

EXTENDED TO NOVEMBER 15, 2019 Return of Private Foundation

or Section 4947(a)(1) Trust Treated as Private Foundation

► Do not enter social security numbers on this form as it may be made public.

Go to www.irs gov/Form990PF for instructions and the latest information.

2018

| | For, | calendar year 2018 or tax year beginning | - | , and ending | | |
|-------------|--------------------|--|--|---------------------------------------|--|--|
| | | ne of foundation | | | A Employer identification | number |
| | <u>K</u> | ELBEN FOUNDATION, INC. | 39-1494625 | | | |
| | Nur | nber and street (or P O box number if mail is not delivered to street a | address) | | B Telephone number | |
| | _1 | 00 EAST WISCONSIN AVENUE | | 2280 | 414-236-62 | 223 |
| | - | or town, state or province, country, and ZIP or foreign politically and ZIP or foreign politi | ostal code | | C If exemption application is p | pending, check here |
| | G | heck all that apply Initial return | Initial return of a fo | rmer public charity | D 1. Foreign organization: | s, check here |
| | | Final return | Amended return | | 2 Foreign organizations m | peting the 85% test |
| | | Address change | Name change | | Foreign organizations me check here and attach co | omputation |
| | H_0 | theck type of organization X Section 501(c)(3) exe | | | E If private foundation sta | |
| | <u></u> | Section 4947(a)(1) nonexempt charitable trust (ir market value of all assets at end of year J Accountin | Other taxable private foundate method X Cash | <u></u> | under section 507(b)(1 | |
| | | | ner (specify) | Accidar | F If the foundation is in a under section 507(b)(1 | |
| | - | \$ 30,457,359. (Part I, colum | | 5) | 4 | χ-η σιισοιί τιστο — — — — — — — — — — — — — — — — — — — |
| | Pá | Analysis of Revenue and Expenses (The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a)) | (a) Revenue and expenses per books | (b) Net investment income | (c) Adjusted net income | (d) Disbursements for chantable purposes (cash basis only) |
| | | 1 Contributions, gifts, grants, etc., received | 201,862. | | N/A | |
| | | 2 Check ▶ if the foundation is not required to attach Sch B | | | | |
| _ | | 3 Interest on savings and temporary cash investments | | | | |
| 3 | | 4 Dividends and interest from securities | 775,880. | 775,880. | | STATEMENT 1 |
| 4 | | 5a Gross rents | | | | |
| / | | b Net rental income or (loss) | 309,656. | | | |
| | Revenue | b Gross sales price for all 17,403,702. | 3037030. | | | |
| | | 7 Capital gain net income (from Part IV, line 2) | | 309,656. | *************************************** | |
| | ď | 8 Net short-term capital gain | | | | |
| _ | | 9 Income modifications | | | | |
| 5013 | | 10a Gross sales less returns and allowances | | · · · · · · · · · · · · · · · · · · · | | ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,, |
| 9 2 | | b Less Cost of goods sold | | | | |
| 5 | | c Gross profit or (loss) 11 Other income | -231,471. | -305. | | STATEMENT 2 |
| | | 12 Total. Add lines 1 through 11 | 1,055,927. | 1,085,231. | | |
| DEC | | 13 Compensation of officers, directors, trustees, etc | 40,000. | 0. | | 40,000. |
| | | 14 Other employee salaries and wages | | | | |
| NED | s | 15 Pension plans, employee benefits | 17 250 | | | 17,250. |
| Z | nse | 16a Legal fees STMT 3 | 17,250. | 0. | | 17,230. |
| SCAN | Expenses | b Accounting fees c Other professional fees | | | | |
| ഗ | e E | 17 Interest RECEIVED | 12,012. | 12,012. | | 0. |
| | and Administrative | 18 Taxes STMT() | 210,451. | 0. | | 0. |
| | nistı | 19 Depreciation and depletion 9 2019 | 5,246. | 0. | | |
| | ΪË | 150 Occubamby) | 27,402. | 0. | | 27,402. |
| | ďĄ | 21 Mayor, domestings. | | | <u> </u> | |
| | Jan | 22 Printing and put OMDEN, UT 23 Other expenses STMT 5 | 140,946. | 38,142. | | 87,881. |
| | ţi | 23 Other expenses STM1 5 24 Total operating and administrative | 140/040. | 30/112. | | 3,75525 |
| | Operating | expenses Add lines 13 through 23 | 453,307. | 50,154. | | 172,533. |
| | ŏ | 25 Contributions, gifts, grants paid | 2,381,049. | | | 2,381,049. |
| | | 26 Total expenses and disbursements | | | | 0 550 500 |
| | | Add lines 24 and 25 | 2,834,356. | 50,154. | | 2,553,582. |
| | | 27 Subtract line 26 from line 12 | 1 770 420 | | | |
| | | 2 Excess of revenue over expenses and disbursements | -1,778,429. | 1,035,077. | | <u> </u> |
| | | b Net investment income (if negative, enter -0-) C Adjusted net income (if negative, enter -0-) | | _,,, | N/A | |
| | | ···· | | | | |

823501 12-11-18 LHA For Paperwork Reduction Act Notice, see instructions.

| Pari | Balance Sheets Attached schedules and amounts in the description column should be for each of year amounts only | Beginning of year | End of | year |
|----------------------------|---|--------------------|---------------------------------------|--|
| Pari | column should be for end-of-year amounts only | (a) Book Value | (b) Book Value | (c) Fair Market Value |
| 1 | Cash - non-interest-bearing | | 0.50 5.51 | 060 564 |
| 2 | Savings and temporary cash investments | 6,873,499. | 262,564. | 262,564. |
| 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 . | | | ···· |
| 7 | Other notes and loans receivable | | | |
| | Less allowance for doubtful accounts | | | |
| ह । | Inventories for sale or use | | | |
| Assets | Prepaid expenses and deferred charges | | | |
| 10 🏲 | a Investments - U.S. and state government obligations $$ STMT $$ 6 $$ $$ | 0. | 2,467,404. | 2,520,927. |
| | b Investments - corporate stock STMT 7 | 16,761,841. | 18,990,022. | 18,875,939. |
| | c Investments - corporate bonds | | | , |
| 11 | Investments - land, buildings, and equipment basis | | | |
| | Less accumulated depreciation | | | - |
| 12 | | 347,318. | 122,318. | 122,318. |
| 13 | Investments - other STMT 9 | 7,321,473. | 7,357,649. | 8,635,742. |
| 14 | Land, buildings, and equipment basis ► 51,263. | | | |
| - | Less. accumulated depreciation STMT 10 ► 12,894. | 42,401. | 38,369. | 38,369. 1,500. |
| 15 | Other assets (describe STATEMENT 11) | 1,500. | 1,500. | 1,500. |
| 16 | Total assets (to be completed by all filers - see the | | | |
| | instructions Also, see page 1, item I) | 31,348,032. | 29,239,826. | 30,457,359. |
| 17 | Accounts payable and accrued expenses | **** | | |
| 18 | Grants payable | | | |
| ഗ്ല 19 | Deferred revenue . | | | <u></u> |
| Liabilities 20 21 21 22 | Loans from officers, directors, trustees, and other disqualified persons | | | |
| <u>e</u> 21 | Mortgages and other notes payable | | | |
| ے ₂₂ | Other liabilities (describe | | | |
| | | | | |
| 23 | Total liabilities (add lines 17 through 22) | 0. | 0. | |
| 1 | Foundations that follow SFAS 117, check here | | | |
| ,, | and complete lines 24 through 26, and lines 30 and 31. | | | " |
| S 24 | Unrestricted | | | ······································ |
| Net Assets or Fund Balance | Temporarily restricted . | | | |
| <u>26</u> | | | | ···· |
| <u> </u> | Foundations that do not follow SFAS 117, check here | | | |
| <u>ت</u> | and complete lines 27 through 31. | | | |
| ဋ္ဌာ 27 | Capital stock, trust principal, or current funds | 0. | 0. | |
| 82 28 | Paid-in or capital surplus, or land, bldg, and equipment fund | 0. | 0. | ······ |
| ₹ 29 | Retained earnings, accumulated income, endowment, or other funds | 0. | 0. | |
| 2 30 | Total net assets or fund balances | 31,348,032. | 29,239,826. | |
| | | 21 240 022 | 20 220 026 | |
| 31 | Total liabilities and net assets/fund balances | 31,348,032. | 29,239,826. | |
| Parl | Analysis of Changes in Net Assets or Fund B | alances | | |
| 1 Tota | il net assets or fund balances at beginning of year - Part II, column (a), line | 30 | | |
| | st agree with end-of-year figure reported on prior year's return) | | 1 | 31,348,032. |
| 2 Ente | er amount from Part I, line 27a | | 2 | -1,778,429. |
| 3 Oth | er increases not included in line 2 (itemize) | | 3 | 0. |
| | lines 1, 2, and 3 | | 4 | 29,569,603. |
| 5 Dec | reases not included in line 2 (itemize) PARTNERSHIP CA | PITAL ADJUSTMI | | 330,777. |
| & Tot | at net assets or fund halances at end of year (line 4 minus line 5) - Part II, co | olumn (b), line 30 | 6 | 29,238,826. |

