

For calendar year 2018, or tax year beginning 01-01-2018, and ending 12-31-2018

Name of foundation THE ROBERT AND SUSAN BROWN FAMILY FOUNDATION INC		A Employer identification number 26-0743538	
Number and street (or P O box number if mail is not delivered to street address) PO BOX 201		Room/suite	B Telephone number (see instructions) (920) 727-1137
City or town, state or province, country, and ZIP or foreign postal code NEENAH, WI 549570201		C If exemption application is pending, check here ▶ <input type="checkbox"/>	
G Check all that apply <input type="checkbox"/> Initial return <input type="checkbox"/> Final return <input type="checkbox"/> Address change <input type="checkbox"/> Initial return of a former public charity <input type="checkbox"/> Amended return <input type="checkbox"/> Name change		D 1. Foreign organizations, check here ▶ <input type="checkbox"/> 2 Foreign organizations meeting the 85% test, check here and attach computation ▶ <input type="checkbox"/>	
H Check type of organization <input checked="" type="checkbox"/> Section 501(c)(3) exempt private foundation <input type="checkbox"/> Section 4947(a)(1) nonexempt charitable trust <input type="checkbox"/> Other taxable private foundation		E If private foundation status was terminated under section 507(b)(1)(A), check here ▶ <input type="checkbox"/>	
I Fair market value of all assets at end of year (from Part II, col (c), line 16) ▶ \$ 6,659,233		F If the foundation is in a 60-month termination under section 507(b)(1)(B), check here ▶ <input type="checkbox"/>	
J Accounting method <input checked="" type="checkbox"/> Cash <input type="checkbox"/> Accrual <input type="checkbox"/> Other (specify) _____ (Part I, column (d) must be on cash basis)			

Part I Analysis of Revenue and Expenses (The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a) (see instructions))		(a) Revenue and expenses per books	(b) Net investment income	(c) Adjusted net income	(d) Disbursements for charitable purposes (cash basis only)
Revenue	1 Contributions, gifts, grants, etc , received (attach schedule)				
	2 Check <input checked="" type="checkbox"/> If the foundation is not required to attach Sch B				
	3 Interest on savings and temporary cash investments				
	4 Dividends and interest from securities	162,868	162,868		
	5a Gross rents				
	b Net rental income or (loss) _____				
	6a Net gain or (loss) from sale of assets not on line 10	158,669			
	b Gross sales price for all assets on line 6a 780,030				
	7 Capital gain net income (from Part IV, line 2)		158,669		
	8 Net short-term capital gain				
	9 Income modifications				
	10a Gross sales less returns and allowances				
Operating and Administrative Expenses	b Less Cost of goods sold				
	c Gross profit or (loss) (attach schedule)				
	11 Other income (attach schedule)				
	12 Total. Add lines 1 through 11	321,537	321,537		
	13 Compensation of officers, directors, trustees, etc	0	0		0
	14 Other employee salaries and wages				
	15 Pension plans, employee benefits				
	16a Legal fees (attach schedule)				
	b Accounting fees (attach schedule)	2,236	0		2,236
	c Other professional fees (attach schedule)				
	17 Interest				
	18 Taxes (attach schedule) (see instructions)	995	995		0
	19 Depreciation (attach schedule) and depletion				
	20 Occupancy				
	21 Travel, conferences, and meetings				
	22 Printing and publications				
	23 Other expenses (attach schedule)	30,693	17,827		12,866
	24 Total operating and administrative expenses. Add lines 13 through 23	33,924	18,822		15,102
	25 Contributions, gifts, grants paid	343,000			343,000
	26 Total expenses and disbursements. Add lines 24 and 25	376,924	18,822		358,102
	27 Subtract line 26 from line 12				
	a Excess of revenue over expenses and disbursements	-55,387			
	b Net investment income (if negative, enter -0-)		302,715		
c Adjusted net income (if negative, enter -0-)					

Part II Balance Sheets		Attached schedules and amounts in the description column should be for end-of-year amounts only (See instructions)			
		Beginning of year (a) Book Value	End of year (b) Book Value (c) Fair Market Value		
Assets	1	Cash—non-interest-bearing			
	2	Savings and temporary cash investments	394,946	332,524	332,524
	3	Accounts receivable ▶ _____ Less allowance for doubtful accounts ▶ _____			
	4	Pledges receivable ▶ _____ Less allowance for doubtful accounts ▶ _____			
	5	Grants receivable			
	6	Receivables due from officers, directors, trustees, and other disqualified persons (attach schedule) (see instructions)			
	7	Other notes and loans receivable (attach schedule) ▶ _____ Less allowance for doubtful accounts ▶ _____			
	8	Inventories for sale or use			
	9	Prepaid expenses and deferred charges			
	10a	Investments—U S and state government obligations (attach schedule)			
	b	Investments—corporate stock (attach schedule)	3,777,726	3,748,047	4,768,386
	c	Investments—corporate bonds (attach schedule)	1,535,713	1,572,038	1,558,323
	11	Investments—land, buildings, and equipment basis ▶ _____ Less accumulated depreciation (attach schedule) ▶ _____			
	12	Investments—mortgage loans			
	13	Investments—other (attach schedule)			
	14	Land, buildings, and equipment basis ▶ _____ Less accumulated depreciation (attach schedule) ▶ _____			
15	Other assets (describe ▶ _____)				
16	Total assets (to be completed by all filers—see the instructions Also, see page 1, item I)	5,708,385	5,652,609	6,659,233	
Liabilities	17	Accounts payable and accrued expenses			
	18	Grants payable			
	19	Deferred revenue			
	20	Loans from officers, directors, trustees, and other disqualified persons			
	21	Mortgages and other notes payable (attach schedule)			
	22	Other liabilities (describe ▶ _____)			
	23	Total liabilities (add lines 17 through 22)	0	0	
Net Assets or Fund Balances	Foundations that follow SFAS 117, check here <input type="checkbox"/> and complete lines 24 through 26 and lines 30 and 31.				
	24	Unrestricted			
	25	Temporarily restricted			
	26	Permanently restricted			
	Foundations that do not follow SFAS 117, check here <input checked="" type="checkbox"/> and complete lines 27 through 31.				
	27	Capital stock, trust principal, or current funds	0	0	
	28	Paid-in or capital surplus, or land, bldg , and equipment fund	0	0	
	29	Retained earnings, accumulated income, endowment, or other funds	5,708,385	5,652,609	
	30	Total net assets or fund balances (see instructions)	5,708,385	5,652,609	
31	Total liabilities and net assets/fund balances (see instructions) .	5,708,385	5,652,609		

