## 8868CANNED MAR 1 0 2021

**Return of Private Foundation** 

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

or Section 4947(a)(1) Trust Treated as Filvate 1 Guindand.

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De Int	partm emal l	ent of the Treasury Revenue Service  Go to www.irs.	ocial security numbers o gov/Form990 <i>PF</i> for instr	uctions and t	nt may be ma he latest info	rmation. 1912 o	pen to Public Inspection
Fo	or ca	lendar year 2019 or tax year beginning		, 2019	and ending	9	, 20
Na	me of	foundation		<del></del> -		A Employer identif	ication number
.1	NOR'	CHWESTERN MUTUAL LIFE FOUNDA	ATION INC			39-17289	08
Nu	mber	and street (or P O box number if mail is not delivered	to street address) ·	-	Room/suite	B Telephone numb	er (see instructions)
		<b>'</b>					
_7	20	EAST WISCONSIN AVENUE				414-271-	1444
Ci	y or to	own, state or province, country, and ZIP or foreign post	al code				
						C If exemption application pending, check here	ation is
_1	4ILV	NAUKEE, WI 53202					_
G	Che	ck all that apply Initial return	Initial return	of a former p	ublic charity	D 1 Foreign organiza	tions, check here ►
		Final return	Amended re	turn		2 Foreign organiza	
		Address change	Name chang	е		85% test, check to computation .	nere and attach
Н	Che	ck type of organization Section 501	(c)(3) exempt private f	foundation	04	, E If private foundation	heterimes terminated —
┙		ection 4947(a)(1) nonexempt charitable trust	Other taxable pr		LIOIT - 1	'   '	)(1)(A), check here .
ı	Fair	market value of all assets at JAcco	ounting method C	ash 🗓 Acc	rual	F If the foundation is	in a 60-month termination
	end		Other (specify)			under section 507(b	)(1)(B), check here
_		▶ \$ 110,457,764 (Part I.		ash basis )	1		
F	art	Analysis of Revenue and Expenses (The	(a) Revenue and	(b) Net inve	estment	(c) Adjusted net	(d) Disbursements for charitable
		total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in	expenses per books	incom		income	purposes
_		column (a) (see instructions) )					(cash basis only)
	1	Contributions, gifts, grants, etc., received (attach schedule).	30,328,129				
	2	check ► attach Sch B	_				
	3	Interest on savings and temporary cash investments.	69,656		9,656	<u>-</u>	
	4	Dividends and interest from securities	2,012,450	2,01	2,450		
	5a					<del></del>	
•		Net rental income or (loss)	2 206 201				
Revenue		Net gain or (loss) from sale of assets not on line 10 Gross sales price for all	2,896,801				
vel	_	assets on line 6a		2 80	06,801		
Re	7 8	Capital gain net income (from Part IV, line 2).  Net short-term capital gain		2,03	70,001	- REC	EIVED
	9	Income modifications		,		181	
		Gross sales less returns and allowances				101 FER A	181
	ь	Less Cost of goods sold .		·			# 2021
		Gross profit or (loss) (attach schedule)				LOGN	181
	11	Other income (attach schedule)				- NGDEI	V, UT -1
	12	Total. Add lines 1 through 11		4,97	8,907		
	13	Compensation of officers, directors, trustees, etc					
šes	14	Other employee salaries and wages					
eņ	15	Pension plans, employee benefits				<del></del>	_
ă	16 a	Legal fees (attach schedule)					_
E E		Accounting fees (attach schedule) . ,					
Ę	С	Other professional fees (attach schedule)		1			
tra	17	Interest				-	
nis	18	Taxes (attach schedule) (see instructions)	1		1		
Administrative Expenses	19	Depreciation (attach schedule) and depletion:				<del> </del>	-
Ad	20	Occupancy			<del></del>		
b	21	Travel, conferences, and meetings					
ā	22	Printing and publications	2 160 165	1.0	11 642		2 055 500
ting	23	Other expenses (attach schedule)	2,168,165	T T	01,642		2,055,580
rat	23 24 25	Total operating and administrative expenses.		1.0	11 642		2 055 500
De	25	Add lines 13 through 23	2,168,166 22,476,726		01,643		2,055,580 22,476,726
U	25 26	Contributions, gifts, grants paid Total expenses and disbursements Add lines 24 and 25	24,644,892		1,643		24,532,306
_	27	Subtract line 26 from line 12	24,044,032	1	, U = J		24,332,300
		Excess of revenue over expenses and disbursements	10,662,144		· ·		
		Net investment income (if negative, enter -0-)	10,002,114	4.87	77,264		
	[	Adjusted not income (if positive enter -0-)		1,5,	<del>-,,</del>		<del></del>

