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OMB No 1545-0047

2019

Open to Public Inspection

Form 990-PF

Department of the Treasury
Internal Revenue ServiceReturn 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.

For calendar year 2019 or tax year beginning , 2019, and ending , 20

Name of foundation Robert and Jessie Whitmore Ch. Trust		A Employer identification number 81-6792560
Number and street (or P O box number if mail is not delivered to street address) 111 E. Kilbourn Ave	Room/suite 1400	B Telephone number (see instructions) (434) 434-3443
City or town, state or province, country, and ZIP or foreign postal code Milwaukee WI 53202		C If exemption application is pending, check here <input type="checkbox"/>
G Check all that apply: <input type="checkbox"/> Initial return <input type="checkbox"/> Final return <input type="checkbox"/> Address change <input type="checkbox"/> Initial return of a former public charity <input type="checkbox"/> Amended return <input type="checkbox"/> Name change		D 1. Foreign organizations, check here <input type="checkbox"/> 2. Foreign organizations meeting the 85% test, check here and attach computation <input type="checkbox"/>
H Check type of organization: <input checked="" type="checkbox"/> Section 501(c)(3) exempt private foundation <input type="checkbox"/> Section 4947(a)(1) nonexempt charitable trust <input type="checkbox"/> Other taxable private foundation		E If private foundation status was terminated under section 507(b)(1)(A), check here <input type="checkbox"/>
I Fair market value of all assets at end of year (from Part II, col. (c), line 16) \$ 1,009,109.	J Accounting method: <input checked="" type="checkbox"/> Cash <input type="checkbox"/> Accrual <input type="checkbox"/> Other (specify) _____ (Part I, column (d), must be on cash basis.)	F If the foundation is in a 60-month termination under section 507(b)(1)(B), check here <input type="checkbox"/>

Part I Analysis of Revenue and Expenses (The total 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	(d) Disbursements for charitable purposes (cash basis only)
Revenue	1 Contributions, gifts, grants, etc., received (attach schedule)				
	2 Check <input checked="" type="checkbox"/> if the foundation is not required to attach Sch. B				
	3 Interest on savings and temporary cash investments				
	4 Dividends and interest from securities	21,247.	21,247.		
	5a Gross rents				
	b Net rental income or (loss)				
	6a Net gain or (loss) from sale of assets not on line 10	3,315.			
	b Gross sales price for all assets on line 6a 157,088.		L-6a Stmt		
	7 Capital gain net income (from Part IV, line 2)		3,315.		
	8 Net short-term capital gain				
	9 Income modifications				
	10a Gross sales less returns and allowances				
b Less: Cost of goods sold					
c Gross profit or (loss) (attach schedule)					
11 Other income (attach schedule) See Stmt	40,894.	40,894.			
12 Total. Add lines 1 through 11	65,456.	65,456.			
Operating and Administrative Expenses	13 Compensation of officers, directors, trustees, etc.	10,822.	10,822.		
	14 Other employee salaries and wages				
	15 Pension plans, employee benefits				
	16a Legal fees (attach schedule)				
	b Accounting fees (attach schedule)	1,600.	1,600.		
	c Other professional fees (attach schedule)				
	17 Interest				
	18 Taxes (attach schedule) (see instructions) See Stmt	532.	0.		
	19 Depreciation (attach schedule) and depletion				
	20 Occupancy				
	21 Travel, conferences, and meetings				
	22 Printing and publications				
	23 Other expenses (attach schedule) See Stmt	2,200.	2,200.		
	24 Total operating and administrative expenses. Add lines 13 through 23	15,154.	14,622.		
	25 Contributions, gifts, grants paid	50,578.			50,578.
26 Total expenses and disbursements. Add lines 24 and 25	65,732.	14,622.		50,578.	
27 Subtract line 26 from line 12					
a Excess of revenue over expenses and disbursements	-276.				
b Net investment income (if negative, enter -0-)		50,834.			
c Adjusted net income (if negative, enter -0-)					

For Paperwork Reduction Act Notice, see instructions.

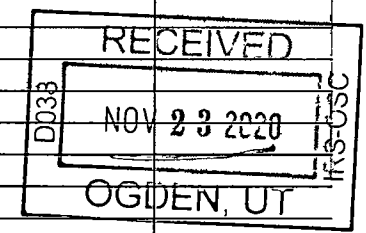
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Form 990-PF (2019)

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Part II Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only. (See instructions.)		Beginning of year	End of year	
		(a) Book Value	(b) Book Value	(c) Fair Market Value
Assets	1 Cash—non-interest-bearing	41,439.	36,377.	36,377.
	2 Savings and temporary cash investments			
	3 Accounts receivable ▶ Less: allowance for doubtful accounts ▶			
	4 Pledges receivable ▶ Less: allowance for doubtful accounts ▶			
	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 ▶	3,240.		
	8 Inventories for sale or use			
	9 Prepaid expenses and deferred charges			
	10a Investments—U.S. and state government obligations (attach schedule) L-10a Stmt	154,076.	155,030.	160,126.
	b Investments—corporate stock (attach schedule) L-10b Stmt	762,076.	758,337.	812,606.
	c Investments—corporate bonds (attach schedule)			
	11 Investments—land, buildings, and equipment: basis ▶ Less: accumulated depreciation (attach schedule) ▶			
	12 Investments—mortgage loans			
	13 Investments—other (attach schedule)			
	14 Land, buildings, and equipment: basis ▶ Less: accumulated depreciation (attach schedule) ▶			
	15 Other assets (describe ▶)			
	16 Total assets (to be completed by all filers—see the instructions. Also, see page 1, item I)	960,831.	949,744.	1,009,109.
Liabilities	17 Accounts payable and accrued expenses			
	18 Grants payable			
	19 Deferred revenue			
	20 Loans from officers, directors, trustees, and other disqualified persons			
	21 Mortgages and other notes payable (attach schedule) . . .			
	22 Other liabilities (describe ▶)			
	23 Total liabilities (add lines 17 through 22)			
Net Assets or Fund Balances	Foundations that follow FASB ASC 958, check here ▶ <input type="checkbox"/> and complete lines 24, 25, 29, and 30.			
	24 Net assets without donor restrictions			
	25 Net assets with donor restrictions			
	Foundations that do not follow FASB ASC 958, check here ▶ <input checked="" type="checkbox"/> and complete lines 26 through 30.			
	26 Capital stock, trust principal, or current funds	960,831.	949,744.	
	27 Paid-in or capital surplus, or land, bldg., and equipment fund			
	28 Retained earnings, accumulated income, endowment, or other funds			
	29 Total net assets or fund balances (see instructions) . . .	960,831.	949,744.	
	30 Total liabilities and net assets/fund balances (see instructions)	960,831.	949,744.	

Part III Analysis of Changes in Net Assets or Fund Balances

1 Total net assets or fund balances at beginning of year—Part II, column (a), line 29 (must agree with end-of-year figure reported on prior year's return)	1	960,831.
2 Enter amount from Part I, line 27a	2	-276.
3 Other increases not included in line 2 (itemize) ▶ <u>Adjust CG for rounding</u>	3	43.
4 Add lines 1, 2, and 3	4	960,598.
5 Decreases not included in line 2 (itemize) ▶ <u>Broker Fees</u>	5	10,854.
6 Total net assets or fund balances at end of year (line 4 minus line 5)—Part II, column (b), line 29 . .	6	949,744.

