Form 990-PF

Return of Private Foundation

OMB No. 1545-0047

or Section 4947(a)(1) Trust Treated as Private Foundation Do not enter social security numbers on this form as it may be made public. Department of the Treasury Internal Revenue Service ▶ Go to www.irs.gov/Form990PF for instructions and the latest information. For calendar year 2019 or tax year beginning and ending Name of foundation A Employer identification number ANN & LEO STOLL JR. CHARITABLE TRUST 46-6582858 Number and street (or P.O. box number if mail is not delivered to street address) Room/suite B Telephone number 25 E. PINE STREET 6083482685 City or town, state or province, country, and ZIP or foreign postal code C If exemption application is pending, check here PLATTEVILLE, WI 53818 G Check all that apply: Initial return Initial return of a former public charity D 1. Foreign organizations, check here Final return Amended return Foreign organizations meeting the 85% test, check here and attach computation Address change Name change X Section 501(c)(3) exempt private foundation H Check type of organization: E If private foundation status was terminated Section 4947(a)(1) nonexempt charitable trust _____ Other taxable private foundation under section 507(b)(1)(A), check here I Fair market value of all assets at end of year | J Accounting method: | X Cash Accrual F If the foundation is in a 60-month termination (from Part II, col. (c), line 16) Other (specify) under section 507(b)(1)(B), check here 563, 476. (Part I, column (d), must be on cash basis.) **S** Part | Analysis of Revenue and Expenses (a) Revenue and (b) Net investment (d) Disbursements (c) Adjusted net (The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a).) for charitable purposes (cash basis only) expenses per books income income 1 Contributions, gifts, grants, etc., received N/A 2 Check X if the foundation is not required to attach Sch. B Interest on savings and temporary cash investments 4 Dividends and interest from securities 14,362. 12,707. STATEMENT 5a Gross rents b Net rental income or (loss) -13,407.6a Net gain or (loss) from sale of assets not on line 10 STATEMENT Gross sales price for all 116,740. b assets on line 6a Capital gain net income (from Part IV, line 2) 1.467. Net short-term capital gain Income modifications 10a Gross sales less returns and allowances b Less: Cost of goods sold c Gross profit or (loss) 11 Other income 12 Total. Add lines 1 through 11 955. 14,174. 13 4.957. 4.957. Compensation of officers, directors, trustees, etc. 0. 14 Other employee salaries and wages 15 Pension plans, employee benefits Expenses 16a Legal fees b Accounting fees STMT 3 796. 0. 0. c Other professional fees 17 Interest 18 Taxes STMT 4 573. 0. 0.

Part	Balance Sheets Attached schedules and amounts in the description	Beginning of year	End of y	/ear
1 411	column should be for end-of-year amounts only.	(a) Book Value	(b) Book Value	(c) Fair Market Value
1	Cash - non-interest-bearing	15,270.	12,235.	12,235.
2		3,388.	7,358.	7,358.
3	Accounts receivable >			
	Less: allowance for doubtful accounts ▶			
4	Pledges receivable ►			
	Less: allowance for doubtful accounts ▶			
5	Grants receivable			
6				
	disqualified persons			
7				
	Less: allowance for doubtful accounts ▶			
\$ 8	Inventories for sale or use			
Assets	Prepaid expenses and deferred charges			
10	a Investments - U.S. and state government obligations			
	b Investments - corporate stock			
	c Investments - corporate bonds			
11	Investments - land, buildings, and equipment; basis			
1	Less: accumulated depreciation			
12				
13	Investments - other STMT 5	556,500.	524,194.	543,883.
14	3-,			
	Less: accumulated depreciation			
15				
16	Total assets (to be completed by all filers - see the			
-	instructions. Also, see page 1, item I)	575,158.	543,787.	563,476.
1000	Accounts payable and accrued expenses			
18				
Liabilities 02 02 12 02 03				
# 20				
E 21				
22	Other liabilities (describe)			
23	Total liabilities (add lines 17 through 22)	0.	0.	
- 20	Total liabilities (add lines 17 through 22) Foundations that follow FASB ASC 958, check here	0.	0.	
S	and complete lines 24, 25, 29, and 30.			
Seo 24	Net assets without donor restrictions			
e 25	7000-07000-07000-070-070-070-070-070-07			
g B	Foundations that do not follow FASB ASC 958, check here			
E	and complete lines 26 through 30.			
b 26	Capital stock, trust principal, or current funds	0.	0.	
S 27	Paid-in or capital surplus, or land, bldg., and equipment fund	0.	0.	
85 28	Retained earnings, accumulated income, endowment, or other funds	575,158.	543,787.	
Net Assets or Fund Balance 52 22 28 29 29 29 29 29 29 29 29 29 29 29 29 29	Total net assets or fund balances	575,158.	543,787.	
Z				
30	Total liabilities and net assets/fund balances	575,158.	543,787.	
Part	Analysis of Changes in Net Assets or Fund Ba	lances		
4 Tet	Next reports on final hologopa at havinging of year. Part II, column (a) line (0		
	al net assets or fund balances at beginning of year - Part II, column (a), line 2 est agree with end-of-year figure reported on prior year's return)			E7E 1E0
				575,158.
	er amount from Part I, line 27a er increases not included in line 2 (itemize)		2	-31,371.
4 Adr				<u>0.</u> 543,787.
	l lines 1, 2, and 3 reases not included in line 2 (itemize) ▶		5	0.
	al net assets or fund balances at end of year (line 4 minus line 5) - Part II, col	umn (b), line 29		543,787.
	and a series of the series of	10/1 20		Form 990-PF (2019)

