990-PF

Return of Private Foundation

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

umbers on this form as it may be made public.

OMB No 1545-0047
2019
Open to Public Inspection

Department of the Treasury Internal Revenue Service Do not enter social security numbers on this form as it may be made public.
 Go to www.irs.gov/Form990PF for instructions and the latest information.

	For	calen	dar year 2019 or tax year beginning			, and	ending		
	Nan	ne of four	ndation				A Employer	identification number	
	LAD	OKY AS	SSOCIATES FOUNDATION						
•	Nun	nber and	street (or PO box number if mail is not delivered to street address)		Room	/suite	_	39-6081103	
			ORT WASHINGTON RD		2	04	B Telephone	number (see instruction	s)
	City	or town,	state or province, country, and ZIP or foreign postal code						
	ME	QUON	<u> </u>	5309	2			<u> 262-643-4558</u>	3
	Fore	eign cour	ntry name Foreign province/state/county	Foreig	ın posta	l code	C If exempti	on application is pending	g, check here 🕨 🗌
						_			
	G	Check	all that apply Initial return Initial return	of a former pu	iblic cl	harity	D 1. Foreigi	n organizations, check h	ere ▶ 🗌
			☐ Final return ☐ Amended re	•		,	2. Foreigi	n organizations meeting	the 85% test.
			Address change Name change	ne .		. 4		nere and attach compute	
	\overline{H}	Check	type of organization X Section 501(c)(3) exempt pr		on	M	E If private i	oundation status was te	
	$\overline{}$			able private fo	,	U	section 50	7(b)(1)(A), check here	. ▶∟
							1		
				X Cash	LJ A	ccrual		dation is in a 60-month t	
			year (from Part II, col (c), Other (specify)		,		under sec	tion 507(b)(1)(B), check	here
		line 16	````````````````````````````````	e on cash basi	5.) 		<u></u>		
	Pá	art I	Analysis of Revenue and Expenses (The total of	(a) Revenue		(b) Ne	t investment	(c) Adjusted net	(d) Disbursements for charitable
			amounts in columns (b), (c), and (d) may not necessarily	expenses p	er [· ·	ncome	income	purposes
^			equal the amounts in column (a) (see instructions))	BOOKS		5 3 A. W. 10 E. T.	darfinar using Alba	areni en nivera a sine suit "Coracinescossimus.	(cash basis only)
'h	.	1	Contributions, gifts, grants, etc , received (attach schedule)	12	2,000				
Á	(2	Check ► ☐ if the foundation is not required to attach Sch B	2.7	3.83				
- 0	^	3	Interest on savings and temporary cash investments						
		4	Dividends and interest from securities		3,763		3,763	_3,763	
		5a	Gross rents						
		b	Net rental income or (loss)						
	ne	6a	Net gain or (loss) from sale of assets not on line 10						
	Revenue	b	Gross sales price for all assets on line 6a		認認		高级发现		
	Š	7	Capital gain net income (from Part IV, line 2)		至認				
	ď	8	Net short-term capital gain .				的學科學		Yearly
		9	Income modifications						
	1	10a	Gross sales less returns and allowances		思思				
		b	Less Cost of goods sold		3	自能想			
		С	Gross profit or (loss) (attach schedule)						
20		11	Other income (attach schedule) .						
7070		12	Total. Add lines 1 through 11	1:	5,763		3,763	3,763	
3.0	တ္တ	13	Compensation of officers, directors, trustees, etc						
	enses	14	Other employee salaries and wages						
)ec	15	Pension plans, employee benefits						
3	Ехр	16a	Legal fees (attach schedule)			Ĭ	DE		
_		b	Accounting fees (attach schedule)				RE	PEIVED	1
SCANNED	Administrative	С	Other professional fees (attach schedule) .				5	O	
7	Ľa	17	Interest			13	FER	1 9 2020 8	
=	is	18	Taxes (attach schedule) (see instructions) .			T		- 0 2020 - 0	
₹.	흕	19	Depreciation (attach schedule) and depletion			T			
0	듄	20	Occupancy				OG E	EN. UT	
S	4	21	Travel, conferences, and meetings						
	and	22	Printing and publications .						
	ro To	23	Other expenses (attach schedule)		120		120	120	
	یق	24	Total operating and administrative expenses.						
	Operating		Add lines 13 through 23		120		120	120	1 (
	þe	25	Contributions, gifts, grants paid		8,371				8,371
	ō	26	Total expenses and disbursements. Add lines 24 and 25.		8,491	Enfant of Auto	120	120	
		27	Subtract line 26 from line 12	 	0,731	PER CHIST	120	120	8,371
		г, а	Excess of revenue over expenses and disbursements		7 070				
		b	Not investment income (if parative enter 0)	The free party of the ore	7,272				
			Net investment income (if negative, enter -0-)		de nove	- Pannaca	3,643		100
		c	Adjusted net income (if negative, enter -0-)		1	MARK		3,643	

Page 2

ΙPε		Balance Sneets Attached schedules and amounts in the description column	Beginning of year	Enac	n year
		* should be for end-of-year amounts only. (See instructions)	(a) Book Value	(b) Book Value	(c) Fair Market Value
	1	Cash—non-interest-bearing	11,034	2,582	2,582
	2	Savings and temporary cash investments	31,776	47,418	
	3	Accounts receivable •			
		Long allowance for doubtful accounts.	In the second second second		
	4	Diadaga recovers b			
	-	Less allowance for doubtful accounts	A STATE OF THE PARTY OF THE PAR		
	5	Grants receivable			
	6	Receivables due from officers, directors, trustees, and other			
		disqualified persons (attach schedule) (see instructions)			
	7	Other notes and loans receivable (attach schedule)			
	'	Less: allowance for doubtful accounts			
S	8	Inventories for sale or use .			
et	l Ť				<u> </u>
Assets	9 10a	Prepaid expenses and deferred charges			L
4	l	Investments—U.S. and state government obligations (attach schedule)			
	b	Investments—corporate stock (attach schedule)	<u> </u>		
	C	Investments—corporate bonds (attach schedule)		J. Address St. Co.	ACHASANSONE BUSANCIS
	11	Investments—land, buildings, and equipment basis			
	40	Less accumulated depreciation (attach schedule)	 		
	12	Investments—mortgage loans	50 500	50 500	40.407
	13	Investments—other (attach schedule)	58,592	58,592	49,127
	14	Land, buildings, and equipment basis		25 3 4 5 5 5 5 4 5 5 5 5 5 5 5 5 5 5 5 5	
	45	Less. accumulated depreciation (attach schedule)	 		
	15	Other assets (describe)		···	
	16	Total assets (to be completed by all filers—see the	101 100	400 500	00 127
	17	Instructions Also, see page 1, item I)	101,402	108,592	99,127
	18	Accounts payable and accrued expenses Grants payable			
es	19	Deferred revenue			
Liabilities	20	Loans from officers, directors, trustees, and other disqualified persons			THE STATE OF THE S
ab	21	Mortgages and other notes payable (attach schedule)			
	22	Other liabilities (describe			
	23	Total liabilities (add lines 17 through 22)	0		
<u></u>					
Balances		Foundations that follow FASB ASC 958, check here and complete lines 24, 25, 29, and 30.			
an	24	Net assets without donor restrictions .	 		
3a	25	Net assets with donor restrictions			
		Foundations that do not follow FASB ASC 958, check here	ļ		
5	1	and complete lines 26 through 30.			
Ŧ	26	Capital stock, trust principal, or current funds			
0	27	Paid-in or capital surplus, or land, bldg., and equipment fund			
ets	28	Retained earnings, accumulated income, endowment, or other funds	101,402	108,592	
SS	29	Total net assets or fund balances (see instructions).	101,402	108,592	A CONTRACTOR OF THE PARTY OF TH
t A	30	Total liabilities and net assets/fund balances (see	101,402	100,392	
Net Assets or Fund	**	instructions) .	101,402	108,592	
Pa	rt ili	Analysis of Changes in Net Assets or Fund Balances	101,402	100,592	AND THE MENT OF THE PARTY OF
	_	net assets or fund balances at beginning of year—Part II, column (a)	Line 20 (must acros	with	T
•	end-d	of-year figure reported on prior year's return)	, mie 23 (must agree		05 404
2		r amount from Part I, line 27a		1 2	95,401
3				2	7,272
4		r increases not included in line 2 (itemize) Prior year donation ines 1, 2, and 3	5 16061460	3	6,001
5		eases not included in line 2 (itemize) Federal Taxes	•	4	108,674
		net assets or fund balances at end of year (line 4 minus line 5)—Par	t II. column (b), line 3	. 5	108,592
_			, <u>55.41111 (5), 1116 2</u>		100,392

