CHANGE\_OF\_ACCOUNTING\_PERIOD

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

2018

Inter	rnal Revenue Service Go to www.ir:	s.gov/Form990PF for inst	ructions and the latest inf	ormation.	Open to Public Inspection
For	r calendar-year 2018 or tax year beginning OCT	1, 2018 .	, and ending ' .	DEC 31, 2018	
Na	ame of foundation		· · · · · · · · · · · · · · · · · · ·	A Employer identification	number · )
			, , , , , , , , , , , , , , , , , , ,		
ĘS	STREBLOW FAMILY FOUNDATION		•	20-3924425	
Nur	imber and street (or P O box number if mail is not delivered to street a	address)	, * Room/suite	B Telephone number	<del></del>
2	2105 WEST, MUIRWOOD DRIVE	i	. '   .	• 920-499 <del>-</del> 79	01
Cit	ty or town, state or province, country, and ZIP or foreign po	ostal code .		C If exemption application is p	ending, check here
G	GREEN BAY, WI 54313-4548		• •	·	•
G	Check all that apply: / Initial return	Initial return of a fo	ormer public charity	D 1 Foreign órganizations	s, check here `►
	Final return	Amended return		2 5	sature the OFN test
	Address change	Name change		2 Foreign organizations me check here and attach co	emputation Lest,
H_(	Check type of organization X Section 501(c)(3) exe	4	$\mathcal{M}$	E If private foundation sta	tus was terminated
上		Other taxable private found	ation 🗸	under section 507(b)(1)	(A), check here
	air market value of all assets at end of year   J Accountin		Accrual	F If the foundation is in a	60-month termination
	from Part II, col (c), line 16) Oth	ner (specify)		under section 507(b)(1)	(B), check here
	\$ 1,293,278. (Part I, column	n (d) must be on cash basi		,	7 74
P	Analysis of Revenue and Expenses (The total of amounts in columns (b), (c), and (d) may not	(a) Revenue and	(b) Net investment	(c) Adjusted net	(0) Disbursements for charitable purposes
	necessarily equal the amounts in column (a) )	expenses per books	Income	Income	(cash basis only)
	1 Contributions, gifts, grants, etc, received		F072	N/A	The second secon
	2 Check X if the foundation is not required to attach Sch B				10 A
	3 "Interest on savings and temporary" cash investments	17 660	17,669.	<u> </u>	CONTRACTOR 12
	4 Dividends and interest from securities	17,669.	17,009.	•	STATEMENT 1
	5a Gross rents	3860-00-22-0688, 580 x 45-5422 5-28-50-5	Parastralis (Principal La Video California C	STEERING CO. S. STEERING STATE SHOW HOW TO C	
	b Net rental income or (loss)	55,117.			
ě		33,117.			
Revenue	D assets on line 6a		55,117.	S APR 1	2019
Pe.	8 Net short-term capital gain 4		33,117.		2013.0
	9 Income modifications			OGDE	
-	Gross sales less returns 10a and allowances			Paralle Sandani Company	
	b Less Cost of goods sold				
	c Gross profit or (loss)	*	7.00	· · · · · · · · · · · · · · · · · · ·	
	11 Other income		20, 712,000 111111111111111111111111111111111		NATURAL CASTRONAL PROPERTY.
	12 Total. Add lines 1 through 11	72,786.	72,786.	,	740000000000000000000000000000000000000
	13 Compensation of officers, directors, trustees, etc	0.	. 0.		- 0.
	14 Other employee salaries and wages	4	.,	~*	+
	15 Pension plans, employee benefits		•		
Ses	16a Legal fees				
ben	b Accounting fees TMT 2	1,464.	732.		, 732.
Ä	c Other professional fees		•	•	
tive	17 Interest	•		- "	
tra	18 Taxes			, ,	Province we and through the transformation of
ınıs	19 Depreciation and depletion		,	,	
튜	20 Occupancy	· .		•	
٧p	21 Travel, conferences, and meetings	. '.			<u> </u>
au	22 Printing and publications STMT 3	- 1 326.	1,321.		5.
ting	23 Other expenses STMT 3	1,326.	1,341.		
Operating and Administrative Expenses	24 Total operating and administrative expenses. Add lines 13 through 23	. 2,790.	2,053:		737.
ō	25 Contributions, gifts, grants paid	55,474.	2,000.		55,474.
	26 .Total expenses and disbursements.	, <u>JJ, E/E</u> •	CONTRACTOR OF THE PROPERTY OF		33/114.
	Add lines 24 and 25	58,264.	2,053.		56,211.
	27 Subtract line 26 from line 12	30,204			
	a Excess of revenue over expenses and disbursements	. 14,522.			
	b Net investment income (if negative, enter -0-)		70,733.	Constitution of the control of the c	
	C Adjusted net income (if negative, enter -0-)			N/A	

