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## Form: 990-PF

### **Return of Private Foundation**

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

Department of the Treasury Internal Revenue Service Treated as a Private Foundation

Note The foundation may be able to use a copy of this return to satisfy state reporting requirements.

2009

For calendar year 2009, or tax year beginning and ending G Check all that apply: Initial return of a former public charity Final return Initial return Amended return Address change Name change Name of foundation A Employer identification number Use the IRS label W HOUSER FAMILY FOUNDATION 20-2991559 Otherwise, R Number and street (or P O box number if mail is not delivered to street address) Room/suite print B Telephone number or type. 2700 MIDWEST DR (608)783-8520 See Specific City or town, state, and ZIP code C If exemption application is pending, check here Instructions ONALASKA, WI 54650 D 1 Foreign organizations, check here Foreign organizations meeting the 85% test, check here and attach computation H Check type of organization: X Section 501(c)(3) exempt private foundation Section 4947(a)(1) nonexempt charitable trust Other taxable private foundation If private foundation status was terminated I Fair market value of all assets at end of year | J | Accounting method: X Accrual under section 507(b)(1)(A), check here Other (specify) (from Part II, col (c), line 16) F If the foundation is in a 60-month termination , 412. (Part I, column (d) must be on cash basis.) ▶\$ under section 507(b)(1)(B), check here Analysis of Revenue and Expenses (d) Disbursements for charitable purposes (cash basis only) Part I (a) Revenue and (b) Net investment (c) Adjusted net (The total of amounts in columns (b), (c), and (d) may not expenses per books income income necessarily equal the amounts in column (a) ) Contributions, gifts, grants, etc., received 28,279 N/A Check If the foundation is not required to attach Sch. B. Interest on savings and temporary cash investments 408 408. STATEMENT Dividends and interest from securities 5a Gross rents Net rental income or (foss) 4,225 6a Net gain or (loss) from sale of assets not on line 10 b Gross sales price for all assets on line 6a 13,515. 4,225 7 Capital gain net income (from Part IV, line 2) Net short-term capital gain Income modification 10a Gross sales less returns and allowances b Less Cost of goods sold c Gross profit or (loss) 11 Other income 4,633 Total, Add lines 1 thro 0. 0. Compensation of officers, director 14 Other employee salaries and wages 15 Pension plans, employee benefits Expenses 16a Legal fees **b** Accounting fees 530. 0. c Other professional fees STMT 2 530 Operating and Administrative 17 Interest 18 Taxes 19 Depreciation and depletion 20 Occupancy 21 Travel, conferences, and meetings 22 Printing and publications 23 Other expenses 38. 0. STMT 3 0. 24 Total operating and administrative expenses Add lines 13 through 23 568 530 232,250 232,250. 25 Contributions, gifts, grants paid 26 Total expenses and disbursements 530 232,250. 232,818 Add lines 24 and 25 27 Subtract line 26 from line 12: -199,906 a Excess of revenue over expenses and disbursements 4,103. b Net investment income (if negative, enter -0-) N/A Adjusted net income (if negative enter -0-) Form **990-PF** (2009) LHA For Privacy Act and Paperwork Reduction Act Notice, see the instructions

Gla 16

SEE STATEMENT 4

5

110,206.

Form 990-PF (2009)

Decreases not included in line 2 (itemize)

Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b), line 30

		SER FAMILY FO						20-2	991559	Page 3
(a) List and des	cribe the k	ind(s) of property sold (e.g. or common stock, 200 shs.	, real estate,		(b) F	low acquired Purchase Donation	t (e	Date acquire (mo., day, yr.)		ate sold day, yr.)
1a PUBLICLY TRADE					-	Donation				
b	<del></del>									
С										
d		<del> </del>			ļ					
<u>e</u>					<del></del>					-
(e) Gross sales price	(f)	Depreciation allowed (or allowable)		st or other basis expense of sale				(h) Gain or ( (e) plus (f) mi		
a 13,515.				9,29	0.					1,225.
<u>b</u>	<u> </u>									
<u>c</u>	-	······			-					
<u>d</u>	ļ							-		
Complete only for assets show	ino dain in	column (h) and owned by t	he foundation	on 12/31/69		<del></del>	(1) (	Sains (Col. (h)	dain minue	
(i) F M.V. as of 12/31/69	<del></del>	(j) Adjusted basis as of 12/31/69	(k) E>	cess of col. (I)			còl. (I	k), but not less Losses (from c	than -0-) or	
a									4	1,225
b										
<u>C</u>										
<u>d</u>										
е	<u>.                                    </u>									
2 Capital gain net income or (net o	capital loss	$ \begin{cases} \text{If gain, also enter} \\ \text{If (loss), enter -0-} \end{cases} $	in Part I, line in Part I, line	7 7	}	2				1,225.
3 Net short-term capital gain or (lo If gain, also enter in Part I, line 8	3, column (		d (6) <sup>.</sup>		}			3.7	/3	
Part V Qualification		Section 4940(e) for	Reduced	Tax on Net	Inv	stment	Inco		/A	
(For optional use by domestic priva		<del></del>						-		
(i or optional use by domestic priva	ic roundad	ons subject to the section 4	J-to(a) tax on	i not myosunom m	1001110	•,				
If section 4940(d)(2) applies, leave	this part b	ank.								
Was the foundation liable for the se If <u>"Yes," the foundation does not qu</u>					riod?				Yes	X No
Enter the appropriate amount in					es.					
(a) Base period years Calendar year (or tax year beginr	uno in)	(b) Adjusted qualifying disti	ributions	Net value of no	(c) nchar	table-use as	sets	(col (b	(d) stribution ratio ) divided by co	L (c))
2008	inig iii)	250	0,602.			303,5		(00. (0	·	325516
2007			0,023.			451,0				76539
2006			7,448.			307,2				740152
2005		200	0,218.			374,3	69.		. 5	34815
2004										
2 Total of line 1, column (d)								2	2.6	577022
3 Average distribution ratio for the the foundation has been in exist			n line 2 by 5,	or by the number	of yea	ırs		3	. 6	69256
		, man o youro								
4 Enter the net value of noncharita	ible-use as	sets for 2009 from Part X, I	ine 5				-	4	98	3,013.
5 Multiply line 4 by line 3						-		5	65	5,596.
6 Enter 1% of net investment inco	me (1% of	Part I, line 27b)		-				6	<del>-</del>	41.
7 Add lines 5 and 6								7	6.5	6,637
8 Enter qualifying distributions fro								8	232	2,250.
If line 8 is equal to or greater that	an line 7, cl	neck the box in Part VI, line	1b, and comp	olete that part usin	g a 1%	6 tax rate.				

