SCANNED OC: 22 2018

Form **990-PF** 

Department of the Treasury Internal Revenue Service



# 2949125800119

## **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.

OMB No 1545-0052

For	alen	idar year 2017 or tax year beginning		, and ending		
Nan	ne of	foundation			A Employer identification	number
					81-343	
		ZWEDEL FAMILY FUND, LTI			**-***7192	<u> </u>
		nd street (or P O box number if mail is not delivered to stree	t address)	Room/suite	B Telephone number	
		7 SAINT CYR RD			(608) 249-	2111
		own, state or province, country, and ZIP or foreign	postal code		C if exemption application is p	ending, check here
	_	DLETON, WI 53562			1	
G C	heck	all that apply: Initial return		ormer public charity	D 1. Foreign organizations	s, check here
		Final return	Amended return		2. Foreign organizations me	setupo the 85% test
		Address change	Name change	<del></del>	Foreign organizations me check here and attach co	omputation
H C	_	type of organization: X Section 501(c)(3) e		$_{o}arphi$	E If private foundation sta	
느	_	ction 4947(a)(1) nonexempt charitable trust	Other taxable private founda	<del></del>	under section 507(b)(1)	)(A), check here
		arket value of all assets at end of year   J Account	•	Accrual /	F If the foundation is in a	
(1r		Part II, col. (c), line 16)	other (specify)	( )	under section 507(b)(1)	)(B), check here
Pa	_		T .			(d) D
Ра	η	(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
_	-		1,159,423.	111001110	N/A	(cash basis only)
	1	Contributions, gifts, grants, etc., received	1,139,423.		N/A	<del></del>
	2	interest on savings and temporary	ļ			<del> </del>
	4	cash investments  Dividends and interest from securities	10,827.	10,827.	<u> </u>	STATEMENT 1
		Gross rents	10,027.	10,027.		SIAIEMENI I
	_	Net rental income or (loss)	143,015.			
ne	Ua h	Net gain or (loss) from sale of assets not on line 10 Gross sales price for all assets on line 6a 863, 889.	143,013.	<u></u>		
Revenue	7	assets on line 6a OO3, OO9.  Capital gain net income (from Part IV, line 2)		143,015.	RECEIVE	
Re	8	Net short-term capital gain		143,013.	0	
	9	Income modifications	<del></del>		SEP 1 2 20	
		Gross sales loss returns				-18
		and allowances  Less Cost of goods sold	<del> </del>		OGDEN. U	=
		Gross profit or (loss)	<del> </del>	<del></del>		
	11	4			<del></del>	<del> </del>
	12	Total. Add lines 1 through 11	1,313,265.	153,842.	<del></del>	<del></del>
_	13	Compensation of officers, directors, trustees, etc	0.	0.		0.
	14	Other employee salaries and wages				
		Pension plans, employee benefits				
Ses		Legal fees				<del></del>
ens		Accounting fees STMT 2	2,231.	1,116.		1,115.
Expenses		Other professional fees STMT 3	5,097.	5,097.		0.
	17	Interest			<u> </u>	<del>                                     </del>
Operating and Administrative	18	Taxes STMT 4	3,665.	43.		0.
ist	19	Depreciation and depletion				
Ē	20	Occupancy				
Ad	21	Travel, conferences, and meetings				
Pug	22	Printing and publications				
9	23	Other expenses				
atir	24	Total operating and administrative				
per		expenses. Add lines 13 through 23	10,993.	6,256.	L	1,115.
0	25	Contributions, gifts, grants paid	394,740.			394,740.
	26	Total expenses and disbursements.				
		Add lines 24 and 25	405,733.	6 <u>,</u> 256.		395,855.
	27	Subtract line 26 from line 12:				
	a	Excess of revenue over expenses and disbursements	907,532.			<u></u>
	b	Net investment income (if negative, enter -0-)		147,586.		
	c	Adjusted net income (if negative, enter -0-)			N/A	

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

Form **990-PF** (2017)