Form 990-PF (2018) KELBEN FOUNDATION, INC.

| | | FOUNDATION, | | | | | | 3 | <u>9-149</u> | <u>4625</u> | Page 3 |
|---|-------------------------------------|---|--------------------------------|---------------------------------------|---------------|--------------------------|--------------|--------------------|-------------------------------|--------------|-----------------------|
| Part IV Capital Ga | ains and Lo | osses for Tax on li | nvestmen | t Income | | | | | | | |
| (a) List and de 2-story b | scribe the kind(rick warehouse, | s) of property sold (for exa or common stock, 200 sh | ample, real esta s MLC Co) | ite, | P | How a - Purc - Don | | | acquired lay, yr) | | ite sold day, yr) |
| 1a | | | | | | | | | | | |
| b SEE ATTAC | HED STA | TEMENT | | | | | | | | | |
| C | _ | | | | | | | | | | |
| d | | | | | | _ | | | | | |
| 6 | | | | | | | | | | | |
| (e) Gross sales price | (f) | Depreciation allowed (or allowable) | | st or other basis expense of sale | | | | (h) G ((e) plus | ain or (loss s (f) minus (|) (g)) | |
| a | | | | • | | | | | | | _ |
| b | | | | | | | | | | | |
| C | | | | • | | | | | | | |
| d | | | | | | | | | | | |
| e 17,403,70 | 02. | | 1 | 7,023,83 | 9. | | | | | 309 | ,656. |
| Complete only for assets s | | column (h) and owned by | | | | | (I |) Gains (C | ol (h) gain | | - |
| (i) FMV as of 12/31/69 | | (j) Adjusted basis as of 12/31/69 | (k) E> | cess of col (i) col (j), if any | | | còl | (k), but i | not less that (from col. (| n -0-) or | |
| a | | | | | | | | | | | |
| b | | | | | | | | | | | |
| C | | | | | | | | | | | _ |
| d | | • | | | | - | | | | | |
| е | | | <u> </u> | - | | | | | | 309 | ,656. |
| <u> </u> | | C If gain, also ente | r in Part I line | 7 | $\overline{}$ | | | • • | | | · <u>·</u> |
| 2 Capital gain net income or | | (() | | 7 | • | 2 | | | | 309 | ,656. |
| 3 Net short-term capital gain | | | nd (6) | | ٦ | | | | | | |
| If gain, also enter in Part I, If (loss), enter -0- in Part I, | | c) | | | | 2 | | | N/A | | |
| | | ection 4940(e) for | Reduced | Tax on Net | Inv | estn | nent inc | ome | | | |
| (For optional use by domestic | | | | | | | | | - | • | |
| (For optional use by domestic | private ioditoati | ons subject to the section | 4540(a) tax 011 | tiet investinent in | COIIIC | • , | | | | | |
| If section 4940(d)(2) applies, I | leave this part bl | ank | | | | | | | | | |
| 144 Ab - & | | Associate Albandon Burgaria | | | 40 | | | | | | X No |
| Was the foundation liable for the | | | | · · · · · · · · · · · · · · · · · · · | 100 / | | | | | res | ואט באַ |
| If "Yes," the foundation doesn't 1 Enter the appropriate amore | | | | | ntrios | | | | | | |
| (a) | unt in each colu | | iistructions be | iole making any e | | | | | | (d) | |
| Base period year | s [| (b) Adjusted qualifying dis | etributions | Net value of no | (C) ncha | | otappe april | | Distrib | uitión ratio | |
| Calendar year (or tax year b | eginning in) | | 5,856. | | | | 8,159 | | (col (b) div | ided by col | 40540 |
| 2017 | | | 2,608. | | | | 9,606 | | | | 53731 |
| 2016 | | | | | | | 9,045 | | | | 63296 |
| 2015 | | | 6,139. 3,188. | | | | | | | | 30785 |
| 2014 | | | | | | | 0,855 | | | | 58809 |
| 2013 | | 1,18 | 37,528. | | 20 | , 19 | 2,994 | • | | | 28809 |
| | | | | | | | | | | 2 | 47161 |
| 2 Total of line 1, column (d) | | | | | | | | 2 | | • 2 | 47161 |
| 3 Average distribution ratio for | ·- | | on line 2 by 5 (| D, or by the numbe | er of y | years | | | | • | 40422 |
| the foundation has been in | existence if less | than 5 years | | | | | | 3 | | | 49432 |
| 4 Enter the net value of noncl | haritable-use as | sets for 2018 from Part X, | line 5 | | | | | 4 | 3 | 3,762 | ,089. |
| | | | | | | | | | | | |
| 5 Multiply line 4 by line 3 | | | | | | | | 5 | | 1,668 | ,928. |
| | | | | | | | | | | | |
| 6 Enter 1% of net investment | income (1% of | Part I, line 27b) | | | | | | 6 | | 10 | ,351. |
| 7 Add lines 5 and 6 | | | | | | | | 7 | - | 1,679 | ,279. |
| 8 Enter qualifying distribution | ns from Part XII, | line 4 | | | | | | 8 | | 2,553 | ,582 <u>.</u> |
| If line 8 is equal to or greate See the Part VI instructions | er than line 7, ch | | e 1b, and comp | lete that part using | g a 1° | % tax | rate | | | | |

6 Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either

8a Enter the states to which the foundation reports or with which it is registered. See instructions

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?

7 Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col (c), and Part XV

h 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? If "No," attach explanation 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 tax year beginning in 2018? See the instructions for Part XIV If "Yes," complete Part XIV

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

10 Form **990-PF** (2018)

Х

X

7

8b

| | it VIFA Otalements negaring Activities (continues) | | | |
|----|--|---------|-------------|-------------|
| | | | Yes | No |
| 11 | At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of | | | |
| | section 512(b)(13)? If "Yes," attach schedule. See instructions | 11 | | X |
| 12 | Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had advisory privileges? | | | |
| | If "Yes," attach statement. See instructions | 12 | | X |
| 13 | Did the foundation comply with the public inspection requirements for its annual returns and exemption application? | 13 | X | L |
| | Website address ► N/A | | | |
| 14 | The books are in care of ► TED D. AND MARY KELLNER Telephone no ► 414-2 | | <u> 223</u> | |
| | Located at ► 100 E. WISCONSIN AVENUE, SUITE 2280, MILWAUKEE, W ZIP+4 ►5 | 3202 | | |
| 15 | Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - check here | | , ▶ | |
| | and enter the amount of tax-exempt interest received or accrued during the year | N | /A | |
| 16 | At any time during calendar year 2018, did the foundation have an interest in or a signature or other authority over a bank, | | Yes | |
| | securities, or other financial account in a foreign country? | 16 | | X |
| | See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes," enter the name of the | | | |
| | foreign country | | | |
| Pa | art VII-B Statements Regarding Activities for Which Form 4720 May Be Required | | . | |
| | File Form 4720 if any item is checked in the "Yes" column, unless an exception applies. | | Yes | NO |
| 12 | During the year, did the foundation (either directly or indirectly) (1) Engage in the sale or exchange, or leasing of property with a disqualified person? Yes X No | | | |
| | | | | |
| | (2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disgualified person? Yes X No | | | |
| | a disqualified person? Yes X No (3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? Yes X No | | | |
| | | | | |
| | (1) Lay componication to, or pay or reimbares the expenses of, a disquarine person | | | |
| | (5) Transfer any income or assets to a disqualified person (or make any of either available for the benefit or use of a disqualified person)? Yes X No | | | |
| | | 1 | | |
| | (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) | | | |
| H | If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations | | | |
| U | section 53 4941(d)-3 or in a current notice regarding disaster assistance? See instructions | 1b | | X |
| | Organizations relying on a current notice regarding disaster assistance, check here | | | |
| | 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? | 10 | i | X |
| 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)) | | | |
| а | 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? | | | |
| | If "Yes," list the years | | | |
| b | Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2) (relating to incorrect | | | |
| | valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer "No" and attach | | | |
| | statement - see instructions) N/A | 2b | | |
| C | If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here | | | |
| | • | 1 | | |
| 3a | Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time | 1 | | |
| | during the year? X Yes 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) | 3b | | <u>X</u> |
| | Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes? | 4a | | X |
| 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? | 46 | | X |
| | | nrm 990 | レント | ついもなり |

