# 990-PF

(R. Received in Arin: 0 4 2020

Department of the Treasury Internal Revenue Service

**Return of Private Foundation** 

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 www.irs gov/Form990PFfor instructions and the latest information.

OMB No 1545-0047

Open to Public Inspection

F	or ca	lendar year 2019 or tax year beginning		, 2019, an	ıd ending		, 20
N	ame o	f foundation				A Employerident	rfication number
	MIL	-STATES ALUMINUM FOUNDATIO	N INC.			39	-2014920
N	umbe	r and street (or P O box number if mail is not delivere	ed to street address)	Ro	om/suite	B Telephone num	ber (see instructions)
	132	TROWBRIDGE DRIVE				9	20-922 <u>-720</u> 7
Ci	ty or t	own, state or province, country, and ZIP or foreign po	ostal code				
						C If exemption application of the control of the co	
	FON	D DU LAC, WI 54937				penamy, eneck no	
G		eck all that apply   Initial return	Initial return	of a former publ	ic charity	D 1 Foreign organiz	ations, check here
		Final return	Amended ret	urn		2 Foreign organiz	ations meeting the
		Address change	Name change	е			here and attach
H	Che	ck type of organization. X Section 50	1(c)(3) exempt private for	oundation	ΔI	] '	<del></del>
ſ	$\neg$	Section 4947(a)(1) nonexempt charitable trust			<i>U</i> 4	· .	on status was terminated (b)(1)(A), check here
ī			counting method: X Ca			]	s in a 60-month termination
-		of year (from Part II, col (c), line	Other (specify)				(b)(1)(B), check here .
		·	I, column (d), must be on ca	ish basis )			
:		Analysis of Revenue and Expenses (T					(d) Disbursements
		total of amounts in columns (b), (c), and (d)	expenses per '	(b) Net investm income	ient (	c) Adjusted net income	for charitable purposes
		may not necessarily equal the amounts in column (a) (see instructions))	books	income		monie	(cash basis only)
_	1	Contributions, gifts, grants, etc., received (attach schedule)	. 110,500.	<del></del>	<u> </u>		ı
	2	Chack if the foundation is not required to			•		
	3	attach Sch B	207		267.		
	4	Dividends and interest from securities	01 007		097.		
	5a	Gross rents				**	
	oa b	Net rental income or (loss)	-			·-	1
a	_	Net gain or (loss) from sale of assets not on line 10	8,439.				
Ž	b	Gross sales price for all 177 20		· · · · · · · · · · · · · · · · · · ·		REC	CFIVED !
Revenue	7	Capital gain net income (from Part IV, line 2)		8	439.		
æ	8	Net short-term capital gain				4	lol l
	9	Income modifications		<del></del>		-B JUN	<b>0 1</b> 2020
		Gross sales less returns					- X
	b	and allowances				OGI	EN LIT
		Gross profit or (loss) (attach schedule)		•			<del>2-14, 0                                     </del>
	11	Other income (attach schedule)					
	12	Total Add lines 1 through 11 · · · · · ·		29,	803.		
_	13	Compensation of officers, directors, trustees, etc.					
es	14	Other employee salaries and wages		]	NONE	NON	E
nse	15	Pension plans, employee benefits			NONE	NON	E
be		Legal fees (attach schedule)	1				
ŭ	b						
Operating and Administrative Exp.	c	Other professional fees (attach scheduler . 1		6.8	886.		
at	17	Interest					
st.	18	Taxes (attach schedule) (see instructions). 2	3,256.	-	347.		
ٍڃٰ	19	Depreciation (attach schedule) and depletion	r				
동	20	Occupancy					
۲	21	Travel, conferences, and meetings		]	NONE	NON	E
	22	Printing and publications			NONE	NON	E
2	23	Other expenses (attach schedule) STMT. 3			32:		32
<u>.</u>	24	Total operating and administrative expenses					
-er		Add lines 13 through 23	1 10 00-1	7.2	265.	NON:	
و و	25	Contributions, gifts, grants paid	145 250	,			145,350
_	26	Total expenses and disbursements Add lines 24 and 2	155 555	7.:	265.	NON	
٦	27	Subtract line 26 from line 12					
1, 2020	- <i>'</i>	Excess of revenue over expenses and disbursement	-15,252.				
ž	ь	Net investment income (if negative, enter -0-		22,	538.	<del></del>	
		Adjusted net income (if negative, enter -0-).		/	<u> </u>	<del></del>	
Fo	_	erwork Reduction Act Notice, see instruction					Form <b>990-PF</b> (2019)

	Polones Chaste	Attached schedules and amounts in the		-2014920	rage z
Part II	<b>Dalance Sheets</b>	Attached schedules and amounts in the description column should be for end-of-year amounts only (See instructions )	Beginning of year (a) Book Value	(b) Book Value	of year (c) Fair Market Value
1	Cash non-interest bear	ng	1,192.	3,129	
2		cash investments			13,834
3		cash investments			
	Loss allewance for doub	otful accounts ►			
.					
4	Pledges receivable				
		otful accounts		<del></del>	<u> </u>
5	<b>G</b> 141116				
6		officers, directors, trustees, and other			
1		ach schedule) (see instructions)			
7	Other notes and loans re	eceivable (attach schedule)	/		
	Less allowance for doub	otful accounts ► NONE			
8 9 10a		se			
9	Prepaid expenses and d	eferred charges			
10a	Investments - U S and state	government obligations (attach schedule)			
ь	Investments - corporate	stock (attach schedule)			
c	Investments - corporate	bonds (attach schedule)			
11	Investments - land, building and equipment basis				
	Less accumulated deprecia	ition ▶			
		loans		<del></del> ·	
12	Investments - mongage	ch schedule)	821 759	802,106.	878,267
14	Land, buildings, and	b stricted to the strict the stri			
	equipment basis Less accumulated deprecia	tion			-
	(attach schedule)				-
15	Other assets (describe				
16		completed by all filers - see the	024 505	0.00	
	instructions Also, see pa	age 1, item I)	834,597.	819,069.	895,230
17	Accounts payable and a	ccrued expenses			
	Grants payable				
19	Deferred revenue				
19 20 21	Loans from officers, directo	rs, trustees, and other disqualified persons			
21	Mortgages and other no	tes payable (attach schedule)			
22	Other liabilities (describe	, ▶) [			
١.	• .				
23.	Total liabilities (add line	s 17 through 22)		NONE	
		FASB ASC 958, check here		210212	
	and complete lines 24,				
	•				
		r restrictions		<del></del> .	
		strictions		<del></del> -	
		ollow FASB ASC 958, check here			
26. 27 28 29 30	and complete lines 26 through 30		024 507	010 060	
26,		ipal, or current funds	834,597.	819,069.	
27	Paid-in or capital surplus, or	land, bldg , and equipment fund			
28	Retained earnings, accumul	ated income, endowment, or other funds			
29	Total net assets or fund	balances (see instructions)	834,597.	819,069.	
30	Total liabilities and	net assets/fund balances (see			
<u> </u>			834,597.	819,069.	
		ges in Net Assets or Fund Balan			<b>,-</b>
Tota	I net assets or fund b	alances at beginning of year - Part II,	, column (a), line 29 (m	oust agree with	
end-	of-year figure reported	f on prior year's return)		1	834,597.
		line 27a			-15,252.
		led in line 2 (itemize) ► INCOME TIMING		3	17.
		· · · · · · · · · · · · · · · · · · ·		4	819,362.
		line 2 (itemize) ► SEE STAT		5	293.
		ilances at end of year (line 4 minus lin			819,069.
. 510	200010 01 10110 00	The state of the s		, 20, 1, 1, 1, 1	Form <b>990-PF</b> (2019)