For	m 99	0-PF (2017) SALZWEDEL FAMILY FUND,	·		
Part II Balance Sheets Attached schedules and amounts in the description			Beginning of year	End of	
<u></u>	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	-40,660.	-5,370.	-5,370.
		Savings and temporary cash investments			
	3	Accounts receivable			
		Less; allowance for doubtful accounts			
	4	Pledges receivable			
		Less: allowance for doubtful accounts			
		Grants receivable			
	6	Receivables due from officers, directors, trustees, and other			
		disqualified persons			
	7	Other notes and loans receivable			
		Less: allowance for doubtful accounts			
ets		Inventories for sale or use			
Assets	i .	Prepaid expenses and deferred charges			
٩		Investments - U.S. and state government obligations			
		Investments - corporate stock			
	C	investments - corporate bonds			·
	11	Investments - land, buildings, and equipment basis			
		Less accumulated depreciation			
	12	Investments - mortgage loans		1 100 051	4 400 001
	13	Investments - other STMT 5	336,307.	1,198,254.	1,198,254.
	14	Land, buildings, and equipment basis			
		Less accumulated depreciation			
		Other assets (describe			
	16	Total assets (to be completed by all filers - see the		4 400 004	4 400 004
_		instructions Also, see page 1, item I)	295,647.	1,192,884.	1,192,884.
		Accounts payable and accrued expenses			
	1	Grants payable			
es	19	Deferred revenue			
Liabilities	20	Loans from officers, directors, trustees, and other disqualified persons			
Į.		Mortgages and other notes payable			
_	22	Other liabilities (describe			
	23	Total liabilities (add lines 17 through 22)	0.	0.	
		Foundations that follow SFAS 117, check here			
ø,	١	and complete lines 24 through 26, and lines 30 and 31.			
nces	•	Unrestricted			
ala		Temporarily restricted			
9 9	26	Permanently restricted  Foundations that do not follow SFAS 117, check here			
5					
<u></u>	0.7	and complete lines 27 through 31.	0.	0.	
ets.	27	Capital stock, trust principal, or current funds	0.		
188	28	Paid-in or capital surplus, or land, bldg., and equipment fund	295,647.	1,192,884.	
Net Assets or Fund Bala	29	Retained earnings, accumulated income, endowment, or other funds	295,647.	1,192,884.	
ž	30	Total net assets or fund balances	293,047.	1,132,004.	
	31	Total liabilities and net assets/fund balances	295,647.	1,192,884.	
_ [P	art				
Ξ				<del> </del>	
1		I net assets or fund balances at beginning of year - Part II, column (a), line	30		205 647
		st agree with end-of-year figure reported on prior year's return)			295,647.
		r amount from Part I, line 27a		2	907,532.
		r increases not included in line 2 (itemize) lines 1, 2, and 3	<del></del>	3	$\frac{0.}{1,203,179.}$
		eases not included in line 2 (itemize)   CHANGE IN UNRE	ALIZED CATES	5	10,295.
-	_ 001	TITLE OF THE CHANGE OF THE CHA			10,200.

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5 Decreases not included in line 2 (itemize) ► CHANGE IN UNREALIZED GAINS 6 Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b), line 30

1,192,884. Form **990-PF** (2017)

Losses (from col. (h)) (i) FMV as of 12/31/69 as of 12/31/69 over col. (j), if any 136,668. 6,347 b d е If gain, also enter in Part I, line 7 143,015. 2 Capital gain net income or (net capital loss) If (loss), enter -0- in Part I, line 7 2

(k) Excess of col. (i)

3 Net short-term capital gain or (loss) as defined in sections 1222(5) and (6): If gain, also enter in Part I, line 8, column (c). If (loss), enter -0- in Part I, line 8

(j) Adjusted basis

N/A

Part V | Qualification Under Section 4940(e) for Reduced Tax on Net Investment Income (For optional use by domestic private foundations subject to the section 4940(a) tax on net investment income.)

If section 4940(d)(2) applies, leave this part blank.

Was the foundation liable for the section 4942 tax on the distributable amount of any year in the base period? If "Yes." the foundation doesn't qualify under section 4940(e). Do not complete this part

Yes X No

	(a) Base period years Calendar year (or tax year beginning in)	(b) (c) Adjusted qualifying distributions Net value of noncharitable-use assets			(d) Distribution ratio (col. (b) divided by col. (c))
_	2016	70,660.	169,480	•	.416922
	2015				
	2014				
_	2013				
	2012			i	
					44600
3	<b>Total</b> of line 1, column (d)  Average distribution ratio for the 5-year ba the foundation has been in existence if less	•	), or by the number of years	3	.416922
2 3 4	Average distribution ratio for the 5-year ba the foundation has been in existence if less	than 5 years	), or by the number of years		
2 3 4 5	Average distribution ratio for the 5-year ba the foundation has been in existence if less	than 5 years	), or by the number of years		.416922

8 Enter qualifying distributions from Part XII, line 4

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)

311,678.

395,855.

7 Add lines 5 and 6

SALZWEDEL FAMILY FUND, LTD Part VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 1a Exempt operating foundations described in section 4940(d)(2), check here \( \bigcup \) and enter "N/A" on line 1. (attach copy of letter if necessary-see instructions) Date of ruling or determination letter: b Domestic foundations that meet the section 4940(e) requirements in Part V, check here X and enter 1% 1,476. 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 3 Add lines 1 and 2 3 4 Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only; others, enter -0-) 5 Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-6 Credits/Payments: 2,400. a 2017 estimated tax payments and 2016 overpayment credited to 2017 b Exempt foreign organizations - tax withheld at source 6b c Tax paid with application for extension of time to file (Form 8868) 0. 6c d Backup withholding erroneously withheld 2,400. 7 Total credits and payments. Add lines 6a through 6d 8 Enter any penalty for underpayment of estimated tax. Check here \_\_\_\_\_ if Form 2220 is attached 8 9 Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed 9 924. 10 Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid 10 11 Enter the amount of line 10 to be; Credited to 2018 estimated tax 924. Refunded ▶ Part VII-A Statements Regarding Activities 1a During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in Yes No any political campaign? X 1a b Did it spend more than \$100 during the year (either directly or indirectly) for political purposes? See the instructions for the definition 1b If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials published or distributed by the foundation in connection with the activities. c Did the foundation file Form 1120-POL for this year? X 1c d Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year. 0. 0 • (2) On foundation managers. > \$ (1) On the foundation. > \$ e Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers. > \$ 2 Has the foundation engaged in any activities that have not previously been reported to the IRS? X 2 If "Yes," attach a detailed description of the activities. 3 Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes 4a Did the foundation have unrelated business gross income of \$1,000 or more during the year? 4a N/A b If "Yes," has it filed a tax return on Form 990-T for this year? 5 Was there a liquidation, termination, dissolution, or substantial contraction during the year? If "Yes," attach the statement required by General Instruction T 6 Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either: By language in the governing instrument, or By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state law remain in the governing instrument? X 6 X 7 Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col. (c), and Part XV 7 8a Enter the states to which the foundation reports or with which it is registered. See instructions. WI

