Form 990-PF

Return of Private Foundation

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

Do not enter social security numbers on this form as it may be made public.

N/A

Form 990-PF (2019)

Department of the Treasury Internal Revenue Service ► Go to www.irs gov/Form990PF for instructions and the latest information. For calendar year 2019 or tax year beginning JUN 1, 2019 , and ending 2020 Name of foundation A Employer identification number HELIOS FOUNDATION C/O SCHAPER, BENZ & WISE INV. CNSL. 39-1532106 Number and street (or P O box number if mail is not delivered to street address) Room/suite B Telephone number 18 JEWELERS PARK, SUITE 200; PO BOX 628 920-727-1137 City or town, state or province, country, and ZIP or foreign postal code C If exemption application is pending, check here 54957-0628 NEENAH, WI G Check all that apply Initial return Initial return of a former public charity D 1 Foreign organizations, check here Final return Amended return 2 Foreign organizations meeting the 85% test, check here and attach computation Address change Name change Section 501(c)(3) exempt private foundation H Check type of organization: E If private foundation status was terminated Section 4947(a)(1) nonexempt charitable trust Other taxable private foundation under section 507(b)(1)(A), check here Fair market value of all assets at end of year | J Accounting method X Cash F If the foundation is in a 60-month termination (from Part II, col. (c), line 16) Other (specify) under section 507(b)(1)(B), check here 11, 221, 556. (Part I, column (d), must be on cash basis.) ▶\$ Part I Analysis of Revenue and Expenses (d) Disbursements for charitable purposes (cash basis only) (a) Revenue and (b) Net investment (c) Adjusted net (The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a)) expenses per books income income 918,067 Contributions, gifts, grants, etc., received N/A 2 Check I If the foundation is not required to attach Sch. B Interest on savings and temporary cash investments Internal Reven STATEMENT Received US Bank - USB 210,800. 210,800 Dividends and interest from securities 5a Gross rents b Net rental income or (loss) 95,561 6a Net gain or (loss) from sale of assets not on line 10 b Gross sales price for all assets on line 6a 615,257. 95,561 7 Capital gain net income (from Part IV, line 2) 8 Net short-term capital gain Ogden UT Income modifications 10a Gross sales less returns and allowances b Less Cost of goods sold c Gross profit or (loss) 11 Other income 224,428. 306,361 Total Add lines 1 through 11 89,403. 52,052 37,351. Compensation of officers, directors, trustees, etc 14 Other employee salaries and wages 15 Pension plans, employee benefits
16a Legal fees S

b Accounting fees
c Other professional fees
17 Interest
18 Taxes S
19 Depreciation and depletion
20 Occupancy
21 Travel, conferences, and meetings
22 Printing and publications
23 Other expenses S
24 Total operating and administrative expenses Add lines 13 through 23
25 Contributions, gifts, grants paid 15 Pension plans, employee benefits 0. STMT 2 2,135. 0 12,820 STMT 3 0 0. 174. STMT 4 0 0. 24 Total operating and administrative 104,532. 52,052 expenses Add lines 13 through 23 <u>37,351.</u> 525,000. 25 Contributions, gifts, grants paid 525,000. 26 Total expenses and disbursements 629,532 52,052 Add lines 24 and 25 562,351. 27 Subtract line 26 from line 12 594,896 a Excess of revenue over expenses and disbursements b Net investment income (if negative, enter -0-) 254,309

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C Adjusted net income (if negative, enter -0-)

C/O SCHAPER, BENZ & WISE INV. CNSL.

39-1532106

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Pai	Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only	Beginning of year	End of	year
	column should be for end-of-year amounts only	(a) Book Value	(b) Book Value	(c) Fair Market Value
	1 Cash - non-interest-bearing			
:	2 Savings and temporary cash investments	94,413.	266,898.	266,898.
;	Accounts receivable ►			
- 1	Less. allowance for doubtful accounts ▶			
4	Pledges receivable ▶			
	Less allowance for doubtful accounts			
8	Grants receivable		-	
- 1 6	Receivables due from officers, directors, trustees, and other			
	disqualified persons			
-	Other notes and loans receivable		-	
	Less: allowance for doubtful accounts			
σ s	Inventories for sale or use	-		· · · · · · · · · · · · · · · · · · ·
Assets				
¥ 3	a Investments - U.S. and state government obligations. STMT 5	700 607	902 627	010 504
'	_ }	788,697.	892,637.	918,594.
- }	b Investments - corporate stock STMT 6	5,921,022.	6,100,449.	9,582,726.
- I	c Investments - corporate bonds STMT 7	195,959.	299,075.	310,298.
11	Investments - land, buildings, and equipment basis	ı.		
	Less accumulated depreciation			
12				
13	Investments - other STMT 8	147,886.	183,814.	143,040.
14	Land, buildings, and equipment basis			
- 1	Less accumulated depreciation			
15	Other assets (describe)			
16	Total assets (to be completed by all filers - see the			
	instructions. Also, see page 1, item I)	7,147,977.	7,742,873.	11,221,556.
17	Accounts payable and accrued expenses			
18	· · · · · · · · · · · · · · · · · · ·			
١.,	```			· · · · · · · · · · · · · · · · · · ·
<u>₽</u> 20	-			<u> </u>
Liabilities 02 21 22 22 22 22 22 22 22 22 22 22 22 22				· · · · · · · · · · · · · · · · · · ·
ر ا در	Other liabilities (describe)			
)			
23	Total liabilities (add lines 17 through 22)	0.	0.	
123	Foundations that follow FASB ASC 958, check here	<u></u>		
,,				
Se	and complete lines 24, 25, 29, and 30			
	Net assets without donor restrictions			
rg 25	F			
	Foundations that do not follow FASB ASC 958, check here			
2	and complete lines 26 through 30			
25 26 27 28 29 29 29 29 29 29 29 29 29 29 29 29 29	Capital stock, trust principal, or current funds	7,147,977.	7,742,873.	
27	Paid-in or capital surplus, or land, bldg , and equipment fund	0.	0.	
g 28	Retained earnings, accumulated income, endowment, or other funds	0.	0.	
29	Total net assets or fund balances	7,147,977.	7,742,873.	, ,
2			,	
30	Total liabilities and net assets/fund balances	7,147,977.	7,742,873.	
Part	III Analysis of Changes in Net Assets or Fund Ba			
rari	Analysis of Changes in Net Assets of Fund Ba			
Tota	I net assets or fund balances at beginning of year - Part II, column (a), line 2	9		
(mu	st agree with end-of-year figure reported on prior year's return)		1	7,147,977.
	r amount from Part I, line 27a		2	594,896.
	r increases not included in line 2 (itemize)		3	0.
	lines 1, 2, and 3		4	7,742,873.
	reases not included in line 2 (itemize)		5	
	I net assets or fund balances at end of year (line 4 minus line 5) - Part II, coli	ımı (h) line 29	6	7,742,873.
. 0.0	- 101 doubte of futio buildings at one of year time 4 millios line of - Falt II, coll		101	Form 990-PF (2019)

