Return of Private Foundation

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

OMB No. 1545-0052

Department of the Treasury Internal Revenue Service

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Open to Public Inspection

-0	r cale	ndar year 2018 or tax year beginning		, a	and er	iding		
		undation					identification numbe	,
		RSAN FOUNDATION INC						
		d street (or P.O. box number if mail is not delivered to street address)		Room/suit	ite		81-4691585	j
_	BOX					3 Telephone	number (see instruction	ns)
		n, state or province, country, and ZIP or foreign postal code	5 444					
_	ARSHE		54449		-			
FO	reigh col	untry name Foreign province/state/county	Foreign	postal co	ode C	If exempt	ion application is pendi	ng, check here 🕨 🔃
G	Checl	k all that apply: Initial return Initial return			-			
_	01100	Final return Amended re	of a former pub	olic char	rity L		n organizations, check	_
		Address change Name change					n organizations meeting	
H	Check	k type of organization: X Section 501(c)(3) exempt pr			- -		here and attach compu foundation status was t	
Ö.		on 4947(a)(1) nonexempt charitable trust Other tax				section 50	07(b)(1)(A), check here	· · · · · · ·
T								_
'		·	· [X] Cash [_ Accr	ual F		idation is in a 60-month	
					***	under sec	tion 507(b)(1)(B), checl	k here 🖫 . 🖫 🕨
D	-	6) \$ 6,490 (Part I, column (d) must b	e on cash basis.)				
	art l	Analysis of Revenue and Expenses (The total of	(a) Revenue a	I (h	n) Netin	vestment	(c) Adjusted net	(d) Disbursements for charitable
		amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a) (see instructions).)	expenses per books	· '"	inco		income	purposes
	1 4			107		wile can be the	merali surfector	(cash basis only)
	1	Contributions, gifts, grants, etc., received (attach schedule)	3,	197				110000000000000000000000000000000000000
	2 3	Check X if the foundation is not required to attach Sch. B	MPAN BULLINGS		15000		1024 A 1020 P 10 P 10	
	4	Interest on savings and temporary cash investments Dividends and interest from securities						
	5a	Gross rents		\rightarrow				
	b	Net rental income or (loss)	Restlander States and	5:5:4 Apr. 6	Colored In	CALLES WALL	SECTION AND LINE	
e	6a	Net gain or (loss) from sale of assets not on line 10	STATE PERSONAL	TUSE STEE	No contestina		Park Charles Annual Line	
2	b	Gross sales price for all assets on line 6a	warded and the	Designation		AND REPORTS		
Revenue	7	Capital gain net income (from Part IV, line 2)		+2370	N 5 1 2 2	The Second Second		
8	8	Net short-term capital gain		3 74 100	HINGS			STREET, STREET
	9	Income modifications	1.000			december		
	10a	Gross sales less returns and allowances	Y HAUS LINE				Paralla A. M. J. S.	ESTAL SECTION
	b	Less: Cost of goods sold	W.Karmer Ze			J. Hann		z w Stresak techo
	С	Gross profit or (loss) (attach schedule)		#9	CHINA			Conference of
	11	Other income (attach schedule)						and the second
	12	Total. Add lines 1 through 11	3,	197		0	0	LINEQUARTED TO
S	13	Compensation of officers, directors, trustees, etc.						
13(14	Other employee salaries and wages						
bei	15	Pension plans, employee benefits						
ᄍ	16a	Legal fees (attach schedule)						
9	b	Accounting fees (attach schedule)						
둦	_ c	Other professional fees (attach schedule)		_				
ii.	17	Interest						
Ë	18	Taxes (attach schedule) (see instructions)		_				
Έ	19 20	Depreciation (attach schedule) and depletion		_				
A	21	Occupancy		_				
Operating and Administrative Expenses	22	Travel, conferences, and meetings						
a	23	Other expenses (attach schedule)		E 40				
ng	24	Total operating and administrative expenses.		548				548
ati		Add lines 13 through 23		548		0	_	540
er.	25	Contributions, gifts, grants paid		800		0	0	
o p	26	Total expenses and disbursements. Add lines 24 and 25						11,800
-	27	Subtract line 26 from line 12:	12,	348		0	0	12,348
	a a	Excess of revenue over expenses and disbursements	_	151			CONTRACTOR OF STREET	
	b	Net investment income (if negative, enter -0-)	-9,	151		0		CESTAL AND
	C	Adjusted net income (if negative, enter -0-)	La fact DOS VE			U		
		the state of the s		100			0	SUPPLIES THE STATE OF THE STATE

