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Return of Organization Exempt From Income Tax

2008

Department of the Treasury
Internal Revenue Service

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except black lung benefit trust or private foundation)

Open to Public Inspection

The organization may have to use a copy of this return to satisfy state reporting requirements.

A For the 2008 calendar year, or tax year beginning OCT 1, 2008 **and ending** SEP 30, 2009

B Check if applicable <input type="checkbox"/> Address change <input type="checkbox"/> Name change <input type="checkbox"/> Initial return <input type="checkbox"/> Termination <input type="checkbox"/> Amended return <input type="checkbox"/> Application pending	Please use IRS label or print or type See Specific Instructions	C Name of organization <u>PAUL'S PANTRY, INC.</u> Doing Business As Number and street (or P O box if mail is not delivered to street address) Room/suite <u>1529 LEO FRIGO WAY</u> City or town, state or country, and ZIP + 4 <u>GREEN BAY, WI 54302</u> F Name and address of principal officer: <u>VINCENT NICKLAS</u> <u>1744 WESTFIELD AVE, GREEN BAY, WI 54303</u>	D Employer identification number <u>39-1708806</u> E Telephone number <u>920-435-4040</u> G Gross receipts \$ <u>1297538.</u> H(a) Is this a group return for affiliates? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No H(b) Are all affiliates included? <input type="checkbox"/> Yes <input type="checkbox"/> No If "No," attach a list. (see instructions) H(c) Group exemption number ▶
I Tax-exempt status: <input checked="" type="checkbox"/> 501(c) (<u>3</u>) ◀ (insert no.) <input type="checkbox"/> 4947(a)(1) or <input type="checkbox"/> 527		J Website: ▶ <u>N/A</u>	
K Type of organization <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> Trust <input type="checkbox"/> Association <input type="checkbox"/> Other ▶		L Year of formation: <u>1991</u> M State of legal domicile <u>WI</u>	

Part I Summary

1	Briefly describe the organization's mission or most significant activities: <u>CHARITY: PROVIDE FOOD FOR THE POOR</u>		
2	Check this box <input type="checkbox"/> if the organization discontinued its operations or disposed of more than 25% of its assets.		
3	Number of voting members of the governing body (Part VI, line 1a)	3	9
4	Number of independent voting members of the governing body (Part VI, line 1b)	4	1
5	Total number of employees (Part V, line 2a)	5	10
6	Total number of volunteers (estimate if necessary)	6	5000
7a	Total gross unrelated business revenue from Part VIII, line 12, column (C)	7a	167569.
7b	Net unrelated business taxable income from Form 990-T, line 34	7b	0.
Revenue	8 Contributions and grants (Part VIII, line 1h)	Prior Year	Current Year
	9 Professional service revenue (Part VIII, line 2g)	1206587.	1129969.
	10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)	144219.	122381.
	11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	-228515.	45188.
	12 Total revenue. Add lines 8 through 11 (must equal Part VIII, column (A), line 12)	1122291.	1297538.
Expenses	13 Grants and similar amounts paid (Part IX, column (A), lines 1-3)		
	14 Compensation of officers or directors (Part IX, column (A), line 4)		
	15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	307076.	347561.
	16a Professional fundraising fees (Part IX, column (A), line 11e)		
	b Total fundraising expenses (Part IX, column (D), line 25) ▶ <u>21392.</u>		
	17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24f)	509766.	436120.
18 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	816842.	783681.	
19 Revenue less expenses. Subtract line 18 from line 12	305449.	513857.	
Net Assets or Fund Balances	20 Total assets (Part X, line 16)	Beginning of Year	End of Year
	21 Total liabilities (Part X, line 26)	4893972.	5407829.
	22 Net assets or fund balances. Subtract line 21 from line 20	4893972.	5407829.

Part II Signature Block

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge.

Sign Here	Signature of officer: <u>Vincent Nicklas</u> Type or print name and title: <u>VINCENT NICKLAS, PRESIDENT</u>	Date: <u>4/5/10</u>	
Paid Preparer's Use Only	Preparer's signature: <u>Kathleen M Lemons</u> Firm's name (or yours if self-employed), address, and ZIP + 4: <u>HERMANS & ASSOCIATES, CPA'S SC</u> <u>1901 S WEBSTER AVE, SUITE 3</u> <u>GREEN BAY, WI 54301</u>	Date: <u>3/21/10</u> Check if self-employed: <input type="checkbox"/> Preparer's identifying number (see instructions): <u>PC0118408</u>	EIN: <u>39-1421794</u> Phone no: <u>920-435-6121</u>

May the IRS discuss this return with the preparer shown above? (see instructions) Yes No

SCANNED MAY 04 2010

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Part III Statement of Program Service Accomplishments (see instructions)

1 Briefly describe the organization's mission: NONE

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

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

4 Describe the exempt purpose achievements for each of the organization's three largest program services by expenses. Section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported.

4a (Code:) (Expenses \$ 762289 . including grants of \$) (Revenue \$) ORGANIZATION OPERATES A VOLUNTEER FOOD PANTRY DISPENSING CONTRIBUTED AND PURCHASED FOOD. ALL EXPENSES ARE RELATED TO THE PANTRY AND DELIVERY OF FOOD TO THE POOR.

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

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

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

4e Total program service expenses \$ 762289 . (Must equal Part IX, Line 25, column (B).)

Part IV Checklist of Required Schedules

Table with 3 columns: Question number, Question text, Yes, No. Contains 27 rows of questions and their corresponding 'Yes' or 'No' responses (e.g., '1 Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?' with 'Yes' marked 'X').

Part IV Checklist of Required Schedules (continued)

	Yes	No
28 During the tax year, did any person who is a current or former officer, director, trustee, or key employee:		
a Have a direct business relationship with the organization (other than as an officer, director, trustee, or employee), or an indirect business relationship through ownership of more than 35% in another entity (individually or collectively with other person(s) listed in Part VII, Section A)? <i>If "Yes," complete Schedule L, Part IV</i>		X
b Have a family member who had a direct or indirect business relationship with the organization? <i>If "Yes," complete Schedule L, Part IV</i>		X
c Serve as an officer, director, trustee, key employee, partner, or member of an entity (or a shareholder of a professional corporation) doing business with the organization? <i>If "Yes," complete Schedule L, Part IV</i>		X
29 Did the organization receive more than \$25,000 in non-cash contributions? <i>If "Yes," complete Schedule M</i>	X	
30 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M</i>		X
31 Did the organization liquidate, terminate, or dissolve and cease operations? <i>If "Yes," complete Schedule N, Part I</i>		X
32 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If "Yes," complete Schedule N, Part II</i>		X
33 Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? <i>If "Yes," complete Schedule R, Part I</i>		X
34 Was the organization related to any tax-exempt or taxable entity? <i>If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1</i>	X	
35 Is any related organization a controlled entity within the meaning of section 512(b)(13)? <i>If "Yes," complete Schedule R, Part V, line 2</i>		X
36 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? <i>If "Yes," complete Schedule R, Part V, line 2</i>		X
37 Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? <i>If "Yes," complete Schedule R, Part VI</i>		X

Form 990 (2008)

Part VI Governance, Management, and Disclosure (Sections A, B, and C request information about policies not required by the Internal Revenue Code.)

Section A. Governing Body and Management

For each "Yes" response to lines 2-7b below, and for a "No" response to lines 8 or 9b below, describe the circumstances, processes, or changes in Schedule O. See instructions.