23524\_\_1

Page 2

ه ا	<u> </u>	Balance Sheets. Attached schedules and amounts in the description column should be for end-of-year amounts only	Beginning of year		of year
À.	dŗ.	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	27,970.	30,529.	30,529.
	3	Accounts receivable ►	2 8 8 10 10 10 10 10 10 10 10 10 10 10 10 10		
		Less: allowance for doubtful accounts	**************************************	The bear of the be	2 Salan Carlo Carl
	4	Pledges receivable	SECOND DE LA SECONDA DE LA CONTRACE		
		Less: allowance for doubtful accounts		Ale Ale Anime and Ale College At Paul And Dall and Dale (Ale College)	PROPERTY AND
	5	Grants receivable			
	1	Receivables due from officers, directors, trustees, and other		-	
	ľ	disqualified persons			
	7				**************************************
	l ′				
		Less; allowance for doubtful accounts			
Assets	1	Inventories for sale or use	,		
Ass		Prepaid expenses and deferred charges			
-		Investments - U.S. and state government obligations	<u> </u>		
		Investments - corporate stock			· · · · · · · · · · · · · · · · · · ·
	l	Investments - corporate bonds	SANSAN SA	\$\$\@\$\$\$\$\$\#\$	
	11	Investments - land, buildings, and equipment basis			
	۱. ٔ	Less accumulated depreciation			
	12	investments - mortgage loans	1: 002 001	1,104,864.	1,262,749.
	13	Investments - other STMT 4.	1,092,901.	1,104,004.	1,202,743.
	14	Land, buildings, and equipment: basis			
		Less accumulated depreciation			<u> </u>
	1	Other assets (describe			
,	16	Total assets (to be completed by all filers - see the	1 100 071	1 125 202	1 202 270
	ļ	instructions. Also, see page 1, item I)	1,120,871.	1,135,393.	1,293,278.
		Accounts payable and accrued expenses			
	18	Grants payable	,		V Last Roll III and Street Street
es	19	Deferred revenue			
Liabilities	20	Loans from officers, directors, trustees, and other disqualified persons			
ם	21	Mortgages and other notes payable	•	·	
_	22	Other liabilities (describe )	· .	· · · · · · · · · · · · · · · · · · ·	
		,	0		
	23	Total liabilities (add lines 17 through 22)	0.	0.	
		Foundations that follow SFAS 117, check here	, 1		
s	l	and complete lines 24 through 26, and lines 30 and 31.			
õ		Unrestricted .			
alar	25	Temporarily restricted			
ĕ	26	Permanently restricted			
Ĕ		Foundations that do not follow SFAS 117, check here		•	
Ī		and complete lines 27 through 31.	_	_	
ß	27	Capital stock, trust principal, or current funds	0.	0.	647.08879 (0.30.00 No. 18.00 No.
Net Assets or Fund Balance	28	Paid-in or capital surplus, or land, bldg., and equipment fund	0.	0.	
Ĕ	29	Retained earnings, accumulated income, endowment, or other funds	1,120,871.	1,135,393.	
Š	30	Total net assets or fund balances	1,120,871.	1,135,393.	
	31	Total liabilities and net assets/fund balances	1,120,871.	1,135,393.	
(P	ař <sub>t</sub> t.	Analysis of Changes in Net Assets or Fund B	alances		
_				· · · · · · · · · · · · · · · · · · ·	
		net assets or fund balances at beginning of year - Part II, column (a), line	30		4 400 054
	•	st agree with end-of-year figure reported on prior year's return)		1	1,120,871.
		r amount from Part I, line 27a		2	14,522.
		r increases not included in line 2 (itemize)	<u> </u>	3	0.
		lines 1, 2, and 3	•	4	1,135,393.
		eases not included in line 2 (itemize)		5	. 0.
6_	Total	net assets or fund balances at end of year (line 4 minus line 5) - Part II, co	olumn (b), line 30	· 6	1,135,393.
		•	~		Form <b>990-PF</b> (2018)

	EBLOW FAMILY FOU				_		2	0-392	4425	Page 3
<u> </u>	and Losses for Tax on In the kind(s) of property sold (for exangle)			( <b>b</b> ) Ho	w acqu	ired	c) Date	acquired	(d) Date	sold.
2-story brick wa	rehouse, or common stock, 200 shs			) P - I	Donatio	on	(mo., d		(mo , da	
1a PUBLICLY TRADE				ļ	P					
b CAPITAL GAINS	DIVIDENDS			<b> </b>					-	
<u>c</u>				<u> </u>				+		
e e				<u> </u>		-				
	(f) Depreciation allowed	(a) Cos	t or other basis	<u> </u>			(h) G	aın or (loss)		
(e) Gross sales price	(or allowable)		kpense of sale					s (f) minus (		
a 87,492.			76,75	2.					10	740.
ь 44,377.						-			44	377.
C										
d										
е										
Complete only for assets showin	ig gain in column (h) and owned by t			_		(I)	Gains (C	ol. (h) gain in ot less than	minus -0-) or	
(i) FMV as of 12/31/69	(j) Adjusted basis as of 12/31/69		cess of col. (ı) col. (ı), ıf any			001.		(from col (l		
	as 01 12/3 1/03	0/61	(j), ii aiiy	-+	-				10	740.
<u>a</u>				$\dashv$						377.
b c				$\dashv$						
d	·-···								-	
е										
2 Capital gain net income or (net ca	pital loss) { If gain, also enter   If (loss), enter -0-			}	2				55	117.
, ,			,	<b>'</b> ⊢	_					
3 Net short-term capital gain or (los If gain, also enter in Part I, line 8,		a ( <del>o</del> )		٦١						
If (loss), enter -0- in Part I, line 8					3			N/A		
Part V Qualification U	nder Section 4940(e) for	Reduced	Tax on Net	Inve	stme	ent Inco	me			
(For optional use by domestic private	foundations subject to the section 4	940(a) tax on	net investment in	come.)						
If section 4940(d)(2) applies, leave th	nie nart blank									
n section 4940(u)(z) applies, leave ti	iis part dialik.								<del></del>	
Was the foundation liable for the sect			ar in the base per	lod?					Yes	X No
If "Yes," the foundation doesn't qualif			ara maluna anu a	ntrion						
1 Enter the appropriate amount in (a)	· · · · · · · · · · · · · · · · · · ·	Structions ber	ore making any e				I		(d)	
Base period years Calendar year (or tax year beginnir	(b) Adjusted qualifying dist	ributions	Net value of no	(c) ncharita	ible-us	e assets		Distribi (col. (b) divi	itión ratio	'c))
2017	19 1117	1,581.	_ <del>.</del>			,137.		(001. (8) (111		55229
2016		6,988.				,759				7142
2015		9,798.				,772.				1998
2014		7,620.				,458.			.04	3769
2013		9,079.	_			,507.			.01	4536
2 Total of line 1, column (d)							2		.17	2674
3 Average distribution ratio for the 5	5-year base period - divide the total o	n line 2 by 5 0	, or by the numbe	er of yea	ars					
the foundation has been in exister	nce if less than 5 years						3		.03	4535
4 Enter the net value of noncharitab	le-use assets for 2018 from Part X. li	ne 5					4		1,385,	120.
	,									
5 Multiply line 4 by line 3							5		47,	835.
6 Enter 1% of net investment incom	ne (1% of Part I, line 27b)						6			707.
7 Add lines 5 and 6							7	-	48.	542.
8 Enter qualifying distributions from	Part XII, line 4	4h and	ata that cart	a a 40/ :	<b>.</b>		8		56,	211.
IL line a is equal to or greater than	TIME / CHECK THE BOX IN PART VI. JIME	in and compl	ere mar nam usini	บส 1% ำ	IAX FATE	•				

See the Part VI instructions.