D:	art II	Balance Sheets Attached schedules and amounts in the description column	Beginning of year	End of	year
	all II	should be for end-of-year amounts only. (See instructions.)	(a) Book Value	(b) Book Value	(c) Fair Market Value
	1	Cash—non-interest-bearing	15,641	6,490	6,490
	2	Savings and temporary cash investments			
	3	Accounts receivable			7 - 7 - 1 -
		Less: allowance for doubtful accounts			
	4	Pledges receivable			STATE OF THE PARTY
		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)	APRILITY SELECTION	esta un participate d	Print With the Leading
		Less: allowance for doubtful accounts			
ţ	8	Inventories for sale or use			
Assets	9	Prepaid expenses and deferred charges			
As	10a	Investments—U.S. and state government obligations (attach schedule)			
	b	Investments—corporate stock (attach schedule)			
	c	Investments—corporate bonds (attach schedule)			
	11	Investments—land, buildings, and equipment: basis			Tribat Bir swindy he S
		Less: accumulated depreciation (attach schedule)	ZWPU/At Exhipted ph/99	MISSING TARREST SERVICES	hearing districtions
	12	Investments—mortgage loans			
	13	Investments—other (attach schedule)			
	14	Land, buildings, and equipment: basis	LEPSEN CONTRACTOR	STATE OF THE STATE OF	SAV SPIRE IN YER IN SOME
	'-	Less: accumulated depreciation (attach schedule)		Chest Control Water	Control of the Contro
	15	Other assets (describe			
	16	Other assets (describe Total assets (to be completed by all filers—see the			
	10	instructions. Also, see page 1, item I)	15 641	6.400	0.400
_	17	Accounts payable and accrued expenses	15,641	6,490	6,490
	18				ACTURIO DI SUPPLEMENTO
Liabilities	19	Grants payable			
≣		Deferred revenue			Charles CHARLES
ğ	20	Loans from officers, directors, trustees, and other disqualified persons			
ت	21	Mortgages and other notes payable (attach schedule)			
	22	Other liabilities (describe Tatal liabilities (add lines 47 through 200)			SA CHARACTER TANK
_	23	Total liabilities (add lines 17 through 22)	0	0	
S		Foundations that follow SFAS 117, check here			
lances		and complete lines 24 through 26, and lines 30 and 31.			
	24	Unrestricted			
Ba	25	Temporarily restricted			and colors than the
ᅙ	26	Permanently restricted			
Net Assets or Fund Ba		Foundations that do not follow SFAS 117, check here			
Ĕ		and complete lines 27 through 31.			
S	27	Capital stock, trust principal, or current funds			A Committee of
et	28	Paid-in or capital surplus, or land, bldg., and equipment fund			
S	29	Retained earnings, accumulated income, endowment, or other funds	15,641	6,490	
it /	30	Total net assets or fund balances (see instructions)	15,641	6,490	# Antiowall of
ž	31	Total liabilities and net assets/fund balances (see			
		instructions)	15,641	6,490	
_	rt III	Analysis of Changes in Net Assets or Fund Balances			
1		net assets or fund balances at beginning of year—Part II, column (a)			
		of-year figure reported on prior year's return)			15,641
		amount from Part I, line 27a			-9,151
3		increases not included in line 2 (itemize)		3	
_		nes 1, 2, and 3	26 (2 2) (3 10 2/ 12 2/		6,490
5	Decre	eases not included in line 2 (itemize)		5	
6	Iotali	net assets or fund balances at end of year (line 4 minus line 5)—Par	t II, column (b), line 3	0 4 4 6	6,490

Part	Capital Gains an	d Losses for lax on investi	nent Income		_		
	a) List and describe the k 2-story brick wareho	ind(s) of property sold (for example, real est buse; or common stock, 200 shs. MLC Co.)	ate,	(b) How acquired P—Purchase D—Donation		Date acquired io., day, yr.)	(d) Date sold (mo., day, yr.)
1a							
b							
C							
d							
е							
	(e) Gross sales price	(f) Depreciation allowed (or allowable)		or other basis pense of sale			n or (loss) f) minus (g))
a							
b							
С							
d							
е							
	Complete only for assets si	howing gain in column (h) and owned	by the foundation	on on 12/31/69			
	(i) F.M.V. as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Exc	ess of col. (i)	1	col. (k), but no	l, (h) gain minus t less than -0-) or rom col. (h))
а							
b		14-1				-x	
C							
d							
e					-		
<u> </u>		f If gain	also enter in P	ort Llino 7	\vdash		
2	Capital gain net income or	The Cabilatioss 3	, enter -0- in P	>	,		^
3	Net short-term capital gair				2		0
3		n or (loss) as defined in sections 1 , line 8, column (c). See instructio					
Part	Part I, line o	der Section 4940(e) for Redu	6 39 K 383 K 363	9K 80 0K 90 99CC	3		0
Was t	tion 4940(d)(2) applies, leave the foundation liable for the	section 4942 tax on the distributal	ble amount of a	any year in the bas	e perio	od?	Yes No
		ualify under section 4940(e). Do n			Secretary 1 - 1 - 1 - 1 - 1		
1	Enter the appropriate amo	ount in each column for each year	see the instru	ctions before maki	ng any	entries.	
Cal	Base period years endar year (or tax year beginning in	(b) Adjusted qualifying distributions	s Net value	(c) e of noncharitable-use a	ssets	Dis (col. (b)	(d) stribution ratio divided by col. (c))
	2017		0		0		0.000000
	2016		0		0		0.000000
	2015		0		0		0.000000
	2014		0		0		0.000000
	2013		0		0		0.000000
2		for the Europe has provided all its			n te	2	0.000000
J		for the 5-year base period—divide bundation has been in existence if			× 8	3	0.000000
4	Enter the net value of non-	charitable-use assets for 2018 fro	m Part X, line	5 жавее ж	*	4	
5	Multiply line 4 by line 3 .			$M \cdot \otimes_{\mathbb{R}} \cdot \omega = \emptyset \cdot \otimes_{\mathbb{R}} \cdot \otimes_{\mathbb{R}} \cdot \mathbb{R}$	ar gar	5	
6		nt income (1% of Part I, line 27b)				6	0
7	Add lines 5 and 6			e a e a a ace	e a	7	0
8		ns from Part XII, line 4 ter than line 7, check the box in P				8 sing a 1% tax	x rate. See the
	Part VI instructions.			•		<u> </u>	· · · • •

