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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

OMB No 1545-0052

**2009**

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

For calendar year 2009, or tax year beginning , 2009, and ending , 20

G Check all that apply: ☐ Initial return ☐ Initial return of a former public charity ☐ Final return  
☐ Amended return ☒ Address change ☐ Name change

Use the IRS label. Otherwise, print or type. See Specific Instructions.	Name of foundation VINE AND BRANCHES FOUNDATION, INC. C/O THE LEGACY GROUP, INC.		A Employer identification number 39-1827808
	Number and street (or P O box number if mail is not delivered to street address)	Room/suite	B Telephone number (see page 10 of the instructions) (262) 754-2799
	300 N. CORPORATE DR., SUITE 205		C If exemption application is pending, check here <input type="checkbox"/>
	City or town, state, and ZIP code BROOKFIELD, WI 53045		D 1. Foreign organizations, check here <input type="checkbox"/> 2. Foreign organizations meeting the 85% test, check here and attach computation <input type="checkbox"/>

H Check type of organization <input checked="" type="checkbox"/> Section 501(c)(3) exempt private foundation <input type="checkbox"/> Section 4947(a)(1) nonexempt charitable trust <input type="checkbox"/> Other taxable private foundation	J Accounting method: <input checked="" type="checkbox"/> Cash <input type="checkbox"/> Accrual <input type="checkbox"/> Other (specify) _____ (Part I, column (d) must be on cash basis.)	E If private foundation status was terminated under section 507(b)(1)(A), check here <input type="checkbox"/> F If the foundation is in a 60-month termination under section 507(b)(1)(B), check here <input type="checkbox"/>
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Part I Analysis of Revenue and Expenses (The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a) (see page 11 of the instructions))		(a) Revenue and expenses per books	(b) Net investment income	(c) Adjusted net income	(d) Disbursements for charitable purposes (cash basis only)
1	Contributions, gifts, grants, etc., received (attach schedule)				
2	Check <input checked="" type="checkbox"/> if the foundation is not required to attach Sch B.				
3	Interest on savings and temporary cash investments	20,722.	20,722.		ATCH 1
4	Dividends and interest from securities	202,872.	202,872.		ATCH 2
5a	Gross rents				
b	Net rental income or (loss)				
6a	Net gain or (loss) from sale of assets not on line 10	-2,529,119.			
b	Gross sales price for all assets on line 6a 9,406,442.				
7	Capital gain net income (from Part IV, line 2)				
8	Net short-term capital gain				
9	Income modifications				
10a	Gross sales less returns and allowances				
b	Less Cost of goods sold				
c	Gross profit or (loss) (attach schedule)				
11	Other income (attach schedule)	107,370.			ATCH 3
12	Total. Add lines 1 through 11	-2,198,155.	228,946.		
13	Compensation of officers, directors, trustees, etc.				
14	Other employee salaries and wages				
15	Pension plans, employee benefits				
16a	Legal fees (attach schedule)				
b	Accounting fees (attach schedule)	27,215.	0.	0.	27,215.
c	Other professional fees (attach schedule) *	462,480.	153,480.		309,000.
17	Interest				
18	Taxes (attach schedule) (see page 14 of the instructions) *	132,507.	23,779.		
19	Depreciation (attach schedule) and depletion				
20	Occupancy				
21	Travel, conferences, and meetings	3,956.			3,956.
22	Printing and publications				
23	Other expenses (attach schedule) ATCH 6	8,245.	1,000.		7,245.
24	Total operating and administrative expenses. Add lines 13 through 23	634,403.	178,259.	0.	347,416.
25	Contributions, gifts, grants paid	2,035,794.			2,035,794.
26	Total expenses and disbursements. Add lines 24 and 25	2,670,197.	178,259.	0.	2,383,210.
27	Subtract line 26 from line 12:				
a	Excess of revenue over expenses and disbursements	-4,868,352.			
b	Net investment income (if negative, enter -0-)		50,687.		
c	Adjusted net income (if negative, enter -0-)			-0-	

For Privacy Act and Paperwork Reduction Act Notice, see page 30 of the instructions.

\* ATCH 4 JSA \*\* ATCH 5

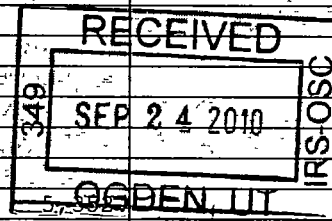
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Part II Balance Sheets		Attached schedules and amounts in the description column should be for end-of-year amounts only (See instructions)		Beginning of year	End of year	
				(a) Book Value	(b) Book Value	(c) Fair Market Value
Assets	1	Cash - non-interest-bearing				
	2	Savings and temporary cash investments		585,168.	895,747.	895,747.
	3	Accounts receivable				
		Less: allowance for doubtful accounts				
	4	Pledges receivable				
		Less: allowance for doubtful accounts				
	5	Grants receivable				
	6	Receivables due from officers, directors, trustees, and other disqualified persons (attach schedule) (see page 16 of the instructions)				
	7	Other notes and loans receivable (attach schedule)				
		Less: allowance for doubtful accounts				
	8	Inventories for sale or use				
	9	Prepaid expenses and deferred charges				
	10 a	Investments - U.S. and state government obligations (attach schedule)				
	b	Investments - corporate stock (attach schedule) <b>ATCH 7</b>		5,108,655.	6,252,818.	6,335,697.
	c	Investments - corporate bonds (attach schedule) <b>ATCH 8</b>		513,867.	1,263,063.	1,295,450.
	11	Investments - land, buildings, and equipment basis	966,421.			
	Less: accumulated depreciation (attach schedule)		966,421.	966,421.	3,500,000.	
12	Investments - mortgage loans					
13	Investments - other (attach schedule) <b>ATCH 9</b>		21,350,784.	15,183,877.	14,439,523.	
14	Land, buildings, and equipment basis					
	Less: accumulated depreciation (attach schedule)					
15	Other assets (describe)					
16	<b>Total assets</b> (to be completed by all filers - see the instructions. Also, see page 1, item I)		28,524,895.	24,561,926.	26,466,417.	
Liabilities	17	Accounts payable and accrued expenses				
	18	Grants payable				
	19	Deferred revenue				
	20	Loans from officers, directors, trustees, and other disqualified persons				
	21	Mortgages and other notes payable (attach schedule)				
	22	Other liabilities (describe)				
23	<b>Total liabilities</b> (add lines 17 through 22)					
Net Assets or Fund Balances	Foundations that follow SFAS 117, check here <input type="checkbox"/> and complete lines 24 through 26 and lines 30 and 31.					
	24	Unrestricted				
	25	Temporarily restricted				
	26	Permanently restricted				
	Foundations that do not follow SFAS 117, check here and complete lines 27 through 31. <input checked="" type="checkbox"/>					
	27	Capital stock, trust principal, or current funds				
	28	Paid-in or capital surplus, or land, bldg., and equipment fund				
	29	Retained earnings, accumulated income, endowment, or other funds		23,225,049.	24,561,926.	
	30	<b>Total net assets or fund balances</b> (see page 17 of the instructions)		23,225,049.	24,561,926.	
	31	<b>Total liabilities and net assets/fund balances</b> (see page 17 of the instructions)		23,225,049.	24,561,926.	

### Part III Analysis of Changes in Net Assets or Fund Balances

1	Total net assets or fund balances at beginning of year - Part II, column (a), line 30 (must agree with end-of-year figure reported on prior year's return)	1	23,225,049.
2	Enter amount from Part I, line 27a	2	-4,868,352.
3	Other increases not included in line 2 (itemize) <b>ATTACHMENT 10</b>	3	6,215,229.
4	Add lines 1, 2, and 3	4	24,571,926.
5	Decreases not included in line 2 (itemize) <b>ATTACHMENT 11</b>	5	10,000.
6	<b>Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b), line 30</b>	6	24,561,926.

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**Part IV Capital Gains and Losses for Tax on Investment Income**

(a) List and describe the kind(s) of property sold (e.g., real estate, 2-story brick warehouse, or common stock, 200 shs MLC Co)			(b) How acquired P-Purchase D-Donation	(c) Date acquired (mo, day, yr)	(d) Date sold (mo, day, yr)
<b>1a</b> SEE PART IV SCHEDULE					
<b>b</b>					
<b>c</b>					
<b>d</b>					
<b>e</b>					
(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale	(h) Gain or (loss) (e) plus (f) minus (g)		
<b>a</b>					
<b>b</b>					
<b>c</b>					
<b>d</b>					
<b>e</b>					
Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69					
(i) F M V as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col (i) over col (j), if any	(l) Gains (Col (h) gain minus col (k), but not less than -0-) or Losses (from col (h))		
<b>a</b>					
<b>b</b>					
<b>c</b>					
<b>d</b>					
<b>e</b>					
<b>2</b> Capital gain net income or (net capital loss) . . . . .			<div style="display: flex; align-items: center;"> <div style="border-left: 1px solid black; padding-left: 5px; margin-right: 5px;">           If gain, also enter in Part I, line 7            If (loss), enter -0- in Part I, line 7         </div> <div style="border: 1px solid black; padding: 2px 5px; text-align: center;">2</div> <div style="margin-left: 10px;">-2,529,119.</div> </div>		
<b>3</b> Net short-term capital gain or (loss) as defined in sections 1222(5) and (6): If gain, also enter in Part I, line 8, column (c) (see pages 13 and 17 of the instructions) If (loss), enter -0- in Part I, line 8 . . . . .			<div style="display: flex; align-items: center;"> <div style="border-left: 1px solid black; padding-left: 5px; margin-right: 5px;">           If gain, also enter in Part I, line 8, column (c) (see pages 13 and 17 of the instructions)            If (loss), enter -0- in Part I, line 8         </div> <div style="border: 1px solid black; padding: 2px 5px; text-align: center;">3</div> </div>		

**Part V Qualification Under Section 4940(e) for Reduced Tax on Net Investment Income**

(For optional use by domestic private foundations subject to the section 4940(a) tax on net investment income.)

