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2019

# OMB No. 1545-0052

Form 990-PF

Department of the Treasury Internal Revenue Service

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

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

Open to Public Inspection

For	caler	ndar year 2019, or tax year beginning 06-01-20	)19 , aı	nd ending 05-31	-2020				
Name of foundation LEON H & CLYMENE M BOND FDN					A Employer identification number 39-1762087				
					7				
		n, state or province, country, and ZIP or foreign postal code /I 54153		<b>C</b> If exemption	application is pendin	g, check here			
G Cł	neck al	l that apply: $\Box$ Initial return $\Box$ Initial return of a	former public charity	<b>D 1.</b> Foreign or	ganizations, check he	ere			
		☐ Final return ☐ Amended return			rganizations meeting				
		Address change Name change		·	ck here and attach co	· —			
_		$ \nabla$ pe of organization: $ \nabla$ Section 501(c)(3) exempt private			undation status was t on 507(b)(1)(A), chec				
		n 4947(a)(1) nonexempt charitable trust U Other taxable							
of	year (f	xet value of all assets at end from Part II, col. (c),  ▶\$ 5,994,725   J Accounting method:  □ Other (specify) (Part I, column (d) must			ation is in a 60-montl on 507(b)(1)(B), chec				
Pa	rt I	Analysis of Revenue and Expenses (The total	(a) Revenue and			(d) Disbursements			
		of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a) (see instructions).)	expenses per books	(b) Net investment income	(c) Adjusted net income	for charitable purposes (cash basis only)			
	1	Contributions, gifts, grants, etc., received (attach	3,000						
	2	schedule)  Check ▶ ☑ if the foundation is <b>not</b> required to attach	2,000						
	-	Sch. B							
	3	Interest on savings and temporary cash investments	97	97					
	4	Dividends and interest from securities	127,697	127,697					
	5a	Gross rents							
ē	6a	Net rental income or (loss)  Net gain or (loss) from sale of assets not on line 10	53,709						
<u> </u>	b	- , ,	,						
Revenue	7	Gross sales price for all assets on line 6a 1,325,836 Capital gain net income (from Part IV, line 2)		53,709					
ш	8	Net short-term capital gain		,					
	9	Income modifications							
	10a	Gross sales less returns and allowances							
	b	Less: Cost of goods sold							
	С	Gross profit or (loss) (attach schedule)							
	11	Other income (attach schedule)	233	233	0				
	12	Total. Add lines 1 through 11	183,736	181,736	0				
	13	Compensation of officers, directors, trustees, etc.	98,864	49,432	0	49,432			
	14	Other employee salaries and wages							
ses	15	Pension plans, employee benefits	17,706	8,853	0	8,853			
en	16a		<b>95-1</b> E 422	2.716	0	2.716			
Exp	b	Accounting fees (attach schedule)	<b>%</b> 5,432	2,716		_,			
Ve	17 C	Other professional fees (attach schedule)	22,887	22,887	"				
and Administrative Expenses	17 18	Taxes (attach schedule) (see instructions)	<b>%</b> 6,506	2,946	0	2,507			
ni st	19	Depreciation (attach schedule) and depletion	<b>9</b> 6,300	2,540		_,			
Ē	20	Occupancy	151						
Ad	21	Travel, conferences, and meetings							
and	22	Printing and publications							
bi.	23	Other expenses (attach schedule)	9,569	C	0	9,569			
Operating	24	Total operating and administrative expenses.							
ber		Add lines 13 through 23	161,395	86,834	. 0	73,077			
0	25	Contributions, gifts, grants paid	301,322			301,322			
	26	<b>Total expenses and disbursements.</b> Add lines 24 and 25	462,717	86,834	. 0	374,399			
	27	Subtract line 26 from line 12:							
	a	Excess of revenue over expenses and disbursements	-278,981						
	ь	Net investment income (if negative, enter -0-)		94,902					
	c	Adjusted net income (if negative, enter -0-)		,,,,,	0				
For	Paper	work Reduction Act Notice, see instructions.	1	Cat. No. 11289	X For	m <b>990-PF</b> (2019)			

Beginning of year

5,341,803

(چە

2,558

2,558

5,339,245

5,339,245

5,341,803

0**93** 

Page 2

4,200

1,110

13,479

5,994,725

End of year

4,200

1,110

5,063,295

13,479

688

2,343

3.031

5,339,245

-278,981

5,060,264

5,063,295

5,339,245 -278,981

5,060,264

5,060,264

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1

2

3 4

5

6

		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 ▶				
Ş	8	Inventories for sale or use				
Assets	9	Prepaid expenses and deferred charges				
As	10a	Investments—U.S. and state government obligations (attach schedule)	0	<b>%</b> J	99,996	99,999
	ь	Investments—corporate stock (attach schedule)	5,192,739	<b>49</b> 3	4,468,769	5,400,196
	c	Investments—corporate bonds (attach schedule)				
	11	Investments—land, buildings, and equipment: basis ▶				
		Local accumulated depreciation (attach echodule)		1		

# Investments—U.S. and state government obligations (attach schedule) Investments—corporate stock (attach schedule) Investments—corporate bonds (attach schedule) Investments—land, buildings, and equipment: basis ▶ Less: accumulated depreciation (attach schedule) Investments—mortgage loans Investments—other (attach schedule) Land, buildings, and equipment: basis ▶ 2,706 Less: accumulated depreciation (attach schedule) Other assets (describe ▶ 11,541 14,532

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

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

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

Capital stock, trust principal, or current funds . . . . . . . . . .

Retained earnings, accumulated income, endowment, or other funds

Total net assets or fund balances (see instructions) . . . . .

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

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

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

Analysis of Changes in Net Assets or Fund Balances

Paid-in or capital surplus, or land, bldg., and equipment fund

Mortgages and other notes payable (attach schedule). .

Total liabilities(add lines 17 through 22) . . . . .

Foundations that follow FASB ASC 958, check here

instructions. Also, see page 1, item I)

Grants payable

Other liabilities (describe ...

Accounts payable and accrued expenses .

and complete lines 24, 25, 29 and 30.

Net assets without donor restrictions . . .

Net assets with donor restrictions .

and complete lines 26 through 30.

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

Other increases not included in line 2 (itemize)

Enter amount from Part I, line 27a

Attached schedules and amounts in the description column

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**Balance Sheets** 

Part II

12

13

14

15

16

17

18

19

20

21

22 23

24 25

26

27

28

30

Part III

Liabilities

Assets or Fund Balances

29 29

2

3

(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.)

