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0	an.	_DF			eturn of P							ОМВ	No 1545-	0052
Form 🗸	プリ			or Sec	tion 4947(a)(1) l	Nonexe	empt Charita le Foundatio	ble Trust n						
pepartme internal R	nt of the Tre evenue Ser	vice N	lote: The founda	ation may b	e able to use a co	py of this	s return to sati	sfy state re		quire	nents.	<u> </u>	<u>. </u>	ㅡ_
For ca	lendar y	ear 2009, or	tax year begi	inning			, 2009,	and endi	ng		.,,		<u></u>	20
G Che	ck all th	at apply:	Initial reti	um	Initial r	eturn o	f a former pu	blic charit	у_		L_	∫ Final	return	
			Amended	d return		Addres	s change		Nam	e cha	nge			
		Name of foun	idation	· · ·					A I	Emplo	yer identifi	cation n	umber	
Use th	ie IRS													
lat	el.	KEVIN AN	D CONNIE	MICHELS	FAMILY FO	UNDAT	ION				39-	20441	11	
Other		Number and	street (or P O bo	x number if r	nail is not delivered t	to street a	iddress)	Room/su	ite B	Telephon	e number (sea ;	ooge 10 of the	a instructions)	
•	int													
or t	ype. Decific	POST OFF	ICE BOX 1	28							(92	0) 5	83-31	32
Instru		City or town,	state, and ZIP c	ode							ption applicat i, check here			>
											ıgn organizati		here .	
		BROWNSVI	LLE, WI 5	3006		_					ign organizati			
l Che	ck type	of organizati	ion: Sec	ction 501(c)(3) exempt priv	vate fou	Indation				test, check houtation			▶
∏s	ection 4	947(a)(1) none	exempt charitable	-			ate foundation	on	J					
			assets at end		unting method:					-	e foundation : ection 507(b)			ightharpoonup
of y	ear (fro	m Part II, col	. (c), line		ther (specify)						undation is in			un
	▶ \$		0		column (d) mus	t be on	cash basis.)				ection 507(b)			
Part			nue and Expe		(a) Poussus	and	411.						Disbursen	
	total of	f amounts in co	olumns (b), (c), a equal the amou	and (d) nts in	(a) Revenue a expenses po		(b) Net inve incom			djuste ncom	d net e		r chantab purposes	
	colum	n (a) (see page	e 11 of the instru	ictions))	books				<u> </u>		- 	1	sh basis o	
1			tc , received (attach s		N	ONE .		, ,			,			() () () () () ()
2	Check	x if the fo	oundation is not re Sch. B.	equired to	•			(m. 1	,				·	- 1 m
3	-	— attacii	emporary cash inv		N	ONE		NONE				1/2		
4		_	t from securities		N	ONE		NONE					ev 5**	· 3/2-65/4
5 a				• • • •			•					.,		5 5 12 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2
		at income or (los	•		, , , , , , , , , ,		,	· ** ** **	-, ^ -	مستريد ومعل	-	1 1 3 8	1213	J. 1.
		•	ale of assets not o	n line 10			ž - ž - ž	, 5mg, r	= 1	•	13.00		يدر الم	150
b	Gross sa	les price for all			, ,	1,	, (' · · · ·					١	- 26	1
7	-		ne (from Part IV,	line 2)		-		NONE.		0.3	JQ // .	1) 6	743 (L3	251.7
6 a b 7 8	-	rt-term capital	•				· · · · · · · · · ·	~ .		0			سيها وبو	1 3
9	Income	modifications	•				,	÷ - , (001	TEN	THE	1 1/3
10 a	Gross sa	les less returns vances	1		,				1 3	1	املياء د د		A	1 2 2 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
Ь		st of goods sold				:			f 7,4%	1	` _ , ,	· :	- 7	, 124 giv
С	Gross p	rofit or (loss) (attach schedule)			والمجارية المنازية					12.5	ر با فاقت ش	1 8 1950 V
11	•	ncome (attach	-]						કુંજ,	- t	
12		•	ough 11		N	ONE.		NONE.			NONE	12.7ª. z.	. s 75%	、被孫
13			, directors, trustee			ONE								
14			nes and wages											
1			yee benefits .											
16 a			nedule)											
ь			ch schedule)											
			es (attach sched											
17			<i>.</i>	•										
18			(see page 14 of the in											
19	-	-	schedule) and de									***,		સ્ટિન્ટ્ર ે
20	•	•		-										
21	-	•	and meetings .											
22			ons											
23			ch schedule) .		1	NONE		NONE.			NONE.			
24		•	administrative e											
15 16 a b c 17 18 19 20 21 22 23 24		es 13 through			1	NONE.		NONE.			NONE-	<u> </u>		
25		_	rants paid		l	NONE	- ,	3.00	* , , ,					NONE
1 "														

c Adjusted net Income (if negative, enter -0-). . For Privacy Act and Paperwork Reduction Act Notice, see page 30 of the instructions. 10566I 649D 4/23/2010 10:39:17 AM V 09-5.2

Form 990-PF (2009)

NONE

NONE

NONE

Sec. 34.