JSA For Paperwork Reduction Act Notice, see instructions. 9E1410 1 000

Form **990-PF** (2019)

P	art II	Balance Sheets Attached schedules and amounts in the description column should be for end-of-year	Beginning of year	End	of year
		amounts only (See instructions )	(a) Book Value	(b) Book Value	(c) Fair Market Value
	1	Cash - non-interest-bearing	5,401,402	2,165,177	
		Savings and temporary cash investments			
		Accounts receivable ▶			,
		Less allowance for doubtful accounts ▶			
		Pledges receivable ▶			, ,
		Less allowance for doubtful accounts ▶			
		Grants receivable			
	_	Receivables due from officers, directors, trustees, and other			
		disqualified persons (attach schedule) (see instructions)			
		Other notes and loans receivable (attach schedule)			
		Less allowance for doubtful accounts ▶		-	
Ś		Inventories for sale or use			
ssets		Prepaid expenses and deferred charges			
AS		Investments - U S and state government obligations (attach schedule).			
		Investments - corporate stock (attach schedule) STMT .2		108,139,296	
		Investments - corporate stock (attach schedule)		,,,	
	11	Investments - land, buildings.			1
į		Less accumulated depreciation	##************************************	**************************************	
		(attach schedule) Investments - mortgage loans			
	12 13	Investments - mortgage loans			
	14	Land, buildings, and			
		Less accumulated depreciation			
		(attach schedule) Other assets (describe ► Accrued Investment Inc )	1.219.943	153, 291	
		Total assets (to be completed by all filers - see the			
		instructions Also, see page 1, item I)		110.457.764	110457,764
		Accounts payable and accrued expenses	33,003,003		1
		Grants payable			,
Ś		Deferred revenue			
Ë		Loans from officers, directors, trustees, and other disqualified persons.			
Ē		Mortgages and other notes payable (attach schedule)			1
Liabilities		Other liabilities (describe)		<del></del>	!
		Other habilities (sessings)			!
	23	Total liabilities (add lines 17 through 22)			
	į	Foundations that follow FASB ASC 958, check here	· = ==		,
nces		and complete lines 24, 25, 29, and 30.			
ä		Net assets without donor restrictions			
쿒	25	Net assets with donor restrictions · · · · · · · · · · · · · · · · · · ·	-		1
ᅙ	24 25	Foundations that do not follow FASB ASC 958, check here		•••	1
들		and complete lines 26 through 30.			}
Ĕ	26	Capital stock, trust principal, or current funds			
S	27	Paid-in or capital surplus, or land, bldg, and equipment fund			
šėt	28	Retained earnings, accumulated income, endowment, or other funds	99,669,019	110,457,763	
Ąŝ	27 28 29	Total net assets or fund balances (see instructions)	99,669,019	110,457,763	
댦	30	Total liabilities and net assets/fund balances (see			
ž		instructions)	99,669,019	110,457,763	
P	art II	Analysis of Changes in Net Assets or Fund Bala		* * * * * * * * * * * * * * * * * * *	
		al net assets or fund balances at beginning of year - Part		must agree with	
•		of-year figure reported on prior year's return)			99,669,019
2		er amount from Part I, line 27a			10,662,144
		er increases not included in line 2 (itemize)   Unrealized			126,600
		lines 1, 2, and 3			110,457,763
		reases not included in line 2 (itemize) ▶		5	
		al net assets or fund balances at end of year (line 4 minus	s line 5) - Part II. column (		110,457,763
<u>~</u>	. 0 (2	and the transfer of faile believed at one of your time 4 minute	of the manner		Form <b>990-PF</b> (2019)

