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Form 990-PF

Department of the Treasury

Internal Revenue Service

Return of Private Foundation

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

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

2009

OMB No 1545-0052

For	calen	ar year 2009, or tax year beginning		, and er	nding		· · · · · · · · · · · · · · · · · · ·
G	Check	all that apply Initial return	Initial return of a fo	rmer public c	harity	Final return	ı
		Amended return	Address chang	je		Name change	
Us	e the I	RS Name of foundation		•		A Employer identification	n number
	label.				_	20 1561015	-
Oti	nerwis		·	ON, IN		39-1561017	
	print	Number and street (or P O box number if mail is not de	·		Room/suite	B Telephone number	
	r type	303 LAKEWOOD BOULEVAR	<u> </u>			608-249-70	028
	Spec tructio	ne City of towir, State, and Zir Code				C If exemption application is p	
1113		MADISON, WI 53704				D 1. Foreign organization	s, check here
H (Check	type of organization X Section 501(c)(3) ex	empt private foundation			Foreign organizations ma check here and attach co	eeting the 85% test, omputation
	Sec	tion 4947(a)(1) nonexempt charitable trust	Other taxable private founda	tion		 E If private foundation sta	atus was terminated
l F	air ma	rket value of all assets at end of year 🚺 Accountil	ng method X Cash	Accr	ual	under section 507(b)(1	
(f	rom F		her (specify)			F If the foundation is in a	60-month termination
<u> </u>	- \$	5,141,829. (Part I, colu	mn (d) must be on cash b	oasis)		under section 507(b)(1	
P	art l	Analysis of Revenue and Expenses	(a) Revenue and	(b) Net in	vestment	(c) Adjusted net	(d) Disbursements
		(The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a))	expenses per books	inco	ome	income	for charitable purposes (cash basis only)
	1	Contributions, gifts, grants, etc., received				N/A	
	2	Check X if the foundation is not required to attach Sch. B			,		
	3	Interest on savings and temporary cash investments	229.		229.		STATEMENT 1
	4	Dividends and interest from securities	65,270.	6	5,270.		STATEMENT 2
	52	Gross rents	,		·		,
		Net rental income or (loss)					
	62	Net gain or (loss) from sale of assets not on line 10	<49,096.	>			1
Revenue	l oa	Gross sales price for all 134 980		***************************************			
Ž	٦, ا	assets on line 6a Capital gain net income (from Part IV, line 2)			0.		
æ	7						
		Net short-term capital gain					
	9	Income modifications Gross sales tess returns FNEIVED		•••••••••••••••••••••••••••••••••••••••			-
	10a	Gross sales tess returns ECEIVEU and allowarices		- 			<u> </u>
							-
	C	Gross profit or closs) OV 7 \$ 2010	10 202				CONTRACTOR OF
	11	office moonloo	10,302.		0.		STATEMENT 3
	12	Total. Add lines 1 through 11	26,705.		5,499.		ļ
	13	Compensation of officers directors, trustees, str.	0.		0.		0.
	14	Other employee-salaries and wages					ļ <u></u> -
'n	15	Pension plans, employee benefits					
nses	16a	Legal fees			· · · · · · · · · · · · · · · · · · ·		
De.	b	Accounting fees STMT 4	3,850.		0.		3,850.
Ä	C	Other professional fees					
<u>ĕ</u> .	17	Interest					
Operating and Administrative Expe	18	Taxes STMT 5	11,191.		889.		0.
nist	19	Depreciation and depletion					
Ë	20	Occupancy					
, P	21	Travel, conferences, and meetings					
ַ בַ	22	Printing and publications					<u> </u>
2	23	Other expenses STMT 6	19,040.	1	9,040.		0.
aţi 🤄	24	Total operating and administrative					
je.		expenses. Add lines 13 through 23	34,081.	1	9,929.		3,850.
Õ	25	Contributions, gifts, grants paid	489,950.				489,950.
	1	Total expenses and disbursements		***************************************			
	-	Add lines 24 and 25	524,031.	1	9,929.		493,800.
	27	Subtract line 26 from line 12			<u>,</u>		
	1	Excess of revenue over expenses and disbursements	<497,326.	>			
	1	Net investment income (if negative, enter -0-)			5,570.		
	1	Adjusted net income (if negative, enter -0-)		-	-,-,-,	N/A	
923	501 02-10	LHA For Privacy Act and Paperwork Reduction	Act Notice, see the instruct	tions		1	Form 990-PF (2009)
02-0	z-10						

Form 5	990-PF(2009) JOHN J. FRAUTSCHI FAMIL			-1561017 Page 2
Par	Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only	Beginning of year		of year
K CAL	COMPANION OF THE MINOR OF THE M	(a) Book Value	(b) Book Value	(c) Fair Market Value
1	•	2,903,716.	2,432,827	. 2,432,827.
	Savings and temporary cash investments	2,903,710.	2,432,021	2,432,021.
3	Accounts receivable			
	Less allowance for doubtful accounts		 	
4	Pledges receivable	į		
١.	Less allowance for doubtful accounts			
'	Receivables due from officers, directors, trustees, and other			
١.	disqualified persons			
'	Other notes and loans receivable	[
, ا	Less allowance for doubtful accounts			
7a ∣ 7a			· · · · · · · · · · · · · · · · · · ·	
Y S	Prepaid expenses and deferred charges la Investments - U.S. and state government obligations		-	
'`	b Investments - corporate stock STMT 7	2,222,553.	2,199,485	2,709,002.
	c Investments - corporate stock	2,222,333.	2/135/103	2/105/002.
11				
["	Less, accumulated depreciation	Ì		
12	Investments - mortgage loans	_	 	
13				
14				
1	Less: accumulated depreciation			
15	Other assets (describe			
16	Total assets (to be completed by all filers)	5,126,269.	4,632,312	5,141,829.
	Accounts payable and accrued expenses			
18	· · ·			7
	· ·		,]
Liabilities	Loans from officers, directors, trustees, and other disqualified persons]
g 21	Mortgages and other notes payable]
ے ₂₂	! Other liabilities (describe ►)			
23	Total liabilities (add lines 17 through 22)	0.		<u>.</u>
	Foundations that follow SFAS 117, check here			
	and complete lines 24 through 26 and lines 30 and 31			
8 24	Unrestricted		····	
[25	Temporarily restricted			
B 26				_
Fund Balances	Foundations that do not follow SFAS 117, check here $lacktriangle$			
	and complete lines 27 through 31.			
<u>ي</u> 2		5,126,269.	4,632,312	
Net Assets or	· · · · · · · · · · · · · · · · · · ·	0.	0	<u>-</u>
Ž 29		0.	0.	<u>.</u>
ž 30	Total net assets or fund balances	5,126,269.	4,632,312	<u> </u>
	The little of the second secon	5,126,269.	4,632,312	
31			4,032,312	•
	Analysis of Changes in Net Assets or Fund B			
	tal net assets or fund balances at beginning of year - Part II, column (a), line	30		E 100 000
	ust agree with end-of-year figure reported on prior year's return)		1	
	ter amount from Part I, line 27a	AD THOMASSOC	2	
	ner increases not included in line 2 (itemize) BOOK TO TAX	ADJUSTMENTS		
	d lines 1, 2, and 3		4	
	creases not included in line 2 (itemize)	aluma /h\ lr== 00	5	
n Io	tal net assets or fund balances at end of year (line 4 minus line 5) - Part II, co	MICHAR (D.) MAR 301	! R	コーニー サックラファブーブル