If section 4940(d)(2) applies, leave this part blank.

Was the foundation liable for the section 4942 tax on the distributable amount of any year in the base period? . . . . ☐ Yes ☒ No

If "Yes," the foundation does not qualify under section 4940(e). Do not complete this part.

**1** Enter the appropriate amount in each column for each year; see page 18 of the instructions before making any entries.

(a) Base period years Calendar year (or tax year beginning in)	(b) Adjusted qualifying distributions	(c) Net value of noncharitable-use assets	(d) Distribution ratio (col (b) divided by col (c))
2008	2,037,747.	31,270,360.	0.065165
2007	2,845,557.	37,822,417.	0.075235
2006	3,002,851.	37,199,320.	0.080723
2005	1,403,623.	37,111,316.	0.037822
2004	1,861,209.	36,009,039.	0.051687
<b>2</b> Total of line 1, column (d) . . . . .			0.310632
<b>3</b> Average distribution ratio for the 5-year base period - divide the total on line 2 by 5, or by the number of years the foundation has been in existence if less than 5 years . . . . .			0.062126
<b>4</b> Enter the net value of noncharitable-use assets for 2009 from Part X, line 5 . . . . .			24,327,341.
<b>5</b> Multiply line 4 by line 3 . . . . .			1,511,360.
<b>6</b> Enter 1% of net investment income (1% of Part I, line 27b) . . . . .			507.
<b>7</b> Add lines 5 and 6 . . . . .			1,511,867.
<b>8</b> Enter qualifying distributions from Part XII, line 4 . . . . .			2,383,210.

If line 8 is equal to or greater than line 7, check the box in Part VI, line 1b, and complete that part using a 1% tax rate. See the Part VI instructions on page 18.

**Part VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 - see page 18 of the instructions)**

1a Exempt operating foundations described in section 4940(d)(2), check here <input type="checkbox"/> and enter "N/A" on line 1 Date of ruling or determination letter _____ (attach copy of ruling letter if necessary - see instructions)		1	507.
b Domestic foundations that meet the section 4940(e) requirements in Part V, check here <input checked="" type="checkbox"/> and enter 1% 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)			
2 Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)		2	
3 Add lines 1 and 2		3	507.
4 Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)		4	0.
5 Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-		5	507.
6 Credits/Payments:			
a 2009 estimated tax payments and 2008 overpayment credited to 2009	6a	102,018.	
b Exempt foreign organizations-tax withheld at source	6b	0.	
c Tax paid with application for extension of time to file (Form 8868)	6c	0.	
d Backup withholding erroneously withheld	6d		
7 Total credits and payments. Add lines 6a through 6d	7	102,018.	
8 Enter any penalty for underpayment of estimated tax. Check here <input type="checkbox"/> if Form 2220 is attached	8		
9 Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed	9		
10 Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid	10	101,511.	
11 Enter the amount of line 10 to be Credited to 2010 estimated tax 101,511. Refunded	11		

**Part VII-A Statements Regarding Activities**

	Yes	No
1a During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any political campaign?		X
b Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see page 19 of the instructions for definition)? 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.		X
c Did the foundation file Form 1120-POL for this year?		X
d Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year: (1) On the foundation \$ (2) On foundation managers \$		
e Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers \$		
2 Has the foundation engaged in any activities that have not previously been reported to the IRS? If "Yes," attach a detailed description of the activities.		X
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		X
4a Did the foundation have unrelated business gross income of \$1,000 or more during the year?	X	
b If "Yes," has it filed a tax return on Form 990-T for this year?	X	
5 Was there a liquidation, termination, dissolution, or substantial contraction during the year? If "Yes," attach the statement required by General Instruction T		X
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?	X	
7 Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col (c), and Part XV	X	
8a Enter the states to which the foundation reports or with which it is registered (see page 19 of the instructions) WI,		
b If 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	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 on page 27)? If "Yes," complete Part XIV		X
10 Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses		X

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**Part VII-A Statements Regarding Activities (continued)**

11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of section 512(b)(13)? If "Yes," attach schedule (see page 20 of the instructions)	11		X
12	Did the foundation acquire a direct or indirect interest in any applicable insurance contract before August 17, 2008?	12		X
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application? Website address <u>WWW.VINEANDBRANCHESFOUNDATION.ORG</u>	13	X	
14	The books are in care of <u>THE LEGACY GROUP, INC.</u> Telephone no <u>(262) 754-2799</u> Located at <u>BROOKFIELD, WI</u> ZIP + 4 <u>53045</u>			
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - Check here <input type="checkbox"/> and enter the amount of tax-exempt interest received or accrued during the year <u>15</u>			

**Part VII-B Statements Regarding Activities for Which Form 4720 May Be Required**

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? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
(2)	Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
(3)	Furnish goods, services, or facilities to (or accept them from) a disqualified person? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
(4)	Pay compensation to, or pay or reimburse the expenses of, a disqualified person? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
(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)? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
(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) <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
b	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)? Organizations relying on a current notice regarding disaster assistance check here <input type="checkbox"/>	1b	
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?	1c	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	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? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If "Yes," list the years <u></u>		
b	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 page 20 of the instructions)	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 <u></u>		
3a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		
b	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)	3b	X
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a	X
b	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 jeopardy before the first day of the tax year beginning in 2009?	4b	X

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**Part VII-B Statements Regarding Activities for Which Form 4720 May Be Required (continued)****5a** During the year did the foundation pay or incur any amount to:

- (1) Carry on propaganda, or otherwise attempt to influence legislation (section 4945(e))? ☐ Yes ☒ No
- (2) Influence the outcome of any specific public election (see section 4955), or to carry on, directly or indirectly, any voter registration drive? ☐ Yes ☒ No
- (3) Provide a grant to an individual for travel, study, or other similar purposes? ☐ Yes ☒ No
- (4) Provide a grant to an organization other than a charitable, etc., organization described in section 509(a)(1), (2), or (3), or section 4940(d)(2)? (see page 22 of the instructions) ☐ Yes ☒ No
- (5) Provide for any purpose other than religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals? ☐ Yes ☒ No

**b** If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify under the exceptions described in Regulations section 53.4945 or in a current notice regarding disaster assistance (see page 22 of the instructions)?Organizations relying on a current notice regarding disaster assistance check here ☐**c** If the answer is "Yes" to question 5a(4), does the foundation claim exemption from the tax because it maintained expenditure responsibility for the grant?☐ Yes ☐ No

If "Yes," attach the statement required by Regulations section 53.4945-5(d).

**6a** Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?☐ Yes ☒ No**b** Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract?

If "Yes" to 6b, file Form 8870

**7a** At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction?☐ Yes ☒ No**b** If yes, did the foundation receive any proceeds or have any net income attributable to the transaction?**Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors****1** List all officers, directors, trustees, foundation managers and their compensation (see page 22 of the instructions).

(a) Name and address	(b) Title, and average hours per week devoted to position	(c) Compensation (if not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
ATTACHMENT 12		-0-	-0-	-0-

**2** Compensation of five highest-paid employees (other than those included on line 1 - see page 23 of the instructions). If none, enter "NONE."

(a) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
NONE				

**Total** number of other employees paid over \$50,000 ☐

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**Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors** (continued)**3 Five highest-paid independent contractors for professional services** (see page 23 of the instructions). If none, enter "NONE."

(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE		

Total number of others receiving over \$50,000 for professional services . . . . . NONE

**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.

	Expenses
1 THE VINE & BRANCHES FOUNDATION INC IS ORGANIZED AND OPERATED FOR THE SOLE PURPOSE OF MAKING CASH CONTRIBUTIONS TO QUALIFYING PUBLIC CHARITIES. THE FOUNDATION DOES NOT ENGAGE	
2 IN ANY OTHER DIRECT CHARITABLE ACTIVITIES.	
3	
4	

**Part IX-B Summary of Program-Related Investments** (see page 23 of the instructions)

Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2

	Amount
1 NOT APPLICABLE	
2	
All other program-related investments See page 24 of the instructions	
3 NONE	

Total. Add lines 1 through 3 . . . . .

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**Part X Minimum Investment Return** (All domestic foundations must complete this part. Foreign foundations, see page 24 of the instructions.)

1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes:		
a	Average monthly fair market value of securities	1a	19,843,715.
b	Average of monthly cash balances	1b	1,354,093.
c	Fair market value of all other assets (see page 24 of the instructions)	1c	3,500,000.
d	<b>Total</b> (add lines 1a, b, and c)	1d	24,697,808.
e	Reduction claimed for blockage or other factors reported on lines 1a and 1c (attach detailed explanation)	1e	
2	Acquisition indebtedness applicable to line 1 assets	2	0.
3	Subtract line 2 from line 1d	3	24,697,808.
4	Cash deemed held for charitable activities. Enter 1 1/2 % of line 3 (for greater amount, see page 25 of the instructions)	4	370,467.
5	<b>Net value of noncharitable-use assets.</b> Subtract line 4 from line 3. Enter here and on Part V, line 4	5	24,327,341.
6	<b>Minimum investment return.</b> Enter 5% of line 5	6	1,216,367.