| orm 990-PF (2018) KELBEN FOUNDATION, INC. | | | <u>39-14946</u> | 25 | Page 6 |
|---|---|-----------------------------------|--|--------------------|-------------|
| Part VII-B Statements Regarding Activities for Which F | Form 4720 May Be F | Required (continu | ued) | ,, ,, | |
| 5a During the year, did the foundation pay or incur any amount to | | _ | | Yes | No |
| (1) Carry on propaganda, or otherwise attempt to influence legislation (section | | | s X No | | |
| (2) Influence the outcome of any specific public election (see section 4955), o | r to carry on, directly or indire | ectly, | | | |
| any voter registration drive? | | | s X No | | |
| (3) Provide a grant to an individual for travel, study, or other similar purposes | | Ye | s X No | | |
| (4) Provide a grant to an organization other than a charitable, etc., organization | n described in section | | [V]., | | |
| 4945(d)(4)(A)? See instructions | | | s X No | | |
| (5) Provide for any purpose other than religious, charitable, scientific, literary, | or educational purposes, or t | or | s X No | | |
| the prevention of cruelty to children or animals? | 4. Ab | | S A NO | | |
| b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify und | | n Regulations | N/A | 5b | |
| section 53 4945 or in a current notice regarding disaster assistance? See instru | | | | עכ | |
| Organizations relying on a current notice regarding disaster assistance, check to If the answer is "Yes" to question 5a(4), does the foundation claim exemption from the contraction of | | nad | | | |
| | | /A 🔲 Ye | s No | | |
| expenditure responsibility for the grant? If "Yes," attach the statement required by Regulations section 53 4945-5(d) | Σ, | / * | | | |
| 6a Did the foundation, during the year, receive any funds, directly or indirectly, to | nav premilime on | | | | |
| a personal benefit contract? | pay premiums on | ΓŢΥρ | s X No | | |
| b Did the foundation, during the year, pay premiums, directly or indirectly, on a p | ersonal benefit contract? | ٠.٠ | | 6b | X |
| If "Yes" to 6b, file Form 8870 | | | | - | |
| 7a At any time during the tax year, was the foundation a party to a prohibited tax s | helter transaction? | Ye | s X No | | |
| b If "Yes," did the foundation receive any proceeds or have any net income attribu | | | N/A | 7b | |
| 8 Is the foundation subject to the section 4960 tax on payment(s) of more than \$ | | r | | | |
| excess parachute payment(s) during the year? | | Ye | s X No | | <u> </u> |
| Part VIII Information About Officers, Directors, Trusto | ees, Foundation Ma | nagers, Highly | 1 | | |
| Paid Employees, and Contractors | | | | | |
| 1 List all officers, directors, trustees, and foundation managers and t | | (-) Companytion | (d) Cootthubers to | () [| |
| (a) Name and address | (b) Title, and average hours per week devoted | (c) Compensation (If not paid, | (d) Contributions to employee benefit plans and deferred | (e) Expand | t, other |
| (a) name and address | to position | `enter`-0-) | compensation | allowa | nces |
| | | | | | |
| ODD OT TOVENT 10 | | 40,000. | 0. | | 0. |
| SEE STATEMENT 12 | | 40,000. | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | • |
| | | | | | |
| | | | | | |
| | | | | | |
| 2 Compensation of five highest-paid employees (other than those inc | luded on line 1). If none, | enter "NONE." | | | |
| 4.1 No. 1 and 1 days of a sharp large and many than \$50,000 | (b) Title, and average | (-) Composition | (d) Contributions to employee benefit plans and deferred | (e) Exp account | pense |
| (a) Name and address of each employee paid more than \$50,000 | hours per week devoted to position | (c) Compensation | and deferred compensation | allowa | inces |
| NONE | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | <u></u> | L | | <u> </u> | |
| Total number of other employees paid over \$50,000 | | - | | 990-PF | |
| | | | FUIII | 9 90- FF | (2010) |

823551 12-11-18

| Form 990-PF (2018) KELBEN FOUNDATION, INC. | 39-14 | 94625 Page 7 |
|--|---|------------------|
| Part VIII Information About Officers, Directors, Trustees, Formation About Officers, Directors, Di | oundation Managers, Highly | |
| 3 Five highest-paid independent contractors for professional services. If non | e, enter "NONE." | |
| (a) Name and address of each person paid more than \$50,000 | (b) Type of service | (c) Compensation |
| JODY L RECKARD | ACCOUNTING, FINANCIA | AL |
| 1932 MAPLE ROAD, GRAFTON, WI 53024 | ADMINISTRATIVE MGM | г 46,406. |
| MICHELLE M RISHEL | ADMINISTRATIVE | • |
| 516 HIGHLAND DRIVE, GRAFTON, WI 53024 | ASSISTANT | 22,890. |
| | | |
| Total number of others receiving over \$50,000 for professional services Part IX-A Summary of Direct Charitable Activities | | > 0 |
| List the foundation's four largest direct charitable activities during the tax year. Include relevanumber of organizations and other beneficiaries served, conferences convened, research page. | ant statistical information such as the | Expenses |
| 1 N/A | | |
| 3 | | |
| 4 | | |
| Part IX-B Summary of Program-Related Investments Describe the two largest program-related investments made by the foundation during the tax | x year on lines 1 and 2 | Amount |
| 1 N/A | | |
| 2 | | |
| All other program-related investments. See instructions 3 | | |
| | | |

Total. Add lines 1 through 3

| P | art X Minimum Investment Return (All domestic foundations must complete this part. Foreign foundations | ndation | s, see instructions.) |
|----|---|----------|-------------------------|
| 1 | Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes | | |
| | Average monthly fair market value of securities | 1a | 19,389,344. |
| | Average of monthly cash balances | 1b | 3,568,032. |
| | Fair market value of all other assets | 1c | 11,318,856. |
| d | Total (add lines 1a, b, and c) | 1d | 34,276,232. |
| | 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 | |
| 3 | Subtract line 2 from line 1d | 3 | 34,276,232. |
| 4 | Cash deemed held for charitable activities Enter 1 1/2% of line 3 (for greater amount, see instructions) | 4 | 514,143. 33,762,089. |
| 5 | Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4. | 5 | 33,762,089. |
| 6 | Minimum investment return. Enter 5% of line 5 | 6 | 1,688,104. |
| P | art XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations are foreign organizations, check here ▶ ☐ and do not complete this part) | d certai | n |
| 1 | Minimum investment return from Part X, line 6 | 1 | 1,688,104. |
| 2a | Tax on investment income for 2018 from Part VI, line 5 | | |
| b | Income tax for 2018 (This does not include the tax from Part VI) | | |
| C | Add lines 2a and 2b | 2c | 10,351. |
| 3 | Distributable amount before adjustments Subtract line 2c from line 1 | 3 | 1,677,753. |
| 4 | Recoveries of amounts treated as qualifying distributions | 4 | 0. |
| 5 | Add lines 3 and 4 | 5 | 1,677,753. |
| 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 | 1,677,753. |
| P | art XII Qualifying Distributions (see instructions) | | |
| 1 | Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes | | |
| а | Expenses, contributions, gifts, etc total from Part I, column (d), line 26 | 1a | 2,553,582. |
| 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 | | |
| а | 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 | 2,553,582. |
| 5 | Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment | | |
| | income Enter 1% of Part I, line 27b | 5 | 10,351. 2,543,231. |
| 6 | Adjusted qualifying distributions. Subtract line 5 from line 4 | 6 | 2,543,231. |
| | Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation of | ualifies | 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, | 00.600 | | | |
| line 7 | | | | 1,677,753. |
| 2 Undistributed income, if any, as of the end of 2018 | | | 0 | |
| a Enter amount for 2017 only | . , | <u></u> | 0. | |
| b Total for prior years | | 0. | | |
| 3 Excess distributions carryover, if any, to 2018 | | | | |
| a From 2013 233,534. | | | | |
| b From 2014 | | | | |
| c From 2015 417,042. | | | | |
| d From 2016 113, 386. | | | | |
| e From 2017 | | | | |
| f Total of lines 3a through e | 763,962. | | | |
| 4 Qualifying distributions for 2018 from | | | | |
| Part XII, line 4 ► \$ 2,553,582. | | | _ | |
| 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. | H | | 1,677,753. |
| d Applied to 2018 distributable amount | 875,829. | | | 1,077,755. |
| e Remaining amount distributed out of corpus | 0,029. | , , | ······································ | 0. |
| 5 Excess distributions carryover applied to 2018 (If an amount appears in column (d), the same amount must be shown in column (a)) | 0. | | | |
| 6 Enter the net total of each column as indicated below: | | | | |
| a Corpus Add lines 3f, 4c, and 4e Subtract line 5 | 1,639,791. | | | |
| 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 | | 0. | | |
| assessed | | | | |
| d Subtract line 6c from line 6b Taxable | | о. | | |
| amount - see instructions | | 0. | | |
| e Undistributed income for 2017 Subtract line 4a from line 2a Taxable amount - see instr | | | 0. | |
| f Undistributed income for 2018 Subtract | | | | |
| lines 4d and 5 from line 1. This amount must | | | | |
| be distributed in 2019 | | | | 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 | 233,534. | | | |
| 9 Excess distributions carryover to 2019 | | | | |
| Subtract lines 7 and 8 from line 6a | 1,406,257. | | | <u> </u> |
| 10 Analysis of line 9 | | | | |
| a Excess from 2014 | | | | |
| b Excess from 2015 417,042. | | | | |
| c Excess from 2016 113,386. | | | | |
| d Excess from 2017 e Excess from 2018 875,829. | | | | |
| e Excess from 2018 875,829. | | | | Form QQ0_PF (2018) |