Part III Analysis of Changes in Net Assets or Fund Balances

1	Total net assets or fund balances at beginning of year—Part II, column (a), line 30 (must agree with end-of-year figure reported on prior year's return)	1	5,708,385
2	Enter amount from Part I, line 27a	2	-55,387
3	Other increases not included in line 2 (itemize) ▶ _____	3	0
4	Add lines 1, 2, and 3	4	5,652,998
5	Decreases not included in line 2 (itemize) ▶ _____	5	389
6	Total net assets or fund balances at end of year (line 4 minus line 5)—Part II, column (b), line 30 .	6	5,652,609

Part IV Capital Gains and Losses for Tax on Investment Income

(a) List and describe the kind(s) of property sold (e g , real estate, 2-story brick warehouse, or common stock, 200 shs MLC Co)		(b) How acquired P—Purchase D—Donation	(c) Date acquired (mo , day, yr)	(d) Date sold (mo , day, yr)
1a See Additional Data Table				
b				
c				
d				
e				

(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale	(h) Gain or (loss) (e) plus (f) minus (g)
a See Additional Data Table			
b			
c			
d			
e			

Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69

(i) F M V as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col (i) over col (j), if any	(l) Gains (Col (h) gain minus col (k), but not less than -0-) or Losses (from col (h))
a See Additional Data Table			
b			
c			
d			
e			

2 Capital gain net income or (net capital loss)	<div> <div>If gain, also enter in Part I, line 7</div> <div>If (loss), enter -0- in Part I, line 7</div> </div>	2	158,669
3 Net short-term capital gain or (loss) as defined in sections 1222(5) and (6)	<div> <div>If gain, also enter in Part I, line 8, column (c) (see instructions)</div> <div>If (loss), enter -0- in Part I, line 8</div> </div>	3	

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?



Yes



No

If "Yes," the foundation does not qualify under section 4940(e) Do not complete this part

1 Enter the appropriate amount in each column for each year, see instructions before making any entries

(a) Base period years Calendar year (or tax year beginning in)	(b) Adjusted qualifying distributions	(c) Net value of noncharitable-use assets	(d) Distribution ratio (col (b) divided by col (c))
2017	330,613	6,813,901	0 048520
2016	241,460	4,848,822	0 049798
2015	202,165	3,018,354	0 066979
2014	129,069	2,987,608	0 043201
2013	159,172	2,329,556	0 068327

2 Total of line 1, column (d)	2	0 276825
3 Average distribution ratio for the 5-year base period—divide the total on line 2 by 5 0, or by the number of years the foundation has been in existence if less than 5 years	3	0 055365
4 Enter the net value of noncharitable-use assets for 2018 from Part X, line 5	4	6,990,564
5 Multiply line 4 by line 3	5	387,033
6 Enter 1% of net investment income (1% of Part I, line 27b)	6	3,027
7 Add lines 5 and 6	7	390,060
8 Enter qualifying distributions from Part XII, line 4	8	358,102

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

Part VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948—see instructions)

1a	Exempt operating foundations described in section 4940(d)(2), check here <input type="checkbox"/> and enter "N/A" on line 1 Date of ruling or determination letter _____ (attach copy of letter if necessary—see instructions)		
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check here <input type="checkbox"/> and enter 1% of Part I, line 27b	1	6,054
c	All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of Part I, line 12, col (b)		
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	2	0
3	Add lines 1 and 2.	3	6,054
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	4	0
5	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-	5	6,054
6	Credits/Payments		
a	2018 estimated tax payments and 2017 overpayment credited to 2018	6a	5,600
b	Exempt foreign organizations—tax withheld at source	6b	
c	Tax paid with application for extension of time to file (Form 8868)	6c	0
d	Backup withholding erroneously withheld	6d	0
7	Total credits and payments. Add lines 6a through 6d.	7	5,600
8	Enter any penalty for underpayment of estimated tax. Check here <input type="checkbox"/> if Form 2220 is attached	8	0
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed ▶	9	454
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 2019 estimated tax ▶ Refunded ▶	11	