20-3924425

P	a	'n	٥	4
г	1	u	С	- 4

	Excise Tax Based on Investment Income (Section 494)			948 -	- see ins	tructio	ns)	_
1a	Exompt operating foundations described in section 4940(d)(2), check here  and co							-
	Date of ruling or determination letter: (attach copy of letter if neo			\$250.30 \$250.30		**************************************		
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check here	<b>►</b> [X] :	and enter 1%	1		7	07.	
	of Part I, line 27b			1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1				
C	All other domestic foundations enter 2% of line 27b Exempt foreign organizations, enter 4%	6 of Part	t I, line 12, col (b)	10 mm	100000000000000000000000000000000000000			
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only, of	thers, en	ter -0-)	2			0.	
3	Add lines 1 and 2			3		7	07.	
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only, o	thers, er	nter -0-)	4	<u> </u>		0.	
5	Tax based on investment income. Subtract line 4 from line 3 If zero or less, enter -0-			5		7	07.	:
6	Credits/Payments							
а	2018 estimated tax payments and 2017 overpayment credited to 2018	Ga	1,266.			didipline	Alexandria A	
b	Exempt foreign organizations - tax withheld at source	6b	0.					
	Tax paid with application for extension of time to file (Form 8868)	6c	0.					
	Backup withholding erroneously withheld	6d	0.					į
	Total credits and payments Add lines 6a through 6d		·	. 7		1,2	66.	
8	Enter any penalty for underpayment of estimated tax. Check here X if Form 2220 is atta	ched		8			υ.	
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed		<b>.</b>	9	<u> </u>	<del></del>	EO	
	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid		FEO   10 / 11   10	10			59.	
	Enter the amount of line 10 to be: Credited to 2019 estimated tax		559 • Refunded ►	11	L		0.	
N. C1-A	Statements Regarding Activities	lation or	did it portionate or interiona			Yes	No	
1a	During the tax year, did the foundation attempt to influence any national, state, or local legis	lation or	aid it participate or intervene	101	[2] [2] [1]	*****	X	
L	any political campaign?	C	the instructions for the defin	ition	1	-	X	
D	Did it spend more than \$100 during the year (either directly or indirectly) for political purpose if the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of				<u>"</u> ئۇت	56 8. A.	级.):1	ĺ
	distributed by the foundation in connection with the activities.	n any m	aterials published of					ĺ
	Did the foundation file Form 1120-POL for this year?				نَعْنَدُدُ 1	C   255	X	
	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the	vear.			)	e e e e e e e e e e e e e e e e e e e		ĺ
٠	(1) On the foundation. > \$ 0 • (2) On foundation managers		0.		,			İ
e	Enter the reimbursement (if any) paid by the foundation during the year for political expendi	-		•	Charles Charles			į
Ĭ	managers. ►\$ 0.							į
2	Has the foundation engaged in any activities that have not previously been reported to the IF	<b>3</b> 57			2	!	X	
	If "Yes," attach a detailed description of the activities.				23			ĺ
3	Has the foundation made any changes, not previously reported to the IRS, in its governing i	nstrume	nt, articles of incorporation, o	r	14.5%			
	bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes				3	}	X	
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year	r۶			4:	a r	X	
b	If "Yes," has it filed a tax return on Form 990-T for this year?			N	/A 4	b		
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?	•			5	j	X	
	If "Yes," attach the statement required by General Instruction T							
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied en	ther:						
	By language in the governing instrument, or		*					
	By state legislation that effectively amends the governing instrument so that no mandatory	y direction	ons that conflict with the state	law				ļ
	remain in the governing instrument?				6		ļ	
7	Did the foundation have at least $$5,000$ in assets at any time during the year? If "Yes," comp	lete Part	t II, col. (c), and Part XV		7	X	28808827.01	
8a	Enter the states to which the foundation reports or with which it is registered. See instructio	ns. P			liĝ			
	WI	<b></b>	2		—— K			
b	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the A	.corney (	aenerai (or designate)		81			
	of each state as required by General Instruction G? If "No," attach explanation	ction 40	42/1)/3) or 40/2/1)/5) for calc	ndar	28		9450549	1
Э	Is the foundation claiming status as a private operating foundation within the meaning of services 2018 or the toxy year heavy year 20182 See the instructions for Both XIV. If "Yes " com-			iudí	9	166600 2000000	X	•
10	year 2018 or the tax year beginning in 2018? See the instructions for Part XIV. If "Yes," com Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule.				10		X	(
10		ne listing t	incii names and addresses	,		90-PF		
	<u>~</u>				. 01111 0		,_0.0)	

P	ant VIII Statements Regarding Activities (continued)			
			Yes	No
11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of			
	section 512(b)(13)? If "Yes," attach schedule. See instructions	11		Х
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		Χ/
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	X	
	Website address ► N/A			
14	The books are in care of ► SARA STREBLOW  Telephone no ► 920-4	99-7	901	
	Located at ► 2105 MUIRWOOD, GREEN BAY, WI ZIP+4 ►5			-
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - check here		Ď	
	and enter the amount of tax-exempt interest received or accrued during the year	· N	/A	
16	At any time during calendar year 2018, 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		Х
	See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes," enter the name of the	18182	<b>XXX</b>	XXX
	foreign country			
Pa	art 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.	020	Yes	No
18	a During the year, did the foundation (either directly or indirectly).	383	<b>%</b>	
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person?			
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from)			
	a disqualified person?			× 10
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?			
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?			
	(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)?		<b>全</b>	
	(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 )			
t	of fany 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	2202000	X-10X3
	Organizations relying on a current notice regarding disaster assistance, check here	* \$ 3 kg	*****	
	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 2018?	1c	32322,3285	X
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation	\$ 4.50	9979	
Ī	defined in section 4942(j)(3) or 4942(j)(5))			
a	a At the end of tax year 2018, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning		36 %	
	before 2018? Yes X No		×3.6.48	<b>*</b>
	If "Yes," list the years ▶	\$ C. S.	2.85 X	
Ł	Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2) (relating to incorrect	\$ 1.00 PM		
	valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer "No" and attach	<b>冷笑</b>	1	
	statement - see instructions.) N/A	2b	indifficult to come 5	ornica.
	: If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here.	(	04X68	W/M
	•			
3 <i>a</i>	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time	\$ 100 miles	390,09	
•	during the year?	4 × 5		
h	olf "Yes," did it have excess business holdings in 2018 as a result of (1) any purchase by the foundation or disqualified persons after	<b>***</b>		
•	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		X-3489 \$465-34	
	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 2018 )  N/A	3b	كستشميط	LEN'SID A
42	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a		Х
	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that		(1) (1) (1)	
	had not been removed from jeonardy before the first day of the tay year beginning in 2018?	4b	100 M	دستوند <b>X</b>

