

Form **990**
Department of the Treasury
Internal Revenue Service

Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

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

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

OMB No. 1545-0047
2019
Open to Public Inspection

A For the 2019 calendar year, or tax year beginning 07-01-2019, and ending 06-30-2020

B Check if applicable:
 Address change
 Name change
 Initial return
 Final return/terminated
 Amended return
 Application pending

C Name of organization
COMMUNITY FOUNDATION FOR THE FOX VALLEY REGION INC

Doing business as

Number and street (or P.O. box if mail is not delivered to street address) Room/suite
4455 W LAWRENCE ST

City or town, state or province, country, and ZIP or foreign postal code
APPLETON, WI 54914

D Employer identification number
39-1548450

E Telephone number
(920) 830-1290

G Gross receipts \$ 362,671,344

F Name and address of principal officer:
CURT DETJEN
4455 W LAWRENCE ST
APPLETON, WI 54914

H(a) Is this a group return for subordinates? Yes No

H(b) Are all subordinates included? Yes No
If "No," attach a list. (see instructions)

H(c) Group exemption number ▶

I Tax-exempt status: 501(c)(3) 501(c) () ◀ (insert no.) 4947(a)(1) or 527

J Website: ▶ WWW.CFFOXVALLEY.ORG

K Form of organization: Corporation Trust Association Other ▶

L Year of formation: 1986

M State of legal domicile: WI

Part I Summary

1 Briefly describe the organization's mission or most significant activities:
TO SERVE A BROAD RANGE OF PHILANTHROPIC INTERESTS BENEFITING THE FOX VALLEY.

2 Check this box if the organization discontinued its operations or disposed of more than 25% of its net assets.

3 Number of voting members of the governing body (Part VI, line 1a)	3	22
4 Number of independent voting members of the governing body (Part VI, line 1b)	4	22
5 Total number of individuals employed in calendar year 2019 (Part V, line 2a)	5	43
6 Total number of volunteers (estimate if necessary)	6	125
7a Total unrelated business revenue from Part VIII, column (C), line 12	7a	99,075
b Net unrelated business taxable income from Form 990-T, line 39	7b	88,267

	Prior Year	Current Year
8 Contributions and grants (Part VIII, line 1h)	24,265,674	23,210,343
9 Program service revenue (Part VIII, line 2g)	456,781	475,790
10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)	11,218,684	658,007
11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	0	0
12 Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12)	35,941,139	24,344,140

13 Grants and similar amounts paid (Part IX, column (A), lines 1–3)	22,698,048	23,255,236
14 Benefits paid to or for members (Part IX, column (A), line 4)	0	0
15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5–10)	2,384,925	2,652,025
16a Professional fundraising fees (Part IX, column (A), line 11e)	0	0
b Total fundraising expenses (Part IX, column (D), line 25) ▶ 437,437		
17 Other expenses (Part IX, column (A), lines 11a–11d, 11f–24e)	2,280,381	2,630,378
18 Total expenses. Add lines 13–17 (must equal Part IX, column (A), line 25)	27,363,354	28,537,639
19 Revenue less expenses. Subtract line 18 from line 12	8,577,785	-4,193,499

	Beginning of Current Year	End of Year
20 Total assets (Part X, line 16)	397,959,766	391,655,837
21 Total liabilities (Part X, line 26)	60,075,277	60,478,956
22 Net assets or fund balances. Subtract line 21 from line 20	337,884,489	331,176,881

Part II Signature Block

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 officer) is based on all information of which preparer has any knowledge.

Sign Here
Signature of officer: *****
Date: 2021-03-18
Type or print name and title: JON STELLMACHER DIRECTOR AND CHAIRPERSON

Paid Preparer Use Only
Print/Type preparer's name: Preparer's signature: Date: 2021-03-18
Check if self-employed PTIN: P00499282
Firm's name: CLIFTONLARSONALLEN LLP Firm's EIN: 41-0746749
Firm's address: 200 EAST WASHINGTON STREET PO BOX 1739 APPLETON, WI 54912 Phone no. (920) 731-8111

Part III Statement of Program Service Accomplishments

Check if Schedule O contains a response or note to any line in this Part III

1 Briefly describe the organization's mission:

TO RECEIVE AND MANAGE PHILANTHROPIC ASSETS, TO MAKE PRUDENT, SENSITIVE AND CREATIVE GRANTS AND TO EXERCISE LEADERSHIP IN IMPORTANT COMMUNITY PRIORITIES.

2 Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ? Yes No

If "Yes," describe these new services on Schedule O.

3 Did the organization cease conducting, or make significant changes in how it conducts, any program services? Yes No

If "Yes," describe these changes on Schedule O.

4 Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported.

4a (Code:) (Expenses \$ 25,087,519 including grants of \$ 23,255,236) (Revenue \$ 475,790)
See Additional Data

4b (Code:) (Expenses \$ including grants of \$) (Revenue \$)

4c (Code:) (Expenses \$ including grants of \$) (Revenue \$)

4d Other program services (Describe in Schedule O.)
(Expenses \$ including grants of \$) (Revenue \$)

4e Total program service expenses ▶ 25,087,519

Part IV Checklist of Required Schedules

		Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A	Yes	
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	Yes	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I		No
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If "Yes," complete Schedule C, Part II		No
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III		No
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	Yes	
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II		No
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III		No
9	Did the organization report an amount in Part X, line 21 for escrow or custodial account liability; serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV		No
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi endowments? If "Yes," complete Schedule D, Part V	Yes	
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable.		
11a	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI	Yes	
11b	Did the organization report an amount for investments—other securities—in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	Yes	
11c	Did the organization report an amount for investments—program related—in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII		No
11d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX		No
11e	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	Yes	
11f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X		No
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII		No
12b	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	Yes	
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E		No
14a	Did the organization maintain an office, employees, or agents outside of the United States?		No
14b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV	Yes	
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? If "Yes," complete Schedule F, Parts II and IV		No
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV		No
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)		No
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II		No
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III		No
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H		No
20b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?		
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	Yes	

Part IV Checklist of Required Schedules (continued)

Table with 3 columns: Question, Yes, No. Rows 22-38 covering various organizational requirements and schedules.

Part V Statements Regarding Other IRS Filings and Tax Compliance

Check if Schedule O contains a response or note to any line in this Part V []

Table with 3 columns: Question, Yes, No. Rows 1a, 1b, 1c regarding Form 1096, Forms W-2G, and backup withholding rules.

Part V Statements Regarding Other IRS Filings and Tax Compliance (continued)

Main form area containing questions 2a through 16, including sub-questions like 2b, 3a, 4a, 5a, 6a, 7a, 8, 9a, 10a, 11a, 12a, 13a, 14a, 15, and 16. Includes a grid for responses (Yes/No) and a column for numerical values.

Part VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to lines 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions. Check if Schedule O contains a response or note to any line in this Part VI



Section A. Governing Body and Management

Table with 3 columns: Question, Yes, No. Rows include: 1a Enter the number of voting members of the governing body at the end of the tax year; 1b Enter the number of voting members included in line 1a, above, who are independent; 2 Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?; 3 Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person?; 4 Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?; 5 Did the organization become aware during the year of a significant diversion of the organization's assets?; 6 Did the organization have members or stockholders?; 7a Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?; 7b Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?; 8 Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: a The governing body? b Each committee with authority to act on behalf of the governing body?; 9 Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O.

Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)

Table with 3 columns: Question, Yes, No. Rows include: 10a Did the organization have local chapters, branches, or affiliates?; 10b If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?; 11a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?; 11b Describe in Schedule O the process, if any, used by the organization to review this Form 990.; 12a Did the organization have a written conflict of interest policy? If "No," go to line 13; 12b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?; 12c Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done; 13 Did the organization have a written whistleblower policy?; 14 Did the organization have a written document retention and destruction policy?; 15 Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?; 15a The organization's CEO, Executive Director, or top management official; 15b Other officers or key employees of the organization; 16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?; 16b If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?

Section C. Disclosure

Table with 2 columns: Question, Answer. Rows include: 17 List the states with which a copy of this Form 990 is required to be filed; 18 Section 6104 requires an organization to make its Form 1023 (or 1024-A if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply. Own website, Another's website, Upon request, Other (explain in Schedule O); 19 Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year.; 20 State the name, address, and telephone number of the person who possesses the organization's books and records: STEVE VELDORST 4455 W LAWRENCE ST APPLETON, WI 54914 (920) 830-1290

Part VIII Statement of Revenue

Check if Schedule O contains a response or note to any line in this Part VIII

Table with 5 main columns: (A) Total revenue, (B) Related or exempt function revenue, (C) Unrelated business revenue, (D) Revenue excluded from tax under sections 512 - 514. Rows include 1a-1g for Federated campaigns, membership dues, fundraising events, related organizations, government grants, and other contributions, totaling 23,210,343.

Table for Program Service Revenue with columns for Business Code, (A) Total revenue, (B) Related or exempt function revenue, (C) Unrelated business revenue, and (D) Revenue excluded. Rows include 2a-2f for administrative fee income from SU and AG, totaling 475,790.

Table for Other Revenue with columns for (A) Total revenue, (B) Related or exempt function revenue, (C) Unrelated business revenue, and (D) Revenue excluded. Rows include 3-11 for investment income, royalties, rental income, sales of assets, fundraising events, gaming activities, and sales of inventory, totaling 24,344,140.

Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A).

Check if Schedule O contains a response or note to any line in this Part IX

Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1 Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21	22,279,366	22,279,366		
2 Grants and other assistance to domestic individuals. See Part IV, line 22	975,870	975,870		
3 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16.				
4 Benefits paid to or for members				
5 Compensation of current officers, directors, trustees, and key employees	774,197	331,532	356,844	85,821
6 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
7 Other salaries and wages	1,536,687	798,863	574,860	162,964
8 Pension plan accruals and contributions (include section 401 (k) and 403(b) employer contributions)	30,300	15,764	11,324	3,212
9 Other employee benefits	166,440	86,592	62,201	17,647
10 Payroll taxes	144,401	71,023	57,818	15,560
11 Fees for services (non-employees):				
a Management				
b Legal	40		40	
c Accounting	85,455		85,455	
d Lobbying				
e Professional fundraising services. See Part IV, line 17				
f Investment management fees	1,299,165		1,299,165	
g Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O)	459,261	113,818	345,443	
12 Advertising and promotion	152,162	59,036		93,126
13 Office expenses	83,186	43,397	31,349	8,440
14 Information technology	249,948	124,087	99,163	26,698
15 Royalties				
16 Occupancy	41,184	20,254	16,490	4,440
17 Travel	26,989	16,793	8,033	2,163
18 Payments of travel or entertainment expenses for any federal, state, or local public officials				
19 Conferences, conventions, and meetings	27,725	13,635	11,101	2,989
20 Interest				
21 Payments to affiliates				
22 Depreciation, depletion, and amortization	6,780	3,334	2,715	731
23 Insurance	60,405	29,707	24,186	6,512
24 Other expenses. Itemize expenses not covered above (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.)				
a EDUCATION	87,301	79,201	6,382	1,718
b				
c				
d				
e All other expenses	50,777	25,247	20,114	5,416
25 Total functional expenses. Add lines 1 through 24e	28,537,639	25,087,519	3,012,683	437,437
26 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here <input type="checkbox"/> if following SOP 98-2 (ASC 958-720).				

Part X Balance Sheet

Check if Schedule O contains a response or note to any line in this Part IX

		(A) Beginning of year		(B) End of year
Assets	1 Cash—non-interest-bearing		1	
	2 Savings and temporary cash investments	1,440,558	2	2,161,280
	3 Pledges and grants receivable, net	5,469,630	3	4,052,418
	4 Accounts receivable, net		4	
	5 Loans and other payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons		5	
	6 Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), and persons described in section 4958(c)(3)(B)		6	
	7 Notes and loans receivable, net		7	
	8 Inventories for sale or use		8	
	9 Prepaid expenses and deferred charges	117,697	9	52,381
	10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	10a 1,858,224		
	b Less: accumulated depreciation	10b 504,999	50,609	10c 1,353,225
	11 Investments—publicly traded securities	249,144,951	11	191,287,186
	12 Investments—other securities. See Part IV, line 11	140,990,467	12	191,994,450
	13 Investments—program-related. See Part IV, line 11		13	
	14 Intangible assets		14	
	15 Other assets. See Part IV, line 11	745,854	15	754,897
16 Total assets. Add lines 1 through 15 (must equal line 34)	397,959,766	16	391,655,837	
Liabilities	17 Accounts payable and accrued expenses	827,541	17	1,039,850
	18 Grants payable	6,425,189	18	9,008,073
	19 Deferred revenue		19	
	20 Tax-exempt bond liabilities		20	
	21 Escrow or custodial account liability. Complete Part IV of Schedule D		21	
	22 Loans and other payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons		22	
	23 Secured mortgages and notes payable to unrelated third parties		23	
	24 Unsecured notes and loans payable to unrelated third parties	0	24	507,700
	25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17 - 24). Complete Part X of Schedule D	52,822,547	25	49,923,333
	26 Total liabilities. Add lines 17 through 25	60,075,277	26	60,478,956
Net Assets or Fund Balances	Organizations that follow FASB ASC 958, check here <input checked="" type="checkbox"/> and complete lines 27, 28, 32, and 33.			
	27 Net assets without donor restrictions	330,906,703	27	325,686,719
	28 Net assets with donor restrictions	6,977,786	28	5,490,162
	Organizations that do not follow FASB ASC 958, check here <input type="checkbox"/> and complete lines 29 through 33.			
	29 Capital stock or trust principal, or current funds		29	
	30 Paid-in or capital surplus, or land, building or equipment fund		30	
	31 Retained earnings, endowment, accumulated income, or other funds		31	
32 Total net assets or fund balances	337,884,489	32	331,176,881	
33 Total liabilities and net assets/fund balances	397,959,766	33	391,655,837	

Part XI Reconciliation of Net Assets

Check if Schedule O contains a response or note to any line in this Part XI

1	Total revenue (must equal Part VIII, column (A), line 12)	1	24,344,140
2	Total expenses (must equal Part IX, column (A), line 25)	2	28,537,639
3	Revenue less expenses. Subtract line 2 from line 1	3	-4,193,499
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	337,884,489
5	Net unrealized gains (losses) on investments	5	-2,604,152
6	Donated services and use of facilities	6	
7	Investment expenses	7	
8	Prior period adjustments	8	
9	Other changes in net assets or fund balances (explain in Schedule O)	9	90,043
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10	331,176,881

Part XII Financial Statements and Reporting

Check if Schedule O contains a response or note to any line in this Part XII

- 1** Accounting method used to prepare the Form 990: Cash Accrual Other _____
 If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O.
- 2a** Were the organization's financial statements compiled or reviewed by an independent accountant?
 If 'Yes,' check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both:
 Separate basis Consolidated basis Both consolidated and separate basis
- b** Were the organization's financial statements audited by an independent accountant?
 If 'Yes,' check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both:
 Separate basis Consolidated basis Both consolidated and separate basis
- c** If "Yes," to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant?
 If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O.
- 3a** As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?
- b** If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits.

		Yes	No
2a			No
2b	Yes		
2c	Yes		
3a			No
3b			

Additional Data

Software ID:

Software Version:

EIN: 39-1548450

Name: COMMUNITY FOUNDATION FOR THE FOX VALLEY
REGION INC

Form 990 (2019)

Form 990, Part III, Line 4a:

GRANTS WERE AWARDED FROM CHARITABLE FUNDS ESTABLISHED BY INDIVIDUALS, FAMILIES, BUSINESSES AND ORGANIZATIONS REFLECTING THEIR WISHES FOR GIVING BACK IN WAYS THAT COLLECTIVELY STRENGTHEN OUR COMMUNITY FOR CURRENT AND FUTURE GENERATIONS. THESE GRANTS MAKE A DIFFERENCE IN THE LIVES OF PEOPLE THROUGHOUT THE FOX VALLEY REGION IN THE AREAS OF ARTS & CULTURE, EDUCATION, COUMMUNITY IMPROVEMENT, HEALTH CARE, HUMAN SERVICES, THE ENVIRONMENT AND RELIGION. OUR DISCRETIONARY GRANT PROGRAM INCLUDES THE FOLLOWING EFFORTS: 1) HELP STRENGTHEN NONPROFIT ORGANIZATIONS; 2) PROVIDE COMMUNITY LEADERSHIP GRANTS TO SUPPORT AND ADVANCE KEY COMMUNITY INITIATIVES CONSISTENT WITH OUR GRANT PRIORITIES; 3) INCREASE ACCESS AND INCLUSION AND EDUCATING CHILDREN AND YOUTH IN THE AREAS OF ARTS AND CULTURE AND ENVIRONMENTAL SUSTAINABILITY; 4) AND RAISING AWARENESS OF COMMUNITY ISSUES TO HELP SPARK ACTION RESULTING IN POSITIVE CHANGE.