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		s) of property sold (for exa or common stock, 200 sh		ate,	P - Pi	acquired irchase onation	(c) Date (mo., d	acquired ay, yr)	(d) Date sold (mo., day, yr)
<u>1a</u>								-	
b SEE ATTACHE	D STA	TEMENTS			ļ				
C		 		· · · · · · · · · · · · · · · · · · ·	<u> </u>				
<u>d</u>		 _			1			_	<u> </u>
е	(4)	Donnoustion allowed	/-> 0-			1			
(e) Gross sales price	(1)	Depreciation allowed (or allowable)		st or other basis expense of sale			(e) plus	ain or (loss) (f) minus ((g))
<u>a</u>					+	•			- ,
C									-
d		<u>.</u>							
e 615,257			<u> </u>	519,69	16.				95,5 <u>61</u> .
Complete only for assets show			the foundation	n on 12/31/69.				ol. (h) gain	
(i) FMV as of 12/31/69	((j) Adjusted basis as of 12/31/69	. , ,	xcess of col (i) col. (j), if any		CC		ot less than (from col. (
a									
b			_						
_ C							-		
_d	ļ								
<u>e</u>	<u> </u>		<u> </u>						95,561.
2 Capital gain net income or (net o	apital loss)	If gain, also enter for the loss of the lo	r in Part I, line - in Part I, line	7 7	} 2				95,561.
3 Net short-term capital gain or (lo	oss) as defu	•							
If gain, also enter in Part I, line 8			.0 (0).		λ	-			
If (loss), enter -0- in Part I, line 8 Part V Qualification I	3	ection 4940(e) for			<u>}</u> 3			N/A	
f section 4940(d)(2) applies, leave Vas the foundation liable for the se f "Yes," the foundation doesn't qual	ction 4942 ify under se	tax on the distributable ametion 4940(e). Do not con	nplete this par	t					Yes X No
Enter the appropriate amount in	each colun	nn for each year, see the ir	istructions be	fore making any e	ntries.				
(a) Base period years Calendar year (or tax year beginn	ıng ın)	(b) Adjusted qualifying dis	tributions	Net value of no	(c) ncharitabl	e-use assets	. (Distribi col. (b) divi	(d) ution ratio ded by col. (c))
2018		56	1,839.		10,6	03,224	1.		.052988
2017		66	7,875.			96,315			.075927
2016			2,358.		4,9	08,747	7.		.069744
2015			5,035.			98,367			.077694
2014		32	0,888.		4,9	63,14 <u>9</u>).		.064654
Total of line 1, column (d)							2		.341007
Average distribution ratio for the the foundation has been in existe			on line 2 by 5 (), or by the numbe	er of years	;	3		.068201
Enter the net value of noncharital	nle-use assi	ets for 2019 from Part X I	ine 5				4	11	L,052,663.
	Jio 436 433	יייי ביייייייייייייייייייייייייייייייי	inic o						
Multiply line 4 by line 3							5		<u>753,803.</u>
Enter 1% of net investment incor	ne (1% of F	Part I, line 27b)					6		2,543.
Add lines 5 and 6	-						7	-	756,346.
Enter qualifying distributions from							8		562,351.
If line 8 is equal to or greater than See the Part VI instructions	ı lıne 7, che	ck the box in Part VI, line	1b, and comp	lete that part using	g a 1% tax	rate			

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	m 990-PF (2019) C/O SCHAPER, BENZ & WISE INV. CNSL. 39-153	<u> 2106</u>		Page 4
_	art VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 - see	instru	uctio	ns)
1	a Exempt operating foundations described in section 4940(d)(2), check here \(\bigcup \] 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%		<u>5,0</u>	86.
	of Part I, line 27b			
	c All other domestic foundations enter 2% of line 27b Exempt foreign organizations, enter 4% of Part I, line 12, col. (b)			
	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only; others, enter -0-)		<u></u>	0.
3			5,0	86.
4	(), (), (), (), (), (), (), (),			0.
5	100,000		5,0	86.
6				
	a 2019 estimated tax payments and 2018 overpayment credited to 2019 6a 9,000.			
	b Exempt foreign organizations - tax withheld at source 6b 0 •			
	c Tax paid with application for extension of time to file (Form 8868) d Backup withholding erroneously withheld 6c 0.			
			0 0	
	Total credits and payments. Add lines 6a through 6d Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached.		9,0	00.
				0.
	Tax due If the total of lines 5 and 8 is more than line 7, enter amount owed Overpayment If line 7 is more than the total of lines 5 and 8, enter the amount overpaid		3 0	14.
	Enter the amount of line 10 to be: Credited to 2020 estimated tax		3,3	0.
	art VII-A Statements Regarding Activities			<u> </u>
	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in	\top	Yes	No
	any political campaign?	1a		X
t	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes? See the instructions for the definition	1b		X
	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?	1c		X
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 ▶ \$ 0.		i	
е	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation	Ì		
	managers > \$O.			}
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?	2		X
	If "Yes," attach a detailed description of the activities			ĺ
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	3		X
	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	4a		X
	If "Yes," has it filed a tax return on Form 990-T for this year? N/A	4b	_	
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?	5		X
_	If "Yes," attach the statement required by General Instruction T			
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either. • By language in the governing instrument, or			ĺ
	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?		v	
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	7	X	
•	Signal is the second that at loads wo, ood in addition at any time during the year. It is eas, configurate Fait is, coi. (c), and Fait Av			
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? If "No," attach explanation	8b	Х	
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	9		X
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses	10		X
		000	חר	100.101

