

Assets	Part II Balance Sheets	Attached schedules and amounts in the description column should be for end-of-year amounts only (See instructions)			
		Beginning of year	End of year		
			(a) Book Value	(b) Book Value	(c) Fair Market Value
1	Cash—non-interest-bearing				
2	Savings and temporary cash investments		102,316	114,001	114,001
3	Accounts receivable ►				
	Less allowance for doubtful accounts ►				
4	Pledges receivable ►				
	Less allowance for doubtful accounts ►				
5	Grants receivable				
6	Receivables due from officers, directors, trustees, and other disqualified persons (attach schedule) (see instructions)				
7	Other notes and loans receivable (attach schedule) ►				
	Less allowance for doubtful accounts ►				
8	Inventories for sale or use				
9	Prepaid expenses and deferred charges				
10a	Investments—U S and state government obligations (attach schedule)				
b	Investments—corporate stock (attach schedule)		2,329,932	2,973,922	5,637,690
c	Investments—corporate bonds (attach schedule)				
11	Investments—land, buildings, and equipment basis ►				
	Less accumulated depreciation (attach schedule) ►				
12	Investments—mortgage loans				
13	Investments—other (attach schedule)		2,825,208	2,939,207	2,939,207
14	Land, buildings, and equipment basis ►				
	Less accumulated depreciation (attach schedule) ►				
15	Other assets (describe ►)				
16	Total assets (to be completed by all filers—see the instructions Also, see page 1, item I)		5,257,456	6,027,130	8,690,898
Liabilities	17	Accounts payable and accrued expenses			
	18	Grants payable			
19	Deferred revenue				
20	Loans from officers, directors, trustees, and other disqualified persons				
21	Mortgages and other notes payable (attach schedule)				
22	Other liabilities (describe ►)				
23	Total liabilities (add lines 17 through 22)		0	0	
Net Assets or Fund Balances	24	Foundations that follow FASB ASC 958, check here ► <input type="checkbox"/>			
	25	Net assets without donor restrictions			
	26	Net assets with donor restrictions			
	27	Foundations that do not follow FASB ASC 958, check here ► <input checked="" type="checkbox"/>			
	28	and complete lines 24, 25, 29, and 30.			
	29	Capital stock, trust principal, or current funds			
	30	Paid-in or capital surplus, or land, bldg , and equipment fund			
	31	Retained earnings, accumulated income, endowment, or other funds	5,257,456	6,027,130	
	32	Total net assets or fund balances (see instructions)	5,257,456	6,027,130	
	33	Total liabilities and net assets/fund balances (see instructions)	5,257,456	6,027,130	

Part III Analysis of Changes in Net Assets or Fund Balances

1	Total net assets or fund balances at beginning of year—Part II, column (a), line 29 (must agree with end-of-year figure reported on prior year's return)	1	5,257,456
2	Enter amount from Part I, line 27a	2	655,676
3	Other increases not included in line 2 (itemize) ► INCREASE IN INVESTMENT VALUE	3	113,998
4	Add lines 1, 2, and 3	4	6,027,130
5	Decreases not included in line 2 (itemize) ►	5	
6	Total net assets or fund balances at end of year (line 4 minus line 5)—Part II, column (b), line 29	6	6,027,130

Part IV Capital Gains and Losses for Tax on Investment Income

a) List and describe the kind(s) of property sold (for example, real estate, 2-story brick warehouse, or common stock, 200 shs MLC Co.)			(b) How acquired P—Purchase D—Donation	(c) Date acquired (mo, day, yr)	(d) Date sold (mo, day, yr)
1a See Attached Statement					
a					
b					
c					
d					
e					
(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale	(h) Gain or (loss) ((e) plus (f) minus (g))		
a					
b					
c					
d					
e					
Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69			(l) Gains (Col (h) gain minus col (k), but not less than -0-) or Losses (from col (h))		
(i) FMV as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col (i) over col (j), if any			
a					
b					
c					
d					
e					
2 Capital gain net income or (net capital loss)	{ If gain, also enter in Part I, line 7 If (loss), enter -0- in Part I, line 7 }		2	1,215,214	
3 Net short-term capital gain or (loss) as defined in sections 1222(5) and (6) If gain, also enter in Part I, line 8, column (c) See instructions If (loss), enter -0- in Part I, line 8	{ }		3	0	

Part V Qualification Under Section 4940(e) for Reduced Tax on Net Investment Income

(For optional use by domestic private foundations subject to the section 4940(a) tax on net investment income)

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

Was the foundation liable for the section 4942 tax on the distributable amount of any year in the base period?

 Yes No

If "Yes," the foundation doesn't qualify under section 4940(e). Do not complete this part

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

(a) Base period years Calendar year (or tax year beginning in)	(b) Adjusted qualifying distributions	(c) Net value of noncharitable-use assets	(d) Distribution ratio (col (b) divided by col (c))
2018	425,000	8,333,239	0 051001
2017	202,530	3,374,142	0 060024
2016	153,870	2,744,696	0 056061
2015	183,022	2,777,292	0 065899
2014	224,864	2,695,729	0 083415

- 2 Total of line 1, column (d)
- 3 Average distribution ratio for the 5-year base period—divide the total on line 2 by 5 0, or by the number of years the foundation has been in existence if less than 5 years
- 4 Enter the net value of noncharitable-use assets for 2019 from Part X, line 5
- 5 Multiply line 4 by line 3
- 6 Enter 1% of net investment income (1% of Part I, line 27b)
- 7 Add lines 5 and 6
- 8 Enter qualifying distributions from Part XII, line 4

If line 8 is equal to or greater than line 7, check the box in Part VI, line 1b, and complete that part using a 1% tax rate. See the Part VI instructions

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

1a	Exempt operating foundations described in section 4940(d)(2), check here ► <input type="checkbox"/> and enter "N/A" on line 1 Date of ruling or determination letter _____ (attach copy of letter if necessary—see instructions)	1	25,684		
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check here ► <input type="checkbox"/> and enter 1% of Part I, line 27b				
c	All other domestic foundations enter 2% of line 27b. Exempt foreign organizations, enter 4% of Part I, line 12, col (b)				
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only, others, enter -0-)	2	0		
3	Add lines 1 and 2				
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only, others, enter -0-)				
5	Tax based on investment income. Subtract line 4 from line 3 If zero or less, enter -0-				
6	Credits/Payments				
a	2019 estimated tax payments and 2018 overpayment credited to 2019	6a	6,000		
b	Exempt foreign organizations—tax withheld at source				
c	Tax paid with application for extension of time to file (Form 8868)			6c	32,807
d	Backup withholding erroneously withheld				
7	Total credits and payments Add lines 6a through 6d	7	38,807		
8	Enter any penalty for underpayment of estimated tax Check here <input checked="" type="checkbox"/> if Form 2220 is attached				
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed	8	123		
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid				
11	Enter the amount of line 10 to be Credited to 2020 estimated tax			9	0
		10	13,000		
		11	0		

Part VII-A Statements Regarding Activities

		Yes	No
1a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any political campaign?	1a	X
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes? See the instructions for the definition If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials published or distributed by the foundation in connection with the activities	1b	X
c	Did the foundation file Form 1120-POL for this year?	1c	X
d	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year (1) On the foundation ► \$ _____ (2) On foundation managers ► \$ _____		
e	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers ► \$ _____		
2	Has the foundation engaged in any activities that have not previously been reported to the IRS? If "Yes," attach a detailed description of the activities	2	X
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes	3	X
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	4a	X
b	If "Yes," has it filed a tax return on Form 990-T for this year?	4b	N/A
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year? If "Yes," attach the statement required by <i>General Instruction T</i>	5	X
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either • By language in the governing instrument, or • By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state law remain in the governing instrument?	6	X
7	Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col (c), and Part XV	7	X
8a	Enter the states to which the foundation reports or with which it is registered See instructions ► WI		
b	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate) of each state as required by <i>General Instruction G</i> ? If "No," attach explanation	8b	X
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 2019 or the tax year beginning in 2019? See the instructions for Part XIV If "Yes," complete Part XIV	9	X
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses	10	X

