

See a Social Security Number? Say Something! Report Privacy Problems to https://public.resource.org/privacy Or call the IRS Identity Theft Hotline at 1-800-908-4490



Form **990-EZ**

Shor<u>t</u> Form Return of Organization Exempt From Income Tax

OMB No 1545-1150

Open to Public Inspection

Department of the Treasury

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

Sponsoring organizations of donor advised funds and controlling organizations as defined in section 512(b)(13) must file Form 990. All other organizations with gross receipts less than \$500,000 and total assets less than \$1,250,000 at the end of the year may use this form

Internal Revenue Service ▶ The organization may have to use a copy of this return to satisfy state reporting requirements For the 2009 calendar year, or tax year beginning and ending D Employer identification number Check if applicable C Name of organization Please use IRS Address change MARATHON COUNTY PUBLIC LIBRARY label or Name change FOUNDATION 39-1402476 brint or Number and street (or P.O. box, if mail is not delivered to street address) Room/suite E Telephone number type Instial Specific 715-261-7212 Termin 300 N FIRST STREET Instruc-City or town, state or country, and ZIP + 4 F Group Exemption Amended tions 54403<u>-5405</u> Number > WAUSAU, WI Accrual • Section 501(c)(3) organizations and 4947(a)(1) nonexempt charitable trusts must attach a completed G Accounting method: X Cash Schedule A (Form 990 or 990-EZ) Other (specify) Website: ► WWW.MCPL.LIB.WI.US H Check \(\bigcup \leftarrow \leftarrow \text{if the organization is not} \) Tax-exempt status (check only one) — X 501(c) (3) ◀ (insert no.) 4947(a)(1) or 527 required to attach Schedule B (form 990, 990-EZ, or 990-PF) Check [if the organization is not a section 509(a)(3) supporting organization and its gross receipts are normally not more than \$25,000. A Form 990-EZ or Form 990 return is not required, but if the organization chooses to file a return, be sure to file a complete return. Add lines 5b, 6b, and 7b, to line 9 to determine gross receipts; if \$500,000 or more, file Form 990 instead of Form 990-EZ 119,008. Revenue, Expenses, and Changes in Net Assets or Fund Balances (See the instructions for Part I.) 100,398. Contributions, gifts, grants, and similar amounts received Program service revenue including government fees and contracts 2 3 Membership dues and assessments 18,610. 4 Investment income Gross amount from sale of assets other than inventory Less: cost or other basis and sales expenses Gain or (loss) from sale of assets other than inventory (Subtract line 5b from line 5a) 5c Special events and activities (complete applicable parts of Schedule G). If any amount is from gaming, check here ▶ L of contributions a Gross revenue (not including \$ 6a reported on line 1) 6b b Less: direct expenses other than fundraising expenses Net income or (loss) from special events and activities (Subtract line 6b from line 6a) 6c 7a Gross sales of inventory, less returns and allowances 7a 7b b Less; cost of goods sold c Gross profit or (loss) from sales of inventory (Subtract line 7b from line 7a) R Other revenue (describe 119,008 Total revenue Add lines 1, 2, 3, 4, 5c, 6c, 7c, and 8 17,000. STMT 4 10 Grants and similar amounts paid (attach schedule) 11 Benefits paid to or for members Salaries, other compensation, and employee benefits 12 12 Professional fees and other payments to independent contractors 13 13 Occupancy, rent, utilities, and maintenance 14 14 Printing, Suplications, postage, and shipping) 15 915. 15 Other expenses (describe 2010 SEE STATEMENT 403. 16 16 21,318. Total expenses. Add lines 10 through 16 17 17 97,690. 18 Excess or (deticit) for the year (Subtract line 17 from line 9) 18 Net Assets Net assets or fund balances at beginning of year (from line 27, column (A)) (must agree with end-of-year figure reported on prior year's return) 19 775,628. SEE STATEMENT 3 20 <u> 153,957.</u> Other changes in net assets or fund balances (attach explanation) 20 21 027,275 Net assets or fund balances at end of year. Combine lines 18 through 20 Balance Sheets. If Total assets on line 25, column (B) are \$1,250,000 or more, file Form 990 instead of Form 990-EZ. (See the instructions for Part II.) (B) End of year (A) Beginning of year 113,903.22 77,517. Cash, savings, and investments 22 23 Land and buildings 23 661,725 949,758. SEE STATEMENT 2) 24 24 Other assets (describe 775,628. 25 027,275. 25 Total assets 26 0 Total liabilities (describe 26 775,628. Net assets or fund balances (line 27 of column (B) must agree with line 21) 027,275. 27

LHA For Privacy Act and Paperwork Reduction Act Notice, see the separate instructions.

Form **990-EZ** (2009)

MARATHON COUNTY PUBLIC LIBRARY

Part III Statement of Program Service Accomplishme	ents (See the instructions for	Part III.)	39-14024 Ex	penses
What is the organization's primary exempt purpose? SEE STATEMEN	т 7		I	r section 501(c)(3)) organizations and
Describe what was achieved in carrying out the organization's exempt pu			ha	7(a)(1) trusts, optional
the services provided, the number of persons benefited, and other relevant	ant information for each proc	gram title	for others)	
28 SEE STATEMENT 6				
17 000 \(\rangle \text{tables amount includes foreign}			28a	17,000.
(Grants \$ 17,000.) If this amount includes foreign	grants, check here		204	17,000.
29				
				
(Grants \$) If this amount includes foreign	grants, check here	>	29a	
30	<u> </u>			
				
(Grants \$) If this amount includes foreign	grants, check here		30a	
31 Other program services (attach schedule)				
(Grants \$) If this amount includes foreign	grants, check here	>	31a	
32 Total program service expenses (add lines 28a through 31a)	Employees		▶ 32	17,000.
Part IV List of Officers, Directors, Trustees, and Key	Employees. List each one ev	ven if not compensated		or Part IV)
	(b) Title and average hours	(c) Compensation	(d) Contributions to employee	(e) Expense
(a) Name and address	per week devoted to	(If not paid, enter	benefit plans &	account and
	position	-0)	deferred compensation	other allowances
MARK SAUER, 300 N FIRST STREET,	PRESIDENT (TE	RM 5/10)	Compensation	
MARK SAUER, 300 N FIRST STREET, WAUSAU, WI 544035405	0.39	0.	0.	0.
TAMI W. MCCANN, 300 N FIRST STREET,		RM 5/11)	0.	<u> </u>
WAUSAU, WI 544035405	1.50	, i	0.	0.
BRUCE BOHLKEN, 300 N FIRST STREET,	SECRETARY (TE		<u> </u>	
WAUSAU, WI 544035405	0.25	Ó.	0.	0.
MICHAEL BRUNT, 300 N FIRST STREET,	DIRECTOR (LEF	T IN 09)		
WAUSAU, WI 544035405	1.54	0.	0.	0.
CHRYSTAL MISENER, 300 N FIRST	VICE PRESIDEN	T(TERM 5/	10)	
STREET, WAUSAU, WI 544035405	0.30	0.	0.	0.
LYNETTE MCCOOL, 300 N FIRST STREET,	DIRECTOR (TER	M 5/10)		
WAUSAU, WI 544035405	0.25	0.	0.	0.
PHYLLIS CHRISTENSEN, 300 N FIRST	EX OFFICIO			
STREET, WAUSAU, WI 544035405	0.25	0.	0.	0.
LEAH ALTERS, 300 N FIRST STREET,	DIRECTOR (TER	_		
WAUSAU, WI 544035405	0.10	0.	0.	0
STEVEN HERRING, 300 N FIRST STREET,	DIRECTOR (TER	0.	0.	0
WAUSAU, WI 544035405 MELISSA SPINDLER, 300 N FIRST	SECRETARY (TER	 	0.	0.
STREET, WAUSAU, WI 544035405	0.10	0.	0.	0
KRISTEN FISH, 300 N FIRST STREET,	DIRECTOR (LEF	 	<u> </u>	
WAUSAU, WI 544035405	0.10	Ó.	0.	0.
DAVE ACKERMAN, 300 N FIRST STREET,	DIRECTOR (TER	 	1	,
WAUSAU, WI 544035405	0.10	0.	0.	0
MEREDITH KIVI, 300 N FIRST STREET,	DIRECTOR (TER	M 5/12)		
WAUSAU, WI 544035405	0.10_	0.	0.	0.
SUSAN KROLOW, 300 N FIRST STREET,	DIRECTOR (TER		}	
WAUSAU, WI 544035405	0.10	0.	0.	0.
	-	1		
	-			 -
	-	[
		 	 	 -
	7			
932172 02-08-10		•	Form	990-EZ (2009

