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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

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

For	alenda	r year 2009, or tax year beginning , a	and ending				
G C	heck al	I that apply Initial return Initial re	turn of a former public o	hanty		Final return	
		Amended return Add	ress change	Name	change		
Use	the IRS	Name of foundation			A Emp	loyer identification num	ber
	abel.			-6057530			
Oth	erwise,	JOHN OSTER FAMILY FOUNDATI	ON, INC.		B Telep	hone number (see page 1	0 of the instructions)
F	rint	Number and street (or P O box number if mail is not delivered	to street address)	Room/suite	41	4-671-6800	•
or	type.	POST OFFICE BOX 340035			C If exe	mption application is pend	ing, check here
	Specific	011, 01 101111, 0111111 0000			i	reign organizations, check	
Instr	uctions	MILWAUKEE WI	53234-0035		2. Fc	reign organizations meetii	na the
<u>н</u> с	heck ty	pe of organization X Section 501(c)(3) exempt private	foundation			% test, check here and at	
5	Section 4	4947(a)(1) nonexempt chantable trust Other taxable	e private foundation		E Ifpnv	ate foundation status was	terminated under
I Fa	ir mark	et value of all assets at end J Accounting method	Cash X Accr	rual	section	on 507(b)(1)(A), check here	<b>▶</b> ∐
of	year (fr	om Part II, col (c), Other (specify)			F If the	foundation is in a 60-mont	h termination
lın	e 16) ►		oe on cash basis)		under	section 507(b)(1)(B), che	ck here
Pa	rt I	Analysis of Revenue and Expenses (The	(a) Revenue and			-	(d) Disbursements
		total of amounts in columns (b), (c), and (d) may not necessarily equal	expenses per books	(b) Net inv		(c) Adjusted net income	for chantable
		the amounts in column (a) (see page 11 of the instructions) )	DOURS		/IIIC	income	purposes (cash basis only)
		Contributions, gifts, grants, etc , received (attach schedule)					
	2	Check   If the foundation is not required to attach Sch B					
	3	Interest on savings and temporary cash investments	8,025		8,025		
	4	Dividends and interest from securities	8,136		8,136		
	5a	Gross rents					
Ф	b	Net rental income or (loss)					
Revenue	6a	Net gain or (loss) from sale of assets not on line 10 STMT 1	-90,158				
	b	Gross sales price for all assets on line 6a 294, 942					
æ	7	Capital gain net income (from Part IV, line 2)			57		
)	8	Net short-term capital gain RECEIVED				0	
)	9	Income modifications					
•	10a	Gross sales less returns & allowances Less Cost of goods son JIIN 2 1 2010					
•	b						
, ,	С	Gross profit or (loss) (attach schedule)					
-	11	Other income (attach sched@GDEN, UT					
	12	Total. Add lines 1 through 11	-73,997	····	16,218	Ö	
- ອ ທ	13	Compensation of officers, directors, trustees, etc.		<u> </u>			
enses	14	Other employee salaries and wages					
٠Ë		Pension plans, employee benefits .					
X		Legal fees (attach schedule)					
ЭЩ		Accounting fees (attach schedule) STMT 2	1,250				
Ě	С	Other professional fees (attach schedule) STMT 3	1,563		1,563		
Ta.	17	Interest					
is		Taxes (attach schedule) (see page 14 of the instructions)					
Ξ	19	Depreciation (attach schedule) and depletion				···	
Þ	20	Occupancy .					
7 0		Travel, conferences, and meetings				·	
an	22	Printing and publications					
Operating and Administrative	23	Other expenses (att sch ) STMT 4	10				
Ĭ	24	Total operating and administrative expenses.					
ers		Add lines 13 through 23	2,823		1,563		0
Ç		Contributions, gifts, grants paid	40,000				40,000
	26	Total expenses and disbursements. Add lines 24 and 25	42,823		1,563	0	40,000
	27	Subtract line 26 from line 12 <sup>-</sup>					
	a	Excess of revenue over expenses and disbursements	-116,820				
	b	Net investment income (if negative, enter -0-)			14,655		
	С	Adjusted net income (if negative, enter -0-)				0	
							<b></b>

39-6057530 JOHN OSTER FAMILY FOUNDATION, INC. Form 990-PF (2009) Page 2 Beginning of year End of year Balance Sheets Attached schedules and amounts in the description column Part II should be for end-of-year amounts only (See instructions) (a) Book Value (b) Book Value (c) Fair Market Value 3,460 851 3,460 1 Cash-norf-interest-bearing 5,495 Savings and temporary cash investments 52.573 5,495 2 3 Accounts receivable ▶ Less allowance for doubtful accounts Pledges receivable ▶ Less allowance for doubtful accounts ▶ 5 Grants receivable Receivables due from officers, directors, trustees, and other disqualified persons (attach schedule) (see page 16 of the Other notes and loans receivable (att. schedule) Less allowance for doubtful accounts Inventories for sale or use 8 9 Prepaid expenses and deferred charges STMT 175,009 150,010 150,000 Investments—U S and state government obligations (attach schedule) 10a 525,505 435,156 SEE STMT 470,300 b Investments—corporate stock (attach schedule) SEE STMT 145,142 189,419 182,851 C Investments—corporate bonds (attach schedule) 11 Investments-land, buildings, and equipment, basis Less accumulated depreciation (attach sch.) 12 Investments-mortgage loans 13 Investments-other (attach schedule) 14 Land, buildings, and equipment basis Less accumulated depreciation (attach sch.) SEE STATEMENT 8 2,303 1,270 1,270 15 Other assets (describe ▶ ) 16 Total assets (to be completed by all filers—see the 901,383 784,810 813,376 instructions Also, see page 1, item I) 17 Accounts payable and accrued expenses 18 Grants payable 19 Deferred revenue 20 Loans from officers, directors, trustees, and other disqualified persons Mortgages and other notes payable (attach schedule) 21 22 Other liabilities (describe ) 0 23 Total liabilities (add lines 17 through 22) Foundations that follow SFAS 117, check here ▶ Balances and complete lines 24 through 26 and lines 30 and 31. Unrestricted 24 25 Temporarily restricted 26 Permanently restricted Fund X Foundations that do not follow SFAS 117, check here ▶ and complete lines 27 through 31. 5 70,000 70,000 27 Capital stock, trust principal, or current funds Paid-in or capital surplus, or land, bldg., and equipment fund Assets 28 831,383 714,810 29 Retained earnings, accumulated income, endowment, or other funds 30 Total net assets or fund balances (see page 17 of the Net 901,383 784,810 instructions) 31 Total liabilities and net assets/fund balances (see page 17 901,383 784,810 of the instructions) 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 901,383 end-of-year figure reported on prior year's return) -116,820 2 Enter amount from Part I, line 27a 2 SEE STATEMENT 9 Other increases not included in line 2 (itemize) 3 991 4 785 554 Add lines 1, 2, and 3

