

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.**  
 ▶ **Information about Form 990-PF and its instructions is at [www.irs.gov/form990pf](http://www.irs.gov/form990pf).**

OMB No 1545-0052  
**2017**  
**Open to Public Inspection**

**For calendar year 2017, or tax year beginning 07-01-2017, and ending 06-30-2018**

Name of foundation EASTER FOUNDATION INC		<b>A Employer identification number</b> 20-0499778	
Number and street (or P O box number if mail is not delivered to street address) PO BOX 5501		Room/suite	
		<b>B Telephone number (see instructions)</b> (920) 336-2848	
City or town, state or province, country, and ZIP or foreign postal code DE PERE, WI 541155501			
<b>G</b> Check all that apply: <input type="checkbox"/> Initial return <input type="checkbox"/> Initial return of a former public charity <input type="checkbox"/> Final return <input type="checkbox"/> Amended return <input type="checkbox"/> Address change <input type="checkbox"/> Name change		<b>D 1.</b> Foreign organizations, check here <input type="checkbox"/> <b>2.</b> Foreign organizations meeting the 85% test, check here and attach computation <input type="checkbox"/>	
<b>H</b> Check type of organization: <input checked="" type="checkbox"/> Section 501(c)(3) exempt private foundation <input type="checkbox"/> Section 4947(a)(1) nonexempt charitable trust <input type="checkbox"/> Other taxable private foundation		<b>E</b> If private foundation status was terminated under section 507(b)(1)(A), check here <input type="checkbox"/>	
<b>I</b> Fair market value of all assets at end of year (from Part II, col (c), line 16) ▶ \$ 37,193,637		<b>J</b> Accounting method: <input checked="" type="checkbox"/> Cash <input type="checkbox"/> Accrual <input type="checkbox"/> Other (specify) _____ (Part I, column (d) must be on cash basis)	
		<b>F</b> If the foundation is in a 60-month termination under section 507(b)(1)(B), check here <input type="checkbox"/>	

<b>Part I Analysis of Revenue and Expenses</b> <small>(The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a) (see instructions) )</small>		(a) Revenue and expenses per books	(b) Net investment income	(c) Adjusted net income	(d) Disbursements for charitable purposes (cash basis only)
<b>Revenue</b>	<b>1</b> Contributions, gifts, grants, etc., received (attach schedule)	3,820,676			
	<b>2</b> Check <input type="checkbox"/> if the foundation is <b>not</b> required to attach Sch B				
	<b>3</b> Interest on savings and temporary cash investments	190,546	187,630		
	<b>4</b> Dividends and interest from securities	156,629	162,849		
	<b>5a</b> Gross rents				
	<b>b</b> Net rental income or (loss)				
	<b>6a</b> Net gain or (loss) from sale of assets not on line 10	2,714,134			
	<b>b</b> Gross sales price for all assets on line 6a	9,192,690			
	<b>7</b> Capital gain net income (from Part IV, line 2)		2,714,247		
	<b>8</b> Net short-term capital gain				
	<b>9</b> Income modifications				
	<b>10a</b> Gross sales less returns and allowances				
<b>b</b> Less Cost of goods sold					
<b>c</b> Gross profit or (loss) (attach schedule)					
<b>11</b> Other income (attach schedule)					
<b>12 Total.</b> Add lines 1 through 11	6,881,985	3,064,726			
<b>Operating and Administrative Expenses</b>	<b>13</b> Compensation of officers, directors, trustees, etc	0	0		0
	<b>14</b> Other employee salaries and wages				
	<b>15</b> Pension plans, employee benefits				
	<b>16a</b> Legal fees (attach schedule)	268	134		134
	<b>b</b> Accounting fees (attach schedule)	3,850	1,925		1,925
	<b>c</b> Other professional fees (attach schedule)				
	<b>17</b> Interest				
	<b>18</b> Taxes (attach schedule) (see instructions)	59,758	0		0
	<b>19</b> Depreciation (attach schedule) and depletion				
	<b>20</b> Occupancy				
	<b>21</b> Travel, conferences, and meetings				
	<b>22</b> Printing and publications				
	<b>23</b> Other expenses (attach schedule)	183,280	183,180		100
	<b>24 Total operating and administrative expenses.</b> Add lines 13 through 23	247,156	185,239		2,159
	<b>25</b> Contributions, gifts, grants paid	1,757,200			1,757,200
<b>26 Total expenses and disbursements.</b> Add lines 24 and 25	2,004,356	185,239		1,759,359	
<b>27</b> Subtract line 26 from line 12					
<b>a Excess of revenue over expenses and disbursements</b>	4,877,629				
<b>b Net investment income</b> (if negative, enter -0-)		2,879,487			
<b>c Adjusted net income</b> (if negative, enter -0-)					

<b>Part II Balance Sheets</b> Attached schedules and amounts in the description column should be for end-of-year amounts only (See instructions)		Beginning of year	End of year	
		(a) Book Value	(b) Book Value	(c) Fair Market Value
<b>Assets</b>	<b>1</b> Cash—non-interest-bearing . . . . .	21,158	14,679	14,679
	<b>2</b> Savings and temporary cash investments . . . . .			
	<b>3</b> Accounts receivable ▶ _____ Less allowance for doubtful accounts ▶ _____			
	<b>4</b> Pledges receivable ▶ _____ Less allowance for doubtful accounts ▶ _____			
	<b>5</b> Grants receivable . . . . .			
	<b>6</b> Receivables due from officers, directors, trustees, and other disqualified persons (attach schedule) (see instructions) . . . . .			
	<b>7</b> Other notes and loans receivable (attach schedule) ▶ _____ Less allowance for doubtful accounts ▶ _____			
	<b>8</b> Inventories for sale or use . . . . .			
	<b>9</b> Prepaid expenses and deferred charges . . . . .			
	<b>10a</b> Investments—U S and state government obligations (attach schedule)			
	<b>b</b> Investments—corporate stock (attach schedule) . . . . .	16,578,522	18,598,924	29,026,821
	<b>c</b> Investments—corporate bonds (attach schedule) . . . . .	7,045,294	8,381,959	8,152,137
	<b>11</b> Investments—land, buildings, and equipment basis ▶ _____ Less accumulated depreciation (attach schedule) ▶ _____			
	<b>12</b> Investments—mortgage loans . . . . .			
	<b>13</b> Investments—other (attach schedule) . . . . .			
	<b>14</b> Land, buildings, and equipment basis ▶ _____ Less accumulated depreciation (attach schedule) ▶ _____			
<b>15</b> Other assets (describe ▶ _____)				
<b>16 Total assets</b> (to be completed by all filers—see the instructions Also, see page 1, item I)	23,644,974	26,995,562	37,193,637	
<b>Liabilities</b>	<b>17</b> Accounts payable and accrued expenses . . . . .			
	<b>18</b> Grants payable . . . . .			
	<b>19</b> Deferred revenue . . . . .			
	<b>20</b> Loans from officers, directors, trustees, and other disqualified persons			
	<b>21</b> Mortgages and other notes payable (attach schedule) . . . . .			
	<b>22</b> Other liabilities (describe ▶ _____)			
	<b>23 Total liabilities</b> (add lines 17 through 22) . . . . .	0	0	
<b>Net Assets or Fund Balances</b>	<b>Foundations that follow SFAS 117, check here</b> <input type="checkbox"/> <b>and complete lines 24 through 26 and lines 30 and 31.</b>			
	<b>24</b> Unrestricted . . . . .			
	<b>25</b> Temporarily restricted . . . . .			
	<b>26</b> Permanently restricted . . . . .			
	<b>Foundations that do not follow SFAS 117, check here</b> <input checked="" type="checkbox"/> <b>and complete lines 27 through 31.</b>			
	<b>27</b> Capital stock, trust principal, or current funds . . . . .	0	0	
	<b>28</b> Paid-in or capital surplus, or land, bldg , and equipment fund	0	0	
<b>29</b> Retained earnings, accumulated income, endowment, or other funds	23,644,974	26,995,562		
<b>30 Total net assets or fund balances</b> (see instructions) . . . . .	23,644,974	26,995,562		
<b>31 Total liabilities and net assets/fund balances</b> (see instructions) .	23,644,974	26,995,562		

