**Return of Private Foundation** 

OMB No 1545-0047

2019

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

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

Check type of organization:   Section 501(c)(3) exempt private foundation   Section 4947(a)(1) nonexempt charatable trust   Other taxable private foundation   Fair market value of all assets at end of year (from Part II, col. (c), line 16)   \$2, 345,308   Part II   Analysis of Revenue and Expenses (The total of amounts in column (b) (ese instructions))   Part II   Analysis of Revenue and Expenses (The total of amounts in column (b) (ese instructions))   Part II   Analysis of Revenue and Expenses (The total of amounts in column (b) (ese instructions))   Part II   Analysis of Revenue and Expenses (The total of amounts in column (b) (ese instructions))   Part II   Analysis of Revenue and Expenses (The total of amounts in column (b) (ese instructions))   Part II   Analysis of Revenue and Expenses (The total of amounts in column (b) (ese instructions))   Part II   Analysis of Revenue and Expenses (The total of amounts in column (b) (ese instructions))   Part II   P		Inter	nal Rever	nue Service	► Go to	www.irs.gov/Form990	PF for instruction	s and 1	the lates	t informati	on. Open	to Public Inspection
THE COCS FOUNDATION OF KIMBERLY, INC   Number and size tip P.O. bor number if mail a roll delivered to size address)   Reconvolute   104 MULGAERT MAY   Cry or town, state or province, country, and ZiP or foreign postal code   Combined Locks W   541.3   Check all that apply   Initial return   Andreas change   Name change   Crombined Locks W   541.3   Check all that apply   Initial return   Andreas change   Name change   Crombined Locks W   541.3   Check all that apply   Initial return   Andreas change   Name change   Crombined Locks W   541.3   Check type of organization:   Section 631(6)(3) exempt private foundation   Section 4947(a)(1) nonexempt chantable trust   Other traxable provide foundation   Furnation of the control of th		For	calen	dar year 20	)19 or tax year be	ginning		, 2019	9, and	ending		, 20
Number and sizest (of P.O. box number if mails not delivered to streat address)    Name		Nam	ne of fou	ndation					_	A Employe	r identification numb	er
Number and street (or P O. Dax number, firmals not delivered to street address)   Room/suite   B Teephron country, and after the street address   Room/suite   B Teephron country, and after the street   Room   R		ΤH	E _CO	PS FOUND	ATION OF KIM	BERLY, INC				39-1	633247	
Cyb of bown, state or province, country, and 2PP of foreign postal code  Combined Locks W 15 4313  G Check all that apply:   Initial return   Amended return							ess)	Room	/suite	<b>B</b> Telephor	e number (see instruc	tions)
Cyb of bown, state or province, country, and 2PP of foreign postal code  Combined Locks W 15 4313  G Check all that apply:   Initial return   Amended return		10	4 WU	LGAERT W	AY					(920)	766-0296	
Combined_Locks WIT 54113  G Check all that apply:		City	or town,	state or provin	ice, country, and ZIP or	foreign postal code				C If exempt	ion application is pend	ding, check here ►
G Check all that apply:   Initial return   Inmal return of a former public charity   1. Foreign organizations, chick here   2. Foreign organizations meeting the 85% test, and offices change   Name c		Со	mbin	ed Locks	WI 54113							
Section 4947(a)(1) nonexempt charitable trust ☐ Other taxable private foundation and section 507(b)(1)(4), check here and of year (from Part II, col. (c), line 16) ► \$ 2,345;308. Part II column (d), must be on cash basis.  Part II Analysis of Revenue and Expenses (five total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (s), gifts, grants, etc., received (attach schedule)  1 Contributions, gifts, grants, etc., received (attach schedule) 2 Check ► ☑ if the foundation is not required to attach sch. B. 3 Interest on savings and temporary cash investments 4 Dividends and interest from securities 5a Gross rents 5 Net rental income or (loss) 6 Net gain or (loss) from sale of assets not on line 10 4 2, 742. ** 7 Capital gain net income (from Part IV, line 2) 8 Net short-term capital gain 10a Gross sales pince for all assets on line 6a 1 89 553 PECEIVED  9 Income modifications 10a Gross sales less returns and allowances 10b Less: Cost of goods sold 10 Gross sales pince for all assets on line 6a 1 89 553 PECEIVED  9 Income modifications 10a Gross sales less returns and allowances 10b Less: Cost of goods sold 10 Gross sales less returns and allowances 10a Gross sales less returns and allowances 10b Less: Cost of goods sold 10 Gross sales less returns and allowances 10a Gross sales less returns and allowances 10b Less: Cost of goods sold 10 Gross sales less returns and allowances 10b Less: Cost of goods sold 10 Gross sales less returns and allowances 10b Less: Cost of goods sold 10 Gross sales less returns and allowances 10 Gross profit or (loss) (attach schedule) 10 Corporation of officers, directors, trustees, etc. 10 Corporation of goods sold 10 Gross sales less returns and allowances 10 Corporation of goods sold 10 Gross sales less returns and allowances 10 Corporation of goods sold 11 Corporation of goods sold 12 Corporatio	_					ırn 🔲 İnitial r	eturn of a former	public	charity	D 1. Foreigi	n organizations, check	here . ▶ 🗌
Section 4947(a)(1) nonexempt charitable trust ☐ Other taxable private foundation and section 507(b)(1)(4), check here and of year (from Part II, col. (c), line 16) ► \$ 2,345;308. Part II column (d), must be on cash basis.  Part II Analysis of Revenue and Expenses (five total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (s), gifts, grants, etc., received (attach schedule)  1 Contributions, gifts, grants, etc., received (attach schedule) 2 Check ► ☑ if the foundation is not required to attach sch. B. 3 Interest on savings and temporary cash investments 4 Dividends and interest from securities 5a Gross rents 5 Net rental income or (loss) 6 Net gain or (loss) from sale of assets not on line 10 4 2, 742. ** 7 Capital gain net income (from Part IV, line 2) 8 Net short-term capital gain 10a Gross sales pince for all assets on line 6a 1 89 553 PECEIVED  9 Income modifications 10a Gross sales less returns and allowances 10b Less: Cost of goods sold 10 Gross sales pince for all assets on line 6a 1 89 553 PECEIVED  9 Income modifications 10a Gross sales less returns and allowances 10b Less: Cost of goods sold 10 Gross sales less returns and allowances 10a Gross sales less returns and allowances 10b Less: Cost of goods sold 10 Gross sales less returns and allowances 10a Gross sales less returns and allowances 10b Less: Cost of goods sold 10 Gross sales less returns and allowances 10b Less: Cost of goods sold 10 Gross sales less returns and allowances 10b Less: Cost of goods sold 10 Gross sales less returns and allowances 10 Gross profit or (loss) (attach schedule) 10 Corporation of officers, directors, trustees, etc. 10 Corporation of goods sold 10 Gross sales less returns and allowances 10 Corporation of goods sold 10 Gross sales less returns and allowances 10 Corporation of goods sold 11 Corporation of goods sold 12 Corporatio	63				☐ Final retu	ırn 🗌 Amend	ded return			2 Foreign	organizations meetin	a the 85% test
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## A contributions, gifts, grants etc., received (attach schedule)    1		_		5) ▶ \$	2,345;308.	(Part I, column (d), mu	ust be on cash bas	sis.)				
1   Contributions, gifts, grants, etc., received (attach schedule)   39,589.		Pa	art I				(a) Revenue	and	(b) Not	invoctment	(a) Adjusted not	(d) Disbursements
1					, ,, , ,		al expenses books					purposes
2									. <u></u>			(cash basis only)
The part of the control regiment of the part of the pa			1			· · · · · · · · · · · · · · · · · · ·						
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Sa   Gross rents   b   Net rental income or (loss)   6   Net gain or (loss) from sale of assets not on line 10   42,742   1   1   1   1   1   1   1   1   1						=	nts 64,	328.		62 <b>,</b> 981.	64,328.	!
Net rental income or (loss)  Net gain or (loss) from sale of assets not nine 10  Gross sales price for all assets on line 6a  189,583 PECEIVED  Net short-term capital gain  Income modifications  Inc			ı .			securities						
Second   S							·	<u>,</u>		<del>.,</del>		<u></u>
Capital gain net income (from Part IV, line 2) Reference in the state of the state		41				<u> </u>	1 10				0 40	
9 Income modifications 10a Gross sales less returns and allowances b Less: Cost of goods sold C Gross profit or (loss) (attach schedule) 11 Other income (attach schedule) See. Stmt 12 Total. Add lines 1 through 11 13 Compensation of officers, directors, trustees, etc. 14 Other employee salaries and wages 15 Pension plans, employee benefits 16a Legal fees (attach schedule) b Accounting fees (attach schedule) 17 Interest 18 Taxes (attach schedule) (see instructions) See. Stmt 19 Depreciation (attach schedule) and depletion 20 Occupancy 21 Travel, conferences, and meetings 22 Printing and publications 23 Other expenses (attach schedule) See. Stmt 24 Total operating and administrative expenses. Add lines 13 through 23 25 Contributions, gifts, grants paid 26 Total expenses and disbursements. Add lines 24 and 25 27 Subtract line 26 from line 12: a Excess of revenue over expenses and disbursements  10 GDEN, UT 1		ıne		-		r assets not on line 1	0 42,	/42.				
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Total compensation of officers, directors, trustees, etc.  Other molecular and allowances of the second of the sec	73	ш.			, -	· · · · ·  호	MAY DE 20	120		5 (		<del> </del>
b Less: Cost of goods sold	20.		l .				WAI-EE TO ZE	JZU.		14		<del> </del>
C Gross profit or (loss) (attach schedule)  11 Other income (attach schedule) See. Stmt  12 Total. Add lines 1 through 11  13 Compensation of officers, directors, trustees, etc.  14 Other employee salaries and wages  15 Pension plans, employee benefits  16a Legal fees (attach schedule)  b Accounting fees (attach schedule)  c Other professional fees (attach schedule)  17 Interest  18 Taxes (attach schedule)  19 Depreciation (attach schedule) and depletion  Occupancy  20 Occupancy  21 Travel, conferences, and meetings  22 Printing and publications  23 Other expenses (attach schedule) See. Stmt  24 Total operating and administrative expenses.  Add lines 13 through 23  25 Contributions, gifts, grants paid  26 Total expenses and disbursements. Add lines 24 and 25  27 Subtract line 26 from line 12:  a Excess of revenue over expenses and disbursements  -48, 405.	4		· .				OCCENT	1417	145	<u> </u>	<del></del>	<del>                                     </del>
11   Other income (attach schedule)   See   Stmt	_		_		•	· · · · · · · · · · · · · · · · · · ·	OGUEN,	$\cup +$			<u>, , , , , , , , , , , , , , , , , , , </u>	u - 11 13 0
Total expenses and disbursements  13 Compensation of officers, directors, trustees, etc.  14 Other employee salaries and wages  15 Pension plans, employee benefits  16a Legal fees (attach schedule)  17 Legal fees (attach schedule)	Œ.			-							•	<del></del>
Total operating and administrative expenses.  Add lines 13 through 23  Compensation of officers, directors, trustees, etc.  14 Other employee salaries and wages  Pension plans, employee benefits  15 Pension plans, employee benefits  16 Legal fees (attach schedule)  Cother professional fees (attach schedule)  Cother professional fees (attach schedule)  17 Interest  18 Taxes (attach schedule) (see instructions) See Stmt  19 Depreciation (attach schedule) and depletion  20 Occupancy  21 Travel, conferences, and meetings  22 Printing and publications  23 Other expenses (attach schedule) See Stmt  24 Total operating and administrative expenses.  Add lines 13 through 23  25 Contributions, gifts, grants paid  176, 163  18, 891  177, 000  27 Subtract line 26 from line 12:  a Excess of revenue over expenses and disbursements  -48, 405	AF		1					659		62,981.	64,328.	14
The second state of the state o		-	13					303.				<u> </u>
C Other professional fees (attach schedule)	끶	ses		-					-		· · · · · · · · · · · · · · · · · · ·	
C Other professional fees (attach schedule)	Z	eu	15	Pension pla	ans, employee ber	nefits						-
C Other professional fees (attach schedule)	K	х	16a	Legal fees	(attach schedule)							
26 Total expenses and disbursements. Add lines 24 and 25 195, 064. 18, 891. 177, 000.  27 Subtract line 26 from line 12:  a Excess of revenue over expenses and disbursements -48, 405.	တ	m e	ь	Accounting	j fees (attach sche	dule)		_				
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26 Total expenses and disbursements. Add lines 24 and 25 195, 064. 18, 891. 177, 000.  27 Subtract line 26 from line 12:  a Excess of revenue over expenses and disbursements -48, 405.		tra	17									
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26 Total expenses and disbursements. Add lines 24 and 25 195, 064. 18, 891. 177, 000.  27 Subtract line 26 from line 12:  a Excess of revenue over expenses and disbursements -48, 405.		⋷	l	•	•	•						
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26 Total expenses and disbursements. Add lines 24 and 25 195, 064. 18, 891. 177, 000.  27 Subtract line 26 from line 12:  a Excess of revenue over expenses and disbursements -48, 405.		БП	i		•	-		360.		350.	<u> </u>	<u> </u>
26 Total expenses and disbursements. Add lines 24 and 25 195, 064. 18, 891. 177, 000.  27 Subtract line 26 from line 12:  a Excess of revenue over expenses and disbursements -48, 405.		ati	24									
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a Excess of revenue over expenses and disbursements -48,405.							193,0				= 21 3 3 4	1//,000.
			-				nts _40			, at 1-1		-
			b		•				<del>, , , _</del>	14,090.		
c Adjusted net income (if negative, enter -0-)		}			•	•					64,328.	