Part IV Capital Gains and Losses for Tax on Investment Income Page 3

	(a) List and des	scribe the kind(s) of property sold (for e	example, real estate,	(b) How acquired P - Purchase	(c) Date acquired (mo , day, yr )	(d) Date sold (mo , day, yr )
_		rick warehouse, or common stock, 200	sns MLC Co )	D - Donation		
	a PUBLICLY TRADED	SECURITIES		-		<del> </del>
	<u>b</u>			-	_	
_	<u>c</u> d	<del></del>		<u> </u>	<del> </del>	<del>-</del>
	<u></u>	<del></del>		<del> </del>		
		(f) Depreciation allowed	(g) Cost or other basis	<del>                                     </del>	(h) Gain or (los	
	(e) Gross sales price	(or allowable)	plus expense of sale		((e) plus (f) minu	
a	a 177,298.		168,859.			8,439.
t						
c						
	d _					
	Complete only for assets sh	owing gain in column (h) and owned b	by the foundation on 12/31/69	(1)	Gains (Col (h) gai	in minus
	(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		(k), but not less th Losses (from col	nan -0-) <b>or</b>
a	9					8,439.
b	0					
<u>c</u>						
d	<u> </u>					
e						
2	Capital gain net income	or (net capital loss)	ain, also enter in Part I, line 7			
		( IT (II	oss), enter -0- in Part I, line 7	2		8,439.
3		ain or (loss) as defined in sections	•			
	-	art I, line 8, column (c) See ins				
			uced Tax on Net Investment In	3		<u> </u>
	ection 4940(d)(2) applies,	•	and the same of the latest terms and the latest terms are the latest terms and the latest terms are the latest ter			v Va.
		the section 4942 tax on the distrib t qualify under section 4940(e). D	outable amount of any year in the back on not complete this part.	ase perio	a,	Yes X No
1	·		ir; see the instructions before making	o any en	tries	
÷	(a)	(b)	(c)	ig uniy on	(d)	
Calc	Base period years endar year (or tax year beginning in)	Adjusted qualifying distributions				
	2018		Net value of noncharitable-use assets		Distribution rati (col (b) divided by c	
	2017	139,556.	Net value of noncharitable-use assets 803,764.		(col (b) divided by c	
	2016	139,556. 228,097.	803,764.		(col (b) divided by c	ol (c)) 0.173628
		139,556. 228,097. 202,329.	<u> </u>		(col (b) divided by c	ol (c))
	2015	228,097.	803,764. 719,740.		(cot (b) divided by c	0.173628 0.316916 0.317968 0.427076
	2015 2014	228,097. 202,329.	803,764. 719,740. 636,319.		(cot (b) divided by c	0.173628 0.316916 0.317968
		228,097. 202,329. 252,294.	803,764. 719,740. 636,319. 590,748.		(cot (b) divided by c	0.173628 0.316916 0.317968 0.427076 0.651169
2	2014  Total of line 1, column (c	228,097. 202,329. 252,294. 367,970.	803,764. 719,740. 636,319. 590,748. 565,091.	2	(cot (b) divided by c	0.173628 0.316916 0.317968 0.427076
2 3	2014  Total of line 1, column (c	228,097. 202,329. 252,294. 367,970.	803,764. 719,740. 636,319. 590,748. 565,091.		(cot (b) divided by c	0.173628 0.316916 0.317968 0.427076 0.651169
	2014  Total of line 1, column (column deverage distribution ration)	228,097. 202,329. 252,294. 367,970.	803,764. 719,740. 636,319. 590,748. 565,091.	2 3	(cot (b) divided by c	0.173628 0.316916 0.317968 0.427076 0.651169
	Total of line 1, column (of Average distribution ratio the number of years the	228,097. 202,329. 252,294. 367,970.  d)	803,764. 719,740. 636,319. 590,748. 565,091.  Let the total on line 2 by 5 0, or by af less than 5 years		(cot (b) divided by c	0.173628 0.316916 0.317968 0.427076 0.651169
3	Total of line 1, column (c Average distribution ration the number of years the Enter the net value of no	228,097. 202,329. 252,294. 367,970.  d)	803,764. 719,740. 636,319. 590,748. 565,091.  le the total on line 2 by 5 0, or by if less than 5 years	3	(cot (b) divided by c	0.173628 0.316916 0.317968 0.427076 0.651169 1.886757
3	Total of line 1, column (a Average distribution ratio the number of years the Enter the net value of no Multiply line 4 by line 3.	228,097. 202,329. 252,294. 367,970.  d)	803,764. 719,740. 636,319. 590,748. 565,091.  le the total on line 2 by 5 0, or by if less than 5 years	3 4	(cot (b) divided by c	0.173628 0.316916 0.317968 0.427076 0.651169 1.886757 0.377351
3 4 5	Total of line 1, column (of Average distribution ratio the number of years the Enter the net value of no Multiply line 4 by line 3.	228,097. 202,329. 252,294. 367,970.  d)	803,764. 719,740. 636,319. 590,748. 565,091.  le the total on line 2 by 5 0, or by if less than 5 years	3 4 5	(cot (b) divided by c	0.173628 0.316916 0.317968 0.427076 0.651169 1.886757 0.377351 856,248.