	m 990-PF (2009) R W HOUSER FAMILY FOUNDATION		20-	<u> 2991</u>	<u> 559</u>		Page 4
Pa	art VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4	940(e), or	4948 -	see ir	ıstrı	ıctio	ns)
18	a Exempt operating foundations described in section 4940(d)(2), check here ▶ ☐ and enter "N/A" on line 1.	)					
٠	Date of ruling or determination letter: (attach copy of letter if necessary-see instruction	ons)					
b	b Domestic foundations that meet the section 4940(e) requirements in Part V, check here 🕨 🗶 and enter 1%	· •	1				41.
	of Part I, line 27b						
c	c All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of Part I, line 12, col	. (b)	1				
	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	(-)	2				0.
3			3				41.
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)		4				0.
5	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-		5				41.
6		-				-	
	a 2009 estimated tax payments and 2008 overpayment credited to 2009						
	b Exempt foreign organizations - tax withheld at source  6b		1 1				
	c Tax paid with application for extension of time to file (Form 8868)  6c		1				
	d Backup withholding erroneously withheld 6d		1 1				
	Total credits and payments. Add lines 6a through 6d		┥,∣				Λ
			7				0.
	· · · · · · · · · · · · · · · · · · ·	_	8				41
	Tax due If the total of lines 5 and 8 is more than line 7, enter amount owed		9				<u>41.</u>
	Overpayment If line 7 is more than the total of lines 5 and 8, enter the amount overpaid		10				
	Enter the amount of line 10 to be: Credited to 2010 estimated tax ▶  art VII-A Statements Regarding Activities	Refunded	11				
				T		Yes	No
ıa	a During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it particip	ate or interven	e in	ŀ		162	
L	any political campaign?				<u>1a</u>		X
D	b Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see instructions f				1b		X
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials and copies of the activities and copies of the ac	erials publishe	ed or				
	distributed by the foundation in connection with the activities						
	Did the foundation file Form 1120-POL for this year?			-	1c		X
a	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year:	•					
	(1) On the foundation. ► \$ 0 . (2) On foundation managers. ► \$	<u> </u>	<u>-</u>				
е	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on fi	oundation					
_	managers. > \$0.						
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?			-	_2		X
	If "Yes," attach a detailed description of the activities.						
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of	incorporation,	Or				•••
4.	bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes				3		<u>X</u>
	Did the foundation have unrelated business gross income of \$1,000 or more during the year?			/a	4a		X
	of "Yes," has it filed a tax return on Form 990-T for this year?		N	/A	4b		7.
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?				5		<u>X</u>
	If "Yes," attach the statement required by General Instruction T.						
6	to the sequence of the sequenc			ŀ			
	By language in the governing instrument, or			_			
	By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict	ct with the stat	e law	İ			
	remain in the governing instrument?			-	6		_X_
7	Did the foundation have at least \$5,000 in assets at any time during the year?			_	7	_X_	
	If "Yes," complete Part II, col (c), and Part XV			1			
8a	Enter the states to which the foundation reports or with which it is registered (see instructions) NONE						
b	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or de	signate)		İ			
	of each state as required by General Instruction G? If "No," attach explanation			Ļ	8b	_X_	
9	Is the foundation claiming status as a private operating foundation within the meaning of section $4942(j)(3)$ or $4942(j)(3)$	42(j)(5) for cale	endar	1			
	year 2009 or the taxable year beginning in 2009 (see instructions for Part XIV)? If "Yes," complete Part XIV			Ĺ	9		<u>X</u>
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and	addresses S	TMT	6	10	X	

had not been removed from jeopardy before the first day of the tax year beginning in 2009?

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Part VII-B   Statements Regarding Activities for Which	Form 4/20 May Be I	Required (contin	nued)		<del></del>
5a During the year did the foundation pay or incur any amount to:		<del></del>			
(1) Carry on propaganda, or otherwise attempt to influence legislation (section			es 🗶 No		
(2) Influence the outcome of any specific public election (see section 4955);	or to carry on, directly or indir			i	
any voter registration drive?			es 🔀 No		
(3) Provide a grant to an individual for travel, study, or other similar purposes	3?	Y	es X No		
(4) Provide a grant to an organization other than a charitable, etc., organization	in described in section			ŀ	
509(a)(1), (2), or (3), or section 4940(d)(2)?		Y	es 🗶 No		
(5) Provide for any purpose other than religious, charitable, scientific, literary	, or educational purposes, or				
the prevention of cruelty to children or animals?		Y	es X No		
b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify un	der the exceptions described	ın Regulatıons			
section 53.4945 or in a current notice regarding disaster assistance (see instru	ıctıons)?		N/A	5b	
Organizations relying on a current notice regarding disaster assistance check t	nere				
c If the answer is "Yes" to question 5a(4), does the foundation claim exemption f	rom the tax because it mainta	med	i		
expenditure responsibility for the grant?	N	I/A 🔲 Y	es 🔲 No		
If "Yes," attach the statement required by Regulations section 53.494	5-5(d)				
6a Did the foundation, during the year, receive any funds, directly or indirectly, to	pay premiums on				
a personal benefit contract?		Y	es 🗓 No		
<b>b</b> Did the foundation, during the year, pay premiums, directly or indirectly, on a p	personal benefit contract?			6b	X
If "Yes" to 6b, file Form 8870					
7a At any time during the tax year, was the foundation a party to a prohibited tax s	shelter transaction?	Y	es 🗶 No 📙		
b If yes, did the foundation receive any proceeds or have any net income attribut	able to the transaction?		N/A	7b	
Part VIII Information About Officers, Directors, Trust Paid Employees, and Contractors	ees, Foundation Ma	magers, Highl	y 		
1 List all officers, directors, trustees, foundation managers and their	compensation.			,	
(a) Name and address	(b) Title, and average hours per week devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	(e) E accou allo	Expense unt, other wances
RONALD W HOUSER	TRUSTEE				
2700 MIDWEST DRIVE	1				
ONALASKA, WI 54650	1.00	0.	0.		0.
				<u> </u>	·
2 Compensation of five highest-paid employees (other than those inc	<del>,                            </del>	enter "NONE."	1 (4) 0	<del></del>	
(a) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans and deterred compensation	accou allo	Expense Int, other wances
NONE					
		1			
		<u> </u>		L	
Total number of other employees paid over \$50,000					0