Form 4720 May Be F	Required (contin	ued)		
		Ś	Yes	No
n 4945(e))?	Y6	es 🗓 No 💈	<b>E E E E E E E E E E</b>	
r to carry on, directly or indire	ectly,	8		
•		es 🗶 No 💡		19/10
?	Ye	es 🗶 No 🖟	W. 14 100,148	o was aid
(1) Carry on propaganda, or otherwise attempt to influence legislation (section 4945(e))?  (2) Influence the outcome of any specific public election (see section 4955), or to carry on, directly or indirectly, any voter registration drive?  (3) Provide a grant to an individual for travel, study, or other similar purposes?  (4) Provide a grant to an organization other than a charitable, etc., organization described in section 4945(d)(4)(A)? See instructions  (5) Provide for any purpose other than religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals?  (5) If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify under the exceptions described in Regulations section 53.4945 or in a current notice regarding disaster assistance? See instructions  Organizations relying on a current notice regarding disaster assistance, check here  c If the answer is "Yes" to question 5a(4), does the foundation claim exemption from the tax because it maintained expenditure responsibility for the grant?  N/A  Yes No  15  No  16  No  17  No  18  No  19  No  19  No  10  No  10  No  11  No  12  No  13  No  14  No  15  No  15  No  16  No  17  No  18  No  19  No  19  No  10  No  10  No  11  No  12  No  13  No  14  No  15  No  15  No  16  No  17  No  18  No  19  No  19  No  10  No  10  No  10  No  11  No  12  No  13  No  14  No  15  No  16  No  17  No  18  No  19  No  19  No  10  No  10  No  10  No  11  No  12  No  13  No  14  No  15  No  15  No  16  No  17  No  18  No  19  No  19  No  10  No  10  No  10  No  11  No  12  No  13  No  14  No  15  No  15  No  16  No  16  No  17  No  18  No  19  No  19  No  10  No  10  No  10  No  10  No  10  No  11  No  12  No  13  No  14  No  15  No  16  No  16  No  17  No  18  No  19  No  19  No  10  No				
	Ye	es 🗶 No 🦠		
or educational purposes, or f	or		2003x 18678	
		es 🗓 No 🖔		- 138 78 84 - 134 0 3
der the exceptions described i		8,		
	v	N/A	5b	
			323 SEX	
	ned	Š		
		es 🔲 No 🧗		
,		5   8)		
pav premiums on				
,	Y6	es 🗶 No		
ersonal benefit contract?		<del></del>	6b	X
		132	<b>960 (853)</b>	9387,19
helter transaction?		es 🗶 No 🖁		
		<u></u>	7b	3 / 30 1798
		73	100 S	₹ · ₹ · ]
1,000,000 11110111111111111111111111111		es X No		34.0
ees Foundation Ma			23 S. 44 L. 40, 80,	er in dans virigi
- ·		•		
heir compensation.		···		
(b) Title, and average		(d) Contributions to	(e) Ex	pense
		and deferred		
	, , , , , , , , , , , , , , , , , , ,	compensation		
0.10	0.	0.		0.
0.10	0.	0.		0.
				<del></del>
0.50	0.	0.		0.
i				
0.10	0.	0.		0.
				<u> </u>
(b) Title, and average		(d) Contributions to	(e) Ex	penșe
` 'hours per week	(c) Compensation	and deferred	accoun	t, other inces
devoted to position		compensation		
	,			
			-	
			-	
	L		l	0
		<u>P</u>	000 DE	
	n 4945(e))? In to carry on, directly or indirectly or educational purposes, or form the exceptions described in uctions here from the tax because it maintain the pay premiums on the error of the exception of the ex	n 4945(e))?  In to carry on, directly or indirectly,  In described in section  In described in s	in 4945(e))?  If to carry on, directly or indirectly,  If the exceptions described in Regulations  If the exception described in Regu	Yes   No   Yes   No   No   No   No   No   No   No   N

823551 12-11-18

Part VIII Information About Officers, Directors, Trustees, Foundation Mana Paid Employees, and Contractors (continued)	gers, Highly	L L L L L L L L L L L L L L L L L L L
3 Five highest-paid independent contractors for professional services. If none, enter "NONE."		
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE		<del>-   ``                                 </del>
		-
		_
	<del> </del>	▶ 0
Total number of others receiving over \$50,000 for professional services		<u>▶</u> 1 0
Part IX-A Summary of Direct Charitable Activities		
List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information	such as the	Expenses
number of organizations and other beneficiaries served, conferences convened, research papers produced, etc		<u> </u>
1 N/A		
		··-
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 on lines 1 and 2.		Amount
1 N/A		
2		
All other program-related investments. See instructions.		
3		
<u> </u>		
Tabel Add lose of these set 2	<b>•</b>	0.
Total. Add lines 1 through 3		Form <b>990-PF</b> (2018)
		1 01111 000 FF (2010)