Subtract line 26 from line 12:

Total expenses and disbursements, Add lines 24 and 25

a Excess of revenue over expenses and disbursements .

b Net investment income (if negative, enter -0-)

26

JSA

NONE

NONE

10 Car 10

<u></u>	Attached schedules and amounts in the description column should be for end-of-year		Beginning of year	End o	of year		
4	aitii	amounts only (See instructions)	(a) Book Value	(b) Book Value	(c) Fair Market Value		
	1	Cash - non-interest-bearing					
	2	Savings and temporary cash investments					
1	3	Accounts receivable	سطسعست سدره الألا	The transfer of the second sec	a company and the second of the		
		Less: allowance for doubtful accounts					
	4	Pledges receivable	Maria Salahara Salahara		Carlo State of the State of		
		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)					
ı	7		133 8 1 m				
		Less: allowance for doubtful accounts					
	8	Inventories for sale or use		· · · · · · · · · · · · · · · · · · ·			
ssets	9	Prepaid expenses and deferred charges					
Ass	_	Investments - U S and state government obligations (attach schedule)					
٩		Investments - corporate stock (attach schedule)					
		Investments - corporate bonds (attach schedule)					
	11	Investments - rand, buildings,	# (Tar 10) - (Tar 1) 1/2"	The San Land State of the San Land	The art of the		
		and equipment, basis	hillian and a second	سيرم بالمرافق فيكار مناصل المنطاقة المناقش	- «المالية المالية المالية والمالية المالية ال		
	40	(attach schedule)					
ļ	12 13	Investments - mortgage loans					
Ì	14	Investments - other (attach schedule)	Charles " Secretary of the second	the service of the state of the or to	A STATE OF STATE OF THE STATE O		
		Less accumulated depreciation	- Silving Committee Committee & I	- el-4- mere in it is in	هُمُ بِهِ أَنْ مُرَاعِكُمُ السَّمَاكِينَ بِمَوْادِ فَقَالِمِ الْأَوْمِينِينِ الْمُوادِينِينِ الْمُعَالِمُ السّ		
		(attach schedule)					
	15	Other assets (describe					
l	16	Total assets (to be completed by all filers - see the	NONE	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	MONE		
_		Instructions Also, see page 1, item I)		NONE.	NONE		
	17	Accounts payable and accrued expenses	1		一步,作者是建筑		
	18	Grants payable					
abilities	19	Deferred revenue	ļ				
Ĕ	20	Loans from officers, directors, trustees, and other disqualified persons					
lat	21	Mortgages and other notes payable (attach schedule)					
_	22	Other liabilities (describe			下学 计存成 為		
		÷					
_	23_	Total liabilities (add lines 17 through 22)	NONE.	NONE.			
		Foundations that follow SFAS 117, check here			N. 高、多、多、多、多、多、多、多、多、多、多、多、多、多、多、多、多、多、多、多		
		and complete lines 24 through 26 and lines 30 and 31.					
ces	24	Unrestricted					
ā	25	Temporanly restricted					
Bal	26	Permanently restricted					
or Fund Balances		Foundations that do not follow SFAS 117,			المراجعة الم		
Ē		check here and complete lines 27 through 31. ► X					
ō	27	Capital stock, trust principal, or current funds		<u> </u>			
Net Assets	28	Paid-in or capital surplus, or land, bldg , and equipment fund					
SS	29	Retained earnings, accumulated income, endowment, or other funds		NONE-	四海 是强烈的		
it A	30	Total net assets or fund balances (see page 17 of the			1841年		
ž		instructions)	NONE.	NONE.			
	31	Total liabilities and net assets/fund balances (see page 17					
		of the instructions)	NONE.	NONE.	12/2/2019 (2017)		
_		Analysis of Changes in Net Assets or Fund		<u> </u>			
1	Tota	I net assets or fund balances at beginning of year - Part II, co	olumn (a), line 30 (must a	agree with			
	end-	of-year figure reported on prior year's return)			NONE		
2	Ente				NONE		
		lines 1, 2, and 3			NONE		
_	~ -						
6	Tota	reases not included in line 2 (itemize) I net assets or fund balances at end of year (line 4 minus line)	5) - Part II, column (b).	line 30 6	NONE		
_					Form 990-PF (2009)		