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
BEN ADAMS DIRECTOR	0.50	X						0	0	0
PAUL MUELLER DIRECTOR	0.50	X						0	0	0
KATHI SEIFERT DIRECTOR & VICE CHAIR	0.50	X		X				0	0	0
JON STELLMACHER DIRECTOR & CHAIR	0.50	X		X				0	0	0
MARKALAN SMITH DIRECTOR & VICE CHAIR	0.50	X		X				0	0	0
RAQUEL STRAYER DIRECTOR	0.50	X						0	0	0
CATHERINE TIERNEY DIRECTOR & CHAIR	0.50	X		X				0	0	0
OMAR ATASSI MD DIRECTOR	0.50	X						0	0	0
KATHRYN SIEMAN TREASURER & VICE CHAIR	0.50	X		X				0	0	0
PETER MARIAHAZY SECRETARY & VICE CHAIR	0.50	X		X				0	0	0

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
STEPHANIE VRABEC DIRECTOR	0.50	X						0	0	0
SUSAN MAY PAST DIRECTOR	0.50	X						0	0	0
PIERCE SMITH DIRECTOR	0.50	X						0	0	0
BETH FLAHERTY DIRECTOR	0.50	X						0	0	0
JIM JOHNSON DIRECTOR	0.50	X						0	0	0
GREG PAWLAK DIRECTOR & VICE CHAIR	0.50	X		X				0	0	0
BILL BOHN DIRECTOR	0.50	X						0	0	0
DAVID GROSS DIRECTOR	0.50	X						0	0	0
LAURA MERONK DIRECTOR	0.50	X						0	0	0
MELANIE MILLER DIRECTOR	0.50	X						0	0	0

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors										
(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
PA LEE MOUA DIRECTOR	0.50	X						0	0	0
JIM PROSSER DIRECTOR	0.50	X						0	0	0
MICHELLE SCHULER DIRECTOR	0.50	X						0	0	0
CHUCK SELF DIRECTOR	0.50	X						0	0	0
CURT DETJEN PRESIDENT/CEO	40.00			X				281,731	0	63,512
TAMMY GEENEN VP COMMUNITY ENGAGEMENT	40.00			X				116,409	0	17,155
ANN ENGELHARD VP DONOR SERVICES & GIFT P	40.00			X				126,365	0	3,672
STEVE VELDHORST CFO	40.00			X				83,547	0	14,956

SCHEDULE A
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Public Charity Status and Public Support

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.
▶ Attach to Form 990 or Form 990-EZ.
▶ Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No. 1545-0047

2019

Open to Public Inspection

Name of the organization
COMMUNITY FOUNDATION FOR THE FOX VALLEY REGION INC

Employer identification number
39-1548450

Part I Reason for Public Charity Status (All organizations must complete this part.) See instructions.

The organization is not a private foundation because it is: (For lines 1 through 12, check only one box.)

- 1 A church, convention of churches, or association of churches described in **section 170(b)(1)(A)(i)**.
- 2 A school described in **section 170(b)(1)(A)(ii)**. (Attach Schedule E (Form 990 or 990-EZ).)
- 3 A hospital or a cooperative hospital service organization described in **section 170(b)(1)(A)(iii)**.
- 4 A medical research organization operated in conjunction with a hospital described in **section 170(b)(1)(A)(iii)**. Enter the hospital's name, city, and state:
- 5 An organization operated for the benefit of a college or university owned or operated by a governmental unit described in **section 170(b)(1)(A)(iv)**. (Complete Part II.)
- 6 A federal, state, or local government or governmental unit described in **section 170(b)(1)(A)(v)**.
- 7 An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in **section 170(b)(1)(A)(vi)**. (Complete Part II.)
- 8 A community trust described in **section 170(b)(1)(A)(vi)**. (Complete Part II.)
- 9 An agricultural research organization described in **170(b)(1)(A)(ix)** operated in conjunction with a land-grant college or university or a non-land grant college of agriculture. See instructions. Enter the name, city, and state of the college or university:
- 10 An organization that normally receives: (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions—subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See **section 509(a)(2)**. (Complete Part III.)
- 11 An organization organized and operated exclusively to test for public safety. See **section 509(a)(4)**.
- 12 An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in **section 509(a)(1)** or **section 509(a)(2)**. See **section 509(a)(3)**. Check the box in lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g.
 - a **Type I.** A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization. **You must complete Part IV, Sections A and B.**
 - b **Type II.** A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s). **You must complete Part IV, Sections A and C.**
 - c **Type III functionally integrated.** A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions). **You must complete Part IV, Sections A, D, and E.**
 - d **Type III non-functionally integrated.** A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions). **You must complete Part IV, Sections A and D, and Part V.**
 - e Check this box if the organization received a written determination from the IRS that it is a Type I, Type II, Type III functionally integrated, or Type III non-functionally integrated supporting organization.
 - f Enter the number of supported organizations _____
 - g Provide the following information about the supported organization(s).

(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1- 10 above (see instructions))	(iv) Is the organization listed in your governing document?		(v) Amount of monetary support (see instructions)	(vi) Amount of other support (see instructions)
			Yes	No		
Total						

Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)
 (Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III.
 If the organization failed to qualify under the tests listed below, please complete Part III.)

Section A. Public Support

Calendar year (or fiscal year beginning in) ▶		(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 2019	(f) Total
1	Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grant.") . . .	19,908,014	28,276,904	123,676,335	24,265,674	23,210,343	219,337,270
2	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3	The value of services or facilities furnished by a governmental unit to the organization without charge..						
4	Total. Add lines 1 through 3	19,908,014	28,276,904	123,676,335	24,265,674	23,210,343	219,337,270
5	The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f). . .						104,666,399
6	Public support. Subtract line 5 from line 4.						114,670,871

Section B. Total Support

Calendar year (or fiscal year beginning in) ▶		(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 2019	(f) Total
7	Amounts from line 4.	19,908,014	28,276,904	123,676,335	24,265,674	23,210,343	219,337,270
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	3,245,476	3,646,319	5,594,135	6,585,141	5,589,618	24,660,689
9	Net income from unrelated business activities, whether or not the business is regularly carried on			27,980	79,412	99,075	206,467
10	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.).						
11	Total support. Add lines 7 through 10						244,204,426
12	Gross receipts from related activities, etc. (see instructions)					12	2,127,307

13 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and **stop here**

Section C. Computation of Public Support Percentage

14	Public support percentage for 2019 (line 6, column (f) divided by line 11, column (f))	14	46.960 %
15	Public support percentage for 2018 Schedule A, Part II, line 14	15	47.520 %

- 16a 33 1/3% support test—2019.** If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and **stop here.** The organization qualifies as a publicly supported organization
- b 33 1/3% support test—2018.** If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and **stop here.** The organization qualifies as a publicly supported organization
- 17a 10%-facts-and-circumstances test—2019.** If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and **stop here.** Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization
- b 10%-facts-and-circumstances test—2018.** If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and **stop here.** Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization
- 18 Private foundation.** If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions

Part III Support Schedule for Organizations Described in Section 509(a)(2)

(Complete only if you checked the box on line 10 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)

Section A. Public Support

Calendar year (or fiscal year beginning in) ▶		(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 2019	(f) Total
1	Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.") .						
2	Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3	Gross receipts from activities that are not an unrelated trade or business under section 513						
4	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf. . .						
5	The value of services or facilities furnished by a governmental unit to the organization without charge						
6	Total. Add lines 1 through 5						
7a	Amounts included on lines 1, 2, and 3 received from disqualified persons						
b	Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year.						
c	Add lines 7a and 7b.						
8	Public support. (Subtract line 7c from line 6.)						

Section B. Total Support

Calendar year (or fiscal year beginning in) ▶		(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 2019	(f) Total
9	Amounts from line 6.						
10a	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources. . .						
b	Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975.						
c	Add lines 10a and 10b.						
11	Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on.						
12	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
13	Total support. (Add lines 9, 10c, 11, and 12.)						

14 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and **stop here.**

Section C. Computation of Public Support Percentage

15	Public support percentage for 2019 (line 8, column (f) divided by line 13, column (f))	15	
16	Public support percentage from 2018 Schedule A, Part III, line 15	16	

Section D. Computation of Investment Income Percentage

17	Investment income percentage for 2019 (line 10c, column (f) divided by line 13, column (f))	17	
18	Investment income percentage from 2018 Schedule A, Part III, line 17	18	

19a 33 1/3% support tests—2019. If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and **stop here.** The organization qualifies as a publicly supported organization

b 33 1/3% support tests—2018. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3% and line 18 is not more than 33 1/3%, check this box and **stop here.** The organization qualifies as a publicly supported organization

20 Private foundation. If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions

Part IV Supporting Organizations

(Complete only if you checked a box on line 12 of Part I. If you checked 12a of Part I, complete Sections A and B. If you checked 12b of Part I, complete Sections A and C. If you checked 12c of Part I, complete Sections A, D, and E. If you checked 12d of Part I, complete Sections A and D, and complete Part V.)

Section A. All Supporting Organizations

		Yes	No
1	Are all of the organization's supported organizations listed by name in the organization's governing documents? <i>If "No," describe in Part VI how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.</i>		
2	Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? <i>If "Yes," explain in Part VI how the organization determined that the supported organization was described in section 509(a)(1) or (2).</i>		
3a	Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? <i>If "Yes," answer (b) and (c) below.</i>		
b	Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? <i>If "Yes," describe in Part VI when and how the organization made the determination.</i>		
c	Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? <i>If "Yes," explain in Part VI what controls the organization put in place to ensure such use.</i>		
4a	Was any supported organization not organized in the United States ("foreign supported organization")? <i>If "Yes" and if you checked 12a or 12b in Part I, answer (b) and (c) below.</i>		
b	Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? <i>If "Yes," describe in Part VI how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.</i>		
c	Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? <i>If "Yes," explain in Part VI what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes.</i>		
5a	Did the organization add, substitute, or remove any supported organizations during the tax year? <i>If "Yes," answer (b) and (c) below (if applicable). Also, provide detail in Part VI, including (i) the names and EIN numbers of the supported organizations added, substituted, or removed; (ii) the reasons for each such action; (iii) the authority under the organization's organizing document authorizing such action; and (iv) how the action was accomplished (such as by amendment to the organizing document).</i>		
b	Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the organization's organizing document?		
c	Substitutions only. Was the substitution the result of an event beyond the organization's control?		
6	Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? <i>If "Yes," provide detail in Part VI.</i>		
7	Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? <i>If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ) .</i>		
8	Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? <i>If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).</i>		
9a	Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? <i>If "Yes," provide detail in Part VI.</i>		
b	Did one or more disqualified persons (as defined in line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? <i>If "Yes," provide detail in Part VI.</i>		
c	Did a disqualified person (as defined in line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? <i>If "Yes," provide detail in Part VI.</i>		
10a	Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? <i>If "Yes," answer line 10b below.</i>		
b	Did the organization have any excess business holdings in the tax year? <i>(Use Schedule C, Form 4720, to determine whether the organization had excess business holdings).</i>		

Part IV Supporting Organizations (continued)

		Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?		
a	A person who directly or indirectly controls, either alone or together with persons described in (b) and (c) below, the governing body of a supported organization?		
b	A family member of a person described in (a) above?		
c	A 35% controlled entity of a person described in (a) or (b) above? <i>If "Yes" to a, b, or c, provide detail in Part VI.</i>		

Section B. Type I Supporting Organizations

		Yes	No
1	Did the directors, trustees, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the tax year? <i>If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported organization, describe how the powers to appoint and/or remove directors or trustees were allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.</i>		
2	Did the organization operate for the benefit of any supported organization other than the supported organization(s) that operated, supervised, or controlled the supporting organization? <i>If "Yes," explain in Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised or controlled the supporting organization.</i>		

Section C. Type II Supporting Organizations

		Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees of each of the organization's supported organization(s)? <i>If "No," describe in Part VI how control or management of the supporting organization was vested in the same persons that controlled or managed the supported organization(s).</i>		

Section D. All Type III Supporting Organizations

		Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the organization's governing documents in effect on the date of notification, to the extent not previously provided?		
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported organization (s) or (ii) serving on the governing body of a supported organization? <i>If "No," explain in Part VI how the organization maintained a close and continuous working relationship with the supported organization(s).</i>		
3	By reason of the relationship described in (2), did the organization's supported organizations have a significant voice in the organization's investment policies and in directing the use of the organization's income or assets at all times during the tax year? <i>If "Yes," describe in Part VI the role the organization's supported organizations played in this regard.</i>		

Section E. Type III Functionally-Integrated Supporting Organizations

1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions):		
a	<input type="checkbox"/> The organization satisfied the Activities Test. Complete line 2 below.		
b	<input type="checkbox"/> The organization is the parent of each of its supported organizations. Complete line 3 below.		
c	<input type="checkbox"/> The organization supported a governmental entity. Describe in Part VI how you supported a government entity (see instructions)		
2	Activities Test. Answer (a) and (b) below.		
a	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? <i>If "Yes," then in Part VI identify those supported organizations and explain how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities.</i>	Yes	No
b	Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? <i>If "Yes," explain in Part VI the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement.</i>		
3	Parent of Supported Organizations. Answer (a) and (b) below.		
a	Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? <i>Provide details in Part VI.</i>		
b	Did the organization exercise a substantial degree of direction over the policies, programs and activities of each of its supported organizations? <i>If "Yes," describe in Part VI the role played by the organization in this regard.</i>		

Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations

- 1** Check here if the organization satisfied the Integral Part Test as a qualifying trust on Nov. 20, 1970 (explain in Part VI). **See instructions.** All other Type III non-functionally integrated supporting organizations must complete Sections A through E.

Section A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1	Net short-term capital gain	1	
2	Recoveries of prior-year distributions	2	
3	Other gross income (see instructions)	3	
4	Add lines 1 through 3	4	
5	Depreciation and depletion	5	
6	Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or maintenance of property held for production of income (see instructions)	6	
7	Other expenses (see instructions)	7	
8	Adjusted Net Income (subtract lines 5, 6 and 7 from line 4)	8	
Section B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year):	1	
a	Average monthly value of securities	1a	
b	Average monthly cash balances	1b	
c	Fair market value of other non-exempt-use assets	1c	
d	Total (add lines 1a, 1b, and 1c)	1d	
e	Discount claimed for blockage or other factors (explain in detail in Part VI):		
2	Acquisition indebtedness applicable to non-exempt use assets	2	
3	Subtract line 2 from line 1d	3	
4	Cash deemed held for exempt use. Enter 1-1/2% of line 3 (for greater amount, see instructions).	4	
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5	
6	Multiply line 5 by .035	6	
7	Recoveries of prior-year distributions	7	
8	Minimum Asset Amount (add line 7 to line 6)	8	
Section C - Distributable Amount			Current Year
1	Adjusted net income for prior year (from Section A, line 8, Column A)	1	
2	Enter 85% of line 1	2	
3	Minimum asset amount for prior year (from Section B, line 8, Column A)	3	
4	Enter greater of line 2 or line 3	4	
5	Income tax imposed in prior year	5	
6	Distributable Amount. Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions)	6	
7	<input type="checkbox"/> Check here if the current year is the organization's first as a non-functionally-integrated Type III supporting organization (see instructions)		

Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations (continued)

Section D - Distributions	Current Year
1 Amounts paid to supported organizations to accomplish exempt purposes	
2 Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity	
3 Administrative expenses paid to accomplish exempt purposes of supported organizations	
4 Amounts paid to acquire exempt-use assets	
5 Qualified set-aside amounts (prior IRS approval required)	
6 Other distributions (describe in Part VI). See instructions	
7 Total annual distributions. Add lines 1 through 6.	
8 Distributions to attentive supported organizations to which the organization is responsive (provide details in Part VI). See instructions	
9 Distributable amount for 2019 from Section C, line 6	
10 Line 8 amount divided by Line 9 amount	

Section E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2019	(iii) Distributable Amount for 2019
1 Distributable amount for 2019 from Section C, line 6			
2 Underdistributions, if any, for years prior to 2019 (reasonable cause required-- explain in Part VI). See instructions.			
3 Excess distributions carryover, if any, to 2019:			
a From 2014.			
b From 2015.			
c From 2016.			
d From 2017.			
e From 2018.			
f Total of lines 3a through e			
g Applied to underdistributions of prior years			
h Applied to 2019 distributable amount			
i Carryover from 2014 not applied (see instructions)			
j Remainder. Subtract lines 3g, 3h, and 3i from 3f.			
4 Distributions for 2019 from Section D, line 7:			
\$			
a Applied to underdistributions of prior years			
b Applied to 2019 distributable amount			
c Remainder. Subtract lines 4a and 4b from 4.			
5 Remaining underdistributions for years prior to 2019, if any. Subtract lines 3g and 4a from line 2. If the amount is greater than zero, explain in Part VI . See instructions.			
6 Remaining underdistributions for 2019. Subtract lines 3h and 4b from line 1. If the amount is greater than zero, explain in Part VI . See instructions.			
7 Excess distributions carryover to 2020. Add lines 3j and 4c.			
8 Breakdown of line 7:			
a Excess from 2015.			
b Excess from 2016.			
c Excess from 2017.			
d Excess from 2018.			
e Excess from 2019.			

Additional Data

Software ID:

Software Version:

EIN: 39-1548450

Name: COMMUNITY FOUNDATION FOR THE FOX VALLEY
REGION INC

Part VI **Supplemental Information.** Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; Part III, line 12; Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c; Part IV, Section B, lines 1 and 2; Part IV, Section C, line 1; Part IV, Section D, lines 2 and 3; Part IV, Section E, lines 1c, 2a, 2b, 3a and 3b; Part V, line 1; Part V, Section B, line 1e; Part V Section D, lines 5, 6, and 8; and Part V, Section E, lines 2, 5, and 6. Also complete this part for any additional information. (See instructions).