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Par	t VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 - see	instr	uction	s) r
1a	Exempt operating foundations described in section 4940(d)(2), check here  and enter "N/A" on line 1			ı
	Date of ruling or determination letter (attach copy of letter if necessary - see instructions)			
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check			<u> 151.</u>
	here and enter 1% of Part I, line 27b			1
C	All other domestic foundations enter 2% of line 27b Exempt foreign organizations, enter 4% of	. <u>.</u>		_ 1
	Part I, line 12, col (b)			
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only, others, enter -0-)			NONE
3	Add lines 1 and 2			<u> 151.</u>
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only, others, enter -0-)			<u> IONE</u>
5	Tax based on investment income Subtract line 4 from line 3 If zero or less, enter -0			<u> 151.</u>
6	Credits/Payments			:
а	2019 estimated tax payments and 2018 overpayment credited to 2019 6a 1,856.			,
b	Exempt foreign organizations - tax withheld at source			,
C	Tax paid with application for extension of time to file (Form 8868) 6c NONE			
d	Backup withholding erroneously withheld	-		
7	Total credits and payments Add lines 6a through 6d		1,8	<u> 356.</u>
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			
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid			105.
11 Dor	Enter the amount of line 10 to be Credited to 2020 estimated tax   452 . Refunded   11			953 <u>.</u>
	VII-A Statements Regarding Activities	$\overline{}$	V	
14	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any political campaign?	1a	Yes	No X
ь.	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes? See the	"		
J	instructions for the definition	1b		Х
	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			
c	Did the foundation file Form 1120-POL for this year?	1c		_ X,
	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year		-	<u> </u>
_	(1) On the foundation Managers (2) On foundation managers (2)			
e	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed			;
	on foundation managers  \$			1
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		
	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			į
	By language in the governing instrument, or			+
	• By state legislation that effectively amends the governing instrument so that no mandatory directions that	-	-	
	conflict with the state law remain in the governing instrument?	6	X	
7	Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col (c), and Part XV	7	Х	,
8a	Enter the states to which the foundation reports or with which it is registered. See instructions.			,
	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General			1
	(or designate) of each state as required by General Instruction G? If "No," attach explanation	8b	X	<del></del> ,
	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or			ند ـ ـا
	4942(j)(5) for calendar year 2019 or the tax year beginning in 2019? See the instructions for Part XIV. If "Yes,"	_	Ī	v
	complete Part XIV	9		<u> X</u>
	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their	10		Х
	names and addresses	<u> </u>		- 11

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rart	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	_	Σ
	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified			-
		12	- 1	Χ
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	X	
	Website address ► N/A			
	The books are in care of ► BETTY KOENIGS Telephone no ► (920) 922-	7207		_
	Located at ► 132 TROWBRIDGE DR., FOND DU LAC, WI ZIP+4 ► 54937			
	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - check here		_	П
	and enter the amount of tax-exempt interest received or accrued during the year			
	At any time during calendar year 2019, did the foundation have an interest in or a signature or other authority	1	/es	No
	· · · · · · · · · · · · · · · · · · ·	16		X
	See the instructions for exceptions and filing requirements for FinCEN Form 114 If "Yes," enter the name of	,		
	the foreign country		ŀ	
	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.	Tv	/es	No
		<del>-                                     </del>		
	Ouring 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	ĺ		•
	2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a			i
,			- 1	
í		ł		
	4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? Yes X No			
,	5) Transfer any income or assets to a disqualified person (or make any of either available for the benefit or use of a disqualified person)?	·		
				1
(	6) Agree to pay money or property to a government official? (Exception Check "No" if the		1	
	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)			
	f any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in	<u>.</u>	~-	_
		ь		
	Organizations relying on a current notice regarding disaster assistance, check here			
	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that			v. '
		С		<u>X</u>
	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			Ĭ
	3d and 6e) for tax year(s) beginning before 2019?			}
	f "Yes," list the years ,,,,,,,			
	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	- 1		
	ill years listed, answer "No" and attach statement - see instructions)	<u> </u>	-	<del></del>
C I	f the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here			i
		- 1	-	
	Old the foundation hold more than a 2% direct or indirect interest in any business enterprise			- 1
	it any time during the year?			1
	f "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	-		
	he 10-, 15-, or 20-year first phase holding period? (Use Form 4720, Schedule C, to determine if the			
-	oundation had excess business holdings in 2019 )	Ь	_	
4a [	Oid the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes? $oxed{4}$	a		X
	Old the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its		- -	+
	haritable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2019?   4	ы	- 1	Χ

Part	VII-B St	tatements Regarding Activities f	or Which Form	4720 May Be Re	quired (contin	ued)		^
5a		r, did the foundation pay or incur any amo	ount to				Yes	No
	(1) Carry on p	ropaganda, or otherwise attempt to influei	nce legislation (section	on 4945(e))?	. Yes	X No		
	(2) Influence	the outcome of any specific public ele	ection (see section	4955), or to carry of	on,			
	directly or	indirectly, any voter registration drive?			. Yes	X No		Ì
	(3) Provide a grant to an individual for travel, study, or other similar purposes? Yes X No							
	(4) Provide a	grant to an organization other than a	charitable, etc., or	ganization described	ın .	_		1
		45(d)(4)(A)? See instructions		-		X No		
		r any purpose other than religious, ch					-	
	purposes,	or for the prevention of cruelty to children	or animals?		. Yes	X No		'
ь	b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify under the exceptions described in							
	Regulations see	ction 53 4945 or in a current notice regard	ding disaster assistar	nce? See instructions .		[-	b	
	Organizations i	relying on a current notice regarding disas	ter assistance, check	here		▶□□		
С	If the answer	is "Yes" to question 5a(4), does the	foundation claim e	exemption from the	tax	_		
	because it maii	ntained expenditure responsibility for the g	grant <sup>7</sup>		. Yes	No		
	If "Yes," attach	the statement required by Regulations see	ction 53 4945-5(d)					
6a	Did the found	ation, during the year, receive any fun	ds, directly or indi	rectly, to pay premiu	ms			'
	on a personal b	penefit contract?			. Yes	X No	_	
b	Did the foundar	tion, during the year, pay premiums, direct	tly or indirectly, on a	personal benefit contr	act <sup>7</sup>	6	b	X
	If "Yes" to 6b, f	ile Form 8870				_,		1
7a	At any time du	ring the tax year, was the foundation a pai	ty to a prohibited tax	k shelter transaction?.	. Yes	X No		
b	If "Yes," did the	foundation receive any proceeds or have	any net income attri	butable to the transact	ion <sup>7</sup>	7	ъ	
8		on subject to the section 4960 tax on payi	• •			_		'
		er excess parachute payment(s) during the	year?		. Yes	X No		
Part		rmation About Officers, Director Contractors	s, Trustees, Fol	indation ivianage	rs, Hignly Paid	Employees	5,	
1	List all officers	, directors, trustees, and foundation						
		(a) Name and address	(b) Title, and average hours per week devoted to position	(c) Compensation (if not paid, enter -0-)	(d) Contributions employee benefit p and deferred compen	lans (e) Exp	ense acco r allowand	
SEE	STATEMENT	. 5						
		<del></del> -			_			
						1		
					<u> </u>			
					ļ	,		
	_							
	Compensation	of five highest-paid employees	(other than thos	se included on lin	e 1 - see inst	ructions). If	none,	enter
			(b) Title, and average	, ·	(d) Contributions			
(a)	Name and address	of each employee paid more than \$50,000	hours per week devoted to position	(c) Compensation	employee bene plans and deferr	ed othe	ense acco allowanc	
			adversario position		compensation	·		
NIONIT				NONE	NONE		MONTE	
NONE	<u> </u>			NONE	NONE		NONE	
			i					
	_ <del></del> _			·				
	***							
						<del> </del>		
			İ	•	[			
			-					
	number of oth	er employees paid over \$50,000		,		<b>•</b>	NONE	
ı otai								