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Part IV Capital G	ains and Lo	sses for tax on ii	ivesument		/b\ 11aa				
2-story b	rick warehouse,	ind(s) of property sold (e g or common stock, 200 sh	s MLC Co)		b) How ac P - Purc D - Dona	cquired hase ation	(c) Date ac (mo , day		(d) Date sold (mo , day, yr)
1a DETAIL AVAI	LABLE I	N TAXPAYER'S	FILE		 	D	VARIO	US	VARIOUS
b									
<u>C</u>									
<u>d</u>									
<u>e </u>			T						<u> </u>
(e) Gross sales price		Oepreciation allowed (or allowable)		t or other basis kpense of sale	_			n or (loss (f) minus	(g)
a 134,9	80.			184,076	5 -				<49,096.
b			ļ			-			
<u>c</u>									
d					-				
<u>e</u>			the foundation	an 10/01/C0	+	411			
Complete only for assets		column (h) and owned by			\dashv		Gains (Col (k), but no		
(i) F M V as of 12/31/6	9	(j) Adjusted basis as of 12/31/69		cess of col (I)			Losses (f		(h)) ´
<u>a</u>									<49,096.
b				· · ·					
C									·····
<u>d</u>					_				
_e			<u> </u>		_				
2 Capital gain net income or	(net capital loss) { If gain, also ente	r in Part I, line 7 I- in Part I, line 1	7 7	} 2				<49,096.
3 Net short-term capital gair	or (loss) as def	ined in sections 1222(5) ar	nd (6)						
If gain, also enter in Part I, If (loss), enter -0- in Part I	line 8, column ((-)		}			N/A	
Part V Qualificat	on Under S	Section 4940(e) for	Reduced	Tax on Net	nvestn	nent Inc	ome		
(For optional use by domestic									
(1 of optional use by comestic	private roundat		10 10(4) (42 011		, ,				
If section 4940(d)(2) applies,	leave this part b	lank							
Was the foundation liable for if "Yes," the foundation does r					od?				Yes X No
		mn for each year, see instr			3				
(a)		(b)			(c)	_		D. A.	(d)
Base periód yea Calendar year (or tax year)		Adjusted qualifying dis	stributions	Net value of non		-use assets	(0	Distrii ol (b) di	bution ratio vided by col (c))
2008	<u> </u>	41	1,030.		7,35	5,099			.055884
2007		89	5,736.			1,193			.109621
2006	-	58	32,230.			8,120			.107262
2005			8,926.		3,85	7,732	•		.424842
2004		4.5	1,425.		4,57	4,701	•		.098679
2 Total of line 1, column (d))						2		.796288
3 Average distribution ratio	for the 5-year ba	se period - divide the total	on line 2 by 5,	or by the number o	of years				
the foundation has been in	n existence if les	s than 5 years					3		.159258
4 Enter the net value of non-	charitable-use as	ssets for 2009 from Part X,	line 5				4		5,017,023.
									700 001
5 Multiply line 4 by line 3							5		799,001.
									456
6 Enter 1% of net investmen	nt income (1% o	t Part I, line 27b)					6		456.
									700 457
7 Add lines 5 and 6							7		799,457.
8 Enter qualifying distribution	ons from Part XII	, line 4					8		493,800.
If line 8 is equal to or grea	iter than line 7, c	heck the box in Part VI, line	e 1b, and comp	lete that part using	a 1% tax	rate			
See the Part VI instruction		•							

Orn	1990-PF (2009) JOHN J. FRAUTSCHI FAMILY FOUNDATION, INC 39-13				age 4
Pa	rt VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 - s	ee ins	tru	ctior	ıs)
1a	Exempt operating foundations described in section 4940(d)(2), check here and enter "N/A" on line 1				
	Date of ruling or determination letter (attach copy of letter if necessary-see instructions)				
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check here and enter 1%			9	11.
	of Part I, line 27b		•	•	
C	All other domestic foundations enter 2% of line 27b Exempt foreign organizations enter 4% of Part I, line 12, col (b)				
	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)				0.
3	Add lines 1 and 2			9	11.
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)				0.
5	Tax based on investment income Subtract line 4 from line 3. If zero or less, enter -0-			9	11.
6	Credits/Payments		-7.		
а	2009 estimated tax payments and 2008 overpayment credited to 2009 6a 10, 302.				
b	Exempt foreign organizations - tax withheld at source				
C	Tax paid with application for extension of time to file (Form 8868)				
d	Backup withholding erroneously withheld 6d				
7	Total credits and payments Add lines 6a through 6d		10),3	02.
8	Enter any penalty for underpayment of estimated tax. Check here X if Form 2220 is attached.				
	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed				
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid	•	ġ	7,3	<u>91.</u>
11	Enter the amount of line 10 to be Credited to 2010 estimated tax > 9,391. Refunded > 11				0.
Pa	rt VII-A Statements Regarding Activities				
1a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in			Yes	No
	any political campaign?		a		<u>X</u>
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see instructions for definition)?	1	ь		X
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials published or				·
	distributed by the foundation in connection with the activities.			1	
C	Did the foundation file Form 1120-POL for this year?		I C		X
d	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year				
	(1) On the foundation ▶ \$ O . (2) On foundation managers ▶ \$ O .				
е	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation				
	managers ▶ \$ <u>0 .</u>				
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				
	bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes		3		X
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?		la		X
b	If "Yes," has it filed a tax return on Form 990-T for this year?	A 4	lb		
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	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either				
	By language in the governing instrument, or				
	By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state law				
	remain in the governing instrument?		6	X	
7	Did the foundation have at least \$5,000 in assets at any time during the year?	ļ,	7	Χ	
	If "Yes," complete Part II, col (c), and Part XV				
8a	Enter the states to which the foundation reports or with which it is registered (see instructions)				
	WI	l			
b	of the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate)				
	of each state as required by General Instruction G? If "No," attach explanation	<u> -</u> 8	3b	X	
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for calendar				,.
	year 2009 or the taxable year beginning in 2009 (see instructions for Part XIV)? If "Yes," complete Part XIV	 	9		X
10	Bud any parence become cubetantial contributors during the tay year?		เก ไ		Y