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0.

Total. Add lines 1 through 3

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P	art X Minimum Investment Return (All domestic foundations must complete this part. Foreign four	ndations,	see instructions)
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes:		
а	Average monthly fair market value of securities	1a	96,915.
b	Average of monthly cash balances	1b	96,915. 2,591.
C	Fair market value of all other assets	1c	
đ	Total (add lines 1a, b, and c)	1d	99,506.
е	Reduction claimed for blockage or other factors reported on lines 1a and		
	1c (attach detailed explanation) 1e 0.		
2	Acquisition indebtedness applicable to line 1 assets	2	0.
3	Subtract line 2 from line 1d	3	99,506.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions)	4	1,493.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	98,013.
6	Minimum investment return. Enter 5% of line 5	6	4,901.
P	art XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations are foreign organizations check here and do not complete this part.)	id certain	
1	Minimum investment return from Part X, line 6	1	4,901.
	Tax on investment income for 2009 from Part VI, line 5		<u> </u>
	Income tax for 2009. (This does not include the tax from Part VI.)		
	Add lines 2a and 2b	2c	41.
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	4,860.
4	Recoveries of amounts treated as qualifying distributions	4	0.
5	Add lines 3 and 4	5	4,860.
6	Deduction from distributable amount (see instructions)	6	0.
7	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1	7	4,860.
Pa	art XII Qualifying Distributions (see instructions)	<del></del>	
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:		
a	Expenses, contributions, gifts, etc total from Part I, column (d), line 26	1a	232,250.
b	Program-related investments - total from Part IX-B	1b	<u> </u>
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes	2	
3	Amounts set aside for specific charitable projects that satisfy the:		
a	Suitability test (prior IRS approval required)	3a	
b	Cash distribution test (attach the required schedule)	3b	
4	Qualifying distributions Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4	4	<u>232,250.</u>
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment	ı İ	
	income. Enter 1% of Part I, line 27b	5_	41.
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	232,209.
	Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation of 4940(e) reduction of tax in those years.	jualifies for	the section

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Part XIII Undistributed Income (see instructions)

•	(a) Corpus	(b) Years prior to 2008	(c) 2008	(d) 2009
1 Distributable amount for 2009 from Part XI,		<del></del>		
line 7				4,860.
2 Undistributed income, if any, as of the end of 2009				
a Enter amount for 2008 only			0.	
b Total for prior years:				
		0.		
3 Excess distributions carryover, if any, to 2009:				
a From 2004				
b From 2005 189,753.				•
c From 2006 212, 083.				
dFrom 2007 237, 473.				
e From 2008 235, 423.	054 500			
f Total of lines 3a through e	874,732.			
4 Qualifying distributions for 2009 from				
Part XII, line 4: ► \$ 232, 250.				
a Applied to 2008, but not more than line 2a			0.	
b Applied to undistributed income of prior		_		
years (Election required - see instructions)		0.	· . · . <del> </del>	
c Treated as distributions out of corpus	_			
(Election required - see instructions)	0.			
d Applied to 2009 distributable amount				4,860.
e Remaining amount distributed out of corpus	227,390.			
5 Excess distributions carryover applied to 2009 (If an amount appears in column (d) the same amount must be shown in column (a))	0.		<u> </u>	0.
6 Enter the net total of each column as indicated below:				
a Corpus Add lines 3f, 4c and 4e Subtract line 5	1,102,122.			
<b>b</b> Prior years' undistributed income. Subtract		-		
line 4b from line 2b		0.		
c Enter the amount of prior years'				
undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed		0.		
d Subtract line 6c from line 6b. Taxable				
amount - see instructions		0.		
e Undistributed income for 2008. Subtract line				
4a from line 2a. Taxable amount - see instr.			0.	
f Undistributed income for 2009. Subtract				
lines 4d and 5 from line 1. This amount must				
be distributed in 2010				0.
7 Amounts treated as distributions out of				
corpus to satisfy requirements imposed by				
section 170(b)(1)(F) or 4942(g)(3)	0.			
8 Excess distributions carryover from 2004	·			
not applied on line 5 or line 7	0.			
9 Excess distributions carryover to 2010				
Subtract lines 7 and 8 from line 6a	1,102,122.			
10 Analysis of line 9:				
a Excess from 2005 189, 753.				
b Excess from 2006 212, 083.				
c Excess from 2007 237, 473.	İ			
d Excess from 2008 235, 423.				
e Excess from 2009 227, 390.				
			<del></del>	