	describe the kind(s) of property sold (cick warehouse; or common stock, 200		(b) How ecquired P-Purchase D-Qonation	(c) Date acquired (mo., day, yr.)	(d) Date sold (mo , day, yr)
a SEE PART IV SCHED	ULE		- Section of the sect		
b					
c				L	
d					
<u>e</u>					<u> </u>
(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale		(h) Gain or (lo (e) plus (f) mini	
<u>a</u>					
b c			 		
<u>d</u>			 		
e			 		
	wing gain in column (h) and owned	by the foundation on 12/31/69	//\	Gains (Col. (h) g	aın minus
(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		(k), but not less t Losses (from co	han -0-) or
a					
b					
C					
d					
e			<u> </u>		
Capital gain net income or (net capital loss) {	f gain, also enter in Part I, line 7 f (loss), enter -0- in Part I, line 7	2		
	or (loss) as defined in sections 122				
•	ne 8, column (c) (see pages 13 an	•			
	ne 8	ced Tax on Net Investment Inc	3		NONE.
	e section 4942 tax on the distribut	able amount of any year in the base	penod?	□	Yes X No
		see page 18 of the instructions before	e making a	any entries.	
(a)	(b)	(c)	T	(d)	
Base period years Calendar year (or tax year beginning in)	Adjusted qualifying distributions	Net value of noncharitable-use assets		Distribution ra (col (b) divided by	
2008	NONE .	NONE.			NONE
2007	NONE -	NONE ·			NONE
2006	NONE ·	NONE-			NONE
2005	NONE ·	NONE.	ļ		NONE
2004	NONE.	NONE-	 		NONE
Total of line 1, column (d)			2		NONE
•	or the 5-year base period - divide the	• •			
number of years the founda	ation has been in existence if less t	than 5 years	3		NONE
Enter the net value of nonc	haritable-use assets for 2009 from	Part X, line 5	4		NONE
Multiply line 4 by line 3			5		NONE
Enter 1% of net investment	income (1% of Part I, line 27b)		6		NONE
Add lines 5 and 6			7	 	NONE
Enter qualifying distribution If line 8 is equal to or gre Part VI instructions on page	eater than line 7, check the box	in Part VI, line 1b, and complete	8 that part	using a 1% tax	NONE rate. See th

Par	t VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 - see page 18 of	f the ins	structi	ons)		
1a	Exempt operating foundations described in section 4940(d)(2), check here and enter "N/A" on line 1	4. 1.			7.	
	Date of ruling or determination letter(attach copy of ruling letter if necessary - see Instructions)	مداماند	- ~. 	مهاران طالبسك	و ا	
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check			NC	NE.	
	here ► X and enter 1% of Part I, line 27b	,		,	3 ,	
c	All other domestic foundations enter 2% of line 27b Exempt foreign organizations enter 4%	أيكرك	<u>.</u> , .			
	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			NC	NE.	
3	Add lines 1 and 2			NC.	NE.	
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-) 4		NONE.			
5	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-			NC	NE_	
6	Credits/Payments:			,	20 ()	
а	2009 estimated tax payments and 2008 overpayment credited to 2009 6a NONE.					
b	Exempt foreign organizations-tax withheld at source 6b NONE.		, ,, -	,,,,,,	E. j	
c	Tax paid with application for extension of time to file (Form 8868)	2 (53 4) (17	,	الفريمي المريخ		
d	Backup withholding erroneously withheld NONE NONE	ien en			San s	
7	Total credits and payments. Add lines 6a through 6d			NC	$NE \cdot$	
8	Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached					
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed			NC	<u>NE.</u>	
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid					
11	Enter the amount of line 10 to be: Credited to 2010 estimated tax Refunded 11			NC	<u>NE.</u>	
Par	t VII-A Statements Regarding Activities					
1a				Yes	No X	
_	participate or intervene in any political campaign?	• • • •	1a		-^-	
Ь	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see page 19		4.		v	
	of the instructions for definition)?		1b	, , <u> </u>	X	
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials			3 .	ļ.,	
_	published or distributed by the foundation in connection with the activities.		1c	wier, car	Z	
ر د	Did the foundation file Form 1120-POL for this year? Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year:	• • • •	-10		13.2	
đ	(1) On the foundation. \$ (2) On foundation managers \$			رُ معا	. म्हंसू भू	
•	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed		1			
٠	on foundation managers. \$		1 1.75	4 2	7 - 7 - 7 - 7 - 7 - 7 - 7 - 7 - 7 - 7 -	
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?		2	, C	X	
_	If "Yes," attach a detailed description of the activities.		7 7 7	12 2 2	(2) L	
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of		1.2		- 6 m	
	incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes		3		<u> </u>	
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?		4a		_X_	
ь	If "Yes," has it filed a tax return on Form 990-T for this year?		4b	N	/A_	
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?		5		X	
	If "Yes," attach the statement required by General Instruction T.				2 7	
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either		14/2		979	
	By language in the governing instrument, or		,		,;	
	By state legislation that effectively amends the governing instrument so that no mandatory directions that				130	
	conflict with the state law remain in the governing instrument?		_6_	X	<u> </u>	
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 2	xv	7		X	
8a	Enter the states to which the foundation reports or with which it is registered (see page 19 of the		700	şî		
	instructions) ►WI,		٠, ٠,٠٠٠	***		
b	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney Gen		-	v. 1		
	(or designate) of each state as required by General Instruction G?/if "No," attach explanation		8b	X	1850 v	
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3)			10 m		
	4942(j)(5) for calendar year 2009 or the taxable year beginning in 2009 (see instructions for Part XIV on page 2713 of 500 and 2014 (in the calendar year 2009).	age			х	
4-	27)? If "Yes," complete Part XIV		9		 ^	
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing to		40		x	
	names and addresses		10 50m 90	O DE		