Part X Minimum Investment Return (All domestic foundate	tions must complete this part. Foreign fou	ndations, s	ee instructions )
1 Fair market value of assets not used (or held for use) directly in carrying out cl	haritable, etc., purposes		
a Average monthly fair market value of securities		1a	1,383,355. 22,858.
b Average of monthly cash balances		1b	22,858.
c Fair market value of all other assets		1c	
d Total (add lines 1a, b, and c)		1d	1,406,213.
e 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	1,406,213.
4 Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater a	imount, see instructions)	4	21,093.
5 Net value of noncharitable-use assets Subtract line 4 from line 3 Enter here	and on Part V, line 4	5	1,385,120.
6 Minimum investment return Enter 5% of line 5 ADJUSTED FOR	SHORT TAX PERIOD	6	17,457.
Part XI Distributable Amount (see instructions) (Section 4942( foreign organizations, check here ▶ ☐ and do not complete the		nd certain	
1 Minimum investment return from Part X, line 6		1	17,457.
2a Tax on investment income for 2018 from Part VI, line 5	2a   707.		
b Income tax for 2018 (This does not include the tax from Part VI.)	2b	1	
c Add lines 2a and 2b		2c	707.
3 Distributable amount before adjustments. Subtract line 2c from line 1		3	16,750.
4 Recoveries of amounts treated as qualifying distributions		4	0.
5 Add lines 3 and 4		5	16,750.
6 Deduction from distributable amount (see instructions)		6	0.
7 Distributable amount as adjusted Subtract line 6 from line 5. Enter here and c	on Part XIII, line 1	7	16,750.
Part XII Qualifying Distributions (see instructions)			
1 Amounts paid (including administrative expenses) to accomplish charitable, et	tc , purposes		
a Expenses, contributions, gifts, etc total from Part I, column (d), line 26		1a	56,211.
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 of	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, lin	ne 8; and Part XIII, line 4	4	56,211.
5 Foundations that qualify under section 4940(e) for the reduced rate of tax on n	net investment		
income. Enter 1% of Part I, line 27b		5	707. 55,504.
6 Adjusted qualifying distributions. Subtract line 5 from line 4		6	55,504.
Note: The amount on line 6 will be used in Part V, column (b), in subsequent y	years when calculating whether the foundation	qualifies for	the section

Part XIII Undistributed Income (see instructions)

•	(a) Corpus	(b) Years prior to 2017	(c) 2017	(d) 2018
1 Distributable amount for 2018 from Part XI,		-		16,750.
2 Undistributed income, if any, as of the end of 2018				20,730.
a Enter amount for 2017 only			55,236.	
b Total for prior years			33,230.	
b rotal for prior years		0.		
3 Excess distributions carryover, if any, to 2018:				
a From 2013				
b From 2014				•
c From 2015				
d From 2016				]
e From 2017	0		~	
f Total of lines 3a through e	0.			
4 Qualifying distributions for 2018 from				
Part XII, line 4: ►\$ 56,211.				
a Applied to 2017, but not more than line 2a			55,236.	
<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 2018 distributable amount	_			975.
e Remaining amount distributed out of corpus	0.		•	
5 Excess distributions carryover applied to 2018	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	0.			`
<b>b</b> Prior years' undistributed income. Subtract				
line 4b from line 2b		0.		
c Enter the amount of prior years'				ļ
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 2017. Subtract line				
4a from line 2a Taxable amount - see instr.			0.	
f Undistributed income for 2018. Subtract				
lines 4d and 5 from line 1. This amount must				
be distributed in 2019				15,775.
7 Amounts treated as distributions out of			· · · · · · · · · · · · · · · · · · ·	13///31
corpus to satisfy requirements imposed by				
section 170(b)(1)(F) or 4942(g)(3) (Election	0.			
may be required - see instructions)	<u> </u>			
8 Excess distributions carryover from 2013	0.			
not applied on line 5 or line 7			<del>., .</del>	
9 Excess distributions carryover to 2019.	0.			
Subtract lines 7 and 8 from line 6a				
10 Analysis of line 9				
a Excess from 2014				
b Excess from 2015				
c Excess from 2016				· ·
d Excess from 2017				ļ
e Excess from 2018				

823581 12-11-18

23524 1

Part XV Supplementary Information	(continued)			
3 Grants and Contributions Paid During the Y		Payment	·	
Recipient	If recipient is an andividual, show any relationship to any foundation manager	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	or substantial contributor	recipient		
a Paid during the year				
ALZHEIMER'S ASSOCIATION GREATER WI CHAPTER P.O. BOX 96011	N/A	₽C	SUPPORT AZHEIMER'S RESEARCH	
WASHINGTON, DC 20090				200.
AMERICAN DIABETES ASSOCIATION P.O. BOX 1834 MERRIFIELD, VA 221168034	N/A	PC	SUPPORT DIABETES RESEARCH	200.
BERRIFIELD, VA 221100034				200.
AMERICAN RED CROSS 2131 DECKNER AVE	N/A	PC	PROVIDE SUPPORT TO THOSE IN NEED	
GREEN BAY, WI 54313				200.
BLACKHAWK CHURCH 9620 BRADER WAY	N/A	PC	SUPPORT RELIGIOUS NEEDS OF CHURCH	
MIDDLETON, WI 53562			Name of Choken	1,000.
BRAZEAU EMERGENCY SERVICES 10892 PARKWAY RD	N/A	PC	PROVIDE SUPPORT FOR THOSE IN NEED	
POUND, WI 54161	 NTINUATION SHEE	<u> </u> 'ग' ( ८ )	<b>▶</b> 3a	200. 55,474.
b Approved for future payment	TINOATION SHEE	11 (8)	Ja Ja	
NONE				
Total	L		<b>▶</b> 3b	0.
. 0161				orm 000 DE (2019)

