, WI 53711		-		5,000
FIRST BAPTIST CHURCH	N/A	PC	GENERAL OPERATING	
518 N FRANKLIN AVE MADISON, WI 53705			NEEDS	10,000
		-		20,000
FIRST PRESBYTERIAN CHURCH OF NAPLES	N/A	PC	GENERAL OPERATING	
250 6TH ST S	["·		NEEDS	
NAPLES, FL 34102				5,000
FRIENDS OF WHA-TV	N/A	PC	GENERAL OPERATING	-
321 UNIVERSITY AVENUE			NEEDS	
MADISON, WI 53706				1,000
GEMMA OPEN DOOR FOR LITERACY	N/A	PC	GENERAL OPERATING	
230 COMMERCIAL STREET BOSTON MA 02109			NEEDS	20,000
				,
GROVES ACADEMY	N/A	PC	GENERAL OPERATING	
3200 MN-100	,,,,,		NEEDS	
ST LOUIS PARK, MN 55416				25,000
HABITAT FOR HUMANITY OF COLLIER	N/A	PC	GENERAL OPERATING	
COUNTY INC			NEEDS	
l1145 TAMIAMI TRAIL E				
NAPLES, FL 34113				50,000
HABITAT FOR HUMANITY OF DANE CNTY INC	N/A	PC	GENERAL OPERATING	
3101 LATHAM DRIVE MADISON, WI 53713			NEEDS	
	•	i	i	10,000

DONALD W & MARGARET M ANDERSON FOUNDATION, MARTHA A VAN DE VEN, TRUSTEE 65-6254236

Part XV Supplementary Information Grants and Contributions Paid During the Year (Continuation) If recipient is an individual, Recipient show any relationship to Foundation Purpose of grant or **Amount** status of contribution any foundation manager Name and address (home or business) recipient or substantial contributor INTERFAITH OUTREACH & COMMUNITY N/A PC GENERAL OPERATING NEEDS PARTNERS 1605 COUNTY RD 101 PLYMOUTH, MN 55447 10,000. LITTLE EAGLE ARTS FOUNDATION N/A PC GENERAL OPERATING NEEDS CHALET COMPLEX 412 1/2 WISCONSIN DELLS, WI 53965 5,000. MIDDLETON OUTREACH MINISTRY PC GENERAL OPERATING N/A NEEDS 3502 PARMENTER ST MIDDLETON, WI 53562 1,000. MONTELLO ENDOWMENT FOR EDUCATION INC N/A PC GENERAL OPERATING 222 FOREST LN. NEEDS MONTELLO, WI 53949 5,000. OPERATION FRESH START PC GENERAL OPERATING N/A 1925 WINNEBAGO ST NEEDS MADISON, WI 53704 15,000. ORONO PUBLIC SCHOOL DISTRICT N/A PC GENERAL OPERATING 685 OLD CRYSTAL BAY RD N NEEDS LONG LAKE, MN 55356 15,000. PC GENERAL OPERATING PAUL B CARBONE COMPREHENSIVE CANCER N/A NEEDS 600 HIGHLAND AVE MADISON, WI 53792 10,000. RIPON COLLEGE N/A PC GENERAL OPERATING NEEDS 300 SEWARD ST RIPON, WI 54971 20,000. RIPON COLLEGE N/A PC GENERAL OPERATING 301 SEWARD ST NEEDS RIPON, WI 54972 2,000. ST JUDE CHILDREN'S RESEARCH HOSPITAL PC N/A GENERAL OPERATING NEEDS 262 DANNY THOMAS PL MEMPHIS TN 38105 1,000. Total from continuation sheets