	- aprilar diamie	THE ECOSES FOR THE OFF IT	ive stiller	it income				
	(a) List and describe to 2-story brick wa	he kind(s) of property sold (for example sold), rehouse; or common stock, 200 sha	mple, real est s. MLC Co.)	ate,	(b) How acqu P - Purcha D - Donatio	se (c) Date acquired (mo., day, yr.)	(d) Date sold (mo., day, yr.)
1a INVESCO OPN SR FLT RT C P			711		10/30/19			
	VESCO OPN ML				P			07/26/19
	D ADVS CORP 1				P			07/26/19
d PR	IN GLB DVR II	NC C						12/11/19
e CA	PITAL GAINS I	DIVIDENDS						12/11/19
	e) Gross sales price	(f) Depreciation allowed (or allowable)		est or other basis expense of sale			(h) Gain or (loss	
a	13,210.			14,56	7		((e) pide (i) illinde	1077
b	28,850.			38,91				-1,357.
С	52,232.			51,24				-10,068.
d	9,980.							987.
e	12,468.			10,54	3.			-563.
		g gain in column (h) and owned by t	the foundation	000 10/01/00		and the same		12,468.
		(j) Adjusted basis		xcess of col. (i)		(I) (Gains (Col. (h) gain k), but not less tha	minus
(i)	FMV as of 12/31/69	as of 12/31/69		r col. (j), if any		0011 (Losses (from col. (h))
<u>a</u>	and the second second second							-1,357.
_b								-10,068.
С								987.
_d								-563.
_ e								12,468.
2 Capita	al gain net income or (net cap	lf gain, also enter If (loss), enter -0-	in Part I, line	7	} 2			1,467.
If gair	n, also enter in Part I, line 8, o s), enter -0- in Part I, line 8 .	s) as defined in sections 1222(5) an column (c).	02. 52	·	} 3		N/A	
If "Yes," th	ne foundation doesn't qualify	on 4942 tax on the distributable am under section 4940(e). Do not com	plete this par	t.		***********		Yes X No
1 Enter		ach column for each year; see the in	structions be	fore making any en	tries.			
Calend	(a) Base period years ar year (or tax year beginnin	g in) Adjusted qualifying dist	ributions	Net value of non	(c) charitable-use	assets	Distrib (col. (b) div	(d) ution ratio ided by col. (c))
	2018	1	6,500.	and the same of th	544	,304.		.030314
	2017	2	0,000.			675.		.035356
	2016	4	5,334.		569	,805.		.079561
	2015	4:	1,299.		598	,916.		.068956
	2014	2	4,051.		655	798.		.036674
	of line 1, column (d)				******		2	.250861
	ge distribution ratio for the 5	year base period - divide the total o	n line 2 by 5.	0, or by the number	r of years			
the for	undation has been in existen	ce if less than 5 years		***************************************		ini	3	.050172
4 Enter t	the net value of noncharitable	e-use assets for 2019 from Part X, li	ne 5				4	549,280.
								0.750000
*							5	27,558.
6 Enter	1% of net investment income	(1% of Part I, line 27b)		***************************************			6	92.
7 Add lir	nes 5 and 6			K+FF12++>+F++++++++++++++++++++++++++++++			7	27,650.
		Part XII, line 4					8	26,000.
If line I See th	8 is equal to or greater than I e Part VI instructions.	ine 7, check the box in Part VI, line	1b, and comp	lete that part using	a 1% tax rate	i s		
	-17-19						_	orm 990-PF (2019)

	art VI Excise Tax Based on Investment Income (Section 4940(a), 4940		46-658	2858		Page 4
-			1948 - See	instru	ictio	ns)
18	a Exempt operating foundations described in section 4940(d)(2), check here and enter "N/A" on					
	Date of ruling or determination letter: (attach copy of letter if necessary-see i					
	b Domestic foundations that meet the section 4940(e) requirements in Part V, check here and e of Part I, line 27b		1		1	84.
,	of Part I, line 27b c All other domestic foundations enter 2% of line 27b. Exempt foreign organizations, enter 4% of Part I, lin	- 101 //->				
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only; others, enter -C	e 12, col. (b)				0
3	Add lines 1 and 2	r)	3		1	84.
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only; others, enter -	J-1	4			0.
5	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-	· /	5		1	84.
6	6 11 15		3			.04.
8	a 2019 estimated tax payments and 2018 overpayment credited to 2019 6a	0.				
t	b Exempt foreign organizations - tax withheld at source 6b	0.	- 1			
	c Tax paid with application for extension of time to file (Form 8868) 6c	0.	1			
(d Backup withholding erroneously withheld 6d	. 0.	1			
7	Total credits and payments. Add lines 6a through 6d	0.	7			0.
8	Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached		8			0.
9		.	9		1	84.
10			10			04.
11	Enter the amount of line 10 to be: Credited to 2020 estimated tax	Refunded	11			
Pa	art VII-A Statements Regarding Activities					
18	a During the tax year, did the foundation attempt to influence any national, state, or local legislation or did i	t participate or intervene	in		Yes	No
	any political campaign?			1a		X
t	b Did it spend more than \$100 during the year (either directly or indirectly) for political purposes? See the	instructions for the defin	ition	1b		X
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materia		111(11)(11)			
	distributed by the foundation in connection with the activities.					
C	c Did the foundation file Form 1120-POL for this year?			1c		X
C	d Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year:					
	(1) On the foundation. ► \$ 0. (2) On foundation managers. ► \$	0.				
6	e Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax impo	sed on foundation				
	managers. ► \$O.					
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?	***************************************	CARLEREN BANKS	2		X
	If "Yes," attach a detailed description of the activities.					
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, ar	ticles of incorporation, o	or			
	bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes	*************************		3		X
4 a	a Did the foundation have unrelated business gross income of \$1,000 or more during the year?	**************************		4a		X
b	b If "Yes," has it filed a tax return on Form 990-T for this year?	**************	N/A	4b		
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?			5		X
	If "Yes," attach the statement required by General Instruction T.					
6	to contain a for the first the contains to the first the contains of the contains t					
	By language in the governing instrument, or					
	By state legislation that effectively amends the governing instrument so that no mandatory directions the state of th					
_	remain in the governing instrument?			6		X
7	Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, co	ol. (c), and Part XV		7	X	CONTRACTOR OF
8 a	a Enter the states to which the foundation reports or with which it is registered. See instructions.					
	WI					
b	b If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney Gener					
-	of each state as required by General Instruction G? If "No," attach explanation			8b	X	
9	9 Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for calendar					9227700
	year 2019 or the tax year beginning in 2019? See the instructions for Part XIV. If "Yes," complete Part XIV			9		X
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their ni	ames and addresses		10		X