Part XV Supplementary Informa  3 Grants and Contributions Paid During t				
Recipient	If recipient is an individual,	Farradation	Durages of great or	
Name and address (home or business)	show any relationship to any foundation manager or substantial contributor	Foundation status of	Purpose of grant or contribution	Amount
	or substantial contributor	recipient		
CHRISTUS VICTOR LUTHERAN CHURCH	N/A	PC	SUPPORT RELIGIOUS	
15600 N TAMIAMI TRAIL			NEEDS OF CHURCH	
NAPLES, FL 34110		1		2,000
COLEMAN AREA RESCUE SQUAD	N/A	₽C	PROVIDE SUPPORT TO	
PO BOX 139			THOSE IN NEED	200
COLEMAN, WI 54112		<del> </del>		200
CRIVITZ RESCUE SQUAD	N/A	₽C	PROVIDE SUPPORT FOR	
1020 HENRIETTE AVE			THOSE IN NEED	500
CRIVITZ, WI 54114		<u> </u>		
ENCLE PROOF CHIRCH	1/2	PC	SUPPORT RELIGIOUS	
EAGLE BROOK CHURCH 7015 20TH AVE	N/A	FC	NEEDS OF CHURCH	
CENTERVILLE, MN 55038				7,000
				·
FOUNTAIN OF LIFE INTERNATIONAL	N/A	₽C	PROVIDE SUPPORT FOR	
1055 E HEARN ROAD	.,		MINISTRIES	
PHOENIX, AZ 85022				1,600
		,		
GRACE TO YOU	N/A	₽C	PROVIDE MINISTRY	
PO BOX 400			SUPPORT	)
PANORAMA CITY, CA 91412	-			2,000
HOME RESPITE CARE INC	N/A	PC	PROVIDE SUPPORT FOR	
855 S MAIN ST			THOSE IN NEED	
OCONTO FALLS, WI 54154		-		50,
LUTHER SEMINARY	N/A	₽C	SUPPORT RELIGIOUS	•
2481 COMO AVE			NEEDS OF SEMINARY	3,000.
ST PAUL, MN 55108	-		-	3,000
NODEWING THE COLUMN TO THE COL	7/2	nc.	TO DROWING CRIBITATION	
NORTHWESTERN COLLEGE & RADIO	N/A	PC	TO PROVIDE SPIRITUAL SUPPORT	
3003 SNELLING AVE. NORTH ST PAUL, MN 55133				5,000
52 1.10H, 1M 55155			<del>                                     </del>	
OCONTO AREA HUMANE SOCIETY	N/A	PC	PROVIDE SUPPORT FOR	
P.O. BOX 241	N/A	<u></u>	CARE OF ANIMALS	
OCONTO, WI 54153				200.
Total from continuation sheets	<u> </u>			53,674.

Grants and Contributions Paid During the Year (Continuation)  Recipient  If recipient is an individual, show any relationship to any foundation manager or substantial contributor  OUR REDEEMER'S LUTHERAN CHURCH  11005 COUNTY HIGHWAY M  SURING, WI 54174  SHAWANO COUNTY HUMANE SOCIETY  N/A  SHAWANO, WI 54166  ST ANDREWS LUTHERAN CHURCH  M/A  ST ANDREWS LUTHERAN CHURCH  MAHTOMEDI, MN 55155  MAHTOMEDI, MN 55155  A PAWS FOR ABILITY  N/A  PC  PROVIDE SUPPORT IN CARE OF ANIMALS  SUPPORT 2018 RELIGIOUS  N/A  PC  SUPPORT 2018 RELIGIOUS  SUPPORT 2018 RELIGIOUS  N/A  PC  PROVIDE SUPPORT 10  CARE OF ANIMALS  PC  PROVIDE SUPPORT 2018 RELIGIOUS  SUPPORT 2018 RELIGIOUS  N/A  PC  PROVIDE SUPPORT 2018 RELIGIOUS  PROVIDE SUPPORT 2018 RELIGIOUS  N/A  PC  PROVIDE SUPPORT 2018 RELIGIOUS  PROVIDE SUPPORT 2018	or Amount
Show any relationship to any foundation manager or substantial contribution  Name and address (home or business)  OUR REDEEMER'S LUTHERAN CHURCH 11005 COUNTY HIGHWAY M SURING, WI 54174  SHAWANO COUNTY HUMANE SOCIETY 1290 JAYCEE CT SHAWANO, WI 54166  ST ANDREWS LUTHERAN CHURCH N/A  PC PROVIDE SUPPORT IN CARE OF ANIMALS  ST ANDREWS LUTHERAN CHURCH N/A  PC SUPPORT 2018 RELIGIOUS  ANIMALS  ST ANDREWS LUTHERAN CHURCH N/A  PC SUPPORT 2018 RELIGIOUS  MAHTOMEDI, MN 55155	or Amount
OUR REDEEMER'S LUTHERAN CHURCH 11005 COUNTY HIGHWAY M SHAWANO COUNTY HUMANE SOCIETY 1290 JAYCEE CT SHAWANO, WI 54166  ST ANDREWS LUTHERAN CHURCH 300 STILLWATER RD MAHTOMEDI, MN 55155  OVER 10 SUPPORT 10 SUPPOR	
11005 COUNTY HIGHWAY M SURING, WI 54174  SHAWANO COUNTY HUMANE SOCIETY 1290 JAYCEE CT SHAWANO, WI 54166  ST ANDREWS LUTHERAN CHURCH 300 STILLWATER RD MAHTOMEDI, MN 55155  A PAWS FOR ABILITY  N/A  PC PROVIDE SUPPORT TO PROVIDE SUPPORT SUPPORT TO PROVIDE SUPPORT SUPPORT SUPPORT SUPPORT SUPPORT SUPPO	
11005 COUNTY HIGHWAY M SURING, WI 54174  SHAWANO COUNTY HUMANE SOCIETY 1290 JAYCEE CT SHAWANO, WI 54166  ST ANDREWS LUTHERAN CHURCH 300 STILLWATER RD MAHTOMEDI, MN 55155  A PAWS FOR ABILITY  N/A  PC PROVIDE SUPPORT TO PROVIDE SUPPORT SUPPORT TO PROVIDE SUPPORT SUPPORT SUPPORT SUPPORT SUPPORT SUPPO	
SHAWANO COUNTY HUMANE SOCIETY  1290 JAYCEE CT SHAWANO, WI 54166  ST ANDREWS LUTHERAN CHURCH 300 STILLWATER RD MAHTOMEDI, MN 55155  N/A  PC PROVIDE SUPPORT R OPERATIONS  4 PAWS FOR ABILITY  N/A  PC PROVIDE SUPPORT 7	,
SHAWANO COUNTY HUMANE SOCIETY  1290 JAYCEE CT SHAWANO, WI 54166  ST ANDREWS LUTHERAN CHURCH 300 STILLWATER RD MAHTOMEDI, MN 55155  A PAWS FOR ABILITY  N/A  PC PROVIDE SUPPORT 10  PC PROVIDE SUPPORT 10  PC PROVIDE SUPPORT 10	18,724
1290 JAYCEE CT SHAWANO, WI 54166  ST ANDREWS LUTHERAN CHURCH 300 STILLWATER RD MAHTOMEDI, MN 55155  A PAWS FOR ABILITY  CARE OF ANIMALS  CARE OF ANIMALS  CARE OF ANIMALS  CARE OF ANIMALS  PC SUPPORT 2018 RELITED  OPERATIONS	
1290 JAYCEE CT  SHAWANO, WI 54166  ST ANDREWS LUTHERAN CHURCH 300 STILLWATER RD MAHTOMEDI, MN 55155  A PAWS FOR ABILITY  CARE OF ANIMALS  CARE OF ANIMALS  CARE OF ANIMALS  PC  SUPPORT 2018 RELITED TO SUPPORT T	FOR
ST ANDREWS LUTHERAN CHURCH 300 STILLWATER RD MAHTOMEDI, MN 55155  A PAWS FOR ABILITY  N/A  PC SUPPORT 2018 RELITY  OPERATIONS  PROVIDE SUPPORT 1	
300 STILLWATER RD  MAHTOMEDI, MN 55155  A PAWS FOR ABILITY  N/A  PC  PROVIDE SUPPORT 1	200.
300 STILLWATER RD  MAHTOMEDI, MN 55155  A PAWS FOR ABILITY  N/A  PC  PROVIDE SUPPORT 1	
MAHTOMEDI, MN 55155  4 PAWS FOR ABILITY  N/A  PC  PROVIDE SUPPORT 1	IGIOUS
4 PAWS FOR ABILITY N/A PC PROVIDE SUPPORT T	
	6,000.
253 DAYTON AVE	.0
XENIA, OH 45385 SERVICE DOGS	200.
ABATA, ON 45303	200.
DOCTORS WITHOUT BORDERS N/A PC PROVIDE MEDICAL C	CARE
40 RECTOR ST., 16TH FLOOR TO THOSE IN NEED	
NEW YORK, NY 10006	200.
HABITAT FOR HUMANITY INTERNATIONAL N/A PC PROVIDE SUPPORT 1	20
322 W. LAMAR ST HELP FAMILIES WIT	'H
AMERICUS, GA 31709-3543 SAFE/AFFORDABLE	
SHELTER	200.
HOLY TRINITY CATHOLIC CHURCH N/A PC SUPPORT RELIGIOUS	<b>i</b>
716 MADISON STREET  OCONTO, WI 54153  NEEDS OF CHURCH	100.
,	
MENOMINEE AREA SHELTER N/A PC PROVIDE SHELTER T	20
N184 HAGGERSON CT THOSE IN NEED	
MENOMINEE, MI 49858	200.
MICHAEL J FOX FOUNDATION N/A PC SUPPORT PARKINSON	ı's
PO BOX 5014 RESEARCH	
HAGERSTOWN, MD 21741-5014	5,000.
OUR REDEEMER'S LUTHERAN CHURCH ELCA N/A PC SUPPORT WOMEN OF	
WOMEN CHRISTIAN FAITH	
11005 COUNTY HIGHWAY M	100
SURING, WI 54174  Total from continuation sheets	100.