Part VII-A Statements Regarding Activities (continued)

	Yes	No
11 At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of section 512(b)(13)? If "Yes," attach schedule See instructions	11	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? Website address ►	13	X
14 The books are in care of ► LOUIS P GENTINE Telephone no ► 920-892-3400 Located at ► ONE PERSNICKETY PLACE PLYMOUTH WI ZIP+4 ► 53073		
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 ► 15		
16 At any time during calendar year 2019, did the foundation have an interest in or a signature or other authority over a bank, securities, or other financial account in a foreign country? See the instructions for exceptions and filing requirements for FinCEN Form 114 If "Yes," enter the name of the foreign country ►	16	X

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

	Yes	No
File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.		
1a During the year, did the foundation (either directly or indirectly)		
(1) Engage in the sale or exchange, or leasing of property with a disqualified person?	<input type="checkbox"/>	Yes <input checked="" type="checkbox"/> No
(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person?	<input type="checkbox"/>	Yes <input checked="" type="checkbox"/> No
(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?	<input type="checkbox"/>	Yes <input checked="" type="checkbox"/> No
(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?	<input type="checkbox"/>	Yes <input checked="" type="checkbox"/> No
(5) Transfer any income or assets to a disqualified person (or make any of either available for the benefit or use of a disqualified person)?	<input type="checkbox"/>	Yes <input checked="" type="checkbox"/> No
(6) Agree to pay money or property to a government official? (Exception. Check "No" if the foundation agreed to make a grant to or to employ the official for a period after termination of government service, if terminating within 90 days)	<input type="checkbox"/>	Yes <input checked="" type="checkbox"/> No
b If any answer is "Yes" to 1a(1)–(6), did any of the acts fail to qualify under the exceptions described in Regulations section 53.4941(d)-3 or in a current notice regarding disaster assistance? See instructions Organizations relying on a current notice regarding disaster assistance, check here ►	1b	N/A
c Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected before the first day of the tax year beginning in 2019?	1c	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))		
a At the end of tax year 2019, did the foundation have any undistributed income (Part XIII, lines 6d and 6e) for tax year(s) beginning before 2019?	<input type="checkbox"/>	Yes <input checked="" type="checkbox"/> No
If "Yes," list the years ► 20____, 20____, 20____, 20____		
b Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2) (relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer "No" and attach statement—see instructions)	2b	N/A
c If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here ► 20____, 20____, 20____, 20____		
3a Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year?	<input type="checkbox"/>	Yes <input checked="" type="checkbox"/> No
b If "Yes," did it have excess business holdings in 2019 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 Form 4720, Schedule C, to determine if the foundation had excess business holdings in 2019)	3b	N/A
4a 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 2019?	4b	X

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

5a	During the year, did the foundation pay or incur any amount to (1) Carry on propaganda, or otherwise attempt to influence legislation (section 4945(e))?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Yes	No
	(2) Influence the outcome of any specific public election (see section 4955), or to carry on, directly or indirectly, any voter registration drive?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
	(3) Provide a grant to an individual for travel, study, or other similar purposes?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
	(4) Provide a grant to an organization other than a charitable, etc , organization described in section 4945(d)(4)(A)? See instructions	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
	(5) Provide for any purpose other than religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
b	If any answer is "Yes" to 5a(1)–(5), did any of the transactions fail to qualify under the exceptions described in Regulations section 53 4945 or in a current notice regarding disaster assistance? See instructions		5b	N/A
	Organizations relying on a current notice regarding disaster assistance, check here ► <input type="checkbox"/>			
c	If the answer is "Yes" to question 5a(4), does the foundation claim exemption from the tax because it maintained expenditure responsibility for the grant?	<input type="checkbox"/> Yes <input type="checkbox"/> No		
	If "Yes," attach the statement required by Regulations section 53 4945–5(d)			
6a	Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
b	Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract? If "Yes" to 6b, file Form 8870		6b	X
7a	At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction?	<input type="checkbox"/> Yes <input type="checkbox"/> No		
b	If "Yes," did the foundation receive any proceeds or have any net income attributable to the transaction?		7b	
8	Is the foundation subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or excess parachute payment(s) during the year?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		

Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors**1 List all officers, directors, trustees, and foundation managers and their compensation. See instructions.**

(a) Name and address	(b) Title, and average hours per week devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
See Attached Statement	00	0		
	00	0		
	00	0		
	00	0		

2 Compensation of five highest-paid employees (other than those included on line 1—see instructions). If none, enter "NONE."

(a) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
NONE				

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

Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors (continued)
3 Five highest-paid independent contractors for professional services. See instructions. If none, enter "NONE."

(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE		

Total number of others receiving over \$50,000 for professional services ►
Part IX-A Summary of Direct Charitable Activities

List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of organizations and other beneficiaries served, conferences convened, research papers produced, etc

Expenses

1 THE FOUNDATION MADE CASH CONTRIBUTIONS TO OTHER PUBLIC CHARITIES

1	
2	
3	
4	

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

Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2

Amount

1	N/A	
2	

All other program-related investments. See instructions

3	
	

Total. Add lines 1 through 3 ► 0

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

1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc , purposes		
a	Average monthly fair market value of securities	1a	5,400,667
b	Average of monthly cash balances	1b	115,960
c	Fair market value of all other assets (see instructions)	1c	2,939,207
d	Total (add lines 1a, b, and c)	1d	8,455,834
e	Reduction claimed for blockage or other factors reported on lines 1a and 1c (attach detailed explanation)	1e	
2	Acquisition indebtedness applicable to line 1 assets	2	
3	Subtract line 2 from line 1d	3	8,455,834
4	Cash deemed held for charitable activities Enter 1½ % of line 3 (for greater amount, see instructions)	4	126,838
5	Net value of noncharitable-use assets. Subtract line 4 from line 3 Enter here and on Part V, line 4	5	8,328,996
6	Minimum investment return. Enter 5% of line 5	6	416,450

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

1	Minimum investment return from Part X, line 6	1	416,450
2a	Tax on investment income for 2019 from Part VI, line 5	2a	25,684
b	Income tax for 2019 (This does not include the tax from Part VI)	2b	
c	Add lines 2a and 2b	2c	25,684
3	Distributable amount before adjustments Subtract line 2c from line 1	3	390,766
4	Recoveries of amounts treated as qualifying distributions	4	
5	Add lines 3 and 4	5	390,766
6	Deduction from distributable amount (see instructions)	6	
7	Distributable amount as adjusted Subtract line 6 from line 5 Enter here and on Part XIII, line 1	7	390,766

Part XII Qualifying Distributions (see instructions)

1	Amounts paid (including administrative expenses) to accomplish charitable, etc , purposes		
a	Expenses, contributions, gifts, etc —total from Part I, column (d), line 26	1a	513,631
b	Program-related investments—total from Part IX-B	1b	
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	3a	
a	Suitability test (prior IRS approval required)	3b	
b	Cash distribution test (attach the required schedule)	4	513,631
4	Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4	5	
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income Enter 1% of Part I, line 27b See instructions	6	513,631
6	Adjusted qualifying distributions. Subtract line 5 from line 4		

