Form 990-PF

FEB 20 - Learn

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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/Form990PF for instructions and the latest information.

2019

Depa	rtment o	of the Treasury enue Service			social security numbers on rs.gov/Form990PF for inst				Open to Public Inspection
		Jar year 2019 or tax y				, and e		1	Open to radiic inspection
		foundation				,	<u>v</u>	A Employer identification	number
Ç	OUS	SINS SUBS	MAKE IT BET	TE	R 42 . 4.4.				
		DATION, I			MEMA		_	45-3640866	
			per if mail is not delivered to	street a	ddress		Room/suite	B Telephone number	
_		/13400 LEO						262-253-77	00
		wn, state or province, MONEE FAL:	country, and ZIP or for LS, WI 530		ostal code			C If exemption application is pr	ending, check here
G (Check a	all that apply	Initial return		Initial return of a f	ormer public (charity	D 1. Foreign organizations	s, check here >
			Final return		Amended return			2 Foreign organizations me	eting the 8594 test
			Address change		X Name change			2. Foreign organizations me check here and attach co	mputation
H (_	type of organization tion 4947(a)(1) none:		$\overline{}$	kempt private foundation Other taxable private found	ation .	00(E If private foundation sta under section 507(b)(1)	. —
l Fa	air mar	ket value of all assets	at end of year J Ac	counti	ng method. X Cash	Accr	ual	F If the foundation is in a	60-month termination
(1	rom Pa	art II, col (c), line 16)			ther (specify)			under section 507(b)(1)	(B), check here
7-24	<u>≻\$</u> #9548#31			colur	nn (d), must be on cash bas	is.)			· ·
<u></u>	art I:	(The total of amounts in enecessarily equal the am	columns (b), (c), and (d) may	not	(a) Revenue and expenses per books		ome	(c) Adjusted net income	(d) Disbursements for charitable purposes (cash basis only)
	1 (Contributions, gifts, g	rants, etc , received		137,130.			N/A	MAN TO THE STATE OF THE STATE O
-		_	dation is not required to attach Sch	В					
	3	Interest on savings and te cash investments	mporary		1,563.		<u>1,563.</u>	-	STATEMENT 1
		Dividends and interes	t from securities						
		Gross rents	,		ACONTO TO TO THE BOOK OF THE	n and a price	AND CONTRACTOR'S		
	l .	Net rental income or (loss)					Pingelika Bulayak		
9	ון ני	Net gain or (loss) from sale Gross sales price for all	a of assets not on line 10			-EXPANSE ***	8000 14 H		
ven v		assets on line 6a Capital gain net income (fr	om Part IV line 2)		A STATE OF THE STA	r - phylogideg figfrære.	0.		FARAGORA
ä	1	Net short-term capital						and the Control of the policy of the control of the	
	9 1	Income modifications			AND REPORT OF THE PARTY OF THE	EXILER:	era era		NAME OF THE PARTY
	10a a	Gross sales less returns and allowances			MIDWAY YOU	经外的	Minda ay	THE HEALTH STATE OF THE STATE O	
5	bι	Less Cost of goods sold			Par Secretary Secretary			SHEMBON AND THE	
7	c (Gross profit or (loss)	•						
\mathcal{X}		Other income			130 603		1 562		
% —	$\overline{}$	Total. Add lines 1 thr			138,693.	 	1,563. 0.		0.
£.	l .	Compensation of officers, Other employee salari			0.		<u> </u>		<u> </u>
\mathbb{Z}_{\sim}		Other employee salah Pension pla ns⊬emplo	-				•		
A) .	1		RECEIVED						
√ ens				2 ₁ 0	515.	ą.	258.		257.
	c (Accounting fees Other professional fee	EED A 4 2020	OSC					
<u>≯</u> å		Interest 5		4.4	10				
rati	.1	Taxes	STMT	3 <mark>8</mark>	17.		0.		0.
nisi			ODEN, UT					·	
S	:l	Occupancy]* 				
	J	Travel, conferences, a Printing and publication	•						
	il	Other expenses	STMT	4	20.		0.		20.
15/20 erating and Ad	:	Total operating and a		_					
رين ۾	1	expenses Add lines			552.	,	258.		277.
\sim_{\sim}	25 (Contributions, gifts, g	rants paid		121,300.			7. 强度强烈的战争公众	121,300.
ე	l	Total expenses and d	isbursements.		444		.		404
J_		Add lines 24 and 25	 		121,852.		258.	43 (121,577.
		Subtract line 25 from -			16 041				
			penses and dishursements		16,841.	**************************************	1,305.		
		Net investment incom			7/12[35]			N/A	

LHA For Paperwork Reduction Act Notice, see instructions

Form **990-PF** (2019)