10 X Form **990-PF** (2017)

X

b If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate)

10 Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses

year 2017 or the tax year beginning in 2017? See the instructions for Part XIV. If "Yes," complete Part XIV

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

of each state as required by General Instruction G? If "No," attach explanation

Part VII-A   Statements Regarding Activities (continued)			T	
44. At any time divine the user did the foundation directly or indivinity, over a controlled early within the manner of		-	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 advise	ny pravionac?	<del>' ' '</del>	├	<u> </u>
If "Yes," attach statement. See instructions	ny privileges.	12		x
13 Did the foundation comply with the public inspection requirements for its annual returns and exemption application?		13	X	
Website address ► N/A				<u> </u>
	no. ▶ 608 – 24	19-2	111	
Located at ► 5117 ST. CYR ROAD, MIDDLETON, WI	ZIP+4 ▶5			
15 Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - check here				T
and enter the amount of tax-exempt interest received or accrued during the year	<b>▶</b>   15	N	[/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,			Yes	No
securities, or other financial account in a foreign country?		16	<del>                                     </del>	X
See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes," enter the name of the				
foreign country				
Part VII-B   Statements Regarding Activities for Which Form 4720 May Be Required				
File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.			Yes	No
1a During the year, did the foundation (either directly or indirectly):				
(1) Engage in the sale or exchange, or leasing of property with a disqualified person?	Yes X No			
(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from)				
a disqualified person?	Yes X No			
(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?	Yes X No			
(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?	Yes 🗓 No			
(5) Transfer any income or assets to a disqualified person (or make any of either available				
for the benefit or use of a disqualified person)?	Yes X No			
(6) Agree to pay money or property to a government official? (Exception. Check "No"				
if the foundation agreed to make a grant to or to employ the official for a period after				
termination of government service, if terminating within 90 days.)	Yes X No			
b If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations				
section 53.4941(d)-3 or in a current notice regarding disaster assistance? See instructions	N/A	1b		
Organizations relying on a current notice regarding disaster assistance, check here	ightharpoons			
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				
before the first day of the tax year beginning in 2017?		1c		X
2 Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundat	tion			
defined in section 4942(j)(3) or 4942(j)(5)):				
a At the end of tax year 2017, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) begin				
before 2017?	Yes X No			
If "Yes," list the years $\blacktriangleright$ ,,,,,				
b Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2) (relating to income				
valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer "No" and at				
statement - see instructions.)	N/A	2b		<u> </u>
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		i		
	٦., <del>قعا</del> .,	1		
during the year?	Yes X No	1		
b if "Yes," did it have excess business holdings in 2017 as a result of (1) any purchase by the foundation or disqualified person				
May 26, 1969; (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7))		i		
of holdings acquired by gift or bequest, or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Schedule	•	۱		•
Form 4720, to determine if the foundation had excess business holdings in 2017.)	N/A	3b		U-
4a Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?		4a	-	Х
b Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable pur had not been removed from jeopardy before the first day of the tax year beginning in 2017?	pose mar	,_		x
nau not occu removed nom jeopardy delote the mist day of the tax year deginining in 2017?		4b rm <b>99</b> 0		_

JEE SIRIEMENT /	1		
2 Compensation of five highest-paid employees (other than those in	cluded on line 1). If none,	enter "NONE."	<u></u>
(a) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week devoted to position	(c) Compensation	(d) Contributemployee bening and defer compensations
NONE			

Form **990-PF** (2017)

Form 990-PF (2017)

5a During the year, did the foundation pay or incur any amount to:

the prevention of cruelty to children or animals?

If "Yes," attach the statement required by Regulations section 53.4945-5(d).

Paid Employees, and Contractors

(a) Name and address

any voter registration drive?

4945(d)(4)(A)? See instructions

expenditure responsibility for the grant?

a personal benefit contract?

If "Yes" to 6b, file Form 8870.