<b>Part III Analysis of Changes in Net Assets or Fund Balances</b>		
<b>1</b> Total net assets or fund balances at beginning of year—Part II, column (a), line 30 (must agree with end-of-year figure reported on prior year's return) . . . . .	<b>1</b>	23,644,974
<b>2</b> Enter amount from Part I, line 27a . . . . .	<b>2</b>	4,877,629
<b>3</b> Other increases not included in line 2 (itemize) ▶ _____	<b>3</b>	0
<b>4</b> Add lines 1, 2, and 3 . . . . .	<b>4</b>	28,522,603
<b>5</b> Decreases not included in line 2 (itemize) ▶ _____	<b>5</b>	1,527,041
<b>6</b> Total net assets or fund balances at end of year (line 4 minus line 5)—Part II, column (b), line 30 .	<b>6</b>	26,995,562

**Part IV Capital Gains and Losses for Tax on Investment Income**

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

(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale	(h) Gain or (loss) (e) plus (f) minus (g)
<b>a</b> 9,192,690		6,478,443	2,714,247
<b>b</b>			
<b>c</b>			
<b>d</b>			
<b>e</b>			

Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69			(l) Gains (Col (h) gain minus col (k), but not less than -0-) or Losses (from col (h))
(i) F M V as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col (i) over col (j), if any	
<b>a</b>			2,714,247
<b>b</b>			
<b>c</b>			
<b>d</b>			
<b>e</b>			

<b>2</b> Capital gain net income or (net capital loss)	2	2,714,247
<b>3</b> Net short-term capital gain or (loss) as defined in sections 1222(5) and (6) If gain, also enter in Part I, line 8, column (c) (see instructions) If (loss), enter -0- in Part I, line 8	3	

**Part V Qualification Under Section 4940(e) for Reduced Tax on Net Investment Income**

(For optional use by domestic private foundations subject to the section 4940(a) tax on net investment income)

If section 4940(d)(2) applies, leave this part blank

Was the foundation liable for the section 4942 tax on the distributable amount of any year in the base period?  Yes  No  
 If "Yes," the foundation does not qualify under section 4940(e) Do not complete this part

**1** Enter the appropriate amount in each column for each year, see instructions before making any entries

(a) Base period years Calendar year (or tax year beginning in)	(b) Adjusted qualifying distributions	(c) Net value of noncharitable-use assets	(d) Distribution ratio (col (b) divided by col (c))
2016	2,309,000	27,018,621	0.085460
2015	1,510,087	21,199,876	0.071231
2014	729,985	19,075,848	0.038267
2013	475,855	15,601,078	0.030501
2012	208,530	9,998,006	0.020857

<b>2</b> Total of line 1, column (d)	2	0.246316
<b>3</b> Average distribution ratio for the 5-year base period—divide the total on line 2 by 5, or by the number of years the foundation has been in existence if less than 5 years	3	0.049263
<b>4</b> Enter the net value of noncharitable-use assets for 2017 from Part X, line 5	4	33,894,294
<b>5</b> Multiply line 4 by line 3	5	1,669,735
<b>6</b> Enter 1% of net investment income (1% of Part I, line 27b)	6	28,795
<b>7</b> Add lines 5 and 6	7	1,698,530
<b>8</b> Enter qualifying distributions from Part XII, line 4	8	1,759,359

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

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

Table with 11 rows for excise tax calculations. Includes categories like 'Exempt operating foundations', 'Domestic foundations that meet the section 4940(e) requirements', and 'Tax based on investment income'. Total amount owed is 11,205.

Part VII-A Statements Regarding Activities

Table with 10 rows for activity statements. Questions include 'During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any political campaign?' and 'Did the foundation have at least \$5,000 in assets at any time during the year?'. Includes Yes/No columns.

Part VII-A Statements Regarding Activities (continued)

Table with 3 columns: Question, Yes, No. Rows 11-14 regarding controlled entities, distributions, public inspection requirements, and books in care.

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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.

Table with 3 columns: Question, Yes, No. Row 16 regarding interest in foreign countries.

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

File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.

Main table with 3 columns: Question, Yes, No. Rows 1a-4b regarding Form 4720 exceptions and requirements.

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

<b>5a</b>	During the year did the foundation pay or incur any amount to			
	<b>(1)</b> Carry on propaganda, or otherwise attempt to influence legislation (section 4945(e))?	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No	
	<b>(2)</b> Influence the outcome of any specific public election (see section 4955), or to carry on, directly or indirectly, any voter registration drive? . . . . .	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No	
	<b>(3)</b> Provide a grant to an individual for travel, study, or other similar purposes?	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No	
	<b>(4)</b> Provide a grant to an organization other than a charitable, etc., organization described in section 4945(d)(4)(A)? (see instructions). . . . .	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No	
	<b>(5)</b> Provide for any purpose other than religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals? . . . . .	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No	
<b>b</b>	If any answer is "Yes" to 5a(1)–(5), did <b>any</b> of the transactions fail to qualify under the exceptions described in Regulations section 53.4945 or in a current notice regarding disaster assistance (see instructions)? . . . . . Organizations relying on a current notice regarding disaster assistance check here. . . . . ▶			<b>5b</b>
<b>c</b>	If the answer is "Yes" to question 5a(4), does the foundation claim exemption from the tax because it maintained expenditure responsibility for the grant? . . . . . <i>If "Yes," attach the statement required by Regulations section 53.4945–5(d)</i>	<input type="checkbox"/> Yes	<input type="checkbox"/> No	
<b>6a</b>	Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? . . . . .	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No	
<b>b</b>	Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract? . . . . . <i>If "Yes" to 6b, file Form 8870</i>			<b>6b</b>
<b>7a</b>	At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction?	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No	
<b>b</b>	If yes, did the foundation receive any proceeds or have any net income attributable to the transaction? . . . . .			<b>7b</b>

**Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors**

**1 List all officers, directors, trustees, foundation managers and their compensation (see instructions).**

(a) Name and address	Title, and average hours per week (b) devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
See Additional Data Table				

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

(a) Name and address of each employee paid more than \$50,000	Title, and average hours per week (b) devoted to position	(c) Compensation	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
NONE				

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

**3 Five highest-paid independent contractors for professional services (see instructions). If none, enter "NONE".**

(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
GENEVA CAPITAL MANAGEMENT LTD 100 E WISCONSIN AVENUE STE 2550 MILWAUKEE, WI 53202	MANAGEMENT FEES	148,645

Total number of others receiving over \$50,000 for professional services. . . . . 0

**Part IX-A Summary of Direct Charitable Activities**

List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of organizations and other beneficiaries served, conferences convened, research papers produced, etc

	Expenses
<b>1</b>	
<b>2</b>	
<b>3</b>	
<b>4</b>	

**Part IX-B Summary of Program-Related Investments (see instructions)**

Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2	Amount
<b>1</b>	
<b>2</b>	
All other program-related investments See instructions	
<b>3</b>	

Total. Add lines 1 through 3 . . . . . 0

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

<b>1</b>	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes		
<b>a</b>	Average monthly fair market value of securities.	<b>1a</b>	34,346,076
<b>b</b>	Average of monthly cash balances.	<b>1b</b>	64,375
<b>c</b>	Fair market value of all other assets (see instructions).	<b>1c</b>	0
<b>d</b>	<b>Total</b> (add lines 1a, b, and c).	<b>1d</b>	34,410,451
<b>e</b>	Reduction claimed for blockage or other factors reported on lines 1a and 1c (attach detailed explanation).	<b>1e</b>	0
<b>2</b>	Acquisition indebtedness applicable to line 1 assets.	<b>2</b>	0
<b>3</b>	Subtract line 2 from line 1d.	<b>3</b>	34,410,451
<b>4</b>	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions).	<b>4</b>	516,157
<b>5</b>	<b>Net value of noncharitable-use assets.</b> Subtract line 4 from line 3. Enter here and on Part V, line 4.	<b>5</b>	33,894,294
<b>6</b>	<b>Minimum investment return.</b> Enter 5% of line 5.	<b>6</b>	1,694,715

**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.)

<b>1</b>	Minimum investment return from Part X, line 6.	<b>1</b>	1,694,715
<b>2a</b>	Tax on investment income for 2017 from Part VI, line 5.	<b>2a</b>	28,795
<b>b</b>	Income tax for 2017 (This does not include the tax from Part VI).	<b>2b</b>	
<b>c</b>	Add lines 2a and 2b.	<b>2c</b>	28,795
<b>3</b>	Distributable amount before adjustments. Subtract line 2c from line 1.	<b>3</b>	1,665,920
<b>4</b>	Recoveries of amounts treated as qualifying distributions.	<b>4</b>	0
<b>5</b>	Add lines 3 and 4.	<b>5</b>	1,665,920
<b>6</b>	Deduction from distributable amount (see instructions).	<b>6</b>	0
<b>7</b>	<b>Distributable amount</b> as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1.	<b>7</b>	1,665,920

**Part XII Qualifying Distributions** (see instructions)

<b>1</b>	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes		
<b>a</b>	Expenses, contributions, gifts, etc.—total from Part I, column (d), line 26.	<b>1a</b>	1,759,359
<b>b</b>	Program-related investments—total from Part IX-B.	<b>1b</b>	0
<b>2</b>	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes.	<b>2</b>	
<b>3</b>	Amounts set aside for specific charitable projects that satisfy the		
<b>a</b>	Suitability test (prior IRS approval required).	<b>3a</b>	
<b>b</b>	Cash distribution test (attach the required schedule).	<b>3b</b>	
<b>4</b>	<b>Qualifying distributions.</b> Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4.	<b>4</b>	1,759,359
<b>5</b>	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income. Enter 1% of Part I, line 27b (see instructions).	<b>5</b>	28,795
<b>6</b>	<b>Adjusted qualifying distributions.</b> Subtract line 5 from line 4.	<b>6</b>	1,730,564

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



**Part XIII Undistributed Income** (see instructions)

	(a) Corpus	(b) Years prior to 2016	(c) 2016	(d) 2017
<b>1</b> Distributable amount for 2017 from Part XI, line 7				1,665,920
<b>2</b> Undistributed income, if any, as of the end of 2017				
<b>a</b> Enter amount for 2016 only. . . . .			0	
<b>b</b> Total for prior years 20___, 20___, 20___		0		
<b>3</b> Excess distributions carryover, if any, to 2017				
<b>a</b> From 2012. . . . .				
<b>b</b> From 2013. . . . .				
<b>c</b> From 2014. . . . .				
<b>d</b> From 2015. . . . .				
<b>e</b> From 2016. . . . .				557,884
<b>f Total</b> of lines 3a through e. . . . .	557,884			
<b>4</b> Qualifying distributions for 2017 from Part XII, line 4 ▶ \$ <u>1,759,359</u>				
<b>a</b> Applied to 2016, but not more than line 2a			0	
<b>b</b> Applied to undistributed income of prior years (Election required—see instructions). . . . .		0		
<b>c</b> Treated as distributions out of corpus (Election required—see instructions). . . . .	0			
<b>d</b> Applied to 2017 distributable amount. . . . .				1,665,920
<b>e</b> Remaining amount distributed out of corpus	93,439			
<b>5</b> Excess distributions carryover applied to 2017 (If an amount appears in column (d), the same amount must be shown in column (a) )				0
<b>6 Enter the net total of each column as indicated below:</b>				
<b>a</b> Corpus Add lines 3f, 4c, and 4e Subtract line 5	651,323			
<b>b</b> Prior years' undistributed income Subtract line 4b from line 2b . . . . .		0		
<b>c</b> 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		
<b>d</b> Subtract line 6c from line 6b Taxable amount—see instructions . . . . .		0		
<b>e</b> Undistributed income for 2016 Subtract line 4a from line 2a Taxable amount—see instructions . . . . .			0	
<b>f</b> Undistributed income for 2017 Subtract lines 4d and 5 from line 1 This amount must be distributed in 2018 . . . . .				0
<b>7</b> 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			
<b>8</b> Excess distributions carryover from 2012 not applied on line 5 or line 7 (see instructions). . . . .	0			
<b>9 Excess distributions carryover to 2018.</b> Subtract lines 7 and 8 from line 6a . . . . .	651,323			
<b>10</b> Analysis of line 9				
<b>a</b> Excess from 2013. . . . .				
<b>b</b> Excess from 2014. . . . .				
<b>c</b> Excess from 2015. . . . .				
<b>d</b> Excess from 2016. . . . .				557,884
<b>e</b> Excess from 2017. . . . .				93,439

