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## **Return of Private Foundation**

DLN: 93491192003109 OMB No. 1545-0052

2018

Form 990-PI
Department of the Treasury

or Section 4947(a)(1) Trust Treated as Private Foundation Internal Revenue Service Do not enter social security numbers on this form as it may be made public. Open to Public ▶ Go to www.irs.gov/Form990PF for instructions and the latest information. Inspection For calendar year 2018, or tax year beginning 01-01-2018 , and ending 12-31-2018 Name of foundation
THE VICTOR AND CHRISTINE ANTHONY A Employer identification number FAMILY FOUNDATION INC Number and street (or P.O. box number if mail is not delivered to street address) Room/suite B Telephone number (see instructions) PO BOX 385 (715) 258-2587 City or town, state or province, country, and ZIP or foreign postal code C If exemption application is pending, check here WAUPACA, WI 54981 ☐ Initial return ☐ Initial return of a former public charity G Check all that apply D 1. Foreign organizations, check here 2 Foreign organizations meeting the 85% test, check here and attach computation ☐ Final return Amended return ☐ Name change Address change E If private foundation status was terminated under section 507(b)(1)(A), check here ✓ Section 501(c)(3) exempt private foundation **H** Check type of organization Section 4947(a)(1) nonexempt charitable trust Other taxable private foundation I Fair market value of all assets at end ✓ Cash ☐ Accrual F If the foundation is in a 60-month termination under section 507(b)(1)(B), check here J Accounting method of year (from Part II, col (c), line 16) ▶\$ 16,142,357 Other (specify) (Part I, column (d) must be on cash basis ) Part I Analysis of Revenue and Expenses (The total (d) Disbursements (b) Net investment (c) Adjusted net for charitable of amounts in columns (b), (c), and (d) may not necessarily expenses per books purposes (cash basis only) income equal the amounts in column (a) (see instructions) ) Contributions, gifts, grants, etc , received (attach schedule) Check ► ✓ If the foundation is **not** required to attach 2 12.643 12.643 3 Interest on savings and temporary cash investments 4 Dividends and interest from securities 458,177 458,177 5a Net rental income or (loss) 224,914 6a Net gain or (loss) from sale of assets not on line 10 Gross sales price for all assets on line 6a Capital gain net income (from Part IV, line 2) 224,914 Net short-term capital gain Income modifications . . 10a Gross sales less returns and allowances Less Cost of goods sold b . . . . Gross profit or (loss) (attach schedule) Other income (attach schedule) ارچە 266,382 49,100 12 Total. Add lines 1 through 11 962.116 744,834 Compensation of officers, directors, trustees, etc 13 14 Other employee salaries and wages 15 Pension plans, employee benefits Operating and Administrative Expenses Legal fees (attach schedule) . رو Accounting fees (attach schedule) 4,600 2,300 2,300 ارچە 101.183 101.183 Other professional fees (attach schedule) 17 [چە 71.746 7.374 18 Taxes (attach schedule) (see instructions) 19 Depreciation (attach schedule) and depletion 20 21 Travel, conferences, and meetings . 4,270 4,270 22 Printing and publications . 23 Other expenses (attach schedule) 2,971 2,971 24 Total operating and administrative expenses. Add lines 13 through 23 . . . 184,770 110,857 9,541 25 Contributions, gifts, grants paid 851.184 851,184 26 Total expenses and disbursements. Add lines 24 and 1,035,954 110,857 860,725 27 Subtract line 26 from line 12

Excess of revenue over expenses and

Net investment income (if negative, enter -0-)

Adjusted net income (if negative, enter -0-) . . .

disbursements

9,561,521

5,838,155

1,647,500

18,047,092

18,047,092

18,047,092

18,047,092

9,585,289

5,136,006

1,870,128

17,973,254

17,973,254

17.973.254

17,973,254

1 2

3

4

5

18,047,092

17,973,254

17,973,254

Form 990-PF (2018)

-73,838

0

7,455,423

4,848,459

2,456,644

16,142,357

	5
	6
	7
2	8
Assets	9
As	10a
	b
	c

11

12

13

14

15

16

17 18

19

20 21

22

23

24

25

26

28

29 Net 30

31

Part III

2 3

Liabilities

Balances

Fund

ō

Assets 27 Less allowance for doubtful accounts ▶

Land, buildings, and equipment basis

instructions Also, see page 1, item I)

Other assets (describe -

Other liabilities (describe -\_

Grants payable

Unrestricted

Temporarily restricted

Permanently restricted . .

and complete lines 27 through 31.

of-year figure reported on prior year's return)

Decreases not included in line 2 (itemize) ▶

Enter amount from Part I, line 27a . . . . . . . .

Other increases not included in line 2 (itemize) ▶ \_\_\_\_

Prepaid expenses and deferred charges . . . . .

Investments—land, buildings, and equipment basis ▶ \_

Less accumulated depreciation (attach schedule) ▶

Total assets (to be completed by all filers—see the

Less accumulated depreciation (attach schedule) 

Investments—U S and state government obligations (attach schedule)

Loans from officers, directors, trustees, and other disqualified persons

Mortgages and other notes payable (attach schedule). . . . .

Foundations that follow SFAS 117, check here ▶ □

and complete lines 24 through 26 and lines 30 and 31.

Foundations that do not follow SFAS 117, check here ▶

Paid-in or capital surplus, or land, bldg, and equipment fund Retained earnings, accumulated income, endowment, or other funds

Capital stock, trust principal, or current funds . . . . . . . . .

Total net assets or fund balances (see instructions) . . . . .

Total liabilities and net assets/fund balances (see instructions) .