	Yes	No
1a Enter the number of voting members of the governing body		9
1b Enter the number of voting members that are independent		1
2 Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?		X
3 Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person?		X
4 Did the organization make any significant changes to its organizational documents since the prior Form 990 was filed?		X
5 Did the organization become aware during the year of a material diversion of the organization's assets?		X
6 Does the organization have members or stockholders?		X
7a Does the organization have members, stockholders, or other persons who may elect one or more members of the governing body?		X
7b Are any decisions of the governing body subject to approval by members, stockholders, or other persons?		X
8 Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:		
a The governing body?	X	
b Each committee with authority to act on behalf of the governing body?	X	
9a Does the organization have local chapters, branches, or affiliates?		X
b If "Yes," does the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with those of the organization?		
10 Was a copy of the Form 990 provided to the organization's governing body before it was filed? All organizations must describe in Schedule O the process, if any, the organization uses to review the Form 990	X	
11 Is there any officer, director or trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O		X

Section B. Policies

	Yes	No
12a Does the organization have a written conflict of interest policy? If "No," go to line 13		X
b Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts?		
c Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this is done		
13 Does the organization have a written whistleblower policy?		X
14 Does the organization have a written document retention and destruction policy?		X
15 Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision:		
a The organization's CEO, Executive Director, or top management official?		X
b Other officers or key employees of the organization? Describe the process in Schedule O. (see instructions)		X
16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?		X
b If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the organization's exempt status with respect to such arrangements?		

Section C. Disclosure

- 17** List the states with which a copy of this Form 990 is required to be filed **WI**
- 18** Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection. Indicate how you make these available. Check all that apply.
 Own website Another's website Upon request
- 19** Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of interest policy, and financial statements available to the public.
- 20** State the name, physical address, and telephone number of the person who possesses the books and records of the organization: **VINCENT NICKLAS - (920) 435-4040**
1529 LEO FRIGO WAY, GREEN BAY, WI 54302

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

Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

1a Complete this table for all persons required to be listed. Use Schedule J-2 if additional space is needed.

• List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation, and **current** key employees. Enter -0- in columns (D), (E), and (F) if no compensation was paid.

• List the organization's five **current** highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.

• List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations

• List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

List persons in the following order: individual trustees or directors; institutional trustees; officers; key employees; highest compensated employees; and former such persons.

Check this box if the organization did not compensate any officer, director, trustee, or key employee.

(A) Name and Title	(B) Average hours per week	(C) Position (check all that apply)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
BRIAN MALONEY DIRECTOR	1.00	X					0.	0.	0.	
BILL STYLE DIRECTOR	1.00	X					0.	0.	0.	
JOHN BERGER DIRECTOR	1.00	X					0.	0.	0.	
ALVEDA YASHINSKY DIRECTOR	1.00	X					0.	0.	0.	
DAN WILLIAMS DIRECTOR	1.00	X					0.	0.	0.	
VINCENT NICKLAS PRESIDENT	3.00			X			0.	0.	0.	
CLAIRE SCHIEFELBEIN SECRETARY	3.00			X			0.	0.	0.	
JOHN BALZA TREASURER	3.00			X			0.	0.	0.	
CHARLOTTE RONDOU VICE-PRESIDENT	2.00			X			0.	0.	0.	
CRAIG ROBBINS FOOD PANTRY CHAIRPERSON	40.00				X		54014.	0.	0.	

Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)

(A) Name and title	(B) Average hours per week	(C) Position (check all that apply)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
1b Total								54014.	0.	0.

2 Total number of individuals (including those in 1a) who received more than \$100,000 in reportable compensation from the organization ▶ 0

	Yes	No
3 Did the organization list any former officer, director or trustee, key employee, or highest compensated employee on line 1a? If "Yes," complete Schedule J for such individual		X
4 For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? If "Yes," complete Schedule J for such individual		X
5 Did any person listed on line 1a receive or accrue compensation from any unrelated organization for services rendered to the organization? If "Yes," complete Schedule J for such person		X

Section B. Independent Contractors

1 Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization. NONE

(A) Name and business address	(B) Description of services	(C) Compensation

2 Total number of independent contractors (including those in 1) who received more than \$100,000 in compensation from the organization ▶ 0

Part VIII Statement of Revenue		(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514	
Contributions, gifts, grants and other similar amounts	1 a Federated campaigns	1a				
	b Membership dues	1b				
	c Fundraising events	1c				
	d Related organizations	1d				
	e Government grants (contributions)	1e				
	f All other contributions, gifts, grants, and similar amounts not included above	1f	1129969.			
	g Noncash contributions included in lines 1a-1f \$					
	h Total. Add lines 1a-1f		1129969.			
Program Service Revenue	2 a	Business Code				
	b					
	c					
	d					
	e					
	f All other program service revenue					
	g Total. Add lines 2a-2f					
Other Revenue	3 Investment income (including dividends, interest, and other similar amounts)		122381.	122381.		
	4 Income from investment of tax-exempt bond proceeds					
	5 Royalties					
	6 a Gross Rents	(i) Real				
		(ii) Personal				
		b Less: rental expenses				
		c Rental income or (loss)				
	d Net rental income or (loss)					
	7 a Gross amount from sales of assets other than inventory	(i) Securities				
		(ii) Other				
		b Less: cost or other basis and sales expenses				
		c Gain or (loss)				
	d Net gain or (loss)					
	8 a Gross income from fundraising events (not including \$ _____ of contributions reported on line 1c). See Part IV, line 18	a				
		b Less: direct expenses	b			
c Net income or (loss) from fundraising events						
9 a Gross income from gaming activities. See Part IV, line 19	a					
	b Less: direct expenses	b				
	c Net income or (loss) from gaming activities					
10 a Gross sales of inventory, less returns and allowances	a					
	b Less: cost of goods sold	b				
	c Net income or (loss) from sales of inventory					
Miscellaneous Revenue		Business Code				
11 a NET REALIZED AND UNREA	523000	48957.		48957.		
b INVESTMENT RETURN (LOS	523000	-3769.		-3769.		
c						
d All other revenue						
e Total. Add lines 11a-11d		45188.				
12 Total Revenue. Add lines 1h, 2g, 3, 4, 5, 6d, 7d, 8c, 9c, 10c, and 11e		1297538.	0.	167569.	0.	

Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns.
 All other organizations must complete column (A) but are not required to complete columns (B), (C), and (D).

Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1 Grants and other assistance to governments and organizations in the U S See Part IV, line 21				
2 Grants and other assistance to individuals in the U.S. See Part IV, line 22				
3 Grants and other assistance to governments, organizations, and individuals outside the U.S. See Part IV, lines 15 and 16				
4 Benefits paid to or for members				
5 Compensation of current officers, directors, trustees, and key employees				
6 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
7 Other salaries and wages	291712.	291712.		
8 Pension plan contributions (include section 401(k) and section 403(b) employer contributions)				
9 Other employee benefits	33270.	33270.		
10 Payroll taxes	22579.	22579.		
11 Fees for services (non-employees):				
a Management				
b Legal				
c Accounting	5000.	5000.		
d Lobbying				
e Professional fundraising services See Part IV, line 17				
f Investment management fees				
g Other				
12 Advertising and promotion				
13 Office expenses	2182.	2182.		
14 Information technology	654.	654.		
15 Royalties				
16 Occupancy	69922.	69922.		
17 Travel				
18 Payments of travel or entertainment expenses for any federal, state, or local public officials				
19 Conferences, conventions, and meetings				
20 Interest				
21 Payments to affiliates				
22 Depreciation, depletion, and amortization	96219.	96219.		
23 Insurance	14126.	14126.		
24 Other expenses Itemize expenses not covered above (Expenses grouped together and labeled miscellaneous may not exceed 5% of total expenses shown on line 25 below.)				
a FOOD PURCHASES & SUPPLI	150502.	150502.		
b EQUIPMENT RENTAL & MAIN	30481.	30481.		
c GAS & OIL	29660.	29660.		
d FUND RAISING	21392.			21392.
e VEHICLE INSURANCE & LIC	10209.	10209.		
f All other expenses	5773.	5773.		
25 Total functional expenses. Add lines 1 through 24f	783681.	762289.	0.	21392.
26 Joint Costs. Check here <input type="checkbox"/> if following SOP 98-2. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation				

