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2019

Return of Private Foundation

Form 990-PF

Department of the Treasury

Internal Revenue Service

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

▶ Do not enter social security numbers on this form as it may be made public. ▶ Go to <u>www.irs.gov/Form990PF</u> for instructions and the latest information.

Open to Public Inspection

		ndar year 2019, or tax year beginning 01-01-20)19 , aı	nd er	nding 12-31-		
		ındatıon d Betty Meyer Family Foundation				entification numbe	r
					39-6413619		
	ber and D Box 1	d street (or P O box number if mail is not delivered to street address) .2800) Room/suite		B Telephone nu	mber (see instructio	ns)
				(920) 432-5536	i		
		n, state or province, country, and ZIP or foreign postal code WI 543072800			C If exemption	application is pendin	g, check here
G Ch	neck al	ll that apply $igsqcup$ Initial return $igsqcup$ Initial return of a	former public charity		D 1. Foreign or	ganızatıons, check h	ere 📘 🗆
		\square Final return \square Amended return				ganizations meeting	
		Address change 🔲 Name change			·	k here and attach co	
		$ \nabla$ pe of organization $ \nabla$ Section 501(c)(3) exempt private				indation status was n 507(b)(1)(A), chec	
	Section	1 4947(a)(1) nonexempt charitable trust	e private foundation				
of y	year (f	xet value of all assets at end from Part II, col (c), ▶\$ 2,435,420 J Accounting method □ Other (specify) (Part I, column (d) must	Cash L Accru	ıal		ation is in a 60-mont n 507(b)(1)(B), chec	
Pa	rt I	Analysis of Revenue and Expenses (The total					(d) Disbursements
		of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a) (see instructions))	(a) Revenue and expenses per books	(b)	Net investment income	(c) Adjusted net Income	for charitable purposes (cash basis only)
	1	Contributions, gifts, grants, etc , received (attach schedule)					
	2	Check ► ✓ If the foundation is not required to attach Sch B					
	3	Interest on savings and temporary cash investments	1,409		1,409		
	4	Dividends and interest from securities	39,972		37,190		
	5a	Gross rents					
ക	b	Net rental income or (loss)	-				
Ž	6a	Net gain or (loss) from sale of assets not on line 10	71,873	-			
Reverkie	ь -	Gross sales price for all assets on line 6a 72,002			71,873		
~	7 8	Capital gain net income (from Part IV, line 2)			71,073		
	9	Income modifications					
	10a	Gross sales less returns and allowances					
	b	Less Cost of goods sold					
	С	Gross profit or (loss) (attach schedule)					
	11	Other income (attach schedule)	24,642		24,642		
	12	Total. Add lines 1 through 11	137,896		135,114		
	13	Compensation of officers, directors, trustees, etc	0		0		(
	14	Other employee salaries and wages					
ses	15	Pension plans, employee benefits					
Ē	16a	Legal fees (attach schedule)	06-1 1 520		760		760
EX	b	Accounting fees (attach schedule)	1,520				700
Administrative Expenses	17	Interest	15,398		15,398		
ratı	17 18						
) St	19	Taxes (attach schedule) (see instructions) Depreciation (attach schedule) and depletion					
Ē	20	Occupancy					
Ad	21	Travel, conferences, and meetings					
nd E	22	Printing and publications					
Operating and	23	Other expenses (attach schedule)					
atıı	24	Total operating and administrative expenses.					
be		Add lines 13 through 23	16,918		16,158		760
0	25	Contributions, gifts, grants paid	100,000				100,000
	26	Total expenses and disbursements. Add lines 24 and 25	116,918		16,158		100,760
	27	Subtract line 26 from line 12					
	а	Excess of revenue over expenses and disbursements	20,978				
	ь	Net investment income (if negative, enter -0-)	20,970		118,956		
	С	Adjusted net income (If negative, enter -0-)			,		

