

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

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

OMB No. 1545-0052

2020





Open to Public Inspection



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

For calendar year 2020, or tax year beginning 01-01-2020 , and ending 12-31-2020

Name of foundation ENGELKE FAMILY FOUNDATION INC		A Employer identification number 46-1474140	
Number and street (or P.O. box number if mail is not delivered to street address) 450 SCIENCE DRIVE	Room/suite	B Telephone number (see instructions) (608) 238-5400	
City or town, state or province, country, and ZIP or foreign postal code MADISON, WI 537111166		C If exemption application is pending, check here <input type="checkbox"/>	
G Check all that apply: <input type="checkbox"/> Initial return <input type="checkbox"/> Initial return of a former public charity <input type="checkbox"/> Final return <input type="checkbox"/> Amended return <input type="checkbox"/> Address change <input type="checkbox"/> Name change		D 1. Foreign organizations, check here..... <input type="checkbox"/> 2. Foreign organizations meeting the 85% test, check here and attach computation ... <input type="checkbox"/>	
H Check type of organization: <input checked="" type="checkbox"/> Section 501(c)(3) exempt private foundation <input type="checkbox"/> Section 4947(a)(1) nonexempt charitable trust <input type="checkbox"/> Other taxable private foundation		E If private foundation status was terminated under section 507(b)(1)(A), check here <input type="checkbox"/>	
I Fair market value of all assets at end of year (from Part II, col. (c), line 16) ▶ \$ <u>59,301,169</u>		F If the foundation is in a 60-month termination under section 507(b)(1)(B), check here <input type="checkbox"/>	
J Accounting method: <input checked="" type="checkbox"/> Cash <input type="checkbox"/> Accrual <input type="checkbox"/> Other (specify) _____ (Part I, column (d) must be on cash basis.)			

Part I Analysis of Revenue and Expenses <small>(The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a) (see instructions).)</small>		(a) Revenue and expenses per books	(b) Net investment income	(c) Adjusted net income	(d) Disbursements for charitable purposes (cash basis only)
Revenue	1 Contributions, gifts, grants, etc., received (attach schedule)	20,000,000			
	2 Check <input type="checkbox"/> if the foundation is not required to attach Sch. B				
	3 Interest on savings and temporary cash investments				
	4 Dividends and interest from securities	866,341	819,830		
	5a Gross rents				
	b Net rental income or (loss)				
	6a Net gain or (loss) from sale of assets not on line 10	351,615			
	b Gross sales price for all assets on line 6a	11,698,400			
	7 Capital gain net income (from Part IV, line 2)		351,615		
	8 Net short-term capital gain				
	9 Income modifications				
	10a Gross sales less returns and allowances				
b Less: Cost of goods sold					
c Gross profit or (loss) (attach schedule)					
11 Other income (attach schedule)					
12 Total. Add lines 1 through 11	21,217,956	1,171,445			
Operating and Administrative Expenses	13 Compensation of officers, directors, trustees, etc.	0	0		0
	14 Other employee salaries and wages				
	15 Pension plans, employee benefits				
	16a Legal fees (attach schedule)				
	b Accounting fees (attach schedule)	825	825		0
	c Other professional fees (attach schedule)				
	17 Interest				
	18 Taxes (attach schedule) (see instructions)	33,742	0		0
	19 Depreciation (attach schedule) and depletion				
	20 Occupancy				
	21 Travel, conferences, and meetings				
	22 Printing and publications				
	23 Other expenses (attach schedule)	105	10		0
	24 Total operating and administrative expenses. Add lines 13 through 23	34,672	835		0
	25 Contributions, gifts, grants paid	1,671,700			1,671,700
26 Total expenses and disbursements. Add lines 24 and 25	1,706,372	835		1,671,700	
27 Subtract line 26 from line 12:					
a Excess of revenue over expenses and disbursements	19,511,584				
b Net investment income (if negative, enter -0-)		1,170,610			
c Adjusted net income (if negative, enter -0-)					