	990-PF(2009) JOHN J. FRAUTSCHI FAMILY FOUNDATION, INC 39-1561	017		Page 5
	art VII-A Statements Regarding Activities (continued)	1 1		
11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of			17
	section 512(b)(13)? If "Yes," attach schedule (see instructions)	11		<u>X</u>
12	Did the foundation acquire a direct or indirect interest in any applicable insurance contract before			17
	August 17, 2008?	12	-,,	<u>X</u> _
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	X	
	Website address ► N/A	0 7	000	
14	The books are in care of ► JOHN J. FRAUTSCHI Telephone no ► 608-24		028	
	Located at ► 303 LAKEWOOD BOULEVARD, MADISON, WI ZIP+4 ►53	3/04		
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - Check here	3.7	/ >	
_	and enter the amount of tax-exempt interest received or accrued during the year	N	/ <u>A</u>	
Pa	art VII-B Statements Regarding Activities for Which Form 4720 May Be Required	11	· ·	
	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.	-	Yes	No
1a	During the year did the foundation (either directly or indirectly)			
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person?	1		
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from)			
	a disqualified person?			
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?			
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?			
	(5) Transfer any income or assets to a disqualified person (or make any of either available			
	for the benefit or use of a disqualified person)?			
	(6) Agree to pay money or property to a government official? (Exception. Check "No"			
	if the foundation agreed to make a grant to or to employ the official for a period after			
	termination of government service, if terminating within 90 days)			
b	o If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations			
	section 53 4941(d)-3 or in a current notice regarding disaster assistance (see page 20 of the instructions)? N/A	1b		
	Organizations relying on a current notice regarding disaster assistance check here			
C	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected			
	before the first day of the tax year beginning in 2009?	10		X
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation			
	defined in section 4942(j)(3) or 4942(j)(5))			
a	a At the end of tax year 2009, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning			
	before 2009? Yes X No			
	If "Yes," list the years \blacktriangleright			
t	Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2) (relating to incorrect			
	valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer "No" and attach			
	statement - see instructions) N/A	2b		
C	: If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here			
	>			
3a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time			
	during the year?			
t	o If "Yes," did it have excess business holdings in 2009 as a result of (1) any purchase by the foundation or disqualified persons after			
	May 26, 1969, (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7)) to dispose			
	of holdings acquired by gift or bequest, or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Schedule C,			
	Form 4720, to determine if the foundation had excess business holdings in 2009) N/A	3b		
48	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a		X
	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that			
	had not been removed from jennardy before the first day of the tay year beginning in 20092	l an		x

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Part VII-B Statements Regarding Activities for Which	Form 4720 May Be F	Required (contin	ued)	
5a During the year did the foundation pay or incur any amount to				
(1) Carry on propaganda, or otherwise attempt to influence legislation (section	n 4945(e))?	Ye	s X No	
(2) Influence the outcome of any specific public election (see section 4955), of	or to carry on, directly or indire	ectly,		
any voter registration drive?			s X No	
(3) Provide a grant to an individual for travel, study, or other similar purposes	2	Ye	s X No	
(4) Provide a grant to an organization other than a charitable, etc., organizatio	n described in section		Ì	
509(a)(1), (2), or (3), or section 4940(d)(2)?		Ye	s X No	
(5) Provide for any purpose other than religious, charitable, scientific, literary,	, or educational purposes, or f	or		
the prevention of cruelty to children or animals?		Ye	s X No	
b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify uni	der the exceptions described i	n Regulations		
section 53 4945 or in a current notice regarding disaster assistance (see instru	ictions)?			5b X
Organizations relying on a current notice regarding disaster assistance check h	nere			
c If the answer is "Yes" to question 5a(4), does the foundation claim exemption f				
expenditure responsibility for the grant?	N	/A 🔲 Ye	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?		Ye	s X No	
b Did the foundation, during the year, pay premiums, directly or indirectly, on a p	personal benefit contract?		<u> </u>	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?	Ye	s X 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	ees, Foundation Ma	nagers, Highly	/	
Paid Employees, and Contractors				
1 List all officers, directors, trustees, foundation managers and their	,		(all a	
(a) Name and address	(b) Title, and average hours per week devoted	(c) Compensation (If not paid,	(d) Contributions to employee benefit plans and deferred	(e) Expense account, other
	to position	enter -0-)	compensation	allowances
JOHN J. FRAUTSCHI	PRESIDENT/DIR			
MADISON, WISCONSIN				
	0.00	0.	0.	0.
ELIZABETH J. FRAUTSCHI	VICE-PRES/DIR			
MADISON, WISCONSIN			_	_
	0.00	0.	0.	0.
PETER W. FRAUTSCHI	SEC/TREAS/DIR			
MADISON, WISCONSIN				_
	0.00	0.	0.	0.
CHRISTOPHER J. FRAUTSCHI	SEC/TREAS/DIR	-		
MADISON, WISCONSIN				
	0.00	0.	0.	0.
2 Compensation of five highest-paid employees (other than those inc	T	enter "NONE."	(d) Coardhurann in	() 5
(a) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week	(c) Compensation	(d) Contributions to employee benefit plans and deferred	(e) Expense account, other
	devoted to position		compensation	allowances
NONE	_			
	4			
	-			
	-			
	-			
Total number of other employees paid over \$50,000	<u> </u>		L	0
Letel number of other ampleyage hald over \$50 (100)				1)