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		<u>Losses for Tax on Investme</u>	III IIICOIIIE			
	a) List and describe the kind 2-story brick warehouse	(s) of property sold (for example, real estate e, or common stock, 200 shs MLC Co)		(b) How acquired P—Purchase D—Donation	(c) Date acquired (mo , day, yr)	(d) Date sold (mo , day, yr)
1a						
b						
_ <u>c</u>						
<u>d</u> _	·					
<u>e</u>	· · · · · · · · · · · · · · · · · · ·					
	(e) Gross sales pnce	(f) Depreciation allowed (or allowable)	107	or other basis ense of sale		Gain or (loss) is (f) minus (g))
_ <u>a</u> b						
						
d						
е						
	Complete only for assets sho	wing gain in column (h) and owned b	y the foundatio	n on 12/31/69	(I) Gains (I	Col (h) gain minus
	(i) FM V as of 12/31/69	(j) Adjusted basis as of 12/31/69		ess of col (i)	col (k), but	not less than -0-) or s (from col (h))
a			 			
b						
С						
d						
<u>e</u>						
2	Capital gain net income or (ner capital ioss) 1	so enter in Pa	7	2	
3	Net short-term capital gain o	or (loss) as defined in sections 12:	enter -0- in Pa 22(5) and (6)	arti, iirle /		
•		ne 8, column (c) See instructions		er -0- in 1		
	Part I, line 8		(1000), 0111	}	3	
Part		er Section 4940(e) for Reduc	ed Tax on	Net Investment	Income	
		ite foundations subject to the sect	ion 4940(a) ta			
f sec Vas t	tion 4940(d)(2) applies, leave the foundation liable for the se s," the foundation doesn't qua	this part blank ection 4942 tax on the distributable lify under section 4940(e) Do not	e amount of a complete this	ax on net investme iny year in the base s part	nt income)	☐ Yes 🛛 N
f sec Vas t	tion 4940(d)(2) applies, leave the foundation liable for the se s," the foundation doesn't qua Enter the appropriate amou	this part blank	e amount of a complete this	ax on net investme iny year in the base s part	nt income)	
f sec Vas t f "Ye	tion 4940(d)(2) applies, leave the foundation liable for the se s," the foundation doesn't qua Enter the appropriate amount (a) Base penod years	this part blank ection 4942 tax on the distributable lify under section 4940(e) Do not	e amount of a complete this	ax on net investme iny year in the base s part	nt income) e period? ng any entries	(d) Distribution ratio
f sec Vas t f "Ye	tion 4940(d)(2) applies, leave the foundation liable for the se s," the foundation doesn't qua Enter the appropriate amount (a)	this part blank ection 4942 tax on the distributable lify under section 4940(e) Do not nt in each column for each year, s (b) Adjusted qualifying distributions	e amount of a complete this ee the instruc	ex on net investme iny year in the base is part ctions before makin (c) of nonchantable-use as	nt income) e period? ng any entries	(d) Distribution ratio (b) divided by col (c))
f sec Vas t f "Ye	tion 4940(d)(2) applies, leave the foundation liable for the se s," the foundation doesn't qua Enter the appropriate amount (a) Base penod years endar year (or tax year beginning in)	this part blank ection 4942 tax on the distributable lify under section 4940(e) Do not nt in each column for each year, s (b) Adjusted qualifying distributions	e amount of a complete this	ex on net investme iny year in the base is part ctions before makin (c) of noncharitable-use as	nt income) e period? ng any entries	(d) Distribution ratio (b) divided by cot (c)) 0 10556
f sec Vas t f "Ye	tion 4940(d)(2) applies, leave the foundation liable for the se s," the foundation doesn't qua Enter the appropriate amound (a) Base penod years endar year (or tax year beginning in) 2018 2017 2016	this part blank ection 4942 tax on the distributable lify under section 4940(e) Do not nt in each column for each year, s (b) Adjusted qualifying distributions 9, 15,	e amount of a complete this ee the instruction Net value	ex on net investme iny year in the basis is part ctions before makin (c) of noncharitable-use as 89	nt income) e period? ng any entries ssets (col i) 9,835	(d) Distribution ratio (b) divided by col (c)) 0 10556
sec Vas t "Ye	tion 4940(d)(2) applies, leave the foundation liable for the sets," the foundation doesn't qual Enter the appropriate amous (a) Base penod years endar year (or tax year beginning in) 2018 2017 2016 2015	this part blank ection 4942 tax on the distributable lify under section 4940(e) Do not not in each column for each year, s (b) Adjusted qualifying distributions 9, 15, 14, 24,	e amount of a complete this ee the instruction Net value 483 536 552 332	ex on net investme any year in the base is part ctions before makin (c) of nonchantable-use as 89 10	nt income) e period? ng any entries esets (col in 19,835) 7,930	(d) Distribution ratio (b) divided by col (c)) 0 10556 0 15864 0 13553
f sec Vas t f "Ye	tion 4940(d)(2) applies, leave the foundation liable for the se s," the foundation doesn't qua Enter the appropriate amound (a) Base penod years endar year (or tax year beginning in) 2018 2017 2016	this part blank ection 4942 tax on the distributable lify under section 4940(e) Do not not in each column for each year, s (b) Adjusted qualifying distributions 9, 15, 14, 24,	e amount of a complete this ee the instruction Net value 483 536 552	ex on net investme iny year in the base is part ctions before makin (c) of noncharitable-use as 89 100 120	nt income) e period? ng any entries esets (col i) 9,835 7,930 7,366	(d) Distribution ratio (b) divided by col (c)) 0 10556 0 15864 0 13553
f sec Vas t f "Ye 1	tion 4940(d)(2) applies, leave the foundation liable for the sets," the foundation doesn't quate the appropriate amount (a) Base penod years endar year (or tax year beginning in) 2018 2017 2016 2015 2014	this part blank ection 4942 tax on the distributable lify under section 4940(e) Do not not in each column for each year, s (b) Adjusted qualifying distributions 9, 15, 14, 24,	e amount of a complete this ee the instruction Net value 483 536 552 332	ex on net investme iny year in the base is part ctions before makin (c) of noncharitable-use as 89 100 120	nt income) e period? ng any entries ssets (col i) 9,835 7,930 7,366 3,033 1,327	(d) Distribution ratio (b) divided by col (c)) 0 10556 0 15864 0 13553 0 19776
f sec Was t f "Ye: Cal	tion 4940(d)(2) applies, leave the foundation liable for the sets," the foundation doesn't quate the appropriate amount (a) Base penod years endar year (or tax year beginning in) 2018 2017 2016 2015 2014 Total of line 1, column (d)	this part blank ection 4942 tax on the distributable lify under section 4940(e) Do not nt in each column for each year, s (b) Adjusted qualifying distributions 9, 15, 14, 24,	e amount of a complete this ee the instruction Net value 483 536 552 332 374	ex on net investme iny year in the base is part ctions before makin (c) of noncharitable-use as 8: 9: 10: 12: 14	nt income) e period? ng any entries esets (col i) 9,835 7,930 7,366 3,033	(d) Distribution ratio (b) divided by col (c)) 0 10556 0 15866 0 13555 0 19776