Part II Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only. (See instructions.)		Beginning of year	End of year	
		(a) Book Value	(b) Book Value	(c) Fair Market Value
Assets	1 Cash—non-interest-bearing			
	2 Savings and temporary cash investments	15,333,308	25,559,792	25,559,792
	3 Accounts receivable ▶ _____ Less: allowance for doubtful accounts ▶ _____			
	4 Pledges receivable ▶ _____ Less: allowance for doubtful accounts ▶ _____			
	5 Grants receivable			
	6 Receivables due from officers, directors, trustees, and other disqualified persons (attach schedule) (see instructions)			
	7 Other notes and loans receivable (attach schedule) ▶ _____ Less: allowance for doubtful accounts ▶ _____			
	8 Inventories for sale or use			
	9 Prepaid expenses and deferred charges			
	10a Investments—U.S. and state government obligations (attach schedule)	11,391,503 	22,900,940	22,900,940
	b Investments—corporate stock (attach schedule)	383,420 	739,401	739,401
	c Investments—corporate bonds (attach schedule)	11,529,736 	9,599,211	9,599,211
	11 Investments—land, buildings, and equipment: basis ▶ _____ Less: accumulated depreciation (attach schedule) ▶ _____			
	12 Investments—mortgage loans			
	13 Investments—other (attach schedule)	1,000,700 	501,825	501,825
	14 Land, buildings, and equipment: basis ▶ _____ Less: accumulated depreciation (attach schedule) ▶ _____			
15 Other assets (describe ▶ _____)				
16 Total assets (to be completed by all filers—see the instructions. Also, see page 1, item I)	39,638,667	59,301,169	59,301,169	
Liabilities	17 Accounts payable and accrued expenses			
	18 Grants payable			
	19 Deferred revenue			
	20 Loans from officers, directors, trustees, and other disqualified persons			
	21 Mortgages and other notes payable (attach schedule)			
	22 Other liabilities (describe ▶ _____)			
	23 Total liabilities (add lines 17 through 22)	0	0	
Net Assets or Fund Balances	Foundations that follow FASB ASC 958, check here ▶ <input type="checkbox"/> and complete lines 24, 25, 29 and 30.			
	24 Net assets without donor restrictions			
	25 Net assets with donor restrictions			
	Foundations that do not follow FASB ASC 958, check here ▶ <input checked="" type="checkbox"/> and complete lines 26 through 30.			
	26 Capital stock, trust principal, or current funds	0	0	
	27 Paid-in or capital surplus, or land, bldg., and equipment fund	0	0	
	28 Retained earnings, accumulated income, endowment, or other funds	39,638,667	59,301,169	
29 Total net assets or fund balances (see instructions)	39,638,667	59,301,169		
30 Total liabilities and net assets/fund balances (see instructions) .	39,638,667	59,301,169		

Part III Analysis of Changes in Net Assets or Fund Balances			
1 Total net assets or fund balances at beginning of year—Part II, column (a), line 29 (must agree with end-of-year figure reported on prior year's return)		1	39,638,667
2 Enter amount from Part I, line 27a		2	19,511,584
3 Other increases not included in line 2 (itemize) ▶ _____ 		3	212,818
4 Add lines 1, 2, and 3		4	59,363,069
5 Decreases not included in line 2 (itemize) ▶ _____ 		5	61,900
6 Total net assets or fund balances at end of year (line 4 minus line 5)—Part II, column (b), line 29 .		6	59,301,169

Part IV Capital Gains and Losses for Tax on Investment Income

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

(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale	(h) Gain or (loss) (e) plus (f) minus (g)
a 6,501,299		6,305,574	195,725
b 5,197,101		5,041,211	155,890
c			
d			
e			

Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69			(l) Gains (Col. (h) gain minus col. (k), but not less than -0-) or Losses (from col.(h))
(i) F.M.V. as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col. (i) over col. (j), if any	
a			195,725
b			155,890
c			
d			
e			

2 Capital gain net income or (net capital loss)	{	If gain, also enter in Part I, line 7 If (loss), enter -0- in Part I, line 7	}	2	351,615
3 Net short-term capital gain or (loss) as defined in sections 1222(5) and (6): If gain, also enter in Part I, line 8, column (c) (see instructions). If (loss), enter -0- in Part I, line 8				3	

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

SECTION 4940(e) REPEALED ON DECEMBER 20, 2019 - DO NOT COMPLETE

1 Reserved			
(a) Reserved	(b) Reserved	(c) Reserved	(d) Reserved
2 Reserved			2
3 Reserved			3
4 Reserved			4
5 Reserved			5
6 Reserved			6
7 Reserved			7
8 Reserved			8

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

Table with 11 rows for excise tax calculations. Includes fields for exempt foundations, tax under section 511, tax based on investment income, and credits/payments. Total tax due is 23,729.