Part X Balance Sheet

		(A) Beginning of year		(B) End of year		
Assets	1	Cash - non-interest-bearing		1		
	2	Savings and temporary cash investments		362310.	2 176254.	
	3	Pledges and grants receivable, net			3	
	4	Accounts receivable, net			4	
	5	Receivables from current and former officers, directors, trustees, key employees, or other related parties. Complete Part II of Schedule L			5	
	6	Receivables from other disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B). Complete Part II of Schedule L			6	
	7	Notes and loans receivable, net			7	
	8	Inventories for sale or use			8	
	9	Prepaid expenses and deferred charges			9	
	10a	Land, buildings, and equipment: cost basis	10a	2458506.		
	b	Less: accumulated depreciation. Complete Part VI of Schedule D	10b	958587.	1509907.	10c 1499919.
	11	Investments - publicly traded securities			11	
	12	Investments - other securities. See Part IV, line 11		2399497.	12 3102199.	
	13	Investments - program-related. See Part IV, line 11			13	
	14	Intangible assets			14	
	15	Other assets. See Part IV, line 11		622258.	15 629457.	
16	Total assets. Add lines 1 through 15 (must equal line 34)		4893972.	16 5407829.		
Liabilities	17	Accounts payable and accrued expenses			17	
	18	Grants payable			18	
	19	Deferred revenue			19	
	20	Tax-exempt bond liabilities			20	
	21	Escrow account liability. Complete Part IV of Schedule D			21	
	22	Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L			22	
	23	Secured mortgages and notes payable to unrelated third parties			23	
	24	Unsecured notes and loans payable			24	
	25	Other liabilities. Complete Part X of Schedule D			25	
	26	Total liabilities. Add lines 17 through 25		0.	26 0.	
Net Assets or Fund Balances	Organizations that follow SFAS 117, check here <input type="checkbox"/> and complete lines 27 through 29, and lines 33 and 34.					
	27	Unrestricted net assets			27	
	28	Temporarily restricted net assets			28	
	29	Permanently restricted net assets			29	
	Organizations that do not follow SFAS 117, check here <input checked="" type="checkbox"/> and complete lines 30 through 34.					
	30	Capital stock or trust principal, or current funds		0.	30 0.	
	31	Paid-in or capital surplus, or land, building, or equipment fund		0.	31 0.	
	32	Retained earnings, endowment, accumulated income, or other funds		4893972.	32 5407829.	
33	Total net assets or fund balances		4893972.	33 5407829.		
34	Total liabilities and net assets/fund balances		4893972.	34 5407829.		

Part XI Financial Statements and Reporting

		Yes	No
1	Accounting method used to prepare the Form 990: <input type="checkbox"/> Cash <input type="checkbox"/> Accrual <input checked="" type="checkbox"/> Other		
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		X
b	Were the organization's financial statements audited by an independent accountant?	X	
c	If "Yes" to lines 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant?	X	
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?		X
b	If "Yes," did the organization undergo the required audit or audits?		

SCHEDULE A
(Form 990 or 990-EZ)

Public Charity Status and Public Support

OMB No 1545-0047

To be completed by all section 501(c)(3) organizations and section 4947(a)(1) nonexempt charitable trusts.

2008
Open to Public Inspection

Department of the Treasury
Internal Revenue Service

▶ Attach to Form 990 or Form 990-EZ. ▶ See separate instructions.

Name of the organization **PAUL'S PANTRY, INC.** Employer identification number **39-1708806**

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

The organization is not a private foundation because it is: (Please check only one organization.)

- 1 A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i).
- 2 A school described in section 170(b)(1)(A)(ii). (Attach Schedule E.)
- 3 A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). (Attach Schedule H.)
- 4 A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state: _____
- 5 An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv). (Complete Part II.)
- 6 A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v).
- 7 An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II.)
- 8 A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.)
- 9 An organization that normally receives: (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions - subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See section 509(a)(2). (Complete the Part III.)
- 10 An organization organized and operated exclusively to test for public safety. See section 509(a)(4). (see instructions)
- 11 An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See section 509(a)(3). Check the box that describes the type of supporting organization and complete lines 11e through 11h.
 - a Type I
 - b Type II
 - c Type III - Functionally integrated
 - d Type III - Other
- e By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified persons other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2).
- f If the organization received a written determination from the IRS that it is a Type I, Type II, or Type III supporting organization, check this box
- g Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons?
 - (i) A person who directly or indirectly controls, either alone or together with persons described in (ii) and (iii) below, the governing body of the supported organization?
 - (ii) A family member of a person described in (i) above?
 - (iii) A 35% controlled entity of a person described in (i) or (ii) above?
- h Provide the following information about the organizations the organization supports.

	Yes	No
11g(i)		
11g(ii)		
11g(iii)		

(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1-9 above or IRC section (see instructions))	(iv) Is the organization in col (i) listed in your governing document?		(v) Did you notify the organization in col (i) of your support?		(vi) Is the organization in col (i) organized in the US?		(vii) Amount of support
			Yes	No	Yes	No	Yes	No	
Total									

LHA For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990. Schedule A (Form 990 or 990-EZ) 2008

Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)

(Complete only if you checked the box on line 5, 7, or 8 of Part I.)

Section A. Public Support

Calendar year (or fiscal year beginning in)	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	689818.	881816.	1070706.	1206587.	1129969.	4978896.
2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3 The value of services or facilities furnished by a governmental unit to the organization without charge						
4 Total. Add lines 1 - 3	689818.	881816.	1070706.	1206587.	1129969.	4978896.
5 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						
6 Public Support. Subtract line 5 from line 4						4978896.

Section B. Total Support

Calendar year (or fiscal year beginning in)	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
7 Amounts from line 4	689818.	881816.	1070706.	1206587.	1129969.	4978896.
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	161400.	150623.	193214.	-84296.	167569.	588510.
9 Net income from unrelated business activities, whether or not the business is regularly carried on						
10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)						
11 Total support. Add lines 7 through 10						5567406.

12

12 Gross receipts from related activities, etc. (see instructions)

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

organization, check this box and stop here

Section C. Computation of Public Support Percentage

14 Public support percentage for 2008 (line 6, column (f) divided by line 11, column (f))	14	89.43 %
15 Public support percentage from 2007 Schedule A, Part IV-A, line 26f	15	83.98 %

16a 33 1/3% support test - 2008. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization

b 33 1/3% support test - 2007. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization

17a 10% -facts-and-circumstances test - 2008. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization

b 10% -facts-and-circumstances test - 2007. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization

18 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions

Part III Support Schedule for Organizations Described in Section 509(a)(2) (Complete only if you checked the box on line 9 of Part I)

Section A. Public Support

Calendar year (or fiscal year beginning in) ▶	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")						
2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3 Gross receipts from activities that are not an unrelated trade or business under section 513						
4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5 The value of services or facilities furnished by a governmental unit to the organization without charge						
6 Total. Add lines 1 - 5						
7a Amounts included on lines 1, 2, and 3 received from disqualified persons						
b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of 1% of the total of lines 9, 10c, 11, and 12 for the year or \$5,000						
c Add lines 7a and 7b						
8 Public support (Subtract line 7c from line 6)						

Section B. Total Support

Calendar year (or fiscal year beginning in) ▶	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
9 Amounts from line 6						
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
c Add lines 10a and 10b						
11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)						
13 Total support (Add lines 9, 10c, 11, and 12)						

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

Section C. Computation of Public Support Percentage

15 Public support percentage for 2008 (line 8, column (f) divided by line 13, column (f))	15	%
16 Public support percentage from 2007 Schedule A, Part IV-A, line 27g	16	%

Section D. Computation of Investment Income Percentage

17 Investment income percentage for 2008 (line 10c, column (f) divided by line 13, column (f))	17	%
18 Investment income percentage from 2007 Schedule A, Part IV-A, line 27h	18	%

19a 33 1/3% support tests - 2008. If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization

b 33 1/3% support tests - 2007. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and line 18 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization

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

Schedule D
(Form 990)

Department of the Treasury
Internal Revenue Service

Supplemental Financial Statements

▶ Attach to Form 990. To be completed by organizations that answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11, or 12.