f sec Vas t f "Ye: 1	tion 4940(d)(2) applies, leave the foundation liable for the sets," the foundation doesn't quate the appropriate amount (a) Base penod years endar year (or tax year beginning in) 2018 2017 2016 2015 2014 Total of line 1, column (d) Average distribution ratio for	this part blank ection 4942 tax on the distributable lify under section 4940(e) Do not not in each column for each year, s (b) Adjusted qualifying distributions 9, 15, 14, 24, 15, r the 5-year base period—divide t	e amount of a complete this see the instruction Net value 483 536 552 332 374 he total on lin	ex on net investme sny year in the base s part ctions before makin (c) of noncharitable-use as 8: 9: 10: 12: 14 e 2 by 5 0, or by	nt income) e period? ng any entries ssets (col i) 9,835 7,930 7,366 3,033 1,327	(d) Distribution ratio (b) divided by col (c)) 0 1055(0 1586- 0 1355; 0 1977(0 1087(
f sec Nas t f "Ye: Cal	tion 4940(d)(2) applies, leave the foundation liable for the sets," the foundation doesn't qual Enter the appropriate amoust (a) Base penod years endar year (or tax year beginning in) 2018 2017 2016 2015 2014 Total of line 1, column (d) Average distribution ratio for the number of years the foundation of the set of the s	this part blank ection 4942 tax on the distributable lify under section 4940(e) Do not not in each column for each year, s (b) Adjusted qualifying distributions 9, 15, 14, 24, 15, r the 5-year base period—divide t	e amount of a complete this ee the instruction Net value 483 536 552 332 374 he total on liness than 5 years	ex on net investme sny year in the basis is part ctions before makin (c) of noncharitable-use as 80 91 10 12: 14 e 2 by 5 0, or by ars .	nt income) e period? ng any entries ssets (col i) 9,835 7,930 7,366 3,033 1,327	(d) Distribution ratio (b) divided by cot (c)) 0 10556 0 13555 0 19776 0 10876 0 70629
f sec Was t f "Ye. 1 Cal 2 3	tion 4940(d)(2) applies, leave the foundation liable for the sets," the foundation doesn't qual Enter the appropriate amound (a) Base penod years endar year (or tax year beginning in) 2018 2017 2016 2015 2014 Total of line 1, column (d) Average distribution ratio for the number of years the four	this part blank ection 4942 tax on the distributable lify under section 4940(e) Do not not in each column for each year, s (b) Adjusted qualifying distributions 9, 15, 14, 24, 15, r the 5-year base period—divide t	e amount of a complete this ee the instruction Net value 483 536 552 332 374 he total on liness than 5 years	ex on net investme sny year in the basis is part ctions before makin (c) of noncharitable-use as 80 91 10 12: 14 e 2 by 5 0, or by ars .	nt income) e period? ng any entries esets (col i) 9,835 7,930 7,366 3,033 1,327	(d) Distribution ratio (b) divided by cot (c)) 0 10556 0 13555 0 19776 0 10876 0 70629
f sec Was t f "Ye 1 Cal	tion 4940(d)(2) applies, leave the foundation liable for the sets," the foundation doesn't qual Enter the appropriate amoust (a) Base penod years endar year (or tax year beginning in) 2018 2017 2016 2015 2014 Total of line 1, column (d) Average distribution ratio for the number of years the foundation of the set of the s	this part blank ection 4942 tax on the distributable lify under section 4940(e) Do not not in each column for each year, s (b) Adjusted qualifying distributions 9, 15, 14, 24, 15, r the 5-year base period—divide t	e amount of a complete this ee the instruction Net value 483 536 552 332 374 he total on liness than 5 years	ex on net investme sny year in the basis is part ctions before makin (c) of noncharitable-use as 80 91 10 12: 14 e 2 by 5 0, or by ars .	nt income) e period? ng any entries ssets (col i) 9,835 7,930 7,366 3,033 1,327	(d) Distribution ratio (b) divided by cot (c)) 0 10556 0 13553 0 19776 0 10876 0 70629
f sec Was t f "Ye 1 Cal	tion 4940(d)(2) applies, leave the foundation liable for the sets," the foundation doesn't qual Enter the appropriate amoust (a) Base penod years endar year (or tax year beginning in) 2018 2017 2016 2015 2014 Total of line 1, column (d) Average distribution ratio for the number of years the four Enter the net value of nonches.	this part blank ection 4942 tax on the distributable lify under section 4940(e) Do not not in each column for each year, s (b) Adjusted qualifying distributions 9, 15, 14, 24, 15, r the 5-year base period—divide t	e amount of a complete this ee the instruction Net value 483 536 552 332 374 he total on liness than 5 years	ex on net investme sny year in the basis is part ctions before makin (c) of noncharitable-use as 80 91 10 12: 14 e 2 by 5 0, or by ars .	nt income) e period? ng any entries sets (col i) 9,835 7,930 7,366 3,033 1,327 . 2 . 3	(d) Distribution ratio (b) divided by col (c)) 0 10556 0 15864 0 13553 0 19776 0 10876 0 70629 0 14126
f sec Was t f "Ye 1 Cal 2 3	tion 4940(d)(2) applies, leave the foundation liable for the sets," the foundation doesn't qual Enter the appropriate amoust (a) Base penod years endar year (or tax year beginning in) 2018 2017 2016 2015 2014 Total of line 1, column (d) Average distribution ratio for the number of years the four Enter the net value of nonches.	this part blank ection 4942 tax on the distributable lify under section 4940(e) Do not not in each column for each year, s (b) Adjusted qualifying distributions 9, 15, 14, 24, 15, r the 5-year base period—divide to the section has been in existence if leading the section of the section o	e amount of a complete this ee the instruction Net value 483 536 552 332 374 he total on liness than 5 years	ex on net investme sny year in the basis is part ctions before makin (c) of noncharitable-use as 80 91 10 12: 14 e 2 by 5 0, or by ars .	nt income) e period? ng any entries esets (col i) 9,835 7,930 7,366 3,033 1,327 . 2 . 3 4	Distribution ratio
Was the Calculation of the Calcu	tion 4940(d)(2) applies, leave the foundation liable for the sets," the foundation doesn't qual Enter the appropriate amount (a) Base penod years endar year (or tax year beginning in) 2018 2017 2016 2015 2014 Total of line 1, column (d) Average distribution ratio for the number of years the four enter the net value of nonches Multiply line 4 by line 3 Enter 1% of net investment	this part blank ection 4942 tax on the distributable lify under section 4940(e) Do not not in each column for each year, s (b) Adjusted qualifying distributions 9, 15, 14, 24, 15, r the 5-year base period—divide to the second of the seco	e amount of a complete this ee the instruction Net value 483 536 552 332 374 he total on liness than 5 years	ex on net investme sny year in the basis is part ctions before makin (c) of noncharitable-use as 80 91 10 12: 14 e 2 by 5 0, or by ars .	nt income) e period? ng any entries ssets (col i) 9,835 7,930 7,366 3,033 1,327 . 2 . 3 . 4 . 5 . 6	(d) Distribution ratio (b) divided by cot (c)) 0 10556 0 13553 0 19776 0 10876 0 70629 0 14129

