

For calendar year 2019, or tax year beginning 06-01-2019, and ending 05-31-2020

Name of foundation EDWARD AND HANNAH M RUTLEDGE CHARITIES INC		A Employer identification number 39-0806178	
Number and street (or P.O. box number if mail is not delivered to street address) PO BOX 758	Room/suite	B Telephone number (see instructions) (715) 723-6618	
City or town, state or province, country, and ZIP or foreign postal code CHIPPEWA FALLS, WI 54729		C If exemption application is pending, check here ☐	
G Check all that apply: ☐ Initial return ☐ Initial return of a former public charity ☐ Final return ☐ Amended return ☐ Address change ☐ Name change		D 1. Foreign organizations, check here..... ☐ 2. Foreign organizations meeting the 85% test, check here and attach computation ... ☐	
H Check type of organization: ☒ Section 501(c)(3) exempt private foundation ☐ Section 4947(a)(1) nonexempt charitable trust ☐ Other taxable private foundation		E If private foundation status was terminated under section 507(b)(1)(A), check here ☐	
I Fair market value of all assets at end of year (from Part II, col. (c), line 16) ▶ \$ 24,812,923	J Accounting method: ☒ Cash ☐ Accrual ☐ 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 ☐

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)	1,338			
	2 Check ☒ if the foundation is not required to attach Sch. B				
	3 Interest on savings and temporary cash investments	5,559	5,559		
	4 Dividends and interest from securities . . .	1,019,249	1,019,249		
	5a Gross rents				
	b Net rental income or (loss) _____				
	6a Net gain or (loss) from sale of assets not on line 10	281,929			
	b Gross sales price for all assets on line 6a 7,940,266				
	7 Capital gain net income (from Part IV, line 2) . . .		281,929		
	8 Net short-term capital gain				
	9 Income modifications				
	10a Gross sales less returns and allowances _____				
Operating and Administrative Expenses	b Less: Cost of goods sold				
	c Gross profit or (loss) (attach schedule)				
	11 Other income (attach schedule)	103,077	25,000		
	12 Total. Add lines 1 through 11	1,411,152	1,331,737		
	13 Compensation of officers, directors, trustees, etc.	128,385	32,096		96,289
	14 Other employee salaries and wages	61,410	15,352		46,058
	15 Pension plans, employee benefits	9,848	2,462		7,386
	16a Legal fees (attach schedule)				
	b Accounting fees (attach schedule)				
	c Other professional fees (attach schedule)				
	17 Interest				
	18 Taxes (attach schedule) (see instructions)	72,630	6,166		18,498
	19 Depreciation (attach schedule) and depletion				
	20 Occupancy	19,225	4,806		14,419
	21 Travel, conferences, and meetings				
	22 Printing and publications	624	156		468
	23 Other expenses (attach schedule)	65,201	16,301		48,900
	24 Total operating and administrative expenses. Add lines 13 through 23	357,323	77,339		232,018
	25 Contributions, gifts, grants paid	999,356			999,356
	26 Total expenses and disbursements. Add lines 24 and 25	1,356,679	77,339		1,231,374
	27 Subtract line 26 from line 12:				
	a Excess of revenue over expenses and disbursements	54,473			
	b Net investment income (if negative, enter -0-)		1,254,398		
c Adjusted net income (if negative, enter -0-)					

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	7,653	32,714	32,714
	2 Savings and temporary cash investments	452,091	569,193	569,193
	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 ▶ _____			
	8 Inventories for sale or use			
	9 Prepaid expenses and deferred charges			
	10a Investments—U.S. and state government obligations (attach schedule)			
	b Investments—corporate stock (attach schedule)	18,767,338	18,679,648	23,190,568
	c Investments—corporate bonds (attach schedule)	837,086	837,086	994,732
	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 ▶ _____ 25,716 Less: accumulated depreciation (attach schedule) ▶ _____	25,716	25,716	25,716
15 Other assets (describe ▶ _____)				
16 Total assets (to be completed by all filers—see the instructions. Also, see page 1, item I)	20,089,884	20,144,357	24,812,923	
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)	0	0	
Net Assets or Fund Balances	Foundations that follow FASB ASC 958, check here ▶ ☐ 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 ▶ ☒ and complete lines 26 through 30.			
	26 Capital stock, trust principal, or current funds	1,400,000	1,400,000	
	27 Paid-in or capital surplus, or land, bldg., and equipment fund	0	0	
	28 Retained earnings, accumulated income, endowment, or other funds	18,689,884	18,744,357	
	29 Total net assets or fund balances (see instructions)	20,089,884	20,144,357	
30 Total liabilities and net assets/fund balances (see instructions) .	20,089,884	20,144,357		

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	20,089,884
2 Enter amount from Part I, line 27a	2	54,473
3 Other increases not included in line 2 (itemize) ▶ _____	3	0
4 Add lines 1, 2, and 3	4	20,144,357
5 Decreases not included in line 2 (itemize) ▶ _____	5	0
6 Total net assets or fund balances at end of year (line 4 minus line 5)—Part II, column (b), line 29 .	6	20,144,357

Part IV Capital Gains and Losses for Tax on Investment Income

(a) List and describe the kind(s) of property sold (e.g., real estate, 2-story brick warehouse; or common stock, 200 shs. MLC Co.)	(b) How acquired P—Purchase D—Donation	(c) Date acquired (mo., day, yr.)	(d) Date sold (mo., day, yr.)
1 a PUBLICLY TRADED SECURITIES			
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 7,940,266		7,658,337	281,929
b			
c			
d			
e			

Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69			(l) Gains (Col. (h) gain minus col. (k), but not less than -0-) or Losses (from col.(h))
(i) F.M.V. as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col. (i) over col. (j), if any	
a			281,929
b			
c			
d			
e			

2 Capital gain net income or (net capital loss) $\left\{ \begin{array}{l} \text{If gain, also enter in Part I, line 7} \\ \text{If (loss), enter -0- in Part I, line 7} \end{array} \right\}$	2	281,929
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 does not qualify under section 4940(e). Do not complete this part.

1 Enter the appropriate amount in each column for each year; see 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	1,205,337	24,754,382	0.048692
2017	1,026,652	25,157,968	0.040808
2016	1,337,872	23,596,378	0.056698
2015	1,187,778	22,868,374	0.051940
2014	1,210,616	24,297,796	0.049824
2 Total of line 1, column (d)			0.247962
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			0.049592
4 Enter the net value of noncharitable-use assets for 2019 from Part X, line 5			24,718,901
5 Multiply line 4 by line 3			1,225,860
6 Enter 1% of net investment income (1% of Part I, line 27b)			12,544
7 Add lines 5 and 6			1,238,404
8 Enter qualifying distributions from Part XII, line 4			1,231,374

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 ☐ 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 ☐ and enter 1% of Part I, line 27b	1	25,088
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	25,088
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	25,088
6	Credits/Payments:		
a	2019 estimated tax payments and 2018 overpayment credited to 2019	6a	19,734
b	Exempt foreign organizations—tax withheld at source	6b	
c	Tax paid with application for extension of time to file (Form 8868)	6c	0
d	Backup withholding erroneously withheld	6d	0
7	Total credits and payments. Add lines 6a through 6d.	7	19,734
8	Enter any penalty for underpayment of estimated tax. Check here ☒ if Form 2220 is attached.	8	161
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed .	9	5,515
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	