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P	art 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		_X
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had advisory privileges?			
	If "Yes," attach statement. See instructions	12		X
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	X	
	Website address ► N/A			
14	The books are in care of ► KIMBERLY PETERSEN, SCHAPER, BENZ & Telephone no. ► 920-72	<u> 27-1</u>	<u> 137</u>	
	Located at ► 18 JEWELERS PARK, SUITE 200; PO BOX 628, NEENAH, ZIP+4 ►5	<u> 1957</u>	<u>-06</u>	28
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	<u> </u>	/A	
16	At any time during calendar year 2019, did the foundation have an interest in or a signature or other authority over a bank,		Yes	No
	securities, or other financial account in a foreign country?	16		X
	See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes," enter the name of the			
	foreign country			
Pa	art 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
18	During the year, did the foundation (either directly or indirectly)			
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person?			
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from)			
	a disqualified person?			
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?			
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? X 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)?			
	(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.)			
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		Х
	Organizations relying on a current notice regarding disaster assistance, check here			
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		Х
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation			
	defined in section 4942(j)(3) or 4942(j)(5))			
а	At the end of tax year 2019, did the foundation have any undistributed income (Part XIII, lines		ŀ	
	6d and 6e) for tax year(s) beginning before 2019?		' ·	
	If "Yes," list the years			
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) N/A	2b		
c	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here			
-	>		İ	
3a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time		Ī	
	during the year? Yes X No			
h	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,]	ļ	
	Schedule C, to determine if the foundation had excess business holdings in 2019) N/A	3ь		
42	Did the foundation invest during the year any amount in a manner that would repardize its charitable purposes?	42	-	

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?

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5a During the year, did the foundation pay or incur any amount to				1	Yes	No
(1) Carry on propaganda, or otherwise attempt to influence legislation (sectio	п 4945(e))?	Y	es 🗶 No			
(2) Influence the outcome of any specific public election (see section 4955), of	or to carry on, directly or indi			1		,
any voter registration drive?			es X No	-		
(3) Provide a grant to an individual for travel, study, or other similar purposes		Y	es X No			
(4) Provide a grant to an organization other than a charitable, etc., organization	on described in section					
4945(d)(4)(A)? See instructions			es X No			
(5) Provide for any purpose other than religious, charitable, scientific, literary,	, or educational purposes, or					
the prevention of cruelty to children or animals?			es 🗶 No	ĺ		
b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify un		in Regulations	/-			
section 53 4945 or in a current notice regarding disaster assistance? See instr			N/A	5b		
Organizations relying on a current notice regarding disaster assistance, check						
c If the answer is "Yes" to question 5a(4), does the foundation claim exemption f		_				
expenditure responsibility for the grant?	1	N/A LY	es L No		ļ	
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 a personal benefit contract?	pay premiums on		es X No	ŀ		
•	arrangal banafit anatrant?	Y (es LALINO	er	ŀ	v
b Did the foundation, during the year, pay premiums, directly or indirectly, on a p If "Yes" to 6b, file Form 8870.	personal delient contract?		}	6b		_ X
	shaltar transaction?		es X No	}		
7a At any time during the tax year, was the foundation a party to a prohibited tax s b If "Yes," did the foundation receive any proceeds or have any net income attribute.		TI	N/A	7b		
8 Is the foundation subject to the section 4960 tax on payment(s) of more than \$		nr	IN/A	70		
excess parachute payment(s) during the year?	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		es X No		ŀ	
Part VIII Information About Officers, Directors, Trust	ees Foundation Ma					
Paid Employees, and Contractors	ooo, i oundution iii	unagoro, mgm	,			
1 List all officers, directors, trustees, and foundation managers and t	heir compensation.					
	(b) Title, and average	(c) Compensation	(d) Contributions to employee benefit plans and deferred	(€) Exp	ense other
(a) Name and address	hòurs per week devoted to position	(if not paid, enter -0-)	and deferred compensation	acc	count, Howar	other
			,	1		
· ·						
SEE STATEMENT 9		89,403.	0	.		0.
		j				
2 Compensation of five highest-paid employees (other than those inc	· · · · · · · · · · · · · · · · · · ·	enter "NONE."	(d) Carlob Sara			
(a) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week	(c) Compensation	(d) Contributions to employee benefit plans and deferred	e (e	e) Expe count,	ense other
	devoted to position	(O) companeation	compensation	al	llowan	ices
NONE	4					
			•	<u> </u>		
		ļ				
		i				
			<u> </u>	—		
Total number of other employees paid over \$50,000			<u> </u>			0

HELIOS FOUNDATION

Form 990-PF (2019) C/O SCHAPER, BENZ & WISE INV. CNSL.	20 151	2106 0007
Form 990-PF (2019) C/O SCHAPER, BENZ & WISE INV. CNSL. Part VIII Information About Officers, Directors, Trustees, Foundation I		32106 Page 7
Paid Employees, and Contractors (continued)	wianagers, nignly	
3 Five highest-paid independent contractors for professional services. If none, enter "NON	IE."	
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
SCHAPER, BENZ & WISE INVESTMENT COUNSEL, INC.		
- 18 JEWELERS PARK, SUITE 200, PO BOX 628, IN	VESTMENT MGMT	69,403
		`
		
Total number of others receiving over \$50,000 for professional services		>
Part IX-A Summary of Direct Charitable Activities		
List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical info	ormation such as the	
number of organizations and other beneficiaries served, conferences convened, research papers produced, e	tc.	Expenses
NOT APPLICABLE		
		0
		_
SEE STATEMENT 10		0.
<u> </u>		
Part IX-B Summary of Program-Related Investments		
Describe the two largest program-related investments made by the foundation during the tax year on lines 1 a	and 2.	Amount
NONE		
,		
		0.
2		
All other program-related investments. See instructions.	-	
NONE		

Total. Add lines 1 through 3

Minimum Investment Return (All domestic foundations must complete this part. Foreign foundations, see instructions.) 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 10,708,550. 1a 512,428. Average of monthly cash balances 1b Fair market value of all other assets c 1c 220,978. Total (add lines 1a, b, and c) 1d Reduction claimed for blockage or other factors reported on lines 1a and 0. 1c (attach detailed explanation) 1e Acquisition indebtedness applicable to line 1 assets 2 2 11,220,978. Subtract line 2 from line 1d 3 Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions) 4 168,315. 11,052,663. Net value of noncharitable-use assets Subtract line 4 from line 3. Enter here and on Part V. line 4 5 552,633. Minimum investment return Enter 5% of line 5 6 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) 552,633. Minimum investment return from Part X, line 6 1 5,086 Tax on investment income for 2019 from Part VI, line 5 2a Income tax for 2019 (This does not include the tax from Part VI) 2b 5,086. Add lines 2a and 2b c Distributable amount before adjustments. Subtract line 2c from line 1 547,547. 3 3 Recoveries of amounts treated as qualifying distributions 4 5 Add lines 3 and 4 5 Deduction from distributable amount (see instructions) 6 6 7 Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1 Part XII Qualifying Distributions (see instructions) Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes 1 562,351. a Expenses, contributions, gifts, etc - total from Part I, column (d), line 26 1a b Program-related investments - total from Part IX-B 1b Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes 2 Amounts set aside for specific charitable projects that satisfy the 3 a Suitability test (prior IRS approval required) 3a Cash distribution test (attach the required schedule) 36 562,351. Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4 4 Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income. Enter 1% of Part I, line 27b 5 Adjusted qualifying distributions. Subtract line 5 from line 4 6 Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation qualifies for the section

