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

Department of the Treasury  
Internal Revenue Service

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

**2009**

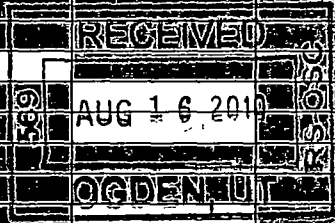
For calendar year **2009**, or tax year beginning \_\_\_\_\_, **2009**, and ending \_\_\_\_\_, **20**

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

<b>Use the IRS label. Otherwise, print or type. See Specific Instructions.</b>	Name of foundation <b>Robert E. Howley Memorial Endowment Trust</b>	A Employer identification number <b>39- 2033640</b>
	Number and street (or P O box number if mail is not delivered to street address) Room/suite <b>c/o Cynthia Howley, W6472 Birch Tree Rd.</b>	B Telephone number (see page 10 of the instructions) <b>(920) 892-22</b>
	City or town, state, and ZIP code <b>Plymouth, WI 53073</b>	C If exemption application is pending, check here <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		D 1. Foreign organizations, check here <input type="checkbox"/> 2. Foreign organizations meeting the 85% test, check here and attach computation <input type="checkbox"/>
I Fair market value of all assets at end of year (from Part II, col. (c), line 16) ▶ \$ <b>25,224</b>	J Accounting method <input checked="" type="checkbox"/> Cash <input type="checkbox"/> Accrual <input type="checkbox"/> Other (specify) _____	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"/>

<b>Part I. Analysis of Revenue and Expenses</b> (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)
<b>Revenue</b>	1 Contributions, gifts, grants, etc., received (attach schedule)	426			
	2 Check <input checked="" type="checkbox"/> if the foundation is not required to attach Sch. B				
	3 Interest on savings and temporary cash investments	883	883		
	4 Dividends and interest from securities	27	27		
	5a Gross rents				
	b Net rental income or (loss)				
	6a Net gain or (loss) from sale of assets not on line 10				
	b Gross sales price for all assets on line 6a				
	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)					
12 <b>Total.</b> Add lines 1 through 11	1,336	910			
<b>Operating and Administrative Expenses</b>	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)				
	c Other professional fees (attach schedule)				
	17 Interest				
	18 Taxes (attach schedule) (see page 14 of the instructions)	43	43		43
	19 Depreciation (attach schedule) and depletion				
	20 Occupancy				
	21 Travel, conferences, and meetings				
	22 Printing and publications				
	23 Other expenses (attach schedule)	100	100		100
	24 <b>Total operating and administrative expenses.</b> Add lines 13 through 23	143	143		143
	25 Contributions, gifts, grants paid	3,750			3,750
26 <b>Total expenses and disbursements.</b> Add lines 24 and 25	3,893	143		3,893	
27 Subtract line 26 from line 12:					
a <b>Excess of revenue over expenses and disbursements</b>	(2,557)				
b <b>Net investment income</b> (if negative, enter -0-)		767			
c <b>Adjusted net income</b> (if negative, enter -0-)					

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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	25,079	22,495	22,495
	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			
	10a	Investments—U.S. and state government obligations (attach schedule)			
	b	Investments—corporate stock (attach schedule)			
	c	Investments—corporate bonds (attach schedule)			
	11	Investments—land, buildings, and equipment: basis			
	Less: accumulated depreciation (attach schedule)				
12	Investments—mortgage loans				
13	Investments—other (attach schedule)	3,481	3,508	2,729	
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)	28,560	26,003	25,224	
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)	0	0	
Net Assets or Fund Balances	Foundations that follow SFAS 117, check here and complete lines 24 through 26 and lines 30 and 31. <input checked="" type="checkbox"/>				
	24	Unrestricted	28,560	26,003	
	25	Temporarily restricted			
	26	Permanently restricted			
	Foundations that do not follow SFAS 117, check here and complete lines 27 through 31. <input 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				
30	<b>Total net assets or fund balances</b> (see page 17 of the instructions)	28,560	26,003		
31	<b>Total liabilities and net assets/fund balances</b> (see page 17 of the instructions)	28,560	26,003		

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 28,560
2	Enter amount from Part I, line 27a	2 (2,557)
3	Other increases not included in line 2 (itemize)	3 0
4	Add lines 1, 2, and 3	4 26,003
5	Decreases not included in line 2 (itemize)	5 0
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 26,003