3 Five highest-paid independent contractors for professional services. See instructions If none, enter "NOI	NE."
(a) Name and address of each person paid more than \$50,000 (b) Type of service	(c) Compensation
	NONE
NONE	NONE
	ļ —
otal number of others receiving over \$50,000 for professional services	NONE
Part IX-A Summary of Direct Charitable Activities	NOIAE
List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of organizations and other beneficiaries served, conferences convened, research papers produced, etc.	Expenses
1NONE	· · · · · · · · · · · · · · · · · · ·
TIVONE	
2	
3	
4	,
	1
Part IX-B Summary of Program-Related Investments (see instructions)	Amount
Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2	-
· · · · · · · · · · · · · · · · · · ·	
2	
·	
All other program-related investments See instructions	
3NONE	
otal. Add lines 1 through 3	

	see instructions.)		
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes		
2	Average monthly fair market value of securities	1 <sub>a</sub>	848,722.
b	Average of monthly cash balances	1b	20,565.
c	Fair market value of all other assets (see instructions)		NONE
4	Total (add lines 1a, b, and c)	1d	869,287.
e	Reduction claimed for blockage or other factors reported on lines 1a and		005,201.
·	1c (attach detailed explanation)		
2	Acquisition indebtedness applicable to line 1 assets	2	NONE
3	Subtract line 2 from line 1d	3	869,287.
4	Cash deemed held for charitable activities Enter 1 1/2% of line 3 (for greater amount, see		
•	instructions)	4	13,039.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3 Enter here and on Part V, line 4	5	856,248.
6	Minimum investment return. Enter 5% of line 5	6	42,812.
	Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating four		
(AL	and certain foreign organizations, check here ► and do not complete this part )	iuation	5
1	Minimum investment return from Part X, line 6	1	42,812.
' 2а	Tax on investment income for 2019 from Part VI, line 5		42,012.
	Income tax for 2019 (This does not include the tax from Part VI).		
b		2c	451.
С 3	Add lines 2a and 2b	-	42,361.
3 4	Distributable amount before adjustments Subtract line 2c from line 1	4	NONE
5	Add lines 3 and 4	5	42,361.
		6	42,361. NONE
6	Deduction from distributable amount (see instructions)	-	NONE
7	Distributable amount as adjusted Subtract line 6 from line 5 Enter here and on Part XIII,	7	12 263
	line 1	/	42,361.
Par	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	145,382.
ь	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	NONE
3	Amounts set aside for specific charitable projects that satisfy the		
а	Suitability test (prior IRS approval required)	За	NONE
b	Cash distribution test (attach the required schedule)	3b	NONE
4	Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4	4	145,382.
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income	-	143,302.
-	Enter 1% of Part I, line 27b See instructions	5	N/A
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	145,382.
-	Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when ca		
	qualifies for the section 4940(e) reduction of tax in those years.	.54,411	

Form **990-PF** (2019)

Page 9

Part XIII Undistributed Income (see instru	ctions)	•		
1 Distributable amount for 2019 from Part XI,	(a) Corpus	(b) Years prior to 2018	(c) 2018	(d) 2019
line 7				42,361.
2 Undistributed income, if any, as of the end of 2019				
a Enter amount for 2018 only			NONE	
b Total for prior years 20,20,20		NONE	_	<u> </u>
3 Excess distributions carryover, if any, to 2019				
a From 2014				
<b>b</b> From 2015				i
c From 2016				
<b>d</b> From 2017				
e From 2018				
f Total of lines 3a through e	1,027,499.			
4 Qualifying distributions for 2019 from Part XII, line 4 ▶ \$ 145,382.			,	
a Applied to 2018, but not more than line 2a			NONE	
<b>b</b> Applied to undistributed income of prior years (Election required - see instructions)		NONE		
c Treated as distributions out of corpus (Election				
required - see instructions)	NONE			
d Applied to 2019 distributable amount				42,361.
e Remaining amount distributed out of corpus	103,021.			
5 Excess distributions carryover applied to 2019 (If an amount appears in column (d), the same amount must be shown in column (a) )	NONE			- NONE
6 Enter the net total of each column as indicated below:				·
a Corpus Add lines 3f, 4c, and 4e Subtract line 5	1,130,520.			
<b>b</b> Prior years' undistributed income Subtract				
line 4b from line 2b		NONE		
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		NONE		 
d Subtract line 6c from line 6b Taxable		-		ļ
amount - see instructions		NONE		
e Undistributed income for 2018 Subtract line 4a from line 2a Taxable amount - see instructions			NONE	
f Undistributed income for 2019 Subtract lines				•
4d and 5 from line 1 This amount must be distributed in 2020				NONE
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)	NONE			
8 Excess distributions carryover from 2014 not applied on line 5 or line 7 (see instructions)	339,886.			
9 Excess distributions carryover to 2020.				
Subtract lines 7 and 8 from line 6a	790,634.			
10 Analysis of line 9				i
a Excess from 2015 222, 877.				,
<b>b</b> Excess from 2016 170,717.				ļ
c Excess from 2017				
d Excess from 2018 101, 222.			•	į
e Excess from 2019 103, 021.				orm <b>990-PF</b> (2019)

39-2014920 Form 990-PF (2019)