Form **990-PF** (2019)

4940(e) reduction of tax in those years

Form 990-PF (2019)

Part XIII Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2018	(c) 2018	(d) 2019
1 Distributable amount for 2019 from Part XI, line 7				E47 E47
2 Undistributed income, if any, as of the end of 2019				547,547.
a Enter amount for 2018 only			0.	
b Total for prior years			0.	
y rotation prior yours		0.		
3 Excess distributions carryover, if any, to 2019:				
a From 2014 77,371.				
b From 2015 132,829.				
c From 2016 104, 093.				
d From 2017 243,813.	1			
e From 2018 40,655.				
f Total of lines 3a through e	598,761.			
-	330,701.			
4 Qualifying distributions for 2019 from				
Part XII, line 4. ►\$ 562,351.			0	
a Applied to 2018, but not more than line 2a			0.	
b Applied to undistributed income of prior				
years (Election required - see instructions)		0.		
c Treated as distributions out of corpus				
(Election required - see instructions)	0.			
d Applied to 2019 distributable amount				547,547.
e Remaining amount distributed out of corpus	14,804.			
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				
a Corpus Add lines 3f, 4c, and 4e Subtract line 5	613,565.			
b Prior years' undistributed income. Subtract				
line 4b from line 2b		0.	İ	
c Enter the amount of prior years'				
undistributed income for which a notice of				
deficiency has been issued, or on which the section 4942(a) tax has been previously				
assessed		0.		
d Subtract line 6c from line 6b Taxable				
amount - see instructions		0.		
e Undistributed income for 2018. Subtract line				
4a from line 2a Taxable amount - see instr			0.	
f Undistributed income for 2019. Subtract				
lines 4d and 5 from line 1. This amount must				
be distributed in 2020		,		0.
7 Amounts treated as distributions out of				
corpus to satisfy requirements imposed by				
section 170(b)(1)(F) or 4942(g)(3) (Election				
may be required - see instructions)	0.			
8 Excess distributions carryover from 2014	0.1		· · · · · · · · · · · · · · · · · · ·	
not applied on line 5 or line 7	77 271	, ,		
F	77,371.			
9 Excess distributions carryover to 2020 Subtract lines 7 and 8 from line 6a	526 104			
}-	536,194.			
10 Analysis of line 9.	.			•
a Excess from 2015 132, 829.				
b Excess from 2016 104,093.		-		
c Excess from 2017 243,813.			-	
d Excess from 2018 40,655.				
e Excess from 2019 14,804.				

HELIOS FOUNDATION, 920-727-1137

18 JEWELERS PARK, SUITE 200; PO BOX 628, NEENAH, WI 54957-0628

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

NO FORMAL APPLICATION REQUIRED

c Any submission deadlines.

NO SUBMISSION DEADLINE

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

NO RESTRICTIONS OR LIMITATIONS

Page 11

Part XV Supplementary Information (continued) 3 Grants and Contributions Paid During the Year or Approved for Future Payment If recipient is an individual, Recipient Foundation Purpose of grant or show any relationship to Amount any foundation manager status of contribution Name and address (home or business) or substantial contributor recipient a Paid during the year AMERICAN RED CROSS MASSACHUSETTS N/A PUBLIC GENERAL SUPPORT 101 STATION LAND, STE 510 MEDFORD, MA 02155 3,000. AMERICAN RED CROSS NORTHEAST N/A PUBLIC GENERAL SUPPORT WISCONSIN 515 SOUTH WASHBURN ST, STE 201 OSHKOSH, WI 54904 2,500. ANIMAL RESCUE LEAGUE OF BOSTON N/A PUBLIC GENERAL SUPPORT 10 CHANDLER ST BOSTON MA 02116 15,000. AVALONIA LAND CONSERVANCE N/A PUBLIC GENERAL SUPPORT PO BOX 49 OLD MYSTIC, CT 06372 10,000. CASA MYRNA GENERAL SUPPORT N/A PUBLIC 451 BLUE HILL AVE MA 02121 BOSTON 2 000. SEE CONTINUATION SHEET(S) Total ▶ 3a 525 000. **b** Approved for future payment NONE Total **▶** 3b

Part Avi-A Analysis of income-Producing Activities	Part XVI-A	Analysis of Income-Producing Activitie
--	------------	--

Enter gross amounts unless otherwise indicated.	Unrelated	business income		by section 512, 513, or 514	(e)
	(a) Business	(b) Amount	(c) Exclu- sion	(d)	Related or exempt
1 Program service revenue:	code	Amount	code	Amount	function income
a	_			-	
b			_		
<u> </u>			- -		<u> </u>
d	-		-		
e					
- Fore and contracts from any and any and	_				
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			14		210,800.
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			14		=11.
8 Gain or (loss) from sales of assets other		.,.			, <u>-</u>
than inventory			18		95,561.
9 Net income or (loss) from special events					
10 Gross profit or (loss) from sales of inventory					
11 Other revenue					
a					
b	l l				
C	ł I				
d					<u>. </u>
e					***
12 Subtotal Add columns (b), (d), and (e)		0		0.	306,361.
13 Total Add line 12, columns (b), (d), and (e)				13	306,361.
(See worksheet in line 13 instructions to verify calculations.)					

Part XVI-B Relationship of Activities to the Accomplishment of Exempt Purposes Line No Explain below how each activity for which income is reported in column (e) of Part XVI-A contributed importantly to the accomplishment of the foundation's exempt purposes (other than by providing funds for such purposes)

	the foundation's exempt purposes (other than by providing funds for such purposes)	
4	NOT APPLICABLE	_
7	NOT APPLICABLE	
8	NOT APPLICABLE	_

	_
39-153210	n

	12	1	age.	