SEE STATEMENT 10

Total net assets or fund balances at end of year (line 4 minus line 5)—Part II, column (b), line 30

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744 784,810

5

6

5 Decreases not included in line 2 (itemize) ▶

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

<u> Form</u>	990-PF (2009) JOHN OSTER FAMILY FOUNDATION, INC. 39-6057530			P	age <b>4</b>		
Pa	rt VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948—see page 18 of the inst	tructions)					
1a	Exempt operating foundations described in section 4940(d)(2), check here ▶ and enter "N/A" on line 1						
	Date of ruling of determination letter (attach copy of letter if necessary—see instructions)	}					
_	TAP						
Ь		<del>'  </del>			13/		
	· · · · · · · · · · · · · · · · · · ·						
С	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	_		0		
3	Add lines 1 and 2	3		:	147		
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			147		
6	Credits/Payments.						
	2009 estimated tax payments and 2008 overpayment credited to 2009 6a 778						
a							
b	Exempt foreign organizations—tax withheld at source	İ					
С	Tax paid with application for extension of time to file (Form 8868)						
d	Backup withholding erroneously withheld 6d 6d						
7	Total credits and payments Add lines 6a through 6d	7			<u>778</u>		
8	Enter any penalty for underpayment of estimated tax. Check here 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		10			631		
	· · · · · · · · · · · · · · · · · · ·	11			481		
11 Do	rt VII-A Statements Regarding Activities	<u>''</u>			301		
1a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it			Yes	No		
	participate or intervene in any political campaign?		1a		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)?		1b		X		
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials						
	published or distributed by the foundation in connection with the activities						
С	Did the foundation file Form 1120-POL for this year?		1c		х		
d	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year		<b>├</b> ~				
u							
	(1) On the foundation. ▶ \$ (2) On foundation managers ▶ \$						
е	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?		2		X		
	If "Yes," attach a detailed description of the activities						
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of						
	incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes		3		X		
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?		4a		X		
b	If "Yes," has it filed a tax return on Form 990-T for this year?	N/A	4b	-			
	·	,	5		X		
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?				<del>                                     </del>		
	If "Yes," attach the statement required by General Instruction T						
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either						
	By language in the governing instrument, or		l l				
	By state legislation that effectively amends the governing instrument so that no mandatory directions that						
	conflict with the state law remain in the governing instrument?		6	X	<b>]</b>		
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		7	X			
8a	Enter the states to which the foundation reports or with which it is registered (see page 19 of the						
•	instructions) ► NONE						
	,						
þ	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General		_	v			
	(or designate) of each state as required by General Instruction G? If "No," attach explanation		8b	X	$\vdash$		
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		}		1		
	27)? If "Yes," complete Part XIV		9		X		
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their	•					
	names and addresses		10		х		
	Trained and described		m 99	n.PF			
		FC	,,,,,, A.A.		(2003)		

Form	990-PF (2009) JOHN OSTER FAMILY FOUNDATION, INC. 39-6057	530			Р	age 5
_Pa	art 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 applica-	ation?		13	_X	
	Website address ► NO WEBSITE					
14		elephone no 🕨	414-6	71-	680	0
	PO BOX 340035					
	Located at ► MILWAUKEE, WI	ZIP+4 ▶	53234	1		
15	Section 4947(a)(1) nonexempt chantable trusts filing Form 990-PF in lieu of Form 1041—Check here		1			▶ _
	and enter the amount of tax-exempt interest received or accrued during the year	<u> </u>	15			
<u> Pa</u>	art VII-B Statements Regarding Activities for Which Form 4720 May Be Require	ed				<del></del>
	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?	∐ Yes	X No			
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a		==	ļ		
	disqualified person?	Yes	X No			
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?	Yes	X No			
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?	∐ Yes	X 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)?	∐ Yes	X 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.)	Yes	X No			}
ь.	If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulat		X No			
þ	section 53 4941(d)-3 or in a current notice regarding disaster assistance (see page 20 of the instructions)?	uons	N/A	1b		
	Organizations relying on a current notice regarding disaster assistance (see page 20 of the instructions).		►	10		$\vdash$
С	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that					ĺ
Ŭ	were not corrected before the first day of the tax year beginning in 2009?		N/A	1c		
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private	•	,	<del></del> -		<del>                                     </del>
_	operating foundation defined in section 4942(j)(3) or 4942(j)(5))					
а	At the end of tax year 2009, did the foundation have any undistributed income (lines 6d and			ŀ		
	6e, Part XIII) for tax year(s) beginning before 2009?	Yes	X No			
	If "Yes," list the years ▶ 20 , 20 , 20 , 20		<u> </u>			
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			Ì		
	all years listed, answer "No" and attach statement—see page 20 of the instructions)		N/A	2b		
c	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here					
	<b>▶</b> 20 , 20 , 20 , 20					
3a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise					
	at any time during the year?	Yes	X No			
þ	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 penod (or longer penod approved by the					
	Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest, or (3) the lapse of	Ī				
	the 10-, 15-, or 20-year first phase holding period? (Use Schedule C, Form 4720, to determine if the		- /-			<u> </u>
	foundation had excess business holdings in 2009 )	_	N/A	3b	ļ	-
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purpose			4a		X
b	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its			ا ا		
	chantable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2	20097		4b	0 PE	X
			Fo	m 33	U-FF	(2009)

