	C	990-PF	[Retu	rn of Priv	vate	Founda	ation		1917	OMB N	o 1545-0047
Fo	m ~	79U-F F	or S		47(a)(1) Trust				ation	1914	9	@10
D		, ent of the Treasury			security numl					ublic.	ك ــــــــــــــــــــــــــــــــــــ	U 13
		Revenue Service	► Go to v	ww.irs gov	Form990PF for	rınstr	uctions and t	he latest in	format	ion	Open to Pu	ublic Inspection
Ţ	or ca	lendar year 2019	or tax year begir	nning			, 2019,	and end				, 20
Na	me of	foundation	f						1	A Employer iden		umber
<u> </u>	JOC	KEY BEING FA	MILY FOUNDAT	ION, LT	D.					20-39801	.56	
Ni	ımber	and street (or PO bo	ox number if mail is not o	lelivered to sti	eet address)			Room/suite	е І	3 Telephone nur	nber (see in:	structions)
	_	احوج										
	230	0 - 60TH STR	REET							(262)	553-32	73
Cı	ty or to	own, state or province	e, country, and ZIP or for	eign postal co	de							
									ľ	If exemption app pending, check h	lication is ere	▶∟
	KEN	OSHA, WI 531	.40									
G	Che	ck all that apply:	Initial retur	n	Initial re	eturn e	of a former p	ublic cha	rity	1. Foreign organi	izations, check	here ►
			Final return	ו	Amend	ed ret	turn			2 Foreign organ		
			Address ch	nange	Name o	change	е			85% test, cheo computation		
H	Che	ck type of organiz	zation: X Section	on 501(c)(3) exempt pri	vate f	oundation	مر	١.	If private founda	Man atatus	
ſ	⊟ s	ection 4947(a)(1) r	nonexempt charitable	trust	Other taxal	ble pr	ıvate foundat	tion O	۱ [۲	under section 50		
ī		market value o			ting method					If the foundation		
	end	of year (from Pa			r (specify)				l`	under section 50		
			778,140.		umn (d), must b	e on ca	ash basis)					
			venue and Expens		(a) Revenue ar							sbursements
		total of amounts i	ın columns (b), (c), ar	nd (d)	expenses per		(b) Net inve		(c)	Adjusted net income		r charitable purposes
		may not necessar column (a) (see in	rily equal the amount istructions))	5 111	books		110011					sh basis only)
	1	<u> </u>	ts, etc , received (attach sch	edule) .	749,	472.						
	2	Chack I if the	e foundation is not requ	ured to								
	3		ch Sch B	I.	72,	583.	7	2,583.				
	4	_	erest from securities		10,	538.	1	0,538.				-
	5a											
		Net rental income or										
ø			m sale of assets not on I	ine 10								
evenue	b	Gross sales price for a assets on line 6a										,
Š	7		come (from Part IV, I	ne 2) .								
ž	8	. •	oital gain									
	9	•	ons				-					-
	10 a	Gross sales less returnand allowances	ns					-				
	h	Less Cost of goods so									T	
		-	s) (attach schedule)				-					
	11		sch schedule) ATCH		122,4	137.						
	12	Total. Add lines 1	through 11		955,0	030.	8	3,121.				
	13	Compensation of office	cers, directors, trustees,	etc .		0.						
es	14	Other employee sa	alaries and wages .	[
šnš	14 15 16a b c 17 18 19 20		ployee benefits	Γ.					_			
ĝ	16a	•	schedule)						KE	CEIVED		
ω	ь		attach schedule)ATC		18,4	150.		2	_	VED		18,450
<u>≷</u>	С		fees (attach schedule						SFP	110-	70/	
ă	17								===	- 1 2020	<i>181</i>	
캺	18		dule) (see instruction			197.			_		9	
چ	19	•	ch schedule) and dep					<u> </u>	GD,	EN, UT	<u> </u>	
두	20									, 01		
۲	21		s, and meetings									
ĭ	21 22		ations									
ğ	23	•	ttach schedule)ATCI		10,9	88.						10,988
Ħ	23 24 25		nd administrative ex									
era		· -	gh 23		29,9							29,438
8	25		s, grants paid		. 607,8			-				607,820
	26	. •	oursements Add lines 24		637,7	755.		0.).	637,258
_	27	Subtract line 26 from										1
			er expenses and disbur	sements	317,2	275.						
	b	Net investment in	come (if negative, en	ter -0-)			8	3,121.				