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

**1a** If the foundation has received a ruling or determination letter that it is a private operating foundation, and the ruling is effective for 2017, enter the date of the ruling. . . . . ▶

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

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

	Tax year	Prior 3 years			<b>(e) Total</b>
	<b>(a) 2017</b>	<b>(b) 2016</b>	<b>(c) 2015</b>	<b>(d) 2014</b>	
<b>b</b> 85% of line 2a . . . . .					
<b>c</b> Qualifying distributions from Part XII, line 4 for each year listed . . . . .					
<b>d</b> Amounts included in line 2c not used directly for active conduct of exempt activities . . . . .					
<b>e</b> Qualifying distributions made directly for active conduct of exempt activities. Subtract line 2d from line 2c . . . . .					
<b>3</b> Complete 3a, b, or c for the alternative test relied upon					
<b>a</b> "Assets" alternative test—enter					
<b>(1)</b> Value of all assets . . . . .					
<b>(2)</b> Value of assets qualifying under section 4942(j)(3)(B)(i)					
<b>b</b> "Endowment" alternative test— enter 2/3 of minimum investment return shown in Part X, line 6 for each year listed. . .					
<b>c</b> "Support" alternative test—enter					
<b>(1)</b> Total support other than gross investment income (interest, dividends, rents, payments on securities loans (section 512(a)(5)), or royalties) . . . . .					
<b>(2)</b> Support from general public and 5 or more exempt organizations as provided in section 4942(j)(3)(B)(iii). . . . .					
<b>(3)</b> Largest amount of support from an exempt organization					
<b>(4)</b> Gross investment income					

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

**1 Information Regarding Foundation Managers:**

**a** List any managers of the foundation who have contributed more than 2% of the total contributions received by the foundation before the close of any tax year (but only if they have contributed more than \$5,000) (See section 507(d)(2) )  
See Additional Data Table

**b** List any managers of the foundation who own 10% or more of the stock of a corporation (or an equally large portion of the ownership of a partnership or other entity) of which the foundation has a 10% or greater interest

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**2 Information Regarding Contribution, Grant, Gift, Loan, Scholarship, etc., Programs:**

Check here  if the foundation only makes contributions to preselected charitable organizations and does not accept unsolicited requests for funds. If the foundation makes gifts, grants, etc (see instructions) to individuals or organizations under other conditions, complete items 2a, b, c, and d

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

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

---

**c** Any submission deadlines

---

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

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

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i> See Additional Data Table				
<b>Total . . . . .</b> ▶ <b>3a</b>				1,757,200
<b>b</b> <i>Approved for future payment</i>				
<b>Total . . . . .</b> ▶ <b>3b</b>				0



Information Regarding Transfers To and Transactions and Relationships With Noncharitable Exempt Organizations

Part XVII

1 Did the organization directly or indirectly engage in any of the following with any other organization described in section 501(c) of the Code... 1a(1) Cash... 1a(2) Other assets... 1b(1) Sales of assets... 1b(2) Purchases of assets... 1b(3) Rental of facilities... 1b(4) Reimbursement arrangements... 1b(5) Loans or loan guarantees... 1b(6) Performance of services... 1c Sharing of facilities...

Table with 4 columns: (a) Line No, (b) Amount involved, (c) Name of noncharitable exempt organization, (d) Description of transfers, transactions, and sharing arrangements.

2a Is the foundation directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described in section 501(c) of the Code... [ ] Yes [x] No

Table with 3 columns: (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 Here [Signature] 2019-01-15 [Title]

May the IRS discuss this return with the preparer shown below (see instr)? [x] Yes [ ] No

Paid Preparer Use Only section containing fields for Preparer's name (BRIAN J STRNAD), Signature, Date (2018-12-27), Check if self-employed, PTIN (P00035098), Firm's name (CLIFTONLARSONALLEN LLP), Firm's EIN (41-0746749), and Firm's address (PO BOX 23819, GREEN BAY, WI 543053819).

**Form 990PF Part VIII Line 1 - List all officers, directors, trustees, foundation managers and their compensation**

<b>(a)</b> Name and address	Title, and average hours per week <b>(b)</b> devoted to position	<b>(c)</b> Compensation (If not paid, enter -0-)	<b>(d)</b> Contributions to employee benefit plans and deferred compensation	Expense account, <b>(e)</b> other allowances
BRUCE A BELL 958 HICKORY AVENUE DE PERE, WI 54115	PRESIDENT/TREASURER 3 00	0	0	0
CAROL H BELL 958 HICKORY AVENUE DE PERE, WI 54115	VICE PRESIDENT/SECRETARY 0 25	0	0	0
KARL A SCHMIDT 2085 SANDALWOOD COURT GREEN BAY, WI 54304	DIRECTOR 0 25	0	0	0
KAREN B SCHMIDT 2085 SANDALWOOD COURT GREEN BAY, WI 54304	DIRECTOR 0 25	0	0	0
WARREN C PFOHL 27508 RIVERBANK DR BONITA SPRINGS, FL 34134	DIRECTOR 0 25	0	0	0
BRENDA B PFOHL 27508 RIVERBANK DR BONITA SPRINGS, FL 34134	DIRECTOR 0 25	0	0	0
PAUL KEPPELER 6151 N SAND BEACH ROAD OCONOMOWOC, WI 53066	DIRECTOR 0 25	0	0	0
BETSY B KEPPELER 6151 N SAND BEACH ROAD OCONOMOWOC, WI 53066	DIRECTOR 0 25	0	0	0

**Form 990PF Part XV Line 1a - List any managers of the foundation who have contributed more than 2% of the total contributions received by the foundation before the close of any tax year (but only if they have contributed more than \$5,000).**

BRUCE A BELL

CAROL H BELL

KARL A SCHMIDT

KAREN B SCHMIDT

WARREN C PFOHL

BRENDA B PFOHL

PAUL KEPPELER

BETSY B KEPPELER

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

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
441 MINISTRIES BEECHWOOD INC 441 PARSELLS AVENUE ROCHESTER, NY 14609	N/A	PUBLIC CHARITY	TO FUND CHARITABLE OBJECTIVES OF THE CHARITY	5,000
ALL SAINTS CHURCH 2418 LEON BOND DR GREEN BAY, WI 54311	N/A	PC	TO FUND CHARITABLE OBJECTIVES OF THE ORGANIZATION	5,000
ALZHEIMERS ASSOCIATION 2900 CURRY LANE GREEN BAY, WI 54311	N/A	PUBLIC CHARITY	TO FUND CHARITABLE OBJECTIVES OF CHARITY	25,000
<b>Total . . . . .</b> ▶ <b>3a</b>				1,757,200