Pai	t XIV Private Op	erating Foundations	s (see instructions a	nd Part VII-A, questi	on 9)	NOT APPLICABI
	If the foundation has					
	foundation, and the ruling				*	
b	Check box to indicate	=	_			4942(j)(3) or 4942(j)(5)
	Enter the lesser of the ad-	Tax year	у у рими и и и и и и и и и и и и и и и и и	Prior 3 years		10 120/(0/
	justed net income from Part	(a) 2019	(b) 2018	(c) 2017	(d) 2016	(e) Total
	I or the minimum investment		(5) 2010	(0) 2017	(4) 2011	
	return from Part X for each	]				
	year listed					
b	85% of line 2a					
С	Qualifying distributions from Part					
_	XII, line 4, for each year listed			<del>                                     </del>	<del> </del>	
u	Amounts included in line 2c not used directly 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		$\times$			
а	"Assets" alternative test - enter			1		
	(1) Value of all assets					
	(2) Value of assets qualifying under section					
	4942(j)(3)(B)(i)					
b	"Endowment" alternative test-					
	enter 2/3 of minimum invest-					
	ment return shown in Part X, line 6 for each year listed					_
С	"Support" alternative test - enter					
	(1) Total support other than					
	gross investment income (interest, dividends, rents,					<u> </u>
	payments on securities					
	loans (section 512(a)(5)) or royalties)	]				
	(2) Support from general					
	public and 5 or more exempt organizations as				]	
	provided in section 4942					
	(j)(3)(B)(iii)					
	port from an exempt					
	organization					
		tany Information (	Complete this part	only if the founds	tion had \$5	,000 or more in assets a
гаі		uring the year - see		only if the lounds	ition nau \$5	,000 or more in assets a
1	Information Regarding	<u>-</u>			-	
		•		e than 2% of the tota	al contributions	s received by the foundation
	before the close of any					
		, . ,	,	. ,		
<b>h</b>	N/A	the foundation who	own 10% or more o	f the stock of a corn	oration for an	equally large portion of the
	ownership of a partner					equally large portion of the
		5p 5. 55. 5, 5		a		•
	NT / 7					
2	N/A Information Regarding	Contribution Grant	Gift Loan Sahalarshi	n eta Programa:		
				=		
	Check here ► X if t	he foundation only r	makes contributions	to preselected chari	table organiza	itions and does not accept
	complete items 2a, b, o			ints, etc., to individua	ils or organizat	tions under other conditions
		·				
а	The name, address, and	a telephone number of	r email address of the	person to whom appl	ications should	i de addressed
	<b>T</b> 1 ( )					
þ	The form in which appl	ications should be sub	omitted and information	on and materials they s	snould include.	
	Anii aubaasaa					
С	Any submission deadlii	ies				

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

3 Grants and Contributions Paid Dur	Ing the Year or App	roved for F	uture rayment	<del>-</del>
3 Grants and Contributions Paid Dur Recipient Name and address (home or business)	show any relationship to	status of	Purpose of grant or contribution	Amount
Name and address (home or business)	or substantial contributor	recipient	- Contribution	
a Paid during the year				
CDD CONTINUENTO 01				. 145,350
SEE STATEMENT 21			,	. 143,330
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Commence of the second				
Total				145,350.
b Approved for future payment				220,1000
b Approved for fature payment				
,		1		
	•			
	•			
	•			•

Part XVI-	A Analysis of Income-Produ	ucing Acti	ivities			
Enter gross	amounts unless otherwise indicated		ated business income	Excluded by	(e)	
	service revenue	(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	Related or exempt function income (See instructions)
_				<u> </u>		(See instructions )
_						
-						
					-	
						<u></u>
f		-			-	
	and contracts from government agencies			<del></del>		
•	•					
	ship dues and assessments			14	267.	
	n savings and temporary cash investments.  Is and interest from securities			14	21,097.	
	al income or (loss) from real estate				21,057.	
	financed property					
	· · · ·				<u></u>	
	debt-financed property				"	
	if income or (loss) from personal property					
	vestment income			18	8,439.	<del></del>
	oss) from sales of assets other than inventory			-	0,307.	
	me or (loss) from special events · · · · ofit or (loss) from sales of inventory · · ·					
•	venue a					· · · · · · · · · · · · · · · · · · ·
					-· ·	
			<u>.</u>	-		
e						
	Add columns (b), (d), and (e)				29,803.	<del></del>
	dd line 12, columns (b), (d), and (e)					29,803.
	eet in line 13 instructions to verify calcu					20,000.
Part XVI-			complishment of Ex	empt Purr	oses	
Line No						
	Explain below how each activity					
▼	accomplishment of the foundation	on s exemp	purposes (other than t	by providing	tunds for such purposes	s) (See instructions)
		•				
-					<del></del>	,
				_		
				_		
			NOT APPLICABLE			
					,	
		-				_
			<del>-</del>			
						_

Par	XVI	Information R Organizations	egarding	Transfers	to and	Transactio	ns and	Relationshi	ps With	Nonchar	itable	Exe	empt
1	in so	the organization directed to the control of the con	than se	ction 501(c	:)(3) orga	anizations) o	r in sec	ction 527, re				Yes	No
а		sfers from the reporting ash	_									_	Х
h	, -	Other assets									1a(2)		<u>X</u>
Ü		ales of assets to a nor	ncharitable	exempt org	anization						1b(1)		X
		urchases of assets fro										/	<u>X</u>
		ental of facilities, equi											X
		eimbursement arrang oans or loan guarante									_		<u>X</u>
		erformance of service:								r			$\frac{X}{X}$
		ng of facilities, equipn		-	_								X
		answer to any of the			•	_				-			
		of the goods, other in any transaction of		_									
(a) Lı		(b) Amount involved	<del></del>	ne of noncharit			<del></del>	escription of trans					
			117									<u></u>	
	_		<del> </del>				-		<del></del>				
			-				+			<del></del>			
	_							······	···	<del></del>		_	
						<del></del>							
		<u> </u>	<del> </del>			<del></del>	ļ <u> </u>						
	_			····			<del> </del>						
									_				
							[						
			ļ <u>-</u>				<del> </del>						
								········					
2a	s the	foundation directly	or indirect	ly affiliated	with, or i	related to, or	e or mo	ore tax-exemp	t organiza	tions			
		bed in section 501(c)		-					_		Yes	X	No
_b	f "Ye	s," complete the follow	ving sched	ule									
		(a) Name of organizatio	<u>n</u>		(b) Type	of organization			(c) Descriptio	n of relationsh	ip		
													_
	111-4	er penalties of perjury, I decla	Alan I have				abadulas an	d statements and	to the best of	browled-s	and hale	of	
		er penalties of perjury, I decia act, and complete Declaration of							to the bast of	my knowleage	and ben	e1, II I:	s true,
Sign	I)	Della F	Joenie		5/6	5/2020	To	easure	~	May the IRS with the prepare			
lere	Sig	nature of office or trustee	/	/	Date	/	Title			See instructions	X		No
	<u>.l</u>	/ /			<del></del>			<del> </del>	<b></b>				
aid		Print/Type preparer's na		Pre	parer's signa	ture C Q	1_	Date	Chec			1 ( 0 )	,
rep	arer	DONNA S GIKA Firm's name ► ER		OUNG U.S	S. LLP	~ ~ <del>*</del>	<u></u>	105/11/2	2020 self-e	► 34-6	0145 5655		<u> </u>
	Only			CKER DR					THE SERV	<u> </u>	.ديار		
			ICAGO,	IL		60	606		Phone no	312-87			
										-	990	DC ··	0401

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

Department of the Treasury Internal Revenue Service Name of the organization

## **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

39-2014920 MID-STATES ALUMINUM FOUNDATION INC Organization type (check one): Filers of Section: 501(c)( ) (enter number) organization Form 990 or 990-EZ 4947(a)(1) nonexempt charitable trust not treated as a private foundation 527 political organization 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 | X| For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions Special Rules For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of (1) \$5,000, or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1 Complete Parts I and II For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I, II, and III For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions exclusively for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., purpose Don't complete any of the parts unless the General Rule applies to this organization because it received nonexclusively religious, charitable, etc., contributions Caution An organization that isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990, 990-EZ, or 990-PF), but it must answer "No" on Part IV, line 2, of its Form 990, or check the box on line H of its Form 990-EZ or on its

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)

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

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

Name of organization
MID-STATES ALUMINUM FOUNDATION INC.