Pa	art VII-A Statements Regarding Activities (continued)			
			Yes	No
11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of			
	section 512(b)(13)? If "Yes," attach schedule. See instructions	11	-	Х
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had advisory privileges?			
	If "Yes," attach statement. See instructions	12		X
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	Х	
	Website address ► N/A			
14	The books are in care of ► MOUND CITY BANK Telephone no. ► 60834	8268	5	
	Located at ▶ 25 EAST PINE STREET, PLATTEVILLE, WI ZIP+4 ▶5			
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - check here	0010	_	
	and enter the amount of tax-exempt interest received or accrued during the year		/A	
16	At any time during calendar year 2019, did the foundation have an interest in or a signature or other authority over a bank,		Yes	No
	securities, or other financial account in a foreign country?	16	103	X
	See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes," enter the name of the	10		- 1
	foreign country >			
Pa	art VII-B Statements Regarding Activities for Which Form 4720 May Be Required			
	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.		Yes	No
1 a	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? Yes X No			
	(5) Transfer any income or assets to a disqualified person (or make any of either available			
	for the benefit or use of a disqualified person)?			
	(6) Agree to pay money or property to a government official? (Exception. Check "No"			
	if the foundation agreed to make a grant to or to employ the official for a period after			
	termination of government service, if terminating within 90 days.)			
b	If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations			
	section 53.4941(d)-3 or in a current notice regarding disaster assistance? See instructions N/A	1b		
	Organizations relying on a current notice regarding disaster assistance, check here	-10		
C	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected			
	before the first day of the tax year beginning in 2019?	1c		X
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation	10		Λ
	defined in section 4942(j)(3) or 4942(j)(5)):			
а	At the end of tax year 2019, did the foundation have any undistributed income (Part XIII, lines			
	6d and 6e) for tax year(s) beginning before 2019?			
	If "Yes," list the years ▶,,,			ê
b	Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2) (relating to incorrect			
	valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer "No" and attach			
	statement - see instructions.) N/A	2b		
C	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here.		77.77.2	
	>			
3 a	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 2019 as a result of (1) any purchase by the foundation or disqualified persons after			
	May 26, 1969; (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7)) to dispose			
	of holdings acquired by gift or bequest; or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Form 4720,			
	Schedule C, to determine if the foundation had excess business holdings in 2019.) N/A	3b		
42	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a		X
h	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that	44		Λ_
	had not been removed from jeopardy before the first day of the tax year beginning in 2019?	4b		X
	perpare y exists and more day or the day year bogginning in Editor.	1 40		