Part IV Capital Gains and Losses for Tax on Investment Income

(a) List and describe the kind(s) of property sold (for example, real estate, 2-story brick warehouse, 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				
c				
d				
e				
(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale	(h) Gain or (loss) ((e) plus (f) minus (g))	
a				
b				
c				
d				
e				
Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69.				
(i) FMV as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col (i) over col (j), if any	(l) Gains (Col (h) gain minus col (k), but not less than -0-) or Losses (from col (h))	
a				
b				
c				
d				
e				
2 Capital gain net income or (net capital loss)	<div style="display: flex; align-items: center;"> <div style="border-left: 1px solid black; border-right: 1px solid black; padding: 0 5px;"> If gain, also enter in Part I, line 7 If (loss), enter -0- in Part I, line 7 </div> </div>		2	
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). See instructions. If (loss), enter -0- in Part I, line 8			3	

Part V 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.

Was the foundation liable for the section 4942 tax on the distributable amount of any year in the base period?

☐ Yes ☒ No

If "Yes," the foundation doesn't qualify under section 4940(e). Do not complete this part.

1 Enter the appropriate amount in each column for each year; see the instructions before making any entries.			
(a) Base period years Calendar year (or tax year beginning in)	(b) Adjusted qualifying distributions	(c) Net value of noncharitable-use assets	(d) Distribution ratio (col (b) divided by col (c))
2018	51,146.	996,206.	0.051341
2017	0.	0.	0.000000
2016			
2015			
2014			
2 Total of line 1, column (d)			2 0.051341
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 the foundation has been in existence if less than 5 years			3 0.025671
4 Enter the net value of noncharitable-use assets for 2019 from Part X, line 5			4 982,539.
5 Multiply line 4 by line 3			5 25,223.
6 Enter 1% of net investment income (1% of Part I, line 27b)			6 508.
7 Add lines 5 and 6			7 25,731.
8 Enter qualifying distributions from Part XII, line 4			8 50,578.

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. See the Part VI instructions.

Part VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948—see instructions)

1a	Exempt operating foundations described in section 4940(d)(2), check here <input type="checkbox"/> and enter "N/A" on line 1. Date of ruling or determination letter. (attach copy of letter if necessary—see instructions)		
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check here <input checked="" type="checkbox"/> and enter 1% of Part I, line 27b	1	508.
c	All other domestic foundations enter 2% of line 27b. Exempt foreign organizations, enter 4% of Part I, line 12, col. (b)		
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only; others, enter -0-)	2	0.
3	Add lines 1 and 2	3	508.
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only; others, enter -0-)	4	0.
5	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-	5	508.
6	Credits/Payments:		
a	2019 estimated tax payments and 2018 overpayment credited to 2019	6a	
b	Exempt foreign organizations—tax withheld at source	6b	
c	Tax paid with application for extension of time to file (Form 8868)	6c	
d	Backup withholding erroneously withheld	6d	
7	Total credits and payments. Add lines 6a through 6d	7	
8	Enter any penalty for underpayment of estimated tax. Check here <input checked="" type="checkbox"/> if Form 2220 is attached	8	23.
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed	9	531.
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid	10	0.
11	Enter the amount of line 10 to be. Credited to 2020 estimated tax Refunded	11	

Part VII-A Statements Regarding Activities

	Yes	No
1a During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any political campaign?		<input checked="" type="checkbox"/>
b Did it spend more than \$100 during the year (either directly or indirectly) for political purposes? See the instructions for the definition		<input checked="" type="checkbox"/>
If the answer is "Yes" to 1a or 1b , attach a detailed description of the activities and copies of any materials published or distributed by the foundation in connection with the activities.		
c Did the foundation file Form 1120-POL for this year?		<input checked="" type="checkbox"/>
d Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year. (1) On the foundation. ▶ \$ (2) On foundation managers. ▶ \$		
e Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers. ▶ \$		
2 Has the foundation engaged in any activities that have not previously been reported to the IRS? If "Yes," attach a detailed description of the activities.		<input checked="" type="checkbox"/>
3 Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes.		<input checked="" type="checkbox"/>
4a Did the foundation have unrelated business gross income of \$1,000 or more during the year?		<input checked="" type="checkbox"/>
b If "Yes," has it filed a tax return on Form 990-T for this year?		
5 Was there a liquidation, termination, dissolution, or substantial contraction during the year? If "Yes," attach the statement required by <i>General Instruction T</i> .		<input checked="" type="checkbox"/>
6 Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either: • By language in the governing instrument, or • By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state law remain in the governing instrument?	<input checked="" type="checkbox"/>	
7 Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col. (c), and Part XV	<input checked="" type="checkbox"/>	
8a Enter the states to which the foundation reports or with which it is registered. See instructions. ▶ WI		
b If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate) of each state as required by <i>General Instruction G</i> ? If "No," attach explanation	<input checked="" type="checkbox"/>	
9 Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for calendar year 2019 or the tax year beginning in 2019? See the instructions for Part XIV. If "Yes," complete Part XIV		<input checked="" type="checkbox"/>
10 Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses		<input checked="" type="checkbox"/>

Part VII-A Statements Regarding Activities (continued)

	Yes	No
11 At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of section 512(b)(13)? If "Yes," attach schedule. See instructions	11	<input checked="" type="checkbox"/>
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	<input checked="" type="checkbox"/>
13 Did the foundation comply with the public inspection requirements for its annual returns and exemption application? Website address ▶ N/A	13	<input checked="" type="checkbox"/>
14 The books are in care of ▶ Allen M. Salomon Telephone no. ▶ (414) 225-1407 Located at ▶ 1111 E. Kilbourn Milwaukee WI ZIP+4 ▶ 53202		
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 ▶ 15		<input type="checkbox"/>
16 At any time during calendar year 2019, did the foundation have an interest in or a signature or other authority over a bank, securities, or other financial account in a foreign country? See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes," enter the name of the foreign country ▶	16	<input checked="" type="checkbox"/>

Part VII-B Statements Regarding Activities for Which Form 4720 May Be Required**File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.**

	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? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No (2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No (3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No (4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No (5) Transfer any income or assets to a disqualified person (or make any of either available for the benefit or use of a disqualified person)? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No (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.) <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
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 Organizations relying on a current notice regarding disaster assistance, check here ▶ <input type="checkbox"/>	1b	<input type="checkbox"/>
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 before the first day of the tax year beginning in 2019?	1c	<input checked="" type="checkbox"/>
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)):		
a 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? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If "Yes," list the years ▶ 20____, 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	<input checked="" type="checkbox"/>
c If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here. ▶ 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? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
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	
4a Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a	<input checked="" type="checkbox"/>
b Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2019?	4b	<input checked="" type="checkbox"/>

Part VII-B Statements Regarding Activities for Which Form 4720 May Be Required (continued)