	<u>-1561017 </u>	Page 7
Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors (continued)		
Five highest-paid independent contractors for professional services. If none, enter "NONE."		
(a) Name and address of each person paid more than \$50,000 (b) Type of service	(c) Con	npensation
NONE		
		
Total number of others receiving over \$50,000 for professional services		
Part IX-A Summary of Direct Charitable Activities		
List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of organizations and other beneficiaries served, conferences convened, research papers produced, etc.	Expense	es es
THE JOHN J. FRAUTSCHI FAMILY FOUNDATION, INC. IS ORGANIZED		
AND OPERATED FOR THE SOLE PURPOSE OF MAKING CASH	_	0
CONTRIBUTIONS TO QUALIFYING PUBLIC CHARITIES. 2 THE FOUNDATION DOES NOT ENGAGE IN ANY OTHER DIRECT	 	<u> </u>
CHARITABLE ACTIVITIES.	-	
		0.
3	_	
	-	
4		
]	
Part IX-B Summary of Program-Related Investments		
Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2	Amount	t
1 N/A		
	4	0.
2	 	
	_	
All other program-related investments. See instructions		
3 <u>N/A</u>	-	
	1	0.

Total. Add lines 1 through 3

Part X Minimum Investment Return (All domestic foundations must complete this part. Foreign foundations, see instructions.) Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes 1 2,276,934. a Average monthly fair market value of securities 1a 2,816,490. 1b b Average of monthly cash balances c Fair market value of all other assets 10 5,093,424 d Total (add lines 1a, b, and c) 1d e Reduction claimed for blockage or other factors reported on lines 1a and 0. 1e 1c (attach detailed explanation) 2 Acquisition indebtedness applicable to line 1 assets 5,093,424. Subtract line 2 from line 1d 3 3 Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions) 4 017,023. Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4. 5 250,851 Minimum investment return. Enter 5% of line 5 Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations and certain Part XI foreign organizations check here

and do not complete this part) 250,851. Minimum investment return from Part X, line 6 911. 2a Tax on investment income for 2009 from Part VI, line 5 b Income tax for 2009 (This does not include the tax from Part VI) c Add lines 2a and 2b 2c 3 3 Distributable amount before adjustments. Subtract line 2c from line 1 4 Recoveries of amounts treated as qualifying distributions 4 5 5 Add lines 3 and 4 Deduction from distributable amount (see instructions) 6 940 7 Distributable amount as adjusted Subtract line 6 from line 5. Enter here and on Part XIII, line 1. Part XII Qualifying Distributions (see instructions) Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes 1 493,800. a Expenses, contributions, gifts, etc - total from Part I, column (d), line 26 1a b Program-related investments - total from Part IX-8 1b Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes 2 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 493,800. Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4 4 Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income Enter 1% of Part I, line 27b 5 Adjusted qualifying distributions. Subtract line 5 from line 4 6

Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation qualifies for the section

Form 990-PF (2009)

4940(e) reduction of tax in those years

Page 9

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,				
line 7			<u> </u>	249,940.
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 234, 385.				
b From 2005 1,486,059.				
c From 2006 336, 183.				
d From 2007 508,884.				
eFrom 2008 43,918.	2 600 420			
f Total of lines 3a through e	2,609,429.	······································		······································
4 Qualifying distributions for 2009 from				
Part XII, line 4 ► \$ 493,800.			0.	
a Applied to 2008, but not more than line 2a		,		4,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
b Applied to undistributed income of prior		0.		
years (Election required - see instructions)				1 11 31: 1°40-10111-14'
c Treated as distributions out of corpus	0.			
(Election required - see instructions)	······································		11-2-1 ₁ -1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-	249,940.
d Applied to 2009 distributable amount	243,860.			240,040.
e Remaining amount distributed out of corpus	243,000.	ula -made de marte de la color		0.
5 Excess distributions carryover applied to 2009 (If an amount appears in column (d), the same amount must be shown in column (a))	.			0.
6 Enter the net total of each column as indicated below:				
8 Corpus Add lines 3f, 4c, and 4e Subtract line 5	2,853,289.			
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	234,385.)	
9 Excess distributions carryover to 2010.	0 (10 00)			
Subtract lines 7 and 8 from line 6a	2,618,904.			
10 Analysis of line 9				
a Excess from 2005 b Excess from 2006 1,486,059. 336,183.				
b Excess from 2006 336, 183.				
c Excess from 2007 508,884.				
d Excess from 2008 43,918.				
e Excess from 2009 243,860.		<u></u>	<u> </u>	5. 000 PF (2000)

	PRAUTSCHI				61017 Page
Part XIV Private Operating Fo				_N/A	
1 a If the foundation has received a ruling or					
foundation, and the ruling is effective for			▶		
b Check box to indicate whether the founda		ng foundation described		4942(J)(3) or 49	42(j)(5)
2 a Enter the lesser of the adjusted net	Tax year		Prior 3 years	(1) 0000	4 . =
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	 		<u> </u>		
b 85% of line 2a					
c Qualifying distributions from Part XII,					1
line 4 for each year listed					
d Amounts included in line 2c not					
used directly for active conduct of					
exempt activities	 		-		
e Qualifying distributions made directly					
for active conduct of exempt activities					
Subtract line 2d from line 2c 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, dividends, rents, payments on					
securities loans (section					
512(a)(5)), or royalties)			+.		
(2) Support from general public and 5 or more exempt					
organizations as provided in					
section 4942(j)(3)(B)(III)					
(3) Largest amount of support from					
an exempt organization		1			
(4) Gross investment income Part XV Supplementary Infor	mation (Comple	te this part only	if the foundation	had \$5,000 or me	ore in assets
at any time during the			in the loundation	1184 40,000 01 111	ne iii assets
Information Regarding Foundation					
a List any managers of the foundation who	-	than 2% of the total cor	ntributions received by the	foundation before the clo	se of any tax
year (but only if they have contributed m			·		•
OHN J. FRAUTSCHI					
b List any managers of the foundation who other entity) of which the foundation has			ı (or an equally large portio	n of the ownership of a p	artnership or
NONE	-				
2 Information Regarding Contribution	on. Grant. Gift. Loan	. Scholarship, etc., I	Programs:		
Check here ► X if the foundation or the foundation makes gifts, grants, etc. (nly makes contributions	to preselected charitabl	e organizations and does n		
a The name, address, and telephone numb				impleto itemo za, o, o, ane	
a The hame, address, and telephone numb	er of the person to who	iti applications silouid u	6 8001655 6 0		
b The form in which applications should be	e submitted and informa	tion and materials they	should include		
c Any submission deadlines					
					