Pa	art II	Balance Sheets Attached schedules and amounts in the description column	Beginning of year		End c	of year
		should be for end-of-year amounts only (See instructions)	(a) Book Value	(b) Book Valu	ue	(c) Fair Market Value
	1	Cash-non-interest-bearing	5,219.	7,0	07.	7,007.
	2	Savings and temporary cash investments				
	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 ▶				
ţ	8	Inventories for sale or use				
Assets	9	Prepaid expenses and deferred charges				
ĕ	10a	Investments – U.S. and state government obligations (attach schedule)				
	b	Investments—corporate stock (attach schedule)				
	C	Investments - corporate bonds (attach schedule)				
	11	Investments—land, buildings, and equipment: basis ▶	, is	-		
		Less: accumulated depreciation (attach schedule) ▶		. <u> </u>		
	12	Investments—mortgage loans				
	13	Investments—other (attach schedule) . L-13. Stmt	2,009,679.	1,960,5	77.	2,338,301.
	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				
		ınstructions. Also, see page 1, item l)	2,014,898.	1,967,5	84.	2,345,308.
	17	Accounts payable and accrued expenses				
S	18	Grants payable	9,737.	10,8	28.	
itie	19	Deferred revenue				_
Liabilities	20	Loans from officers, directors, trustees, and other disqualified persons				
Lia	21	Mortgages and other notes payable (attach schedule)				
	22 23	Other liabilities (describe )	0.727	10.0	20	
۰,	23	Total liabilities (add lines 17 through 22)	9,737.	10,8	∠8.	
alances		Foundations that follow FASB ASC 958, check here   and complete lines 24, 25, 29, and 30.  □				
an	24	Net assets without donor restrictions				
	25	Net assets with donor restrictions			-	
d B		Foundations that do not follow FASB ASC 958, check here ▶ 🗵				
֖֖֖֡֡֡֡֡֡֡֡֡֡֡֡֡֡		and complete lines 26 through 30.				
ī	26	Capital stock, trust principal, or current funds	2,005,161.	1,956,7	56.	
S	27	Paid-in or capital surplus, or land, bldg., and equipment fund				1
šet	28	Retained earnings, accumulated income, endowment, or other funds				
As	29	Total net assets or fund balances (see instructions)	2,005,161.	1,956,7	56.	Ī
Net Assets or Fund	30	Total liabilities and net assets/fund balances (see				
		instructions)	2,014,898.	1,967,5	84.	
	rt III	Analysis of Changes in Net Assets or Fund Balances				
1		Il net assets or fund balances at beginning of year-Part II, colui		•		
_		of-year figure reported on prior year's return)			1	2,005,161.
		er amount from Part I, line 27a		· · · ·	2	-48,405.
					3	
_	_	lines 1, 2, and 3			4	<u>1,956,756.</u>
5	Deci	reases not included in line 2 (itemize) ► Il net assets or fund balances at end of year (line 4 minus line 5)—F	Dowl II advers /b\ !s	20	5	1 056 756
þ	rota	il net assets of fund balances at end of year (line 4 minus line 5)—F	-art II, column (b), Ilr	IE 29	6	1,956,756.