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

Page 2

Par	Ш	Balance Sheets	Attached schedules and amounts in the	Beginning of year		End of	f year
		·	description column should be for end-of-year amounts only (See instructions)	(a) Book Value	(b) Book Value		(c) Fair Market Value
. 1	С	ash - non-interest-beari	ng				
2			cash investments	3,460,865.	3,778,1	40.	3,778,140
3		ccounts receivable					,,,
	L	ess allowance for doul	btful accounts ▶				· · · · · · · · · · · · · · · · · · ·
4	Р	Pledges receivable ▶					
	L	ess allowance for doul	btful accounts ▶				
5	G	Grants receivable					
6	R	Receivables due from o	officers, directors, trustees, and other				
	d	isqualified persons (att	tach schedule) (see instructions)				
7			eceivable (attach schedule) 🕨				
	L	ess allowance for doul	btful accounts ▶				
3 8	Ir	nventories for sale or us	e				
8 9 10	Р	repaid expenses and de	eferred charges				
10	a Ir	vestments - US and state	e govemment obligations (attach schedule)。.				
	b ir	nvestments - corporate	stock (attach schedule)				
			bonds (attach schedule)		 		
11	a	nvestments - land, buildings nd equipment basis		· · · · · · · · · · · · · · · · · · ·			
	(a	ess accumulated deprecia attach schedule)	*				
12			loans				
13		nvestments - other (atta and, buildings, and	ach schedule)				
'*	e	quipment basis ess accumulated deprecia	tion >				
	(a	attach schedule)					
15		other assets (describe					
16		•	completed by all filers - see the	2 460 065	2 770 1	ا ۱	2 770 140
+			age 1, item I)	3,460,865.	3,778,1	- U.	3,778,140
17		• •	ccrued expenses	<u> </u>			
18		• •				-	· · · · · · · · · · · · · · · · · · ·
19							<u></u>
19 20 21			rs, trustees, and other disqualified persons			+	
			tes payable (attach schedule)			•	<u> </u>
22	O	viner liabilities (describe)			+	<u>1</u>
23	т	otal liabilities (add line	s 17 through 22)	0.		0.	
\vdash			v FASB ASC 958, check here				
<u> </u>		nd complete lines 24,					
24		·	or restrictions	İ			
25			estrictions				<u> </u>
			ollow FASB ASC 958, check here				
5		nd complete lines 26 thro					
26	С	apital stock, trust princ	cipal, or current funds	3,460,865.	3,778,1	40.	
2 27		•	land, bldg , and equipment fund				
28		•	ulated income, endowment, or other funds				
29		•	I balances (see instructions)	3,460,865.	3,778,1	40.	
26 27 28 29 30			net assets/fund balances (see			T	
				3,460,865.	3,778,1	40.	
Part			nges in Net Assets or Fund Bala				
			alances at beginning of year - Part				
		•	d on pnor year's return)			1	3,460,865
			line 27a			2	317,275
						3	2 770 140
						4	3,778,140
5 D	ecre	eases not included in	line 2 (itemize)	P =	<u> </u>	5	2 770 140
6 T	otal	net assets or fund b	alances at end of year (line 4 minus	line 5) - Part II, column (I	b), line 29	6	3,778,140.

Part IV Capital Gains and Losses for Tax on Investment Income

	F
Page .	

. '		scribe the kind(s) of property sold (for rick warehouse, or common stock, 20		acquired P - Purchase D - Donation	(c) Date acquired (mo , day, yr)	(d) Date sold (mo , day, yr)
1 a						
b						
С					ļ	
d	· · · · · · · · · · · · · · · · · · ·			<u> </u>		
e	-			<u> </u>		
	(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale		(h) Gain or (lo ((e) plus (f) minu	
а						
b						
С				<u> </u>	·	
<u>d</u>			 			
ее	0	(h) and a	d by the foundation on 12/21/60			
	Complete only for assets sr	nowing gain in column (h) and owne			Gains (Col. (h) ga (k), but not less ti	
(i) FMV as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col (ı) over col (j), if any		Losses (from co	
a						
b						
<u> </u>						
d_				 		
е			gain, also enter in Part I, line 7	 		
Part For of f sec	Part I, line 8	Inder Section 4940(e) for Reprivate foundations subject to the	he section 4940(a) tax on net investigation and the section 4940(b) tax on net investigation and the best of the section and the best of the section and the s	ment inco		Yes X No
			ear; see the instructions before make	ng anv er	ntries	
•	(a)	(b)	(c)	<u>g</u> ,	(d)	
Calen	Base period years idar year (or tax year beginning in)	Adjusted qualifying distributions	Net value of nonchantable-use assets		Distribution ra (col (b) divided by	
	2018	655,630.	3,371,269.			0.194476
	2017	520,953.	3,063,262.			0.170065
	2016	211,646.	1,636,536.			0.129326
	2015	144,358.	1,192,520.			0.121053
	2014	110,663.	1,144,960.			0.096652
2	Total of line 1, column (c	d)		2		0.711572
			de the total on line 2 by 5 0, or by			
	the number of years the	foundation has been in existence	e if less than 5 years	3		0.142314
4	Enter the net value of no	ncharitable-use assets for 2019	from Part X, line 5	4	3,	484,640.
5	Multiply line 4 by line 3.			5		495,913.
	·					0.31
6	Enter 1% of net investme	ent income (1% of Part I, line 27b)	6		831.
				_		406 744
7	Add lines 5 and 6			7		496,744.
						637,258.
	Enter qualifying distributions 8 is equal to or g	ons from Part XII, line 4 reater than line 7, check the bo	x in Part VI, line 1b, and complete	8 that part		