5a During the year, did the foundation pay or incur any amount to:

(1) Carry on propaganda, or otherwise attempt to influence legislation (section 4945(e))? ☐ Yes ☒ No

(2) Influence the outcome of any specific public election (see section 4955); or to carry on, directly or indirectly, any voter registration drive? ☐ Yes ☒ No

(3) Provide a grant to an individual for travel, study, or other similar purposes? ☐ Yes ☒ No

(4) Provide a grant to an organization other than a charitable, etc., organization described in section 4945(d)(4)(A)? See instructions ☐ Yes ☒ No

(5) Provide for any purpose other than religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals? ☐ Yes ☒ No

b If any answer is "Yes" to 5a(1)–(5), did **any** of the transactions fail to qualify under the exceptions described in Regulations section 53.4945 or in a current notice regarding disaster assistance? See instructions ☐ Yes ☒ No

Organizations relying on a current notice regarding disaster assistance, check here ☐ **5b**

c If the answer is "Yes" to question 5a(4), does the foundation claim exemption from the tax because it maintained expenditure responsibility for the grant? ☐ Yes ☐ No

If "Yes," attach the statement required by Regulations section 53.4945-5(d).

6a Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? ☐ Yes ☒ No

b Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract? ☐ Yes ☒ No

If "Yes" to 6b, file Form 8870. **6b** ☒

7a At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction? ☐ Yes ☒ No

b If "Yes," did the foundation receive any proceeds or have any net income attributable to the transaction? **7b** ☐

8 Is the foundation subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or excess parachute payment(s) during the year? ☐ Yes ☐ No

Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors**1 List all officers, directors, trustees, and foundation managers and their compensation. See instructions.**

(a) Name and address	(b) Title, and average hours per week devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
Allen M. Salomon 111 E. Kilbourn #1400 Milwaukee WI 53202	Trustee 5.00	10,822.	0.	0.

2 Compensation of five highest-paid employees (other than those included on line 1—see instructions). If none, enter "NONE."

(a) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
N/A				

Total number of other employees paid over \$50,000 ☐ 0

Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors *(continued)***3 Five highest-paid independent contractors for professional services. See instructions. If none, enter "NONE."**

(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
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 relevant statistical information such as the number of organizations and other beneficiaries served, conferences convened, research papers produced, etc.

	Expenses
1	
2	
3	
4	

Part IX-B 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
1	
2	
All other program-related investments. See instructions.	
3	
Total. Add lines 1 through 3	

Part X Minimum Investment Return (All domestic foundations must complete this part. Foreign foundations, see instructions.)

1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes.		
a	Average monthly fair market value of securities	1a	964,257.
b	Average of monthly cash balances	1b	33,245.
c	Fair market value of all other assets (see instructions)	1c	0.
d	Total (add lines 1a, b, and c)	1d	997,502.
e	Reduction claimed for blockage or other factors reported on lines 1a and 1c (attach detailed explanation).	1e	
2	Acquisition indebtedness applicable to line 1 assets	2	0.
3	Subtract line 2 from line 1d	3	997,502.
4	Cash deemed held for charitable activities. Enter 1½% of line 3 (for greater amount, see instructions)	4	14,963.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	982,539.
6	Minimum investment return. Enter 5% of line 5	6	49,127.

Part XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations and certain foreign organizations, check here ☐ and do not complete this part.)

1	Minimum investment return from Part X, line 6	1	49,127.
2a	Tax on investment income for 2019 from Part VI, line 5	2a	508.
b	Income tax for 2019. (This does not include the tax from Part VI.)	2b	
c	Add lines 2a and 2b	2c	508.
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	48,619.
4	Recoveries of amounts treated as qualifying distributions	4	
5	Add lines 3 and 4	5	48,619.
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	48,619.

Part 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	50,578.
b	Program-related investments—total from Part IX-B	1b	
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes	2	
3	Amounts set aside for specific charitable projects that satisfy the:		
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	50,578.
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income. Enter 1% of Part I, line 27b. See instructions	5	508.
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	50,070.

Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation qualifies for the section 4940(e) reduction of tax in those years.

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				48,619.
2 Undistributed income, if any, as of the end of 2019:				
a Enter amount for 2018 only				
b Total for prior years. 20____, 20____, 20____				
3 Excess distributions carryover, if any, to 2019:				
a From 2014	0.			
b From 2015	0.			
c From 2016	0.			
d From 2017	0.			
e From 2018	2,400.			
f Total of lines 3a through e	2,400.			
4 Qualifying distributions for 2019 from Part XII, line 4: ► \$ 50,578.				
a Applied to 2018, but not more than line 2a				
b Applied to undistributed income of prior years (Election required—see instructions)				
c Treated as distributions out of corpus (Election required—see instructions)				
d Applied to 2019 distributable amount				48,619.
e Remaining amount distributed out of corpus	1,959.			
5 Excess distributions carryover applied to 2019 (If an amount appears in column (d), the same amount must be shown in column (a).)				
6 Enter the net total of each column as indicated below:				
a Corpus. Add lines 3f, 4c, and 4e. Subtract line 5	4,359.			
b Prior years' undistributed income. Subtract 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 instructions			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 (see instructions)	0.			
9 Excess distributions carryover to 2020. Subtract lines 7 and 8 from line 6a	4,359.			
10 Analysis of line 9:				
a Excess from 2015	0.			
b Excess from 2016	0.			
c Excess from 2017	0.			
d Excess from 2018	2,400.			
e Excess from 2019	1,959.			

Part XIV Private Operating Foundations (see instructions and Part VII-A, question 9)

N/A

1a 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 ▶

b Check box to indicate whether the foundation is a private operating foundation described in section ☐ 4942(j)(3) or ☐ 4942(j)(5)

2a Enter the lesser of the adjusted net income from Part I or the minimum investment return from Part X for each year listed

Tax year	Prior 3 years			(e) Total
(a) 2019	(b) 2018	(c) 2017	(d) 2016	
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				
3 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				

Part XV Supplementary Information (Complete this part only if the foundation had \$5,000 or more in assets at any time during the year—see instructions.)**1 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).)

N/A

- 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.

N/A

2 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. See instructions.

- a** The name, address, and telephone number or email address of the person to whom applications should be addressed:

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

- c** Any submission deadlines:

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

Part XV Supplementary Information (continued)**3 Grants and Contributions Paid During the Year or Approved for Future Payment**

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
a Paid during the year				
Milwaukee Symphony Orchestra 1101 N. Market Street, Suite 101 Milwaukee WI 53202		501c3	general expense	9,196.
Milwaukee Public Museum 800 W. Wells Street Milwaukee WI 53202		501c3	general expense	9,196.
Milwaukee Art Museum 700 N. Art Musuem Drive Milwaukee WI 53202		501c3	general expense	9,196.
American Heart Ass'n need address Milwaukee WI 53202		501c3	research	9,196.
American Cancer Society PO Box 720366 Oklahoma City OK 73172		501c3	research	9,196.
Congregational Home 13900 W. Burleigh Road Brookfield WI 53005		501c3	community services	4,598.
Total			3a	50,578.
b Approved for future payment				
None				
Total			3b	0.