Part VII-A Statements Regarding Activities

Table with 10 rows for activity statements. Columns include question number, Yes, and No. Questions cover political activities, tax on political expenditures, and asset requirements.

Part VII-A Statements Regarding Activities (continued)

11 At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of section 512(b)(13)? If "Yes," attach schedule. See instructions.
12 Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had advisory privileges? If "Yes," attach statement. See instructions
13 Did the foundation comply with the public inspection requirements for its annual returns and exemption application? Website address N/A
14 The books are in care of THE FOUNDATION Telephone no. (608) 238-5400
Located at 450 SCIENCE DRIVE MADISON WI ZIP+4 537111166
15 Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 -check here and enter the amount of tax-exempt interest received or accrued during the year. 15
16 At any time during calendar year 2020, did the foundation have an interest in or a signature or other authority over a bank, securities, or other financial account in a foreign country? See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes", enter the name of the foreign country

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

File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.
1a During the year did the foundation (either directly or indirectly):
(1) Engage in the sale or exchange, or leasing of property with a disqualified person?
(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person?
(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?
(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?
(5) Transfer any income or assets to a disqualified person (or make any of either available for the benefit or use of a disqualified person)?
(6) Agree to pay money or property to a government official? (Exception. Check "No" if the foundation agreed to make a grant to or to employ the official for a period after termination of government service, if terminating within 90 days.)
b If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations section 53.4941(d)-3 or in a current notice regarding disaster assistance? See instructions. Organizations relying on a current notice regarding disaster assistance check here.
c Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected before the first day of the tax year beginning in 2020?
2 Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation defined in section 4942(j)(3) or 4942(j)(5)):
a At the end of tax year 2020, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning before 2020? If "Yes," list the years 20, 20, 20, 20
b Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2) (relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer "No" and attach statement-see instructions.)
c If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here. 20, 20, 20, 20
3a Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year?
b If "Yes," did it have excess business holdings in 2020 as a result of (1) any purchase by the foundation or disqualified persons after May 26, 1969; (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest; or (3) the lapse of the 10-, 15-, or 20-year first phase holding period?(Use Schedule C, Form 4720, to determine if the foundation had excess business holdings in 2020.)
4a Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?
b Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2020?

Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors (continued)

3 Five highest-paid independent contractors for professional services (see instructions). If none, enter "NONE".		
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE		
Total number of others receiving over \$50,000 for professional services. ▶		0

Part IX-A Summary of Direct Charitable Activities

List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of organizations and other beneficiaries served, conferences convened, research papers produced, etc.	Expenses
1	
2	
3	
4	

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

Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2.	Amount
1	
2	
All other program-related investments. See instructions.	
3	
Total. Add lines 1 through 3 ▶	0

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

1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes:		
a	Average monthly fair market value of securities.	1a	29,948,431
b	Average of monthly cash balances.	1b	10,163,180
c	Fair market value of all other assets (see instructions).	1c	0
d	Total (add lines 1a, b, and c).	1d	40,111,611
e	Reduction claimed for blockage or other factors reported on lines 1a and 1c (attach detailed explanation).	1e	0
2	Acquisition indebtedness applicable to line 1 assets.	2	0
3	Subtract line 2 from line 1d.	3	40,111,611
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions).	4	601,674
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	39,509,937
6	Minimum investment return. Enter 5% of line 5.	6	1,975,497

Part XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations and certain foreign organizations check here and do not complete this part.)

1	Minimum investment return from Part X, line 6.	1	1,975,497
2a	Tax on investment income for 2020 from Part VI, line 5.	2a	16,271
b	Income tax for 2020. (This does not include the tax from Part VI.).	2b	
c	Add lines 2a and 2b.	2c	16,271
3	Distributable amount before adjustments. Subtract line 2c from line 1.	3	1,959,226
4	Recoveries of amounts treated as qualifying distributions.	4	0
5	Add lines 3 and 4.	5	1,959,226
6	Deduction from distributable amount (see instructions).	6	0
7	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1.	7	1,959,226

Part XII Qualifying Distributions (see instructions)

1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:		
a	Expenses, contributions, gifts, etc.—total from Part I, column (d), line 26.	1a	1,671,700
b	Program-related investments—total from Part IX-B.	1b	0
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes.	2	
3	Amounts set aside for specific charitable projects that satisfy the:		
a	Suitability test (prior IRS approval required).	3a	
b	Cash distribution test (attach the required schedule).	3b	
4	Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4	4	1,671,700
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income. Enter 1% of Part I, line 27b. See instructions.	5	0
6	Adjusted qualifying distributions. Subtract line 5 from line 4.	6	1,671,700