		FAMILY FOUNDATION,		057530			Page 6
_Pa	art VII-B Statements Regar	ding Activities for Which Forn	n 4720 May Be R	equired (conti	nued)		_
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))?		res X No		
	(2) Influence the outcome of any speci	fic public election (see section 4955), or	to carry on,	_			
	directly or indirectly, any voter regis	stration drive?			res X No		
	(3) Provide a grant to an individual for	travel, study, or other similar purposes?			res X No		
	(4) Provide a grant to an organization	other than a chantable, etc , organization	described in				
	section 509(a)(1), (2), or (3), or sec	ction 4940(d)(2)? (see page 22 of the ins	tructions)		res X No		
	(5) Provide for any purpose other than	religious, charitable, scientific, literary, o	r educational		_	1	
	purposes, or for the prevention of o	cruelty to children or animals?		П	res X No	- 1	
b	If any answer is "Yes" to 5a(1)-(5), did a	any of the transactions fail to qualify unde	er the exceptions desc	nbed in		ļ	
		rent notice regarding disaster assistance			N/A	5b	
	Organizations relying on a current notice	e regarding disaster assistance check he	ere	,	<b>▶</b> □		1
С	If the answer is "Yes" to question 5a(4)	, does the foundation claim exemption fro	om the tax				
	because it maintained expenditure resp			N/A 🗍	res No		
	If "Yes," attach the statement required I			, Ц			1
6a		eive any funds, directly or indirectly, to pa	av premiums				
	on a personal benefit contract?	, , , , , , , , , , , , , , , , , , , ,	,,		res X No	į	
b	·	premiums, directly or indirectly, on a pe	rsonal benefit contract			6Ь	x
	If "Yes" to 6b, file Form 8870	, ,				-	<del>-  </del> -
7a	•	e foundation a party to a prohibited tax sh	elter transaction?	П	res X No		
b		oceeds or have any net income attributa			N/A	7b	
Pa		Officers, Directors, Trustees, F					<u> </u>
	and Contractors	,,,,,		go.o,g, .	aid Employe	,	
1 L	List all officers, directors, trustees, fou	indation managers and their compens	sation (see page 22 o	f the instructions	3).		
					(d) Contributions to		
	(a) Name ar	nd address	(b) Title, and average hours per week	(c) Compensation (If not paid, enter	employee benefit		nse account,
			devoted to position	-0-)	plans and deferred compensation	other a	allowances
			<del></del>		Li		
00	OHN OSTER	MILWAUKEE	TRUSTEE				
	OHN OSTER  D BOX 340035		TRUSTEE 2.00	0	0		n
		MILWAUKEE FL 53234	TRUSTEE 2.00	0	0		0
			1	0	. 0		0
			1	0	0		0
			1	0	0		0
			1	0	0		0
			1	0	0		0
	BOX 340035	FL 53234	2.00				0
	BOX 340035  Compensation of five highest-paid e		2.00				0
	BOX 340035	FL 53234	2.00		ons).		0
	Compensation of five highest-paid e If none, enter "NONE."	FL 53234	2.00 on line 1—see page 2	3 of the instructi	ons).  (d) Contributions to employee benefit		nse account,
	BOX 340035  Compensation of five highest-paid e	FL 53234	2.00		ons).  (d) Contributions to employee benefit plans and deferred		
	Compensation of five highest-paid e If none, enter "NONE."  (a) Name and address of each em	FL 53234	2.00 on line 1—see page 2 (b) Title, and average hours per week	3 of the instructi	ons).  (d) Contributions to employee benefit		nse account,
	Compensation of five highest-paid e If none, enter "NONE."	FL 53234	2.00 on line 1—see page 2 (b) Title, and average hours per week	3 of the instructi	ons).  (d) Contributions to employee benefit plans and deferred		nse account,
	Compensation of five highest-paid e If none, enter "NONE."  (a) Name and address of each em	FL 53234	2.00 on line 1—see page 2 (b) Title, and average hours per week	3 of the instructi	ons).  (d) Contributions to employee benefit plans and deferred		nse account,
	Compensation of five highest-paid e If none, enter "NONE."  (a) Name and address of each em	FL 53234	2.00 on line 1—see page 2 (b) Title, and average hours per week	3 of the instructi	ons).  (d) Contributions to employee benefit plans and deferred		nse account,
	Compensation of five highest-paid e If none, enter "NONE."  (a) Name and address of each em	FL 53234	2.00 on line 1—see page 2 (b) Title, and average hours per week	3 of the instructi	ons).  (d) Contributions to employee benefit plans and deferred		nse account,
	Compensation of five highest-paid e If none, enter "NONE."  (a) Name and address of each em	FL 53234	2.00 on line 1—see page 2 (b) Title, and average hours per week	3 of the instructi	ons).  (d) Contributions to employee benefit plans and deferred		nse account,
	Compensation of five highest-paid e If none, enter "NONE."  (a) Name and address of each em	FL 53234	2.00 on line 1—see page 2 (b) Title, and average hours per week	3 of the instructi	ons).  (d) Contributions to employee benefit plans and deferred		nse account,
	Compensation of five highest-paid e If none, enter "NONE."  (a) Name and address of each em	FL 53234	2.00 on line 1—see page 2 (b) Title, and average hours per week	3 of the instructi	ons).  (d) Contributions to employee benefit plans and deferred		nse account,
	Compensation of five highest-paid e If none, enter "NONE."  (a) Name and address of each em	FL 53234	2.00 on line 1—see page 2 (b) Title, and average hours per week	3 of the instructi	ons).  (d) Contributions to employee benefit plans and deferred		nse account,
	Compensation of five highest-paid e If none, enter "NONE."  (a) Name and address of each em	FL 53234	2.00 on line 1—see page 2 (b) Title, and average hours per week	3 of the instructi	ons).  (d) Contributions to employee benefit plans and deferred		nse account,