**Part XI Distributable Amount** (see page 25 of the instructions) (Section 4942(j)(3) and (j)(5) private operating foundations and certain foreign organizations check here ☐ and do not complete this part.)

1	Minimum investment return from Part X, line 6	1	1,216,367.
2a	Tax on investment income for 2009 from Part VI, line 5	2a	507.
b	Income tax for 2009. (This does not include the tax from Part VI.)	2b	
c	Add lines 2a and 2b	2c	507.
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	1,215,860.
4	Recoveries of amounts treated as qualifying distributions	4	
5	Add lines 3 and 4	5	1,215,860.
6	Deduction from distributable amount (see page 25 of the instructions)	6	
7	<b>Distributable amount</b> as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1	7	1,215,860.

**Part XII Qualifying Distributions**(see page 25 of the instructions)

1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:		
a	Expenses, contributions, gifts, etc. - total from Part I, column (d), line 26	1a	2,383,210.
b	Program-related investments - total from Part IX-B	1b	0.
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes	2	0.
3	Amounts set aside for specific charitable projects that satisfy the:		
a	Suitability test (prior IRS approval required)	3a	0.
b	Cash distribution test (attach the required schedule)	3b	0.
4	<b>Qualifying distributions.</b> Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4	4	2,383,210.
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income. Enter 1% of Part I, line 27b (see page 26 of the instructions)	5	507.
6	<b>Adjusted qualifying distributions.</b> Subtract line 5 from line 4	6	2,382,703.

**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 4940(e) reduction of tax in those years.

**Part XIII Undistributed Income** (see page 26 of the instructions)

	(a) Corpus	(b) Years prior to 2008	(c) 2008	(d) 2009
1 Distributable amount for 2009 from Part XI, line 7 . . . . .				1,215,860.
2 Undistributed income, if any, as of the end of 2009				
a Enter amount for 2008 only . . . . .				
b Total for prior years 20 07, 20 06, 20 05 . . . . .				
3 Excess distributions carryover, if any, to 2009				
a From 2004 . . . . . 28,012.				
b From 2005 . . . . . 0.				
c From 2006 . . . . . 1,259,777.				
d From 2007 . . . . . 985,860.				
e From 2008 . . . . . 475,705.				
f Total of lines 3a through e . . . . .	2,749,354.			
4 Qualifying distributions for 2009 from Part XII, line 4: ► \$ 2,383,210.				
a Applied to 2008, but not more than line 2a . . . . .				
b Applied to undistributed income of prior years (Election required - see page 26 of the instructions) . . . . .				
c Treated as distributions out of corpus (Election required - see page 26 of the instructions) . . . . .				
d Applied to 2009 distributable amount . . . . .				1,215,860.
e Remaining amount distributed out of corpus . . . . .	1,167,350.			
5 Excess distributions carryover applied to 2009 (If an amount appears in column (d), the same amount must be shown in column (a) )				
6 Enter the net total of each column as indicated below:				
a Corpus Add lines 3f, 4c, and 4e Subtract line 5 . . . . .	3,916,704.			
b Prior years' undistributed income Subtract line 4b from line 2b . . . . .				
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. . . . .				
d Subtract line 6c from line 6b. Taxable amount - see page 27 of the instructions . . . . .				
e Undistributed income for 2008 Subtract line 4a from line 2a Taxable amount - see page 27 of the instructions . . . . .				
f Undistributed income for 2009 Subtract lines 4d and 5 from line 1. This amount must be distributed in 2010 . . . . .				
7 Amounts treated as distributions out of corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3) (see page 27 of the instructions) . . . . .				
8 Excess distributions carryover from 2004 not applied on line 5 or line 7 (see page 27 of the instructions) . . . . .	28,012.			
9 Excess distributions carryover to 2010. Subtract lines 7 and 8 from line 6a . . . . .	3,888,692.			
10 Analysis of line 9:				
a Excess from 2005 . . . . . 0.				
b Excess from 2006 . . . . . 1,259,777.				
c Excess from 2007 . . . . . 985,860.				
d Excess from 2008 . . . . . 475,705.				
e Excess from 2009 . . . . . 1,167,350.				

Form 990-PF (2009)

<b>Part XIV</b>	<b>Private Operating Foundations</b> (see page 27 of the instructions and Part VII-A, question 9)	NOT APPLICABLE
-----------------	---	----------------

- 1 a** If the foundation has received a ruling or determination letter that it is a private operating foundation, and the ruling is effective for 2009, enter the date of the ruling

**b** Check box to indicate whether the foundation is a private operating foundation described in section

4942(j)(3) or

4942(j)(5)

		Prior 3 years				(e) Total
		(a) 2009	(b) 2008	(c) 2007	(d) 2006	
<b>2 a</b>	Enter the lesser of the adjusted net income from Part I or the minimum investment return from Part X for each year listed . . . . .					
<b>b</b>	85% of line 2a . . . . .					
<b>c</b>	Qualifying distributions from Part XII, line 4 for each year listed . . . . .					
<b>d</b>	Amounts included in line 2c not used directly for active conduct of exempt activities . . . . .					
<b>e</b>	Qualifying distributions made directly for active conduct of exempt activities Subtract line 2d from line 2c . . . . .					
<b>3</b>	Complete 3a, b, or c for the alternative test relied upon					
<b>a</b>	"Assets" alternative test - enter					
(1)	Value of all assets . . . .					
(2)	Value of assets qualifying under section 4942(j)(3)(B)(i). . . . .					
<b>b</b>	"Endowment" alternative test - enter 2/3 of minimum investment return shown in Part X, line 6 for each year listed . . . . .					
<b>c</b>	"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 . . . . .					
(4)	Gross investment income . . . . .					

**Part XV** **Supplementary Information (Complete this part only if the foundation had \$5,000 or more in assets at any time during the year - see page 28 of the instructions.)**

**1 Information Regarding Foundation Managers:**

- a List any managers of the foundation who have contributed more than 2% of the total contributions received by the foundation before the close of any tax year (but only if they have contributed more than \$5,000). (See section 507(d)(2) )

JOHN W. FINDLEY

- b** List any managers of the foundation who own 10% or more of the stock of a corporation (or an equally large portion of the ownership of a partnership or other entity) of which the foundation has a 10% or greater interest

NONE

**2 Information Regarding Contribution, Grant, Gift, Loan, Scholarship, etc., Programs:**

Check here ☐ if the foundation only makes contributions to preselected charitable organizations and does not accept unsolicited requests for funds. If the foundation makes gifts, grants, etc. (see page 28 of the instructions) to individuals or organizations under other conditions, complete items 2a, b, c, and d.

- a The name, address, and telephone number of the person to whom applications should be addressed:

ATTACHMENT 13

- b The form in which applications should be submitted and information and materials they should include:**

ATTACHMENT 14

- c Any submission deadlines:**

ATTACHMENT 15

- d Any restrictions or limitations on awards, such as by geographical areas, charitable fields, kinds of institutions, or other factors

NONE

**Part XV Supplementary Information (continued)****3 Grants and Contributions Paid During the Year or Approved for Future Payment**

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a Paid during the year</b> SEE STATEMENT 16				2,035,794.
<b>Total.</b>			<b>3a</b>	2,035,794.
<b>b Approved for future payment</b> SEE STATEMENT 17				100,000.
<b>Total.</b>			<b>3b</b>	100,000.

Form **990-PF** (2009)



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

- |   |   |       |     |    |
|---|---|-------|-----|----|
| 1 | Did the organization directly or indirectly engage in any of the following with any other organization described in section 501(c) of the Code (other than section 501(c)(3) organizations) or in section 527, relating to political organizations? |       | Yes | No |
| a | Transfers from the reporting foundation to a noncharitable exempt organization of:  |       |     |    |
|   | (1) Cash  | 1a(1) |     | X  |
|   | (2) Other assets  | 1a(2) |     | X  |
| b | Other transactions:   |       |     |    |
|   | (1) Sales of assets to a noncharitable exempt organization  | 1b(1) |     | X  |
|   | (2) Purchases of assets from a noncharitable exempt organization  | 1b(2) |     | X  |
|   | (3) Rental of facilities, equipment, or other assets  | 1b(3) |     | X  |
|   | (4) Reimbursement arrangements  | 1b(4) |     | X  |
|   | (5) Loans or loan guarantees  | 1b(5) |     | X  |
|   | (6) Performance of services or membership or fundraising solicitations  | 1b(6) |     | X  |
| c | Sharing of facilities, equipment, mailing lists, other assets, or paid employees  | 1c    |     | X  |
| d | If the answer to any of the above is "Yes," complete the following schedule   |       |     |    |
|   | Column (b) should always show the fair market value of the goods, other assets, or services given by the reporting foundation   |       |     |    |
|   | If the foundation received less than fair market value in any transaction or sharing arrangement, show in column (d) the value of the goods, other assets, or services received   |       |     |    |

[illegible]

- 2a** Is the foundation directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described in section 501(c) of the Code (other than section 501(c)(3)) or in section 527? ☐ Yes ☒ No
- b** If "Yes," complete the following schedule.