Par	t 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		Х
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?	_13	Х	<u>L</u>
	Website address N/A			
14	The books are in care of ► SUSAN P. WINTER Telephone no. ► 920-583	3-31	32	
	Located at ►BROWNSVILLE, WISCONSIN ZIP+4 ► 53006			
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - Check here	À		· []
	and enter the amount of tax-exempt interest received or accrued during the year			
Par	t VII-B Statements Regarding Activities for Which Form 4720 May Be Required	1 7, 5	1	
	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):	137		1/5
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person?		. *·	a) =-
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a	18	3.5	7 36
	disqualified person? Yes X No	, ~	Market.	۳۲,
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? Yes X No		, ·	4
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? Yes X No	J. 3.	16 C	25.00
	(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)? Yes X No	ا ڏِڻي م		1,0
	_	7, "	16.	1 1
	(6) Agree to pay money or property to a government official? (Exception. Check "No" if	24,5	17.	137 27
	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.)			To the
_		7.		\$ 1.0 x
ь	If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations	16	N	/ A
	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	10	1 1 N	/ <u>FA</u>
С	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that		17.5%	
•	were not corrected before the first day of the tax year beginning in 2009?	1c	5	X
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private	2.		-37
	operating foundation defined in section 4942(j)(3) or 4942(j)(5)):	7-3	1.50	7. 3. 3. 5. 5. 5. 5. 5. 5. 5. 5. 5. 5. 5. 5. 5.
а	At the end of tax year 2009, did the foundation have any undistributed income (lines 6d and	à -		7.2
	6e, Part XIII) for tax year(s) beginning before 2009?	250	18	
	If "Yes," list the years			
b	Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2)	, ,	,5	10,13
	(relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2)	2 7 3		
	to all years listed, answer "No" and attach statement - see page 20 of the instructions)	2b	N	/ <u>A</u>
C	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here.	8 39 8	الله من تريم من س	3
	>	1 18 18 1	300	
	Did the foundation hold more than a 2% direct or indirect interest in any business	2 8 3 6		
	enterprise at any time during the year?	1	3	3 8
	If "Yes," did it have excess business holdings in 2009 as a result of (1) any purchase by the foundation or	3-3		44243
	disqualified persons after May 26, 1969; (2) the lapse of the 5-year period (or longer period approved by the	5	[等人]	150
	Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest; or (3) the lapse	7.	: "	
	of the 10-, 15-, or 20-year first phase holding period? (Use Schedule C, Form 4720, to determine if the	123.2		ئنئن
	foundation had excess business holdings in 2009.)	3b	-N	<u>/A_</u>
	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a	25	<u>X</u>
Ь	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its	• ١٠	\$.42.	¥ 7.11
-	charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2009?	4b		<u> </u>

4.4

Pa	t VII-B Statements Regarding Activities for	Which Form 47	20 May Be Requir	ed (contii	nued)			
5a	During the year did the foundation pay or incur any amount	to:				15/2	4	1 () () () () () () () () () (
	(1) Carry on propaganda, or otherwise attempt to influence		945(e))?	Yes	X No	(1) (1) (1) (1) (1) (1) (1) (1) (1) (1)	10 T	, 74 T
	(2) Influence the outcome of any specific public election (se					15 - 6 15 - 6	200	1
		· · · · · · · · · · · · · · · · · · ·		Yes	X No			0.0
	(3) Provide a grant to an individual for travel, study, or othe			Yes	X No		X 22 7	
	(4) Provide a grant to an organization other than a charitable				٠٠٠ ــــــ		4	(4)
	section 509(a)(1), (2), or (3), or section 4940(d)(2)? (see	_		Yes	X No		1 25	
	(5) Provide for any purpose other than religious, charitable,				··•		111	1
	purposes, or for the prevention of cruelty to children or a	• •		Yes	X No	i.k.	3	
	If any answer is "Yes" to 5a(1)-(5), did any of the transa				_		13	
Ь	Regulations section 53.4945 or in a current notice regardi		•			5b	M N	/ 7\
	_			•	. i i i i i	30	1N 18 9564	<u>/ A</u>
	Organizations relying on a current notice regarding disaster			'		222	160° - 54 40° / 54	
С	If the answer is "Yes" to question 5a(4), does the foundation	· ·		\Box	□	1		
	because it maintained expenditure responsibility for the gran		N/A	Yes	L No		E	3.35 E
	If "Yes," attach the statement required by Regulations section	• • •						
6 a	Did the foundation, during the year, receive any funds, direct	tly or indirectly, to par	y premiums	г	<u>ги</u>	17.0	48	
	on a personal benefit contract?	•		Yes	X No	ن تهند	end had been	强災 均
b	Did the foundation, during the year, pay premiums, directly of	or indirectly, on a pen	sonal benefit contract?			. 6b	48. h. 13	X
	If "Yes" to 6b, file Form 8870.					3.5.3		100 m
	At any time during the tax year, was the foundation a party t	-	•	Yes	X No	133	\$5.7%	, Post (1978)
	If yes, did the foundation receive any proceeds or have any					7b		<u> </u>
Pa	t VIII Information About Officers, Directors and Contractors	, Trustees, Four	idation Managers,	Highly Pa	aid Empi	oyees,		
1	List all officers, directors, trustees, foundation mana	agers and their co	mpensation (see pa	ge 22 of the	instructi	ons).		
	(a) Name and address	(b) Title, and average hours per week devoted to position	(c) Compensation (if not paid, enter -0-)	(d) Contribut employee ben and deferred cor	efit plans	(e) Expens other allo		
- - -					1			
<u>A</u> T	TACHMENT 1		NONE.		NONE.		N	ONE
					1			
					1			
		-						
				_				
2	Compensation of five highest-pald employees (other if none, enter "NONE."	r than those includ	ded on line 1 - see p			ions).		
1:) Name and address of each employee paid more than \$50,000	(b) Title, and average	(c) Compensation	(d) Contribu employee I	penefit	(e) Expens		
"	Than and address of each employee paid more than \$50,000	hours per week devoted to position	(c) Compensation	plans and d compens	eferred	other allo	wance	S
				- CONTRACTOR				
					i			
								