Part XV Supplementary Information 3 Grants and Contributions Paid During the Y		Pavment		
Recipient	If recipient is an individual,			
Name and address (home or business)	show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Double division the visco	Of Substantial Contributor	recipient		
a Paid dunng the year SEE ATTACHED STATEMENT				489,950
· · · · · · · · · · · · · · · · · · ·			1	105,550
'				
Total	<u> </u>	. '	▶ 3a	489,950
b Approved for future payment				
AMERICAN PLAYERS THEATRE	NONE	PUBLIC	GENERAL	79,774
WISCONSIN HISTORICAL	NONE	PUBLIC		E0 000
FOUNDATION	MONE	POBLIC	GENERAL	50,000
CONDATION				
		<u> </u>	<u> La</u>	
Total			<u>▶</u> 3b	129,774

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

Enter gross amounts unless otherwise indicated	Unrelate	d business income		led by section 512, 513, or 514	(e)
•	(a) Business	(b) Amount	Exclu- sion code	(d) Amount	Related or exempt function income
1 Program service revenue	code		code		
<u> </u>	-				
b			+ +		
d					
					 .
e					
g Fees and contracts from government agencies		·			
2 Membership dues and assessments					**
3 Interest on savings and temporary cash					
investments			14	229.	
4 Dividends and interest from securities			14	65,270.	
5 Net rental income or (loss) from real estate					T P PRO I
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			18	<49,096.	·
9 Net income or (loss) from special events					
10 Gross profit or (loss) from sales of inventory					
11 Other revenue					
a PY OVERPAYMENT APPLIED					10,302.
b					
C					· · · · · · · · · · · · · · · · · · ·
d					,
e	-	0.		16 402	10 202
12 Subtotal Add columns (b), (d), and (e)		0.		16,403.	
13 Total. Add line 12, columns (b), (d), and (e)				13	26,705.
(See worksheet in line 13 instructions to verify calculations)		· · · · · · · · · · · · · · · · · · ·			
Part XVI-B Relationship of Activities t	the Acc	omplishment of Ex	empt	t Purposes	
Line No. Explain below how each activity for which inco	me is reported i	ın column (e) of Part XVI-A	contrib	uted importantly to the accom-	olishment of
▼ the foundation's exempt purposes (other than	by providing fu	nds for such purposes)		,	
11A 2008 OVERPAYMENT APPLI	ED TO 2	009			
		·			
				- - -	
					·
		····			
				 	
					
					
		, <u></u>			
			_		
		-			
923621 02-02-10		- <u></u>		· · · · · · · · · · · · · · · · · · ·	Form 990-PF (2009)
UZ-UZ- IU					1 01111 3 3 3 T F F (2009)

john J. Frautschi Family Foundation, Inc 39-1561017
Information Regarding Transfers To and Transactions and Relationships With Noncharitable Exempt Organizations Form 990-PF (2009) Part XVII

1			rectly engage in any of the followin				Yes	No
	the Co	ode (other than section 501(c))(3) organizations) or in section 52	7, relating to political organ	nizations?			
а	Trans	fers from the reporting founda	ation to a noncharitable exempt or	ganization of				
	(1) 0	ash				1a(1)	ł	X
		ther assets				1a(2)		X
h		transactions						
Ĭ		ales of assets to a noncharital	hie exempt organization			16(1)	ĺ	X
			ncharitable exempt organization			1b(2)		X
		ental of facilities, equipment,				1b(3)		X
			of utilet assets				\vdash	X
		eimbursement arrangements				1b(4)		X
		oans or loan guarantees				1b(5)		X
			mbership or fundraising solicitatio			1b(6)		X
		•	iling lists, other assets, or paid em				<u> </u>	<u> </u>
d		•			ways show the fair market value of the		ets.	
		• • •		ed less than fair market valu	ue in any transaction or sharing arranç	jement, show in		
_	colun		other assets, or services received					
a)	Line no	(b) Amount involved	(c) Name of noncharitable	exempt organization	(d) Description of transfers, transac	tions, and shanng an	rangeme	ents
			N/A					
_								
	 -							
				* *				
_								
	-			· · · · · · · · · · · · · · · · · · ·				
		·····		<u>.</u>				
_						 		
2 a	Is the	foundation directly or indirect	tly affiliated with, or related to, one	or more tax-exempt organ	izations described			
	ın sec	tion 501(c) of the Code (other	r than section 501(c)(3)) or in sect	tion 527?		Yes	X	No
b	If "Ye	s," complete the following sch	edule					
		(a) Name of org		(b) Type of organization	(c) Description of	relationship		
		N/A						
		· · · · · · · · · · · · · · · · · · ·						
						· · · · · · · · · · · · · · · · · · ·		
٦	Under p	enalties of perjury, I declare that I h	have examined this return, including acco	ompanying schedules and stater	ments, and to the best of my knowledge and	belief, it is true, corre	ect,	
			er than taxpayer or fiduciary) is based on				•	
		As a Acor	. Otto	11/0/20	PRESIDENS	-		
<u>.</u>	<u>c.</u>	gnature of officer or trustee	~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~	Date	Title			
	31	 1	<u> </u>	Date 7		Preparer's identify	VIDO DIII	mber
5,	ø,	Preparer's	11/1801KA, CAL	!!	Date Check if self-	1	, any man	.,201
5	Paid Preparer's Use Only	signature 777	AND MALL TO MAKE		10 °CT 10 employed ▶	11		
	Pa še Še	Firm's name (or yours DELO	TAME TAX LLP		EIN ►			
	ďΞ		EAST WELLS STRE					
		address, and ZIP code MILW	AUKEE, WI 53202		Phone no	414 271		
						Form 990	-PF	(2009)