CEE CONTEMENT 7

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

Total. Add lines 1 through 3

Form 990-PF (2017)

P	art X Minimum Investment Return (All domestic foundations must complete this part. Foreign four	ndations,	see instructions )
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes:		<del></del>
а	Average monthly fair market value of securities	1a	739,387. 15,973.
b	Average of monthly cash balances	1b	15,973.
C	Fair market value of all other assets	1c	
	Total (add lines 1a, b, and c)	1d	755,360.
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	755,360.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions)	4	11,330.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	744,030.
6	Minimum investment return. Enter 5% of line 5	6	37,202.
P	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	37,202.
2a	Tax on investment income for 2017 from Part VI, line 5 2a 2 1,476.		
b	Income tax for 2017. (This does not include the tax from Part VI.)	ļ	
C	Add lines 2a and 2b	2c	1,476.
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	1,476. 35,726.
4	Recoveries of amounts treated as qualifying distributions	4	0.
5	Add lines 3 and 4	5	35,726.
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	35,726.
P	art XII Qualifying Distributions (see instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:		
8	Expenses, contributions, gifts, etc total from Part I, column (d), line 26	1a	395,855. 0.
b	Program-related investments - total from Part IX-B	1b	0.
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes	2	
3	Amounts set aside for specific charitable projects that satisfy the:		
a	Suitability test (prior IRS approval required)	3a	
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	395,855.
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	1,476. 394,379.
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	394,379.
	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.	jualifies for	the section

Part XIII Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2016	(c) 2016	( <b>d)</b> 2017
1 Distributable amount for 2017 from Part XI.	·	·		
line 7				35,726.
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				
<b>b</b> From 2013				
c From 2014				
<b>d</b> From 2015				
eFrom 2016 67,704.				
f Total of lines 3a through e	67,704.			
4 Qualifying distributions for 2017 from				
Part XII, line 4: ►\$ 395,855.				
a Applied to 2016, but not more than line 2a			0.	
<b>b</b> Applied to undistributed income of prior				
years (Election required - see instructions)		0.		
c Treated as distributions out of corpus				
(Election required - see instructions)	0.			
d Applied to 2017 distributable amount				35,726.
e Remaining amount distributed out of corpus	360,129.			
5 Excess distributions carryover applied to 2017 (If an amount appears in column (d), the same amount	0.			0.
must be shown in column (a) )  6 Enter the net total of each column as indicated below:			:	
	427,833.			
a Corpus Add lines 3f, 4c, and 4e Subtract line 5 b Prior years' undistributed income. Subtract	427,033.			
line 4b from line 2b		0.		
c Enter the amount of prior years'	-			
undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed		0.		
d Subtract line 6c from line 6b. Taxable				
amount - see instructions		0.		
e Undistributed income for 2016. Subtract line		-		
4a from line 2a. Taxable amount - see instr.			0.	
f Undistributed income for 2017. Subtract				
lines 4d and 5 from line 1. This amount must				
be distributed in 2018				0.
7 Amounts treated as distributions out of				
corpus to satisfy requirements imposed by				
section 170(b)(1)(F) or 4942(g)(3) (Election				
may be required - see instructions)	0.			
8 Excess distributions carryover from 2012				
not applied on line 5 or line 7	0.			
9 Excess distributions carryover to 2018.				
Subtract lines 7 and 8 from line 6a	427,833.			
10 Analysis of line 9:				
a Excess from 2013				
b Excess from 2014				
c Excess from 2015	Ì			
dExcess from 2016 67,704.				
e Excess from 2017 360, 129.				
722501 01 02 10				Form 000 DE (2017)

723601 01-03-18

Part XV   Supplementary Information				<del></del>
3 Grants and Contributions Paid During the	fear or Approved for Future  If recipient is an individual,	Payment		
Recipient  Name and address (home or business)	show any relationship to any foundation manager	Foundation status of	Purpose of grant or contribution	Amount
	or substantial contributor	recipient		
a Paid during the year				
		1		
	TOWE	DUDI TO CUARTMY	GENERAL OPERATIONS	
ACCESS FUND PO BOX 17010	NONE	PUBLIC CHARITY	GENERAL OFERALIONS	
BOULDER, CO 80308				1,000
				-
AMERICAN CANCER SOCIETY	NONE	PUBLIC CHARITY	GENERAL OPERATIONS	
PO BOX 776	10112			
PEWAUKEE, WI 83072				250
AMERICAN FAMILY CHILDRENS HOSPITAL	NONE	PUBLIC CHARITY	GENERAL OPERATIONS	
1848 UNIVERSITY AVE		1		
MADISON, WI 53726		<u> </u>		8,200
BETHEL HORIZON	NONE	PUBLIC CHARITY	GENERAL OPERATIONS	
312 WISCONSIN AVE				1 525
MADISON, WI 53703				1,525
BIG BROTHERS BIG SISTERS OF DANE	NONE	PUBLIC CHARITY	GENERAL OPERATIONS	
COUNTY				
2059 ATWOOD AVE MADISON, WI 53704				1,000
Total SEE CO	NTINUATION SHE	ET(S)	. ▶ 3a	394,740
b Approved for future payment				
	j			
NONE				
		<u>.</u>		
		<del>-</del>	+	
Total		•	. ► 3b	0