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Form 990-PF (2009) JOHN OSTER FAMILY FOUNDATION, INC. 39-6057530	Page 7
Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid	
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	e (c) Compensation
NONE	
· ·	
·	
Total number of others receiving over \$50,000 for professional services	<u> </u>
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 N/A	
2	
·	
3	
4 _	
	<u>l</u>
Part IX-B Summary of Program-Related Investments (see page 24 of the instructions)	<del>-  </del>
Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2	Amount
1 N/A	
<b>2</b>	
•	
All other program related expertments. See page 24 of the instructions	
All other program-related investments. See page 24 of the instructions  3	
·	

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Total. Add lines 1 through 3

Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4

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

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)

Adjusted qualifying distributions. Subtract line 5 from line 4

qualifies for the section 4940(e) reduction of tax in those years

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4

6

40,000

853

5

19,343

6,876

7,378

5,089

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d

applied on line 5 or line 7 (see page 27 of the

Excess distributions carryover to 2010. Subtract lines 7 and 8 from line 6a

instructions)

Analysis of line 9 Excess from 2005

Excess from 2006

Excess from 2007 Excess from 2008

Excess from 2009

3448F 06/07/2010 2 19 PM

Page 11

Part XV Supplementary Information (co	ntinued)			
3 Grants and Contributions Paid During the	Year or Approved for Fu	ture Payment		
Recipient	If recipient is an individual, show any relationship to any foundation manager	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	or substantial contributor	recipient		
a Paid during the year SEE STATEMENT 11	of Substantial Contributor			40,000
Total			<b>▶</b> 3a	40,000
b Approved for future payment N/A				
Total	····	·	<b>▶</b> 3b	·····
DAA				Form 990-PF (2009

DAA

Part XVI-A	Analysis of Income-Producing Acti	vities				
	punts unless otherwise indicated.		d business income	Exclude	by section 512, 513, or 514	(e)
'	•	(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	Related or exempt function income (See page 28 of
1 Program se	rvice revenue					the instructions )
a						
						<del></del>
d						
e						<del></del>
f						
g Fees ar	nd contracts from government agencies		· · · · · · · · · · · · · · · · · · ·			
2 Membership	dues and assessments			<u> </u>		
3 Interest on s	savings and temporary cash investments		· · · · · · · · · · · · · · · · · · ·	14	8,025	
4 Dividends a	nd interest from securities			14	8,136	
5 Net rental in	come or (loss) from real estate					
a Debt-fin	anced property					
<b>b</b> Not deb	t-financed property					
	come or (loss) from personal property					
7 Other invest			_			
	s) from sales of assets other than inventory			14	-90,158	
	or (loss) from special events					
	or (loss) from sales of inventory					
	ue a					
<u> </u>						-
12 Subtotal Ac	Id columns (b), (d), and (e)		0		-73,997	0
	ine 12, columns (b), (d), and (e)	L		·		-73,997
	in line 13 instructions on page 28 to verify calculations	٠ ١	•	••		
Part XVI-B			ent of Exempt Pu	rnoses	:	
Line No. ▼	Explain below how each activity for which income is accomplishment of the foundation's exempt purpos	reported in col	umn (e) of Part XVI-A	contribute	ed importantly to the	the
	instructions )		·			
N/A						
	<u>-</u>					
			,,,,,			- <u></u> -
						<del></del>
	1					
	<u> </u>					
					<u></u> _	

P	art XVII	Information Regardante	_	ansfers To and T	ransaction	s and F	Relationships With No	oncharitable		<u>.go .o</u>
1	Did the o	rganization directly or indir		in any of the following	with any other	r organiza	ation described		Yes	No
		501(c) of the Code (other								
_	-		tion to a nor	ochantable evemnt orga	anization of					1
а	a Transfers from the reporting foundation to a noncharitable exempt organization of.									
	(1) Cash							<u>1a</u>		X
	(2) Othe		-					<u>1a</u>	(2)	X
þ	Other tra	nsactions:								1
	(1) Sales	s of assets to a nonchanta	ble exempt o	rganization				<u>16</u>	(1)	X
	(2) Purc	hases of assets from a no	nchantable e	xempt organization				1b	(2)	X
	(3) Rent	al of facilities, equipment,	or other asse	ets				15	(3)	X
	(4) Reim	bursement arrangements						15	(4)	X
	(5) Loan	s or loan guarantees						16	(5)	X
	(6) Perfo	rmance of services or me	mbership or	fundraising solicitation	s .	•	·	16		X
С	Sharing o	of facilities, equipment, ma	iling lists, oth	er assets, or paid emp	loyees		•		c	X
	_		-	-	•	(b) should	d always show the fair marke			
		=					on received less than fair mar			
			_				other assets, or services rece			
	(a) Line no	(b) Amount involved	I	of noncharitable exempt of			Description of transfers, transact		ngements	
1/	· · · · · · · · · · · · · · · · · · ·	(b) / thount involved	(c) Numb	or nonchantable exempt e	ngunization	<u>(u,</u>	bescription of transiers, transact	ions, and snaring and	ingements	·
N/							· · · · · · · · · · · · · · · · · · ·			
	<del></del>							<del></del> _		
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	la tha far		l. efflored a							
Za		indation directly or indirect	•				anizations		15	<b>.</b>
		d in section 501(c) of the C		nan section 501(c)(3))	or in section 5	27?			Yes 2	No No
b	If "Yes,"	complete the following sch	edule				<del></del>			
		(a) Name of organization		(b) Type of organ	nization		(c) Description o	f relationship		
	N/A							<del></del>		
								<del></del>		
	Under pen	alties of perjury, I declare that	I have examin	ed this return, including ac	companying sch	nedules and	d statements, and to the best of m	y knowledge and		
	belief, it is	true, correct, and complete D	eclaration of p	reparer (other than taxpay	er or figurally) is	s based on	all information of which preparer	has any knowledge		
	<b>\</b> /	John KI			16/15	10	I HEEL	SIDENT		
ا ه	Signa	ture of officer or trustee		~	Date	+	Title	- I let berit W. L.		
Here	7	<del>-)</del>	7	<del></del>	-			Preparer's i	lentifyina	
		Droporodo Nati	L 1			"	Check If	number (se	Signature	on .
Sign	.r.'s   ≥	Preparer's signature	7 1.1	8/		,	self-employed	page 30 of		
ัด	Paid Preparer's Use Only	Signature V		70			06/07/10	P006	<u>7503</u>	
	P P P P P P P P P P P P P P P P P P P	Firm's name (or yours if	BUNTIN	•			۲			
	ارة	self-employed), address,	230 E					EIN ► 59-0		
		and ZIP code	LAKE	WALES, FL	33853-	3714		Phone no 863-	676~'	7981