9) C/O SCHAPER, BENZ & WISE INV. CNSL. 39-1532106
Information Regarding Transfers to and Transactions and Relationships With Noncharitable Exempt Organizations Form 990-PF (2019) Part XVII

1		•	, , ,		ng with any other organizati g to political organizations?		tion 501(c)		Yes	No
•	•	s from the reporting found:			• . •				•	
•	(1) Casi	•	anon to a nonenanta	Did oxompt of	gamzanon or.			1a(1)		x
	(2) Othe							1a(2)		X
h		nsactions								
•		s of assets to a noncharita	ble exempt organiza	tion				1b(1)		x
		chases of assets from a no						1b(2)		X
		tal of facilities, equipment,		3				1b(3)		X
	` '	nbursement arrangements						1b(4)		X
	• •	ns or loan guarantees						1b(5)		X
		ormance of services or me	mbership or fundrai	sing solicitatio	ons			1b(6)		Х
С	Sharing (of facilities, equipment, ma	uling lists, other asse	its, or paid em	ployees			1c		X
	-		• ,		edule Column (b) should al	ways show the fair	market value of the goods	, other ass	ets,	
					ed less than fair market val				•	
		d) the value of the goods,				•				
(a)L	ine no	(b) Amount involved	(c) Name of	noncharitable	e exempt organization	(d) Descriptio	n of transfers, transactions, an	id sharing ar	rangeme	nts
_				N/A						
_						,				
				-				,		
		,					<u> </u>			
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			-							
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_				-				-		
	-							-		
22	Is the fou	ndation directly or indirect	ly affiliated with or r	elated to one	or more tax-exempt organi	rations described	*****			
		501(c) (other than section	•		or more tax exempt organi	2410113 003011000		Yes	X	No
		omplete the following sche		Guon 327			'		LAA	7 140
	11 103, 0	(a) Name of orga			(b) Type of organization	 	(c) Description of relation			
		N/A			(c)		(-)			
				_	-					
—										
			 	 						
				_	·	-				
	Under	penalties of periury. I declare t	hat I have examined this	s return, includin	l gaccompanying schedules and	statements and to the	hest of my knowledge			
Sig		elief, it is true, correct, and com	plete Declaration of pre	parer (other that	n taxpayer) is based on all inform	nation of which prepare	r has any knowledge	May the IRS of	iscuss (his er
He	re L	レ ハアー	_				9	hown below?	? See in:	str
		The state of the s	<u> </u>		10-5-2020		ISTRATOR	X Yes		J No ∫
	Sigi	nature of officer or trustee		Drana'	Date	Title	Chack T if DTIN			
		Print/Type preparer's na	me	Preparer's si	ignature	Date	Check if PTIN	į.		
D-3	. a.			0	1.11	04.1	self- employed			
Pai		JAMES L. RI		Amo 1	IWEN	1/30/2020		01044		
	parer	Firm's name REM	LEY & SEN	ÉENBRE	NNER, S.C.	-	Firm's EIN ► 39 – 1	11015	71	
Us	e Only									
		Firm's address ► 21	9 EAST WI	SCONSI	N AVENUE					
		NE:	ENAH, WI	<u>54956</u>			Phone no. 920 - 7	<u> 125-2</u>	<u>601</u>	
								Form 990	-PF	20191

	50,000.		49,748.	252.
m	50,000.		49,493.	507.
n	100,000.		99,707.	293.
0	50,000.		49,866.	134.
_	Complete only for assets showing of	gain in column (h) and owned by		(I) Losses (from col (h))
	(1) 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	Gains (excess of col. (h) gain over col (k), but not less than "-0-")
a		-		13,029.
b				6,311.
С				3,339.
d				63.
е				13,832.
f				21,888.
q				16,296.
h				8,451.
ī				14,080.
ī				-6,336.
k				-2,959.
1				252.
m				507.
n				293.
0				134.
2	Capital gain net income or (net capita	If gain, also ente	r in Part I, line 7 0-" in Part I, line 7	
	•	- 11 (1000), Clitch	- ···· ai v iş ilillə i	

Net short-term capital gain or (loss) as defined in sections 1222(5) and (6):

If gain, also enter in Part I, line 8, column (c) If (loss), enter "-0-" in Part I, line 8

N/A

Net short-term capital gain or (loss) as defined in sections 1222(5) and (6).

If gain, also enter in Part I, line 8, column (c).

If (loss), enter "-0-" in Part I, line 8

C/O SCHAPER, BENZ & WISE INV. CNSL. Part XV Supplementary Information Grants and Contributions Paid During the Year (Continuation) If recipient is an individual, Recipient show any relationship to any foundation manager Foundation Purpose of grant or Amount status of contribution Name and address (home or business) or substantial contributor recipient CENTER FOR THE ARTS N/A PUBLIC GENERAL SUPPORT PO BOX 1819 CRESTED BUTTE, CO 81224 6,000. CLAREMONT SCHOOL OF THEOLOGY N/A PUBLIC CENTER FOR PROCESS 1325 N. COLLEGE AVE STUDIES CLAREMONT, CA 91711 75,000. COMMUNITY ACTION AGENCY OF SIOUXLAND N/A PUBLIC NEEDS RELATED TO 2700 LEECH AVE COVID-19 SIOUX CITY, IA 51106 10,000. COMMUNITY FOUNDATION OF EASTERN N/A PUBLIC WOMEN & GIRLS FUNDS CONNECTICUT 68 FEDERAL STREET NEW LONDON, CT 06320 25,000. CRADLES TO CRAYONS N/A PUBLIC GENERAL SUPPORT 155 NORTH BEACON ST BRIGHTON, MA 02135 15,000. CRESTED BUTTE LAND TRUST N/A PUBLIC GENERAL SUPPORT PO BOX 2224 CRESTED BUTTE CO 81224 6,000. CRESTED BUTTE MOUNTAIN RESCUE N/A PUBLIC GENERAL SUPPORT 827 BUTTE AVE CRESTED BUTTE, CO 81224 1,000. CRITTENTON CENTER N/A PUBLIC NEEDS RELATED TO 814 PIERCE ST, STE 100 COVID-19 SIOUX CITY, IA 51101 10,000. DENISON PEQUOTSEPOS NATURE CENTER N/A PUBLIC MCLOUGHLIN FAMILY PO BOX 122 ENVIRONMENTAL GRANT MYSTIC CT 06355 5,000. DOCTORS WITHOUT BORDERS N/A PUBLIC GENERAL SUPPORT PO BOX 5030 HAGERSTOWN MD 21741 10,000. Total from continuation sheets 492 500.

C/O SCHAPER, BENZ & WISE INV. CNSL.