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

Part XIII Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2018	(c) 2018	(d) 2019
1 Distributable amount for 2019 from Part XI, line 7				390,766
2 Undistributed income, if any, as of the end of 2019			0	
a Enter amount for 2018 only				
b Total for prior years 20____, 20____, 20____				
3 Excess distributions carryover, if any, to 2019				
a From 2014				
b From 2015	12,211			
c From 2016	18,895			
d From 2017	38,763			
e From 2018	19,639			
f Total of lines 3a through e	89,508			
4 Qualifying distributions for 2019 from Part XII, line 4 ► \$ 513,631				
a Applied to 2018, 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 required—see instructions)				
d Applied to 2019 distributable amount				390,766
e Remaining amount distributed out of corpus	122,865			
5 Excess distributions carryover applied to 2019 (If an amount appears in column (d), the same amount must be shown in column (a))				
6 Enter the net total of each column as indicated below:				
a Corpus Add lines 3f, 4c, and 4e Subtract line 5	212,373			
b Prior years' undistributed income Subtract line 4b from line 2b		0		
c Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed				
d Subtract line 6c from line 6b Taxable amount—see instructions				
e Undistributed income for 2018 Subtract line 4a from line 2a Taxable amount—see instructions			0	
f Undistributed income for 2019 Subtract lines 4d and 5 from line 1 This amount must be distributed in 2020				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)				
8 Excess distributions carryover from 2014 not applied on line 5 or line 7 (see instructions)				
9 Excess distributions carryover to 2020. Subtract lines 7 and 8 from line 6a	212,373			
10 Analysis of line 9				
a Excess from 2015	12,211			
b Excess from 2016	18,895			
c Excess from 2017	38,763			
d Excess from 2018	19,639			
e Excess from 2019	122,865			

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

N/A

- 1a** If the foundation has received a ruling or determination letter that it is a private operating foundation, and the ruling is effective for 2019, enter the date of the ruling

b Check box to indicate whether the foundation is a private operating foundation described in section

4942(j)(3) or 4942(j)(5)

- | 2a | Enter the lesser of the adjusted net income from Part I or the minimum investment return from Part X for each year listed | Tax year | (a) 2019 | (b) 2018 | (c) 2017 | Prior 3 years |
|----|---|----------|----------|----------|----------|---------------|
| | | | | | | |

4942(j)(3) or 4942(j)(5)

- 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.

Part XV **Supplementary Information (Complete this part only if the foundation had \$5,000 or more in assets at any time during the year—see instructions.)**

1 Information Regarding Foundation Managers:

- a List any managers of the foundation who have contributed more than 2% of the total contributions received by the foundation before the close of any tax year (but only if they have contributed more than \$5,000) (See section 507(d)(2))

LOUIS P AND MICHELE A GEM

- b** List any managers of the foundation who own 10% or more of the stock of a corporation (or an equally large portion of the ownership of a partnership or other entity) of which the foundation has a 10% or greater interest

2 Information Regarding Contribution, Grant, Gift, Loan, Scholarship, etc., Programs:

Check here ► if the foundation only makes contributions to preselected charitable organizations and does not accept unsolicited requests for funds. If the foundation makes gifts, grants, etc., to individuals or organizations under other conditions, complete items 2a, b, c, and d. See instructions.

- a. The name, address, and telephone number or email address of the person to whom applications should be addressed.

- b. The form in which applications should be submitted and information and materials they should include.

- ### c. Any submission deadlines

- d Any restrictions or limitations on awards, such as by geographical areas, charitable fields, kinds of institutions, or other factors

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

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a Paid during the year				
CATHOLIC RELIEF SERVICES		PC	EDUCATION	75,000
3501 SOUTH LAKE DRIVE		PC	EDUCATION	50,000
ST FRANCIS, WI 53235		PC	EDUCATION	50,000
SETON CATHOLIC SCHOOLS		PC	EDUCATION	50,000
3501 SOUTH LAKE DRIVE		PC	EDUCATION	50,000
ST FRANCIS, WI 53235		PC	EDUCATION	50,000
WI RIGHT TO LIFE		PC	EDUCATION	-
5317 N 118TH CT		PC	EDUCATION	15,000
MILWAUKEE, WI 53225		PC	EDUCATION	15,000
MILWAUKEE ARCHDIOCESE		PC	EDUCATION	15,000
3501 SOUTH LAKE DRIVE		PC	EDUCATION	15,000
ST FRANCIS, WI 53225		PC	EDUCATION	15,000
ANDEAN HEALTHCARE & DEVELOPMENT		PC	HEALTHCARE	15,000
1100 DELEPLAINE CT		PC	EDUCATION	15,000
MADISON, WI 53715		PC	EDUCATION	15,000
GENERATIONS - PLYMOUTH		PC	EDUCATION	15,000
1500 DOUGLAS DRIVE		PC	EDUCATION	15,000
PLYMOUTH, WI 53073		PC	EDUCATION	15,000
GREAT MARRIAGES OF SHEBOYGAN CTY		PC	EDUCATION	30,000
612 CENTER AVE		PC	EDUCATION	30,000
SHEBOYGAN, WI 53081		PC	HUNGER RELIEF	10,000
MARYS MEALS		PC	EDUCATION	10,000
75 ORCHARD ST		PC	EDUCATION	10,000
BLOOMFIELD, NJ 07003		PC	EDUCATION	10,000
SHARON RICHARDSON HOSPICE		PC	EDUCATION	10,000
W2850 WI-28		PC	EDUCATION	10,000
SHEBOYGAN FALLS, WI 53085		PC	EDUCATION	10,000
ST VINCENT DE PAUL		PC	EDUCATION	10,000
2225 EASTERN AVE		PC	EDUCATION	10,000
PLYMOUTH, WI 53073		PC	EDUCATION	10,000
WOMENS CARE CENTER		PC	EDUCATION	10,000
1441 NORTH FARWELL AVE		PC	EDUCATION	10,000
MILWAUKEE, WI 53202		PC	EDUCATION	10,000
Total	See Attached Statement			► 3a 513,631
b Approved for future payment				
Total				► 3b 0

Continuation of Part XV, Line 3a (990-PF) - Grants and Contributions Paid During the Year

Recipient(s) paid during the year

Name

UNIVERSITY OF NOTRE DAME

Street

1100 GRACE HALL

City

NOTRE DAME

State

WI

Zip Code

46556

Foreign Country

Relationship

Foundation Status

PC

Purpose of grant/contribution

EDUCATION

Amount

108,631

Name

ST FRANCIS DE SALES SEMINARY

Street

3257 SOUTH LAKE DR

City

ST FRANCIS

State

WI

Zip Code

53235

Foreign Country

Relationship

Foundation Status

PC

Purpose of grant/contribution

EDUCATION

Amount

25,000

Name

Street

City

State

Zip Code

Foreign Country

Relationship

Foundation Status

Purpose of grant/contribution

Amount

Name

Street

City

State

Zip Code

Foreign Country

Relationship

Foundation Status

Purpose of grant/contribution

Amount

Name

Street

City

State

Zip Code

Foreign Country

Relationship

Foundation Status

Purpose of grant/contribution

Amount

Name

Street

City

State

Zip Code

Foreign Country

Relationship

Foundation Status

Purpose of grant/contribution

Amount

Part XVI-A Analysis of Income-Producing Activities

Enter gross amounts unless otherwise indicated

	Unrelated business income		Excluded by section 512, 513, or 514		(e) Related or exempt function income (See instructions)
	(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	
1 Program service revenue					
a					
b					
c					
d					
e					
f					
g Fees and contracts from government agencies					
2 Membership dues and assessments					
3 Interest on savings and temporary cash investments	900001		14	1,349	
4 Dividends and interest from securities	900001		14	104,790	
5 Net rental income or (loss) from real estate					
a Debt-financed property					
b Not debt-financed property					
6 Net rental income or (loss) from personal property					
7 Other investment income					
8 Gain or (loss) from sales of assets other than inventory	900001		18	1,215,214	
9 Net income or (loss) from special events					
10 Gross profit or (loss) from sales of inventory					
11 Other revenue a					
b					
c					
d					
e					
12 Subtotal Add columns (b), (d), and (e)		0		1,321,353	0
13 Total Add line 12, columns (b), (d), and (e)	13			1,321,353	

(See worksheet in line 13 instructions to verify calculations)

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

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

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

2a Is the foundation directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described in section 501(c) (other than section 501(c)(3)) or in section 527?