Part	V Capital Gains and	Losses for Tax on Investm	ent Income			
		d(s) of property sold (for example, real es e; 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						
<u> </u>	·			<b> </b>		
<u>c</u>						
<u>d</u>				<del> </del>		
<u>e</u> _	<del></del>					
	(e) Gross sales price	(f) Depreciation allowed (or allowable)		other basis nse of sale		n or (loss) f) minus (g))
<u>a</u>						-
<u> </u>					<del></del>	<del></del> ,
<u>c</u>						
<u>d</u> e					<del></del>	
	Complete only for assets show	ving gaın ın column (h) and owned b	ov the foundation	on 12/31/69.	(I) O (O -)	(-)
	(i) FMV as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Exces	s of col (i) (j), if any	col (k), but no	(h) gain minus t less than -0-) <b>or</b> rom col (h))
a						
b						
С						
d						
e_						
2	Capital gain net income or		also enter in Pa enter -0- ın Paı		2	
3	If gain, also enter in Part I,	or (loss) as defined in sections , line 8, column (c). See instruc				
Dow					3	
Part		er Section 4940(e) for Redu				
(For o	ptional use by domestic priva	ate foundations subject to the s	section 4940(a)	tax on net investi	ment income.)	
If sect	tion 4940(d)(2) applies, leave	this part blank.				
		ection 4942 tax on the distribut ualify under section 4940(e). Do			ase period?	☐ Yes ☐ No
1		unt in each column for each yea			ıkıng anv entries.	
	(a)	(b)		(c)		(d)
Cale	Base period years endar year (or tax year beginning in)	Adjusted qualifying distributions	Net value of	f noncharitable-use as		ribution ratio livided by col. (c))
	2018					
	2017					
	2016					
	2015					
	2014					
					1 1	
2	Total of line 1, column (d)					
3		or the 5-year base period—divi undation has been in existence				
4	Enter the net value of noncl	haritable-use assets for 2019 fro	om Part X, line	5	. 4	
5	Multiply line 4 by line 3 .				. 5	
6	Enter 1% of net investment	income (1% of Part I, line 27b)			. 6	
7	Add lines 5 and 6				. 7	
8		s from Part XII, line 4 er than line 7, check the box in				% tay rata Cas the
	Part VI instructions	er triair line 7, check the box in	i ait vi, iiile 10	, and complete ti	iat part using a 1	v iax iaie. See ine

Form **990-PF** (2019)

Part '		-see	instru	<u>uctior</u>	1S)
1a	Exempt operating foundations described in section 4940(d)(2), check here ▶ □ and enter "N/A" on line 1.		2 '	, ' , '	
	Date of ruling or determination letter: (attach copy of letter if necessary—see instructions)			77	
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check	1		8	82.
	here ▶ ☐ and enter 1% of Part I, line 27b	, 3 , 4	* E	وبرهون	. 1
С	All other domestic foundations enter 2% of line 27b. Exempt foreign organizations, enter 4% of	<u> </u>	-	<u>, , , , , , , , , , , , , , , , , , , </u>	
_	Part I, line 12, col. (b)	2			0.
2		3			
3	Add lines 1 and 2	4		8	82.
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only; others, enter -0-)	5			<u>0.</u> 82.
5	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0	-			02.
6	Credits/Payments: 2019 estimated tax payments and 2018 overpayment credited to 2019   6a   720 .	.		t	
а	20 to commuted tax payments and 20 to overpayments	.			i i
b	Exempt foreign organizations—tax withheld at source	.			ł
C.	Tax paid with application for extension of time to file (Form 8868) 6c	.			
_d	Business trialities and the second se	7			20
7	Total credits and payments. Add lines 6a through 6d	8		<u>'</u>	20.
8	Enter any <b>penalty</b> for underpayment of estimated tax. Check here  if Form 2220 is attached	9			62
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed	10			62. 0.
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid ▶  Enter the amount of line 10 to be: Credited to 2020 estimated tax ▶ 0 . Refunded ▶	11			<del>-0.</del>
11		_'''			
			T	Yes	No
1a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or participate or intervene in any political campaign?		1a	1.03	×
					<del></del>
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes? Seinstructions for the definition		1b		×
			· · · · · · · · · · · · · · · · · · ·	$\vdash$	<del></del>
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any material published or distributed by the foundation in connection with the activities.	enais		'	
^	Did the foundation file <b>Form 1120-POL</b> for this year?		1c		
c d	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year:	•	1.0		<del></del>
u	(1) On the foundation. ▶ \$ (2) On foundation managers. ▶ \$		1		1
е	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax important	sed			
C	on foundation managers. ► \$	-	· ·		
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?		2		$\overline{\mathbf{x}}$
_	If "Yes," attach a detailed description of the activities.				1
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, are of incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the change	ticles s .	3		<u>~</u>
<b>4</b> a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?		4a		×
b	If "Yes," has it filed a tax return on Form 990-T for this year?		4b		
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?		5		×
•	If "Yes," attach the statement required by General Instruction T.				
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either:			ŀ	1
	By language in the governing instrument, or				- 1
	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	×	
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 Pa	art XV	7	×	
8a	Enter the states to which the foundation reports or with which it is registered. See instructions. ▶		7		. 1
	·				.
b	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney Ge	neral	<u> </u>	ll	]
-	(or designate) of each state as required by <i>General Instruction G?</i> If "No," attach explanation		8b	×	
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)				<i>'</i>
•	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		_ <u>×_</u> (/
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing	their			
	names and addresses		10	1 1	×

	t 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		×
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		×
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	×	l
4.4	Website address ► N/A  The books are in care of ► ASSOCIATED TRUST, NA  Telephone no. ► (920)	227_	5610	
14		521-	2010	
15	Located at ► PO BOX 12800 GREEN BAY WI ZIP+4 ► 54307 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	•	•	
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		×
	See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes," enter the name of			
	the foreign country ▶			
Par	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):			ľ
	<ul> <li>(1) Engage in the sale or exchange, or leasing of property with a disqualified person?  Yes</li> <li>(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a</li> </ul>			
	disqualified person?			
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?			
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?   Yes  No			l
	(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)?			
	(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.)			}
b	If any answer is "Yes" to 1a(1)–(6), did <b>any</b> 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		
	Organizations relying on a current notice regarding disaster assistance, check here			
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		×
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?			
	If "Yes," list the years ▶ 20, 20, 20, 20			
b	Are there any years listed in 2a for which the foundation is <b>not</b> 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.)	25		
С	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here.	2b		
Ŭ	► 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?			
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			
40	foundation had excess business holdings in 2019.)	3b		V
4a b	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes? Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its	4a		×
~	charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2019?	4b		×