Part	Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948—see insti	ructions)			
1a	Exempt operating foundations described in section 4940(d)(2), check here and enter "N/A" on line 1.	Steel (Text)		118	38
	Date of ruling or determination letter: (attach copy of letter if necessary—see instructions)				
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check	1			
	here ▶ ☐ and enter 1% of Part I, line 27b				
С	All other domestic foundations enter 2% of line 27b. Exempt foreign organizations, enter 4% of Part I, line 12, col. (b).			i iy	
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only; others, enter -0-)	2		o	
3	Add lines 1 and 2	3		0	
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only; others, enter -0-)	4			
5	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0	5		0	
6	Credits/Payments:				
a	2018 estimated tax payments and 2017 overpayment credited to 2018 6a 6a				
b	Exempt foreign organizations—tax withheld at source	1000			
C	Tax paid with application for extension of time to file (Form 8868)				
d 7	Backup withholding erroneously withheld	200 220	SUM	1,000	NO.
	Total credits and payments. Add lines 6a through 6d	7		0	
8 9	Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed	9		_	
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid	10		0	
11	Enter the amount of line 10 to be: Credited to 2019 estimated tax	11		0	
Part '	VII-A Statements Regarding Activities				
1a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it		10,700	Yes	No
	participate or intervene in any political campaign?	900 N	1a		Χ
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes? See the				
	instructions for the definition		1b		Χ
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any material	S			
	published or distributed by the foundation in connection with the activities.		MAG	11.00%	
C C	Did the foundation file Form 1120-POL for this year?	E: 8 - 61	1c		X
d	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year: (1) On the foundation. ▶ \$				
е	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax impos				
	on foundation managers. • \$	seu		GE ST	
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?		2	OWNER	Х
	If "Yes," attach a detailed description of the activities.	0.7	3455	- ner	^
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles		12 (21)		
	of incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes	700.00	3	mpontal pr	Х
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?		4a		Х
b	If "Yes," has it filed a tax return on Form 990-T for this year?	36 395	4b		Х
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?	27 020 2	5		Х
	If "Yes," attach the statement required by General Instruction T.			100	
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either:		1100		
	By language in the governing instrument, or		CULE Y		
	By state legislation that effectively amends the governing instrument so that no mandatory directions the second state legislation that effectively amends the governing instrument so that no mandatory directions the second state legislation that effectively amends the governing instrument so that no mandatory directions the second state legislation that effectively amends the governing instrument so that no mandatory directions the second state legislation that effectively amends the governing instrument so that no mandatory directions the second state legislation that effectively amends the governing instrument so that no mandatory directions the second state legislation that the second state legislation that the second state legislation is second state legislation.			400	
7	conflict with the state law remain in the governing instrument?		6	X	
7 8a	Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col. (c), and Part XV.	6 59 30 560	7	Х	and the same
Od	Enter the states to which the foundation reports or with which it is registered. See instructions. WI			100	
b	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney Gene			168	
_	(or designate) of each state as required by General Instruction G? If "No," attach explanation		8b	Х	
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(WE		6
	or 4942(j)(5) for calendar year 2018 or the tax year beginning in 2018? See the instructions for Part XIV.	lf			
10	"Yes," complete Part XIV	(4 - 6)	9	Х	
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing to names and addresses.	neir	10		V
	THE CONTRACT CONTRACT OF THE PROPERTY OF THE P				

Form 9	90-PF (2018) THE BARSAN FOUNDATION INC 81-	4691585	F	age 5
Part	t VII-A Statements Regarding Activities (continued)			age o
11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the	35 II	Yes	No
	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		Х
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	Х	
	Website address www.barsanfoundation.org			
14	The books are in care of ► BARBARA LEE Telephone no. ► 715-2	.23-7893		
	Located at ► 1806 ARLINGTON ST MARSHFIELD WI ZIP+4 ► 5444	3		
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	3 8 2 3	(()*()	
16	At any time during calendar year 2018, did the foundation have an interest in or a signature or other authority		Yes	No
	over a bank, securities, or other financial account in a foreign country?	16		Х
	See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes," enter the	THE IS		
	name of the foreign country	175.00	teriller.	
Part	VII-B Statements Regarding Activities for Which Form 4720 May Be Required	Trace and		
	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.	15.81	Yes	No
1a	During the year, did the foundation (either directly or indirectly):	2,110	4.	
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person? Yes X	lo		
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a			
		lo		
		lo	1224	
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? Yes X	io		
	(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)?			
		Ю		1857
	(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	344		
	termination of government service, if terminating within 90 days.)	10		
b	If any answer is "Yes" to 1a(1)–(6), did any of the acts fail to qualify under the exceptions described in			No.
_	Regulations section 53.4941(d)-3 or in a current notice regarding disaster assistance? See instructions	1b	N/A	1000
	Organizations relying on a current notice regarding disaster assistance, check here		INA	HEALT.
С	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that	7		112
	were not corrected before the first day of the tax year beginning in 2018?	1c	-electi	X
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private	1050	N. A.	1000
	operating foundation defined in section 4942(j)(3) or 4942(j)(5)):			
а	At the end of tax year 2018, did the foundation have any undistributed income (lines 6d and	1101		of the
	6e, Part XIII) for tax year(s) beginning before 2018?	lo 💮	7000	
	If "Yes," list the years • 20, 20, 20, 20	-2/6		
b	Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2)	1.00	Sure.	144
	(relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to	23.5		
	all years listed, answer "No" and attach statement—see instructions.)	2b	N/A	
С	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here.	SALE CONTRACTOR		
0 -	▶ 20 , 20 , 20 , 20		436	BES
3a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise	15 VI		
L	at any time during the year?	10		1 50
þ	If "Yes," did it have excess business holdings in 2018 as a result of (1) any purchase by the foundation or	1 1 3		
	disqualified persons after May 26, 1969; (2) the lapse of the 5-year period (or longer period approved by the			188
	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	-		11.2
4a	foundation had excess business holdings in 2018.) Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	3b	N/A	
b	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its	4a		X
	charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2018?	4b	6 1	v