-]		1			
								
		}	ļ		1			
	I				Į.			
					1			
 T- 1	I number of other employees paid over \$50,000						T 1-	ONE

Form 990-PF (2	2009) 39-2044	111	Page 7
Part VIII	Information About Officers, Directors, Trustees, Foundation Managers, Hand Contractors (continued)	lighly Paid Employees,	
3 Five high	nest-paid independent contractors for professional services (see page 23 of the ins	tructions). If none, enter "N(ONE."
	(a) Name and address of each person paid more than \$50,000 (b) T	Type of service (c) Com	pensation
NONE			
			· · · · ·
Total number	er of others receiving over \$50,000 for professional services		NONE
Part IX-A	Summary of Direct Charitable Activities		
List the found of organization	lation's four largest direct chantable activities during the tax year. Include relevant statistical information such as thems and other beneficiaries served, conferences convened, research papers produced, etc.	e number Exp	enses
1 NONE			
2			NONE
3			
4			· · · · · · · · · · · · · · · · · · ·
Part IX-B	Summary of Program-Related Investments (see page 23 of the instructions)		
	two largest program-related investments made by the foundation during the tax year on lines 1 and 2	Amo	ount
1 NONE			
2			NONE
All other prog	ram-related investments See page 24 of the instructions		

Form 990-PF (2009)

NONE

Pa	Minimum Investment Return (All domestic foundations must complete this part. Foreig see page 24 of the instructions.)	n foundations,	
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc.,	*	
	purposes:	المنطاق	
а	Average monthly fair market value of securities	1a	NONE-
b	Average of monthly cash balances	1b	NONE
C	Fair market value of all other assets (see page 24 of the instructions)	1c	NONE
ď		1d	NONE
е	Reduction claimed for blockage or other factors reported on lines 1a and	; ===	
	1c (attach detailed explanation) 1e NONE.	525	
2	Acquisition indebtedness applicable to line 1 assets	2	NONE
3	Subtract line 2 from line 1d	3	NONE
4	Cash deemed held for charitable activities. Enter 1 1/2 % of line 3 (for greater amount, see page 25		
	of the instructions)	4	NONE
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	NONE
6	Minimum investment return. Enter 5% of line 5	6	NONE
Pa	art-XI Distributable Amount (see page 25 of the instructions) (Section 4942(j)(3) and (j)(5) private	1 - 1	NONE
	foundations and certain foreign organizations check here	art.)	
1	Minimum investment return from Part X, line 6	1	NONE
2 a			NONE
b			
c		2c	NONE
3	Add lines 2a and 2b Distributable amount before adjustments. Subtract line 2c from line 1	3	NONE
4	Recoveries of amounts treated as qualifying distributions	4	NONE
5	Add lines 3 and 4	5	
6		6	NONE NONE
7	Deduction from distributable amount (see page 25 of the instructions) Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII,	 • 	NONE
•	line 1	7	NONE
_		<u> </u>	NONE
Pa	art XII Qualifying Distributions(see page 25 of the instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:	724,	
· a	Expenses, contributions, gifts, etc total from Part I, column (d), line 26	1a	NONE
b		1b	NONE
2	Program-related investments - total from Part IX-B Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc.,	10	NONE
-		2	NONE
3	purposes Amounts set aside for specific charitable projects that satisfy the:	- 	NONE
a		3a	MONE
b		3b	NONE
4	Cash distribution test (attach the required schedule) Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4	4	NONE
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income.	-	NONE
J	Enter 1% of Part I, line 27b (see page 26 of the instructions)	_	
	Adjusted qualifying distributions. Subtract line 5 from line 4	6	NONE
6			NONE
	Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whet qualifies for the section 4940(e) reduction of tax in those years.	ner the foundation	

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Form 990-PF (2009)