Enter gross amounts unless otherwise indicated.

Enter gross amounts unless otherwise indicated.		Unrelated business income		Excluded by section 512, 513, or 514		(e) Related or exempt function income (See instructions.)
		(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	
1	Program service revenue:					
a						
b						
c						
d						
e						
f						
g	Fees and contracts from government agencies					
2	Membership dues and assessments					
3	Interest on savings and temporary cash investments					
4	Dividends and interest from securities	900001	21,247.			
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 inventory	900001	26.			3,289.
9	Net income or (loss) from special events					
10	Gross profit or (loss) from sales of inventory					
11	Other revenue: a					
b						
c						
d						
e						
12	Subtotal. Add columns (b), (d), and (e)		21,273.			3,289.
13	Total. Add line 12, columns (b), (d), and (e)				13	24,562.

(See worksheet in line 13 instructions to verify calculations.)

Part XVI-B Relationship of Activities to the Accomplishment of Exempt Purposes[illegible]

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

		Yes	No
1	Did the organization directly or indirectly engage in any of the following with any other organization described in section 501(c) (other than section 501(c)(3) organizations) or in section 527, relating to political organizations?		
a	Transfers from the reporting foundation to a noncharitable exempt organization of:		
	(1) Cash	1a(1)	x
	(2) Other assets	1a(2)	x
b	Other transactions:		
	(1) Sales of assets to a noncharitable exempt organization	1b(1)	x
	(2) Purchases of assets from a noncharitable exempt organization	1b(2)	x
	(3) Rental of facilities, equipment, or other assets	1b(3)	x
	(4) Reimbursement arrangements	1b(4)	x
	(5) Loans or loan guarantees	1b(5)	x
	(6) Performance of services or membership or fundraising solicitations	1b(6)	x
c	Sharing of facilities, equipment, mailing lists, other assets, or paid employees	1c	x
d	If the answer to any of the above is "Yes," complete the following schedule. Column (b) should always show the fair market value of the goods, other assets, or services given by the reporting foundation. If the foundation received less than fair market value in any transaction or sharing arrangement, show in column (d) the value of the goods, other assets, or services received.		

[illegible]

2a Is the foundation directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described in section 501(c) (other than section 501(c)(3)) or in section 527? ☐ Yes ☒ No

b If "Yes," complete the following schedule.

(a) Name of organization	(b) Type of organization	(c) Description of relationship

Sign Here Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge.

Signature of officer or trustee: [Signature] Date: 11/13/20 Title: Trustee

May the IRS discuss this return with the preparer shown below? See instructions ☐ Yes ☒ No

Paid Preparer Use Only	Print/Type preparer's name	Preparer's signature	Date	Check <input type="checkbox"/> if self-employed	PTIN
	Allen M. Salomon	<i>Allen M. Salomon</i>	11/13/20		P01460965
	Firm's name ▶ Davis & Kuelthau sc			Firm's EIN ▶ 39-1132468	
	Firm's address ▶ 111 E Kilbourn Ave Ste 1400			Phone no. (414) 225-1407	

Additional information from your Form 990-PF: Return of Private Foundation

Form 990-PF: Return of Private Foundation

Other Income

Continuation Statement

Description	Revenue and Expense per Book	Net Investment Income	Adjusted Net Income
Accretion of Interest	999.	999.	
CG Distributions	35,010.	35,010.	
Overpayment rec'd	4,885.	4,885.	
Total	40,894.	40,894.	

Form 990-PF: Return of Private Foundation

Taxes

Continuation Statement

Description	Revenue and Expense per Book	Net Investment Income	Adjusted Net Income	Disbursement for charitable purpose
Prior year 990PF	532.	0.		
Total	532.	0.		

Form 990-PF: Return of Private Foundation

Other Expenses

Continuation Statement

Description	Revenue and Expense per Book	Net Investment Income	Adjusted Net Income	Disbursement for charitable purpose
Amortization of Premium	2,200.	2,200.		
Total	2,200.	2,200.		

Name Robert and Jessie Whitmore Ch. Trust	Employer Identification No 81-6792560
--	--

Asset Information:

Description of Property Goldman FSQ Prime
 Business Code _____ Exclusion Code _____
 Date Acquired various How Acquired . . . Purchased
 Date Sold 12/11/19 Name of Buyer . . . _____
 Check Box, if Buyer is a Business . . . ☒
 Sales Price 30,000 Cost or other basis (do not reduce by depreciation). 30,005
 Sales Expense _____ Valuation Method _____
 Total Gain (Loss) -5 Accumulated Depreciation _____

Description of Property 12000_shs Allstate
 Business Code _____ Exclusion Code _____
 Date Acquired various How Acquired . . . Purchased
 Date Sold 05/20/19 Name of Buyer . . . _____
 Check Box, if Buyer is a Business . . . ☒
 Sales Price 12,000 Cost or other basis (do not reduce by depreciation). 12,000
 Sales Expense _____ Valuation Method _____
 Total Gain (Loss) 0 Accumulated Depreciation _____

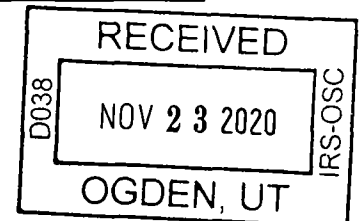
Description of Property 2000_shs American Express
 Business Code _____ Exclusion Code _____
 Date Acquired various How Acquired . . . Purchased
 Date Sold 05/20/19 Name of Buyer . . . _____
 Check Box, if Buyer is a Business . . . ☒
 Sales Price 2,000 Cost or other basis (do not reduce by depreciation). 2,000
 Sales Expense _____ Valuation Method _____
 Total Gain (Loss) 0 Accumulated Depreciation _____

Description of Property 11000 Bank of NY Mellon
 Business Code _____ Exclusion Code _____
 Date Acquired various How Acquired . . . Purchased
 Date Sold 05/15/19 Name of Buyer . . . _____
 Check Box, if Buyer is a Business . . . ☒
 Sales Price 11,000 Cost or other basis (do not reduce by depreciation). 11,000
 Sales Expense _____ Valuation Method _____
 Total Gain (Loss) 0 Accumulated Depreciation _____

Description of Property See Net Gain or Loss from Sale of Assets
 Business Code _____ Exclusion Code _____
 Date Acquired _____ How Acquired . . . _____
 Date Sold _____ Name of Buyer . . . _____
 Check Box, if Buyer is a Business . . . ☐
 Sales Price _____ Cost or other basis (do not reduce by depreciation). _____
 Sales Expense _____ Valuation Method _____
 Total Gain (Loss) _____ Accumulated Depreciation _____

Totals:

Total Gain (Loss) of all assets 3,315
 Gross Sales Price of all assets 157,088
 Unrelated Business Income 26 Business Code _____
 Excluded by section 512, 513, 514 _____ Exclusion Code _____
 Related/Exempt Function Income 3,289



QuickZoom here to Form 990-PF, Page 1 ►
 QuickZoom here to Form 990-PF, Page 12 ►