, arr	VIES Statements Regarding Activities	IOI WAL	MOII I OITH -	T/ 20 11	lay be ke	quire	COLLECT	ueu)			
5a	During the year, did the foundation pay or incur an (1) Carry on propaganda, or otherwise attempt to i	y amour	nt to:				Yes	X No	100	Yes	No
	(2) Influence the outcome of any specific public ele		,		. ,,		∐ Tes	△ NO			
	directly or indirectly, any voter registration drive	?				# 8	Yes	X No	1,000		
	(3) Provide a grant to an individual for travel, study						Yes	X No			
	(4) Provide a grant to an organization other than a section 4945(d)(4)(A)? See instructions		ble, etc., orga			in 	Yes	X No			
	(5) Provide for any purpose other than religious, cl purposes, or for the prevention of cruelty to chi						Yes	X No			
b	If any answer is "Yes" to 5a(1)–(5), did any of the t						describe	d in			
	Regulations section 53.4945 or in a current notice							2.	5b	N/A	40==
	Organizations relying on a current notice regarding	disaste	er assistance,	check	here			▶ □	January January	3040	1683
С	If the answer is "Yes" to question 5a(4), does the for	oundatio	on claim exem	nption f	rom the tax		_				
	because it maintained expenditure responsibility for				- 10		Yes	∐ No			
6.	If "Yes," attach the statement required by Regulation										
6a	Did the foundation, during the year, receive any fur on a personal benefit contract?		•			ns	Yes	X No			
b	Did the foundation, during the year, pay premiums					efit con	_	[X] 140	6b		X
-	If "Yes" to 6b, file Form 8870.	, un cou	, or maneony,	on a p	ci soriai beli	CIII COII	macr.	. 80	OD	V2180	^
7a	At any time during the tax year, was the foundation a pa	arty to a i	prohibited tax s	shelter ti	ransaction?		Yes	X No			
b	If "Yes," did the foundation receive any proceeds of	r have a	any net incom	e attrib	utable to th	e transa		<u> </u>	7b	N/A	Charle L
8	Is the foundation subject to the section 4960 tax or remuneration or excess parachute payment(s) dur	n pavme	ent(s) of more	than \$	1.000.000 i	n		(Z)	1/4/15		6216
Part	VIII Information About Officers, Direct							X No		G# [[6]]	
I air	and Contractors	015, 11	usices, i o	unuan	UII WIAIIA	jers, r	ilgiliy P	alu Ell	ibioye	es,	
1	List all officers, directors, trustees, and foundar	tion ma	nagers and t	heir co	mpensatio	n. See	instructi	ons.			-
		(b) Title	e, and average	(c) Co	mpensation	(d)	Contribution	ns to	(e) Expe	ense acc	count
	(a) Name and address		rs per week ed to position		not paid, iter -0-)		oyee benefit erred compe			allowan	
	BARSAN	PRESI	IDENT								
	DX 742 MARSHFIELD, WI 54449		.50								
				_	0			_			
PO BO	E BARSAN	VICE-F	PRES								
DADD	DX 742 MARSHFIELD, WI 54449		PRES .20		0						
	DX 742 MARSHFIELD, WI 54449 ARA LEE	VICE-F	PRES .20 REAS		0						
РО ВО	DX 742 MARSHFIELD, WI 54449 ARA LEE DX 742 MARSHFIELD, WI 54449	SEC/T	PRES .20 REAS 2.00								
PO BO PETR	DX 742 MARSHFIELD, WI 54449 ARA LEE DX 742 MARSHFIELD, WI 54449 U MOROSAN		PRES .20 REAS 2.00 CTOR		0						
PO BO PETR PO BO	DX 742 MARSHFIELD, WI 54449 ARA LEE DX 742 MARSHFIELD, WI 54449 U MOROSAN DX 742 MARSHFIELD, WI 54449	SEC/T	PRES .20 REAS 2.00 CTOR .50	cluded	0	see ins	struction	s). If no	ne. ent	er	
PO BO PETR PO BO	DX 742 MARSHFIELD, WI 54449 ARA LEE DX 742 MARSHFIELD, WI 54449 U MOROSAN	SEC/T	PRES .20 REAS 2.00 CTOR .50	cluded	0	see ins	struction	s). If no	ne, ent	er	
PO BO PETR PO BO	DX 742 MARSHFIELD, WI 54449 ARA LEE DX 742 MARSHFIELD, WI 54449 U MOROSAN DX 742 MARSHFIELD, WI 54449 Compensation of five highest-paid employees (SEC/T	PRES .20 REAS 2.00 CTOR .50	verage reek	0		(d) Contrib employee plans and compen	outions to benefit deferred	(e) Expe		
PO BO PETR PO BO	DX 742 MARSHFIELD, WI 54449 ARA LEE DX 742 MARSHFIELD, WI 54449 U MOROSAN DX 742 MARSHFIELD, WI 54449 Compensation of five highest-paid employees ("NONE."	SEC/T	PRES .20 REAS 2.00 CTOR .50 han those ind	verage reek	0 0 0 on line 1 —		(d) Contrib employee plans and	outions to benefit deferred	(e) Expe	ense acc	
PO BO PETR PO BO 2	DX 742 MARSHFIELD, WI 54449 ARA LEE DX 742 MARSHFIELD, WI 54449 U MOROSAN DX 742 MARSHFIELD, WI 54449 Compensation of five highest-paid employees ("NONE."	SEC/T	PRES .20 REAS 2.00 CTOR .50 han those ind	verage reek	0 0 0 on line 1 —		(d) Contrib employee plans and	outions to benefit deferred	(e) Expe	ense acc	
PO BO PETR PO BO 2	DX 742 MARSHFIELD, WI 54449 ARA LEE DX 742 MARSHFIELD, WI 54449 U MOROSAN DX 742 MARSHFIELD, WI 54449 Compensation of five highest-paid employees ("NONE."	SEC/T	PRES .20 REAS 2.00 CTOR .50 han those ind	verage reek	0 0 0 on line 1 —		(d) Contrib employee plans and	outions to benefit deferred	(e) Expe	ense acc	
PO BO PETR PO BO 2	DX 742 MARSHFIELD, WI 54449 ARA LEE DX 742 MARSHFIELD, WI 54449 U MOROSAN DX 742 MARSHFIELD, WI 54449 Compensation of five highest-paid employees ("NONE."	SEC/T	PRES .20 REAS 2.00 CTOR .50 han those ind	verage reek	0 0 0 on line 1 —		(d) Contrib employee plans and	outions to benefit deferred	(e) Expe	ense acc	
PO BO PETR PO BO 2	DX 742 MARSHFIELD, WI 54449 ARA LEE DX 742 MARSHFIELD, WI 54449 U MOROSAN DX 742 MARSHFIELD, WI 54449 Compensation of five highest-paid employees ("NONE."	SEC/T	PRES .20 REAS 2.00 CTOR .50 han those ind	verage reek	0 0 0 on line 1 —		(d) Contrib employee plans and	outions to benefit deferred	(e) Expe	ense acc	
PO BO PETR PO BO 2	DX 742 MARSHFIELD, WI 54449 ARA LEE DX 742 MARSHFIELD, WI 54449 U MOROSAN DX 742 MARSHFIELD, WI 54449 Compensation of five highest-paid employees ("NONE."	SEC/T	PRES .20 REAS 2.00 CTOR .50 han those ind	verage reek	0 0 0 on line 1 —		(d) Contrib employee plans and	outions to benefit deferred	(e) Expe	ense acc	
PO BO PETR PO BO 2	DX 742 MARSHFIELD, WI 54449 ARA LEE DX 742 MARSHFIELD, WI 54449 U MOROSAN DX 742 MARSHFIELD, WI 54449 Compensation of five highest-paid employees ("NONE."	SEC/T	PRES .20 REAS 2.00 CTOR .50 han those inc	verage reek	0 0 0 on line 1 —		(d) Contrib employee plans and	outions to benefit deferred	(e) Expe	ense acc	