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?		No
b Did it spend more than \$100 during the year (either directly or indirectly) for political purposes? (see Instructions for definition). <i>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.</i>		No
c Did the foundation file Form 1120-POL for this year?		No
d Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year: (1) On the foundation. ☐ \$ 0 (2) On foundation managers. ☐ \$ 0		
e Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers. ☐ \$ 0		
2 Has the foundation engaged in any activities that have not previously been reported to the IRS? <i>If "Yes," attach a detailed description of the activities.</i>		No
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? <i>If "Yes," attach a conformed copy of the changes</i>		No
4a Did the foundation have unrelated business gross income of \$1,000 or more during the year?	Yes	
b If "Yes," has it filed a tax return on Form 990-T for this year?	Yes	
5 Was there a liquidation, termination, dissolution, or substantial contraction during the year? <i>If "Yes," attach the statement required by General Instruction T.</i>		No
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?	Yes	
7 Did the foundation have at least \$5,000 in assets at any time during the year? <i>If "Yes," complete Part II, col. (c), and Part XV.</i>	Yes	
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 General Instruction G? <i>If "No," attach explanation.</i>	Yes	
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 taxable year beginning in 2019? See the instructions for Part XIV. <i>If "Yes," complete Part XIV</i>		No
10 Did any persons become substantial contributors during the tax year? <i>If "Yes," attach a schedule listing their names and addresses.</i>		No

Part VII-A Statements Regarding Activities (continued)

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		No
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		No
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application? Website address ▶ <u>N/A</u>	13	Yes	
14	The books are in care of ▶ <u>JULENE BOWE</u> Telephone no. ▶ <u>(715) 723-6618</u>			

Located at ▶ 404 N BRIDGE ST CHIPPEWA FALLS WIZIP+4 ▶ 54729

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			
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?	16	Yes	No
	See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes", enter the name of the foreign country ▶			

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? ☐ Yes ☒ No		
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person? ☐ Yes ☒ No		
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? ☐ Yes ☒ No		
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? ☐ Yes ☒ 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)? ☐ Yes ☒ 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.) ☐ Yes ☒ 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 ☐	1b	
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	No
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 (lines 6d and 6e, Part XIII) for tax year(s) beginning before 2019? ☐ Yes ☒ 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	
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? ☐ Yes ☒ 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 Schedule C, Form 4720, 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	No
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	No

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

		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 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	5b	No
	Organizations relying on a current notice regarding disaster assistance check here. 		
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? If "Yes," attach the statement required by Regulations section 53.4945–5(d).	☐ Yes ☐ No	
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? If "Yes" to 6b, file Form 8870.	6b	No
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 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, 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
JULENE BOWE 404 N BRIDGE ST CHIPPEWA FALLS, WI 54729	ASSISTANT SECRETARY 30.00	66,427	0	0
GERALD NAIBERG 404 N BRIDGE ST CHIPPEWA FALLS, WI 54729	PRESIDENT 2.00	22,292	0	0
DAVID HANCOCK 404 N BRIDGE ST CHIPPEWA FALLS, WI 54729	VICE PRESIDENT 2.00	19,833	0	0
THOMAS LEINENKUGEL 404 N BRIDGE ST CHIPPEWA FALLS, WI 54729	SECRETARY-TREASURER 2.00	19,833	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
NONE				
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 ►	0

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	24,458,746
b	Average of monthly cash balances.	1b	636,585
c	Fair market value of all other assets (see instructions).	1c	0
d	Total (add lines 1a, b, and c).	1d	25,095,331
e	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	25,095,331
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions).	4	376,430
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	24,718,901
6	Minimum investment return. Enter 5% of line 5.	6	1,235,945

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	1,235,945
2a	Tax on investment income for 2019 from Part VI, line 5.	2a	25,088
b	Income tax for 2019. (This does not include the tax from Part VI.).	2b	14,223
c	Add lines 2a and 2b.	2c	39,311
3	Distributable amount before adjustments. Subtract line 2c from line 1.	3	1,196,634
4	Recoveries of amounts treated as qualifying distributions.	4	0
5	Add lines 3 and 4.	5	1,196,634
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	1,196,634

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	1,231,374
b	Program-related investments—total from Part IX-B.	1b	0
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	1,231,374
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	0
6	Adjusted qualifying distributions. Subtract line 5 from line 4.	6	1,231,374

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				1,196,634
2 Undistributed income, if any, as of the end of 2019:				
a Enter amount for 2018 only.			823,677	
b Total for prior years: 20____, 20____, 20____		0		
3 Excess distributions carryover, if any, to 2019:				
a From 2014.				
b From 2015.				
c From 2016.				
d From 2017.				
e From 2018.				
f Total of lines 3a through e.	0			
4 Qualifying distributions for 2019 from Part XII, line 4: ► \$ <u>1,231,374</u>				
a Applied to 2018, but not more than line 2a			823,677	
b Applied to undistributed income of prior years (Election required—see instructions).		0		
c Treated as distributions out of corpus (Election required—see instructions).	0			
d Applied to 2019 distributable amount.				407,697
e Remaining amount distributed out of corpus	0			
5 Excess distributions carryover applied to 2019. (If an amount appears in column (d), the same amount must be shown in column (a).)	0			0
6 Enter the net total of each column as indicated below:	0			
a Corpus. Add lines 3f, 4c, and 4e. Subtract line 5				
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.				788,937
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.	0			
10 Analysis of line 9:				
a Excess from 2015.				
b Excess from 2016.				
c Excess from 2017.				
d Excess from 2018.				
e Excess from 2019.				

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

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 organization 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).)

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.

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:

See Additional Data Table

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

See Additional Data Table

c Any submission deadlines:

See Additional Data Table

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

See Additional Data Table

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 <i>Paid during the year</i> See Additional Data Table				
Total			▶ 3a	999,356
b <i>Approved for future payment</i> See Additional Data Table				
Total			▶ 3b	580,000

Enter gross amounts unless otherwise indicated.

[illegible]

Part XVII

- | | | | | |
|---|--|----|--|----|
| c | Sharing of facilities, equipment, mailing lists, other assets, or paid employees. | 1c | | No |
| 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
ALZHEIMER'S ASSOCIATION	SUPPORT	OCCUPIES FREE OFFICE SPACE
COMMUNITY FOUNDATION OF CHIPPEWA COUNTY	COMMUNITY FOUNDATION	OCCUPIES FREE OFFICE SPACE

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.		
	*****	2020-09-18	*****
	_____ Signature of officer or trustee	_____ Date	_____ Title

May the IRS discuss this return with the preparer shown below
 (see instr.) ☒ **Yes** ☐ **No**

Paid Preparer Use Only	Print/Type preparer's name	Preparer's Signature	Date	Check if self-employed ☐	PTIN
	ROB GANSCHOW CPA		2020-09-15		P01374207
	Firm's name ▶ WIPFLI LLP				Firm's EIN ▶ 39-0758449
	Firm's address ▶ 4890 OWEN AYRES COURT SUITE 200 EAU CLAIRE, WI 54701				Phone no. (715) 832-3407

Form 990PF Part XV Line 2a - 2d - Information Regarding Contribution, Grant, Gift, Loan, Scholarship, etc., Programs:

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

JULENE BOWE
404 N BRIDGE ST
CHIPPEWA FALLS, WI 54729
(715) 723-6618

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

THE APPLICATION FORM REQUIRES THE FOLLOWING INFORMATION TO BE INCLUDED: -NAME AND CONTACT INFO -SOCIAL SECURITY NUMBER -HOW LONG HAVE YOU LIVED AT YOUR CURRENT ADDRESS? -DO YOU RENT? LANDLORD INFORMATION, PREVIOUS ADDRESS -NAME AND ADDRESS OF YOUR PARENTS, WILL THEY HELP YOU? IF SO WHY NOT, -DO YOU HAVE OTHER FRIENDS OR RELATIVES THAT WILL HELP YOU? -ARE YOU MARRIED? ARE YOU DIVORCED? -SPOUSAL INFORMATION, INFORMATION OF ANY CHILDREN LIVING WITH YOU (AGE AND NAMES) -ARE YOU WORKING, WHERE DO YOU WORK? -IF YOU ARE NOT WORKING, EXPLAIN WHY YOU HAVE NOT WORKED, WHY DID YOU LEAVE THAT JOB, WHAT WAS THE LAST JOB HAD? -CAN YOU WORK, IF NOT, WHY? -DO YOU HAVE A CAR? MAKE AND YEAR -DO YOU RECEIVE ASSISTANCE FROM ANY CHIPPEWA COUNTY AGENCIES? -IF SO, LIST AGENCY AND AMOUNT YOU RECEIVE EACH MONTH, FOOD STAMPS? -DO YOU RECEIVE SSI? HOW MUCH? -ANY OTHER SOURCES OF INCOME? HOW MUCH? -HAVE YOU EVER RECEIVED HELP FROM RUTLEDGE CHARITIES? -WHY DO YOU NEED HELP?