Employer identification number 39-2014920

Part I	Contributors (see instructions). Use duplicate cop	ies of Part I if additional space is	needed.
(a) No	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
_1_	MID-STATES ALUMINUM, INC  132 TROWBRIDGE DRIVE  FOND DU LAC, WI 54937	\$\$\$110,500.	Person X Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		*	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
		s	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)

HCM520 592V 05/15/2020 10:23:12

	NET INVESTMENT INCOME	9	6,886.
FORM 990PF, PART I - OTHER PROFESSIONAL FEES	REVENUE AND EXPENSES PER BOOKS	988'9	6,886.
I - OTHER PROFESSION		INVESTMNT MNGMNT FEES (NON-DED	TOTALS
RT I =====		NT FE	
', PART	N -	MNGM]	
990PF,	, DESCRIPTION	STMNT	
FORM =====	DESCF	INVES	

STATEMENT

FORM 990PF, PART I - TAXES 

NET INVESTMENT INCOME	283.		<b>1</b>	
REVENUE AND EXPENSES PER BOOKS	1,053. 1,856. 283. 64.	3,2		
DESCRIPTION	FEDERAL TAX PAYMENT - PRIOR YE FEDERAL ESTIMATES - PRINCIPAL FOREIGN TAXES ON QUALIFIED FOR FOREIGN TAXES ON NONQUALIFIED	TOTALS		

α,

STATEMENT

EXPENSES	
OTHER	
- 1	Ш
Н	II II
PART	
990PF,	
FORM	

CHARITABLE PURPOSES	32.	32.
NET INVESTMENT INCOME	32.	32.
REVENUE AND EXPENSES PER BOOKS	63.	63.
DESCRIPTION	OTHER NON-ALLOCABLE EXPENSE -	TOTALS

 $\sim$ 

STATEMENT

FORM 990PF,	PART	III	-	OTHER			WORTH	OR	FUND	BALANCES	
DECCRIPTION					<b>:===</b> =====		 			7.MOIDIE	
DESCRIPTION							•			AMOUNT 	
ROUNDING INCOME TIMIN	G									29	3. 0.
					TOTA	AL				29	3.

FORM 990PF, PART VIII - LIST OF OFFICERS, DIRECTORS, AND TRUSTEES

#### OFFICER NAME:

SUE ROETTGER

ADDRESS:

132 TROWBRIDGE DRIVE FOND DU LAC, WI 54937

TITLE:

DIRECTOR/PRESIDENT

AVERAGE HOURS PER WEEK DEVOTED TO POSITION: 1

#### OFFICER NAME:

MELISSA MEIKLE

ADDRESS:

132 TROWBRIDGE DRIVE

FOND DU LAC, WI 54937

TITLE:

DIRECTOR/VP

AVERAGE HOURS PER WEEK DEVOTED TO POSITION: 1

#### OFFICER NAME:

BETTY KOENIGS

ADDRESS:

132 TROWBRIDGE DRIVE

FOND DU LAC, WI 54937

TITLE:

DIRECTOR/TREASURER

AVERAGE HOURS PER WEEK DEVOTED TO POSITION: 1

#### OFFICER NAME:

NICI COLWIN

ADDRESS:

132 TROWBRIDGE DRIVE

FOND DU LAC, WI 54937

TITLE:

DIRECTOR/SECRETARY

AVERAGE HOURS PER WEEK DEVOTED TO POSITION: 1

5

FORM 990PF, PART VIII - LIST OF OFFICERS, DIRECTORS, AND TRUSTEES

OFFICER NAME: DAWN COLWIN

ADDRESS:

132 TROWBRIDGE DRIVE FOND DU LAC, WI 54937

TITLE:

DIRECTOR

AVERAGE HOURS PER WEEK DEVOTED TO POSITION: 1

39-2014920 MID-STATES ALUMINUM FOUNDATION INC. FORM 990PF, PART XV, LINE 3a - CONTRIBUTIONS, GIFTS, GRANTS PAID \_\_\_\_\_\_\_\_\_ RECIPIENT NAME: OAKFIELD HIGH SCHOOL ADDRESS: 200 WHITE STREET Oakfield, WI 53065 RELATIONSHIP: NONE PURPOSE OF GRANT: PROGRAM SUPPORT FOUNDATION STATUS OF RECIPIENT: AMOUNT OF GRANT PAID ..... 100. RECIPIENT NAME: AMERICAN RED CROSS RELATIONSHIP: NONE PURPOSE OF GRANT: PROGRAM SUPPORT FOUNDATION STATUS OF RECIPIENT: AMOUNT OF GRANT PAID ..... 500. RECIPIENT NAME: MCLEAN HOSPITAL ADDRESS: 115 MILL STREET - MAIL STOP 126 BELMONT, MA 02478 **RELATIONSHIP:** NONE PURPOSE OF GRANT: PROGRAM SUPPORT FOUNDATION STATUS OF RECIPIENT:

AMOUNT OF GRANT PAID ...., 25,000.

RECIPIENT NAME:

TOWN OF BOULDER JUNCTION

ADDRESS:

PO BOX 616

BOULDER JUNCTION, WI 54512

**RELATIONSHIP:** 

NONE

PURPOSE OF GRANT:

PROGRAM SUPPORT

FOUNDATION STATUS OF RECIPIENT:

PC

AMOUNT OF GRANT PAID ..... 500

RECIPIENT NAME:

Whisper Hill Clydesdales

ADDRESS:

322 EAST JOHNSON STREET

Fond du Lac, WI 54935

RELATIONSHIP:

NONE

PURPOSE OF GRANT:

PROGRAM SUPPORT

FOUNDATION STATUS OF RECIPIENT:

PC

RECIPIENT NAME:

St. Marys Springs Academy

ADDRESS:

114 AMORY STREET

Fond du Lac, WI 54935

RELATIONSHIP:

NONE

PURPOSE OF GRANT:

PROGRAM SUPPORT

FOUNDATION STATUS OF RECIPIENT:

PC

MID-STATES ALUMINUM FOUNDATION INC. 39-2 FORM 990PF, PART XV, LINE 3a - CONTRIBUTIONS, GIFTS, GRANTS PAID	014920
RECIPIENT NAME: UW Fond du Lac Foundation ADDRESS: 400 UNIVERSITY DRIVE Fond du Lac, WI 54935 RELATIONSHIP: NONE PURPOSE OF GRANT:	•
PROGRAM SUPPORT FOUNDATION STATUS OF RECIPIENT: PC	
AMOUNT OF GRANT PAID	500.
RECIPIENT NAME: Salvation Army ADDRESS: 237 NORTH MACY STREET Fond du Lac, WI 54935 RELATIONSHIP: NONE PURPOSE OF GRANT: PROGRAM SUPPORT FOUNDATION STATUS OF RECIPIENT: PC AMOUNT OF GRANT PAID	2,025.
RECIPIENT NAME: UNIVERSITY OF CHICAGO ADDRESS: 5235 S HARPER CT 4TH FL CHICAGO, IL 60615 RELATIONSHIP: NONE	
PURPOSE OF GRANT: PROGRAM SUPPORT FOUNDATION STATUS OF RECIPIENT:	•
PC AMOUNT OF GRANT PAID	500.