Form 990-PF (2017) SALZWEDEL	FAMILY FUND,	LTD		**_*	** 7192 Page 12
Part XVI-A Analysis of Income	-Producing Activit	ies			-
Enter gross amounts unless otherwise indicated.	Unrelated	business income		by section 512, 513, or 514	(e)
-	(a) Business	(b)	(C) Exclu-	(d)	Related or exempt
1 Program service revenue:	code	Amount	sion code	Amount	function income
a	<del>  </del>				
b					
			1		
,			1 1	<del></del>	
			<del>                                     </del>		
; —————	<del></del> -		++-		
g Fees and contracts from government agencie	<del></del>		<del></del>	<del></del>	
	"		<del>{ -                                   </del>	<del></del>	<del></del>
2 Membership dues and assessments	<del>  </del>		╁╌╁╌	<del></del>	
3 Interest on savings and temporary cash	1 1		i i		
investments	<del> </del>		14	10,827.	<del> </del>
4 Dividends and interest from securities	<del> </del>		<del>  4</del>   _	10,027	
5 Net rental income or (loss) from real estate:	<u> </u>		+-+		
a Debt-financed property			<del>                                     </del>		
<b>b</b> Not debt-financed property	<u> </u>		<b>↓_</b> ↓_		
6 Net rental income or (loss) from personal	1 1		ł		
property	<u> </u>		$oldsymbol{oldsymbol{oldsymbol{eta}}}$		<del> </del>
7 Other investment income	1		$oldsymbol{oldsymbol{oldsymbol{eta}}}$		
8 Gain or (loss) from sales of assets other	1 1		1 1		
than inventory			18	143,015.	
9 Net income or (loss) from special events					
10 Gross profit or (loss) from sales of inventory			<u> </u>		
11 Other revenue:					
a	] ]				
b					
c					
d					
e					
12 Subtotal. Add columns (b), (d), and (e)		0.		153,842.	0.
13 Total. Add line 12, columns (b), (d), and (e)	<del></del>			13	153,842
(See worksheet in line 13 instructions to verify calci	ulations.)				
		liabon and of Fa		····	
Part XVI-B Relationship of Act	ivities to the Acco	mplishment of Ex	kempt P	rurposes	
Line No. Explain below how each activity for	which income is reported in	column (e) of Part XVI-A	contribute	d importantly to the accomp	plishment of
▼ the foundation's exempt purposes					
	<del></del>				
	<del></del>				
					<del></del>
	<del></del>			<del></del>	<del></del>
				<del></del>	
		<del> </del>		<del></del>	<del></del>
	<del></del>				
	<del></del>			<del></del>	<del></del>
				<del></del>	<del></del>
				<del> </del>	

723621 01-03-18

Part XVII	Information Re Exempt Organ		sfers to a	and Transactions	and Relations	hips With Nonchar	itable		
1 Did the or			of the following	o with any other organizat	tion described in sec	tion 501(c)		Yes	No
1 Did the organization directly or indirectly engage in any of the following with any other organization described in section 501(c) (other than section 501(c)(3) organizations) or in section 527, relating to political organizations?							1 1		
	from the reporting found			• •					ĺ
(1) Cash	(1) Cash								х
<b>(2)</b> Other	(2) Other assets								X
<b>b</b> Other tran	b Other transactions:								
(1) Sales	of assets to a noncharita	ble exempt organiza	tion				1b(1)		X
(2) Purcl	hases of assets from a no	ncharitable exempt o	organization				1b(2)		X
٠.	(3) Rental of facilities, equipment, or other assets								X
(4) Reim	(4) Reimbursement arrangements								
	s or loan guarantees						1b(5)		X
	rmance of services or me	•	•				1b(6)		X
_	f facilities, equipment, ma	•					10		X
or service		oundation. If the four	ndation receiv			market value of the goods, o n or sharing arrangement, st		ets,	
(a)Line no	(b) Amount involved	(c) Name of	noncharitable	e exempt organization	(d) Description	on of transfers, transactions, and s	haring am	angeme	nts
			N/A						
				- 0.51					
				<del>,</del>					
		_							
				<del></del>		<del>-</del>			
	<del></del>				<del>-</del>	<del></del>			
						<del></del> -			
<del></del>									
	_								
				<del>.</del>					
ın section	501(c) (other than section omplete the following sch	n 501(c)(3)) or in se edule.		or more tax-exempt organ	nizations described		Yes	X	] No
	(a) Name of org	janization		(b) Type of organization	<del> </del>	(c) Description of relationsh	ıp		
	N/A	-				<del></del> -			
-					1				
					1.				
-	<del></del>	· .			+				
Sign Here  Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge and belief, it is true, correct, and complete Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge shown below? See instructions to be a supplied to the best of my knowledge and belief, it is true, correct, and complete Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge shown below? See instructions of which preparer has any knowledge shown below? See instructions of the preparer has any knowledge shown below? See instructions of the preparer has any knowledge shown below? See instructions of the preparer has any knowledge shown below? See instructions of the preparer has any knowledge shown below? See instructions of the preparer has any knowledge shown below? See instructions of the preparer has any knowledge shown below? See instructions of the preparer has any knowledge shown below? See instructions of the preparer has any knowledge shown below? See instructions of the preparer has any knowledge shown below? See instructions of the preparer has any knowledge shown below? See instructions of the preparer has any knowledge shown below? See instructions of the preparer has any knowledge shown below? See instructions of the preparer has any knowledge shown below? See instructions of the preparer has any knowledge shown below? See instructions of the preparer has any knowledge shown below? See instructions of the preparer has any knowledge shown below? See instructions of the preparer has any knowledge shown below? See instructions of the preparer has any knowledge shown below? See instructions of the preparer has any knowledge shown below?							er		
	Print/Type preparer's na	ıme	Preparer's s	ignature	Date	Check if PTIN			
				71-	,	self- employed			
Paid	KEITH BAUM		Klank	Vanter BA	4/16/18	P00	187	845	
Preparer	Firm's name ► SMI	TH & GEST	ELAND,	LLB		Firm's EIN ▶ **-**	<b>*</b> 71'	78	
Use Only									
	Firm's address ▶ P .								
	<u> </u>	DISON, WI	53701			Phone no. (608)			
						For	m <b>990</b>	-PF	(2017)