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	Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 - see	<u>instri</u>	uction	<u>is)</u>
1a	Exempt operating foundations described in section 4940(d)(2), check here		1. 5	; •`]
. •	Date of ruling or determination letter (attach copy of letter if necessary - see instructions)	نــ		
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check			<u>831.</u>
	here X 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-)			001
3	Add lines 1 and 2			831.
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only, others, enter -0-)			0.
5	Tax based on investment income. Subtract line 4 from line 3 If zero or less, enter -0			831.
6	Credits/Payments			- 1
а	2019 estimated tax payments and 2018 overpayment credited to 2019 6a	~ ~ -	-	
b	Exempt foreign organizations - tax withheld at source			
С	Tax paid with application for extension of time to file (Form 8868) 6c			1
d	Backup Willing Circleously Willing			
7	Total credits and payments Add lines 6a through 6d			17.
8	Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached			848.
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed			
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid			
11 Par				
	rt VII-A Statements Regarding Activities		Yes	No
та	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it	1a	163	X
L	participate or intervene in any political campaign?			\vdash
		1 _b		l x
	Instructions for the definition	<u> </u>		1
	published or distributed by the foundation in connection with the activities		al Grade	
_	Did the foundation file Form 1120-POL for this year?	1c	25.04.17.00	X
	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year			
	(1) On the foundation ►\$			
	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed			
_	on foundation managers > \$			لـــا
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?	2		Х
	If "Yes," attach a detailed description of the activities			
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		3 4a		X
	Did the foundation have unrelated business gross income of \$1,000 or more during the year?			Х
		4a		
b	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	4a 4b		Х
b	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	4a 4b		Х
5	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	4a 4b		Х
5	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	4a 4b		Х
5	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	4a 4b	X	Х
6 7	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	4a 4b 5	X	Х
6 7	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	4a 4b 5		Х
6 7 8a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	4a 4b 5	X	Х
6 7 8a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	4a 4b 5		Х
6 7 8a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	4a 4b 5	X	Х
5 6 7 8a b	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	4a 4b 5	X	Х
5 6 7 8a b	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	4a 4b 5	X	Х
5 6 7 8a b	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	4a 4b 5 6 7	X	X

Par	st VII-A Statements Regarding Activities (continued)			
			Yes	No
. 1:1	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the			
• •	meaning of section 512(b)(13)? If "Yes," attach schedule See instructions	11		Х
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified			
	person had advisory privileges? If "Yes," attach statement See instructions	12		Х
13		13	Х	
	Website address WWW.JOCKEYBEINGFAMILY.COM			
14	The books are in care of ▶ ANNE ARBAS Telephone no ▶ 262-653	-327	3	
	Located at ▶2300 - 60TH STREET KENOSHA, WI ZIP+4 ▶ 53140			
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - check here		>	\Box
	and enter the amount of tax-exempt interest received or accrued during the year			
16	At any time during calendar year 2019, did the foundation have an interest in or a signature or other authority	,	Yes	No
-	over a bank, securities, or other financial account in a foreign country?	16		Х
	See the instructions for exceptions and filing requirements for FinCEN Form 114 If "Yes," enter the name of			
	the foreign country			
Pai	rt 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
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?			
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a			
	disqualified person?	l		
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? Yes X No			
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? Yes X No			
.4	(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)?			
4	(6) Agree to pay money or property to a government official? (Exception. Check "No" if the			
4				
٠,	termination of government service, in terminating within 50 days)			
b	olf 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	1b		Η.
	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			- <u>-</u> -
	were not corrected before the first day of the tax year beginning in 2019?	1c		
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 2019, did the foundation have any undistributed income (Part XIII, lines 6d and 6e) for tax year(s) beginning before 2019?	1		[]
	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)	i		ĺ
	(relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to	2b		
_	all years listed, answer "No" and attach statement - see instructions)			1
C	In the provisions of section 4542(a)(2) are being applied to any of the years listed in 2a, list the years here			
32	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise			
Ja	at any time during the year?	ŀ		
h	of "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			1
	foundation had excess business holdings in 2019)	3b		
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a		Х
	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its			
	charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2019?	4b		Х
	r.	00	n.DE	

Pa	Statements Regarding Activities	TOT WITHCIT FORTH	47 20 May be Net	un eu (conanueu)		,	-
5a	During the year, did the foundation pay or incur any amount					Yes	No
	(1) Carry on propaganda, or otherwise attempt to influe	ence legislation (section	on 4945(e))?	. Yes X No	>		
	(2) Influence the outcome of any specific public ele	ection (see section	4955), or to carry or				
	directly or indirectly, any voter registration drive?		<i>.</i>		>		{
	(3) Provide a grant to an individual for travel, study, or o	ther similar purposes		. Yes X No	>		
	(4) Provide a grant to an organization other than a						
	section 4945(d)(4)(A)? See instructions			. Yes X No	>		
	(5) Provide for any purpose other than religious, cl	naritable, scientific,	literary, or education	al	}		
	purposes, or for the prevention of cruelty to children	or animals?		. Yes X No)		
b	If any answer is "Yes" to 5a(1)-(5), did any of the	transactions fail to	qualify under the e	xceptions described in	ı <u></u>		
	Regulations section 53 4945 or in a current notice regain	ding disaster assistan	ce? See instructions.		5b		
	Organizations relying on a current notice regarding disa	ster assistance, check	here				
С	If the answer is "Yes" to question 5a(4), does the	foundation claim e	exemption from the t	ax			i i
	because it maintained expenditure responsibility for the				,		
	If "Yes," attach the statement required by Regulations s						
6a	Did the foundation, during the year, receive any fur		ectly, to pay premiur	ms			
	on a personal benefit contract?				·		
b	Did the foundation, during the year, pay premiums, dire				. 6b		Х
	If "Yes" to 6b, file Form 8870						1
7a	At any time during the tax year, was the foundation a p	arty to a prohibited ta	x shelter transaction?	. Yes X No	·	<u> </u>	
ь	If "Yes," did the foundation receive any proceeds or ha				. 7b	L	l
8	Is the foundation subject to the section 4960 tax on page	ment(s) of more that	ın \$1,000,000 ın				
	remuneration or excess parachute payment(s) during the	year?		. Yes X No			
Pa	rt VIII Information About Officers, Directo	rs, Trustees, Fou	ındation Manager	s, Highly Paid Emp	oloyees,		
1	and Contractors List all officers, directors, trustees, and foundat	ion managers and	their compensation	See instructions.			
<u></u>		(b) Title, and average	(c) Compensation	(d) Contributions to	(e) Expens	se accor	unt.
	(a) Name and address	hours per week devoted to position	(If not paid, enter -0-)	employee benefit plans and deferred compensation	other al	lowance	es [*]
ATC	н 6		0.	0.			0.
						,	· · · · · · · · · · · · · · · · · · ·
				<u> </u>			
2	Compensation of five highest-paid employees	(other than thos	se included on lin	e 1 - see instructi	ons). If n	one,	enter
	"NONE."	// - //		(d) Contributions to			
(a)	Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week	(c) Compensation	employee benefit plans and deferred	(e) Expens other al		
		devoted to position		compensation			
	NONE						
			_				
Tota	I number of other employees paid over \$50,000	· · · · · · · · · · · · · · · · · · ·		<u> </u>			
					Form 99)-PF	(2019)