**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.)
1a				
b				
c				
d				
e				
(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)	
a				
b				
c				
d				
e				
Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69				(i) Gains (Col. (h) gain minus col. (k), but not less than -0-) or Losses (from col. (h))
(j) F.M.V. as of 12/31/69	(k) Adjusted basis as of 12/31/69	(l) Excess of col. (i) over col. (j), if any		
a				
b				
c				
d				
e				
<b>2</b>	Capital gain net income or (net capital loss)	{ If gain, also enter in Part I, line 7 If (loss), enter -0- in Part I, line 7 }		<b>2</b>
<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			<b>3</b>

**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	1,020	27,399	.03723
2007	384	27,130	.01415
2006	1,280	27,034	.04735
2005	173	26,052	.00664
2004	6,011	21,950	.27385

<b>2</b>	Total of line 1, column (d)	<b>2</b>	.37922
<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	<b>3</b>	.07584
<b>4</b>	Enter the net value of noncharitable-use assets for 2009 from Part X, line 5	<b>4</b>	25,508
<b>5</b>	Multiply line 4 by line 3	<b>5</b>	1,935
<b>6</b>	Enter 1% of net investment income (1% of Part I, line 27b)	<b>6</b>	8
<b>7</b>	Add lines 5 and 6	<b>7</b>	1,943
<b>8</b>	Enter qualifying distributions from Part XII, line 4	<b>8</b>	3,893

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)

Table with 11 rows for excise tax calculations. Includes sub-sections 6a-6d for credits and payments. Total amount owed is 0, and amount overpaid is 14.

Part VII-A Statements Regarding Activities

Table with 10 rows for activity statements. Includes questions about political activities, unrelated business income, and state registration. Most 'Yes' boxes are checked.

**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		✓
12	Did the foundation acquire a direct or indirect interest in any applicable insurance contract before August 17, 2008?	12		✓
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application? Website address ▶	13	✓	
14	The books are in care of ▶ <u>Cynthia Howley</u> Telephone no ▶ <u>920-892-2236</u> Located at ▶ <u>W 6472 Birch Tree Rd., Plymouth, WI</u> ZIP+4 ▶ <u>53073-3005</u>			
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041—Check here. and enter the amount of tax-exempt interest received or accrued during the year ▶ <u>15</u>			<input type="checkbox"/>

**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
<b>1a</b>	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>b</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	
<b>c</b>	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	✓
<b>2</b>	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)):		
<b>a</b>	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 ▶ 20____, 20____, 20____, 20____		
<b>b</b>	Are there any years listed in 2a for which the foundation is <b>not</b> 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	
<b>c</b>	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here. ▶ 20____, 20____, 20____, 20____		
<b>3a</b>	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
<b>b</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	
<b>4a</b>	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a	✓
<b>b</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	✓

**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  **5b**
- 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 **6b**
- 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 **7b**
- b** If yes, did the foundation receive any proceeds or have any net income attributable to the transaction?  Yes  No

<b>5b</b>		<input checked="" type="checkbox"/>
<b>6b</b>		<input checked="" type="checkbox"/>
<b>7b</b>		<input type="checkbox"/>

**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
See Schedule 1 attached				

**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

**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		
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-----		
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<b>Total</b> 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.	Expenses
<b>1</b> None	
-----	
-----	
<b>2</b>	
-----	
-----	
<b>3</b>	
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-----	
<b>4</b>	
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**Part IX-B** Summary of Program-Related Investments (see page 24 of the instructions)

Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2	Amount
<b>1</b> None	
-----	
-----	
<b>2</b>	
-----	
-----	
All other program-related investments. See page 24 of the instructions	
<b>3</b>	
-----	
-----	
<b>Total.</b> Add lines 1 through 3 . . . . . ▶	

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

<b>1</b>	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes:		
<b>a</b>	Average monthly fair market value of securities	<b>1a</b>	2,468
<b>b</b>	Average of monthly cash balances	<b>1b</b>	23,428
<b>c</b>	Fair market value of all other assets (see page 24 of the instructions)	<b>1c</b>	
<b>d</b>	<b>Total</b> (add lines 1a, b, and c)	<b>1d</b>	25,896
<b>e</b>	Reduction claimed for blockage or other factors reported on lines 1a and 1c (attach detailed explanation)	<b>1e</b>	0
<b>2</b>	Acquisition indebtedness applicable to line 1 assets	<b>2</b>	0
<b>3</b>	Subtract line 2 from line 1d	<b>3</b>	25,896
<b>4</b>	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see page 25 of the instructions)	<b>4</b>	388
<b>5</b>	<b>Net value of noncharitable-use assets.</b> Subtract line 4 from line 3. Enter here and on Part V, line 4	<b>5</b>	25,508
<b>6</b>	<b>Minimum investment return.</b> Enter 5% of line 5	<b>6</b>	1,279