211,713

954,527

1.223.282

1.223,282

1,223,282

1,223,282

237,584

957,412

1,247,144

1.247,144

1,247,144

1,247,144

1

2

3

4

5

6

1,223,282

1,247,144

1.247.144

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20,978

2,884

1,434,164

2,435,420

949,108

disqualified persons (attach schedule) (see instructions)

Other notes and loans receivable (attach schedule)

Investments—U S and state government obligations (attach schedule)

Less accumulated depreciation (attach schedule) ▶

Less allowance for doubtful accounts ▶

Land, buildings, and equipment basis ▶

instructions Also, see page 1, item I)

Other assets (describe > _

Other liabilities (describe -_

Grants payable

Prepaid expenses and deferred charges

Investments—land, buildings, and equipment basis ▶

Investments—other (attach schedule)

Less accumulated depreciation (attach schedule) ▶ _____

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

Mortgages and other notes payable (attach schedule).

Total liabilities(add lines 17 through 22)

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

Capital stock, trust principal, or current funds

Total net assets or fund balances (see instructions)

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

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

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

Analysis of Changes in Net Assets or Fund Balances

Paid-in or capital surplus, or land, bldg, and equipment fund Retained earnings, accumulated income, endowment, or other funds

Foundations that follow FASB ASC 958, check here ▶

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

and complete lines 24, 25, 29 and 30.

and complete lines 26 through 30.

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

Decreases not included in line 2 (itemize) ▶

Other increases not included in line 2 (itemize)

Enter amount from Part I, line 27a

Net assets without donor restrictions . . .

Net assets with donor restrictions

sets
As

7

R

9

10a

b

C 11

12

13

14

15

16

17 18

19 20

21

22 23

24

25

26

28

29

30

Part III

2

Liabilities

Balances

Fund

ŏ

Assets 27

Net

(a) List and describe the kind(s) of property sold (e g , real estate, 2-story brick warehouse, or common stock, 200 shs $\,$ MLC Co $\,$)

(mo , day, yr)

(b)

How acquired P—Purchase

D-Donation

(c) Date acquired

(mo , day, yr)

Page **3**

1 a Associated Trust Co						
b Capital Gains Dividends			Р			
С						
d						
e						
(e) Gross sales price	(f) Depreciation allowed (or allowable)	Cost or	(g) other basis ense of sale	Gain d	(h) or (loss) f) minus (g)	
a 49,	` ` `		129		49,806	
b 22,	067				22,067	
С						
d						
e						
Complete only for assets si	howing gain in column (h) and ow	ned by the foundation (on 12/31/69	((I)	
(i) F M V as of 12/31/69	(j) Adjusted basis as of 12/31/69	Excess	(k) of col (ı) (յ), ıf any	Gains (Col (col (k), but not	(h) gain minus cless than -0-) or rom col (h))	
a					49,806	
b					22,067	
С						
d						
e						
2 Capital gain net income of	r (net capital loss)	If gain, also enter in Particle If (loss), enter -0- in F		2	71,873	
3 Net short-term capital gai	n or (loss) as defined in sections :	1222(5) and (6)			<u> </u>	
	I, line 8, column (c) (see instructi		· }	3		
Part V Qualification Un	der Section 4940(e) for Re	educed Tax on Net	Investment In			
	rate foundations subject to the sec					
Tot optional use by domestic priv	rate foundations subject to the set	ccion is ro(a) tax on ne	ic investment incom	<i>(C)</i>		
f section 4940(d)(2) applies, leav	e this part blank					
	section 4942 tax on the distributa qualify under section 4940(e) Do		in the base period	,	'es 🔽 No	
1 Enter the appropriate amou	unt ın each column for each year,	see instructions before	making any entries	s		
(a) Base period years Calendar year (or tax year beginning in)	(b) Adjusted qualifying distributions	(c) Net value of noncharitab	le-use assets	(d) Distribution rat (col (b) divided by o		
2018	80,748		2,806,272		0 028774	
2017	120,742		2,600,372		0 046433	
2016	120,737		2,465,756		0 048966	
2015	122,251		2,417,400		0 050571	
2014	107,100		2,428,511	_	0 044101	
2 Total of line 1, column (d)			2		0 218845	
	or the 5-year base period—divide		0, or by the 3		0.043760	
	ation has been in existence if less haritable-use assets for 2019 fron		: : : : 3		<u>0 043769</u> 2,356,122	
		•	5		103,125	
• • •			6		1,190	
	ns from Part XII, line 4				100,760	
. , ,	er than line 7, check the box in Pa			ug a 1% tax rate Se		
instructions						
				F	orm 990-PF (2019)	