Forn	n 990-PF (2019)	Page 7
Pa	Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid En and Contractors (continued)	nployees,
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
	NAME	
	NONE	
	al number of others receiving over \$50,000 for professional services	. ▶
	rt IX-A Summary of Direct Charitable Activities	
	ist the foundation's four largest direct charitable activities dunng the tax year. Include relevant statistical information such as the numb rganizations and other beneficianes served, conferences convened, research papers produced, etc.	Expenses
1	N/A	
		<u> </u>
2		
_		<u> </u>
3		<u> </u>
		—
4		
Do	rt 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	NONE	
		_
2		
_		_
	Il other program-related investments. See instructions	
3	NONE	-

Form **990-PF** (2019)

Page 8

Par	Minimum Investment Return (All domestic foundations must complete this part. Fore see instructions.)	ign tound	lations,
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes:		
а	Average monthly fair market value of secunties	1a	
	Average of monthly cash balances	1b	3,537,706.
	Fair market value of all other assets (see instructions)	1c	
d		1d	3,537,706.
е	Reduction claimed for blockage or other factors reported on lines 1a and		,
	1c (attach detailed explanation)		
2	Acquisition indebtedness applicable to line 1 assets	2	
3	Subtract line 2 from line 1d	3	3,537,706.
4	Cash deemed held for charitable activities. Enter 1 1/2 % of line 3 (for greater amount, see		
	instructions)	4	53,066.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3 Enter here and on Part V, line 4	5	3,484,640.
6	Minimum investment return. Enter 5% of line 5	6	174,232.
Pa	Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating four and certain foreign organizations, check here ▶ and do not complete this part.)	ndations	
1	Minimum investment return from Part X, line 6	1	174,232.
2 a	Tax on investment income for 2019 from Part VI, line 5 2a 831.		
b	Income tax for 2019. (This does not include the tax from Part VI).		
	Add lines 2a and 2b	2c	831.
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	173,401.
4	Recoveries of amounts treated as qualifying distributions		
5	Add lines 3 and 4	5	173,401.
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	173,401.
Pai	rt XII Qualifying Distributions (see instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:		
	Expenses, contributions, gifts, etc - total from Part I, column (d), line 26	1a	637,258.
þ	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:		
а	Suitability test (prior IRS approval required)	3a	. <u> </u>
b	, , , , , , , , , , , , , , , , , , , ,	3b	
4	Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4	4	637,258.
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income.		
	Enter 1% of Part I, line 27b. See instructions	5	831.
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	636,427.
	Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating for the section 4940(e) reduction of tax in those years.	Iculating v	whether the foundation

Page **9**

Рa	irt XIII Undistributed Income (see instr	ructions)			
		(a)	(b)	(c)	(d)
1	Distributable amount for 2019 from Part XI,	Corpus	Years prior to 2018	2018	2019
	line 7				173,401.
2	Undistributed income, if any, as of the end of 2019				,
а	Enter amount for 2018 only				١
	Total for pnor years 20 17 ,20 16 ,20 15		_		
	Excess distributions carryover, if any, to 2019				1
а	From 2014 53,467.				
	From 2015 115,384.				
	From 2016				1
	From 2017	•	* *	~	1
	From 2018 488,061.				!
	Total of lines 3a through e	1,484,558.			
	Qualifying distributions for 2019 from Part XII,				
	line 4 ▶ \$ 637,258.				ĺ
а	Applied to 2018, but not more than line 2a				i
	•				
ŭ	Applied to undistributed income of prior years (Election required - see instructions)				
	Treated as distributions out of corpus (Election				i
C	required - see instructions)			ı	
d	Applied to 2019 distributable amount				173,401.
	Remaining amount distributed out of corpus	463,857.			1
	Excess distributions carryover applied to 2019	···			
	(If an amount appears in column (d), the same amount must be shown in column (a))				
_	` , , ,				i
U	Enter the net total of each column as indicated below:				
а	Corpus. Add lines 3f, 4c, and 4e Subtract line 5	1,948,415.			}
	Prior years' undistributed income Subtract				1
-	line 4b from line 2b				\
С	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				
а	Subtract line 6c from line 6b Taxable	-			
ŭ	amount - see instructions]
9	Undistributed income for 2018 Subtract line				
	4a from line 2a Taxable amount - see instructions				
	Hadatahada asasas far 2010. Cubbash lasa				
T	Undistributed income for 2019 Subtract lines 4d and 5 from line 1. This amount must be				
	distributed in 2020				
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				1
	required - see instructions)				
8	Excess distributions carryover from 2014 not		-		
	applied on line 5 or line 7 (see instructions)	53,467.			
9	Excess distributions carryover to 2020.				
	Subtract lines 7 and 8 from line 6a	1,894,948.			
0	Analysis of line 9				
а	Excess from 2015 115,384.				
b	Excess from 2016 459, 466.				
C	Excess from 2017 368, 180 .				
d	Excess from 2018 488,061.				-
8	Excess from 2019 463,857.				