i onn 55	0-11 (2010)					1 age 0
Part I		and Losses for Tax on Inve		/ <b>L</b> \;;;	<u> </u>	
		scribe the kind(s) of property sold (for e		(b) How	(c) Date acquired	(d) Date sold
•	2-story bi	rick warehouse, or common stock, 200 s	shs MLC Co)	P - Purchase D - Donation	(mo , day, yr )	(mo , day, yr )
1 a At	ttachment 3				Various	Various
		-	-			
c	<del></del>					
d						
e						
		(f) Depreciation allowed	(g) Cost or other basis		(h) Gain or (lo	(25)
(6	e) Gross sales price	(or allowable)	plus expense of sale		((e) plus (f) mini	
						2,896,801
<u>a</u>					•	2/020/001
<u>b</u>						
<u> </u>						
<u>d</u>						<del>.</del>
e		have a cour in column (h) and award	by the foundation on 12/21/60			
	omplete only for assets s	howing gain in column (h) and owned			Gains (Col (h) g	
(i) !	FMV as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col (i) over col (j), if any	COI	(k), but not less t Losses (from co	
		45 01 12/3 1/09				
<u>a</u> _						2,896,801
<u>b</u>						
c						
d						
<u>e</u>						
•	Canital gain not income	or (not contal loss)   If ga	ain, also enter in Part I, line 7			
	Capital gain net income	<b>(</b> 11 (10	oss), enter -0- in Part I, line 7	2		2,896,801
		ain or (loss) as defined in sections				
If	gain, also enter in P	art I, line 8, column (c) See inst	tructions If (loss), enter -0- in			
Р	Part I, line 8	<u> </u>	<u></u>	3		
Part \	V Qualification L	Inder Section 4940(e) for Red	duced Tax on Net Investment I	ncome		
(For or	ntional use by domestic	private foundations subject to the	e section 4940(a) tax on net investr	nent inco	me)	
(, 0, 0)	phonal doo by domeon.	private realizations cas, cot to the			,	
lf acct	on 4040(d\(2\) onnico	loove this part blank				
n secu	on 4940(d)(2) applies,	leave this part brank				
Mac th	oo foundation liable for	the section 4942 tay on the distrib	utable amount of any year in the ba	ase nerio	42 <u> </u>	Yes No
		n't qualify under section 4940(e) D		ase perior	u	] 1es 140
				na any an	trice	
1 =	(a)		ar, see the instructions before maki	ng any er	(d)	· · · · · · · · · · · · · · · · · · ·
	Base penod years	(b) Adjusted qualifying distributions	(c) Net value of nonchantable-use assets		Distribution ra	
Calend	ar year (or tax year beginning in)				(col (b) divided by	
	2018	21,542,234				0.2040
	2017	31,257,457				0.2553
	2016	18,718,408				0.1754
	2015	19,796,536	101,943,736			0.1942
	2014	19,051,265	99,741,723			0.1910
2 T	otal of line 1. column (	d)		2		1.0199
		o for the 5-year base period - divid-				<del> </del>
	•	foundation has been in existence i		3		0.2040
u	ne number or years the	Touridation has been in existence i	illess than 5 years			0.2010
_			Dad V. Las E	4	0	C 121 E10
4 E	inter the net value of n	oncharitable-use assets for 2019 fi	rom Part X, line 5			6,434,510
				_		0 670 640
5 N	Multiply line 4 by line 3.			5	1	9,672,640
6 E	Enter 1% of net investm	ent income (1% of Part I, line 27b).		6		48,773
7 A	Add lines 5 and 6			7	1	9,721,413
8 E	nter qualifying distribut	tions from Part XII, line 4		8	2	4,532,306
- 1	f line 8 is equal to or o	reater than line 7, check the box	in Part VI, line 1b, and complete	that part		
	Part VI instructions	,		•	<b>J</b>	