Form 990-EZ (2009)

FOUNDATION

39-1402476

Page 3

Yes No 33 Multiple organization engage in any activity not previously reported to the IRS? If Yes, attach a detailed description of each activity 33 X X Were any changes made to the organization or governing documents? If Yes, attach a conformed copy of the changes 34 X Were any changes made to the organization or governing documents? If Yes, attach a conformed copy of the changes 34 X Were any changes made to the organization or governing documents? If Yes, attach a conformed copy of the changes 34 X Were any changes made to the organization in the measurements 34 X Were any changes made to the organization of the measurements 34 X Were any changes made to the organization of the measurements 34 X Were any changes made to the organization of the measurements 34 X Were any changes made to the organization in the measurements 34 X Were any changes made to the organization in the measurements 35 X Solid the organization interest 35 X No. 37 Enter amount of political expenditures, direct or indirect, as described in the instructions. 37 X No. 37 Solid the organization interest 34 X No. 37 Solid the organization interest 35 X No. 37 Solid the organization interest 35 X No. 37 Solid the organization interest 37 X No. 37 Solid the organization interest 37 X No. 37 Solid the organization interest 37 X No. 38 X No. 39 X No. 39 X No. 39 X No. 39 X No.	Pa	ort V Other Information (Note the statement requirements in the instructions for Part V)		_	
33 Dut the organization engage in any activity not previously reported to the IRSP II 'Yes', statich a detailed description of each activity Were any changes made to the organization governing documents? If 'Yes', statich a conformed copy of the changes If the organization had income from business activities, such as those reported on lines 2, 6a, and 7a (priming others), but not reported on form 990-1, attach a statement explaining why the organization do not report the income on Form 990-1. 34	<u> </u>			Yes	No
34 Were any changes made to the organization of powering documents? If "res, attach a conformed copy of the changes of the congruitation had income from bisuness activities, such as those reported on fines 2, 6a, and 7a famong others), but not reported on Form 990-T, attach a statement explaning why the organization did not report the income on Form 990-T. 35 bit the organization had more from the statement explaning why the organization did not report the income on Form 990-T. 36 bit the organization income on Form 990-T for this year? 37 bit fives, "has it field a tax return on Form 990-T for this year? 38 bit field a tax return on Form 990-T for this year? 39 bit the organization orderor a disquisition, described in the instructions. 38 bit N/A 38 bit N/A 39 bit the organization orderor year of the service or indirect, as described in the instructions. 39 bit the organization orderor year and still outstanding at the end of the period covered by this return? 39 bit the organization orderor year and still outstanding at the end of the period covered by this return? 39 bit (N/A)	33	Did the organization engage in any activity not previously reported to the IRS? If "Yes." attach a detailed description of each activity	33		
35 If the organization had income from business activities, such as those reported on hier 2, £a, and 7 a (among others), but not reported on Form 990-7. Lab of the organization have unrelated business gross income of \$1,000 or more or was a subject to section 6033(e) notice, reporting, and groxy tax requirements? 36 If the organization have unrelated business gross income of \$1,000 or more or was a subject to section 6033(e) notice, reporting, and groxy tax requirements? 37 If the organization have unrelated business gross income of \$1,000 or more or was a subject to section 6033(e) notice, reporting, and groxy tax requirements? 38 If we have a subject to section 6033(e) notice, reporting, and groxy tax requirements? 39 If we's, complete a place better the fold amount involved to the organization of Form 112P-POL for this year? 30 If the organization before who in which a copy of the section 4011(e) is required to the organization of the form 112P-POL for this year? 30 If the organization before who in which a copy of the section 4011(e) is required to the organization of the organization of the form 112P-POL for this year? 31 If we's, complete Schedule I, Part II and enter the fold amount involved to the period covered by this return? 32 If we's, complete Schedule I, Part II and enter the fold amount involved to the period covered by the return? 33 Ecotion 501(c)(3) organizations. Enter amount of tax imposed on organization depaids to the transaction during the year under stoces. Schedule I, Part I was a schedule organization in the part that the transaction of that the transaction? If Yes, complete person during the year under stoces. Schedule I, Part I was a schedule person during the year under stoces. Schedule I, Part I was a schedule person during the year under stoces. The part of the organization in the part of the organization and the part of the organization in the part of					
reported on Form 990-T, attach a statement explaning why the organization did not report the income on Form 990-T. a Did the organization have unrelated business gross income of \$1,000 or more or was it subject to section 6033(e) notice, reporting, and proxy tax requirements? b If "Yes," has if filed a fax return on Form 990-T for this year? Drift the organization undergo a liquidation, dissolution, termination, or significant disposition of net assets during the year? If "Yes," complete applicable parts of SCh. N 35a Drift are organization to political expenditures, direct or indirect, as described in the instructions. Drift the organization of political expenditures, direct or indirect, as described in the instructions. Drift the organization has provided an explain or the period covered by this return? 35b If "Yes," complete Schedule L, Part II and enter the total amount involved 36a X 37b X 38a Drift the organizations. Enter: Initiation less and capital contributions included on line 9 Section 501(c)(3) and 501(c)(4) organizations. Enter amount of tax with a disqualified person in a prior year, and that the transaction has not been reported on any of the organizations. Enter amount of tax mispeed on organization managers or disqualified persons during the year unders exclions 4912, 4955, and 4958 Section 501(c)(3) and 501(c)(4) organizations. Enter amount of tax on line 40c reimbursed by the organizations during the year unders exclions 4912, 4955, and 4958 Section 501(c)(3) and 501(c)(4) organizations mispeed on organization managers or disqualified persons during the year unders exclions 4912, 4955, and 4958 Section 501(c)(3) and 501(c)(4) organizations. Enter amount of tax inviged on organization managers or disqualified persons during the person in a prior year, and that the transaction has not been reported on any of the organization organization applied person in a prior year, and that the transaction organization in the organization applied person in a prior year, and that the transact					
a but the organization have unrelated business gross income of \$1,000 or more or was it subject to section 6033(e) notice, reporting, and proxy tax requirements? 5 If If yes, that filed a bax return on Form 990-T for this year? 5 If the organization undergo a liquidation, dissolution, terrimation, or significant disposition of net assets during the year? If Yes, complete agriculture, direct or indirect, as described in the instructions. 5 If yes, complete agriculture, direct or indirect, as described in the instructions. 5 If Yes, complete agriculture, direct or indirect, as described in the instructions. 5 If Yes, complete special contributions included on the period covered by this return? 6 If Yes, complete Schedule I, Part II and enter the total amount involved 7 If Yes, complete schedule I, Part II and enter the total amount involved 8 If Yes, complete Schedule I, Part II and enter the total amount involved 9 Section 501(c)(3) and 501(c)(4) organizations. Enter amount of tax imposed on the organization during the year undersection 501(c)(3) and 501(c)(4) organizations. Dut the organization engage in any section 4955 excess benefit transaction during the year or is it aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization. But the organization engage in any section 4955 excess benefit transaction during the year or is disqualitied persons during the year undersection 501(c)(3) and 501(c)(4) organizations. Enter amount of tax imposed on organization managers or disqualitied persons during the year undersection 501(c)(3) and 501(c)(4) organizations. Enter amount of tax imposed on organization managers or disqualitied persons during the year undersection 501(c)(3) and 501(c)(4) organizations. Enter amount of tax on line 40c reimbursed by the organization because it are a fine that the organization of the organization organization and the properties of the organization of the fine orga					
and proxy tax requirements? bit haves, has it filed a tax return on Form 990-T for this year? bit the organization undergo a liquidation, dissolution, termination, or significant disposition of net assets during the year? If Yes, complete applicable parts of Sch. N 378	a				1