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

Check here ▶ X 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.

JSA 9E1490 1 000

Page **11**

Form 990-PF (2019)				Page 11
Part XV Supplementary Information	(continued)			
3 Grants and Contributions Paid Du Recipient Name and address (home or business)	ring the Year or App	roved for	Future Payment	
Recipient	show any relationship to	status of	Purpose of grant or contribution	Amount
Name and address (home or business)	or substantial contributor	recipient	-	
a Paid during the year				
ATCH 7				
ATOM /				
		ĺ		
•				
Total		I	▶ 3a	607,820.
b Approved for future payment				

	<u> </u>			
Total			▶ 3b	1

Page	1	2

Part XVI	<u> </u>	lucina Act	ivities			Page 12
	amounts unless otherwise indicated	, 	ated business income	Excluded by	y section 512, 513, or 514	(e)
	n service revenue	(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	Related or exempt function income (See instructions)
-	`					
b						
d						
f						
•	and contracts from government agencies					
	ship dues and assessments			14	72,583.	
	on savings and temporary cash investments			14	10,538.	
	ds and interest from securities tal income or (loss) from real estate					
	-financed property					
	debt-financed property	[
	al income or (loss) from personal property					
7 Other in	ivestment income					
8 Gain or (loss) from sales of assets other than inventory					
9 Net inco	ome or (loss) from special events · · ·			-		·
10 Gross p	rofit or (loss) from sales of inventory.			01	122,437.	
	venue a GOLF/GALA INCOME			- 1 01	122,437.	
				-		
e						
	Add columns (b), (d), and (e)				205,558.	
	dd line 12, columns (b), (d), and (e)				13	205,558.
	heet in line 13 instructions to verify calc	ulations)	"			
Part XVI	B Relationship of Activitie	s to the A	ccomplishment of l	Exempt Purp	ooses	
Line No.	Explain below how each activit	y for which	n income is reported	ın column (e	e) of Part XVI-A contribu	ted importantly to the
▼	accomplishment of the foundation	on's exemp	t purposes (other than	n by providing	funds for such purposes). (See instructions)
11A	THE FOUNDATION HOSTED	ላ ምጪር 1	AV COLE OUTTNO	ייי און איי	AFFFD	
			FOR ITS EXEMP			
	BI VOLUNIEERS, TO RAI	JE MONE.	TON 115 EXEM	1 TORTOBE	<u> </u>	
		<u> </u>	 			
			<u> </u>			<u> </u>
		-				<u> </u>
					. <u></u>	
		_				
	-					
					·	
<i>an</i>				 -		
				· ·		

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

	organ Transi (1) Ça (2) Ot Other (1) Sa (2) Pu	e organization ction 501(c) izations? fers from the resh	eporting to a none sets from	foundation to	501(c)(3 o a noncha	aritable exe	ations) or empt orgar tion	in sec	of.	527, re	elating	to political	1a(2) 1b(1) 1b(2)		- X X X X X
d 	(5) Lo (6) Pe Sharin If the value value	eimbursement ans or loan guar erformance of s ag of facilities, e answer to an of the goods, in any transac	arantees services equipme y of the other as	or members ent, mailing lis above is "Ye ssets, or serv sharing arran	hip or functits, other a es," completes given by gement, s	draising soling ssets, or plete the foliation by the residue.	icitations and employed lowing so porting for lumn (d) the	ees chedule. undation		imn (b) she found	should a	always show eceived less assets, or s	1b(5) 1b(6) 1c v the than service	fair m fair m s rece	arket eived.
(a) L	ne no	(b) Amount inv	olved	(c) Name of	nonchantable	e exempt orga	inization	(d) Do		on of trans	fers, trans	actions, and sha	inng arra	ingeme	nts
	descri	foundation di	501(c) (other than se										es X] No
<u>b</u>	If "Yes	s," complete th		ing schedule		# T					(-) D				
		(a) Name of org	yanızatıon	<u> </u>	·	(b) Type of or	ganization				(c) Desch	ption of relation	euib		
Sigr	corre	r penalties of perjur ct, and complete Dec Market Dec	ctaration of p	that I have exampreparer (other than	taxpayer) is bas	8-27	ation of which	oreparer has	s any kn	owledge	to the best	May the IR	discuss	s this	
Paid	- ' I	Print/Type prep		e	Prepare	er's signature	AHH	4	٦	ate		""	PTIN		_
	oarer	KEVIN HOD	GES ► MIL	LER, COOP	ER & CC	D., LTD?	ey HIII		L	8-18-2020	Firm's E	. 26 0	P007 39737		ა
Use	Only	Firm's address	-	1 LAKE CO	OK ROAD	O, SUITE	400	60	0015		Phone n	o 847-2	05-50	000	

Schedule B

(F.orm 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

2019

Employer identification number Name of the organization JOCKEY BEING FAMILY FOUNDATION, LTD. 20-3980156 Organization type (check one): Filers of: Section: 501(c)() (enter number) organization Form 990 or 990-EZ 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 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, 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 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

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

Schedule B (Form 990, 990-EZ, or 990-PF) (2019)