FORM 990-PF INTEREST ON SAVINGS A	ND TE	MPORARY CA	ASH I	INVESTMENTS	STATEMENT	1
SOURCE					AMOUNT	
US BANK				-	2:	29.
TOTAL TO FORM 990-PF, PART I, LINE	E 3, C	OLUMN A		:	2:	29.
FORM 990-PF DIVIDENDS AND	INTE	REST FROM	SEC	JRITIES	STATEMENT	2
SOURCE	GROS	S AMOUNT		PITAL GAINS DIVIDENDS	COLUMN (A AMOUNT)
US BANK		65,270.		0.	65,2	70.
TOTAL TO FM 990-PF, PART I, LN 4		65,270.		0.	65,2	70.
FORM 990-PF C	OTHER :	INCOME			STATEMENT	3
DESCRIPTION		(A) REVENUE PER BOOK	S	(B) NET INVEST- MENT INCOME	(C) ADJUSTE NET INCO	
PY OVERPAYMENT APPLIED		10,	302.	0	•	
TOTAL TO FORM 990-PF, PART I, LINE	E 11 =	10,	302.	0	•	
FORM 990-PF AC	CCOUNT	ING FEES			STATEMENT	4
EXPI	(A) ENSES BOOKS	(B) NET INV MENT IN				
ACCOUNTING FEES	3,850	•	0	•	3,8	50.
TO FORM 990-PF, PG 1, LN 16B	3,850	•	0	•	3,8	

FORM 990-PF	TAX	ES		STATEMENT 5
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTEL NET INCOM	
FOREIGN TAX PAID	889.	889	•	0.
2008 OVERPAYMENT APPLIED TO 2009	10,302.	0	•	0.
TO FORM 990-PF, PG 1, LN 18	11,191.	889	•	0.
FORM 990-PF	OTHER E	XPENSES		STATEMENT 6
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME		
INVESTMENT FEES	19,040.	19,040	•	0.
TO FORM 990-PF, PG 1, LN 23	19,040.	19,040	•	0.
FORM 990-PF	CORPORAT	E STOCK		STATEMENT 7
DESCRIPTION		В	OOK VALUE	FAIR MARKET VALUE
CORPORATE STOCK			2,199,485.	2,709,002.
TOTAL TO FORM 990-PF, PART I	I, LINE 10B		2,199,485.	2,709,002.

JOHN J. FRAUTSCHI FAMILY FOUNDATION RECORD OF GIFTS AND GRANTS - 2009

AMERICAN PLAYERS THEATRE	PO Box 819 - Spring Green, WI 53588-0819	62,450
CTM MADISON FAMILY THEATRE COMPANY	228 State St MSN 53703	1,000
MADISON MUSEUM OF CONTEMPORARY ART	PO Box 14385 - MSM 53714-0385	5,000
MADISON CHILDREN'S MUSEUM	100 N Hamilton St - MSN 53703	2,500
MADISON OPERA	3414 Monroe St - MSN 53711	2,500
MADISON SAVOYARDS, Ltd.	PO Box 1612 - MSN 53701-1612	1,000
MADISON SYMPHONY ORCHESTRA	6314 Odana Rd - MSN 53719	5,000
TEN CHIMNEYS POUNDATION, INC	PO Box 225 - Genesee Depot, WI 53127	1,000
VERY SPECIAL ARTS OF WISCONSIN	4785 Hayes Road, Suite 202 - MSN 53704	1,000
WISCONSIN CHAMBER ORCHESTRA	PO Box 171 - MEN 53701	2,000
WISCONSIN PUBLIC RADIO	3319 W. Beltline Hwy MSN 53713	1,000
WISCONSIN PUBLIC TELEVISION	821 University Ave - MSN 53706-1412	1,000
WISCONSIN YOUTH SYMPHONY ORCHESTRA	Room 1625, Humanities Bldg 455 N Park St -	5,030
AMHERST COLLEGE	MSN 53706 PO Box 5000 - Amherst, MA 01002-5000	5,000
AWTY INTERNATIONAL SCHOOL	7455 Awty School Lane - Houston, TX 77055	4,000
BELOIT COLLEGE	700 College St - Beloit, WI 53511-5596	1,000
BROOKS SCHOOL	1160 Great Pond Rd - North Andover, MA 01845	1,000
CARNEGIE MELLON UNIVERSITY	5017 Forbes Avenue - Pittsburgh PA 15213	1,000
UNIV OF CHICAGO - Graduate School of Business	1101 E. 58th St. Chicago, IL 60637	1,000
THE FRENCE HOUSE	633 N Prances St - MSN 53703	1,000
EDGEWOOD COLLEGE	855 Woodrow St MSN 53711	1,000
EMMA WILLARD SCHOOL	285 Pawling av - Troy, NY 12180-9976	2,000
FOUNTAIN VALLEY SCHOOL	6155 Pountain Valley School Road Colorado Springs, CO 80911-9989	5,000
MADISON AREA TECHNICAL COLLEGE FOUNDATION	3550 Anderson St MSN 53705	2,000
MADISON PUBLIC LIBRARY FOUNDATION	201 West Mifflin St - MSN 53703	1,000
SKIDMORE COLLEGE	Saratoga Springs, NY 12866	3,000
WISCONSIN CENTER FOR ACADEMICALLY TALENTED YOUTH, INC. (WCATY)	2909 Landmark Place - MSN 53713	2,500
DRIPTLESS AREA LAND CONSERVANCY	338 N Iowa St - Dodgeville, WI 53533	1,000
GATHERING WATERS CONSERVANCY	211 S Paterson St #270 - MSN 53703	1,000
INTERNATIONAL CRANE POUNDATION	PO Box 447 - Baraboo, WI 53913	1,000
NATURAL HERITAGE LAND TRUST	303 S Paterson St #6 - MSN 53703	1,000
NATURE CONSERVANCY - WIS CHAPTER	633 West Main St - MSN 53703	1,000
NATURAL RESOURCES FDN OF WIS., INC	P.O. Box 2317 - MSN 53701-2317	1,000
NORTHWOODS WILDLIFE CENTER	8683 Blumetein Rd - Minocqua, WI 54548	1,000
SAND COUNTY FOUNDATION	PO Box 6587 - Monona, WI 53716	1,000