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| | FOUNDATION | | | | 94625 Page 10 |
|---|---------------------------|-------------------------------|-----------------------------|-----------------------------|---------------------------|
| Part XIV Private Operating F | oundations (see I | nstructions and Part VI | I-A, question 9) | N/A | |
| 1 a If the foundation has received a ruling of | | | | | |
| foundation, and the ruling is effective for | | | ▶ | | |
| b Check box to indicate whether the found | | ing foundation described | | 4942(j)(3) or49 | 942(j)(5) |
| 2 a Enter the lesser of the adjusted net | Tax year | (5) 0017 | Prior 3 years | 1 (4) 0045 | (a) Take (|
| income from Part I or the minimum | (a) 2018 | (b) 2017 | (c) 2016 | (d) 2015 | (e) Total |
| investment return from Part X for | | | | | |
| each year listed | | - | | | |
| b 85% of line 2a | | | | | |
| c Qualifying distributions from Part XII, | | | | | |
| line 4 for each year listed | | | | | |
| d Amounts included in line 2c not | | | | | |
| used directly for active conduct of | | | | | |
| exempt activities | | | | | |
| e Qualifying distributions made directly | | | | | |
| for active conduct of exempt activities | | | | | |
| Subtract line 2d from line 2c | | | <u> </u> | | |
| 3 Complete 3a, b, or c for the alternative test relied upon | | | | | |
| a "Assets" alternative test - enter | | | | 1 | |
| (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 | | | <u></u> _ | | |
| Part XV Supplementary Info | | | if the foundation | had \$5,000 or mo | ore in assets |
| at any time during the | ne year-see inst | ructions.) | | | <u></u> |
| 1 Information Regarding Foundation | - | | | | |
| a List any managers of the foundation who | | | tributions received by the | foundation before the clos | se of any tax |
| year (but only if they have contributed m | ore than \$5,000) (See | section 507(a)(2)) | | | |
| NONE | | | | | |
| b List any managers of the foundation who other entity) of which the foundation has | | | (or an equally large porti | on of the ownership of a pa | artnership or |
| NONE | a 10% of greater intere | :51 | | | |
| | | | | ··· | |
| 2 Information Regarding Contribution | | | | | |
| Check here L if the foundation of the foundation makes gifts, grants, etc., if | • | • | • | | ests for funds if |
| a The name, address, and telephone numb | | | | | |
| a The hame, address, and telephone humb | er or email address or t | tie heizou to muoni abbiit | Cations should be addres | 36U | |
| SEE STATEMENT 13 | | | | | |
| b The form in which applications should be | submitted and information | ation and materials they sl | hould include | | |
| c Any submission deadlines | | | | | |
| d Any restrictions or limitations on awards | , such as by geographic | cal areas, charitable fields, | , kinds of institutions, or | other factors | <u></u> |
| | | | ·-· | | |
| 823601 12-11-18 | | | | | Form 990-PF (2018) |

| 2 Courts and Contributions Boid During Abo | | Daymant | · | |
|--|--|--------------------------------------|----------------------------------|-------------|
| 3 Grants and Contributions Paid During the Recipient | If recipient is an individual | Payment | | |
| Name and address (home or business) | If recipient is an individual, show any relationship to any foundation manager or substantial contributor | Foundation status of recipient | Purpose of grant or contribution | Amount |
| a Paid during the year | | | | |
| , | | | | |
| | | | | |
| | | | | |
| SEE ATTACHED FOR CHARITABLE | | | | |
| CONTRIBUTIONS | | | | 2,011,979 |
| | | | | <u> </u> |
| | | | | |
| | | | | |
| GER AREAGUED DOD GOUGLADGUADG | | _ | | |
| SEE ATTACHED FOR SCHOLARSHIPS | | I | | 369,070 |
| | | | | 303,070 |
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| | | i | | |
| | | | | |
| Total | <u></u> | <u> </u> | ▶ 3a | 2,381,049 |
| b Approved for future payment | | | | |
| | | | | |
| | | | | |
| | | | | |
| SEE ATTACHED FOR FUTURE PAYMENTS | | | | |
| , , , , , , , , , , , , , , , , , , , | | | } | 8,165,000 |
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| | | | | |
| | | | | |
| | | | | |
| Total | | | ▶ 3b | 8,165,000 |