Total net assets or fund balances at end of year (line 4 minus line 5)—Part II, column (b), line 30

Total net assets or fund balances at beginning of year-Part II, column (a), line 30 (must agree with end-

Analysis of Changes in Net Assets or Fund Balances

(a) List and describ 2-story brick wa	How acquired P—Purchase D—Donation	(c) Date acquired (mo , day, yr )	Date sold (mo , day, yr )		
1 a CAP GAIN				2015-06-30	2018-06-30
b CAPITAL GAINS DIVIDEN	IDS		Р		
С					
d					
<u>-</u> е					
	(f)		(g)	,	h)
(e)	Depreciation allowed		other basis		r (loss)
Gross sales price	(or allowable)	plus exp	ense of sale	(e) plus (f	) mınus (g)
<b>a</b> 93	5,314		1,102,149		-166,835
<b>b</b> 39	1,749				391,749
c					
d					
e					
Complete only for assets	showing gain in column (h) and ow	ned by the foundation	on 12/31/69	,	1)
	(i)		(k)		h) gain minus
(i) F M V as of 12/31/69	Adjusted basis		of col (ı)	col (k), but not	less than -0-) <b>or</b>
1 14 V as 01 12/31/09	as of 12/31/69	over col	(j), if any	Losses (fr	om col (h))
а					-166,835
b					391,749
c					
d					
e					
2 Capital gain net income		If gain, also enter in P If (loss), enter -0- in F		2	224,914
	gain or (loss) as defined in sections : rt I, line 8, column (c) (see instructi	ons) If (loss), enter -0	}	3	
Part V Qualification U	Jnder Section 4940(e) for Re	educed Tax on Net	Investment In	come	
	rivate foundations subject to the sec				
f section 4940(d)(2) applies, le	eave this part blank				
	e section 4942 tax on the distributal ot qualify under section 4940(e) Do		ın the base period?	·	es 🔽 No
1 Enter the appropriate am	nount in each column for each year,	see instructions before	making any entries	5	
(a) Base period years Calendar year (or tax year beginning in)	<b>(b)</b> Adjusted qualifying distributions	(c) Net value of noncharitab	le-use assets	<b>(d)</b> Distribution rat (col (b) divided by c	
2017	797,233		17,139,244		0 046515
2016	856,537		16,560,051		0 051723
2015	903,049		17,340,791		0 052077
2014	951,650		18,968,281		0 050171
2013	1,010,829		19,516,803		0 051793
2 Total of line 1, column (d	d)		2		0 252279
3 Average distribution ratio	for the 5-year base period—divide t	the total on line 2 by 5			
	idation has been in existence if less		3		0 050456
	ncharitable-use assets for 2018 fron	,	4		16,284,295
<b>5</b> Multiply line 4 by line 3			5		821,640
	ent income (1% of Part I, line 27b)		6		6,340
					827,980
8 Enter qualifying distributi	ons from Part XII, line 4 ,		8		860,725
If line 8 is equal to or gre instructions	eater than line 7, check the box in Pa	art VI, line 1b, and com	plete that part usin	g a 1% tax rate Se	e the Part VI

Page **6** 

1.	Statements Regard	iiig	ACTIVITIES IOI WITHCIT	FOITH 4720 May be	. Kequired (continued)	,			
5a	During the year did the foundation p	pay o	r incur any amount to					Yes	No
	(1) Carry on propaganda, or otherw	vise a	ittempt to influence legisl	ation (section 4945(e))?	☐ Yes [	✓ No			
	(2) Influence the outcome of any sp	pecifi	c public election (see sect	tion 4955), or to carry					
	on, directly or indirectly, any vo		-		· · · 🗌 Yes [	✓ No			
	(3) Provide a grant to an individual	for t	ravel, study, or other sım	ılar purposes?		✓ No			
	(4) Provide a grant to an organization section 4945(d)(4)(A)? See in		•	, -					
	(5) Provide for any purpose other t	han r	eligious, charitable, scien	tific, literary, or	∟ Yes L	<b>⊻</b> No			
	educational purposes, or for the		· ·		⊔ Yes L	✓ No			
b	If any answer is "Yes" to $5a(1)-(5)$ ,	dıd a	any of the transactions fa	nd to qualify under the ex	ceptions described in				
	Regulations section 53 4945 or in a	curre	ent notice regarding disas	ter assistance? See instr	ructions		5b		
	Organizations relying on a current n	otice	regarding disaster assist	ance check here	•				
c	If the answer is "Yes" to question 5a	a(4),	does the foundation clain	n exemption from the	•	_			
	tax because it maintained expenditu	ire re	sponsibility for the grant	<sup>2</sup>	· · □ Yes [	□ No	.		
	If "Yes," attach the statement requi	red b	y Regulations section 53	4945-5(d)	1c3 :	_ '*0			
6a	Did the foundation, during the year,	, rece	ive any funds, directly or	indirectly, to pay premi	ums on				
	a personal benefit contract?								
b	Did the foundation, during the year,				∟ res l	<b>⊻</b> No	6ь		No
	If "Yes" to 6b, file Form 8870	, ,	, ,	,, ,					
7a	At any time during the tax year, wa	s the	foundation a party to a r	prohibited tax shelter tra	nsaction?	<b>a</b> l			
	If yes, did the foundation receive ar				∟ res L	<b>⊻</b> No	7b		
8	Is the foundation subject to the sec		•				10		
•	excess parachute payment during th		, , ,						
					Yes □	<u> ✓ No</u>			
Pai	and Contractors	JTTIC	ers, Directors, Trust	tees, Foundation Ma	anagers, Highly Paid	Empi	oyees,		
1	List all officers, directors, truste	es, fo	oundation managers ar	d 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 a deferred compensation	ina j	e) Expen		
See /	Additional Data Table		, , , , , , , , , , , , , , , , , , ,	,					
		1							
		1							
		<del>                                     </del>				_			
		1							
		-				_			
		4							
		<u> </u>							
	Compensation of five highest-pa	ıd en	nployees (other than ti	hose included on line :		none,	enter "	NONE.	
(2)	Name and address of each employee	hea	(b) Title, and average		(d) Contributions to employee benefit	/ / /	) Expens		nunt
(4)	more than \$50,000	paid	hours per week	(c) Compensation	plans and deferred		other all		
			devoted to position		compensation				
NON	E .								
			1						
Tota	I number of other employees paid ov	er \$5	0,000		<u> </u>				(
						F	orm <b>99</b> (	D-PF	(2018