Part	VII-B Statements Regarding Activities	s for W	/hich Form	4720	May Be R	equire	ed (contii	nued) _			
5a	During the year, did the foundation pay or incur									Yes	No
	(1) Carry on propaganda, or otherwise attempt t	o influe	ence legislatio	on (sect	ion 4945(e	))? .	☐ Yes	⊠ No			,
	(2) Influence the outcome of any specific public		on (see secti	ion 495	5); or to ca	arry on,			İ		i
	directly or indirectly, any voter registration dr	ive?					Yes	🗵 No			
	(3) Provide a grant to an individual for travel, stu	dy, or o	other similar	purpos	es?		Yes Yes	X No		τ	
	(4) Provide a grant to an organization other than	n a cha	rıtable, etc.,	organız	ation desc	ribed in					
	section 4945(d)(4)(A)? See instructions						Yes Yes	⊠ No			
	(5) Provide for any purpose other than religious	, charit	able, scientifi	ic, litera	ary, or educ	cational					
	purposes, or for the prevention of cruelty to o							⊠ No			
b	If any answer is "Yes" to 5a(1)-(5), did any of the	e trans	sactions fail t	o quali	fy under th	e excep	otions des	scribed			
	in Regulations section 53.4945 or in a current no	tice reg	garding disas	ter ass	istance? Se	ee instr	uctions		5b		
	Organizations relying on a current notice regardi								[		
C	If the answer is "Yes" to question 5a(4), does t									1	
	because it maintained expenditure responsibility	for the	grant?				☐ Yes	☐ No			
	If "Yes," attach the statement required by Regula										
6a	Did the foundation, during the year, receive any					emiums	·	_	i		
	on a personal benefit contract?						☐ Yes	⊠ No			
b	Did the foundation, during the year, pay premiun	ns, dire	ctly or indire	ctly, on	a personal	benefi	t contract	? .	6b		×
	If "Yes" to 6b, file Form 8870.						_		i	-	
7a	At any time during the tax year, was the foundation										
b	If "Yes," did the foundation receive any proceeds							n? .	7b		
8	Is the foundation subject to the section 4960 ta								1		. 1
	remuneration or excess parachute payment(s) do									لــــا	1
Part	VIII Information About Officers, Direc	tors, I	rustees, F	ounda	tion Man	agers,	Hignly F	aid E	mploy	ees,	
1	and Contractors List all officers, directors, trustees, and found	lation		d thair	compone	ation (	Soo instru	etions	<del></del>		
	List all Ullicers, un ectors, trustees, and round	auvii									
							Contribution				
	(a) Name and address	(b) Title hou devot	e, and average rs per week ed to position	(c) Co	mpensation not paid, iter -0-)	(d) emplo		s to plans	(e) Expe	nse acc allowan	
	(a) Name and address	(b) Title hou devot	e, and average rs per week ed to position I DENT	(c) Co	mpensation not paid, iter -0-)	(d) emplo	Contribution byee benefit	s to plans ensation	(e) Expe		ces
N801	(a) Name and address  CS COPS  VAN COPS DRIVE Kaukauna WI 54130	(b) Title hou devot	e, and average rs per week ed to position IDENT 1.00	(c) Co	mpensation not paid,	(d) emplo	Contribution byee benefit	s to plans	(e) Expe		
N801	(a) Name and address  CS COPS  VAN COPS DRIVE Kaukauna WI 54130  (AS COPS	(b) Title hou devot	e, and average rs per week ed to position  I DENT  1.00  PRESIDENT	(c) Co	mpensation <b>tot paid,</b> <b>iter -0-)</b>	(d) emplo	Contribution byee benefit	s to plans ensation	(e) Expe		O.
N801 THON W259	(a) Name and address  S COPS  VAN COPS DRIVE Kaukauna WI 54130  MAS COPS  2 OAK MEADOW COURT Appleton WI 54915	(b) Title hou devote PRES:	e, and average rs per week ed to position  IDENT  1.00  PRESIDENT  1.00	(c) Co	mpensation not paid, iter -0-)	(d) emplo	Contribution byee benefit	s to plans ensation	(e) Expe		ces
N801 THON W259 HENF	(a) Name and address  S COPS  VAN COPS DRIVE Kaukauna WI 54130  MAS COPS  2 OAK MEADOW COURT Appleton WI 54915  RY COPS	(b) Title hou devote PRES:	e, and average rs per week ed to position  IDENT 1.00  PRESIDENT 1.00  Y AND TREASURER	(c) Co	mpensation not paid, iter -0-)	(d) emplo	Contribution byee benefit	s to plans ensation 0.	(e) Expe		0. 0.
N801 THON W259 HENF	(a) Name and address  S COPS  VAN COPS DRIVE Kaukauna WI 54130  MAS COPS  2 OAK MEADOW COURT Appleton WI 54915	(b) Title hou devote PRES:	e, and average rs per week ed to position  IDENT  1.00  PRESIDENT  1.00	(c) Co	mpensation <b>tot paid,</b> <b>iter -0-)</b>	(d) emplo	Contribution byee benefit	s to plans ensation	(e) Expe		O.
N801 THON W259 HENF	(a) Name and address  S COPS  VAN COPS DRIVE Kaukauna WI 54130  MAS COPS  2 OAK MEADOW COURT Appleton WI 54915  RY COPS	(b) Title hou devote PRES:	e, and average rs per week ed to position  IDENT 1.00  PRESIDENT 1.00  Y AND TREASURER	(c) Co	mpensation not paid, iter -0-)	(d) emplo	Contribution byee benefit	s to plans ensation 0.	(e) Expe		0. 0.
N801 THON W259 HENF 104	(a) Name and address  CS COPS  VAN COPS DRIVE Kaukauna WI 54130  IAS COPS  2 OAK MEADOW COURT Appleton WI 54915  RY COPS  WULGAERT WAY Combined Locks WI 54113	(b) Title hou devot PRES: VICE	e, and average rs per week ed to position  IDENT 1.00  PRESIDENT 1.00  Y AND TREASURER 1.00	(c) Co (lf r en	mpensation not paid, iter -0-)  0.	(d) emplo and def	Contribution byee benefit erred compe	s to plans ensation  O.  O.	(e) Expe other a	allowan	0. 0.
N801 THON W259 HENF	(a) Name and address  S COPS  VAN COPS DRIVE Kaukauna WI 54130  MAS COPS  2 OAK MEADOW COURT Appleton WI 54915  RY COPS	(b) Title hou devot PRES: VICE	e, and average rs per week ed to position  IDENT 1.00  PRESIDENT 1.00  Y AND TREASURER 1.00	(c) Co (lf r en	mpensation not paid, iter -0-)  0.	(d) emplo and def	Contribution byee benefit erred compe	s to plans ensation  O.  O.	(e) Expe other a	allowan	0. 0.
N801 THON W259 HENF 104	(a) Name and address  CS COPS  VAN COPS DRIVE Kaukauna WI 54130  MAS COPS  2 OAK MEADOW COURT Appleton WI 54915  RY COPS  WULGAERT WAY Combined Locks WI 54113  Compensation of five highest-paid employee	(b) Title hou devot PRES: VICE	e, and average rs per week ed to position  IDENT 1.00 PRESIDENT 1.00 LY AND TREASURER 1.00  er than thos	(c) Co (lift en	mpensation not paid, iter -0-)  0.	(d) emplo and def	Contribution byee benefit erred compe	s to plans ensation  0.  0.	(e) Expe other a	allowan	0. 0.
N801 THOM W259 HENF 104	(a) Name and address  CS COPS  VAN COPS DRIVE Kaukauna WI 54130  MAS COPS  2 OAK MEADOW COURT Appleton WI 54915  RY COPS  WULGAERT WAY Combined Locks WI 54113  Compensation of five highest-paid employee	(b) Tittin hou devot PRES	e, and average rs per week ed to position  IDENT  1.00  PRESIDENT  1.00  AY AND TREASURER  1.00  er than those  (b) Title, and a hours per v	(c) Co (lifr en	mpensation not paid, iter -0-)  0.	(d) emplo and def	Contribution byee benefit erred compe  see instr  (d) Contribut employee	s to plans ensation  0.  0.  uctions	(e) Expe	one, o	0. 0. count,
N801 THOM W259 HENF 104	(a) Name and address  CS COPS  VAN COPS DRIVE Kaukauna WI 54130  MAS COPS  2 OAK MEADOW COURT Appleton WI 54915  RY COPS  WULGAERT WAY Combined Locks WI 54113  Compensation of five highest-paid employed  "NONE."	(b) Tittin hou devot PRES	e, and average rs per week ed to position  IDENT  1.00  PRESIDENT  1.00  Y AND TREASURER  1.00  er than those  (b) Title, and a	(c) Co (lifr en	0. 0. uded on li	(d) emplo and def	Contribution byee benefit erred compe	s to plans ensation  0.  0.  uctions to benefit deferred	(e) Expe	one, o	0. 0. count,
N801 THOM W259 HENF 104	(a) Name and address  CS COPS  VAN COPS DRIVE Kaukauna WI 54130  MAS COPS  2 OAK MEADOW COURT Appleton WI 54915  RY COPS  WULGAERT WAY Combined Locks WI 54113  Compensation of five highest-paid employee "NONE."	(b) Tittin hou devot PRES	e, and average rs per week ed to position  IDENT  1.00  PRESIDENT  1.00  AY AND TREASURER  1.00  er than those  (b) Title, and a hours per v	(c) Co (lifr en	0. 0. uded on li	(d) emplo and def	see instr  (d) Contribute employee plans and of	s to plans ensation  0.  0.  uctions to benefit deferred	(e) Expe	one, o	0. 0. count,
N801 THOM W259 HENF 104	(a) Name and address  CS COPS  VAN COPS DRIVE Kaukauna WI 54130  MAS COPS  2 OAK MEADOW COURT Appleton WI 54915  RY COPS  WULGAERT WAY Combined Locks WI 54113  Compensation of five highest-paid employee "NONE."	(b) Tittin hou devot PRES	e, and average rs per week ed to position  IDENT  1.00  PRESIDENT  1.00  AY AND TREASURER  1.00  er than those  (b) Title, and a hours per v	(c) Co (lifr en	0. 0. uded on li	(d) emplo and def	see instr  (d) Contribute employee plans and of	s to plans ensation  0.  0.  uctions to benefit deferred	(e) Expe	one, o	0. 0. count,
N801 THOM W259 HENF 104	(a) Name and address  CS COPS  VAN COPS DRIVE Kaukauna WI 54130  MAS COPS  2 OAK MEADOW COURT Appleton WI 54915  RY COPS  WULGAERT WAY Combined Locks WI 54113  Compensation of five highest-paid employee "NONE."	(b) Tittin hou devot PRES	e, and average rs per week ed to position  IDENT  1.00  PRESIDENT  1.00  AY AND TREASURER  1.00  er than those  (b) Title, and a hours per v	(c) Co (lifr en	0. 0. uded on li	(d) emplo and def	see instr  (d) Contribute employee plans and of	s to plans ensation  0.  0.  uctions to benefit deferred	(e) Expe	one, o	0. 0. count,
N801 THOM W259 HENF 104	(a) Name and address  CS COPS  VAN COPS DRIVE Kaukauna WI 54130  MAS COPS  2 OAK MEADOW COURT Appleton WI 54915  RY COPS  WULGAERT WAY Combined Locks WI 54113  Compensation of five highest-paid employee "NONE."	(b) Tittin hou devot PRES	e, and average rs per week ed to position  IDENT  1.00  PRESIDENT  1.00  AY AND TREASURER  1.00  er than those  (b) Title, and a hours per v	(c) Co (lifr en	0. 0. uded on li	(d) emplo and def	see instr  (d) Contribute employee plans and of	s to plans ensation  0.  0.  uctions to benefit deferred	(e) Expe	one, o	0. 0. count,
N801 THOM W259 HENF 104	(a) Name and address  CS COPS  VAN COPS DRIVE Kaukauna WI 54130  MAS COPS  2 OAK MEADOW COURT Appleton WI 54915  RY COPS  WULGAERT WAY Combined Locks WI 54113  Compensation of five highest-paid employee "NONE."	(b) Tittin hou devot PRES	e, and average rs per week ed to position  IDENT  1.00  PRESIDENT  1.00  AY AND TREASURER  1.00  er than those  (b) Title, and a hours per v	(c) Co (lifr en	0. 0. uded on li	(d) emplo and def	see instr  (d) Contribute employee plans and of	s to plans ensation  0.  0.  uctions to benefit deferred	(e) Expe	one, o	0. 0. count,
N801 THOM W259 HENF 104	(a) Name and address  CS COPS  VAN COPS DRIVE Kaukauna WI 54130  MAS COPS  2 OAK MEADOW COURT Appleton WI 54915  RY COPS  WULGAERT WAY Combined Locks WI 54113  Compensation of five highest-paid employee "NONE."	(b) Tittin hou devot PRES	e, and average rs per week ed to position  IDENT  1.00  PRESIDENT  1.00  AY AND TREASURER  1.00  er than those  (b) Title, and a hours per v	(c) Co (lifr en	0. 0. uded on li	(d) emplo and def	see instr  (d) Contribute employee plans and of	s to plans ensation  0.  0.  uctions to benefit deferred	(e) Expe	one, o	0. 0. count,
N801 THOM W259 HENF 104	(a) Name and address  CS COPS  VAN COPS DRIVE Kaukauna WI 54130  MAS COPS  2 OAK MEADOW COURT Appleton WI 54915  RY COPS  WULGAERT WAY Combined Locks WI 54113  Compensation of five highest-paid employee "NONE."	(b) Tittin hou devot PRES	e, and average rs per week ed to position  IDENT  1.00  PRESIDENT  1.00  AY AND TREASURER  1.00  er than those  (b) Title, and a hours per v	(c) Co (lifr en	0. 0. uded on li	(d) emplo and def	see instr  (d) Contribute employee plans and of	s to plans ensation  0.  0.  uctions to benefit deferred	(e) Expe	one, o	0. 0. count,
N801 THOM W259 HENF 104	(a) Name and address  CS COPS  VAN COPS DRIVE Kaukauna WI 54130  MAS COPS  2 OAK MEADOW COURT Appleton WI 54915  RY COPS  WULGAERT WAY Combined Locks WI 54113  Compensation of five highest-paid employee "NONE."	(b) Tittin hou devot PRES	e, and average rs per week ed to position  IDENT  1.00  PRESIDENT  1.00  AY AND TREASURER  1.00  er than those  (b) Title, and a hours per v	(c) Co (lifr en	0. 0. uded on li	(d) emplo and def	see instr  (d) Contribute employee plans and of	s to plans ensation  0.  0.  uctions to benefit deferred	(e) Expe	one, o	0. 0. count,
N801 THOM W259 HENF 104	(a) Name and address  CS COPS  VAN COPS DRIVE Kaukauna WI 54130  MAS COPS  2 OAK MEADOW COURT Appleton WI 54915  RY COPS  WULGAERT WAY Combined Locks WI 54113  Compensation of five highest-paid employee "NONE."	(b) Tittin hou devot PRES	e, and average rs per week ed to position  IDENT  1.00  PRESIDENT  1.00  AY AND TREASURER  1.00  er than those  (b) Title, and a hours per v	(c) Co (lifr en	0. 0. uded on li	(d) emplo and def	see instr  (d) Contribute employee plans and of	s to plans ensation  0.  0.  uctions to benefit deferred	(e) Expe	one, o	0. 0. count,
N801 THOM W259 HENF 104 2	(a) Name and address  CS COPS  VAN COPS DRIVE Kaukauna WI 54130  MAS COPS  2 OAK MEADOW COURT Appleton WI 54915  RY COPS  WULGAERT WAY Combined Locks WI 54113  Compensation of five highest-paid employee "NONE."	(b) Tittin hou devot PRES	e, and average rs per week ed to position  IDENT  1.00  PRESIDENT  1.00  AY AND TREASURER  1.00  er than those  (b) Title, and a hours per v	(c) Co (lifr en	0. 0. uded on li	(d) emplo and def	see instr  (d) Contribute employee plans and of	s to plans ensation  0.  0.  uctions to benefit deferred	(e) Expe	one, o	0. 0. count,