OMB No 1545-0047

2008
Open to Public Inspection

Name of the organization

PAUL'S PANTRY, INC.

Employer identification number

39-1708806

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

	(a) Donor advised funds	(b) Funds and other accounts
1 Total number at end of year		
2 Aggregate contributions to (during year)		
3 Aggregate grants from (during year)		
4 Aggregate value at end of year		
5 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control?		<input type="checkbox"/> Yes <input type="checkbox"/> No
6 Did the organization inform all grantees, donors, and donor advisors in writing that grant funds may be used only for charitable purposes and not for the benefit of the donor or donor advisor or other impermissible private benefit?		<input type="checkbox"/> Yes <input type="checkbox"/> No

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

- Purpose(s) of conservation easements held by the organization (check all that apply).

<input type="checkbox"/> Preservation of land for public use (e.g., recreation or pleasure)	<input type="checkbox"/> Preservation of an historically important land area
<input type="checkbox"/> Protection of natural habitat	<input type="checkbox"/> Preservation of certified historic structure
<input type="checkbox"/> Preservation of open space	
- Complete lines 2a-2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year.

	Held at the End of the Year
a Total number of conservation easements	
b Total acreage restricted by conservation easements	
c Number of conservation easements on a certified historic structure included in (a)	
d Number of conservation easements included in (c) acquired after 8/17/06	
- Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the taxable year ▶ _____
- Number of states where property subject to conservation easement is located ▶ _____
- Does the organization have a written policy regarding the periodic monitoring, inspection, violations, and enforcement of the conservation easements it holds? Yes No
- Staff or volunteer hours devoted to monitoring, inspecting, and enforcing easements during the year ▶ _____
- Amount of expenses incurred in monitoring, inspecting, and enforcing easements during the year ▶ \$ _____
- Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)? Yes No
- In Part XIV, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements.

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets.

Complete if the organization answered "Yes" to Form 990, Part IV, line 8.

- If the organization elected, as permitted under SFAS 116, not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIV, the text of the footnote to its financial statements that describes these items.
- If the organization elected, as permitted under SFAS 116, to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items:

(i) Revenues included in Form 990, Part VIII, line 1	▶ \$ _____
(ii) Assets included in Form 990, Part X	▶ \$ _____
- If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 relating to these items:

a Revenues included in Form 990, Part VIII, line 1	▶ \$ _____
b Assets included in Form 990, Part X	▶ \$ _____

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

3 Using the organization's accession and other records, check any of the following that are a significant use of its collection items (check all that apply):

- a Public exhibition
- b Scholarly research
- c Preservation for future generations
- d Loan or exchange programs
- e Other _____

4 Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIV.

5 During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection? Yes No

Part IV Trust, Escrow and Custodial Arrangements. Complete if organization answered "Yes" to Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21.

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

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

	Amount
1c	
1d	
1e	
1f	

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

2a Did the organization include an amount on Form 990, Part X, line 21? Yes No

b If "Yes," explain the arrangement in Part XIV.

Part V Endowment Funds. Complete if organization answered "Yes" to Form 990, Part IV, line 10.

	(a) Current year	(b) Prior year	(c) Two years back	(d) Three years back	(e) Four years back
1a Beginning of year balance					
b Contributions					
c Investment earnings or losses					
d Grants or scholarships					
e Other expenditures for facilities and programs					
f Administrative expenses					
g End of year balance					

2 Provide the estimated percentage of the year end balance held as:

- a Board designated or quasi-endowment _____ %
- b Permanent endowment _____ %
- c Term endowment _____ %

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

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

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

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

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

Part VI Investments - Land, Buildings, and Equipment. See Form 990, Part X, line 10.

Description of investment	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Depreciation	(d) Book value
1a Land				
b Buildings	1752992.		448276.	1304716.
c Leasehold improvements				
d Equipment	492643.		378078.	114565.
e Other	212871.		132233.	80638.

Total. Add lines 1a-1e. (Column (d) should equal Form 990, Part X, column (B), line 10(c).) 1499919.

**SCHEDULE M
(Form 990)**

NonCash Contributions

OMB No 1545-0047

2008
Open to Public
Inspection

Department of the Treasury
Internal Revenue Service

▶ To be completed by organizations that answered
"Yes" on Form 990, Part IV, lines 29 or 30.

▶ Attach to Form 990.

Name of the organization

PAUL'S PANTRY, INC.

Employer identification number

39-1708806

Part I Types of Property

	(a) Check if applicable	(b) Number of contributions	(c) Revenues reported on Form 990, Part VIII, line 1g	(d) Method of determining revenues
1 Art - Works of art				
2 Art - Historical treasures				
3 Art - Fractional interests				
4 Books and publications				
5 Clothing and household goods				
6 Cars and other vehicles				
7 Boats and planes				
8 Intellectual property				
9 Securities - Publicly traded				
10 Securities - Closely held stock				
11 Securities - Partnership, LLC, or trust interests				
12 Securities - Miscellaneous				
13 Qualified conservation contribution (historic structures)				
14 Qualified conservation contribution (other)				
15 Real estate - Residential				
16 Real estate - Commercial				
17 Real estate - Other				
18 Collectibles				
19 Food inventory	X	2135	0.	
20 Drugs and medical supplies				
21 Taxidermy				
22 Historical artifacts				
23 Scientific specimens				
24 Archeological artifacts				
25 Other ▶ (_____)				
26 Other ▶ (_____)				
27 Other ▶ (_____)				
28 Other ▶ (_____)				

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

29

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

	Yes	No
30a		X
31		X
32a		X

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

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

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

b If "Yes," describe in Part II.

33 If the organization did not report revenues in column (c) for a type of property for which column (a) is checked, describe in Part II.

LHA For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990.

Schedule M (Form 990) 2008

Part II **Supplemental Information.** Complete this part to provide the information required by Part I, lines 30b, 32b, and 33. Also complete this part for any additional information.

SCHEDULE M, PART I, COLUMN (B): 2135 OR 4,270,315 LBS. OF DONATED FOOD

RECEIVED

Lined area for supplemental information.

SCHEDULE O
(Form 990)

Department of the Treasury
Internal Revenue Service

Supplemental Information to Form 990

▶ Attach to Form 990. To be completed by organizations to provide additional information for responses to specific questions for the Form 990 or to provide any additional information.

OMB No 1545-0047

2008

Open to Public
Inspection

Name of the organization

PAUL'S PANTRY, INC.

Employer identification number

39-1708806

FORM 990, PART VI, SECTION A, LINE 10: THE ORGANIZATION'S PRESIDENT
REVIEWS THE 990 BEFORE FILING.

FORM 990, PART VI, SECTION B, LINE 12C: THE ORGANIZATION DOES NOT HAVE A
FORMAL WRITTEN CONFLICT OF INTEREST POLICY, BUT DOES REQUIRE INDIVIDUALS TO
DISCLOSE INTERESTS THAT COULD GIVE RISE TO CONFLICTS AND MONITORS THIS.

FORM 990, PART VI, SECTION C, LINE 19: UPON REQUEST.

FORM 990, PART VII CONTACT ADDRESSES FOR OFFICERS, DIRECTORS, ETC:

VINCENT NICKLAS - 1744 WESTFIELD AVE

GREEN BAY, WI 54303

CLAIRE SCHIEFELBEIN - 742 MEMORY AVE

GREEN BAY, WI 54301

JOHN BALZA - 2034 ZEISE ST.

GREEN BAY, WI 54302

BRIAN MALONEY - 345 STH JEFFERSON

GREEN BAY, WI 54302

BILL STYLE - 426 SARATOGA

GREEN BAY, WI 54303

JOHN BERGER - 3669 GLENDALE AVE

LHA For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990.