Part XIV Private Operating F	SER FAMILI		II A guestion (I)		91559 raye i
<u> </u>	<del></del>	· · · · · · · · · · · · · · · · · · ·	II-A, question 9)	N/A	<del></del>
1 a If the foundation has received a ruling o			İ		
foundation, and the ruling is effective fo		-	. ▶ └	· · · · · · · · · · · · · · · · · · ·	
<b>b</b> Check box to indicate whether the found		ng foundation described		] 4942(j)(3) or 49	942(j)(5)
2 a Enter the lesser of the adjusted net	Tax year	(b) 2000	Prior 3 years	147 000C	(-) 7-4-1
income from Part I or the minimum	(a) 2009	(b) 2008	(c) 2007	(d) 2006	(e) Total
investment return from Part X for					
each year listed				ļ-	
<b>b</b> 85% of line 2a			<del> </del>		
c Qualifying distributions from Part XII,					
line 4 for each year listed					
d Amounts included in line 2c not					
used directly for active conduct of					i
exempt activities				<u> </u>	
e Qualifying distributions made directly		1			
for active conduct of exempt activities.					
Subtract line 2d from line 2c 3 Complete 3a, b, or c for the			<u> </u>		
3 Complete 3a, b, or c for the alternative test relied upon:					
a "Assets" alternative test - enter:					
(1) Value of all assets					
(2) Value of assets qualifying under section 4942(j)(3)(B)(i)					
b "Endowment" alternative test - enter					
2/3 of minimum investment return shown in Part X, line 6 for each year listed					
c "Support" alternative test - enter:					
(1) Total support other than gross					
investment income (interest,				1	
dividends, rents, payments on securities loans (section	<u> </u>				
512(a)(5)), or royalties)				<u></u>	
(2) Support from general public					
and 5 or more exempt organizations as provided in					
section 4942(j)(3)(B)(iii)					
(3) Largest amount of support from					
an exempt organization			<u></u>		
(4) Gross investment income					
Part XV Supplementary Info			if the foundation	had \$5,000 or mo	ore in assets
		nstructions.)			
1 Information Regarding Foundation	•				
a List any managers of the foundation who year (but only if they have contributed m	ore than \$5,000). (See so	than 2% of the total con ection 507(d)(2).)	Tributions received by the	e toundation before the clos	se of any tax
RONALD W HOUSER					
b List any managers of the foundation who other entity) of which the foundation has			(or an equally large porti	on of the ownership of a pa	artnership or
••	a 10 % of greater filteres	).			
NONE			·		
2 Information Regarding Contribution Check here ► X if the foundation of					
the foundation makes gifts, grants, etc. (	THY MAKES CONTINUUTIONS I	o preseiected charitable	organizations and does i	not accept unsolicited requ	ests for funds. If
a The name, address, and telephone numb					
b The form in which applications should be	e submitted and informat	ion and materials they s	hould include;		
c Any submission deadlines:					
d Any restrictions or limitations on awards	, such as by geographica	l areas, charitable fields	, kinds of institutions, or	other factors.	