Par	Information About Officers, Directors, Trustees, Foundation Manand Contractors (continued)	nagers, Highly Paid Er	mployees,
3	Five highest-paid independent contractors for professional services. See instruct	ions. If none, enter "NON	E."
	(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NON		<del></del>	
		<del></del> :	
			-
			1
ota	number of others receiving over \$50,000 for professional services		0
	IX-A. Summary of Direct Charitable Activities		10
	the foundation's four largest direct charitable activities during the tax year. Include relevant statistical info anizations and other beneficiaries served, conferences convened, research papers produced, etc.	rmation such as the number of	Expenses
1		<del></del> -	
			1
2		<del> </del>	
3			
4			
			1
	IX-B Summary of Program-Related Investments (see instructions)	····	
	cribe the two largest program-related investments made by the foundation during the tax year on lines 1 and	2	Amount
1	•••••••••••••••••••••••••••••••••••••••		
_			
2	·		
All	other program-related investments. See instructions		-
3			
•		••••••	
	•••••••••••••••••••••••••••••••••••••••		
ota	Add lines 1 through 3	<b>.</b>	<del> </del>
	<del></del>	<del>"= .</del>	Form <b>990-PF</b> (20
٩A	REV 03/04/20 PRO		

Part	Minimum Investment Return (All domestic foundations must complete this part. Fore see instructions.)	ign fou	ındatıons,
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes:	1	
а	Average monthly fair market value of securities	1a	2,255,180.
b	Average of monthly cash balances	1b	6,113.
c	Fair market value of all other assets (see instructions)	1c	
d	<b>Total</b> (add lines 1a, b, and c)	1d	2,261,293.
e	Reduction claimed for blockage or other factors reported on lines 1a and		
	1c (attach detailed explanation)	1 0 0 0	
2	Acquisition indebtedness applicable to line 1 assets	2	
3	Subtract line 2 from line 1d	3	2,261,293.
4	Cash deemed held for charitable activities. Enter 11/2% of line 3 (for greater amount, see		
	instructions)	4	33,919.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	2,227,374.
6	Minimum investment return. Enter 5% of line 5	6	111,369.
Part	Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating f and certain foreign organizations, check here ► and do not complete this part.)	ounda	tions
1	Minimum investment return from Part X, line 6	1	111,369.
2а	Tax on investment income for 2019 from Part VI, line 5	<b>├</b>	
b	Income tax for 2019. (This does not include the tax from Part VI.) 2b	1 1	
C	Add lines 2a and 2b	2c	882.
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	110,487.
4	Recoveries of amounts treated as qualifying distributions	4	
5	Add lines 3 and 4	5	110,487.
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	110,487.
Part	XII Qualifying Distributions (see instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:	ا ليدن	
а	Expenses, contributions, gifts, etc.—total from Part I, column (d), line 26	1a	177,000.
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:		
а	Suitability test (prior IRS approval required)	3a	
b	Cash distribution test (attach the required schedule)	3b	
4	Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8; and Part XIII, line 4	4	177,000.
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income.	_	_
_	Enter 1% of Part I, line 27b. See instructions	5	0.
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	177,000.
	Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating qualifies for the section 4940(e) reduction of tax in those years.	g whet	
		_	- 000 DE

Part	XIII Undistributed Income (see instruction	ons)			
		(a) Corpus	(b) Years prior to 2018	(c) 2018	<b>(d)</b> 2019
1	Distributable amount for 2019 from Part XI, line 7				110,487.
2	Undistributed income, if any, as of the end of 2019:				
a	Enter amount for 2018 only				
b	Total for prior years: 20 , 20 , 20				1
3	Excess distributions carryover, if any, to 2019:				
а	From 2014 21, 375.				
b	From 2015 63, 939.	]			ļ
С	From 2016 0.				Ì
d	From 2017 144, 376.				ļ
е	From 2018 155,000.				
f	Total of lines 3a through e	384,690.		1	
4	Qualifying distributions for 2019 from Part XII,	,			
	line 4: ▶ \$ 177,000.	9	, n, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1,		
а	Applied to 2018, but not more than line 2a .		h h		
b	Applied to undistributed income of prior years (Election required—see instructions)			r t	
С	Treated as distributions out of corpus (Election required—see instructions)		u i	1	
d	Applied to 2019 distributable amount		,		
е	Remaining amount distributed out of corpus	177,000.			i
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:				
а	Corpus. Add lines 3f, 4c, and 4e. Subtract line 5	561,690.			
b	Prior years' undistributed income. Subtract line 4b from line 2b		0.		
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				
d	Subtract line 6c from line 6b. Taxable amount—see instructions		0.	, , B	
е	Undistributed income for 2018. Subtract line 4a from line 2a. Taxable amount—see instructions	, r	β	0.	
f	Undistributed income for 2019. Subtract lines 4d and 5 from line 1. This amount must be		1 1		110 407
	distributed in 2020		, , ,	1.	110,487.
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)		4		
8	Excess distributions carryover from 2014 not applied on line 5 or line 7 (see instructions).	21,375.			
9	Excess distributions carryover to 2020. Subtract lines 7 and 8 from line 6a	540,315.			
10	Analysis of line 9:	340,313.			
а	Excess from 2015 63, 939.				
b	Excess from 2016	1			
c	Excess from 2017 144, 376.	1			
d	Excess from 2018	1			
e	Excess from 2019	1			