Schedule O (Form 990) 2008

832211
12-18-08

SCHEDULE O
(Form 990)

Department of the Treasury
Internal Revenue Service

Supplemental Information to Form 990

▶ Attach to Form 990. To be completed by organizations to provide additional information for responses to specific questions for the Form 990 or to provide any additional information.

OMB No 1545-0047

2008
Open to Public
Inspection

Name of the organization

PAUL'S PANTRY, INC.

Employer identification number
39-1708806

GREEN BAY, WI 54313

ALVEDA YASHINSKY - 3195 WM GRANT DR

DE PERE, WI 54115

DAN WILLIAMS - 2259 MEMORIAL DR

GREEN BAY, WI 54303

CHARLOTTE RONDOU - 628 N. WISCONSIN

DE PERE, WI 54115

THE ORGANIZATION PREPARES ITS FINANCIAL STATEMENTS ON THE MODIFIED CASH BASIS OF ACCOUNTING. UNDER THAT BASIS, SUPPORT AND REVENUE AND THE RELATED ASSETS ARE RECOGNIZED WHEN RECEIVED RATHER THAN WHEN EARNED AND CERTAIN EXPENSES ARE RECOGNIZED WHEN PAID RATHER THAN WHEN INCURRED.

THE ORGANIZATION'S BOARD OF DIRECTORS MONITORS THE AUDIT AND SELECTS THE ACCOUNTING FIRM WHICH IS CONSISTENT YEAR TO YEAR.

Part V Transactions With Related Organizations

Note. Complete line 1 if any entry is listed in Parts II, III, or IV.

1 During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?

a Receipt of (i) interest (ii) annuities (iii) royalties (iv) rent from a controlled entity

b Gift, grant, or capital contribution to other organization(s)

c Gift, grant, or capital contribution from other organization(s)

d Loans or loan guarantees to or for other organization(s)

e Loans or loan guarantees by other organization(s)

f Sale of assets to other organization(s)

g Purchase of assets from other organization(s)

h Exchange of assets

i Lease of facilities, equipment, or other assets to other organization(s)

j Lease of facilities, equipment, or other assets from other organization(s)

k Performance of services or membership or fundraising solicitations for other organization(s)

l Performance of services or membership or fundraising solicitations by other organization(s)

m Sharing of facilities, equipment, mailing lists, or other assets

n Sharing of paid employees

o Reimbursement paid to other organization for expenses

p Reimbursement paid by other organization for expenses

q Other transfer of cash or property to other organization(s)

r Other transfer of cash or property from other organization(s)

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

	(A) Name of other organization(s)	(B) Transaction type (a-r)	(C) Amount involved
(1)	ST. VINCENT DE PAUL SOCIETY, DISTRICT COUNCIL OF GREEN BAY, INC.	N	15413.
(2)			
(3)			
(4)			
(5)			
(6)			

3/18/2010
08:21

PAUL'S PANTRY, INC.
Federal ID #:
Asset Summary - Book Basis
Period Ended 9/30/09

Company: PPI
Page: 1

Num	Loc	Property Description	Acquired	T	Method	Life	Cost/Basis	179 Exp/AFD	Add SDA	Prior Depr.	Current Depr.	Ending Depr.
Group # 1 FURNITURE, FIXTURE & EQUIP												
1	1	CARTS & EQUIPMENT	09/30/84	N	SL	10	1,255 72	0 00	0 00	1,255 72	0 00	1,255 72
2	1	CABINETS	09/30/85	N	SL	10	629 05	0 00	0 00	629 05	0 00	629 05
3	1	EQUIPMENT	09/30/86	N	SL	10	300 43	0 00	0 00	300 43	0 00	300 43
4	1	CARTS	09/30/87	N	SL	10	820 59	0 00	0 00	820 59	0 00	820 59
5	1	GARAGE DOOR OPENE	04/01/88	N	SL	10	361 35	0 00	0 00	361 35	0 00	361 35
6	1	CARTS (CONGER)	04/30/89	N	SL	10	853 48	0 00	0 00	853 48	0 00	853 48
7	1	CARTS (CONGER)	08/31/89	N	SL	10	1,064 93	0 00	0 00	1,064 93	0 00	1,064 93
9	1	HEATING VENTILATIO	09/01/91	U	SL	10	425 00	0 00	0 00	425 00	0 00	425 00
10	1	BENCHES	08/01/92	N	SL	10	376 01	0 00	0 00	376 01	0 00	376 01
11	1	BALTERY FORKLIFT	10/31/92	N	MCRS SL	10	3,039 00	0 00	0 00	3,039 00	0 00	3,039 00
12	1	FORKLIFT	10/31/92	N	MCRS SL	10	1,237 00	0 00	0 00	1,237 00	0 00	1,237 00
13	1	100 GAL WATER HEAT	03/31/93	N	MCRS SL	10	1,007 89	0 00	0 00	1,007 89	0 00	1,007 89
14	1	WASHING MACHINE	05/31/93	N	MCRS SL	10	229 00	0 00	0 00	229 00	0 00	229 00
15	1	WASHER	08/31/93	N	MCRS SL	10	4,140 00	0 00	0 00	4,140 00	0 00	4,140 00
16	1	REFRIGERATED UNIT	08/31/93	N	MCRS SL	10	1,312 90	0 00	0 00	1,312 90	0 00	1,312 90
17	1	12' CASE	09/30/93	N	MCRS SL	10	991 08	0 00	0 00	991 08	0 00	991 08
18	1	WIS LIFT TRUCK CORP	11/30/93	N	SL	10	450 00	0 00	0 00	450 00	0 00	450 00
19	1	CONGER INDUSTRIES	04/30/94	N	SL	10	232 80	0 00	0 00	232 80	0 00	232 80
20	1	SAMS CLUB	07/31/94	N	SL	10	339 88	0 00	0 00	339 88	0 00	339 88
21	1	SAMS CLUB	07/31/94	N	SL	10	509 82	0 00	0 00	509 82	0 00	509 82
22	1	SEVEN CORNERS HARD	08/31/94	N	SL	10	164 00	0 00	0 00	164 00	0 00	164 00
23	1	WA VORPAHL LADDEN	09/30/94	N	SL	10	1,676 80	0 00	0 00	1,676 80	0 00	1,676 80
24	1	J D SNOWBLOWER	11/15/94	N	SL	10	1,107 00	0 00	0 00	1,107 00	0 00	1,107 00
25	1	HAND DRYERS	11/15/94	N	SL	10	1,165 08	0 00	0 00	1,165 08	0 00	1,165 08
26	1	SCALE	01/15/95	N	SL	10	1,696 02	0 00	0 00	1,696 02	0 00	1,696 02
27	1	PORTABLE PHONE	07/15/95	N	SL	10	249 99	0 00	0 00	249 99	0 00	249 99
28	1	HUSSMAN DOORS	05/15/95	N	SL	10	500 00	0 00	0 00	500 00	0 00	500 00
29	1	PALLET RACKS	06/15/96	N	SL	10	16,430 31	0 00	0 00	16,430 31	0 00	16,430 31
30	1	LIFT TRUCKS	04/15/96	N	SL	10	14,059 60	0 00	0 00	14,059 60	0 00	14,059 60
31	1	PALLET TRUCK	10/15/95	N	SL	10	495 00	0 00	0 00	495 00	0 00	495 00
32	1	TRU JET FOGGER	11/15/95	N	SL	10	240 00	0 00	0 00	240 00	0 00	240 00
33	1	CROWN PALLET JACK	02/15/96	N	SL	10	481 38	0 00	0 00	481 38	0 00	481 38
34	1	SELF DUMPING HOPPE	02/15/96	N	SL	10	2,651 25	0 00	0 00	2,651 25	0 00	2,651 25
35	1	GAS DRYER	02/15/96	N	SL	10	399 90	0 00	0 00	399 90	0 00	399 90
36	1	INSTALLATION	02/15/96	N	SL	10	445 63	0 00	0 00	445 63	0 00	445 63
37	1	DISHWASHER	05/15/96	N	SL	10	1,500 00	0 00	0 00	1,500 00	0 00	1,500 00
38	1	1/2 TON CHAIN HOIST	05/15/96	N	SL	10	111 10	0 00	0 00	111 10	0 00	111 10
39	1	WIRE DECKING	06/15/96	N	SL	10	1,005 39	0 00	0 00	1,005 39	0 00	1,005 39
40	1	SELF DUMPING HOPPE	06/15/96	N	SL	10	677 51	0 00	0 00	677 51	0 00	677 51
41	1	SELF DUMPING HOPPE	08/15/96	N	SL	10	1,779 12	0 00	0 00	1,779 12	0 00	1,779 12
42	1	FORKLIFT	08/01/97	N	SL	10	24,452 00	0 00	0 00	24,452 00	0 00	24,452 00
43	1	GRAINGER EQUIP	10/01/96	N	SL	10	2,389 35	0 00	0 00	2,389 35	0 00	2,389 35
44	1	GRAINGER EQUIP	10/01/96	N	SL	10	188 81	0 00	0 00	188 81	0 00	188 81
45	1	HYDROCLEAN EQUIP	11/01/96	N	SL	10	500 00	0 00	0 00	500 00	0 00	500 00
46	1	SIGN	01/10/97	N	SL	10	249 00	0 00	0 00	249 00	0 00	249 00
47	1	GRAINGER EQUIP	01/10/97	N	SL	10	428 95	0 00	0 00	428 95	0 00	428 95
48	1	MEYERS PRESSURE CL	01/10/97	N	SL	10	2,000 00	0 00	0 00	2,000 00	0 00	2,000 00
49	1	TARSON INDUSTRIES	02/01/97	N	SL	10	600 00	0 00	0 00	600 00	0 00	600 00
50	1	RADIO SHACK	03/01/97	N	SL	10	249 99	0 00	0 00	249 99	0 00	249 99
51	1	STOCK LUMBER	04/01/97	N	SL	10	97 50	0 00	0 00	97 50	0 00	97 50
52	1	CONGER INDUSTRIES	06/01/97	N	SL	10	3,600 00	0 00	0 00	3,600 00	0 00	3,600 00
53	1	RADIO SHACK	08/01/97	N	SL	10	69 99	0 00	0 00	69 99	0 00	69 99
54	1	PALLET RACKING	10/15/97	N	SL	10	17,544 00	0 00	0 00	17,544 00	0 00	17,544 00
55	1	CEILING FANS (2)	10/15/97	N	SL	10	681 62	0 00	0 00	681 62	0 00	681 62
56	1	TELEPHONES & WIRIN	12/15/97	N	SL	10	137 37	0 00	0 00	137 37	0 00	137 37