| nter gross amounts unless otherwise indicated | Unrelated b | Unrelated business income | | ed by section 512, 513, or 514 | (e) | |
|---|--|---|------------------------|--------------------------------|-----------------------------------|--|
| | (a) Business | (b) Amount | Exclu- sion code | (d) Amount | Related or exempt function income | |
| Program service revenue | code | | - Lucie | | | |
| a | i I | | | | | |
| b | | ······································ | 1 | | | |
| d | l I | | 1 - 1 | | | |
| | 1 | | 1 | | | |
| e | | | 1-1 | | | |
| g Fees and contracts from government agencies | | | 1 | | | |
| Membership dues and assessments | | | | | | |
| interest on savings and temporary cash | 1 | | | - | | |
| investments | | | | | | |
| Dividends and interest from securities | | | 14 | 775,880. | | |
| Net rental income or (loss) from real estate | | 1-1-10-1011 11 1 1 1 1 1 1 1 1 1 1 1 1 1 | | | | |
| a Debt-financed property | | | | | | |
| b Not debt-financed property | | | | | | |
| Net rental income or (loss) from personal | | | | | | |
| property | | | | | | |
| Other investment income | 900099 | · | 14 | -231,471. | | |
| Gain or (loss) from sales of assets other | | | | | | |
| than inventory | | | 18 | 309,656. | | |
| Net income or (loss) from special events | | | | | | |
| Gross profit or (loss) from sales of inventory | | | <u> </u> | | | |
| Other revenue | - | | | | | |
| a | | | | | | |
| b | | | | | _ | |
| c | | | <u> </u> | | | |
| d | | | | | | |
| | | | 1 1 | | | |
| e | | | - | | | |
| e Subtotal Add columns (b), (d), and (e) | | 0. | | 854,065. | 054 06 | |
| e Subtotal Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) | | 0. | | 854,065. | 854,06 | |
| e Subtotal Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) ee worksheet in line 13 instructions to verify calculation | | | | | 854,06 | |
| e Subtotal Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) ee worksheet in line 13 instructions to verify calculation | | | | | 854,06 | |
| Subtotal Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) ee worksheet in line 13 instructions to verify calculation Part XVI-B Relationship of Activiti ine No. Explain below how each activity for which | es to the Accom | plishment of Explored to place the place of | kempt | Purposes | | |
| Subtotal Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) ee worksheet in line 13 instructions to verify calculation Part XVI-B Relationship of Activiti | es to the Accom | plishment of Explored to place the place of | kempt | Purposes | | |
| Subtotal Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) se worksheet in line 13 instructions to verify calculation Part XVI-B Relationship of Activiti ine No. Explain below how each activity for which | es to the Accom | plishment of Explored to place the place of | kempt | Purposes | | |
| Subtotal Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) se worksheet in line 13 instructions to verify calculation Part XVI-B Relationship of Activiti ine No. Explain below how each activity for which | es to the Accom | plishment of Explored to place the place of | kempt | Purposes | | |
| Subtotal Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) se worksheet in line 13 instructions to verify calculation Part XVI-B Relationship of Activiti ine No. Explain below how each activity for which | es to the Accom | plishment of Explored to place the place of | kempt | Purposes | | |
| Subtotal Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) ee worksheet in line 13 instructions to verify calculation Part XVI-B Relationship of Activiti ine No. Explain below how each activity for which | es to the Accom | plishment of Explored to place the place of | kempt | Purposes | | |
| Subtotal Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) ee worksheet in line 13 instructions to verify calculation Part XVI-B Relationship of Activiti ine No. Explain below how each activity for which | es to the Accom | plishment of Explored to place the place of | kempt | Purposes | | |
| Subtotal Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) ee worksheet in line 13 instructions to verify calculation Part XVI-B Relationship of Activiti ine No. Explain below how each activity for which | es to the Accom | plishment of Explored to place the place of | kempt | Purposes | | |
| Subtotal Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) ee worksheet in line 13 instructions to verify calculation Part XVI-B Relationship of Activiti ine No. Explain below how each activity for which | es to the Accom | plishment of Explored to place the place of | kempt | Purposes | | |
| Subtotal Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) se worksheet in line 13 instructions to verify calculation Part XVI-B Relationship of Activiti ine No. Explain below how each activity for which | es to the Accom | plishment of Explored to place the place of | kempt | Purposes | | |
| Subtotal Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) se worksheet in line 13 instructions to verify calculation Part XVI-B Relationship of Activiti ine No. Explain below how each activity for which | es to the Accom | plishment of Explored to place the place of | kempt | Purposes | | |
| Subtotal Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) ee worksheet in line 13 instructions to verify calculation Part XVI-B Relationship of Activiti ine No. Explain below how each activity for which | es to the Accom | plishment of Explored to place the place of | kempt | Purposes | | |
| Subtotal Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) ee worksheet in line 13 instructions to verify calculation Part XVI-B Relationship of Activiti ine No. Explain below how each activity for which | es to the Accom | plishment of Explored to place the place of | kempt | Purposes | | |
| Subtotal Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) ee worksheet in line 13 instructions to verify calculation Part XVI-B Relationship of Activiti ine No. Explain below how each activity for which | es to the Accom | plishment of Explored to place the place of | kempt | Purposes | | |
| Subtotal Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) ee worksheet in line 13 instructions to verify calculation Part XVI-B Relationship of Activiti ine No. Explain below how each activity for which | es to the Accom | plishment of Explored to place the place of | kempt | Purposes | | |
| Subtotal Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) ee worksheet in line 13 instructions to verify calculation Part XVI-B Relationship of Activiti ine No. Explain below how each activity for which | es to the Accom | plishment of Explored to place the place of | kempt | Purposes | | |
| Subtotal Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) ee worksheet in line 13 instructions to verify calculation Part XVI-B Relationship of Activiti ine No. Explain below how each activity for which | es to the Accom | plishment of Explored to place the place of | kempt | Purposes | | |
| Subtotal Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) ee worksheet in line 13 instructions to verify calculation Part XVI-B Relationship of Activiti ine No. Explain below how each activity for which | es to the Accom | plishment of Explored to place the place of | kempt | Purposes | | |
| Subtotal Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) Total. Add line 13 instructions to verify calculation Part XVI-B Relationship of Activiti Line No. Explain below how each activity for which | es to the Accom | plishment of Explored to place the place of | kempt | Purposes | | |

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|-------------|--|--------------------------------|--|--|------------------------------------|--|---------------------------------------|---------------------|--------------|-------------|
| Part | XVII | Information Re Exempt Organ | | nsfers to a | and Transactions a | and Relations | nips With Nonchai | itable | • | |
| 1 . Die | d the or | | | of the following | ng with any other organizati | on described in sect | ion 501(c) | 1 | Yes | No |
| | | | | | g to political organizations? | | | 1 | 100 | |
| | | from the reporting found | | | • • | | | | | |
| |) Cash | · | | 20.0 0x0pt 0. | gamzation of | | | 1a(1) | 1 | х |
| • | | assets | | | | | | 1a(2) | | X |
| • | | sactions | | | | | • | 1915 | <u> </u> | |
| | | of assets to a noncharita | ahla ayamnt araaniza | stion | | | | 16(1) | | х |
| | | nases of assets from a no | | | | | | | ├ | X |
| • • | | il of facilities, equipment, | • | organization | | | | 1b(2) 1b(3) | ├ | X |
| • | | bursement arrangements | | | | | | 1b(4) | | X |
| | | s or Ioan guarantees | , | | | | | 1b(5) | | X |
| | | rmance of services or me | emberehin or fundra | icina calicitatio | nne | | | 1b(6) | | X |
| | | f facilities, equipment, ma | | = | | | | 10(0) | | X |
| | | | | | edule: Column (b) should al | wave chow the fair o | narket value of the goods : | | L | |
| | | • | | = | ed less than fair market vali | - | • | | 5613, | |
| | | i) the value of the goods, | | | og 1035 (nam tan market van | be in any transaction | or sharing arrangement, s | | | |
| (a) Line r | | (b) Amount involved | | | e exempt organization | (d) Description | of transfers, transactions, and | sharing a | | ents |
| | | 10, | 1 | N/A | | (-,, | | | | |
| | \dashv | | | | | | | | | |
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| | | | | | | | | _ | | |
| 2a Is i | the four | ndation directly or indirec | tly affiliated with, or | related to, one | or more tax-exempt organ | izations described | | | | |
| | | 501(c) (other than sectio | | ection 527? | | | L | Yes | LX | No |
| <u>b lf</u> | Yes," co | implete the following sch | | | 1 (1) = (| · | (a) David (a) | | _ | |
| | | (a) Name of org | janization | | (b) Type of organization | | (c) Description of relations | пр | | |
| | | N/A | | | | | | | _ | |
| | | | | | | | | | | |
| | | · | | | <u> </u> | | | | | |
| | | | | | | | | | | |
| | Linder | populties of person, I declare | that I have examined th | ue rotum uncludur | g accompanying schedules and | etatements and to the | hest of my knowledge | | | |
| Sign | | | | | n taxpayer) is based on all inform | | Mar any translades Mar | the IRS on with the | discuss t | his er |
| Here | | | | _ | 1 10 114.10 | VICO P | sho | wn below | ? See ins | str |
| | Sign | ature of officer or trustee | | | 11-14-19 | Title | _2711/10/21 | Yes | | J No |
| | Sign | | | Propagar's a | Date | Date | Check If PTIN | | | |
| | | Print/Type preparer's na | nng | Preparer's a | lyllatule / | Date | self- employed | | | |
| Paid | | CDECODY 7 | CETT | 1// | 401) | 11/14/19 | , , | 1177 | 610 | |
| Prepa | aror i | GREGORY J. Firm's name ► DAV | | THAT! | s.c. | 10111111 | Firm's EIN ► 39-1 | L477 | | |
| Use (| | rim's name PDAV | TO & VOET | TIMO | D.C. | | rimsein > 39-1. | L J Z 4 | 00 | |
| - J- J- C | y | Firm's address > 1.1 | 1 E KTIE | OURN A | VENUE SUITTE | 1400 | | | | |
| | Firm's address > 111 E. KILBOURN AVENUE, SUITE | | | | | | Bhoss so 414-2 | 76_0 | 200 | |