	30-11 (2013)	······································	1.00.4	1/II. A		
Part					·)	N/A
1a	If the foundation has received a ruling					
_	foundation, and the ruling is effective fo					(0) 40.40()(5)
	Check box to indicate whether the four		operating founda	Prior 3 years	ection 4942(j)	(3) or <u>4942(j)(5)</u>
2a	Enter the lesser of the adjusted net income from Part I or the minimum	Tax year (a) 2019	/b) 2019	(c) 2017	(d) 2016	(e) Total
	investment return from Part X for	(a) 2019	(b) 2018	(c) 2017	(4) 2010	
	each year listed					
	85% of line 2a					
С	line 4, for each year listed					
d	Amounts included in line 2c not used directly					<del></del>
•	for active conduct of exempt activities	\ \ \				
е	Qualifying distributions made directly					
	for active conduct of exempt activities.					
	Subtract line 2d from line 2c					_
3	Complete 3a, b, or c for the					
	alternative test relied upon:					
а	"Assets" alternative test-enter:					
	(1) Value of all assets					
	(2) Value of assets qualifying under					
	section 4942(j)(3)(B)(i)					
b	"Endowment" alternative test-enter 2/3			]	<b>\</b>	
	of minimum investment return shown in					
	Part X, line 6, for each year listed			<del></del>		
С	"Support" alternative test—enter.					E
	(1) Total support other than gross					
	investment income (interest, dividends, rents, payments on				\	
	securities loans (section					
	512(a)(5)), or royalties)					
	and 5 or more exempt					
	organizations as provided in section 4942(j)(3)(B)(III)			1		
	(3) Largest amount of support from					
	an exempt organization					\ \
	(4) Gross investment income					
Part				the foundation h	ad \$5,000 or m	ore in assets at
	any time during the year-	-see instructior	ns.)			
1	Information Regarding Foundation					
а	List any managers of the foundation					by the foundation
	before the close of any tax year (but o	only if they have co	ontributed more ti	nan \$5,000). (See s	section 507(a)(2).)	
	At the form delice	100/		ali af a paymoustis	n for an agually le	vac portion of the
b	List any managers of the foundation ownership of a partnership or other e					arge portion of the
	Ownership of a partnership of other ex	ridity) of writer the	iouridation nas a	1070 or grouter int	Croot.	
2	Information Regarding Contribution	Grant Gift Loa	n Scholarshin	etc Programs:		
2	Check here ► 🗵 if the foundation				organizations and	i does not accept
	unsolicited requests for funds. If the f	oundation makes	gifts, grants, etc.,	, to individuals or c	rganizations unde	r other conditions,
	complete items 2a, b, c, and d. See in				•	
a	The name, address, and telephone nu	umber or email add	dress of the perso	on to whom applica	ations should be a	ddressed:
	,		·			
	See Supplementary Informat	ion Statemen	t			
b	The form in which applications should	d be submitted and	d information and	materials they sho	ould include:	
C	Any submission deadlines:					
	Annual Alexandra I limite Alexandra	voydo susta sa ta	v goographical -	ross charitable 4	olds kinds of ins	titutions or other
đ	Any restrictions or limitations on av	varos, such as b	y geographical a	ireas, chantable II	eius, Killūs VI INS	situtions, or other
	IQUIUI 3.					

Supplementary Information (continued) Part XV

3 Grants and Contributions Paid During t	he Year or Approv	ed for Fu	ture Payment	
Recipient	If recipient is an individual, show any relationship to any foundation manager	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	or substantial contributor	recipient	Contribution	
a Paid during the year				
HUMAN LIFE INTERNATIONAL	NONE			
4 FAMILY LIFE LN		D.C.	DDOCDAM GUDDOD	F 000
Front Royal VA 22630-9865		PC	PROGRAM SUPPORT	5,000.
SALESIAN MISSIONS	NONE			1
2 LEFEVRE LN New Rochelle NY 10801-5710		PC	PROGRAM SUPPORT	10,000.
COMBONI MISSIONARIES	NONE	PC	PROGRAM SUPFORT	10,000.
1318 NAGEL RD	NONE			
CINCINNATI OH 45255	[	PC	PROGRAM SUPPORT	15,000.
AID TO CHURCH IN NEED	NONE	-		13,000.
PO BOX 220384	110112			
Brooklyn NY 11222-0384	}	PC	PROGRAM SUPPORT	11,000.
FRANCISCAN FATHERS	NONE			·
APARTADO POSTAL BOX 30041				
TONCONTIN		PC	PROGRAM SUPPORT	21,000.
DIOCESE OF COMAYAGUA	NONE			
OBISPADO APARTADO 41 CP 12101				
COMAYAGUA		PC	PROGRAM SUPPORT	37,000.
CATHOLIC VOTE ED FND	NONE			
BOX 259837				
MADISON WI 53725		PC	PROGRAM SUPPORT	1,000.
ALL JUDIE BROWN	NONE			
BOX 1350		DC.	DDOCDAM CUDDODE	1 000
STAFFORD VA 22555-9986	NONE	PC	PROGRAM SUPPORT	1,000.
HERMANAS FRANCISCANAS SOR SONIA CAMPOS ALTAS DE LA IGLESIA MERCED APDO#34	NONE			
COMAYAGUA		PC	PROGRAM SUPPORT	10,000.
See Statement			TROGRAM BOLLONI	10,000.
Sec Seatement				
				65,163.
Total		L		176 160
b Approved for future payment	<u> </u>	· · · ·	<u>.</u> ▶ 3a	176,163.
b Approved for fature payment				
,				
		ĺ		
Total			▶ 3b	
				COO DE

	t XVI-A Analysis of Income-Producing Actions amounts unless otherwise indicated.		siness income	Excluded by secti	on 512, 513, or 514	(e)
		(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	Related or exempt function income (See instructions.)
1	Program service revenue:					
	a		<u> </u>			
	b				<del> </del>	
	d			-		
	e f					
	g Fees and contracts from government agencies					-
2	Membership dues and assessments					
3	Interest on savings and temporary cash investments		-			
4	Dividends and interest from securities			14		
5	Net rental income or (loss) from real estate:		. 0 3	) m ii o	<b>v</b>	- 1
	a Debt-financed property					
_	<b>b</b> Not debt-financed property					
6	Net rental income or (loss) from personal property					
7	Other investment income			18		42,742.
8	Gain or (loss) from sales of assets other than inventory  Net income or (loss) from special events			10		42,742.
9 10	Gross profit or (loss) from sales of inventory		·	<del>                                     </del>		
11	Other revenue: a					
• •	h			-		
	С					
	d					
	·					
12	Subtotal. Add columns (b), (d), and (e)	Ę.		¥,		
13	Subtotal. Add columns (b), (d), and (e)				13	
<b>13</b> See	<b>Total.</b> Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculation	 s.)			13	42,742. 42,742.
13 See Par	Total. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculation  t XVI-B Relationship of Activities to the A	s.) ccomplishm	ent of Exemp	t Purposes		42,742.
13 See Par Line	<b>Total.</b> Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculation	s.) ccomplishm	ent of Exemp	t Purposes		42,742.
13 See Par Line	Total. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculation  t XVI-B Relationship of Activities to the A	s.) ccomplishm	ent of Exemp	t Purposes		42,742.
13 See Par Line	Total. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculation  t XVI-B Relationship of Activities to the A	s.) ccomplishm	ent of Exemp	t Purposes		42,742.
13 See Par Line	Total. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculation  t XVI-B Relationship of Activities to the A	s.) ccomplishm	ent of Exemp	t Purposes		42,742.
13 See Par Line	Total. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculation  t XVI-B Relationship of Activities to the A	s.) ccomplishm	ent of Exemp	t Purposes		42,742.
13 See Par Line	Total. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculation  t XVI-B Relationship of Activities to the A	s.) ccomplishm	ent of Exemp	t Purposes		42,742.
13 See Par Line	Total. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculation  t XVI-B Relationship of Activities to the A	s.) ccomplishm	ent of Exemp	t Purposes		42,742.
13 See Par Line	Total. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculation  t XVI-B Relationship of Activities to the A	s.) ccomplishm	ent of Exemp	t Purposes		42,742.
13 See Par Line	Total. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculation  t XVI-B Relationship of Activities to the A	s.) ccomplishm	ent of Exemp	t Purposes		42,742.
13 See Par Line	Total. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculation  t XVI-B Relationship of Activities to the A	s.) ccomplishm	ent of Exemp	t Purposes		42,742.
13 See Par Line	Total. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculation  t XVI-B Relationship of Activities to the A	s.) ccomplishm	ent of Exemp	t Purposes		42,742.
13 See Par Line	Total. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculation  t XVI-B Relationship of Activities to the A	s.) ccomplishm	ent of Exemp	t Purposes		42,742.
13 See Par Line	Total. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculation  t XVI-B Relationship of Activities to the A	s.) ccomplishm	ent of Exemp	t Purposes		42,742.
13 See Par Line	Total. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculation  t XVI-B Relationship of Activities to the A	s.) ccomplishm	ent of Exemp	t Purposes		42,742.
13 See Par Line	Total. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculation  t XVI-B Relationship of Activities to the A	s.) ccomplishm	ent of Exemp	t Purposes		42,742.
13 See Par Line	Total. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculation  t XVI-B Relationship of Activities to the A	s.) ccomplishm	ent of Exemp	t Purposes		42,742.
13 See Par Line	Total. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculation  t XVI-B Relationship of Activities to the A	s.) ccomplishm	ent of Exemp	t Purposes		42,742.
13 See Par Line	Total. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculation  t XVI-B Relationship of Activities to the A	s.) ccomplishm	ent of Exemp	t Purposes		42,742.
13 See Par Line	Total. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculation  t XVI-B Relationship of Activities to the A	s.) ccomplishm	ent of Exemp	t Purposes		42,742.
13 See Par Line	Total. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculation  t XVI-B Relationship of Activities to the A	s.) ccomplishm	ent of Exemp	t Purposes		42,742.
13 See Par Line	Total. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculation  t XVI-B Relationship of Activities to the A	s.) ccomplishm	ent of Exemp	t Purposes		42,742.
13 See Par Line	Total. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculation  t XVI-B Relationship of Activities to the A	s.) ccomplishm	ent of Exemp	t Purposes		42,742.
13 See Par Line	Total. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculation  t XVI-B Relationship of Activities to the A	s.) ccomplishm	ent of Exemp	t Purposes		42,742.

