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OMB No. 1545-0052

2019

Return of Private Foundation

Department of the Treasury Internal Revenue Service

Form 990-PF

or Section 4947(a)(1) Trust Treated as Private Foundation ▶ Do not enter social security numbers on this form as it may be made public.

▶ Go to <u>www.irs.gov/Form990PF</u> for instructions and the latest information.

Open to Public Inspection

or	caler	ndar year 2019, or tax year beginning 01-01-20)19 , and	l ending 12-31-	·2019	
		indation		A Employer id	entification numbe	r
As	tor Stre	et Foundation Inc		39-1656190		
		l street (or P.O. box number if mail is not delivered to street address) STOR STREET	Room/suite	B Telephone nu	ımber (see instructior	ns)
				(414) 727-4664	1	
		, state or province, country, and ZIP or foreign postal code WI 53202		C If exemption	application is pending	g, check here
Cł	neck al	l that apply:	former public charity	D 1. Foreign or	ganizations, check he	re
		\square Final return \square Amended return			ganizations meeting	
		\square Address change \square Name change		<u> </u>	k here and attach cor	· -
_		pe of organization: Section 501(c)(3) exempt private			undation status was t n 507(b)(1)(A), chec	
			e private foundation			
of	year (f	xet value of all assets at end rom Part II, col. (c), ▶\$ 5,473,812 J Accounting method: □ Other (specify) (Part I, column (d) must	Cash Accrual		ation is in a 60-month n 507(b)(1)(B), chec	
Pa	rt I	Analysis of Revenue and Expenses (The total of amounts in columns (b), (c), and (d) may not necessarily	expenses per	b) Net investment income	(c) Adjusted net income	(d) Disbursements for charitable purposes
	1	equal the amounts in column (a) (see instructions).) Contributions, gifts, grants, etc., received (attach	books			(cash basis only)
	2	schedule) Check if the foundation is not required to attach				
	_	Sch. B	14,847	14,847	14,847	
	3 4	Dividends and interest from securities	105,728	105,728		
	5a	Gross rents	100,720		100,7.20	
	ь	Net rental income or (loss)				
Revenue	6a	Net gain or (loss) from sale of assets not on line 10	13			
	b	Gross sales price for all assets on line 6a13				
æ	7	Capital gain net income (from Part IV, line 2)		13		
	8	Net short-term capital gain				
	9 10a	Income modifications				
	b	Gross sales less returns and allowances Less: Cost of goods sold	'			
	c	Gross profit or (loss) (attach schedule)				
	11	Other income (attach schedule)	9 23			
	12	Total. Add lines 1 through 11	120,611	120,588	120,575	
	13	Compensation of officers, directors, trustees, etc.				
	14	Other employee salaries and wages				
ç.	15	Pension plans, employee benefits				
Ë	16a	Legal fees (attach schedule)	65.1 2.000			
EXP	b	Accounting fees (attach schedule)	3,000	15.206		
and Administrative Expenses	17	Other professional fees (attach schedule)	15,206	15,206		
פ	18	Taxes (attach schedule) (see instructions)	1,123			
<u>7</u>	19	Depreciation (attach schedule) and depletion				
	20	Occupancy				
Ĭ	21	Travel, conferences, and meetings				
	22	Printing and publications				
	23	Other expenses (attach schedule)	13			
Operating	24	Total operating and administrative expenses.				
<u>z</u>	25	Add lines 13 through 23	19,342	15,206		318,25
-	25 26	Contributions, gifts, grants paid	318,250			310,25
	20	25	337,592	15,206		318,25
	27	Subtract line 26 from line 12:				
	a	Excess of revenue over expenses and disbursements	-216,981			
	ь	Net investment income (if negative, enter -0-)		105,382		
	C	Adjusted net income (if negative, enter -0-)			120,575	

Attached schedules and amounts in the description column

Investments—corporate bonds (attach schedule)

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

Mortgages and other notes payable (attach schedule).