Part '	Excise Tax Based on Investment Income (Section 4940(a), 4940	(b), 4940(e), or 4948—see in	struction	ns)		=
1a	Exempt operating foundations described in section 4940(d)(2), check here Date of ruling or determination letter: (attach copy of letter if ne					
b	Domestic foundations that meet the section 4940(e) requirements in Part	: V, check	. 1		73	3
	here ▶ ☐ and enter 1% of Part I, line 27b					
С	All other domestic foundations enter 2% of line 27b Exempt foreign orga Part I, line 12, col (b)	nizations, enter 4% of				Ť
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundation	ns only, others, enter -0-)	2		(0
3	Add lines 1 and 2		3		7:	3_
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundation	ons only, others, enter -0-)	4			
5	Tax based on investment income. Subtract line 4 from line 3. If zero or	less, enter -0	5		73	3
6	Credits/Payments					
а	2019 estimated tax payments and 2018 overpayment credited to 2019	6a				
b	Exempt foreign organizations—tax withheld at source	6b				3
C	Tax paid with application for extension of time to file (Form 8868)	6c				
d	Backup withholding erroneously withheld .	6d				3
7	Total credits and payments Add lines 6a through 6d		7		(<u> </u>
8	Enter any penalty for underpayment of estimated tax. Check here	ıf Form 2220 ıs attached	8			_
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount ov	ved . ▶	9		73	3
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the a	mount overpaid . >	10		(0_
11	Enter the amount of line 10 to be. Credited to 2020 estimated tax	Refunded ►	11		(0
Part '	/II-A Statements Regarding Activities					_
1a	During the tax year, did the foundation attempt to influence any national,	state, or local legislation or di-	J It		Yes No	_
	participate or intervene in any political campaign?		•	1a	X	_
р	Did it spend more than \$100 during the year (either directly or indirectly)	for political purposes? See the)			
	Instructions for the definition	. : : : : : : : : : : : : : : : : : : :	:	1b	X	3
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the acti		ıals			
_	published or distributed by the foundation in connection with the activities	6			3635 ME	H
c d	Did the foundation file Form 1120-POL for this year?			1c	A	3
u	Enter the amount (if any) of tax on political expenditures (section 4955) if (1) On the foundation (2) On foundation m	•				
е	Enter the reimbursement (if any) paid by the foundation during the year for					
	on foundation managers > \$	or political experioliture tax imp	oseu			
2	Has the foundation engaged in any activities that have not previously bee	en reported to the IRS?		2	Y	
_	If "Yes," attach a detailed description of the activities	ch reported to the into	•	33.33	% A C &	N
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 confo			3	X	,test
4a	Did the foundation have unrelated business gross income of \$1,000 or m			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 contractio	n during the year?		5	X	_
	If "Yes," attach the statement required by General Instruction T					Į.
6	Are the requirements of section 508(e) (relating to sections 4941 through	4945) satisfied either.				Ž.
	 By language in the governing instrument, or 					
	 By state legislation that effectively amends the governing instrument so 	that no mandatory directions	that			3
_	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 X	V	7	Х	
8a	Enter the states to which the foundation reports or with which it is registe	red See instructions.				
	WI		••••			3
b	If the answer is "Yes" to line 7, has the foundation furnished a copy of Fo	rm 990-PF to the Attorney Ge	neral		76	N
_	(or designate) of each state as required by General Instruction G? If "No,	" attach explanation	•	8b	Х	_
9	Is the foundation claiming status as a private operating foundation within	the meaning of section 4942()(3)		學第 15	Ž
	or 4942(j)(5) for calendar year 2019 or the tax year beginning in 2019? S	ee the instructions for Part XI	√ If			
10	"Yes," complete Part XIV			9	×	_
10	Did any persons become substantial contributors during the tax year? If '	'Yes," attach a schedule listing	j their			

rait	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	1 44		
	meaning of section 512(b)(13)? If "Yes," attach schedule See instructions	11		X
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified	12		x
13	person had advisory privileges? If "Yes," attach statement. See instructions Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	X	 ^-
13	Website address			L
14	The books are in care of ► THOMAS E LADKY Telephone no. ► 262-643	3-4558		
• •	Located at ► 10602 N PORT WASHINGTON RD 204 MEQUON WI ZIP+4 ► 53092			
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041—check here			▶ ┌
	and enter the amount of tax-exempt interest received or accrued during the year			
16	At any time during calendar year 2019, did the foundation have an interest in or a signature or other authority		Yes	No
	over a bank, securities, or other financial account in a foreign country?	16		Χ
	See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes," enter the			
	name of the foreign country	4		4.5
Part	VII-B Statements Regarding Activities for Which Form 4720 May Be Required	to the state of the		T
	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.		Yes	No
1a	During the year, did the foundation (either directly or indirectly)			
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person?			
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person?			
	disqualified person?	139		
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?	400 1000		
	(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		X	X.V
	foundation agreed to make a grant to or to employ the official for a period after			
	termination of government service, if terminating within 90 days)			
b	If any answer is "Yes" to 1a(1)–(6), did any of the acts fail to qualify under the exceptions described in			
	Regulations section 53 4941(d)-3 or in a current notice regarding disaster assistance? See instructions	1b	N/A	2000 800 21
	Organizations relying on a current notice regarding disaster assistance, check here			
С	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that			233
2	were not corrected before the first day of the tax year beginning in 2019?	1c	STATE	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))			
а	At the end of tax year 2019, did the foundation have any undistributed income (Part XIII, lines			
-	6d and 6e) for tax year(s) beginning before 2019?			
	If "Yes," list the years ▶ 20 , 20 , 20			
b	Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2)			
	(relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to			
	all years listed, answer "No" and attach statement—see instructions)	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			
2-	► 20, 20, 20, 20			
3a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year? Yes X No			
h	— — — — — — — — — — — — — — — — — — —			
b	If "Yes," did it have excess business holdings in 2019 as a result of (1) any purchase by the foundation or disqualified persons after May 26, 1969, (2) the lapse of the 5-year period (or longer period approved by the			
	Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest; or (3) the lapse			
	of the 10-, 15-, or 20-year first phase holding period? (Use Form 4720, Schedule C, to determine if the			
	foundation had excess business holdings in 2019)	3b	N/A	20,43012
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a	1.7/	X
b	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its		Marie Co	
	charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2019?	4b		X