(a) Name of organization	(b) Type of organization	(c) Description of relationship

Sign Here	Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than taxpayer or fiduciary) is based on all information of which preparer has any knowledge.			
	Signature of officer or trustee <i>John Lindley</i>		Date <i>10/15/10</i>	Title <i>PRESIDENT</i>
Paid Preparer's Use Only	Preparer's signature <i>SA Stige</i>	Date <i>9/13/10</i>	Check if self-employed <input type="checkbox"/>	Preparer's identifying number (See Signature on page 30 of the instructions)
	Firm's name (or yours if self-employed), address, and ZIP code <i>PRICewaterhouseCOOPERS LLP</i> <i>100 EAST WISCONSIN AVENUE</i> <i>MILWAUKEE, WI 53202</i>			EIN <i>13-4008324</i>  Phone no <i>414-212-1600</i>

Form **990-PF** (2009)

**FORM 990-PF - PART IV**  
**CAPITAL GAINS AND LOSSES FOR TAX ON INVESTMENT INCOME**

Kind of Property		Description				Date acquired	Date sold
Gross sale price less expenses of sale	Depreciation allowed/allowable	Cost or other basis	FMV as of 12/31/69	Adj. basis as of 12/31/69	Excess of FMV over adj basis	Gain or (loss)	
3,052,140.		SEE STATEMENT 18 - GOLDMAN SACHS SHORT T 3,009,308.				VARIOUS 42,832.	VARIOUS
1,548,193.		SEE STATEMENT 18 - GOLDMAN SACHS LONG TE 2,152,414.				VARIOUS -604,221.	VARIOUS
		ALPHA+ MANAGERS: PORTFOLIO 2 SHORT TERM				VARIOUS 2,697.	VARIOUS
		ALPHA+ MANAGERS: PORTFOLIO 4 SHORT TERM				VARIOUS -160,727.	VARIOUS
		ALPHA+ MANAGERS: PORTFOLIO 2 LONG TERM				VARIOUS -64,711.	VARIOUS
		ALPHA+ MANAGERS: PORTFOLIO 4 LONG TERM				VARIOUS -532,378.	VARIOUS
		GS CAPITAL PARTNERS VI PARALLEL LP SHORT				VARIOUS 10,752.	VARIOUS
		GS CAPITAL PARTNERS VI PARALLEL LP LONG				VARIOUS 89,454.	VARIOUS
		GS CAPITAL PARTNERS VI PARALLEL AIV LP L				VARIOUS -25.	VARIOUS
619,993.		14243.66 SHARES OF LARGE CAP GROWTH MANA 1,021,712.				06/29/2006 -401,719.	02/27/2009
614,776.		7994.4 SHARES OF LARGE CAP VALUE MANAGER 1,146,117.				06/29/2006 -531,341.	02/27/2009
548,549.		9377.33 SHARES OF WELLINGTON: SMALL CAP 911,834.				06/29/2006 -363,285.	04/30/2009

**FORM 990-PF - PART IV**  
**CAPITAL GAINS AND LOSSES FOR TAX ON INVESTMENT INCOME**

Kind of Property		Description				Date acquired	Date sold
Gross sale price less expenses of sale	Depreciation allowed/allowable	Cost or other basis	FMV as of 12/31/69	Adj basis as of 12/31/69	Excess of FMV over adj basis	Gain or (loss)	
1,779,094.		18478.4017 SHARES OF GS LIBERTY HARBOR I 1,848,323.				06/05/2007 -69,229.	06/30/2009
162,834.		1923.08 SHARES OF GS WEST STREET PARTNER 200,000.				08/31/2006 -37,166.	03/31/2009
152,766.		SHARES OF GS PRIVATE CONCENTRATED ENERGY 87,359.				VARIOUS 65,407.	VARIOUS
198,708.		SHARES OF GS MEZZANINE PARTNERS V LP 176,504.				VARIOUS 22,204.	VARIOUS
14,055.		SHARES OF GS WLR OPPORTUNITIES FUND 13,782.				VARIOUS 273.	VARIOUS
714,731.		SALE OF INVESTMENT IN ALPHA PLUS MANAGER 707,336.				VARIOUS 7,395.	VARIOUS
		SEE FORM 6781 - GS CAPITAL PARTNERS VI P				VARIOUS -2,132.	VARIOUS
		SEE FORM 6781 - GS CAPITAL PARTNERS VI P				VARIOUS -3,199.	VARIOUS
603.		THL EQUITY FUND VI 603.				VARIOUS	VARIOUS
TOTAL GAIN (LOSS) .....						<u>-2529119.</u>	

ATTACHMENT 1FORM 990PF, PART I - INTEREST ON TEMPORARY CASH INVESTMENTS

<u>DESCRIPTION</u>	<u>REVENUE AND EXPENSES PER BOOKS</u>	<u>NET INVESTMENT INCOME</u>
GOLDMAN SACHS INTEREST	20,722.	20,722.
TOTAL	<u>20,722.</u>	<u>20,722.</u>

ATTACHMENT 2FORM 990PF, PART I - DIVIDENDS AND INTEREST FROM SECURITIES

<u>DESCRIPTION</u>	<u>REVENUE AND EXPENSES PER BOOKS</u>	<u>NET INVESTMENT INCOME</u>
GOLDMAN SACHS - DIVIDENDS	108,290.	108,290.
ALPHA+ MANAGERS: PORTFOLIO 4 DIVIDENDS	1,354.	1,354.
ALPHA+ MANAGERS: PORTFOLIO 4 INTEREST	86.	86.
ALPHA+ MANAGERS: PORTFOLIO 2 DIVIDENDS	15,088.	15,088.
ALPHA+ MANAGERS: PORTFOLIO 2 INTEREST	1,495.	1,495.
GS CAP PARTNERS VI PARALLEL DIVIDENDS	32,401.	32,401.
GS CAP PARTNERS VI PARALLEL INTEREST	22,988.	22,988.
GSCP VI PARALLEL AIV DIVIDEND	30.	30.
RALPH FINDLEY CHAR. REMAINDER TRUST DIV	2,067.	2,067.
RALPH FINDLEY CHAR. REMAINDER TRUST INT	2,729.	2,729.
THL EQUITY FUND VI - GS ACCESS, LP INT	603.	603.
GS WLR OPPORTUNITIES FUND INTEREST	2,761.	2,761.
GS PRIVATE EQUITY CONC. ENERGY FUND INT	12,980.	12,980.
TOTAL	<u>202,872.</u>	<u>202,872.</u>

ATTACHMENT 3FORM 990PF, PART I - OTHER INCOME

DESCRIPTION	REVENUE AND EXPENSES PER BOOKS	NET INVESTMENT INCOME
2008 OVERPAYMENT APPLIED	102,018.	0.
OTHER MISCELLANEOUS INCOME		
ALPHA+ MANAGERS PORTFOLIO 2		
IRC SECTION 988 LOSS	-42.	-42.
OTHER ORDINARY INCOME	30.	30.
ALPHA+ MANAGERS PORTFOLIO 4		
IRC SECTION 988 LOSS	-5.	-5.
GS CAP PARTNERS VI PARALLEL		
IRC SECTION 988 GAIN	630.	630.
OTHER INCOME	4,739.	4,739.
TOTALS	<u>107,370.</u>	<u>5,352.</u>

ATTACHMENT 4FORM 990PF, PART I - OTHER PROFESSIONAL FEES

<u>DESCRIPTION</u>	<u>REVENUE AND EXPENSES PER BOOKS</u>	<u>NET INVESTMENT INCOME</u>	<u>CHARITABLE PURPOSES</u>
ALPHA+ MANAGERS PORTFOLIO 2			
MANAGEMENT & INVESTMENT FEES	20,694.	20,694.	
ALPHA+ MANAGERS: PORTFOLIO 4			
MANAGEMENT & INVESTMENT FEES	2,713.	2,713.	
GOLDMAN SACHS MANAGEMENT FEES	94,851.	94,851.	
LEGACY GROUP MANAGEMENT FEES	309,000.		309,000.
GS CAP PARTNERS VI PARALLEL			
MANAGEMENT & INVESTMENT FEES	28,829.	28,829.	
GSCP VI PARALLEL AIV LP			
MANAGEMENT & INVESTMENT FEES	2,577.	2,577.	
GS MEZZANINE PARTNERS V LP			
MANAGEMENT & INVESTMENT FEES	3,816.	3,816.	
TOTALS	<u>462,480.</u>	<u>153,480.</u>	<u>309,000.</u>

ATTACHMENT 5FORM 990PF, PART I - TAXES

<u>DESCRIPTION</u>	<u>REVENUE AND EXPENSES PER BOOKS</u>	<u>NET INVESTMENT INCOME</u>
PROPERTY TAXES ON INVESTMENT	22,397.	22,397.
FEDERAL INCOME TAXES PAID	6,710.	0.
OVERPAYMENT APPLIED	102,018.	0.
FOREIGN TAX PAID ON INVESTMENT	1,382.	1,382.
TOTALS	<u>132,507.</u>	<u>23,779.</u>

ATTACHMENT 6FORM 990PF, PART I - OTHER EXPENSES

DESCRIPTION	REVENUE AND EXPENSES PER BOOKS	NET INVESTMENT INCOME	CHARITABLE PURPOSES
INSURANCE	3,649.		3,649.
OFFICE SUPPLIES	17.		17.
DUES & SUBSCRIPTIONS	3,000.		3,000.
IT EXPENSES	568.		568.
POSTAGE	11.		11.
GS OTHER EXPENSES	1,000.	1,000.	
TOTALS	<u>8,245.</u>	<u>1,000.</u>	<u>7,245.</u>