3 Grants and Contributions Paid During the	Year (Continuation)			
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation	Purpose of grant or contribution	Amount
Name and address (home or business)	any foundation manager or substantial contributor	status of recipient	contribution	Amount
TEPHEN SILLER TUNNEL TO TOWERS	N/A	PC	PROVIDE SUPPORT TO	
OUNDATION	["		FIREFIGHTERS, MILITARY	
361 HYLAN BLVD			AND FIRST RESPONDERS	
STATEN ISLAND, NY 10306				20
102.11.2, 11 1000				
ISCONSIN HUMANE SOCIETY	N/A	₽C	PROVIDE SUPPORT FOR	
830 RADISSON ST		1	CARE OF ANIMALS	
GREEN BAY, WI 54302				1,00
,				
ı				
				· · · ·
	<del></del>			
			•	
				<u> </u>

Part XVI-A	Analysis of Income-Producing	Activities
1 41 ( ) ( )	, maryon or mooning i roadoning	, , , , , , , , , , , , , , , , , , , ,

Enter gross amounts unless otherwise indicated	Unrelated I	ousiness income		by section 512, 513, or 514	(e)
-	(a) Business	(b) Amount	(C) Exclu- sion	(d) Amount	Related or exempt function income
1 Program service revenue	code	Amount	code	Amount	Tunction income
a					
b					<del></del>
c					
d					
e					
f	-		$\perp$		
g Fees and contracts from government agencies					
2 Membership dues and assessments					
3 Interest on savings and temporary cash investments					
4 Dividends and interest from securities			14	17,669.	
5 Net rental income or (loss) from real estate					
a Debt-financed property					
b Not debt-financed property					
6 Net rental income or (loss) from personal property					
7 Other investment income					
8 Gain or (loss) from sales of assets other than inventory			18	55,117.	-
9 Net income or (loss) from special events					
10 Gross profit or (loss) from sales of inventory					
11 Other revenue:					•
a					
b					
С					
d					
e					
12 Subtotal. Add columns (b), (d), and (e)			).	72,786.	0
13 Total Add line 12, columns (b), (d), and (e)	<del></del>			13	72,786
(See worksheet in line 13 instructions to verify calculations.)					