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)

Employer Identification number 20-3980156

Part I	Contributors (see instructions). Use duplicate copies of F	Part I if additional space is ne	eeded.
(a) No.	. (b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
	JOCKEY INTERNATIONAL, INC. 2300 60TH STREET KENOSHA, WI 53140	\$141,592.	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	BAKER TILLY VIRCHOW KRAUSE, LLP 2300 60TH STREET KENOSHA, WI 53140	\$14,175.	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_	OWEN & SUSAN ROBERTS 2300 60TH STREET KENOSHA, WI 53140	\$23,575.	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_	GENERAL PUBLIC - GOLF/GALA 2300 60TH STREET KENOSHA, WI 53140	\$109,123.	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
5	ED & PENNY EMMA 2300 60TH STREET KENOSHA, WI 53140	\$6,000.	Person Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
6_	STEPHANIE & TIM CONNOLLY 2300 60TH STREET KENOSHA, WI 53140	\$6,645.	Person Payroll Noncash (Complete Part II for noncash contributions)

Employer identification number 20-3980156

Part I	Contributors (see instructions). Use duplicate copies of	f Part I if additional space is ne	eeded.
(a) No.	. (b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
7	GENERAL PUBLIC 2300 60TH STREET KENOSHA, WI 53140	_ \$260,557.	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
8	VICTORIA ARLEN 2300 60TH STREET KENOSHA, WI 53140	\$	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
9	DAVID & FRANCESCA BARNES 2300 60TH STREET KENOSHA, WI 53140	\$ 8,350.	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
10	RICHARD BROWN 2300 60TH STREET KENOSHA, WI 53140	\$\$	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
11	ASHLEE & CHRIS CLARKE 2300 60TH STREET KENOSHA, WI 53140	\$\$ 27,200.	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
12	DONALD DRIVER 2300 60TH STREET KENOSHA, WI 53140	\$	Person X Payroll Noncash (Complete Part II for noncash contributions)

Employer identification number 20-3980156

Part I	Contributors (see instructions). Use duplicate copies of	of Part I if additional space is ne	eeded.
(a) No.	' (b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
13	DAVE DYSON 2300 60TH STREET KENOSHA, WI 53140	\$8,050.	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
14	ULINE 2300 60TH STREET KENOSHA, WI 53140	\$10,500.	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
15	MICHAEL LAPIDUS 2300 60TH STREET KENOSHA, WI 53140	_ \$9,250.	Person Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
16	GRAND GENEVA 2300 60TH STREET KENOSHA, WI 53140	\$10,550.	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
17	TOM MILLER 2300 - 60TH STREET KENOSHA, WI 53140	\$12,700.	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
18	DLA PIPER 2300 60TH STREET KENOSHA, WI 53140	\$	Person X Payroll Noncash (Complete Part II for noncash contributions)

Employer identification number 20–3980156

Part I	Contributors (see instructions). Use duplicate copies of	of Part I if additional space is ne	eeded.
(a) No.	` (b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
19	OFFSITE, LLC 2300 60TH STREET KENOSHA, WI 53140	\$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
20_	BMO 2300 60TH STREET KENOSHA, WI 53140	\$\$	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
	VICKI SHAMION 2300 - 60TH STREET KENOSHA, WI 53140	_ \$	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
22	MICHAEL STIPE 2300 60TH STREET KENOSHA, WI 53140	\$\$	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
23	DEBRA & RICK WALLER 2300 60TH STREET KENOSHA, WI 53140	\$13,870.	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
24	ITERATE STUDIO, INC. 2300 60TH STREET KENOSHA, WI 53140	\$ 5,500.	Person X Payroll Noncash (Complete Part II for noncash contributions)

Employer identification number 20-3980156

Part I	Contributors (see instructions). Use duplicate con	pies of Part I if additional space is no	eeded.
(a) No.	` (b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
25	MILWAUKEE ADMIRALS 2300 60TH STREET KENOSHA, WI 53140	\$5,685.	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
		 \$	Person Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
			Person Payroil Noncash (Complete Part II for noncash contributions)

Employer identification number

			980156
Part II	Noncash Property (see instructions). Use duplicate copies	of Part II if additional space is ne	eded.
(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

Schedule B	(Form 990, 990-EZ, or 990-PF) (2019)			Page 4
	rganization JOCKEY BEING FAMILY FO	UNDATION, LTD.		Employer identification number
			• ••	20-3980156
Part III	Exclusively religious, charitable, etc. (10) that total more than \$1,000 for the following line entry. For organizati contributions of \$1,000 or less for the Use duplicate copies of Part III if additional contributions of \$1,000 or less for the Use duplicate copies of Part III if additional contributions of \$1,000 or less for the Use duplicate copies of Part III if additional contributions of \$1,000 or less for the Use duplicate copies of Part III if additional contributions of \$1,000 or less for the Use duplicate copies of Part III if additional contributions of \$1,000 or less for the Use duplicate copies of Part III if additional contributions of \$1,000 or less for the Use duplicate copies of Part III if additional contributions of \$1,000 or less for the Use duplicate copies of Part III if additional contributions of \$1,000 or less for the Use duplicate copies of Part III if additional contributions of \$1,000 or less for the Use duplicate copies of Part III if additional contributions of \$1,000 or less for the Use duplicate copies of Part III if additional contributions of \$1,000 or less for the Use duplicate copies of Part III if additional contributions of \$1,000 or less for the Use duplicate copies of Part III if additional contributions of \$1,000 or less for the Use duplicate copies of Part III if additional contributions of \$1,000 or less for the Use duplicate copies of Part III if additional contributions of \$1,000 or less for the Use duplicate copies of Part III if additional contributions of \$1,000 or less for the Use duplicate copies of Part III if additional contributions of \$1,000 or less for the Use duplicate copies of Part III if additional contributions of \$1,000 or less for the Use duplicate copies of Part III if additional contributions of \$1,000 or less for the Use duplicate copies of Part III if additional contributions of \$1,000 or less for the Use duplicate copies of \$1,000 or less for the Use duplicate copies of \$1,000 or less for the Use duplicate copies of \$1,000 or less for the Use dup	the year from any one one one completing Part III, eo year. (Enter this inform	contributor. (enter the total	Complete columns (a) through (e) and of exclusively religious, charitable, etc.
(a) No. from		<u> </u>		(d) Description of how gift is held
Part I	(b) Purpose of gift	(c) Use of gift	·	(a) Description of now girt is neid
				