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

Part XIII Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2019	(c) 2019	(d) 2020
1 Distributable amount for 2020 from Part XI, line 7				1,959,226
2 Undistributed income, if any, as of the end of 2020:				
a Enter amount for 2019 only.			1,670,781	
b Total for prior years: 20___, 20___, 20___		0		
3 Excess distributions carryover, if any, to 2020:				
a From 2015.				
b From 2016.				
c From 2017.				
d From 2018.				
e From 2019.				
f Total of lines 3a through e.	0			
4 Qualifying distributions for 2020 from Part XII, line 4: ▶ \$ <u>1,671,700</u>				
a Applied to 2019, but not more than line 2a			1,670,781	
b Applied to undistributed income of prior years (Election required—see instructions).		0		
c Treated as distributions out of corpus (Election required—see instructions).	0			
d Applied to 2020 distributable amount.				919
e Remaining amount distributed out of corpus	0			
5 Excess distributions carryover applied to 2020. (If an amount appears in column (d), the same amount must be shown in column (a).)	0			0
6 Enter the net total of each column as indicated below:				
a Corpus. Add lines 3f, 4c, and 4e. Subtract line 5	0			
b Prior years' undistributed income. Subtract line 4b from line 2b		0		
c Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed.			0	
d Subtract line 6c from line 6b. Taxable amount—see instructions		0		
e Undistributed income for 2019. Subtract line 4a from line 2a. Taxable amount—see instructions			0	
f Undistributed income for 2021. Subtract lines 4d and 5 from line 1. This amount must be distributed in 2020				1,958,307
7 Amounts treated as distributions out of corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3) (Election may be required - see instructions).	0			
8 Excess distributions carryover from 2015 not applied on line 5 or line 7 (see instructions).	0			
9 Excess distributions carryover to 2021. Subtract lines 7 and 8 from line 6a	0			
10 Analysis of line 9:				
a Excess from 2016.				
b Excess from 2017.				
c Excess from 2018.				
d Excess from 2019.				
e Excess from 2020.				

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

1a If the foundation has received a ruling or determination letter that it is a private operating foundation, and the ruling is effective for 2020, enter the date of the ruling. ▶

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

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

	Tax year	Prior 3 years			(e) Total
	(a) 2020	(b) 2019	(c) 2018	(d) 2017	
b 85% of line 2a					
c Qualifying distributions from Part XII, line 4 for each year listed					
d Amounts included in line 2c not used directly for active conduct of exempt activities					
e Qualifying distributions made directly for active conduct of exempt activities. Subtract line 2d from line 2c					
3 Complete 3a, b, or c for the alternative test relied upon:					
a "Assets" alternative test—enter:					
(1) Value of all assets					
(2) Value of assets qualifying under section 4942(j)(3)(B)(i)					
b "Endowment" alternative test— enter 2/3 of minimum investment return shown in Part X, line 6 for each year listed.					
c "Support" alternative test—enter:					
(1) Total support other than gross investment income (interest, dividends, rents, payments on securities loans (section 512(a)(5)), or royalties)					
(2) Support from general public and 5 or more exempt organizations as provided in section 4942(j)(3)(B)(iii).					
(3) Largest amount of support from an exempt organization					
(4) Gross investment income					

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

1 Information Regarding Foundation Managers:

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

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

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

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

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

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

c Any submission deadlines:

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

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

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i> See Additional Data Table				
Total ▶ 3a				1,671,700
b <i>Approved for future payment</i>				
Total ▶ 3b				0

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

ROBERT M ENGELKE

SUSAN L ENGELKE

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

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
ACTION AGAINST HUNGER ONE WHITEHALL STREET 2ND FL NEW YORK, NY 10004		PC	COMMUNITY SUPPORT	1,000
AGRACE HOSPICECARE 5395 E CHERYL PKWY FITCHBURG, WI 53711		PC	HUMAN SERVICES	1,000
AMERICAN FAMILY CHILDREN'S HOSPITAL 1675 HIGHLAND AVE MADISON, WI 53792		PC	HUMAN SERVICES	2,000
Total ▶ 3a				1,671,700