FORM 990PF, PART II - CORPORATE STOCKATTACHMENT 7

<u>DESCRIPTION</u>	<u>ENDING BOOK VALUE</u>	<u>ENDING FMV</u>
MEDIQUEST THERAPEUTICS	498,550.	16,475.
GOLDMAN SACHS A/C 52585-3	1,647,700.	2,219,694.
GOLDMAN SACHS A/C 39499-5	1,287,686.	1,303,093.
GOLDMAN SACHS A/C 39493-8	41,899.	17,710.
GOLDMAN SACHS A/C 41212-8	1,411,709.	1,504,494.
GOLDMAN SACHS A/C 39494-6	1,365,274.	1,274,231.
TOTALS	<u>6,252,818.</u>	<u>6,335,697.</u>

FORM 990PF, PART II - CORPORATE BONDS

<u>ATTACHMENT 8</u>	
<u>DESCRIPTION</u>	ENDING BOOK VALUE
GOLDMAN SACHS A/C 39482-1	1,263,063.
TOTALS	1,295,450.
	<u>1,263,063.</u>
	<u>1,295,450.</u>

FORM 990PF, PART II - OTHER INVESTMENTSATTACHMENT 9

<u>DESCRIPTION</u>	<u>ENDING BOOK VALUE</u>	<u>ENDING FMV</u>
BNP PARIBAS LNK TO BRIC+ IT	600,944.	576,720.
TECHNOLOGY SELECT INDEX 'SPDR'	109,445.	137,580.
DONALD SMITH SMALL CAP VALUE	1,600,000.	1,888,772.
ALPHA+ MANAGERS PORTFOLIO 2	1,500,000.	1,383,070.
VONTOBEL NON-US EQUITY	1,500,000.	1,097,938.
WILLIAM BLAIR NON-US EQUITY	750,000.	1,101,844.
GS EMERGING MARKETS FUND	622,296.	374,471.
GS WEST STREET PARTNERS 2007	1,000,000.	917,790.
GS WEST STREET PARTNERS II	837,166.	762,874.
THL EQUITY FUND VI - GS ACCESS	831,805.	700,653.
GS CAP PARTNERS VI PARALLEL LP	2,373,161.	2,022,161.
GS MEZZANINE PARTNERS V	851,292.	930,837.
GS WLR OPP FUND OFFSHORE	742,778.	670,129.
GS PRIVATE CONCENTRATED ENERGY	864,990.	782,111.
GS GLOBAL STRATEGIC COMM FUND	1,000,000.	977,660.
GS LIBERTY HARBOR I	0.	114,913.
LARGE CAP GROWTH MANAGERS	0.	0.
LARGE CAP VALUE MANAGERS	0.	0.
WELLINGTON SMALL CAP CORE	0.	0.
GS GRP INC LKD TO S&P 500 0%	0.	0.
ALPHA+ MANAGERS PORTFOLIO 4	0.	0.
EEMERGING MARKETS INDEX FUND	0.	0.
ISHARES MSCI EAFE INDEX FUND	0.	0.
TOTALS	<u>15,183,877.</u>	<u>14,439,523.</u>

ATTACHMENT 10FORM 990PF, PART III - OTHER INCREASES IN NET WORTH OR FUND BALANCES

<u>DESCRIPTION</u>	<u>AMOUNT</u>
OUTSTANDING CHECKS	59,710.
UNREALIZED GAIN/LOSS & RECONCILIATION ADJUSTMENT	6,155,519.
TOTAL	<u>6,215,229.</u>

ATTACHMENT 11FORM 990PF, PART III - OTHER DECREASES IN NET WORTH OR FUND BALANCES

<u>DESCRIPTION</u>	<u>AMOUNT</u>
PY OUTSTANDING CHECKS	10,000.
TOTAL	<u>10,000.</u>

VINE AND BRANCHES FOUNDATION, INC.

39-1827808

FORM 990PF, PART VIII - LIST OF OFFICERS, DIRECTORS, AND TRUSTEES

ATTACHMENT 12

TITLE AND AVERAGE HOURS PER  
WEEK DEVOTED TO POSITION

NAME AND ADDRESS

PRESIDENT/TREASURER

JOHN W. FINDLEY  
300 N CORPORATE DR, SUITE 205

VICE-PRESIDENT

BARBARA R. FINDLEY  
300 N CORPORATE DR, SUITE 205

SECRETARY

RICHARD J. BLISS  
C/O GODFREY & KAHN, S.C.  
780 NORTH WATER STREET

GRAND TOTALS

FORM 990PF, PART XV - NAME, ADDRESS AND PHONE FOR APPLICATIONS

PAT WOEHRLER V&B C/O THE LEGACY GRP  
300 N CORPORATE DR, SUITE 205  
BROOKFIELD, WI 53005  
262-754-2799

990PF, PART XV - FORM AND CONTENTS OF SUBMITTED APPLICATIONS

A PRELIMINARY APPLICATION FORM WITH A BRIEF LETTER OF INQUIRY INCLUDING A DESCRIPTION OF YOUR ORGANIZATION AND THE WORK FOR WHICH FUNDS WILL BE APPLIED MUST FIRST BE SUBMITTED. THE FORM IS AVAILABLE ON THE WEBSITE [WWW.VINEANDBRANCHESFOUNDATION.ORG](http://WWW.VINEANDBRANCHESFOUNDATION.ORG)

990PF, PART XV - SUBMISSION DEADLINES

TELEPHONE FOR CURRENT SCHEDULE OF DEADLINE DATES AS APPLICATION  
PROCESS SHOULD BE COMPLETED SIX WEEKS PRIOR TO EACH OF TWO TO THREE  
DIRECTORS MEETINGS PER YEAR.

**SCHEDULE D**  
**(Form 1041)**

Department of the Treasury  
Internal Revenue Service

# Capital Gains and Losses

► **Attach to Form 1041, Form 5227, or Form 990-T. See the instructions for Schedule D (Form 1041) (also for Form 5227 or Form 990-T, if applicable).**

OMB No 1545-0092

**2009**

Name of estate or trust **VINE AND BRANCHES FOUNDATION, INC.**  
**C/O THE LEGACY GROUP, INC.**

Employer identification number  
**39-1827808**

**Note:** Form 5227 filers need to complete **only Parts I and II**

**Part I Short-Term Capital Gains and Losses - Assets Held One Year or Less**

(a) Description of property (Example 100 shares 7% preferred of "Z" Co)	(b) Date acquired (mo., day, yr.)	(c) Date sold (mo., day, yr.)	(d) Sales price	(e) Cost or other basis (see page 4 of the instructions)	(f) Gain or (loss) for the entire year Subtract (e) from (d)
<b>1a</b>					

<b>b</b> Enter the short-term gain or (loss), if any, from Schedule D-1, line 1b	<b>1b</b>	-106,578.
<b>2</b> Short-term capital gain or (loss) from Forms 4684, 6252, 6781, and 8824	<b>2</b>	
<b>3</b> Net short-term gain or (loss) from partnerships, S corporations, and other estates or trusts	<b>3</b>	
<b>4</b> Short-term capital loss carryover. Enter the amount, if any, from line 9 of the 2008 Capital Loss Carryover Worksheet	<b>4</b>	( )
<b>5</b> <b>Net short-term gain or (loss).</b> Combine lines 1a through 4 in column (f). Enter here and on line 13, column (3) on the back	<b>5</b>	-106,578.

**Part II Long-Term Capital Gains and Losses - Assets Held More Than One Year**

(a) Description of property (Example 100 shares 7% preferred of "Z" Co)	(b) Date acquired (mo., day, yr.)	(c) Date sold (mo., day, yr.)	(d) Sales price	(e) Cost or other basis (see page 4 of the instructions)	(f) Gain or (loss) for the entire year Subtract (e) from (d)
<b>6a</b>					

<b>b</b> Enter the long-term gain or (loss), if any, from Schedule D-1, line 6b	<b>6b</b>	-2,422,541.
<b>7</b> Long-term capital gain or (loss) from Forms 2439, 4684, 6252, 6781, and 8824	<b>7</b>	
<b>8</b> Net long-term gain or (loss) from partnerships, S corporations, and other estates or trusts	<b>8</b>	
<b>9</b> Capital gain distributions	<b>9</b>	
<b>10</b> Gain from Form 4797, Part I	<b>10</b>	
<b>11</b> Long-term capital loss carryover. Enter the amount, if any, from line 14 of the 2008 Capital Loss Carryover Worksheet	<b>11</b>	( )
<b>12</b> <b>Net long-term gain or (loss).</b> Combine lines 6a through 11 in column (f). Enter here and on line 14a, column (3) on the back	<b>12</b>	-2,422,541.

For Paperwork Reduction Act Notice, see the Instructions for Form 1041.

Schedule D (Form 1041) 2009

<b>Part III Summary of Parts I and II</b>		(1) Beneficiaries' (see page 5)	(2) Estate's or trust's	(3) Total
<b>Caution: Read the instructions before completing this part.</b>				
<b>13</b>	<b>Net short-term gain or (loss)</b> . . . . .	<b>13</b>		-106,578.
<b>14</b>	<b>Net long-term gain or (loss):</b>			
<b>a</b>	Total for year . . . . .	<b>14a</b>		-2,422,541.
<b>b</b>	Unrecaptured section 1250 gain (see line 18 of the wrkst ) . . . . .	<b>14b</b>		
<b>c</b>	28% rate gain . . . . .	<b>14c</b>		
<b>15</b>	<b>Total net gain or (loss).</b> Combine lines 13 and 14a . . . . . ▶	<b>15</b>		-2,529,119.