Form 990-PF (2018)		Page <b>7</b>
Part VIII Information About Officers, Directors, Trustees, F and Contractors (continued)	Foundation Managers, Highly Pa	id Employees,
3 Five highest-paid independent contractors for professional service	es (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	<u> </u>	0
Part IX-A Summary of Direct Charitable Activities		
List the foundation's four largest direct charitable activities during the tax year Include relevorganizations and other beneficiaries served, conferences convened, research papers produc		of Expenses
1		
2		
3		
4		
Part IX-B Summary of Program-Related Investments (see in	nstructions)	_
Describe the two largest program-related investments made by the foundation during the	e 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
		Form <b>990-PF</b> (2018)

Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation qualifies for

2

3a 3h

4

5

860.725

6.340

854.385

Form 990-PF (2018)

Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment

Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4

Amounts set aside for specific charitable projects that satisfy the

the section 4940(e) reduction of tax in those years

3

4

5

Page 9

51.401

729,547

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0

Form 990-PF (2	018)
Part XIII	Undis

Form 990-PF (20	018)	
Part XIII	Undistributed Income (see instruc	tions)

**b** Total for prior years

a From 2013. . . . . **b** From 2014. . . . c From 2015. . . d From 2016. . . . . e From 2017. . . . .

Distributable amount for 2018 from Part XI, line 7

2 Undistributed income, if any, as of the end of 2018

a Enter amount for 2017 only. . . . . .

Excess distributions carryover, if any, to 2018

f Total of lines 3a through e. . . . . . . . 4 Qualifying distributions for 2018 from Part XII, line 4 ▶ \$ a Applied to 2017, but not more than line 2a

**b** Applied to undistributed income of prior years (Election required—see instructions). . . . . c Treated as distributions out of corpus (Election 

5 Excess distributions carryover applied to 2018

a Corpus Add lines 3f, 4c, and 4e Subtract line 5 b Prior years' undistributed income Subtract line 4b from line 2b . . . . . . . . . . . . c Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed. . . . . . d Subtract line 6c from line 6b Taxable amount e Undistributed income for 2017 Subtract line 4a from line 2a Taxable amount—see instructions . . . . . . . . . f Undistributed income for 2018 Subtract lines 4d and 5 from line 1. This amount must

(If an amount appears in column (d), the

6 Enter the net total of each column as

be distributed in 2019 . . . . . 7 Amounts treated as distributions out of corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3) (Election may be required - see instructions) . . . . . . . . . 8 Excess distributions carryover from 2013 not

9 Excess distributions carryover to 2019.

10 Analysis of line 9

a Excess from 2014. . . **b** Excess from 2015. . c Excess from 2016. . . . d Excess from 2017. . . e Excess from 2018. . .

applied on line 5 or line 7 (see instructions) . . .

Subtract lines 7 and 8 from line 6a . . . . . .

indicated below:

**d** Applied to 2018 distributable amount. . . . e Remaining amount distributed out of corpus

same amount must be shown in column (a) )

(a)

Corpus

0

0

(b)

Years prior to 2017

(c)

2017

809.324



Pa	rt XVI	-A Analysis of Income-Producing	Activities				
Ent	er gross	amounts unless otherwise indicated		ousiness income	Excluded by section		(e) Related or exempt function income
1	Program	service revenue	(a) Business code	(b) Amount	(c) Exclusion code	<b>(d)</b> Amount	(See instructions )
	-						
	g Fees a	nd contracts from government agencies					
		ship dues and assessments					
3	Interest	on savings and temporary cash ents					
1		ds and interest from securities			14 14	12,643 458,177	
		al income or (loss) from real estate			17	450,177	
		inanced property	531390	150,181			45,550
		bt-financed property					
		al income or (loss) from personal property	F24200		44	70.054	
		vestment income (loss) from sales of assets other than	531390		14	70,651	
٠	inventor	• •			18	224,914	
9	Net inco	me or (loss) from special events					
		rofit or (loss) from sales of inventory					
		evenue <b>a</b>					
		l Add columns (b), (d), and (e)		150,181		766,385	
L3		Add line 12, columns (b), (d), and (e)			13	3	962,116
ı.	(See wo	rksheet in line 13 instructions to verify calcu  -B Relationship of Activities to the		hment of Eveni	nt Burnoses		
		Explain below how each activity for which			•	ted importantly to	
Li	ne No. ▼	the accomplishment of the foundation's exinstructions )					
δA		THE AMOUNT REPORTED ON PART XVI-A, LI SCHEDULE K-1 FROM BASCOM VALUE ADDE INCOME TAX	NE 5A, COLUMN D APARTMENT I	I E IS THE AMOUNT NVESTORS II, LLC	OF INCOME THAT IS THAT IS NET OF THE	FLOWING THROU AMOUNT SUBJEC	JGH FROM THE T TO UNRELATED
	-						
						F.	rm 000-BE (2019

. ,	/
	Information Regarding Transfers To and Transactions and Relationships With Noncharitable
П	Exempt Organizations