Part	Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid En and Contractors (continued)	nployees,
_ 3	Five highest-paid independent contractors for professional services. See instructions. If none, enter "NON	E."
	(a) Name and address of each person paid more than \$50,000 (b) Type of service	(c) Compensation
NONE	***************************************	

Tatal	250 000 r	
lotai	number of others receiving over \$50,000 for professional services	
Par	t IX-A Summary of Direct Charitable Activities	
organ	e foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of izations and other beneficiaries served, conferences convened, research papers produced, etc.	Expenses
**	BISERICA PENTICOSTALA EMANUEL CHURCH IN SIBIU, ROMANIA. RAYS OF HOPE INCLUDES A FOTAL OF 50 FAMILIES IN 5 DIFFERENT RURAL COMMUNITIES RECEIVED CHRISTMAS GIFTS INCLUDING BASIC FOOD PACKAGES, CLOTHING, WASHING MACHINES, AND WOOD FOR HEATING THEIR HOMES.	9,000
	WINTER HEATING FOR 11 FAMILIES, 2 SINGLE WOMEN, AND COMMUNITY CENTER	9,000
3 <u>.</u>	UNDATIA UMANITARA IN RADAUTI, ROMANIA	
4		2,800
7		
	IX-B Summary of Program-Related Investments (see instructions)	
	oribe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2.	Amount
35		
2		
_	her program-related investments, See instructions,	1
3		
Total.	Add lines 1 through 3	0

Form **990-PF** (2018)

Part		n foundation	ons,
1	see instructions.) Fair market value of assets not used (or held for use) directly in carrying out charitable, etc.,	Cox	
'	purposes:		
а	Average monthly fair market value of securities	4.0	
b	Average of monthly cash balances	1a 1b	0
C	Fair market value of all other assets (see instructions)	1c	15,710
d	Total (add lines 1a, b, and c)	1d	45.740
e	Reduction claimed for blockage or other factors reported on lines 1a and	10	15,710
-	1c (attach detailed explanation)		
2	Acquisition indebtedness applicable to line 1 assets	2	
3	Subtract line 2 from line 1d	3	15,710
4	Cash deemed held for charitable activities. Enter 1½ % of line 3 (for greater amount, see	-3	15,710
7	instructions)	4	226
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	236
6	Minimum investment return. Enter 5% of line 5	6	15,474
Part	XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundation		774
a.c	and certain foreign organizations, check here	7113	
1	Minimum investment return from Part X, line 6	1	
2a	Tax on investment income for 2018 from Part VI, line 5	(4)	
b	Income tax for 2018. (This does not include the tax from Part VI.)		
С	Add lines 2a and 2b	2c	
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	
4	Recoveries of amounts treated as qualifying distributions	4	
5	Add lines 3 and 4	5	0
6	Deduction from distributable amount (see instructions)	6	
7	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII,		
	line 1	7	0
Part	XII Qualifying Distributions (see instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:	NO.	
а	Expenses, contributions, gifts, etc.—total from Part I, column (d), line 26	1a	12,348
b	Program-related investments—total from Part IX-B	1b	
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:		
а	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	12,348
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	
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	12,348
	Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whe	ther the four	ndation
	qualifies for the section 4940(e) reduction of tax in those years.		