Undistributed Income (see page 26 of the instructions) (d) (c) Corpus Years prior to 2008 2008 2009 Distributable amount for 2009 from Part XI, NONE Undistributed income, if any, as of the end of 2009 Enter amount for 2008 only Total for pnor years 20 07 20 06 20 05 Excess distributions carryover, if any, to 2009. NONE From 2004 From 2005 NONE From 2006 NONE From 2007 NONE From 2008 NONE NONE Qualifying distributions for 2009 from Part XII, NONE line 4[·] ▶ \$ 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) NONE Applied to 2009 distributable amount Remaining amount distributed out of corpus NONE NONE Excess distributions carryover applied to 2009 (If an amount appears in column (d), the same amount must be shown in column (a)) Enter the net total of each column as indicated below: NONE Corpus Add lines 3f, 4c, and 4e. Subtract line 5 Prior years' undistributed income Subtract NONE 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 NONE d Subtract line 6c from line 6b amount - see page 27 of the instructions Undistributed income for 2008 Subtract line 4a from line 2a. Taxable amount - see page NONE Undistributed income for 2009 Subtract lines 4d and 5 from line 1. This amount must be distributed in 2010 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 NONE applied on line 5 or line 7 (see page 27 of the NONE Excess distributions carryover to 2010. Subtract lines 7 and 8 from line 6a NONE Analysis of line 9 10 Excess from 2005 NONE Excess from 2006 NONE Excess from 2007 NONE Excess from 2008 NONE Excess from 2009 NONE

Form 990-PF (2009)

Pa	rt XIV Private Oper	rating Foundations	(see page 27 of the	instructions and Pa	rt VII-A, question 9)	NOT APPLICABLE
1 a	If the foundation has	received a ruling or d	letermination letter tha	t it is a private ope	rating	
	foundation, and the ruling	is effective for 2009, ente	r the date of the ruling		. ▶	
ъ	Check box to indicate whe	ther the foundation is a pr	rivate operating foundation	n described in section	4942(i)(3) or 4942(j)(5)
2 a	Enter the lesser of the ad-	Tax year		Prior 3 years		(a) Tatal
2.0	justed net income from Part	(a) 2009	(b) 2008	(c) 2007	(d) 2006	(e) Total
	I or the minimum investment return from Part X for each					
	year listed					
b	85% of line 2a					
_	Qualifying distributions from Part					
٠	XII, line 4 for each year listed .		}			
d	Amounts included in line 2c not					
	used directly for active conduct	}	1			}
e	of exempt activities					
_	directly for active conduct of		l			
	exempt activities Subtract line 2d from line 2c	İ				
3	Complete 3a, b, or c for the	-			<u> </u>	
	alternative test relied upon					
а	"Assets" alternative test - enter	1				
	(1) Value of all assets (2) Value of assets qualifying	·			<u> </u>	
	under section					
ь	4942(j)(3)(B)(i) "Endowment" alternative test-					
	enter 2/3 of minimum invest-	!				
	ment return shown in Part X, line 6 for each year listed	1				
c	"Support" alternative test - enter			 	 	
	(1) Total support other than	ĺ	į	1		
	gross investment income (interest, dividends, rents,					
	payments on securities		į			į
	loans (section 512(a)(5)), or royalties)					
	(2) Support from general					
	public and 5 or more exempt organizations as	1]			Ì
	provided in section 4942 (j)(3)(B)(iii)					
	(3) Largest amount of sup-					
	port from an exempt organization					
	(4) Gross investment income					
Pa					lation had \$5,000	or more in assets
_		during the year - se		structions.)		
1	Information Regarding	•				
а	List any managers of before the close of any	the foundation who h	nave contributed more	e than 2% of the total	al contributions receives	red by the foundation
	•	tax year (but only if the	iey nave continuated i	11016 111411 45,000). (0	Jee 3000011 307 (0)(2).)	
_	N/A					
b	List any managers of					/ large portion of the
	ownership of a partner	snip or other entity) of	rwnich the foundation	nas a 10% or greate	r interest.	
	N/A					
2	Information Regarding	Contribution Grant	Gift Loan Scholarshi	n etc. Programs:		
-		•		·	itabla assasinations :	
	Check here ► X if to unsolicited requests f	ne loundation only t or funds if the found	nakes contributions dation makes diffs c	io preselecteo char irants etc (see nad	nable organizations a	and does not accept
	organizations under ot					mo, to marriadalo of
	The name, address, an	d telephone number of	the nerson to whom a	onlications should be	addressed:	
u	N/A	a telephone namber of	the person to whom a	ppiloations should be	addicoscu.	
b	The form in which appli	cations should be subr	nitted and information	and materials they she	ould include:	
				•		
	N/A	····		·		
C	Any submission deadling	nes.				
	N/A					
d	Any restrictions or lifactors:	mitations on awards,	such as by geogra	aphical areas, charita	able fields, kinds of	institutions, or other
	N/A					

4 4 4 11

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Part XV Supplementary Information (c	ontinued)					
3 Grants and Contributions Paid Duri	ng the Year or App	roved for I	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)	or substantial contributor	recipient	Contribution			
a Paid during the year		1		none		
			ĺ			
			į			
		1				
			Ì			
			ł			
	1					
Total	<u> </u>		▶ 3a			
b Approved for future payment	T	1				
a , pp. ovod io. valero paymom				NONE		
			1			
			ļ			
	1					
Total	<u> </u>			NONE		
				Form 990-PF (2009)		

.