Yes No

b If "Yes," complete the following schedule

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

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge.

Sign
Here

Signature of officer or trustee

11/19/10

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► PRESIDENT

May the IRS discuss this return
with the preparer shown below?
See instructions Yes No

Paid Preparer Use Only	Print/Type preparer's name	Preparer's signature	Date	Check <input type="checkbox"/> if self-employed	PTIN
	Martin J Auchter		11/9/2020		P00226141
	Firm's name ►	Firm's EIN ►			
	Firm's address ►	Phone no			

Schedule B
(Form 990, 990-EZ,
or 990-PF)Department of the Treasury
Internal Revenue Service**Schedule of Contributors**

OMB No 1545-0047

2019

- Attach to Form 990, Form 990-EZ, or Form 990-PF.
- Go to www.irs.gov/Form990 for the latest information

Name of the organization

LOU AND MICHELE GENTINE FOUNDATION, INC

Employer identification number

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

 501(c)(3) exempt private foundation 4947(a)(1) nonexempt charitable trust treated as a private foundation 501(c)(3) taxable private foundationCheck 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

- 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, 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)

Name of organization LOU AND MICHELE GENTINE FOUNDATION, INC	Employer identification number 20-3649904
---	--

Part I **Contributors** (see instructions) Use duplicate copies of Part I if additional space is needed

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	LOU AND MICHELE GENTINE 226 S. Turtle Bay Road ELKHART LAKE WI 53020 Foreign State or Province _____ Foreign Country _____	\$ _____	<input checked="" type="checkbox"/> Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <small>(Complete Part II for noncash contributions)</small>
	_____ _____ Foreign State or Province _____ Foreign Country _____	\$ _____	<input type="checkbox"/> Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <small>(Complete Part II for noncash contributions)</small>
	_____ _____ Foreign State or Province _____ Foreign Country _____	\$ _____	<input type="checkbox"/> Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <small>(Complete Part II for noncash contributions)</small>
	_____ _____ Foreign State or Province _____ Foreign Country _____	\$ _____	<input type="checkbox"/> Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <small>(Complete Part II for noncash contributions)</small>
	_____ _____ Foreign State or Province _____ Foreign Country _____	\$ _____	<input type="checkbox"/> Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <small>(Complete Part II for noncash contributions)</small>
	_____ _____ Foreign State or Province _____ Foreign Country _____	\$ _____	<input type="checkbox"/> Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <small>(Complete Part II for noncash contributions)</small>
	_____ _____ Foreign State or Province _____ Foreign Country _____	\$ _____	<input type="checkbox"/> Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <small>(Complete Part II for noncash contributions)</small>

Name of organization LOU AND MICHELE GENTINE FOUNDATION, INC	Employer identification number 20-3649904
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Part II Noncash Property (see instructions) Use duplicate copies of 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
-----	-----	\$ -----	-----
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
-----	-----	\$ -----	-----

Name of organization

LOU AND MICHELE GENTINE FOUNDATION, INC

Employer identification number

20-3649904

Part III

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, charitable, etc., contributions of \$1,000 or less for the year (Enter this information once. See instructions) ► \$ 0

Use duplicate copies of Part III if additional space is needed

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
-----	-----	-----	-----
(e) Transfer of gift			
Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee	
-----	-----	-----	-----
-----	-----	-----	-----
-----	-----	-----	-----
For Prov	Country		
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
-----	-----	-----	-----
-----	-----	-----	-----
-----	-----	-----	-----
(e) Transfer of gift			
Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee	
-----	-----	-----	-----
-----	-----	-----	-----
-----	-----	-----	-----
For Prov	Country		
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
-----	-----	-----	-----
-----	-----	-----	-----
-----	-----	-----	-----
(e) Transfer of gift			
Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee	
-----	-----	-----	-----
-----	-----	-----	-----
-----	-----	-----	-----
For Prov	Country		

Form 4720

Department of the Treasury
Internal Revenue ServiceReturn of Certain Excise Taxes Under Chapters
41 and 42 of the Internal Revenue Code(Sections 170(f)(10), 664(c)(2), 4911, 4912, 4941, 4942, 4943, 4944, 4945, 4955, 4958, 4959, 4960, 4965, 4966, 4967, and 4968)
► Go to www.irs.gov/Form4720 for instructions and the latest information.

OMB No 1545-0052

2019

For calendar year 2019 or other tax year beginning , 2019, and ending , 20

Name of organization or entity LOU AND MICHELE GENTINE FOUNDATION, INC	Employer identification number 20-3649904
Number, street, and room or suite no (or P O box if mail is not delivered to street address) ONE PERSNICKETY PLACE	Check box for type of annual return <input type="checkbox"/> Form 990 <input type="checkbox"/> Form 990-EZ <input checked="" type="checkbox"/> Form 990-PF <input type="checkbox"/> Other <input type="checkbox"/> Form 5227
City or town, state or province, country, and ZIP or foreign postal code PLYMOUTH, WI 53073	

- | | | |
|---|------------|-----------|
| A Is the organization a foreign private foundation within the meaning of section 4948(b)? | Yes | No |
| B Has corrective action been taken on any taxable event that resulted in Chapter 42 taxes being reported on this form? (Enter "N/A" if not applicable) | | |
- If "Yes," attach a detailed description and documentation of the corrective action taken and, if applicable, enter the fair market value of any property recovered as a result of the correction ► \$ _____ If "No," (that is, any uncorrected acts or transactions), attach an explanation (see instructions)

Part I. Taxes on Organization (Sections 170(f)(10), 664(c)(2), 4911(a), 4912(a), 4942(a), 4943(a), 4944(a)(1), 4945(a)(1), 4955(a)(1), 4959, 4960(a), 4965(a)(1), 4966(a)(1), and 4968(a))

1	Tax on undistributed income—Schedule B, line 4	1
2	Tax on excess business holdings—Schedule C, line 7	2
3	Tax on investments that jeopardize charitable purpose—Schedule D, Part I, column (e)	3
4	Tax on taxable expenditures—Schedule E, Part I, column (g)	4
5	Tax on political expenditures—Schedule F, Part I, column (e)	5
6	Tax on excess lobbying expenditures—Schedule G, line 4	6
7	Tax on disqualifying lobbying expenditures—Schedule H, Part I, column (e)	7
8	Tax on premiums paid on personal benefit contracts	8
9	Tax on being a party to prohibited tax shelter transactions—Schedule J, Part I, column (h)	9
10	Tax on taxable distributions—Schedule K, Part I, column (f)	10
11	Tax on a charitable remainder trust's unrelated business taxable income Attach statement	11
12	Tax on failure to meet the requirements of section 501(r)(3)—Schedule M, Part II, line 2	12
13	Tax on excess executive compensation—Schedule N	13
14	Tax on net investment income of private colleges and universities—Schedule O	14
15	Total (add lines 1–14)	15 0