Page **3** 

2-story brick wa	arenouse; or common stock, 200 sns	s. MLC Co.)	P—Purchase D—Donation	(mo., day, yr.)	(mo., day, yr.)
1 a PUBLICLY TRADED SECU	RITIES				
b					
С					
d					
e					
(e) Gross sales price	<b>(f)</b> Depreciation allowed (or allowable)	Cost or o	g) ther basis nse of sale	Gain ò	h) r (loss) ) minus (g)
a 1,32	5,836		1,272,127		53,70
b					
c					
d					
e					
Complete only for assets	s showing gain in column (h) and ow	ned by the foundation o	n 12/31/69	(	I)
(i) F.M.V. as of 12/31/69	(j)	(I Excess of	k) of col. (i) (j), if any	Gains (Col. ( col. (k), but not	h) gain minus less than -0-) <b>or</b> om col.(h))
a					53,70
b					
C					
d					
e					
2 Capital gain net income	e or (net capital loss)	If gain, also enter in Pa If (loss), enter -0- in Pa	, i	2	53,709
	gain or (loss) as defined in sections rt I, line 8, column (c) (see instructi		}	3	
Part V Qualification I	Under Section 4940(e) for Re	educed Tax on Net 1	Investment In	come	
(For optional use by domestic p	private foundations subject to the se	ction 4940(a) tax on net	investment incom	e.)	
If section 4940(d)(2) applies, le	•	. ,		,	
	e section 4942 tax on the distributant qualify under section 4940(e). Do		n the base period?	·	es 🔽 No
1 Enter the appropriate an	nount in each column for each year;	see instructions before	making any entrie:	5.	
(a) Base period years Calendar year (or tax year beginning in)	<b>(b)</b> Adjusted qualifying distributions	(c) Net value of noncharitable	e-use assets	<b>(d)</b> Distribution rati (col. (b) divided by c	
2018	296,261		5,949,915		0.049792
2017	395,752		6,605,446		0.059913
2016	278,087		6,027,545		0.046136
2015	219,161		5,893,667		0.037186
2014	195,413		6,272,820		0.031152
2 Total of line 1, column (	d)		2		0.224179
number of years the four	o for the 5-year base period—divide ndation has been in existence if less	than 5 years	` <u>3</u>		0.044836
	ncharitable-use assets for 2019 from	•			6,102,280
5 Multiply line 4 by line 3	(40) (50 (7.1) (271)		5		273,602
	ent income (1% of Part I, line 27b)		6		949
			7		274,551
<b>8</b> Enter qualifying distribut If line 8 is equal to or green instructions.	ions from Part XII, line 4 , eater than line 7, check the box in Pa	art VI, line 1b, and comp	<u>8</u> Diete that part usin	 g a 1% tax rate. Se	374,399 e the Part VI
				E	rm 000-DE (2010

(b)

How acquired

P—Purchase

(c) Date acquired

	990-F1 (2019)		- 4-20.14	<b>—</b> • • • • • • • • • • • • • • • • • • •	,		P	age (
श्च		ing Activities for Which	Form 4720 May Be	Required (continued)	<i>)</i>			
ā	During the year did the foundation p	·					Yes	No
	(1) Carry on propaganda, or otherw	ise attempt to influence legisl	ation (section 4945(e))?	☐ Yes ि	<b>✓</b> No			
	(2) Influence the outcome of any sp	ecific public election (see sect	tion 4955); or to carry					
	on, directly or indirectly, any vot	er registration drive?		· · 🗌 Yes 🛭	✓ No			
	(3) Provide a grant to an individual	for travel, study, or other sim	ilar purposes?	☐ Yes ☐	▼ No			
	(4) Provide a grant to an organization	on other than a charitable, etc	, organization described		<u> </u>			
	in section 4945(d)(4)(A)? See in	structions		· · □ v [	✓ No			
	(5) Provide for any purpose other th	an religious, charitable, scien	tific, literary, or	· · L Yes	<b>⊻</b> No			
	educational purposes, or for the	prevention of cruelty to childr	en or animals?		<del></del>			
b	If any answer is "Yes" to $5a(1)-(5)$ ,	•		Ceptions described in	<b>⊻</b> No			
	Regulations section 53.4945 or in a	•		•		5b		
	Organizations relying on a current no			_	t			
_	If the answer is "Yes" to question 5a				ШΙ			
	tax because it maintained expenditu	• • •	•		_			
	If "Yes," attach the statement requir			' '	_ No			
	•	· -						
ìа	Did the foundation, during the year,	, , ,						
	a personal benefit contract?			⊔ Yes D	<b>✓</b> No			
b	Did the foundation, during the year,	pay premiums, directly or ind	lirectly, on a personal be	nefit contract?		6b		No
	If "Yes" to 6b, file Form 8870.							
'a	At any time during the tax year, was	the foundation a party to a p	prohibited tax shelter tra	nsaction? Yes	✓ No			
b	If "Yes", did the foundation receive a	any proceeds or have any net	income attributable to the			7b		
3	Is the foundation subject to the sect	ion 4960 tax on payment(s) o	of more than \$1,000,000	in remuneration or				
	excess parachute payment during th	e year?		· · 🗌 Yes	<b>√</b> N° [			
	Information About O	fficers, Directors, Trust	tees. Foundation Ma			ees.		
Pai	t VIIII and Contractors	, 2, 11	,		,	,,		
1	List all officers, directors, trustee	s. foundation managers ar	nd their compensation	See instructions				
	List an officers, an ectors, trustee	(b) Title, and average	(c) Compensation (If	(d) Contributions to	1,,	_		
	(a) Name and address	hours per week	not paid, enter	employee benefit plans a			ise acci	
		devoted to position	-0-)	deferred compensation	י ו	iller ai	lowanic	.63
ee A	Additional Data Table							
2	Compensation of five highest-pai	d employees (other than t	l hose included on line :	l —see instructions). If ⊢	none, er	ter "l	NONE.	71
	<b>, , ,</b>			(d) Contributions to	1			
a)	Name and address of each employee [	paid (b) Title, and average hours per week	(c) Compensation	employee benefit			se acco	
	more than \$50,000	devoted to position	(c) compensation	plans and deferred	otl	ner all	owance	es
				compensation				
ONI	<u> </u>							
					$\perp$			
nt2	I number of other employees paid ove	r \$50 000.						
Jid	Hamber of other employees paid over		<del></del>		Farr	~ QQ(	0-PF (	2010
					LOL	□ プラし	5-PF (	Z019