F	e processor in	Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only	Beginning of year	End o	of year
1 7	ar te	column should be for end-of-year amounts only	(a) Book Value	(b) Book Value	(c) Fair Market Value
-	1	Cash - non-interest-bearing	149,287.	166,128.	166,128.
	2	Savings and temporary cash investments			
	3	Accounts receivable			
		Less allowance for doubtful accounts	The state of the s	** ** ** ** ** ** ** ** ** ** ** ** **	77
	4	Pleages recélvable			Manual William with the Committee of the
		Less allowance for doubtful accounts		moths 45 Fallowers Cooks and France Cooks	
,	5	Grants receivable			,
	6	Receivables due from officers, directors, trustees, and other			
	`	disqualified persons			
	7	Other notes and loans receivable	/// 12 Tell 18 18 18 18 18 18 18 18 18 18 18 18 18		
		Less allowance for doubtful accounts	A TOTAL CONTROL OF THE PERSON NAMED OF THE PER	Annual Annual State of the Stat	BEATT & COMPANY THE PROPERTY OF THE PROPERTY O
us.	8	Inventories for sale or use	-		
Assets	9	Prepaid expenses and deferred charges			
As	i -	Investments - U.S. and state government obligations		,	
		Investments - corporate stock		-	
	1	Investments - corporate bonds			
	ı	Investments - land, buildings, and equipment basis		Con Maria Wali	
		Less accumulated depreciation	AND A DESIGNATION OF THE PARTY	,, , , , , , , , , , , , , , , , ,)
,	12	Investments - mortgage loans			
	13	Investments - other			
		Land, buildings, and equipment, basis			
•		Less accumulated depreciation			,
	15	Other assets (describe			
		Total assets (to be completed by all filers - see the			
		instructions. Also, see page 1, item I)	149,287.	166,128.	166,128.
	17	Accounts payable and accrued expenses			
	18	Grants payable			
s	19	Deferred revenue			
Liabilities	20	Loans from officers, directors, trustees, and other disqualified persons	•		
api	21	Mortgages and other notes payable			
J	22	Other liabilities (describe)	7		
			•		
	23	Total liabilities (add lines 17 through 22)	0.	0.	
		Foundations that follow FASB ASC 958, check here	· · · ·	1	
S		and complete lines 24, 25, 29, and 30.			
Š	24	Net assets without donor restrictions	÷		
Balances	25	Net assets with donor restrictions			
		Foundations that do not follow FASB ASC 958, check here 🕨 🗓			
Fund		and complete lines 26 through 30		_	
ō	26	Capital stock, trust principal, or current funds	0.	0.	
ets	27	Paid-in or capital surplus, or land, bldg., and equipment fund	0.	0.	4E-7
Ass	28	Retained earnings, accumulated income, endowment, or other funds	149,287.	166,128.	
Net Assets	29	Total net assets or fund balances	149,287.	166,128.	
_			140 207	166,128.	
_		Total liabilities and net assets/fund balances	149,287.	100,120.	
₽	art	Analysis of Changes in Net Assets or Fund Ba	alances		
1	Total	net assets or fund balances at beginning of year - Part II, column (a), line	29.		· · · · · · · · · · · · · · · · · · ·
		at agree with end-of-year figure reported on prior year's return)	=+ -	1	149,287.
	•	amount from Part I, line 27a		2	16,841.
		r increases not included in line 2 (itemize)		3	0.
		lines 1, 2, and 3		4	166,128.
		eases not included in line 2 (itemize)	•	5	0.
		net assets or fund balances at end of year (line 4 minus line 5) - Part II, c	olumn (b), line 29	6	166,128.
Ť	01	The second of	X-1/2		Form 990-PF (2019)

45-3640866 Form \$90-PF (2019) FOUNDATION, INC. Page 3 Capital Gains and Losses for Tax on Investment Income Part IV (b) How acquired P - Purchase D - Donation (d) Date sold (mo, day, yr.) (a) List and describe the kind(s) of property sold (for example, real estate, (c) Date acquired 2-story brick warehouse; or common stock, 200 shs. MLC Co.) (mo., day, yr.) <u>1a</u> NONE b C <u>d</u> е (f) Depreciation allowed (g) Cost or other basis (h) Gain or (loss) (e) Gross sales price (or allowable) plus expense of sale ((e) plus (f) minus (g)) b d е Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69 (I) Gains (Col. (h) gain minus col (k), but not less than -0-) or (j) Adjusted basis (k) Excess of col. (i) Losses (from col. (h)) (i) FMV as of 12/31/69 as of 12/31/69 over col. (j), if any b d If gain, also enter in Part I, line 7 2 2 Capital gain net income or (net capital loss) If (loss), enter -0- in Part I, line 7 3 Net short-term capital gain or (loss) as defined in sections 1222(5) and (6). If gain, also enter in Part I, line 8, column (c). If (loss), enter -0- in Part I, line 8
Part V Qualification U Qualification Under Section 4940(e) for Reduced Tax on Net Investment Income (For optional use by domestic private foundations subject to the section 4940(a) tax on net investment income.) If section 4940(d)(2) applies, leave this part blank. Yes X No Was the foundation liable for the section 4942 tax on the distributable amount of any year in the base period? If "Yes," the foundation doesn't qualify under section 4940(e). Do not complete this part. Enter the appropriate amount in each column for each year, see the instructions before making any entries. (d) Distribution ratio (col. (b) divided by col. (c)) (a) Base period years (c) Adjusted qualifying distributions Net value of noncharitable-use assets Calendar year (or tax year beginning in) 69,767. 150,513. .463528 2018 149,865. **/.725907** 108,788. 2017 95,123. 106,026. .897167 2016 1,925. 33,181. .058015 2015 30,101. 24,006 .797515 2014 2 2.942132 2 Total of line 1, column (d) 3 Average distribution ratio for the 5-year base period - divide the total on line 2 by 5.0, or by the number of years .588426 the foundation has been in existence if less than 5 years 152,367. 4 Enter the net value of noncharitable-use assets for 2019 from Part X, line 5 89,657. 5 Multiply line 4 by line 3 5 13. 6 Enter 1% of net investment income (1% of Part I, line 27b) 6 89,670. 7 Add lines 5 and 6

121,577.

8 Enter qualifying distributions from Part XII, line 4

See the Part VI instructions.

If line 8 is equal to or greater than line 7, check the box in Part VI, line 1b, and complete that part using a 1% tax rate.