Foundations that do not follow FASB ASC 958, check here 🕨 🗹

Retained earnings, accumulated income, endowment, or other funds

Total net assets or fund balances (see instructions)

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

Analysis of Changes in Net Assets or Fund Balances

Total net assets or fund balances at beginning of year—Part II, column (a), line 29 (must agree with end-

Total net assets or fund balances at end of year (line 4 minus line 5)—Part II, column (b), line 29

Foundations that follow FASB ASC 958, check here ▶

Capital stock, trust principal, or current funds

Paid-in or capital surplus, or land, bldg., and equipment fund

Investments—land, buildings, and equipment: basis ► __ Less: accumulated depreciation (attach schedule) ►

Investments—other (attach schedule)

Less: accumulated depreciation (attach schedule)

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

Investments-mortgage loans

Land, buildings, and equipment: basis ▶

instructions. Also, see page 1, item I)

Accounts payable and accrued expenses .

and complete lines 24, 25, 29 and 30.

Net assets without donor restrictions .

Net assets with donor restrictions . . .

and complete lines 26 through 30.

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

Other increases not included in line 2 (itemize)

Enter amount from Part I, line 27a

Other assets (describe > _

Other liabilities (describe -_

Grants payable

Beginning of year

894,859

47,201

2,741,169

18,941,592

-16,200,423

2,741,169

2,741,169

Page 2

599,839

48,345

5,473,812

End of year

597,371

48,345

2,524,188

18,941,592

-16,417,404

2,524,188

2,524,188

2,741,169 -216,981

2,524,188

2,524,188 Form **990-PF** (2019)

1

2

3 4

5

Form 990-PF (2019)

Balance Sheets

Part II

11

12

13 14

15

16

17

18

19

20

21

22

23

24

25

26

27 28

29

30

Part III

2

Liabilities

Net Assets or Fund Balances

	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 ▶			l
ی	8	Inventories for sale or use			
Assets	9	Prepaid expenses and deferred charges			
₽ B	10a	Investments—U.S. and state government obligations (attach schedule)			
	b	Investments—corporate stock (attach schedule)	1,726,854	1,726,854	4,674,010

9

Page **3**

	pe the kind(s) of property sold (e.g., arehouse; or common stock, 200 shs		How acquired P—Purchase D—Donation	(c) Date acquired (mo., day, yr.)	(d) Date sold (mo., day, yr.)
1 a Bank of America Sec. Se	ettlement		Р	2000-01-01	2019-02-12
b					
c					
d					
e					
(e) Gross sales price	(f) Depreciation allowed (or allowable)		(g) other basis ense of sale	Gain	(h) or (loss) (f) minus (g)
a	13				13
b					
c					
d					
e					
Complete only for assets	s showing gain in column (h) and ow	ned by the foundation	on 12/31/69		(I)
(i) F.M.V. as of 12/31/69	(j) Adjusted basis as of 12/31/69		(k) s of col. (i) l. (j), if any	col. (k), but no	(h) gain minus ot less than -0-) or from col.(h))
			(3), ,	-	13
b					
С					
d					
e					
If gain, also enter in Pa in Part I, line 8	gain or (loss) as defined in sections art I, line 8, column (c) (see instructi	ons). If (loss), enter -(3	
	Under Section 4940(e) for Re				
(For optional use by domestic p	private foundations subject to the sec	ction 4940(a) tax on n	et investment inc	ome.)	
If section 4940(d)(2) applies, le	eave this part blank.				
If "Yes," the foundation does no	ne section 4942 tax on the distributa ot qualify under section 4940(e). Do	not complete this part			Yes 🔽 No
	nount in each column for each year;	see instructions before	e making any ent		
(a) Base period years Calendar year (or tax year beginning in)	(b) Adjusted qualifying distributions	(c) Net value of noncharital	ole-use assets	(d) Distribution ra (col. (b) divided by	
2018	588,488		5,308,460		0.11086
2017	329,005		5,450,451		0.06036
2016	250,500		5,143,183		0.04871
2015	309,642		5,193,072		0.05963
2014	210,000		5,101,514	.	0.04116
2 Total of line 1, column (2	0.320717
number of years the four	o for the 5-year base period—divide ndation has been in existence if less oncharitable-use assets for 2019 fron	than 5 years	3.0, or by the		0.064143 5,142,587
5 Multiply line 4 by line 3			5	;	329,861
6 Enter 1% of net investm	ent income (1% of Part I, line 27b)		6	5	1,054
7 Add lines 5 and 6			7	,	330,915
If line 8 is equal to or gr	ions from Part XII, line 4 , . . eater than line 7, check the box in Pa				318,250 See the Part VI
instructions.					