3448E JOHN OSTER FAMILY FOUNDATION, INC. 39-6057530 FYE: 12/31/2009

Sale of Assets
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- Sale o
69
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Part 1.
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Form
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State

	Net Gain / Loss	\$ -78,621	-11,594	57	5 -90,158		Charitable Purpose		0
	Depreciation	٥			\$ 0		Adjusted Net	φ'	\$ 0
	Expense	₩.			\$P	counting Fees	A	φ.	\$ 0
	Cost	261,977 \$	123,123		385,100 \$	, Line 16b - Acc	Net Investment	\$	S.
How Received	Sale Price	PURCHASE 183,356 \$	111,529	PURCHASE 57	294,942 \$	Statement 2 - Form 990-PF, Part I, Line 16b - Accounting Fees	Total	1,250	1,250
	Date Sold	VARIOUS \$	VARIOUS		<b>ا</b> ئې ا	Statement 2 -			ν <sub>ν</sub>
Description	Date Acquired	VARIOUS	VARIOUS	BUTION			Ľ	FEES	
	Whom Sold	SCHEDULE ATTACHED	SCHEDOLE ATTACHED	CAPITAL GAIN DISTRIBUTION	TOTAL		Description	INDIRECT ACCOUNTING FEES	TOTAL

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Charitable Purpose	\$	\$
Adjusted Net	\$	& O
Net vestment	1,563	1,563
듸	φ	w
Total	1,563	1,563
	တ	\$
Description	MANAGEMENT FEES	TOTAL

### Realized Gains and Losses From 01/01/2009 to 12/31/2009

Oster John, Family Foundation Inc RBC Acct #: 80201883

## Realized Gains and Losses

Description	Date Acquired	Date Sold	Ouantity	Net Proceeds	Cost	Short Term Gains	Total Long Gains	Total Gains
Dodge & Cox Stool Engl	04/08/2004	0002/02/50	213 779	24 129 02	37 518 00		-13 388 08	-13 388 08
Dodge & Cox Stock Fund	06/28/2004	05/20/2009	926.0	75.06	116.08		-41.02	-41.02
Dodge & Cox Stock Fund	10/01/2004	05/20/2009	0.985	75.76	116.44		-40.68	-40.68
Dodge & Cox Stock Fund	11/10/2004	05/20/2009	158.755	12,209.91	20,000.00		-7,790.09	-7,790.09
Dodge & Cox Stock Fund	12/31/2004	05/20/2009	1 566	120.44	204.01		-83.57	-83.57
Dodge & Cox Stock Fund	12/31/2004	05/20/2009	4.406	338.87	574.08		-235.21	-235.21
Dodge & Cox Stock Fund	12/31/2004	05/20/2009	7.647	588.13	996.33		-408.20	-408.20
Dodge & Cox Stock Fund	03/31/2005	05/20/2009	0 561	43.14	71.26		-28.12	-28.12
Dodge & Cox Stock Fund	03/31/2005	05/20/2009	1.612	123.98	204.99		-81.01	-81.01
Dodge & Cox Stock Fund	03/31/2005	05/20/2009	2.319	178.35	294.79		-116.44	-116.44
Dodge & Cox Stock Fund	06/28/2005	05/20/2009	1.626	125.05	211.80		-86.75	-86.75
Dodge & Cox Stock Fund	09/30/2005	05/20/2009	1.576	121 21	212.50		-91.29	-91.29
Dodge & Cox Stock Fund	12/30/2005	05/20/2009	0 341	26 23	47.10		-20.87	-20.87
Dodge & Cox Stock Fund	12/30/2005	05/20/2009	1.509	116.06	208.22		-92.16	-92.16
Dodge & Cox Stock Fund	12/30/2005	05/20/2009	8 948	688 20	1,234.44		-546.24	-546.24
Dodge & Cox Stock Fund	03/31/2006	05/20/2009	0.909	69.91	130.69		-60.78	<del>-</del> 60.78
Dodge & Cox Stock Fund	03/31/2006	05/20/2009	1.479	113.75	212.75		-99.00	-99.00
Dodge & Cox Stock Fund	06/30/2006	05/20/2009	1 727	132.83	249.38		-116.55	-116.55
Dodge & Cox Stock Fund	00/26/2006	05/20/2009	2.269	174.51	342.15		-167.64	-167.64
Dodge & Cox Stock Fund	12/29/2006	05/20/2009	0.822	63.22	126.70		-63.48	-63.48
Dodge & Cox Stock Fund	12/29/2006	05/20/2009	1.798	138 29	276 99		-138.70	-138.70
Dodge & Cox Stock Fund	12/29/2006	05/20/2009	21.324	1,640.04	3,285.38		-1,645.34	-1,645.34
Dodge & Cox Stock Fund	03/30/2007	05/20/2009	0.361	27.77	55.84		-28.07	-28.07
Dodge & Cox Stock Fund	03/30/2007	02/20/2009	3.302	253.96	510.58		-256.62	-256.62
Dodge & Cox Stock Fund	12/31/2007	05/20/2009	2.923	224.81	407.03		-182.22	-182.22
Dodge & Cox Stock Fund	12/31/2007	05/20/2009	44.461	3,419.52	6,190.34		-2,770.82	-2,770.82
Dodge & Cox Stock Fund	03/31/2008	05/20/2009	0.245	18.84	28.81		-6 6-	-9.97
Dodge & Cox Stock Fund	03/31/2008	05/20/2009	20.427	1,571.05	2,398.17	ı	-827.12	-827.12
			608.603	46,807.91	76,224.85		-29,416.94	-29,416.94
FNMA 01/23/2009 5 00%	04/19/2007	01/23/2009	25,000.000	25,000.00	24,999 00		1.00	1.00
General Electric Capital Corp 09/15/2009 4.625%	03/29/2007	09/15/2009	45,000 000	45,000 00	44,776.40		223 60	223 60
Longleaf Partners Fund	04/05/2004	05/22/2009	1,017.131	18,982.00	31,551.40		-12,569.40	-12,569.40
Longleaf Parmers Fund	04/05/2004	06/16/2009	433.546	8,332.09	13,448.60		-5,116.51	-5,116.51