Facts And Circumstances Test

SCHEDULE D
(Form 990)

Department of the Treasury
Internal Revenue Service

Supplemental Financial Statements

OMB No. 1545-0047
2019
Open to Public Inspection

▶ Complete if the organization answered "Yes," on Form 990, Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b.
▶ Attach to Form 990.
▶ Go to www.irs.gov/Form990 for instructions and the latest information.

Name of the organization
COMMUNITY FOUNDATION FOR THE FOX VALLEY REGION INC

Employer identification number
39-1548450

Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts.
Complete if the organization answered "Yes" on Form 990, Part IV, line 6.

	(a) Donor advised funds	(b) Funds and other accounts
1 Total number at end of year	551	723
2 Aggregate value of contributions to (during year)	11,769,775	13,607,857
3 Aggregate value of grants from (during year)	12,925,926	12,704,977
4 Aggregate value at end of year	178,642,123	125,023,981

- 5** Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? Yes No
- 6** Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit? Yes No

Part II Conservation Easements.
Complete if the organization answered "Yes" on Form 990, Part IV, line 7.

- 1** Purpose(s) of conservation easements held by the organization (check all that apply).
 Preservation of land for public use (e.g., recreation or education) Preservation of an historically important land area
 Protection of natural habitat Preservation of a certified historic structure
 Preservation of open space

2 Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year.

	Held at the End of the Year
a Total number of conservation easements	2a
b Total acreage restricted by conservation easements	2b
c Number of conservation easements on a certified historic structure included in (a)	2c
d Number of conservation easements included in (c) acquired after 7/25/06, and not on a historic structure listed in the National Register	2d

- 3** Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year ▶ _____
- 4** Number of states where property subject to conservation easement is located ▶ _____
- 5** Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? Yes No
- 6** Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year ▶ _____
- 7** Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year ▶ \$ _____
- 8** Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)? Yes No
- 9** In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements.

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets.
Complete if the organization answered "Yes" on Form 990, Part IV, line 8.

- 1a** If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIII, the text of the footnote to its financial statements that describes these items.
- b** If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items:
- (i) Revenue included on Form 990, Part VIII, line 1 ▶ \$ _____
- (ii) Assets included in Form 990, Part X ▶ \$ _____
- 2** If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items:
- a** Revenue included on Form 990, Part VIII, line 1 ▶ \$ _____
- b** Assets included in Form 990, Part X ▶ \$ _____

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets (continued)

- 3** Using the organization's acquisition, accession, and other records, check any of the following that are a significant use of its collection items (check all that apply):
- a** Public exhibition
 - b** Scholarly research
 - c** Preservation for future generations
 - d** Loan or exchange programs
 - e** Other
- 4** Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII.
- 5** During the year, did the organization solicit or receive donations of art, historical treasures or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection? . . . **Yes** **No**

Part IV Escrow and Custodial Arrangements.

Complete if the organization answered "Yes" on Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21.

- 1a** Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X? **Yes** **No**

b If "Yes," explain the arrangement in Part XIII and complete the following table:

- c** Beginning balance
- d** Additions during the year
- e** Distributions during the year
- f** Ending balance

	Amount
1c	
1d	
1e	
1f	

- 2a** Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability? . . . **Yes** **No**

b If "Yes," explain the arrangement in Part XIII. Check here if the explanation has been provided in Part XIII

Part V Endowment Funds.

Complete if the organization answered "Yes" on Form 990, Part IV, line 10.

	(a) Current year	(b) Prior year	(c) Two years back	(d) Three years back	(e) Four years back
1a Beginning of year balance	6,763,188				
b Contributions		6,936,709			
c Net investment earnings, gains, and losses	-410,800	111,823			
d Grants or scholarships					
e Other expenditures for facilities and programs	438,056	285,344			
f Administrative expenses	0				
g End of year balance	5,914,332	6,763,188			

2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as:

- a** Board designated or quasi-endowment ▶ 100.000 %
- b** Permanent endowment ▶
- c** Temporarily restricted endowment ▶

The percentages on lines 2a, 2b, and 2c should equal 100%.

3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by:

- (i)** unrelated organizations
- (ii)** related organizations

	Yes	No
3a(i)		No
3a(ii)		No
3b		

b If "Yes" on 3a(ii), are the related organizations listed as required on Schedule R?

4 Describe in Part XIII the intended uses of the organization's endowment funds.

Part VI Land, Buildings, and Equipment.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10.

Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land				
b Buildings				
c Leasehold improvements				
d Equipment		548,830	504,999	43,831
e Other		1,309,394		1,309,394
Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10(c).) . . . ▶				1,353,225

Part VII Investments—Other Securities.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11b. See Form 990, Part X, line 12.

(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1) Financial derivatives		
(2) Closely-held equity interests		
(3) Other _____		
(A) EQUITIES	93,060,034	F
(B) FIXED INCOME	45,214,145	F
(C) HEDGE FUNDS	34,419,652	F
(D) VENTURE CAPITAL	18,620,308	F
(E) REAL ESTATE	680,311	F
(F)		
(G)		
(H)		
Total. (Column (b) must equal Form 990, Part X, col. (B) line 12.)	191,994,450	

Part VIII Investments—Program Related.

Complete if the organization answered 'Yes' on Form 990, Part IV, line 11c. See Form 990, Part X, line 13.

(a) Description of investment	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1)		
(2)		
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
Total. (Column (b) must equal Form 990, Part X, col.(B) line 13.)		

Part IX Other Assets.

Complete if the organization answered 'Yes' on Form 990, Part IV, line 11d. See Form 990, Part X, line 15.

(a) Description	(b) Book value
(1)	
(2)	
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, col.(B) line 15.)	

Part X Other Liabilities.

Complete if the organization answered 'Yes' on Form 990, Part IV, line 11e or 11f. See Form 990, Part X, line 25.

1. (a) Description of liability	(b) Book value
(1) Federal income taxes	
(2) FUNDS HELD FOR OTHERS	49,026,247
(3) CHARITABLE GIFT ANNUITY PAYABLE	897,086
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
(10)	
Total. (Column (b) must equal Form 990, Part X, col.(B) line 25.)	49,923,333

2. Liability for uncertain tax positions. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48 (ASC 740). Check here if the text of the footnote has been provided in Part XIII

Part XI Reconciliation of Revenue per Audited Financial Statements With Revenue per Return.

Complete if the organization answered 'Yes' on Form 990, Part IV, line 12a.

1	Total revenue, gains, and other support per audited financial statements		1	
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:			
a	Net unrealized gains (losses) on investments	2a		
b	Donated services and use of facilities	2b		
c	Recoveries of prior year grants	2c		
d	Other (Describe in Part XIII.)	2d		
e	Add lines 2a through 2d		2e	
3	Subtract line 2e from line 1		3	
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1 :			
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a		
b	Other (Describe in Part XIII.)	4b		
c	Add lines 4a and 4b		4c	
5	Total revenue. Add lines 3 and 4c . (This must equal Form 990, Part I, line 12.)		5	

Part XII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return.

Complete if the organization answered 'Yes' on Form 990, Part IV, line 12a.

1	Total expenses and losses per audited financial statements		1	
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:			
a	Donated services and use of facilities	2a		
b	Prior year adjustments	2b		
c	Other losses	2c		
d	Other (Describe in Part XIII.)	2d		
e	Add lines 2a through 2d		2e	
3	Subtract line 2e from line 1		3	
4	Amounts included on Form 990, Part IX, line 25, but not on line 1 :			
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a		
b	Other (Describe in Part XIII.)	4b		
c	Add lines 4a and 4b		4c	
5	Total expenses. Add lines 3 and 4c . (This must equal Form 990, Part I, line 18.)		5	

Part XIII Supplemental Information

Provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, lines 1b and 2b; Part V, line 4; Part X, line 2; Part XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any additional information.

Return Reference	Explanation
See Additional Data Table	

Additional Data

Software ID:

Software Version:

EIN: 39-1548450

Name: COMMUNITY FOUNDATION FOR THE FOX VALLEY
REGION INC

Supplemental Information

Return Reference	Explanation
PART V, LINE 4:	THE ADMINISTRATIVE ENDOWMENT FUNDS ARE ORDINARILY SUBJECT TO AN ANNUAL SPENDING POLICY OF 4.5% OF THE AVERAGE DAILY BALANCE IN THE FUNDS FOR THE THREE PREVIOUS CALENDAR YEARS. THE ANNUAL SPENDING PROVIDES FOR ONGOING FUNDING OF SERVICES UNDERTAKEN TO SUPPORT THE PROGRAMS OF THE FOUNDATION.

**SCHEDULE F
(Form 990)**

Department of the Treasury
Internal Revenue Service

Statement of Activities Outside the United States

▶ Complete if the organization answered "Yes" to Form 990, Part IV, line 14b, 15, or 16.
▶ Attach to Form 990.
▶ Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No. 1545-0047

2019

Open to Public Inspection

Name of the organization
COMMUNITY FOUNDATION FOR THE FOX VALLEY
REGION INC

Employer identification number
39-1548450

Part I **General Information on Activities Outside the United States.** Complete if the organization answered "Yes" on Form 990, Part IV, line 14b.

- 1 For grantmakers.** Does the organization maintain records to substantiate the amount of its grants and other assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? Yes No
- 2 For grantmakers.** Describe in Part V the organization's procedures for monitoring the use of its grants and other assistance outside the United States.
- 3** Activities per Region. (The following Part I, line 3 table can be duplicated if additional space is needed.)

(a) Region	(b) Number of offices in the region	(c) Number of employees, agents, and independent contractors in the region	(d) Activities conducted in region (by type) (such as, fundraising, program services, investments, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in the region	(f) Total expenditures for and investments in the region
CENTRAL AMERICA AND THE CARIBBEAN	0	0	INVESTMENTS		34,434,885
3a Sub-total	0	0			34,434,885
b Total from continuation sheets to Part I	0	0			0
c Totals (add lines 3a and 3b)	0	0			34,434,885

Part II Grants and Other Assistance to Organizations or Entities Outside the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 15, for any recipient who received more than \$5,000. Part II can be duplicated if additional space is needed.

1 (a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of noncash assistance	(h) Description of noncash assistance	(i) Method of valuation (book, FMV, appraisal, other)

- 2 Enter total number of recipient organizations listed above that are recognized as charities by the foreign country, recognized as tax-exempt by the IRS, or for which the grantee or counsel has provided a section 501(c)(3) equivalency letter ▶ _____
- 3 Enter total number of other organizations or entities ▶ _____

Part IV Foreign Forms

- 1 Was the organization a U.S. transferor of property to a foreign corporation during the tax year? *If "Yes," the organization may be required to file Form 926, Return by a U.S. Transferor of Property to a Foreign Corporation (see Instructions for Form 926)* Yes No
- 2 Did the organization have an interest in a foreign trust during the tax year? *If "Yes," the organization may be required to separately file Form 3520, Annual Return to Report Transactions with Foreign Trusts and Receipt of Certain Foreign Gifts, and/or Form 3520-A, Annual Information Return of Foreign Trust With a U.S. Owner (see Instructions for Forms 3520 and 3520-A; don't file with Form 990)* Yes No
- 3 Did the organization have an ownership interest in a foreign corporation during the tax year? *If "Yes," the organization may be required to file Form 5471, Information Return of U.S. Persons with Respect to Certain Foreign Corporations. (see Instructions for Form 5471)* Yes No
- 4 Was the organization a direct or indirect shareholder of a passive foreign investment company or a qualified electing fund during the tax year? *If "Yes," the organization may be required to file Form 8621, Information Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund. (see Instructions for Form 8621)* . Yes No
- 5 Did the organization have an ownership interest in a foreign partnership during the tax year? *If "Yes," the organization may be required to file Form 8865, Return of U.S. Persons with Respect to Certain Foreign Partnerships (see Instructions for Form 8865)* Yes No
- 6 Did the organization have any operations in or related to any boycotting countries during the tax year? *If "Yes," the organization may be required to separately file Form 5713, International Boycott Report (see Instructions for Form 5713; don't file with Form 990).* Yes No

Part V Supplemental Information

Provide the information required by Part I, line 2 (monitoring of funds); Part I, line 3, column (f) (accounting method; amounts of investments vs. expenditures per region); Part II, line 1 (accounting method); Part III (accounting method); and Part III, column (c) (estimated number of recipients), as applicable. Also complete this part to provide any additional information. See instructions.

990 Schedule F, Supplemental Information

Return Reference	Explanation
PART I, LINE 3:	COLUMN F INCLUDES \$34,434,885 OF BOOK VALUE OF INVESTMENTS. THE ORGANIZATION FOLLOWS THE ACCRUAL METHOD OF ACCOUNTING AND ITS INVESTMENTS ARE RECORDED AT FAIR MARKET VALUE. THE REPORTED AMOUNT OF INVESTMENTS REPRESENTS THE COMMUNITY FOUNDATION OF THE FOX VALLEY REGION'S ALLOCATED PERCENTAGE OF THE INVESTMENTS THAT ARE LEGALLY OWNED BY THE COMMUNITY FOUNDATION FOR THE FOX VALLEY REGION, INC. AND ALLOCATED TO CERTAIN SUPPORTING ORGANIZATIONS.

990 Schedule F, Supplemental Information

Return Reference	Explanation
PART III ACCOUNTING METHOD:	

Note: To capture the full content of this document, please select landscape mode (11" x 8.5") when printing.

Schedule I (Form 990)

Grants and Other Assistance to Organizations, Governments and Individuals in the United States

Complete if the organization answered "Yes," on Form 990, Part IV, line 21 or 22.

Attach to Form 990.

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

OMB No. 1545-0047

2019

Open to Public Inspection

Department of the Treasury Internal Revenue Service

Name of the organization COMMUNITY FOUNDATION FOR THE FOX VALLEY REGION INC

Employer identification number

39-1548450

Part I General Information on Grants and Assistance

- 1 Does the organization maintain records to substantiate the amount of the grants or assistance...
2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than \$5,000.

Table with 8 columns: (a) Name and address of organization or government, (b) EIN, (c) IRC section (if applicable), (d) Amount of cash grant, (e) Amount of non-cash assistance, (f) Method of valuation, (g) Description of noncash assistance, (h) Purpose of grant or assistance. Rows 1-12.

2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table. 351
3 Enter total number of other organizations listed in the line 1 table.

Part III Grants and Other Assistance to Domestic Individuals. Complete if the organization answered "Yes" on Form 990, Part IV, line 22.

Part III can be duplicated if additional space is needed.

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of noncash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of noncash assistance
(1) POST SECONDARY SCHOLARSHIPS	458	975,870			
(2)					
(3)					
(4)					
(5)					
(6)					
(7)					

Part IV Supplemental Information. Provide the information required in Part I, line 2; Part III, column (b); and any other additional information.

Return Reference	Explanation
PART I, LINE 2:	MANY OF THE COMPETITIVE GRANTS AWARDED BY THE FOUNDATION REQUIRE A PROGRESS REPORT DURING THE GRANT PERIOD AND/OR A FINAL REPORT AT THE END OF THE GRANT PERIOD. PROGRESS REPORTS ARE GENERALLY EXPECTED FOR MULTI-YEAR COMMITMENTS AS A WAY TO ASSESS THE WORK UNDERTAKEN TOWARD ACHIEVING ORIGINAL OBJECTIVES. THE FINAL REPORT PROCESS HAS THREE PRIMARY OBJECTIVES: ASSESSMENT OF WHAT'S BEEN LEARNED, IMPACT OF SUPPORT ON THE CORE MISSION, AND DEMONSTRATION OF ACCOUNTABILITY. WHEN REVIEWING A GRANT APPLICATION FROM AN ORGANIZATION THAT HAS RECEIVED PRIOR FUNDING, GRANTS COMMITTEE MEMBERS AND FOUNDATION STAFF OFTEN CONSIDER THE CONTENT OF PRIOR REPORTS. THE FOUNDATION WILL NOT CONSIDER APPLICATIONS FROM ORGANIZATIONS THAT HAVE OVERDUE REPORTS. SOME OF THE GRANTS AWARDED THROUGH NON-COMPETITIVE PROCESSES WILL ALSO FOLLOW THIS FINAL REPORT PROCESS IF SUGGESTED BY THE DONOR; OTHERWISE, WE RELY ON THE DONOR'S ADVICE REGARDING THE USE OF GRANTED FUNDS AND DECISIONS TO CONTINUE TO FUND AN ORGANIZATION IN THE FUTURE.