b If Yes; has if field a fax return on Form 990-T for this year? 5 Did the organization undergo a liquidation, dissolution, termination, or significant disposition of net assets during the year? If Yes; complete applicable parts of Sch. N 73 a finet amount of political expenditures, direct or indirect, as described in the instructions. ▶ □ 37a □ 0. 73 b Ut the organization the Form 1120-POL for this year? 74 b Ut the organization borrow from, or make any loans to, any officer, director, trustee, or key employee or were any such loans made in a prior year and still outstanding at the end of the period covered by this return? 75 b Uf Yes; complete Schedule, 1, Part II and enter the total amount involved 76 b Uf Yes; organizations. Enter: 77 a In Intitude the total amount involved 77 b Uf Yes; complete Schedule, 1, Part II and enter the total amount involved 78 cerepits, included on line 9, for public use of club facilities 79 b Gross recepits, included on line 9, for public use of club facilities 70 b Section 501(c)(3) and 501(c)(4) organizations. Enter amount of tax imposed on the organization during the year under: 80 section 501(c)(3) and 501(c)(4) organizations. Enter amount of tax imposed on represent on any or the organization has not been reported on any for the organization engage in any section 4958 excess benefit transaction during the year under sections 4912, 4955, and 4958 70 b Section 501(c)(3) and 501(c)(4) organizations. Enter amount of tax imposed on organization managers or disqualified person and a prior year, and that the transaction are provided in any of the organizations sprin forms 990 or 990-E72 If Yes; complete Schedule, 1, Part II organization and the transaction of the organization sprin forms 990 or 990-E72 If Yes; complete Schedule, 1, Part II organization and the transaction of the organization in the dore rembursed by the organization in the organization in the organization in a foreign country (such as a bank account, securities account, or other national accounts or			35a		x
36 but the organization undergo a liquidation, dissolution, termination, or significant disposition of net assets during the year? If "Yes," complete applicable parts of Sch. N 37a	b			N/	_
37a Enter amount of political expenditures, direct or indirect, as described in the instructions. Did the organization file Form 1120-POL for this year? By Did the organization form from, or make any loans to, any officer, director, trustee, or key employee or were any such loans made in a prior year and still outstanding at the end of the period covered by this return? By If Yes, complete Schedule L, Part II and enter the total amount involved Section 501(c)(7) organizations. Enter: a Instation fees and capital contributions included on line 9 By Gross receipts, included on line 9, for public use of club facilities. 5 Section 501(c)(3) organizations. Enter amount of tax imposed on the organization during the year under: 5 Section 501(c)(3) organizations. Dut the organization and use the total amount involved. 5 Section 501(c)(3) organizations. Dut the organizations engage in any section 4958 to Section 4911 5 Section 501(c)(3) and 501(c)(4) organizations. Dut the organization engage in any section 4958 to Section 4911 5 Section 501(c)(3) and 501(c)(4) organizations. Dut the organization engage in any section 4958 to some that the transaction during the year under sections 501(c)(3) and 501(c)(4) organizations. Enter amount of tax imposed on organization managers or disqualified persons during the year under sections 4912, 4955, and 4958 C Section 501(c)(3) and 501(c)(4) organizations. Enter amount of tax imposed on organization managers or disqualified persons during the year under sections 4912, 4955, and 4958 C Section 501(c)(3) and 501(c)(4) organizations. Enter amount of tax imposed on organization managers or disqualified persons during the tax year, was the organization a party to a prohibited tax shelter transaction? If Yes, complete Form 886-T 1 List the states with which a copy of this return is fled. WI List the states with which a copy of this return is fled. WI List the states with which a copy of this return is fled. WI List the states with which a copy of this return				-	
37a Enter amount of political expenditures, direct or indirect, as described in the instructions. Did the organization file Form 1120-POL for this year? By Did the organization form from, or make any loans to, any officer, director, trustee, or key employee or were any such loans made in a prior year and still outstanding at the end of the period covered by this return? By If Yes, complete Schedule L, Part II and enter the total amount involved Section 501(c)(7) organizations. Enter: a Instation fees and capital contributions included on line 9 By Gross receipts, included on line 9, for public use of club facilities. 5 Section 501(c)(3) organizations. Enter amount of tax imposed on the organization during the year under: 5 Section 501(c)(3) organizations. Dut the organization and use the total amount involved. 5 Section 501(c)(3) organizations. Dut the organizations engage in any section 4958 to Section 4911 5 Section 501(c)(3) and 501(c)(4) organizations. Dut the organization engage in any section 4958 to Section 4911 5 Section 501(c)(3) and 501(c)(4) organizations. Dut the organization engage in any section 4958 to some that the transaction during the year under sections 501(c)(3) and 501(c)(4) organizations. Enter amount of tax imposed on organization managers or disqualified persons during the year under sections 4912, 4955, and 4958 C Section 501(c)(3) and 501(c)(4) organizations. Enter amount of tax imposed on organization managers or disqualified persons during the year under sections 4912, 4955, and 4958 C Section 501(c)(3) and 501(c)(4) organizations. Enter amount of tax imposed on organization managers or disqualified persons during the tax year, was the organization a party to a prohibited tax shelter transaction? If Yes, complete Form 886-T 1 List the states with which a copy of this return is fled. WI List the states with which a copy of this return is fled. WI List the states with which a copy of this return is fled. WI List the states with which a copy of this return		complete applicable parts of Sch. N	36		X
38a Did the organization borrow from, or make any loans to, any officer, director, trustee, or key employee or were any such loans made in a prior year and still outstanding at the end of the period covered by this return? 38b N/A 39 Section 501(c)/7) organizations. Enter: a Initiation fees and capital contributions included on line 9 b Gross receipts, included on line 9, for public use of club facilities b Gross receipts, included on line 9, for public use of club facilities cection 4911 ▶ 0. ; section 4912 ▶ 0. ; section 4955 ▶ 0. b Section 501(c)(3) organizations. Enter amount of tax imposed on the organization during the year under: section 4911 ▶ 0. ; section 4912 ▶ 0. ; section 4955 ▶ 0. b Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in any section 4958 excess benefit transaction during the year or is it aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organizations. Fire amount of tax imposed on organization immangers or disqualified persons during the year under sections 4912, 4955, and 4956 d Section 501(c)(3) and 501(c)(4) organizations. Enter amount of tax on line 40c reimbursed by the organizations. At any time during the lax error, and 4958 d Section 501(c)(3) and 501(c)(4) organizations. Enter amount of tax on line 40c reimbursed by the organizations. At any time during the lax error, are, was the organization a party to a prohibited tax shelter transaction? If Yes, complete form 8886-7 40 Extra the states with which a copy of this return is filed. ▶ WI 41 List the states with which a copy of this return is filed. ▶ WI 42a The organization's books are in care of ▶ HEATHER WILDE, MARATHON COUN Telephone no. ▶ 715-261-7200 42b At any time during the calendar year, did the organization have an interest in or a signature or other authority over a financial account in a foreign country. ▶ 42c X 42c X 42c X 42c X 43 Section 4947(a)(1) nonexempte charita	37 a				
38a Did the organization borrow from, or make any loans to, any officer, director, trustee, or key employee or were any such loans made in a prior year and still outstanding at the end of the period covered by this return? 38b N/A 39 Section 501(c)/7) organizations. Enter: a Initiation fees and capital contributions included on line 9 b Gross receipts, included on line 9, for public use of club facilities b Gross receipts, included on line 9, for public use of club facilities cection 4911 ▶ 0. ; section 4912 ▶ 0. ; section 4955 ▶ 0. b Section 501(c)(3) organizations. Enter amount of tax imposed on the organization during the year under: section 4911 ▶ 0. ; section 4912 ▶ 0. ; section 4955 ▶ 0. b Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in any section 4958 excess benefit transaction during the year or is it aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organizations. Fire amount of tax imposed on organization immangers or disqualified persons during the year under sections 4912, 4955, and 4956 d Section 501(c)(3) and 501(c)(4) organizations. Enter amount of tax on line 40c reimbursed by the organizations. At any time during the lax error, and 4958 d Section 501(c)(3) and 501(c)(4) organizations. Enter amount of tax on line 40c reimbursed by the organizations. At any time during the lax error, are, was the organization a party to a prohibited tax shelter transaction? If Yes, complete form 8886-7 40 Extra the states with which a copy of this return is filed. ▶ WI 41 List the states with which a copy of this return is filed. ▶ WI 42a The organization's books are in care of ▶ HEATHER WILDE, MARATHON COUN Telephone no. ▶ 715-261-7200 42b At any time during the calendar year, did the organization have an interest in or a signature or other authority over a financial account in a foreign country. ▶ 42c X 42c X 42c X 42c X 43 Section 4947(a)(1) nonexempte charita			7		X