### **Realized Gains and Losses** From 01/01/2009 to 12/31/2009

Oster John, Family Foundation Inc RBC Acct #: 80201883

## Realized Gains and Losses

Description	Date Acquired	Date Sold	Quantity	Net Proceeds	Cost	Short Term Gains	Total Long Gains	Total Gains
Longleaf Partners Fund	06/09/2004	06/16/2009	1,126.516	21,649 91	34,403.80	•	-12,753.89	-12,753.89
			1,560.062	29,982.00	47,852.40	•	-17,870.40	-17,870.40
		•	2,577.193	48,964.00	79,403.80	1	-30,439.80	-30,439.80
Primecap Odyssey Aggrssv Gr	10/31/2008	05/20/2009	3,065 539	30,392.15	29,018.00	1,374.15		1,374 15
Royce Opportunity Fund - Inv Royce Opportunity Fund - Inv	02/21/2006 12/07/2006	05/18/2009 05/18/2009	2,137 067 22 417	13,621.37 142.88	29,018 00 293 21		-15,396.63 -150.33	-15,396.63 -150.33
Royce Opportunity Fund - Inv Royce Opportunity Fund - Inv	12/07/2006 12/11/2007	05/18/2009 05/18/2009	232 463 52 918	1,481.68 337.30	3,040.62 600 62		-1,558.94 -263.32	-1,558.94 -263.32
Royce Opportunity Fund - Inv Royce Opportunity Fund - Inv Royce Opportunity Fund - Inv	12/11/2007 12/09/2008 12/09/2008	05/18/2009 05/18/2009 05/18/2009	313 967 21.758 155.536	2,001 19 138.69 991.37	3,563.52 115.32 824 34	23 37	-1,562.33	-1,562.33 23.37 167.03
		•	2,936.126	18,714.48	37,455.63	190.40	-18,931.55	-18,741.15
T. Rowe Price New Era Fund	08/13/2008	05/22/2009	541 311	18,982.00	31,204.80	-12,222.80		-12,222.80
Vanguard Growth Index - Investor	10/31/2008	05/18/2009	2,815 622	61,024.68	62,018.00	-993.32		-993.32
Short Term Gains				111,528.89	123,180.46	-11,651.57		
Total Long Gains				183,356.33	261,920.02		-78,563.69	
Total (Sales)				294,885.22	385,100.48	-11,651.57	-78,563.69	-90,215.26
			Capital Gain Distributions	stributions				
Description		Pay Date				Short Term Gains	Total Long Gains	Total Gains
Franklin Mutual Global Discovery Fd Class Z		09/03/2009				12.02		12.02

## Realized Gains and Losses From 01/01/2009 to 12/31/2009

Oster John, Family Foundation Inc RBC Acct #: 80201883

## Capital Gain Distributions

Description	Pay Date	Short Term Gains	Total Long Gains	Total Gains
T. Rowe Price New Era Fund	12/17/2009	45.35		45.35
Total (Distributions)		57.37		57.37
Total Gains		-11,594.20	-78,563.69	-90,157.89

3448E JOHN OSTER FAMILY FOUNDATION, INC. 39-6057530 FYE: 12/31/2009

Federal Statements

- Other Expenses
, Part I, Line 23
I - Form 990-PF, I
Statement 4

Charitable Purpose	w w
Adjusted Net	y w
Net Investment	\$ \$
Total	\$ 10
Description	EXPENSES STATE CORP FEE TOTAL