_	k990-PF (2019) FOUNDATION, INC.				<u>36408</u>		Page 4	
P	Excise Tax Based on Investment Income (Section 4940)	(a), 49	940(b), 4940(e), or 4	948 -	see ins	truction	s)	
18	Exempt operating foundations described in section 4940(d)(2), check here 🕨 🔲 and e	nter "N/A	A" on line 1.					
	Date of ruling or determination letter (attach copy of letter if nec	essary-	see instructions)		2.2			
t	Domestic foundations that meet the section 4940(e) requirements in Part V, check here	X	and enter 1%	1			13.	
	of Part I, line 27b				462			
	All other domestic foundations enter 2% of line 27b. Exempt foreign organizations, enter 4%	of Part	I, line 12, col (b)		1			
	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only, other			2	100000000000000000000000000000000000000		0.	
	Add lines 1 and 2	10.0, 0	, ,	3			13.	
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only; of	hore on	iter -N-1	4			0.	•
	Tax based on investment income. Subtract line 4 from line 3 If zero or less, enter -0-	11613, 611	itti oʻj	5			$\frac{3}{13}$.	
5	•						4223	
6	Credits/Payments	ا دم ا	0.					
	2019 estimated tax payments and 2018 overpayment credited to 2019	6a	0.					
	Exempt foreign organizations - tax withheld at source	6b	0.			32 H		
	Tax paid with application for extension of time to file (Form 8868)	6c		-				
	Backup withholding erroneously withheld	6d	0.					
7	Total credits and payments. Add lines 6a through 6d			7	\vdash	1	0.	
8	Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is atta	ched		8			0.	
ν 9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed		<i>'</i>	9			<u>13.</u>	
10	Overpayment If line 7 is more than the total of lines 5 and 8, enter the amount overpaid		, •	10				
11	Enter the amount of line 10 to be Credited to 2020 estimated tax		Refunded -	11	L			
P	Statements Regarding Activities							
18	During the tax year, did the foundation attempt to influence any national, state, or local legis	lation or	did it participate or interveni	e in	No.	*** Yes		
	any political campaign?				_	1a	<u>X</u>	
t	Did it spend more than \$100 during the year (either directly or indirectly) for political purpos	ses? See	e the instructions for the defin	nition	-	1b	X	
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of	of any m	aterials published or		9,8			
	distributed by the foundation in connection with the activities		•	,	,			
(Did the foundation file Form 1120-POL for this year?				L	1c	X	
(Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the	year	•		- Salar			
	(1) On the foundation. \blacktriangleright \$ 0. (2) On foundation managers		0.		S ave			
	Enter the reimbursement (if any) paid by the foundation during the year for political expendi				100 mg			
-	managers. ► \$ 0 •		,		1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1			
2	Has the foundation engaged in any activities that have not previously been reported to the IF	RS?				2	X	
	If "Yes," attach a detailed description of the activities.					42 (1981)		
3	Has the foundation made any changes, not previously reported to the IRS, in its governing if	nstrume	nt, articles of incorporation, o	or	3. 2.5			
_	bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes		· · ·			3 .	X	
4:	Did the foundation have unrelated business gross income of \$1,000 or more during the year	?	•			4a .	X	
	If "Yes," has it filed a tax return on Form 990-T for this year?			N	/A	4b		
	Was there a liquidation, termination, dissolution, or substantial contraction during the year?				' . F	5	Х	
	If "Yes," attach the statement required by General Instruction T				7		4	
	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied en	ther			Line and the second			
. •	By language in the governing instrument, or				(2)			
	By state legislation that effectively amends the governing instrument so that no mandatory	, directio	one that conflict with the stat	e law	`		E	
	remain in the governing instrument?	y un com	ons that commet with the stat	D 10 44	*	6 X		
,	Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," comp	lata Dari	tll ool (a) and Bort V/		. F	7 X		
7	Did the foundation have at least \$5,000 in assets at any time during the year of thes, comp	iele Pai i	i ii, coi. (c), aiiu rait Av		, E			
	Catalanda at the state of the farm data as seen to as suite subject to a secretarized. Can imply upon				6			
88	Enter the states to which the foundation reports or with which it is registered. See instruction	ns –						
	WI		Pananal (an des an 12		(f			
t	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the A	itorney (впегаі (or designate)		i i			
	of each state as required by General Instruction G? If "No," attach explanation		4043403		.	8b X	15-0 20-38	^
9	Is the foundation claiming status as a private operating foundation within the meaning of se			noar	12			1
	year 2019 or the tax year beginning in 2019? See the instructions for Part XIV If "Yes," com-			am	, <u>,</u>	9 .	X	U
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedu	le listing t	heir names and addresses	STMI		10 X 1990-PF		
					Form	1 990-アト	(201 0)	

Form-990-PF (2019) FOUNDATION, INC.

| Part VII-A- | Statements Regarding Activities

45-3640866

Page 5

P.L.S	It VII-A: Statements Regarding Activities (continued)			
		Programme.	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		X
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had advisory privileges?			
	If "Yes," attach statement. See instructions	12	ļ	X
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	X	ļ
	Website address ► WWW.COUSINSSUBS.COM/FOUNDATION			
14	The books are in care of ► JASON WESTHOFF Telephone no. ► 262-2		<u>700</u>	
	Located at ► N83 W13400 LEON ROAD, MENOMONEE FALLS, WI ZIP+4 ►5	3051		
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	N	/A	
16	At any time during calendar year 2019, did the foundation have an interest in or a signature or other authority over a bank,		Yes	No
	securities, or other financial account in a foreign country?	16	# ~ 53	X
	See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes," enter the name of the		芸さ	
(F)-	foreign country	M. 3.	i* /"\	
Ή̈́S	art VII-B Statements Regarding Activities for Which Form 4720 May Be Required	l de future		B1 -
	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.		Yes	No
1 a	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?	F.		
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from)	£.	- "	
	a disqualified person?			
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?	7(3)		i de
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?			2, 14, 2 2, 34, 22
	(5) Transfer any income or assets to a disqualified person (or make any of either available		العلمية والمراتب العداد	
	for the benefit or use of a disqualified person)?		7 - 73	
	(6) Agree to pay money or property to a government official? (Exception. Check "No"			
	If the foundation agreed to make a grant to or to employ the official for a period after termination of government service, if terminating within 90 days.) Yes X No			
	• • • • • • • • • • • • • • • • • • • •			
D	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 N/A	\$10 m	. (A)	
		1b	£ 5.	~~~``\\
_	Organizations relying on a current notice regarding disaster assistance, check here		روي مع ميني ميني ميني	30
C	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected	1.	2 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	X
•	before the first day of the tax year beginning in 2019? Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation	1c	ا برتون ران د	大. 刘强 又
2				
	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	聚初	- ' -	
a	6d and 6e) for tax year(s) beginning before 2019? Yes X No			
	If "Yes," list the years \(\rightarrow\),			
h	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.) N/A	2b		
c	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here.	14.7 T		25.
•	•			
.3a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time	2 - 2 - 4 - 4 - 4 - 4 - 4 - 4 - 4 - 4 -	200 TE	
	during the year?		Facts	
Ь	If "Yes," did it have excess business holdings in 2019 as a result of (1) any purchase by the foundation or disqualified persons after	124 c	2 -5 -	
	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.) N/A	3b		
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a		Х
b	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that	9/A:	1.2	THE
	had not been removed from jeopardy before the first day of the tax year beginning in 2019?	4b		Х
_	F	orm 99 0)-PF	(2019)