Part XV Supplementary Information

Part XV Supplementary Information				
3 Grants and Contributions Paid During to				
Recipient	If recipient is an individual, show any relationship to any foundation manager	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	or substantial contributor	recipient		
DOCTORS WITHOUT BORDERS	N/A	PUBLIC	GENERAL SUPPORT	
PO BOX 5030 HAGERSTOWN MD 21741				2,500.
INGEROTORN, IND 21741				2,300.
EMPOWERS AFRICA, INC.	N/A	PUBLIC	GENERAL;	
2 BEEKMAN PLACE, STE 18B			ANTI-POACHING;	
NEW YORK, NY 10022			BOTSWANA PROJECT	4,000.
FARM AID	N/A	PUBLIC	GENERAL SUPPORT	
501 CAMBRIDGE ST 3RD FL				
CAMBRIDGE, MA 02141				10,000.
FEEDING AMERICA EASTERN WISCONSIN	N/A	PUBLIC	GENERAL SUPPORT	
2911 W EVERGREEN DRIVE APPLETON WI 54913				5,000.
AFFILIZION, NI 34213				3,000.
FOOD BANK OF SIOUXLAND, INC.	N/A	PUBLIC	GENERAL SUPPORT	
1311 11TH ST	N/A	PUBLIC	GENERAL SUPPORT	
SIOUX CITY, IA 51105				15,000.
GORDON BUBOLZ NATURE PRESERVE	N/A	PUBLIC	GENERAL SUPPORT	
4815 N LYNNDALE DR	,,			
APPLETON, WI 54913				5,000.
GROTON OPEN SPACE ASSOCIATION	N/A	PUBLIC	GENERAL SUPPORT	
PO BOX 9187				
GROTON, CT 06340				10,000.
HECKRODT WETLAND RESERVE 1305 PLANK ROAD	N/A	PUBLIC	GENERAL SUPPORT	
MENASHA, WI 54952				5,000.
HENNEPIN THEATRE TRUST	N/A	PUBLIC	GENERAL SUPPORT	
900 HENNEPIN AVE				
MINNEAPOLIS, MN 55403				2,500.
HENRY L. FERGUSON MUSEUM	N/A	PUBLIC	FISHER ISLAND LAND	
PO BOX 554			TRUST	
FISHERS ISLAND, NY 06390 Total from continuation sheets				4,000.

C/O SCHAPER, BENZ & WISE INV. CNSL. 39-1532106 Supplementary Information Part XV Grants and Contributions Paid During the Year (Continuation) If recipient is an individual, Recipient Purpose of grant or contribution Foundation show any relationship to Amount status of any foundation manager Name and address (home or business) or substantial contributor recipient HER NEXT PLAY N/A PUBLIC GENERAL SUPPORT 4819 MAPLE ROAD EDINA, MN 55424 5,000. HIGH COUNTRY CONSERVATION ADVOCATES N/A PUBLIC GENERAL SUPPORT PO BOX 1066 CRESTED BUTTE CO 81224 5,000. IMAGINE SCHOLAR N/A PUBLIC GENERAL SUPPORT PO BOX 80175 PORTLAND, OR 97280 5,000. MASIPHUMELELE CORPORATION N/A PUBLIC GENERAL SUPPORT PO BOX 290477 CHARLESTOWN MA 02129 10,000. MASSACHUSETTS GENERAL HOSPITAL N/A PUBLIC EMERGENCY RESPONSE -125 NASHUA ST. STE 540 COVID-19 BOSTON MA 02114 2,000. MINNESOTA PUBLIC RADIO N/A PUBLIC GENERAL SUPPORT 480 CEDAR ST 5,000. ST. PAUL, MN 55101 MOUNTAIN ROOTS FOOD PROJECT N/A PUBLIC GENERAL SUPPORT PO BOX 4163 CRESTED BUTTE, CO 81224 6,000. NOANK COMMUNITY SUPPORT SERVICES N/A PUBLIC GENERAL SUPPORT 306 THAMES ST GROTON, CT 06340 5,000. OCEAN COMMUNITY YMCA N/A PUBLIC NAIK FAMILY BRANCH 1 HARRY AUSTIN DR MYSTIC CT 06355 15,000. PARADISE ANIMAL WELFARE SOCIETY GENERAL SUPPORT N/A PUBLIC PO BOX 531 CRESTED BUTTE, CO 81224 1,000.

Total from continuation sheets

Part XV **Supplementary Information** Grants and Contributions Paid During the Year (Continuation) If recipient is an individual, Recipient show any relationship to Foundation Purpose of grant or Amount any foundation manager status of contribution Name and address (home or business) or substantial contributor recipient PAWCATUCK NEIGHBORHOOD CENTER N/A PUBLIC GENERAL SUPPORT PO BOX 1697 PAWCATUCK CT 06379 5,000. **PILLARS** N/A PUBLIC GENERAL SUPPORT 605 E HANCOCK ST APPLETON, WI 54911 2,500. SAVANNAH SCIENCE MUSEUM N/A PUBLIC CARETTA RESEARCH PO BOX 9841 PROJECT SAVANNAH GA 31412 5,000. SAVE THE CHILDREN N/A PUBLIC GENERAL SUPPORT 501 KINGS HIGHWAY EAST, STE 400 FAIRFIELD, CT 06825 10,000. SECOND HARVEST HEARTLAND N/A PUBLIC GENERAL SUPPORT 1140 GERVAIS AVE ST. PAUL. MN 55109 5,500. SHARE OUR STRENGTH N/A PUBLIC GENERAL SUPPORT 1030 15TH ST. NW, STE 1100 WASHINGTON, DC 20005 2,000. SIOUXLAND CARES ABOUT SUBSTANCE ABUSE N/A PUBLIC DATA PROJECT: 101 PIERCE STREET SIOUXLAND CARES & COMP SIOUX CITY, IA 51101 STRATEGY PLANNING 8,000. SOLOMON SCHECHTER DAY SCHOOL N/A PUBLIC GENERAL SUPPORT 125 WELLS AVE NEWTON, MA 02459 3,000. ST. LUKE'S WOOD RIVER FOUNDATION N/A PUBLIC GENERAL SUPPORT PO BOX 7005 KETCHUM, ID 83340 10,000. ST. THOMAS EPISCOPAL CHURCH N/A PUBLIC FOOD PANTRY 406 12TH STREET SIOUX CITY, IA 51105 2,000. Total from continuation sheets