Par	t VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 - see	instructions)
1a	Exempt operating foundations described in section 4940(d)(2), check here	
	Date of ruling or determination letter (attach copy of letter if necessary - see instructions)	
þ,	Domestic foundations that meet the section 4940(e) requirements in Part V, check	48,773
	here X and enter 1% of Part I, line 27b	•
С	All other domestic foundations enter 2% of line 27b Exempt foreign organizations, enter 4% of Part I, line 12, col (b)	m ma manda an a
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only, others, enter -0-)	
3	Add lines 1 and 2	48,773
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only, others, enter -0-)	
5	Tax based on investment income. Subtract line 4 from line 3 If zero or less, enter -0	48,773
6	Credits/Payments	
а	2019 estimated tax payments and 2018 overpayment credited to 2019   6a   79,781	,
b	Exempt foreign organizations - tax withheld at source	1
C	Tax paid with application for extension of time to file (Form 8868)	
d	Backup withholding erroneously withheld	
7	Total credits and payments Add lines 6a through 6d	79,781
8	Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached	
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed	31,008
10 11	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid	31,000
	t VII-A Statements Regarding Activities	-
	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it	Yes No
	participate or intervene in any political campaign?	1a X
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes? See the	
	instructions for the definition	1b X
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials	
	published or distributed by the foundation in connection with the activities	
	Did the foundation file Form 1120-POL for this year?	1c X
d	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year	
	(1) On the foundation S NONE (2) On foundation managers S NONE	
е	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers   NONE	
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?	2 X
-	If "Yes," attach a detailed description of the activities	
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles	
	of incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes	3 X
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	4a X
b	If "Yes," has it filed a tax return on Form 990-T for this year?	4b N/A
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?	5 X
	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	
	By language in the governing instrument, or	
	By state legislation that effectively amends the governing instrument so that no mandatory directions that	
_	conflict with the state law remain in the governing instrument?	6 X 7 X
7	Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col. (c), and Part XV	1 1
8a	Enter the states to which the foundation reports or with which it is registered. See instructions.	
b	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General	
	(or designate) of each state as required by General Instruction G <sup>2</sup> If "No," attach explanation	8b X
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or	
	4942(j)(5) for calendar year 2019 or the tax year beginning in 2019? See the instructions for Part XIV If "Yes,"	
	complete Part XIV	9 X
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their	
	names and addresses	10 X

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Par	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			
٠.,	meaning of section 512(b)(13)? If "Yes," attach schedule See instructions	11		Х
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified			
•	person had advisory privileges? If "Yes," attach statement See instructions	12		Х
13		13	Х	_
	Website address ▶			
14	The books are in care of ▶ ELIZABETH WHITBURN  Telephone no ▶ 414-665-	-5636	<del></del>	
	Located at ▶ 720 E WISCONSIN AVE MILWAUKEE WI ZIP+4 ▶ 53202			
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - check here	<del>.</del>	▶	
	and enter the amount of tax-exempt interest received or accrued during the year			N/A
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	•	Χ
	See the instructions for exceptions and filing requirements for FinCEN Form 114 If "Yes," enter the name of			
	the foreign country ▶			
Par	t 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.	<u> </u>	Yes	No
1a	During the year, did the foundation (either directly or indirectly)			
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person? Yes X No	1		,
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a			'
	disqualified person? Yes X No			
	(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?			'
	(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	ŀ		
	termination of government service, if terminating within 90 days ) Yes X No			,
b	If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in	46		
	Regulations section 53 4941(d)-3 or in a current notice regarding disaster assistance? See instructions	1b		<u>X</u>
	Organizations relying on a current notice regarding disaster assistance, check here	1		ţ
С	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that	1c		, ,
•	were not corrected before the first day of the tax year beginning in 2019?	10		X
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private			
	operating foundation defined in section 4942(j)(3) or 4942(j)(5))  At the end of tax year 2019, did the foundation have any undistributed income (Part XIII, lines			r
а	6d and 6e) for tax year(s) beginning before 2019?			
	If "Yes," list the years	1		
h	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	.		4
	all years listed, answer "No" and attach statement - see instructions )	2b		N/A
С	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here			
	<b>&gt;</b>			'
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	ĺ		
	the 10-, 15-, or 20-year first phase holding period? (Use Form 4720, Schedule C, to determine if the		_	
	foundation had excess business holdings in 2019 )	3b	ļ <u> </u>	N/A
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a		_X_
b	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its			1
	charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2019?	4b		X