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

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
AMERICAN RED CROSS 4860 SHEBOYGAN AVE MADISON, WI 53705		PC	COMMUNITY SUPPORT	10,000
ASPCA2014 E 87TH ST CHICAGO, IL 60617		PC	COMMUNITY SUPPORT	500
BADGER BOYS STATE INCPO BOX 388 PORTAGE, WI 53901		PC	EDUCATIONAL SUPPORT	1,200
Total ▶ 3a				1,671,700

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

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
CARE151 ELLIS ST ATLANTA, GA 30303				
THE CARTER CENTER INC ONE COPENHILL 453 FREEDOM PKWY ATLANTA, GA 30307				
CHILDREN'S HOSPITAL OF WISCONSIN- MILWAUKEE CAMPUS 8915 W CONNELL CT MILWAUKEE, WI 53226				
Total	▶ 3a			1,671,700

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

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
COTA - CHILDREN'S ORGAN TRANSPLANT ASSOCIATION 2501 W COTA DR BLOOMINGTON, IN 47403		PC	HUMAN SERVICES	1,000
DOCTORS WITHOUT BORDERS 40 RECTOR ST 16TH FL NEW YORK, NY 10006		PC	HUMAN SERVICES	1,000
FEEDING AMERICAFEEDING WISCONSIN INC 2802 DAIRY DR MADISON, WI 53718		PC	COMMUNITY SUPPORT	1,000
Total	▶ 3a			1,671,700

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

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
FOOD FOR THOUGHT THEA'S TABLE PO BOX 1405 MADISON, WI 53701		PC	COMMUNITY SUPPORT	9,000
GALLAUDET UNIVERSITY 800 FLORIDA AVENUE NE WASHINGTON, DC 20002		PC	EDUCATIONAL SUPPORT	50,000
GILDA'S CLUB 7907 UW HEALTH CT MIDDLETON, WI 53562		PC	HUMAN SERVICES	1,000
Total ▶ 3a				1,671,700

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

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
HABITAT FOR HUMANITY 3101 LATHAM DR MADISON, WI 53713		PC	COMMUNITY SUPPORT	2,000
HELEN KELLER SERVICES FOR THE BLIND 180 LIVINGSTON ST BROOKLYN, NY 11201		PC	HUMAN SERVICES	20,000
HENRY VILAS ZOO702 S RANDALL AVE MADISON, WI 53715		PC	COMMUNITY SUPPORT	1,000
Total ▶ 3a				1,671,700

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

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
HLAA - HEARING LOSS ASSOCIATION OF AMERICA 6116 EXECUTIVE BLVD STE 320 ROCKVILLE, MD 20852		PC	HUMAN SERVICES	50,000
IRC - INTERNATIONAL RESCUE COMMITTEE PO BOX 6068 ALBERT LEA, MN 56007		PC	HUMAN SERVICES	1,000
KEEP WISCONSIN WARMCOOL FUND PO BOX 68 MADISON, WI 53701		PC	HUMAN SERVICES	2,000
Total ▶ 3a				1,671,700

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

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
MAKE A WISH FOUNDATION 1702 EAST HIGHLAND AVE SUITE 400 PHOENIX, AZ 85016		PC	HUMAN SERVICES	500
MAP INTERNATIONAL 4700 GLYNCO PKWY BRUNSWICK, GA 31525		PC	HUMAN SERVICES	10,000
MARCH OF DIMESPO BOX 18819 ATLANTA, GA 31126		PC	COMMUNITY SUPPORT	1,000
Total			▶ 3a	1,671,700

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

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
MIDVALE LINCOLN SCHOOL 502 CAROMAR DR MADISON, WI 53711		GOV	EDUCATIONAL SUPPORT	140,000
MSK CANCER CTR (MEMORIAL SLOAN KETTERING) 1275 YORK AVE NEW YORK, NY 10065		PC	COMMUNITY SUPPORT	2,000
NARAL1725 EYE STREET NW STE 900 WASHINGTON, DC 20006		PC	HUMAN SERVICES	1,000
Total ▶ 3a				1,671,700

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

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
OXFAM226 CAUSEWAY ST 5TH FL BOSTON, MA 02114		PC	HUMAN SERVICES	1,000
PBS WISCONSIN821 UNIVERSITY AVE MADISON, WI 53706		PC	EDUCATIONAL SUPPORT	1,000
PENINSULA PLAYERS THEATER 4351 PENINSULA PLAYERS RD FISH CREEK, WI 54212		PC	EDUCATIONAL SUPPORT	1,000
Total ▶ 3a				1,671,700