		Organizatio	UIIS										
1	in se		directly or indirectly ther than section								,,,1	Yes ,'	No ',
а			orting foundation	to a nonc	haritable exer	npt orga	anization	of:					
		ash	-								1a(1)		×
	(2) 0	ther assets .									1a(2)		×
b		r transactions:											
-	•		a noncharitable ex	xempt org	anization .						1b(1)		×
			ets from a nonchar			ion .					1b(2)		×
			, equipment, or oth								1b(3)		×
			rrangements								1b(4)		×
	• •	oans or loan gua	_								1b(5)		×
		_	ervices or member								1b(6)	i	×
С			quipment, mailing		_						1c		×
d			of the above is "Y									air m	arket
u	value	of the goods of	ther assets, or ser	vices give	n by the repo	rtina foi	indation.	If the found	lation rece	ived less	than t	air m	arket
			on or sharing arran										
(a) Line		b) Amount involved			xempt organization			ption of transfe					
(a) Line	, 110	by Amount involved	(0) / (0)			**	(4, 5 5 5 5 5					J	
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	descr	ribed in section 5	ectly or indirectly 501(c) (other than s of following schedu	section 50					· · · ·		☐ Ye	s 🗵	No
		(a) Name of organ	ization		(b) Type of orga	anization			(c) Description	n of relation	ship		
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			· · · · · · · · · · · · · · · · · · ·										
<b>&gt;:</b>	Unde	at penalities of perjury, I of and complete. Decla	declare that I have exam aration of preparer (other	ilned this retur than taxpaver	n, including accom i) is based on all inf	ipanying sc ormation of	nedules and f which prep	i statements, and arer has anv kno	i to the best of wledae	my knowled	ge and t	peliet, it	is true,
Sign	1 1	1/2	I $I$ $I$		4					May the IR with the pro			
Here		yeing 1.	$\mathcal{L}_{\mathcal{L}_{\mathcal{L}_{\mathcal{L}_{\mathcal{L}_{\mathcal{L}_{\mathcal{L}_{\mathcal{L}_{\mathcal{L}_{\mathcal{L}_{\mathcal{L}_{\mathcal{L}_{\mathcal{L}_{\mathcal{L}_{\mathcal{L}_{\mathcal{L}_{\mathcal{L}_{\mathcal{L}_{\mathcal{L}_{\mathcal{L}_{\mathcal{L}_{\mathcal{L}_{\mathcal{L}_{\mathcal{L}_{\mathcal{L}_{\mathcal{L}_{\mathcal{L}_{\mathcal{L}_{\mathcal{L}_{\mathcal{L}_{\mathcal{L}_{\mathcal{L}_{\mathcal{L}_{\mathcal{L}_{\mathcal{L}_{\mathcal{L}_{\mathcal{L}_{\mathcal{L}_{\mathcal{L}_{\mathcal{L}_{\mathcal{L}_{\mathcal{L}_{\mathcal{L}_{\mathcal{L}_{\mathcal{L}_{\mathcal{L}_{\mathcal{L}_{\mathcal{L}_{\mathcal{L}_{\mathcal{L}_{\mathcal{L}_{\mathcal{L}_{\mathcal{L}_{\mathcal{L}_{\mathcal{L}_{\mathcal{L}_{\mathcal{L}_{\mathcal{L}_{\mathcal{L}_{\mathcal{L}_{\mathcal{L}_{\mathcal{L}_{\mathcal{L}_{\mathcal{L}_{\mathcal{L}_{\mathcal{L}_{\mathcal{L}_{\mathcal{L}_{\mathcal{L}_{\mathcal{L}_{\mathcal{L}_{\mathcal{L}_{\mathcal{L}_{\mathcal{L}_{\mathcal{L}_{\mathcal{L}_{\mathcal{L}_{\mathcal{L}_{\mathcal{L}_{\mathcal{L}_{\mathcal{L}_{\mathcal{L}_{\mathcal{L}_{\mathcal{L}_{\mathcal{L}_{\mathcal{L}_{\mathcal{L}_{\mathcal{L}_{\mathcal{L}_{\mathcal{L}_{\mathcal{L}_{\mathcal{L}_{\mathcal{L}_{\mathcal{L}_{\mathcal{L}_{\mathcal{L}_{\mathcal{L}_{\mathcal{L}_{\mathcal{L}_{\mathcal{L}_{\mathcal{L}_{\mathcal{L}_{\mathcal{L}_{\mathcal{L}_{\mathcal{L}_{\mathcal{L}_{\mathcal{L}_{\mathcal{L}_{\mathcal{L}_{\mathcal{L}_{\mathcal{L}_{\mathcal{L}_{\mathcal{L}_{\mathcal{L}_{\mathcal{L}_{\mathcal{L}_{\mathcal{L}_{\mathcal{L}_{\mathcal{L}_{\mathcal{L}_{\mathcal{L}_{\mathcal{L}_{\mathcal{L}_{\mathcal{L}_{\mathcal{L}_{\mathcal{L}_{\mathcal{L}_{\mathcal{L}_{\mathcal{L}_{\mathcal{L}_{\mathcal{L}_{\mathcal{L}_{\mathcal{L}_{\mathcal{L}_{\mathcal{L}_{\mathcal{L}_{\mathcal{L}_{\mathcal{L}_{\mathcal{L}_{\mathcal{L}_{\mathcal{L}_{\mathcal{L}_{\mathcal{L}_{\mathcal{L}_{\mathcal{L}_{\mathcal{L}_{\mathcal{L}_{\mathcal{L}_{\mathcal{L}_{\mathcal{L}_{\mathcal{L}_{\mathcal{L}_{\mathcal{L}_{\mathcal{L}_{\mathcal{L}_{\mathcal{L}_{\mathcal{L}_{\mathcal{L}_{\mathcal{L}_{\mathcal{L}_{\mathcal{L}_{\mathcal{L}_{\mathcal{L}_{\mathcal{L}_{\mathcal{L}_{\mathcal{L}_{\mathcal{L}_{\mathcal{L}_{\mathcal{L}_{\mathcal{L}_{\mathcal{L}_{\mathcal{L}_{\mathcal{L}_{\mathcal{L}_{\mathcal{L}_{\mathcal{L}_{\mathcal{L}}}}}}}}}}$	an	14-30-20	· —	ASURER	AND SEC	RETARY	See instruc			
	Sign	ature of officer or trus			Date	Title		To the		<u> </u>	TIN!		
Paid		Print/Type preparer	's name	Prepare	er's signature	` ^	1	Date	Chec	k     ıf	PTIN		
Prep	arer	Craig L. M			iq L. Mexe	er II	<b>_</b>	04/24/2		mployed p			2
Jse (		Firm's name ▶	WATERTAX, I	NC.			10		Firm's EIN				
		Fırm's address ▶	2559 E CALU	MET ST			ł		Phone no	(920)73			
24.4			APPI.ETON			wT	54915	-4748		Fo	rm <b>99</b> (	D-PF	(2019)

Information Regarding Transfers to and Transactions and Relationships With Noncharitable Exempt

# THE COPS FOUNDATION OF KIMBERLY, INC Form 990-PF: Return of Private Foundation

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Contribution
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Information Reg
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Line 2: Sup
Part XV,

Part XV, Line 2: Supplementary Information Regarding Contribution, Grant, Gift, Loan, Scholarship, etc.	Contribution, Grant, Gift, Loan, Scholars	ship, etc.	<b>Continuation Statement</b>
Name and Address Information	Form Information	Submission Information	Restrictions
ASSOCIATED TRUST CO C/O COPS FOUNDATION			
PO BOX 12800			
Green Bay, WI 54307-2800			•
920-327-5610			