Part VII-A Statements Regarding Activities

	Yes	No
1a During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any political campaign?	1a	No
b Did it spend more than \$100 during the year (either directly or indirectly) for political purposes? (see Instructions for definition). <i>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</i>	1b	No
c Did the foundation file Form 1120-POL for this year?	1c	No
d Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year (1) On the foundation ▶ \$ _____ (2) On foundation managers ▶ \$ _____		
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? <i>If "Yes," attach a detailed description of the activities</i>	2	No
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? <i>If "Yes," attach a conformed copy of the changes</i>	3	No
4a Did the foundation have unrelated business gross income of \$1,000 or more during the year?	4a	No
b If "Yes," has it filed a tax return on Form 990-T for this year?	4b	
5 Was there a liquidation, termination, dissolution, or substantial contraction during the year? <i>If "Yes," attach the statement required by General Instruction T</i>	5	No
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?	6	Yes
7 Did the foundation have at least \$5,000 in assets at any time during the year? <i>If "Yes," complete Part II, col (c), and Part XV</i>	7	Yes
8a Enter the states to which the foundation reports or with which it is registered (see instructions) ▶ WI _____		
b If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate) of each state as required by General Instruction G? <i>If "No," attach explanation</i> .	8b	Yes
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 2018 or the taxable year beginning in 2018? See the instructions for Part XIV <i>If "Yes," complete Part XIV</i>	9	No
10 Did any persons become substantial contributors during the tax year? <i>If "Yes," attach a schedule listing their names and addresses</i>	10	No

Part VII-A Statements Regarding Activities (continued)

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		No
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		No
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application? Website address ▶ N/A	13	Yes	
14	The books are in care of ▶ RICHARD INMANKIM PETERSEN Telephone no ▶ (920) 727-1137			

Located at **▶** 18 JEWELERS PARK DRIVE STE 200 NEENAH WIZIP+4 **▶** 54956

15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 —check here ▶ <input type="checkbox"/>			
	and enter the amount of tax-exempt interest received or accrued during the year ▶ 15			
16	At any time during calendar year 2018, did the foundation have an interest in or a signature or other authority over a bank, securities, or other financial account in a foreign country?	16	Yes	No
	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.**

1a	During the year did the foundation (either directly or indirectly)		Yes	No
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> 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)? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> 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). <input type="checkbox"/> Yes <input checked="" type="checkbox"/> 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 <input type="checkbox"/>	1b		
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 2018? <input type="checkbox"/>	1c		No
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation defined in section 4942(j)(3) or 4942(j)(5))			
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 before 2018? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
	If "Yes," list the years ▶ 20____, 20____, 20____, 20____			
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). <input type="checkbox"/>	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 ▶ 20____, 20____, 20____, 20____			
3a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
b	If "Yes," did it have excess business holdings in 2018 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 2018). <input type="checkbox"/>	3b		
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a		No
b	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 2018?	4b		No

Part VII-B Statements Regarding Activities for Which Form 4720 May Be Required (continued)

		Yes	No
5a	During the year did the foundation pay or incur any amount to		
(1)	Carry on propaganda, or otherwise attempt to influence legislation (section 4945(e))?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
(2)	Influence the outcome of any specific public election (see section 4955), or to carry on, directly or indirectly, any voter registration drive?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
(3)	Provide a grant to an individual for travel, study, or other similar purposes?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
(4)	Provide a grant to an organization other than a charitable, etc., organization described in section 4945(d)(4)(A)? See instructions.	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
(5)	Provide for any purpose other than religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
b	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.		5b
	Organizations relying on a current notice regarding disaster assistance check here.	<input type="checkbox"/>	
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? If "Yes," attach the statement required by Regulations section 53.4945–5(d)	<input type="checkbox"/> Yes <input type="checkbox"/> No	
6a	Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
b	Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract? If "Yes" to 6b, file Form 8870		6b No
7a	At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
b	If yes, did the foundation receive any proceeds or have any net income attributable to the transaction?		7b
8	Is the foundation subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or excess parachute payment during the year?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	

Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors

1 List all officers, directors, trustees, foundation managers and their compensation. See instructions				
(a) Name and address	(b) Title, and average hours per week devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
See Additional Data Table				
2 Compensation of five highest-paid employees (other than those included on line 1—see instructions). If none, enter "NONE."				
(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) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
NONE				
Total number of other employees paid over \$50,000.				0

Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors *(continued)*

3 Five highest-paid independent contractors for professional services (see instructions). If none, enter "NONE".

(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-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 number of organizations and other beneficiaries served, conferences convened, research papers produced, etc.

	Expenses
1	
2	
3	
4	

Part IX-B Summary of Program-Related Investments (see instructions)

Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2	Amount
1	
2	
All other program-related investments. See instructions.	
3	
Total. Add lines 1 through 3 ►	0

Part X Minimum Investment Return (All domestic foundations must complete this part. Foreign foundations, see instructions.)

1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes		
a	Average monthly fair market value of securities.	1a	6,620,294
b	Average of monthly cash balances.	1b	476,725
c	Fair market value of all other assets (see instructions).	1c	0
d	Total (add lines 1a, b, and c).	1d	7,097,019
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	7,097,019
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions).	4	106,455
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4.	5	6,990,564
6	Minimum investment return. Enter 5% of line 5.	6	349,528

Part XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations and certain foreign organizations check here ☐ and do not complete this part.)