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

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
AMERICAN DIABETES ASSOC 1701 NORTH BEAUREGARD STREET ALEXANDRIA, VA 22311	N/A	PUBLIC CHARITY	TO FUND CHARITABLE OBJECTIVES OF CHARITY	15,000
AMERICAN HEART ASSOCIATION 2149 VELD AVE GREEN BAY, WI 54303	N/A	PUBLIC CHARITY	TO FUND CHARITABLE OBJECTIVES OF CHARITY	10,000
AMERICAN INSTITUTE FOR CANCER RESEARCH 1759 R STREET NW WASHINGTON, DC 20009	N/A	PUBLIC CHARITY	TO FUND CHARITABLE OBJECTIVES OF CHARITY	20,000
<b>Total . . . . .</b> ▶ <b>3a</b>				1,757,200

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

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
BATTEN DISEASE SUPPORT AND RESEARCH - BDSRA 120 HUMPHRIES DRIVE REYNOLDSBURG, OH 43068	N/A	PUBLIC CHARITY	TO FUND CHARITABLE OBJECTIVES OF CHARITY	20,000
BAY PRESBYTERIAN CHURCH 26911 S BAY DRIVE BONITA SPRINGS, FL 341344343	N/A	PUBLIC CHARITY	TO FUND CHARITABLE OBJECTIVES OF CHARITY	30,000
BELLIN COLLEGE3201 EATON RD GREEN BAY, WI 54311	N/A	PC	TO FUND CHARITABLE OBJECTIVES OF THE ORGANIZATION	25,000
<b>Total . . . . .</b> ▶ <b>3a</b>				1,757,200

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

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
CAFE OF LIFE26724 NOMAD DR BONITA SPRINGS, FL 34135	N/A	PC	TO FUND CHARITABLE OBJECTIVES OF THE ORGANIZATION	100
CAMPUS CRUSADE FOR CHRIST 100 LAKE HART DRIVE ORLANDO, FL 32832	N/A	PUBLIC CHARITY	TO FUND CHARITABLE OBJECTIVES OF CHARITY	25,000
CAMPUS CRUSADE FOR CHRIST 125 N CLAIRMONT STREET EAU CLAIRE, WI 54703	N/A	PUBLIC CHARITY	TO FUND CHARITABLE OBJECTIVES OF CHARITY	1,000
<b>Total . . . . . ▶</b> <b>3a</b>				1,757,200

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

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
COMMUNITY CHURCH 9422 COTTAGE ROW RD FISH CREEK, WI 54212	N/A	PC	TO FUND CHARITABLE OBJECTIVES OF THE ORGANIZATION	5,000
COMMUNITY FOUNDATION OF COLLIER CTY 2400 TAMIAMI TRL N STE 300 NAPLES, FL 34103	N/A	PUBLIC CHARITY	TO FUND CHARITABLE OBJECTIVES OF THE CHARITY	5,000
CORAL RIDGE MINISTRIES - D JAMES KENNEDY MINISTRIES PO BOX 40 FT LAUDERDALE, FL 33302	N/A	PUBLIC CHARITY	TO FUND CHARITABLE OBJECTIVES OF CHARITY	8,000
<b>Total . . . . .</b> ▶				1,757,200
<b>3a</b>				

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

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
DAVID'S REFUGE INC 4440 BRICKYARD FALLS ROAD MANLIUS, NY 13104	N/A	PUBLIC CHARITY	TO FUND CHARITABLE OBJECTIVES OF CHARITY	60,000
ELIC1629 BLUE SPRUCE DR FORT COLLINS, CO 80524	N/A	PUBLIC CHARITY	TO FUND CHARITABLE OBJECTIVES OF THE CHARITY	1,000
EVANS SCHOLARSHIP FOUNDATION 1 BRIAR ROAD GOLF, IL 60029	N/A	PUBLIC CHARITY	TO FUND CHARITABLE OBJECTIVES OF CHARITY	2,500
<b>Total . . . . .</b> ▶ <b>3a</b>				1,757,200


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

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
FOCUS ON THE FAMILY 8605 EXPLORER DRIVE COLORADO SPRINGS, CO 80995	N/A	PUBLIC CHARITY	TO FUND CHARITABLE OBJECTIVES OF CHARITY	2,500
GIDEONS INTERNATIONAL 3437 N RICHMOND ST APPLETON, WI 54911	N/A	PC	TO FUND CHARITABLE OBJECTIVES OF THE ORGANIZATION	1,500
GREATER GREEN BAY COMMUNITY FOUNDATION 320 BROADWAY STREET 260 GREEN BAY, WI 54303	N/A	PC	TO FUND CHARITABLE OBJECTIVES OF THE ORGANIZATION	10,000
<b>Total . . . . .</b> ▶ <b>3a</b>				1,757,200

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Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
GREEN BAY BOTANICAL GARDENS 2600 LARSEN ROAD GREEN BAY, WI 54303	N/A	PUBLIC CHARITY	TO FUND CHARITABLE OBJECTIVES OF THE CHARITY	5,000
HOPE HOSPICE 3240 UNIVERSITY AVE SUITE 2 MADISON, WI 537053570	N/A	PUBLIC CHARITY	TO FUND CHARITABLE OBJECTIVES OF CHARITY	5,000
HOPE LUTHERAN CHURCH 700 S SUPERIOR STREET DE PERE, WI 54115	N/A	PUBLIC CHARITY	TO FUND CHARITABLE OBJECTIVES OF CHARITY	100
<b>Total . . . . .</b> ▶ <b>3a</b>				1,757,200

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

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
LITERARY COUNCIL GULF COAST PO BOX 2703 BONITA SPRINGS, FL 34133	N/A	PUBLIC CHARITY	TO FUND CHARITABLE OBJECTIVES OF CHARITY	1,500
MACULAR DEGENERATION FOUNDATION PO BOX 531313 HENDERSON, NV 89053	N/A	PUBLIC CHARITY	TO FUND CHARITABLE OBJECTIVES OF THE CHARITY	1,000
MATT SCHMIDT FAITH FOUNDATION 2085 SANDALWOOD CT GREEN BAY, WI 54304	N/A	PF	TO FUND CHARITABLE OBJECTIVES OF THE ORGANIZATION	2,000
<b>Total</b> . . . . . 				1,757,200
<b>3a</b>				



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Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
MEDICAL COLLEGE OF WISCONSIN 8701 WATERTOWN PLANK RD MILWAUKEE, WI 53226	N/A	PUBLIC CHARITY	TO FUND CHARITABLE OBJECTIVES OF CHARITY	50,000
MEMORIAL SLOAN-KETTERING CANCER CENTER PO BOX 27106 NEW YORK, NY 100877106	N/A	PUBLIC CHARITY	TO FUND CHARITABLE OBJECTIVES OF CHARITY	5,000
MY BROTHER'S KEEPER INC 1039 W MASON STREET GREEN BAY, WI 543031842	N/A	PUBLIC CHARITY	TO FUND CHARITABLE OBJECTIVES OF CHARITY	2,500
<b>Total . . . . .</b> ▶ <b>3a</b>				1,757,200