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Part VIII Information About Officers, Directors, Trustees, and Contractors (continued)	Foundation Managers, Highly Pa	id Employees,
3 Five highest-paid independent contractors for professional service	es (see instructions). If none, enter	"NONE".
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE		
Total number of others receiving over \$50,000 for professional services		0
Part IX-A Summary of Direct Charitable Activities		·
List the foundation's four largest direct charitable activities during the tax year. Include rele- organizations and other beneficiaries served, conferences convened, research papers produc		of Expenses
1		
2		
3		
4		
Part IX-B Summary of Program-Related Investments (see II	nstructions)	
Describe the two largest program-related investments made by the foundation during th	<u> </u>	Amount
1	,	
2		
All other program-related investments See instructions		
3		
Total. Add lines 1 through 3		• 0
		Form 990-PF (2019)

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

3a 3h

4

5

100.760

100.760

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

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

Adjusted qualifying distributions. Subtract line 5 from line 4.

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

4

5

62,884

52,543

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0

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Part XIII	Undistributed Income (see instructions)					

b Total for prior years

a From 2014.
b From 2015. . . .
c From 2016.
d From 2017. . . .
e From 2018.

1 Distributable amount for 2019 from Part XI, line 7

2 Undistributed income, if any, as of the end of 2019

a Enter amount for 2018 only.

Excess distributions carryover, if any, to 2019

5 Excess distributions carryover applied to 2019

(If an amount appears in column (d), the

6 Enter the net total of each column as

9 Excess distributions carryover to 2020.

10 Analysis of line 9

a Excess from 2015. . . .
 b Excess from 2016. . . .
 c Excess from 2017. . . .
 d Excess from 2018. . . .
 e Excess from 2019. . . .

applied on line 5 or line 7 (see instructions) . . .

Subtract lines 7 and 8 from line 6a

indicated below:

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

same amount must be shown in column (a))

(a)

Corpus

0

0

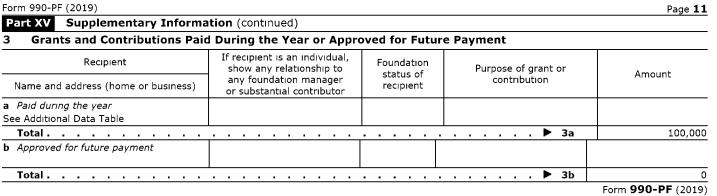
(b)

Years prior to 2018

(c)