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Part	VILE Statements Regarding Activities	tor W	nich Form	4/20 IV	lay be Ke	quirec	I (COII)	illue	:u)			
5a	During the year, did the foundation pay or incur an (1) Carry on propaganda, or otherwise attempt to	•		section	4945(e))?		Ye	s X	No		Yes	No
	(2) Influence the outcome of any specific public elederectly or indirectly, any voter registration drive	•	see section 49	955), or	to carry on	1	☐ Ye	s X	< No			
	(3) Provide a grant to an individual for travel, study	, or oth	er sımılar pur	poses?			Ye	s 🛚	No [7		
	(4) Provide a grant to an organization other than a section 4945(d)(4)(A)? See instructions	charita	ble, etc , orga	anızatıor 	n described 	ın 		s 🛭	∏ No	(T)		
	(5) Provide for any purpose other than religious, c purposes, or for the prevention of cruelty to ch			terary, c	or education	al	Ye	s 🔀	∏ No			
b	If any answer is "Yes" to 5a(1)–(5), did any of the Regulations section 53 4945 or in a current notice		•					oed ir	n	5b	M ≤	
С	Organizations relying on a current notice regarding If the answer is "Yes" to question 5a(4), does the fibecause it maintained expenditure responsibility for	oundati	on claım exer			•	∏ Ye	• F	► □] No			
6a	If "Yes," attach the statement required by Regulation Did the foundation, during the year, receive any fu	ons sec	tion 53 4945-		oay premiur	ns	□ Ye		No		1.00	
b	on a personal benefit contract?	· directl	· . v or indirectly	00.20	ereonal ben	efit con		:S (<u>/</u>	7 140	6b		7#7#
	If "Yes" to 6b, file Form 8870			•		ent wi	_	ı	7			
7a b	At any time during the tax year, was the foundation a p. If "Yes," did the foundation receive any proceeds of					e transa	Y€ ?action	_	< No	7b	N/A	2.4
8	Is the foundation subject to the section 4960 tax or remuneration or excess parachute payment(s) dui	n paym	ent(s) of more					-	< No			
Part	VIII Information About Officers, Direct	ors, Ti	rustees, Fo	undati	on Manag	gers, F	lighly	Paid	d Em	ploye	es,	-
	and Contractors											
							-					
1	List all officers, directors, trustees, and founda											
	(a) Name and address	(b) Titl hou devo	e, and average irs per week ted to position	(c) Co (lf ı	ompensation mpensation not pald, nter -0-)	(d) empk	instruction Control of the Control o	ions to efit pla	ns	(e) Expe	ense ac allowar	
THOM 10602	(a) Name and address IAS E LADKY N PORT WASHINGTON RD 204 MEQUON, WI 5	(b) Titl hou devo	e, and average irs per week ted to position IDENT	(c) Co (lf ı	mpensation not paid,	(d) empk	Contribut byee ben	ions to efit pla	ns			
THOM 10602 JULIE	(a) Name and address	(b) Titl hou devo	e, and average irs per week ted to position	(c) Co (lf ı	mpensation not pald, nter -0-)	(d) empk	Contribut byee ben	ions to efit pla	ns			
THOM 10602 JULIE	(a) Name and address IAS E LADKY N PORT WASHINGTON RD 204 MEQUON, WI 5 LADKY	(b) Titl hou devo	e, and average irs per week ted to position IDENT	(c) Co (lf ı	mpensation not pald, nter -0-)	(d) empk	Contribut byee ben	ions to efit pla	ns			
THOM 10602 JULIE	(a) Name and address IAS E LADKY N PORT WASHINGTON RD 204 MEQUON, WI 5 LADKY	(b) Titl hou devo	e, and average irs per week ted to position IDENT	(c) Co (lf ı	mpensation not pald, nter -0-)	(d) empk	Contribut byee ben	ions to efit pla	ns			
THOM 10602 JULIE	(a) Name and address IAS E LADKY N PORT WASHINGTON RD 204 MEQUON, WI 5 LADKY	(b) Titling devo	e, and average urs per week ted to position IDENT SURER	(c) Co (lf r er	mpensation not paid, iter -0-)	(d) emplo and def	Contnbut	uons to efit pla mpensa	ns ation	other	allowan	
THOM 10602 JULIE 10602	(a) Name and address MAS E LADKY N PORT WASHINGTON RD 204 MEQUON, WI E LADKY N PORT WASHINGTON RD 204 MEQUON, WI E Compensation of five highest-paid employees	(b) Title hot devo PRES	e, and average urs per week ted to position IDENT SURER	(c) Co (If r er	mpensation not paid, iter -0-)	(d) emplo and def	contribution of the contri	ons to efit pla mpensa	If no	ne, ent	er	aces
THOM 10602 JULIE 10602	(a) Name and address IAS E LADKY N PORT WASHINGTON RD 204 MEQUON, WI E LADKY N PORT WASHINGTON RD 204 MEQUON, WI E Compensation of five highest-paid employees "NONE."	(b) Title hot devo PRES	e, and average urs per week ted to position IDENT SURER han those in (b) Title, and a hours per v	(c) Co (If r er	on line 1—	(d) emplo and def	contribution of the contri	ons). Inbutio	If no	ne, ent	er ense ac	aces
THOM 10602 JULIE 10602	(a) Name and address IAS E LADKY N PORT WASHINGTON RD 204 MEQUON, WI E LADKY N PORT WASHINGTON RD 204 MEQUON, WI E Compensation of five highest-paid employees "NONE."	(b) Title hot devo PRES	e, and average urs per week ted to position IDENT SURER han those in (b) Title, and a hours per v	(c) Co (If r er	on line 1—	(d) emplo and def	contribution of the contri	ons). Inbutio	If no	ne, ent	er ense ac	aces
THOM 10602 JULIE 10602	(a) Name and address IAS E LADKY N PORT WASHINGTON RD 204 MEQUON, WI E LADKY N PORT WASHINGTON RD 204 MEQUON, WI E Compensation of five highest-paid employees "NONE."	(b) Title hot devo PRES	e, and average urs per week ted to position IDENT SURER han those in (b) Title, and a hours per v	(c) Co (If r er	on line 1—	(d) emplo and def	contribution of the contri	ons). Inbutio	If no	ne, ent	er ense ac	aces
THOM 10602 JULIE 10602	(a) Name and address IAS E LADKY N PORT WASHINGTON RD 204 MEQUON, WI E LADKY N PORT WASHINGTON RD 204 MEQUON, WI E Compensation of five highest-paid employees "NONE."	(b) Title hot devo PRES	e, and average urs per week ted to position IDENT SURER han those in (b) Title, and a hours per v	(c) Co (If r er	on line 1—	(d) emplo and def	contribution of the contri	ons). Inbutio	If no	ne, ent	er ense ac	aces
THOM 10602 JULIE 10602	(a) Name and address IAS E LADKY N PORT WASHINGTON RD 204 MEQUON, WI E LADKY N PORT WASHINGTON RD 204 MEQUON, WI E Compensation of five highest-paid employees "NONE."	(b) Title hot devo PRES	e, and average urs per week ted to position IDENT SURER han those in (b) Title, and a hours per v	(c) Co (If r er	on line 1—	(d) emplo and def	contribution of the contri	ons). Inbutio	If no	ne, ent	er ense ac	aces