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Part VIII Information About Officers, Directors, Trustees, and Contractors (continued)	Foundation Managers, Highly Pa	aid Employees,
3 Five highest-paid independent contractors for professional servic	es (see instructions). If none, enter	"NONE".
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE		
<b>Total</b> number of others receiving over \$50,000 for professional services		• 0
Part IX-A Summary of Direct Charitable Activities		
List the foundation's four largest direct charitable activities during the tax year. Include rele organizations and other beneficiaries served, conferences convened, research papers produ		r of Expenses
1		
2		
3		
4		
Part IX-B Summary of Program-Related Investments (see i	nstructions)	
Describe the two largest program-related investments made by the foundation during the	<u> </u>	Amount
1	,	
2		
All other program-related investments. See instructions.		
3		
Total. Add lines 1 through 3		• o
Total Add Mico Landagn 5		Form <b>990-PF</b> (2019)

	Distributable Amount (see instructions) (seedion 15 12(j)(5) and (j)(5) private operating roundations	and cc	rtain for eigh
Pair	organizations check here ► □ and do not complete this part.)		
1	Minimum investment return from Part X, line 6	1	305,114
2a	Tax on investment income for 2019 from Part VI, line 5 2a 94	9	
b	Income tax for 2019. (This does not include the tax from Part VI.)		
C	Add lines 2a and 2b	2c	949
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	304,165
4	Recoveries of amounts treated as qualifying distributions.	4	0

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

5

6

7

1a

1b

2

За 3h

4

5

304.165

304.165

374,399

374,399

373,450

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949

Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1. . .

Expenses, contributions, gifts, etc.—total from Part I, column (d), line 26. . . . . . . . . . . . .

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

Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:

Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc.,

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

Qualifying Distributions (see instructions)

Amounts set aside for specific charitable projects that satisfy the:

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

5

6

1

2

3

4

5

b

Part XII

Page 9

304,165

304.165

İ	Part XIII	Undistributed	Inc

a From 2014. . . . . **b** From 2015. . . . c From 2016. . . d From 2017. . . . .

e From 2018. . . . .

a Enter amount for 2018 only. . . . . . Excess distributions carryover, if any, to 2019:

f Total of lines 3a through e. . . . . . . .

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

same amount must be shown in column (a).)

**5** Excess distributions carryover applied to 2019. (If an amount appears in column (d), the

a Corpus. Add lines 3f, 4c, and 4e. Subtract line 5

6 Enter the net total of each column as

**b** Prior years' undistributed income. Subtract 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. . . . . . **d** Subtract line 6c from line 6b. Taxable amount —see instructions . . . . . . . . . . . . . e Undistributed income for 2018. Subtract line 4a from line 2a. Taxable amount—see instructions . . . . . . . . f Undistributed income for 2019. Subtract lines 4d and 5 from line 1. This amount must be distributed in 2020 . . . . . . 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) . . . . . . . . . 8 Excess distributions carryover from 2014 not applied on line 5 or line 7 (see instructions) . . .

9 Excess distributions carryover to 2020.

10 Analysis of line 9: a Excess from 2015. . **b** Excess from 2016. . c Excess from 2017. . . .

d Excess from 2018. . .

e Excess from 2019. . .

Subtract lines 7 and 8 from line 6a . . .

indicated below:

4 Qualifying distributions for 2019 from Part XII, line 4: ▶ \$ a Applied to 2018, but not more than line 2a **b** Applied to undistributed income of prior years (Election required—see instructions). . . . . c Treated as distributions out of corpus (Election required—see instructions). . . . . . . . . .

11 (2013)							
Ш	Undistributed Income (see instruc	ctions)					
		(a) Corpu					

		C
1	Distributable amount for 2019 from Part XI, line 7	
2	Undistributed income, if any, as of the end of 2019:	

68.066 90,919

68.066 90.919

70.234

rpus

158.985

70.234

229,219

229,219

(b)

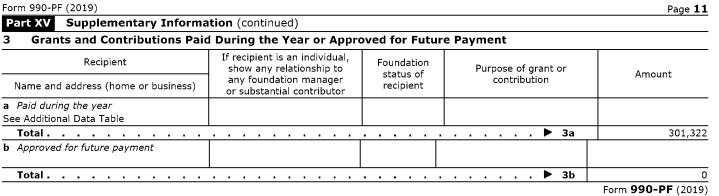
Years prior to 2018

(c)

2018

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For	n 990-PF (2019)					Page <b>10</b>
;	art XIV Private Operating Found	<b>ations</b> (see instr	uctions and Part \	/II-A, question 9)		
1a	If the foundation has received a ruling or defoundation, and the ruling is effective for 20			erating		
b	Check box to indicate whether the organization	on is a private oper	ating foundation des	scribed in section $\Box$	☐ 4942(j)(3) or ☐	4942(j)(5)
2a	Enter the lesser of the adjusted net	Tax year		Prior 3 years		(e) Total
	income from Part I or the minimum investment return from Part X for each year listed	(a) 2019	<b>(b)</b> 2018	(c) 2017	(d) 2016	
b	85% of line 2a					
С	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					
е	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:					
а	"Assets" alternative test—enter:					
	<ul><li>(1) Value of all assets</li><li>(2) Value of assets qualifying under section 4942(j)(3)(B)(i)</li></ul>					
b	"Endowment" alternative test— enter 2/3 of minimum investment return shown in Part X, line 6 for each year listed					
С	"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		<u> </u>	<u> </u>		
Pa	rt XV Supplementary Information assets at any time during th			foundation had	\$5,000 or more i	n
1	Information Regarding Foundation Man		ir uccions.)			
_	List any managers of the foundation who hav before the close of any tax year (but only if	e contributed more				ו
	List any managers of the foundation who own ownership of a partnership or other entity)	of which the founda	tion has a 10% or gi	reater interest.	arge portion of the	
2	Information Regarding Contribution, Gr		• • • • • • • • • • • • • • • • • • • •	_		
	Check here ► ☐ if the foundation only mak unsolicited requests for funds. If the founda other conditions, complete items 2a, b, c, a	tion makes gifts, gr	ants, etc. to individu			
а	The name, address, and telephone number of JENNIFER HANNA	or e-mail address of	the person to whon	n applications should	l be addressed:	
	PO BOX 299 OCONTO, WI 54153 (920) 834-5577					
b	The form in which applications should be sul			•		
С	LETTER REQUESTING GRANT, FEDERAL EXE Any submission deadlines:	MPTION NUMBER, [	DESCRIPTION OF PU	KPOSE FOR THE GRA	ANI.	
	NONE					
d	Any restrictions or limitations on awards, su factors: NONE	ch as by geographic	cal areas, charitable	fields, kinds of instit	utions, or other	