1	Minimum investment return from Part X, line 6.	1	349,528
2a	Tax on investment income for 2018 from Part VI, line 5.	2a	6,054
b	Income tax for 2018 (This does not include the tax from Part VI).	2b	
c	Add lines 2a and 2b.	2c	6,054
3	Distributable amount before adjustments. Subtract line 2c from line 1.	3	343,474
4	Recoveries of amounts treated as qualifying distributions.	4	0
5	Add lines 3 and 4.	5	343,474
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	343,474

Part XII Qualifying Distributions (see instructions)

1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes		
a	Expenses, contributions, gifts, etc.—total from Part I, column (d), line 26.	1a	358,102
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	358,102
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. See instructions.	5	0
6	Adjusted qualifying distributions. Subtract line 5 from line 4.	6	358,102

Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation qualifies for the section 4940(e) reduction of tax in those years.

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, line 7				343,474
2 Undistributed income, if any, as of the end of 2018				
a Enter amount for 2017 only.			0	
b Total for prior years 20____, 20____, 20____		0		
3 Excess distributions carryover, if any, to 2018				
a From 2013.				
b From 2014.				
c From 2015. 54,191				
d From 2016. 8,642				
e From 2017.				
f Total of lines 3a through e.	62,833			
4 Qualifying distributions for 2018 from Part XII, line 4 ▶ \$ 358,102				
a Applied to 2017, but not more than line 2a			0	
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.				343,474
e Remaining amount distributed out of corpus	14,628			
5 Excess distributions carryover applied to 2018 (If an amount appears in column (d), the same amount must be shown in column (a))	0			0
6 Enter the net total of each column as indicated below:				
a Corpus Add lines 3f, 4c, and 4e Subtract line 5	77,461			
b Prior years' undistributed income Subtract line 4b from line 2b		0		
c Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed.		0		
d Subtract line 6c from line 6b Taxable amount—see instructions		0		
e Undistributed income for 2017 Subtract line 4a from line 2a Taxable amount—see instructions			0	
f Undistributed income for 2018 Subtract lines 4d and 5 from line 1 This amount must be distributed in 2019				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 2013 not applied on line 5 or line 7 (see instructions).	0			
9 Excess distributions carryover to 2019. Subtract lines 7 and 8 from line 6a	77,461			
10 Analysis of line 9				
a Excess from 2014.				
b Excess from 2015. 54,191				
c Excess from 2016. 8,642				
d Excess from 2017.				
e Excess from 2018. 14,628				

Part XIV Private Operating Foundations (see instructions and Part VII-A, question 9)

1a If the foundation has received a ruling or determination letter that it is a private operating foundation, and the ruling is effective for 2018, enter the date of the ruling. ▶					
b Check box to indicate whether the organization is a private operating foundation described in section <input type="checkbox"/> 4942(j)(3) or <input type="checkbox"/> 4942(j)(5)					
2a Enter the lesser of the adjusted net income from Part I or the minimum investment return from Part X for each year listed	Tax year	Prior 3 years			(e) Total
	(a) 2018	(b) 2017	(c) 2016	(d) 2015	
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					
3 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					
(4) 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.)

1 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	
2 Information Regarding Contribution, Grant, Gift, Loan, Scholarship, etc., Programs:	
Check here <input checked="" type="checkbox"/> 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. See instructions.	
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	

Part XV **Supplementary Information** (continued)**3 Grants and Contributions Paid During the Year or Approved for Future Payment**

Recipient	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
Name and address (home or business)				
a <i>Paid during the year</i> See Additional Data Table				
Total			▶ 3a	
b <i>Approved for future payment</i>				
Total			▶ 3b	

Enter gross amounts unless otherwise indicated

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

Form **990-PF** (2018)

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

1 Did the organization directly or indirectly engage in any of the following with any other organization described in section 501(c)(3) (other than section 501(c)(3) organizations) or in section 527, relating to political organizations?		Yes	No
a Transfers from the reporting foundation to a noncharitable exempt organization of			
(1) Cash.	1a(1)		No
(2) Other assets.	1a(2)		No
b Other transactions			
(1) Sales of assets to a noncharitable exempt organization.	1b(1)		No
(2) Purchases of assets from a noncharitable exempt organization.	1b(2)		No
(3) Rental of facilities, equipment, or other assets.	1b(3)		No
(4) Reimbursement arrangements.	1b(4)		No
(5) Loans or loan guarantees.	1b(5)		No
(6) Performance of services or membership or fundraising solicitations.	1b(6)		No
c Sharing of facilities, equipment, mailing lists, other assets, or paid employees.	1c		No
d If the answer to any of the above is "Yes," complete the following schedule. Column (b) should always show the fair market value of the goods, other assets, or services given by the reporting foundation. If the foundation received less than fair market value in any transaction or sharing arrangement, show in column (d) the value of the goods, other assets, or services received.			

(a) Line No	(b) Amount involved	(c) Name of noncharitable exempt organization	(d) Description of transfers, transactions, and sharing arrangements

2a Is the foundation directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described in section 501(c)(3) (other than section 501(c)(3)) or in section 527? ☐ Yes ☒ No

b If "Yes," complete the following schedule

(a) Name of organization	(b) Type of organization	(c) Description of relationship

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.