Form	990-PF (20)19)							F	age 6	
Pai	rt VII-B	Statements Regar	ding	Activities for Which	Form 4720 May Be	Required (continued	d)				
5a	During the	year did the foundation	pay o	r incur any amount to:					Yes	No	
	(1) Carry	on propaganda, or other	wise a	ttempt to influence legisl	✓ No						
	(2) Influe	nce the outcome of any	specifi	public election (see sect	ion 4955); or to carry	□ les		'			
	on, di	rectly or indirectly, any v	oter re	gistration drive?		· · 🔲 Yes	✓ No	,			
	(3) Provid	le a grant to an individua	l for t	avel, study, or other sim	ilar purposes?	Yes	☑ №	,			
	(4) Provid	le a grant to an organiza	tion ot	her than a charitable, etc	, organization described						
	in sec	tion 4945(d)(4)(A)? See	instru	ctions		· · □ Yes	✓ No	,			
				eligious, charitable, scien							
			•	ention of cruelty to childr		∟ Yes	✓ No	,			
b				nny of the transactions fa		5b					
	_				nt notice regarding disaster assistance? See instructions						
	-	· -		regarding disaster assist		•					
С		•		does the foundation clain	•						
		•		sponsibility for the grant?		· · Yes	□ No	,			
		•		y Regulations section 53.							
6a			•	ive any funds, directly or							
						⊔ Yes	✓ No				
b			r, pay	premiums, directly or ind	irectly, on a personal bei	nefit contract?	•	6 b		No	
- -		6b, file Form 8870.		£	and to the the call the control of the call the call		_				
7a	-	-		foundation a party to a p roceeds or have any net		⊔ res	✓ No) ₇₁ ,			
	•			roceeds or nave any net ·960 tax on payment(s) o			•	7b			
8		•		ar?							
							<u> </u>			<u> </u>	
Pai	t VIII	Information About and Contractors	Offic	ers, Directors, Trust	ees, Foundation Ma	nagers, Highly Paid	1 Emp	loyees	,		
1	List all of	ficers, directors, truste		oundation managers ar							
	(a) Na	me and address	'	b) Title, and average hours per week	(c) Compensation (If not paid, enter	(d) Contributions to employee benefit plans		e) Expe			
				devoted to position	-0-)	deferred compensation		other a	llowand	ces ———	
Lynde	B Uihlein		Vice 1.00	President	0						
	N Astor Stree ukee, WI 53:		1.00								
	J Olson	2023027	Secre	etarv	0						
	N Astor Stree	rt	1.00	,	ľ						
Milwa	ukee, WI 53	2023327									
	O Zimmerma		Presi 2.00	dent&Treas	0						
	N Astor Stree ukee, WI 53:		2.00								
			aid en	nployees (other than th	l nose included on line 1	∟ .–see instructions). If	none,	enter "	NONE	,"	
	•					(d) Contributions to					
(a)		address of each employed	paid	(b) Title, and average hours per week	(c) Compensation	employee benefit		Expen			
	mo	ore than \$50,000		devoted to position		plans and deferred compensation		other al	lowanc	es	
NON						- Compensation					
	_										
Tota	I number of	f other employees paid o	ver \$5	0,000		 ▶					
		, -, p	, -	· · · · · · · · · · · · · · · · · · ·				orm 99	0 DE	(2010)	

Form 990-PF (2019)		Page 7
Part VIII Information About Officers, Directors, Trustees and Contractors (continued)	s, Foundation Managers, Highly Pa	aid Employees,
3 Five highest-paid independent contractors for professional serv	vices (see instructions). If none, enter	"NONE".
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE		
Total number of others receiving over \$50,000 for professional services Part IX-A Summary of Direct Charitable Activities	· · · · · · · · · · · · · · · · · · ·	<u> </u>
List the foundation's four largest direct charitable activities during the tax year. Include r	relevant statistical information such as the numbe	r of L
organizations and other beneficiaries served, conferences convened, research papers pro		Expenses
1 None		0
2		
3		
4		
Part IX-B Summary of Program-Related Investments (see		A wa a comb
Describe the two largest program-related investments made by the foundation during 1	g the tax year on lines I and 2.	Amount
2		
All ables and are a related in contrast Continue by the contrast		
All other program-related investments. See instructions. 3		
Total. Add lines 1 through 3		•
		Form 990-PF (2019)

2a |

2b

2,108

2c

3

4

5

6

7

1a

1b

2

3a 3b

4

5

257,129

2,108

255.021

255.021

255.021

318,250

318,250

318.250

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Distributable amount before adjustments. Subtract line 2c from line 1.

Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1. . .

Expenses, contributions, gifts, etc.—total from Part I, column (d), line 26.

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

income. Enter 1% of Part I, line 27b. See instructions.

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

Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:

Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc.,

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

Tax on investment income for 2019 from Part VI, line 5.

Income tax for 2019. (This does not include the tax from Part VI.). . .

Qualifying Distributions (see instructions)

Amounts set aside for specific charitable projects that satisfy the:

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

1

2a

3

4 5

6

1

2

3

4

5

b

Part XII

a From 2014.

b From 2015. c From 2016. . .

d From 2017.

e From 2018.

255,021

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Page 9

_	•			_	_	_	٠	'	_ (_	_	_	_
	ī	1	3	7		Х	6	П	ī		Γ		ı

-PF (2)	019)
000	Undistributed Income

1 Distributable amount for 2019 from Part XI, line 7

2 Undistributed income, if any, as of the end of 2019: a Enter amount for 2018 only. Excess distributions carryover, if any, to 2019:

f Total of lines 3a through e.

d Applied to 2019 distributable amount. e Remaining amount distributed out of corpus

same amount must be shown in column (a).)

5 Excess distributions carryover applied to 2019. (If an amount appears in column (d), the

a Corpus. Add lines 3f, 4c, and 4e. Subtract line 5

6 Enter the net total of each column as

b Prior years' undistributed income. Subtract c Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed. **d** Subtract line 6c from line 6b. Taxable amount —see instructions e Undistributed income for 2018. Subtract line 4a from line 2a. Taxable amount—see instructions f 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 required - see instructions) 8 Excess distributions carryover from 2014 not applied on line 5 or line 7 (see instructions) . . .

9 Excess distributions carryover to 2020.

10 Analysis of line 9:

a Excess from 2015. . . **b** Excess from 2016. .

c Excess from 2017. . . .

d Excess from 2018. . .

e Excess from 2019. . .

Subtract lines 7 and 8 from line 6a

indicated below:

4 Qualifying distributions for 2019 from Part XII, line 4: ▶ \$ a Applied to 2018, but not more than line 2a **b** Applied to undistributed income of prior years (Election required—see instructions). c Treated as distributions out of corpus (Election required—see instructions).

PF (20	019)	
HH	Undistributed Income (see instruc	tions)
		(a)

Income (see instruc	tions)
	(a) Corpus

58,204

58.472

325,089

58.204

58.472

325.089

63,229

(b)

Years prior to 2018

441.765

63.229

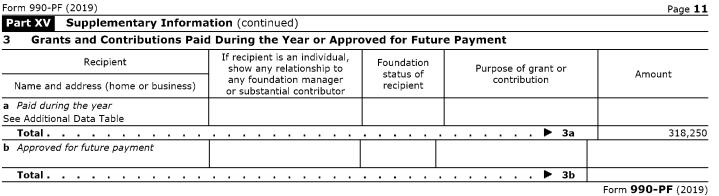
504,994

504,994

(c)

2018

- - **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:



Enter gross	amounts unless otherwise indicated.	Unrelated bus	siness income	Excluded by section	512, 513, or 514	(e) Related or exempt
_	n service revenue:	(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	function income (See instructions.)
	and contracts from government agencies					
2 Membe	rship dues and assessments					
	t on savings and temporary cash nents			14	14,847	
4 Divider	ds and interest from securities			14	105,728	
5 Net ren	ital income or (loss) from real estate:					
	financed property					
	ebt-financed property					
	Ital income or (loss) from personal property					
	(loss) from sales of assets other than					
invento						1.
	ome or (loss) from special events:					1
	profit or (loss) from sales of inventory					
. 1 Other i	•					
a FEDER	AL TAX REFUND		23			
	<u> </u>					
	al. Add columns (b), (d), and (e).		23		120,575	120,611
See w	Add line 12, columns (b), (d), and (e) orksheet in line 13 instructions to verify calcu	lations.)		1.	3	120,611
	-B Relationship of Activities to th		ment of Exem	ot Purposes		
Line No. ▼	Explain below how each activity for which the accomplishment of the foundation's ex					
	instructions.)					