2018

37,876



Enter gross amounts unless otherwise indicated	Unrelated b	usiness income	Excluded by sectio	n 512, 513, or 514	(e) Related or exempt
1 Program service revenue	(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	function income (See instructions)
a					
b					
d					
e					
f					
g Fees and contracts from government agencies 2 Membership dues and assessments					
3 Interest on savings and temporary cash					
investments			14	1,409	
4 Dividends and interest from securities			14	39,972	
5 Net rental income or (loss) from real estate a Debt-financed property					
b Not debt-financed property					
6 Net rental income or (loss) from personal property					
7 Other investment income 8 Gain or (loss) from sales of assets other than			14	24,642	
Inventory			18	71,873	
9 Net income or (loss) from special events			10	71,073	
O Gross profit or (loss) from sales of inventory					
1 Other revenue a					
b					
d					
e					
e		0		137,896	
e				137,896 3	
e	ilations) ne Accomplisi	hment of Exem	pt Purposes	3	
2 Subtotal Add columns (b), (d), and (e) 3 Total. Add line 12, columns (b), (d), and (e) (See worksheet in line 13 instructions to verify calcular to the second	llations) ne Accomplisi income is report	hment of Exem	pt Purposes	3uted importantly to	
2 Subtotal Add columns (b), (d), and (e). 3 Total. Add line 12, columns (b), (d), and (e). (See worksheet in line 13 instructions to verify calcular to the second line 13 instructions to verify calcular to the accomplishment of the foundation's part of the foundation of the fo	llations) ne Accomplisi income is report	hment of Exem	pt Purposes	3uted importantly to	
2 Subtotal Add columns (b), (d), and (e) 3 Total. Add line 12, columns (b), (d), and (e) (See worksheet in line 13 instructions to verify calcular to the second	llations) ne Accomplisi income is report	hment of Exem	pt Purposes	3uted importantly to	137,896
2 Subtotal Add columns (b), (d), and (e) 3 Total. Add line 12, columns (b), (d), and (e) (See worksheet in line 13 instructions to verify calcular to the second	llations) ne Accomplisi income is report	hment of Exem	pt Purposes	3uted importantly to	
2 Subtotal Add columns (b), (d), and (e) 3 Total. Add line 12, columns (b), (d), and (e) (See worksheet in line 13 instructions to verify calcular to the second	llations) ne Accomplisi income is report	hment of Exem	pt Purposes	3uted importantly to	
2 Subtotal Add columns (b), (d), and (e) 3 Total. Add line 12, columns (b), (d), and (e) (See worksheet in line 13 instructions to verify calcular to the second	llations) ne Accomplisi income is report	hment of Exem	pt Purposes	3uted importantly to	
2 Subtotal Add columns (b), (d), and (e) 3 Total. Add line 12, columns (b), (d), and (e) (See worksheet in line 13 instructions to verify calcular to the second	llations) ne Accomplisi income is report	hment of Exem	pt Purposes	3uted importantly to	
2 Subtotal Add columns (b), (d), and (e) 3 Total. Add line 12, columns (b), (d), and (e) (See worksheet in line 13 instructions to verify calcular to the second	llations) ne Accomplisi income is report	hment of Exem	pt Purposes	3uted importantly to	
2 Subtotal Add columns (b), (d), and (e) 3 Total. Add line 12, columns (b), (d), and (e) (See worksheet in line 13 instructions to verify calcular to the second	llations) ne Accomplisi income is report	hment of Exem	pt Purposes	3uted importantly to	
2 Subtotal Add columns (b), (d), and (e) 3 Total. Add line 12, columns (b), (d), and (e) (See worksheet in line 13 instructions to verify calcular to the second	llations) ne Accomplisi income is report	hment of Exem	pt Purposes	3uted importantly to	
2 Subtotal Add columns (b), (d), and (e) 3 Total. Add line 12, columns (b), (d), and (e) (See worksheet in line 13 instructions to verify calcular to the second	llations) ne Accomplisi income is report	hment of Exem	pt Purposes	3uted importantly to	
2 Subtotal Add columns (b), (d), and (e) 3 Total. Add line 12, columns (b), (d), and (e) (See worksheet in line 13 instructions to verify calcular to the second	llations) ne Accomplisi income is report	hment of Exem	pt Purposes	3uted importantly to	
2 Subtotal Add columns (b), (d), and (e) 3 Total. Add line 12, columns (b), (d), and (e) (See worksheet in line 13 instructions to verify calcular to the second	llations) ne Accomplisi income is report	hment of Exem	pt Purposes	3uted importantly to	
2 Subtotal Add columns (b), (d), and (e) 3 Total. Add line 12, columns (b), (d), and (e) (See worksheet in line 13 instructions to verify calcular to the second	llations) ne Accomplisi income is report	hment of Exem	pt Purposes	3uted importantly to	
2 Subtotal Add columns (b), (d), and (e) 3 Total. Add line 12, columns (b), (d), and (e) (See worksheet in line 13 instructions to verify calcular to the second	llations) ne Accomplisi income is report	hment of Exem	pt Purposes	3uted importantly to	
2 Subtotal Add columns (b), (d), and (e) 3 Total. Add line 12, columns (b), (d), and (e) (See worksheet in line 13 instructions to verify calcular to the second	llations) ne Accomplisi income is report	hment of Exem	pt Purposes	3uted importantly to	
2 Subtotal Add columns (b), (d), and (e) 3 Total. Add line 12, columns (b), (d), and (e) (See worksheet in line 13 instructions to verify calcular to the second	llations) ne Accomplisi income is report	hment of Exem	pt Purposes	3uted importantly to	
2 Subtotal Add columns (b), (d), and (e) 3 Total. Add line 12, columns (b), (d), and (e) (See worksheet in line 13 instructions to verify calcular to the second	llations) ne Accomplisi income is report	hment of Exem	pt Purposes	3uted importantly to	
e 2 Subtotal Add columns (b), (d), and (e). 3 Total. Add line 12, columns (b), (d), and (e). (See worksheet in line 13 instructions to verify calcular to the second se	llations) ne Accomplisi income is report	hment of Exem	pt Purposes	3uted importantly to	
2 Subtotal Add columns (b), (d), and (e) 3 Total. Add line 12, columns (b), (d), and (e) (See worksheet in line 13 instructions to verify calcular to the second	llations) ne Accomplisi income is report	hment of Exem	pt Purposes	3uted importantly to	