**Note:** If line 15, column (3), is a net gain, enter the gain on Form 1041, line 4 (or Form 990-T, Part I, line 4a). If lines 14a and 15, column (2), are net gains, go to Part V, and do not complete Part IV. If line 15, column (3), is a net loss, complete Part IV and the **Capital Loss Carryover Worksheet** necessary.

<b>Part IV Capital Loss Limitation</b>	
<b>16</b>	Enter here and enter as a (loss) on Form 1041, line 4 (or Form 990-T, Part I, line 4c, if a trust), the smaller of: <b>a</b> The loss on line 15, column (3) or <b>b</b> \$3,000 . . . . .
<b>16</b>	( 3,000. )

**Note:** If the loss on line 15, column (3), is more than \$3,000, or if Form 1041, page 1, line 22 (or Form 990-T, line 34), is a loss, complete the **Capital Loss Carryover Worksheet** on page 7 of the instructions to figure your capital loss carryover.

<b>Part V Tax Computation Using Maximum Capital Gains Rates</b>	
<b>Form 1041 filers.</b> Complete this part only if both lines 14a and 15 in column (2) are gains, or an amount is entered in Part I or Part II and there is an entry on Form 1041, line 2b(2), and Form 1041, line 22, is more than zero.	
<b>Caution:</b> Skip this part and complete the worksheet on page 8 of the instructions if:	
• Either line 14b, col. (2) or line 14c, col. (2) is more than zero, or	
• Both Form 1041, line 2b(1), and Form 4952, line 4g are more than zero.	

**Form 990-T trusts.** Complete this part only if both lines 14a and 15 are gains, or qualified dividends are included in income in Part I of Form 990-T, and Form 990-T, line 34, is more than zero. Skip this part and complete the worksheet on page 8 of the instructions if either line 14b, col. (2) or line 14c, col. (2) is more than zero.

<b>17</b>	Enter taxable income from Form 1041, line 22 (or Form 990-T, line 34) . . . . .	<b>17</b>	
<b>18</b>	Enter the smaller of line 14a or 15 in column (2) but not less than zero . . . . .	<b>18</b>	
<b>19</b>	Enter the estate's or trust's qualified dividends from Form 1041, line 2b(2) (or enter the qualified dividends included in income in Part I of Form 990-T) . . . . .	<b>19</b>	
<b>20</b>	Add lines 18 and 19 . . . . .	<b>20</b>	
<b>21</b>	If the estate or trust is filing Form 4952, enter the amount from line 4g; otherwise, enter -0- . . . ▶	<b>21</b>	
<b>22</b>	Subtract line 21 from line 20. If zero or less, enter -0- . . . . .	<b>22</b>	
<b>23</b>	Subtract line 22 from line 17. If zero or less, enter -0- . . . . .	<b>23</b>	
<b>24</b>	Enter the smaller of the amount on line 17 or \$2,300 . . . . .	<b>24</b>	
<b>25</b>	Is the amount on line 23 equal to or more than the amount on line 24? <input type="checkbox"/> <b>Yes.</b> Skip lines 25 and 26, go to line 27 and check the "No" box. <input type="checkbox"/> <b>No.</b> Enter the amount from line 23 . . . . .	<b>25</b>	
<b>26</b>	Subtract line 25 from line 24 . . . . .	<b>26</b>	
<b>27</b>	Are the amounts on lines 22 and 26 the same? <input type="checkbox"/> <b>Yes.</b> Skip lines 27 thru 30, go to line 31 <input type="checkbox"/> <b>No.</b> Enter the smaller of line 17 or line 22 . . . . .	<b>27</b>	
<b>28</b>	Enter the amount from line 26 (If line 26 is blank, enter -0-) . . . . .	<b>28</b>	
<b>29</b>	Subtract line 28 from line 27 . . . . .	<b>29</b>	
<b>30</b>	Multiply line 29 by 15% (.15) . . . . .	<b>30</b>	
<b>31</b>	Figure the tax on the amount on line 23. Use the 2009 Tax Rate Schedule for Estates and Trusts (see the Schedule G instructions in the instructions for Form 1041) . . . . .	<b>31</b>	
<b>32</b>	Add lines 30 and 31 . . . . .	<b>32</b>	
<b>33</b>	Figure the tax on the amount on line 17. Use the 2009 Tax Rate Schedule for Estates and Trusts (see the Schedule G instructions in the instructions for Form 1041) . . . . .	<b>33</b>	
<b>34</b>	<b>Tax on all taxable income.</b> Enter the smaller of line 32 or line 33 here and on Form 1041, Schedule G, line 1a (or Form 990-T, line 36) . . . . .	<b>34</b>	

Schedule D (Form 1041) 2009

Department of the Treasury  
Internal Revenue Service

► See instructions for Schedule D (Form 1041).

OMB No 1545-0092

2009

VINE AND BRANCHES FOUNDATION, INC.

Employer identification number

39-1827808

[illegible]

<b>1b Total.</b> Combine the amounts in column (f). Enter here and on Schedule D, line 1b	-106,578.
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**For Paperwork Reduction Act Notice, see the Instructions for Form 1041.**

Schedule D-1 (Form 1041) 2009

Name of estate or trust as shown on Form 1041 Do not enter name and employer identification number if shown on the other side

Employer identification number

**Part II Long-Term Capital Gains and Losses - Assets Held More Than One Year**

(a) Description of property (Example 100 sh 7% preferred of "Z" Co)	(b) Date acquired (mo., day, yr.)	(c) Date sold (mo., day, yr.)	(d) Sales price (see page 4 of the instructions)	(e) Cost or other basis (see page 4 of the instructions)	(f) Gain or (loss) Subtract (e) from (d)
<b>6a</b> SEE STATEMENT 18 - GOLDMAN SACHS LONG TERM	VARIOUS	VARIOUS	1,548,193.	2,152,414.	-604,221.
ALPHA+ MANAGERS: PORTFOLIO 2 LONG TERM	VARIOUS	VARIOUS			-64,711.
ALPHA+ MANAGERS: PORTFOLIO 4 LONG TERM	VARIOUS	VARIOUS			-532,378.
GS CAPITAL PARTNERS VI PARALLEL LP LONG TERM	VARIOUS	VARIOUS			89,454.
GS CAPITAL PARTNERS VI PARALLEL AIV LP LONG TERM	VARIOUS	VARIOUS			-25.
14243.66 SHARES OF LARGE CAP GROWTH MANAGERS	06/29/2006	02/27/2009	619,993.	1,021,712.	-401,719.
7994.4 SHARES OF LARGE CAP VALUE MANAGERS	06/29/2006	02/27/2009	614,776.	1,146,117.	-531,341.
9377.33 SHARES OF WELLINGTON: SMALL CAP COR	06/29/2006	04/30/2009	548,549.	911,834.	-363,285.
18478.4017 SHARES OF GS LIBERTY HARBOR I	06/05/2007	06/30/2009	1,779,094.	1,848,323.	-69,229.
1923.08 SHARES OF GS WEST STREET PARTNERS II	08/31/2006	03/31/2009	162,834.	200,000.	-37,166.
SHARES OF GS PRIVATE CONCENTRATED ENERGY FUND	VARIOUS	VARIOUS	152,766.	87,359.	65,407.
SHARES OF GS MEZZANINE PARTNERS V LP	VARIOUS	VARIOUS	198,708.	176,504.	22,204.
SHARES OF GS WLR OPPORTUNITIES FUND	VARIOUS	VARIOUS	14,055.	13,782.	273.
SALE OF INVESTMENT IN ALPHA PLUS MANAGERS PORTF	VARIOUS	VARIOUS	714,731.	707,336.	7,395.
SEE FORM 6781 - GS CAPITAL PARTNERS VI PARALLEL 1256	VARIOUS	VARIOUS			-3,199.
THL EQUITY FUND VI	VARIOUS	VARIOUS	603.	603.	
<b>6b Total.</b> Combine the amounts in column (f) Enter here and on Schedule D, line 6b					-2,422,541.

Schedule D-1 (Form 1041) 2009

**Gains and Losses From Section 1256  
Contracts and Straddles**

▶ Attach to your tax return.

**2009**Attachment  
Sequence No **82**

Name(s) shown on tax return

VINE AND BRANCHES FOUNDATION, INC.