Part II-A Taxes on Managers, Self-Dealers, Disqualified Persons, Donors, Donor Advisors, and Related Persons (Sections 4912(b), 4941(a), 4944(a)(2), 4945(a)(2), 4955(a)(2), 4958(a), 4965(a)(2), 4966(a)(2), and 4967(a))

(a) Name and address of person subject to tax City or town, state or province, country, ZIP or foreign postal code		(b) Taxpayer identification number	
a			
b			
c			
	(c) Tax on self-dealing—Schedule A, Part II, col (d), and Part III, col (d)	(d) Tax on investments that jeopardize charitable purpose—Schedule D, Part II, col (d)	(e) Tax on taxable expenditures—Schedule E, Part II, col (d)
a			
b			
c			
Total	0	0	0 0
	(g) Tax on disqualifying lobbying expenditures—Schedule H, Part II, col (d)	(h) Tax on excess benefit transactions—Schedule I, Part II, col (d), and Part III, col (d)	(i) Tax on being a party to prohibited tax shelter transactions—Schedule J, Part II, col (d)
a			
b			
c			
Total	0	0	0 0
	(k) Tax on prohibited benefits—Sch L, Part II, col (d), and Part III, col (d)		(l) Total—Add cols (c) through (k)
a			0
b			0
c			0
Total	0		0 0

Part II-B Summary of Taxes (See Tax Payments in the instructions)

1	Enter the taxes listed in Part II-A, column (l), that apply to managers, self-dealers, disqualified persons, donors, donor advisors, and related persons who sign this form. If all sign, enter the total amount from Part II-A, column (l)	1	
2	Total tax. Add Part I, line 15, and Part II-B, line 1	2	0
3	Total payments including amount paid with Form 8868 (see instructions)	3	
4	Tax due. If line 2 is larger than line 3, enter amount owed (see instructions)	4	0
5	Overpayment. If line 2 is smaller than line 3, enter the difference. This is your refund	5	0

SCHEDULE A—Initial Taxes on Self-Dealing (Section 4941)

Part I **Acts of Self-Dealing and Tax Computation**

(a) Act number	(b) Date of act	(c) Description of act
1		
2		
3		
4		
5		

(d) Question number from Form 990-PF, Part VII-B, or Form 5227, Part VI-B, applicable to the act	(e) Amount involved in act	(f) Initial tax on self-dealer (10% of col (e))	(g) Tax on foundation managers (if applicable) (lesser of \$20,000 or 5% of col (e))
		0	0
		0	0
		0	0
		0	0
		0	0

Part II Summary of Tax Liability of Self-Dealers and Proration of Payments

(a) Names of self-dealers liable for tax	(b) Act no from Part I, col (a)	(c) Tax from Part I, col (f), or prorated amount	(d) Self-dealer's total tax liability (add amounts in col (c)) (see instructions)
			0
			0
			0
			0
			0

Part III Summary of Tax Liability of Foundation Managers and Proration of Payments

Part III Summary of Tax Liability of Foundation Managers and Proration of Payments			
(a) Names of foundation managers liable for tax	(b) Act no from Part I, col (a)	(c) Tax from Part I, col (g), or prorated amount	(d) Manager's total tax liability (add amounts in col (c)) (see instructions)
			0
			0
			0

SCHEDULE B—Initial Tax on Undistributed Income (Section 4942)

SCHEDULE B Initial Tax on Undistributed Income (Section 4942)	
1	Undistributed income for years before 2018 (from Form 990-PF for 2019, Part XIII, line 6d)
2	Undistributed income for 2018 (from Form 990-PF for 2019, Part XIII, line 6e)
3	Total undistributed income at end of current tax year beginning in 2019 and subject to tax under section 4942 (add lines 1 and 2)
4	Tax —Enter 30% of line 3 here and on Part I, line 1

SCHEDULE C—Initial Tax on Excess Business Holdings (Section 4943)**Business Holdings and Computation of Tax**

If you have taxable excess holdings in more than one business enterprise, attach a separate schedule for each enterprise. Refer to the instructions for each line item before making any entries.

Name and address of business enterprise

Employer identification number



Form of enterprise (corporation, partnership, trust, joint venture, sole proprietorship, etc.)



	(a) Voting stock (profits interest or beneficial interest)	(b) Value	(c) Nonvoting stock (capital interest)
1 Foundation holdings in business enterprise	1 %	0 %	0
2 Permitted holdings in business enterprise	2 %	0 %	0
3 Value of excess holdings in business enterprise	3		
4 Value of excess holdings disposed of within 90 days, or, other value of excess holdings not subject to section 4943 tax (attach statement)	4		
5 Taxable excess holdings in business enterprise—line 3 minus line 4	5 0	0 0	0 0
6 Tax—Enter 10% of line 5	6 0	0 0	0 0
7 Total tax—Add amounts on line 6, columns (a), (b), and (c), enter total here and on Part I, line 2	7 0		

SCHEDULE D—Initial Taxes on Investments That Jeopardize Charitable Purpose (Section 4944)**Part I Investments and Tax Computation**

(a) Investment number	(b) Date of investment	(c) Description of investment	(d) Amount of investment	(e) Initial tax on foundation (10% of col (d))	(f) Initial tax on foundation managers (if applicable)—(lesser of \$10,000 or 10% of col (d))
1				0	0
2				0	0
3				0	0
4				0	0
5				0	0
Total —Column (e) Enter here and on Part I, line 3				0	
Total —Column (f) Enter total (or prorated amount) here and in Part II, column (c), below					0

Part II Summary of Tax Liability of Foundation Managers and Proration of Payments

(a) Names of foundation managers liable for tax	(b) Investment no from Part I, col (a)	(c) Tax from Part I, col (f), or prorated amount	(d) Manager's total tax liability (add amounts in col (c)) (see instructions)
			0
			0
			0
			0

SCHEDULE E—Initial Taxes on Taxable Expenditures (Section 4945)

Part I Expenditures and Computation of Tax				
(a) Item number	(b) Amount	(c) Date paid or incurred	(d) Name and address of recipient	(e) Description of expenditure and purposes for which made
1				
2				
3				
4				
5				
(f) Question number from Form 990-PF, Part VII-B, or Form 5227, Part VI-B, applicable to the expenditure			(g) Initial tax imposed on foundation (20% of col (b))	(h) Initial tax imposed on foundation managers (if applicable)—(lesser of \$10,000 or 5% of col (b))
			0	0
			0	0
			0	0
			0	0
			0	0
Total—Column (g) Enter here and on Part I, line 4			0	
Total—Column (h) Enter total (or prorated amount) here and in Part II, column (c), below				0
Part II Summary of Tax Liability of Foundation Managers and Proration of Payments				
(a) Names of foundation managers liable for tax	(b) Item no. from Part I, col. (a)	(c) Tax from Part I, col. (h), or prorated amount	(d) Manager's total tax liability (add amounts in col. (c)) (see instructions)	
			0	
			0	
			0	
			0	
			0	
			0	

SCHEDULE F—Initial Taxes on Political Expenditures (Section 4955)