STATEMENT 10

ADDRESS:

NONE

PC

RELATIONSHIP:

PURPOSE OF GRANT: PROGRAM SUPPORT

92 WEST SECOND STREET Fond du Lac, WI 54935

FOUNDATION STATUS OF RECIPIENT:

MID-STATES ALUMINUM FOUNDATION INC. 39-201 FORM 990PF, PART XV, LINE 3a - CONTRIBUTIONS, GIFTS, GRANTS PAID	.4920
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DECENTENIE NAME	
RECIPIENT NAME: St. Vincent de Paul Society	
ADDRESS: 330 NORTH PETERS AVENUE	
Fond du Lac, 54935 RELATIONSHIP:	
NONE PURPOSE OF GRANT:	
PROGRAM SUPPORT  FOUNDATION STATUS OF RECIPIENT:  PC	t
AMOUNT OF GRANT PAID	500.
RECIPIENT NAME:	
Marian University ADDRESS:	
45 SOUTH NATIONAL AVENUE	
Fond du Lac, WI 54935	
RELATIONSHIP: NONE	-
PURPOSE OF GRANT:	•
PROGRAM SUPPORT	
FOUNDATION STATUS OF RECIPIENT:	•
	0,150.
RECIPIENT NAME:	
The ARC Fond du Lac	
ADDRESS: 500 NORTH PARK AVENUE	
Fond du Lac, WI 54935	
RELATIONSHIP:	
NONE	i
PURPOSE OF GRANT: PROGRAM SUPPORT	
FOUNDATION STATUS OF RECIPIENT:	•
PC	2.2.2
AMOUNT OF GRANT PAID	300.

RECIPIENT NAME: Laconia High School ADDRESS: 301 W DIVISION STREET Rosendale, WI 54974 RELATIONSHIP: N/APURPOSE OF GRANT: PROGRAM SUPPORT FOUNDATION STATUS OF RECIPIENT: PC AMOUNT OF GRANT PAID ..... 100. RECIPIENT NAME: FOND DU LAC HUMANE SOCIETY ADDRESS: 652 TRIANGLE ROAD FOND DU LAC, WI 54935 RELATIONSHIP: NONE PURPOSE OF GRANT: PROGRAM SUPPORT FOUNDATION STATUS OF RECIPIENT: AMOUNT OF GRANT PAID ...... 2,600. RECIPIENT NAME: Family Resource Center ADDRESS: PO BOX 1512 Fond du Lac, WI 54935 RELATIONSHIP:

AMOUNT OF GRANT PAID .....

NONE

PC

PURPOSE OF GRANT: PROGRAM SUPPORT

FOUNDATION STATUS OF RECIPIENT:

MID-STATES ALUMINUM FOUNDATION INC. 39-20 FORM 990PF, PART XV, LINE 3a - CONTRIBUTIONS, GIFTS, GRANTS PAID	14920
RECIPIENT NAME: Big Brothers Big Sister ADDRESS: 448 SOUTH MILITARY ROAD Fond du Lac, WI 54936 RELATIONSHIP: NONE	
PURPOSE OF GRANT: PROGRAM SUPPORT FOUNDATION STATUS OF RECIPIENT:	•
	3,125.
RECIPIENT NAME: The Gratitude Club ADDRESS: 295 RUGGLES STREET Fond du Lac, WI 54935 RELATIONSHIP: NONE PURPOSE OF GRANT: PROGRAM SUPPORT FOUNDATION STATUS OF RECIPIENT: PC AMOUNT OF GRANT PAID	500.
RECIPIENT NAME: Fond du Lac School District ADDRESS: 72 S PORTLAND	
Fond du Lac, WI 54935 RELATIONSHIP: NONE PURPOSE OF GRANT:	
PROGRAM SUPPORT FOUNDATION STATUS OF RECIPIENT: PC AMOUNT OF GRANT PAID	600.

10,000.

RECIPIENT NAME:

Fond du Lac Community Theatre ADDRESS:

PO BOX 855

Fond du Lac, WI 54936

RELATIONSHIP:

NONE

PURPOSE OF GRANT: PROGRAM SUPPORT

FOUNDATION STATUS OF RECIPIENT:

PC

AMOUNT OF GRANT PAID ..... 250.

RECIPIENT NAME: BADGER INSTITUTE

ADDRESS:

633 W WISCONSIN AVE STE 330 MILWAUKEE, WI 53203

RELATIONSHIP:

NONE

PURPOSE OF GRANT:

PROGRAM SUPPORT

FOUNDATION STATUS OF RECIPIENT:

PC

39-2014920 MID-STATES ALUMINUM FOUNDATION INC. FORM 990PF, PART XV, LINE 3a - CONTRIBUTIONS, GIFTS, GRANTS PAID \_\_\_\_\_\_ RECIPIENT NAME: Beacon House friends of women in recovery ADDRESS: PO BOX 1524 Fond du Lac, WI 54936 RELATIONSHIP: NONE PURPOSE OF GRANT: PROGRAM SUPPORT FOUNDATION STATUS OF RECIPIENT: 5,000. AMOUNT OF GRANT PAID ...... RECIPIENT NAME: Agnesian Healthcare Foundation ADDRESS: 430 EAST DIVISION STREET Fond du Lac, WI 54935 RELATIONSHIP: NONE PURPOSE OF GRANT: PROGRAM SUPPORT FOUNDATION STATUS OF RECIPIENT: PC AMOUNT OF GRANT PAID ..... 1,000. RECIPIENT NAME: ASTOP ADDRESS: 430 E DIVISION STREET Fond du Lac, WI 54935 **RELATIONSHIP:** NONE PURPOSE OF GRANT: PROGRAM SUPPORT FOUNDATION STATUS OF RECIPIENT: PC AMOUNT OF GRANT PAID ..... 1,000.