SIGURD OLSON ENVIRONMENTAL INSTITUTE (Northland College)	1411 Ellis Av - Ashland, WI 54806-3999	1,000
AMERICAN HEART ASSOCIATION of Wis	2850 Dairy Dr - Ste 300 - MSN 53718-6751	1,000
GIRL SCOUTS OF WISCONSIN - BADGERLAND COUNCIL	2710 Ski Lane - MSN 53713-3267	1,000
CHRIST PRESBYTERIAN CHURCH	944 E. Gorham - MSN 53703	15,000
THE CRADLE POUNDATION	2049 Ridge Av - Evanston, IL 60201	3,000
HABITAT FOR HUMANITY OF DAME CO.	PO Box 258128 - MSN 53725-8128	2,000
HOSPICECARE FOUNDATION, INC	5395 East Cheryl Pkwy - MSN 53711-5395	2,500
INDEPENDENT LIVING	815 Forward Dr - MSN 53711-2443	1,000
MERITER FOUNDATION, INC	202 South Park St - MSN 53715	5,000
MADISON ROTARY POUNDATION	22 N Carroll St - Suite 202 MSN 53703-2724	2,500
MADISON URBAN MINISTRY	2300 South Park St - MSN 53713	1,000
PLANNED PARENTHOOD OF WISCONSIN	PO Box 2566 - MSN 53701-2566	1,000
AM RED CROSS -BADGER CHAPTER	4860 Sheboygan Av - Madison 53705	1,000
THE PESPITE CENTER	2120 Fordem Av - MSN 53704	2,000
RONALD MCDONALD HOUSE OF MADISON	PO Box 5210 - MSN 53705-0210	17,000
THE SALVATION ARMY	PO Box 1223 - MSN 53701-1223	2,000
SECOND HARVEST FOODBANK OF	(Southern Wisconsin Poodbank, Inc.)	2,000
SOUTHERN WISCONSIN THURSDAY'S CHILD	2802 Dairy Drive - MSN 53718 Mount Hope, WI 53815	1,000
RESTORING HOPE TRANSPLANT HOUSE	7457 Terrace Av - Middleton, WI 53562	1,000
UNITED WAY OF DAME COUNTY	2059 Atwood Av - MSN 53704	30,000
UNIVERSITY OF WISCONSIN FOUNDATION	1848 Univ Ave - PO Box 8860 - MSN 53708-8860	50,000
(PAUL CARBONE CANCER CENTER) UNIVERSITY OF WISCONSIN FOUNDATION	1848 Univ Ave - PO Box 8860 - MSN 53708-8960	1,000
(UW FRENCH DEPARTMENT) UNIVERSITY OF WISCONSIN FOUNDATION	1848 Univ Ave - PO Box 8860 - MSN 53708-8860	1,000
(FRIENDS OF THE ARBORETUM) WISCONSIN RESCUE MISSION	PO Box 3158 - MSN 53704-0158	2,500
YOUTH SERVICES OF SOUTHERN WISCONSIN	1955 Atwod Av - MSN 53704	1,000
CIRCUS WORLD MUSEUM FOUNDATION	550 Water Street - Baraboo, WI 53913-2578	1,000
DANE COUNTY HUMANE SOCIETY	5132 Voges Rd - Madison, WI 53718	1,000
HENRY VILAS PARK ZOOLOGICAL SOCIETY	702 S. Randall Av - Madison, WI 53715	3,000
WISCONSIN FILM FESTIVAL	821 University Av - Madison, WI 53706	1,000
OLBRICH BOTANICAL SOCIETY	3330 Atwood Av - Madison, WI 53704	5,000
WEBCRAFTERS / FRAUTSCHI POUNDATION	PO Box 7608 - Madison, WI 53707	140,000
SHAMROCK SHUPFLE, INC	PO Box 628182 - Middleton, WI 53562	3,000
WISCONSIN HISTORICAL POUNDATION (State Historical Society of Wis)	816 State St - Madison, WI 53791-9495	55,000
WISCONSIN ACADEMY OF SCIENCES, ARTS & LETTERS	1922 University Av - MSN 53716	1,000
WISCONSIN ACADEMY FOR GRADUATE SERVICE DOGS, INC	(WAGS) - 1330 Dewey Ct - MSN 53703	1,000
AMERICAN FRIENDSHIP FOUNDATION	1506 11th Av W - Seattle WA 98119	2,500
		489,950

Form **8868**

(Rev. April 2009)

Department of the Treasury Internal Revenue Service

Application for Extension of Time To File an Exempt Organization Return

File a separate application for each return.

OMB No. 1545-1709

Form 8868 (Rev 4-2009)

 If you are filing for an Automatic 3-Month Extension, complete only Part I and check this box If you are filing for an Additional (Not Automatic) 3-Month Extension, complete only Part II (on page 2) Do not complete Part II unless you have already been granted an automatic 3-month extension on a previous process. 	•	
Part 1 Automatic 3-Month Extension of Time. Only submit original (no copies needed	· · · · · · · · · · · · · · · · · · ·	
A corporation required to file Form 990-T and requesting an automatic 6-month extension - check this box a Part I only	and complete	▶ □
All other corporations (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to red to file income tax returns	quest an exte	nsion of time
Electronic Filing (e-file). Generally, you can electronically file Form 8868 if you want a 3-month automatic noted below (6 months for a corporation required to file Form 990-T). However, you cannot file Form 8868 (not automatic) 3-month extension or (2) you file Forms 990-BL, 6069, or 8870, group returns, or a composi you must submit the fully completed and signed page 2 (Part II) of Form 8868. For more details on the election www.irs.gov/efile and click on e-file for Charities & Nonprofits.	electronically i te or consolic	f (1) you want the additional lated Form 990-T Instead,
Type or Name of Exempt Organization	Emt	oloyer identification number
JOHN J. FRAUTSCHI FAMILY FOUNDATION, INC		39-1561017
File by the due date for filing your return See		
City, town or post office, state, and ZIP code. For a foreign address, see instructions. MADISON, WI 53704		
Check type of return to be filed (file a separate application for each return):		
Form 990-BL Form 990-T (sec. 401(a) or 408(a) trust) Form 990-EZ Form 990-T (trust other than above)	Form 4720 Form 5227 Form 6069 Form 8870	
JOHN J. FRAUTSCHI The books are in the care of ▶ 303 LAKEWOOD BOULEVARD — MADISON, W Telephone No ▶ 608-249-7028 FAX No. ▶ If the organization does not have an office or place of business in the United States, check this box If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) box ▶ ☐ . If it is for part of the group, check this box ▶ ☐ and attach a list with the names and Elli	If this is fo	▶ ☐
1 I request an automatic 3-month (6-months for a corporation required to file Form 990-T) extension of AUGUST 15, 2010 , to file the exempt organization return for the organization r is for the organization's return for: ▶ X calendar year 2009 or ▶ tax year beginning , and ending		. The extension
2 If this tax year is for less than 12 months, check reason: Initial return Final return	n 🗀	Change in accounting period
3a If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any		
nonrefundable credits. See instructions.	3a	\$ 0.
b If this application is for Form 990-PF or 990-T, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit.	3ь	s 10,302.
c Balance Due. Subtract line 3b from line 3a. Include your payment with this form, or, if required,	30	
deposit with FTD coupon or, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions.	3c	\$ 0.
Caution. If you are going to make an electronic fund withdrawal with this Form 8868, see Form 8453-EO ar	nd Form 8879	-EO for payment instructions.