Additional Data

Software ID:
Software Version:
EIN: 39-1548450
Name: COMMUNITY FOUNDATION FOR THE FOX VALLEY
REGION INC

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
1000 GENERATIONS INC PO BOX 213 ELKHORN, WI 53121	47-2646525	501(C)3	300,000				HOUSING & SHELTER
AASD-APPLETON AREA SCHOOL DISTRICT PO BOX 2019 APPLETON, WI 549132019	39-6000710	GOVERNMENT	74,414				EDUCATION

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
AIDS RESOURCE CENTER OF WISCONSIN 820 N PLANKINTON AVE MILWAUKEE, WI 532031802	39-1534049	501(C)3	15,000				AIDS
ALS ASSOCIATION 3333 N MAYFAIR RD STE 104 WAUWATOSA, WI 532223219	39-1600965	501(C)3	13,070				DISEASES, DISORDERS & MEDICAL DISCIPLINES

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
AMERICAN CANCER SOCIETY 2100 RIVERSIDE DR STE 201 GREEN BAY, WI 543012375	13-1788491	501(C)3	39,267				COMMUNITY & NEIGHBORHOOD DEVELOPMENT
AMERICAN HEART ASSOCIATION 6500 TECHNOLOGY DRIVE 100 INDIANAPOLIS, IN 46278	13-5613797	501(C)3	28,789				HEART AND CIRCULATORY SYSTEM

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
AMERICAN RED CROSS IN NORTHEAST WI 515 S WASHBURN ST STE 201 OSHKOSH, WI 549047996	53-0196605	501(C)3	20,336				DISASTER PREPAREDNESS & RELIEF SERVICES
ANGEL CLASSIC 4059 LINDEN LN GREEN BAY, WI 54313	65-1215974	501(C)3	6,875				CHILDREN & YOUTH SERVICES

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
APPLETON ALLIANCE CHURCH 2693 W GRAND CHUTE BLVD APPLETON, WI 549139617	39-1345185	501(C)3	91,668				CHRISTIANITY
APPLETON BOYCHOIR INC 111 W COLLEGE AVE 4TH FLOOR APPLETON, WI 54911	39-1548340	501(C)3	8,411				SINGING & CHORAL GROUPS

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
APPLETON EDUCATION FOUNDATION INC 122 E COLLEGE AVE 1-B APPLETON, WI 54911	39-1866090	501(C)3	5,764				EDUCATION
APPLETON HISTORICAL SOCIETY INC 2631 N MEADE ST STE 101 APPLETON, WI 549112203	45-0604780	501(C)3	5,100				HISTORY MUSEUMS

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
APPLETON ROTARY FOUNDATION PO BOX 703 APPLETON, WI 549120703	39-6053036	501(C)3	9,079				COMMUNITY SERVICE CLUBS
APRICITY 1010 STROHMEYER DR NEENAH, WI 549561980	39-1229161	501(C)3	41,227				HUMAN SERVICES

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
ARCTIC BARNABAS MINISTRIES 135 N WILLOW ST KENAI, AK 996117702	92-0172389	501(C)3	6,000				CHRISTIANITY
ATTIC THEATRE INC PO BOX 41 APPLETON, WI 549120041	39-0993864	501(C)3	9,990				THEATER

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
BABES INC - CHILD ABUSE PREVENTION PROGRAM 1331 E WISCONSIN AVE APPLETON, WI 54911	39-1887276	501(C)3	11,000				FAMILY SERVICES
BAY-LAKES COUNCIL BOY SCOUTS OF AMERICA PO BOX 267 APPLETON, WI 549120267	39-1184320	501(C)3	11,202				BOY SCOUTS OF AMERICA

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
BEAMING INC PO BOX 524 NEENAH, WI 549570524	20-1797140	501(C)3	13,778				HEALTH
BERGSTROM-MAHLER MUSEUM 165 N PARK AVE NEENAH, WI 549562956	39-0958257	501(C)3	95,780				ART MUSEUMS

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
BEST FRIENDS OF NEENAH-MENASHA 181 E NORTH WATER ST STE 225 NEENAH, WI 549562723	39-1260017	501(C)3	13,388				ADULT & CHILD MATCHING PROGRAMS
BETHANY LUTHERAN CHURCH PO BOX 707 EPHRAIM, WI 542110707	39-1427586	501(C)3	201,500				RELIGION RELATED

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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BIG BROTHERS BIG SISTERS OF EAST CENTRAL WISCONSIN 1331 AMERICAN DR NEENAH, WI 549561401	39-6103907	501(C)3	41,850				YOUTH DEVELOPMENT
BIG BROTHERS BIG SISTERS OF THE FOX VALLEY REGION 3301 N BALLARD RD STE C APPLETON, WI 549119002	39-6103907	501(C)3	53,665				BIG BROTHERS & BIG SISTERS

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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BIRCH CREEK MUSIC PERFORMANCE ART CENTER PO BOX 230 EGG HARBOR, WI 542090230	36-3032002	501(C)3	11,150				ARTS EDUCATION
BLESSINGS INTERNATIONAL 1650 N INDIANWOOD AVE BROKEN ARROW, OK 74012	73-1130590	501(C)3	25,000				CHRISTIANITY

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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BOYS & GIRLS BRIGADE ASSOCIATION INC 109 W COLUMBIAN AVE NEENAH, WI 549563017	39-0813396	501(C)3	26,595				YOUTH DEVELOPMENT
BOYS & GIRLS CLUB OF OSHKOSH PO BOX 411501 E PARKWAY AVE OSHKOSH, WI 549014650	39-6120658	501(C)3	19,500				BOYS & GIRLS CLUBS

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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BOYS & GIRLS CLUB OF SHAWANO 1300 S UNION ST SHAWANO, WI 541663463	39-6102943	501(C)3	6,834				BOYS & GIRLS CLUBS
BOYS & GIRLS CLUB OF THE TRI-COUNTY AREA PO BOX 254 BERLIN, WI 549230254	82-0721270	501(C)3	10,000				BOYS & GIRLS CLUBS

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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BOYS & GIRLS CLUBS OF THE FOX VALLEY 160 S BADGER AVE APPLETON, WI 549145280	39-1225709	501(C)3	1,656,760				BOYS & GIRLS CLUBS
BRANCHES CHURCH PO BOX 337 MENOMONIE, WI 54751	27-1907331	501(C)3	20,416				CHRISTIANITY

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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BRIDGE THE GAP INC 1415 E GREEN BAY ST STE 111 SHAWANO, WI 541663880	26-1377517	501(C)3	14,630				AUTISM
BRIDGES CHILD ENRICHMENT CENTER C/O COMMUNITY EARLY LEARNING CENTER313 S STATE ST APPLETON, WI 549115929	39-1340963	501(C)3	8,624				CHILD DAY CARE

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
BRILLION CITY COMMUNITY DRIVE INC PO BOX 15 BRILLION, WI 54110	39-1649958	501(C)3	6,200				COMMUNITY IMPRV & CAPACITY BLDG NEC
BRILLION NATURE STUDY CENTER ASSOCIATION 315 S MAIN STREET BRILLION, WI 54110	39-1503682	501(C)3	17,250				ENVIRONMENTAL EDUCATION

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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BSD-BRILLION PUBLIC SCHOOLS 315 SOUTH MAIN STREET BRILLION, WI 54110	39-6001095	GOVERNMENT	15,260				EDUCATION
CALUMET COUNTY - LEDGE VIEW NATURE CENTER W2348 SHORT ROAD CHILTON, WI 53014	39-6005676	501(C)3	10,964				ENVIRONMENTAL EDUCATION

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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CALVARY BIBLE CHURCH PO BOX 799 NEENAH, WI 54957	39-1279433	501(C)3	75,000				PROTESTANT
CAMPUS CRUSADE FOR CHRIST PO BOX 628222 ORLANDO, FL 328628222	95-6006173	501(C)3	15,272				CHRISTIANITY

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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CAP SERVICES INC 821 E 1ST AVENUE SUITE 3 APPLETON, WI 54911	39-1080897	501(C)3	16,500				HUMAN SERVICES
CAP SERVICES-STEVENSON POINT 2900 HOOVER ROAD SUITE A STEVENSON POINT, WI 54481	39-1080897	501(C)3	10,581				HUMAN SERVICES

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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CASA LAKE COUNTY INC 700 FOREST EDGE DRIVE VERNON HILLS, IL 60061	36-3916143	501(C)3	41,530				CHILD ABUSE PREVENTION
CASA OF THE FOX CITIES 1500 NORTH CASALOMA DR STE 401 APPLETON, WI 549138219	46-0740362	501(C)3	25,406				CRIME & LEGAL-RELATED N.E.C.

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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CATALPA HEALTH INC 444 NORTH WESTHILL BLVD APPLETON, WI 54914	45-4681563	501(C)3	379,024				PEDIATRICS
CATHOLIC CHARITIES OF THE ARCHDIOCESE OF MIAMI INC 1505 NE 26TH ST WILTON MANORS, FL 333051323	59-1279497	501(C)3	100,000				HUMAN SERVICES N.E.C.

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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CATHOLIC FOUNDATION FOR THE DIOCESE OF GREEN BAY PO BOX 22128 GREEN BAY, WI 543052128	39-1924921	501(C)3	123,793				CHRISTIANITY
CATHOLIC RELIEF SERVICES ATTN DONOR SERVICESPO BOX 17152 BALTIMORE, MD 212988452	13-5563422	501(C)3	15,550				DISASTER PREPAREDNESS & RELIEF SERVICES

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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CELEBRATION LUTHERAN SCHOOL OF APPLETON 3100 EAST EVERGREEN DRIVE APPLETON, WI 54913	27-0493434	501(C)3	12,115				ELEMENTARY & SECONDARY SCHOOLS
CENTER FOR SUICIDE AWARENESS 316 EAST 14TH STREET KAUKAUNA, WI 54130	46-1223558	501(C)3	12,600				HOT LINES & CRISIS INTERVENTION

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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CEREBRAL PALSY INC 2801 S WEBSTER GREEN BAY, WI 54301	39-0901265	501(C)3	7,000				DEVELOPMENTALLY DISABLED CENTERS
CHILD CARE RESOURCE AND REFERRAL 1001 WEST KENNEDY AVENUE STE A KIMBERLY, WI 54136	39-1606155	501(C)3	18,000				CHILDREN & YOUTH SERVICES

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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CHILDREN'S HOSPITAL OF WISCONSIN FOUNDATION 333 NORTH COMMERCIAL STREET 400 NEENAH, WI 54956	39-0812532	501(C)3	26,888				SINGLE ORGANIZATION SUPPORT
CHILTON AREA CATHOLIC SCHOOL 60 E WASHINGTON STREET CHILTON, WI 53014	39-1129820	501(C)3	8,950				EDUCATION

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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CHILTON PUBLIC LIBRARY 221 PARK STREET CHILTON, WI 53014	39-6005413	GOVERNMENT	5,274				LIBRARIES
CHPS-CHILTON PUBLIC SCHOOL DISTRICT 530 W MAIN ST CHILTON, WI 53014	39-6001369	GOVERNMENT	193,860				EDUCATION

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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CHRIST CHILD ACADEMY 2722 HENRY STREET SHEBOYGAN, WI 53081	39-1557915	501(C)3	73,623				ELEMENTARY & SECONDARY SCHOOLS
CHRIST THE ROCK COMMUNITY CHURCH W6254 HIGHWAY 10-114 MENASHA, WI 54952	39-1500205	501(C)3	47,000				RELIGION-RELATED

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CHRISTINE ANN DOMESTIC ABUSE SERVICES 206 ALGOMA BLVD OSHKOSH, WI 54902	39-1441770	501(C)3	28,601				FAMILY VIOLENCE SHELTERS
CIRCLE URBAN MINISTRIES 118 NORTH CENTRAL AVENUE CHICAGO, IL 60644	36-3136997	501(C)3	41,530				FOOD BANKS & PANTRIES

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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CITY OF APPLETON 100 N APPLETON ST APPLETON, WI 549114799	39-6005381	GOVERNMENT	565,530				GOVERNMENT & PUBLIC ADMINISTRATION
CITY OF BRILLION 130 CALUMET ST BRILLION, WI 541101118	39-6005404	GOVERNMENT	29,250				GOVERNMENT & PUBLIC ADMINISTRATION

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CITY OF CHILTON FIRE DEPARTMENT 42 SCHOOL STREET CHILTON, WI 53014	39-6005413	GOVERNMENT	20,000				PUBLIC SAFETY, DISASTER PREPAREDNESS & RELIEF
CITY OF KAUKAUNA 201 WEST 2ND STREET KAUKAUNA, WI 54130	39-6005479	GOVERNMENT	80,517				GOVERNMENT & PUBLIC ADMINISTRATION

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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CITY OF SHAWANO 127 S SAWYER STPO BOX 104 SHAWANO, WI 54166	39-6005594	GOVERNMENT	15,000				GOVERNMENT & PUBLIC ADMINISTRATION
CLEVELAND KIDS' BOOK BANK 3635 PERKINS AVE CLEVELAND, OH 44114	47-5553602	501(C)3	20,000				REMEDIAL READING & ENCOURAGEMENT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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CLPS-CLINTONVILLE PUBLIC SCHOOL DISTRICT 45 WEST GREEN TREE ROAD CLINTONVILLE, WI 54929	39-6008413	GOVERNMENT	6,818				EDUCATION
COATS FOR KIDS - CLEVELAND 6200 OAK TREE BLVD INDEPENDENCE, OH 44131	34-1804606	501(C)3	20,000				GIFT DISTRIBUTION

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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COMMUNITY BENEFIT TREE INC 2204 CROOKS AVE STE C KAUKAUNA, WI 541303405	20-0839777	501(C)3	13,686				FUNDRAISING
COMMUNITY CHURCH OF APPLETON 3701 N GILLETT ST APPLETON, WI 549146914	39-1712990	501(C)3	28,800				RELIGION-RELATED

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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COMMUNITY CLOTHES CLOSET 1465-B OPPORTUNITY WAY MENASHA, WI 54952	39-1394270	501(C)3	30,210				EMERGENCY ASSISTANCE
COMMUNITY EARLY LEARNING CENTER OF THE FOX VALLEY 313 SOUTH STATE STREET APPLETON, WI 54911	47-1117143	501(C)3	102,577				EDUCATIONAL SERVICES

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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CONGREGATIONAL UNITED CHURCH OF CHRIST NEENAHMENASHA 1511 NICOLET BLVD NEENAH, WI 54956	39-1017515	501(C)3	10,000				RELIGION-RELATED
COOPERATIVE EDUCATIONAL SERVICE AGENCY NO 7 595 BAETEN RD GREEN BAY, WI 543045763	39-1515860	501(C)3	100,000				SPECIAL EDUCATION

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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COTS PO BOX 1645 APPLETON, WI 549121645	39-1913179	501(C)3	111,726				HOMELESS CENTERS
COVANTAGE CARES FOUNDATION INC PO BOX 107 ANTIGO, WI 54409	81-1056981	501(C)3	10,500				PUBLIC FOUNDATIONS

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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CREATIVE DOWNTOWN APPLETON 333 W COLLEGE AVE APPLETON, WI 549115862	47-1568601	501(C)3	17,608				ARTS & CULTURE
DAY BY DAY WARMING SHELTER INC 449 HIGH AVENUE OSHKOSH, WI 54901	27-5557420	501(C)3	5,933				HOMELESS SHELTERS

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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DIVERSE AND RESILIENT INC 2439 N HOLTON ST MILWAUKEE, WI 532122934	30-0084616	501(C)3	11,500				PUBLIC HEALTH
DOCTORS WITHOUT BORDERS USA 40 RECTOR ST FL 16 NEW YORK, NY 100061751	13-3433452	501(C)3	9,350				DISASTER PREPAREDNESS & RELIEF SERVICES

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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DOOR COUNTY MARITIME MUSEUM & LIGHTHOUSE PRESERVATION SOCIET 120 N MADISON AVE STURGEON BAY, WI 542353416	23-7054730	501(C)3	100,000				MUSEUMS
DULLES RESEARCH INSTITUTE C/O FINANCIAL ONE44744 HELM ST PLYMOUTH, MI 481706019	82-4302739	501(C)3	22,000				RESEARCH INSTITUTES & PUBLIC POLICY ANALYSIS

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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DYSLEXIA READING CONNECTION INC 2935 NORTH BALLARD ROAD 1 APPLETON, WI 54911	46-3735471	501(C)3	16,800				SPECIFICALLY NAMED DISEASES
EAST CENTRAL SYNOD OF WISCONSIN - ELCA 16 TRI-PARK WAY APPLETON, WI 549141658	36-3513671	501(C)3	6,000				RELIGION-RELATED

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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EASTER SEALS WISCONSIN 8001 EXCELSIOR DRIVE 200 MADISON, WI 53717	39-0824877	501(C)3	5,282				DEVELOPMENTALLY DISABLED CENTERS
EASTSHORE HUMANE ASSOCIATION INC PO BOX 320 CHILTON, WI 530140320	39-1565423	501(C)3	15,660				ANIMAL PROTECTION & WELFARE

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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ELISHA D SMITH PUBLIC LIBRARY 440 1ST ST MENASHA, WI 549523143	39-6005525	501(C)3	61,646				LIBRARIES
ENCOMPASS EARLY EDUCATION AND CARE INC 1823 S WEBSTER AVE GREEN BAY, WI 543012253	39-0824004	501(C)3	60,333				CHILD DAY CARE

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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ENTERTAINMENT INDUSTRY FOUNDATION 10880 WILSHIRE BLVD SUITE 1400 LOS ANGELES, CA 90024	95-1644609	501(C)3	175,000				FUND RAISING & FUND DISTRIBUTION
EPHRAIM MORAVIAN CHURCH 9970 MORAVIA ST 73 EPHRAIM, WI 54211	39-6055667	501(C)3	200,000				RELIGION-RELATED

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EXCEPTIONAL EQUESTRIANS 1120 ORLANDO DRIVE DEPERE, WI 54115	39-1959653	501(C)3	19,000				EQUESTRIAN
FAIRPORT HARBOR HISTORICAL SOCIETY 129 SECOND ST FAIRPORT HARBOR, OH 44077	34-6554830	501(C)3	25,000				HISTORICAL ORGANIZATIONS