Total. Add lines 1 through 3

Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, Part VIII and Contractors (continued) · Five highest-paid independent contractors for professional services. See instructions. If none, enter "NONE." (b) Type of service (c) Compensation (a) Name and address of each person paid more than \$50,000 NONE • Total number of others receiving over \$50,000 for professional services Summary of Direct Charitable Activities List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of Expenses organizations and other beneficiaries served, conferences convened, research papers produced, etc 3 Summary of Program-Related Investments (see instructions) Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2 Amount All other program-related investments. See instructions

Form **990-PF** (2019)

Part	X Minimum Investment Return (All domestic foundations must complete this part. Fore	eign foundatio	ns,
	see instructions.)		
1	. Fair market value of assets not used (or held for use) directly in carrying out charitable, etc.,		
	purposes.		
а	Average monthly fair market value of securities	1a	47,524
b	Average of monthly cash balances	1b	46,406
С	Fair market value of all other assets (see instructions)	1c	
d	Total (add lines 1a, b, and c)	1d	93,930
е	Reduction claimed for blockage or other factors reported on lines 1a and		
	1c (attach detailed explanation)		
2	Acquisition indebtedness applicable to line 1 assets	2	
3	Subtract line 2 from line 1d	3	93,930
4	Cash deemed held for charitable activities Enter 1½ % of line 3 (for greater amount, see		
	instructions)	4	1,409
5	Net value of noncharitable-use assets. Subtract line 4 from line 3 Enter here and on Part V, line 4	5	92,521
6	Minimum investment return. Enter 5% of line 5	6	4,626
Part	XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating founds	ations	
	and certain foreign organizations, check here and do not complete this part)		
1	Minimum investment return from Part X, line 6	1	4,626
2a	Tax on investment income for 2019 from Part VI, line 5 . 2a	73	
b	Income tax for 2019 (This does not include the tax from Part VI) 2b		
C	Add lines 2a and 2b	2c	73
3	Distributable amount before adjustments Subtract line 2c from line 1	3	4,553
4	Recoveries of amounts treated as qualifying distributions	4	
5	Add lines 3 and 4	5	4,553
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	4,553
	XII Qualifying Distributions (see instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes		
a	Expenses, contributions, gifts, etc —total from Part I, column (d), line 26	1a	8,371
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.,	1 1	
	purposes	2	
3	Amounts set aside for specific charitable projects that satisfy the		
a	Suitability test (prior IRS approval required)	3a	
b	Cash distribution test (attach the required schedule)	3b	
4	Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4	4	8,371
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income		
c	Enter 1% of Part I, line 27b See instructions	5	
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	8,371
	Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating w	hether the foun	dation
	qualifies for the section 4940(e) reduction of tax in those years		

art	XIII Undistributed Income	(see instructions	5)			
			(a) Corpus	(b) Years pnor to 2018	(c) 2018	(d) 2019
1	Distributable amount for 2019 from line 7	Part XI,				4,553
2	Undistributed income, if any, as of the	end of 2019.				
а	Enter amount for 2018 only .				O	
b	Total for prior years. 20,			and attended one bridge control of		
3	Excess distributions carryover, if ar	-				
a	From 2014	8,370				
b	From 2015	18,264				
c d	From 2016	9,266 10,721				
e	From 2018	5,073				
f	Total of lines 3a through e	0,010	51,694			
4	Qualifying distributions for 2019 fro	om Part XII,			CONTROL CAN TO CONTROL CONTROL	
	line 4 ▶ \$ 8,371					
а	Applied to 2018, but not more than					
b	Applied to undistributed income of					
	(Election required—see instruction	•		z szerekiskereniskoskanteki "merikte i		
С	Treated as distributions out of corp	ous (Election				
d	required—see instructions) Applied to 2019 distributable amou					A 550
e	Remaining amount distributed out		3.818			4,553
5	Excess distributions carryover app	•	3,616			A CONTRACTOR OF THE PARTY OF TH
	(If an amount appears in column (c					,
	amount must be shown in column					
6	Enter the net total of each colum	in as				
	indicated below:					
a	Corpus Add lines 3f, 4c, and 4e S		55,512			
b	Prior years' undistributed income \$ line 4b from line 2b	Subtract				
С	Enter the amount of prior years' un	distributed		<u> </u>		
	income for which a notice of deficie					
	been issued, or on which the section	•				
	tax has been previously assessed					
d	Subtract line 6c from line 6b Taxat	ole				
	amount—see instructions			page visit is weapping the		
е	Undistributed income for 2018 Sul					
	4a from line 2a Taxable amount—instructions	see				
f	Undistributed income for 2019 Sul	htract lines			0	
	4d and 5 from line 1. This amount is					
	distributed in 2020 .					o
7	Amounts treated as distributions of					
	to satisfy requirements imposed by					
	170(b)(1)(F) or 4942(g)(3) (Election	n may be				
0	required—see instructions) .					
8	Excess distributions carryover from					
9	applied on line 5 or line 7 (see institutions carryover to		8,370		PIGENE AND	
•	Subtract lines 7 and 8 from line 6a		47 4 40			
10	Analysis of line 9	•	47,142		577 A 25 A	
а	Excess from 2015	18,264				
b	Excess from 2016	9,266				
C	Excess from 2017	10,721				
d	Excess from 2018	5,073				
e	Excess from 2010	0.040		L'Indian Contract de la Contract de	Per Service Control	ALC: NO. OF THE RESERVE OF THE PARTY OF THE

NONE

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Form 990-PF (2019)

Part XV Supplementary Information (continued) Grants and Contributions Paid During the Year or Approved for Future Payment If recipient is an individual, show any relationship to any foundation manager Recipient Foundation Purpose of grant or contribution status of Amount recipient Name and address (home or business) or substantial contributor a Paid during the year SEE SCHEDULE OF CONTRIBUTIONS DONATION 8,371 **VARIOUS** VARIOUS, WI 53092 Total За 8,371 b Approved for future payment Total