r construction The Time of the Country of the Count	1 1717		45-36408	<i>C.C.</i> Dom. o
Form 990-PF (2019) FOUNDATION, INC. [Part#VII-Ba Statements Regarding Activities for Which F	orm 4720 May Be R			66 Page 6
4 3 4 4 4 1 1	Offit 4720 Way DC TO	equirea (contin	uea)	Yes No
 5a During the year, did the foundation pay or incur any amount to (1) Carry on propaganda, or otherwise attempt to influence legislation (section 	404E(a)\2		s X No	
(2) Influence the outcome of any specific public election (see section 4955); or			S A NO	
any voter registration drive?	to carry on, unectry or mune		es 🕱 No	
•	2		es X No	
(3) Provide a grant to an individual for travel, study, or other similar purposes?(4) Provide a grant to an organization other than a charitable, etc., organization			:S [23] NU ;,	
•	i described ili section	v	es 🗶 No 🖫	
4945(d)(4)(A)? See instructions	or adventional numbers or fo		,	
(5) Provide for any purpose other than religious, charitable, scientific, literary,	or educational purposes, or i		es 🗓 No	
the prevention of cruelty to children or animals? b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify unc	for the eventions described i		S (21 NO)	
	•	ii negulations	N/A	5b
section 53.4945 or in a current notice regarding disaster assistance? See instru Organizations relying on a current notice regarding disaster assistance, check h			▶ □ 2	30 2 to Kind
c If the answer is "Yes" to question 5a(4), does the foundation claim exemption fr		nad		
			es 🗆 No 🖟	
expenditure responsibility for the grant?	1,	·/ A 16	is Line like	
If "Yes," attach the statement required by Regulations section 53.4945-5(d)	an promume on		Ļ	
6a Did the foundation, during the year, receive any funds, directly or indirectly, to p	Jay premiums on		es 🗶 No 🖔	
a personal benefit contract? b Did the foundation, during the year, pay premiums, directly or indirectly, on a pi	organal honofit contract?	re	2 2 140 E	6b X
	ersonal benefit contract?		2.5	
If "Yes" to 6b, file Form 8870.	haltar transaction?		es 🗓 No 🏻	
7a At any time during the tax year, was the foundation a party to a prohibited tax si b if "Yes," did the foundation receive any proceeds or have any net income attribu		TR	N/A	7b
	•		- 11/A	
8 Is the foundation subject to the section 4960 tax on payment(s) of more than \$	1,000,000 in remaileration or		es 🗶 No 🖟	
excess parachute payment(s) during the year? Part VIII. Information About Officers, Directors, Truste	es Foundation Mar		S ZX NU ,	- リステージン・- a (2013/10/4)
Paid Employees, and Contractors	es, i oundation mai	lagers, riigiliy		
1 List all officers, directors, trustees, and foundation managers and the	eir compensation.	 		
	(b) Title, and average	(c) Compensation	(d) Contributions to employee benefit plans	(e) Expense account, other
(a) Name and address	hours per week devoted to position	(If not paid, enter -0-)	and delerred compensation	account, other allowances
	to position	CINC! 0 /	U U U U U U U U U U U U U U U U U U U	4.10.10.10.00
SEE STATEMENT 6		0.	0.	0.
1				
	,	1	, .	
.,				
	,			
\				
2 Compensation of five highest-paid employees (other than those incl	uded on line 1). If none, (enter "NONE."		
4.1 No. 11.1 de la	(b) Title, and average		(d) Contributions to employee benefit plans	(e) Expense account, other
(a) Name and address of each employee paid more than \$50,000	hours per week devoted to position	(c) Compensation	and deferred compensation	allowances
NONE				
				[
	,			
,				
				ι
Total number of other employees paid over \$50,000		· · · · · · · · · · · · · · · · · · ·	▶	0
				200 DE

Form 990-PF (2019) FOUNDATION, INC.	45-364	<u>0866 Page 7</u>
Part VIII Information About Officers, Directors, Trustees, Foundati Paid Employees, and Contractors (continued)	on Managers, Highly	
3 Five highest-paid independent contractors for professional services. If none, enter	'NONE."	
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE		
]	
	<u> </u>	
		-
	_}	
	•	
	_}	
	<u></u>	
Total number of others receiving over \$50,000 for professional services		<u>▶</u> 0
Part IX-A Summary of Direct Charitable Activities		
List the foundation's four largest direct charitable activities during the tax year. Include relevant statisti number of organizations and other beneficiaries served, conferences convened, research papers produ	cal information such as the ced, etc.	Expenses
1 N/A		
2		
3		
4		
Part IX-B Summary of Program-Related Investments		
Describe the two largest program-related investments made by the foundation during the tax year on li	nes 1 and 2.	Amount
1 N/A		

· · · · · · · · · · · · · · · · · · ·		
2		
		<u>-</u>
All other program-related investments. See instructions.		
3		
	~ - ~ - ~ - ~	
Total. Add lines 1 through 3	▶	0.