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
FAITH LUTHERAN CHURCH 601 EAST GLENDALE AVENUE APPLETON, WI 54911	39-1027724	501(C)3	14,100				CHRISTIANITY
FAITH LUTHERAN CHURCH - APPLETON 601 EAST GLENDALE AVE APPLETON, WI 549112944	39-1027724	501(C)3	12,000				CHRISTIANITY

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
FAMILIES OF CHILDREN WITH CANCER INC PO BOX 1494 GREEN BAY, WI 54305	39-1311530	501(C)3	7,100				CANCER
FAMILY CAREGIVERS ROCK PO BOX 2434 APPLETON, WI 549122434	83-3406405	501(C)3	5,463				FUND RAISING & FUND DISTRIBUTION

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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FAMILY LIFE PO BOX 7111 LITTLE ROCK, AR 72223	95-6006173	501(C)3	6,000				CHRISTIANITY
FAMILY SERVICES OF NORTHEAST WISCONSIN PO BOX 22308 GREEN BAY, WI 543052308	39-0827320	501(C)3	76,896				CHILDREN & YOUTH SERVICES

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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FC ENVIRONMENTAL LEARNING CAMPUSBUBOLZ NATURE PRESERVE 4815 N LYNNDAL DR APPLETON, WI 549139665	23-7120877	501(C)3	113,075				NATURAL RESOURCES CONSERVATION & PROTECTION
FEEDING AMERICA EASTERN WISCONSIN - FOX VALLEY 2911 WEST EVERGREEN DRIVE APPLETON, WI 54913	39-1384593	501(C)3	255,143				FOOD BANKS & PANTRIES

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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FEEDING AMERICA WEST MICHIGAN 864 W RIVER CENTER DR NE COMSTOCK PARK, MI 493218955	38-2439659	501(C)3	20,000				FOOD BANKS & PANTRIES
FELLOWSHIP OF CHRISTIAN ATHLETES 403 N PINE GROVE LN HORTONVILLE, WI 549448750	44-0610626	501(C)3	12,000				YOUTH DEVELOPMENT - RELIGIOUS LEADERSHIP

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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FINLANDIA UNIVERSITY 601 QUINCY STREET HANCOCK, MI 49930	38-1359570	501(C)3	285,000				TWO-YEAR COLLEGES
FIRST CONGREGATIONAL UNITED CHURCH OF CHRIST 724 E SOUTH RIVER ST APPLETON, WI 549152257	39-0816821	501(C)3	64,306				RELIGION-RELATED

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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FIRST ENGLISH LUTHERAN CHURCH 1013 MINNESOTA ST OSHKOSH, WI 54902	39-0818688	501(C)3	8,000				RELIGION-RELATED
FIRST FIVE FOX VALLEY 1001 WEST KENNEDY AVENUE STE A KIMBERLY, WI 54136	39-1606155	501(C)3	525,000				CHILDREN'S AND YOUTH SERVICES

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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FIRST UNITED METHODIST CHURCH OF APPLETON 325 EAST FRANKLIN STREET APPLETON, WI 549115476	39-0943395	501(C)3	22,552				RELIGION-RELATED
FISHER HOUSE FOUNDATION INC 111 ROCKVILLE PIKE 420 ROCKVILLE, MD 20850	11-3158401	501(C)3	51,530				HEALTH SUPPORT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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FOOD FOR THE POOR INC 6401 LYONS RD COCONUT CREEK, FL 33073	59-2174510	501(C)3	13,850				PHILANTHROPY, CHARITY & VOLUNTARISM PROMOTION
FOUNDATIONS FOR LIVING P O BOX 564 WAUPACA, WI 54981	27-4017294	501(C)3	18,500				HOMELESS SHELTERS

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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FOX CITIES BUILDING FOR THE ARTS 111 W COLLEGE AVE APPLETON, WI 54911	39-6056442	501(C)3	19,500				ART MUSEUMS
FOX CITIES CHAMBER FOUNDATION 125 N SUPERIOR STREET APPLETON, WI 54911	39-1419431	501(C)3	8,147				CHAMBERS OF COMMERCE & BUSINESS LEAGUES

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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FOX CITIES GREENWAYS INC PO BOX 5 MENASHA, WI 54952	39-1810728	501(C)3	11,403				ENVIRONMENTAL BEAUTIFICATION
FOX CITIES PERFORMING ARTS CENTER 400 W COLLEGE AVE APPLETON, WI 54911	39-1977839	501(C)3	205,023				PERFORMING ARTS CENTERS

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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FOX RIVER NAVIGATIONAL SYSTEM AUTHORITY 1008 AUGUSTINE STREET KAUKAUNA, WI 54130	86-1113736	501(C)3	278,998				ENVIRONMENT
FOX VALLEY CHRISTIAN ACADEMY 1450 OAKRIDGE RDPO BOX 799 NEENAH, WI 54956	39-1279433	501(C)3	8,254				EDUCATION

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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FOX VALLEY HUMANE ASSOCIATION N115 TWO MILE RD APPLETON, WI 549149121	39-0992559	501(C)3	56,694				ANIMAL PROTECTION & WELFARE
FOX VALLEY LITERACY 130 EAST FRANKLIN STREET APPLETON, WI 54911	39-1682277	501(C)3	10,936				HUMAN SERVICE ORGANIZATIONS

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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FOX VALLEY LUTHERAN HIGH SCHOOL 5300 NORTH MEADE STREET APPLETON, WI 549138383	39-0988994	501(C)3	11,656				SECONDARY & HIGH SCHOOLS
FOX VALLEY MEMORY PROJECT 1800 APPLETON RD MENASHA, WI 54952	82-3556549	501(C)3	13,550				HUMAN SERVICE ORGANIZATIONS

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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FOX VALLEY MOTHER AND UNBORN BABY CARE INC 526 WEST WISCONSIN AVENUE APPLETON, WI 54911	39-1446370	501(C)3	5,950				REPRODUCTIVE HEALTH CARE FACILITIES AND ALLIED SERVICES
FOX VALLEY SYMPHONY ORCHESTRA ASSOCIATION 10 E COLLEGE AVE STE 207 APPLETON, WI 54911	39-1089489	501(C)3	84,418				SYMPHONY ORCHESTRAS

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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FOX VALLEY TECHNICAL COLLEGE FOUNDATION INC PO BOX 2277 APPLETON, WI 549122277	39-1264389	501(C)3	114,885				JOB TRAINING
FOX VALLEY VETERANS COUNCIL INC 2 N SYSTEMS DR APPLETON, WI 549141656	27-1009699	501(C)3	15,569				MILITARY & VETERANS ORGANIZATIONS

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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FOX-WOLF WATERSHED ALLIANCE P O BOX 1861 APPLETON, WI 549121861	39-1701585	501(C)3	8,000				WATER RESOURCES, WETLANDS CONSERVATION
FRESH MEALS ON WHEELS OF SHEBOYGAN COUNTY 1004 S TAYLOR DRIVE SHEBOYGAN, WI 53081	39-1238290	501(C)3	10,250				MEALS ON WHEELS

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FRIENDS OF APPLETON PUBLIC LIBRARY 225 NORTH ONEIDA STREET APPLETON, WI 549114780	39-1550376	501(C)3	41,233				SINGLE ORGANIZATION SUPPORT
FRIENDS OF GRIGNON MANSION PO BOX 341 KAUKAUNA, WI 541300341	46-4305132	501(C)3	6,000				HISTORICAL ORGANIZATIONS

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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FRIENDS OF HAITI PO BOX 1174 GREEN BAY, WI 54305	26-0076873	501(C)3	20,000				ADULT & CHILD MATCHING PROGRAMS
FRIENDS OF HEARTHSTONE INC 625 W PROSPECT AVE APPLETON, WI 54911	39-1579731	501(C)3	29,307				HISTORICAL SOCIETIES & HISTORIC PRESERVATION

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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FRIENDS OF HIGH CLIFF STATE PARK N7630 STATE PARK RD SHERWOOD, WI 541699615	39-1911880	501(C)3	7,050				NATURAL RESOURCES CONSERVATION & PROTECTION
FRIENDS OF PLUMB & PILOT ISLANDS INC PO BOX 61 WASHINGTON ISLAND, WI 542460061	74-3226051	501(C)3	200,000				NONPROFIT MANAGEMENT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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FRIENDS OF THE 1000 ISLANDS INC 1000 BEAULIEU CT KAUKAUNA, WI 541302597	39-1456162	501(C)3	7,500				ENVIRONMENT
FRIENDS OF THE APPLETON FIRE DEPARTMENT INC 700 NORTH DREW STREET APPLETON, WI 54911	27-4019881	501(C)3	30,000				SINGLE ORGANIZATION SUPPORT

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FRIENDS OF WISCONSIN PUBLIC TELEVISION INC 821 UNIVERSITY AVENUE MADISON, WI 537061497	23-7300462	501(C)3	26,541				HOME HEALTH CARE
FRIENDSHIP PLACE 220 N COMMERCIAL ST NEENAH, WI 54956	39-2029900	501(C)3	19,000				COMMUNITY MENTAL HEALTH CENTERS

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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FUTURE NEENAH INC 135 W WISCONSIN AVE NEENAH, WI 549563011	93-0843731	501(C)3	61,800				ENVIRONMENTAL BEAUTIFICATION
GATHERING WATERS CONSERVANCY 211 S PATERSON ST STE 270 MADISON, WI 537034538	39-1805090	501(C)3	27,000				NATURAL RESOURCES CONSERVATION & PROTECTION

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GIRL SCOUTS OF MANITOU COUNCIL 5212 WINDWARD CT SHEBOYGAN, WI 53083	39-0920672	501(C)3	17,800				GIRL SCOUTS OF THE U.S.A.
GIRL SCOUTS OF THE NORTHWESTERN GREAT LAKES INC 4693 NORTH LYNNDAL DRIVE APPLETON, WI 54913	39-1016314	501(C)3	25,175				GIRL SCOUTS OF THE U.S.A.

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GOLD CROSS AMBULANCE SERVICE 1055 WITTMAN DRIVE MENASHA, WI 54952	39-1702433	501(C)3	11,479				EMERGENCY MEDICAL SERVICES & TRANSPORT
GOLDEN HOUSE 1120 UNIVERSITY AVENUE GREEN BAY, WI 54302	39-1342659	501(C)3	20,000				FAMILY VIOLENCE SHELTERS

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GOLDEN SANDS RC&D COUNCIL INC 1100 MAIN STREET SUITE 150 STEVENS POINT, WI 54481	39-1451323	501(C)3	5,200				NATURAL RESOURCES CONSERVATION & PROTECTION
GOOD SHEPHERD LUTHERAN CHURCH 1310 SHEPARD DRIVE NAPERVILLE, IL 60565	41-1568278	501(C)3	12,000				PROTESTANT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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GOODWILL INDUSTRIES OF NORTH CENTRAL WISCONSIN 1800 APPLETON ROAD MENASHA, WI 54952	39-1144913	501(C)3	265,210				PUBLIC & SOCIETAL BENEFIT N.E.C.
GRACE CHURCH 1704 HAZEL HILL RD ALEXANDRIA, MN 563089290	16-1678998	501(C)3	25,000				RELIGION-RELATED

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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GRAY MUZZLE ORGANIZATION OF NE WISCONSIN INC 3509 N MASON ST APPLETON, WI 549141471	83-2820901	501(C)3	20,500				FUND RAISING & FUND DISTRIBUTION
GREATER CHICAGO FOOD DEPOSITORY 4100 W ANN LURIE PLACE CHICAGO, IL 60632	36-2971864	501(C)3	77,869				FOOD BANKS & PANTRIES

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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GREATER FOX CITIES AREA HABITAT FOR HUMANITY 921 MIDWAY ROAD MENASHA, WI 54952	39-1742974	501(C)3	170,586				CHRISTIANITY
GREATER GREEN BAY CHAMBER OF COMMERCE FOUNDATION INC 300 NORTH BROADWAY STREET 3A GREEN BAY, WI 54303	39-1442880	501(C)3	6,000				SINGLE ORGANIZATION SUPPORT

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GREATER GREEN BAY COMMUNITY FOUNDATION 320 N BROADWAY STE 260 GREEN BAY, WI 543032705	39-1699966	501(C)3	343,746				COMMUNITY FOUNDATIONS
GREEN BAY BOTANICAL GARDEN 2600 LARSEN ROAD GREEN BAY, WI 54307	39-1485020	501(C)3	15,000				BOTANICAL GARDENS & ARBORETA

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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GREEN BAY METROPOLITAN SEWERAGE DISTRICT 2231 N QUINCY ST GREEN BAY, WI 543021248	39-6005459	GOVERNMENT	14,900				GOVERNMENT & PUBLIC ADMINISTRATION
HARBOR HOUSE DOMESTIC ABUSE PROGRAMS 720 W 5TH ST APPLETON, WI 549145368	39-1870927	501(C)3	125,030				FAMILY VIOLENCE SHELTERS

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HEALTH BRIDGES INTERNATIONAL 0509 SW TEXAS STREET PORTLAND, OR 97219	20-3681041	501(C)3	6,650				HOMELESS CENTERS
HECKRODT WETLAND RESERVE 1305 PLANK RD MENASHA, WI 549522929	39-1838222	501(C)3	447,720				NATURAL RESOURCES CONSERVATION & PROTECTION

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HOLY CROSS PARISH 309 DESNOYER STREET KAUKAUNA, WI 54130	39-0807048	501(C)3	27,608				RELIGION-RELATED
HOLY FAMILY CATHOLIC SCHOOL 9100 CROCKETT RD BRENTWOOD, TN 37027	62-1400461	501(C)3	31,500				ROMAN CATHOLIC

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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HOLY FAMILY PARISH 1100 W RYAN ST BRILLION, WI 54110	39-0806809	501(C)3	16,750				RELIGION-RELATED
HOLYLAND FOOD PANTRY W4826 CTY HWY HHH MALONE, WI 53049	47-2374044	501(C)3	12,110				FOOD BANKS & PANTRIES

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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HOPE CLINIC AND CARE CENTER INC 1814 APPLETON RD MENASHA, WI 549521110	47-3031346	501(C)3	19,300				HUMAN SERVICE ORGANIZATIONS
HOPE COMMUNITY CHURCH 302 TRISTAN DR SHAWANO, WI 541662051	39-1419149	501(C)3	5,500				CHRISTIANITY

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HSHS ST VINCENT-ST MARY'S FOUNDATION PO BOX 11706 GREEN BAY, WI 54303	37-1186514	501(C)3	34,682				FUND RAISING & FUND DISTRIBUTION
INDUS OF FOX VALLEY 3000 E APPLE HILL BLVD APPLETON, WI 549137921	33-1023766	501(C)3	6,600				CULTURAL, ETHNIC AWARENESS

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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INNOVATIVE SERVICES 2321 SAN LUIS PLACE GREEN BAY, WI 54304	39-1969834	501(C)3	10,000				ARTS & CULTURE
JAKE'S DIAPERS INC 139 EAST 2ND STREET KAUKAUNA, WI 54130	46-3062817	501(C)3	7,500				HUMAN SERVICES N.E.C.

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
JEFFERSON COUNTY PARKS DEPARTMENT 311 SOUTH CENTER AVE ROOM 204 JEFFERSON, WI 53549	39-6005705	GOVERNMENT	75,200				ENVIRONMENTAL EDUCATION
JUNIOR ACHIEVEMENT OF WISCONSIN - WINNEBAGO REGION DISTRICT 11 TRI PARK WAY APPLETON, WI 549141661	39-0826295	501(C)3	19,600				YOUTH DEVELOPMENT - BUSINESS

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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JUST KEEP LIVIN FOUNDATION C/O NKSFBGO LLC15260 VENTURA BLVD SUITE 2100 SHERMAN OAKS, CA 91403	20-3921057	501(C)3	225,000				YOUTH DEVELOPMENT PROGRAMS
JUVENILE DIABETES RESEARCH FOUNDATION-NE WISCONSIN CHAPTER 1800 APPLETON RD 2 MENASHA, WI 549523727	23-1907729	501(C)3	6,345				SPECIFICALLY NAMED DISEASES

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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KASD-KAUKAUNA AREA SCHOOL DISTRICT 1701 COUNTY ROAD CE KAUKAUNA, WI 54130	39-6002782	GOVERNMENT	15,063				EDUCATION
KAUKAUNA PUBLIC LIBRARY FOUNDATION INC 207 THILMANY ROAD 200 KAUKAUNA, WI 54130	81-4252288	501(C)3	124,105				SINGLE ORGANIZATION SUPPORT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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KENYA WORKS INC PO BOX 1572 APPLETON, WI 54912	05-0623727	501(C)3	63,000				INTERNATIONAL ECONOMIC DEVELOPMENT
KIDS CHANCE OF WISCONSIN INC PO BOX 1546 BROOKFIELD, WI 53008	46-1285440	501(C)3	10,000				SCHOLARSHIPS & STUDENT FINANCIAL AID

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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L E PHILLIPS SENIOR CENTER INC 1616 BELLINGER ST EAU CLAIRE, WI 54703	39-1408723	501(C)3	50,000				SENIOR CENTERS
LAKE COUNTY HISTORICAL SOCIETY 415 RIVERSIDE DRIVE PAINESVILLE, OH 44077	34-0863972	501(C)3	9,500				HISTORICAL SOCIETIES & HISTORIC PRESERVATION

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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LAWRENCE UNIVERSITY 711 E BOLDT WAY SPC 1847 APPLETON, WI 549115595	39-0806297	501(C)3	134,170				UNDERGRADUATE COLLEGES
LEAGUE OF WOMEN VOTERS OF APPLETON PO BOX 1281 APPLETON, WI 549121281	23-7016090	501(C)3	15,850				VOTER EDUCATION & REGISTRATION

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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LEAVEN INC 1475 OPPORTUNITY WAY MENASHA, WI 549521293	39-1572168	501(C)3	439,193				SUPPORT N.E.C.
LEDGEVIEW NATURE CENTER PO BOX 54 CHILTON, WI 53014	39-1458805	501(C)3	15,000				ENVIRONMENTAL EDUCATION

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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LIFE PROMOTIONS 2030 AMERICAN DRIVE NEENAH, WI 54956	39-1372893	501(C)3	15,500				YOUTH DEVELOPMENT PROGRAMS
LIFE TOOLS FOUNDATION 105 OAKRIDGE CT COMBINED LOCKS, WI 541131259	81-1074848	501(C)3	6,970				EDUCATIONAL SERVICES

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LITERACY SERVICES OF WISCONSIN INC 555 N PLANKINTON AVE MILWAUKEE, WI 532032910	39-1091203	501(C)3	5,300				ADULT EDUCATION
LIVING THE WAUPACA WAY 107 SOUTH MAIN STREET WAUPACA, WI 54981	39-6005758	501(C)3	12,000				NUTRITION

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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LIVING WATER LUTHERAN CHURCH 9201 E HAPPY VALLEY RD SCOTTSDALE, AZ 85255	86-0867528	501(C)3	19,000				RELIGION-RELATED
LOAVES & FISHES OF THE FOX VALLEY PO BOX 1562 APPLETON, WI 54912	39-1974516	501(C)3	9,512				CONGREGATE MEALS

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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LUTHER SEMINARY 2481 COMO AVENUE ST PAUL, MN 55108	41-1425961	501(C)3	15,000				PROTESTANT
LUTHERAN SOCIAL SERVICES OF WI AND UPPER MICHIGAN 3003A NORTH RICHMOND STREET APPLETON, WI 54911	39-0816846	501(C)3	10,416				HUMAN SERVICES - MULTIPURPOSE AND OTHER N.E.C.