Sign Here	*****	2019-01-16	*****	May the IRS discuss this return with the preparer shown below? (see instr)? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
	Signature of officer or trustee	Date	Title	

Paid Preparer Use Only	Print/Type preparer's name	Preparer's Signature	Date	Check if self-employed <input type="checkbox"/>	PTIN
	KEITH A DEPIES CPA		2019-01-16		P00070440
	Firm's name ▶ ROBERTS RITSCHKE AND TYCZKOWSKI LTD Firm's address ▶ 335 FIRST STREET PO BOX 679 NEENAH, WI 549570679				

Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns a - d			
List and describe the kind(s) of property sold (e g , real estate, (a) 2-story brick warehouse, or common stock, 200 shs MLC Co)	(b) How acquired P—Purchase D—Donation	(c) Date acquired (mo , day, yr)	(d) Date sold (mo , day, yr)
1 50000 U S TREASURY NOTE 1 000% DUE 12-31-17	P	2015-12-29	2018-01-02
1 100 AMERICAN EXPRESS	P	2014-04-22	2018-01-12
100 AMERICAN EXPRESS	P	2016-06-24	2018-01-12
200 AUTOMATIC DATA PROCESSING	P	2016-06-24	2018-01-12
300 PAYCHEX	P	2016-06-24	2018-01-12
400 INTEL	P	2016-06-24	2018-03-01
200 NATIONAL INSTRUMENTS	P	2013-08-01	2018-03-01
100 NATIONAL INSTRUMENTS	P	2016-06-24	2018-03-01
100 ADOBE INC	P	2016-06-24	2018-03-01
200 ADOBE INC	P	2016-06-24	2018-03-29

Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns e - h

(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale	(h) Gain or (loss) (e) plus (f) minus (g)
50,000		49,928	72
10,062		8,727	1,335
10,062		6,085	3,977
23,751		17,452	6,299
20,341		16,658	3,683
19,280		12,744	6,536
10,014		5,690	4,324
5,007		2,733	2,274
20,708		9,320	11,388
42,886		18,639	24,247

Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns i - l

Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69			(l) Gains (Col (h) gain minus col (k), but not less than -0-) or Losses (from col (h))
(i) F M V as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col (i) over col (j), if any	
			72
			1,335
			3,977
			6,299
			3,683
			6,536
			4,324
			2,274
			11,388
			24,247

Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns a - d			
List and describe the kind(s) of property sold (e g , real estate, (a) 2-story brick warehouse, or common stock, 200 shs MLC Co)	(b) How acquired P—Purchase D—Donation	(c) Date acquired (mo , day, yr)	(d) Date sold (mo , day, yr)
75000 ZIMMER BIOMET 2 000% DUE 04-01-18	P	2016-09-02	2018-04-01
1 25000 SLM CORP 8 450% DUE 06-15-18	P	2012-04-13	2018-04-27
40000 ABBVIE INC 1 800% DUE 05-15-18	P	2015-07-17	2018-05-14
40000 TOTAL SYSTEMS 2 375% DUE 06-01-18	P	2013-07-25	2018-06-01
100 WATERS CORP	P	2016-10-26	2018-06-12
400 AFLAC	P	2016-06-24	2018-06-12
300 NESTLE - ADR	P	2016-06-24	2018-06-12
300 INTEL	P	2016-06-24	2018-06-12
50000 SOUTHERN COMPANY 1 550% DUE 07-18-18	P	2016-05-19	2018-07-01
200 PRAXAIR	P	2016-07-06	2018-10-31

Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns e - h

(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale	(h) Gain or (loss) (e) plus (f) minus (g)
75,000		75,524	-524
25,209		27,525	-2,316
40,000		39,914	86
40,000		39,105	895
20,812		13,681	7,131
18,197		13,905	4,292
22,703		22,062	641
16,391		9,558	6,833
50,000		49,965	35
32,690		22,159	10,531

Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns i - l

Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69			(I) Gains (Col (h) gain minus col (k), but not less than -0-) or Losses (from col (h))
(i) F M V as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col (i) over col (j), if any	
			-524
			-2,316
			86
			895
			7,131
			4,292
			641
			6,833
			35
			10,531

Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns a - d

List and describe the kind(s) of property sold (e g , real estate, (a) 2-story brick warehouse, or common stock, 200 shs MLC Co)	(b) How acquired P—Purchase D—Donation	(c) Date acquired (mo , day, yr)	(d) Date sold (mo , day, yr)
75000 U S TREASURY NOTE 0 875% DUE 07-15-18	P	2017-09-27	2018-07-15
1 300 PRAXAIR	P	2015-05-13	2018-10-31
50000 U S TREASURY NOTE 1 250% DUE 10-31-18	P	2015-02-26	2018-10-31
CAPITAL GAINS DIVIDENDS	P		

Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns e - h

(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale	(h) Gain or (loss) (e) plus (f) minus (g)
75,000		74,756	244
49,035		35,274	13,761
50,000		49,957	43
52,882			52,882

Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns i - l

Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69			(l) Gains (Col (h) gain minus col (k), but not less than -0-) or Losses (from col (h))
(i) F M V as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col (i) over col (j), if any	
			244
			13,761
			43
			52,882