**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.)

<b>1</b>	Minimum investment return from Part X, line 6	<b>1</b>	1,279
<b>2a</b>	Tax on investment income for 2009 from Part VI, line 5	<b>2a</b>	8
<b>b</b>	Income tax for 2009. (This does not include the tax from Part VI.)	<b>2b</b>	0
<b>c</b>	Add lines 2a and 2b	<b>2c</b>	8
<b>3</b>	Distributable amount before adjustments. Subtract line 2c from line 1	<b>3</b>	1,271
<b>4</b>	Recoveries of amounts treated as qualifying distributions	<b>4</b>	0
<b>5</b>	Add lines 3 and 4	<b>5</b>	1,271
<b>6</b>	Deduction from distributable amount (see page 25 of the instructions)	<b>6</b>	0
<b>7</b>	<b>Distributable amount</b> as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1	<b>7</b>	1,271

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

<b>1</b>	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:		
<b>a</b>	Expenses, contributions, gifts, etc.—total from Part I, column (d), line 26	<b>1a</b>	3,893
<b>b</b>	Program-related investments—total from Part IX-B	<b>1b</b>	0
<b>2</b>	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes	<b>2</b>	0
<b>3</b>	Amounts set aside for specific charitable projects that satisfy the:		
<b>a</b>	Suitability test (prior IRS approval required)	<b>3a</b>	0
<b>b</b>	Cash distribution test (attach the required schedule)	<b>3b</b>	0
<b>4</b>	<b>Qualifying distributions.</b> Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4	<b>4</b>	3,893
<b>5</b>	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)	<b>5</b>	8
<b>6</b>	<b>Adjusted qualifying distributions.</b> Subtract line 5 from line 4	<b>6</b>	3,885

**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
<b>1</b> Distributable amount for 2009 from Part XI, line 7				1,271
<b>2</b> Undistributed income, if any, as of the end of 2009:				
<b>a</b> Enter amount for 2008 only			0	
<b>b</b> Total for prior years. 20____, 20____, 20____		0		
<b>3</b> Excess distributions carryover, if any, to 2009:				
<b>a</b> From 2004	4,917			
<b>b</b> From 2005				
<b>c</b> From 2006				
<b>d</b> From 2007				
<b>e</b> From 2008				
<b>f</b> Total of lines 3a through e	4,917			
<b>4</b> Qualifying distributions for 2009 from Part XII, line 4: ▶ \$ 3,893				
<b>a</b> Applied to 2008, but not more than line 2a			0	
<b>b</b> Applied to undistributed income of prior years (Election required—see page 26 of the instructions)		0		
<b>c</b> Treated as distributions out of corpus (Election required—see page 26 of the instructions)	0			
<b>d</b> Applied to 2009 distributable amount				0
<b>e</b> Remaining amount distributed out of corpus	3,893			
<b>5</b> Excess distributions carryover applied to 2009 (If an amount appears in column (d), the same amount must be shown in column (a))	1,271			1,271
<b>6</b> Enter the net total of each column as indicated below:				
<b>a</b> Corpus. Add lines 3f, 4c, and 4e. Subtract line 5	7,539			
<b>b</b> Prior years' undistributed income. Subtract line 4b from line 2b		0		
<b>c</b> 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	
<b>d</b> Subtract line 6c from line 6b. Taxable amount—see page 27 of the instructions			0	
<b>e</b> Undistributed income for 2008. Subtract line 4a from line 2a. Taxable amount—see page 27 of the instructions				0
<b>f</b> Undistributed income for 2009. Subtract lines 4d and 5 from line 1. This amount must be distributed in 2010				0
<b>7</b> 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)	0			
<b>8</b> Excess distributions carryover from 2004 not applied on line 5 or line 7 (see page 27 of the instructions)	3,646			
<b>9</b> Excess distributions carryover to 2010. Subtract lines 7 and 8 from line 6a	3,893			
<b>10</b> Analysis of line 9:				
<b>a</b> Excess from 2005				0
<b>b</b> Excess from 2006				0
<b>c</b> Excess from 2007				0
<b>d</b> Excess from 2008				0
<b>e</b> Excess from 2009	3,893			

**Part XIV Private Operating Foundations** (see page 27 of the instructions and Part VII-A, question 9)

- 1a** 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)

	Tax year	Prior 3 years			(e) Total
	(a) 2009	(b) 2008	(c) 2007	(d) 2006	
<b>2a</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:					
<b>(1)</b> Value of all assets . . . . .					
<b>(2)</b> 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:					
<b>(1)</b> Total support other than gross investment income (interest, dividends, rents, payments on securities loans (section 512(a)(5)), or royalties) . . . . .					
<b>(2)</b> Support from general public and 5 or more exempt organizations as provided in section 4942(j)(3)(B)(iii) . . . . .					
<b>(3)</b> Largest amount of support from an exempt organization . . . . .					
<b>(4)</b> 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).)