Part X	VI-A Analysis of Income-Produ	ucing Act	ivities	,		· · · · · · · · · · · · · · · · · · ·
Enter gr	oss amounts unless otherwise indicated.	Unrela (a)	ated business income (b)	Excluded by	(d)	(e) Related or exempt function income
1 Prog	ram service revenue:	Business code		Exclusion code		(See page 28 of the instructions)
a						
b						
c				ļ		
d				<u> </u>		
8				<u> </u>		
f				ļ		L
•	Fees and contracts from government agencies	ļ		<u> </u>		
	nbership dues and assessments			<u> </u>		
	est on savings and temporary cash investments		<u> </u>	ļ		
	dends and interest from securities		No. of the state of the	71 170	2 - 2 - 4 - 4 - 2 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1	THE STATE OF THE S
	, ,	- , ; -		1.13 3 153	* * * * * * * * * * * * * * * * * * * *	
	Debt-financed property		 	. .		
	Not debt-financed property			ļ	<u> </u>	
	ental income or (loss) from personal property					
	er investment income					
	or (loss) from sales of assets other than inventory					
	income or (loss) from special events			 		
	ss profit or (loss) from sales of inventory			 		
	er revenue: a					
c d				 		
e				 		
12 Subi	otal. Add columns (b), (d), and (e)	Sty 27 70		78% mg /\$		
	I. Add line 12, columns (b), (d), and (e)					NONE
Line N	 Explain below how each activi the accomplishment of the for page 29 of the instructions.) 					
						·
				·		
						
						·,
						
			·			
					······································	
			NOT APPLICABLE	<u> </u>	- ·	
						
						
						
					· · · · · · · · · · · · · · · · · · ·	
			· · · · · · · · · · · · · · · · · · ·		·	
				-		
					· · · · · · · · · · · · · · · · · · ·	
						
						

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

....

1	Did +	he organization directly	or indicatly			Aba falland					- 4000	bad	[5 d	V	T _N
•	in se	ction 501(c) of the Co	ode (other than	engage section	501(c)(3)	omanization	ng with	section	r org 527	relatino	to polit	tical	`	Yes	No J
	organi	izations? fers from the reporting four			55 (5)(5)	o gameauo.	, 0	3000011	·,		, 10 po		, 1	, 4	
а	Trăns	fers from the reporting four	ndation to a none	chantable	exempt orga	anization of:							ا نا عب	كندس.د	
	(1) C	ash 				· • • • • • •							1a(1)		X
	(2) O	ther assets				. 						l	1a(2)		_X_
þ	Other	transactions:							-			[14.		. £3.4
	(1) S	ales of assets to a noncha	ritable exempt or	rganizatio	n								1b(1)		Х
		urchases of assets from a						• • • • •					1b(2)		X
				_		• • • • • •	• • • •	• • • • •	• • •						<u> </u>
		ental of facilities, equipmen			• • • • •			• • • • •			• • • •		1b(3)		
		eimbursement arrangemei										• • • }	1b(4)		X
	(5) Lo	oans or loan guarantees											1b(5)		X
	(6) P	erformance of services or	membership or fi	undraising	solicitation:	·							1b(6)		<u> </u>
C	Sharir	ng of facilities, equipment,	mailing lists, other	er assets,	or paid emp	loyees							1c		Х
d	If the	answer to any of the	he above is '	Yes." co	mplete the	following	schedule.	Column	(b)	should	alwavs	show	the	fair r	market
		of the goods, other													
		in any transaction or				-									
	Value	in any danadouon of	Sharing arrang	gernent,	3/1044 111 (ounn (u)	uio valui	6 OI UI6	good	s, ouic	31 233513	, 01 8	SCIVICO	3 100	ÆIVEU.
	ine no.	(b) Amount involved	(c) Name of		le exempt org	anization	(d) D	escription of	trancto	re trane	actions and	d ebarin			
10/.		N/A	(6) (10)	101101011010	o cxompt org		N/A	oscription of	u al isio	13, 00113	acuona, and	Janaini	9 41.41	gennen	
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					 		<u> </u>								
2a	Is the	foundation directly or	indirectly affiliat	ted with	or related	to one or	more tax	-evemnt o	raaniz	ations	described	l in			
_~		n 501(c) of the Code (other	•					•	-			L	٦ ٧,	s >	d No.
ь		s," complete the following s		301(0)(0))	0 00000	02,	• • • •		• • •		• • • •			.5	3 110
	11 103	(a) Name of organization			(h) Type of	organization			 ,	c) Descr	tption of rel	atlonehi			
		(a) Name of organization			(b) Type or	Organization			,	c) Desa	iption of rei	auonsiii	<u> </u>		
											·				
						- ,									
															