Part XVII	Exempt Organiz	zations			una molamo	nompo wiem wom			
	ganization directly or inc than section 501(c)(3)	directly engage i					n 501	Yes	No
a Transfers f	rom the reporting found	dation to a noncl	haritable ex	empt organization	of				
(1) Cash.							1a(1)		No
(2) Other	assets						. 1a(2)		No
<b>b</b> Other trans	sactions								
(1) Sales	of assets to a noncharr	table exempt or	ganızatıon.				. 1b(1)		No
(2) Purch	ases of assets from a n	oncharitable exe	empt organiz	zation			. 1b(2)		No
(3) Renta	l of facilities, equipmen	t, or other asset	s				. 1b(3)		No
	oursement arrangement						1b(4)		No
	or loan guarantees.						. 1b(5)		No
	mance of services or me						1b(6)		No
_	facilities, equipment, m	-							No
of the good	ver to any of the above ds, other assets, or servisation or sharing arrai	vices given by th	e reporting	foundation If the f	foundation receive	ed less than fair marke	et value		
,	-		`			,			
(a) Line No	(b) Amount involved	(c) Name of none	charitable exe	mpt organization	(d) Description of	transfers, transactions, a	and sharing arra	ingemen	ts
	idation directly or indire n section 501(c) (other	•	•	•			s 🛂 No		
	omplete the following so		1(0)(3)) 01 1	in section 3277.			5 110		
<b>D</b> II Tes, co	(a) Name of organizatio		1 (1	) Type of organizatio	n I	(c) Description o	of relationship		
	(2) Hame or organization		\	, ,,po or organizado		(0) 2 3331, parame			
of m	er penalties of perjury, I y knowledge and belief, h preparer has any kno	, it is true, corre							
Sian	*****	J		2019-07-02			May the IRS d		
	Signature of officer or tr	ustee		Date	Title		with the prepa below (see instr )?	_	
<b> </b>	Print/Type preparer's	name Pre	eparer's Sıgr	nature	Date	Check if self-	ΓIN		
Paid	KIMBERLY ANDERS	SON				employed ▶ □	P0018	5889	
Preparer Use Only	Firm's name ▶ CLIF	TONLARSONALLE	EN LLP		1	Fı	rm's EIN ▶41	-07467	49
	Firm's address ▶ 31	25 JOHN JOANIS	DRIVE						
	ST	EVENS POINT, W	VI 54482			Pł	none no (715	i) 344-4	1984
	i								

Form 990PF Part VIII Line 1 - List all officers, directors, trustees, foundation managers and their compensation (a) Name and address Title, and average (c) Compensation (If (d) Expense account, hours per week not paid, enter Contributions to (e) other allowances (b) devoted to position -0-) employee benefit plans and deferred compensation VICTOR W ANTHONY JR PRESIDENT/TREASURER 0 50 134 SHADOW LAKE DRIVE WAUPACA, WI 54981 CHRISTINE A ANTHONY VICE-PRESIDENT/SECRETARY 134 SHADOW LAKE DRIVE 0.50 WAUPACA, WI 54981 KAREN A GABLER DIRECTOR 0.50 134 SHADOW LAKE DRIVE WAUPACA, WI 54981 KATHERINE A ANTHONY DIRECTOR 0 0 50 134 SHADOW LAKE DRIVE WAUPACA, WI 54981 CAROL C ANTHONY DIRECTOR

0.50

134 SHADOW LAKE DRIVE WAUPACA, WI 54981

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business) or substantial contributor a Paid during the year AGING & DISABILITY RESOURCE NONE PUBLIC TO HELP PROVIDE FOOD AND 5,000 CENTER-SENIOR NUTRITION PROGRAM CHARITY OTHER SERVICES TO SENIORS IN THE WAUPACA COUNTY 811 HARDING STREET

WAUPACA, WI 54981			AREA	
BABY'S SPACE 2438 18TH AVENUE SOUTH MINNEAPOLIS, MN 55404	NONE	PUBLIC CHARITY	TO HELP FURTHER THE ORGANIZATION'S MISSION	5,000
BASIC NEEDS PARTNERSHIP CO COMMUNITY FOUNDATION OF THE FOX VALLEY REGION 4455 W LAWRENCE ST APPLETON, WI 54912	NONE	PUBLIC CHARITY	TO HELP PEOPLE IN THE COMMUNITY WHO ARE IN NEED	20,000

Total .

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment Recipient Foundation Purpose of grant or If recipient is an individual, Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business) or substantial contributor a Paid during the year CAP SERVICES - FAMILY CRISIS NONE PUBLIC TO HELP FURTHER THE FAMILY 5.000

2900 HOOVER RD SUITE A STEVENS POINT, WI 54481		CHARITY	CRISIS CENTER	
CAP SERVICES - VITA 2900 HOOVER RD SUITE A STEVENS POINT, WI 54481	NONE	PUBLIC CHARITY	TO HELP WITH THE VITA PROGRAM	2,500
CAP SERVICES - SKILLS ENHANCEMENT 2900 HOOVER RD SUITE A	NONE	PUBLIC CHARITY	TO FURTHER THE SKILLS ENHANCEMENT PROGRAM	25,000

2900 HOOVER RD SUITE A STEVENS POINT, WI 54481		CHARITY	PROGRAM	_,
CAP SERVICES - SKILLS ENHANCEMENT 2900 HOOVER RD SUITE A STEVENS POINT, WI 54481	NONE	PUBLIC CHARITY	TO FURTHER THE SKILLS ENHANCEMENT PROGRAM	25,000
Total	851,184			

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business) or substantial contributor a Paid during the year CREATIVE CARING HEARTS NONE PUBLIC TO FURTHER THE 1,000

519 HIGHLAND DRIVE WAUPACA, WI 54981		CHARITY	ORGANIZATION'S MISSION TO PROVIDE LAYETTES TO NEW BABIES	
CROSSWAYS CAMPING MINISTRIES 912 N ONEIDA ST APPLETON. WI 54914	NONE	PUBLIC CHARITY	TO HELP FURTHER THE CAMPERSHIP PROGRAM	

Total .