Form 99	90-PF (2019)								ı	Page 13
Part	XVII	Information Re Exempt Organi		ransfers To	and Transaction	ns and	Relation	nships With Nor	ncharitabl	е	
		anization directly or in than section 501(c)(3)							on 501	Yes	s No
a Trai	nsfers f	rom the reporting foun	dation to a n	oncharitable ex	empt organization	of:					
(1)	Cash.								. 1a(1)	No
(2)	Other	assets							. 1a(2)	No
b Oth	er tran	sactions:									
(1)	Sales	of assets to a nonchari	table exemp	t organization.					. 1b(1)	No
(2)	Purch	ases of assets from a n	oncharitable	exempt organiz	zation				1b(No
` '		l of facilities, equipmer	•						1b(No
٠,		oursement arrangemen							. 1b(No
		or loan guarantees.							. 1b(No
		mance of services or m		_					. 1b(No
		facilities, equipment, neer to any of the above									No_
in a	ny tran	ls, other assets, or ser saction or sharing arra	ngement, sh	ow in column (d) the value of the	goods, o	ther asset	s, or services receiv	ved.		
(a) Line	No.	(b) Amount involved	(c) Name of	noncharitable exe	empt organization	(d) Des	cription of t	ransfers, transactions,	and sharing a	rrangem	ents
	-										
	_										
	_										
	_										
	+										
	+										
des	cribed i	dation directly or indirent on section 501(c) (other omplete the following so	than section chedule.	501(c)(3)) or	in section 527? .		, ,	🗆 Ye			
		(a) Name of organization	on		b) Type of organizatio	n		(c) Description	or relationshi)	
	of m	r penalties of perjury, y knowledge and belief n preparer has any kno	, it is true, co								
Sign Here	,	****			2020-07-07	_*	*****		May the IR return with the pr		
	7 9	ignature of officer or t	rustee		Date	,	Γitle	<u>, </u>	below (see instr.)	√ Yes	. □ No
		Print/Type preparer's	name	Preparer's Sig	nature	Date		Check if self-	PTIN		

Paid **Preparer Use Only**

P00365253 employed ▶ 🗌 Karl M Dickson Firm's name ▶ Telluris LLC Firm's EIN ▶39-2041452 Firm's address ▶ 1122 North Astor Street Phone no. (414) 272-2747 Milwaukee, WI 53202

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

or substantial contributor

a Paid during the year				
TreePeoplePO Box 512205 Los Angeles, CA 90051	None	501(c)(3)	Operating Support	7,500
Milwaukee Art Museum	None	501(c)(3)	Operating Support	10,000

Milwaukee Art Museum 700 N Art Museum Drive Milwaukee, WI 53202	None	501(c)(3)	Operating Support	10,000
University School of Milwaukee	None	501(c)(3)	OUR COMMON BOND	50,000

Milwaukee, WI 53202				
University School of Milwaukee 2100 W Fairy Chasm Road Milwaukee, WI 53217	None	501(c)(3)	OUR COMMON BOND	50,000

2100 W Fairy Chasm Road Milwaukee, WI 53217		
		(

Milwaukee, ŴI 53217		
Total	 ▶ 3a	318,250

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

Hame and dadress (nome or business)	or substantial contributor			
a Paid during the year				
Great Cranberry Island Futures Grou	None	501(c)(3)	Operating Support	1,000

CRANBERRY ISLES, ME 04625				
AFS - USA Inc120 Wall Street 4th Flour NEW YORK, NY 10005	None	501(c)(3)	Operating Support	

Total .

AFS - USA Inc120 Wall Street 4th Flour NEW YORK, NY 10005	None	501(c)(3)	Operating Support	2,500
Doctors Without Borders USA PO BOX 5030	None	501(c)(3)	Operating Support	3,000

NEW YORK, NY 10005			1 3 11	,
Doctors Without Borders USA PO BOX 5030 HAGERSTOWN, MD 21741	None	501(c)(3)	Operating Support	3,000

▶ 3a

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

Lancana address (nome or zasmoss)	or substantial contributor			
a Paid during the year				
Feeding America Eastern Wisconsin	None	501(c)(3)	Operating Support	3,000

1700 W Fond du Lac Avenue Milwaukee, WI 53205				
Right to Play 134 West 26th Street Suite 404	None	501(c)(3)	Operating Support	4,000

· · · · · · · · · · · · · · · · · · ·				
Right to Play 134 West 26th Street Suite 404 New York, NY 10001	None	501(c)(3)	Operating Support	4,000

134 West 26th Street Suite 404 New York, NY 10001	THO THE	301(0)(3)	operating support	1,000
Urban Ecology Center1500 E Park Place	None	501(c)(3)	Operating Support	5,000

New York, NY 10001				
Urban Ecology Center1500 E Park Place	None	501(c)(3)	Operating Support	5,000

Total .