MID-STATES ALUMINUM FOUNDATION INC.  FORM 990PF, PART XV, LINE 3a - CONTRIBUTIONS, GIFTS, GRANTS PAID	-2014920
DEGIDIONE MANE	
RECIPIENT NAME: Envision Greater Fond du Lac	
ADDRESS:	
23 S MAIN STREET, SUITE 101	
Fond du Lac, WI 54935 RELATIONSHIP:	
NONE	
PURPOSE OF GRANT:	
PROGRAM SUPPORT FOUNDATION STATUS OF RECIPIENT:	
PC	
AMOUNT OF GRANT PAID	2,750.
RECIPIENT NAME:	
Habitat for Humanity Fond du Lac Cnty	
ADDRESS: 150 SOUTH BROOKE STREET	
Fond du Lac, WI 54935	
RELATIONSHIP:	
NONE PURPOSE OF GRANT:	
PROGRAM SUPPORT	
FOUNDATION STATUS OF RECIPIENT:	
PC AMOUNT OF GRANT PAID	250.
RECIPIENT NAME:	
FOND DU LAC BMX CLUB	
ADDRESS: 307 N HICKORY ST	
Fond du Lac, WI 53019	
RELATIONSHIP:	
NONE	
PURPOSE OF GRANT: PROGRAM SUPPORT	

AMOUNT OF GRANT PAID .....

FOUNDATION STATUS OF RECIPIENT:

MID-STATES ALUMINUM FOUNDATION INC.	CDANIC	39-2014	1920
FORM 990PF, PART XV, LINE 3a - CONTRIBUTIONS, GIFTS,			
RECIPIENT NAME:	•		
Boys and Girls Club of Fond du Lac			
ADDRESS:	•		
76 WEST 2ND STREET			
Fond du Lac, WI 54935 RELATIONSHIP:			
NONE			
PURPOSE OF GRANT:		•	•
PROGRAM SUPPORT			
FOUNDATION STATUS OF RECIPIENT:			•
PC	•		
AMOUNT OF GRANT PAID		5	5,975.
RECIPIENT NAME:			
Fond du Lac Literacy Services			
ADDRESS:		•	
32 SHEBOYGAN STREET			
Fond du Lac, WI 54935			
RELATIONSHIP:			
NONE PURPOSE OF GRANT:			
PROGRAM SUPPORT			
FOUNDATION STATUS OF RECIPIENT:			
PC '			
AMOUNT OF GRANT PAID			500.
RECIPIENT NAME:			
Cops for Kids Foundation			
ADDRESS:			
126 N MAIN STREET			
Fond du Lac, WI 54935		•	
RELATIONSHIP:			
NONE		•	
PURPOSE OF GRANT:			
PROGRAM SUPPORT FOUNDATION STATUS OF RECIPIENT:			
TOOMDITTON DIVION OF MUCHITHMY.			

AMOUNT OF GRANT PAID .....

MID-STATES ALUMINUM FOUNDATION INC.  59-201 FORM 990PF, PART XV, LINE 3a - CONTRIBUTIONS, GIFTS, GRANTS PAID	4920
RECIPIENT NAME: Loaves and Fishes - Holy Family Parish ADDRESS:	
PO BOX 644  Fond du Lac, WI 54935  RELATIONSHIP:	
NONE PURPOSE OF GRANT:	,
PROGRAM SUPPORT . FOUNDATION STATUS OF RECIPIENT:	
PC - AMOUNT OF GRANT PAID	325.
RECIPIENT NAME: New Beginnings ADDRESS: 270 VINCENT STREET Fond du Lac, WI 94935	
RELATIONSHIP: NONE	
PURPOSE OF GRANT: PROGRAM SUPPORT FOUNDATION STATUS OF RECIPIENT:	
PC . AMOUNT OF GRANT PAID	1,500.
RECIPIENT NAME: United for Diversity ADDRESS:	•
PO BOX 263 Fund du Lac, WI 54936 RELATIONSHIP: NONE	

AMOUNT OF GRANT PAID .....

PURPOSE OF GRANT: PROGRAM SUPPORT

PC

FOUNDATION STATUS OF RECIPIENT:

MID-STATES ALUMINUM FOUNDATION INC. FORM 990PF, PART XV, LINE 3a - CONTRIBUTIONS, GIFTS, GRANTS PAI	
RECIPIENT NAME: Fond du Lac Area Womens Fund ADDRESS: 145 SOUTH MARR STREET, SUITE 2 Fond Du Lac, WI 54935 RELATIONSHIP: NONE PURPOSE OF GRANT: PROGRAM SUPPORT FOUNDATION STATUS OF RECIPIENT: PC AMOUNT OF GRANT PAID	2,500.
RECIPIENT NAME: Pillar & Vine ADDRESS: PO BOX 338 Brandon, WI 53919 RELATIONSHIP: NONE PURPOSE OF GRANT: PROGRAM SUPPORT FOUNDATION STATUS OF RECIPIENT: PC AMOUNT OF GRANT PAID	250.
RECIPIENT NAME: GOEBEL FAMILY FOUNDATION ADDRESS: 1915 KNAPP STREET OSHKOSH, WI 54902 RELATIONSHIP: NONE PURPOSE OF GRANT: PROGRAM SUPPORT FOUNDATION STATUS OF RECIPIENT: PC	
AMOUNT OF GRANT PAID	250.

RECIPIENT NAME: CHARIS PREGNANCY HELP CENTER ADDRESS: PO BOX 283 FOND DU LAC, WI 54936 RELATIONSHIP: NONE PURPOSE OF GRANT: PROGRAM SUPPORT FOUNDATION STATUS OF RECIPIENT: PC AMOUNT OF GRANT PAID ..... 250. RECIPIENT NAME: Fondy Food Pantry ADDRESS: 573 WEST ROLLING MEADOWS DRIVE Fond du Lac, WI 54937 RELATIONSHIP: NONE PURPOSE OF GRANT: PROGRAM SUPPORT FOUNDATION STATUS OF RECIPIENT: AMOUNT OF GRANT PAID ...... 500. RECIPIENT NAME: Moraine Park Foundation ADDRESS: 235 N NATIONAL AVE Fond du Lac, WI 54935 RELATIONSHIP: NONE PURPOSE OF GRANT: PROGRAM SUPPORT FOUNDATION STATUS OF RECIPIENT:

AMOUNT OF GRANT PAID .....

PC

5,000.

39-2014920 MID-STATES ALUMINUM FOUNDATION INC. FORM 990PF, PART XV, LINE 3a - CONTRIBUTIONS, GIFTS, GRANTS PAID \_\_\_\_\_\_ RECIPIENT NAME: Mahala's Hope ADDRESS: N4590 HIGHWAY 45 Eden, WI 53019 RELATIONSHIP: NONE PURPOSE OF GRANT: PROGRAM SUPPORT FOUNDATION STATUS OF RECIPIENT: 500. AMOUNT OF GRANT PAID ..... TOTAL GRANTS PAID: 145,350.

STATEMENT 21