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

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
PROJECT HOPE 2131 WOODRUFF RD STE 2100 GREENVILLE, SC 29607		PC	HUMAN SERVICES	2,000
RMHC - RONALD MCDONALD HOUSE CHARITIES OF MADISON 2716 MARSHALL CT MADISON, WI 53705		PC	HUMAN SERVICES	2,000
RUBIN FOR KIDSPO BOX 1405 MADISON, WI 53701		PC	COMMUNITY SUPPORT	10,000
Total ▶ 3a				1,671,700

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

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
SAFE HARBOR CHILDREN'S ALLIANCE 2445 DARWIN RD MADISON, WI 53704		PC	COMMUNITY SUPPORT	10,000
SALVATION ARMY615 SLATERS LN ALEXANDRIA, VA 22314		PC	COMMUNITY SUPPORT	2,000
SECOND HARVEST OF MADISON 2802 DAIRY DR MADISON, WI 53718		PC	COMMUNITY SUPPORT	105,000
Total ▶ 3a				1,671,700

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

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
SHRINERS HOSPITAL 2900 ROCKY POINT DR TAMPA, FL 33607		PC	HUMAN SERVICES	1,000
ST JUDE CHILDREN'S RESEARCH HOSPITAL 501 ST JUDE PL MEMPHIS, TN 38105		PC	HUMAN SERVICES	5,000
THOREAU ELEMENTARY SCHOOL 3870 NAKOMA RD MADISON, WI 53711		GOV	EDUCATIONAL SUPPORT	120,000
Total ▶ 3a				1,671,700

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

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
TOYS FOR TOTS 18251 QUANTICO GATEWAY DR TRIANGLE, VA 22172		PC	HUMAN SERVICES	2,000
UNICEF125 MAIDEN LN 11TH FL NYC, NY 10038		PC	HUMAN SERVICES	30,000
URBAN LEAGUE OF GREATER MADISON INC 2222 S PARK ST MADISON, WI 53713		PC	EDUCATIONAL SUPPORT	1,000
Total ▶ 3a				1,671,700

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

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
UNIVERSITY OF WISCONSIN ARBORETUM 2880 LONGENECKER DR MADISON, WI 53713		PC	COMMUNITY SUPPORT	1,000
WISCONSIN PUBLIC RADIO PO BOX 88025 MILWAUKEE, WI 53288		PC	EDUCATIONAL SUPPORT	1,000
Total ▶ 3a				1,671,700

TY 2020 Accounting Fees Schedule**Name:** ENGELKE FAMILY FOUNDATION INC**EIN:** 46-1474140

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
ACCOUNTING FEES	825	825		0

TY 2020 Investments Corporate Bonds Schedule**Name:** ENGELKE FAMILY FOUNDATION INC**EIN:** 46-1474140**Investments Corporate Bonds Schedule**

Name of Bond	End of Year Book Value	End of Year Fair Market Value
38141GGQ1	20,562	20,562
38376AAB9	102,214	102,214
25472CCJ6	99,609	99,609
06747N4W1	167,985	167,985
36966TAC6	27,393	27,393
87265KAF9	79,376	79,376
343412AC6	208,388	208,388
81618TAC4	168,464	168,464
67401PAB4	51,775	51,775
04010LAV5	29,268	29,268
76131VAA1	176,125	176,125
69121KAB0	261,040	261,040
26884UAB5	87,256	87,256
189754AA2	107,283	107,283
919794AC1	110,000	110,000
302635AG2	149,070	149,070
436106AA6	111,670	111,670
10948WAA1	95,464	95,464
26969PAA6	103,879	103,879
49803XAA1	157,259	157,259

Investments Corporate Bonds Schedule

Name of Bond	End of Year Book Value	End of Year Fair Market Value
44106MBA9	98,750	98,750
03349MAD7	89,336	89,336
747262AY9	107,250	107,250
44106MAW2	100,500	100,500
292480AK6	252,278	252,278
655664AS9	99,115	99,115
875484AK3	52,342	52,342
37046ADQ5	100,001	100,001
172967KA8	59,107	59,107
95000N3F4	96,150	96,150
06744CT50	94,200	94,200
703481AB7	230,785	230,785
124857AT0	56,220	56,220
06744CYW5	17,756	17,756
61760QLA0	98,000	98,000
37046ABK0	28,997	28,997
17298CG77	78,104	78,104
17298CG69	28,553	28,553
85205TAK6	148,313	148,313
34540TTA0	19,885	19,885