3 Grants and Contributions Paid During the				
Recipient  Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
BLESSINGS IN A BACK PACK 4121 SHELBYVILLE ROAD LOUISVILLE, KY 40207	NONE		GENERAL OPERATIONS	25.
10013VIBB, RI 40207				250
EDGE OF SEVEN 1031 33RD STREET DENVER, CO 80205	NONE	PUBLIC CHARITY	GENERAL OPERATIONS	1(
EDGEWOOD HIGH SCHOOL 2219 MONROE ST. MADISON, WI 53711	NONE	PUBLIC CHARITY	GENERAL OPERATIONS	49,800
GILDAS CLUB 7907 UW HEALTH CT.	NONE	PUBLIC CHARITY	GENERAL OPERATIONS	· · · · · · · · · · · · · · · · · · ·
MIDDLETON, WI 53562				250
EQUAL JUSTICE INITIATIVE 122 COMMERCE ST. MONTGOMERY, AL 36104	NONE	PUBLIC CHARITY	GENERAL OPERATIONS	1,000
MADISON SYMPHONY ORCHESTRA 222 W. WASHINGTON AVE MADISON, WI 53703	NONE	PUBLIC CHARITY	GENERAL OPERATIONS	1,000
GOODMAN COMMUNITY CENTER 149 WAUBESA ST. MADISON, WI 53704	NONE	PUBLIC CHARITY	GENERAL OPERATIONS	5,000
OVERTURE CENTER 201 STATE ST, MADISON, WI 53703	NONE	PUBLIC CHARITY	GENERAL OPERATIONS	25,000
PEACE LUTHERN CHURCH 701 S. CENTURY AVE. WAUNAKEE, WI 53597	NONE	PUBLIC CHARITY	GENERAL OPERATIONS	60,000
CHATTERBOX CHARITIES 102 SOUTH 2ND AVE.	NONE	PUBLIC CHARITY	GENERAL OPERATIONS	
WAUSAU, WI 54401		L		1,000

SALZWEDEL FAMILY FUND, LTD

Supplementary Information Grants and Contributions Paid During the Year (Continuation) If recipient is an individual, Recipient Foundation Purpose of grant or show any relationship to Amount status of contribution any foundation manager Name and address (home or business) or substantial contributor recipient CLEAN LAKES ALLIANCE NONE PUBLIC CHARITY GENERAL OPERATIONS 150 E. GILMAN MADISON, WI 53703 1,000. COLORAD COUNCIL OF CHURCHES NONE PUBLIC CHARITY GENERAL OPERATIONS 1140 W. 5TH AVE. DENVER, CO 80204 1,000. DEFOREST AREA SCHOOL DISTRICT NONE PUBLIC CHARITY GENERAL OPERATIONS 520 EAST HOLUM ST DEFOREST, WI 53532 10,000. MADISON MUSEUM OF CONTEMPORARY ART NONE PUBLIC CHARITY GENERAL OPERATIONS 227 STATE ST. MADISON , WI 53703 500. RONALD MCDONALD HOUSE CHARTTIES OF NONE PUBLIC CHARITY BUILDING FUND MADISON 2716 MARSHAL COURT MADISON, WI 53705 20,000. SECOND BAPTIST CHURCH OF WHEATON NONE PUBLIC CHARITY GENERAL OPERATIONS 1520 AVERY AVENUE WHEATON, IL 6187 1,000. UNITED WAY NONE PUBLIC CHARITY GENERAL OPERATIONS 2059 ATWOOD AVENUE MADISON, WI 53707 25,000. AUGUSTANA CARE NONE PUBLIC CHARITY GENERAL OPERATIONS 1007 EAST FOURTEENTH ST. MINNEAPOLIS, MN 55404 10,000. ST. JOHN COMMUNITY FOUNDATION NONE PUBLIC CHARITY HURRICAN RELIEF PO BOX 1020 ST. JOHN, VI 00831 5,000. UNIVERSITY OF DENVER NONE PUBLIC CHARITY SCHOLARSHIP FUND 2190 EAST ASBURY AVE. DENVER, CO 80208 5,000. Total from continuation sheets