				
				
		(e) Transfer of g	ıift	<u> </u>
		(0) 174113101 01 9	,	
	Transferee's name, address, ar	nd ZIP + 4	Relatio	nship of transferor to transferee
(a) Na				
(a) No. from	(b) Purpose of gift	(c) Use of gift		(d) Description of how gift is held
Part 1				
				
		(e) Transfer of g	jift	
			Dalada	
	Transferee's name, address, ar	10 ZIP + 4	Relation	nship of transferor to transferee
•				
•			-	
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift		(d) Description of how gift is held
		(e) Transfer of g		
		(e) Transfer of g	jiit	
	Transferee's name, address, ar	nd ZIP + 4	Relatio	nship of transferor to transferee
(a) No.				
from Part I	(b) Purpose of gift	(c) Use of gift		(d) Description of how gift is held
raiti				
		(e) Transfer of g	nift	
		(3) 114113161 01 9	,	
	Transferee's name, address, ar	nd ZIP + 4	Relatio	nship of transferor to transferee
			· · · · · · · · · · · · · · · · · · ·	

DESCRIPTION

GOLF/GALA INCOME

2019 FORM 990-PF JOCKEY BEING FAMILY FOUNDATION, LTD.

20-3980156

ATTACHMENT 1

FORM 990PF, PART I - OTHER INCOME

REVENUE

AND

EXPENSES

PER BOOKS

122, 437. 122, 437.

TOTALS

V 19-6F

ATTACHMENT 2

		7
		NET
	REVENUE	AND
FORM 990PF, PART I - ACCOUNTING FEES		

		CHARITABLE	PURPOSES	18,450.	18,450.	
	ADJUSTED	· NET	INCOME			
	NET	INVESTMENT	INCOME			
REVENUE	AND	EXPENSES	PER BOOKS	18,450.	18,450.	
			DESCRIPTION	MILLER, COOPER & CO., LTD.	TOTALS	

20-3980156

FORM 990PF, PART I - TAXES	LAXES				
DESCRIPTION		REVENUE AND EXPENSES PER BOOKS	NET INVESTMENT INCOME	ADJUSTED NET INCOME	CHARITABLE PURPOSES
FEDERAL EXCISE TAX		497.			
	TOTALS	497.			

ATTACHMENT 4

8143DK 4116 V 19-6F

C.	
FXPFNSFS	
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CHARITABLE	PURPOSES 8,759. 2,229.	10,988.
ADJUSTED NET	INCOME	
NET INVESTMENT	INCOME	
REVENUE AND EXPENSES	PER BOOKS 8,759. 2,229.	10,988.
		TOTALS
	DESCRIPTION MISCELLANEOUS FEES STATE FILING FEES	

ATTACHMENT 5

FORM 990PF, PART VII-A, LINE 8A - STATES

AL, CA, CO, CT, DC, FL, GA, IL, KS, KY, ME, MD, MA, MI, MN, NH, NJ, NM, NY, NC, ND, OH, OK, OR, PA, SC, TN, UT, VA, WA, WI,

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JOCKEY BEING'FAMILY FOUNDATION, LTD.

ENT 6	EXPENSE ACCT AND OTHER ALLOWANCES	·	·	ċ	·o	0
ATTACHMENT	CONTRIBUTIONS TO EMPLOYEE BENEFIT PLANS	.0	.0	Ö	.0	0
	COMPENSATION	.0		.0	.0	0.
OFFICERS, DIRECTORS, AND TRUSTEES	TITLE AND AVERAGE HOURS PER WEEK DEVOTED TO POSITION	DIRECTOR/PRESIDENT/TREASURER 1.00	DIRECTOR/VICE PRESIDENT 2.00	SECRETARY 1.00	DIRECTOR/VICE PRESIDENT 2.00	GRAND TOTALS
FORM 990PF, PART VIII - LIST OF OFFICERS,	NAME AND ADDRESS	 DEBRA STEIGERWALDT WALLER 2300 - 60TH STREET KENOSHA, WI 53140	ANNE ARBAS , 2300 - 60TH STREET KENOSHA, WI 53140	NOREEN WILKINSON 2300 - 60TH STREET KENOSHA, WI 53140	WILLIAM WALLER 2300 - 60TH STREET KENOSHA, WI 53140	