- c** Any submission deadlines:

N/A

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

RESIDENTS OF CHIPPEWA COUNTY, WI ARE PREFERRED.

Form 990PF Part XV Line 2a - 2d - Information Regarding Contribution, Grant, Gift, Loan, Scholarship, etc., Programs:

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

JULENE BOWE
404 N BRIDGE ST
CHIPPEWA FALLS, WI 54729
(715) 723-6618

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

-NAME AND CONTACT INFORMATION -MARITAL STATUS -NAME OF HIGH SCHOOL -LIST OF ACTIVITIES AND ACHIEVEMENTS AT SCHOOL AND IN COMMUNITY -COLLEGE YOU PLAN TO ATTEND, MAJOR -GRADUATION DATE -FULL TIME OR PART TIME STUDENT AND EXPLANATION -EMPLOYMENT INFORMATION -ALL APPLICANTS MUST APPLY FOR FINANCIAL AID AND SUBMIT A COPY OF THE FAFSA REPORT WITH APPLICATION -PARENTAL STATUS (DIVORCED, DECEASED, STEP, OTHER) -PARENTAL INFORMATION -FINANCIAL ASSISTANCE BEING PROVIDED FROM FAMILY -STATEMENT OF NEED - EXPLAIN ANY SPECIAL CIRCUMSTANCES THAT IMPACT YOUR FINANCIAL SITUATION BUT MAY NOT BE OBVIOUS ON THE STUDENT AID REPORT. -LIST OTHER SOURCES OF FUNDS FOR COLLEGE EXPENSES -OTHER SCHOLARSHIPS -ESTIMATE OF TUITION AND OTHER EXPENSES -COMPLETE TRANSCRIPT OF HIGH SCHOOL GRADES

- c** Any submission deadlines:

SCHOLARSHIP APPLICATIONS MUST BE SUBMITTED BY JUNE EACH YEAR.

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

RESIDENTS OF CHIPPEWA COUNTY, WI ARE PREFERRED.

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

Recipient	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
Name and address (home or business)				
a <i>Paid during the year</i>				
CHIPPEWA AREA HISTORY CENTER 123 ALLEN STREET CHIPPEWA FALLS, WI 54729		PC	AID AND ASSIST, PLEDGE 1 OF 3	125,000
FEED MY PEOPLE FOOD BANK 2610 ALPINE ROAD EAU CLAIRE, WI 54703		PC	AID AND ASSIST, FACILITY EXPANSION PLEDGE 2 OF 5	50,000
CHIPPEWA VALLEY TECHNICAL COLLEGE 620 W CLAIREMONT AVENUE EAU CLAIRE, WI 54701		GOV	AID AND ASSIST, PLEDGE 2 OF 4	50,000
Total ► 3a				999,356

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	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
Name and address (home or business)				
a <i>Paid during the year</i>				
BOYS & GIRLS CLUB OF GREATER CHIPPEWA VALLEY 21 E GRAND AVENUE CHIPPEWA FALLS, WI 54729		PC	AID AND ASSIST, SUMMER SCHOOL AND AFTER SCHOOL	50,000
OPEN DOOR CLINICPO BOX 271 CHIPPEWA FALLS, WI 54729		PC	AID AND ASSIST, FUNDING THE CLINIC	45,000
CHIPPEWA FALLS AREA SENIOR CENTER 1000 E GRAND AVE CHIPPEWA FALLS, WI 54729		PC	AID AND ASSIST, AARP TAX AIDE AND OPERATING EXPENSES	30,200
Total ▶ 3a				999,356

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	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
Name and address (home or business)				
a <i>Paid during the year</i>				
WORKFORCE RESOURCE 401 TECHNOLOGY DRIVE E S MENOMONIE, WI 54751		PC	AID AND ASSIST, YOUTH BUILD PROGRAM	25,000
LEGACY COMMUNITY CENTER 26 W GRAND AVE CHIPPEWA FALLS, WI 54729		PC	AID AND ASSIST, AGNES TABLE AND OPERATING EXPENSES	25,000
BRIGHT SMILES5388 STATE HWY 64 BLOOMER, WI 54724		PC	AID AND ASSIST, SUPPLIES AND OPERATING EXPENSES	25,000
Total ▶ 3a				999,356

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	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
Name and address (home or business)				
a <i>Paid during the year</i>				
FAMILY SUPPORT CENTERPO BOX 143 CHIPPEWA FALLS, WI 54729		PC	AID AND ASSIST, PARENTING PROGRAM	20,000
CORNELLLAKE HOLCOMBE 21ST CENTURY CLC PO BOX 517 CORNELL, WI 54732		PC	AID AND ASSIST, COMMUNITY LEARNING CENTERS	20,000
AGNES TABLE26 W GRAND AVENUE CHIPPEWA FALLS, WI 54729		PC	AID AND ASSIST, OPERATING EXPENSES	20,000
Total ▶ 3a				999,356

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	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
Name and address (home or business)				
a <i>Paid during the year</i>				
VALLEY VINEYARD FOOD PANTRY 910 BRIDGEWATER AVENUE CHIPPEWA FALLS, WI 54729		PC	AID AND ASSIST, FOOD PANTRY ADDITION	18,500
MOBILE MEALSPO BOX 601 CHIPPEWA FALLS, WI 54729		PC	AID AND ASSIST, OPERATING EXPENSES	15,000
HOPE GOSPEL MISSIONPO BOX 1127 EAU CLAIRE, WI 54702		PC	AID AND ASSIST, OPERATING EXPENSES	15,000
Total ▶ 3a				999,356

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	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
Name and address (home or business)				
a <i>Paid during the year</i>				
CHIPPEWA VALLEY FAMILY YMCA 611 JEFFERSON AVENUE CHIPPEWA FALLS, WI 54729		PC	AID AND ASSIST, CHIPPEWA CO. MEMBERSHIP SUPPORT	15,000
CHIPPEWA COUNTY HOUSING AUTHORITY 711 N BRIDGE STREET 14 CHIPPEWA FALLS, WI 54729		PC	AID AND ASSIST, TBRA PROGRAM	15,000
TAKE A STAND AGAINST METH 711 N BRIDGE STREET ROOM CHIPPEWA FALLS, WI 54729		PC	AID AND ASSIST, TAKE A STAND AGAINST METH CAMPAIGN	12,500
Total ▶ 3a				999,356

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

Recipient	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
Name and address (home or business)				
a <i>Paid during the year</i>				
CHILDREN'S MUSEUM OF EAU CLAIRE 220 S BARSTOW STREET EAU CLAIRE, WI 54701		PC	AID AND ASSIST, CAPITAL CAMPAIGN FOR NEW MUSEUM	12,500
ST FRANCESCA FOOD PANTRY 117 ALLEN STREET CHIPPEWA FALLS, WI 54729		PC	AID AND ASSIST	10,000
MENTOR CHIPPEWA 750 TROPICANA BLVD CHIPPEWA FALLS, WI 54729		PC	AID AND ASSIST, GENERAL OPERATIONS	10,000
Total ► 3a				999,356