Form 990PF Part VIII Line 1 - List all officers, directors, trustees, foundation managers and their compensation				
(a) Name and address	Title, and average hours per week (b) devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	Expense account, (e) other allowances
MELINDA S BROWN	PRESIDENT 1 00	0	0	0
5350 S MILLER STREET LITTLETON, CO 80127				
RICHARD P INMAN	TREASURER/SECRETARY 1 00	0	0	0
5350 S MILLER STREET LITTLETON, CO 80127				
FREDRIC L HILDEBRAND JR	DIRECTOR 1 00	0	0	0
220 N PARK AVE NEENAH, WI 54956				
JANE W BROWN	DIRECTOR 1 00	0	0	0
1675 REDSTONE CENTER DR STE 150 PMB 11 PARK CITY, UT 84091				
DALE R NIENOW	DIRECTOR 1 00	0	0	0
14914 SE 47TH COURT BELLEVUE, WA 98006				
MELINDA S BROWN	DIRECTOR 1 00	0	0	0
5350 S MILLER STREET LITTLETON, CO 80127				
RICHARD P INMAN	DIRECTOR 1 00	0	0	0
5350 S MILLER STREET LITTLETON, CO 80127				
DANIEL T BROWN	DIRECTOR 1 00	0	0	0
1504 S PARK AVE NEENAH, WI 54956				
NANCY J BROWN	DIRECTOR 1 00	0	0	0
1504 S PARK AVE NEENAH, WI 54956				
SARAH J HILDEBRAND	DIRECTOR 1 00	0	0	0
220 N PARK AVE NEENAH, WI 54956				
THOMAS P BROWN	DIRECTOR 1 00	0	0	0
1675 REDSTONE CENTER DR STE 150 PMB 11 PARK CITY, UT 84091				
REBECCA BROWN-NIENOW	DIRECTOR 1 00	0	0	0
14914 SE 47TH COURT BELLEVUE, WA 98006				
LAUREN WALLACE	DIRECTOR 1 00	0	0	0
7030 S WINDSOR STREET LITTLETON, CO 80128				
TAYLOR STORCH	DIRECTOR 1 00	0	0	0
23913 PRIEB ROAD GLIDDEN, WI 54527				
MATTHEW NIENOW	DIRECTOR 1 00	0	0	0
142 BLOSSOM LANE PORT TOWNSEND, WA 98368				

Form 990PF Part VIII Line 1 - List all officers, directors, trustees, foundation managers and their compensation				
(a) Name and address	Title, and average hours per week (b) devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	Expense account, (e) other allowances
ANDREW NIENOW	DIRECTOR 1 00	0	0	0
268 MALCOLM X BLVD 3R NEW YORK, NY 11233				
HENRY HILDEBRAND	DIRECTOR 1 00	0	0	0
220 N PARK AVE NEENAH, WI 54956				
CHARLES HILDEBRAND	DIRECTOR 1 00	0	0	0
220 N PARK AVE NEENAH, WI 54956				
SUSAN E BROWN	DIRECTOR 1 00	0	0	0
1675 REDSTONE CENTER DR STE 150 PMB 11 PARK CITY, UT 84091				
KATHERINE BROWN	DIRECTOR 1 00	0	0	0
1675 REDSTONE CENTER DR STE 150 PMB 11 PARK CITY, UT 84091				
THOMAS NIENOW	DIRECTOR 1 00	0	0	0
938 WATER STREET 207 PORT TOWNSEND, WA 98368				
ELISE NIENOW	DIRECTOR 1 00	0	0	0
142 BLOSSOM LANE PORT TOWNSEND, WA 98368				
TIFFANY STORCH	DIRECTOR 1 00	0	0	0
23913 PRIEB ROAD GLIDDEN, WI 54527				
JOSH HALLMARK	DIRECTOR 1 00	0	0	0
268 MALCOLM X BLVD 3R NEW YORK, NY 11233				
TYLER WALLACE	DIRECTOR 1 00	0	0	0
7030 S WINDSOR STREET LITTLETON, CO 80128				

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	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
Name and address (home or business)				
a <i>Paid during the year</i>				
ALDO LEOPOLD NATURE CENTER 330 FEMRITE DRIVE MONONA, WI 53716	NONE	PUBLIC CHARITY	UNRESTRICTED USE	5,000
AMERICAN RED CROSS NE WI 515 SOUTH WASHBURN STREET 201 OSHKOSH, WI 54904	NONE	PUBLIC CHARITY	NE WISCONSIN CHAPTER	10,000
AMERICAN RED CROSS NE WI 515 SOUTH WASHBURN STREET 201 OSHKOSH, WI 54904	NONE	PUBLIC CHARITY	HURRICANE RELIEF	40,000
Total ► 3a				343,000

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	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
Name and address (home or business)				
a <i>Paid during the year</i>				
APRICITY FORMERLY KNOWN AS STEP INDUSTRIES 1010 STROHMEYER DRIVE NEENAH, WI 54956	NONE	PUBLIC CHARITY	UNRESTRICTED USE	2,500
BEREA COLLEGE CPO 2216 EDWARDS BUILDING BEREA, KY 40404	NONE	UNIVERSITY	DENTAL HYGIENE PROGRAM	10,000
BEST FRIENDS OF NEENAH-MENASHA 181 E NORTH WATER STREET SUITE 225 NEENAH, WI 54956	NONE	PUBLIC CHARITY	UNRESTRICTED USE	5,000
Total ▶ 3a				343,000