DONALD W & MARGARET M ANDERSON FOUNDATION, MARTHA A VAN DE VEN, TRUSTEE 65-6254236

3 Grants and Contributions Paid During the	Year (Continuation)			
Recipient	If recipient is an individual,	Foundation	Purpose of grant or	
Name and address (home or business)	show any relationship to any foundation manager or substantial contributor	status of recipient	contribution	Amount
STOUGHTON AREA FOOD PANTRY	N/A	PC	GENERAL OPERATING	
381 E. MAIN ST. STOUGHTON			NEEDS	
STOUGHTON, WI 53589				2,500
THE SALVATION ARMY	N/A	PC	GENERAL OPERATING NEEDS	
3030 DARBO DR MADISON, WI 53714			NEEDS	1,000
				· · · · · · · · · · · · · · · · · · ·
THE SALVATION ARMY	N/A	PC	GENERAL OPERATING	
3031 DARBO DR			NEEDS	
MADISON, WI 53715	<u> </u>			1,000
UNITED WAY OF COLLIER COUNTY INC	N/A	PC	GENERAL OPERATING	
9015 STRADA STELL CT #204			NEEDS	
NAPLES, FL 34109				1,000
UNIVERSITY OF WISCONSIN FDN- BADGER	N/A	PC	GENERAL OPERATING	
FUND			NEEDS	
1848 UNIVERSITY AVE MADISON, WI 53726				1,000
MD1501, W1 33720				1,000
UNIVERSITY OF WISCONSIN STOUT	N/A	PC	GENERAL OPERATING	
FOUNDATION			NEEDS	
712 BROADWAY ST S MENOMONIE, WI 54751				15,000
Allicionis, Wi 31/31				13,000
VERY SPECIAL ARTS	N/A	PC	GENERAL OPERATING	
1709 ABERG AVE	87.4		NEEDS	
MADISON, WI 53704				1,000
NISCONSIN ALZHEIMER'S INSTITUTE	N/A	PC	GENERAL OPERATING	
7818 BIG SKY DR # 215			NEEDS	
MADISON, WI 53719				20,000
	1			
1				
Total from continuation sheets				

			· · · · · · · · · · · · · · · · · · ·		
FORM 990-PF	DIVIDEND	S AND INTER	EST FROM SEC	URITIES :	STATEMENT 1
SOURCE	GROSS AMOUNT	CAPITAL GAINS DIVIDEND	REVENUE		
SVA PLUMB TRUST COMPANY	71,479	•	0. 71,47	9. 67,309	•
TO PART I, LINE 4	71,479	•	0. 71,47	9. 67,309	
FORM 990-PF		OTHER I	NCOME		STATEMENT 2
DESCRIPTION			(A) REVENUE PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME
TAX REFUND			796.	0.	
TOTAL TO FORM 990-P	F, PART I,	LINE 11	796.	0.	
FORM 990-PF		ACCOUNTI	NG FEES		STATEMENT 3
DESCRIPTION		(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
ACCOUNTING FEES		27,874.	27,874	•	0.
TO FORM 990-PF, PG	1, LN 16B	27,874.	27,874	•	0.
FORM 990-PF	O'	THER PROFES	SIONAL FEES		STATEMENT 4
DESCRIPTION		(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
PLUMB MGMT FEES		3,290.	1,645		0.
TO FORM 990-PF, PG	1, LN 16C	3,290.	1,645	•	0.
	=-				

FORM ,990-PF	TAXES		STATEMENT 5	
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
FOREIGN TAX PAID IRS TAXES	829. 1,504.			0.
TO FORM 990-PF, PG 1, LN 18	2,333.	829.		0.

FORM 990-PF	CORPORATE STOCK		STATEMENT 6
DESCRIPTION		BOOK VALUE	FAIR MARKET VALUE
ALPHABET INC CL A		30,691.	100,073.
ALPHABET INC CL C		30,688.	99,408.
APPLE INC		49,087.	236,922.
AT&T INC		82,563.	77,760.
BRISTOL MYERS SQUIBB CO		117,758.	122,560.
CONTELLATION BRANDS INC CL A		46,904.	342,855.
DISCOVER FINANCIAL SVCS		133,165.	230,760.
EMERSON ELEC CO		34,846.	69,690.
ENBRIDGE INC		141,665.	156,440.
FISERVE INC		84,870.	229,478.
INTUTIVE SURGICAL INC		99,233.	218,964.
JOHNSON & JOHNSON		119,444.	167,664.
MASTERCARD INCORPORATED		121,157.	196,768.
MEDTRONIC PLC		118,134.	129,200.
MICROCHIP TECHNOLOGY INC		48,090.	175,760.
NXP SEMICONDUCTORS NV		141,571.	234,180.
PEPSICO INC		113,618.	215,856.
PRICELINE GROUP INC		234,834.	321,481.
PROCTER & GAMBLE CO		43,522.	128,632.
QUALCOMM INC		113,301.	128,040.
SCHWAB CHARLES CORP NEW		82,220.	179,795.
SYNCHRONY FINANCIAL		108,453.	189,691.
VISA INC		53,350.	273,648.
YUM CHINA HOLDING INC		111,889.	120,060.
ЗМ СО		64,967.	258,907.
TOTAL TO FORM 990-PF; PART II,	LINE 10B	2,326,020.	4,604,592.

Name	Donald W & Margaret M Anderson Foundation	, Martha A Van De Ven,	Trustee
FEIN '	*****4236		
	00.17		

Tax Year 2017

Reject Date 05/15/2018

Reject(s) applied to this return are as follows

Form 990-PF Code F990PF-906-01 Taxing Authority Federal

If Form 990-PF, Item G, "initial return of a former public charity" checkbox is not checked, them Item H, the type of organization checked must match data in the IRS database

Solution

Contact IRS help desk at 866 255-0654 to resolve database issues