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

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
NEW HORIZONS OF SOUTHWEST FLORIDA PO BOX 111833 NAPLES, FL 34108	N/A	PUBLIC CHARITY	TO FUND CHARITABLE OBJECTIVES OF THE CHARITY	500
PENINSULA GOLF - PGA INC PO BOX 275 FISH CREEK, WI 54212	N/A	PUBLIC CHARITY	TO FUND CHARITABLE OBJECTIVES OF CHARITY	5,000
PREGNANCY RESOURCE CENTER OF SOUTHWEST FLORIDA 10611 TAMAIMI TRL N STE A4 NAPLES, FL 34108	N/A	PUBLIC CHARITY	TO FUND CHARITABLE OBJECTIVES OF THE CHARITY	110,000
<b>Total</b> . . . . . <b>3a</b>				1,757,200

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

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
PROVIDENCE ACADEMYMINISTRIES 1420 DIVISION STREET GREEN BAY, WI 54303	N/A	PUBLIC CHARITY	TO FUND CHARITABLE OBJECTIVES OF CHARITY	15,000
RAWHIDE BOYS RANCH E7475 RAWHIDE ROAD NEW LONDON, WI 54961	N/A	PUBLIC CHARITY	TO FUND CHARITABLE OBJECTIVES OF THE CHARITY	5,000
RESCUE MISSION ALLIANCE 155 GIFFORD ST SYRACUSE, NY 13202	N/A	PC	TO FUND CHARITABLE OBJECTIVES OF THE CHARITY	5,000
<b>Total . . . . . ▶</b> <b>3a</b>				1,757,200

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Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
SALVATION ARMY 25221 BERNWOOD DRIVE BONITA SPRINGS, FL 34135	N/A	PUBLIC CHARITY	TO FUND CHARITABLE OBJECTIVES OF CHARITY	1,500
SALVATION ARMY 626 UNION COURT GREEN BAY, WI 54303	N/A	PUBLIC CHARITY	TO FUND CHARITABLE OBJECTIVES OF CHARITY	2,000
SPRING LAKE CHURCH 2240 KLONDIKE RD GREEN BAY, WI 54311	N/A	PUBLIC CHARITY	TO FUND CHARITABLE OBJECTIVES OF CHARITY	25,000
<b>Total . . . . .</b> ▶ <b>3a</b>				1,757,200

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Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
SPRING LAKE CHURCH 2240 KLONDIKE RD GREEN BAY, WI 54311	N/A	PUBLIC CHARITY	DOWNTOWN GREEN BAY CHURCH - MATCHING DONATION	200,000
TAMING MUSTANGS 10366 RESERVE DR STE 303 SAN DIEGO, CA 92127	N/A	PC	TO FUND CHARITABLE OBJECTIVES OF THE CHARITY	1,002,000
THE JOSHUA FUNDPO BOX 3468 MCLEAN, VA 22103	N/A	PUBLIC CHARITY	TO FUND CHARITABLE OBJECTIVES OF CHARITY	1,000
<b>Total</b> . . . . . <b>3a</b>				1,757,200

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

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
THE MICHAEL J FOX FOUNDATION FOR PARKINSON'S RESEARCH PO BOX 4777 NEW YORK, NY 101634777	N/A	PC	TO FUND CHARITABLE OBJECTIVES OF THE ORGANIZATION	5,000
THE PROVIDENCE FORUM 100 FRONT STREET SUITE 1415 WEST CONSHOCKEN, PA 19428	N/A	PUBLIC CHARITY	TO FUND CHARITABLE OBJECTIVES OF CHARITY	3,000
TURNING POINT CHURCH PO BOX 3838 SAN DIEGO, CA 92163	N/A	PC	TO FUND CHARITABLE OBJECTIVES OF THE ORGANIZATION	1,000
<b>Total . . . . .</b> ► <b>3a</b>				1,757,200

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

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
UNITY HOSPICE916 WILLARD DRIVE GREEN BAY, WI 54304	N/A	PUBLIC CHARITY	TO FUND CHARITABLE OBJECTIVES OF CHARITY	5,000
UNIVERSITY OF WISCONSIN - GREEN BAY - PHOENIX FUND 2420 NICOLET DRIVE GREEN BAY, WI 54311	N/A	PUBLIC CHARITY	TO FUND CHARITABLE OBJECTIVES OF CHARITY	15,000
VERITAS SOCIETY - RIGHT TO LIFE 1951 BOND ST GREEN BAY, WI 54303	N/A	PC	TO FUND CHARITABLE OBJECTIVES OF THE ORGANIZATION	1,000
<b>Total . . . . .</b> ▶ <b>3a</b>				1,757,200

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

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
WESTMINSTER THEOLOGICAL SEMINARY 2960 CHURCH ROAD GLENSIDE, PA 19038	N/A	PUBLIC CHARITY	TO FUND CHARITABLE OBJECTIVES OF THE CHARITY	2,500
YOUNG LIFE - GREEN BAY 226 NORTH ADAMS STREET GREEN BAY, WI 54301	N/A	PUBLIC CHARITY	TO FUND CHARITABLE OBJECTIVES OF CHARITY	4,000
<b>Total . . . . .</b> ▶ <b>3a</b>				1,757,200



**TY 2017 Accounting Fees Schedule****Name:** EASTER FOUNDATION INC**EIN:** 20-0499778**Accounting Fees Schedule**

<b>Category</b>	<b>Amount</b>	<b>Net Investment Income</b>	<b>Adjusted Net Income</b>	<b>Disbursements for Charitable Purposes</b>
ACCOUNTING FEES - SCHENCK	3,850	1,925		1,925

**TY 2017 Investments Corporate Bonds Schedule****Name:** EASTER FOUNDATION INC**EIN:** 20-0499778**Investments Corporate Bonds Schedule**

<b>Name of Bond</b>	<b>End of Year Book Value</b>	<b>End of Year Fair Market Value</b>
CAMPBELL SOUP CO	153,162	151,329
IBM CORP NOTE	200,670	187,858
JOHNSON CONTROLS INC	156,642	154,313
MEDTRONIC INC SR	151,775	148,799
TARGET CORP 3.875	155,264	153,021
WALGREEN CO	186,664	184,270
HOME DEPOT INC	215,495	204,324
PRAXAIR INC	155,310	153,479
DUKE ENERGY CORP 2.150	207,288	199,574
MATTEL INC 2.500	197,610	181,500
TIME WARNER INC NT 5.875	209,430	205,340
BURLINGTON NORTH SANTA FE	207,212	201,472
COMCAST CORP NEW NT	212,462	205,446
AT&T INC 3.875	156,155	151,562
CONOCOPHILLIPS CO	149,498	144,308
HASBRO INC	202,184	198,210
KRAFT FOODS GROUP	153,105	150,765
LOWES COMPANIES INC	202,692	199,476
ALLSTATE CORP	203,976	198,008
ANHEUSER BUSCH	97,909	96,548