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

Recipient	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
Name and address (home or business)				
a <i>Paid during the year</i>				
LITERACY CHIPPEWA VALLEY 510 S FARWELL ST EAU CLAIRE, WI 54701		PC	AID AND ASSIST, CHIPPEWA CO. RESIDENTS SUPPORT	10,000
GIRL SCOUTS OF NW GREAT LAKES 4222 OAKWOOD HILLS PKWY EAU CLAIRE, WI 54701		PC	AID AND ASSIST, CHIPPEWA CO. PROGRAMS	10,000
CHIPPEWA VALLEY FREE CLINIC 1030 OAK RIDGE DRIVE EAU CLAIRE, WI 54701		PC	AID AND ASSIST, CHIPPEWA CO. PATIENTS	10,000
Total ► 3a				999,356

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	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
Name and address (home or business)				
a <i>Paid during the year</i>				
CHIPPEWA AREA SCHOOL DISTRICT - HALMSTAD SOLAR PAVILION 1130 MILES STREET CHIPPEWA FALLS, WI 54729		PC	AID AND ASSIST, HALMSTAD SOLAR PAVILION	10,000
BLOOMER FOOD PANTRY 2300 DUNCAN ROAD BLOOMER, WI 54724		PC	AID AND ASSIST	10,000
FEED MY PEOPLE2610 ALPINE ROAD EAU CLAIRE, WI 54703		PC	THE LEGACY CENTER FOOD PANTRY AND SALVATION ARMY FOOD PANTRY	8,000
Total ▶ 3a				999,356

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

Recipient	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
Name and address (home or business)				
a <i>Paid during the year</i>				
CURTIE CARESPO BOX 135 BLOOMER, WI 54724		PC	AID AND ASSIST, CHIPPEWA CO. TRANSPORTATION	7,500
STANLEY AREA FOOD PANTRY 147 E 4TH AVENUE STANLEY, WI 54768		PC	AID AND ASSIST	6,000
FIRST PRESBYTERIAN CHURCH FOOD PANTRY 130 W CENTRAL STREET CHIPPEWA FALLS, WI 54729		PC	AID AND ASSIST	6,000
Total ▶ 3a				999,356

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	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
Name and address (home or business)				
a <i>Paid during the year</i>				
CORNELL FOOD PANTRYPO BOX 307 CORNELL, WI 54732		PC	AID AND ASSIST	6,000
CADOTT 4C' S FOOD PANTRY 112 MILL AVENUE CADOTT, WI 54727		PC	AID AND ASSIST	6,000
JIM FALLS COMMUNITY FOOD PANTRY 11582 161ST STREET CHIPPEWA FALLS, WI 54729		PC	AID AND ASSIST	5,000
Total ▶ 3a				999,356

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	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
Name and address (home or business)				
a <i>Paid during the year</i>				
LAKE HOLCOMBE FOOD PANTRY 28530 250TH AVENUE HOLCOMBE, WI 54745		PC	AID AND ASSIST	4,000
ENGLISH LUTHERAN BATEMAN PANTRY PALS 20588 CTY HWY X CHIPPEWA FALLS, WI 54729		PC	AID AND ASSIST	4,000
CARELINK4140 126TH STREET CHIPPEWA FALLS, WI 54729		PC	AID AND ASSIST, GAS CARDS	4,000
Total ▶ 3a				999,356

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	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
Name and address (home or business)				
a <i>Paid during the year</i>				
CHIPPEWA VALLEY HIGH SCHOOL 2820 E PARK AVENUE CHIPPEWA FALLS, WI 54729		PC	AID AND ASSIST, NUTRITION ENHANCEMENT INITIATIVE	3,500
SPIRIT OF CHRISTMASPO BOX 831 CHIPPEWA FALLS, WI 54729		PC	AID AND ASSIST, GIFTS FOR NEEDY FAMILIES	2,500
ASPYN ARENDT9044 125TH AVENUE BLOOMER, WI 54724		I	SCHOLARSHIP	2,000
Total ▶ 3a				999,356

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	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
Name and address (home or business)				
a <i>Paid during the year</i>				
STEPHEN ARTON19976 CTY HWY DD BLOOMER, WI 54724		I	SCHOLARSHIP	2,000
AMBER ATCHISON5360 175TH STREET CHIPPEWA FALLS, WI 54729		I	SCHOLARSHIP	2,000
EMILY AUSMAN2568 40TH STREET ELK MOUND, WI 54739		I	SCHOLARSHIP	2,000
Total ▶ 3a				999,356

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	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
Name and address (home or business)				
a <i>Paid during the year</i>				
LOREN BEAUDETTE9680 168TH STREET CHIPPEWA FALLS, WI 54729		I	SCHOLARSHIP	2,000
MASON BICHANICH 410 N FRANKLIN STREET STANLEY, WI 54768		I	SCHOLARSHIP	2,000
COLE BISCHEL17234 130TH STREET BLOOMER, WI 54724		I	SCHOLARSHIP	2,000
Total ▶ 3a				999,356

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	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
Name and address (home or business)				
a <i>Paid during the year</i>				
LOUIS BISCHEL19185 102ND STREET BLOOMER, WI 54724		I	SCHOLARSHIP	2,000
ASHLEY BOWE822 OLIVE STREET CHIPPEWA FALLS, WI 54729		I	SCHOLARSHIP	2,000
PEYTON BOWE20208 CTY HWY K CORNELL, WI 54732		I	SCHOLARSHIP	2,000
Total ▶ 3a				999,356

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	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
Name and address (home or business)				
a <i>Paid during the year</i>				
JASON BRUNNER36256 20TH AVENUE STANLEY, WI 54768		I	SCHOLARSHIP	2,000
BOBBI BURGESS21550 CTY HWY X CADOTT, WI 54727		I	SCHOLARSHIP	2,000
SAMUEL BURZYNSKI6993 CTY HWY H STANLEY, WI 54768		I	SCHOLARSHIP	2,000
Total ► 3a				999,356

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	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
Name and address (home or business)				
a Paid during the year				
TAYLOR BURZYNSKI 9796 370TH STREET STANLEY, WI 54768		I	SCHOLARSHIP	2,000
CLAYTON CARLSON6316 CTY HWY H STANLEY, WI 54768		I	SCHOLARSHIP	2,000
CARLEY CHWALA34351 CTY HWY MM STANLEY, WI 54768		I	SCHOLARSHIP	2,000
Total ▶ 3a				999,356

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	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
Name and address (home or business)				
a <i>Paid during the year</i>				
THEO CHWALA34351 CTY HWY MM STANLEY, WI 54768		I	SCHOLARSHIP	2,000
JADE CIULLA4731 BEACON HILL CIRCLE EAGAN, MN 55122		I	SCHOLARSHIP	2,000
AUTUMN DEMBOWSKI 200 NESHONOC ROAD APT 2 WEST SALEM, WI 54669		I	SCHOLARSHIP	2,000
Total ▶ 3a				999,356

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

Recipient	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
Name and address (home or business)				
a <i>Paid during the year</i>				
HAILEY DURAND-CHRISTIANSON 12404 CTY HWY DD COLFAX, WI 54730		I	SCHOLARSHIP	2,000
LAUREN ENDVICK5893 CTY HWY H STANLEY, WI 54768		I	SCHOLARSHIP	2,000
NICHOLAS ENDVICK W11150 HIXWOOD ROAD STANLEY, WI 54768		I	SCHOLARSHIP	2,000
Total ▶ 3a				999,356