Urban Ecology Center1500 E Park Place None 501(c)(3) Operating Support 5,000 Milwaukee, WI 53211				
	None	501(c)(3)	Operating Support	5,000

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

any foundation manager

or substantial contributor

Name and address (home or business)

Total .

	or substantial contributor			
a Paid during the year				
First Stage Children's Theater 325 W Walnut Street Milwaukee, WI 53212	None	501(c)(3)	OPERATING SUPPORT	6,000
AIDS Resource Center of Wisconsin	None	501(c)(3)	Operating Support	5,000

recipient

Milwaukee, WI 53212				
AIDS Resource Center of Wisconsin 820 N Plankinton Avenue Milwaukee, WI 53203	None	501(c)(3)	Operating Support	5,000
Jewish Family Sevices	None	501(c)(3)	Operating Support	3,000

820 N Plankinton Avenue Milwaukee, WI 53203		,,,,		,
Jewish Family Sevices 1300 N Jackson Street Milwaukee, WI 53202	None	501(c)(3)	Operating Support	3,000

Milwaukee, WI 33203				
Jewish Family Sevices 1300 N Jackson Street Milwaukee, WI 53202	None	501(c)(3)	Operating Support	3,000

Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to contribution status of

any foundation manager

Name and address (home or business)

Total.

Name and address (nome or business)	or substantial contributor	·		
a Paid during the year				
MILWAUKEE INSTITUTE OF ART DESIGN	NONE	501(c)(3)	Operating Support	5,000

recipient

MILWAUKEE, WI 53202				
PEARLS FOR TEEN GIRL INC 1805 N Doctor MLK Drive	NONE	501(c)(3)	Operating Support	4,000

PEARLS FOR TEEN GIRL INC 1805 N Doctor MLK Drive MILWAUKEE, WI 53212	NONE	501(c)(3)	Operating Support	4,000
BRENNAN CENTER FOR JUSTICE	NONE	501(c)(3)	Operating Support	2,500

1805 N Doctor MLK Drive MILWAUKEE, WI 53212	HONE	301(0)(3)	operating Support	1,000
BRENNAN CENTER FOR JUSTICE 120 Broadway Suite 1750 New York, NY 10271	NONE	501(c)(3)	Operating Support	2,500

	MILWAUKEE, WI 53212				
	BRENNAN CENTER FOR JUSTICE 120 Broadway Suite 1750 New York, NY 10271	NONE	501(c)(3)	Operating Support	2,500
1					

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

	or substantial contributor			
a Paid during the year				
ISLAND INSTITUTE386 MAIN STREET ROCKLAND, ME 04841	NONE	501(c)(3)	Operating Support	50,000

ROCKLAND, ME 04641				
88Nine Radio Milwaukee 220 East Pittsburgh Milwaukee, WI 53204	NONE	501(C)(3)	CAPITAL	20,000

220 East Pittsburgh Milwaukee, WI 53204				
EMERALD BAY ALUMNIPO Box 959	NONE	501(C)(3)	OPERATING SUPPORT	4,00

Milwaukee, WI 53204				
EMERALD BAY ALUMNIPO Box 959	NONE	501(C)(3)	OPERATING SUPPORT	4,0

· · · · · · · · · · · · · · · · · · ·				
EMERALD BAY ALUMNIPO Box 959 VENICE, CA 90294	NONE	501(C)(3)	OPERATING SUPPORT	4,000

EMERALD BAY ALUMNIPO Box 959	NONE	501(C)(3)	OPERATING SUPPORT	4,000
VENICE, CA 90294		,		, i

VENICE, CA 90294			
Total		▶ 3a	318 250

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

a Paid during the year				
META HOUSE2625 N Weil Street MILWAUKEE, WI 53212	NONE	501(C)(3)	OPERATING SUPPORT	2,500

MILWAUKEE, WI 53212				
AMHERST COLLEGEPO BOX 5000 AMHERST, MA 01002	NONE	501(C)(3)	ALUMNI FUND	5,000
NORTHEAST HARBOR LIBRARY	NONE	501(C)(3)	SCHOLARSHIP PROGRAM	1 000

AMHERST, MA 01002	NONE	301(C)(3)	ALOMNI FOND	3,000
NORTHEAST HARBOR LIBRARY PO BOX 279	NONE	501(C)(3)	SCHOLARSHIP PROGRAM	1,000

AMMERST, MA 01002				
NORTHEAST HARBOR LIBRARY PO BOX 279 NORTHEAST HARBOR, ME 04662	NONE	501(C)(3)	SCHOLARSHIP PROGRAM	1,000

Total .