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	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
Name and address (home or business)				
a <i>Paid during the year</i>				
CAMP KESEM NATIONALPO BOX 452 CULVER CITY, CA 90232	NONE	PUBLIC CHARITY	VISION 20/20 DEI	25,000
CAMP MANITO-WISH YMCAPO BOX 246 BOULDER JUNCTION, WI 54512	NONE	PUBLIC CHARITY	CAMPERSHIPS	5,000
CAP SERVICES 2900 HOOVER ROAD SUITE A STEVENS POINT, WI 54482	NONE	PUBLIC CHARITY	UNRESTRICTED USE	7,500
Total ▶ 3a				343,000

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	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
Name and address (home or business)				
a <i>Paid during the year</i>				
CEDARROOT FOLK SCHOOLPO BOX 253 NORDLAND, WA 98358	NONE	PUBLIC CHARITY	UNRESTRICTED USE	2,500
FOX VALLEY WARMING SHELTER PO BOX 1261 APPLETON, WI 54912	NONE	PUBLIC CHARITY	UNRESTRICTED USE	2,000
GLADIOLUS LEARNING AND DEVELOPMENT CENTER 10320 GLADIOLUS DRIVE FORT MYERS, FL 33908	NONE	PUBLIC CHARITY	UNRESTRICTED USE	6,000
Total ► 3a				343,000

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	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
Name and address (home or business)				
a <i>Paid during the year</i>				
GREAT LAKES INTER-TRIBAL COUNCIL PO BOX 9 LAC DU FLAMBEAU, WI 54538	NONE	PUBLIC CHARITY	UNRESTRICTED USE	3,500
HARBOR HOUSE DOMESTIC ABUSE PROGRAMS 720 W FIFTH STREET APPLETON, WI 54914	NONE	PUBLIC CHARITY	JUMPSTART	2,500
HOPE HOUSE OF COLORADO 9088 MARSHALL COURT BLDG 4 WESTMINSTER, CO 80031	NONE	PUBLIC CHARITY	UNRESTRICTED USE	15,000
Total ▶ 3a				343,000

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	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
Name and address (home or business)				
a <i>Paid during the year</i>				
HOPELINKPO BOX 3577 REDMOND, WA 98073	NONE	PUBLIC CHARITY	UNRESTRICTED USE	7,500
JEFFERSON LAND TRUST 1033 LAWRENCE STREET PORT TOWNSEND, WA 98368	NONE	PUBLIC CHARITY	UNRESTRICTED USE	4,000
JUMPING MOUSE CHILDREN'S CENTER 1809 SHERIDAN ST PORT TOWNSEND, WA 98368	NONE	PUBLIC CHARITY	UNRESTRICTED USE	3,000
Total ► 3a				343,000

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	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
Name and address (home or business)				
a <i>Paid during the year</i>				
JUVENILE DIABETES RESEARCH FOUNDATION NE WI 1800 APPLETON ROAD SUITE 2 MENASHA, WI 54952	NONE	PUBLIC CHARITY	UNRESTRICTED USE	5,000
LIFELONG AIDS ALLIANCE PO BOX 80547 SEATTLE, WA 98108	NONE	PUBLIC CHARITY	UNRESTRICTED USE	5,000
NORTH OLYMPIC SALMON COALITION 205B WEST PATISON STREET PORT HADLOCK, WA 98339	NONE	PUBLIC CHARITY	UNRESTRICTED USE	5,000
Total ▶ 3a				343,000

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	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
Name and address (home or business)				
a <i>Paid during the year</i>				
NORTHEAST WISCONSIN LAND TRUST 14 TRI-PARK WAY SUITE 1 APPLETON, WI 54914	NONE	PUBLIC CHARITY	UNRESTRICTED USE	8,000
NORTHLAND COLLEGE - BURKE CENTER 1411 ELLIS AVENUE ASHLAND, WI 54806	NONE	UNIVERSITY	UNRESTRICTED USE	5,000
NORTHLAND COLLEGE - LOON WATCH 1411 ELLIS AVENUE ASHLAND, WI 54806	NONE	UNIVERSITY	UNRESTRICTED USE	5,000
Total ► 3a				343,000

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	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
Name and address (home or business)				
a <i>Paid during the year</i>				
NORTHWEST WATERSHED INSTITUTE 3407 EDDY STREET PORT TOWNSEND, WA 98368	NONE	PUBLIC CHARITY	UNRESTRICTED USE	5,000
OSHKOSH AREA COMMUNITY FOUNDATION 230 OHIO STREET SUITE 100 OSHKOSH, WI 54902	NONE	PUBLIC CHARITY	BOB SCHOLARSHIP FUND	48,000
OSHKOSH AREA UNITED WAY 36 BROAD STREET SUITE 100 OSHKOSH, WI 54901	NONE	PUBLIC CHARITY	DOLLY PARTON IMAGINATION LIBRARY	2,500
Total ▶ 3a				343,000