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

Recipient	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
Name and address (home or business)				
a <i>Paid during the year</i>				
BRITTANY ERICKSON 4743 270TH STREET CADOTT, WI 54727		I	SCHOLARSHIP	2,000
MEGAN FASBENDER 123 S BROWN STREET CADOTT, WI 54727		I	SCHOLARSHIP	2,000
CALLIE GALLION 4800 W DEER RUN DRIVE A BROWN DEER, WI 53223		I	SCHOLARSHIP	2,000
Total ▶ 3a				999,356

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	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
Name and address (home or business)				
a <i>Paid during the year</i>				
JORDAN GALLION1429 X-RAY STREET BLOOMER, WI 54724		I	SCHOLARSHIP	2,000
SAMANTHA GARDOW 515 W ELM STREET CHIPPEWA FALLS, WI 54729		I	SCHOLARSHIP	2,000
STEPHANIE GOEBEL 19651 350TH STREET GILMAN, WI 54433		I	SCHOLARSHIP	2,000
Total ▶ 3a				999,356

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	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
Name and address (home or business)				
a <i>Paid during the year</i>				
ANTHONY GORDON 224 N COLUMBIA STREET NEW AUBURN, WI 54757		I	SCHOLARSHIP	2,000
CHRISTINA GORDON 224 N COLUMBIA STREET NEW AUBURN, WI 54757		I	SCHOLARSHIP	2,000
JACOB HALL117 N 5TH STREET CORNELL, WI 54732		I	SCHOLARSHIP	2,000
Total ▶ 3a				999,356

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	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
Name and address (home or business)				
a <i>Paid during the year</i>				
AMANDA HAZUGA9728 CTY HWY H STANLEY, WI 54768		I	SCHOLARSHIP	2,000
ERIC HOFFSTATTER 35763 100TH AVENUE STANLEY, WI 54768		I	SCHOLARSHIP	2,000
MADELYN IRWIN10444 51ST AVENUE CHIPPEWA FALLS, WI 54729		I	SCHOLARSHIP	2,000
Total ▶ 3a				999,356

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	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
Name and address (home or business)				
a <i>Paid during the year</i>				
JACOB KARLEN36558 90TH AVENUE STANLEY, WI 54768		I	SCHOLARSHIP	2,000
MAGDLIN KEEKUW11978 PINE ROAD STANLEY, WI 54768		I	SCHOLARSHIP	2,000
ETHAN KJELLBERG3775 20TH STREET ELK MOUND, WI 54739		I	SCHOLARSHIP	2,000
Total ▶ 3a				999,356

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	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
Name and address (home or business)				
a <i>Paid during the year</i>				
BENJAMIN KLAHR3439 FERN COURT EAU CLAIRE, WI 54703		I	SCHOLARSHIP	2,000
ELLA KOENIG N14186 COPENHAVER AVEN STANLEY, WI 54768		I	SCHOLARSHIP	2,000
ELLE KRAMSCHUSTER 400 THOMPSON STREET BLOOMER, WI 54724		I	SCHOLARSHIP	2,000
Total ▶ 3a				999,356

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	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
Name and address (home or business)				
a <i>Paid during the year</i>				
HANNAH LINDQUIST605 MAIN STREET CORNELL, WI 54732		I	SCHOLARSHIP	2,000
COLTON LUNEMANN 9200 237TH AVENUE NEW AUBURN, WI 54757		I	SCHOLARSHIP	2,000
EMILY MAHR9124 330TH STREET BOYD, WI 54726		I	SCHOLARSHIP	2,000
Total ▶ 3a				999,356

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	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
Name and address (home or business)				
a <i>Paid during the year</i>				
HARRY MATESKI 455 GRANT STREET APT 4A STANLEY, WI 54768		I	SCHOLARSHIP	2,000
ISAIAH MCKNIGHT4379 131ST STREET CHIPPEWA FALLS, WI 54729		I	SCHOLARSHIP	2,000
CADE MEYER624 WESTHAVEN ROAD CHIPPEWA FALLS, WI 54729		I	SCHOLARSHIP	2,000
Total ▶ 3a				999,356

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	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
Name and address (home or business)				
a <i>Paid during the year</i>				
JAMES MIKULA19760 80TH STREET BLOOMER, WI 54724		I	SCHOLARSHIP	2,000
BENJAMIN MILAS9763 315TH STREET BOYD, WI 54726		I	SCHOLARSHIP	2,000
BRANDON MILAS14908 CTY HWY G BOYD, WI 54726		I	SCHOLARSHIP	2,000
Total ► 3a				999,356

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	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
Name and address (home or business)				
a <i>Paid during the year</i>				
ALEXIS MUNROE651 E NORTH ROAD CADOTT, WI 54727		I	SCHOLARSHIP	2,000
ELIJAH MUTTER-SCHULZ 851 WILSON STREET CHIPPEWA FALLS, WI 54729		I	SCHOLARSHIP	2,000
CARLIE NELSON36589 100TH AVENUE STANLEY, WI 54768		I	SCHOLARSHIP	2,000
Total ▶ 3a				999,356

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	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
Name and address (home or business)				
a <i>Paid during the year</i>				
BRYCE NICHOLS9063 355TH STREET STANLEY, WI 54768		I	SCHOLARSHIP	2,000
HAYLEY NICHOLS9063 355TH STREET STANLEY, WI 54768		I	SCHOLARSHIP	2,000
DYLAN NORTH529 S EAST STREET NEW AUBURN, WI 54757		I	SCHOLARSHIP	2,000
Total ▶ 3a				999,356

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	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
Name and address (home or business)				
a <i>Paid during the year</i>				
BROOKE NOWAK9680 168TH STREET CHIPPEWA FALLS, WI 54729		I	SCHOLARSHIP	2,000
GENEVA NUNES11812 120TH AVENUE CHIPPEWA FALLS, WI 54729		I	SCHOLARSHIP	2,000
HOPE NYE6799 CTY HWY XX CADOTT, WI 54727		I	SCHOLARSHIP	2,000
Total ► 3a				999,356

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

Recipient	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
Name and address (home or business)				
a <i>Paid during the year</i>				
GEORGIA O'CONNOR 31167 300TH AVENUE HOLCOMBE, WI 54745		I	SCHOLARSHIP	2,000
CODY OKERGLICKIN2030 CTY HWY H STANLEY, WI 54768		I	SCHOLARSHIP	2,000
COURTNEY PEDERSON 8024 223RD STREET CADOTT, WI 54727		I	SCHOLARSHIP	2,000
Total ▶ 3a				999,356

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	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
Name and address (home or business)				
a <i>Paid during the year</i>				
KENADI POIRIER4494 155TH AVENUE BLOOMER, WI 54724		I	SCHOLARSHIP	2,000
ALLISON PRILL315 IRVINE STREET CHIPPEWA FALLS, WI 54729		I	SCHOLARSHIP	2,000
COLLIN PRILL315 IRVINE STREET CHIPPEWA FALLS, WI 54729		I	SCHOLARSHIP	2,000
Total ► 3a				999,356

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	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
Name and address (home or business)				
a <i>Paid during the year</i>				
NADIA RADA8092 CTY HWY M NEW AUBURN, WI 54757		I	SCHOLARSHIP	2,000
JOSIE RADTKEN2570 CTY ROAD G BOYD, WI 54726		I	SCHOLARSHIP	2,000
TATE RUSSELL15581 20TH STREET COLFAX, WI 54730		I	SCHOLARSHIP	2,000
Total ▶ 3a				999,356

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	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
Name and address (home or business)				
a <i>Paid during the year</i>				
JENA SECRAW7332 67TH AVENUE CHIPPEWA FALLS, WI 54729		I	SCHOLARSHIP	2,000
MACKENZIE SHAKAL 9645 166TH STREET CHIPPEWA FALLS, WI 54729		I	SCHOLARSHIP	2,000
DAMIEN SHORT9867 171ST STREET CHIPPEWA FALLS, WI 54729		I	SCHOLARSHIP	2,000
Total ▶ 3a				999,356