Par	t VII-B Statements Regarding Activities	for Which Form	4720 May Be Requ	uired (continued)			
5a	During the year, did the foundation pay or incur any amo					Yes	No
	(1) Carry on propaganda, or otherwise attempt to influe	nce legislation (section	n 4945(e))?	Yes X No	, [ ]		<u>`</u>
•	(2) Influence the outcome of any specific public ele	ction (see section 4	955), or to carry on,				ĺ
	directly or indirectly, any voter registration drive?			Yes X No	,		!
	(3) Provide a grant to an individual for travel, study, or o	ther similar purposes?		Yes X No	,		i
	(4) Provide a grant to an organization other than a	charitable, etc., org	anization described in				1
	section 4945(d)(4)(A)? See instructions			Yes X No	,		1
	(5) Provide for any purpose other than religious, ch	aritable, scientific, l	iterary, or educational				!
	purposes, or for the prevention of cruelty to children	or animals?		Yes X No	,		j
b	If any answer is "Yes" to 5a(1)-(5), did any of the	transactions fail to	qualify under the ex	ceptions described in	ı   <u>.</u> .		
	Regulations section 53 4945 or in a current notice regard	ding disaster assistan	ce? See instructions		5b_		N/A
	Organizations relying on a current notice regarding disas	ster assistance, check	here '	▶			l
C	If the answer is "Yes" to question 5a(4), does the	foundation claim e	xemption from the ta	×			. !
	because it maintained expenditure responsibility for the g	grant?		Yes No	,		1
	If "Yes," attach the statement required by Regulations se	ection 53 4945-5(d)					1
6a	Did the foundation, during the year, receive any fun						
	on a personal benefit contract?			Yes X No	· ··· ·-	- ~	
b	Did the foundation, during the year, pay premiums, dire	ctly or indirectly, on a	personal benefit contrac	<sup>ж</sup>	6b	$\vdash$	X
_	If "Yes" to 6b, file Form 8870		h . lt t	□v ∇			
7a	At any time during the tax year, was the foundation a part of "Yes," did the foundation receive any proceeds or have						 N/A
b	Is the foundation subject to the section 4960 tax on pay	•		""'	15		IV/A
8	remuneration or excess parachute payment(s) during the			Yes X No	,		
Pai	t VIII Information About Officers, Director	rs, Trustees, Fou	ndation Managers				
	and Contractors List all officers, directors, trustees, and foundati						
	······································	(b) Title, and average	(c) Compensation	(d) Contributions to	(e) Expens	e accou	ınt
	(a) Name and address	hours per week devoted to position	(If not paid, enter -0-)	employee benefit plans and deferred compensation	other all		
SEE	ATTACHMENT 4						
		ا ر					
2	Compensation of five highest-paid employees	(other than the	e included on line	1 - see instructi	one) If n	one 4	onto-
2	"NONE."	(other than thos	e included on mie	i - see ilistructi	5115). II III	one, t	enter
		(b) Title, and average	43.00	(d) Contributions to employee benefit	(e) Expens	e accor	unt.
(a)	Name and address of each employee paid more than \$50,000	hours per week devoted to position	(c) Compensation	plans and deferred compensation	other all	owance	es '
NON	ਰ ਵ						
				-			
ı ota	number of other employees paid over \$50,000	<del> </del>	· · · · · · · · · · · · · · · ·		Form 990		

	nformation About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employ nd Contractors <i>(continued)</i>	rees,
3 ` Five hig	hest-paid independent contractors for professional services. See instructions. If none, enter "NONE	
	(a) Name and address of each person paid more than \$50,000 (b) Type of service	(c) Compensation
IONE		
<del> </del>		<u>-</u>
	<del></del>	
	1	
tal number o	of others receiving over \$50,000 for professional services	
	Summary of Direct Charitable Activities	
<u> </u>	tion's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of	F
	nd other beneficianes served, conferences convened, research papers produced, etc	Expenses
1 NONE		
2		
3	<u></u>	
4		
art IX-B	Summary of Program-Related Investments (see instructions)	
	vo largest program-related investments made by the foundation during the tax year on lines 1 and 2	Amount
1 NONE		
· <u>11011B</u>		
2		
All other progra	am-related investments. See instructions	
3		
		<del> </del>
otal. Add line	s 1 through 3	