ter gros	s amounts unless otherwise indicated.	Unrelated b	usiness income	Excluded by section	512, 513, or 514	(e) Related or exempt
_	m service revenue:	(a) Business code	<b>(b)</b> Amount	(c) Exclusion code	<b>(d)</b> Amount	function income (See instructions.)
f						
	and contracts from government agencies					
	ership dues and assessments starts on savings and temporary cash					
invest				14	97	
Divide	nds and interest from securities			14	127,697	
Net re	ntal income or (loss) from real estate:					
	-financed property					
	debt-financed property					
	ntal income or (loss) from personal property investment income.			14	233	
	r (loss) from sales of assets other than				233	
invent	ory			18	53,709	
	come or (loss) from special events:					
	profit or (loss) from sales of inventory					
Otner <b>b</b>	revenue: a					
е						
			0		181,736	
Subto <b>Total</b>	tal. Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e)		0	13	181,736	
Subto <b>Total</b> (See v	ral. Add columns (b), (d), and (e).  Add line 12, columns (b), (d), and (e).  orksheet in line 13 instructions to verify calcu	lations.)				
Subto Total (See v art XV	aal. Add columns (b), (d), and (e).  Add line 12, columns (b), (d), and (e).  orksheet in line 13 instructions to verify calcu  I-B Relationship of Activities to th  Explain below how each activity for which the accomplishment of the foundation's ex	lations.)  e Accomplish income is report	nment of Exempled in column (e) of	ot Purposes Fart XVI-A contribut	ed importantly to	181,736
Subto Total (See wart XV	aal. Add columns (b), (d), and (e).  Add line 12, columns (b), (d), and (e).  orksheet in line 13 instructions to verify calcu  I-B Relationship of Activities to th  Explain below how each activity for which	lations.)  e Accomplish income is report	nment of Exempled in column (e) of	ot Purposes Fart XVI-A contribut	ed importantly to	
Subto Total. (See vart XV	aal. Add columns (b), (d), and (e).  Add line 12, columns (b), (d), and (e).  orksheet in line 13 instructions to verify calcu  I-B Relationship of Activities to th  Explain below how each activity for which the accomplishment of the foundation's ex	lations.)  e Accomplish income is report	nment of Exempled in column (e) of	ot Purposes Fart XVI-A contribut	ed importantly to	
Subto Total (See v art XV	aal. Add columns (b), (d), and (e).  Add line 12, columns (b), (d), and (e).  orksheet in line 13 instructions to verify calcu  I-B Relationship of Activities to th  Explain below how each activity for which the accomplishment of the foundation's ex	lations.)  e Accomplish income is report	nment of Exempled in column (e) of	ot Purposes Fart XVI-A contribut	ed importantly to	
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Fo	rm 990-PF (20	19)		Pa	ge <b>1</b> 3
Part XVII  Information Regarding Transfers To and Transactions and Relationships With Noncharitable Exempt Organizations					
1	1 Did the organization directly or indirectly engage in any of the following with any other organization described in section 501 (c) (other than section 501(c)(3) organizations) or in section 527, relating to political organizations?				
а	Transfers fro	m the reporting foundation to a noncharitable exempt organization of:			
	<b>(1)</b> Cash.		1a(1)		No
	(2) Other as	ssets	1a(2)		No

<b>(1)</b> Ca	sh			1a(1)	No
(2) Otl	her assets			1a(2)	No
<b>b</b> Other tr	ransactions:				
<b>(1)</b> Sa	les of assets to a nonchari	itable exempt organization		1b(1)	No
				1b(2)	No
<b>(3)</b> Re	ntal of facilities, equipmer	nt, or other assets		1b(3)	No
<b>(4)</b> Re	imbursement arrangemen	ts		1b(4)	No
<b>(5)</b> Lo	ans or loan guarantees.			1b(5)	No
<b>(6)</b> Per	formance of services or m	embership or fundraising solicitations		1b(6)	No
c Sharing	of facilities, equipment, n	nailing lists, other assets, or paid employees	5	1c	No
in any t	ransaction or sharing arra	ngement, show in column (d) the value of t	he foundation received less than fair market valu the goods, other assets, or services received.		
(a) Line No.	(b) Amount involved	(c) Name of noncharitable exempt organization	(d) Description of transfers, transactions, and sha	ring arrangen	nents
<b>2a</b> Is the fo	oundation directly or indire	ectly affiliated with, or related to, one or mo	re tax-exempt organizations		

2a Is the foundation directly or indirectly affiliated with	n, or related to, one or more tax-exer	mpt organizations
described in section 501(c) (other than section 501	(c)(3)) or in section 527?	🗌 Yes 🔽 No
<b>b</b> If "Yes," complete the following schedule.		
(a) Name of organization	(b) Type of organization	(c) Description of relationship

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. Sign May the IRS discuss this 2020-10-07 return Here with the preparer shown Signature of officer or trustee Title Date (see instr.) 🗹 Yes 🗆 No PTIN Print/Type preparer's name Preparer's Signature Date

Paid **Preparer Use Only** 

Check if self-P00096513 employed ▶ 🔲 TERRI REXRODE CPA 2020-10-07 MST Firm's name ▶ WIPFLI LLP Firm's EIN ▶39-0758449 Firm's address ▶ PO BOX 12237 Phone no. (920) 662-0016 GREEN BAY, WI 543072237

Form 990PF Part VIII Line 1 - List all officers, directors, trustees, foundation managers and their compensation (a) Name and address Title, and average (c) Compensation (If (d) Expense account, hours per week not paid, enter Contributions to (e) other allowances (b) devoted to position -0-) employee benefit plans and deferred compensation JOHN BOSTEDT 2,500 VICE-PRESIDENT 20.00 PO BOX 299 OCONTO, WI 54153

65,564

2,000

2,000

22,800

2,000

2,000

17,202

0

0

**EXECUTIVE** 

DIRECTOR 1.00

DIRECTOR

DIRECTOR

DIRECTOR

1.00

1.00

1.00

1.00

40.00

DIRECTOR/SECRETARY

PRESIDENT/TREASURER

JENNIFER HANNA

OCONTO, WI 54153

PO BOX 299

BETH LARSON

PO BOX 299 OCONTO, WI 54153 RONALD DELAIN

PO BOX 299 OCONTO, WI 54153 MARY MCMONAGLE

PO BOX 299 OCONTO, WI 54153 GARY ZIEGELBAUER

PO BOX 299 OCONTO, WI 54153 CHRIS AUGUSTINE

PO BOX 299 OCONTO, WI 54153

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

a Paid during the year			
BREAD BY THE BAYPO BOX 81 OCONTO, WI 54153	PC	FOOD PANTRY DONATION -	1,500