Investments Corporate Bonds Schedule

Name of Bond	End of Year Book Value	End of Year Fair Market Value
37046ABZ7	100,032	100,032
343412AF9	299,259	299,259
36966TJP8	25,974	25,974
78014RAT7	160,581	160,581
95001D3P3	250,103	250,103
26884UAF6	413,484	413,484
34540TVD1	246,983	246,983
682680AY9	107,021	107,021
292480AM2	447,487	447,487
681936BL3	132,648	132,648
703481AC5	45,787	45,787
637071AM3	261,425	261,425
48128GQ29	150,893	150,893
30212PAR6	104,074	104,074
26054LS61	98,213	98,213
06048W WJ5	100,217	100,217
67457MAC2	50,286	50,286
25472CBJ7	36,403	36,403
36966TFU1	79,887	79,887
38141EK24	93,290	93,290

Investments Corporate Bonds Schedule

Name of Bond	End of Year Book Value	End of Year Fair Market Value
500255AN4	148,428	148,428
06048WVY3	100,091	100,091
36966TJH6	15,907	15,907
38143CEM9	40,282	40,282
38143CEV9	40,994	40,994
95001D3X6	152,270	152,270
47233JBV9	242,495	242,495
075896AB6	44,496	44,496
85590AAR5	47,981	47,981
95001D5J5	257,752	257,752
55616XAM9	153,676	153,676
29273RBE8	132,115	132,115
36966TKT8	15,533	15,533
959802AH2	63,532	63,532
92346MAN1	50,017	50,017
47233JBZ0	160,693	160,693
38141EE47	11,845	11,845
06048WVG2	75,518	75,518
38143CBA8	43,101	43,101
17298CGW2	155,524	155,524

Investments Corporate Bonds Schedule

Name of Bond	End of Year Book Value	End of Year Fair Market Value
47233JCX4	98,226	98,226
00206RDQ2	59,195	59,195
26441CAX3	56,393	56,393
172967KU4	59,378	59,378

TY 2020 Investments Corporate Stock Schedule**Name:** ENGELKE FAMILY FOUNDATION INC**EIN:** 46-1474140**Investments Corporation Stock Schedule**

Name of Stock	End of Year Book Value	End of Year Fair Market Value
ALLPRI	55,161	55,161
ACGLP	51,920	51,920
TBB	55,240	55,240
COFPRI	79,770	79,770
DSL	99,480	99,480
JPMPRJ	55,420	55,420
KIMPRM	79,830	79,830
MSPRL	53,260	53,260
NTRSO	55,560	55,560
PSBPRZ	54,780	54,780
PSAPRK	56,680	56,680
PIM	42,300	42,300

TY 2020 Investments Government Obligations Schedule**Name:** ENGELKE FAMILY FOUNDATION INC**EIN:** 46-1474140**US Government Securities - End
of Year Book Value:**

15,992,391

**US Government Securities - End
of Year Fair Market Value:**

15,992,391

**State & Local Government
Securities - End of Year Book
Value:**

6,908,549

**State & Local Government
Securities - End of Year Fair
Market Value:**

6,908,549

TY 2020 Investments - Other Schedule**Name:** ENGELKE FAMILY FOUNDATION INC**EIN:** 46-1474140**Investments Other Schedule 2**

Category/ Item	Listed at Cost or FMV	Book Value	End of Year Fair Market Value
949495BA2 (CD)	FMV	501,825	501,825

TY 2020 Other Decreases Schedule**Name:** ENGELKE FAMILY FOUNDATION INC**EIN:** 46-1474140

Description	Amount
TIMING DIFFERENCES	15,389
PURCHASED ACCRUED BOND INTEREST	46,511

TY 2020 Other Expenses Schedule**Name:** ENGELKE FAMILY FOUNDATION INC**EIN:** 46-1474140**Other Expenses Schedule**

Description	Revenue and Expenses per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
OFFICE EXPENSE	95	0		0
WI DEPARTMENT OF FINANCIAL INSTITUTIONS ANNUAL FILING FEE	10	10		0

TY 2020 Other Increases Schedule**Name:** ENGELKE FAMILY FOUNDATION INC**EIN:** 46-1474140**Other Increases Schedule**

Description	Amount
CHANGE IN UNREALIZED GAINS	211,043
CREDIT CARD REBATES	1,775

TY 2020 Taxes Schedule**Name:** ENGELKE FAMILY FOUNDATION INC**EIN:** 46-1474140**Taxes Schedule**

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
DEPARTMENT OF TREASURY EXCISE TAX 2019	12,742	0		0
DEPARTMENT OF TREASURY EXCISE TAX 2020	21,000	0		0

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

Schedule of Contributors
▶ Attach to Form 990, 990-EZ, or 990-PF.
▶ Go to www.irs.gov/Form990 for the latest information.