b If Yes, complete Schedule L, Part II and enter the total amount involved 39 Section 501(c)(7) organizations. Enter: a Initiation fees and capital contributions included on line 9 b Gross receipts, included on line 9, for public use of club facilities 40a Section 501(c)(3) organizations. Enter amount of tax imposed on the organization during the year under: section 4911					
b If Yes, complete Schedule L, Part II and enter the total amount involved 39 Section 501(c)(7) organizations. Enter: a Initiation fees and capital contributions included on line 9 b Gross receipts, included on line 9, for public use of club facilities 40a Section 501(c)(3) organizations. Enter amount of tax imposed on the organization during the year under: section 4911		in a prior year and still outstanding at the end of the period covered by this return?	38a		X
39 Section 501(c)(7) organizations. Enter: a initiation fees and capital contributions included on line 9 b Gross receipts, included on line 9, for public use of club facilities 40a Section 501(c)(3) organizations. Enter amount of tax imposed on the organization during the year under: section 4911	Ь	If "Yes," complete Schedule L, Part II and enter the total amount involved 38b N/A			
b Gross receipts, included on line 9, for public use of club facilities 40a Section 501(c)(3) organizations. Enter amount of tax imposed on the organization during the year under: section 4911 ▶ 0 . ; section 4912 ▶ 0 . ; section 4955 ▶ 0 . b Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in any section 4955 excess benefit transaction during the year or is it aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If Yes,* complete Schedule L, Part I 40b X Section 501(c)(3) and 501(c)(4) organizations. Enter amount of tax imposed on organization managers or disqualified persons during the year under sections 4912, 4955, and 4958 or disqualified persons during the year under sections 4912, 4955, and 4958 or disqualified persons during the year under sections 4912, 4955, and 4958 organization. At any time during the tax year, was the organization a party to a prohibited tax shelter transaction? If Yes,* complete Form 8866-T 11. List the states with which a copy of this return is filed. ▶ WI 12. The organization's books are in care of by HEATHER WILDE, MARATHON COUN Telephone no. ▶ 71.5 - 261 - 7.2.0.0 13. Located at ▶ 3.0.0 N FIRST STREET, WAUSAU, WI 14. List the states with which a copy of this return is filed. ▶ WI 15. At any time during the calendar year, did the organization have an interest in or a signature or other authority over a financial account in a foreign country: ▶ See the instructions for exceptions and filling requirements for Form 10 F 90-22.1, Report of Foreign Bank and Financial Accounts. c At any time during the calendar year, did the organization maintain an office outside of the U.S.? Yes No 17. Yes,* enter the name of the foreign country: ▶ See the instructions for exceptions and filling requirements for Form 10 F 90-22.1, Report of Foreign Bank and Financial Accounts. c At any time during the calenda	39		1		
b Gross receipts, included on line 9, for public use of club facilities 40a Section 501(c)(3) organizations. Enter amount of tax imposed on the organization during the year under: section 4911 ▶ 0 . ; section 4912 ▶ 0 . ; section 4955 ▶ 0 . b Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in any section 4955 excess benefit transaction during the year or is it aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If Yes,* complete Schedule L, Part I 40b X Section 501(c)(3) and 501(c)(4) organizations. Enter amount of tax imposed on organization managers or disqualified persons during the year under sections 4912, 4955, and 4958 or disqualified persons during the year under sections 4912, 4955, and 4958 or disqualified persons during the year under sections 4912, 4955, and 4958 organization. At any time during the tax year, was the organization a party to a prohibited tax shelter transaction? If Yes,* complete Form 8866-T 11. List the states with which a copy of this return is filed. ▶ WI 12. The organization's books are in care of by HEATHER WILDE, MARATHON COUN Telephone no. ▶ 71.5 - 261 - 7.2.0.0 13. Located at ▶ 3.0.0 N FIRST STREET, WAUSAU, WI 14. List the states with which a copy of this return is filed. ▶ WI 15. At any time during the calendar year, did the organization have an interest in or a signature or other authority over a financial account in a foreign country: ▶ See the instructions for exceptions and filling requirements for Form 10 F 90-22.1, Report of Foreign Bank and Financial Accounts. c At any time during the calendar year, did the organization maintain an office outside of the U.S.? Yes No 17. Yes,* enter the name of the foreign country: ▶ See the instructions for exceptions and filling requirements for Form 10 F 90-22.1, Report of Foreign Bank and Financial Accounts. c At any time during the calenda	a				
b Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in any section 4955 ▶ 0. b Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in any section 4956 excess benefit transaction during the year or is it aware that it engaged in an excess benefit transaction with a disqualified person in a priory ear, and that the transaction has not been reported on any of the organization's pror Forms 990 or 990-EZ? If 'Yes,' complete Schedule L, Part I 40b X c Section 501(c)(3) and 501(c)(4) organizations. Enter amount of tax imposed on organization managers or disqualified persons during the year under sections 4912, 4955, and 4958 d Section 501(c)(3) and 501(c)(4) organizations. Enter amount of tax on line 40c reimbursed by the organization e All organizations. At any time during the tax year, was the organization a party to a prohibited tax shelter transaction? If 'Yes,' complete Form 8886-T 1 List the states with which a copy of this return is filed. ▶ WI 12 The organization's books are in care of ▶ HEATHER WILDE, MARATHON COUN Telephone no. ▶ 715 - 261 - 7200 Located at ▶ 300 N FIRST STREET, WAUSAU, WI 2 IP+4 ▶ 54403 - 5405 b At any time during the calendar year, did the organization have an interest in or a signature or other authority over a financial account in a foreign country; (such as a bank account, securities account, or other financial accounts. c At any time during the calendar year, did the organization maintain an office outside of the U.S.? If 'Yes,' enter the name of the foreign country: ▶ Section 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ in lieu of Form 1041 - Check here and enter the amount of tax-exempt interest received or accrued during the tax year Yes No Yes No Yes No Yes No Yes No Located at Post of the organization maintain any donor advised funds? If 'Yes,' Form 990 must be completed instead of Form 990-EZ Section 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ in lieu of Form 1041 - Check here and enter	b		1		
b Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in any section 4955 ▶ 0. b Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in any section 4956 excess benefit transaction during the year or is it aware that it engaged in an excess benefit transaction with a disqualified person in a priory ear, and that the transaction has not been reported on any of the organization's pror Forms 990 or 990-EZ? If 'Yes,' complete Schedule L, Part I 40b X c Section 501(c)(3) and 501(c)(4) organizations. Enter amount of tax imposed on organization managers or disqualified persons during the year under sections 4912, 4955, and 4958 d Section 501(c)(3) and 501(c)(4) organizations. Enter amount of tax on line 40c reimbursed by the organization e All organizations. At any time during the tax year, was the organization a party to a prohibited tax shelter transaction? If 'Yes,' complete Form 8886-T 1 List the states with which a copy of this return is filed. ▶ WI 12 The organization's books are in care of ▶ HEATHER WILDE, MARATHON COUN Telephone no. ▶ 715 - 261 - 7200 Located at ▶ 300 N FIRST STREET, WAUSAU, WI 2 IP+4 ▶ 54403 - 5405 b At any time during the calendar year, did the organization have an interest in or a signature or other authority over a financial account in a foreign country; (such as a bank account, securities account, or other financial accounts. c At any time during the calendar year, did the organization maintain an office outside of the U.S.? If 'Yes,' enter the name of the foreign country: ▶ Section 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ in lieu of Form 1041 - Check here and enter the amount of tax-exempt interest received or accrued during the tax year Yes No Yes No Yes No Yes No Yes No Located at Post of the organization maintain any donor advised funds? If 'Yes,' Form 990 must be completed instead of Form 990-EZ Section 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ in lieu of Form 1041 - Check here and enter	40 a	Section 501(c)(3) organizations. Enter amount of tax imposed on the organization during the year under:	1		
b Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in any section 4958 excess benefit transaction during the year or is it aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If Yes, complete Schedule L, Part I c Section 501(c)(3) and 501(c)(4) organizations. Enter amount of tax imposed on organization managers or disqualified persons during the year under sections 4912, 4955, and 4958 d Section 501(c)(3) and 501(c)(4) organizations. Enter amount of tax on line 40c reimbursed by the organizations. At any time during the tax year, was the organization a party to a prohibited tax shelter transaction? If Yes, "complete Form 8886-T List the states with which a copy of this return is filed. ► WI 12 If he organization's books are in care of ► HEATHER WILDE, MARATHON COUN Telephone no. ► 715-261-7200 Located at ► 300 N FIRST STREET, WAUSAU, WI ZIP+4 ► 54403-5405 b At any time during the calendar year, did the organization have an interest in or a signature or other authority over a financial account in a foreign country: ► See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts. c At any time during the calendar year, did the organization maintain an office outside of the U.S.? If Yes, "enter the name of the foreign country: ► Section 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ in lieu of Form 1041 - Check here and enter the amount of tax-exempt interest received or accrued during the tax year Pyes No Yes No Yes No Yes No Yes No Yes No Section 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ in lieu of Form 512(b)(13)? If Yes, "Form 990 must be completed instead of Form 990-EZ Is any related organization a controlled entity of the organization within the meaning of section 512(b)(13)? If Yes, "Form 990 must be completed instead of F					
has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I c Section 501(c)(3) and 501(c)(4) organizations. Enter amount of tax imposed on organization managers or disqualified persons during the year under sections 4912, 4955, and 4958 d Section 501(c)(3) and 501(c)(4) organizations. Enter amount of tax on line 40c reimbursed by the organization e All organizations. At any time during the tax year, was the organization a party to a prohibited tax shelter transaction? If "Yes," complete Form 8886-T 1 List the states with which a copy of this return is filed. WI 1 The organization's books are in care of HEATHER WILDE, MARATHON COUN Telephone no. 715-261-7200 Located at 300 N FIRST STREET, WAUSAU, WI 2IP+4 54403-5405 b At any time during the calendar year, did the organization have an interest in or a signature or other authority over a financial account in a foreign country (such as a bank account, securities account, or other financial accounts) c At any time during the calendar year, did the organization maintain an office outside of the U.S.? If "Yes," enter the name of the foreign country: See the instructions for exceptions and filling requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts. c At any time during the calendar year, did the organization maintain an office outside of the U.S.? If "Yes," enter the name of the foreign country: 42c X Yes No Yes No To the organization maintain any donor advised funds? If "Yes," Form 990 must be completed instead of Form 990-EZ 15 In the organization maintain and controlled entity of the organization within the meaning of section 512(b)(13)? If "Yes," Form 990 must be	b				
c Section 501(c)(3) and 501(c)(4) organizations. Enter amount of tax imposed on organization managers or disqualified persons during the year under sections 4912, 4955, and 4958 d Section 501(c)(3) and 501(c)(4) organizations. Enter amount of tax on line 40c reimbursed by the organizations. At any time during the tax year, was the organization a party to a prohibited tax sheller transaction? If "Yes," complete Form 8886-1 List the states with which a copy of this return is filed. ▶ WI 1 List the states with which a copy of this return is filed. ▶ WI 2 The organization's books are in care of ▶ HEATHER WILDE, MARATHON COUN Located at ▶ 300 N FIRST STREET, WAUSAU, WI 5 At any time during the calendar year, did the organization have an interest in or a signature or other authority over a financial account in a foreign country (such as a bank account, securities account, or other financial accounts) 1 "Yes," enter the name of the foreign country: ▶ 2 See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts. 2 At any time during the calendar year, did the organization maintain an office outside of the U.S.? 11 "Yes," enter the name of the foreign country: ▶ 3 Section 501(c)(4) organization maintain any donor advised funds? If "Yes," Form 990 must be completed instead of Form 990-EZ 4 Did the organization maintain any donor advised funds? If "Yes," Form 990 must be completed instead of Form 990-EZ 4 Signary related organization a controlled entity of the organization within the meaning of section 512(b)(13)? If "Yes," Form 990 must be completed instead of Form 990-EZ 4 Signary related organization a controlled entity of the organization within the meaning of section 512(b)(13)? If "Yes," Form 990 must be completed instead of Form 990-EZ		year or is it aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction	-		
or disqualified persons during the year under sections 4912, 4955, and 4958 d Section 501(c)(3) and 501(c)(4) organizations. Enter amount of tax on line 40c reimbursed by the organization e All organizations. At any time during the tax year, was the organization a party to a prohibited tax shelter transaction? If 'Yes,' complete Form 8886-T List the states with which a copy of this return is filed. ▶ WI 11 List the states with which a copy of this return is filed. ▶ WI 12 The organization's books are in care of ▶ HEATHER WILDE, MARATHON COUN Telephone no. ▶ 715-261-7200		has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	40b		x
d Section 501(c)(3) and 501(c)(4) organizations. Enter amount of tax on line 40c reimbursed by the organization e All organizations. At any time during the tax year, was the organization a party to a prohibited tax shelter transaction? If "Yes," complete Form 8886-T List the states with which a copy of this return is filed. WI Telephone no. 715-261-7200 Located at 300 N FIRST STREET, WAUSAU, WI Located at 300 N FIRST STREET, WAUSAU, WI Telephone no. 715-261-7200 ZIP+4 54403-5405 b At any time during the calendar year, did the organization have an interest in or a signature or other authority over a financial account in a foreign country (such as a bank account, securities account, or other financial account)? If "Yes," enter the name of the foreign country: See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts. c At any time during the calendar year, did the organization maintain an office outside of the U.S.? If "Yes," enter the name of the foreign country: Section 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ in lieu of Form 1041 - Check here and enter the amount of tax-exempt interest received or accrued during the tax year Yes No Yes No Yes No Yes No Yes No In the organization maintain any donor advised funds? If "Yes," Form 990 must be completed instead of Form 990-EZ Is any related organization a controlled entity of the organization within the meaning of section 512(b)(13)? If "Yes," Form 990 must be completed instead of Form 990-EZ	C	Section 501(c)(3) and 501(c)(4) organizations. Enter amount of tax imposed on organization managers			
organization e All organizations. At any time during the tax year, was the organization a party to a prohibited tax shelter transaction? If "Yes," complete Form 8886-T 40e		or disqualified persons during the year under sections 4912, 4955, and 4958			
e All organizations. At any time during the tax year, was the organization a party to a prohibited tax shelter transaction? If "Yes," complete Form 8886-T List the states with which a copy of this return is filed. WI VI VI VI VI VI VI VI V	d	Section 501(c)(3) and 501(c)(4) organizations. Enter amount of tax on line 40c reimbursed by the			
transaction? If "Yes," complete Form 8886-T List the states with which a copy of this return is filed. **MI** **WILDE**, MARATHON** COUN** **Located at **\infty 300** N** FIRST** STREET**, WAUSAU**, WI **Located at **\infty 300** N** FIRST** STREET**, WAUSAU**, WI **Located at **\infty 300** N** FIRST** STREET**, WAUSAU**, WI **Description of the description of t		organization D.			
List the states with which a copy of this return is filed. WI The organization's books are in care of parameters of the foreign country (such as a bank account, securities account, or other financial accounts) If "Yes," enter the name of the foreign country: See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts. C At any time during the calendar year, did the organization maintain an office outside of the U.S.? If "Yes," enter the name of the foreign country: Section 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ in lieu of Form 1041 - Check here and enter the amount of tax-exempt interest received or accrued during the tax year Yes No Yes No Yes No Yes No In the organization maintain any donor advised funds? If "Yes," Form 990 must be completed instead of Form 990-EZ Is any related organization a controlled entity of the organization within the meaning of section 512(b)(13)? If "Yes," Form 990 must be completed instead of Form 990-EZ At any time during the calendar year, did the organization within the meaning of section 512(b)(13)? If "Yes," Form 990 must be completed instead of Form 990-EZ	е	All organizations. At any time during the tax year, was the organization a party to a prohibited tax shelter			
The organization's books are in care of Located at S 300 N FIRST STREET, WAUSAU, WI Located at S 400 N FIRST STREET, WAUSAU, WI Located at S 400 N FIRST STREET, Wausauthors accounts or a signature or other authority Located At 90 N FIRST STREET, Wausauthors accounts ac		transaction? If "Yes," complete Form 8886-T	40e		X