JCON10, WI 34133		COVID 19	
CITY OF OCONTO1201 MAIN STREET DCONTO, WI 54153	GOV	SHARP PARK FENCING	

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

CITY OF OCCUPATION MAIN CEREET	601/	CORRERECT 2020	1 000
CITY OF OCONTO1201 MAIN STREET OCONTO, WI 54153	GOV	SHARP PARK FENCING	13,000

OCONTO, WI 54153	GOV	SHARP PARK FENCING	13
CITY OF OCONTO1210 MAIN STREET	GOV	COPPERFEST 2020	1

OCONTO, WI 54153			
CITY OF OCONTO1210 MAIN STREET	GOV	COPPERFEST 2020	1,000

CITY OF OCONTO1210 MAIN STREET	GOV	COPPERFEST 2020	1,000
OCONTO, WI 54153		SPONSORSHIP	

OCONTO, WI 54153		SPONSORSHIP	

OCONTO, WI 54153	SPUNSURSHIP	
Total	 ▶ 3a	301.322

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

recipient

1,400

301,322

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

any foundation manager

or substantial contributor

Name and address (home or business)

Total .

a Paid during the year			
CITY OF OCONTO POLICE DEPARTMENT 1210 MAIN STREET OCONTO WI 54153	GOV	WINTER WONDERLAND 2019	1,500

CITY OF OCONTO POLICE DEPARTMENT 1210 MAIN STREET OCONTO, WI 54153	GOV	NATIONAL NIGHT OUT 2019	

OCONTO, WI 54153			
CITY OF OCONTO POLICE DEPARTMENT 1201 MAIN STREET	GOV	SNOW CONE MACHINE FOR KIDS EVENTS	500

OCONTO, WI 54153			
CITY OF OCONTO POLICE DEPARTMENT 1201 MAIN STREET OCONTO, WI 54153	GOV	SNOW CONE MACHINE FOR KIDS EVENTS	50

•			
CITY OF OCONTO POLICE DEPARTMENT	GOV	SNOW CONE MACHINE FOR	50
1201 MAIN STREET		KIDS EVENTS	
OCONTO, WI 54153			

1201 MAIN STREET		KIDS EVENTS	
OCONTO, WI 54153			

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

any foundation manager

Name and address (home or business)

Total .

DAVIS PHINNEY FOUNDATION 357 S MCCASLIN BLVD LOUSIVILLE, CO 80027		PC	PAUL DECLOUX PARKINSON RIDE	500
a Paid during the year				
,	or substantial contributor			

recipient

LOUSIVILLE, CO 80027			
FARNSWORTH PUBLIC LIBRARY 715 MAIN STREET OCONTO, WI 54153	GOV	BUILDING IMPROVEMENTS	4
FEED MY SHEEP FOOD PANTRY	PC	FOOD PANTRY DONATION -	1

FARNSWORTH PUBLIC LIBRARY 715 MAIN STREET OCONTO, WI 54153	GOV	BUILDING IMPROVEMENTS	4,544
FEED MY SHEEP FOOD PANTRY PO BOX 215 LENA. WI 54139	PC	FOOD PANTRY DONATION - COVID 19	1,500

OCONTO, WI 54153			
FEED MY SHEEP FOOD PANTRY PO BOX 215 LENA, WI 54139	1	FOOD PANTRY DONATION - COVID 19	1,500

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

	or substantial contributor			
a Paid during the year				
GEORGE'S SECRET ELVES		PC	DONATION - COVID 19	1,500

GREEN BAY, WI 54301			
GILLETT SCHOOL DISTRICTPO BOX 383	GOV	WEIGHT ROOM IMPROVEMENTS	10,0

GREEN BATANI S 1301			
GILLETT SCHOOL DISTRICTPO BOX 383 GILLETT, WI 54124	GOV	WEIGHT ROOM IMPROVEMENTS	10,000
HSHS ST CLARE MEMORIAL HOSPITAL	PC	NURSE'S NOOK PROJECT	42,500

GILLETT, WI 54124		WEIGHT ROOM IN NOVEMENTS	10,000
HSHS ST CLARE MEMORIAL HOSPITAL 855 S MAIN STREET	PC	NURSE'S NOOK PROJECT	42,500
OCONTO FALLS WI 54154			

GILLETT, WI 54124			
HSHS ST CLARE MEMORIAL HOSPITAL 855 S MAIN STREET OCONTO FALLS, WI 54154	PC	NURSE'S NOOK PROJECT	42,500

301,322

■ 3a

HSHS ST CLARE MEMORIAL HOSPITAL	PC	NURSE'S NOOK PROJECT	42,
855 S MAIN STREET			
OCONTO FALLS, WI 54154			

Total .

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

a Paid during the year			
KINGDOM COME INC 520 LOCUST STREET OCONTO FALLS, WI 54154	PC	FOOD PANGTRY DONATION - COVID 19	1,500

OCONTO FALLS, WI 54154			
MY BROTHER'S KEEPER INC 1039 WEST MASON STREET	PC	CLIENT FEES	20

NEW CAR INCIDES MAIN CEREET	DC.	ELOOD DELTEE	1 500
MY BROTHER'S KEEPER INC 1039 WEST MASON STREET GREEN BAY, WI 54303	PC	CLIENT FEES	20,000

1039 WEST MASON STREET GREEN BAY, WI 54303			
NEW CAP INC1201 MAIN STREET	PC	FLOOD RELIEF	1,500

GREEN BAY, WI 54303			
NEW CAP INC1201 MAIN STREET OCONTO, WI 54153	PC	FLOOD RELIEF	1,500

NEW CAP INC1201 MAIN STREET	PC	FLOOD RELIEF	1,
DCONTO, WI 54153			

OCONTO, WI 54153		
Total	 ▶ 3a	301,322

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

a Paid during the year			
NWTC-MARINETTE 1601 UNIVERSITY DRIVE MARINETTE, WI 54143	GOV	OPERATION CAR CARE FOR SERVICE MEN AND SERVICE WOMEN	1,500
OCONTO COUNTY ECONOMIC	DC.	LEADERSHIP OCONTO PROGRAM	2 000

·			
OCONTO COUNTY ECONOMIC DEVELOPMENT CORPORATION PO BOX 43 OCONTO, WI 54153	PC	LEADERSHIP OCONTO PROGRAM	2,000
·			

DEVELOPMENT CORPORATION PO BOX 43 OCONTO, WI 54153			
OCONTO COUNTY HISTORICAL SOCIETY PO BOX 1172 OCONTO, WI 54153	GOV	POTTER'S FIELD PROJECT	20,525

OCONTO, WI 54153			
OCONTO COUNTY HISTORICAL SOCIETY PO BOX 1172 OCONTO, WI 54153	GOV	POTTER'S FIELD PROJECT	20,525
Ī			

Total .