None

- 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.

The Robert E. Howley Memorial Endowment Trust, W 6472 Birch Tree Rd., Plymouth, WI 53073

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

See attached application form

- c** Any submission deadlines:

April 1st

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

Scholarships for "at risk" students from Sheboygan, WI area schools.

**Part XV** Supplementary Information (continued)

**3 Grants and Contributions Paid During the Year or Approved for Future Payment**

Recipient Name and address (home or business)	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
<b>a Paid during the year</b>				
University of Wisconsin - La Crosse, La Crosse, WI		501(c)(3)	Contribution to endowment	\$750
Amber Messner, 3 E Elizabeth St., Plymouth, WI	none	na	scholarship	500
Jacqueline Kaquatosi, 328 St. Clair, Sheboygan, WI	none	na	scholarship	500
Cha Xiong, 816 Bell, Sheboygan, WI	none	na	scholarship	1,000
Abigail Hilbink, 2211 Riverside Av, Minneapolis, MN	none	na	scholarship	500
Tony Hanser, 3723 N. 12th Pl, Sheboygan, WI	none	na	scholarship	500
<b>Total</b> . . . . . ▶ <b>3a</b>				<b>\$3,750</b>
<b>b Approved for future payment</b>				
<b>Total</b> . . . . . ▶ <b>3b</b>				





Form 990 – PF

Part VIII – List of Officers, Directors  
Trustees and Foundation Manager

<u>Name &amp; Address</u>	<u>Title and Avg Hrs. Wk</u>	<u>Compensation</u>	<u>Employee Ben Plan</u>	<u>Expense Account</u>
Cynthia Howley W6472 Birch Tree Road Plymouth, WI 53073	Trustee	0	0	0
Barry Neumann 203 First Street Sheboygan Falls, WI 53085	Trustee	0	0	0
Ellen Cheney 33 Mill Street Sheboygan Falls, WI 53085	Trustee	0	0	0
Vickie Ritchie 511 Lyndon Street Waldo, WI 53093	Trustee	0	0	0
Tim Talen 2686 Pickett Street Plymouth, WI 53073	Trustee	0	0	0
Patty Talen 2686 Pickett Street Plymouth, WI 53073	Trustee	0	0	0
Randy Miller 906 Bayberry Kohler, WI 53044	Trustee	0	0	0
Kaylyn Howley W6472 Birch Tree Road Plymouth, WI 53073	Trustee	0	0	0
Totals included on 990-PF, Page 6, Part III	0	0	0	0

**Robert E. Howley Memorial Endowment Trust**  
*"Inspiring At-Risk Youth through the Performing Arts and Education"*

**The 2009-10 "Bob Howley" Memorial Scholarship**

**A. Nature of the Scholarship**

1. One or more scholarships in amounts up to \$1,000 to be awarded to a Sheboygan County High School Senior's and/or graduate's that has have established evidence of pursuing or continuing their post secondary education.
2. Applicants must be able to show what motivates them to pursue their education within one or both of the following categories:
  - a.) You are motivated to overcome special personal challenges that have put your future academic and vocational success at risk.
  - b.) You are motivated to pursue a career assisting at-risk or disadvantaged youth and/or their families

**Applicants found within category a.) will be given special consideration.**

3. High grade point averages and class ranking won't be determining factors in awarding scholarships.
4. The Robert E. Howley Memorial Endowment Trust trustees will make the final selection of scholarship awards. The recommendations of high school staff and other references will be considered in the selection of scholarship recipients. In addition, an interview may be requested to determine financial need, ability/potential, motivation and character of applicant.

**B. How to apply**

Completed applications must be made available to your high school Guidance Office within the deadline established at your school. However, it is recommended that you also email your application and related items as WORD documents to [cahwle@yahoo.com](mailto:cahwle@yahoo.com). If you are unable to email those documents to us, You may also mail them to The Robert E. Howley Memorial Endowment Trust, W6472 Birch Tree Road, Plymouth, WI 53073. Such mailings or emails must be in our possession by 4/1/10.

**C. Rules Regulating the Use of this Scholarship**

1. This scholarship must be used at an accredited school or college (technical schools, beauty schools, auto mechanic schools, and others would be acceptable).
2. One half of the scholarship money will be paid upon proof of \*full-time school enrollment and receipt of a class schedule. The balance will be paid at the beginning of the student's second semester after documentation is received from the student and their school shows successful completion of the previous semester as a full time student and minimum 2.0 G.P.A.