Located at 300 N FIRST STREET, WAUSAU, WI At any time during the calendar year, did the organization have an interest in or a signature or other authority over a financial account in a foreign country (such as a bank account, securities account, or other financial account in a foreign country: If "Yes," enter the name of the foreign country: Yes No account; see the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts. C At any time during the calendar year, did the organization maintain an office outside of the U.S.? 42c X If "Yes," enter the name of the foreign country: 42c X If "Yes," enter the name of the foreign country: 42c X Section 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ in lieu of Form 1041 - Check here and enter the amount of tax-exempt interest received or accrued during the tax year 43 N/A Yes No Yes No Yes No Yes No At Did the organization maintain any donor advised funds? If "Yes," Form 990 must be completed instead of Form 990-EZ Is any related organization a controlled entity of the organization within the meaning of section 512(b)(13)? If "Yes," Form 990 must be completed instead of Form 990-EZ At X X X X X X X X X	41	List the states with which a copy of this return is filed. WI			
b At any time during the calendar year, did the organization have an interest in or a signature or other authority over a financial account in a foreign country (such as a bank account, securities account, or other financial account)? If "Yes," enter the name of the foreign country: See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts. C At any time during the calendar year, did the organization maintain an office outside of the U.S.? If "Yes," enter the name of the foreign country: Section 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ in lieu of Form 1041 - Check here and enter the amount of tax-exempt interest received or accrued during the tax year Yes No 144 Did the organization maintain any donor advised funds? If "Yes," Form 990 must be completed instead of Form 990-EZ 15 Is any related organization a controlled entity of the organization within the meaning of section 512(b)(13)? If "Yes," Form 990 must be completed instead of Form 990-EZ 15 Is any related organization a controlled entity of the organization within the meaning of section 512(b)(13)? If "Yes," Form 990 must be completed instead of Form 990-EZ	42 a	The organization's books are in care of \blacktriangleright HEATHER WILDE , MARATHON COUN Telephone no. \blacktriangleright 715–26	1-7	200	
over a financial account in a foreign country (such as a bank account, securities account, or other financial account)? If "Yes," enter the name of the foreign country: See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts. c At any time during the calendar year, did the organization maintain an office outside of the U.S.? If "Yes," enter the name of the foreign country: Section 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ in lieu of Form 1041 - Check here and enter the amount of tax-exempt interest received or accrued during the tax year Yes No 1 Yes No Yes No Yes No Yes No If "Yes," Form 990-EZ Is any related organization a controlled entity of the organization within the meaning of section 512(b)(13)? If "Yes," Form 990 must be completed instead of Form 990-EZ If "Yes," enter the name of the foreign country: If "Yes," enter the name of the foreign Bank and Financial Accounts. If "Yes," enter the name of the foreign Country: If "Yes," enter the name of the foreign country: If "Yes," enter the name of the foreign country: If "Yes," enter the name of the foreign Bank and Financial Accounts. If "Yes," enter the name of the foreign Country: If "Yes," enter the name of the foreign Country: If "Yes," enter the name of the U.S.? If "Yes," enter the name of the foreign Country: If "Yes," enter the name of the foreign Country: If "Yes," enter the name of the U.S.? If "Yes," enter the u.S.? If "Yes," enter th		Located at ► 300 N FIRST STREET, WAUSAU, WI ZIP+4 ► 5	440	3-5	405
account)? If "Yes," enter the name of the foreign country: See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts. c At any time during the calendar year, did the organization maintain an office outside of the U.S.? If "Yes," enter the name of the foreign country: Section 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ in lieu of Form 1041 - Check here and enter the amount of tax-exempt interest received or accrued during the tax year Yes No Porm 990-EZ Is any related organization a controlled entity of the organization within the meaning of section 512(b)(13)? If "Yes," Form 990 must be completed instead of Form 990-EZ 45 Is any related organization a controlled entity of the organization within the meaning of section 512(b)(13)? If "Yes," Form 990 must be completed instead of Form 990-EZ	b	At any time during the calendar year, did the organization have an interest in or a signature or other authority			
If "Yes," enter the name of the foreign country: See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts. c At any time during the calendar year, did the organization maintain an office outside of the U.S.? If "Yes," enter the name of the foreign country: Section 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ in lieu of Form 1041 - Check here and enter the amount of tax-exempt interest received or accrued during the tax year Yes No 1 Yes No 2 Yes No 3 Yes No 4 X		over a financial account in a foreign country (such as a bank account, securities account, or other financial		Yes	No
See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts. c At any time during the calendar year, did the organization maintain an office outside of the U.S.? If "Yes," enter the name of the foreign country: Section 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ in lieu of Form 1041 - Check here and enter the amount of tax-exempt interest received or accrued during the tax year Yes No 1 Yes No 2 Is any related organization a controlled entity of the organization within the meaning of section 512(b)(13)? If "Yes," Form 990 must be completed instead of Form 990-EZ 1 Section 4947(a)(1) nonexempt charitable trusts filing Form 990 must be completed instead of Form 990-EZ		·	42b		X
c At any time during the calendar year, did the organization maintain an office outside of the U.S.? If "Yes," enter the name of the foreign country: Section 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ in lieu of Form 1041 - Check here and enter the amount of tax-exempt interest received or accrued during the tax year Yes No 1 Yes No 2 No 4 N		If "Yes," enter the name of the foreign country:			
If "Yes," enter the name of the foreign country: Section 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ in lieu of Form 1041 - Check here and enter the amount of tax-exempt interest received or accrued during the tax year Yes No 1 Did the organization maintain any donor advised funds? If "Yes," Form 990 must be completed instead of Form 990-EZ 1 Is any related organization a controlled entity of the organization within the meaning of section 512(b)(13)? If "Yes," Form 990 must be completed instead of Form 990-EZ		See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.			
Section 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ in lieu of Form 1041 - Check here and enter the amount of tax-exempt interest received or accrued during the tax year Yes No 1	C		42c	L	X
and enter the amount of tax-exempt interest received or accrued during the tax year Yes No 144 Did the organization maintain any donor advised funds? If "Yes," Form 990 must be completed instead of Form 990-EZ 15 Is any related organization a controlled entity of the organization within the meaning of section 512(b)(13)? If "Yes," Form 990 must be completed instead of Form 990-EZ 15 Is any related organization a controlled entity of the organization within the meaning of section 512(b)(13)? If "Yes," Form 990 must be completed instead of Form 990-EZ					
Yes No 144 Did the organization maintain any donor advised funds? If "Yes," Form 990 must be completed instead of Form 990-EZ 15 any related organization a controlled entity of the organization within the meaning of section 512(b)(13)? If "Yes," Form 990 must be completed instead of Form 990-EZ 15 any related organization a controlled entity of the organization within the meaning of section 512(b)(13)? If "Yes," Form 990 must be completed instead of Form 990-EZ	43				
Did the organization maintain any donor advised funds? If "Yes," Form 990 must be completed instead of Form 990-EZ 44 X Is any related organization a controlled entity of the organization within the meaning of section 512(b)(13)? If "Yes," Form 990 must be completed instead of Form 990-EZ 45 X		and enter the amount of tax-exempt interest received or accrued during the tax year	N/A		
Did the organization maintain any donor advised funds? If "Yes," Form 990 must be completed instead of Form 990-EZ 44 X Is any related organization a controlled entity of the organization within the meaning of section 512(b)(13)? If "Yes," Form 990 must be completed instead of Form 990-EZ 45 X					
Form 990-EZ 44 X 45 Is any related organization a controlled entity of the organization within the meaning of section 512(b)(13)? If "Yes," Form 990 must be completed instead of Form 990-EZ 45 X				Yes	No
45 Is any related organization a controlled entity of the organization within the meaning of section 512(b)(13)? If "Yes," Form 990 must be completed instead of Form 990-EZ 45 X	44				
completed instead of Form 990-EZ		Form 990-EZ	44		X
	45	Is any related organization a controlled entity of the organization within the meaning of section 512(b)(13)? If "Yes," Form 990 must be			
Form 990-EZ (2009)		completed instead of Form 990-EZ	45		X
			Form 9	90-EZ	(2009)