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PAUL'S PANTRY, INC.
Federal ID #:
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Num	Loc	Property Description	Acquired	T	Method	Life	Cost/Basis	179 Exp/AFD	Add SDA	Prior Depr.	Current Depr.	Ending Depr.
Group # 1 FURNITURE, FIXTURE & EQUIP (Continued)												
57	1	CEILING FANS (18)	05/15/98	N	SL	10	3,700 87	0 00	0 00	3,700 87	0 00	3,700 87
58	1	PLATFORM ABOVE FR	07/15/98	N	SL	10	1,087 75	0 00	0 00	1,087 75	0 00	1,087 75
59	1	30X60 PLATFORM TRU	07/15/98	N	SL	10	731 52	0 00	0 00	731 52	0 00	731 52
60	1	HYDRAULIC PALLET T	08/15/98	N	SL	10	654 55	0 00	0 00	654 55	0 00	654 55
61	1	HANDLES&WHEELS-PA	09/15/98	N	SL	10	223 13	0 00	0 00	223 13	0 00	223 13
62	1	CRAFTMAN AIR COMP	11/21/98	N	SL	10	269 99	0 00	0 00	265 50	4 49	269 99
63	1	TABLE SAW	01/18/99	N	SL	10	524 98	0 00	0 00	507 50	17 48	524 98
64	1	BT-80 GAS WATER HEA	03/12/99	N	SL	10	1,325 00	0 00	0 00	1,269 79	55 21	1,325 00
65	1	ALUMINUM HAND CA	04/01/99	N	SL	10	237 31	0 00	0 00	225 44	11 87	237 31
66	1	ROLLING LADDER	04/01/99	N	SL	10	599 53	0 00	0 00	569 53	30 00	599 53
67	1	AUTOMATIC SCRUBBE	09/20/99	N	SL	10	3,459 20	0 00	0 00	3,113 28	345 92	3,459 20
68	1	TOTE BOX	09/20/99	N	SL	10	1,140 00	0 00	0 00	1,026 00	114 00	1,140 00
69	1	SILVER SERIES BATTER	12/17/99	N	SL	10	2,832 20	0 00	0 00	2,478 18	283 22	2,761 40
70	1	BLACK TOTE BOXES (1	12/02/99	N	SL	10	1,424 02	0 00	0 00	1,257 87	142.40	1,400 27
71	1	HIFI VCR	12/13/99	N	SL	10	149 96	0 00	0 00	132 50	15 00	147 50
72	1	25" CTV	12/13/99	N	SL	10	214 96	0 00	0 00	189 91	21 50	211 41
73	1	TIME CLOCK	02/07/00	N	SL	10	299 25	0 00	0 00	259 39	29 93	289 32
74	1	HANGING BIRD BLAST	02/01/00	N	SL	10	505 00	0 00	0 00	437 67	50 50	488 17
75	1	4 DRAWER FILE CABIN	03/07/00	N	SL	10	146 99	0 00	0 00	126 17	14 70	140 87
76	1	BIRD X-QUAD BLASTE	03/30/00	N	SL	10	1,515 00	0 00	0 00	1,287 75	151 50	1,439 25
77	1	IGNITION SYS FOR HE	04/01/01	N	SL	10	375 00	0 00	0 00	281 25	37 50	318 75
78	1	PALLET TRUCK	01/18/00	N	SL	10	950 00	0 00	0 00	823 33	95 00	918 33
79	1	SELF DRIVING HOPPER	05/01/92	U	SL	10	1,051 75	0 00	0 00	1,051 75	0 00	1,051 75
80	1	PALLET TRUCK	01/01/92	U	SL	10	385 00	0 00	0 00	385 00	0 00	385 00
81	1	FORKLIFT	10/01/90	N	SL	10	5,800 00	0 00	0 00	5,800 00	0 00	5,800 00
82	1	PLATFORM TRUCKS	08/01/90	U	SL	10	1,388 26	0 00	0 00	1,388 26	0 00	1,388 26
83	1	WRIGHT IND -RODENT	10/31/00	N	SL	10	690 00	0 00	0 00	546 25	69 00	615 25
84	1	Crown Lift Truck	11/01/01	N	SL	10	449 00	0 00	0 00	310 56	44 90	355 46
85	1	4-Drawer Letter File	08/01/02	N	SL	10	220 73	0 00	0 00	136 10	22 07	158 17
86	1	Signs	10/15/02	N	SL	10	610 00	0 00	0 00	366 00	61 00	427 00
87	1	Phone system & install	11/15/02	N	SL	10	1,597 66	0 00	0 00	945 30	159 77	1,105 07
88	1	New phone line	01/03/03	N	SL	10	2,566 26	0 00	0 00	1,475 62	256 63	1,732 25
89	1	Paging horns & install	02/15/03	N	SL	10	2,624 61	0 00	0 00	1,487 27	262 46	1,749 73
90	1	Hand pallet	05/15/03	N	SL	10	429 00	0 00	0 00	232 38	42 90	275 28
91	1	Floor fans	06/15/03	N	SL	10	257 34	0 00	0 00	137 23	25 73	162 96
92	1	4 microphones	09/15/03	N	SL	10	508 67	0 00	0 00	258 59	50 87	309 46
93	1	Pallet racking	10/30/03	N	SL	10	10,030 20	0 00	0 00	4,931 52	1,003 02	5,934 54
94	1	1 forklift battery	12/16/03	N	SL	7	5,060 00	0 00	0 00	3,433 58	722 86	4,156 44
95	1	Forklift, model 7FBEU15	03/25/04	N	SL	10	25,572 00	0 00	0 00	11,507 40	2,557 20	14,064 60
96	1	Emer alarm exits on doors	07/06/04	N	SL	10	950 92	0 00	0 00	404 13	95 09	499 22
97	1	4 air conditioners	06/03/05	N	SL	10	18,612 00	0 00	0 00	6,204 00	1,861 20	8,065 20
98	1	Shelving	05/08/06	N	SL	10	7,861 44	0 00	0 00	1,899 84	786 14	2,685 98
99	1	Electric jack	11/07/06	N	SL	10	4,779 00	0 00	0 00	915 98	477 90	1,393 88
100	1	Hot water heater	01/26/07	N	SL	10	2,446 00	0 00	0 00	407 67	244 60	652 27
101	1	Dell computer - Craig	02/27/07	N	SL	3	1,338 00	0 00	0 00	706 17	446 00	1,152 17
102	1	Toyota forklift	07/22/08	N	SL	10	5,272 50	0 00	0 00	87 88	527 25	615 13
103	1	4 - 4 drawer file cabinet	12/11/08	N	SL	10	919 80	0 00	0 00	0 00	76 65	76 65
104	1	Hot water heater	02/26/09	N	SL	10	2,654 66	0 00	0 00	0 00	154 86	154 86
105	1	Copier - Ricoh MP161	04/07/09	N	SL	10	999 00	0 00	0 00	0 00	49 95	49 95
106	1	Copier - Minolta 250	04/07/09	N	SL	10	5,099 00	0 00	0 00	0 00	254 95	254 95
107	1	2-Pallet handjacks	04/28/09	N	SL	10	758 00	0 00	0 00	0 00	31 58	31 58
Group # 1 Total							252,896 60	0 00	0 00	185,266 92	11,704 80	196,971 72