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

recipient

▶ 3a

318,250

any foundation manager

Name and address (home or business)

Total .

Hame and dadress (nome of business)	or substantial contributor			
a Paid during the year				
Planned Parenthood of Wisconsin 302 N Jackson Street Milwaukee, WI 53202	None	501(C)(3)	Operating Support	5,000

Tillivaditee, IVI 33232				
Boys Girls Club of Greater Milwauke 1558 N 6th Street Milwaukee, WI 53212	NONE	501(c)(3)	A CLUB FOR EVERY KID	25,000

1558 N 6th Street Milwaukee, WI 53212				
TEENS GROW GREENS INC 322 E Michigan Street Suite 204	NONE	501(c)(3)	General Operating	2,500

1558 N 6th Street Milwaukee, WI 53212		(-)(-)		
TEENS GROW GREENS INC 322 E Michigan Street Suite 204	NONE	501(c)(3)	General Operating	2,5

Milwaukee, WI 53212				
TEENS GROW GREENS INC 322 E Michigan Street Suite 204	NONE	501(c)(3)	General Operating	2,500

TEENS GROW GREENS INC	NONE	501(c)(3)	General Operating	2,500
322 E Michigan Street Suite 204				
MILWAUKEE, WI 53202				

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

a Paid during the year				
JEWISH FAMILY SERVICES 1300 N Jackson Street Milwaukee, WI 53202	NONE	501(c)(3)	OPERATING SUPPORT	3,000

Milwaukee, WI 53202				
BALANCE INC1350 14TH AVENUE 4 GRAFTON, WI 53024	NONE	501(C)(3)	OPERATING SUPPORT	1,000
GREATER TOGETHER	NONE		OPERATING SUPPORT	1.500

GRAFTON, WI 53024	NONE	301(0)(3)	OF EIGHTING SOFFORT	1,000
GREATER TOGETHER 2203 NORTH TERRACE AVENUE MILWAUKEE, WI 53202	NONE		OPERATING SUPPORT	1,500

318,250

3a

GRAFION, WI 53024			
GREATER TOGETHER 2203 NORTH TERRACE AVENUE MILWAUKEE, WI 53202	NONE	OPERATING SUPPORT	1,50

Total .

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

ľ	MIDWEST BIKE SHARE	NONE	OPERATING SUPPORT	20.000
	a Paid during the year			
	Traine and dadress (nome or business)	or substantial contributor		

MIDWEST BIKE SHARE 275 WEST WISCONSIN AVENUE 14/15 MILWAUKEE, WI 53203	NONE	OPERATING SUPPORT	20,000
MILWALIVEE BALLET	NONE	ODEDATING SUBBODT	50,000

MILWAUKEE, WI 53203			
MILWAUKEE BALLET 504 N National Avenue MILWAUKEE, WI 53204	NONE	OPERATING SUPPORT	50,000

504 N National Avenue MILWAUKEE, WI 53204	NONE	OF ENATING SOFT ON	30,000
WISCONSIN CONSERVATION VOTERS 133 S BUTLER STREET SUITE 320	NONE	OPERATING SUPPORT	750

MILWAUKEE, WI 53204			
WISCONSIN CONSERVATION VOTERS 133 S BUTLER STREET SUITE 320	NONE	OPERATING SUPPORT	750
MADISON, WI 53703			

	1		
WISCONSIN CONSERVATION VOTERS 133 S BUTLER STREET SUITE 320 MADISON, WI 53703	NONE	OPERATING SUPPORT	750

Total	▶ 3a	310 350
133 S BUTLER STREET SUITE 320 MADISON, WI 53703		

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business) or substantial contributor a Paid during the year **BLACK ARTS MKE** NONE OPERATING SUPPORT 5,000 929 NORTH WATER STREET MILWAUKEE, WI 53202

UNIVERSITY OF ST ANDREWS
AMERICAN F
1201 WEST PEACHTREE STREET
ATLANTA, GA 30309

NONE
OPERATING SUPPORT
5,000

ATLANTA, GA 30309			
GREAT CRANBERRY ISLAND HISTORICAL S 163 CRANBERRY ROAD CRANBERRY ISLES, ME 04625	NONE	OPERATING SUPPORT	1,000

Total .