Additional information from your Form 990-PF Part I Line 6a Net Gain or Loss From Sale of Assets

Form 990-PF Part I Line 6a Net Gain or Loss From Sale of Assets

Net Gain or Loss from Sale of Assets

Continuation Statement

Description of Property	Bu sin es s Co de	Excl usio n Cod e	Dat e Acq uire d	How Acquired	Dat e Sol d	Name of Buyer	B u y e r a B u s i n e s s	Sale s Pric e	Cost or other basis	Sale s Exp ense	Valuation Method	Total Gain or Loss	Accu mulat ed Depre ciatio n
3000 shs BB&T			various	Purchased	12/16/19		X	3,000	3,000			0.	
10000 BB&T Corp			various	Purchased	02/01/19		X	10,000	10,000			0.	
2000 Berkshire Hathaway			various	Purchased	08/14/19		X	2,000	2,000			0.	
2328.13 Centerpoint Energy Trans			various	Purchased	02/15/19		X	2,328	2,506			-178.	
1877.56 shs Centerpoint Energy			various	Purchased			X	1,878	2,006			-128.	
7000 shs Chase Issuance Trust			various	Purchased	08/15/19		X	7,000	6,880			120.	
11000 shs Consolidated Edison			various	Purchased	04/01/19		X	11,000	11,000			0.	
15.83 Federal Home Loan Mtg Gold Pool			various	Purchased	01/31/19		X	16.	3.			13.	
15.83 Fed. Home Loan Mtg Gold Pool			various	Purchased	03/15/19		X	16.	3.			13.	
14.67 Fed. Home Loan Mtg Gold Pool			various	Purchased	04/15/19		X	15.	2.			13.	
23.43 Federal Home Loan Mtg Gold Pool			various	Purchased	05/15/19		X	23.	4.			19.	
16.39 Fed. Home Loan Mtg Gold Pool			various	Purchased	06/15/19		X	16.	3.			13.	
28.53 Fed. Home Loan Mtg Gold Pool			various	Purchased	07/15/19		X	29.	5.			24.	
13.72 Fed Home Loan Mtg Gold Pool			various	Purchased	08/15/19		X	14.	2.			12.	

Form 990-PF Part I Line 6a Net Gain or Loss From Sale of Assets

Net Gain or Loss from Sale of Assets

Continuation Statement

Description of Property	Business Code	Exclusion Code	Date Acquired	How Acquired	Date Sold	Name of Buyer	Buyer a Business	Sale Price	Cost or other basis	Sale Expense	Valuation Method	Total Gain or Loss	Accumulated Depreciation
9.86 shs Fed Home Loan Mtg Gold Pool			various	Purchased	09/15/19		X	10.	2.			8.	
10.1 shs Fed Home Loan Mtg Gold Pool			various	Purchased	10/15/19		X	10.	2.			8.	
14.73 shs Fed Home Loan Mtg Gold Pool			various	Purchased	11/15/19		X	15.	2.			13.	
9.85 shs Fed Home Loan Mtg Gold Pool			various	Purchased	12/15/19		X	10.	2.			8.	
12.53 Fed Home Loan Mtg Gold Pool			various	Purchased	12/31/19		X	13.	2.			11.	
98 shs Fed Home Loan Mtg Gold Pool			various	Purchased	01/31/19		X	98.	79.			19.	
102.38 shs Fed Home Loan Mtg Gold Pool			various	Purchased	03/15/19		X	102.	83.			19.	
111.63 Fed Home Loan Mtg Gold Pool			various	Purchased	04/15/19		X	112.	90.			22.	
143.19 shs Fed Home Loan Mtg Gold Pool			various	Purchased	05/15/19		X	143.	116.			27.	
124.86 shs Fed Home Loan Mtg Gold Pool			various	Purchased	06/15/19		X	125.	101.			24.	
125.47 shs Fed Home Loan Mtg Gold Pool			various	Purchased	07/15/19		X	125.	102.			23.	
148.46 shs Fed Home Loan Mtg Gold Pool			various	Purchased	08/15/19		X	148.	120.			28.	
146.04 Fed Home Loan Mtg Gold Pool			various	Purchased	09/15/19		X	146.	118.			28.	
127.05 Fed Home Loan Mtg Gold Pool			various	Purchased	10/15/19		X	127.	103.			24.	

Form 990-PF Part I Line 6a Net Gain or Loss From Sale of Assets

Net Gain or Loss from Sale of Assets

Continuation Statement

Description of Property	Business Code	Exclusion Code	Date Acquired	How Acquired	Date Sold	Name of Buyer	Buyer a Business	Sale Price	Cost or other basis	Sale Expense	Valuation Method	Total Gain or Loss	Accumulated Depreciation
143.98 Fed Home Loan Mtg Gold Pool			various	Purchased	11/15/19		X	144.	117.			27.	
137.84 shs Fed Home Loan Mtg Gold Pool			various	Purchased	12/15/19		X	138.	116.			22.	
125.14 shs Fed Home Loan Mtg Gold Pool			various	Purchased	12/31/19		X	125.	101.			24.	
93.17 shs Fed Home Loan Mtg Gold Pool			various	Purchased	01/31/19		X	93.	83.			10.	
86.84 shs Fed Home Loan Mtg Gold Pool			various	Purchased	03/15/19		X	87.	78.			9.	
109.09 shs Fed Home Loan Mtg Gold Pool			various	Purchased	04/15/19		X	109.	97.			12.	
98.14 shs Fed Home Loan Mtg Gold Pool			various	Purchased	05/15/19		X	98.	88.			10.	
140.86 shs Fed Home Loan Mtg Gold Pool			various	Purchased	06/15/19		X	141.	126.			15.	
93.16 shs Fed Home Loan Mtg Gold Pool			various	Purchased	07/15/19		X	93.	83.			10.	
115.6 shs Fed Home Loan Mtg Gold Pool			various	Purchased	08/15/19		X	115.	103.			12.	
122.07 shs Fed Home Loan Mtg Gold Pool			various	Purchased	09/15/19		X	122.	109.			13.	
109.93 shs Fed Home Loan Mtg Gold Pool			various	Purchased	10/15/19		X	110.	98.			12.	
109.41 shs Fed Home Loan Mtg Gold Pool			various	Purchased	11/15/19		X	109.	98.			11.	
98.78 shs Fed Home Loan Mtg Gold Pool			various	Purchased	12/15/19		X	99.	88.			11.	