0. Form **990-PF** (2019)

45-3640866 Page 8

ĮP,	art∤X Minimum Investment Return (All domestic foundations must complete this part. Foreign following the part of the part of the part of the part of the part. (All domestic foundations must complete this part.)	ındatıons, se	e instructions)
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes		
а		1a	0.
b	Average of monthly cash balances	1b	154,687.
C	Fair market value of all other assets	1c	· · · · · · · · · · · · · · · · · · ·
d	Total (add lines 1a, b, and c)	1d	154,687.
е	Reduction claimed for blockage or other factors reported on lines 1a and		
	1c (attach detailed explanation) 1e 0	.	
2	Acquisition indebtedness applicable to line 1 assets	2	0.
3	Subtract line 2 from line 1d	3	154,687.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions)	4	2,320.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	152,367.
6	Minimum investment return Enter 5% of line 5	6	7,618.
ĮP.	art XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations a	ınd certain	
	foreign organizations, check here 🕨 🔛 and do not complete this part.)		
1	Minimum investment return from Part X, line 6	1	7,618.
2a	Tax on investment income for 2019 from Part VI, line 5		
b	Income tax for 2019. (This does not include the tax from Part VI.)		
C	Add lines 2a and 2b	2c	13.
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	7,605.
4	Recoveries of amounts treated as qualifying distributions	4	0.
5	Add lines 3 and 4	5	7,605.
6	Deduction from distributable amount (see instructions)	6	0.
7_	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1	7	7,605.
IP.	artiXIII Qualifying Distributions (see instructions)	TT	
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes		101 577
	Expenses, contributions, gifts, etc total from Part I, column (d), line 26	1a	121,577.
b	Program-related investments - total from Part IX-B	1b	<u> </u>
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes	2	
3	Amounts set aside for specific charitable projects that satisfy the		
	Suitability test (prior IRS approval required)	3a	
	Cash distribution test (attach the required schedule)	3b	101 577
4	Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4	4	121,577.
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment	1 _	1 2
	income. Enter 1% of Part I, line 27b	5	13. 121,564.
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	•
	Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation	qualities for th	e section
_	4940(e) reduction of tax in those years.		

Form **990-PF** (2019)

Part XIII Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2018	(c) 2018	(d) 2019
1 Distributable amount for 2019 from Part XI, line 7				7,605.
2 Undistributed income, if any, as of the end of 2019			,	7,003.
a Enter amount for 2018 only			0.	
b Total for prior years:				
- France distributions community of any to 2010		0.		
a From 2014 96, 391.				
4 6 6				'
b From 2015 1,670. c From 2016 89,822.				
d From 2017 101, 295.				
e From 2018 62,258.				
f Total of lines 3a through e	351,436.	······································		
4 Qualifying distributions for 2019 from	331,430.			
Part XII, line 4 ▶ \$ 121, 577.				
a Applied to 2018, but not more than line 2a			0.	
b Applied to undistributed income of prior				
years (Election required - see instructions)		0.		
c Ireated as distributions out of corpus		, ,		
(Election required - see instructions)	n.			
d Applied to 2019 distributable amount				7,605.
e Remaining amount distributed out of corpus	113,972.		**************************************	
5 Excess distributions carryover applied to 2019 (If an amount appears in column (d), the same amount	0.			0.
6 Enter the net total of each column as	0.			<u>.</u>
indicated below:	165 100			
a Corpus Add lines 3f, 4c, and 4e Subtract line 5	465,408.			
b Prior years' undistributed income. Subtract		0.		
line 4b from line 2b		0.		,, ,
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		0.		
d Subtract line 6c from line 6b. Taxable				
amount - see instructions		0.		
e Undistributed income for 2018. Subtract line				
4a from line 2a Taxable amount - see instr.			0.	
f Undistributed income for 2019. Subtract				
lines 4d and 5 from line 1. This amount must				
be distributed in 2020				0.
7 Amounts treated as distributions out of				
corpus to satisfy requirements imposed by				'
section 170(b)(1)(F) or 4942(g)(3) (Election	_			
may be required - see instructions)	0.			
8 Excess distributions carryover from 2014				,
not applied on line 5 or line 7	96,391.			
9 Excess distributions carryover to 2020.	262 245			
Subtract lines 7 and 8 from line 6a	369,017.			
10 Analysis of line 9				
a Excess from 2015 1,670.		ļ		
b Excess from 2016 89,822.				
c Excess from 2017 101, 295.				
d Excess from 2018 62,258. e Excess from 2019 113,972.				
e Excess from 2019 113,972.				Form 990-PF (2019)

COUSINS SUBS MAKE IT BETTER 45-3640866 FOUNDATION Page 10 INC. Form 990-PF (20.19) Part XIV Private Operating Foundations (see instructions and Part VII-A, question 9) N/A 1 a If the foundation has received a ruling or determination letter that it is a private operating foundation, and the ruling is effective for 2019, enter the date of the ruling 4942(1)(3) 4942(j)(5) b Check box to indicate whether the foundation is a private operating foundation described in section Prior 3 years Tax year 2 a Enter the lesser of the adjusted net (d) 2016 (b) 2018 (c) 2017 (e) Total (a) 2019 income from Part I or the minimum investment return from Part X for each year listed **b** 85% of line 2a c Qualifying distributions from Part XII, line 4, for each year listed d Amounts included in line 2c not used directly for active conduct of exempt activities e Qualifying distributions made directly for active conduct of exempt activities. Subtract line 2d from line 2c Complete 3a, b, or c for the alternative test relied upon: a "Assets" alternative test - enter: (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 investment return shown in Part X, line 6, for each year listed c "Support" alternative test - enter: (1) Total support other than gross investment income (interest, dividends, rents, 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) (3) Largest amount of support from an exempt organization (4) Gross investment income Supplementary Information (Complete this part only if the foundation had \$5,000 or more in assets at any time during the year-see instructions.) Information Regarding Foundation Managers: a List any managers of the foundation who have contributed more than 2% of the total contributions received by the foundation before the close of any tax year (but only if they have contributed more than \$5,000). (See section 507(d)(2).) NONE b List any managers of the foundation who own 10% or more of the stock of a corporation (or an equally large portion of the ownership of a partnership or other entity) of which the foundation has a 10% or greater interest. Information Regarding Contribution, Grant, Gift, Loan, Scholarship, etc., Programs: Check here 🕨 🔲 If the foundation only makes contributions to preselected charitable organizations and does not accept unsolicited requests for funds. If the foundation makes gifts, grants, etc., to individuals or organizations under other conditions, complete items 2a, b, c, and d. a The name, address, and telephone number or email address of the person to whom applications should be addressed: COUSINS SUBS MAKE IT BETTER FOUNDATION, INC., 262-253-7700 N83 W13400 LEON ROAD, MENOMONEE FALLS, WI 53051 b The form in which applications should be submitted and information and materials they should include: NONE c Any submission deadlines: NONE d Any restrictions or limitations on awards, such as by geographical areas, charitable fields, kinds of institutions, or other factors: NONE