Form 9	90-PF (2018) THE BARSAN FOUNDATION INC			81-4	1691585 Page 9
Part	XIII Undistributed Income (see instruction	s)			N/A
1	Distributable amount for 2018 from Part XI,	(a) Corpus	(b) Years prior to 2017	(c) 2017	(d) 2018
2	line 7				
2	Undistributed income, if any, as of the end of 2018:				
a b	Enter amount for 2017 only			U	We vale was
3	Total for prior years: 20, 20, 20, 20				
a	From 2013				
b	From 2014				
c	From 2014				
d	From 2016				
e	From 2017		Medical Soleties	make the se	gal sydProsts Fig.
f	Total of lines 3a through e	0			2.1 1.10.10.10.10.10.10.10.10.10.10.10.10.10
4	Qualifying distributions for 2018 from Part XII,	CONTRACTOR OF THE PERSON AND THE PER	aretwo week (huma)		
	line 4: ▶ \$				
а	Applied to 2017, but not more than line 2a			AND THE BUILDING THE PARTY OF T	
b	Applied to undistributed income of prior years	MAKE WAYES ASK			Market Revision
	(Election required—see instructions)				
С	Treated as distributions out of corpus (Election				A STATE OF S
	required—see instructions)		patrick like ores		
d	Applied to 2018 distributable amount 🗼 👢	yoli Whiswall (fill			
е	Remaining amount distributed out of corpus .				
5	Excess distributions carryover applied to 2018.				
	(If an amount appears in column (d), the same				
_	amount must be shown in column (a).)				
6	Enter the net total of each column as				
_	indicated below:				
a	Corpus. Add lines 3f, 4c, and 4e. Subtract line 5	0	icavilla guini equita Mille,		
b	Prior years' undistributed income. Subtract line 4b from line 2b				
С	Enter the amount of prior years' undistributed		0		
·	income for which a notice of deficiency has	A STATE OF THE STA			
	been issued, or on which the section 4942(a)				and where By every
	tax has been previously assessed	NEW YORK ON THE STATE			
d	Subtract line 6c from line 6b. Taxable				Michigan March
	amount—see instructions				
е	Undistributed income for 2017. Subtract line		da se de dicesso		TO THE ATTENDED
	4a from line 2a. Taxable amount—see				
	instructions			О	Philippe III A CAN DE LIE
f	Undistributed income for 2018, Subtract lines	ATT COLUMN			
	4d and 5 from line 1. This amount must be				
	distributed in 2019				0
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				
0	required—see instructions)			21/1/2011 - 2011/4	
8	Excess distributions carryover from 2013 not				
9	applied on line 5 or line 7 (see instructions) Excess distributions carryover to 2019.				
3	Subtract lines 7 and 8 from line 6a			2 ° = 1	
10	Analysis of line 9:				
а	Excess from 2014				
b	Excess from 2014				
c	Excess from 2016				
d	Excess from 2017			1 - 6 2 1° 188	
-	Excess from 2018			ASIL LAND	

Part	XIV Private Operating Foundati	ons (see instruc	tions and Part V	II-A, question 9)		
1a	If the foundation has received a ruling or	determination lett	er that it is a private	e operating		
	foundation, and the ruling is effective for	2018, enter the da	ite of the ruling			
b	Check box to indicate whether the foundatio				X 4942(j)(3) or 4942(j)(5)
2a	Enter the lesser of the adjusted net	Tax year		Prior 3 years		
	income from Part I or the minimum	(a) 2018	(b) 2017	(c) 2016	(d) 2015	(e) Total
	investment return from Part X for each year listed .					0
b	85% of line 2a					0
С	Qualifying distributions from Part XII.					
	line 4 for each year listed	12,348	7,159			19,507
d	Amounts included in line 2c not used directly	,	.,,,,,,,			10,007
-	for active conduct of exempt activities					0
е	Qualifying distributions made directly					
•	for active conduct of exempt activities.					
	Subtract line 2d from line 2c	12,348	7,159			19,507
3	Complete 3a, b, or c for the	12,010	7,100			19,507
-	alternative test relied upon:					
а	"Assets" alternative test—enter:					
	(1) Value of all assets					0
	(2) Value of assets qualifying under					
	section 4942(j)(3)(B)(i)					0
b	"Endowment" alternative test—enter 2/3					
	of minimum investment return shown in Part X, line 6 for each year listed	516	688			1,204
С	"Support" alternative test—enter:					1,201
	(1) Total support other than gross					
	investment income (interest,					
	dividends, rents, payments on securities loans (section					
	512(a)(5)), or royalties)					0
	(2) Support from general public					
	and 5 or more exempt organizations as provided in					
	section 4942(j)(3)(B)(iii)					0
	(3) Largest amount of support from					
	an exempt organization					0
	(4) Gross investment income					0
Part		(Complete this	part only if the	foundation ha	d \$5.000 or mo	
	any time during the years				40,000 01 1110	
1	Information Regarding Foundation Ma					
а	List any managers of the foundation who	have contributed	more than 2% of the	he total contributio	ns received by the	foundation
	before the close of any tax year (but only	if they have contr	ibuted more than \$	\$5,000). (See sect	on 507(d)(2).)	
BARB	ARA LEE DANIEL LL	ANOS	ESTERA LLA	ANOS	VASILE BARS	SAN
b	List any managers of the foundation who	own 10% or more				
	ownership of a partnership or other entity	y) of which the four	ndation has a 10%	or greater interes	t.	
NONE						
2	Information Regarding Contribution, C	Grant, Gift, Loan,	Scholarship, etc.,	Programs:		
	Check here ► X if the foundation onl	y makes contributi	ons to preselected	charitable organiz	ations and does no	ot accept
	unsolicited requests for funds. If the four	ndation makes gifts	, grants, etc., to in	dividuals or organ	izations under othe	r
	conditions, complete items 2a, b, c, and	d. See instructions				
а	The name, address, and telephone num	ber or email addre	ss of the person to	whom application	s should be addres	ssed:
b	The form in which applications should be	e submitted and inf	ormation and mate	erials they should i	nclude:	
					9)	
С	Any submission deadlines;					
d	Any restrictions or limitations on awards,	such as by geogra	aphical areas, cha	ritable fields, kinds	of institutions, or o	other
	factors:					