Pai	Minimum Investment Return (All domestic foundations must complete this part see instructions)	Foreign founda	ations,
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, purposes	etc,	
а	Average monthly fair market value of securities	1a	94,383,752
b		· · · <del>                  -</del>	3,519,304
c			
d	i Total (add lines 1a, b, and c)		97,903,056
e			
	1c (attach detailed explanation)		
2	Acquisition indebtedness applicable to line 1 assets	2	
3	Subtract line 2 from line 1d		97,903,056
4	Cash deemed held for charitable activities Enter 1 1/2% of line 3 (for greater amount,		
	instructions)		1,468,546
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, lii	ne 4 5	96,434,510
6	Minimum investment return. Enter 5% of line 5	6	4,821,726
Pa	Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operational and certain foreign organizations, check here ▶ and do not complete this part )	ng foundations	
1	Minimum investment return from Part X, line 6	1	4,821,726
2 a	· · · · · · · · · · · · · · · · · · ·	. 773	
b			
C		2c	48,773
3	Distributable amount before adjustments Subtract line 2c from line 1		4,772,953
4	Recoveries of amounts treated as qualifying distributions	1 1	-
5	Add lines 3 and 4		4,772,953
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	4,772,953
Pa	Qualifying Distributions (see instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes		
а	Expenses, contributions, gifts, etc - total from Part I, column (d), line 26	1a	24,532,306
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)		
4	Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, I	ine 4 4	24,532,306
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment inc	ome	
	Enter 1% of Part I, line 27b See instructions		
6	Adjusted qualifying distributions. Subtract line 5 from line 4		24,532,306
	Note: The amount on line 6 will be used in Part V, column (b), in subsequent years wh		vhether the foundation
	qualifies for the section 4940(e) reduction of tax in those years		

Рa	rt XIII Undistributed Income (see instr	uctions)			
1	Distributable amount for 2019 from Part XI.	(a) Corpus	(b) Years prior to 2018	(c) 2018	(d) 2019
•	line 7				4,772,953
2	Undistributed income, if any, as of the end of 2019				171127333
	Enter amount for 2018 only				
	Total for pnor years 20,20				
	Excess distributions carryover, if any, to 2019				
	From 2014 14,103,462				
	From 2015 14,728,335				
	From 2016 13,520,499				
	From 2017 25, 206, 177				
	From 2018 16,305,569				
	Total of lines 3a through e	83,864,042			
	Qualifying distributions for 2019 from Part XII,				
	line 4 ▶ \$ 24,532,306				
а	Applied to 2018, but not more than line 2a				
b	Applied to undistributed income of prior years				
	(Election required - see instructions)				
С	Treated as distributions out of corpus (Election				
	required - see instructions)				
d	Applied to 2019 distributable amount			<del></del>	4,772,953
	Remaining amount distributed out of corpus Excess distributions carryover applied to 2019	19,759,353			
5	(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	103,623,395			
b	Prior years' undistributed income Subtract				
	line 4b from line 2b				
С	Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a)				
	tax has been previously assessed				
d	Subtract line 6c from line 6b Taxable amount - see instructions				
е	Undistributed income for 2018 Subtract line				<del>                                     </del>
	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)				
0	Excess distributions carryover from 2014 not	-			
•	applied on line 5 or line 7 (see instructions)	14,103,462			
9	Excess distributions carryover to 2020.	:			
	Subtract lines 7 and 8 from line 6a	89,519,933			
10	Analysis of line 9				
а	Excess from 2015 14,728,335				
b	Excess from 2016 13, 520, 499				
c	Excess from 2017 25, 206, 177				
	Excess from 2018 <u>16,305,569</u>				
e	Excess from 2019 19,759,353		· · - · · · · · · · · · · · · · · ·		- 000 DE

See Attachment 5 c Any submission deadlines

Recommended Deadline for grant submission is March 15th

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

Primary Focus is on organizations and causes in Southeastern Wisconsin

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

JSA 9E1490 1 000

Form 990-PF (2019)

Grants and Contributions Paid Du	ring the Year or App		ruture Payment	
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of	Purpose of grant or contribution	Amount
	or substantial contributor	recipient	- Contribution	<del> </del>
Name and address (home or business)  Paid during the year	or substantial contributor  N/A	Non Private	For Charitable, religious, on educational & Scientific Purposes	22,476,726
Total	<u> </u>	<u></u>	▶ 3a	22,476,72
<b>b</b> Approved for future payment				