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	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
Name and address (home or business)				
a <i>Paid during the year</i>				
JESSICA SIKORA30507 185TH AVENUE CORNELL, WI 54732		I	SCHOLARSHIP	2,000
ARIK SKIFSTAD3505 N HASTINGS WAY EAU CLAIRE, WI 54703		I	SCHOLARSHIP	2,000
BRANDY SLOWIAK254 E 2ND AVENUE STANLEY, WI 54768		I	SCHOLARSHIP	2,000
Total ▶ 3a				999,356

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	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
Name and address (home or business)				
a <i>Paid during the year</i>				
LEONA SONNENTAG 2720 295TH STREET CADOTT, WI 54727		I	SCHOLARSHIP	2,000
LUKE SPAETH33554 CTY HWY MM STANLEY, WI 54768		I	SCHOLARSHIP	2,000
AMANDA STAIB400 MADISON STREET STANLEY, WI 54768		I	SCHOLARSHIP	2,000
Total ▶ 3a				999,356

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	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
Name and address (home or business)				
a <i>Paid during the year</i>				
KATELYN STEINMETZ 624 DUTCHMAN DRIVE APT 3 CHIPPEWA FALLS, WI 54729		I	SCHOLARSHIP	2,000
NATALIE STEWART4818 183RD STREET CHIPPEWA FALLS, WI 54729		I	SCHOLARSHIP	2,000
NOELLE STRZOK29865 240TH STREET HOLCOMBE, WI 54745		I	SCHOLARSHIP	2,000
Total ▶ 3a				999,356

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	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
Name and address (home or business)				
a <i>Paid during the year</i>				
CATELYN SWENSON 17571 142ND AVENUE JIM FALLS, WI 54748		I	SCHOLARSHIP	2,000
KATIE SWOPE448 W MAPLE STREET STANLEY, WI 54768		I	SCHOLARSHIP	2,000
BENJAMIN TURNER 104 MCKNIGHT STREET STANLEY, WI 54768		I	SCHOLARSHIP	2,000
Total ▶ 3a				999,356

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	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
Name and address (home or business)				
a <i>Paid during the year</i>				
BRIANNA TURNER 104 MCKNIGHT STREET STANLEY, WI 54768		I	SCHOLARSHIP	2,000
ALLISON VITORTN1488 SKYLINE DRIVE STANLEY, WI 54768		I	SCHOLARSHIP	2,000
BRADY WEBSTER25486 293RD AVENUE HOLCOMBE, WI 54745		I	SCHOLARSHIP	2,000
Total ▶ 3a				999,356

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Recipient	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
Name and address (home or business)				
a <i>Paid during the year</i>				
GRACE WILLIAMS2381 CTY HWY D BOYD, WI 54726		I	SCHOLARSHIP	2,000
ZECHARIAH WOJTCZAK 8992 240TH STREET CADOTT, WI 54727		I	SCHOLARSHIP	2,000
COLE WOZNIAK33731 90TH AVENUE STANLEY, WI 54768		I	SCHOLARSHIP	2,000
Total ▶ 3a				999,356

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	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
Name and address (home or business)				
a <i>Paid during the year</i>				
CRYSTAL WOZNIAK 33731 90TH AVENUE STANLEY, WI 54768		I	SCHOLARSHIP	2,000
AMANDA WRIGHT467 E 1ST AVENUE STANLEY, WI 54768		I	SCHOLARSHIP	2,000
KENDALL ZEMAN19503 85TH STREET BLOOMER, WI 54724		I	SCHOLARSHIP	2,000
Total ▶ 3a				999,356

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

Recipient	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
Name and address (home or business)				
a <i>Paid during the year</i>				
OLIVIA ZWIEFELHOFER 2020 IVY STREET BLOOMER, WI 54724		I	SCHOLARSHIP	2,000
FAITH ANDERSON4136 125TH STREET CHIPPEWA FALLS, WI 54729		I	SCHOLARSHIP	1,500
LOGAN ANDERSON 16109 COUNTY HWY Y CHIPPEWA FALLS, WI 54729		I	SCHOLARSHIP	1,500
Total ▶ 3a				999,356

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	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
Name and address (home or business)				
a <i>Paid during the year</i>				
JESSICA BARR17615 100TH STREET BLOOMER, WI 54724		I	SCHOLARSHIP	1,500
JOHN BARR17615 100TH STREET BLOOMER, WI 54724		I	SCHOLARSHIP	1,500
BENJAMIN BOIEN13039 KOSER AVENUE THORP, WI 54771		I	SCHOLARSHIP	1,500
Total ▶ 3a				999,356

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	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
Name and address (home or business)				
a <i>Paid during the year</i>				
COLLIN BUNGARTZ16152 65TH STREET BLOOMER, WI 54724		I	SCHOLARSHIP	1,500
NATHALIE BURMEISTER 10425 161ST STREET CHIPPEWA FALLS, WI 54729		I	SCHOLARSHIP	1,500
OLIVIA BURMEISTER 10425 161ST STREET CHIPPEWA FALLS, WI 54729		I	SCHOLARSHIP	1,500
Total ▶ 3a				999,356

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	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
Name and address (home or business)				
a <i>Paid during the year</i>				
ALYSSA DACHEL2641 125TH AVENUE COLFAX, WI 54730		I	SCHOLARSHIP	1,500
AVA DACHEL21515 CTY HWY DD NEW AUBURN, WI 54757		I	SCHOLARSHIP	1,500
BAILEY DUCOMMUN 1558 ECHO RIDGE ROAD S ROCHESTER, MN 55902		I	SCHOLARSHIP	1,500
Total ▶ 3a				999,356

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	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
Name and address (home or business)				
a <i>Paid during the year</i>				
KATHERINE FARIS5966 188TH STREET CHIPPEWA FALLS, WI 54729		I	SCHOLARSHIP	1,500
PAYTON FREAGON537 E OAK STREET CADOTT, WI 54727		I	SCHOLARSHIP	1,500
FELISHA GLOMSKI22564 45TH AVENUE CADOTT, WI 54727		I	SCHOLARSHIP	1,500
Total ► 3a				999,356

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	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
Name and address (home or business)				
a <i>Paid during the year</i>				
BENJAMIN GOETTL15621 CTY HWY G STANLEY, WI 54768		I	SCHOLARSHIP	1,500
MEGAN GOODMAN14487 360TH STREET STANLEY, WI 54768		I	SCHOLARSHIP	1,500
MITCHELL GUNDERSON 26211 135TH AVENUE CADOTT, WI 54727		I	SCHOLARSHIP	1,500
Total ▶ 3a				999,356

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Recipient	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
Name and address (home or business)				
a <i>Paid during the year</i>				
TAYLOR HEDRINGTON 18771 72ND AVENUE CHIPPEWA FALLS, WI 54729		I	SCHOLARSHIP	1,500
JENNA HOFFSTATTER 9336 360TH STREET STANLEY, WI 54768		I	SCHOLARSHIP	1,500
EMILY HOLLOWAY10261 230TH AVENUE BLOOMER, WI 54724		I	SCHOLARSHIP	1,500
Total ▶ 3a				999,356

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Recipient	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
Name and address (home or business)				
a <i>Paid during the year</i>				
MAZIE JACKAN9675 166TH STREET CHIPPEWA FALLS, WI 54729		I	SCHOLARSHIP	1,500
HAILEY JARR8679 CTY HWY C BLOOMER, WI 54724		I	SCHOLARSHIP	1,500
KARISSA LAUER18497 60TH STREET BLOOMER, WI 54724		I	SCHOLARSHIP	1,500
Total ► 3a				999,356