Supplementary Information (continu	ued)			
3 Grants and Contributions Paid During t	he Year or Approve	d for Fut	ture Payment	
Recipient	If recipient is an individual, show any relationship to	Foundation	Purpose of grant or	
Name and address (home or business)	any foundation manager or substantial contributor	status of recipient	contribution	Amount
a Paid during the year BISERICA PENTICOSTALA EMANUEL STR. FRATII GRACHI, NR. 3		PC	Assistance to low income families	9,000
SIBIU Romania FUNDATIA UMANITARA		PC	Assistance to low income families	2,800
RADAUTI Romania				
b Approved for future payment		g (0 (0 - R) 34	я ся да ин кы 🕨 🗦 За	11,800
Total	50 M NO NO NO NO NO NO NO NO NO	3 5043 19 47 20	24	

0

3b

Pa	rt X\	/I-A Analysis of Income-Producing Ad	ctivities				Page 12
		ess amounts unless otherwise indicated.		isiness income	Excluded by sect	ion 512, 513, or 514	
1	Pro	gram service revenue:	(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	(e) Related or exempt function income (See instructions.)
	a						
	b						
	С						
	d .						
	e ,						
	f a						
		Fees and contracts from government agencies					
2		mbership dues and assessments					
3		rest on savings and temporary cash investments .					
4		dends and interest from securities					
5		rental income or (loss) from real estate:			I Care COVERNO		
		Debt-financed property					
		Not debt-financed property					
6		rental income or (loss) from personal property					
7		er investment income					
8 9		or (loss) from sales of assets other than inventory	-				
10		income or (loss) from special events					
11							
	b	er revenue: a		~	-	<u> </u>	
	C				-		
	d						
	e						
12		total. Add columns (b), (d), and (e)	SHILL THE SHIPLE SEE	0	Cauchy III	0	
13	Tota	al. Add line 12, columns (b), (d), and (e)	BLOCK HEWSENDOWN	1 21		13	
(See	worl	ksheet in line 13 instructions to verify calculations	·)			10	
	rt XV			ent of Exemp	t Purposes		
		Explain below how each activity for which incom accomplishment of the foundation's exempt pur	poses (other than	by providing fund	s for such purpos	es). (See instructi	ons.)
_							
_							
				***************************************	,		

Part XVII Information Regarding Transfers to and Transactions and Relationships With Noncharitable Exempt Organizations