| x exit F# Capital dallis and Lus | 2262 IOL LAY OIL HIS COMMENT HIS OILS | | | | |
|--|--|--|--|--|--------------------------------|
| | describe the kind(s) of property so ick warehouse, or common stock, 2 | | (b) How acquired P - Purchase D - Donation | (c) Date acquired (mo , day, yr) | (d) Date sold (mo, day, yr) |
| 1a. FROM SCHEDULES | | | P | | |
| b FROM SCHEDULES | | | P | | |
| c PUBLICLY TRADE | | P | | | |
| d PUBLICLY TRADE | | P | | | |
| e PUBLICLY TRADE | | P | | | |
| | | P | | | |
| f PUBLICLY TRADE | | 10 | | | |
| g SCHEDULE K-1, | FINAL | | P | | |
| h CAPITAL GAINS I | DIVIDENDS | | | | |
| 1 | | | | | |
| | | | | | |
| <u>k</u> | | | | - | |
| 1 | | | <u> </u> | | |
| <u>m</u> | | | | | |
| <u>n</u> | | | | | |
| 0 | | | | | |
| (e) Gross sales price | (f) Depreciation allowed (or allowable) | (g) Cost or other basis plus expense of sale | |) Gain or (loss) plus (f) minus (g) | _ |
| a | | | | | 4,753. |
| ь | | | | | -75,075. |
| c 13,695,554. | | 13,996,737. 338,502. | | _ | 301.183. |
| d 332,787. | , | 338,502. | | | -5,715. 290,343. |
| e 2,873,936. | | 2,583,593. | | | 290,343. |
| f 105,083. | | 105,007. | | | 76. |
| g | | | | | 115. |
| h 396,342. | | | | | 396,342. |
| 1 | | | | | |
| | | | | | |
| k_ | | | | | |
| 1 | · · · · · · · · · · · · · · · · · · · | | | | · |
| m | | | | | |
| n | | | | | |
| 0 | | | · | | - |
| | g gain in column (h) and owned by | the foundation on 12/31/69 | (1) Los | sses (from col (h)) | |
| (i) F.M V as of 12/31/69 | (i) Adjusted basis as of 12/31/69 | (k) Excess of col (i) over col (j), if any | Gains (excess | of col (h) gain over not less than "-0-") | col (k), |
| | | (1) | | | 4,753. |
| <u>a</u> | | | | | -75,075. |
| <u>b</u> | | | | | 301,183. |
| <u>c</u> | | | | _ | -5,715. |
| <u>d</u> | | | | | $\frac{-3,713.}{290,343.}$ |
| <u>e</u> | | | | • | 76. |
| <u>f</u> | _ | | | | 115. |
| 9 | | | . | | 396,342. |
| <u>h</u> | | | | · · · · · · · · · · · · · · · · · · · | 330,342. |
| | | | | | |
| ! | | | | | · |
| <u>k</u> | | | | | |
| <u> </u> | | | | | |
| m | | | | | |
| n | | | ·- · | | |
| 0 | | | | | |
| 2 Capital gain net income or (net cap | oital loss) { If gain, also ente | r in Part I, line 7 0-" in Part I, line 7 | 2 | : | 309,656. |
| 3 Net short-term capital gain or (loss | s) as defined in sections 1222(5) ar | \ 1 | | | |
| If gain, also enter in Part I, line 8, o If (loss), enter "-0-" in Part I, line 8 | | | 3 | N/A | |

Schedule B

(Form 990, 990-EZ, or 990-PF)

Department of the Treasury Internal Revenue Service

Schedule of Contributors

► Attach to Form 990, Form 990-EZ, or Form 990-PF. ► Go to www.irs.gov/Form990 for the latest information. OMB No 1545-0047

2018

Schedule B (Form 990, 990-EZ, or 990-PF) (2018)

Employer identification number Name of the organization KELBEN FOUNDATION, INC. 39-1494625 Organization type (check one). Filers of: Section: Form 990 or 990-EZ 501(c)() (enter number) organization 4947(a)(1) nonexempt charitable trust not treated as a private foundation 527 political organization Form 990-PF X 501(c)(3) exempt private foundation 4947(a)(1) nonexempt charitable trust treated as a private foundation 501(c)(3) taxable private foundation Check if your organization is covered by the General Rule or a Special Rule. Note: Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions. **General Rule** X For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions. **Special Rules** For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of (1) \$5,000; or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h; or (ii) Form 990-EZ, line 1. Complete Parts I and II 🔟 For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I (entering "N/A" in column (b) instead of the contributor name and address), II, and III. For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions exclusively for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., purpose Don't complete any of the parts unless the General Rule applies to this organization because it received nonexclusively religious, charitable, etc., contributions totaling \$5,000 or more during the year Caution: An organization that isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990, 990-EZ, or 990-PF), but it must answer "No" on Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on its Form 990-PF, Part I, line 2, to certify that it doesn't meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

LHA For Paperwork Reduction Act Notice, see the instructions for Form 990, 990-EZ, or 990-PF.

Employer identification number

KELBEN FOUNDATION, INC.

39-1494625

| Part I | Contributors (see instructions) Use duplicate copies of Part I if addition | al space is needed | |
|--------------|--|----------------------------|--|
| (a) No. | (b) Name, address, and ZIP + 4 | (c) Total contributions | (d) Type of contribution |
| 1 | TED AND MARY KELLNER 100 EAST WISCONSIN AVENUE, SUITE 2280 MILWAUKEE, WI 53202 | \$ 196,250. | Person X Payroll Noncash (Complete Part II for noncash contributions.) |
| (a) No. | (b) Name, address, and ZIP + 4 | (c) Total contributions | (d) Type of contribution |
| 2 | WILLIAM AND MARIAN NASGOVITZ 4470 NORTH LAKE DRIVE SHOREWOOD, WI 53211 | \$ 5,000. | Person X Payroll Noncash (Complete Part II for noncash contributions.) |
| (a) No. | (b) Name, address, and ZIP + 4 | (c) Total contributions | (d) Type of contribution |
| 3 | JANET LARSCHEID 129 EAST WHITE OAK WAY MEQUON, WI 53092 | \$312. | Person X Payroll Noncash (Complete Part II for noncash contributions.) |
| (a) No. | (b) Name, address, and ZIP + 4 | (c) Total contributions | (d) Type of contribution |
| 4 | SUSIE APPLE 921 WEST CEDAR RIDGE COURT, 98N MEQUON, WI 53092 | \$ 200. | Person X Payroll |
| (a) No. | (b) Name, address, and ZIP + 4 | (c) Total contributions | (d) Type of contribution |
| 5 | MARC AND LINDA CAYLE 11668 NORTH BOBOLINK LANE MEQUON, WI 53092 | \$100. | Person X Payroll |
| (a) No. | (b) Name, address, and ZIP + 4 | (c) Total contributions | (d) Type of contribution |
| 823452 11-08 | 1.10 | \$Schedule B (Form | Person Payroll Noncash (Complete Part II for noncash contributions.) |

Name of organization

Employer identification number

KELBEN FOUNDATION, INC.

39-1494625

| Part II | Noncash Property (see instructions). Use duplicate copies of F | Part II if additional space is needed. | |
|------------------------------|--|---|----------------------|
| (a) No. from Part I | (b) Description of noncash property given | (c) FMV (or estimate) (See instructions.) | (d) Date received |
| | | \$ | |
| (a) No. from Part I | (b) Description of noncash property given | (c) FMV (or estimate) (See instructions.) | (d) Date received |
| | | \$ | |
| (a) No. from Part I | (b) Description of noncash property given | (c) FMV (or estimate) (See instructions.) | (d) Date received |
| | | \$ | |
| (a) No. from Part I | (b) Description of noncash property given | (c) FMV (or estimate) (See instructions) | (d) Date received |
| | | \$ | |
| (a) No. from Part I | (b) Description of noncash property given | (c) FMV (or estimate) (See instructions) | (d) Date received |
| | | \$ | |
| (a) No. from Part I | (b) Description of noncash property given | (c) FMV (or estimate) (See Instructions.) | (d) Date received |
| | | | |