Par	t XVI	 Analysis of Income-Producing Ac 	tivities				
		s amounts unless otherwise indicated	1	siness income	Excluded by sect	on 512, 513, or 514	(a)
	•		(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	(e) Related or exempt function income (See instructions)
1	Prog	ram service revenue	24011000 0010	7 111104111			(occ mandenons)
	a _						
	b _	<u> </u>	<u> </u>				
	c _						
	d _						······································
	e _						
	f _						
_	-	ees and contracts from government agencies					
2		bership dues and assessments					
3		est on savings and temporary cash investments		0.700			
4		ends and interest from securities		3,763			
5		ental income or (loss) from real estate:	THE STATE OF THE S		The Part of the State of the St	La Carte Car	Well's West Street Land of the
		Debt-financed property	<u> </u>				
6		Not debt-financed property					
7		rental income or (loss) from personal property r investment income			<u> </u>		
8		or (loss) from sales of assets other than inventory	<u> </u>		 		
9		ncome or (loss) from special events					
10		s profit or (loss) from sales of inventory				·	· · · · · · · · · · · · · · · · · · ·
11		r revenue a					
	b						
	c _						
	d _						
	е						
		otal Add columns (b), (d), and (e)		3,763	"还是这种的		
13	Total	I. Add line 12, columns (b), (d), and (e)		3,763		13	3,763
13 (See	Total work	I. Add line 12, columns (b), (d), and (e) . sheet in line 13 instructions to verify calculations	;)				
13 (See Par	Total work t XV	I. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculations Relationship of Activities to the A	;) .ccomplishm	ent of Exempt	Purposes	13	3,763
13 (See Par Line	Total work	I. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculations -B Relationship of Activities to the A Explain below how each activity for which income	ccomplishm	ent of Exempt	t Purposes	13	3,763
13 (See Par Line	Total work t XV e No.	I. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculations Relationship of Activities to the A	ccomplishm	ent of Exempt	t Purposes	13	3,763
13 (See Par Line	Total work t XV e No.	I. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculations -B Relationship of Activities to the A Explain below how each activity for which income	ccomplishm	ent of Exempt	t Purposes	13	3,763
13 (See Par Line	Total work t XV e No.	I. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculations -B Relationship of Activities to the A Explain below how each activity for which income	ccomplishm	ent of Exempt	t Purposes	13	3,763
13 (See Par Line	Total work t XV e No.	I. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculations -B Relationship of Activities to the A Explain below how each activity for which income	ccomplishm	ent of Exempt	t Purposes	13	3,763
13 (See Par Line	Total work t XV e No.	I. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculations -B Relationship of Activities to the A Explain below how each activity for which income	ccomplishm	ent of Exempt	t Purposes	13	3,763
13 (See Par Line	Total work t XV e No.	I. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculations -B Relationship of Activities to the A Explain below how each activity for which income	ccomplishm	ent of Exempt	t Purposes	13	3,763
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13 (See Par Line	Total work t XV e No.	I. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculations -B Relationship of Activities to the A Explain below how each activity for which income	ccomplishm	ent of Exempt	t Purposes	13	3,763
13 (See Par Line	Total work t XV e No.	I. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculations -B Relationship of Activities to the A Explain below how each activity for which income	ccomplishm	ent of Exempt	t Purposes	13	3,763
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13 (See Par Line	Total work t XV e No.	I. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculations -B Relationship of Activities to the A Explain below how each activity for which income	ccomplishm	ent of Exempt	t Purposes	13	3,763
13 (See Par Line	Total work t XV e No.	I. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculations -B Relationship of Activities to the A Explain below how each activity for which income	ccomplishm	ent of Exempt	t Purposes	13	3,763
13 (See Par Line	Total work t XV e No.	I. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculations -B Relationship of Activities to the A Explain below how each activity for which income	ccomplishm	ent of Exempt	t Purposes	13	3,763
13 (See Par Line	Total work t XV e No.	I. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculations -B Relationship of Activities to the A Explain below how each activity for which income	ccomplishm	ent of Exempt	t Purposes	13	3,763
13 (See Par Line	Total work t XV e No.	I. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculations -B Relationship of Activities to the A Explain below how each activity for which income	ccomplishm	ent of Exempt	t Purposes	13	3,763
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13 (See Par Line	Total work t XV e No.	I. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculations -B Relationship of Activities to the A Explain below how each activity for which income	ccomplishm	ent of Exempt	t Purposes	13	3,763
13 (See Par Line	Total work t XV e No.	I. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculations -B Relationship of Activities to the A Explain below how each activity for which income	ccomplishm	ent of Exempt	t Purposes	13	3,763
13 (See Par Line	Total work t XV e No.	I. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculations -B Relationship of Activities to the A Explain below how each activity for which income	ccomplishm	ent of Exempt	t Purposes	13	3,763
13 (See Par Line	Total work t XV e No.	I. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculations -B Relationship of Activities to the A Explain below how each activity for which income	ccomplishm	ent of Exempt	t Purposes	13	3,763
13 (See Par Line	Total work t XV e No.	I. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculations -B Relationship of Activities to the A Explain below how each activity for which income	ccomplishm	ent of Exempt	t Purposes	13	3,763
13 (See Par Line	Total work t XV e No.	I. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculations -B Relationship of Activities to the A Explain below how each activity for which income	ccomplishm	ent of Exempt	t Purposes	13	3,763

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

1		e organization di tion 501(c) (othe								ed		Yes	No
		izations?	t triair section 50	ri(c)(s) organ	iizations) or ii	1 360110	11 027, Telati	ng to ponti	<i>-</i> 241				
_	_		artina faundation	to a nanaha	ritable evens	t orann	ration of						
а		fers from the rep	orting loundation	i to a noncha	mable exemp	t Organ	ization oi.			1	40(4)	2343490	× ×
	(1) Ca							•			1a(1)		X
	` '	her assets								•	1a(2)	- Marine	
b		transactions:										200	
		ales of assets to						•	•	ì	1b(1)		X_
		urchases of asse			pt organizatio	n				, , , , , , , , , , , , , , , , , , ,	1b(2)		<u>X</u>
		ental of facilities,		ther assets				•	•	1	1b(3)		X
		eimbursement ar	-	•						•	1b(4)		X
		ans or loan guar			•		•				1b(5)		X
	(6) Pe	erformance of se	rvices or membe	rship or fund	raisıng solıcıta	ations					1b(6)		X
C		ng of facilities, ed					•			į	1c		<u> </u>
d	If the a	answer to any of th	ne above is "Yes,"	complete the	following sche	dule. Co	olumn (b) sh	ould always	show the fa	ir market			
		of the goods, othe											
	value	in any transaction	or sharing arrange	ement, show i	in column (d) th	ne value	of the good	s, other asse	ets, or servic	es receive	d.		
(a) Line	no (b) Amount involved	(c) Name of	noncharitable ex	empt organization	1	(d) Descr	ption of transf	ers, transactio	ns, and shan	ng arrar	ngemer	nts
					 								
													,
								-					
													
							 	······································					
							 						
						-	 			-			
													
	- 												
									·				
												-	
				 			<u> </u>						
2a b	descr	foundation direction 50 s," complete the	01(c) (other than	section 501(or related to, (c)(3)) or in se	one or ection 5	more tax-ex 27?	empt organ	nizations		Yes	X N	lo
		(a) Name of organ	ızation		(b) Type of orga	anization			(c) Description	on of relation	ship		
		·	··-										
					·····								
			 -										
													