		Exempt Oil	garrizations										
1	Did the organization directly or indirectly engage in any of the following with any other organization described									in the	Yes	No	
	in se	ection 501(c) (other	er than section 501	(c)(3) orga	nizations) or i	n section	n 527, relat	ling to politic	al			1570	91
	organizations?								- 3 3				
а	Transfers from the reporting foundation to a noncharitable exempt organization of:												
	(1) Cash							1a(1)					
	(2) C	Other assets		8 - 8					- 00 NO De	* 0*0 *	1a(2)		
þ	Othe	er transactions:										P4.0	Agt.
	(1) Sales of assets to a noncharitable exempt organization							W 720 W	1b(1)				
	(2) Purchases of assets from a noncharitable exempt organization							1b(2)					
	(3) Rental of facilities, equipment, or other assets							1b(3)					
	(4) Reimbursement arrangements							1b(4)					
	(5) Loans or loan guarantees							1b(5)	-	_			
	(6) Performance of services or membership or fundraising solicitations						* * *	1b(6)	-	_			
С	Sharing of facilities, equipment, mailing lists, other assets, or paid employees							1c	_				
d	If the	answer to any of the	he above is "Yes," co	mplete the	following sche	edule. Co	lumn (b) sh	ould always	show the fa	air market			
	value	of the goods, othe	er assets, or services	aiven by th	ne reportina for	undation.	If the found	dation receive	ed less that	n fair marl	ket		
	value	in any transaction	or sharing arrangen	nent, show i	in column (d) t	he value	of the good	ls, other asse	ts, or servi	ces receiv	ved.		
(a) Line		(b) Amount involved			kempt organizatio							naman	te te
							(d) Description of transfers, transactions, and sha				igemen		
	_											_	
	\neg												
	\neg												
											_		
	_										_	-	-
											_		
	_										-		
	_												
	\neg												
	\neg												
	\dashv												
2a	le the	foundation direc	tly or indirectly affili	inted with	or roleted to								_
24	descr	ribed in section 50	01(c) (other than se	ection 501/	01 related to,	one or r	nore tax-ex	kempt organ	izations		1 v.s. 1		_
b	If "Ye	s" complete the	following schedule.	300,011,0011	0)(0)) 01 111 30	200011 02	(f. f. a)	85		n or	Yes	N	U
		(a) Name of organi		T	(h) Type of ora	onization			(-) Di-1		17800		
		(a) Hamb of organi	izadon		(b) Type of organization			(c) Description of relationship					
				+									
				+									
				-									
-	Under	penalties of periury 1 decl	are that I have examined this	return including	1 2000mpanying coh	adulae and at	olomonts, and to	the best of mulu-		that this tare			
Sian	Under penalties of penury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge.										-		
Sign	1/x Klin						May the IR			RS discuss			
Here	Signature of officer or trustee				PRESID			SIDENT See instru			reparer shown below? uctions X Yes No		
	oly	Print/Type preparer's		Darri	Date	Title		I D		_			
Paid				Prepare	er's signature	20		Date	Che	ck 🔲 if	PTIN		
repar	rer MICHELLE L SOCHA				11 Juchelle Joseph			3-3-3-y			P00617	7436	
Jse Or		Firm's name BREMMER INC d/b/a/ DATA FLOW CORP					Firm's EIN	7 10 7 42 10 27 - 117	33107				
								Phone no.	(715)	387-17			
											000	DE	

Form 990-PF

Tax Year 2018

Part 1: Line 23:

The Barsan Foundation Inc

FEIN: 81-4691585

Other Expenses:

PO Box Rental	\$	60.00
Website Expense	\$	337.60
Office Expense	\$	110.53
Bank Service Charges	Ś	39.45

Total Other Expenses \$ 547.58

(Rev. January 2019)

Department of the Treasury Internal Revenue Service

Application for Automatic Extension of Time To File an **Exempt Organization Return**

File a separate application for each return. Go to www.irs.gov/Form8868 for the latest information. OMB No. 1545-1709

Electronic filing (e-file). You can electronically file Form 8868 to request a 6-month automatic extension of time to file any of the forms listed below with the exception of Form 8870, Information Return for Transfers Associated With Certain Personal Benefit Contracts, for which an extension request must be sent to the IRS in paper format (see instructions). For more details on the electronic filing of this form visit www.irs.gov/e-file-providers/o-file for abarities

	mg of the form, viole www.iia.gov/e-iiie-prot	vider Ste-file	-tor-criarities-and-non-profits.					
Automatic	6-Month Extension of Time. Only s			26.5				
All corporati	ons required to file an income tax return oth	per than Ec	orm 900 T (including 1120 C flore)					
trusts must i	use Form 7004 to request an extension of t	ime to file i	noone tox returns	artnerships, R	EMICs, an	d		
	and a sum and a second of the	ine to the t		V.S. 182 1				
Туре ог	pe or Name of exempt organization or other filer, see instructions. Enter filer's identifying the properties of the pro							
print	THE PARSAN FOLINDATION INC.					ployer identification number (EIN) or		
File by the	Number street and reem or wife and If a DO I							
due date for	PO BOX 742					SN)		
filing your return. See	City, town or post office, state, and ZIP code.							
instructions.	MARSHFIELD, WI 54449							
Enter the Re	eturn Code for the return that this application	n is for (file	a separate application for each return	rn)		. 04		
Application								
Is For		Return	Application					
	F 000 F7	Code	is For					
	r Form 990-EZ	01	Form 990-T (corporation)	07				
Form 990-B		02	Form 1041-A	08				
Form 4720		03	Form 4720 (other than individual)					
Form 990-P		04	Form 5227					
Form 990-1	(sec. 401(a) or 408(a) trust) (trust other than above)	05 06	Form 6069 Form 8870	11				
FOIII 990-1			12					
Telephone If the orga If this is for the whole	e No. ► 715-223-7893 anization does not have an office or place or a Group Return, enter the organization's group, check this box	four aigit G If it is for p on is for.	art of the group, check this box		lf ▶ar	this is nd attach a		
1 I reque	est an automatic 6-month extension of time	until	11/15 , 20 19 , to fi	le the exempt	organizatio	on return		
101 1116	organization named above. The extension	is for the o	organization's return for:		•			
► X	calendar year 20 <u>18</u> or							
▶□	tax year beginning	,	20					
. Ш	tax year beginning	, 4	20, and ending		, 20	· · · · · ·		
Ch	ax year entered in line 1 is for less than 12 ange in accounting period				eturn			
3a If this a	application is for Forms 990-BL, 990-PF, 99	90-T, 4720,	or 6069, enter the tentative tax, less					
any no	nrefundable credits. See instructions.			3a	\$	0		
b If this a	application is for Forms 990-PF, 990-T, 472							
estima	\$	0						
c Baland	ce due. Subtract line 3b from line 3a. Includ	de your pay	ment with this form, if required by	3b	- X	U		
using E	3c	\$	0					
Caution: If you	u are going to make an electronic funds withdra	wal (direct o	debit) with this Form 8868, see Form 84!	53-EO and Form	n 8870-FO	0		
payment instru	ctions.				50, 0-20			