Form 990-PF Part I Line 6a Net Gain or Loss From Sale of Assets

Net Gain or Loss from Sale of Assets

Continuation Statement

Description of Property	Business Code	Exclusion Code	Date Acquired	How Acquired	Date Sold	Name of Buyer	Buyer a Business	Sale Price	Cost or other basis	Sale Expense	Valuation Method	Total Gain or Loss	Accumulated Depreciation
104.91 shs Fed Home Loan Mtg Gold Pool			various	Purchased	12/31/19		X	105.	94.			11.	
18.35 Fed Nat'l Mtg Ass'n Pool			various	Purchased	01/31/19		X	18.	2.			16.	
25.2 Fed Nat'l Mtg Ass'n Pool			various	Purchased	03/25/19		X	25.	3.			22.	
19.99 shs Fed Nat'l Mtg Ass'n Pool			various	Purchased	04/25/19		X	20.	3.			17.	
23 shs Fed Nat'l Mtg Ass'n Pool			various	Purchased	05/28/19		X	23.	3.			20.	
18.78 shs Fed Nat'l Mtg Ass'n Pool			various	Purchased	06/25/19		X	19.	2.			17.	
18.6 shs Fed Nat'l Mtg Ass'n Pool			various	Purchased	07/25/19		X	19.	2.			17.	
25.79 shs Fed Nat'l Mtg Ass'n Pool			various	Purchased	08/26/19		X	26.	3.			23.	
18.07 shs Fed Nat'l Mtg Ass'n Pool			various	Purchased	09/25/19		X	18.	2.			16.	
16.43 shs Fed Nat'l Mtg Ass'n Pool			various	Purchased	10/25/19		X	16.	2.			14.	
18.2 shs Fed Nat'l Mtg Ass'n Pool			various	Purchased	11/25/19		X	18.	2.			16.	
22.21 shs Fed Nat'l Mtg Ass'n Pool			various	Purchased	12/26/19		X	24.	3.			21.	
31.89 shs Fed Nat'l Mtg Ass'n Pool			various	Purchased	01/31/19		X	32.	6.			26.	
32.1 shs Fed Nat'l Mtg Ass'n Pool			various	Purchased	03/25/19		X	32.	6.			26.	
30.95 shs Fed Nat'l Mtg Ass'n Pool			various	Purchased	04/25/19		X	31.	6.			25.	

Form 990-PF Part I Line 6a Net Gain or Loss From Sale of Assets

Net Gain or Loss from Sale of Assets

Continuation Statement

Description of Property	Business Code	Exclusion Code	Date Acquired	How Acquired	Date Sold	Name of Buyer	Buyer a Business	Sale Price	Cost or other basis	Sale Expense	Valuation Method	Total Gain or Loss	Accumulated Depreciation
31.21 shs Fed Nat'l Mtg Ass'n Pool			various	Purchased	05/28/19		X	31.	6.			25.	
31.71 shs Fed Nat'l Mtg Ass'n Pool			various	Purchased	06/25/19		X	32.	6.			26.	
32.39 shs Fed Nat'l Mtg Ass'n Pool			various	Purchased	07/25/19		X	32.	6.			26.	
34.07 shs Fed Nat'l Mtg Ass'n Pool			various	Purchased	08/26/19		X	34.	7.			27.	
30.38 shs Fed Nat'l Mtg Ass'n Pool			various	Purchased	09/25/19		X	30.	6.			24.	
30.03 shs Fed Nat'l Mtg Ass'n Pool			various	Purchased	10/25/19		X	30.	6.			24.	
29.47 shs Fed Nat'l Mtg Ass'n Pool			various	Purchased	11/25/19		X	29.	6.			23.	
28.99 shs Fed Nat'l Mtg Ass'n Pool			various	Purchased	12/26/19		X	29.	6.			23.	
29.81 shs Fed Nat'l Mtg Ass'n Pool			various	Purchased	12/31/19		X	30.	6.			24.	
47.42 shs Fed Nat'l Mtg Ass'n Pool			various	Purchased	01/31/19		X	47.	12.			35.	
38.49 shs Fed Nat'l Mtg Ass'n Pool			various	Purchased	03/25/19		X	38.	9.			29.	
46.38 shs Fed Nat'l Mtg Ass'n Pool			various	Purchased	04/25/19		X	46.	11.			35.	
43.86 shs Fed Nat'l Mtg Ass'n Pool			various	Purchased	05/28/19		X	44.	11.			33.	
49.03 shs Fed Nat'l Mtg Ass'n Pool			various	Purchased	06/25/19		X	49.	12.			37.	

Form 990-PF Part I Line 6a Net Gain or Loss From Sale of Assets

Net Gain or Loss from Sale of Assets

Continuation Statement

Description of Property	Business Code	Exclusion Code	Date Acquired	How Acquired	Date Sold	Name of Buyer	Buyer a Business	Sale Price	Cost or other basis	Sale Expense	Valuation Method	Total Gain or Loss	Accumulated Depreciation
43.76 shs Fed Nat'l Mtg Ass'n Pool			various	Purchased	07/25/19		X	44.	11.			33.	
47.62 shs Fed Nat'l Mtg Ass'n Pool			various	Purchased	08/26/19		X	48.	12.			36.	
45.33 shs Fed Nat'l Mtg Ass'n Pool			various	Purchased	09/25/19		X	45.	11.			34.	
47.19 shs Fed Nat'l Mtg Ass'n Pool			various	Purchased	10/25/19		X	47.	12.			35.	
49.02 shs Fed Nat'l Mtg Ass'n Pool			various	Purchased	11/25/19		X	49.	12.			37.	
40.9 shs Fed Nat'l Mtg Ass'n Pool			various	Purchased	12/28/19		X	41.	10.			31.	
38.43 shs Fed Nat'l Mtg Ass'n Pool			various	Purchased	12/31/19		X	38.	9.			29.	
76.44 shs Fed Nat'l Mtg Ass'n Pool			various	Purchased	01/31/19		X	76.	0.			76.	
122.73 shs Fed Nat'l Mtg Ass'n Pool			various	Purchased	03/25/19		X	123.	0.			123.	
156.87 shs Fed Nat'l Mtg Ass'n Pool			various	Purchased	04/25/19		X	157.	0.			157.	
71.01 shs Fed Nat'l Mtg Ass'n Pool			various	Purchased	05/28/19		X	71.	0.			71.	
135.87 shs Fed Nat'l Mtg Ass'n Pool			various	Purchased	06/25/19		X	136.	0.			136.	
138.57 shs Fed Nat'l Mtg Ass'n Pool			various	Purchased	07/25/19		X	139.	0.			139.	
169.7 shs Fed Nat'l Mtg Ass'n Pool			various	Purchased	08/26/19		X	170.	0.			170.	