Group # 2 COOLERS

1	1	WRIGHTSTOWN REFRI	09/30/84	N	SL	10	8,477 63	0 00	0 00	8,477 63	0 00	8,477 63
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PAUL'S PANTRY, INC.
Federal ID #
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Num	Loc	Property Description	Acquired	T	Method	Life	Cost/Basis	179 Exp/AFD	Add SDA	Prior Depr.	Current Depr.	Ending Depr.
Group # 2 COOLERS (Continued)												
2	1	WRIGHTSTOWN REFRI	09/30/85	N	SL	10	3,071 94	0 00	0 00	3,071 94	0 00	3,071 94
3	1	COOLER	09/30/91	N	SL	10	14,436 00	0 00	0 00	14,436 00	0 00	14,436 00
4	1	FREEZER	05/01/91	N	SL	10	10,000 00	0 00	0 00	10,000 00	0 00	10,000 00
5	1	FREEZER	06/01/91	N	SL	10	10,000 00	0 00	0 00	10,000 00	0 00	10,000 00
6	1	FREEZER	08/01/91	N	SL	10	7,417 00	0 00	0 00	7,417 00	0 00	7,417 00
7	1	14X136X8 COOLER	01/15/95	N	SL	10	10,645 65	0 00	0 00	10,645 65	0 00	10,645 65
8	1	WALK IN FREEZER	02/15/96	N	SL	10	24,556 40	0 00	0 00	24,556 40	0 00	24,556 40
9	1	WALK IN FREEZER	04/15/96	N	SL	10	11,450 00	0 00	0 00	11,450 00	0 00	11,450 00
10	1	ISLAND CASES	08/15/96	N	SL	10	14,606 33	0 00	0 00	14,606 33	0 00	14,606 33
11	1	FREEZER DOORS INST	07/15/96	N	SL	10	5,400 00	0 00	0 00	5,400 00	0 00	5,400 00
12	1	FREEZER	11/01/96	N	SL	10	8,364 15	0 00	0 00	8,364 15	0 00	8,364 15
13	1	4-DOOR CASE REFRIGE	09/01/99	N	SL	10	4,600 00	0 00	0 00	4,178 33	421 67	4,600 00
14	1	Walk-in freezer, install	03/15/03	N	SL	10	31,598 43	0 00	0 00	17,642 44	3,159 84	20,802 28
15	1	32 doors of freezer &	11/12/04	N	SL	10	50,256 54	0 00	0 00	19,683 80	5,025 65	24,709 45
16	1	2 door freezer	05/23/08	U	SL	10	2,500 00	0 00	0 00	83 33	250 00	333 33
17	1	Crown Tonka Freezer	10/14/08	N	SL	10	22,366 14	0 00	0 00	0 00	2,236 61	2,236 61
Group # 2 Total							<u>239,746 21</u>	<u>0 00</u>	<u>0 00</u>	<u>170,013 00</u>	<u>11,093 77</u>	<u>181,106 77</u>
Group # 3 VEHICLES												
4	1	TOYOTA LIFT TRUCK Salvage 193 00	06/01/88	N	SL	4	6,150 00	0 00	0 00	5,957 00	0 00	5,957 00
5	1	ALL TERRAIN VEHICLE	08/01/86	U	SL	10	2,502 00	0 00	0 00	2,502 00	0 00	2,502 00
19	1	2000 DODGE RAM 3500	01/24/00	N	SL	5	23,810 50	0 00	0 00	23,810 50	0 00	23,810 50
20	1	'00 UD 24FT VAN - WHI	12/11/00	N	TRADED	5	38,357 96	0 00	0 00	38,357 96	0 00	38,357 96
21	1	'02 Mitsubishi FM617	07/31/02	N	SL	5	40,681 29	0 00	0 00	40,681 29	0 00	40,681 29
22	1	1400 E '05 Van	12/01/05	N	SL	5	31,846 17	0 00	0 00	18,046 16	6,369 23	24,415 39
23	1	'06 UD 14' Van	11/20/06	T	SL	5	35,172 25	0 00	0 00	12,896 49	7,034 45	19,930 94
24	1	2007 Ford 350	06/04/08	T	SL	5	19,274 00	0 00	0 00	1,284 93	3,854 80	5,139 73
25	1	'07 UD Model 2600	10/22/08	T	SL	5	53,435 25	0 00	0 00	0 00	9,796 46	9,796 46
Sub-Total							<u>251,229 42</u>	<u>0 00</u>	<u>0 00</u>	<u>143,536 33</u>	<u>27,054 94</u>	<u>170,591 27</u>
Less Assets Sold							<u>38,357 96</u>	<u>0 00</u>	<u>0 00</u>	<u>38,357 96</u>	<u>0 00</u>	<u>38,357 96</u>
Group # 3 Total							<u>212,871 46</u>	<u>0 00</u>	<u>0 00</u>	<u>105,178 37</u>	<u>27,054 94</u>	<u>132,233 31</u>
Group # 4 BUILDING												
1	1	BUILDING	10/01/90	R	SL	31 5	200,975 10	0 00	0 00	147,274 98	6,380 16	153,655 14
2	1	BUILDING	06/01/91	R	SL	31 5	86,665 14	0 00	0 00	47,688 68	2,751 27	50,439 95
3	1	PANTRY ADDITION	10/01/91	R	SL	10	1,895 00	0 00	0 00	1,895 00	0 00	1,895 00
4	1	PANTRY ADDITION	10/01/91	R	SL	10	380 00	0 00	0 00	380 00	0 00	380 00
5	1	PANTRY ADDITION	10/01/91	R	SL	10	2,610 00	0 00	0 00	2,610 00	0 00	2,610 00
6	1	PANTRY ADDITION	10/01/91	R	SL	10	1,710 00	0 00	0 00	1,710 00	0 00	1,710 00
7	1	PANTRY ADDITION	11/01/91	R	SL	10	4,041 05	0 00	0 00	4,041 05	0 00	4,041 05
8	1	PANTRY ADDITION	11/01/91	R	SL	10	1,025 00	0 00	0 00	1,025 00	0 00	1,025 00
9	1	PANTRY ADDITION	12/01/91	R	SL	10	4,041 05	0 00	0 00	4,041 05	0 00	4,041 05
10	1	VENT FANS	09/01/92	R	SL	10	2,475 00	0 00	0 00	2,475 00	0 00	2,475 00
11	1	CITY TREASURER SIDE	10/31/92	R	MCRS	10	1,908 20	0 00	0 00	1,908 20	0 00	1,908 20
12	1	PLANS(NEW BLDG)	09/15/95	R	SL	40	580 00	0 00	0 00	188 50	14 50	203 00
13	1	ELECTRICAL CHARGES	12/15/94	R	SL	40	1,648 00	0 00	0 00	535 60	41 20	576 80
14	1	NEW ELECTRICAL SER	12/15/94	R	SL	25	2,661 43	0 00	0 00	1,472 69	106 46	1,579 15
15	1	BUILDING ADDITION	08/31/96	R	SL	40	345,491 79	0 00	0 00	104,367 25	8,637 29	113,004 54
16	1	ELAND ELECTRIC	10/01/96	R	SL	40	425 43	0 00	0 00	127 68	10 64	138 32
17	1	ELAND ELECTRIC	11/01/96	R	SL	40	2,742 62	0 00	0 00	817 12	68 57	885 69
18	1	BUILDING ADDITION-	01/10/97	R	SL	40	29,855 05	0 00	0 00	8,769 96	746 38	9,516 34
19	1	ROOF-933 VANDERBRA	01/01/97	R	SL	40	11,060 00	0 00	0 00	3,248 88	276 50	3,525 38
20	1	BRICK TUCKPOINT & S	08/31/98	R	SL	40	7,404 00	0 00	0 00	1,866 43	185 10	2,051 53