Name of organization **Employer identification number** KELBEN FOUNDATION, INC. 39-1494625 Exclusively religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8), or (10) that total more than \$1,000 for the year from any one contributor. Complete columns (a) through (e) and the following line entry. For organizations completing Part III, enter the total of exclusively religious, chantable, etc., contributions of \$1,000 or less for the year (Enter this info once) Use duplicate copies of Part III if additional space is needed. (a) No. from (b) Purpose of gift (c) Use of gift (d) Description of how gift is held Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from (b) Purpose of gift (c) Use of gift (d) Description of how gift is held Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from (b) Purpose of gift (c) Use of gift (d) Description of how gift is held (e) Transfer of gift Relationship of transferor to transferee Transferee's name, address, and ZIP + 4 (a) No. from (c) Use of gift (d) Description of how gift is held (b) Purpose of gift (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee

| FORM 990-PF | DIVIDENDS | AND INTER | REST | FROM SECU | RITIES S | TATEMENT | 1 |
|--|----------------------|------------------------------|------|-------------------------------------|-----------------------------------|------------------------------|-----|
| SOURCE | GROSS AMOUNT | CAPITAI GAINS DIVIDENI | | (A) REVENUE PER BOOKS | (B) NET INVEST- MENT INCOME | | |
| DIVIDENDS INTEREST | 891,934. 280,288. | 396,342. | | 495,592 280,288 | | | |
| TO PART I, LINE 4 | 1,172,222. | 396,342. | | 775,880 | 775,880. | | |
| FORM 990-PF | | OTHER I | NCON | 1E | S | TATEMENT | 2 |
| DESCRIPTION | | | REV | | (B) NET INVEST- MENT INCOME | (C) ADJUSTEI NET INCOM | |
| ORDINARY INCOME - SOME OTHER INCOME - SCHOTHER INCOME - SCHOTHER INCOME - SHIP | K-1S K-1S | | - | -236,427. 5,261. -319. 14. | 0. 0. -319. 14. | | |
| TOTAL TO FORM 990-1 | PF, PART I, | LINE 11 = | - | -231,471. | -305. | | |
| FORM 990-PF | *** | LEGAI | FE | ES | S | TATEMENT | 3 |
| DESCRIPTION | | (A) EXPENSES PER BOOKS | | (B) T INVEST- NT INCOME | (C) ADJUSTED NET INCOME | (D) CHARITAI PURPOSI | |
| LEGAL EXPENSES - DE | ~K | 17,250. | | 0. | | 17,25 | 50. |
| TO FM 990-PF, PG 1, | , LN 16A | 17,250. | | 0. | | 17,25 | 50. |

| FORM 990-PF | TAX | ES | | STATEMENT 4 | |
|---|-------------------------------------|---------------------------------|----------------------|----------------------|--|
| DESCRIPTION | (A) EXPENSES PER BOOKS | (B) NET INVEST MENT INCOM | | | |
| FEDERAL TAX STATE TAX FOREIGN TAX BAIRD | 185,000. 1,520. 16,103. | | 0. 0. 0. | 0. 0. 0. | |
| FOREIGN TAX K-1S FOREIGN TAX SCHWAB STATE TAX K-1S | 5,846. 1,112. 870. | | 0. 0. 0. | 0. 0. 0. | |
| TO FORM 990-PF, PG 1, LN 18 | 210,451. | | 0. | 0. | |
| FORM 990-PF | OTHER E | XPENSES | | STATEMENT 5 | |
| DESCRIPTION | (A) EXPENSES PER BOOKS | (B) NET INVEST MENT INCOM | | | |
| ADMINISTRATIVE SERVICES OTHER OFFICE EXPENSES 59(E)(2) EXPENDITURES - SCH | 69,296. 18,585. | | 0. | 69,296. 18,585. | |
| K-1 DONATIONS - SCH K-1 OTHER DEDUCTIONS 2% OTHER DEDUCTIONS - SCH K-1 | 13,196. 51. 38,142. 1,676. | 38,14 | 0. 0. 2. 0. | 0. 0. 0. | |
| TO FORM 990-PF, PG 1, LN 23 | 140,946. | 38,14 | 2. | 87,881. | |
| FORM 990-PF U.S. AND S | STATE/CITY G | OVERNMENT O | BLIGATIONS | STATEMENT 6 | |
| DESCRIPTION | U.S GOV'' | | BOOK VALUE | FAIR MARKET VALUE | |
| US GOVT OBLIGATIONS | x | | 2,467,404. | 2,520,927. | |
| TOTAL U.S. GOVERNMENT OBLIGAT | TIONS | | 2,467,404. | 2,520,927. | |
| TOTAL STATE AND MUNICIPAL GOV | VERNMENT OBL | IGATIONS | | • | |
| TOTAL TO FORM 990-PF, PART II | I, LINE 10A | | 2,467,404. | 2,520,927. | |

| DESCRIPTION CORPORATE STOCK TOTAL TO FORM 990-PF, PART II, LINE 1 FORM 990-PF MORTO DESCRIPTION | OB : | BOOK VALUE 18,990,022. 18,990,022. | FAIR MARKET VALUE 18,875,939. 18,875,939. STATEMENT 8 |
|--|------------------------------|--------------------------------------|--|
| TOTAL TO FORM 990-PF, PART II, LINE 1 FORM 990-PF MORT | = | | 18,875,939. |
| FORM 990-PF MORT | = | 18,990,022. | |
| | GAGE LOANS | | STATEMENT 8 |
| DESCRIPTION | | | |
| | | BOOK VALUE | FAIR MARKET VALUE |
| MORTGAGE LOANS | - - | 122,318. | 122,318. |
| TOTAL TO FORM 990-PF, PART II, LINE 1 | 2 | 122,318. | 122,318. |
| FORM 990-PF OTHER | INVESTMENTS | | STATEMENT 9 |
| DESCRIPTION | VALUATION METHOD | BOOK VALUE | FAIR MARKET VALUE |
| ALTERNATIVE INVESTMENTS REAL ESTATE INVESTMENTS | COST | 6,541,109. 816,540. | 6,435,742. 2,200,000. |
| TOTAL TO FORM 990-PF, PART II, LINE 1 | 3 | 7,357,649. | 8,635,742. |
| FORM 990-PF DEPRECIATION OF ASSETS 1 | NOT HELD FOR | INVESTMENT | STATEMENT 10 |
| | COST OR HER BASIS | ACCUMULATED DEPRECIATION | BOOK VALUE |
| OFFICE FURNITURE OFFICE FURNITURE REMODEL | 6,983. 26,827. 16,239. | 6,487. 5,748. 659. | 496. 21,079. 15,580. |
| TOTAL TO FM 990-PF, PART II, LN 14 | 50,049. | 12,894. | 37,155. |

| FORM 990-PF | OTHER ASSETS | | STATE | EMENT 11 | |
|---|--------------------------------|---------------------|---------------------------------|----------|--|
| DESCRIPTION | BEGINNING OF YR BOOK VALUE | | FAIR MARKET VALUE | | |
| DEPOSIT ON OFFICE EQUIPMENT | 1,500. | 1,50 | 0. | 1,500. | |
| TO FORM 990-PF, PART II, LINE 15 | 1,500. | 1,50 | 0. | 1,500. | |
| FORM 990-PF PART VIII - LIST TRUSTEES AND | OF OFFICERS, FOUNDATION MAN | | STATI | EMENT 12 | |
| NAME AND ADDRESS | TITLE AND AVRG HRS/WK | | EMPLOYEE BEN PLAN CONTRIB | | |
| MARY T. KELLNER 5112 WEST HIGHLAND ROAD MEQUON, WI 53092 | PRES, TREAS, 10.00 | DIRECTOR 0. | 0. | 0. | |
| TED D. KELLNER 5112 WEST HIGHLAND ROAD MEQUON, WI 53092 | V PRES, SECRE 8.00 | TARY, DIRECTO 0. | 0. | 0. | |
| LAURA KELLNER LUECK 8142 WEST POPLAR DRIVE MEQUON, WI 53097 | DIRECTOR 5.00 | 20,000. | 0. | 0. | |
| KRISTIN KELLNER SCHULTZ W289 N3280 LOST CREEK COURT DELAFIELD, WI 53072 | DIRECTOR 5.00 | 20,000. | 0. | 0. | |
| JACK T. KELLNER 1344 ALABAMA STREET, APT A SAN FRANCISCO, CA 94110 | DIRECTOR 5.00 | 0. | 0. | 0. | |
| KAREN KELLNER 10271 ANN MARIE DRIVE CEDARBURG, WI 53012 | DIRECTOR 1.00 | 0. | 0. | 0. | |
| W. DAVID KNOX 750 NORTH LINCOLN MEMORIAL DRIVE MILWAUKEE, WI 53202 | DIRECTOR 1.00 | 0. | 0. | 0. | |
| TOTALS INCLUDED ON 990-PF, PAGE 6, | , PART VIII | 40,000. | 0. | 0. | |

FORM 990-PF GRANT APPLICATION SUBMISSION INFORMATION STATEMENT 13 PART XV, LINES 2A THROUGH 2D

NAME AND ADDRESS OF PERSON TO WHOM APPLICATIONS SHOULD BE SUBMITTED

MARY KELLNER 5112 WEST HIGHLAND MEQUON, WI 53092

TELEPHONE NUMBER

414-226-4545

FORM AND CONTENT OF APPLICATIONS

SEE ATTACHED APPLICATION FORM FOR SCHOLARSHIP REQUIREMENTS. NO PARTICULAR FORM IS REQUIRED FOR GRANT APPLICATIONS THOUGH APPLICATIONS SHOULD BE IN WRITING TO RECEIVE CONSIDERATION.