Form 990-PF Part I Line 6a Net Gain or Loss From Sale of Assets

Net Gain or Loss from Sale of Assets

Continuation Statement

Description of Property	Bu sin es Co de	Excl usio n Cod e	Dat e Acq uire d	How Acquired	Dat e Sol d	Name of Buyer	B u y er a B u s i n e s s	Sale s Pric e	Cost or other basis	Sale s Exp ense	Valuation Method	Total Gain or Loss	Accu mulat ed Depre ciation
160.5 shs Fed Nat'l Mtg Ass'n Pool			various	Purchased	09/25/19		X	161.	0.			161.	
110.02 shs Fed Nat'l Mtg Ass'n Pool			various	Purchased	10/25/19		X	110.	0.			110.	
86.34 shs Fed Nat'l Mtg Ass'n Pool			various	Purchased	11/25/19		X	86.	0.			86.	
150.46 shs Fed Nat'l Mtg Ass'n Pool			various	Purchased	12/26/19		X	150.	0.			150.	
77.28 shs Fed Nat'l Mtg Ass'n Pool			various	Purchased	12/31/19		X	77.	0.			77.	
101.7 shs Fed Nat'l Mtg Ass'n Pool			various	Purchased	01/31/19		X	102.	51.			51.	
92.58 shs Fed Nat'l Mtg Ass'n Pool			various	Purchased	03/25/19		X	93.	46.			47.	
159.23 shs Fed Nat'l Mtg Ass'n Pool			various	Purchased	04/25/19		X	159.	80.			79.	
71.77 shs Fed Nat'l Mtg Ass'n Pool			various	Purchased	05/28/19		X	72.	36.			36.	
113.64 shs Fed Nat'l Mtg Ass'n Pool			various	Purchased	06/25/19		X	114.	47.			67.	
73.72 shs Fed Nat'l Mtg Ass'n Pool			various	Purchased	07/25/19		X	74.	37.			37.	
146.62 shs Fed Nat'l Mtg Ass'n Pool			various	Purchased	08/26/19		X	147.	74.			73.	
112.64 shs Fed Nat'l Mtg Ass'n Pool			various	Purchased	09/25/19		X	113.	57.			56.	
85.48 shs Fed Nat'l Mtg Ass'n Pool			various	Purchased	10/25/19		X	85.	43.			42.	

Form 990-PF Part I Line 6a Net Gain or Loss From Sale of Assets

Net Gain or Loss from Sale of Assets

Continuation Statement

Description of Property	Business Code	Exclusion Code	Date Acquired	How Acquired	Date Sold	Name of Buyer	Buyer a Business	Sale Price	Cost or other basis	Sale Expense	Valuation Method	Total Gain or Loss	Accumulated Depreciation
123.38 shs Fed Nat'l Mtg Ass'n Pool			various	Purchased	11/25/19		X	123.	62.			61.	
73.78 shs Fed Nat'l Mtg Ass'n Pool			various	Purchased	12/26/19		X	74.	37.			37.	
106.89 shs Fed Nat'l Mtg Ass'n Pool			various	Purchased	12/31/19		X	107.	54.			53.	
11000 shs National Rural Util Corp			various	Purchased	10/15/19		X	11,000	11,000			0.	
10000 shs Pepsico			various	Purchased	01/07/19		X	10,000	10,000			0.	
11000 shs Prudential Financial			various	Purchased	08/15/19		X	11,000	11,000			0.	
1685.41 shs SLM Student Loan Tr			various	Purchased	01/25/18		X	1,685	1,758			-73.	
135.06 shs SLM Student Loan			various	Purchased	04/25/19		X	135.	141.			-6.	
92.93 shs SLM Student Loan			various	Purchased	07/25/19		X	93.	97.			-4.	
91.15 shs SLM Student Loan TR			various	Purchased	10/25/19		X	91.	95.			-4.	
11000 US Bank NA			various	Purchased	09/30/19		X	11,000	11,003			-3.	
13000 shs Walt Disney			various	Purchased	05/30/19		X	13,000	13,000			0.	
23.78 shs Federal Nat'l Mtg Ass'n			various	Purchased	12/31/19		X	24.	3.			21.	

Name Robert and Jessie Whitmore Ch. Trust	Employer Identification No 81-6792560
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Line 10a - Investments - US and State Government Obligations:	End of Year		End of Year	
	State and Local Obligations Book Value	State and Local Obligations FMV	US Government Obligations Book Value	US Government Obligations FMV
US T-Note 2.0 2/15/2025			41,139.	42,620.
US T-Note 2.25 11/15/2025			36,011.	36,991.
US T-Note 1.75 5/15/2023			44,505.	46,190.
US T N/B 1.5 8/15/2026			33,375.	34,325.
Tot to Fm 990-PF, Pt II, Ln 10a			155,030.	160,126.

Line 10b - Investments - Corporate Stock:	End of Year	
	Book Value	Fair Market Value
616.193 Dodge & Cox Stock Fd	118,030.	119,394.
703.395 Am Fds Europacific Growth	35,886.	39,394.
560.149 T Rowe PR Md Cap Growth	53,870.	53,388.
See L-10b Stmt	550,551.	600,430.
Totals to Form 990-PF, Part II, Line 10b	758,337.	812,606.

Line 10c - Investments - Corporate Bonds:	End of Year	
	Book Value	Fair Market Value
Totals to Form 990-PF, Part II, Line 10c		

Line 12 - Investments - Mortgage loans:	End of Year	
	Book Value	Fair Market Value
Totals to Form 990-PF, Part II, Line 12		

Line 13 - Investments - Other:	End of Year	
	Book Value	Fair Market Value
Totals to Form 990-PF, Part II, Line 13		

**990-EZ, 990, 990-T and 990-PF
Information Worksheet**

2019

Part I — Identifying Information

Employer Identification Number . 81-6792560

Name Robert and Jessie Whitmore Ch. Trust

Doing Business As c/o Allen M. Salomon

Address 111 E. Kilbourn Ave Room/Suite . 1400

City Milwaukee State . . . WI ZIP Code . . . 53202

Province/State Foreign Postal Code . . .

Foreign Code Foreign Country . . .

Telephone Number (434) 434-3443 Extension x

Fax E-Mail Address . . .

☐ Eligible for hurricane tax relief legislation benefits, check here

Part II — Type of Return

- | | |
|--|---|
| <input type="checkbox"/> Form 990-EZ only | <input type="checkbox"/> Form 990-EZ with Form 990-T |
| <input type="checkbox"/> Form 990 only | <input type="checkbox"/> Form 990 with Form 990-T |
| <input checked="" type="checkbox"/> Form 990-PF only | <input type="checkbox"/> Form 990-PF with Form 990-T |
| <input type="checkbox"/> Form 990-T only | <input type="checkbox"/> Form 990-N (gross receipts \$50,000 or less) for Electronic Filing only |

☐ **QuickBooks Import Users & 990 to 990-EZ Data Transfer Option:** Check if you're filing the EZ & want 990 imported data copied to the EZ **OR** for those not importing from QuickBooks who transferred from prior year 990 and now qualify to file the EZ this year, check this box to transfer 990 data to the EZ.

IMPORTANT

Before transferring data from Form 990 to Form 990-EZ , refer to "How to transfer data from filing Form 990 to 990-EZ" listed above in the Most Common Support Questions or Tax Help for this line.

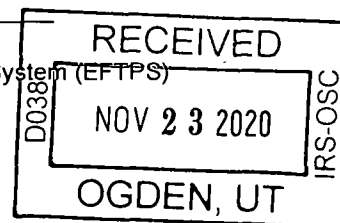
Part III — Type of Organization

- | | |
|---|---|
| <input type="checkbox"/> 501(c) Corporation/Association (subsection number) | <input type="checkbox"/> 220(e) Trust |
| <input checked="" type="checkbox"/> 501(c) Trust 3 (subsection number) | <input type="checkbox"/> 408A Trust |
| <input type="checkbox"/> 4947(a)(1) Trust | <input type="checkbox"/> 529(a) Corporation |
| <input type="checkbox"/> 408(e) Trust | <input type="checkbox"/> 529(a) Trust |
| <input type="checkbox"/> 401(a) Trust | <input type="checkbox"/> 530(a) Trust |
| <input type="checkbox"/> Other (describe) Corporation/Association | <input type="checkbox"/> 527 Organization |
| Or Trust | <input type="checkbox"/> 501(c) Association |

Part IV — Tax Year and Filing Information

- ☒ Calendar year
- ☐ Fiscal year — Ending month . . .
- ☐ Short year — Beginning date . . . Ending date . . .