OMB No. 1545-0047
2020

Name of the organization
ENGELKE FAMILY FOUNDATION INC

Employer identification number
46-1474140

Organization type (check one):

Filers of:

Section:

Form 990 or 990-EZ

501(c)() (enter number) organization

4947(a)(1) nonexempt charitable trust **not** treated as a private foundation

527 political organization

Form 990-PF

501(c)(3) exempt private foundation

4947(a)(1) nonexempt charitable trust treated as a private foundation

501(c)(3) taxable private foundation

Check if your organization is covered by the **General Rule** or a **Special Rule**.

Note: Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions.

General Rule

For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or other property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions.

Special Rules

For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33¹/₃% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of (1) \$5,000 or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1. Complete Parts I and II.

For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 *exclusively* for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I, II, and III.

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

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

Name of organization
 ENGELKE FAMILY FOUNDATION INC

Employer identification number
 46-1474140

Part I
Contributors (see instructions). Use duplicate copies of Part I if additional space is needed.

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	ROBERT M ENGELKE 450 SCIENCE DRIVE <hr/> MADISON, WI 53711	<hr/> \$ 10,000,000	<input checked="" type="checkbox"/> Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash (Complete Part II for noncash contributions.)
2	SUSAN L ENGELKE 450 SCIENCE DRIVE <hr/> MADISON, WI 53711	<hr/> \$ 10,000,000	<input checked="" type="checkbox"/> Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash (Complete Part II for noncash contributions.)
	<hr/> <hr/>	<hr/> \$	<input type="checkbox"/> Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash (Complete Part II for noncash contributions.)
	<hr/> <hr/>	<hr/> \$	<input type="checkbox"/> Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash (Complete Part II for noncash contributions.)
	<hr/> <hr/>	<hr/> \$	<input type="checkbox"/> Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash (Complete Part II for noncash contributions.)
	<hr/> <hr/>	<hr/> \$	<input type="checkbox"/> Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash (Complete Part II for noncash contributions.)

Name of organization ENGELKE FAMILY FOUNDATION INC	Employer identification number 46-1474140
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Part II Noncash Property			
(a) No. from Part I	(b) Description of noncash property given <small>(see instructions). Use duplicate copies of Part II if additional space is needed.</small>	(c) FMV (or estimate) (See instructions)	(d) Date received
-	_____ _____ _____	_____ \$	_____
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
-	_____ _____ _____	_____ \$	_____
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
-	_____ _____ _____	_____ \$	_____
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
-	_____ _____ _____	_____ \$	_____
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
-	_____ _____ _____	_____ \$	_____
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
-	_____ _____ _____	_____ \$	_____
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
-	_____ _____ _____	_____ \$	_____

Name of organization
 ENGELKE FAMILY FOUNDATION INC

Employer identification number
 46-1474140

Part III Exclusively religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8), or (10) that total more than \$1,000 for the year from any one contributor. Complete columns (a) through (e) and the following line entry. For organizations completing Part III, enter the total of exclusively religious, charitable, etc., contributions of \$1,000 or less for the year. (Enter this information once. See instructions.) ▶ \$ _____
 Use duplicate copies of Part III if additional space is needed.

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
	_____ _____	_____ _____	_____ _____
(e) Transfer of gift			
Transferee's name, address, and ZIP 4		Relationship of transferor to transferee	
_____ _____		_____ _____	

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
	_____ _____	_____ _____	_____ _____
(e) Transfer of gift			
Transferee's name, address, and ZIP 4		Relationship of transferor to transferee	
_____ _____		_____ _____	

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
	_____ _____	_____ _____	_____ _____
(e) Transfer of gift			
Transferee's name, address, and ZIP 4		Relationship of transferor to transferee	
_____ _____		_____ _____	

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
	_____ _____	_____ _____	_____ _____
(e) Transfer of gift			
Transferee's name, address, and ZIP 4		Relationship of transferor to transferee	
_____ _____		_____ _____	