ANY SUBMISSION DEADLINES

SEE ATTACHED FORM FOR SCHOLARSHIP DEADLINES.

RESTRICTIONS AND LIMITATIONS ON AWARDS

NONE.

2018 DEPRECIATION AND AMORTIZATION REPORT

| • | Ending Accumulated Depreciation | 6,487. | 5,748. | 629 | 12,894. | | tion, GO Zone |
|--------------------|--|------------------|--------------------|----------------|--------------------------|---|---|
| | Current Year Deduction | . 866 | 3,832. | 416. | 5,246. | - | * ITC, Salvage, Bonus, Commercial Revitalization Deduction, GO Zone |
| | Current Sec 179 Expense | | - | | | | nercial Revita |
| | Beginning Accumulated Depreciation | 5,489. | 1,916. | 243. | 7,648. | | Bonus, Comn |
| | Basis For Depreciation | 6,983. | 26,827. | 16,239. | 50,049. | | ITC, Salvage, |
| | Reduction In Basis | | | | | • | * |
| | Section 179 Expense | -111 | ********** | 100 | | | |
| 990-PF | Bus % Excl | | | | | | posed |
| | Unadjusted Cost Or Basis | 6,983. | 26,827. | 16,239. | 50,049. | | (D) - Asset disposed |
| | So | 16 | ##T7 | MP4 6 | | | |
| | 00=> | | | - 2 | | | |
| | Life | 7.00 | 7.00 | 39.00 | | | |
| | Method | SL | SI, | SL | | | |
| | Date Acquired | 06/18/12 SL | 05/04/17 SL | 06/13/17 | | | |
| FORM 990-PF PAGE 1 | Description | OFFICE FURNITURE | 2 OPFICE FURNITURE | REMODEL | * total 990-pp pg 1 drpr | | 14-01-18 |
| ORM 99 | Asset No | н | ~ | n | | | 828111 04-01-18 |
| ρī, l | 4 | | | | | | |

KELBEN FOUNDATION INC EIN 39-1494625 FORM 990-PF (2014), PAGE 2, PART II, LINE 13, COLUMNS B AND C TAX YEAR 2018

PART II COL B PART II COL C
END OF YEAR END OF YEAR
BOOK VALUE FAIR MARKET VALUE

| | END OF YEAR BOOK VALUE | FAIR MARKET VALUE |
|--|---------------------------|--------------------------|
| | DOOK VALUE | Traction and the control |
| CASH & CASH EQUIVALENTS | 262 564 | 262,564 |
| SAVINGS & TEMPORARY CASH INVESTMENT | 262 564 | 262,564 |
| | | |
| US TREASURY BILLS | 2,467,404 | 2 520 927 |
| INVESTMENTS-US AND STATE GOVT OBLIGATIONS | 2 467 404 | 2,520,927 |
| | 2 .5. 15. | -11 |
| | | |
| BMO ULTRA SHORT TAX FREE | 526 750 | 527 590 |
| FMI COMMON | 1 610 041 | 1 538 723 |
| FMI INTNL | 885 663 | 1 184,715 |
| FMI LARGE CAP | 1,472 688 | 1 562 131 |
| DOUBLINE LOW DURATION BD I GOG PARTNERS EMRG MKTS | 56 697 504 113 | 55,829 514 573 |
| HARBOR INTL SMALL CAP FD | 238,509 | 209 348 |
| ACCENTURE PLC | 11 707 | 11,281 |
| ALPHABET INC | 9,075 | 8,285 |
| APPLE INC | 448 044 | 394,350 |
| ARUTHUR JA GALLAGHER & CO | 62 728 | 169,510 |
| ARROW ELECTRONICS INC | 480,069 | 1,379,000 |
| ASSOCIATED BANC CORP | 1,267,667 | 1 088 450 |
| AXALTA COATING SYSTEM | 4,905 | 4 450 |
| BANK OF AMERICA CORP BANK MONTREAL QUEBEC | 18,554 3,137,471 | 14,819 1,044 881 |
| BERKSHIRE HATHAWAY | 14,570 | 14 497 |
| BROADRIDGE FINANCIAL SOLUTIONS INC | 256 378 | 1,155 000 |
| CERNER CORP | 10,153 | 8,915 |
| CHUBB LTD | 35,276 | 31 003 |
| DANAHER CORP | 20 377 | 20 693 |
| DOLLAR TREE INC | 340 500 | 361,280 |
| DUFRY AG BASEL | 202,934 | 148 640 |
| EAGLE MATERIALS INC | 26 952 | 21 849 |
| EMERSON ELECTRIC CO FIDELITY NATIONAL | 10 233 157,771 | 8,577 1,128 050 |
| GENPACT LIMITED | 9.235 | 7 557 |
| GRACE WR & CO | 12,530 | 11,847 |
| JP MORGAN CHASE & CO | 20,465 | 18 703 |
| LIBERTY LATIN AMERICA LTD | 974,281 | 655 650 |
| MGIC INVESTMENT CORP | 846 351 | 794,960 |
| MANPOWER GROUP INC | 391,968 | 375,840 |
| MOHAWK INDUSTRIES | 29,632 | 20 117 |
| NESTLE S A SPNSD ADR | 393 471 | 688 160 |
| NET 1 UEPS TECHNOLOGIES INC | 435,713 | 379 890 |
| NUTRIEN LTD OAKTREE CPA GFOUP LLC | 2 008,826 27,768 | 1 316,000 25 152 |
| ORACLE CORP | 873,025 | 1,002,330 |
| PNC FINL SERVICES | 27,732 | 22,714 |
| SMITHS GROUP PLC | 1 025 824 | 812,395 |
| WATSCO INC | 22,952 | 18,963 |
| WELLS FARGO & CO | 44,460 | 82,944 |
| WOODWARD INC | 35 964 | 36,278 |
| INVESTMENTS-CORPORATE STOCKS | 18,990 022 | 18,875,939 |
| | | |
| MCINTYRE | 100,000 | 100,000 |
| MCINTYRE HOLDINGS INC | 22,318 | 22 318 |
| INVESTMENTS-MORTGAGE LOANS | 122,318 | 122,318 |
| | | |
| | | |
| FRED 1 GLENN PLACE LLC | 286,151 | 300 000 |
| FRED 22 SLATE | 46,340 | 125 000 |
| FRED 50 TWENTY LLC | (54,681) | 150,000 |
| FRED BERGAMONT APTS LLC FRED DOMAIN LLC | 8,174 19,769 | 250,000 100 000 |
| FRED FORTE | 120,871 | 200,000 |
| FRED JADE | 153 439 | 200 000 |
| FRED SYNERGY | 181,642 | 275 000 |
| FRED THE JUNCTION | 57 695 | 300,000 |
| FRED THE VUE LLC | (36,431) | 150 000 |
| FRED WOODLANDS | 33,571 | 150 000 |
| REAL ESTATE INVESTMENTS | 816,540 | 2 200 000 |
| | | |
| ENGLISH CAPITAL PTNRS | 2,116 645 | 2 116,645 |
| GOOD KARMA BRANDS MILW | 212 735 | 212,735 |
| JC FLOWERS II LP | 150,928 | 150 928 |
| LAKEVIEW EQUITY PTNERS II | 415 856 | 415,856 |
| MDCP V-A LP | 17,460 | 17,460 |
| MDCP V-B LP | 80 | 80 |
| MCP OPPORTUNITY III | 346,345 | 346 345 |
| OAKTREE CAPITAL GROUP LLC | 28 831 | 28,831 |
| SHINE MEDICAL | 955 367 | 850 000 |
| TAHOE TALLAC PARTNERS UAS LAKEVIEW INVESTMENT CO | 46,826 124,174 | 46 826 124 174 |
| WESTERN HIGHLAND FUND II | 124,174 624,851 | 124 174 624 851 |
| WESTERN HIGHLAND FUND II | 627 916 | 627 916 |
| WESTERN HIGHLAND MTG FUND I | 873 095 | 873 095 |
| ALTERNATIVE INVESTMENTS | 6,541,109 | 6 435 742 |
| | | |
| | | |
| COST | 51 263 | 51 263 |
| A/D | (12 894) | (12 894) |
| EQUIPMENT LESS DEPRECIATION | 38 369 | 38 369 |
| | | |
| OTHER ASSETS DEPOSIT | 1,500 | 1,500 |
| OTHER ASSETS DEPOSIT | 1,500 | 1,300 |
| TOTAL ASSETS | 29 239,826 | 30 457 359 |
| | 445,545 | |
| | | |