Supplementary Information Grants and Contributions Paid During the Year (Continuation) If recipient is an individual, Recipient Foundation Purpose of grant or contribution show any relationship to Amount any foundation manager status of Name and address (home or business) recipient or substantial contributor WISCONSIN CHAMBER ORCHESTRA NONE PUBLIC CHARITY GENERAL OPERATIONS PO BOX 171 10,000. MADISON, WI 53701 THE ROAD HOME NONE PUBLIC CHARITY GENERAL OPERATIONS 128 E. OLIN AVE. MADISON, WI 53713 2,500. ST. DENNIS SCHOOL NONE PUBLIC CHARITY SCHOLARSHIP FUND 409 DEMPSEY RD. MADISON, WI 53714 15,850. WARTBURG COLLEGE NONE PUBLIC CHARITY GENERAL OPERATIONS 100 WARTBURG BLVD. WAVERLY, IA 50677 71,517. WAUNAKEE COMMUNITY FOUNDATION NONE PUBLIC CHARITY GENERAL OPERATIONS PO BOX 62 WAUNAKEE, WI 53597 3,000. SUSAN G. KOMEN FOUNDATION NONE PUBLIC CHARITY GENERAL OPERATIONS 2025 WEST OKLAHOMA AVE. MILWAUKEE, WI 53215 10,000. ROCKFORD SYMPHONY ORCHESTRA NONE PUBLIC CHARITY GENERAL OPERATIONS 711 N. MAIN ST. ROCKFORD, IL 61103 500. UNIVERSITY OF WISCONSIN FOUNDATION NONE PUBLIC CHARITY AMERICAN FAMILY 1848 UNIVERSITY AVE. CHILDRENS HOSPITAL MADISON, WI 53726 250. SECOND HARVEST FOODBANK OF SOUTHERN PUBLIC CHARITY GENERAL OPERATIONS NONE WISCONSIN 2802 DAIRY DR. MADISON, WI 53718 250. UNIVERSITY OF WISCONSIN FOUNDATION NONE PUBLIC CHARITY UW HEALTH TRANSPLANT 1848 UNIVERSITY AVE. PUND MADISON, WI 53726 2,500. Total from continuation sheets

Supplementary Information Grants and Contributions Paid During the Year (Continuation) If recipient is an individual, Recipient Foundation Purpose of grant or contribution show any relationship to Amount status of any foundation manager Name and address (home or business) recipient or substantial contributor UNIVERSITY OF WISCONSIN FOUNDATION NONE PUBLIC CHARITY AMERICAN FAMILY 1848 UNIVERSITY AVE. CHILDRENS HOSPITAL MADISON, WI 53726 GREATEST NEED FUND 1,776. UNIVERSITY OF WISCONSIN NONE PUBLIC CHARITY MEN'S BASKETBALL FUND FOUNDATION-MEN'S BASKETBALL FUND 1848 UNIVERSITY AVE. MADISON, WI 53726 535. JINGLES OBRIEN SCHOLARSHIP FUND INC. NONE PUBLIC CHARITY SCHOLARSHIPS 2821 ALLEGHENY DR. MADISON, WI 53719 250. PUBLIC CHARITY GENERAL OPERATIONS FRIENDS OF UW HEALTH NONE 301 S. WESTFIELD RD. MADISON, WI 53717 32,827. UNIVERSITY OF WISCONSIN FOUNDATION PUBLIC CHARITY GENERAL OPERATIONS 1848 UNIVERSITY AVE. MADISON, WI 53726 9,200. Total from continuation sheets

#### 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

2017

Name of the organization **Employer identification number** \*\*-\*\*\*7192 SALZWEDEL FAMILY FUND, LTD Organization type (check one): Filers of: Section: ☐ 501(c)( Form 990 or 990-EZ ) (enter number) organization 4947(a)(1) nonexempt charitable trust not treated as a private foundation 527 political organization Form 990-PF 501(c)(3) exempt private foundation 4947(a)(1) nonexempt charitable trust treated as a private foundation 501(c)(3) taxable private foundation Check if your organization is covered by the General Rule or a Special Rule. Note: Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule See instructions. **General Rule** X For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions **Special Rules** For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of (1) \$5,000, or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h; or (ii) Form 990-EZ, line 1. Complete Parts I and II For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 exclusively for religious, chantable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I, II, and III For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions exclusively for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., purpose Don't complete any of the parts unless the General Rule applies to this organization because it received nonexclusively religious, charitable, etc., contributions totaling \$5,000 or more during the year ▶ \$ Caution: An organization that isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990, 990-EZ, or 990-PF),

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

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

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

Name of organization

Employer identification number

## SALZWEDEL FAMILY FUND, LTD

\*\*-\*\*\*7192

DALLEN	BOBB PARTET FORD, DID		7132
Part I	Contributors (see instructions) Use duplicate copies of Part I i	f additional space is needed	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	JACK AND SARAH SALZWEDEL  5117 ST. CYR ROAD  MIDDLETON, WI 53562	\$ <u>1,157,192.</u>	Person Payroll Oncash X (Complete Part II for noncash contributions )
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
2	JACK AND SARAH SALZWEDEL  5117 ST. CYR ROAD  MIDDLETON, WI 53562	\$\$	Person X Payroll
(a) No.	(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 Complete Part II for noncash contributions )
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
777457 11 77		\$	Person Payroll Complete Part II for noncash contributions )
723452 11-01	-17	2016anie R (FOLW	990, 990-EZ, or 990-PF) (2017)