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Recipient	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
Name and address (home or business)				
a <i>Paid during the year</i>				
MIKAYLA LEBAKKEN 11840 165TH AVENUE BLOOMER, WI 54724		I	SCHOLARSHIP	1,500
ORIANNA LEBAL30307 CTY HWY G SHELDON, WI 54766		I	SCHOLARSHIP	1,500
ALLISON LINDQUIST 6323 17TH AVENUE EAU CLAIRE, WI 54703		I	SCHOLARSHIP	1,500
Total ▶ 3a				999,356

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	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
Name and address (home or business)				
a <i>Paid during the year</i>				
ALEXANDER LISIECKI 342 S FRANKLIN STREET STANLEY, WI 54768		I	SCHOLARSHIP	1,500
MASEN MILLER2119 9TH AVENUE BLOOMER, WI 54724		I	SCHOLARSHIP	1,500
GRACE POST26755 160TH STREET NEW AUBURN, WI 54757		I	SCHOLARSHIP	1,500
Total ▶ 3a				999,356

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	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
Name and address (home or business)				
a <i>Paid during the year</i>				
ZACH RUF21441 175TH STREET CORNELL, WI 54732		I	SCHOLARSHIP	1,500
MEGAN SARAUER6713 190TH AVENUE BLOOMER, WI 54724		I	SCHOLARSHIP	1,500
KARISSA SCHILLINGER 33208 115TH AVENUE BOYD, WI 54726		I	SCHOLARSHIP	1,500
Total ▶ 3a				999,356

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	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
Name and address (home or business)				
a <i>Paid during the year</i>				
JACK SKIFSTAD3505 N HASTINGS WAY EAU CLAIRE, WI 54703		I	SCHOLARSHIP	1,500
HEIDI SKWIERCZYNSKI 2552 106TH STREET EAU CLAIRE, WI 54703		I	SCHOLARSHIP	1,500
KENDRA SKWIERCZYNSKI 2552 106TH STREET EAU CLAIRE, WI 54703		I	SCHOLARSHIP	1,500
Total ▶ 3a				999,356

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

Recipient	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
Name and address (home or business)				
a <i>Paid during the year</i>				
AUSTIN SYKORA9727 129TH STREET CHIPPEWA FALLS, WI 54729		I	SCHOLARSHIP	1,500
BRAXTON THOMPSON 112 S MICHAEL STREET BOYD, WI 54726		I	SCHOLARSHIP	1,500
ERIC WACHTENDOCK 6321 186TH AVENUE BLOOMER, WI 54724		I	SCHOLARSHIP	1,500
Total ▶ 3a				999,356

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Recipient	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
Name and address (home or business)				
a <i>Paid during the year</i>				
MADELINE WAHL20512 80TH AVENUE CADOTT, WI 54727		I	SCHOLARSHIP	1,500
CLAIRE WALTER14727 106TH AVENUE CHIPPEWA FALLS, WI 54729		I	SCHOLARSHIP	1,500
CARTER WELCH5037 190TH AVENUE BLOOMER, WI 54724		I	SCHOLARSHIP	1,500
Total ▶ 3a				999,356

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Recipient	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
Name and address (home or business)				
a <i>Paid during the year</i>				
NICOLE WINIARCZYK 9690 280TH AVENUE NEW AUBURN, WI 54757		I	SCHOLARSHIP	1,500
KENDRA YODER 1535 ENGLEWOOD AVENUE B ST PAUL, MN 55104		I	SCHOLARSHIP	1,500
EASTER SEALS WI CAMP 8001 EXCELSIOR DRIVE SUITE MADISON, WI 53717		PC	AID AND ASSIST, CAMP FUNDING REQUEST	1,136
Total ▶ 3a				999,356

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Recipient	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
Name and address (home or business)				
a <i>Paid during the year</i>				
SENIOR REVIEW (BRIDGING CHIPPEWA CO) PAPER 3315 NIMITZ STREET EAU CLAIRE, WI 54071		PC	AID AND ASSIST, SENIOR PAPER	1,000
CHIPPEWA COUNTY DEPT OF PUBLIC HEALTHCOMM OUTREACH 711 N BRIDGE STREET ROOM CHIPPEWA FALLS, WI 54729		GOV	AID AND ASSIST, CORP PROGRAM	1,000
ALZHEIMER'S ASSOCIATION 404 1/2 N BRIDGE STREET CHIPPEWA FALLS, WI 54729		PC	AID AND ASSIST, WALK TO END ALZHEIMERS	1,000
Total			▶ 3a	999,356

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Recipient	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
Name and address (home or business)				
a <i>Paid during the year</i>				
ALANO CLUB 76 INC 76 E CENTRAL STREET CHIPPEWA FALLS, WI 54729		PC	AID AND ASSIST, CHARITABLE CONTRIBUTION	1,000
EMILY ANDERSON18781 72ND AVENUE CHIPPEWA FALLS, WI 54729		I	SCHOLARSHIP	1,000
KYRA ARENDT9044 125TH AVENUE BLOOMER, WI 54724		I	SCHOLARSHIP	1,000
Total ▶ 3a				999,356

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Recipient	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
Name and address (home or business)				
a <i>Paid during the year</i>				
DANIELLE BELAU1634 EAGLE STREET CHIPPEWA FALLS, WI 54729		I	SCHOLARSHIP	1,000
AUSTIN BURZYNSKI6993 CTY HWY H STANLEY, WI 54768		I	SCHOLARSHIP	1,000
BRYCE ELKIN9566 137TH STREET CHIPPEWA FALLS, WI 54729		I	SCHOLARSHIP	1,000
Total ► 3a				999,356

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Recipient	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
Name and address (home or business)				
a <i>Paid during the year</i>				
BRYCE ERICKSON4743 270TH STREET CADOTT, WI 54727		I	SCHOLARSHIP	1,000
BRADY GOETTL26975 30TH AVENUE CADOTT, WI 54727		I	SCHOLARSHIP	1,000
ADRIANNA KIRCKOF501 OAK STREET STANLEY, WI 54768		I	SCHOLARSHIP	1,000
Total ▶ 3a				999,356

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	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
Name and address (home or business)				
a Paid during the year				
ALEXIS KRAMER206 W HILLSIDE DRIVE CADOTT, WI 54727		I	SCHOLARSHIP	1,000
MAGGIE MCLOONE 825 N BROADWAY STREET STANLEY, WI 54768		I	SCHOLARSHIP	1,000
EMMA MEYER624 WESTHAVEN ROAD CHIPPEWA FALLS, WI 54729		I	SCHOLARSHIP	1,000
Total ▶ 3a				999,356

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	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
Name and address (home or business)				
a <i>Paid during the year</i>				
ALEXANDER MUELLER 530 WOODWARD AVENUE CHIPPEWA FALLS, WI 54729		I	SCHOLARSHIP	1,000
RYAN RATCLIFF 1619 THOMPSON STREET BLOOMER, WI 54724		I	SCHOLARSHIP	1,000
KATHRYN ROKENBRODT 4170 143RD STREET CHIPPEWA FALLS, WI 54729		I	SCHOLARSHIP	1,000
Total ► 3a				999,356

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	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
Name and address (home or business)				
a <i>Paid during the year</i>				
LUCAS SCHMELZER 900 N BROADWAY STREET STANLEY, WI 54768		I	SCHOLARSHIP	1,000
MEGAN SECRAW7332 67TH AVENUE CHIPPEWA FALLS, WI 54729		I	SCHOLARSHIP	1,000
HOLLY SMITHN950 MEYER ROAD BOYD, WI 54726		I	SCHOLARSHIP	1,000
Total ▶ 3a				999,356