3 Grants and Contributions Paid During the Y	ear (Continuation)	,		
Recipient	If recipient is an individual, show any relationship to	Foundation	Purpose of grant or	, Amount
Name and address (home or business)	any foundation manager or substantial contributor	status of recipient	contribution	<i>i</i>
			,	
FIRST STAGE MILWAUKEE INC.	NONE	₽C	SUPPORT FOR PROGRAM	
325 W WALNUT STREET			ACTIVITIES	1,00
MILWAUKEE, WI 53212		-		1,00
GENERATIONS AGAINST BULLYING	NONE	PC	SUPPORT FOR PROGRAM	
5550 W FOREST HOME AVENUE			ACTIVITIES	
HILWAUKEE, WI 53129				1,00
UNIVERSITY OF NORTH DAKOTA	NONE	PC	SUPPORT FOR PROGRAM	
IWAMLEY HALL 204 264 CENTENNIAL	†		ACTIVITIES	
DRIVE STOP 7155 GRAND FORKS, ND 58202				7,50
ST. NORBERT COLLEGE	NONE	PC	SUPPORT FOR PROGRAM	
FINANCIAL AID OFFICE 100 GRANT	NONE		ACTIVITIES	1
STREET, TODD WEHR HALL 136 DE PERE,				
VI 54115				2,50
UNIVERSITY OF KENTUCKY	NONE	PC	SUPPORT FOR PROGRAM	
FINANCIAL AID OFFICE 112 FUNKHOUSER			ACTIVITIES	
BUILDING LEXINGTON, KY 40506				7,50
BELOIT COLLEGE	NONE	PC	SUPPORT FOR PROGRAM	
FINANCIAL AID OFFICE PEARSON HALL,			ACTIVITIES	
2ND FLOOR, 700 COLLEGE STREET				
BELOIT, WI 53511				2,50
	VOVE		CURRORM FOR PROGRAM	
CARDINAL STRITCH UNIVERSITY BURSAR'S OFFICE 6801 N YATES ROAD	NONE	PC	SUPPORT FOR PROGRAM ACTIVITIES	
\$522 MILWAUKEE, WI 53217			RETIVITIES	- 5,00
FOX VALLEY TECHNICAL COLLEGE	none	PC	SUPPORT FOR PROGRAM	
FVTC FOUNDATION INC. 1825 N			ACTIVITIES	
BLUEMOUND DRIVE, PO BOX 2277				
APPLETON, WI 54912				2,50
ABOVE & BEYOND THE PLAYGROUND, INC.	NONE	PC	SUPPORT FOR PROGRAM	
4968 N 73RD STREET			ACTIVITIES	1 2 5
MILWAUKEE, WI 53218		 		2,50
LOAVES & FISHES OF THE FOX VALLEY,	NONE	РC	SUPPORT FOR PROGRAM	
INC.		,	ACTIVITIES	
P.O. BOX 1562 APPLETON, WI 54912				2,00
Total from continuation sheets				88,50

Part XV Supplementary Information 3 Grants and Contributions Paid During the Year (Continuation) If recipient is an individual, show any relationship to Recipient Foundation Purpose of grant or status of recipient Amount contribution any foundation manager Name and address (home or business) or substantial contributor VINCE LOMBARDI FOUNDATION NONE SUPPORT FOR PROGRAM ÞС ACTIVITIES , P.O. BOX 5010 ELM GROVE, WI 53122 50,000. SUPPORT FOR PROGRAM ALL SAINTS CATHOLIC SCHOOL OF NONE Þс ACTIVITIES KENOSHÁ, INC. 4400 22ND AVENUE KENOSHA, WI 53140 1,000. GIVING TO THE NATIONS, INC. NONE SUPPORT FOR PROGRAM 3312 WASHINGTON AVENUE ACTIVITIES RACINE, WI 53405 1,000. INTERCHANGE INCORPORATED NONE Ьc SUPPORT FOR PROGRAM ACTIVITIES 1105 N WAVERLY PLACE 1,000. MILWAUKEE, WI 53202 CRISTO REY JESUIT MILWAUKEE HIGH NONE SUPPORT FOR PROGRAM ÞС SCHOOL INC. ACTIVITIES 1215 S 45TH STREET WEST MILWAUKEE, WI 53214 1,500. Total from continuation sheets