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PAUL'S PANTRY, INC.
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<u>Num</u>	<u>Loc</u>	<u>Property Description</u>	<u>Acquired</u>	<u>T</u>	<u>Method</u>	<u>Life</u>	<u>Cost/Basis</u>	<u>179 Exp/AFD</u>	<u>Add SDA</u>	<u>Prior Depr.</u>	<u>Current Depr.</u>	<u>Ending Depr.</u>
Group # 4 BUILDING (Contmued)												
21	1	UPRIGHT POST PROTE	06/18/99	R	SL	10	1,320 00	0 00	0 00	1,221 00	99 00	1,320 00
22	1	BUILDING WATER BAR	10/15/00	N	SL	10	3,044 00	0 00	0 00	2,435 20	304 40	2,739 60
23	1	Heating Vent for Computer	03/01/02	R	SL	40	440 00	0 00	0 00	72 42	11 00	83 42
24	1	933 Vanderbraak	09/30/02	R	SL	40	107,307 00	0 00	0 00	16,096 08	2,682 68	18,778 76
25	1	926 & 930 Vanderbraak	10/31/06	R	SL	40	912,838 61	0 00	0 00	43,740 19	22,820 97	66,561 16
26	1	Concrete on north side of	10/09/06	R	SL	15	13,165 00	0 00	0 00	1,755 34	877 67	2,633 01
27	1	Entrance & exit doors for	05/12/08	N	SL	15	5,284 00	0 00	0 00	146 78	352 27	499 05
Group # 4 Total							<u>1,752,992 47</u>	<u>0 00</u>	<u>0 00</u>	<u>401,910 08</u>	<u>46,366 06</u>	<u>448,276 14</u>
Grand Total							<u>2,496,864 70</u>	<u>0 00</u>	<u>0 00</u>	<u>900,726 33</u>	<u>96,219 57</u>	<u>996,945 90</u>
Less Assets Sold							<u>38,357 96</u>	<u>0 00</u>	<u>0 00</u>	<u>38,357 96</u>	<u>0 00</u>	<u>38,357 96</u>
Net Grand Total							<u>2,458,506.74</u>	<u>0.00</u>	<u>0.00</u>	<u>862,368.37</u>	<u>96,219.57</u>	<u>958,587.94</u>

Application for Extension of Time To File an Exempt Organization Return

▶ **File a separate application for each return.**

- If you are filing for an **Automatic 3-Month Extension**, complete only **Part I** and check this box
 - If you are filing for an **Additional (Not Automatic) 3-Month Extension**, complete only **Part II** (on page 2 of this form).
- Do not complete Part II unless you have already been granted an automatic 3-month extension on a previously filed Form 8868.**

Part I Automatic 3-Month Extension of Time. Only submit original (no copies needed).

A corporation required to file Form 990-T and requesting an automatic 6-month extension - check this box and complete Part I only

All other corporations (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request an extension of time to file income tax returns

Electronic Filing (e-file). Generally, you can electronically file Form 8868 if you want a 3-month automatic extension of time to file one of the returns noted below (6 months for a corporation required to file Form 990-T). However, you cannot file Form 8868 electronically if (1) you want the additional (not automatic) 3-month extension or (2) you file Forms 990-BL, 6069, or 8870, group returns, or a composite or consolidated Form 990-T. Instead, you must submit the fully completed and signed page 2 (Part II) of Form 8868. For more details on the electronic filing of this form, visit www.irs.gov/efile and click on *e-file for Charities & Nonprofits*.

Type or print	Name of Exempt Organization PAUL'S PANTRY, INC.	Employer identification number 39-1708806
File by the due date for filing your return. See instructions.	Number, street, and room or suite no. If a P.O. box, see instructions. 1529 LEO FRIGO WAY	
	City, town or post office, state, and ZIP code. For a foreign address, see instructions. GREEN BAY, WI 54302	

Check type of return to be filed (file a separate application for each return):

- | | | |
|--|---|------------------------------------|
| <input checked="" type="checkbox"/> Form 990 | <input type="checkbox"/> Form 990-T (corporation) | <input type="checkbox"/> Form 4720 |
| <input type="checkbox"/> Form 990-BL | <input type="checkbox"/> Form 990-T (sec. 401(a) or 408(a) trust) | <input type="checkbox"/> Form 5227 |
| <input type="checkbox"/> Form 990-EZ | <input type="checkbox"/> Form 990-T (trust other than above) | <input type="checkbox"/> Form 6069 |
| <input type="checkbox"/> Form 990-PF | <input type="checkbox"/> Form 1041-A | <input type="checkbox"/> Form 8870 |

VINCENT NICKLAS

- The books are in the care of ▶ **1529 LEO FRIGO WAY - GREEN BAY, WI 54302**
 Telephone No. ▶ **(920) 435-4040** FAX No. ▶ _____
- If the organization does not have an office or place of business in the United States, check this box
- If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) _____. If this is for the whole group, check this box . If it is for part of the group, check this box and attach a list with the names and EINs of all members the extension will cover.

1 I request an automatic 3-month (6-months for a corporation required to file Form 990-T) extension of time until **MAY 15, 2010**, to file the exempt organization return for the organization named above. The extension is for the organization's return for:
 ▶ calendar year _____ or
 ▶ tax year beginning **OCT 1, 2008**, and ending **SEP 30, 2009**.

2 If this tax year is for less than 12 months, check reason: Initial return Final return Change in accounting period

3a If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions.	3a	\$	
b If this application is for Form 990-PF or 990-T, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit.	3b	\$	
c Balance Due. Subtract line 3b from line 3a. Include your payment with this form, or, if required, deposit with FTD coupon or, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions.	3c	\$	N/A

Caution. If you are going to make an electronic fund withdrawal with this Form 8868, see Form 8453-EO and Form 8879-EO for payment instructions.