20-3980156

FORM 990PF, PART XV - GRANTS AND CONTRIBUTIONS PAID DURING THE YEAR

ATTACHMENT 7

	RELATIONSHIP TO SUBSTANTIAL CONTRIBUTOR		
RECIPIENT NAME AND ADDRESS	AND FOUNDATION STATUS OF RECIPIENT	PURPOSE OF GRANT OR CONTRIBUTION	- AMOUNT
NORTH AMERICAN COUNCIL ON ADOPTABLE CHILDREN 970 RAYMOND AVENUE, SUITE 106 ST. PAUL, MN 55114	N/A PC	SUPPORT TO DEVELOP AND PERFORM THE FOLLOWING PROGRAMS PARENT LEADERSHIP DEVELOPMENT TO ENHANCE SUPPORT TO ADOPTIVE FAMILIES & CAPACITY BUILDING FOR YOUNG PEOPLE WHO HAVE EXPERIENCED FOSTER CARE AND ADOPTION	279,820
THE ADOPTION COUNCIL OF CANADA 416-2249 CARLING AVE OTTAWA ONTARIO CANADA K2B 7E9	N/A PC	SUPPORT TO DEVELOP AND PERFORM THE FOLLOWING PROGRAMS 2019 JOURNEY HOME PROJECT, YOUTH SPEAK OUT AND DIGITAL STORY TELLING INITIATIVE, & BEST PRACTICES STRATEGIES	000'06
CENTER FOR ADOPTION SUPPORT AND EDUCATION 4000 BLACKBURN LANE, SUITE 260 BURTONSVILLE, MD 20866	N/A PC	SUPPORT TO DEVELOP AND PERFORM THE FOLLOWING PROGRAMS: 2019 TRAINING FOR ADOPTION COMPETENCY (TAC) WISCONSIN, STRENGTHENING YOUR FAMILY WEBINAR SERIES, 2019 KIDS' ADOPTION NETWORK CONFERENCE (KAN)	142,000.
CONGRESSIONAL COALITION ON ADOPTION INSTITUTE 311 MASSACHUSETTS AVE NE WASHINGTON, DC 20002	N/A PC	SUPPORT TO DEVELOP AND PERFORM THE FOLLOWING PROGRAMS, PROGRAM, ANGELS IN ADOPTION PROGRAM, 2019 NATIONAL ADOPTION DAY, CONGRESSIONAL RESOURCE PROGRAM, 6 20/20 VISION PROGRAM	50,000
CREATING A FAMILY, INC. 874 LAMBS CREEK RD BREVARD, NC 28712	N/A PC	SUPPORT TO DEVELOP AND PERFORM THE FOLLOWING PROGRAMS SUPPORT GROUP CURRICULUM, JOCKEY BEING FAMILY ADOPTION NEWSLETTER, JOCKEY BEING FAMILY WEBSITE AND PARENT RESOURCE PORTAL, CREATING A FAMILY PODCAST SUPPORT, & ADOPTED AND FOSTERED	46,000

TOTAL CONTRIBUTIONS PAID

SCHOLARSHIPS

607,820

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ATTACHMENT 1

PENALTY COMPUTATION DETAIL - FORM 2220		-	
DATE PD UNDERPAYMENT BEG.DATE END DATE	DAYS	96	PENALTY
QUARTER 1, RATE PERIOD 1 (05/15/2019 - 06/30/2019)	=		
124. 05/15/2019 06/30/2019 TOTAL TO FORM 2220, LINE 22, COLUMN A	46	6	<u> </u>
QUARTER 1, RATE PERIOD 2 (06/30/2019 - 12/31/2019)	<u></u>		
124. 06/30/2019 12/31/2019 TOTAL TO FORM 2220, LINE 24, COLUMN A	184	5	<u>3.</u> <u>3.</u>
QUARTER 1, RATE PERIOD 3 (12/31/2019 - 05/15/2020)	_		
124. 12/31/2019 05/15/2020 TOTAL TO FORM 2220, LINE 26, COLUMN A	136	5	2.
QUARTER 2, RATE PERIOD 1 (06/17/2019 - 06/30/2019)	_		
124. 06/17/2019 06/30/2019 TOTAL TO FORM 2220, LINE 22, COLUMN B	13	6	
QUARTER 2, RATE PERIOD 2 (06/30/2019 - 12/31/2019)	=		
124. 06/30/2019 12/31/2019 TOTAL TO FORM 2220, LINE 24, COLUMN B	184	5	<u>3.</u> <u>3.</u>
QUARTER 2, RATE PERIOD 3 (12/31/2019 - 05/15/2020)			
124. 12/31/2019 05/15/2020 TOTAL TO FORM 2220, LINE 26, COLUMN B	136	5	2. 2.
QUARTER 3, RATE PERIOD 2 (09/16/2019 - 12/31/2019)			
124. 09/16/2019 12/31/2019 TOTAL TO FORM 2220, LINE 24, COLUMN C	106	5	<u>2.</u> <u>2.</u>
QUARTER 3, RATE PERIOD 3 (12/31/2019 - 05/15/2020)			
124. 12/31/2019 05/15/2020 TOTAL TO FORM 2220, LINE 26, COLUMN C	136	5	<u>2.</u> <u>2.</u>
QUARTER 4, RATE PERIOD 2 (12/16/2019 - 12/31/2019)	=		
125. 12/16/2019 12/31/2019 TOTAL TO FORM 2220, LINE 24, COLUMN D	15	5	
QUARTER 4, RATE PERIOD 3 (12/31/2019 - 05/15/2020)	=		
125. 12/31/2019 05/15/2020 TOTAL TO FORM 2220, LINE 26, COLUMN D	136	5	2.
24.42== 444.6			ATTACHMENT 1

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