Part VII-B Statements Regarding Activities for Which	Form 4720 May Be I	Required (contin	ued)		
5a During the year, did the foundation pay or incur any amount to:				Ye	s No
(1) Carry on propaganda, or otherwise attempt to influence legislation (section	on 4945(e))?	Y	es X No		
(2) Influence the outcome of any specific public election (see section 4955);			Annual Control of the		
any voter registration drive?	(이상) - : (시아시아) (제한지 중) (시) (제한지 생각 (제한지		es X No		
(3) Provide a grant to an individual for travel, study, or other similar purpose	s?		es X No		
(4) Provide a grant to an organization other than a charitable, etc., organization					
4945(d)(4)(A)? See instructions		Y	es X No		
(5) Provide for any purpose other than religious, charitable, scientific, literary			Second Second		
the prevention of cruelty to children or animals?		Y	es X No		
b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify ur	nder the exceptions described	in Regulations			
section 53.4945 or in a current notice regarding disaster assistance? See inst	tructions		N/A	5b	
Organizations relying on a current notice regarding disaster assistance, check	here				
c If the answer is "Yes" to question 5a(4), does the foundation claim exemption					
expenditure responsibility for the grant?		1/A Y	es No		
If "Yes," attach the statement required by Regulations section 53.4945-5(d).				-	
6a Did the foundation, during the year, receive any funds, directly or indirectly, to	pay premiums on				
a personal benefit contract?		Y	es X No		
b Did the foundation, during the year, pay premiums, directly or indirectly, on a	personal benefit contract?			6b	X
If "Yes" to 6b, file Form 8870.					
7a At any time during the tax year, was the foundation a party to a prohibited tax	shelter transaction?	Y	es X No		
b If "Yes," did the foundation receive any proceeds or have any net income attrib	outable to the transaction?		N/A	7b	
8 Is the foundation subject to the section 4960 tax on payment(s) of more than	\$1,000,000 in remuneration of				
excess parachute payment(s) during the year?		Y	es X No		
Part VIII Information About Officers, Directors, Trus	tees, Foundation Ma	anagers, Highl	У		
Paid Employees, and Contractors					
1 List all officers, directors, trustees, and foundation managers and		(c) Compensation	(d) Contributions to	1-1	Evpanas
(a) Name and address	(b) Title, and average hours per week devoted	(If not paid,	(d) Contributions to employee benefit plan and deferred	4000	Expense unt, other
No. Control of the co	to position	enter -0-)	compensation	allo	owances
MOUND CITY BANK	TRUSTEE				
25 E PINE STREET	1 00	4 055			•
PLATEVILLE, WI 53818	1.00	4,957.	0	•	0.
	_				
	_				
	-			-	
2 Compensation of five highest-paid employees (other than those in	ncluded on line 1). If none	, enter "NONE."			
	(b) Title, and average		(d) Contributions to employee benefit plan		Expense
(a) Name and address of each employee paid more than \$50,000	hours per week devoted to position	(c) Compensation	and deferred compensation	acco	unt, other owances
NONE	devoted to position		Compensation	T unc	J. Wallood
1101111					

		1	1	1	
Total number of other employees paid over \$50,000					0
					PF (2019)

3 Five	highest-paid independent contractors for professional services. If none, ent	er "NONE."	
	(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
	NONE		
Total	umber of others receiving over \$50,000 for professional services		 (
Part	IX-A Summary of Direct Charitable Activities	Stiral information such as the)
Part List the numbe	IX-A Summary of Direct Charitable Activities foundation's four largest direct charitable activities during the tax year. Include relevant state of organizations and other beneficiaries served, conferences convened, research papers pro	stical information such as the oduced, etc.	Expenses
Part List the	IX-A Summary of Direct Charitable Activities foundation's four largest direct charitable activities during the tax year. Include relevant state	stical information such as the oduced, etc.	
Part List the numbe	IX-A Summary of Direct Charitable Activities foundation's four largest direct charitable activities during the tax year. Include relevant state of organizations and other beneficiaries served, conferences convened, research papers pro	stical information such as the oduced, etc.	
List the numbe	IX-A Summary of Direct Charitable Activities foundation's four largest direct charitable activities during the tax year. Include relevant state of organizations and other beneficiaries served, conferences convened, research papers pro	stical information such as the oduced, etc.	
Part List the numbe 1 2	IX-A Summary of Direct Charitable Activities foundation's four largest direct charitable activities during the tax year. Include relevant state of organizations and other beneficiaries served, conferences convened, research papers pro	stical information such as the oduced, etc.	
List the numbe 1 2 3 4 Part	IX-A Summary of Direct Charitable Activities foundation's four largest direct charitable activities during the tax year. Include relevant state of organizations and other beneficiaries served, conferences convened, research papers pro	oduced, etc.	

Form **990-PF** (2019)

All other program-related investments. See instructions.

Total. Add lines 1 through 3

P	art X Minimum Investment Return (All domestic foundations mus	t complete this part. Foreign fou	ındations, se	e instructions.)
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, e			
a	Average monthly fair market value of securities	, p p. 0000.	1a	538,519.
b	Average of monthly cash balances		1b	19,126.
C	Fair market value of all other assets		1c	15,120.
d	Total (add lines 1a, b, and c)		1d	557,645.
е	Reduction claimed for blockage or other factors reported on lines 1a and			3377013.
	1c (attach detailed explanation)	0.		
2	Acquisition indebtedness applicable to line 1 assets		2	0.
3	Subtract line 2 from line 1d		3	557,645.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, se	e instructions)	4	8,365.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Pa	art V, line 4	5	549,280.
6	Minimum investment return. Enter 5% of line 5		6	27,464.
Р	art XI Distributable Amount (see instructions) (Section 4942(j)(3) and (foreign organizations, check here ▶ ☐ and do not complete this part.)	j)(5) private operating foundations a	nd certain	2.7.202.
1	Minimum investment return from Part X, line 6	CTTSFERRORS FOR STANDARD CONTRACTOR OF THE STAND	1	27,464.
2a	Tax on investment income for 2019 from Part VI, line 5	184.		
b	Income tax for 2019. (This does not include the tax from Part VI.)			
C	Add lines 2a and 2b	***************************************	2c	184.
3	Distributable amount before adjustments. Subtract line 2c from line 1		3	27,280.
4	Recoveries of amounts treated as qualifying distributions		4	0.
5	Add lines 3 and 4		5	27,280.
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	27,280.
P	art XII Qualifying Distributions (see instructions)			
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purpos	es:		
a	Expenses, contributions, gifts, etc total from Part I, column (d), line 26		1a	26,000.
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	(3b	
4	Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8; and F	art XIII, line 4	4	26,000.
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	ent	5	0.
6	Adjusted qualifying distributions. Subtract line 5 from line 4		6	26,000.
	Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when 4940(e) reduction of tax in those years.			e section