3448E JOHN OSTER FAMILY FOUNDATION, INC.
39-6057530 Federal Statements

39-6057530

FYE: 12/31/2009

Description							
		Beginning of Year		End of Year	Basis of Valuation		Fair Market Value
	\$_	175,009	\$	150,010	COST	\$_	150,000
TOTAL	\$=	175,009	\$	150,010		\$_	150,000
Statement 6 - Forr	n 990-PF,	Part II, Line 10t	o - Co	rporate Stoc	k Investme	nts	
Description		<del></del>					
	_	Beginning of Year		End of Year	Basis of Valuation	_	Fair Market Value
	\$_	525,505	\$	435,156	COST	\$_	470,300
TOTAL	\$_	525,505	\$	435,156		\$_	470,300
Description	m 990-PF	, Part II, Line 10	<u>c - Co</u>	rporate Bon	d Investme	<u>nts</u>	
	m 990-PF.	 Beginning	<u>c - Co</u>	End of	Basis of	<u>nts</u>	Fair Market Value
	-	Beginning of Year	s - Co	End of Year	Basis of Valuation	<u>nts</u> - \$	Value
	m 990-PF.	 Beginning		End of	Basis of Valuation	_	Value 182,851
Description  TOTAL	\$ \$_ \$_	Beginning of Year	\$ \$ \$	End of Year 189,419 189,419	Basis of Valuation COST	- \$_	Value 182,851
Description  TOTAL	\$ \$_ \$_	Beginning of Year 145,142 145,142 n 990-PF, Part II.	\$ \$ \$	End of Year 189, 419 189, 419 <b>15 - Other A</b>	Basis of Valuation COST	- \$_	Value 182,851
Description  TOTAL  Statemen	\$_ \$_ nt 8 - Forn	Beginning of Year 145,142 145,142 n 990-PF, Part II.	\$, Line nning /ear	End of Year 189, 419 189, 419 15 - Other A	Basis of Valuation COST ssets	- \$_	Value  182,851  182,851  Fair Market Value  639
Description  TOTAL  Statemer  Description  ACCRUED INTEREST RECEIVABI	\$_ \$_ nt 8 - Forn	Beginning of Year 145,142 145,142 n 990-PF, Part II Begin	\$, Line nning /ear	End of Year  189,419  189,419  15 - Other A  E  01 \$ 02	Basis of Valuation COST  ssets End of Year 639	\$_ \$_ =	Value  182,851  182,851  Fair Market
Description  TOTAL  Statemen  Description  ACCRUED INTEREST RECEIVABIES PREPAID EXCISE TAX  TOTAL	\$_ \$_ nt 8 - Forn	Beginning of Year  145,142  145,142  1990-PF, Part II  Beginning of Year	\$	End of Year  189,419  189,419  15 - Other A  E  01 \$ 02  03 \$	Basis of Valuation  COST  Ssets End of Year  639 631 1,270	\$ \$ \$ <b>*</b>	Value  182,851  182,851  Fair Market Value  639 631
Description  TOTAL  Statemer  Description  ACCRUED INTEREST RECEIVABIES PREPAID EXCISE TAX  TOTAL	\$_ \$_ nt 8 - Forn	Beginning of Year 145,142 145,142 n 990-PF, Part II Begin of N	\$	End of Year  189,419  189,419  15 - Other A  E  01 \$ 02  03 \$	Basis of Valuation  COST  Ssets End of Year  639 631 1,270	\$ \$ \$ <b>*</b>	Value  182,851  182,851  Fair Market Value  639 631

3448E JOHN OSTER FAMILY FOUNDATION, INC.

FYE: 12/31/2009

39-6057530

**Federal Statements** 

#### Statement 10 - Form 990-PF, Part III, Line 5 - Other Decreases

Description	Am	ount
EXCISE TAX-PRIOR YEAR	\$	502
PRIOR YEAR PENALTY		95
EXCISE TAX- CURRENT YEAR		147
TOTAL	\$	744

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## 3448E JOHN OSTER FAMILY FOUNDATION, INC. 39-6057530 FYE: 12/31/2009

Federal Statements

Statement 11 - Form 990-PF, Part XV, Line 3a - Grants and Contributions Paid During the Year
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3448E JOHN OSTER FAMILY FOUNDATION, INC. 39-6057530 FYE: 12/31/2009

d During the	
3a - Grants and Contributions Paic	
Statement 11 - Form 990-PF, Part XV, Line	

Year (continued)

	Amount	500	1,000	1,000	200	1,000	1,500	500	500	500	) 1	500	200	200	005		1,000	500	200	200	1,000	<del>,</del>
	Purpose	EDUCATION	EDUCATION	EDUCATION	EDUCATION	EDUCATION	EDUCATION	EDUCATION	EDUCATION	EDUCATION		CIVIC ENHANCEMENT	CIVIC ENHANCEMENT	CIVIC ENHANCEMENT	FNEWECN WHAT CENTE		CIVIC ENHANCEMENT	CIVIC ENHANCEMENT	CIVIC ENHANCEMENT	CIVIC ENHANCEMENT	CIVIC ENHANCEMENT	
	Status	501(C)(3) EI	501(C)(3) EI		. (C) (3)	850 501(C)(3) EI	501(C)(3) EI			INGTON RD 501(C)(3) EI		501(C)(3) C.	501(C)(3) C	501(C)(3) C:	501 (C) (3)		501(C)(3) C: AVE NE	(c) (3)		501(C)(3) C		
Address	Relationship	E ERIE ST NONE		RIDGE AV NONE	W SCOTT ST NONE	W WELLS ST, STE NONE	BOX 393	1 NONE 501 (C) (3)	SW BLUEMOUND RD, S NONE	4425 N PORT WASHINGT NONE	2486	NONE	3	W WELLS ST NONE	LE BROWN DEER RD NONE	S 69TH ST	NONE MASSACHSETTS AVE	NONE	N PORT WASHI NONE	W WISCONSIN AVE NONE	BOX 832 NONE	
0 E E E E E E E E E E E E E E E E E E E	Address	ITUTE ART&D 273 WI 53202-6003	ENGINEER PO 53203-9758	0208-430	OL 1420 -2269	TNERS ADV VALUES IN ED 135 MILWAUKEE WI 53203	PRINCETON NJ 08542-0593	DORES FUN NORSING ED MILWAUKEE WI 53201-290	WI COUNCIL ON ECON EDU 7635 MILWAUKEE WI 53213	WI FDN OF IND COLLEGES 4425 MILWAUKER WI 53212	TUB BO	MILWAUKEE WI 53212	MILWAUKEE WI 53214-146	FRIENDS MILWAUKEE PUB MUS 800 MILWAUKEE WI 53233-1478	FRIENDS SCHLITZ AUDUBON C 1111	GIRL SCOUTS OF MILWAUKEE 131	MILWAUKEE WI 53214-0999	0002	٠,	MILWAUKEE PUB LIBRARY FDN 814 MILWAUKEE WI 53233	MOUNTAIN LAKE COM SERVICE PO E LAKE WALES FL 33859-0832	