C/O SCHAPER, BENZ & WISE INV. CNSL. 39-1532106

Part XV Supplementary Information 3 Grants and Contributions Paid During the Year (Continuation) Recipient If recipient is an individual, Purpose of grant or contribution Foundation show any relationship to Amount status of any foundation manager Name and address (home or business) recipient or substantial contributor SUN VALLEY COMMUNITY SCHOOL N/A PUBLIC GENERAL SUPPORT PO BOX 2118, 1 COMMUNITY DR SUN VALLEY . ID 83353 2,500. SUN VALLEY COMMUNITY SCHOOL N/A PUBLIC GENERAL SUPPORT PO BOX 2118, 1 COMMUNITY DR SUN VALLEY ID 83353 5,000. THAMES RIVER COMMUNITY SERVICE INC N/A PUBLIC THAMES RIVER FAMILY ONE THAMES RIVER PLACE PROGRAM IN MEMORY OF NORWICH CT 06360 THOMAS HYLAND 5,000. THE ADVOCATES N/A PUBLIC URGENT NEED FUND PO BOX 3216 HAILEY ID 83333 1,500. THE BRIGADE FOR YOUTH N/A PUBLIC GENERAL SUPPORT 1111 WEST 22ND ST MINNEAPOLIS, MN 55405 5,000. THE HUNGER COALITION N/A PUBLIC GENERAL SUPPORT 121 HONEYSUCKLE ST BELLEVUE, ID 83313 10,000. THREE RIVERS PARK DISTRICT N/A PUBLIC AALFS FAMILY 3000 XENIUM LAND NORT ENVIRONMENTAL GRANT PLYMOUTH, MN 55441 5 000. THUNDER DRAGON FUND N/A PUBLIC GENERAL SUPPORT PO BOX 549 KETCHUM ID 83340 1,000. TWIN CITIES COMMUNITY TRUST N/A PUBLIC GENERAL SUPPORT 701 NORTH FIRST AVE MINNEAPOLIS, MN 55403 5,000. UNION OF CONCERNED SCIENTISTS PUBLIC GENERAL SUPPORT N/A 2 BRATTLE SQUARE CAMBRIDGE, MA 02138 10,000. Total from continuation sheets

39-1532106

Part XV Supplementary Information Grants and Contributions Paid During the Year (Continuation) Recipient If recipient is an individual, show any relationship to Enundation Purpose of grant or Amount status of contribution any foundation manager Name and address (home or business) or substantial contributor recipient UNITED WAY OF SIOUXLAND N/A PUBLIC WOMEN UNITED & SOURCE 701 STEUBEN STREET FOR SIOUXLAND SIOUX CITY, IA 51101 55,000. UNITED WAY OF SOUTHEASTERN N/A PUBLIC NEIGHBORS FOR CONNECTICUT NEIGHBORS OR COVID-19 283 STODDARDS WHARF RESPONSE GALES FERRY, CT 06335 8,000. VALLEY VNA N/A PUBLIC IMMEDIATE USE 1535 LYON DR NEENAH, WI 54956 2,500. VICTORY PROGRAMS INC N/A PUBLIC GENERAL SUPPORT 965 MASSACHUSETTS AVE BOSTON, MA 02118 2,000. WARM CENTER N/A PUBLIC GENERAL SUPPORT 56 SPRUCE ST WESTERLY, RI 02891 5,000. WATCH HILL CONSERVANCY N/A PUBLIC NAPATREE POINT ONE BAY ST WESTERLY, RI 02891 2,000. WEST SEATTLE FOOD BANK N/A PUBLIC GENERAL SUPPORT 3419 SW MORGAN ST. SEATTLE, WA 98126 20,000. WEST SEATTLE JUNCTION ASSN N/A PUBLIC JUNCTION SMALL 4210 SW OREGON ST, STE A BUSINESS RELIEF FUND SEATTLE, WA 98116 10,000. Total from continuation sheets

Schedule B

(Form 990, 990-EZ, or 990-PF) Department of the Treasury Internal Revenue Service

Schedule of Contributors

► Attach to Form 990, Form 990-EZ, or Form 990-PF.

Go to www.irs.gov/Form990 for the latest information.

OMB No 1545-0047

2019

Name of the organization Employer identification number HELIOS FOUNDATION 39-1532106 C/O SCHAPER, BENZ & WISE INV. CNSL. Organization type (check one) Filers of: Section: _ 501(c)(Form 990 or 990-EZ) (enter number) organization 4947(a)(1) nonexempt charitable trust not treated as a private foundation 527 political organization Form 990-PF X 501(c)(3) exempt private foundation 4947(a)(1) nonexempt charitable trust treated as a private foundation 501(c)(3) taxable private foundation Check if your organization is covered by the General Rule or a Special Rule. Note: Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule See instructions General Rule Tor an organization filing Form 990, 990 EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions Special Rules For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of (1) \$5,000, or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h,

For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions exclusively for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., purpose. Don't complete any of the parts unless the **General Rule** applies to this organization because it received nonexclusively religious, charitable, etc., contributions totaling \$5,000 or more during the year.

For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educational purposes, or for the

Caution: An organization that isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990, 990-EZ, or 990-PF), but it must answer "No" on Part IV, line 2, of its Form 990, or check the box on line H of its Form 990-EZ or on its Form 990-PF, Part I, line 2, to certify that it doesn't meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF)

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

prevention of cruelty to children or animals Complete Parts I, II, and III

or (ii) Form 990-EZ, line 1 Complete Parts I and II

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

Name of organization

HELIOS FOUNDATION

Employer identification number

C/O SCHAPER, BENZ & WISE INV. CNSL.

39-1532106

Part I	Contributors (see instructions) Use duplicate copies of Part I if add	ditional space is needed	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	MARJORIE KIEWIT TRUST ESTATE 2600 NORTHERN ROAD, SUITE 900 NEENAH, WI 54956	\$918,067.	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
			Person Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Oncash Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Oncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		 \$	Person Payroll Noncash Complete Part II for noncash contributions)

Name of organization

Employer identification number

HELIOS FOUNDATION

C/O SCHAPER, BENZ & WISE INV. CNSL.

39-1532106

Part II	Noncash Property (see instructions) Use duplicate copies of Pa	art II if additional space is needed	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
		 \$	
(a) No. rom	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
		\$	
(a) No. om art I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
-		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
		\$	
(a) No. rom art I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
_		s	