	Undos	popultion of popularity	ro that I barre	amined 451	o roture le -l	uding coors		adulac == d	-4-4-	- onto					
Ì	belief,	penalties of penur I decla	lete-Declaration	of prepare	other than	uding accomp taxpayer or fic	anying sch luciary) is l	based on al	statem inform	nents, at nation o	nd to the l of which pr	eparer	my Kr has an	iowledo y knov	ge and vledge.
		IN////						3/10	_	-					-
_) -							2110	- D .		USTER	<u> </u>			
Sign Here	Sı	ghature of officer or trustee					Date			Title					
ヹ			- /	$\langle \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \$		Date		Check	if	_	Prepa	rer's ic er (See	entify	ing	
賩	ح ئ	Preparer's	ى ئىرىسىدىن	7, 11,	<u></u>	11	,	self-er		ed ►		er (See 10 of the			1
:క్ర`∣		signature	THE 71	MULL	21/2/	15/4	2 L10 =		,-	 -		NIF			
	Paid Preparer's Use Only	Firm's name (or yours if	GRANT	THORN	TON PLP					EIN >	36-60				
	≥ ⊃	self-employed), address,	P.O. E	30X 10	97										
-		and ZIP code	APPLET	ON,	WI		5-	4912-10	97	Phone	no. 920	0-96	8-67	00	
		· · · · · · · · · · · · · · · · · · ·)-PF	(2009)
														-	

ATTACHMENT 1

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

EXPENSE ACCT AND OTHER ALLOWANCES	NONE	NONE	
CONTRIBUTIONS E TO EMPLOYEE BENEFIT PLANS	NONE	NONE	
COMPENSATION	NONE	NONE	
TITLE AND AVERAGE HOURS PER WEEK DEVOTED TO POSITION	TRUSTEE	TRUSTEE	GRAND TOTALS
NAME AND ADDRESS	KEVIN P. MICHELS POST OFFICE BOX 128 BROWNSVILLE, WI 53006	CONNIE L. MICHELS POST OFFICE BOX 128 BROWNSVILLE, WI 53006	

Ec. 8868

(Rev. April 2009)

Department of the Treasury Internal Revenue Service

Application for Extension of Time To File an Exempt Organization Return

File a separate application for each return.

OMB No. 1545-1709

Internal Nevertee C								
		onth Extension, complete only Part I and check this box		▶ 🔀				
If you are fi Do not complete	ling for an Additional (No ete Part II unles ş ou have :	t Automatic) 3-Month Extension, complete only Part II (on page 2 of the already been granted an automatic 3-month extension on a previously filed	is form). I Form 8868.	_				
Part I Auto	matic 3-Month Extens	ion of Time. Only submit original (no copies needed).						
A corporation r	equired to file Form 990-T	and requesting an automatic 6-month extension - check this box and com	plete					
			• • • • • •	▶ ∐				
All other corporations to file income	orations (including 1120- ome tax returns.	C filers), partnerships, REMICs, and trusts must use Form 7004 to	request an	extension of				
one of the re- electronically i returns, or a c	turns noted below (6 m f (1) you want the additi omposite or consolidated	can electronically file Form 8868 if you want a 3-month automatic onths for a corporation required to file Form 990-T). However, you fonal (not automatic) 3-month extension or (2) you file Forms 990-BL From 990-T. Instead, you must submit the fully completed and signed filing of this form, visit www.irs.gov/efile and click on e-file for Chartties	cannot file , 6069, or to page 2 (Pa	Form 8868 8870, group rt II) of Form				
Type or	Name of Exempt Organizat	yer identificati						
print	KEVIN AND CON	-2044111	2044111					
File by the due date for	Number, street, and room o	201111						
	POST OFFICE BOX 128							
filing your return See	City, town or post office, state, and ZIP code. For a foreign address, see instructions							
Instructions	BROWNSVILLE, WI 53006							
Check type of	return to be filed (file a	separate application for each return):						
	Form 990 Form 990-T (corporation) Form 4720							
Form 990	-BL	Form 990-T (sec. 401(a) or 408(a) trust) Form 5227						
Form 990	-EZ	Form 990-T (trust other than above) Form 6069						
X Form 990	-PF [Form 1041-A Form 8870						
	are in the care of \blacktriangleright SUS No. \blacktriangleright 920 583-313							
• If this is for for the whole				this is				
until for the org	t an automatic 3-mor 08/15 2010 panization's return for: calendar year 2009 or tax year beginning	nth (6 months for a corporation required to file Form 990- , to file the exempt organization return for the organization named	T) extensio	n of time extension is				
2 If this tax year is for less than 12 months, check reason: Initial return Final return Change in accounting period								
3a If this ap	plication is for Form 990	PBL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any	у					
	lable_credits. See instructi	· · · · · · · · · · · · · · · · · · ·	3a \$	NONE				
	olication is for Form 990-	;						
	made. Include any prior year overpayment allowed as a credit.							
	c Balance Due. Subtract line 3b from line 3a. Include your payment with this form, or, if required, depos							
	coupon or, if required	t e						
instruction	3c \$	NONE						
		tronic fund withdrawal with this Form 8868, see Form 8453-EO and Form 8	3879-EO					
for payment ins	tructions.							
For Privacy Ac	Form 8868	(Rev. 4-2009)						