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

recipient

301,322

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

any foundation manager

or substantial contributor

Name and address (home or business)

Total .

a Paid during the year	PO BOX 1172	PC	CARRIAGE HOUSE	50,000
	a Paid during the year			

	OCONTO, WI 54153			
	OCONTO COUNTY HISTORICAL SOCIETY PO BOX 272 OCONTO, WI 54153	PC	POTTER'S FIELD PROJECT	
П				

PO BOX 272 OCONTO, WI 54153	PC	POTTER'S FIELD PROJECT	1,000
OCONTO COUNTY UW - EXTENSION 304 WASHINGTON STREET	GOV	ROBOTICS CLUB	1,500

OCONTO, WI 54153			
OCONTO COUNTY UW - EXTENSION 304 WASHINGTON STREET	GOV	ROBOTICS CLUB	1,500
OCONTO MI E41E2	l		

OCONTO COUNTY UW - EXTENSION 304 WASHINGTON STREET OCONTO, WI 54153	GO	OV	ROBOTICS CLUB	1,500
---	----	----	---------------	-------

304 WASHINGTON STREET		
OCONTO, WI 54153		

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

	or substantial contributor			
a Paid during the year				
OCONTO PRESCHOOL CENTER INC		PC	TECHNOLOGY EQUIPMENT	1,500

PO BOX 401 OCONTO, WI 54153	PC	TECHNOLOGY EQUIPMENT	1,500
OCONTO UNIFIED SCHOOL DISTRICT (OUSD)	GOV	MEMORIES MATTER PROGRAM	600

OCONTO UNIFIED SCHOOL DISTRICT (OUSD) 400 MICHIGAN AVENUE OCONTO, WI 54153	GOV	MEMORIES MATTER PROGRAM	600
OCONTO UNIFIED SCHOOL DISTRICT	GOV	SCHOLARSHIPS	6,000

(OUSD) 400 MICHIGAN AVENUE OCONTO, WI 54153			
OCONTO UNIFIED SCHOOL DISTRICT (OUSD) 400 MICHIGAN AVENUE OCONTO, WI 54153	GOV	SCHOLARSHIPS	6,000

301,322

CONTROL INVESTED COLLOCAL PROTECTION	
OCONTO UNIFIED SCHOOL DISTRICT (OUSD) 400 MICHIGAN AVENUE OCONTO, WI 54153	6,0

Total .

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

a Paid during the year

Total .

a Faid during the year				
OCONTO UNIFIED SCHOOL DISTRICT (OUSD) 400 MICHIGAN AVENUE OCONTO, WI 54153		GOV	AFTERGLOW 2020	250
	· · · · · · · · · · · · · · · · · · ·		1	

OCONTO, WI 54153			
RAINBOW HOUSE DOMESTIC ABUSE SERVICES PO BOX 1172 MARINETTE, WI 54143	PC	DONATION - COVID 19	1,500
VETS 4 VETS OF NORTHEASTERN	l pc	SURING VETERAN'S ELAG	1 000

PO BOX 1172 MARINETTE, WI 54143			
VETS 4 VETS OF NORTHEASTERN WISCONSIN PO BOX 135 SURING WI 54174	PC	SURING VETERAN'S FLAG MEMORIAL ORJECT	1,000

MARINETTE, WI 54143			
VETS 4 VETS OF NORTHEASTERN WISCONSIN PO BOX 135 SURING, WI 54174	PC	SURING VETERAN'S FLAG MEMORIAL ORJECT	1,000

SURING, WI 54174	VETS 4 VETS OF NORTHEASTERN WISCONSIN PO BOX 135 SURING, WI 54174		PC	SURING VETERAN'S FLAG MEMORIAL ORJECT	1,000
------------------	--	--	----	--	-------

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

Name and address (nome or business)	or substantial contributor			
a Paid during the year				
OCONTO AREA HUMANE SOCIETY		PC	VET EXPENSES	25,000

PO BOX 241 OCONTO, WI 54153			
CITY OF OCONTO1201 MAIN STREET	GOV	HARBOR PROJECT	

Total.

000N10, W1 54155			
CITY OF OCONTO1201 MAIN STREET OCONTO, WI 54153	GOV	HARBOR PROJECT	26,000
OCONTO UNIFIED SCHOOL DISTRICT	GOV	VARIOUS EDUCATIONAL	38,063

OCONTO, WI 54153			
OCONTO UNIFIED SCHOOL DISTRICT (OUSD) 400 MICHIGAN AVENUE	GOV	VARIOUS EDUCATIONAL PROJECTS	38,063

OCONTO, WI 54153			
OCONTO UNIFIED SCHOOL DISTRICT (OUSD) 400 MICHIGAN AVENUE OCONTO, WI 54153	GOV	VARIOUS EDUCATIONAL PROJECTS	38,063

OCONTO UNIFIED SCHOOL DISTRICT (OUSD) 400 MICHIGAN AVENUE OCONTO, WI 54153	GOV	VARIOUS EDUCATIONAL PROJECTS	38,063

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

11,440

301,322

■ 3a

a Paid during the year			
RAINBOW HOUSE DOMESTIC ABUSE SERVICES	PC	CRISIS LINE EXPNESES	

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

SERVICES PO BOX 1172 OCONTO, WI 54153			
HSHS ST MARY'S HOSPITAL MEDICAL	PC	MARKETING OF MOBIL	

Total . .