MARATHON COUNTY PUBLIC LIBRARY

Form 990-EZ (2009)

Form 9	90-EZ (2009) FOUNDATION			39-140	2476	Page 4	
Part							
46 D	old the organization engage in direct or indirect political campaign activities	on behalf of or in opposition t	o candidates for pi	iblic	Y	es No	
	ffice? If "Yes," complete Schedule C, Part I				46	Х	
47 D	old the organization engage in lobbying activities? If "Yes," complete Sch	edule C, Part II			47	X	
48 Is	s the organization a school as described in section 170(b)(1)(A)(ii)? If "Yes	s," complete Schedule E			48	X	
49a D	49a Did the organization make any transfers to an exempt non-charitable related organization?						
	"Yes," was the related organization a section 527 organization?				49b		
	complete this table for the organization's five highest compensated employer than \$100,000 of compensation from the organization. If there is none, ente		ors, trustees and k	ey employees) who	each receiv	ed more	
	(a) Name and address of each employee paid more than \$100,000 NONE	(b) Title and average hour per week devoted to position	s (c) Compensa	(d) Contribution to employe benefit plans deferred compensation	e (e) E & accor other al	xpense unt and llowances	
	otal number of other employees paid over \$100,000 Complete this table for the organization's five highest compensated indepen	dent contractors who each re-	reved more than 9	1100 000 of compe	neation from	1 the	
	rganization. If there is none, enter "None." NONE						
	(a) Name and address of each independent contractor paid more	than \$100,000	(b) Type o	f service	(c) Comper	nsation	
							
	otal number of other independent contractors each receiving over \$100,00						
d 1	Under penalties of perjury, I declare that I have examined this return, including a		nents, and to the best	of my knowledge and	belief, it is tru	e.	
Sign Here	correct, and dispolete Declaration of prepares (other than officer) is based on all Signature of officer	information of which preparer has a	any knowledge	10/15/ Date	2010		
	Type or print name and title	Tour To	March of a "				
Paid Prepar Use On			Check if self- imployed	Preparer's identifying	number (See	instr)	
	Firm's name (or yours of setf-employed), address and ZIP + 4	Phone ► no.					
May th	e IRS discuss this return with the preparer shown above? See instructions			<u> </u>	X Yes	No	

SCHEDULE A

(Form 990 or 990-EZ)

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.

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

Public Charity Status and Public Support

2009

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

Name of the organization

MARATHON COUNTY PUBLIC LIBRARY

Employer identification number 39-1402476

D-	art I	Percon	for Public Char	rity Status (All organiz	rotions	ot complet	o this so-	1 800 100	truoticas		J 1402410
									uucuons	_	
Γhe	organ		•	because it is (For lines	•		•	•			
1		A church, co	nvention of churche	s, or association of chur	ches desc	ribed in se	ction 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 hospi	ital service organization (described	n section	170(b)(1)(A)(iii).			
4		A medical res	search organization	operated in conjunction	with a hos	pıtal descı	nbed in se	ction 170	(b)(1)(A)(ii	ı). Enter t	the hospital's name,
		city, and stat	e							_	
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). (Comple	ete Part II)							
6		A federal, sta	ite, or local governm	ent or governmental uni	t described	d in sectio	n 170(b)(1)(A)(v).			
7	\mathbf{X}	An organizati	on that normally rec	eives a substantial part	of its supp	ort from a	governme	ntal unit o	or from the	general	public described in
		section 170(b)(1)(A)(vi). (Comple	ete Part II)	, ,					_	•
8		-		section 170(b)(1)(A)(vi).	(Complete	Part II)					
9	一	-		eives (1) more than 33			rom contri	butions, m	nembershii	o fees, ai	nd aross receipts from
_			·	nctions - subject to certa							•
			•	axable income (less sect	•	•	•			• •	•
			509(a)(2). (Complete	•		,			, 5		
10				perated exclusively to te	st for publi	c safety S	See sectio	n 509(a)(4	4).		
11	一	•	-	perated exclusively for the	-	-			-	out the	numoses of one or
• •	_			ations described in section		•				*	
		• •	• • •	organization and comple		-		, , , , , ,		- /(-).	on the box that
		a Type I		~ ~ ·		e III - Func		egrated		dС	Type III · Other
e				at the organization is not			-	_	r more disc		• • •
·		-		han one or more publicly							
f			=	ten determination from t		_				γ(α)(1) Οι	30011011 000(a)(z)
•		_	rganization, check th		ine ino ine	it it is a Ty	pc i, Typc	ii, or Type	J 111		
_		•	•	organization accepted ar	ov aft or co	ontribution	from any	of the follo	OWIDA DAT	eone?	لــــا
g	,	•		lirectly controls, either al			-				Yes No
				upported organization?	one or tog	etilei witii	persons u	escribed	iii (ii) ai iu (i	iii) DeiOW	
		•	· ·	· · · · · · · · · · · · · · · · · · ·		•					11g(ı)
			•	n described in (i) above? i person described in (i) (2					11g(ii)
_			•	about the supported or	• •						11g(iii)
h)	Provide the it	ollowing information	about the supported of	yanızanon	(5)					
				(iii) Type of	tiva le the e		(v) Did voi	L potrfy the	(vi) Is	the	
(i)		of supported	(ii) EIN	organization	in col. (i) his	rganization sted in vour			lorganizatio	on in col.	(vii) Amount of
	orga	inization		(described on lines 1-9		document?	(i) of your		(i) organiz	eg in the l	support
				above or IRC section (see instructions))	Yes	No	Yes	No	Yes	No	
				(acc mandenens))	163	140	163	140	163	140	
					1						
										 	
					 	_			 -	- 	
			<u> </u>		 			_	-	 	
				J					J]	
				 	 		-				
					L						

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

Schedule A (Form 990 or 990-EZ) 2009

MARATHON COUNTY PUBLIC LIBRARY

Schedule A (Form 990 or 990-EZ) 2009 FOUNDATION

39-140<u>2476 Page 2</u> 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 (d) 2008 (e) 2009 (f) Total Calendar year (or fiscal year beginning in) (a) 2005 (b) 2006 (c) 20071 Gifts, grants, contributions, and membership fees received (Do not 63,243. 70,160. 62,905. 37,321. 100,398. 334,027. include any "unusual grants") 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 63,243. 70,160. 62,905. 37,321. 100,398. 334,027. Total. Add lines 1 through 3 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, 78,723. column (f) 255,304. 6 Public support. Subtract line 5 from line 4 Section B. Total Support Calendar year (or fiscal year beginning in) (c) 2007 (d) 2008 (e) 2009 (f) Total (a) 2005 (b) 2006 63,243 70,160. 62,905. 37,321. 100,398. 334,027. 7 Amounts from line 4 8 Gross income from interest, dividends, payments received on securities loans, rents, royalties 45,329. 64,728. 36,514. 18,610. 193,621. 28,440. and income from similar sources Net income from unrelated business activities, whether or not the business is regularly carned on 10 Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV.) 527,648. 11 Total support. Add lines 7 through 10 12 Gross receipts from related activities, etc. (see instructions) 37,520. 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 2009 (line 6, column (f) divided by line 11, column (f)) 48.39 14 % 15 52.36 15 Public support percentage from 2008 Schedule A, Part II, line 14 % 16a 33 1/3% support test - 2009. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and $\triangleright \mathbf{X}$ stop here. The organization qualifies as a publicly supported organization b 33 1/3% support test - 2008. 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 - 2009. 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 - 2008. 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