	1												
	Under	penalties of penury I decl	lare that I have examined	this return, including	g accompanying sche	dules and	statements, and to	the best of my k	nowledge and be	lief, it is true,			
Sign	Correc	t, and complete Declaration	on dypreparer (other than	taxpayer) is based	on all information of v	which prepa	arer has any know	ledge.	1/	May the IRS	discuss	this retu	<i>i</i> m
Here	│ ▶	//////	healy	1_	199/10		VIOCINO	MPW		with the pre			
	Sign	ature of officer or trus	tee	1	Date	Title	1 "		· ·····	See instruct	ions []	Yes	∐No
Dalai		Pnnt/Type preparer's	s name	Prepare	er's signature			Date	T	. [-] [F	TIN		
Paid		MIKE POLIDOR	KI	11	Vh VR			2/5/20	Chec	k [] If		43EC	
Prepa	ırer		ROBERT B CRA	ANE & CO S	<u> </u>			<u> </u>	T		20062	+330	
Use C	nly	Firm's address	4100 N CALHO			D 14/1	53005		Firm's EIN	····		42	
		dudiess	- 700 N CALITO	CIV IVD #100	DROOKFIEL	ب, ۱۷۷	53005		Phone no	(262) 7		42 2 DE	

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

Employer identification number

LADKY ASSOCIATES FOUL	DATION		39-6081103
Organization type (check o			
Filers of:	Section:		
Form 990 or 990-EZ	501(c)() (enter numb	er) organization	
	4947(a)(1) nonexempt charif	table trust not treated as a private for	undation
	527 political organization		
Form 990-PF	X 501(c)(3) exempt private fou	indation	
	4947(a)(1) nonexempt charr	table trust treated as a private founda	ation
	501(c)(3) taxable private fou	indation	
• •	covered by the General Rule or a Sp 7), (8), or (10) organization can check		d a Special Rule See
General Rule			
	filing Form 990, 990-EZ, or 990-PF th r property) from any one contributor(ntributions.		
Special Rules			
regulations under s 13, 16a, or 16b, an	described in section 501(c)(3) filing Forctions 509(a)(1) and 170(b)(1)(A)(vi), that received from any one contribute the amount on (i) Form 990, Part VIII,	that checked Schedule A (Form 990 or, during the year, total contributions	or 990-EZ), Part II, line of the greater of (1)
contributor, during t	described in section 501(c)(7), (8), or ne year, total contributions of more tha nal purposes, or for the prevention of c	in \$1,000 exclusively for religious, ch	aritable, scientific,
contributor, during t contributions totale during the year for	described in section 501(c)(7), (8), or ne year, contributions exclusively for real more than \$1,000 If this box is check in exclusively religious, charitable, etcas to this organization because it received ore during the year	eligious, charitable, etc., purposes, but ked, enter here the total contributions of purpose. Don't complete any of the	ut no such s that were received e parts unless the
Caution: An organization the 990-EZ, or 990-PF), but it no	at isn't covered by the General Rule a ust answer "No" on Part IV, line 2, of	nd/or the Special Rules doesn't file S its Form 990; or check the box on lin	Schedule B (Form 990, e 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

LADKY ASSOCIATES FOUNDATION

Employer identification number 39-6081103

Part'l	Contributors (see instructions). Use duplicate copie	es of Part I if additional space is	needed
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
	Foreign State or Province Foreign Country	\$	Person Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
	Foreign State or Province Foreign Country	\$	Person Payroll Oncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
	Foreign State or Province Foreign Country	\$	Person Payroll Oncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
	Foreign State or Province Foreign Country	\$	Person Payroll Oncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
	Foreign State or Province Foreign Country	\$	Person Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
	Foreign State or Province: Foreign Country	\$	Person Payroll Noncash (Complete Part II for noncash contributions)

Name of organization
LADKY ASSOCIATES FOUNDATION

Employer identification number 39-6081103

Part [*] II	Noncash Property (see instructions). Use duplicate co	opies of Part II if additional space	ce is needed
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
		\$	
	I and the second	i l	

Name of org	anization SOCIATES FOUNDATION				Employer identification number 39-6081103		
Part III	Exclusively religious, charita				ction 501(c)(7), (8), or		
	(10) that total more than \$1,0						
	the following line entry. For organizations completing Part III, enter the total of <i>exclusively</i> religious, charitable, etc , contributions of \$1,000 or less for the year (Enter this information once. See instructions) \$\bigsim \text{\$\text{0}\$}\$						
	Use duplicate copies of Part III	-		CHOIS) *		
(a) No.	Ose duplicate copies of Fait III	ii additional space is nee	aded.				
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, add	dress, and ZIP + 4	Relationshi	p of tr	ansferor to transferee		
(a) No.	For Prov	Country	- !				
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, add	dress, and ZIP + 4	Relationshi	p of tr	ansferor to transferee		
	For Prov						
(a) No.	FOI PIOV	Country					
from Part I	(b) Purpose of gift	((c) Use of gift	(d)	Description of how gift is held		
Paili							
	(e) Transfer of gift						
	Transferee's name, add	dress, and ZIP + 4	Relationshi	p of tr	ansferor to transferee		
	For, Prov.	Country					
(a) No.		Country					
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, ad	dress, and ZIP + 4	Relationshi	ip of tr	ansferor to transferee		
	For Prov	Country					

Part I, Line 18 (990-PF) - Taxes

		0	0	C	0
		Revenue and Expenses	Net Investment	Adjusted	Disbursements for Charitable
L	Description	per Books	Income	Net Income	Purposes
1	Real estate tax not included in line 20	0			
2	Tax on investment income	0			
3	Income tax	0			

Part I, Line 23 (990-PF) - Other Expenses

	120	120	120	0
Description	Revenue and Expenses per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
1 Fees	120	120	120	

Part II, Line 13 (990-PF) - Investments - Other

			58,592	28,592	49,127
		Basis of	Book Value	Book Value	FMV
	Asset Description	Valuation	Beg of Year	End of Year	End of Year
7	1170 PUTNAM HIGH INC	AT COST	11,368	11,368	10,482
7	5151 MFS INT INCOME TR	AT COST	27,240	27,240	19,574
3	2265 MFS CHARTER INC TR	AT COST	19,984	19,984	19,071

Part VIII, Line 1 (990-PF) - Compensation of Officers, Directors, Trustees and Foundation Managers

) 	2	•
	Check "X"							Avg Hrs	Avg Hrs	•	Expense
Name	if Business	Street	Cify	State	State Zip Code	Foreign Country	Title	Per Week	Compensation	Benefits	Account
THOMAS E LADKY		10602 N POF		WI S:	53092		PRESIDENT		0		•
									1		
JULIE LADKY		10602 N PORT WASHINGTON RD 20MEQUON		WI	53092		TREASURER		5		
				_							

LADKY ASSOCIATES FOUNDATION, INC. SCHEDULE OF CONTRIBUTIONS 2019

Hear Wisconsin	\$ 75.00
Lakeshore Chinooks	528.00
Marquette University	5,035.00
Milwaukee Public Television	110.00
Miscellaneous Donations and Memorials	282.60
MSCI	500.00
Ronald McDonald House	50.00
Teens Grow Greens	250.00
UW Athletics	1,200.00
Wisconsin Historical Society	65.00
Wisconsin Right to Life	200.00
Xaverian Missionaries	 75.00
TOTAL CONTRIBUTIONS FOR 2019	8,370.60
Office expense	120.00
Internal Revenue Service	 82.00
TOTAL DISBURSEMENTS	\$ 8,572.60