Form **990-PF** (2019)

Part XIII	Undistributed Income	(see instructions)

	(a) Corpus	(b) Years prior to 2018	(c) 2018	(d) 2019
Distributable amount for 2019 from Part XI, line 7				27,280.
2 Undistributed income, if any, as of the end of 2019:				21,200.
a Enter amount for 2018 only				0.
b Total for prior years:				0.
3 Excess distributions carryover, if any, to 2019:		0.		
• Fram 2014				
b From 2015				
a From 2016				
d From 2017				
e From 2018				
f Total of lines 3a through e	7 (10			
4 Qualifying distributions for 2019 from	7,640.			
Part XII, line 4: ► \$ 26,000.				
a Applied to 2018, but not more than line 2a				
b Applied to undistributed income of prior				0.
years (Election required - see instructions)		0.		
c Treated as distributions out of corpus				
(Election required - see instructions)	0.			
d Applied to 2019 distributable amount				26,000.
e Remaining amount distributed out of corpus 5 Excess distributions carryover applied to 2019	0.			
German and the second of the same amount appears in column (d), the same amount must be shown in column (a).)	1,280.			1,280.
6 Enter the net total of each column as indicated below:				
a Corpus. Add lines 3f, 4c, and 4e. Subtract line 5	6,360.			
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		0.		
amount - see instructions		0.		
e Undistributed income for 2018. Subtract line		•		
4a from line 2a. Taxable amount - see instr.		, a ::		0.
f Undistributed income for 2019. Subtract lines 4d and 5 from line 1. This amount must be distributed in 2020			5.5	23
7 Amounts treated as distributions out of				0.
corpus to satisfy requirements imposed by				
section 170(b)(1)(F) or 4942(g)(3) (Election	0			
may be required - see instructions) 8 Excess distributions carryover from 2014	0.			
not applied on line 5 or line 7	0.	The state of the		
9 Excess distributions carryover to 2020.				
Subtract lines 7 and 8 from line 6a	6,360.			
O Analysis of line 9;				
a Excess from 2015				
b Excess from 2016 6,360.				
c Excess from 2017				
d Excess from 2018		30		
e Excess from 2019				
23581 12-17-19				Form 000- DE (2010)

Form 990-PF (2019) ANN & L Part XIV Private Operating F	EO STOLL JE	R. CHARITAB	LE TRUST	N/A	46-6582	2858 Page 10
1 a If the foundation has received a ruling o				N/A		
foundation, and the ruling is effective fo	r 2019 apter the date of	the ruling				
b Check box to indicate whether the found				7 40 40 47 40		
		Ing foundation described		4942(j)(3)	or 4942(<u>j)(5)</u>
2 a Enter the lesser of the adjusted net	Tax year (a) 2019	/h) 2019	Prior 3 years	(4)	2010	
income from Part I or the minimum	(a) 2019	(b) 2018	(c) 2017	(d) 2	2016	(e) Total
investment return from Part X for						
each year listed						
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			PARTIES AND ADDRESS OF THE PARTY OF THE PART			
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		× ×			4	
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 Info	rmation (Comple	ete this part only	if the foundation	n had \$5,0	00 or more	in assets
at any time during t	he year-see inst	ructions.)				
1 Information Regarding Foundation	n Managers:					
a List any managers of the foundation wh		than 2% of the total cor	tributions received by the	e foundation be	efore the close o	f any tay
year (but only if they have contributed n	nore than \$5,000). (See	section 507(d)(2).)	and distribution of the	o iodiidalion bi	71010 1110 01030 0	uny tax
NONE						
b List any managers of the foundation wh	n own 10% or more of the	he stock of a corporation	(or an equally large post	ion of the august	arabia at a sasta	avahia av
other entity) of which the foundation has	s a 10% or oreater intere	est	(or an equally large port	ion of the own	arship of a partne	arship or
	o a rozo or grouter intere					
NONE						
2 Information Regarding Contributi						
Check here ► if the foundation of	nly makes contributions	to preselected charitable	organizations and does	not accept uns	olicited requests	for funds. If
the foundation makes gifts, grants, etc.,						
a The name, address, and telephone num	ber or email address of t	he person to whom appl	ications should be addres	ssed:		
SEE STATEMENT 6						
b The form in which applications should be	e submitted and informa	ation and materials they s	should include:			
c Any submission deadlines:						
		AND THE PROPERTY OF THE PROPER	A position of the second of th			
d Any restrictions or limitations on awards	s, such as by geographic	al areas, charitable fields	s, kinds of institutions, or	other factors:		

Supplementary Information (continued) Grants and Contributions Paid During the Year or Approved for Future Payment Recipient If recipient is an individual, show any relationship to Foundation Purpose of grant or any foundation manager status of Amount Name and address (home or business) contribution or substantial contributor recipient a Paid during the year FRIENDS OF BRICKL MEMORIAL LIBRARY NONE PUBLIC CHARITY GRANT FOR COMPUTER FOR 500 EAST AVENUE LIBRARY DIRECTOR. DICKEYVILLE, WI 53808 2,000. HOLY GHOST-IMMACULATE CONCEPTION NONE PUBLIC CHARITY GRANT FOR PURCHASE OF SCHOOL. CHROMEBOOKS. 325 WEST MAIN STREET DICKEYVILLE, WI 53808 1,250. POTOSI FOUNDATION INC NONE PUBLIC CHARITY \$4,000 GRANT FOR THE 209 S MAIN STREET INTERNET/WIFI PROJECT POTOSI, WI 53820 AND A \$2,000 GRANT FOR THE ROOF REPLACEMENT PROJECT. 6,000. ST ANDREW-THOMAS CATHOLIC SCHOOL NONE PUBLIC CHARITY GRANT FOR GYMNASIUM 100 HWY 61 NORTH EQUIPMENT PROJECT. POTOSI, WI 53820 4.000. UW PLATTEVILLE/KATIE LOEFFELHOLZ NONE PUBLIC SCHOOL SCHOLARSHIP 1 UNIVERSITY PLAZA DISTRICT PLATTEVILLE, WI 53818 1,500. SEE CONTINUATION SHEET(S) Total ▶ 3a 26,000. b Approved for future payment NONE Total