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# 3448E JOHN OSTER FAMILY FOUNDATION, INC. 39-6057530 FYE: 12/31/2009

tement 11 - Form 990-PF, Part XV, Line 3a - Grants and Contributions Paid During the Year (continued)
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Name	Address			
Address	Relationship	Status	Purpose	Amount
NATL RIGHT WORK LEGAL DEF 800 SPRINGFIELD VA 22160	8001 BRADDOCK RD, S	STE 600 501(C)(3)	CIVIC ENHANCEMENT	200
	302 N JACKSON ST NONE	501(C)(3)	CIVIC ENHANCEMENT	200
1-90	E7475 RAWHIDE RD	501(C)(3)	CIVIC ENHANCEMENT	200
	Щ	501(C)(3)		200
TRIPOLI SHRINE CIRCUS FUN PO MILWAUKER WI 53207-0584	BOX 07584	501(C)(3)		500
UNITED PERFORMING ARTS FU 929	929 N WATER ST NONE	501(C)(3)	CIVIC ENHANCEMENT	200
UNITED WAY OF GREATER MIL 225 MILWAUKER WI 53212		501(C)(3)	CIVIC ENHANCEMENT	1,500
WMC FOUNDATION 501 MADISON WI 53703-2914	E WASHINGTON	AVE 501(C)(3)		500
	610 LANGDON ST	(O) (O) (O)		, c
MISCONSIN HUMANE SOCIETY 450	4500 W WISCONSIN AV	301(C)(3) AVE	CIVIC ENRANCEMENI	000
MILWAUKEE WI 53208-3156 WI POLICY RESEARCH INSTIT PO	56 NONE PO BOX 487	501(C)(3)	CIVIC ENHANCEMENT	200
THIENSVILLE WI 53092	NONE	501(C)(3)	CIVIC ENHANCEMENT	1,500
TAXPAYERS ALLIANCE 401 MADISON WI 53704-5033	401 N LAWN AVE NONE	501(C)(3)	CIVIC ENHANCEMENT	200
YMCA OF METRO MILWAUKEE 161	161 W WISCONSIN AVE		ENHANGEMENT	005
COOLOGICAL SOCIETY OF MIL 10005 W BLUEMOUND RD MILWAUKEE WI 53226	05 W BLUEMOUND F			1,000
TOTAL				40,000

H48E JOHN OSTER FAMILY FOUNDATION, INC. 9-6057530 Federal Statements YE: 12/31/2009			6/7/2010 2:19 PM						
Taxable Interest on Investments									
Description	Amount	Unrelated Business Code	Exclusion Code	Posta Code					
TOTAL	\$ 8,025 \$ 8,025		14						
Taxable Dividends from Securities									
Description	Amount \$ 8,136	Unrelated Business Code	Exclusion Code 14	Posta Code					
TOTAL	\$ 8,136								

Application for Extension of Time To File an Exempt Organization Return

Rev April 2009)	ľ		Exempt Organization Return			OMB NO 1545-1709		
	partment of the Treasury  Prile a separate application for each return.							
		omatic 3-Month Extension,	complete only Part I and check this box			► X		
If you are fi	ling for an Ado	ditional (Not Automatic) 3-N	fonth Extension, complete only Part II (on page 2 of this for	m).		<u> </u>		
o not comple	ete Part II unio	ess you have already been gr	anted an automatic 3-month extension on a previously filed Fo	orm 8868				
Part I	Automati	c 3-Month Extension (	of Time. Only submit original (no copies needed	i).				
A corporation re	equired to file	Form 990-T and requesting a	n automatic 6-month extension—check this box and complete					
Part I only						. ▶ 🔲		
All other corpor ime to file inco			s, REMICs, and trusts must use Form 7004 to request an exte	ension of				
Electronic Fili	ng (e-file). Ge	nerally, you can electronically	file Form 8868 if you want a 3-month automatic extension of	time to file				
			required to file Form 990-T) However, you cannot file Form 8					
-			3-month extension or (2) you file Forms 990-BL, 6069, or 8870	-				
	•		ad, you must submit the fully completed and signed page 2 (Page 2)		m			
			visit www.irs.gov/efile and click on e-file for Chanties & Nonpro	·				
ype or Name of Exempt Organization Employer identification i						fication number		
orint file by the	the JOHN OSTER FAMILY FOUNDATION, INC. 39-6057530							
lue date for iling your	e date for ng your urn See  Number, street, and room or suite no If a P.O box, see instructions  POST OFFICE BOX 340035							
nstructions	City, town or MILWAU	·	ide For a foreign address, see instructions WI 53234-0035					
heck type of	return to be 1	filed (file a separate application	on for each return)					
Form 996	כ		Form 990-T (corporation)		Ц	Form 4720		
Form 990	O-BL		Form 990-T (sec 401(a) or 408(a) trust)		Н	Form 5227		
Form 99			Form 990-T (trust other than above)		H	Form 6069		
<b>X</b> Form 99	0-PF		Form 1041-A		Ц	Form 8870		
Telephone  If the organ  If this is for for the whole go a list with the n  1 request until 0 for the or	nization does r a Group Returoup, check th ames and EIN an automatic	4-671-6800  not have an office or place of lam, enter the organization's for is box  If it is of all members the extension  3-month (6 months for a corporate to file the exempt organization).	FAX No. ▶ business in the United States, check this box our digit Group Exemption Number (GEN) is for part of the group, check this box  ▶ □ and	. If this is d attach		▶□		
<b>▶</b> □	ax year begin	• •	ending . son. Initial return Final return Chang	e in accoun	ting pend	bo		
3a If this ap	nlication is for	Form 990-RI 990-PE 990-T	, 4720, or 6069, enter the tentative tax,	<u> </u>				
•	•	e credits See instructions	, The state of the territorial tax,	3a	\$	502		
			any refundable credits and estimated tax					
•	-	de any prior year overpaymen	-	3b	\$	502		
			your payment with this form, or, if required,			<u> </u>		
			TPS (Electronic Federal Tax Payment					
="	See instruction			3с	\$	0		

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.

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

Form 8868 (Rev 4-2009)