Pa	art XVI-A Analysis of Income-Produ	ucing Acti	ivities			-
	er gross amounts unless otherwise indicated		ated business income	Excluded by	y section 512, 513, or 514	(e)
	Program service revenue	(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	Related or exempt function income (See instructions)
•	<u> </u>					(GGG MIGH GGRONG)
	a b					
	d					
	e					
	f	_		-		
	g Fees and contracts from government agencies					
,	Membership dues and assessments			14	69,656	
	Interest on savings and temporary cash investments			14	2,012,450	
	Dividends and interest from securities					
	Net rental income or (loss) from real estate			_		
-	a Debt-financed property					
	b Not debt-financed property					
6	Net rental income or (loss) from personal property					<del> </del>
7	Other investment income					,
8	Gain or (loss) from sales of assets other than inventory			18	2,896,801	
9	Net income or (loss) from special events					
10	Gross profit or (loss) from sales of inventory					
11	Other revenue a					
	b					
	C		<u> </u>			
	d					
	e				4 070 007	
	Subtotal Add columns (b), (d), and (e)			.l	4,978,907	4 070 007
	Total. Add line 12, columns (b), (d), and (e) ee worksheet in line 13 instructions to verify calci					4,978,907
_	art XVI-B Relationship of Activities		ccomplishment of Ex	remnt Dur	nocac	
	me No. Explain below how each activit accomplishment of the foundation	-				
_						
_					• •	
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				-		-
	<del></del>					

	•	Organizations							
1	Did th	e organization direct	ly or indirectly	engage in any of the follow	ving with ar	ny other organization des	cribed	Yes	No
	ın se	ction 501(c) (other	than section	501(c)(3) organizations)	or in sect	ion 527, relating to pe	olitical		
		zations?				- •			
а	Transf	fers from the reportin	g foundation to	a noncharitable exempt or	ganization of	f			
		· · · · · · · · · · · · · · · · · · ·	_				1a(1)		X
									X
b		transactions							
~			ncharitable exe	mpt organization			1b(1)		Х
				able exempt organization					X
	• •			assets					Х
			•						X
		_							X
		_		hip or fundraising solicitations					X
c				ts, other assets, or paid emp					X
		_		es," complete the following				fair m	
. <b>u</b>				ices given by the reporting					
•		<u> </u>		gement, show in column (d					
(a) I	ine no	(b) Amount involved	1	noncharitable exempt organization		scription of transfers, transactions	****		
\#/ L		(a) /ount mirored	N/A	and the algorithmenton	(3) 50.	, , wanded to	,		
			N/A						
					-				
				······································					
		<u> </u>							
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	- 1								
	- 1								
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2a		•	•	ffiliated with, or related to,					٦ .
		· ·	•	ction 501(c)(3)) or in section	1 527?		Y	es X	_ No
b	If "Yes				<del></del>				
		(a) Name of organization	n	(b) Type of organization	1	(c) Description	of relationship		
N/I	A	<del></del>							
	<u></u>								
		$-\Delta$	1.10						
		er penalties of penury, I declar ect and complete Declaration of		ined this return, including accompanyin taxpayer) is based on all information of wh			y knowledge and t	oelief, it	is true,
Sig		1111111	1/1/	- 1 2		Ma	y the IRS discus	s this	retum
_		y my	100	-> 1/22/2021	Pre	sident wit	-		below?
Her	Sig	nature of officer or trustee	7 1	Date	Title	See	e instructions	]Yes [	No
De:		Print/Type preparer's na	me	Preparer's signature		Date Check	ıf PTIN		
Paid						self-em	ployed		
Pre	parer	Firm's name				Firm's EIN	<u> </u>		
Use	Only								
	•					Phone no			
				<del></del>		<u> </u>	Form <b>99</b> (	0-PF	(2019)

Information Regarding Transfers to and Transactions and Relationships With Noncharitable Exempt

## Schedule B

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

Department of the Treasury Internal Revenue Service

## **Schedule of Contributors**

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

2019

Employer identification number Name of the organization 39-1728908 NORTHWESTERN MUTUAL LIFE FOUNDATION INC Organization type (check one) Filers of: Section: Form 990 or 990-EZ 501(c)( ) (enter number) organization 4947(a)(1) nonexempt charitable trust not treated as a private foundation 527 political organization 501(c)(3) exempt private foundation Form 990-PF 4947(a)(1) nonexempt charitable trust treated as a private foundation 501(c)(3) taxable private foundation Check if your organization is covered by the General Rule or a Special Rule. Note: Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule See instructions General Rule For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions **Special Rules** For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of (1) \$5,000, or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1 Complete Parts I and II For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I, II, and III For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions exclusively for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000 If this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., purpose. Don't complete any of the parts unless the General Rule applies to this organization because it received nonexclusively religious, charitable, etc., contributions Caution: An organization that isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990. 990-EZ, or 990-PF), but it must answer "No" on Part IV, line 2, of its Form 990, or check the box on line H of its Form 990-EZ or on its Form 990-PF, Part I, line 2, to certify that it doesn't meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF)