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Part XV

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Supplementary Information (continued) 3 Grants and Contributions Paid During the Year or Approved for Future Payment If recipient is an individual, Recipient Foundation Purpose of grant or show any relationship to **Amount** status of contribution any foundation manager or substantial contributor Name and address (home or business) recipient a Paid during the year 501(C)(3) LA CROSSE AREA FAMILY NONE TO ENABLE THEM 172,190. **YMCA** TO FURTHER 1140 MAIN STREET THEIR LA CROSSE, WI 54601 CHARITABLE PRESBYTERIAN CHURCH OF NONE 501(C)(3) TO ENABLE THEM 40,060. TO FURTHER WEST SALEM THEIR 625 WEST FRANKLIN STREET CHARITABLE WEST SALEM, WI 54669 LUTHERAN SOCIAL SERVICES NONE 501(C)(3) TO ENABLE THEM 20,000. TO FURTHER 6314 ODANA ROAD MADISON, WI 53719 THEIR CHARITABLE 232,250. ▶ 3a Total b Approved for future payment NONE 0. Total **▶** 3b

#### Part XVI-A **Analysis of Income-Producing Activities**

nter gross amounts unless otherwise indicated.	Unrelate	ed business income	Exclu	ded by section 512, 513, or 514	(e)
1 Program service revenue:	(a) Business code	(b) Amount	(C) Exclu- sion code	(d) Amount	Related or exempt function income
•	Code				
a	<u> </u>		-		<u> </u>
b			·		
c			-	·	
d			<del> </del>		75.
e					
					**-
g Fees and contracts from government agencies					
2 Membership dues and assessments			-	<del>-</del>	
3 Interest on savings and temporary cash					
investments	 		<del> </del>		400
4 Dividends and interest from securities			-	<u></u>	408.
5 Net rental income or (loss) from real estate:	٠	<u> </u>			
a Debt-financed property			-		
b Not debt-financed property			-		
6 Net rental income or (loss) from personal					
property					
7 Other investment income					
8 Gain or (loss) from sales of assets other					
than inventory					4,225.
9 Net income or (loss) from special events					
O Gross profit or (loss) from sales of inventory	· · · · · · · · · · · · · · · · · · ·				
1 Other revenue:		I	ı		
a					
b					
c					
d					
e					
2 Subtotal. Add columns (b), (d), and (e)		0.	L	0.	4,633.
3 Total Add line 12, columns (b), (d), and (e)				13	4,633.
See worksheet in line 13 instructions to verify calculations.)				· · · · · · · · · · · · · · · · · · ·	
Part XVI-B Relationship of Activities to	the Acc	omplishment of Ex	emp	t Purposes	
Line No Explain below how each activity for which incom	ne is renorted	in column (e) of Part XVI-A	contril	outed importantly to the accor	nnlishment of
the foundation's exempt purposes (other than b			COMAIL	ratea importantly to the accor	ipholitical of
THE FOUNDATIONS SOLE AC			MA	KING GRANTS T	O OTHER
TAX-EXEMPT ORGANIZATION					
ACTIVITY IS DIRECTLY RE					
EXEMPT PURPOSE					
					·
		·			