OCONTO, WI 54153			
HSHS ST MARY'S HOSPITAL MEDICAL CENTER 1726 SHAWANO AVENUE	PC	MARKETING OF MOBIL MAMMOGRAPHY UNIT	11,000

HSHS ST MARY'S HOSPITAL MEDICAL	PC	MARKETING OF MOBIL	11,000
CENTER		MAMMOGRAPHY UNIT	
1726 SHAWANO AVENUE			
GREEN BAY, WI 54303			

efile GRAPHIC print - DO NOT P	ROCESS As Filed D	Data -	DL	N: 93491286006120
TY 2019 Accounting Fe	es Schedule			
<b>3</b>				
	<b>Name:</b> LEON H <b>EIN:</b> 39-1762	& CLYMENE M BONE	O FDN	
Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
ACCOUNTING FEES	5,432	2,716	0	2,716

Note: To capture the full content of this document, please select landscape mode (11" $\times$ 8.5") when printing.	
TY 2019 Depreciation Schedule	

Name: LEON H & CLYMENE M BOND FDN

ETN. 20 1762007

efile GRAPHIC print - DO NOT PROCESS | As Filed Data -

		EIN: 3	9-1/6208/						
	Deprecia	ation Schedule							
Description of Property	Date Acquired	Cost or Other Basis	Prior Years' Depreciation	Computation Method	Rate / Life (# of years)	Current Year's Depreciation Expense	Net Investment Income	Adjusted Net Income	Cost of Goods Sold Not Included
TWO OVERTURE FOLDING CHAIRS	2004-10-08	308	308	SL	7.000000000000	0	0	0	
BESTAR CONNEX L- SHAPED DESK	2015-11-27	835	418	SL	7.000000000000	119	0	0	
HP PRODESK 600 G2 COMPUTER	2017-03-24	842	101	SL	5.000000000000	168	0	0	
HP E240 23.8" LCD MONITOR	2017-03-24	179	67	SL	5.000000000000	36	0	0	
HP LASERJECT PRO COLOR PRINTER	2017-04-07	542	271	SL	5.000000000000	108	0	0	

DLN: 93491286006120

## **TY 2019 Investments Corporate Stock Schedule**

Name: LEON H & CLYMENE M BOND FDN

**EIN:** 39-1762087

**Investments Corporation Stock Schedule** 

Investments Corporation Stock Schedule  Name of Stock	End of Year Book Value	End of Year Fair Market Value
INVESCO LTD TERM MUN INCOME - 8595.516 SHS	95,888	97,559
EDGEWOOD GROWTH RETAIL - 2009.811 SHS	62,929	81,819
INVESCO SMALL CAP GROWTH CL Y - 3106.235 SHS	122,735	113,626
INVESCO OPPENHEIMER INTL GROWTH CL Y - 6988.791 SHS	311,707	285,352
CALVERT EMERGING MARKETS EQUITY CL I - 12912.476 SHS	223,876	194,591
FEDERATED KAUFMANN SMALL CAP CL IS - 2234.138 SHS	100,000	103,217
GOLDMAN SACHS GQG PARTNERS INTL - 3309.067 SHS	50,000	49,669
JANUS HENDERSON GLOBAL LIFE - 650.395 SHS	38,849	40,838
PUTNAM ULTRA SHORT DURATION - 14981.917 SHS	150,758	150,568
TRANSAMERICA INTL EQUITY CL I - 16945.715 SHS	333,815	257,575
MEDTRONIC PLC - 239 SHS	17,187	23,561
CHUBB LTD - 267 SHS	35,086	32,558
ALPHABET INC CL A - 50 SHS	59,725	71,676
AMAZON.COM INC - 20 SHS	36,220	48,847
AMERICAN ELECTRIC POWER - 275 SHS	16,091	23,444
AMERICAN EXPRESS CO - 100 SHS	9,477	9,507
AMERICAN TOWER CORP - 216 SHS	22,107	55,765
AMGEN INC - 375 SHS	62,102	86,138
ANTHEM INC - 82 SHS	16,086	24,117
APPLE INC - 180 SHS	19,715	57,229
ASTRAZENECA PLC - 735 SHS	19,338	40,131
AUTOMATIC DATA PROCESSING - 256 SHS	24,638	37,501
BERKSHIRE HATHAWAY INC CL B - 580 SHS	117,545	107,636
BOEING COMPANY - 210 SHS	54,223	30,629
BROADCOM INC - 117 SHS	28,800	34,079
CME GROUP INC CL A - 198 SHS	23,706	36,155
CARNIVAL CORP PAIRED CTF 1 - 324 SHS	16,847	5,100
CARRIER GLOBAL CORP - 571 SHS	11,907	11,688
CISCO SYSTEMS INC - 544 SHS	18,802	26,014
CITIGROUP INC - 522 SHS	30,224	25,009

Name of Stock	End of Year Book Value	End of Year Fair Market Value
COCA-COLA COMPANY - 500 SHS	20,610	23,340
COSTCO WHOLESALE CORP - 158 SHS	23,531	48,738
DANAHER CORP - 302 SHS	23,374	50,316
DIGITAL REALTY TRUST INC - 205 SHS	18,230	29,430
DOMINION ENERGY INC - 351 SHS	24,928	29,839
ECOLAB INC - 150 SHS	17,773	31,887
EMERSON ELECTRIC CO - 1066 SHS	63,619	65,047
HOME DEPOT INC - 532 SHS	66,363	132,191
HONEYWELL INTL INC - 635 SHS	66,399	92,615
HUMANA INC - 109 SHS	26,380	44,761
INTEL CORP - 337 SHS	11,076	21,207
JPMORGAN CHASE & CO - 198 SHS	11,335	19,267
JOHNSON & JOHNSON - 409 SHS	44,935	60,839
LOCKHEED MARTIN CORP - 387 SHS	87,464	150,326
LOWES COMPANIES INC - 661 SHS	54,182	86,161
MASTERCARD INC CL A - 40 SHS	10,594	12,036
MCDONALDS CORP - 450 SHS	53,595	83,844
MERCK & COMPANY INC - 247 SHS	15,121	19,938
MICROSOFT CORP - 900 SHS	50,388	164,925
NEXTERA ENERGY INC - 502 SHS	63,177	128,291
OTIS WORLDWIDE CORP - 285 SHS	16,625	15,005
PACCAR INC - 196 SHS	12,298	14,477
PEPSICO INC - 496 SHS	51,122	65,249
PFIZER INC - 511 SHS	16,174	19,515
PHILIP MORRIS INTL - 212 SHS	18,711	15,552
PROLOGIS INC - 487 SHS	29,750	44,561
RAYTHEON TECHNOLOGIES - 1250 SHS	68,750	80,650
ROYAL DUTCH SHELL PLC - 411 SHS	22,776	12,511
SHERWIN WILLIAMS CO - 49 SHS	20,606	29,099
SYSCO CORP - 490 SHS	26,891	27,028