t XVII	Information Regarding Transfers To and Transactions and Relationships With Noncharit Exempt Organizations	able	

Part	XVII	Information Re Exempt Organia		ransfers To	and Transacti	ons and R	Relatio	nships With No	ncharitable		
		anization directly or in than section 501(c)(3)	directly enga						ion 501	Yes	No
a Trai	nsfers f	rom the reporting foun	dation to a r	oncharitable ex	empt organizatio	n of					
(1)	Cash.								. 1a(1)		No
(2)	Other	assets							1a(2)		No
b Oth	er trans	sactions									
		of assets to a nonchari	•	-					1b(1)		No
(2)	Purch	ases of assets from a n	noncharitable	exempt organi	zation				1b(2)		No
(3) Rental of facilities, equipment, or other assets								1b(3)		No	
	, , , , , , , , , , , , , , , , , , ,								. 1b(4)	+ + +	No
	- ' ' '								. 1b(5)		No
٠.		mance of services or m	•	_							No
	-	facilities, equipment, n	-	•							No
		er to any of the above ls, other assets, or ser									
		saction or sharing arra									
	s. 1		ا دی د			41) 5			1 1		
(a) Line	No	(b) Amount involved	(c) Name of	noncharitable exe	empt organization	(d) Desci	ription of	transfers, transactions	s, and sharing arr	angemen	ts
2a Is t	ne foun	dation directly or indire	ectly affiliate	d with, or relate	ed to, one or more	e tax-exemp	ot organ	zations			
des	cribed i	n section 501(c) (other	r than sectioi	n 501(c)(3)) or	ın section 527? .			🗆 Y	′es 🔽 No		
b If "\	es," co	mplete the following so	chedule								
		(a) Name of organization	on	(b) Type of organizat	tion		(c) Descriptio	n of relationship		
	Unda	r penalties of perjury,	T daalawa tha	t I baya ayamın	and this water w	aludina saa		na sebadulas and s	+-+	+0 +b0	boot
	of m	r penalties of perjury, y knowledge and belief n preparer has any kno	, it is true, c								
Sign		****	-		2020 05 11	ه عند	May			iscuss th	nis
Here		****			2020-05-14	\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	****		return with the prepa	arar show	vn
						— y _		-	below	ilei silov	VII
	, s	ignature of officer or ti	gnature of officer or trustee		Date	, Tr	7 Title		(see instr)	Yes 🗆	No
		Print/Type preparer's	name	Preparer's Sig	nature	Date		Charles IC	PTIN		
								Check if self-	P0067	4586	
D=! !		Ryan Laughlin CPA				2020-0	05-14	employed ▶ ☐			
Paid											
Prep		Firm's name ► Wipf	lı LLP						Firm's EIN ▶39	-07584	49
Use (Jnly	Eurole adduce à DO	N Pay 12227								
		Firm's address ► PC	Box 12237						DI (03:	N 663 1	2016
		Gr	een Bay, WI	543072237					Phone no (92)	1) 662-(JU16