CROSSWAYS CAMPING MINISTRIES 912 N ONEIDA ST APPLETON, WI 54914	NONE	PUBLIC CHARITY	TO HELP FURTHER THE CAMPERSHIP PROGRAM	5,000
ELCA DISASTER RESPONSE 8765 WEST HIGGINS ROAD	NONE	PUBLIC CHARITY	DONATION	100,000

APPLETON, WI 54914		CHARITY	CAMPERSHIP PROGRAM	
ELCA DISASTER RESPONSE 8765 WEST HIGGINS ROAD CHICAGO, IL 60631	NONE	PUBLIC CHARITY	DONATION	100,000

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment Recipient Foundation Purpose of grant or If recipient is an individual, Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business) or substantial contributor a Paid during the year ELCA WORLD HUNGER AND DISASTER NONE PUBLIC TO HELP THE ORGANIZATION 80,000 ADDEAL CHARTTY ADDRECC THE BOOT CALICE OF

8765 WEST HIGGINS ROAD CHICAGO, IL 60631		CHARITY	POVERTY IN MANY PARTS OF THE WORLD	
ETTA PROJECTS909 NORTH J STREET TACOMA, WA 98403	NONE		TO HELP WITH WATER PROJECT ISAMA I AND ISAMA II	5,184
FEEDING AMERICA - EASTERN WISCONSIN 2911 W EVERGREEN DRIVE APPLETON, WI 54913	NONE		TO HELP FURTHER THE MISSION OF THE ORGANIZATION	15,000

ETTA PROJECTS909 NORTH J STREET TACOMA, WA 98403	NONE	PUBLIC CHARITY	TO HELP WITH WATER PROJECT ISAMA I AND ISAMA II	5,18
FEEDING AMERICA - EASTERN WISCONSIN 2911 W EVERGREEN DRIVE APPLETON, WI 54913	NONE	PUBLIC CHARITY	TO HELP FURTHER THE MISSION OF THE ORGANIZATION	15,0

Total .

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	Purpose of grant or contribution	Amount	
Name and address (home or business)		recipient			
a Paid during the year					
FEEDING AMERICA - MISSION OF HOPE 1700 W FOND DU LAC AVE MILWAUKEE, WI 53205	NONE	PUBLIC CHARITY	TO SUPPORT THE MISSION OF HOPE EVENT	2,000	
FOUNDATIONS FOR LIVING 1421 CHURCHILL STREET WAUPACA, WI 54981	NONE	PUBLIC CHARITY	TO HELP THE ORGANIZATION WITH THEIR WARMING SHELTER OPERATIONS	1,000	
FREEDOM HOUSE MINISTRIES	NONE	PUBLIC	TO HELP FUND THE	5,000	

FOUNDATIONS FOR LIVING 1421 CHURCHILL STREET WAUPACA, WI 54981  NONE  PUBLIC CHARITY OPERATIONS  1,000  1,000  TO HELP THE ORGANIZATION WITH THEIR WARMING SHELTER OPERATIONS  FREEDOM HOUSE MINISTRIES 2997 ST ANTHONY DRIVE GREEN BAY, WI 54311  NONE  PUBLIC CHARITY ORGANIZATION'S PROGRAM TO HELP THE HOMELESS FAMILIES IN THE GREEN BAY AREA	MILWAOREE, WI 53203			
2997 ST ANTHONY DRIVE CHARITY ORGANIZATION'S PROGRAM TO HELP THE HOMELESS FAMILIES	1421 CHURCHILL STREET	NONE	 WITH THEIR WARMING SHELTER	1,000
	2997 ST ANTHONY DRIVE	NONE	 ORGANIZATION'S PROGRAM TO HELP THE HOMELESS FAMILIES	5,000

851,184

Total . . . .

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment Recipient Purpose of grant or If recipient is an individual, Foundation Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business) or substantial contributor a Paid during the year GILLETTE CHILDREN'S FOUNDATION NONE PUBLIC TO AID IN THE GILLETTE 50,000 200 LINIT/EDCITY AVE E CHADITY ACCICTANCE DDOCDAM

SAINT PAUL, MN 55101		CHARITI	ASSISTANCE PROGRAM	
GOODWILL INDUSTRIES-FISC PROGRAM 1800 APPLETON ROAD MENASHA, WI 54952	NONE	PUBLIC CHARITY	TO AID PEOPLE IN DIFFICULT ECONOMIC TIMES THROUGHT THE FISC PROGRAM	5

GOODWILL INDUSTRIES-FISC PROGRAM 1800 APPLETON ROAD MENASHA, WI 54952	NONE	PUBLIC CHARITY	TO AID PEOPLE IN DIFFICULT ECONOMIC TIMES THROUGHT THE FISC PROGRAM	5,000
GREATER MINNEAPOLIS CRISIS NURSERY	NONE	PUBLIC CHARITY	TO SUPPORT THE MISSION OF THE ORGANIZATION	10,000

PROGRAM 1800 APPLETON ROAD MENASHA, WI 54952		CHARITY	ECONOMIC TIMES THROUGHT THE FISC PROGRAM	
GREATER MINNEAPOLIS CRISIS NURSERY P O BOX 1450	NONE	PUBLIC CHARITY	TO SUPPORT THE MISSION OF THE ORGANIZATION	10,00

MENASHA, WI 54952			THE FISC PROGRAM	
GREATER MINNEAPOLIS CRISIS NURSERY P O BOX 1450	NONE	PUBLIC CHARITY	TO SUPPORT THE MISSION OF THE ORGANIZATION	10,0

MENASHA, WI 54952				
GREATER MINNEAPOLIS CRISIS NURSERY P O BOX 1450 MINNEAPOLIS, MN 554856189	NONE	PUBLIC CHARITY	TO SUPPORT THE MISSION OF THE ORGANIZATION	10,000

NURSERY P O BOX 1450 MINNEAPOLIS, MN 554856189	CHARITY	THE ORGANIZATION	
Total	 	▶ 3a	851,184

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment If recipient is an individual, Recipient Foundation Purpose of grant or Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business) or substantial contributor a Paid during the year HABITAT FOR HUMANITY NONE PUBLIC. TO FURTHER THE 50,000 INTERNATIONAL CHARITY ORGANIZATION'S MISSION 270 PEACHTREE ST NW STE 1300 ATLANTA, GA 30303