Identifying number

39-1827808

Check all applicable boxes (see instructions)

**A** ☐ Mixed straddle election**C** ☐ Mixed straddle account election**B** ☐ Straddle-by-straddle identification election**D** ☐ Net section 1256 contracts loss election**Part I Section 1256 Contracts Marked to Market**

(a) Identification of account	(b) (Loss)	(c) Gain
1 GAIN FROM GS CAPITAL PARTNERS VI PARALLEL, L.P.		(5,330)
2 Add the amounts on line 1 in columns (b) and (c)	2 (0.00)	(5,330.00)
3 Net gain or (loss) Combine line 2, columns (b) and (c)	3	(5,330.00)
4 Form 1099-B adjustments See instructions and attach schedule	4	
5 Combine lines 3 and 4	5	(5,330.00)
<b>Note:</b> If line 5 shows a net gain, skip line 6 and enter the gain on line 7. Partnerships and S corporations, see instructions.		
6 If you have a net section 1256 contracts loss and checked box D above, enter the amount of loss to be carried back. Enter the loss as a positive number.	6	
7 Combine lines 5 and 6	7	(5,330.00)
8 Short-term capital gain or (loss). Multiply line 7 by 40% (40). Enter here and include on the appropriate line of Schedule D (see instructions).	8	(2,132.00)
9 Long-term capital gain or (loss). Multiply line 7 by 60% (60). Enter here and include on the appropriate line of Schedule D (see instructions).	9	(3,198.00)

**Part II Gains and Losses From Straddles. Attach a separate schedule listing each straddle and its components****Section A—Losses From Straddles**

(a) Description of property	(b) Date entered into or acquired	(c) Date closed out or sold	(d) Gross sales price	(e) Cost or other basis plus expense of sale	(f) Loss. If column (e) is more than (d), enter difference. Otherwise, enter -0-	(g) Unrecognized gain on offsetting positions	(h) Recognized loss. If column (f) is more than (g), enter difference. Otherwise, enter -0-
10							
11a Enter the short-term portion of losses from line 10, column (h), here and include on the appropriate line of Schedule D (see instructions).							11a ( )
b Enter the long-term portion of losses from line 10, column (h), here and include on the appropriate line of Schedule D (see instructions).							11b ( )

**Section B—Gains From Straddles**

(a) Description of property	(b) Date entered into or acquired	(c) Date closed out or sold	(d) Gross sales price	(e) Cost or other basis plus expense of sale	(f) Gain. If column (d) is more than (e), enter difference. Otherwise, enter -0-
12					
13a Enter the short-term portion of gains from line 12, column (f), here and include on the appropriate line of Schedule D (see instructions).					13a
b Enter the long-term portion of gains from line 12, column (f), here and include on the appropriate line of Schedule D (see instructions).					13b

**Part III Unrecognized Gains From Positions Held on Last Day of Tax Year. Memo Entry Only (see instructions)**

(a) Description of property	(b) Date acquired	(c) Fair market value on last business day of tax year	(d) Cost or other basis as adjusted	(e) Unrecognized gain. If column (c) is more than (d), enter difference. Otherwise, enter -0-
14				

## Contributions Paid Between 1-1-09 and 12-31-09

### Vine and Branches Foundation, Inc.

39-1827808

Organization Name/Address	Date Paid	Amount	Purpose	Title	Exempt	Relation
Acts 1.8 Ministry Incorporated 2121 S. Oneida St Green Bay, WI 54304	09/22/2009	\$20,000.00	Religious	General operations	Yes	No
America's Family Coaches 2540 106th Street, Suite 101 Des Moines, IA 50322	12/21/2009	\$25,000.00	Religious	Pastors Couples Conference	Yes	No
Camp Manito-wish YMCA, Inc. P O Box 246 Boulder Junction, WI 54512	12/21/2009	\$1,000.00	Charitable	Borealis Paddling Endowment	Yes	No
Chicago Hope Academy 2189 W. Bowler Street Chicago, IL 60612	12/21/2009	\$25,000.00	Educational	Spiritual Life Development	Yes	No
Christian Hospitality Network, Inc. P O Box 12303 Knoxville, TN 37912	07/28/2009	\$5,000.00	Charitable	Undesignated	Yes	No
Christian Stewardship Foundation/NCF 150 N. Sunnyslope Road, Suite 360 Brookfield, WI 53005	01/06/2009	\$200,000.00	Charitable	Vine & Branches Fund- CSF	Yes	No
Christian Stewardship Foundation/NCF 150 N Sunnyslope Road, Suite 360 Brookfield, WI 53005	05/27/2009	\$25,000.00	Charitable	Vine & Branches Fund- CSF	Yes	No
Christian Stewardship Foundation/NCF 150 N. Sunnyslope Road, Suite 360 Brookfield, WI 53005	10/14/2009	\$360,000.00	Charitable	Vine & Branches Fund- CSF	Yes	No
City on a Hill, Inc. 2224 W. Kilbourn Avenue Milwaukee, WI 53233-1614	06/09/2009	\$50,000.00	Religious	General operations for evangelism and discipleship of youth	Yes	No
Feed the Children, Inc 333 N. Meridian Avenue Oklahoma City, OK 73107	07/28/2009	\$3,000.00	Charitable	General operating	Yes	No

**Vine and Branches Foundation, Inc.****39-1827808**

Organization Name/Address	Date Paid	Amount	Purpose	Title	Exempt	Relation
Fellowship of Christian Athletes Eastern Wisconsin Office 135 West Broadway Waukesha, WI 53186	12/21/2009	\$13,000.00	Charitable	Couples Getaway and Legacy Weekend marriage retreats	Yes	No
Florida Family Policy Council 4853 S. Orange Ave., Suite C Orlando, FL 32806	09/22/2009	\$100,000.00	Charitable	Strong Marriages Florida	Yes	No
Georgia Family Education and Research Council 5550 Triangle Parkway, Suite 160 Norcross, GA 30092	06/09/2009	\$50,000.00	Charitable	General Operations	Yes	No
Great Mission Ministries, Ltd. 823 E. Brandybrook Road Wales, WI 53183	06/09/2009	\$25,000.00	Religious	Campus Way	Yes	No
Headwaters Christian Youth, Inc. P.O. Box 662 Rhineland, WI 54501-0662	09/22/2009	\$10,000.00	Religious	General operations	Yes	No
Heritage Christian Schools, Inc. 1300 S. 109th Street Milwaukee, WI 53214	12/21/2009	\$2,500.00	Educational	Undesignated	Yes	No
Hideaway Foundation 1800 S. Washington St., Suite 215 Amarillo, TX 79102	12/21/2009	\$10,000.00	Charitable	Pastoral couple marriage intensives	Yes	No
Institute for Creation Research P.O. Box 59029 Dallas, TX 75229	12/21/2009	\$5,000.00	Educational	General program activities	Yes	No
Intervarsity Christian Fellowship of the United States of America WI/UP of MI Division 516 E. Wisconsin Avenue, Suite F Appleton, WI 54911	09/23/2009	\$6,500.00	Religious	Pastoral Care for Wisc & Upper Michigan campus pastors	Yes	No
Leadership Network 2626 Cole Ave. Suite 900 Dallas, TX 75204	06/09/2009	\$200,000.00	Religious	Next Generation Pastors and Generous Churches	Yes	No

**Vine and Branches Foundation, Inc.****39-1827808**

Organization Name/Address	Date Paid	Amount	Purpose	Title	Exempt	Relation
Lighthouse Youth Center 5641 N. 68th St. Milwaukee, WI 53218	09/22/2009	\$35,000.00	Religious	After school mentoring program	Yes	No
Live the Life Ministries, Inc. 2252 Killearn Center Blvd. Suite 100 Tallahassee, FL 32309	12/21/2009	\$20,000.00	Charitable	General Operations	Yes	No
Marriage and Family Foundation, Inc. 5200 Buffington Rd. Atlanta, GA 30349	01/12/2009	\$50,000.00	Charitable	General operations and National Center on African-American Marriages and Families Summit	Yes	No
Marriage and Family Foundation, Inc. 5200 Buffington Rd. Atlanta, GA 30349	04/08/2009	\$50,000.00	Charitable	General operations and National Center on African-American Marriages and Families Summit	Yes	No
Marriage and Family Foundation, Inc. 5200 Buffington Rd. Atlanta, GA 30349	12/28/2009	\$100,000.00	Charitable	Community Mobilization Demonstration Initiative	Yes	No
Minority Christian Coaches Association 6833 West Fond du Lac Ave., Suite 204 Milwaukee, WI 53218	06/09/2009	\$50,000.00	Religious	Christian Programs for Inner-City Children	Yes	No
Mission Media, Inc. 5269 Emerald Boise, ID 83706	12/21/2009	\$1,000.00	Religious	Grace Gift Parable Project	Yes	No
National Network of Youth Ministries 12335 World Trade Drive Suite 17 San Diego, CA 92128-3791	06/09/2009	\$50,000.00	Religious	Operation Turn the Tide- expansion from Great Lakes base	Yes	No
National Network of Youth Ministries 12335 World Trade Drive Suite 17 San Diego, CA 92128-3791	07/28/2009	\$2,000.00	Charitable	Thirst conference	Yes	No
Nativity Jesuit Middle School 1515 S. 29th Street Milwaukee, WI 53215-1912	12/21/2009	\$5,000.00	Educational	Marquette University High School scholarship fund for Nativity students	Yes	No

**Vine and Branches Foundation, Inc.****39-1827808**

<b>Organization Name/Address</b>	<b>Date Paid</b>	<b>Amount</b>	<b>Purpose</b>	<b>Title</b>	<b>Exempt</b>	<b>Relation</b>
Neighborhood House of Milwaukee, Inc. 2819 W. Richardson Place Milwaukee, WI 53208-3546	12/21/2009	\$10,000.00	Charitable	General operations	Yes	No
New Horizons of Southwest Florida, Inc. P.O. Box 111833 Naples, FL 34108	12/21/2009	\$20,000.00	Charitable	Super Teen Program expansion	Yes	No
New Life Community Church, Assemblies of God, Inc. N9590 County Road ES Mukwonago, WI 53149	12/21/2009	\$3,500.00	Religious	Professional development, community outreach program, building repairs	Yes	No
Opportunity International, Inc. 2122 York Road Suite 150 Oak Brook, IL 60523	12/21/2009	\$1,000.00	Charitable	General fund	Yes	No
Pastoral Leadership Institute 12300 Ford Road Suite #450 Dallas, TX 75234-8108	09/22/2009	\$75,000.00	Religious	Grace Place Retreats for PLI participating pastoral couples	Yes	No
Providence High School 1215 N. St. Mary's Street San Antonio, TX 78215	12/21/2009	\$1,500.00	Educational	Unrestricted	Yes	No
Saint Anthony on the Lake Catholic Church W280 N2101 Hwy SS Pewaukee, WI 53072	12/21/2009	\$2,500.00	Religious	Anonymous gift for Marriage Enrichment team	Yes	No
Saint Joseph Catholic Church 600 South Jupiter Rd. Richardson, TX 75081	12/21/2009	\$2,500.00	Religious	Pastoral Reflections	Yes	No
St. Agnes Hospital Foundation, Inc. 430 E. Division St. Fond Du Lac, WI 54935	12/21/2009	\$1,500.00	Charitable	Hospice Hope operations	Yes	No
Stronger Families P.O. Box 40584 Bellevue, WA 98015-4584	06/09/2009	\$75,000.00	Charitable	The A.R.T. of Marriage	Yes	No