Pa		formation Recempt Organ	egarding Transfers nizations	s To a	and Transaction	s ar	nd Relationsh	hips With Non	charitable	е	
î	Did the organiza	tion directly or indi	rectly engage in any of the	followir	ig with any other organia	zation	described in sectiv	on 501(c) of		Yes	No
			:)(3) organizations) or in se								
2	•	•	lation to a noncharitable ex			<b>5</b>				ļ	
٠	(1) Cash	no reporting round		op. o.	gameanon on				1a(1)		x
	(2) Other assets	•							1a(2)	<u> </u>	X
	Other transaction								14(2)	<del> </del>	<del>                                     </del>
U			able exempt organization						1b(1)		x
	` '		· -	zation		-			1b(1)	<del>                                     </del>	X
			oncharitable exempt organiz	Lation						<del> </del>	X
		cilities, equipment,							1b(3)	$\vdash$	X
	• •	nent arrangements				-		-	1b(4) 1b(5)	<del>                                     </del>	X
	(5) Loans or loa		ambarchin or fundraicing c	olicitatio	nne			•	1b(6)	<del> </del>	X
_	٠,,		embership or fundraising so						10(0)	<del>                                     </del>	X
	•		ailing lists, other assets, or "Yes," complete the followi	•	•	d abus	ave chave the fact of	 Parkat value of the av		L	<u> </u>
a										seis,	
			oundation. If the foundation		eu iess than fair market	value	BI ANY DANSACION	or Sharing arrangen	nent, snow m		
(0)			other assets, or services re		e exempt organization		(4)				
(4)	Line no (b) An	nount involved			s exempt or gamzation		(d) Description	of transfers, transaction	is, and sharing ar	rangeme	
			<u> </u>	1/A			<del> </del>				
									· · · · · · · · · · · · · · · · · · ·		
							<del> </del>				
			<del></del>				-				
							-				
							<del>                                     </del>				
								<u> </u>	<del></del> -	<del></del>	
						_	<del> </del>				
							-				
							<del></del>				
							-		<del></del>		
							<del>                                     </del>				
		<del></del>					-				
			,								
		of the Code (othe	tly affiliated with, or related r than section 501(c)(3)) o edule.			janiza	ations described		Yes	X	No
		(a) Name of org	ganization		(b) Type of organization	on	(	c) Description of rel	ationship		
		N/A									
								· · · · · · · · · · · · · · · · · · ·			
									.,		
	<u>.</u>										<del></del>
			nave examined this return includer than taxpayer or fiduciary) is be						ef, it is true, corre	ect,	
اي <u>ا</u>	Signature of o	officer or trustee			Date		Title	· <del>_</del>			
Sign Here	Prenarer's	<del>-</del>	J. BENNING,	מסי		Da O 5		eck if f- ployed	Preparer's identif	ying nur	nber
ر ا	Signature Signature Signature Signature Signature Signature			CLD	·	10.0	,, <u>, , , , , , , , , , , , , , , , , ,</u>	EIN ► 39-05	758449		
ľ	a S sit sett-employe		OVERNOOD HII	J.S	PARKWAY						

715-832-3407

Phone no.

address and ZIP code EAU CLAIRE, WI 54701

# Schedule B (Form 990, 990-EZ,

or 990-PF)

Department of the Treasury Internal Revenue Service

Name of the organization

# **Schedule of Contributors**

► Attach to Form 990, 990-EZ, or 990-PF.

OMB No 1545-0047

Name of the organization		Employer identification number
R	W HOUSER FAMILY FOUNDATION	20-2991559
Organization type (check of	one):	
Filers of:	Section:	
Form 990 or 990-EZ	501(c)( ) (enter number) organization	
	4947(a)(1) nonexempt charitable trust not treated as a private foundation	
	527 political organization	
Form 990-PF	X 501(c)(3) exempt private foundation	
	4947(a)(1) nonexempt charitable trust treated as a private foundation	
	501(c)(3) taxable private foundation	
	s covered by the <b>General Rule</b> or a <b>Special Rule.</b> (7), (8), or (10) organization can check boxes for both the General Rule and a Special Ru	le See instructions
General Rule		
X For an organization contributor. Complete	n filing Form 990, 990-EZ, or 990-PF that received, during the year, \$5,000 or more (in molete Parts I and II	oney or property) from any one
Special Rules		
509(a)(1) and 170(t	c)(3) organization filing Form 990 or 990-EZ that met the 33 1/3% support test of the region (1)(A)(vi), and received from any one contributor, during the year, a contribution of the solution (ii) Form 990-EZ, line 1 Complete Parts I and II	
aggregate contribu	c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributions of more than \$1,000 for use <i>exclusively</i> for religious, charitable, scientific, literary, cruelty to children or animals. Complete Parts I, II, and III	
contributions for us If this box is check purpose Do not co	c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributes exclusively for religious, charitable, etc., purposes, but these contributions did not agged, enter here the total contributions that were received during the year for an exclusive amplete any of the parts unless the <b>General Rule</b> applies to this organization because it e, etc., contributions of \$5,000 or more during the year	gregate to more than \$1,000 ly religious, charitable, etc ,
out it must answer "No" on	nat is not covered by the General Rule and/or the Special Rules does not file Schedule B Part IV, line 2 of its Form 990, or check the box on line H of its Form 990-EZ, or on line 2 ng requirements of Schedule B (Form 990, 990 EZ, or 990-PF)	