=, =				
HANDICAP INTERNATIONAL - HUMANITY AND INCLUSION 8757 GEORGIA AVE STE 420 SILVER SPRING, MD 20910	NONE	PUBLIC CHARITY	TO AID PEOPLE WITH DISABILITIES WHO ARE IN POVERTY, CONFLICT AND DIASTER	25,000
INTERNATIONAL RESCUE COMMITTEE	NONE	PUBLIC	TO HELP FURTHER THE MISSION	50,000

▶ 3a

851,184

HUMANITY AND INCLUSION 8757 GEORGIA AVE STE 420 SILVER SPRING, MD 20910	NONE	CHARITY	DISABILITIES WHO ARE IN POVERTY, CONFLICT AND DIASTER	25,0
INTERNATIONAL RESCUE COMMITTEE 122 EAST 42ND STREET	NONE	PUBLIC CHARITY	TO HELP FURTHER THE MISSION OF THE ORGANIZATION	50,0

NEW YORK, NY 101681289

Total .

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business) or substantial contributor a Paid during the year IOLA FOOD PANTRY - OUR SAVIOR'S NONE PUBLIC TO HELP FEED THE NEEDY IN 500

LUTHERAN CHURCH 395 EAST IOLA STREET IOLA, WI 54945		CHARITY	THE IOLA-SCANDINAVIA AREA	
LUTHERAN SOCIAL SERVICES OF WISCONSIN AND UPPER MICHIGAN 6737 W WASHINGTON ST SUITE 227	NONE	PUBLIC CHARITY	TO AID THE REFUGEE RESETTLEMENT PROGRAM	25,000

WISCONSIN AND UPPER MICHIGAN 6737 W WASHINGTON ST SUITE 227 WEST ALLIS, WI 53214	NONE	CHARITY	RESETTLEMENT PROGRAM	23,000
MILWAUKEE RESCUE MISSION 830 NORTH 19TH STREET MILWAUKEE, WI 53233			TO HELP WITH THE MISSION TO AID THE POOR AND HOMELESS IN MILWAUKEE	5,000

Total .

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	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	any foundation manager or substantial contributor	recipient		
a Paid during the year				
NEIGHBORHOOD DEVELOPMENT CENTER 663 UNIVERSITY AVE SUITE 200 SAINT PAUL, MN 55104	NONE	PUBLIC CHARITY	TO HELP FUND ENTREPRENEUR TRAINING CLASSES	25,000
NORTHSIDE ACHIEVEMENT ZONE	NONE	PUBLIC	TO HELP THE ORGANIZATION	25,000

NORTHSIDE ACHIEVEMENT ZONE 2123 WEST BROADWAY AVE STE 100 MINNEAPOLIS, MN 55411	NONE		TO HELP THE ORGANIZATION CLOSE THE ACHIEVEMENT GAP AND END GENERATIONAL POVERTY IN NORTH MINNEAPOLIS	:
OPEN ARMS HOME FOR CHILDREN PO BOX 2198 LITCHFIELD PARK, AZ 85340	NONE	PUBLIC CHARITY	TO SUPPORT THE "SPECIAL NEEDS EDUCATION" PARTERNERSHIP WITH KOMGA	:

Total .

MINNEAPOLIS, MN 55411		CHARTT	AND END GENERATIONAL POVERTY IN NORTH MINNEAPOLIS	
OPEN ARMS HOME FOR CHILDREN PO BOX 2198 LITCHFIELD PARK, AZ 85340	NONE	PUBLIC CHARITY	TO SUPPORT THE "SPECIAL NEEDS EDUCATION" PARTERNERSHIP WITH KOMGA	25,000

Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business) or substantial contributor

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

a Paid during the year				
PROJECT BACKPACK 153 COUNTY ROAD QQ	NONE	PUBLIC CHARITY	TO HELP THE ORGANIZATION PROVIDE FOOD TO HUNGRY	5,000

WAUPACA, WI 54981		CHARITY	STUDENTS	
RAWHIDE INCE7475 RAWHIDE ROAD NEW LONDON, WI 54961	NONE	PUBLIC CHARITY	TO HELP FURTHER THE MISSION OF THE ORGANIZATION	75,000
RONALD MCDONALD HOUSE - EASTERN	NONE	PUBLIC	TO SPONSOR A SHORT TERM	15,000

RAWHIDE INCE7475 RAWHIDE ROAD NEW LONDON, WI 54961	NONE	PUBLIC CHARITY	TO HELP FURTHER THE MISSION OF THE ORGANIZATION	75,000
RONALD MCDONALD HOUSE - EASTERN WISCONSIN 8948 WATERTOWN PLANK ROAD WAUWATOSA, WI 53226	NONE	PUBLIC CHARITY	TO SPONSOR A SHORT TERM GUEST ROOM	15,000

Total			▶ 3a	851,184
RONALD MCDONALD HOUSE - EASTERN WISCONSIN 8948 WATERTOWN PLANK ROAD WAUWATOSA, WI 53226	NONE	PUBLIC CHARITY	TO SPONSOR A SHORT TERM GUEST ROOM	15,000
NEW LONDON, WI 54961	NONE	CHARITY	OF THE ORGANIZATION	73,000

<b>-</b>				054.404
RONALD MCDONALD HOUSE - EASTERN WISCONSIN 8948 WATERTOWN PLANK ROAD WAUWATOSA, WI 53226	NONE	PUBLIC CHARITY	TO SPONSOR A SHORT TERM GUEST ROOM	15,000
NEW LONDON, WI 54961		CHARITY	OF THE ORGANIZATION	

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment Recipient Foundation Purpose of grant or If recipient is an individual, Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business) or substantial contributor a Paid during the year **ROTARY FOUNDATION - ROTARY** NONE PUBLIC TO HELP THE POLIO PLUS 5,000 DISTRICT 6220 CHARITY CAMPAIGN N2577 WOODLAND CIRCLE

WAUPACA, WI 54981				
SALVATION ARMY - WAUPACA COUNTY E580 COBB TOWN ROAD WAUPACA, WI 54981	NONE	PUBLIC CHARITY	TO HELP FURTHER THE MISSION OF THE ORGANIZATION	10,000
SECOND HARVEST HEARTLAND 1140 GERVAIS AVE	NONE	PUBLIC CHARITY	TO HELP THE ORGANIZATION FEED THE NEEDY	15,000

E580 COBB TOWN ROAD WAUPACA, WI 54981	NONE	CHARITY	OF THE ORGANIZATION	10,0
SECOND HARVEST HEARTLAND 1140 GERVAIS AVE ST PAUL, MN 55109	NONE	PUBLIC CHARITY	TO HELP THE ORGANIZATION FEED THE NEEDY	15,0

Total . .

Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to contribution status of any foundation manager recipient Name and address (home or business) or substantial contributor - David domain - 66 - 00 - 00

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

a Paid during the year				
SPECIAL OLYMPICS-WISCONSIN PO BOX 7638 MADISON, WI 537077638	NONE	PUBLIC CHARITY	TO HELP FURTHER THE MISSION OF THE ORGANIZATION	5,000
WATER MISSIONPO BOX 71489 NORTH CHARLESTON, SC 29415	NONE	PUBLIC CHARITY	TO HELP THE ORGANIZATION TO PROVIDE WATER TO PEOPLE IN NEED	15,000
WAUPACA AREA FOOD PANTRY PO BOX 565 WAUPACA, WI 54981	NONE	PUBLIC CHARITY	TO PROVIDE PRODUCE FOR FOOD BOXES PROVIDED BY THE WAUPACA AREA MIRACLE TREE	3,000

NORTH CHARLESTON, SC 29415	NONE	PUBLIC CHARITY	TO HELP THE ORGANIZATION TO PROVIDE WATER TO PEOPLE IN NEED	15,000
WAUPACA AREA FOOD PANTRY PO BOX 565 WAUPACA, WI 54981	NONE	PUBLIC CHARITY	TO PROVIDE PRODUCE FOR FOOD BOXES PROVIDED BY THE WAUPACA AREA MIRACLE TREE PROJECT AND TO HELP THE ORGANIZATION PURCHASE A NEW FREEZER	3,000

WAUPACA AREA FOOD PANTRY PO BOX 565 WAUPACA, WI 54981	NONE	PUBLIC CHARITY	TO PROVIDE PRODUCE FOR FOOD BOXES PROVIDED BY THE WAUPACA AREA MIRACLE TREE PROJECT AND TO HELP THE ORGANIZATION PURCHASE A NEW FREEZER	3,000
Total			▶ 3a	851,184

Form 990PF Part XV Line 3 - Gran	ts and Contributions Paid	During the	Year or Approved for Future	Payment
Recipient	If recipient is an individual, show any relationship to	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	any foundation manager or substantial contributor	recipient		
a Paid during the year				
WAUPACA BREAD BASKET MEAL PROGRAM PO BOX 364 WAUPACA, WI 54981	NONE	PUBLIC CHARITY	TO HELP THE ORGANIZATION PROVIDE MEALS FOR THE PEOPLE OF THE WAUPACA AREA	5,000
WISCONSIN BOOKWORMS-WAUPACA COUNTY 811 HARDING STREET	NONE	PUBLIC CHARITY	TO HELP THE ORGANIZATION PROVIDE BOOKS TO CHILDREN	1,000

WAUPACA, WI 54981				
WISCONSIN BOOKWORMS-WAUPACA COUNTY 811 HARDING STREET WAUPACA, WI 54981	NONE	PUBLIC CHARITY	TO HELP THE ORGANIZATION PROVIDE BOOKS TO CHILDREN	1,000
CHILDREN'S HOSPITAL OF WI FOUNDATION 333 N COMMERCIAL STREET SUITE 400 NEENAH, WI 54956	NONE	PUBLIC CHARITY	TO FURTHER THE MISSION OF HELPING ILL CHILDREN AND THEIR FAMILIES	5,000

Recipient Foundation Purpose of grant or If recipient is an individual, Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business) or cubetantial contributor

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

	or substantial contributor			
a Paid during the year				
TWIN CITIES RISE1301 BRYANT AVE N	NONE	PUBLIC	TO HELP FURTHER THE MISSION	10,000

MINNEAPOLIS, MN 55411		CHARITY	OF THE ORGANIZATION	
CAMP HOPEPO BOX 84 AMHERST, WI 54406	NONE	PUBLIC CHARITY	TO HELP FURTHER THE ORGANIZATION'S MISSION	2,000
PILLARS605 E HANCOCK ST	NONE	PUBLIC	TO HELP THE ORGANIZATION	6,000

CAMP HOPEPO BOX 84 AMHERST, WI 54406	NONE	PUBLIC CHARITY	TO HELP FURTHER THE ORGANIZATION'S MISSION	2,000
PILLARS605 E HANCOCK ST APPLETON, WI 54911	NONE	PUBLIC CHARITY	TO HELP THE ORGANIZATION PROVIDE AID TO PEOPLE IN NEED	6,000

AMITERST, WI STTOO		CIK	ONGANIZATION S MISSION	
PILLARS605 E HANCOCK ST APPLETON, WI 54911	NONE	PUBLIC CHARITY	TO HELP THE ORGANIZATION PROVIDE AID TO PEOPLE IN NEED	6,000
Total			▶ 3a	851.184

Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business) or substantial contributor a Paid during the year

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

a . a.a aa,g a.a , ca,				
COTS INCPO BOX 1645 APPLETON, WI 54912	NONE	PUBLIC CHARITY	TO HELP FURTHER THE ORGANIZATION'S MISSION TO END HOMELESSNESS	1,000