Part I Expenditures and Computation of Tax					
(a) Item number	(b) Amount	(c) Date paid or incurred	(d) Description of political expenditure	(e) Initial tax imposed on organization or foundation (10% of col (b))	(f) Initial tax imposed on managers (if applicable) (lesser of \$5,000 or 2 1/2% of col (b))
1				0	0
2				0	0
3				0	0
4				0	0
5				0	0
Total—Column (e) Enter here and on Part I, line 5				0	
Total—Column (f) Enter total (or prorated amount) here and in Part II, column (c), below					0
Part II Summary of Tax Liability of Organization Managers or Foundation Managers and Proration of Payments					
(a) Names of organization managers or foundation managers liable for tax	(b) Item no. from Part I, col. (a)	(c) Tax from Part I, col. (f), or prorated amount	(d) Manager's total tax liability (add amounts in col. (c)) (see instructions)		
			0		
			0		
			0		
			0		
			0		

SCHEDULE G—Tax on Excess Lobbying Expenditures (Section 4911)

1	Excess of grass roots expenditures over grass roots nontaxable amount (from Schedule C (Form 990 or 990-EZ), Part II-A, column (b), line 1h) (See the instructions before making an entry)	1	
2	Excess of lobbying expenditures over lobbying nontaxable amount (from Schedule C (Form 990 or 990-EZ), Part II-A, column (b), line 1i) (See the instructions before making an entry)	2	
3	Excess lobbying expenditures—enter the larger of line 1 or line 2	3	0
4	Tax—Enter 25% of line 3 here and on Part I, line 6	4	0

SCHEDULE H—Taxes on Disqualifying Lobbying Expenditures (Section 4912)

Part I Expenditures and Computation of Tax					
(a) Item number	(b) Amount	(c) Date paid or incurred	(d) Description of lobbying expenditures	(e) Tax imposed on organization (5% of col (b))	(f) Tax imposed on organization managers (if applicable)—(5% of col (b))
1				0	0
2				0	0
3				0	0
4				0	0
5				0	0
Total—Column (e) Enter here and on Part I, line 7				0	

Total—Column (f) Enter total (or prorated amount) here and in Part II, column (c), below 0

Part II Summary of Tax Liability of Organization Managers and Proration of Payments

(a) Names of organization managers liable for tax	(b) Item no. from Part I, col. (a)	(c) Tax from Part I, col. (f), or prorated amount	(d) Manager's total tax liability (add amounts in col. (c)) (see instructions)
			0
			0
			0
			0

SCHEDULE I—Initial Taxes on Excess Benefit Transactions (Section 4958)

Part I Excess Benefit Transactions and Tax Computation			
(a) Transaction number	(b) Date of transaction	(c) Description of transaction	
1			
2			
3			
4			
5			
(d) Amount of excess benefit		(e) Initial tax on disqualified persons (25% of col. (d))	(f) Tax on organization managers (if applicable) (lesser of \$20,000 or 10% of col. (d))
		0	0
		0	0
		0	0
		0	0
		0	0

SCHEDULE I—Initial Taxes on Excess Benefit Transactions (Section 4958) Continued**Part II Summary of Tax Liability of Disqualified Persons and Proration of Payments**

(a) Names of disqualified persons liable for tax	(b) Trans no from Part I, col (a)	(c) Tax from Part I, col (e), or prorated amount	(d) Disqualified person's total tax liability (add amounts in col (c)) (see instructions)
			0
			0
			0
			0
			0

Part III Summary of Tax Liability of 501(c)(3), (c)(4) & (c)(29) Organization Managers and Proration of Payments

(a) Names of 501(c)(3), (c)(4) & (c)(29) organization managers liable for tax	(b) Trans no from Part I, col (a)	(c) Tax from Part I, col (f), or prorated amount	(d) Manager's total tax liability (add amounts in col (c)) (see instructions)
			0
			0
			0
			0
			0

SCHEDULE J—Taxes on Being a Party to Prohibited Tax Shelter Transactions (Section 4965)**Part I Prohibited Tax Shelter Transactions (PTST) and Tax Imposed on the Tax-Exempt Entity (see instructions)**

(a) Transaction number	(b) Transaction date	(c) Type of transaction 1—Listed 2—Subsequently listed 3—Confidential 4—Contractual protection	(d) Description of transaction
1			
2			
3			
4			
5			
(e) Did the tax-exempt entity know or have reason to know this transaction was a PTST when it became a party to the transaction? Answer Yes or No	(f) Net income attributable to the PTST	(g) 75% of proceeds attributable to the PTST	(h) Tax imposed on the tax-exempt entity (see instructions)
Total—Column (h) Enter here and on Part I, line 9			0

Part II Tax Imposed on Entity Managers (Section 4965) Continued

(a) Name of entity manager	(b) Transaction number from Part I, col (a)	(c) Tax—enter \$20,000 for each transaction listed in col (b) for each manager in col (a)	(d) Manager's total tax liability (add amounts in col (c))
			0
			0
			0
			0
			0
			0

SCHEDULE K—Taxes on Taxable Distributions of Sponsoring Organizations Maintaining Donor Advised Funds (Section 4966) See the instructions

Part I Taxable Distributions and Tax Computation			
(a) Item number	(b) Name of sponsoring organization and donor advised fund	(c) Description of distribution	
1			
2			
3			
4			
(d) Date of distribution	(e) Amount of distribution	(f) Tax imposed on organization (20% of col (e))	(g) Tax on fund managers (lesser of 5% of col (e) or \$10,000)
		0	0
		0	0
		0	0
		0	0
Total— Column (f) Enter here and on Part I, line 10		0	
Total— Column (g) Enter total (or prorated amount) here and in Part II, column (c), below			0

Part II Summary of Tax Liability of Fund Managers and Proration of Payments

(a) Name of fund managers liable for tax	(b) Item no. from Part I, col (a)	(c) Tax from Part I, col (g) or prorated amount	(d) Manager's total tax liability (add amounts in col (c)) (see instructions)
			0
			0
			0
			0
			0

SCHEDULE L—Taxes on Prohibited Benefits Distributed From Donor Advised Funds (Section 4967)

See the instructions

Part I Prohibited Benefits and Tax Computation			
(a) Item number	(b) Date of prohibited benefit	(c) Description of benefit	
1			
2			
3			
4			
5			
(d) Amount of prohibited benefit		(e) Tax on donors, donor advisors, or related persons (125% of col. (d)) (see instructions)	(f) Tax on fund managers (if applicable) (lesser of 10% of col. (d) or \$10,000) (see instructions)
		0	0
		0	0
		0	0
		0	0
		0	0

Part II Summary of Tax Liability of Donors, Donor Advisors, Related Persons, and Proration of Payments			
(a) Names of donors, donor advisors, or related persons liable for tax	(b) Item no. from Part I, col. (a)	(c) Tax from Part I, col. (e) or prorated amount	(d) Donor's, donor advisor's, or related person's total tax liability (add amounts in col. (c)) (see instructions)
			0
			0
			0
			0
			0

Part III Summary of Tax Liability of Fund Managers and Proration of Payments			
(a) Names of fund managers liable for tax	(b) Item no. from Part I, col. (a)	(c) Tax from Part I, col. (f) or prorated amount	(d) Fund manager's total tax liability (add amounts in col. (c)) (see instructions)
			0
			0
			0
			0
			0

Schedule M—Tax on Hospital Organization for Failure to Meet the Community Health Needs Assessment Requirements (Sections 4959 and 501(r)(3)) (See Instructions)

Part I. Failures to Meet Section 501(r)(3)				
(a) Item number	(b) Name of hospital facility	(c) Description of the failure	(d) Tax year hospital facility last conducted a CHNA	(e) Tax year hospital facility last adopted an implementation strategy
1				
2				
3				
4				
5				

Part II. Computation of Tax				
1	Number of hospital facilities operated by the hospital organization that failed to meet the Community Health Needs Assessment requirements of section 501(r)(3)		1	
2	Tax—Enter \$50,000 multiplied by line 1 here and on Part I, line 12		2	0