☒ Check this box if the organization is enrolled in the Electronic Federal Tax Payment System (EFTPS)



Part V – 2019 Estimated Taxes Paid☒ Check this box if the organization is a private foundation

Form 990-T

Form 990-PF

Amount of 2018 overpayment credited to 2019 estimated tax

Payment Quarters	Due Date	Form 990-T		Form 990-PF	
		Date Paid	Amount Paid	Date Paid	Amount Paid
1st Quarter Payment	05/15/19				
2nd Quarter Payment	06/17/19				
3rd Quarter Payment	09/16/19				
4th Quarter Payment	12/16/19				
Additional Payment 1					
Additional Payment 2					
Additional Payment 3					
Additional Payment 4					

Part VI – Taxpayer Signature Information

Officer's Name Allen M Salomon

Officer's Title Trustee

Part VII – Electronic Filing Information

IMPORTANT: Do not use the Miscellaneous Statement or Additional Information if filing Form 990 or Form 990-EZ. These statements will not be transmitted with the return. Use Schedule O or the applicable Supplemental Information for the appropriate Schedule.

QuickZoom to the Electronic Filing Information Worksheet ▶

Electronic Filing:☐ File the federal return electronically☐ File the state(s) electronically

* Select the state or states to file electronically. (Multiple states can be entered)

State(s) *

☐ File Form 114 Report of Foreign Bank and Financial Accounts (FBAR) electronically**Practitioner PIN program:**☐ Sign this return electronically using the Practitioner PIN☐ ERO entered PIN

Officer's PIN (enter any 5 numbers)

Date PIN entered

Electronic Filing of Extensions:☐ Check this box to file Form 8868 (application for extension of time to file return) electronically

Electronic Filing of Amended Return:

- ☐ Check this box to file amended return electronically
- ☐ Check this box to file the state and/or city amended return(s) electronically
- * Select the state and/or city amended return(s) to file electronically.

State(s) *

- ☐ File Amended Form 114 Report of Foreign Bank and Financial Accounts (FBAR) electronically

Part VIII – Electronic Funds Withdrawal Information (Form 990PF filers only)

- | Yes | No | |
|--------------------------|--------------------------|--|
| <input type="checkbox"/> | <input type="checkbox"/> | Use electronic funds withdrawal of federal balance due (EF only)? |
| <input type="checkbox"/> | <input type="checkbox"/> | Use electronic funds withdrawal of Form 8868 balance due (EF only)? |
| <input type="checkbox"/> | <input type="checkbox"/> | Use electronic funds withdrawal of amended return balance due (EF only)? |

Bank Information

Check to confirm transferred account information (which appears in green) is correct . . . ☐

Name of Financial Institution (optional) . . .

Check the appropriate box ☐ Checking ☐ Savings

Routing number

Account number.

Payment Information

Enter the payment date to withdraw tax payment

Balance due amount from this return

Enter an amount to withdraw tax payment

If partial payment is made, the remaining balance due

Payment date for amended returns

Balance due amount for amended returns

Part IX – Information for Client Letter

	Form 990-EZ or Form 990	Form 990-PF	Form 990-T
Extended Due Date			

Letter Salutation

Part X – Return Preparer

Enter preparer code from Firm/Preparer Info (See Help) . . . ams

QuickZoom to Firm/Preparer Info ▶

QuickZoom to Form 990-EZ, Pages 1 through 4 ▶

QuickZoom to Form 990, Page 1 ▶

QuickZoom to Form 990-PF, Page 1 ▶

QuickZoom to Form 990-T, Page 1 ▶

QuickZoom to Form 990-N, e-PostCard ▶

QuickZoom to Client Status ▶

Additional information from your 2019 Federal Exempt Tax Return

Form 990-PF: Return of Private Foundation

Line 13(a)

Itemization Statement

Description	Amount
Trustee fees	10,822.
Total	10,822.

Form 990-PF: Return of Private Foundation

Line 26(a)

Itemization Statement

Description	Amount
Associated Investment Account	957,591.
A/R from Jonathas Trust	4,216.
	-976.
Total	960,831.

Form 990-PF: Return of Private Foundation

Line 4 Column (b)

Itemization Statement

Description	Amount
Interest	11,128.
Dividends	10,119.
Total	21,247.

Form 990-PF Part II Line 10, 12 and 13 Investments

L-10b Stmt

Continuation Statement

Line 10b Description	Line 10b Book	Line 10b FMV
2432.410 Goldman Sachs Satellite	19,171.	20,530.
1232.809 Harbor Capital Appreciation	81,426.	93,324.
942.695 T Rowe PR Mid Cap Value	28,954.	26,348.
519.001 Am Funds New World Fd	31,089.	36,595.
2659.238 Tif Int'l Equity Ser Fd	51,995.	41,325.
562.421 Vanguard Morgan Growth Admiral Shs	57,515.	62,659.
435.42 Vanguard Idx Tr 5000 Admiral Shs	100,226.	129,816.
1517.888 Vitrus Ceredex Sm. Cap Val Eq Fd	18,497.	14,921.
471.222 Wasatch Sm Cap Grwth Fd	20,047.	18,646.
14089.17 Centerpoint	15,052.	14,515.
6,000 Citibank	6,089.	6,061.
12,000 DUke Energy Carolinas	12,119.	12,123.
13,000 Exxon Mobil Corp	13,018.	13,142.
FHLM Gold Pool 4.0 5/1/25	81.	508.
FHLM Gold Pool 2.5 2/1/30	5,436.	6,810.
FHLM Gold Pool 2.5 11/1/30	5,384.	6,113.
FNMA 3.5 12/1/25	348.	1,463.

Form 990-PF Part II Line 10, 12 and 13 Investments
L-10b Stmt**Continuation Statement**

Line 10b Description	Line 10b Book	Line 10b FMV
FNMA 2.5 10/1/31	0.	7,949.
FNMA 3.0 9/1/28	2,276.	4,667.
FNMA 4.0 12/1/24	80.	656.
FNMA 3.5 10/1/25	204.	1,096.
21,330.150 Goldman Sachs Prime Oblg	21,343.	21,341.
12,000 Honeywell Int'l	12,388.	12,366.
9,000 Kimberly Clark	9,154.	9,099.
1,988.41 SLM Student Loan Trust	2,074.	1,995.
12,000 Target	12,282.	12,129.
12,000 UPS	12,168.	12,143.
12,000 United Technologies	12,135.	12,090.
Total	550,551.	600,430.