Name of organization
NORTHWESTERN MUTUAL LIFE FOUNDATION INC

Employer identification number

39-1728908

Part I	Contributors (see instructions) Use duplicate copie	s of Part I if additional space is ne	eeded.
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	MAROON, INC  720 E WISCONSIN AVE  MILWAUKEE, WI 53202	\$\$	Person Payroll Noncash  (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
2	NORTHWESTERN MUTUAL LIFE INSURANCE COMPANY  720 E WISCONSIN AVE  MILWAUKEE, WI 53202	\$119,696	Person Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
			Person Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		<b>\$</b>	Person Payroll Noncash (Complete Part II for noncash contributions)

Name of organization NORTHWESTERN MUTUAL LIFE FOUNDATION INC Employer identification number

39-1728908

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

		\ \\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
		\ \ \	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
(a) No. from	(b)	(c) FMV (or estimate)	(d)

(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received

Schedule B (Form 990, 990-EZ, or 990-PF) (2019) Page 4 Employer identification number Name of organization 39-1728908 NORTHWESTERN MUTUAL LIFE FOUNDATION INC Part III Exclusively religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8), or (10) that total more than \$1,000 for the year from any one contributor. Complete columns (a) through (e) and the following line entry. For organizations completing Part III, enter the total of exclusively religious, charitable, etc. contributions of \$1,000 or less for the year. (Enter this information once See instructions ) ▶\$ Use duplicate copies of Part III if additional space is needed (a) No. from (b) Purpose of gift (c) Use of gift (d) Description of how gift is held Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from (b) Purpose of gift (c) Use of gift (d) Description of how gift is held Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from (b) Purpose of gift (c) Use of gift (d) Description of how gift is held Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from (c) Use of gift (d) Description of how gift is held (b) Purpose of gift Part I

(e) Transfer of gift

Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee

## Form 990-PF, Part I, Analysis of Revenue and Expenses

Line 11 Other Income	_
Reimbursement of Prior Year Mutual Fund Fees	0
Miscellaneous Total Other Income	0
Total Other Income	
Line 16a Legal Fee	0
Line 16b Accounting Fee	0
Line 18. Taxes	
Excise tax on investment income Foreign withholding tax Total taxes	0 <u>1</u> 1
Line 22. Printing and Publications	0
Line 23. Other Expenses	
Sponsorship Expense	38,405
Matching Gifts Expense	0
Consultant Fees	0
Investment Fees	101,642
Management Expenses	73,463
Miscellaneous Fees Other Expenses	1,929,655 <u>25,000</u>
Total Other Expenses	2,168,165

Northwestern Mutual Life Foundation, Inc FEIN 39-1728908 Tax Year Ending 6/30/20

Attachment 4

Form 990-PF, Part VIII

Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees and Contractors

Foundation Managers, Highly Paid Employees and Contractors (a) Name and address	(b) Title	(c), (d), (e) Benefits, Expenses, Compensation
John E Schlifske President and C E O The Northwestern Mutual Life Insurance Company 720 East Wisconsin Avenue Milwaukee, WI 53202	Director Chairman	None
Eric P Christophersen 720 East Wisconsin Avenue Milwaukee, WI 53202	Director President	None
Lisa A Cadotte 720 East Wisconsin Avenue Milwaukee, WI 53202	Director	None
Adıtı J Gokhale 720 East Wisconsin Avenue Milwaukee, WI 53202	Director	None
Steve Radke 720 East Wisconsin Avenue Milwaukee, WI 53202	Director	None
Karen A Molloy 720 East Wisconsin Avenue Milwaukee, WI 53202	Treasurer	None
Scott J Morris 720 East Wisconsin Avenue Milwaukee, WI 53202	Secretary	None
Raymond J Manista 720 East Wisconsin Avenue Milwaukee, WI 53202	Director	None
Don J Robertson 720 East Wisconsin Avenue Milwaukee, WI 53202	Director	None