Part XVI-A Analysis of Income-Prod			KUBI	4	16-6582858 Page 1
Enter gross amounts unless otherwise indicated.		ousiness income	Excluded by	/ section 512, 513, or 5	514
	(a) Business	(b)	(C) Exclu-	(d)	(e) Related or exempt
1 Program service revenue:	code	Amount	sion code	Amount	function income
a					
b					
C					
d					
e					
f					
g Fees and contracts from government agencies					
2 Membership dues and assessments					
3 Interest on savings and temporary cash investments					
4 Dividends and interest from securities			14	14,36	:2
5 Net rental income or (loss) from real estate:			11	14,50	12.
a Debt-financed property					
b Not debt-financed property					
6 Net rental income or (loss) from personal					
property					
7 Other investment income					
8 Gain or (loss) from sales of assets other					
than inventory			14	-13,40	7.
9 Net income or (loss) from special events					
O Gross profit or (loss) from sales of inventory					
1 Other revenue:					
a					
b					
c					
d				STAIL IN COLUMN STAIL STAIL	
e					
2 Subtotal. Add columns (b), (d), and (e)		0		95	5. 0
3 Total. Add line 12, columns (b), (d), and (e)					13 955
See worksheet in line 13 instructions to verify calculations.)	,			
Part XVI-B Relationship of Activities	s to the Accom	plishment of E	xempt Pu	rposes	
Line No. Explain below how each activity for which in the foundation's exempt purposes (other th.	ncome is reported in c	olumn (e) of Part XVI-	A contributed	importantly to the a	accomplishment of
the foundation's exempt purposes (other the	all by providing fullus	ioi sucii purposes).			
			A CONTRACTOR OF THE PARTY OF TH		
1					

Part XVII	Information Regarding Transfers to and Transactions and Re Exempt Organizations	lationships With Noncharitable
1 Did the or	rganization directly or indirectly engage in any of the following with any other organization descr	ibed in section 501(c) Yes No
(other tha	an section 501(c)(3) organizations) or in section 527, relating to political organizations?	163 140
a Transfers	from the reporting foundation to a noncharitable exempt organization of:	
(1) Cash		1a(1) X
(2) Other	1a(2) X	
b Other tran		
(1) Sales	s of assets to a noncharitable exempt organization	1b(1) X
(2) Purci	hases of assets from a noncharitable exempt organization	1b(2) X
(3) Renta	al of facilities, equipment, or other assets	1b(3) X
(4) Reilli	ioursement arrangements	1h(4) X
(3) Luan	is of idail guarantees	16/5)
(b) Perio	ormance of services or membership or fundraising solicitations	1h(6) X
c Snaring o	of facilities, equipment, mailing lists, other assets, or paid employees	1c X
d If the ansi	wer to any of the above is "Yes," complete the following schedule. Column (b) should always sho	ow the fair market value of the goods, other assets.
or service	es given by the reporting foundation. If the foundation received less than fair market value in any	transaction or sharing arrangement, show in
a) Line no.	d) the value of the goods, other assets, or services received.	
a) Line no.		Description of transfers, transactions, and sharing arrangements
	N/A	
-		
2a Is the four	ndation directly or indirectly affiliated with, or related to, one or more tax-exempt organizations of	lescribed
in section	501(c) (other than section 501(c)(3)) or in section 527?	Yes X No
b If "Yes," co	omplete the following schedule.	
	(a) Name of organization (b) Type of organization	(c) Description of relationship
	N/A	
Under	penalties of perjury, I declare that I have examined this return, including accompanying schedules and statement	s, and to the best of my knowledge May the IRS discuss this
Sigir	elief, it is true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of w	hich preparer has any knowledge. return with the preparer shown below? See instr.
Here	(Nou 13. Dehn, 11 Junt office 1 6/15/2020 > 1	RUSTEE X Yes No
Sigr	nature of officer or trustee Date Title	
	Print/Type preparer's name Preparer's signature Date	Check if PTIN
	TERRY VAASSEN, CPA,	self- employed
Paid	PFS TERRY VAASSEN, CPA 06/1	.0/20 P00089475
Preparer	Firm's name ► VAASSEN, PLUEMER CPAS, LLC	Firm's EIN ► 39-2040598
Use Only		
	Firm's address ▶ 147 KEYSTONE PARKWAY, SUITE 121	
	PLATTEVILLE, WI 53818	Phone no. (608)348-9745
		Form 990-PF (2019)