\*Allowances for changing schools or part-time enrollment will be considered by contacting the scholarship trustees in advance of enrollment or before becoming a part-time student

3. Monies will be disbursed by the Robert E. Howley Memorial Endowment's trustees.
4. The Selection committee will not discriminate per existing law on the basis of race, color, national origin, age, disability, and where applicable, sex, marital status, religion, sexual orientation and , political beliefs.
5. Family members of the Robert E. Howley Memorial Endowment trustees are not eligible for a scholarship.

**Robert E. Howley Memorial Endowment Trust**  
*"Inspiring At-Risk Youth through the Performing Arts and Education"*

**APPLICATION**

Applicant Name:  
Home Address:  
Home Phone:  
Date of application submission:  
High School:  
Month/year of graduation:

Please answer the following questions concisely and return the completed application document to the school guidance office or by mail/email to the scholarship trustees. Feel free to attach concise documents as needed. Please indicate in writing if you would like consideration for a telephone or personal interview to expand upon your answers.

1. What school will you attend? Please describe briefly if that has not been decided.
2. What certificate, degree or diploma do you hope to earn following graduation?
3. In what field or vocation do you hope to work someday and why?
4. If you have significantly underachieved during high school, whether related to special education needs, family issues and/or legal problems, please explain some of the obstacles you have overcome, what motivates you now to pursue higher education and how will more education help you reach your goals?
5. List and describe any activities and experiences that have prepared you for post-secondary education (extra-curricular school activities, sports, work, community service, clubs/organization, hobbies, interests and other life experiences?).
6. Please describe previous post-secondary course-work and enrollment timeframes.
7. Please include 2 letters of reference from your high school or other adults within your current school or community. (Attach separately)

**MAIL TO.**

Robert E. Howley Memorial Endowment Trust  
W6472 Birch Tree Road  
Plymouth, WI 53073 (920) 892-2236

Email: cahwle@yahoo.com

# Robert E. Howley Memorial Endowment Trust

*"Inspiring At-Risk Youth through the Performing Arts and Education"*

## Trustees

Cindy Howley - Manager of Kohler Design Center and Civic Services Stefanie Weill Center Board Member Youth Theatre Co Board Member. Director of St. John the Baptist Folk Group. Liaison with AFS

Barry Neumann - Social Work Supervisor of the Juvenile Court Ongoing Unit at Sheboygan County Health & Human Services Worked 17 years with Bob Howley at the STRIVE Program

Randy Miller - Director of Technical Sales Support at Nemschoff Chairs Sheboygan, WI President of The Holy Name Society, Usher, and Parish Council Member at St. John Catholic Church - Kohler, Wisconsin.

Beth A. Krause - Eleven years of social work experience Work history includes Hearthside Group Home of Sheboygan, Juvenile Court Intake Worker for Sheboygan Co Health and Human Services/STRIVE Program, AODA Community Coordinator for Whitefish Bay School/Community, Marketing Rep. for Rogers Memorial Hospital, and School Social Worker for the Sheboygan Area School District

Jenn Gutschow - Work experiences include social worker at STRIVE, Sheboygan Human Services, Hearthside Group Home and Manitowoc County Human Services

Ellen Cheney - Social Work Supervisor of the Juvenile Court Intake Unit at Sheboygan County Health & Human Services, including the STRIVE social workers. Also serves at First United Lutheran Church in various capacities, including Recording Secretary of the First United Lutheran Church Foundation Fund, Acts with and is the Front-of-House Coordinator for the Sheboygan Theatre Company; and sings with the Sheboygan Symphony Chorus.

Patty Talen - B.A Saint Mary-of-the-Woods College, Speech and Drama Education, M F A , University of Minnesota, Acting Has been teaching and directing Theatre Arts for 35 years in grade school, middle and high school, community college and Community Theatre settings in Indiana, Minnesota, Tennessee and Wisconsin. Church folk group. 4-H leader for Youth 17 years Coordinates youth volunteer programs for Special Olympics, Meals on Wheels, and Road America Cancer Walk. Artistic Director of The Youth Theatre Company.

Tim Talen - Associate Professor, Department of Youth Development State of Wisconsin 4-H Arts and Communications Specialist Provides leadership for the University of Wisconsin-Extensions' 4-H arts and communication projects and programs across the state. Technical Director and Producer for the Youth Theatre Company Inc.

Vicki Ritchie - Coordinator for Sheboygan Area School Districts Alternative programs which include STRIVE and Riverview Academy