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

Big Brother Big Sisters 520 N Broadway Suite 220 Green Bay, WI 54303	NONE	PC	Program Support	3,000
Boys and Girls Club1451 University Ave	NONE	PC	Program Support	2,500

Boys and Girls Club1451 University Ave Green Bay, WI 54302	NONE	PC	Program Support	2,500
Center for Childhood Safety 2827 Ramada Way Green Bay, WI 54304	NONE	PC	Program Support	2,500

100,000

Green Bay, WI 54302				
Center for Childhood Safety 2827 Ramada Way Green Bay, WI 54304	NONE	PC	Program Support	2,50

Total .

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

Name and address (nome or business)	or substantial contributor	·		
a Paid during the year				
Civic Symphony of Green Bay PO Box 302 Green Bay, WI 54305	NONE	PC	Program Support	1,000

Green Bay, WI 54305				
Door County Medical Center 323 S 18th Ave Sturgeon Bay, WI 54235	NONE	PC	Program Support	2,500

Door County Medical Center 323 S 18th Ave Sturgeon Bay, WI 54235	NONE	PC	Program Support	2,500
Down Syndrome Association of WI 211 E Franklin St Appleton, WI 54911	NONE	PC	Program Support	2,500

323 S 18th Ave Sturgeon Bay, WI 54235			The state of the s	_,,
Down Syndrome Association of WI 211 E Franklin St Appleton, WI 54911	NONE	PC	Program Support	2,500
Total	100.000			

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

a Paid during the year				
Einstein Project2019 Technology Way Green Bay, WI 54311	NONE	PC	Program Support	2,500

Green Bay, WI 54311				
Greater Green Bay Habitat for Humanity 1967 Allouez Ave	NONE	рс	Program Support	5,000
Groop Bay WI 54211				

Independence First 540 S. 1 st. St	NONE	DC.	Program Support	5,000
1967 Allouez Ave Green Bay, WI 54311	INOINE	l bc	rrogram support	3,000
I Greater Green Bay Habitat for Humanity	INONE	l pc	l Program Support	5.000 i

Green Bay, WI 54311				
IndependenceFirst540 S 1st St	NONE	PC	Program Support	5,000

* ·				
IndependenceFirst540 S 1st St Milwaukee, WI 53204	NONE	PC	Program Support	5,00

IndependenceFirst540 S 1st St Milwaukee, WI 53204	NONE	PC	Program Support	5,000
	•			

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment Recipient Purpose of grant or If recipient is an individual, Foundation Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business) or substantial contributor a Paid during the year Leader Dogs for the Blind NONE PC Program Support 2,500 1039 S Rochester Rd Pachastar Hills MT 49207

Rochester Hills, MT 40307				
Meyer Theater117 S Washington St Green Bay, WI 54301	NONE	PC	Annual Pledge	30,000
Muscular Dystrophy Association 330 S Executive Dr 100-A	NONE	PC	Program Support	2,000