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MAKAROFF YOUTH BALLET 111 W COLLEGE AVE APPLETON, WI 54911	68-0652111	501(C)3	7,277				BALLET
MAKE-A-WISH FOUNDATION OF WISCONSIN - NORTHEAST WISCONSIN 100 W COLLEGE AVE 50E APPLETON, WI 54911	39-1543541	501(C)3	5,750				CHILDREN & YOUTH SERVICES

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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MARQUETTE UNIVERSITY PO BOX 1881 MILWAUKEE, WI 532011881	39-0806251	501(C)3	13,750				UNIVERSITIES
MARQUETTE UNIVERSITY HIGH SCHOOL 3401 W WISCONSIN AVE MILWAUKEE, WI 53208	39-0806826	501(C)3	32,000				UNIVERSITIES

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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MEMORIAL PRESBYTERIAN CHURCH OF APPLETON 803 E COLLEGE AVE APPLETON, WI 54911	39-6026053	501(C)3	55,290				RELIGION-RELATED
MENOMINEE CANINE ASSOCIATION PO BOX 264 KESHENA, WI 54135	84-2907083	501(C)3	24,960				LAW ENFORCEMENT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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MIELKE FAMILY FOUNDATION 4455 W LAWRENCE STREET APPLETON, WI 54911	39-6074258	501(C)3	6,000				PHILANTHROPY
MINNESOTA STATE MANKATO FOUNDATION 121 ALUMNI FOUNDATION CENTER MANKATO, MN 56001	41-6033423	501(C)3	10,000				SINGLE ORGANIZATION SUPPORT

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MISSION OF HOPE HOUSE OF WISCONSIN 520 N SHAWANO STREET NEW LONDON, WI 54961	46-5464904	501(C)3	70,800				HUMAN SERVICE ORGANIZATIONS
MJSD-MENASHA JOINT SCHOOL DISTRICT 328 SIXTH STREET MENASHA, WI 549522768	39-6003366	GOVERNMENT	5,200				EDUCATION

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MOSAIC FAMILY HEALTH 229 S MORRISON ST APPLETON, WI 549115725	47-3298660	501(C)3	122,000				COMMUNITY CLINICS
MOUNT TABOR CENTER 522 SECOND STREET MENASHA, WI 54952	39-1536251	501(C)3	17,769				ROMAN CATHOLIC

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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MT CALVARY EVANGELICAL LUTHERAN CHURCH N8728 SOUTH COOP ROAD MENASHA, WI 54952	39-6000155	501(C)3	11,000				CHRISTIANITY
MT OLIVE EVANGELICAL LUTHERAN CHURCH 930 E FLORIDA AVENUE APPLETON, WI 54911	39-6000011	501(C)3	5,916				CHRISTIANITY

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NEW MENTAL HEALTH CONNECTION INC PO BOX 374 APPLETON, WI 54912	45-2657700	501(C)3	168,000				MENTAL HEALTH ASSOCIATIONS
NAMI FOX VALLEY INC 211 E FRANKLIN ST STE B APPLETON, WI 54911	39-1545497	501(C)3	29,250				MENTAL HEALTH ASSOCIATIONS

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NATIONAL PARKINSON FOUNDATION INC 200 SE 1ST STREET STE 800 MIAMI, FL 33131	59-0968031	501(C)3	6,526				BRAIN DISORDERS
NAVARINO NATURE CENTER W5646 LINDSTEN ROAD SHIOCTON, WI 54170	39-1558573	501(C)3	7,522				ENVIRONMENTAL EDUCATION

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NEENAH ANIMAL SHELTER INC 951 COUNTY ROAD G NEENAH, WI 549569781	39-1030012	501(C)3	15,250				ANIMAL PROTECTION & WELFARE
NEENAH HISTORICAL SOCIETY INC PO BOX 343 NEENAH, WI 549570343	39-6075872	501(C)3	5,000				HISTORICAL SOCIETIES & HISTORIC PRESERVATION

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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NEENAH-MENASHA EMERGENCY SOCIETY PO BOX 744 NEENAH, WI 54957	39-6056105	501(C)3	13,630				EMERGENCY ASSISTANCE
NEVILLE PUBLIC MUSEUM FOUNDATION PO BOX 325 GREEN BAY, WI 543050325	93-0756332	501(C)3	69,500				MUSEUMS

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NEW HOLSTEIN HISTORICAL SOCIETY PO BOX 144 NEW HOLSTEIN, WI 530610144	39-6084800	501(C)3	7,750				HISTORICAL SOCIETIES & HISTORIC PRESERVATION
NEW HOPE CENTER PO BOX 189 CHILTON, WI 530140189	39-1052724	501(C)3	32,398				DEVELOPMENTALLY DISABLED CENTERS

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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NEW LONDON HERITAGE HISTORICAL SOCIETY 101 E BECKERT RD APT 204 NEW LONDON, WI 54961	39-1292274	501(C)3	85,046				HISTORICAL SOCIETIES & HISTORIC PRESERVATION
NEW LONDON PUBLIC LIBRARY 215 N SHAWANO ST NEW LONDON, WI 54961	39-6005550	501(C)3	250,000				LIBRARIES

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NEWVOICES PO BOX 221 APPLETON, WI 549120221	93-0838178	501(C)3	8,097				SINGING & CHORAL GROUPS
NORTHEAST WISCONSIN LAND TRUST 14 TRI-PARK WAYBUILDING 1 APPLETON, WI 54914	39-1867891	501(C)3	70,772				LAND RESOURCES CONSERVATION

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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NORTHEAST WISCONSIN TRAILS INC 1037C TRUMAN ST KIMBERLY, WI 54136	46-2158268	501(C)3	10,000				AMATEUR SPORTS
NORTHEASTERN WISCONSIN SPORTS ADVANCEMENT PO BOX 623 APPLETON, WI 54912	39-1708676	501(C)3	22,528				RECREATION & SPORTS N.E.C.

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NORTHERN ILLINOIS FOOD BANK 273 DEARBORN COURT GENEVA, IL 60134	36-3203648	501(C)3	179,782				FOOD PROGRAMS
OLD GLORY HONOR FLIGHT INC 4650 WEST SPENCER STREET APPLETON, WI 54914	27-0642712	501(C)3	5,600				MILITARY & VETERANS ORGANIZATIONS

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OPERA FOR THE YOUNG INC 6441 ENTERPRISE LANE SUITE 207 MADISON, WI 53719	39-1583686	501(C)3	11,050				PRIMARY & ELEMENTARY SCHOOLS
OPTIONS FOR INDEPENDENT LIVING 555 COUNTRY CLUB RDPO BOX 11967 GREEN BAY, WI 543071967	39-1843312	501(C)3	10,000				SERVICES TO PROMOTE THE INDEPENDENCE OF SPECIFIC POPULATIONS

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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OPUS BONO SACERDOTII 5137 DRYDEN ROADPO BOX 251 DRYDEN, MI 48428	03-0448257	501(C)3	11,300				HUMAN SERVICE ORGANIZATIONS
OSHKOSH AREA COMMUNITY FOUNDATION 230 OHIO ST STE 100 OSHKOSH, WI 549025894	39-2034571	501(C)3	454,735				PHILANTHROPY

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OSHKOSH AREA HUMANE SOCIETY INC 1925 SHELTER COURT OSHKOSH, WI 54901	39-1709813	501(C)3	5,250				SINGLE ORGANIZATION SUPPORT
OSHKOSH OPERA HOUSE FOUNDATION 222 PEARL AVE OSHKOSH, WI 54901	39-1569883	501(C)3	16,250				PERFORMING ARTS CENTERS

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OUR SAVIOR'S LUTHERAN CHURCH OF APPLETON 3009 NORTH MEADE STREET APPLETON, WI 54911	39-1287755	501(C)3	23,500				PROTESTANT
OUTAGAMIE COUNTY HISTORICAL SOCIETY 330 E COLLEGE AVENUE APPLETON, WI 54911	39-1298304	501(C)3	670,221				HISTORICAL SOCIETIES & HISTORIC PRESERVATION

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OUTAGAMIE COUNTY SHERIFF'S DEPARTMENT 410 SOUTH WALNUT STREET APPLETON, WI 54911	39-6005724	GOVERNMENT	15,271				PUBLIC SAFETY
OUTAGAMIE COUNTY YOUTH & FAMILY SERVICES 410 SOUTH WALNUT STREET APPLETON, WI 54911	39-6005724	GOVERNMENT	6,824				HUMAN SERVICES

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PAPER DISCOVERY CENTER 425 W WATER STREET APPLETON, WI 54911	39-1861890	501(C)3	6,952				MUSEUMS
PAPER INDUSTRY INTERNATIONAL HALL OF FAME 425 W WATER STREET APPLETON, WI 54911	39-1861890	501(C)3	12,200				MUSEUM & MUSEUM ACTIVITIES

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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PARTNERSHIP COMMUNITY HEALTH CENTER INC 5471 WATERFORD LANE APPLETON, WI 54913	20-2090446	501(C)3	14,457				COMMUNITY CLINICS
PENINSULA MUSIC FESTIVAL PO BOX 340 EPHRAIM, WI 542110340	39-1691920	501(C)3	15,000				PERFORMING ARTS

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PILLARS 605 E HANCOCK ST APPLETON, WI 54911	39-1582471	501(C)3	420,837				HOMELESS SHELTERS
PROVINCE OF ST JOSEPH OF THE CAPUCHIN ORDER 1820 MT ELLIOTT STREET DETROIT, MI 482073496	38-1525161	501(C)3	9,000				ROMAN CATHOLIC

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RAWHIDE INC E7475 RAWHIDE ROAD NEW LONDON, WI 549619987	39-1052471	501(C)3	130,228				FOSTER CARE
RAY GRAHAM ASSOCIATION FOR PEOPLE WITH DISABILITIES 901 WARRENVILLE RD ST 500 LISLE, IL 60532	36-2411166	501(C)3	12,500				DEVELOPMENTALLY DISABLED CENTERS

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RAYMOND JAMES CHARITABLE PO BOX 23559 ST PETERSBURG, FL 33742	59-3652538	501(C)3	899,865				COMMUNITY FOUNDATIONS
REBUILDING TOGETHER - FOX VALLEY 605 EAST HANCOCK STREET APPLETON, WI 54911	39-2013200	501(C)3	299,725				HOUSING REHABILITATION

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
RELEVANT RADIO PO BOX 10707 GREEN BAY, WI 543070707	39-2003067	501(C)3	57,727				RELIGIOUS RADIO
RHINELANDER AREA FOOD PANTRY 627 COON ST RHINELANDER, WI 54501	33-1141966	501(C)3	10,000				FOOD BANKS & PANTRIES

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RIVERVIEW GARDENS INC 1101 S ONEIDA ST APPLETON, WI 549151379	46-3208900	501(C)3	64,300				LAND RESOURCES CONSERVATION
ROTARY FOUNDATION OF ROTARY INTERNATIONAL 1560 SHERMAN AVENUE EVANSTON, IL 60201	36-3245072	501(C)3	6,084				SINGLE ORGANIZATION SUPPORT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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ROYAL OAKS ELEMENTARY SCHOOL 2215 PENNSYLVANIA AVENUE SUN PRAIRIE, WI 53590	39-6001163	501(C)3	8,000				PRIMARY & ELEMENTARY SCHOOLS
SACRED HEART CATHOLIC CHURCH 321 SOUTH SAWYER STREET SHAWANO, WI 54166	39-0806390	501(C)3	6,000				ROMAN CATHOLIC

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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SAFE HAVEN DOMESTIC ABUSE SUPPORT CENTER PO BOX 665 SHAWANO, WI 54166	39-1749998	501(C)3	8,785				HOUSING & SHELTER N.E.C.
SALVATION ARMY - FOX CITIES 130 E NORTH STPO BOX 1605 APPLETON, WI 549121605	36-2167910	501(C)3	65,721				SALVATION ARMY

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SALVATION ARMY OF CALUMET COUNTY 16 WEST MAIN STREET CHILTON, WI 53014	36-2167910	501(C)3	28,612				SALVATION ARMY
SALVATION ARMY-APPLETON PO BOX 1605 APPLETON, WI 549121605	36-2167910	501(C)3	11,387				SALVATION ARMY

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SAMARITAN'S PURSE P O BOX 3000 BOONE, NC 28607	58-1437002	501(C)3	9,750				CHRISTIANITY
SCHWAB CHARITABLE FUND 211 MAIN STREET SAN FRANCISCO, CA 94105	31-1640316	501(C)3	15,023				OTHER PHILANTHROPY, VOLUNTARISM, AND GRANTMAKING FOUNDATIONS N.E.C.

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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SCSD-SEYMOUR COMMUNITY HIGH SCHOOL 10 CIRCLE DRIVE SEYMOUR, WI 54165	39-6017417	GOVERNMENT	13,091				SECONDARY & HIGH SCHOOLS
SCULPTURE VALLEY INC 110 SOUTH DURKEE ST APPLETON, WI 549115717	45-2690499	501(C)3	6,000				ARTS & CULTURE

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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SERVANTS OF THE GOOD HELP INC 12126 MORGAN RD REEDSVILLE, WI 54230	82-5339072	501(C)3	31,500				HUMAN SERVICE ORGANIZATIONS
SEXUAL ASSAULT CRISIS CENTER - FOX CITIES INC 17 PARK PL STE 400 APPLETON, WI 549148271	39-1309331	501(C)3	4,300				SEXUAL ASSAULT SERVICES

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SHAWANO AREA MATTHEW 25 P O BOX 147 SHAWANO, WI 54166	46-5493989	501(C)3	11,485				HOMELESS CENTERS
SHAWANO COUNTY HUMANE SOCIETY 1290 JAYCEE CT SHAWANO, WI 54166	39-1718299	501(C)3	7,728				ANIMAL PROTECTION & WELFARE

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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SISTERS OF ST DOMINIC 5635 ERIE STREET RACINE, WI 534021900	27-2468917	501(C)3	10,000				ROMAN CATHOLIC
SISTERS OF THE DIVINE SAVIOR 4311 NORTH 100TH STREET MILWAUKEE, WI 53222	39-6054869	501(C)3	13,000				RELIGION-RELATED

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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SNOWDROP FOUNDATION-WISCONSIN CHAPTER N1110 GLENNVIEW DRIVE GREENVILLE, WI 54942	20-4478536	501(C)3	15,754				CANCER RESEARCH
SOAR FOX CITIES INC 211 E FRANKLIN ST STE A APPLETON, WI 549115475	75-3202931	501(C)3	45,461				CENTERS TO SUPPORT INDEPENDENCE

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SOCIETY OF THE DIVINE SAVIOR - SALVATORIAN CENTER 1303 MILWAUKEE DRIVE NEW HOLSTEIN, WI 53061	39-0806210	501(C)3	11,727				FUND RAISING & FUND DISTRIBUTION
SPECIAL OLYMPICS OF WISCONSIN - FOX VALLEY AREA W5361 CTY KK SUITE D APPLETON, WI 54915	39-1176591	501(C)3	5,450				SPECIAL OLYMPICS

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SPIERINGS CANCER FOUNDATION INC 700 HARVEST TRAIL APPLETON, WI 54913	26-4201357	501(C)3	7,000				CANCER
ST BERNARD PARISH 1617 W PINE ST APPLETON, WI 54914	39-1082074	501(C)3	20,000				ROMAN CATHOLIC