Employer identification number

SALZWEDEL FAMILY FUND, LTD

\*\*~\*\*\*7192

	Noncash Property (see instructions). Use duplicate copies of F		
(a)	n x	(c)	
No.	(b)	FMV (or estimate)	(d)
from   Part I	Description of noncash property given	(See instructions.)	Date received
2111	PUBLICLY TRADED INVESTMENTS	. 232	
1			
ļ.		\$1,157,192.	11/21/17
(a)		(c)	
No.	(b)	FMV (or estimate)	(d)
from	Description of noncash property given	(See instructions.)	Date received
Part I			<del></del>
-			
		\$	<del></del>
(a) No.	(h)	(c)	(4)
from	(b) Description of noncash property given	FMV (or estimate)	(d) Date received
Part I	Possiphon of honoral property given	(See instructions.)	Date received
		<del></del>	
		\$	
(a)		(c)	
No. from	(b)	FMV (or estimate)	(d)
Part I	Description of noncash property given	(See instructions.)	Date received
			<del></del>
(a)		(c)	
No. from	(b)	FMV (or estimate)	(d)
Part I	Description of noncash property given	(See instructions.)	Date received
<del></del>			
		\$	<del></del>
(a)		(c)	
No.	(b)	FMV (or estimate)	(d)
from Part I	Description of noncash property given	(See instructions.)	Date received
—		<u> </u>	
		<sub>\$</sub>	

Relationship of transferor to transferee

Transferee's name, address, and ZIP + 4

FORM 990-PF DIVIDENT	OS AND INTER	EST FROM SECUR	ITIES ST	PATEMENT 1	
GROSS SOURCE AMOUNT	CAPITAL GAINS DIVIDEND	REVENUE	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	
U.S BANK 17,174	4. 6,34	7. 10,827.	10,827.		
TO PART I, LINE 4 17,174	6,34	7. 10,827.	10,827.		
FORM 990-PF	ACCOUNTI	NG FEES	Si	PATEMENT 2	
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES	
ACCOUNTING	2,231.	1,116.		1,115.	
TO FORM 990-PF, PG 1, LN 16B	2,231.	1,116.		1,115.	
FORM 990-PF (	OTHER PROFES	SIONAL FEES	Si	PATEMENT 3	
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES	
INVESTMENT FEES	5,097.	5,097.		0.	
TO FORM 990-PF, PG 1, LN 16C	5,097.	5,097.		0.	
FORM 990-PF	TAXES		STATEMENT 4		
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES	
FOREIGN TAXES EXCIXE TAX ON INVESTMENTS	43. 3,622.	43.		0.	
TO FORM 990-PF, PG 1, LN 18	3,665.	43.		0.	
=					

FORM 990-PF	OTHER INVESTMENTS		STATEMENT	5	
DESCRIPTION	VALUATION METHOD	BOOK VALUE	FAIR MARKE	т	
U.S. BANK	COST	1,198,254.	1,198,2	54.	
TOTAL TO FORM 990-PF, PART	II, LINE 13	1,198,254.	1,198,2	54.	
FORM 990-PF LIST	OF SUBSTANTIAL CONTRI PART VII-A, LINE 10		STATEMENT		
	PART VII-A, LINE 10				
NAME OF CONTRIBUTOR	ADDRESS				
JACK SALZWEDEL	5117 ST. CYR MIDDLETON, W				
SARA SALZWEDEL		5117 ST. CYR ROAD MIDDLETON, WI 53562			

FORM 990-PF	PART VIII - LIST OF OFFICERS, DIRECTORS TRUSTEES AND FOUNDATION MANAGERS			STATEMENT 7	
NAME AND ADDRESS		TITLE AND AVRG HRS/WK	COMPEN- SATION	EMPLOYEE BEN PLAN CONTRIB	EXPENSE ACCOUNT
JACK SALZWEDEL 5117 ST. CYR ROAD MIDDLETON, WI 5356	52	VICE PRESIDENT 0.50	0.	0.	0.
SARA SALZWEDEL 5117 ST. CYR ROAD MIDDLETON, WI 5356	52	PRESIDENT 0.50	0.	0.	0.
TYLER SALZWEDEL		VICE PRESIDENT 0.50	0.	0.	0.
KATY LEA		SECRETARY 0.50	0.	0.	0.
LUKE SALZWEDEL		TREASURER 0.50	0.	0.	0.
TOTALS INCLUDED ON	N 990-PF, PAGE 6,	PART VIII =	0.	0.	0.
FORM 990-PF		XV - LINE 1A UNDATION MANAGER	S	STATE	EMENT 8

NAME OF MANAGER

JACK SALZWEDEL SARA SALZWEDEL