3 Grants and Contributions Paid During the Y		Payment		
Recipient	If recipient is an individual, show any relationship to any foundation manager	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	or substantial contributor	recipient		
a Paid during the year			,	
HUNGER TASKFORCE	NONE	₽C	SUPPORT FOR BATTLING	
201 S HAWLEY COURT			HUNGER	
MILWAUKEE, WI 53214				24,30
VISCONSIN DECA	NONE	₽C	SUPPORT FOR PROGRAM	
L25 S WEBSTER STREET	10112	[]	ACTIVITIES	
MADISON, WI 53703				2,00
	,		CANDODE TOD SOLLES	
JNIVERSITY OF WISCONSIN - MILWAUKEE CASHIER'S OFFICE 3203 N DOWNER	NONE	PC	SUPPORT FOR COLLEGE FINANCIAL ASSISTANCE	
AVENUE #285 MILWAUKEE, WI 53211			TIMETAL ASSISTANCE	2,50
NATIONAL ALLIANCE OF MENTAL ILLNESS	NONE	₽C	SUPPORT FOR PROGRAM	
WASHINGTON COUNTY			ACTIVITIES	
P.O. BOX 1074				3,00
WEST BEND, WI 53095				3,00
BOYS & GIRLS CLUB OF OSHKOSH, INC.	NONE	₽C	SUPPORT FOR PROGRAM ACTIVITIES	
OSHKOSH, WI 54903				1,00
b Approved for future payment	NTINUATION SHEE	T(\$)	▶ 3a	121,30
NONE				
			,	
•				
	_			
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		1 .		
			,	

Form 990-PF (2019)

Analysis of Income-Producing Activities Part XVI-A

Enter gross amounts unless otherwise indicated.	Uniterated	1 Dusiness income		ad by section 312, 313, 07 314	(e)
1 Program service revenue	(a) Business code	(b) Amount	(C) Exclu- sion code	(d) Amount	Related or exempt function income
a					
b					
С	1 1				
d	1 1				
е					
1	_				
g Fees and contracts from government agencies	_				
2 Membership dues and assessments					
3 Interest on savings and temporary cash					
investments			14	1,563.	
4 Dividends and interest from securities			 - 		
5 Net rental income or (loss) from real estate.			+ +		
			+		
a Debt-financed property		<u>.</u>	+		
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 inventory					
9 Net income or (loss) from special events					
10 Gross profit or (loss) from sales of inventory					
11 Other revenue					
a	_ [
b					
C	1 1				
d	1 1	-			
e					
12 Subtotal. Add columns (b), (d), and (e)		0		1,563.	0.
13 Total. Add line 12, columns (b), (d), and (e)					1,563.
(See worksheet in line 13 instructions to verify calculations.)				
Part XVI-B Relationship of Activities		mplishment of E	xempt F	Purposes	
Line No Explain below how each activity for which in	ncome is reported in	column (e) of Part XVI	-A contribu	ted importantly to the accomp	plishment of
▼ the foundation's exempt purposes (other th					
			•	-	
					·
	• •				
					- <u>-</u>
		-		•	
					
	- · ·				
1					
				· · · · · · · · · · · · · · · · · · ·	
			<u>-</u>		
			· · · · · · · · · · · · · · · · · · ·		

		NS SUBS MA		BETTER				
		ATION, INC					3640866	Page 13
[Parti)	Information Re Exempt Organ		fers to a	nd Transactions ar	nd Relationsh	ips With Nonc	haritable	
(oth a Trar (1) (2) b Oth (1) (2) (3) (4) (5)	the organization directly or indi- er than section 501(c)(3) organ- insfers from the reporting found. Cash Other assets er transactions. Sales of assets to a noncharita Purchases of assets from a no Rental of facilities, equipment, Reimbursement arrangements Loans or loan guarantees	rectly engage in any on a control of the control of	n 527, relating le exempt org on ganization	g to political organizations? ganization of	on described in sect	ion 501(c)	1a(1) 1a(2) 1b(1) 1b(2) 1b(3) 1b(4) 1b(5)	Y X X X X X X X X X X X X X X X X X X X
(6)	Performance of services or me	mbership or fundraisi	ıng solıcıtatıo	ns			1b(6)	X
	ring of facilities, equipment, ma	• .		· -			1c	<u> </u>
or s	e answer to any of the above is ervices given by the reporting fi imn (d) the value of the goods,	oundation. If the found	dation receive					3,
(a) Line no		,		e exempt organization	(d) Committee	n of transfers, transaction	o and sharing arrang	
(a) Cine no	(b) Amount involved	(c) Name on	N/A	s exempt or gamzation	(t) Description	i oi vansiers, vansactioi	is, and sharing arrang	Jements
		 	IV/A		+			
		 			+			
	-	 						
		 						
								
		ļ						
						· · · · · · · · · · · · · · · · · · ·		
	-				+			
								
	 	 						
					-			
IN S	ne foundation directly or indirec ection 501(c) (other than sectio 'es," complete the following sch	on 501(c)(3)) or in sec		or more tax-exempt organi	zations described		Yes	X No
	(a) Name of org	janization		(b) Type of organization		(c) Description of re	lationship	
	N/A							
	•							
Sign Here	Under penalties of perjury, I declare the and belief, it is true, correct, and com-	nplete Declaration of prep			tion of which preparer h	as any knowledge	May the IRS dist return with the p shown below? S X Yes	reparer
	 	ame	Preparer's s		Date	Check 1	PTIN	
	\	1		In TA	-	self- employed		
Paid	MARKALAN T	SMITH,	M 7 / / //	NULLU XXIII	01/20/20	son employed	P000336	30
Prepa	CPA CPA	PD MITTY T	TRANAL	<u>AN T. SMITH</u> W KRAUSE, LLI		Firm's EIN ► 3		
Use C)	.ед тійі Уе.	A TYCUO	M VVVODE' TITE	-	FIRM S EIN - 3	J-003331	U

Firm's address ▶ 777 E WISCONSIN AVENUE, 32ND FLOOR

MILWAUKEE, WI 53202

Phone no. 414.777.5500 Form 990-PF (2019)

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

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

COUSINS SUBS MAKE IT BETTER 45-3640866 FOUNDATION, INC. Organization type (check one) Filers of: Section: Form 990 or 990-EZ 501(c)() (enter number) organization 4947(a)(1) nonexempt charitable trust not treated as a private foundation 527 political organization X 501(c)(3) exempt private foundation Form 990-PF 4947(a)(1) nonexempt charitable trust treated as a private foundation 501(c)(3) taxable private foundation Check if your organization is covered by the General Rule or a Special Rule. Note: Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule See instructions General Rule For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributors **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) filling 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 totaling \$5,000 or more during the year ▶ \$_ 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)

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

Name of organization

COUSINS SUBS MAKE IT BETTER

FOUNDATION, INC.