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ST COLETTA OF WISCONSIN INC N4637 COUNTY HIGHWAY Y JEFFERSON, WI 53549	39-0816855	501(C)3	5,794				DEVELOPMENTALLY DISABLED CENTERS
ST ELIZABETH ANN SETON CATHOLIC SCHOOL 814 SUPERIOR AVENUE SHEBOYGAN, WI 53801	45-5179843	501(C)3	74,165				PRIMARY & ELEMENTARY SCHOOLS

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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ST ELIZABETH HOSPITAL FOUNDATION 1506 S ONEIDA ST APPLETON, WI 54915	39-1256677	501(C)3	128,494				SINGLE ORGANIZATION SUPPORT
ST FRANCIS XAVIER CATHOLIC SCHOOL SYSTEM 101 E NORTHLAND AVENUE APPLETON, WI 54911	75-2975177	501(C)3	411,962				EDUCATION

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ST GIANNA MOLLA CLINIC INC 1727 SHAWANO AVENUE GREEN BAY, WI 54303	46-5384168	501(C)3	16,250				SPECIALTY HOSPITALS
ST IGNATIUS CATHOLIC SCHOOL 220 DOTY STREET KAUKAUNA, WI 54130	39-1794588	501(C)3	14,000				ELEMENTARY & SECONDARY SCHOOLS

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ST JOHN NEPOMUCENE PARISH 323 PINE STREET LITTLE CHUTE, WI 541401896	39-0816903	501(C)3	21,912				RELIGION-RELATED
ST JOHN SACRED HEART PARISH N369 MILITARY ROAD SHERWOOD, WI 54169	39-0865494	501(C)3	29,348				ROMAN CATHOLIC

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ST JOHN UNITED CHURCH OF CHRIST OF APPLETON 1130 W MARQUETTE ST APPLETON, WI 54911	39-0901169	501(C)3	6,065				RELIGION-RELATED
ST JOSEPH FOOD PROGRAM 1465 A OPPORTUNITY WAY MENASHA, WI 54952	39-1822486	501(C)3	128,136				FOOD PROGRAMS

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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ST JOSEPH PARISH 404 W LAWRENCE ST APPLETON, WI 54911	39-0847630	501(C)3	11,332				ROMAN CATHOLIC
ST JOSEPH PARISH-APPLETON 404 W LAWRENCE ST APPLETON, WI 54911	39-0847630	501(C)3	86,331				ROMAN CATHOLIC

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ST JUDE CHILDREN'S RESEARCH HOSPITAL 501 SAINT JUDE PL MEMPHIS, TN 381051905	62-0646012	501(C)3	7,579				HOSPITAL (SPECIALTY)
ST MARGARET MARY PARISH 439 WASHINGTON AVENUE NEENAH, WI 54956	39-0807228	501(C)3	22,500				RELIGION-RELATED

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ST MARY CATHOLIC SCHOOLS 1050 ZEPHYR DRIVE NEENAH, WI 54956	39-1656963	501(C)3	37,660				RELIGION-RELATED
ST MARY MAGDALENE'S CATHOLIC CHURCH P O BOX 409 WAUPACA, WI 54981	39-1103182	501(C)3	5,926				ROMAN CATHOLIC

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ST MARY PARISH MENASHA 528 2ND ST MENASHA, WI 549523112	39-0845602	501(C)3	15,500				ROMAN CATHOLIC
ST MARY PARISH-APPLETON 312 S STATE ST APPLETON, WI 54911	39-0810526	501(C)3	28,630				CHRISTIANITY

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ST PATRICK CATHOLIC CHURCH 324 NICOLET BLVD MENASHA, WI 54952	39-0967024	501(C)3	26,750				ROMAN CATHOLIC
ST PAUL CATHOLIC CHURCH 410 WALLACE STREET COMBINED LOCKS, WI 54113	39-0989794	501(C)3	12,000				ROMAN CATHOLIC

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ST PAUL ELDER SERVICES INC 316 E 14TH ST KAUKAUNA, WI 541303304	39-1029149	501(C)3	25,428				RELIGION-RELATED N.E.C.
ST PAUL LUTHERAN CHURCH 200 NORTH COMMERCIAL STREET NEENAH, WI 54956	39-0816831	501(C)3	8,313				RELIGION-RELATED

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ST PETER LUTHERAN CHURCH N2740 FRENCH RD FREEDOM, WI 549138919	39-1019369	501(C)3	15,000				RELIGION-RELATED
ST PIUS X PARISH 500 W MARQUETTE APPLETON, WI 54911	39-0935474	501(C)3	16,351				ROMAN CATHOLIC

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ST THOMAS MORE PARISH 1810 N MCDONALD STREET B APPLETON, WI 54911	39-1027422	501(C)3	13,433				ROMAN CATHOLIC
ST VINCENT DE PAUL COUNCIL OF NEENAH-MENASHA 1425 S COMMERCIAL ST NEENAH, WI 54956	39-1633256	501(C)3	20,750				THRIFT SHOPS

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ST VINCENT DE PAUL OF APPLETON 1924 W COLLEGE AVE APPLETON, WI 54914	39-1032282	501(C)3	75,540				PERSONAL SOCIAL SERVICES
ST VINCENT DE PAUL SOCIETY DISTRICT COUNCIL OF GREEN BAY 1529 LEO FRIGO WAY GREEN BAY, WI 543021163	39-1035429	501(C)3	55,000				HUMAN SERVICE ORGANIZATIONS

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ST VINCENT DE PAUL SOCIETY OF SHEBOYGAN 4215 HWY 42 NORTH SHEBOYGAN, WI 53083	39-0833611	501(C)3	6,500				HUMAN SERVICES N.E.C.
THE AVENUE 911 441 SOUTH JACKSON STREET GREEN BAY, WI 54301	20-8883546	501(C)3	13,800				RADIO

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THE BUILDING FOR KIDS 100 W COLLEGE AVE APPLETON, WI 549115706	39-1706260	501(C)3	43,246				CHILDREN'S MUSEUMS
THE FAMILY 1909 W SECOND STREET APPLETON, WI 54914	39-1280969	501(C)3	26,500				RELIGIOUS MEDIA & COMMUNICATIONS

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THE FAMILY RADIO NETWORK INC 1909 W SECOND STREET APPLETON, WI 54914	39-1280969	501(C)3	34,750				RELIGIOUS MEDIA & COMMUNICATIONS
THE NATURE CONSERVANCY 633 W MAIN STREET MADISON, WI 53703	53-0242652	501(C)3	7,058				ENVIRONMENT N.E.C.

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THE SAMARITAN COUNSELING CENTER OF THE FOX VALLEY INC 1478 KENWOOD DRIVE MENASHA, WI 54952	39-1214216	501(C)3	179,964				MENTAL HEALTH & CRISIS INTERVENTION N.E.C.
THE SHRINE OF OUR LADY OF GOOD HELP INC 4047 CHAPEL DRIVE NEW FRANKEN, WI 54229	20-3929148	501(C)3	30,000				RELIGION-RELATED

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THE TROUT MUSEUM OF ART INC 111 W COLLEGE AVE APPLETON, WI 54911	81-1273001	501(C)3	158,887				PHILANTHROPY / CHARITY / VOLUNTARISM PROMOTION
THEDACARE FAMILY OF FOUNDATIONS INC 1818 N MEADE STREET APPLETON, WI 54911	46-4112255	501(C)3	208,854				PUBLIC FOUNDATIONS

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THOMPSON CENTER ON LOURDES 2331 E LOURDES DRIVE APPLETON, WI 54915	81-3840811	501(C)3	187,157				SENIOR CENTERS/SERVICES
THREE SQUARE 4190 N PECOS RD LAS VEGAS, NV 891150187	30-0396918	501(C)3	10,000				FOOD BANKS & PANTRIES

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TITAN ALUMNI FOUNDATION INC 842 ALGOMA BLVD OSHKOSH, WI 549013551	83-0629215	501(C)3	25,500				ALUMNI ASSOCIATIONS
TRI-COUNTY COMMUNITY DENTAL CLINIC 9 TRI-PARK WAY APPLETON, WI 54914	47-0862462	501(C)3	129,335				AMBULATORY & PRIMARY HEALTH CARE

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TRINITY LUTHERAN CHURCH 407 OAK NEENAH, WI 54956	39-0960044	501(C)3	38,163				CHRISTIANITY
TRINITY LUTHERAN CHURCH & SCHOOL 601 E NATIONAL AVE BRILLION, WI 541101500	39-0860696	501(C)3	5,628				CHRISTIANITY

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UNITED CHURCH OF MARCO ISLAND 320 NORTH BARFIELD DRIVE MARCO ISLAND, FL 34145	59-1861678	501(C)3	7,100				RELIGION-RELATED
UNITED NEGRO COLLEGE FUND INC 105 W ADAMS CHICAGO, IL 60603	13-1624241	501(C)3	103,826				EDUCATION N.E.C.

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UNITED WAY FOX CITIES 1455 MIDWAY ROAD MENASHA, WI 54952	39-0912895	501(C)3	183,677				HUMAN SERVICE ORGANIZATIONS
UNIVERSITY OF WISCONSIN GREEN BAY FOUNDATION 2420 NICOLET DRIVE GREEN BAY, WI 54311	45-1600858	501(C)3	6,000				SINGLE ORGANIZATION SUPPORT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
UNIVERSITY OF WISCONSIN-FOX VALLEY 1478 MIDWAY ROAD MENASHA, WI 54952	39-1805963	501(C)3	17,550				UNIVERSITIES
UNIVERSITY OF WISCONSIN-GREEN BAY BURSARS OFFICE2420 NICOLET DR GREEN BAY, WI 543117001	39-1805963	501(C)3	91,600				UNIVERSITIES

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
US 2 BEHAVIORAL HEALTH CARE INC 5750 W GRANDE MARKET DR SUITE A APPLETON, WI 549138406	84-2183803	501(C)3	389,600				MENTAL HEALTH TREATMENT
UW FOUNDATION INC 1848 UNIVERSITY AVENUE MADISON, WI 53726	39-0743975	501(C)3	116,100				SINGLE ORGANIZATION SUPPORT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
VALLEY PACKAGING INDUSTRIES 2730 NORTH ROEMER ROAD APPLETON, WI 54911	39-0921632	501(C)3	25,000				EMPLOYMENT PREPARATION & PROCUREMENT
VALLEY VNA HEALTH SYSTEMS INC 1535 LYON DRIVE NEENAH, WI 54956	39-1624803	501(C)3	364,950				HOME HEALTH CARE

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
VALLEY VNA SENIOR CARE 1535 LYON DRIVE NEENAH, WI 54956	39-1624803	501(C)3	14,187				HOME HEALTH CARE
VAN ANDEL INSTITUTE 333 BOSTWICK AVE NE GRAND RAPIDS, MI 495032518	52-2000820	501(C)3	25,000				FEDERATED GIVING PROGRAMS

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
VIDA 526 W WISCONSIN AVE APPLETON, WI 549114382	39-1446370	501(C)3	6,500				SUPPORT N.E.C.
VOLUNTEER CENTER OF EAST CENTRAL WISCONSIN INC 2616 S ONEIDA ST 2 APPLETON, WI 549152101	39-1765162	501(C)3	10,000				VOLUNTARISM PROMOTION

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
VOLUNTEER FOX CITIES 2616 SOUTH ONEIDA STREET 2 APPLETON, WI 54915	39-1765162	501(C)3	7,525				VOLUNTARISM PROMOTION
WASHINGTON COMMUNITY FOUNDATION INC PO BOX 68 WASHINGTON ISLAND, WI 54246	39-1568796	501(C)3	23,550				CENTERS TO SUPPORT INDEPENDENCE

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
WAUPACA AREA CHAMBER FOUNDATION INC 315 S MAIN ST WAUPACA, WI 549811745	84-1908369	501(C)3	50,500				PROMOTION OF BUSINESS
WAUPACA COMMUNITY ARTS BOARD PO BOX 88 WAUPACA, WI 54981	27-0130176	501(C)3	18,600				ARTS & HUMANITIES COUNCILS & AGENCIES

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
WAYLAND ACADEMY 101 N UNIVERSITY AVE BEAVER DAM, WI 539162253	39-0806363	501(C)3	10,000				SECONDARY & HIGH SCHOOLS
WELS FOUNDATION INC N16W23377 STONE RIDGE DRIVE WAUKESHA, WI 53188	39-6084446	501(C)3	20,000				RELIGION-RELATED

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
WESTMINSTER COLLEGE 501 WESTMINSTER AVENUE FULTON, MO 65251	43-0652617	501(C)3	20,000				UNDERGRADUATE COLLEGES
WGBH EDUCATIONAL FOUNDATION PO BOX 200 BOSTON, MA 02134	04-2104397	501(C)3	25,000				MEDIA & COMMUNICATIONS

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
WISCONSIBS 211 EAST FRANKLINE STREET C APPLETON, WI 54911	39-1942794	501(C)3	11,655				CENTERS TO SUPPORT INDEPENDENCE
WISCONSIN BROADCASTERS ASSOCIATION FOUNDATION INC 44 E MIFFLIN ST SUITE 900 MADISON, WI 53703	39-1651812	501(C)3	30,000				MEDIA & COMMUNICATIONS

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
WISCONSIN PARKINSON ASSOCIATION 2819 W HIGHLAND AVENUE MILWAUKEE, WI 53208	39-1492810	501(C)3	17,633				NEUROLOGY & NEUROSCIENCE
WISCONSIN PUBLIC RADIO ASSOCIATION INC PO BOX 697 RACINE, WI 53401	23-7363536	501(C)3	32,382				RADIO

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
WISCONSIN VETERANS VILLAGE ASSOCIATION INC 2919 GLENPARK DRIVE SUITE 500 APPLETON, WI 54914	82-2839384	501(C)3	265,130				CENTERS TO SUPPORT INDEPENDENCE
WITH WINGS AND A HALO-REACH A CHILD 407 AUGUSTA DRIVE WAUNAKEE, WI 53597	26-0757945	501(C)3	9,000				CHILDREN & YOUTH SERVICES

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
WOLF RIVER HABITAT FOR HUMANITY PO BOX 532 SHAWANO, WI 54166	39-1906510	501(C)3	5,210				HOUSING DEVELOPMENT
WOMEN'S FUND FOR THE FOX VALLEY REGION INC 4455 W LAWRENCE STREET APPLETON, WI 54914	20-3096562	501(C)3	60,920				PHILANTHROPY

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
WOODLAND COMMUNITY CHURCH 9607 EAST STATE ROAD 70 BRADENTON, FL 34202	65-0012576	501(C)3	65,104				RELIGION-RELATED
WORLD RELIEF FOX VALLEY 7 E BALTIMORE ST BALTIMORE, MD 212021602	23-6393344	501(C)3	8,750				DISASTER PREPAREDNESS & RELIEF SERVICES

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
WORLD VISION PO BOX 9716 DEPT W FEDERAL WAY, WA 980639716	95-1922279	501(C)3	15,500				INTERNATIONAL DEVELOPMENT
WSD-SCHOOL DISTRICT OF WAUPACA E2325 KING ROAD WAUPACA, WI 54981	39-1779223	GOVERNMENT	21,121				EDUCATION

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
YMCA OF THE FOX CITIES 218 EAST LAWRENCE STREET APPLETON, WI 54911	39-0806191	501(C)3	178,818				YOUNG MENS OR WOMENS ASSOCIATIONS
YMCA OF THE FOX CITIES - HEART OF THE VALLEY 218 EAST LAWRENCE STREET APPLETON, WI 54911	39-0806191	501(C)3	12,000				YOUNG MENS OR WOMENS ASSOCIATIONS

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
YMCA OF THE FOX CITIES - NEENAHMENASHA 218 EAST LAWRENCE STREET APPLETON, WI 54911	39-0806191	501(C)3	17,858				YOUNG MENS OR WOMENS ASSOCIATIONS
YOUTH GO 213 NICOLET BLVD NEENAH, WI 549562755	39-1137233	501(C)3	20,850				CHILDREN & YOUTH SERVICES

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
ZION UNITED METHODIST CHURCH PO BOX 66 FOREST JUNCTION, WI 54123	39-0884784	501(C)3	28,536				CHRISTIANITY
COVENANT LIFE PRESBYTERIAN CHURCH 1415 E GREEN BAY ST STE 111 SHAWANO, WI 541663880	39-6165903	501(C)3	6,800				RELIGION-RELATED

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
LUTHERAN BIBLE TRANSLATORS INC PO BOX 789 CONCORDIA, MO 64020	95-2630437	501(C)3	30,000				CHRISTIANITY

Schedule J
(Form 990)

Compensation Information

OMB No. 1545-0047
2019
Open to Public Inspection

For certain Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees
 ▶ Complete if the organization answered "Yes" on Form 990, Part IV, line 23.
 ▶ Attach to Form 990.
 ▶ Go to www.irs.gov/Form990 for instructions and the latest information.