SCHEDULE N—Tax on Excess Executive Compensation (Section 4960) (See Instructions)

(a) Item number	(b) Name of covered employee	(c) Excess remuneration	(d) Excess parachute payment	(e) Total Add column (c) and (d)
1				
2				
3				
4				
5				
6	Attachment, if necessary See instructions			
Total (add column (e) items 1–6)				0
Tax. Enter 21% of the amount above here and on Part I, line 13				0

SCHEDULE O—Excise Tax on Net Investment Income of Private Colleges and Universities (Section 4968)

		(a) Name	(b) EIN	(c) Gross investment income (See instructions)	(d) Capital gain net income	(e) Administrative expenses allocable to income included in cols (c) and (d)	(f) Net investment income (See instructions)
1	Filing Organization						
2	Related Organization						
3	Related Organization						
4	Related Organization						
5	Total from attachment, if necessary						
6	Total			0	0	0	0
7	Excise Tax on Net Investment Income Enter 1 4% of the amount in 6(f) here and on Part I, line 14						0

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief it is true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge.

**Sign
Here**

►	Signature of officer or trustee	Title	Date
►	Signature (and organization or entity name if applicable) of manager, self-dealer, disqualified person, donor, donor advisor, or related person		Date
►	Signature (and organization or entity name if applicable) of manager, self-dealer, disqualified person, donor, donor advisor, or related person		Date
►	Signature (and organization or entity name if applicable) of manager, self-dealer, disqualified person, donor, donor advisor, or related person		Date
►	Signature (and organization or entity name if applicable) of manager, self-dealer, disqualified person, donor, donor advisor, or related person		Date

May the IRS discuss this return with the preparer shown below? (see instructions)

Yes No

Paid Preparer Use Only	Print/Type preparer's name	Preparer's signature	Date	Check <input type="checkbox"/> if self-employed	PTIN
	Martin J Auchter		11/9/2020		P00226141
	Firm's name ►	Firm's EIN ►			
	Firm's address ►	Phone no			

Part I, Line 6 (990 PF) - Gain/Loss from Sale of Assets Other Than Inventory

Description	CUSIP #	Purchaser	Check "X" if Purchaser is a Business	Acquisition Method	Date Acquired	Date Sold	Gross Sales Price	Cost or Other Basis	Valuation Method	Expense of Sale and Cost of Improvements	Depreciation	Net Gain or Loss				
												Capital Gains/Losses	Totals	Gross Sales	Cost or Other Basis, Expenses, Depreciation and Adjustments	Net Gain or Loss
Long Term CG Distributions												0	0	795,417	0	1,215,214
Short Term CG Distributions	0											0	0	0	0	0
1 ABBOTT LABORATORIES	002824100	X	LOUIS P GENTINE	D	7/19/2016	4/15/2019	116,674	62,550				54,024				
2 ABBOTT LABORATORIES	002824100	X	LOUIS P GENTINE	D	7/19/2016	9/18/2019	83,919	41,767				42,142				
3 ABBVIE INC	002874109	X	LOUIS P GENTINE	D	7/19/2016	1/16/2019	42,944	31,692				11,252				
4 ABBVIE INV	002874109	X	LOUIS P GENTINE	D	7/19/2016	5/7/2019	117,028	95,5078				21,950				
5 AMAZON	023135106	X	LOUIS P GENTINE	D	7/17/2015	5/7/2019	96,503	21,311				74,992				
6 AMAZON	023135106	X	LOUIS P GENTINE	D	7/17/2015	8/9/2019	91,298	21,511				69,787				
7 APPLE	037833100	X	LOUIS P GENTINE	D	6/11/2012	4/15/2019	198,479	80,288				116,191				
8 APPLE	037833100	X	LOUIS P GENTINE	D	6/11/2012	9/18/2019	44,420	16,058				28,362				
9 BANKAMERICA CORP	060505104	X	LOUIS P GENTINE	D	8/30/2011	8/9/2019	42,344	12,448				30,196				
10 BOEING	097023105	X	LOUIS P GENTINE	D	8/30/2011	4/15/2019	150,443	25,999				124,444				
11 BOEING	097023105	X	LOUIS P GENTINE	D	8/30/2011	5/7/2019	182,323	32,498				149,823				
12 CATERPILLAR	149123101	X	LOUIS P GENTINE	D	8/15/2013	8/9/2019	97,206	68,380				28,826				
13 EXACT SCIENCES	300636P105	X	LOUIS P GENTINE	D	10/27/2015	2/7/2019	86,809	8,160				78,649				
14 FACEBOOK	303033M102	X	LOUIS P GENTINE	D	5/21/2012	2/7/2019	66,491	13,996				52,495				
15 FACEBOOK	303033M102	X	LOUIS P GENTINE	D	7/21/2015	2/7/2019	16,623	9,833				6,790				
16 JPMORGAN CHASE	46625H100	X	LOUIS P GENTINE	D	4/9/2015	8/9/2019	109,248	61,156				48,092				
17 JPMORGAN CHASE	46625H100	X	LOUIS P GENTINE	D	4/9/2015	9/4/2019	59,104	30,378				28,526				
18 MICROSOFT	594918104	X	LOUIS P GENTINE	D	7/20/2010	8/9/2019	37,429	6,746				30,683				
19 NETFLIX	64110L106	X	LOUIS P GENTINE	D	7/7/2015	9/27/2019	183,088	65,039				118,049				
20 US BANCORP	902973304	X	LOUIS P GENTINE	D	1/4/2008	1/16/2019	17,213	10,323				6,680				
21 US BANCORP	902973304	X	LOUIS P GENTINE	D	7/20/2010	1/16/2019	49,181	22,320				26,381				
22 US BANCORP	902973304	X	LOUIS P GENTINE	D	10/7/2010	1/16/2019	14,754	6,116				8,038				
23 XPO	983793100	X	LOUIS P GENTINE	D	3/17/2015	8/9/2019	34,994	23,070				11,924				
24 XPO	983793100	X	LOUIS P GENTINE	D	7/19/2016	9/18/2019	72,126	27,400				44,726				

Part I, Line 16a (990-PF) - Legal Fees

		0	0	0	0
Description		Revenue and Expenses per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes (Cash Basis Only)
1	LEGAL FEES	0			0

Part I, Line 18 (990-PF) - Taxes

		14,848	0	0	0
Description		Revenue and Expenses per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
1	US Treasury	14,848			

Part I, Line 23 (990-PF) - Other Expenses

		137,198	37,160	0	0
Description		Revenue and Expenses per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
1	LIFE INSURANCE PREMIUM	100,000	0		
2	INVESTMENT FEES	37,160	37,160		
3	INTEREST TO IRS	38	0		