For Privacy Act and Paperwork Reduction Act Notice, see Instructions.

If you are filing for an Additional (Not Automatic) 3-Month Extension, complete only Part II and check this box Note. Only complete Part II if you have already been granted an automatic 3-month extension on a previously filed Form 8868 If you are filing for an Automatic 3-Month Extension, complete only Part I (on page 1). Part II Additional (Not Automatic) 3-Month Extension of Time. Only file the original (no copies needed). Name of Exempt Organization VolHN J. FRAUTSCHI FAMILY FOUNDATION, INC Number, street, and room or suite no. If a P.O box, see instructions due date for a see instructions Name of Exempt Organization Number, street, and room or suite no. If a P.O box, see instructions OLYPO BOULEVARD City, town or post office, state, and ZIP code For a foreign address, see instructions. MAD ISON, WI 53704 Check type of return to be filed (File a separate application for each return): Form 990 Form 990-EZ Form 990-T (sec. 401(a) or 408(a) trust) Form 1041-A Form 5227 Form 887 Form 990-BL X Form 990-PF Form 990-T (trust other than above) Form 4720 Form 6069 STOP! Do not complete Part II if you were not already granted an automatic 3-month extension on a previously filed Form 8868. JOHN J. FRAUTSCHI The books are in the care of ▶ 303 LAKEWOOD BOULEVARD — MAD ISON, WI 53704 Telephone No. ▶ 608-249-7028 FAX No. ▶ If the organization does not have an office or place of business in the United States, check this box If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) If this is for the whole group, check the box ▶ In and attach a list with the names and ElNs of all members the extension is for.
Note. Only complete Part II if you have already been granted an automatic 3-month extension on a previously filed Form 8868 If you are filing for an Automatic 3-Month Extension, complete only Part I (on page 1). Part II Additional (Not Automatic) 3-Month Extension of Time. Only file the original (no copies needed). Type or print Type or DONN J. FRAUTSCHI FAMILY FOUNDATION, INC Number, street, and room or suite no. If a P.O box, see instructions 30.3 LAKEWOOD BOULEVARD City, town or post office, state, and ZIP code For a foreign address, see instructions. MADISON, WI 53704 Check type of return to be filed (File a separate application for each return): Form 990 □ Form 990-EZ □ Form 990-T (sec. 401(a) or 408(a) trust) □ Form 1041-A □ Form 5227 □ Form 887 Form 990-BL □ Form 990-PF □ Form 990-T (trust other than above) □ Form 4720 □ Form 6069 STOP! Do not complete Part II if you were not already granted an automatic 3-month extension on a previously filed Form 8868. JOHN J. FRAUTSCHI The books are in the care of ▶ 30.3 LAKEWOOD BOULEVARD − MADISON, WI 53704 Telephone No. ▶ 60.8−249−7028 FAX No. ▶ If the organization does not have an office or place of business in the United States, check this box If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) If this is for the whole group, check the box ▶ □ If it is for part of the group, check this box ▶ □ and attach a list with the names and ElNs of all members the extension is for.
Type or print Name of Exempt Organization
Type or print JOHN J. FRAUTSCHI FAMILY FOUNDATION, INC Number, street, and room or suite no. If a P.O box, see instructions 303 LAKEWOOD BOULEVARD City, town or post office, state, and ZIP code For a foreign address, see instructions. MADISON, WI 53704 Check type of return to be filed (File a separate application for each return): Form 990 Form 990-EZ Form 990-T (sec. 401(a) or 408(a) trust) Form 1041-A Form 5227 Form 887 Form 990-BL X Form 990-PF Form 990-T (trust other than above) Form 4720 Form 6069 STOP! Do not complete Part II if you were not already granted an automatic 3-month extension on a previously filed Form 8868. JOHN J. FRAUTSCHI The books are in the care of ▶ 303 LAKEWOOD BOULEVARD — MADISON, WI 53704 Telephone No. ▶ 608-249-7028 FAX No. ▶ If the organization does not have an office or place of business in the United States, check this box If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) If this is for the whole group, check this box If 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.
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File by the extended due date for filling the return See Instructions Number, street, and room or suite no. If a P.O box, see instructions For IRS use only
Number, street, and room or suite no. If a P.O box, see instructions 30.3 LAKEWOOD BOULEVARD
City, town or post office, state, and ZIP code For a foreign address, see instructions. Check type of return to be filed (File a separate application for each return):
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I request an additional 3-month extension of time until NOVEMBER 15, 2010. For calendar year 2009, or other tax year beginning If this tax year is for less than 12 months, check reason. State in detail why you need the extension TAXPAYER REQUESTS ADDITIONAL TIME TO FILE A COMPLETE AND ACCURATE TAX RETURN.
8a If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions.
b If this application is for Form 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated
tax payments made Include any prior year overpayment allowed as a credit and any amount paid
previously with Form 8868 8b \$ 10,302
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 \$
Signature and Verification
Under penalties of perjury, I declare that I have examined this form, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete and that I and authorized to prepare this form Signature Title CPA Date Big 13/10 Form 8868 (Rev 4-20)