Investments Corporation Stock Schedule

Name of Stock	End of Year Book Value	End of Year Fair Market Value
TEXAS INSTRUMENTS INC - 1174 SHS	99,594	139,401
THERMO FISHER SCIENTIFIC INC - 191 SHS	26,625	66,695
3M COMPANY - 168 SHS	26,648	26,282
TOTAL S A SPON ADR - 527 SHS	25,253	19,805
TRUIST FINANCIAL CORP - 569 SHS	26,359	20,928
UNION PACIFIC CORP - 800 SHS	87,057	135,888
VERIZON COMMUNICATIONS - 420 SHS	20,630	24,100
VISA INC - 249 SHS	18,833	48,615
WALMART INC - 973 SHS	73,116	120,710
ISHARES EDGE MSCI MIN - 809 SHS	36,761	49,851
SPDR SER S&P 600 SM CAP GROWTH - 768 SHS	43,798	42,109
SPDR SER S&P 600 SM CAP VALUE - 1138.229 SHS	73,343	54,248
SPDR SER S&P 400 MID CAP GROWTH - 825 SHS	37,390	43,816
SPDR SER S&P 400 MID CAP VALUE - 824 SHS	39,139	34,946
SCHWAB U S LARGE CAP ETF - 1266.867 SHS	86,946	92,127
SCHWAB EMERGING MKT EQUITY ETF - 941 SHS	21,521	21,558
VANGUARD TOTAL WORLD STOCK - 720 SHS	45,209	52,502
VANGUARD S&P 500 INDEX ETF - 615 SHS	128,802	172,046
VANGUARD MID CAP VALUE ETF - 1282.735 SHS	141,859	122,257
VANGUARD MID CAP GROWTH ETF - 1016.449 SHS	138,145	163,608
VANGUARD GROWTH ETF - 800 SHS	90,578	154,440
AMER EXPR CENTURION CD SALT LAKE - 9000 SHS	9,003	9,021
CATHAY BANK LA CD - 5000 SHS	5,000	5,000

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TY 2019 Investments Governments	nent Obligat	ions Schedule	
Name:	LEON H & CLY	MENE M BOND FDN	
EIN:	39-1762087		
US Government Securities - End of Year Book Value:		99,996	
US Government Securities - End of Year Fair Market Value:		99,999	
State & Local Government Securities - End of Year Book Value:		0	
State & Local Government Securities - End of Year Fair Market Value:		0	

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TY 2019 Investments - Other Schedule						
Name:	LEON H & CLYMEN	E M BOND FDN				

Name:	LEON H & CLYMENE M BOND FDN
EIN:	39-1762087

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Investments Other Schedule 2			
Category/ Item	Listed at Cost or FMV	Book Value	End of Year Fair Market Value

Category/ Item	Listed at Cost or FMV	Book Value	End of Year Fair Market Value
ONEIDA GOLF & RIDING STOCK	AT COST	4,200	4,200

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TY 2019 Land, Etc. Schedule		

Name: LEON H & CLYMENE M BOND FDN

E				
Category / Item	Cost / Other Basis	Accumulated Depreciation	Book Value	End of Year Fair Market Value
TWO OVERTURE FOLDING CHAIRS	308	308	0	
BESTAR CONNEX L-SHAPED DESK	835	537	298	298
HP PRODESK 600 G2 COMPUTER	842	269	573	573
HP E240 23.8" LCD MONITOR	179	103	76	76
HP LASERJECT PRO COLOR PRINTER	542	379	163	163

Name: LEON H & CLYMENE M BOND FDN

ETNI-20 1762007

SCULPTURE/PICTURES

PREPAID EXCISE TAX

ETIA: 23-17	702007	
Other Assets Schedule		
Description	Beginning of Year -	End of Year - Book

**Book Value** 

Value

7,380

7,152

7,380

6,099

End of Year - Fair

Market Value

7,380

TY 2019 Other Expenses Schedule  Name: LEON H & CLYMENE M BOND FDN  EIN: 39-1762087  Other Expenses Schedule	Description	Revenue and Expenses per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
TY 2019 Other Expenses Schedule  Name: LEON H & CLYMENE M BOND FDN	Other Expenses Schedule				
TY 2019 Other Expenses Schedule	EIN:	39-1762087			
	Name:	LEON H & CLYM	IENE M BOND FDI	V	
eine GRAPHIC PHILE - DO NOT PROCESS   AS Fried Data -   DEN. 934912800001	TY 2019 Other Expenses Sche	dule			
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776

387

399

1,174

1,518

181

418

140

1,233

0

0

0

0

0

0

0

3,343

776

387

399

1,174

1,518

181

418

140

1,233

**INSURANCE** 3,343 0

OFFICE SUPPLIES

WEBSITE FEES

TELEPHONE

CELLULAR PHONE

**MISCELLANEOUS** 

COMPUTER/SOFTWARE

TRAINING AND EDUCATION

MEALS AND ENTERTAINMENT

**POSTAGE** 

Description

efile GRAPHIC print - DO NOT PROCESS

As Filed Data -

Name: LEON H & CLYMENE M BOND FDN

**EIN:** 39-1762087

Other Income Schedule

CLASS ACTION SETTLEMENT

Revenue And

**Expenses Per Books** 

233

Net Investment

Income

233

DLN: 93491286006120

Adjusted Net Income

efile GRAPHIC print - DO NOT PROCESS	As Filed Data -	DLN: 93491286006120		
TY 2019 Other Liabilities Sche	<u>dule</u>			
Name:	LEON H & CLY	/MENE M BOI	ND FDN	1
		· · · · · · · · · · · · · · · · · · ·		'
EIN:	39-1762087			
Description	n		Beginning of Year - Book Value	End of Year - Book Value
FICA PAYABLE			0	1,156
FEDERAL TAX WITHHELD			0	755
1 - 25 210 (2 170 ( 1711 :: : : : : : : : : : : : : : : : :			11	`

efile GRAPHIC print - DO NOT PROCE	SS As Filed Data	-	DLN	l: 93491286006120		
TY 2019 Other Professional Fees Schedule						
Name: LEON H & CLYMENE M BOND FDN						
<b>EIN:</b> 39-1762087						
Category	Amount	Net Investment	Adjusted Net	Disbursements		

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

22,887

22,887

INVESTMENT FEES

efile GRAPHIC print - DO NOT PROCESS	S As Filed Data	<u>-</u>	DLI	N: 93491286006120
TY 2019 Taxes Schedule				
Name: LEON H & CLYMENE M BOND FDN EIN: 39-1762087				
Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
FICA TAXES	5,015	2,508	0	2,507
FOREIGN TAXES PAID	438	438	0	0
RM 990-PF TAX PAYABLE	1,053	0	0	0