Part XV Supplementary Information Grants and Contributions Paid During the Year (Continuation) Recipient If recipient is an individual, show any relationship to Foundation Purpose of grant or any foundation manager status of Amount Name and address (home or business) contribution or substantial contributor recipient CONCERNED CHURCH WOMEN OF NONE PUBLIC CHARITY GRANT TO PURCHASE PLATTEVILLE, INC. STORAGE SHELVING. 950 LANCASTER STREET PLATTEVILLE, WI 53818 1,250. INSPIRING COMMUNITY INC. NONE PUBLIC CHARITY GRANT TOWARDS THE 190 MARKET STREET PURCHASE OF A HEARING PLATTEVILLE, WI 53818 LOOP FOR THE LEGION PARK EVENT CENTER. 2,000. VILLAGE OF DICKEYVILLE NONE PUBLIC CHARITY GRANT FOR THE KUEPER'S 500 EAST AVENUE PARK REVITALIZATION DICKEYVILLE, WI 53808 PROJECT. 1,500. ABA MUSEUM FOUNDATION INC. NONE PUBLIC CHARITY GRANT FOR THE PURCHASE 209 S MAIN STREET OF A NEW COMPUTER FOR POTOSI, WI 53820 THE NATIONAL BREWERY MUSEUM LIBRARY. 3,000. JAMISON MUSEUM ASSOCIATION INC. NONE PUBLIC CHARITY GRANT FOR THE GRANT 405 E MAIN STREET COUNTY SCHOOL FIELD PLATTEVILLE, WI 53818 TRIP SCHOLARSHIPS PROJECT. 2,000. MADISON AREA TECHNICAL COLLEGE NONE PUBLIC SCHOOL SCHOLARSHIP 1701 WRIGHT STREET DISTRICT MADISON, WI 53704 1,500. Total from continuation sheets 11,250.

FORM 99	0-PF G	AIN OR (LOSS) 1	FROM SALE	OF	ASSETS		STATE	MENT	1
DESCRIP'	(A) TION OF PROPERTY	<u></u>			MANNER CQUIRED	DA'		ATE S	SOLE
INVESCO	OPN SR FLT RT C							10/30	/19
	(B) GROSS	(C) COST OR	(D) EXPENSE	OF	(E)		(F		
_	SALES PRICE	OTHER BASIS	SALE		DEPREC	•	GAIN O	R LOS	S
	13,210.	14,567.		0.		0.		-1,3	57.
DESCRIPT	(A) FION OF PROPERTY				MANNER CQUIRED	DA:		ATE S	OLD
INVESCO	OPN MLP ALPH C	_						07/26	/19
	(B) GROSS SALES PRICE	(C) COST OR OTHER BASIS	(D) EXPENSE	OF	(E)		(F		
-		OTHER BASIS	SALE		DEPREC	•	GAIN O	R LOS	S
4	28,850.	53,778.		0.		0.		-24,9	28.
DESCRIPT	(A) TION OF PROPERTY				MANNER CQUIRED	DAT ACQUI		ATE S	OLD
FID ADVS	CORP BD C	- E			-			07/26	/19
	(B) GROSS	(C) COST OR		OF	(E)		(F)	
1	SALES PRICE	OTHER BASIS	SALE		DEPREC	<u> </u>	GAIN O	R LOS	S
	52,232.	51,245.		0.		0.		9	87.

			ATE UIRED DATE SOLD
			12/11/19
	(D) EXPENSE OF SALE	(E) DEPREC.	(F) GAIN OR LOSS
10,557.	0.	0.	-577.
OM PART IV			12,468.
I, LINE 6A			-13,407.
ENDS AND INTE	REST FROM SEC	URITIES	STATEMENT 2
GAINS	REVENUE		
330. 12,4	14,36	2. 12,	707.
12,40	14,36	2. 12,	707.
ACCOUNT	ING FEES		STATEMENT 3
(A) EXPENSES PER BOOKS			
1525-000-000-000 1-000-000-000-000-000-000-000-000-000-0			
796			0.
	COST OR HER BASIS 10,557. OM PART IV I, LINE 6A ENDS AND INTER CAPITAL GAINS NT DIVIDENT 830. 12,40 ACCOUNT: (A) EXPENSES	COST OR EXPENSE OF HER BASIS SALE 10,557. 0. OM PART IV I, LINE 6A ENDS AND INTEREST FROM SECTOR CAPITAL (A) REVENUE GAINS REVENUE DIVIDENDS PER BOOKS 830. 12,468. 14,363 ACCOUNTING FEES (A) EXPENSES NET INVEST-	ACQUIRED ACQUIRED ACQUIRED ACQUIRED ACQUIRED ACQUIRED ACQUIRED (E) COST OR EXPENSE OF DEPREC. 10,557. 0. 0. OM PART IV I, LINE 6A ENDS AND INTEREST FROM SECURITIES CAPITAL (A) (B) S GAINS REVENUE NET INV NT DIVIDENDS PER BOOKS MENT IN 830. 12,468. 14,362. 12, 830. 12,468. 14,362. 12, ACCOUNTING FEES (A) (B) (C) EXPENSES NET INVEST- ADJUST

FORM 990-PF	TAXES				STATEMENT 4		
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVES MENT INCO		(C) ADJUSTEI NET INCOI	D CHAI	(D) RITABLI RPOSES	
EXCISE TAX	573.		0.		0.		
TO FORM 990-PF, PG 1, LN 18	573.	0.			(
FORM 990-PF	OTHER INV	ESTMENTS			STATEM	ENT S	
DESCRIPTION		LUATION ETHOD	воо	K VALUE	FAIR MA		
MUTUAL FUNDS	COST		524,194.		54	543,883.	
TOTAL TO FORM 990-PF, PART II	, LINE 13	_	524,194.		543,883.		