Part II, Line 10b (990-PF) - Investments - Corporate Stock

	Description	Num Shares/ Face Value	Book Value Beg. of Year	Book Value End of Year	FMV Beg. of Year	FMV End of Year
1	200 SHS Abbvie	2,000	126,770	0	184,380	0
2	5000 SHS Abbott Labs	2,500	206,123	101,705	361,650	217,150
3	1000 Alibaba	1,000	63,849	63,849	137,070	212,100
4	100 SHS GOOG	100	28,389	28,389	103,561	133,702
5	115 SHS GOOGL	115	32,842	32,842	120,170	154,030
6	300 SHS AMZN	200	129,065	86,043	450,591	369,568
7	2100 SHS AAPL	900	152,947	56,602	331,254	264,285
8	7500 SHS BAC	6,000	60,739	48,591	184,800	211,320
9	300 SHS BLK	300	50,946	50,946	117,846	150,810
10	1200 SHS Boeing	0	58,497	0	290,250	0
11	1800 SHS CAT	1,000	151,274	82,893	228,726	147,680
12	3000 SHS CSCO	3,000	46,620	46,620	129,990	143,880
13	4000 SHS Delta	4,000	110,640	110,640	199,600	233,920
14	1000 FB	500	41,324	17,495	131,090	102,625
15	2000 SHS INTC	2,000	39,079	39,079	93,860	119,700
16	3000 JPM	1,500	178,982	87,248	292,860	209,100
17	1000 SHS McDonalds	1,000	96,138	96,138	177,570	197,610
18	1270 SHS MSFT	1,000	31,474	24,727	128,994	157,700
19	3500 Oracle	3,500	104,020	104,020	158,025	185,430
20	3500 XPO	2,000	105,269	54,800	199,640	159,400
21	6000 XLF	6,000	66,784	66,784	142,920	184,680
22	4000SHS MetLife Inc	4,000	177,556	177,556	164,240	203,880
23	700SHS Netflix	700	65,039		187,362	
24	1800 SHS Procter & Gamble Co	1,800	150,227	150,227	165,456	224,820
25	1650 SHS US BankCorp DE	1,650	39,859		75,405	
26	2000 SHS Exact Sciences Corp	1,000	15,480	7,320	126,200	92,480
27	500 SHS Broadcom	500		144,446		158,010
28	1600 SHS Chevron	1,600		185,662		192,816
29	2000 SHS Coca-cola Company	2,000		95,280		110,700
30	1000 SHS Constellation Brands	1,000		189,534		189,750
31	3000 SHS D R HORTON	3,000		143,393		158,250
32	4500 SHS PFIZER	4,500		179,077		176,310
33	800 SHS United Health Group	800		193,077		235,184
34	2000 SHS Valero Energy Group	2,000		169,539		187,300
35	2500 SHS Verizon	2,500		139,400		153,500

Part II, Line 13 (990-PF) - Investments - Other

		2,825,208	2,939,207	2,939,207
	Asset Description	Basis of Valuation	Book Value Beg. of Year	Book Value End of Year
1	LIFE INSURANCE POLICY	FMV	2,825,208	2,939,207

Part IV (990-PF) - Capital Gains and Losses for Tax on Investment Income

		Amount		Long Term CG Distributions		Short Term CG Distributions		2,010,631		0		795,417		1,215,214		0		0		1,215,214	
Description of Property Sold	CUSIP #	Acquisition Method	Date Acquired	Date Sold	Gross Sales Price	Depreciation Allowed	Adjustments	Cost or Other Basis Plus	Expense of Sale	Gain or Loss	FMV as of 12/31/69	Adjusted Basis as of 12/31/69	Excess of FMV Over Adjusted Basis	Adj Basis or Losses	Gains Minus Excess FMV Over Adjusted Basis	Gains Minus Excess FMV Over Adjusted Basis	Adj Basis or Losses				
1 ABBOTT LABORATORIES	0028241100	D	7/19/2016	4/15/2019	116,674			62,650		54,024	0	0	0	0	54,024	0	0				
2 ABBOTT LABORATORIES	0028241100	D	7/19/2016	9/18/2019	83,909			41,767		42,142	0	0	0	0	42,142	0	0				
3 ABBVIE INC	002871109	D	7/19/2016	1/16/2019	42,944			31,692		11,252	0	0	0	0	11,252	0	0				
4 ABBVIE INV	002871109	D	7/19/2016	5/7/2019	117,028			95,078		21,950	0	0	0	0	21,950	0	0				
5 AMAZON	023135106	D	7/7/2015	5/7/2019	96,503			21,511		74,982	0	0	0	0	74,982	0	0				
6 AMAZON	023135106	D	7/7/2015	8/9/2019	91,298			21,511		69,787	0	0	0	0	69,787	0	0				
7 APPLE	037833100	D	6/12/2012	4/15/2019	198,479			80,288		118,191	0	0	0	0	118,191	0	0				
8 APPLE	037833100	D	6/12/2012	9/18/2019	44,420			16,058		28,362	0	0	0	0	28,362	0	0				
9 BANK AMERICA CORP	060505104	D	8/30/2011	8/9/2019	42,344			12,148		30,196	0	0	0	0	30,196	0	0				
10 BOEING	097023105	D	8/30/2011	4/15/2019	150,443			25,999		124,444	0	0	0	0	124,444	0	0				
11 BOEING	097023105	D	8/30/2011	5/7/2019	182,323			32,498		149,825	0	0	0	0	149,825	0	0				
12 CATERPILLAR	149123101	D	8/15/2013	8/9/2019	97,206			68,380		28,826	0	0	0	0	28,826	0	0				
13 EXACT SCIENCES	30063P105	D	10/27/2015	2/7/2019	86,809			8,160		78,649	0	0	0	0	78,649	0	0				
14 FACEBOOK	30303M102	D	5/21/2012	2/7/2019	66,491			13,996		52,495	0	0	0	0	52,495	0	0				
15 FACEBOOK	30303M102	D	7/21/2015	2/7/2019	16,623			9,833		6,790	0	0	0	0	6,790	0	0				
16 JPMORGAN CHASE	46625H100	D	4/9/2015	8/9/2019	109,248			61,156		48,092	0	0	0	0	48,092	0	0				
17 JPMORGAN CHASE	46625H100	D	4/9/2015	9/18/2019	59,104			30,578		28,526	0	0	0	0	28,526	0	0				
18 MICROSOFT	594918104	D	7/20/2010	8/9/2019	37,429			6,746		30,683	0	0	0	0	30,683	0	0				
19 NETFLIX	641101106	D	7/7/2015	9/27/2019	183,088			65,039		118,049	0	0	0	0	118,049	0	0				
20 US BANCORP	902973304	D	14/2008	1/16/2019	17,213			10,323		6,980	0	0	0	0	6,980	0	0				
21 US BANCORP	902973304	D	7/20/2010	1/16/2019	49,181			22,820		26,361	0	0	0	0	26,361	0	0				
22 US BANCORP	902973304	D	10/7/2010	1/16/2019	14,754			6,716		8,038	0	0	0	0	8,038	0	0				
23 XPO	983793100	D	3/17/2015	8/9/2019	34,994			23,070		11,924	0	0	0	0	11,924	0	0				
24 XPO	983793100	D	7/19/2016	9/18/2019	72,126			27,400		44,726	0	0	0	0	44,726	0	0				

Part VIII, Line 1 (990-PF) - Compensation of Officers, Directors, Trustees and Foundation Managers

	Name	Check "X" if Business	Street	City	State	Zip Code	Foreign Country	Title	Avg Hrs Per Week	Compensation	Benefits	Expense Account
1	LOU GENTINE		226 S Turtle Bay Road	ELKHART LAKE	WI	53020		DIRECTOR, PRES & TREASURER		0	0	0
2	MICHELE GENTINE		226 S Turtle Bay Road	ELKHART LAKE	WI	53020		DIRECTOR, VP & SECRETARY		0	0	0
3	THOMASA GENTINE		1623 Fieldstone Lane	HOWARDS GROVE	WI	53033		DIRECTOR		0	0	0
4	LOUIS P GENTINE II		W6607 Sandstone Lane	PLYMOUTH	WI	53073		DIRECTOR		0	0	0
5	KELLY M LEES		20 W Lane Ranch Rd	Sun Valley	ID	83333		DIRECTOR		0	0	0