Employer identification number

45-3640866

Part I	Contributors (see instructions) Use duplicate copies of Part I if additional space is needed				
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution		
1	COUSINS SUBMARINES, INC. N83 W13400 LEON ROAD MENOMONEE FALLS, WI 53051	\$ 114,387.	Person X Payroll		
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution		
		\$	Person Payroll Oncash Complete Part II for noncash contributions)		
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution		
		\$	Person Payroll Oncash (Complete Part II for noncash contributions)		
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution		
		\$	Person Payroll Oncash Complete Part II for noncash contributions)		
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution		
		\$	Person Payroll Oncash 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)		

Name of organization
COUSINS SUBS MAKE IT BETTER
FOUNDATION, INC.

Employer identification number

45-3640866

Part II	Noncash Property (see instructions) Use duplicate copies of Part II if	addıtıonal space ıs 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
		\$	

Name of organization

Employer identification number

COUSINS SUBS MAKE IT BETTER

FOUND	ATION, INC.			45-3640866			
Part III	Exclusively religious, charitable, etc., contribution from any one contributor. Complete columns (a) t	brough (e) and the following line en	try For organizations	•			
	completing Part III, enter the total of exclusively religious, ch	aritable, etc., contributions of \$1,000 or	less for the year (Enterthis into onc	€) ► \$			
(a) No.	Use duplicate copies of Part III if additional sp	oace is fieeded					
from Part I	(b) Purpose of gift	(c) Use of gift	(d) Desc	ription of how gift is held			
		· · · · · · · · · · · · · · · · · · ·					
-			<u> </u>	-			
	(e) Transfer of gift						
	Transferee's name, address, and ZIP + 4		Relationship of tra	nsferor to transferee			
(a) No.		<u> </u>					
from Part I	(b) Purpose of gift	(c) Use of gift	(d) Desc	ription of how gift is held			
}	(a) Tunnel and a M						
		(e) Transfer of gif	•				
	Transferee's name, address, and ZIP + 4		Relationship of trai	Relationship of transferor to transferee			
							
(a) No.							
from Part I	(b) Purpose of gift	(c) Use of gift	(d) Desc	ription of how gift is held			
		<u></u>					
Ì	(e) Transfer of gift						
	(4),						
ļ	Transferee's name, address, and ZIP + 4		Relationship of trai	nsferor to transferee			
		 - 					
(a) No. from	415	(-) (4 4 4 4 4 4 4 4 4 4	(4) D	ription of how gift is held			
Part I	(b) Purpose of gift	(c) Use of gift	(u) Desc				
							
	•						
	(e) Transfer of gift						
	Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee				
1							

FORM 990-PF INTEREST ON SAVI	INGS AND TEM	PORARY CASH I	NVESTMENTS	STATEMENT 1
SOURCE	REVE	NUE NET I	E NET INVESTMENT	
INTEREST INCOME		1,563. 1,563.		
TOTAL TO PART I, LINE 3		1,563.	1,563.	
FORM 990-PF	ACCOUNTI	NG FEES		STATEMENT 2
DESCRIPTION	EXPENSES	(B) NET INVEST- MENT INCOME	ADJUSTED	CHARITABLE
PROFESSIONAL FEES	515.	258.		. 257.
TO FORM 990-PF, PG 1, LN 16B	515.	258.	-	257.
FORM 990-PF	TAX	ES		STATEMENT 3
DESCRIPTION	EXPENSES	(B) NET INVEST- MENT INCOME	ADJUSTED	CHARITABLE
EXCISE TAXES	17.	0.		0.
TO FORM 990-PF, PG 1, LN 18	17.	0.		0.
FORM 990-PF	OTHER E	XPENSES		STATEMENT 4
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME		
FILING FEES	20.	0.		20.
TO FORM 990-PF, PG 1, LN 23	20.	0.		20.

FORM 990-PF		SUBSTANTIAL CONTRIBUTORS RT VII-A, LINE 10	STATEMENT 5
NAME OF CONTRIBUTOR		ADDRESS	•
COUSINS SUBMARINES,	INC	N83 W13400 LEON ROAD MENOMONEE FALLS, WI 5305	51

	II - LIST OF OFFICERS, DIRECTORS TEES AND FOUNDATION MANAGERS			STATEMENT 6	
NAME AND ADDRESS	TITLE AND AVRG HRS/WK	COMPEN- SATION	EMPLOYEE BEN PLAN CONTRIB	EXPENSE	
CHRISTINE SPECHT N83 W13400 LEON ROAD MENOMONEE FALLS, WI 53051	PRESIDENT & SE	CRETARY 0.	0.	0.	
JASON WESTHOFF N83 W13400 LEON ROAD MENOMONEE FALLS, WI 53051	TREASURER 1.00	0.	0.	0.	
JUSTIN MCCOY N83 W13400 LEON ROAD MENOMONEE FALLS, WI 53051	DIRECTOR 0.10	0.	0.	0.	
JOE FERGUSON N83 W13400 LEON ROAD MENOMONEE FALLS, WI 53051	DIRECTOR 0.10	0.	0.	. 0.	
ALAN LUNDEEN N83 W13400 LEON ROAD MENOMONEE FALLS, WI 53051	DIRECTOR 0.10	0.	0.	0.	
J.J. GRUBE N83 W13400 LEON ROAD MENOMONEE FALLS, WI 53051	DIRECTOR 0.10	0.	0.	0.	
TOTALS INCLUDED ON 990-PF, PAGE	6, PART VIII	0.	0.	0.	