Sch Pa	edule A (Form 990 or 990 EZ) 2009 Irt III Support Schedule for (Organizations	Described in	Section 509(a)(2) (Complete only	ıf you checked the bo	Page 3 ox on line 9 of Part I)	
	ction A. Public Support		_					
Cale	endar year (or fiscal year beginning in)	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total	
	Gifts, grants, contributions, and							
	membership fees received. (Do not							
	include any "unusual grants ")							
2	Gross receipts from admissions, merchandise sold or services per- formed, 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 bus-							
	iness under section 513						<u>.</u>	
4	Tax revenues levied for the organ-							
	ızatıon's benefit and either paid to							
	or expended on its behalf						<u> </u>	
5	The value of services or facilities			1				
	furnished by a governmental unit to			ŀ				
	the organization without charge							
6	Total. Add lines 1 through 5				<u> </u>			
7 a	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 \$5,000 or 1% of the amount on line 13 for the year							
c	Add lines 7a and 7b							
8	Public support (Subtract line 7c from line 6)							
	tion B. Total Support							
Cale	endar year (or fiscal year beginning in)	(a) 2005	(b) 2006_	(c) 2007	(d) 2008	(e) 2009	(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				<u> </u>			
11	Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain							
	or loss from the sale of capital assets (Explain in Part IV)							
	Total support (Add lines 9, 10c, 11, and 12)	<u> </u>	<u> </u>	1	<u> </u>	<u> </u>		
14	First five years. If the Form 990 is for	the organization's	s first, second, thi	rd, fourth, or fifth t	ax year as a section	on 501(c)(3) organiz	ration,	
800	check this box and stop here ction C. Computation of Publ	io Support Do	roontage				<u> </u>	
				actions (f)		45		
	Public support percentage for 2009 (column (1))		15	<u>%</u>	
	Public support percentage from 2008 ction D. Computation of Investigation			 		16	<u>%</u>	
						47		
	Investment income percentage for 20			ne 13, column (i))	••	17	<u>%</u>	
	18 Investment income percentage from 2008 Schedule A, Part III, line 17							
198								
.	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 - 2008. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and							
D	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		•			=		
							0 or 990-EZ) 2009	

FORM 990-EZ.	OTHER EXPENSES		STATEMENT	1
DESCRIPTION			AMOUNT	
MISCELLANEOUS BANK CHARGES				17. 56.
TOTAL TO FORM 990-EZ, LINE 1	16		40	3.
FORM 990-EZ	OTHER ASSETS		STATEMENT	2
DESCRIPTION		BEG. OF YEAR	END OF YEA	A R
MUTUAL FUND INVESTMENTS CERTIFICATES OF DEPOSITS		447,561. 214,164.	747,04 202,73	
TOTAL TO FORM 990-EZ, LINE 2	24	661,725.	949,7	58.
FORM 990-EZ OTHER CHANGES	S IN NET ASSETS OR FUN	ND BALANCES	STATEMENT	3
DESCRIPTION			AMOUNT	
INCREASE IN MARKET VALUE			153,9	57.
TOTAL TO FORM 990-EZ, LINE 2	20		153,9	57.

FORM 990-EZ.	CASH GRANTS AND ALLOCA	TIONS	STATEMENT	4
CLASS OF ACTIVITY/GRAI	NTEE'S NAME AND ADDRESS	GRANTEE'S RELATIONSHIP	AMOUNT	r
MARATHON COUNTY PUBLIC 300 N FIRST STREET WAUSAU, WI 54403	C LIBRARY	NONE	17,00	00.
TOTAL INCLUDED ON FORM	M 990-EZ, LINE 10		17,00	00.

FO	RM 990-EZ.	INFORMATION REGARDING TRANSFERS ASSOCIATED WITH PERSONAL BENEFIT CONTRACTS		S	TATE	MENT	5
A)	DIRECTLY OR	ANIZATION, DURING THE YEAR, RECEIVE ANY FUNDS, INDIRECTLY, TO PAY PREMIUMS ON A PERSONAL TRACT?	(]	YES	[X]	NO
B)		ANIZATION, DURING THE YEAR, PAY PREMIUMS, INDIRECTLY, ON A PERSONAL BENEFIT CONTRACT?.	. []	YES	[X]	NO

990-EZ PG 2.

STATEMENT

GRANTS MADE TO SUPPORT THE MARATHON COUNTY PUBLIC LIBRARY WERE TO ENHANCE THEIR TEEN PROGRAM AREA OF THE LIBRARY, FOR THEIR TELL ME MORE ONLINE PROGRAM AND SUPPORT OF THEIR 2009 READS PROGRAM WHICH PROMOTES READING AND SPECIAL PROGRAMS.

MADAMHON	COTINITY	DIIRI.TC	T.TDDADV	FOUNDATI
MAKATHUN	COOMIT	FODUIC	DIDIVENT	LOUNDALL

39-1402476

990-EZ PG 2.

STATEMENT

7

SUPPORT FOR MARATHON COUNTY PUBLIC LIBRARY

Form 8868 (Rev. 4-200	9)		Page 2						
Note. Only complete	an Additional (Not Automatic) 3-Month Extension, complete only Part II and check this box Part II if you have already been granted an automatic 3-month extension on a previously filed fan Automatic 3-Month Extension, complete only Part I (on page 1)		▶ X						
Part II Additional (Not Automatic) 3-Month Extension of Time. Only file the original (no copies needed).									
Type or MARAT: FOUND.	MARATHON COUNTY PUBLIC LIBRARY								
due date for 300 N	street, and room or suite no. If a P.O. box, see instructions FIRST STREET	For IF	RS use only						
return See City, tow matructions WAUSA	n or post office, state, and ZIP code For a foreign address, see instructions J, WI 54403-5405								
Check type of return Form 990 Form 990-BL	to be filed (File a separate application for each return) X Form 990-EZ Form 990-T (sec 401(a) or 408(a) trust) Form 1041-A Form 990-PF Form 990-T (trust other than above) Form 4720	= ` `	rm 5227 Form 8870 rm 6069						
STOP! Do not comp	lete Part II if you were not already granted an automatic 3-month extension on a previous	ly file	d Form 8868.						
Telephone No If the organization If this is for a Groubox If it is I request an ad For calendar yea If this tax year State in details ADDITION	Telephone No ► 715-261-7200 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 this is for part of the group, check this box ► and attach a list with the names and EINs of all members the extension is for I request an additional 3-month extension of time until NOVEMBER 15, 2010 For calendar year 2009, or other tax year beginning, and ending, and ending, and ending If this tax year is for less than 12 months, check reason Initial return Final return Change in accounting period								
	on is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any	_ 1	_						
	credits See instructions. on is for Form 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated	8a	\$						
	nade Include any prior year overpayment allowed as a credit and any amount paid	8b	\$						
c Balance Due.	Subtract line 8b from line 8a 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. 8c \$ N/A									
it is true, correct, and co	Signature and Verification ry, I declare that I have examined this form, including accompanying schedules and statements, and to the mplete, and that I am authorized to prepare this form.								
Signature >	Title ► TREASURER	_Date	P						

Form **8868** (Rev. 4-2009)