**Vine and Branches Foundation, Inc.****39-1827808**

<b>Organization Name/Address</b>	<b>Date Paid</b>	<b>Amount</b>	<b>Purpose</b>	<b>Title</b>	<b>Exempt</b>	<b>Relation</b>
Teen Challenge International, Inc.- Milwaukee WI  P.O. Box 250771 Milwaukee, WI 53225	12/21/2009	\$2,400.00	Charitable	Undesignated	Yes	No
Telling His Story, Inc. 1445 North Boonville Avenue Springfield, MO 65802	05/28/2009	\$9,894.00	Religious	National Youth Alive Campus Missionaries	Yes	No
The Clearing 4126 Southwest Freeway Suite 1210 Houston, TX 77027	11/02/2009	\$30,000.00	Charitable	Couples Experience Weekend Workshops	Yes	No
The Foundation for a Great Marriage, Inc. 1270 Main Street, Suite 254 Green Bay, WI 54302	06/09/2009	\$150,000.00	Charitable	General Operations and support for Community Relations Director	Yes	No
The Refuge at River Falls 6600 White Bluff Trail Amarillo, TX 79118	12/21/2009	\$10,000.00	Charitable	Pastoral couple marriage intensives	Yes	No
The YMCA of the Triangle Area c/o Camp Seafarer/Seagull 2744 Seafarer Road Arapahoe, NC 28510	12/21/2009	\$500.00	Charitable	Camp Seafarer/Seagull annual campaign	Yes	No
Wisconsin and Northern Michigan Council of the Assemblies of God P O Box 309 1340 Berlin Street Waupaca, WI 54981	09/22/2009	\$15,000.00	Religious	Youth Alive: The Great Mission	Yes	No
Wisconsin Family Council, Inc. P.O. Box 2075 Madison, WI 53701-2075	09/22/2009	\$60,000.00	Educational	Strengthening Marriage One Community at a Time	Yes	No
Word of Hope Ministries, Inc. 2677 N. 40th Street Milwaukee, WI 53210	12/21/2009	\$2,500.00	Charitable	Undesignated	Yes	No
Youth for Christ USA Inc. P.O. Box 081041 Racine, WI 53408-1041	06/09/2009	\$40,000.00	Religious	3Story Intern program	Yes	No

**Vine and Branches Foundation, Inc.****39-1827808**

<b>Organization Name/Address</b>	<b>Date Paid</b>	<b>Amount</b>	<b>Purpose</b>	<b>Title</b>	<b>Exempt</b>	<b>Relation</b>
Youth for Christ USA Inc. 303 East 9th Street Fond du Lac, WI 54935	09/22/2009	\$24,000.00	Religious	3-Story Evangelism	Yes	No

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**\$2,035,794.00**

***Contributions approved for payment in future years, as of 12/31/09***

**Vine and Branches Foundation, Inc.**

**39-1827808**

<b>Organization</b>	<b>Amount to be Paid</b>	<b>Purpose</b>	<b>Exempt</b>	<b>Relation</b>
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<b>Marriage and Family Foundation, Inc.</b> Atlanta, GA				
--	--	--	--	--

	Charitable	Yes	No
--	------------	-----	----

	<u>\$100,000.00</u>		
--	---------------------	--	--

<b>Total carried forward</b>			
------------------------------	--	--	--

	<u><u>\$100,000.00</u></u>		
--	----------------------------	--	--

# Application for Extension of Time To File an Exempt Organization Return

OMB No. 1545-1709

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

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

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

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

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

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

<b>Type or print</b>  File by the due date for filing your return. See instructions.	Name of Exempt Organization	Employer identification number
	VINE AND BRANCHES FOUNDATION, INC. C/O THE LEGACY GROUP, INC.	39-1827808
	Number, street, and room or suite no. If a P O box, see instructions	
	125 N. EXECUTIVE DRIVE SUITE 206	
	City, town or post office, state, and ZIP code. For a foreign address, see instructions	
	BROOKFIELD, WI 53005	

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

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

- The books are in the care of ► **THE LEGACY GROUP, INC**

Telephone No. ► **262 754-2799**

FAX No. ►

- If the organization does not have an office or place of business in the United States, check this box ☐
- If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) . . . . . If this is for the whole group, check this box ☐ . If it is for part of the group, check this box ☐ and attach a list with the names and EINs of all members the extension will cover.

- 1 I request an automatic 3-month (6 months for a corporation required to file Form 990-T) extension of time until 8/16, 2010, to file the exempt organization return for the organization named above. The extension is for the organization's return for:
- ☒ calendar year 2009, or
  - ☐ tax year beginning \_\_\_\_\_, 20\_\_\_\_, and ending \_\_\_\_\_, 20\_\_\_\_\_.

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

<b>3a</b> 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>3a</b>	\$	25,000
<b>b</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.	<b>3b</b>	\$	102,018
<b>c Balance Due.</b> Subtract line 3b from line 3a. Include your payment with this form, or, if required, deposit with FTD coupon or, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions.	<b>3c</b>	\$	NONE

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

## Application for Extension of Time To File an Exempt Organization Return

OMB No. 1545-1709

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

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

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

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

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

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

<b>Type or print</b> <small>File by the due date for filing your return. See instructions</small>	Name of Exempt Organization	Employer identification number
	VINE AND BRANCHES FOUNDATION, INC. C/O THE LEGACY GROUP, INC.	39-1827808
	Number, street, and room or suite no. If a P.O. box, see instructions.	
	300 N. CORPORATE DRIVE, SUITE 205	
	City, town or post office, state, and ZIP code. For a foreign address, see instructions.	
	BROOKFIELD, WI 53045	

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

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

- The books are in the care of ► THE LEGACY GROUP, INC.

Telephone No. ► 262 754-2799

FAX No. ► \_\_\_\_\_

- If the organization does not have an office or place of business in the United States, check this box ☐
- If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) \_\_\_\_\_. If this is for the whole group, check this box ☐. If it is for part of the group, check this box ☐ and attach a list with the names and EINs of all members the extension will cover.

- 1 I request an automatic 3-month (6 months for a corporation required to file Form 990-T) extension of time until \_\_\_\_\_, 20\_\_\_\_, to file the exempt organization return for the organization named above. The extension is for the organization's return for:
- ☐ calendar year 20\_\_\_\_ or
  - ☐ tax year beginning \_\_\_\_\_, 20\_\_\_\_, and ending \_\_\_\_\_, 20\_\_\_\_.

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

<b>3a</b> 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>3a</b>	\$
<b>b</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.	<b>3b</b>	\$
<b>c Balance Due.</b> Subtract line 3b from line 3a. Include your payment with this form, or, if required, deposit with FTD coupon or, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions.	<b>3c</b>	\$

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

- 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).

Type or print  File by the extended due date for filing the return. See instructions.	Name of Exempt Organization <b>VINE AND BRANCHES FOUNDATION, INC. C/O THE LEGACY GROUP</b>	Employer identification number <b>39-1827808</b>
	Number, street, and room or suite no. If a P.O. box, see instructions. <b>300 N. CORPORATE DRIVE, SUITE 205</b>	For IRS use only
	City, town or post office, state, and ZIP code. For a foreign address, see instructions. <b>BROOKFIELD, WI 53045</b>	

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

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

**STOP! Do not complete Part II if you were not already granted an automatic 3-month extension on a previously filed Form 8868.**

- The books are in the care of
- THE LEGACY GROUP, INC.**

Telephone No. **262 754-2799**

FAX No. \_\_\_\_\_

- If the organization does not have an office or place of business in the United States, check this box
- ☐

• If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) \_\_\_\_\_. If this is for the whole group, check this box ☐. If it is for part of the group, check this box ☐ and attach a list with the names and EINs of all members the extension is for.

- 4 I request an additional 3-month extension of time until **11/15**, 20**10**.
- 5 For calendar year **2009**, or other tax year beginning \_\_\_\_\_, 20\_\_\_\_, and ending \_\_\_\_\_, 20\_\_\_\_.
- 6 If this tax year is for less than 12 months, check reason: ☐ Initial return ☐ Final return ☐ Change in accounting period
- 7 State in detail why you need the extension **ADDITIONAL TIME IS REQUIRED TO GATHER SUFFICIENT EVIDENCE TO COMPLETE THE RETURN.**

<b>8a</b> 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>8a</b>	\$	<b>507</b>
<b>b</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.	<b>8b</b>	\$	<b>102,018</b>
<b>c Balance Due.</b> 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.	<b>8c</b>	\$	<b>NONE</b>

**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 am authorized to prepare this form

Signature *Steven A. Steyer* Title *CPA* Date *8/12/2010*