3a

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

or substantial contributor

Total .

	or substantial contributor		
a Paid during the year			
BEST BUDDIES WISCONSIN 10425 WEST BNORTH AVE 340	NONE	OPERATING SUPPORT	2,500

WAUWATOSA, WI 53226			
MILWAUKEE REPERTORY THEATER 108 EAST WELLS STREET MILWALIKEE WI 53202	NONE	OPERATING SUPPORT	

MILWAUKEE REPERTORY THEATER 108 EAST WELLS STREET MILWAUKEE, WI 53202	NONE	OPERATING SUPPORT	1,000
PUBLIC RIGHTS PROJECT	NONE	OPERATING SUPPORT	1,000

108 EAST WELLS STREET MILWAUKEE, WI 53202			,
PUBLIC RIGHTS PROJECT 1721 BROADWAY 201	NONE	OPERATING SUPPORT	1,00

MILWAUKEE, WI 53202			
PUBLIC RIGHTS PROJECT 1721 BROADWAY 201 OAKLAND, CA 94612	NONE	OPERATING SUPPORT	1,000

PUBLIC RIGHTS PROJECT	NONE	OPERATING SUPPORT	1,000
1721 BROADWAY 201			
OAKLAND, CA 94612			

	•		
OAKLAND, CA 94612			
1721 BROADWAY 201			

efile GRAPHIC print - DO NOT P	ROCESS A	As Filed Data - DLN: 93491189016610					
TY 2019 Accounting Fe	TY 2019 Accounting Fees Schedule						
Name: Astor Street Foundation Inc							
EIN: 39-1656190							
Softw	vare ID: 1	9009920					
Software Version: 2019v5.0							
Category	Amou	nt Ne	t Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes		
ACCOUNTING FEES		3,000	0	0	0		

effile GRAPHIC print - DO NOT PROCESS	AS Filed Data -	DLN: 93491189016610
TV 2040 Other Assets Calcad I	_	
TY 2019 Other Assets Schedule)	

Name: Astor Street Foundation Inc

EIN: 39-1656190

Software ID: 19009920

Software Version: 2019v5.0

3

Island & Coastal Note

Other Assets Schedule					
Description	Beginning of Year - Book Value	End of Year - Book Value	End of Year - Fair Market Value		
Dividends Earned & Unpaid	12,201	13,345	13,345		

35,000

35,000

efile GRAPHIC print - DO NOT PROCESS	As Filed Data - DLN: 93491189016610				
TY 2019 Other Expenses Schedule					
Name: Astor Street Foundation Inc					
EIN:	: 39-1656190				
Software ID: 19009920					
Software Version: 2019v5.0					
Other Expenses Schedule					
Description	Revenue and Expenses per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes	
FEES	10				
POSTAGE & DELIVERY	3				

efile GRAPHIC print - DO NOT PROCESS	As Filed D	ata -	DL	N: 93491189016610
TY 2019 Other Income Schedu	ıle			
Name:	Astor Street	: Foundation Inc		
EIN:	39-1656190			
Software ID:	19009920			
Software Version:	2019v5.0			
Other Income Schedule				
Description		Revenue And Expenses Per Books	Net Investment Income	Adjusted Net Income
FEDERAL TAX REFUND		23		

efile GRAPHIC print - DO NOT PROCE	SS As Filed Data	-	DLN	N: 93491189016610	
TY 2019 Other Professional Fees Schedule					
Name: Astor Street Foundation Inc					
EIN: 39-1656190					
Software ID: 19009920					
Software Version: 2019v5.0					
Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes	
PROFESSIONNAL FEES-INVESTMENT	15,206	15,206	0	0	

efile GRAPHIC print - DO NOT	PROCESS	As Filed Data	-	DLI	N: 93491189016610
TY 2019 Taxes Schedule					
Name: Astor Street Foundation Inc					
EIN: 39-1656190					
Software ID: 19009920					
Software Version: 2019v5.0					
Category	An	nount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
		1,123			