**Investments Corporate Bonds Schedule**

<b>Name of Bond</b>	<b>End of Year Book Value</b>	<b>End of Year Fair Market Value</b>
CBS CORP	200,172	198,158
CONSOLIDATED EDISON	182,697	179,286
EI DU PONT DE NEMOURS	183,223	180,236
FEDEX CORP	294,389	290,118
HONEYWELL INTERNATIONAL	212,078	205,932
JP MORGAN CHASE & CO	210,236	205,678
LOCKHEED MARTIN	200,264	197,388
NORDSTROM INC	209,856	204,470
VERIZON COMMUNICATIONS	306,447	290,169
COCA COLA	196,372	191,346
GENERAL MILLS	203,804	197,474
PNC BANK	206,956	200,978
PEPSICO	190,536	182,764
PROCTER & GAMBLE	203,608	194,906
AFLAC INC	313,611	301,089
CISCO SYSTEMS INC	295,506	294,330
CARDINAL HEALTH INC	301,577	288,363
EMERSON ELECTRIC CO	296,484	294,516
NORFOLK SOUTHERN CORP	299,383	296,636
QUALCOMM INC	300,257	288,698

**TY 2017 Investments Corporate Stock Schedule****Name:** EASTER FOUNDATION INC**EIN:** 20-0499778

<b>Name of Stock</b>	<b>End of Year Book Value</b>	<b>End of Year Fair Market Value</b>
FASTENAL COM	161,542	225,826
FISERV INC	233,519	604,352
GOLDMAN SACHS FINANCIAL	1,092,326	1,092,326
MIDDLEBY CORP	150,901	215,418
RAYMOND JAMES FINANCIAL	328,381	479,363
TYLER TECHNOLOGIES	245,772	530,153
ULTIMATE SOFTWARE GROUP INC	203,757	321,638
VERISK ANALYTICS INC.	295,737	451,765
INTUIT INC COM	183,448	586,560
AFFILIATED MANAGERS GROUP INC COM	161,849	214,531
AMPHENOL CORP CL A COM	264,235	579,460
ANSYS INC	154,511	449,036
CERNER CORP	83,149	202,927
CHURCH & DWIGHT INC	267,398	432,829
COPART INC	121,845	491,393
EAST WEST BANCORP INC	234,292	495,976
IDEX CORP	217,265	468,399
INTERCONTINENTAL EXCHANGE INC	202,377	469,249
LKQ CORP	309,166	434,382
O'REILLY AUTOMOTIVE INC NEW	176,762	396,950
RED HAT INC	174,923	472,714
ROPER INDS INC	178,135	384,343
SIGNATURE BANK COM	175,610	284,149
VARIAN MED SYS INC COM	158,631	262,352
BEACON ROOFING SUPPLY INC COM	236,830	235,049
COSTAR GROUP INC COM	254,873	606,566
JB HUNT TRANSPORT SVCS INC COM	226,909	360,274
ALIGN TECHNOLOGY INC COM	43,767	462,915
IDEXX LABORATORIES	209,597	474,891
ABIOMED INC COM	142,058	577,579

Name of Stock	End of Year Book Value	End of Year Fair Market Value
ALLEGIANT TRAVEL CO COM	125,976	132,280
BOFI HOLDING INC COM	47,128	92,702
BALCHEM CORP COM	75,027	138,672
BANK OF THE OZARKS COM	115,769	151,334
BARNES GROUP INC COM	75,458	111,262
BEACON ROOFING SUPPLY INC COM	95,241	97,685
BOTTOMLINE TECHNOLOGIES INC COM	92,956	146,849
CANTEL MEDICAL CORP COM	32,931	194,458
CHUYS HOLDINGS INC COM	29,041	27,722
COGNEX CORP COM	122,526	117,993
DONALDSON INC COM	130,923	132,743
ENVESTNET INC COM	101,337	136,880
FACTSET RESEARCH SYS COM	18,667	39,422
GENESEE & WYOMING INC CL A COM	93,572	98,479
GOLDMAN SACHS FINANCIAL	328,857	328,857
HEALTHCARE SERVICES GROUP COM	81,875	135,012
J & J SNACK FOODS CORP COM	92,370	151,555
MARKETAXESS HOLDINGS INC COM	21,010	166,994
MARTEN TRANSPORT LTD COM	60,785	113,733
MASIMO CORP COM	42,541	151,260
MEDIDATA SOLUTIONS INC COM	75,405	186,094
MIDDLEBY CORP COM	73,168	102,645
MONRO MUFFLER BRAKE INC COM	29,004	29,689
NEOGEN CORP COM	84,377	212,343
PROTO LABS INC COM	72,090	123,708
RBC BEARINGS INC COM	96,712	168,226
SENSIENT TECHNOLOGIES CORP COM	70,909	110,187
TEXAS CAPITAL BANCSHARES INC COM	95,801	135,786
TYLER TECHNOLOGIES INC COM	47,537	190,562
ULTIMATE SOFTWARE GROUP INC COM	54,376	85,427

Name of Stock	End of Year Book Value	End of Year Fair Market Value
AAON INC COM	77,220	93,300
BIO-TECHNE CORP COM	103,068	158,454
BLACKBAUD INC JCOM	90,334	195,577
BRIGHT HORIZONS FAMILY SOLUTIONS INC COM	88,047	188,227
DORMAN PRODUCTS INC COM	69,195	89,828
EXPONENT INC COM	91,428	174,846
FAIR ISAAC CORP COM	79,840	163,935
GLOBUS MEDICAL INC COM	65,069	132,306
OMNICELL INC COM	91,880	130,810
BROADRIDGE FINL SOLUTIONS LLC COM	300,544	585,744
CARTER INC COM	292,904	359,963
THE COOPER COS INC COM	200,651	291,252
GARTNER INC COM	262,061	398,833
EPLUS INC COM	49,386	104,357
EXLSERVICE HOLDINGS INC	93,670	110,390
NAUTILUS INC	76,592	60,210
PAYCOM SOFTWARE INC	91,536	194,102
TEXAS ROADHOUSE INC	106,719	152,180
STERIS PLC	314,749	446,713
FORTUNE BRANDS HOME & SECURITY	299,662	276,933
J2 GLOBAL INC	211,335	240,343
SCHEIN HENRY INC	282,873	251,262
SNAP-ON INC	284,921	278,367
WATSCO INC	268,050	337,127
ALARM.COM HOLDINGS INC	101,870	113,831
ELLIS MAE INC	98,706	111,316
FOX FACTORY HOLDING	109,905	143,048
HEALTH EQUITY INC	98,004	155,833
LEMAITRE VASCULAR INC	74,441	78,109
MONOLITHIC POWER SYSTEMS	86,748	121,105