Name of organization

HELIOS FOUNDATION

Employer identification number

C/O SC	CHAPER, BENZ & WISE INV	. CNSL.	39-1532106
Part III	Exclusively religious, charitable, etc, contribution from any one contributor. Complete columns (a) completing Part III, enter the total of exclusively religious, of Use duplicate copies of Part III if additional states.	ons to organizations described in s through (e) and the following line er haritable, etc., contributions of \$1,000 or	section 501(c)(7), (8), or (10) that total more than \$1,000 for the yeartry. For organizations
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
		(e) Transfer of gif	t
-	Transferee's name, address, an	d ZIP + 4	Relationship of transferor to transferee
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
		(e) Transfer of gif	t
	Transferee's name, address, an	d ZIP + 4	Relationship of transferor to transferee
(a) No.	(h) Durnoco of gift	(a) Use of wift	(d) December of how off is held

from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
		(a) Transfer of sift	

(e) Transfer of gift

—			
a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held

Transferee's name, address, and ZIP + 4

(e) Transfer of gift

Transferee's name, address, and ZIP + 4	Relationship of transferor to transferee

Relationship of transferor to transferee

FORM 990-PF	DIVIDENDS	AND INTER	EST	FROM SECUR	ITIES ST	PATEMENT	1
SOURCE	GROSS AMOUNT	CAPITAL GAINS DIVIDEND		(A) REVENUE PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTI NET INCO	
CHARLES SCHWAB - ACCRUED INT PURCH CHARLES SCHWAB - ACCRUED INT PURCH	-1,564.		0.	-1,564.	-1,564.		
- US	-1,899.		0.	-1,899.	-1,899.		
CHARLES SCHWAB - DIVIDEND INCOME CHARLES SCHWAB -	198,111.	6,38	1.	191,730.	191,730.		
INTEREST INCOME CHARLES SCHWAB -	5,635.		0.	5,635.	5,635.		
US INTEREST INCOME	16,898.		0.	16,898.	16,898.		
TO PART I, LINE 4	217,181.	6,38	 1.	210,800.	210,800.		
FORM 990-PF		LEGAL	FE	es	ST	ATEMENT	2
DESCRIPTION		(A) EXPENSES PER BOOKS		(B) T INVEST- NT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITAI PURPOSI	
LEGAL FEES		2,135.		0.			0.
TO FM 990-PF, PG 1,	LN 16A	2,135.		0.			0.
FORM 990-PF		TAX	ES		ST	ATEMENT	3
DESCRIPTION		(A) EXPENSES PER BOOKS		(B) INVEST- TINCOME	(C) ADJUSTED NET INCOME	(D) CHARITAE PURPOSE	
EXCISE TAXES PAYROLL TAXES FOREIGN TAX WITHHELD	 _ NGT	10,097. 1,530. 1,193.		0. 0. 0.	,		0. 0.
		···					
TO FORM 990-PF, PG 1	, LN 18	12,820.		0.			0.

FORM 990-PF	OTHER E	XPENSES			STATEMENT	4
DESCRIPTION	(A) EXPENSES PER BOOKS					
ADR AND OTHER FEES	174.		0.			0.
TO FORM 990-PF, PG 1, LN 23	174.		0.			0.
FORM 990-PF U.S. AND S	STATE/CITY G	OVERNMENT	OBL	GATIONS	STATEMENT	5
DESCRIPTION	U.S GOV'	_	вос	OK VALUE	FAIR MARKET VALUE	
GOVERNMENT BONDS - SEE ATTACE	HED X			892,637.	918,59	4.
TOTAL U.S. GOVERNMENT OBLIGAT	TIONS	•		892,637.	918,59	4.
TOTAL STATE AND MUNICIPAL GOV	VERNMENT OBL	IGATIONS		·		
TOTAL TO FORM 990-PF, PART I	, LINE 10A	:		892,637.	918,59	4.
FORM 990-PF.	CORPORATI	E STOCK			STATEMENT	6
DESCRIPTION			вос	OK VALUE	FAIR MARKET VALUE	·
CORPORATE STOCK - SEE ATTACHE	ED	-	6	5,100,449.	9,582,72	6.
TOTAL TO FORM 990-PF, PART II	L, LINE 10B	=	6	5,100,449.	9,582,72	6.
FORM 990-PF	CORPORATI	E BONDS			STATEMENT	7
DESCRIPTION			вос	OK VALUE	FAIR MARKET VALUE	1
DESCRIPTION						
DESCRIPTION 	ID.	-		299,075.	310,29	8.

FORM 990-PF	OTHER	INVESTMENTS		STAT	EMENT 8	
DESCRIPTION		VALUATION METHOD BOOK VALUE			·	
INVESTMENTS - OTHER - SEE ATTACHED COST TOTAL TO FORM 990-PF, PART II, LINE 13		COST	183,8	14.		
		.3	183,8	14.		
		OFFICERS, D		STAT	EMENT 9	
NAME AND ADDRESS		TITLE AND VRG HRS/WK	COMPEN- SATION	EMPLOYEE BEN PLAN CONTRIB	EXPENSE	
NANCY MCLOUGHLIN 255 CEDAR ROAD MYSTIC, CT 06355	DI	RECTOR 0.00	0.	0.	0.	
PAT MCLOUGHLIN 15 COVE STREET NOANK, CT 06340	DI	RECTOR 0.00	0.	0.	0.	
DANIEL JACOB 321 KENT STREET BOSTON, MA 02446	DI	RECTOR 0.00	0.	0.	0.	
JULIANA KELLY 4609 BROWNDALE AVENUE EDINA, MN 55424	DI	RECTOR 0.00	0.	0.	0.	
CHRISTINA SIDDALL 1322 42ND AVENUE SW SEATTLE, WA 98116	DI	RECTOR 0.00	0.	0.	0.	
BARBARA AALFS 4208 PERRY WAY SIOUX CITY, IA 51104	DI	RECTOR 0.00	0.	0.	0.	
BEN MCLOUGHLIN PO BOX 696 CRESTED BUTTE, CO 81224	DI	RECTOR 0.00	0.	0.	0.	
DAVID JACOB 62 BEECH ROAD BROOKLINE, MA 02446	DI:	RECTOR 0.00	0.	0.	0.	

HELIOS FOUNDATION C/O SCHAPER, BENZ & WI			39-1532106	
BETSEY THOMSON 716 MORNING STAR ROAD SUN VALLEY, ID 83353	DIRECTOR 0.00	0.	0.	0.
JOHN BUCHANAN 2631 NORTHERN ROAD, #900 APPLETON, WI 54914	DIRECTOR/PRES 2.00	IDENT 20,000.	0.	0.
SCHAPER, BENZ & WISE INVESTMENT	ADMINISTRATOR			
18 JEWELERS PARK, SUITE 200; PO BOX 628 NEENAH, WI 54957-0628	5.00	69,403.	0.	0.
TOTALS INCLUDED ON 990-PF, PAGE 6	5, PART VIII	89,403.	0.	0.
FORM 990-PF SUMMARY OF DIR	RECT CHARITABLE	ACTIVITIES	STATEMENT	10
ACTIVITY TWO				
THE SOLE CHARITABLE ACTIVITY OF T MAKING OF CONTRIBUTIONS AND GRANT ORGANIZATIONS. NO DIRECT CHARITA CONDUCTED.	S TO QUALIFIED	CHARITABLE		
			EXPENSES	
TO FORM 990-PF, PART IX-A, LINE 2	2			0.