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
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Name and address (home or business)				
a <i>Paid during the year</i>				
JAKE SONNENTAG6443 350TH STREET STANLEY, WI 54768		I	SCHOLARSHIP	1,000
RYAN SWENSON17571 142ND AVENUE JIM FALLS, WI 54748		I	SCHOLARSHIP	1,000
KAITLYN TICE10526 CTY HWY S SOUTH CHIPPEWA FALLS, WI 54729		I	SCHOLARSHIP	1,000
Total ► 3a				999,356

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	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
Name and address (home or business)				
a <i>Paid during the year</i>				
CLINT WARMINSKIW11860 PINE ROAD STANLEY, WI 54768		I	SCHOLARSHIP	1,000
MAKAYLA ROMUNDSTAD 11648 200TH STREET JIM FALLS, WI 54748		I	SCHOLARSHIP	1,000
OLIVER SHAKAL20109 77TH AVENUE CHIPPEWA FALLS, WI 54729		I	SCHOLARSHIP	1,000
Total ▶ 3a				999,356

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	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
Name and address (home or business)				
a Paid during the year				
CHIPPEWA COUNTY DEPT OF HUMAN SERVICES CAMP 711 N BRIDGE STREET CHIPPEWA FALLS, WI 54729		GOV	AID AND ASSIST, CAMP FUNDING REQUEST	966
NATIONAL CHILD SAFETY COUNCIL 32 E SPRUCE STREET CHIPPEWA FALLS, WI 54729		PC	AID AND ASSIST, CHILD SAFETY AND DRUG PREVENTION EDUCATION PROGRAM	250
NATIONAL FIRE SAFETY COUNCIL 1301 CHIPPEWA CROSSING CHIPPEWA FALLS, WI 54729		PC	AID AND ASSIST, CHIPPEWA CO. PROGRAM	120
Total ► 3a				999,356

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	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
Name and address (home or business)				
a <i>Paid during the year</i>				
WILLIE MCNEAL802 FOX ROAD CORNELL, WI 54732		I	RELIEF/CHARITY	50
JAMIE JOHNSON14177 47TH AVENUE CHIPPEWA FALLS, WI 54729		I	RELIEF/CHARITY	50
KELCY JOHNSON26290 274TH STREET HOLCOMBE, WI 54745		I	RELIEF/CHARITY	44
Total ▶ 3a				999,356

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	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
Name and address (home or business)				
a <i>Paid during the year</i>				
BRIAN KING14279 CTY HWY D CORNELL, WI 54732		I	RELIEF/CHARITY	48
JAYME HALL 303 W GARDEN STREET APT CHIPPEWA FALLS, WI 54729		I	RELIEF/CHARITY	20
LARRY BOOTH6 W GRAND AVENUE CHIPPEWA FALLS, WI 54729		I	RELIEF/CHARITY	-10
Total ▶ 3a				999,356

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	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
Name and address (home or business)				
a <i>Paid during the year</i>				
JEFFREY TEUBERT3097 CTY HWY OO CHIPPEWA FALLS, WI 54729		I	RELIEF/CHARITY	20
SHEILA WATHKE18597 54TH AVENUE CHIPPEWA FALLS, WI 54729		I	RELIEF/CHARITY	-38
Total ▶ 3a				999,356

TY 2019 Investments Corporate Bonds Schedule

Name: EDWARD AND HANNAH M RUTLEDGE CHARITIES
INC

EIN: 39-0806178

Investments Corporate Bonds Schedule

Name of Bond	End of Year Book Value	End of Year Fair Market Value
200M CD - CITIBANK NATL ASSN	200,000	239,580
95M PFIZER INC. 3.40% 5-15-24	97,284	105,955
95M AMAZON COM. INC. 3.80% 12-5-24	97,178	107,710
95M APPLE INC. 2.50% 2-9-25	90,461	102,786
90M ORACLE CORP. 3.25% 5-15-30	85,206	101,782
90M MICROSOFT CORP. 3.50% 2-12-35	84,263	109,353
100M MCDONALDS CORP. 3.70% 2-15-42	87,607	110,178
100M PEPSICO INC. 3.60% 8-13-42	95,087	117,388

TY 2019 Investments Corporate Stock Schedule

Name: EDWARD AND HANNAH M RUTLEDGE CHARITIES
INC
EIN: 39-0806178

Investments Corporation Stock Schedule

Name of Stock	End of Year Book Value	End of Year Fair Market Value
7000 HALLIBURTON	29,184	82,320
5000 JOHNSON & JOHNSON	16,822	743,000
8000 MERCK	127,164	645,600
100 NW BANCSHARES	262,374	458,900
271 SPECTRUM	0	6,832
AMERICAN FUNDS AMERICAN BALANCED	280,437	574,157
AMERICAN FUNDS AMCAP FUND	477,858	1,137,100
AMERICAN FUNDS BOND FUND OF AMERICA	150,000	193,036
AMERICAN FUNDS CAPITAL INCOME BUILDERS	208,200	240,694
AMERICAN FUNDS FUNDAMENTAL INV	434,947	1,115,208
AMERICAN FUNDS GROWTH FUND	753,501	1,414,035
AMERICAN FUNDS INCOME FUND	208,200	273,846
AMERICAN FUNDS NEW WORLD	200,000	273,530
AMERICAN FUNDS STRATEGIC BOND	149,312	159,514
ORGEL WEALTH MANAGEMENT AMCAPFUND	337,059	377,893
ORGEL WEALTH MANAGEMENT EUROPACIFIC	687,626	700,115
ROWE T PRICE MID CAP GROWTH	540,238	673,241
VANGUARD SHORT TERM INV.	1,225,530	1,260,185
JOHCM EMERGING MARKETS OPPORTUNITIES FUND	773,326	659,622
WELLS FARGO ADVTG SPECIAL MID CAP	929,700	954,736
FROST TOTAL RETURN BOND FUND	2,126,920	2,029,210
VANGUARD SHORT TERM TREASURY	1,033,199	1,057,740
SCHWAB INTERNATIONAL INDEX FUND	1,006,526	1,095,085
JP MORGAN STRATEGIC INCOME OPPORTUNITIES FUND	796,600	817,970
JENSEN PORTFOLIO INC.	624,668	763,693
AQR LARGE CAP DEFENSIVE STYLE	773,880	929,968
DELAWARE SMALL CAP CORE FUND	835,055	786,118
FIDELITY U.S. BOND INDEX FUND	1,552,900	1,670,915
VANGUARD TOTAL STOCK MARKET INDEX FUND ADMIRAL SHARES	1,638,104	1,741,787
ASHMORE EMERGING MARKETS	500,318	354,518

TY 2019 Other Expenses Schedule

Name: EDWARD AND HANNAH M RUTLEDGE CHARITIES
INC

EIN: 39-0806178

Other Expenses Schedule

Description	Revenue and Expenses per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
OFFICE SUPPLIES	1,158	290		868
POSTAGE	1,057	264		793
TELEPHONE	1,751	438		1,313
PROFESSIONAL FEES	54,984	13,746		41,238
ABSTRACT AND FILING FEES	50	13		37
MISCELLANEOUS OFFICE EXPENSE	722	181		541
HEALTH INSURANCE	5,302	1,325		3,977
REPAIRS	177	44		133

TY 2019 Other Income Schedule

Name: EDWARD AND HANNAH M RUTLEDGE CHARITIES
INC

EIN: 39-0806178

Other Income Schedule

Description	Revenue And Expenses Per Books	Net Investment Income	Adjusted Net Income
EXPENSE REIMBURSEMENTS	25,000	25,000	25,000
NW BANCSHARES	78,077	0	0

TY 2019 Taxes Schedule

Name: EDWARD AND HANNAH M RUTLEDGE CHARITIES
INC

EIN: 39-0806178

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
FEDERAL EXCISE TAX	11,416	0		0
REAL ESTATE TAXES	1,183	296		887
UBIT TAX	36,550	0		0
SPECIAL ASSESSMENT	23,481	5,870		17,611