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	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
Name and address (home or business)				
a <i>Paid during the year</i>				
PARK COUNTY SCHOOL DISTRICT PO BOX 189 FAIRPLAY, CO 80440	NONE	PUBLIC CHARITY	5,000 ETE SUNSHINE FUND, 4,500 ELEMENTARY SWIM PROGRAM	9,500
RAINIER SCHOLARS 2100 24TH AVE SOUTH SUITE 360 SEATTLE, WA 98144	NONE	PUBLIC CHARITY	UNRESTRICTED USE	7,500
RAWHIDE INCE7475 RAWHIDE ROAD NEW LONDON, WI 54961	NONE	PUBLIC CHARITY	7,500 CHAPS PROGRAM, 5,000 UNRESTRICTED USE	12,500
Total ▶ 3a				343,000

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	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
Name and address (home or business)				
a <i>Paid during the year</i>				
REACH COUNSELING SERVICES 1509 S COMMERCIAL STREET NEENAH, WI 54956	NONE	PUBLIC CHARITY	UNRESTRICTED USE	10,000
ROCKY MOUNTAIN RURAL HEALTH PO BOX 1600 FAIRPLAY, CO 80440	NONE	PUBLIC CHARITY	UNRESTRICTED USE	15,000
ROOM TO GROW 7 WEST 30TH STREET FLOOR 3 NEW YORK, NY 10001	NONE	PUBLIC CHARITY	UNRESTRICTED USE	10,000
Total ► 3a				343,000

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	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
Name and address (home or business)				
a <i>Paid during the year</i>				
SUNFIELD EDUCATION ASSOCIATION PO BOX 85 PORT HADLOCK, WA 98339	NONE	PUBLIC CHARITY	UNRESTRICTED USE	5,000
THE BLUE BENCHPO BOX 18951 DENVER, CO 80218	NONE	PUBLIC CHARITY	UNRESTRICTED USE	3,000
THEDACARE FAMILY OF FOUNDATIONS 1818 N MEADE STREET APPLETON, WI 54911	NONE	PUBLIC CHARITY	MEN FOR HOSPICE	5,000
Total ▶ 3a				343,000

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	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
Name and address (home or business)				
a <i>Paid during the year</i>				
VALLEY PACKAGING INDUSTRIES 110 N KENSINGTON DRIVE APPLETON, WI 54915	NONE	PUBLIC CHARITY	UNRESTRICTED USE	4,000
WASHINGTON PEACE CENTER PO BOX 34190 WASHINGTON, DC 20043	NONE	PUBLIC CHARITY	DC BOOKS TO PRISONS	1,000
WISCONSIN LAND AND WATER CONSERVATION ASSOCIATION 131 W WILSON STREET 601 MADISON, WI 53703	NONE	PUBLIC CHARITY	UNRESTRICTED USE	2,500
Total ▶ 3a				343,000

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	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
Name and address (home or business)				
a <i>Paid during the year</i>				
WISCONSIN PUBLIC RADIOPO BOX 697 RACINE, WI 53401	NONE	PUBLIC CHARITY	UNRESTRICTED USE	5,000
WISCONSIN WETLANDS ASSOCIATION 214 N HAMILTON ST 201 MADISON, WI 53703	NONE	PUBLIC CHARITY	UNRESTRICTED USE	2,500
YOUTH GO213 NICOLET BOULEVARD NEENAH, WI 54956	NONE	PUBLIC CHARITY	UNRESTRICTED USE	6,000
Total ▶ 3a				343,000

TY 2018 Accounting Fees Schedule

Name: THE ROBERT AND SUSAN BROWN
FAMILY FOUNDATION INC

EIN: 26-0743538

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
LEGAL AND PROFESSIONAL	2,236	0		2,236

TY 2018 Investments Corporate Bonds Schedule

Name: THE ROBERT AND SUSAN BROWN
FAMILY FOUNDATION INC

EIN: 26-0743538

Investments Corporate Bonds Schedule

Name of Bond	End of Year Book Value	End of Year Fair Market Value
CORPORATE AND US GOVERNMENT BONDS	1,572,038	1,558,323

TY 2018 Investments Corporate Stock Schedule

Name: THE ROBERT AND SUSAN BROWN
FAMILY FOUNDATION INC

EIN: 26-0743538

Investments Corporation Stock Schedule

Name of Stock	End of Year Book Value	End of Year Fair Market Value
CORPORATE STOCKS AND EQUITY MUTUAL FUNDS	3,748,047	4,768,386

TY 2018 Other Decreases Schedule

Name: THE ROBERT AND SUSAN BROWN
FAMILY FOUNDATION INC

EIN: 26-0743538

Description	Amount
TIMING DIFFERENCES AND RETURN OF CAPITAL	389

TY 2018 Other Expenses Schedule

Name: THE ROBERT AND SUSAN BROWN
FAMILY FOUNDATION INC

EIN: 26-0743538

Other Expenses Schedule

Description	Revenue and Expenses per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
ANNUAL REGISTRATION FEE	10	0		10
INVESTMENT MANAGEMENT AND ADVISORY FEES	30,601	17,827		12,774
OFFICE SUPPLIES AND POSTAGE	82	0		82

TY 2018 Taxes Schedule

Name: THE ROBERT AND SUSAN BROWN
FAMILY FOUNDATION INC

EIN: 26-0743538

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
EXCISE TAXES	995	995		0