# Form 990-PF: Return of Private Foundation

# Part XV, Line 3a: Grants and Contributions Paid During the Year

	If recipient is an			
Recipient name and address (home or business)	individual, show any	Foundation status of recipient	Purpose of grant or contribution	Amount
a Paid during the year				
SAFP	NONE	PC	PROGRAM SUPPORT	5,000.
BOX 610157				
Port Huron, MI 48061				
MILES JESU	NONE	PC	PROGRAM SUPPORT	5,000.
BOX 2679989				
Chicago, IL 60626-7989				
PRO LIFE WIS ETF	NONE	PC	PROGRAM SUPPORT	5,000.
BOX 221				
Brookfield, WI 53008-0221				
OL ROSARY MAKERS	NONE	PC	PROGRAM SUPPORT	2,913.
BOX 37080				
Louisville, KY 40233	•			
MOTHER & UNBORN BABY CARE	NONE	PC	PROGRAM SUPPORT	1,000.
526 W WISCONSIN AVE				•
Appleton, WI 54911				
UP FRIENDS OF HONDURAS MISSION INC	NONE	PC	PROGRAM SUPPORT	5,000.
18336 VENICK LN	110112			.,
PARK RIVER, MI 49807				
CROSS CATHOLIC OUTREACH	NONE	PC	PROGRAM SUPPORT	10,000.
BOX 97168	110112			
WASHINGTON, DC 20077				
LEADERSHIP INST	NONE	PC	PROGRAM SUPPORT	1,000.
1101 N HIGHLAND ST	lucius .			_,
ARLINGTON, VA 22201-9895				
PRI POP RSH INST	NONE	PC	PROGRAM SUPPORT	1,000.
BOX 1559	NONE			1,000.
Front Royal, VA 22630-9800				
EWTN	NONE	PC	PROGRAM SUPPORT	1,000.
	NONE		TROGRAM BOTTORT	1,000.
5817 OLD LEEDS RD Birmingham, AL 35210-9768				
CAPUCHIN FATHERS	NONE	PC	PROGRAM SUPPORT	1,000.
1820 MT. ELLIOT ST	NONE		FROGRAM SOLLOW	1,000.
Detroit, MI 48207-3480	NONE	PC	PROGRAM SUPPORT	250.
MULTIPLE SCLEROSIS	NONE	PC	PROGRAM SUFFORT	250.
1120 JAMES RD				
Hartland, WI 53029	NOVE	DC.	DDOCDAM CUDDODT	5,000.
ST PAULS MISSIONS	NONE	PC	PROGRAM SUPPORT	5,000.
410 WALLACEE ST				
Combined Locks, WI 54113	NONE	DC.	DDOCDAM CUDDOD	10 000
ROMAN CATHOLIC BISHOP	NONE	PC	PROGRAM SUPPORT	10,000.
CATH MED MISSION BP		PC	PROGRAM SUPPORT	10,000.
BOX 4715				
NEW YORK, NY 10163-4715		1		

# THE COPS FOUNDATION OF KIMBERLY, INC

# Form 990-PF: Return of Private Foundation

# Part XV, Line 3a: Grants and Contributions Paid During the Year

Recipient name and address (home o business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
a Paid during the year				<u> </u>
BIKING FOR BABIES		PC	PROGRAM SUPPORT	1,000.
P O BOX 664				
SAINT CHARLES, MO 63302				
DOM SISTERS OF MARY		PC	PROGRAM SUPPORT	1,000.
4597 WARREN RD				
ANN ARBOR, MI 48105-9909				
	,			65,163.

# Additional information from your Form 990-PF: Return of Private Foundation

### Form 990-PF: Return of Private Foundation

Other Income

### **Continuation Statement**

Description	Revenue and Expense per Book	Net Investment Income	Adjusted Net Income
TAX REBATE			

### Total

### Form 990-PF: Return of Private Foundation

**Taxes** 

### **Continuation Statement**

Description		Revenue and Expense per Book	Net Investment Income	Adjusted Net Income	Disbursement for charitable purpose
FEDERAL EST PAID		720.	720.		
FOREIGN TAXES		749.	749.		
FEDERAL TAX DUE		404.	404.		
	Total	1,873.	1,873.		

## Form 990-PF: Return of Private Foundation

**Other Expenses** 

Description	Revenue and Expense per Book	Net Investment Income	Adjusted Net Income	Disbursement for charitable purpose
ANNUAL FILING FEE	10.			
TAX PREP	350.	350.		
Tota	<b>1</b> 360.	350.		

# **Net Gain or Loss From Sale of Assets**

Name	Employer Identification No
THE COPS FOUNDATION OF KIMBERLY, INC	39-1633247
Asset Information:	
Description of Property 200 SPDR TR UNIT SER 1	
Business Code Exclusion Code	
Date Acquired 05/16/12 How Acquired . Purchased	
Date Sold 02/13/19 Name of Buyer	
Check Box, if Buyer is a Business	
Sales Price 54, 955. Cost or other basis (do not reduce by depreciate	tion)2 <u>6,763.</u>
Sales Expense Valuation Method	
Total Gain (Loss) 28,192. Accumulated Depreciation	· · · ·
Description of Property 9293.68 VANGUARD FIXED INCOME SEC	
Business Code Exclusion Code	
Date Acquired 10/27/16 How Acquired . Purchased	. <b></b>
Date Sold 08/20/19 Name of Buyer	
Check Box, if Buyer is a Business	
Sales Price 100,000. Cost or other basis (do not reduce by depreciate	tion) 99, 907.
Sales Expense Valuation Method	
Total Gain (Loss) 93. Accumulated Depreciation	
Description of Property 668 . 449 WASATCH SMALL CAP GROWTH	
Business Code Exclusion Code	
Date Acquired08/15/02 How Acquired . Purchased	
Date Sold 02/05/19 Name of Buyer .	
Check Box, if Buyer is a Business	
Sales Price25,000. Cost or other basis (do not reduce by deprecial	tion)20, <u>171</u> .
Sales Expense Valuation Method	
Total Gain (Loss) 4,829. Accumulated Depreciation	
Description of Property COMMON TRUST FUND GAIN	
Business Code Exclusion Code	
Date Acquired . Various How Acquired . Purchased	
Date Sold Various Name of Buyer .	. <b></b>
Check Box, if Buyer is a Business	
Sales Price234. Cost or other basis (do not reduce by depreciate	tion)
Sales Expense Valuation Method	
Total Gain (Loss) 234 . Accumulated Depreciation	
Description of Property See Net Gain or Loss from Sale of	
Business Code Exclusion Code	
Date Acquired How Acquired	
Date Sold Name of Buyer .	
Check Box, if Buyer is a Business	
Sales Price Cost or other basis (do not reduce by depreciate	tion)
Sales Expense Valuation Method	
Total Gain (Loss) Accumulated Depreciation	
Totals:	
Total Gain (Loss) of all assets <u>42,742.</u>	
Gross Sales Price of all assets <u>189, 583.</u>	
Unrelated Business Income Business Code	_
Excluded by section 512, 513, 514Exclusion Code	_
Related/Exempt Function Income42,742.	
O 11/7 have to Farm 000 PF Barry 4	
QuickZoom here to Form 990-PF, Page 1	

# Additional information from your Form 990-PF Part I Line 6a Net Gain or Loss From Sale of Assets

# Form 990-PF Part I Line 6a Net Gain or Loss From Sale of Assets Net Gain or Loss from Sale of Assets

Description of Property	Bu sin es s Co de	n	Dat e Acq uire d	How Acquired	Dat e Sol d	Name of Buyer	BuyeaBuseess	Sale s Pric e	or other	Sale s Exp ense	Valuation Method	Total Gain or Loss	Accu mulat ed Depre ciatio n
LONG TERM COMMON TRUST FUND GAIN			Variou s	Purchased	Variou s			331.	0.			331.	
CAPITAL GAIN DISTRIBUTIONS			Variou s	Purchased	Variou s			9,063	-			9,063	

## Investments

Name THE COPS FOUNDATION OF	KIMBERLY, INC			oyer Identification No L633247
Line 10a - Investments - US and State Government Obligations:	End of Year State and Local Obligations Book Value  End of Year State and Local Obligations FMV		End US Government Obligations Book Value	of Year US Government Obligations FMV
Tot to Fm 990-PF, Pt II, Ln 10a			End	of Year
Line 10b - Investm	ents - Corporate	Stock:	Book Value	Fair Market Value
Totals to Form 990-PF, Part II,	Line 10b			
Line 10c - Investme	ents - Corporate	Bonds:	End Book Value	of Year Fair Market Value
Totals to Form 990-PF, Part II,	Line 10c			
Line 12 - Investm	ents - Mortgage I	oans:	End Book Value	of Year Fair Market Value
Tatala to Farm 200 DF Bare!	Line 42			
Totals to Form 990-PF, Part II,	Line 12			
Line 13 - Inv	estments - Other	:	End Book Value	of Year Fair Market Value
ENERGY FINANCIALS EQUITY MUTUAL FUNDS See L-13 Stmt			27,967 172,548 477,852 1,282,210	. 256,346. 725,219.
Totals to Form 990-PF. Part II.	 Line 13		1,262,210	

# Additional information from your 2019 Federal Exempt Tax Return

# Form 990-PF Part II Line 10, 12 and 13 Investments

# L-13 Stmt

Line 13 Description	Line 13 Book	Line 13 FMV
EXCHANGE FUNDS	43,581.	86,088.
FIXED INCOME	1,170,692.	1,181,697.
CASH EQUIVALENT	67,937.	67,937.
Total	1,282,210.	1,335,722.