Department of the Treasury
Internal Revenue Service

Name of the organization COMMUNITY FOUNDATION FOR THE FOX VALLEY REGION INC	Employer identification number 39-1548450
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Part I Questions Regarding Compensation

	Yes	No
1a Check the appropriate box(es) if the organization provided any of the following to or for a person listed on Form 990, Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items.		
<input type="checkbox"/> First-class or charter travel <input type="checkbox"/> Travel for companions <input type="checkbox"/> Tax idemnification and gross-up payments <input type="checkbox"/> Discretionary spending account <input type="checkbox"/> Housing allowance or residence for personal use <input type="checkbox"/> Payments for business use of personal residence <input type="checkbox"/> Health or social club dues or initiation fees <input type="checkbox"/> Personal services (e.g., maid, chauffeur, chef)		
b If any of the boxes on Line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain	1b	
2 Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors, trustees, officers, including the CEO/Executive Director, regarding the items checked on Line 1a?	2	
3 Indicate which, if any, of the following the filing organization used to establish the compensation of the organization's CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a related organization to establish compensation of the CEO/Executive Director, but explain in Part III.		
<input checked="" type="checkbox"/> Compensation committee <input type="checkbox"/> Independent compensation consultant <input type="checkbox"/> Form 990 of other organizations <input type="checkbox"/> Written employment contract <input checked="" type="checkbox"/> Compensation survey or study <input checked="" type="checkbox"/> Approval by the board or compensation committee		
4 During the year, did any person listed on Form 990, Part VII, Section A, line 1a, with respect to the filing organization or a related organization:		
a Receive a severance payment or change-of-control payment?	4a	No
b Participate in, or receive payment from, a supplemental nonqualified retirement plan?	4b	Yes
c Participate in, or receive payment from, an equity-based compensation arrangement? If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.	4c	No
Only 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9.		
5 For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of:		
a The organization?	5a	No
b Any related organization? If "Yes," on line 5a or 5b, describe in Part III.	5b	No
6 For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of:		
a The organization?	6a	No
b Any related organization? If "Yes," on line 6a or 6b, describe in Part III.	6b	No
7 For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed payments not described in lines 5 and 6? If "Yes," describe in Part III.	7	No
8 Were any amounts reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III.	8	No
9 If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53.4958-6(c)?	9	

Part III Supplemental Information

Provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II. Also complete this part for any additional information.

Return Reference	Explanation
PART I, LINE 4B	CURT DETJEN IS A PARTICIPANT IN A SUPPLEMENTAL EXECUTIVE RETIREMENT PLAN. THE AMOUNT RECOGNIZED RATABLY OVER THE COURSE OF THE SERVICE WAS \$31,323 FOR 2019.

**SCHEDULE M
(Form 990)**

Noncash Contributions

OMB No. 1545-0047

2019

▶ **Complete if the organizations answered "Yes" on Form 990, Part IV, lines 29 or 30.**
 ▶ **Attach to Form 990.**
 ▶ **Go to www.irs.gov/Form990 for the latest information.**

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

Name of the organization
COMMUNITY FOUNDATION FOR THE FOX VALLEY
REGION INC

Employer identification number
39-1548450

Part I Types of Property

	(a) Check if applicable	(b) Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g	(d) Method of determining noncash contribution amounts
1 Art—Works of art				
2 Art—Historical treasures				
3 Art—Fractional interests				
4 Books and publications				
5 Clothing and household goods				
6 Cars and other vehicles				
7 Boats and planes				
8 Intellectual property				
9 Securities—Publicly traded	X	169	7,204,645	AVE HIGH/LOW @ DATE GIFT
10 Securities—Closely held stock				
11 Securities—Partnership, LLC, or trust interests				
12 Securities—Miscellaneous				
13 Qualified conservation contribution—Historic structures				
14 Qualified conservation contribution—Other				
15 Real estate—Residential				
16 Real estate—Commercial				
17 Real estate—Other				
18 Collectibles				
19 Food inventory				
20 Drugs and medical supplies				
21 Taxidermy				
22 Historical artifacts				
23 Scientific specimens				
24 Archeological artifacts				
25 Other ▶ (_____)				
26 Other ▶ (_____)				
27 Other ▶ (_____)				
28 Other ▶ (_____)				

29 Number of Forms 8283 received by the organization during the tax year for contributions for which the organization completed Form 8283, Part IV, Donee Acknowledgement

29	
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30a During the year, did the organization receive by contribution any property reported in Part I, lines 1 through 28, that it must hold for at least three years from the date of the initial contribution, and which isn't required to be used for exempt purposes for the entire holding period?

	Yes	No
30a		No
31	Yes	
32a	Yes	

b If "Yes," describe the arrangement in Part II.

31 Does the organization have a gift acceptance policy that requires the review of any nonstandard contributions?

32a Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash contributions?

b If "Yes," describe in Part II.

33 If the organization didn't report an amount in column (c) for a type of property for which column (a) is checked, describe in Part II.

Part II Supplemental Information. Provide the information required by Part I, lines 30b, 32b, and 33, and whether the organization is reporting in Part I, column (b), the number of contributions, the number of items received, or a combination of both. Also complete this part for any additional information.

Return Reference	Explanation
PART I, COLUMN (B):	COL. B REPORTS THE NUMBER OF CONTRIBUTIONS. IN TOTAL, THERE WERE 169 CONTRIBUTIONS OF STOCK FROM 89 CONTRIBUTORS.
PART I, LINE 32B:	DONATIONS OF REAL PROPERTY ARE MADE THROUGH THE COMMUNITY REAL ESTATE AND PERSONAL PROPERTY FOUNDATION, INC. (A RELATED ORGANIZATION) THAT SELLS THE PROPERTY AND TRANSFERS THE CASH PROCEEDS TO THE COMMUNITY FOUNDATION FOR THE FOX VALLEY REGION, INC.

SCHEDULE O
(Form 990 or 990-EZ)**Supplemental Information to Form 990 or 990-EZ**

Complete to provide information for responses to specific questions on Form 990 or 990-EZ or to provide any additional information.

▶ Attach to Form 990 or 990-EZ.

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

OMB No. 1545-0047

2019**Open to Public Inspection**

Department of the Treasury

Name of the organization

COMMUNITY FOUNDATION FOR THE FOX VALLEY
REGION INC

Employer identification number

39-1548450

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART VI, SECTION A, LINE 2	KATHRYN SIEMAN AND CATHERINE TIERNEY HAVE A BUSINESS RELATIONSHIP.

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART VI, SECTION A, LINE 6	THE ORGANIZATION HAS 12 TO 22 MEMBERS. THE TERM OF EACH MEMBER SHALL BE THREE YEARS. AT EACH ANNUAL MEETING OF THE MEMBERS, THE MEMBERS ELECT ONE-THIRD OF THE MEMBERS. MEMBERS AFFIRM THE ELECTION OF THE BOARD OF DIRECTORS AND APPROVE SIGNIFICANT DECISIONS OF THE BOARD. MEMBERS DO NOT SHARE IN THE INCOME OF THE ORGANIZATION OR THE NET ASSETS UPON THE ORGANIZATION'S DISSOLUTION.

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART VI, SECTION A, LINE 7A	ELECTION OF THE BOARD OF DIRECTORS IS AFFIRMED BY VOTE OF A MAJORITY OF THE MEMBERS PRESENT AND VOTING.

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART VI, SECTION A, LINE 7B	MEMBERS APPROVE SIGNIFICANT DECISIONS OF THE BOARD OF DIRECTORS SUCH AS AMENDMENTS TO THE BYLAWS AND ARTICLES OF INCORPORATION.

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART VI, SECTION B, LINE 11B	THE CHAIRPERSON OF THE AUDIT AND BUDGET COMMITTEE/TREASURER AND THE CFO WILL REVIEW FOR REASONABLENESS AND APPROVE THE FILING OF THE FORM 990 AND THE WISCONSIN ANNUAL REPORT ON AN ANNUAL BASIS. THE ENTIRE AUDIT AND BUDGET COMMITTEE WILL REVIEW AND APPROVE FOR FILING ANNUALLY. THE FORM 990 IS DISTRIBUTED TO THE ENTIRE BOARD OF DIRECTORS PRIOR TO FILING.

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART VI, SECTION B, LINE 12C	ON AN ANNUAL BASIS, DIRECTORS AND EMPLOYEES ARE REQUIRED TO COMPLETE A CONFLICT OF INTEREST QUESTIONNAIRE DESCRIBING THEIR RELATIONSHIPS AND THEIR FAMILY RELATIONSHIPS WITH OTHER ENTITIES DOING BUSINESS WITH THE COMMUNITY FOUNDATION AND ALL RELATED ORGANIZATIONS. IF VOTES ARE TAKEN RELATING TO ANY OF THESE ENTITIES, BOARD MEMBERS WITH DISCLOSED RELATIONSHIPS ARE AUTOMATICALLY TREATED AS HAVING ABSTAINED FROM THE VOTING. A COMMUNITY FOUNDATION GRANTING COMMITTEE CAN NOT APPROVE A GRANT TO AN ORGANIZATION THAT EMPLOYS A FAMILY MEMBER OF ANYONE ON THE GRANTING COMMITTEE.

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART VI, SECTION B, LINE 15	THE EXECUTIVE COMMITTEE OF THE BOARD OF DIRECTORS IS RESPONSIBLE FOR REVIEWING THE PERFORMANCE OF THE PRESIDENT/CEO AND SETTING HIS/HER COMPENSATION ON AN ANNUAL BASIS. THE PRESIDENT/CEO IS RESPONSIBLE FOR REVIEWING PERFORMANCE AND SETTING COMPENSATION FOR THE OTHER OFFICERS OF THE FOUNDATION. THE EXECUTIVE COMMITTEE IS RESPONSIBLE FOR APPROVING THE TOTAL AMOUNT OF COMPENSATION FOR THE ENTIRE FOUNDATION STAFF TO BE INCLUDED IN THE ANNUAL BUDGET. THE COUNCIL ON FOUNDATIONS CONDUCTS AN ANNUAL SALARY SURVEY DEFINING SALARY RANGES FOR SPECIFIC STAFF POSITIONS. THE COMMUNITY FOUNDATION USES THIS DATA TO DETERMINE COMPENSATION FOR OFFICERS. THE GOAL OF THE FOUNDATION IS TO PAY AT MID-POINT OR ABOVE FOR COMPARABLE POSITIONS SO AS TO RETAIN TALENTED EMPLOYEES. THE EXECUTIVE COMMITTEE APPROVAL IS DOCUMENTED IN THEIR MINUTES AND THE TOTAL SALARY BUDGET IS APPROVED BY THE BOARD AS PART OF THE BUDGET APPROVAL PROCESS. THE CFO (WHO IS RESPONSIBLE FOR PAYROLL ADMINISTRATION) IS NOTIFIED OF THE NEW COMPENSATION FOR THE PRESIDENT/CEO DIRECTLY BY THE BOARD CHAIRPERSON EACH YEAR.

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART VI, SECTION C, LINE 19	REQUESTS FOR THE FOLLOWING DOCUMENTS CAN BE SENT TO: EXECUTIVE ASSISTANT COMMUNITY FOUNDATION FOR THE FOX VALLEY REGION, INC. 4455 W. LAWRENCE ST. APPLETON, WI 54914 -APPLICATION FOR RECOGNITION OF EXEMPTION UNDER SECTION 501(C)(3)(FORM 1023) -IRS DETERMINATION LETTER -ARTICLES AND BY-LAWS -CONFLICT OF INTEREST POLICY THE COMMUNITY FOUNDATION FOR THE FOX VALLEY REGION INC. (SUPPORTED ORGANIZATION) PUBLISHES ITS CONSOLIDATED AUDITED FINANCIAL STATEMENTS, ANNUAL REPORT AND COMPETITIVE GRANT GUIDELINES ON ITS WEBSITE AT WWW.CFFOXVALLEY.ORG.

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART XI, LINE 9:	GRANT RETURNS 90,043.

**SCHEDULE R
(Form 990)**

Related Organizations and Unrelated Partnerships

OMB No. 1545-0047

2019

**Open to Public
Inspection**

▶ **Complete if the organization answered "Yes" on Form 990, Part IV, line 33, 34, 35b, 36, or 37.**
▶ **Attach to Form 990.**
▶ **Go to www.irs.gov/Form990 for instructions and the latest information.**

Department of the Treasury
Internal Revenue Service

Name of the organization
COMMUNITY FOUNDATION FOR THE FOX VALLEY
REGION INC

Employer identification number

39-1548450

Part I Identification of Disregarded Entities. Complete if the organization answered "Yes" on Form 990, Part IV, line 33.

(a) Name, address, and EIN (if applicable) of disregarded entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Total income	(e) End-of-year assets	(f) Direct controlling entity

Part II Identification of Related Tax-Exempt Organizations. Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related tax-exempt organizations during the tax year.

See Additional Data Table

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501(c)(3))	(f) Direct controlling entity	(g) Section 512(b)(13) controlled entity?	
						Yes	No

Part III Identification of Related Organizations Taxable as a Partnership. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, because it had one or more related organizations treated as a partnership during the tax year.

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Predominant income(related, unrelated, excluded from tax under sections 512- 514)	(f) Share of total income	(g) Share of end-of-year assets	(h) Disproportionate allocations?		(i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner?		(k) Percentage ownership
							Yes	No		Yes	No	

Part IV Identification of Related Organizations Taxable as a Corporation or Trust. Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related organizations treated as a corporation or trust during the tax year.

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	(f) Share of total income	(g) Share of end-of- year assets	(h) Percentage ownership	(i) Section 512(b) (13) controlled entity?	
								Yes	No

Part V Transactions With Related Organizations. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, 35b, or 36.

Note. Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule.

		Yes	No
1 During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?			
a	Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity		No
b	Gift, grant, or capital contribution to related organization(s)	Yes	
c	Gift, grant, or capital contribution from related organization(s)	Yes	
d	Loans or loan guarantees to or for related organization(s)		No
e	Loans or loan guarantees by related organization(s)		No
f	Dividends from related organization(s)		No
g	Sale of assets to related organization(s)		No
h	Purchase of assets from related organization(s)		No
i	Exchange of assets with related organization(s)		No
j	Lease of facilities, equipment, or other assets to related organization(s)		No
k	Lease of facilities, equipment, or other assets from related organization(s)	Yes	
l	Performance of services or membership or fundraising solicitations for related organization(s)	Yes	
m	Performance of services or membership or fundraising solicitations by related organization(s)		No
n	Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)	Yes	
o	Sharing of paid employees with related organization(s)	Yes	
p	Reimbursement paid to related organization(s) for expenses		No
q	Reimbursement paid by related organization(s) for expenses	Yes	
r	Other transfer of cash or property to related organization(s)		No
s	Other transfer of cash or property from related organization(s)		No

2 If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thresholds.

(a) Name of related organization	(b) Transaction type (a-s)	(c) Amount involved	(d) Method of determining amount involved

Part VII **Supplemental Information**

Provide additional information for responses to questions on Schedule R. (see instructions).

Return Reference	Explanation

Additional Data

Software ID:

Software Version:

EIN: 39-1548450

Name: COMMUNITY FOUNDATION FOR THE FOX VALLEY
REGION INC

Form 990, Schedule R, Part II - Identification of Related Tax-Exempt Organizations

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501(c) (3))	(f) Direct controlling entity	(g) Section 512 (b)(13) controlled entity?	
						Yes	No
4455 W LAWRENCE ST APPLETON, WI 54914 39-1869271	SUPPORT THE ACTIVITIES OF THE COMMUNITY FOUNDATION FOR THE FOX VALLEY REGION	WI	501(C)(3)	12-1	CFFVR INC		No
4455 W LAWRENCE ST APPLETON, WI 54914 39-6074258	SUPPORT THE ACTIVITIES OF THE COMMUNITY FOUNDATION FOR THE FOX VALLEY REGION	WI	501(C)(3)	12-1	CFFVR INC		No
4455 W LAWRENCE ST APPLETON, WI 54914 82-0566250	SUPPORT THE ACTIVITIES OF THE COMMUNITY FOUNDATION FOR THE FOX VALLEY REGION	WI	501(C)(3)	12-1	CFFVR INC		No
122 E COLLEGE AVE SUITE 1-B APPLETON, WI 54911 39-1866090	SUPPORT THE ACTIVITIES OF THE COMMUNITY FOUNDATION FOR THE FOX VALLEY REGION	WI	501(C)(3)	12-1	CFFVR INC		No
4455 W LAWRENCE ST APPLETON, WI 54914 20-0875816	SUPPORT THE ACTIVITIES OF THE COMMUNITY FOUNDATION FOR THE FOX VALLEY REGION	WI	501(C)(3)	12-1	CFFVR INC		No
4455 W LAWRENCE ST APPLETON, WI 54914 39-1649245	SUPPORT THE ACTIVITIES OF THE COMMUNITY FOUNDATION FOR THE FOX VALLEY REGION	WI	501(C)(3)	12-1	CFFVR INC		No
4455 W LAWRENCE ST APPLETON, WI 54914 20-3096562	SUPPORT THE ACTIVITIES OF THE COMMUNITY FOUNDATION FOR THE FOX VALLEY REGION	WI	501(C)(3)	12-1	CFFVR INC		No
4455 W LAWRENCE ST APPLETON, WI 54914 20-3896774	SUPPORT THE ACTIVITIES OF THE COMMUNITY FOUNDATION FOR THE FOX VALLEY REGION	WI	501(C)(3)	12-1	CFFVR INC		No
4455 W LAWRENCE ST APPLETON, WI 54914 81-2176525	SUPPORT THE ACTIVITIES OF THE COMMUNITY FOUNDATION FOR THE FOX VALLEY REGION	WI	501(C)(3)	12-1	CFFVR INC		No