<b>Name of Stock</b>	<b>End of Year Book Value</b>	<b>End of Year Fair Market Value</b>
PACIFIC PREMIER BANCORP	108,606	108,575
TREX COMPANY	62,979	115,541
GRAND CANYON EDUCATION INC	170,774	241,412
HASBRO INC	287,166	275,822
MEDIDATA SOLUTIONS INC COM	379,401	479,010
NATIONAL INSTRUMENTS CORP	270,070	290,124
POOL CORP	306,987	397,839
SS&C TECHNOLOGIES HLDGS INC	242,997	372,798
TEXAS ROADHOUSE INC	254,189	330,367
TRIMBLE NAVIGATION LTD	331,446	321,044
TACTILE SYSTEMS TECHNOLOGY	68,293	110,708
SUPERNUS PHARMACEUTICALS INC COM	97,818	135,860
Q2 HOLDINGS INC COM	58,288	60,416
OLLIE'S BARGAIN OUTLET HOLDINGS INC COM	89,853	142,825
LIGAND PHARMACEUTICALS INC COM	376,936	524,554
INPHI CORP COM	69,160	64,730
KINSALE CAPITAL GROUP INC COM	70,846	72,909
DESCARTES SYSTEMSGRP	89,302	96,720
MICROCHIP TECHNOLOGY INC COM	361,914	363,617
DENTSPLY SIRONA INC COM	246,838	226,071
REALPAGE INC COM	217,205	273,186
TELEFLEX INC COM	195,891	202,499
WABCO HOLDINGS INC COM	199,377	168,626
BURLINGTON STORES INC.	208,246	239,343

**TY 2017 Legal Fees Schedule****Name:** EASTER FOUNDATION INC**EIN:** 20-0499778

<b>Category</b>	<b>Amount</b>	<b>Net Investment Income</b>	<b>Adjusted Net Income</b>	<b>Disbursements for Charitable Purposes</b>
LEGAL FEES - GODFREY AND KAHN	268	134		134



**TY 2017 Other Decreases Schedule****Name:** EASTER FOUNDATION INC**EIN:** 20-0499778

<b>Description</b>	<b>Amount</b>
ADJUSTMENT TO DONATED SECURITIES TO TAX BASIS	1,527,041

**TY 2017 Other Expenses Schedule****Name:** EASTER FOUNDATION INC**EIN:** 20-0499778**Other Expenses Schedule**

Description	Revenue and Expenses per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
FIDUCIARY FEES	34,472	34,472		0
MANAGEMENT FEES	148,645	148,645		0
MISCELLANEOUS	127	63		64
BANK SERVICE CHARGES	36	0		36

**TY 2017 Taxes Schedule****Name:** EASTER FOUNDATION INC**EIN:** 20-0499778

<b>Category</b>	<b>Amount</b>	<b>Net Investment Income</b>	<b>Adjusted Net Income</b>	<b>Disbursements for Charitable Purposes</b>
EXCISE TAX	59,758	0		0

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

**Schedule of Contributors**  
▶ Attach to Form 990, 990-EZ, or 990-PF  
▶ Information about Schedule B (Form 990, 990-EZ, or 990-PF) and its instructions is at  
[www.irs.gov/form990](http://www.irs.gov/form990)

OMB No 1545-0047  
**2017**

**Name of the organization**  
EASTER FOUNDATION INC

**Employer identification number**  
20-0499778

**Organization type** (check one)

**Filers of:**

**Section:**

Form 990 or 990-EZ

- 501(c)( ) (enter number) organization
- 4947(a)(1) nonexempt charitable trust **not** treated as a private foundation
- 527 political organization

Form 990-PF

- 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**

- For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or other 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<sup>1</sup> 3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of (1) \$5,000 or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1. Complete Parts I and II.
- For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 *exclusively* for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I, II, and III.
- For an organization described in section 501(c)(7), (8), or (10) 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. . . . . ▶ \$ \_\_\_\_\_

**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 990PF, Part I, line 2, to certify that it doesn't meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

<b>Name of organization</b> EASTER FOUNDATION INC	<b>Employer identification number</b> 20-0499778
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<b>Part I</b> <b>Contributors</b> (See instructions) Use duplicate copies of Part I if additional space is needed			
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	BRUCE A AND CAROL H BELL	\$ 1,914,852	Person <input type="checkbox"/>
	958 HICKORY AVENUE		Payroll <input type="checkbox"/>
	DE PERE, WI54115		Noncash <input checked="" type="checkbox"/>
			(Complete Part II for noncash contributions )
2	BRUCE A AND CAROL H BELL	\$ 1,413,644	Person <input checked="" type="checkbox"/>
	958 HICKORY AVENUE		Payroll <input type="checkbox"/>
	DE PERE, WI54115		Noncash <input type="checkbox"/>
			(Complete Part II for noncash contributions )
3	BRUCE A AND CAROL H BELL	\$ 48,583	Person <input type="checkbox"/>
	958 HICKORY AVENUE		Payroll <input type="checkbox"/>
	DE PERE, WI54115		Noncash <input checked="" type="checkbox"/>
			(Complete Part II for noncash contributions )
4	BRUCE A AND CAROL H BELL	\$ 355,493	Person <input type="checkbox"/>
	958 HICKORY AVENUE		Payroll <input type="checkbox"/>
	DE PERE, WI54115		Noncash <input checked="" type="checkbox"/>
			(Complete Part II for noncash contributions )
5	BRUCE A AND CAROL H BELL	\$ 88,104	Person <input type="checkbox"/>
	958 HICKORY AVENUE		Payroll <input type="checkbox"/>
	GREEN BAY, WI54115		Noncash <input checked="" type="checkbox"/>
			(Complete Part II for noncash contributions )
.		\$	Person <input type="checkbox"/>
			Payroll <input type="checkbox"/>
			Noncash <input type="checkbox"/>
			(Complete Part II for noncash contributions )

<b>Name of organization</b> EASTER FOUNDATION INC	<b>Employer identification number</b> 20-0499778
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**Part II** **Noncash Property** (See instructions) Use duplicate copies of Part 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
1	PUBLICLY TRADED SECURITIES	\$ 1,914,852	2017-11-13
3	PUBLICLY TRADED SECURITIES	\$ 48,583	2017-11-01
4	PUBLICLY TRADED SECURITIES	\$ 355,493	2017-11-29
5	PUBLICLY TRADED SECURITIES	\$ 88,104	2017-12-01
	_____	\$ _____	_____
	_____	\$ _____	_____
	_____	\$ _____	_____

<b>Name of organization</b> EASTER FOUNDATION INC	<b>Employer identification number</b> 20-0499778
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**Part III** *Exclusively* religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8), or (10) that total more than \$1,000 for the year from any one contributor. Complete columns (a) through (e) and the following line entry. For organizations completing Part III, enter the total of *exclusively* religious, charitable, etc., contributions of **\$1,000 or less** for the year. (Enter this information once. See instructions.) ▶ \$ \_\_\_\_\_  
 Use duplicate copies of Part III if additional space is needed

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

(e) Transfer of gift Transferee's name, address, and 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 gift Transferee's name, address, and 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 gift Transferee's name, address, and 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 gift Transferee's name, address, and ZIP 4	Relationship of transferor to transferee
_____	_____
_____	_____