FORM 990-PF

GRANT APPLICATION SUBMISSION INFORMATION STATEMENT PART XV, LINES 2A THROUGH 2D

NAME AND ADDRESS OF PERSON TO WHOM APPLICATIONS SHOULD BE SUBMITTED

LORI BAHR 25 E PINE STREET PLATTEVILLE, WI 53818

TELEPHONE NUMBER

608-348-2685

FORM AND CONTENT OF APPLICATIONS

ORGANIZATIONS WILL SUBMIT PROPOSAL LETTERS REQUESTING A SPECIFIC DOLLAR AMOUNT, NAMING A SPECIFIC PROJECT OR PROGRAM AND SPECIFYING HOW THE FUNDS WILL BE USED.

ANY SUBMISSION DEADLINES

SEPTEMBER 30 ANNUALLY.

RESTRICTIONS AND LIMITATIONS ON AWARDS

TWO SCHOLARSHIPS OFFERED TO INDIVIDUALS GRADUATING FROM HIGH SCHOOLS IN PLATTEVILLE, POTOSI AND DICKEYVILLE WI GEOGRAPHIC AREAS WHO ARE ATTENDING THE UW-PLATTEVILLE OR OTHER ACCREDITED COLLEGE IN FIELDS OF BROADCAST JOURNALISM AND BUSINESS MANAGEMENT RESPECTIVELY. IN ADDITION OTHER GRANTS ARE OFFERED TO 501(C)(3) ORGANIZATIONS IN THE PLATTEVILLE, POTOSI AND DICKEYVILLE WI GEOGRAPHICAL AREAS TO BENEFIT RESIDENTS IN THOSE AREAS.

IRS e-file Signature Authorization for an Exempt Organization

or c	alendar year	2019,	or fiscal ye	ar beginning	2019 and ending

Department of the Treasury

▶ Do not send to the IRS. Keep for your records.

OMB No. 1545-1878

Internal Revenue Service	Go to www.irs.gov/Form8879EO for the latest information.	
Name of exempt organization		Employer identification number
ANN & LEO STO	LL JR. CHARITABLE TRUST	16 6502050
Name and title of officer	22 OK. CHIRTINGE TROOT	46-6582858
LORI BAHR		
TRUSTEE		
	Return and Return Information (Whole Dollars Only)	
	rn for which you are using this Form 8879-EO and enter the applicable amount, if any, fro	om the réturn. If you check the how
on line 1a, 2a, 3a, 4a, or 5	a, below, and the amount on that line for the return being filed with this form was blank, the lank (do not enter -0-). But, if you entered -0- on the return, then enter -0- on the applicable	then leave line th 2h 3h 4h or 5h
1a Form 990 check here	b Total revenue, if any (Form 990, Part VIII, column (A), line 12)	1h
2a Form 990-EZ check he	b Total revenue, if any (Form 990-EZ, line 9)	2h
3a Form 1120-POL check	here b Total tax (Form 1120-POL, line 22)	3b
4a Form 990-PF check he	b Tax based on investment income (Form 990-PF, Part VI, line 5)	4b 184.
5a Form 8868 check here	b Balance Due (Form 8868, line 3c)	5b
	ion and Signature Authorization of Officer I declare that I am an officer of the above organization and that I have examined a copy	
return, and the financial in 1-888-353-4537 no later the processing of the electron payment. I have selected a	applicable, I authorize the U.S. Treasury and its designated Financial Agent to initiate an ell institution account indicated in the tax preparation software for payment of the organiza stitution to debit the entry to this account. To revoke a payment, I must contact the U.S. an 2 business days prior to the payment (settlement) date. I also authorize the financial in payment of taxes to receive confidential information necessary to answer inquiries and a personal identification number (PIN) as my signature for the organization's electronic retelectronic funds withdrawal. box only	ation's federal taxes owed on this Treasury Financial Agent at Institutions involved in the
X Lauthorize VA	ASSEN, PLUEMER CPAS, LLC	
radinonze VA	ERO firm name	to enter my PIN 12345 Enter five numbers, bu do not enter all zeros
is being filed wit enter my PIN on As an officer of the indicated within	on the organization's tax year 2019 electronically filed return. If I have indicated within this has a state agency(ies) regulating charities as part of the IRS Fed/State program, I also author the return's disclosure consent screen. The organization, I will enter my PIN as my signature on the organization's tax year 2019 elections that a copy of the return is being filed with a state agency(ies) regulating charitater my PIN on the return's disclosure consent screen. Date	horize the aforementioned ERO to electronically filed return. If I have
Part III Certifica	tion and Authentication	
ERO's EFIN/PIN. Enter yo	ur six-digit electronic filing identification	
number (EFIN) followed by	your five-digit self-selected PIN. 39451912345 Do not enter all zeros	
I certify that the above nur confirm that I am submittir e-file Providers for Busines	neric entry is my PIN, which is my signature on the 2019 electronically filed return for the eg this return in accordance with the requirements of Pub. 4163 , Modernized e-File (MeF)	organization indicated above. I Information for Authorized IRS
ERO's signature ► <u>VAAS</u>	SEN, PLUEMER CPAS, LLC Date ▶ 06/1	10/20
	ERO Must Retain This Form - See Instructions Do Not Submit This Form to the IRS Unless Requested To Do S	So