Green Bay, WI 54301				
Muscular Dystrophy Association 330 S Executive Dr 100-A Brookfield, WI 53005	NONE	PC	Program Support	2,000
Total			▶ 3a	100,000

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

Name and address (home or business)	or substantial contributor	recipient		
a Paid during the year				
Neville Public Museum Foundation	NONE	рс	Program Support	25,000

210 Museum PL Green Bay, WI 54303				
Northeast Wisconsin Technical College 2740 W Mason St	NONE	PC	Program Support	10,000

Green Bay, WI 54303				
Northeast Wisconsin Technical College 2740 W Mason St Green Bay, WI 54307	NONE	PC	Program Support	10,000
Prevent Blindness Wisconsin	NONE	PC	Program Support	2,000

2740 W Mason St Green Bay, WI 54307	inone		Trogram Support	10,000
Prevent Blindness Wisconsin 731 N Jackson St 405 Milwaukee, WI 53202	NONE	PC	Program Support	2,000

Crecii Bay, III 31307				
Prevent Blindness Wisconsin 731 N Jackson St 405 Milwaukee, WI 53202	NONE	PC	Program Support	2,000
Total			▶ 3a	100,000

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

The Salvation Army626 Union Ct Green Bay, WI 54303	NONE	рс	Program Support	1,000

Green Bay, WI 34303				
The Transformation House430 S Clay St Green Bay, WI 54301	NONE	PC	Program Support	1,000

The Transformation House430 S Clay St	NONE	PC	Program Support	1,000
Green Bay, WI 54301				

Green Bay, WI 54301		,	••	,

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TY 2019 Accounting Fees Schedule					
		Robert a 39-6413	nd Betty Meyer Fa 619	mily Foundation	
Category	Amo	ount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
Wıpflı, LLP		1,520	760)	760

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TY 2019 Investments Corporat	e Bonds Sche	dule

552,915

551,278

Name: Robert and Betty Meyer Family Foundation

EIN: 39-6413619

Associated Short Term Bond Fund PT - 64790 shs

Investments Corporate Bonds Schedule					
Name of Bond	End of Year Book Value	End of Year Fair Market Value			
Associated Core Bond Fund PT - 28848 shs	406,134	396,193			

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TY 2019 Investments Corporate Stock Schedule			

Name: Robert and Betty Meyer Family Foundation

EIN: 39-6413619

Investments Corporation Stock Schedule				
Name of Stock	End of Year Book Value	End of Year Fair Market Value		
Associated Banc Corp Com - 50199 shs	2,581	1,106,386		
Dodge and Cox Fds Intl Stock Fd - 1689.706 shs	53,969	73,671		
Am Fds Europacıfıc Growth Fd Cl F2 - 1492.858 shs	56,984	83,018		
Goldman Sachs Growth Opport Instl - 2783.952 shs	59,753	53,535		
Harbor Capital Appreciation Fd - 1552.897 shs	64,297	117,554		

As Filed Data -

Name: Robert and Betty Meyer Family Foundation

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Description

		EIN:	39-6413619
 _	 		

Other Income Schedule

Fund Distributions

Revenue And

Expenses Per Books

24,642

Net Investment

Income

24,642

Adjusted Net Income

24,642

DLN: 93491136006060

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TY 2019 Other Increases Schedule					
Name:	Robert and Be	tty Meyer Family Foundation			
EIN:	39-6413619				
De	escription		Amount		
Broker Basıs Adjustments			2,	884	

Category	Amount	Net Investment	Adiusted Net	Disbursements	
EIN: 39-6413619					
Name: Robert and Betty Meyer Family Foundation					
TY 2019 Other Professional Fees Schedule					
efile GRAPHIC print - DO NOT PROCE	SS As Filed Data	-	DLI	N: 93491136006060	

59 0413019				
Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes

15,398

Associated Trust Co