▼	the foundation's exempt purposes (other than by providing funds for such purposes).
T	
<del>-  </del>	
<del></del>	

Form 990-F		BLOW FAMII				20-392			ige 13
Part X		•	nsfers to a	and Transactions	and Relations	nips With Noncha	ritable	,	
	`Exempt Orgar	nizations			<del> </del>				
1 Did th	ne organization directly or ind	irectly engage in any	of the following	ng with any other organizat	ion described in sect	ion 501(c)	İ	Yes	No
	r than section 501(c)(3) orga			= -	?				ĺ
	fers from the reporting found	dation to a noncharita	able exempt oi	rganization of					_=
(1) (							1a(1)		Х
(2) (	Other assets						1a(2)	<u> </u>	Х
	transactions:								
	Sales of assets to a noncharita						1b(1)		X
(2) P	Purchases of assets from a no	oncharitable exempt	organization				1b(2)		Х
	Rental of facilities, equipment,						1b(3)	<u> </u>	Х
	Reimbursement arrangements	3					1b(4)	<u> </u>	X
	oans or loan guarantees						1b(5)		X
	Performance of services or me		_				1b(6)		X
	ng of facilities, equipment, ma	-					1c	<u> </u>	X
	answer to any of the above is		_					sets,	
	vices given by the reporting f				ue in any transaction	or sharing arrangement, s	show in		
	nn (d) the value of the goods,								
(a)Line no	(b) Amount involved	(c) Name o		e exempt organization	(0) Description	of transfers, transactions, and	sharing ar	rangeme —	nts ———
	<u> </u>	<del> </del>	N/A						
		<del> </del>							
		<b></b>							
		<del> </del>							
		<del> </del>		<del></del>	<del></del>				
		<del> </del>	<del></del>		<del></del>				
		<del> </del>							
		<del>                                     </del>			<del></del>	<del></del>			
				· · · · · · · · · · · · · · · · · · ·					
		<del>                                     </del>			<u> </u>				
		1							
2a Is the	foundation directly or indirec	tly affiliated with, or	related to, one	or more tax-exempt organ	izations described				
ın sec	tion 501(c) (other than sectio	on 501(c)(3)) or in se	ection 527?				Yes	X	] No
b If "Yes	s," complete the following sch				<u></u>				
	(a) Name of org	ganization		(b) Type of organization		(c) Description of relations	hip		
	N/A								
Τū	nder penalties of perjury, I declare	that I have examined th	ıs return, ıncludır	ng accompanying schedules and	statements, and to the	best of my knowledge			
	nd belief, it is true, correct, and cor					has any knowledge retu	y the IHS c irn with the	liscuss to prepare	nis er
Here	HALL V	treplow		14-10-10	PRESID		wn below Yes		no No
	Signature of officer or trustee			Date	Title		<u></u> 163		, 140
	Print/Type preparer's na		Preparer's s		Date	Check if PTIN			
			,			self- employed			
Paid	WILLIAM J.	RITCHAY	WILLIA	M J. RITCHA	03/22/19	P00	0035	070	
Prepare	er Firm's name ►CLI					Firm's EIN ▶ 41-0			
Use On	ily					]			
	Firm's address ▶ PO	BOX 2381	. 9						

Phone no (920)436-7800

GREEN BAY, WI 54305-3819

FORM 990-PF	DIVIDENDS	S AND INTER	EST FROM S	SECURITIES	S S'	TATEMENT	1
SOURCE	GROSS AMOUNT	CAPITAL GAINS DIVIDEND	REVE			(C) ADJUST NET INC	
BAIRD #5982 BAIRD #6348	77. 61,969.		0. 7. 17,	77. ,592.	77. 17,592.		
TO PART I, LINE 4	62,046.	44,37	7. 17,	,669.	17,669.		
FORM 990-PF		ACCOUNTI	NG FEES		S'	TATEMENT	2
DESCRIPTION		(A) EXPENSES PER BOOKS		ST- ADJ		(D) CHARITA PURPOS	
	 IS	1,464.	7	732.		7	32.
TAX PREPARATION FEE	-						
TAX PREPARATION FEE TO FORM 990-PF, PG	, —	1,464.	7	732.		7	32.
	, —	1,464. OTHER E		732.	S	7 TATEMENT	32.
TO FORM 990-PF, PG	, —		XPENSES (B) NET INVES	GT- ADJ	(C) JUSTED	TATEMENT	3 BLE
TO FORM 990-PF, PG FORM 990-PF	, —	OTHER E (A) EXPENSES	XPENSES  (B)  NET INVES  MENT INCO	ST- ADJ OME NET	(C) JUSTED	TATEMENT (D) CHARITA	3 BLE
TO FORM 990-PF, PG  FORM 990-PF  DESCRIPTION  MANAGEMENT FEES	1, LN 16B	OTHER E  (A)  EXPENSES PER BOOKS  1,316.	XPENSES  (B)  NET INVES  MENT INCO	ST- ADJ OME NET	(C) JUSTED	TATEMENT (D) CHARITA	3 BLE ES
TO FORM 990-PF, PG  FORM 990-PF  DESCRIPTION  MANAGEMENT FEES MISCELLANEOUS	1, LN 16B	OTHER E  (A)  EXPENSES PER BOOKS  1,316. 10.	XPENSES  (B)  NET INVES  MENT INCO  1,3	ST- ADS DME NET 316.	(C) JUSTED INCOME	TATEMENT (D) CHARITA	3 BLE ES 0. 5.
TO FORM 990-PF, PG  FORM 990-PF  DESCRIPTION  MANAGEMENT FEES MISCELLANEOUS  TO FORM 990-PF, PG	1, LN 16B	OTHER E  (A) EXPENSES PER BOOKS  1,316. 10.  1,326.  OTHER INV	XPENSES  (B)  NET INVES  MENT INCO  1,3	ST- ADS DME NET 316.	C) JUSTED INCOME	(D) CHARITA PURPOS	3 BLE ES 0. 5.
TO FORM 990-PF, PG  FORM 990-PF  DESCRIPTION  MANAGEMENT FEES MISCELLANEOUS  TO FORM 990-PF, PG  FORM 990-PF	1, LN 16B	OTHER E  (A) EXPENSES PER BOOKS  1,316. 10.  1,326.  OTHER INV	XPENSES  (B)  NET INVES  MENT INCO  1,3  1,3  ESTMENTS  LUATION	ST- ADJ DME NET 316. 5.	C) JUSTED INCOME  ST	TATEMENT  (D)  CHARITA  PURPOS  TATEMENT  AIR MARKE	3 BLE ES 0. 5. 5.

FORM 990-PF

PART XV - LINE 1A LIST OF FOUNDATION MANAGERS STATEMENT

5

NAME OF MANAGER

CURTIS D STREBLOW IRENE M STREBLOW SARA L STREBLOW HOLLY L ZOBOROWSKI