K W H	OUSER FAMILY FOUNDATION		<u>1-2991559</u>
Part I	Contributors (see instructions)		
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
1	RONALD W HOUSER  2700 MIDWEST DRIVE  ONALASKA, WI 54650	\$\$\$	Person X Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
NO.	Name, address, and ZIF + 4	*	Person Payroll Noncash (Complete Part II if there is a noncash contribution)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
		\$	Person Payroll Oncash Complete Part II if there is a noncash contribution )
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
		\$	Person Payroll Oncash Complete Part II if there is a noncash contribution )
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
-11		\$	Person Payroll Complete Part II if there is a noncash contribution )
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution.)

FORM 990-PF DIVIDENI	DS AND	INTER	EST FROM	SECUI	RITIES	STATEMENT	1
SOURCE		GROSS	AMOUNT		ITAL GAINS IVIDENDS	COLUMN (A	.)
BESSEMER TRUST			408.		0.	4	08.
TOTAL TO FM 990-PF, PART I, I	LN 4		408.		0.	4	08.
FORM 990-PF (	OTHER	PROFES	SIONAL FI	EES		STATEMENT	2
DESCRIPTION	EXPE	NSES	NET INVE	EST-		(D) CHARITA E PURPOS	
INVESTMENT FEES		530.		530.			0.
TO FORM 990-PF, PG 1, LN 16C		530.	·	530.	<del> </del>		0.
			XPENSES	530.		STATEMENT	3
FORM 990-PF	O ( EXPE	THER E	XPENSES (B) NET INVE	EST-			3 BLE
TO FORM 990-PF, PG 1, LN 16C  FORM 990-PF  DESCRIPTION BANK FEES	O ( EXPE	THER E	XPENSES (B) NET INVE	EST-	ADJUSTED	(D) CHARITA	3 BLE
FORM 990-PF  DESCRIPTION	O ( EXPE	THER E. A) SNSES BOOKS	XPENSES (B) NET INVE	EST- COME	ADJUSTED	(D) CHARITA	3 BLE
FORM 990-PF  DESCRIPTION  BANK FEES	( EXPE PER	A) CNSES BOOKS 38.	XPENSES (B) NET INVE	EST- COME 0.	ADJUSTED NET INCOM	(D) CHARITA	3 BLE ES
FORM 990-PF  DESCRIPTION  BANK FEES  TO FORM 990-PF, PG 1, LN 23	( EXPE PER	A) CNSES BOOKS 38.	XPENSES (B) NET INVE	EST- COME 0.	ADJUSTED NET INCOM	(D) CHARITA E PURPOS	BLE ES 0.
FORM 990-PF  DESCRIPTION  BANK FEES  TO FORM 990-PF, PG 1, LN 23  FORM 990-PF OTHER DECREASE	C EXPE PER	A) SNSES BOOKS 38. 38.	XPENSES (B) NET INVE	EST- COME 0.	ADJUSTED NET INCOM	(D) CHARITA E PURPOS STATEMENT	3 BLE ES 0.

FORM 990-PF	CORPORATE STOCK		STATEMENT 5
DESCRIPTION		BOOK VALUE	FAIR MARKET VALUE
1680 SHARES UNITEDHEAL 610 SHARES SCHLUMBERGE 348 SHARES APPLE 129 SHARES GOOGLE 69 SHARES THERMO FISHE	R	0. 0. 0. 0. 3,292.	0. 0. 0. 0. 3,290.
TOTAL TO FORM 990-PF,	PART II, LINE 10B	3,292.	3,290.
FORM 990-PF	LIST OF SUBSTANTIAL CONTRIE PART VII-A, LINE 10	BUTORS	STATEMENT 6
NAME OF CONTRIBUTOR	ADDRESS		
RON W HOUSER	2700 MIDWEST ONALASKA, WI		