			END HOMELESSINESS	
MISSION OF HOPE HOUSE 520 NORTH SHAWANO ST NEW LONDON, WI 54961	NONE	CHARITY	TO HELP THE ORGANIZATION PURCHASE FIXED ASSETS FOR CLIENT USE	1,000
CENTER FOR DISASTER PHILANTHROPY	NONE	PUBLIC	TO HELP FURTHER THE MISSION	50,000

CENTER FOR DISASTER PHILANTHROPY 1201 CONNECTICUT AVE NW WASHINGTON, DC 20036  NONE PUBLIC CHARITY TO HELP FURTHER THE MISSION OF DISASTER SITUATION AID  50,000	NEW LONDON, WI 54961		 CLIENT USE	
	1201 CONNECTICUT AVE NW	NONE	 	50,000

851,184

NEW LONDON, WI 54961		CHARITY	CLIENT USE	
CENTER FOR DISASTER PHILANTHROPY 1201 CONNECTICUT AVE NW WASHINGTON, DC 20036	NONE	PUBLIC CHARITY	TO HELP FURTHER THE MISSION OF DISASTER SITUATION AID	50,00

Total .

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment Recipient If recipient is an individual, Foundation Purpose of grant or Amount contribution show any relationship to status of any foundation manager recipient

Name and address (home or husiness)

Name and address (nome or business)	or substantial contributor			
a Paid during the year				
GREATER FOX CITIES AREA HABITAT	NONE	PUBLIC	TO SUPPORT THE ROCK THE	50,000

GREATER FOX CITIES AREA HABITAT FOR HUMANITY 921 MIDWAY RD MENASHA, WI 54952	NONE	PUBLIC CHARITY	TO SUPPORT THE ROCK THE BLOCK PROGRAM	50,000
Total			▶ 3a	851,184

efile GRAPHIC print - DO NOT PR	OCESS	As Filed D	ata -		DLN: 93491192003109
TY 2018 Accounting Fee	es Sch	edule			
			FOR AND CHRISTIN FOUNDATION INC 891	IE ANTHONY	
Category	Am	ount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
ACCOUNTING FEES		4,600	2,300		2,300

efile GRAPHIC print - DO NOT PROCESS	As Filed Data -		DLN: 93491192003109
TY 2018 Investments Corpora	te Bonds Sche	dule	
Name:	THE VICTOR AND	CHRISTINE ANTHONY	
	FAMILY FOUNDAT	TION INC	

CHARLES SCHWAB - BOND FUNDS

20 0031031		
Investments Corporate Bonds Schedule		
Name of Bond	End of Year Book Value	End of Year Fair Market Value

5,136,006

4,848,459

FTN: 26-0851891

efile GRAPHIC print - DO NOT PROCESS	As Filed Data -		DLN: 93491192003109
TY 2018 Investments Corpora	te Stock Sche	dule	
Name:	THE VICTOR AND	CHRISTINE ANTHONY	
	FAMILY FOUNDAT	ION INC	
EIN:	26-0851891		

Investments Corporation Stock Schedule		
Name of Stock	End of Year Book Value	End of Year Fair Market Value
CHARLES SCHWAB - EQUITY FUNDS	9,585,289	7,455,423

3491192003109

Name: THE VICTOR AND CHRISTINE ANTHONY

FAMILY FOUNDATION INC

ETNI. 26 00E1001

EIN: 26-0821891				
Investments Other Schedule 2				
Category/ Item	Listed at Cost or FMV	Book Value	End of Year Fair Market Value	
CHARLES SCHWAB - OTHER	AT COST	444,314	826,676	
LIFE INSURANCE POLICY	AT COST	358,840	562,994	
BASCOM VALUE ADDED APARTMENT INVESTORS	AT COST	26,404	26,404	
ARDEN VALUE ADDED REAL ESTATE INVESTORS	AT COST	386,547	386,547	
ARDEN CREDIT FUND	AT COST	654,023	654,023	

efile GRAPHIC print - DO NOT PROCESS	As Filed Data -		DL	N: 93491192003109	
TY 2018 Other Expenses Schedule					
Name:	THE VICTOR AN	ID CHRISTINE AN	ITHONY		
	FAMILY FOUND	ATION INC			
EIN:	26-0851891				
Other Expenses Schedule					
Description	Revenue and Expenses per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes	
POSTAGE	364	0		364	
OFFICE EXPENSE & MISC	857	0		857	

1,750

MEMBERSHIPS

efile GRAPHIC print - DO NOT PROCESS	As Filed Data -	DLN: 93491192003109
TV 2010 Other Teacher Calcad	1-	_
TY 2018 Other Income Schedul	e	

Name: THE VICTOR AND CHRISTINE ANTHONY

FAMILY FOUNDATION INC.

**EIN:** 26-0851891

Other Income Schedule			
Description	Revenue And Expenses Per Books	Net Investment Income	Adjusted Net Income
BASCOM VALUE ADDED APARTMENT INVESTORS II, LLC	197,641	49,100	197,641
ARDEN REAL ESTATE PARTNERS II LP	-1,910	0	-1,910
SCHWAB NONDIVIDEND DISTRIBUTIONS	70,651	0	70,651

efile GRAPHIC print - DO NOT PROCESS	S As Filed Data	-	DLI	N: 93491192003109	
TY 2018 Other Professional Fees Schedule					
Name	e: THE VICTOR	AND CHRISTINE	ANTHONY		
FAMILY FOUNDATION INC					
<b>EIN:</b> 26-0851891					
Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable	

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes

101,183

INVESTMENT MANAGEMENT FEES

efile GRAPHIC print - DO NOT PROCE	ESS As Filed Data	-1	DLI	N: 93491192003109
TY 2018 Taxes Schedule				
Na	me: THE VICTOR	R AND CHRISTINE A	ANTHONY	
	FAMILY FOU	FAMILY FOUNDATION INC		
·	EIN: 26-0851891			
Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
FEDERAL TAXES PAID	54,273	1		0
TEDERAL TAXES FAID	34,2/3	'		1
FOREIGN TAX PAID	7,374	7,374		0