

See a Social Security Number? Say Something! Report Privacy Problems to https://public.resource.org/privacy Or call the IRS Identity Theft Hotline at 1-800-908-4490



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

OMB No 1545-0052

Department of the Treasury Note The foundation may be able to use a copy of this return to satisfy state reporting requirements Internal Revenue Service For calendar year 2009, or tax year beginning , and ending G Check all that apply Initial return Initial return of a former public charity Final return Amended return Address change Name change Name of foundation A Employer identification number Use the IRS The Coss Foundation 41-1726797 label. C/O Garry Nietz, Cannon River Enter Otherwise. Telephone number (see page 10 of the instructions) Number and street (or P O box number if mail is not delivered to street address) 715-426-1600 print Room/suite 42 - 160th St or type. If exemption application is pending, check here See Specific City or town, state, and ZIP code 1. Foreign organizations, check here Instructions. River Falls WI 54022 2. Foreign organizations meeting the H Check type of organization: |X| Section 501(c)(3) exempt private foundation 85% test, check here and attach computation Section 4947(a)(1) nonexempt charitable trust | Other taxable private foundation If private foundation status was terminated under section 507(b)(1)(A), check here J Accounting method I Fair market value of all assets at end X Cash of year (from Part II, col (c), Other (specify) If the foundation is in a 60-month termination 413 under section 507(b)(1)(B), check here line 16) ▶ \$ (Part I, column (d) must be on cash basis) Part I Analysis of Revenue and Expenses (The (a) Revenue and (d) Disbursements (c) Adjusted net expenses per (b) Net investment for chantable total of amounts in columns (b), (c), and (d) may not necessarily equal books income ıncome purposes the amounts in column (a) (see page 11 of the instructions)) (cash basis only) Contributions, gifts, grants, etc., received (attach schedule) 310 1 Check ► X if the foundation is **not** required to attach Sch B 2 Interest on savings and temporary cash investments 3 SCANKELLEYSEN O Dividends and interest from securities 4 Gross rents Net rental income or (loss) Net gain or (loss) from sale of assets not on line 10 Gross sales price for all assets on line 6a Capital gain net income (from Part IV, line 2 O Net short-term capital gain RECEIVED 0 Income modifications ပ္တ Gross sales less returns & allowances 10a က် Less. Cost of goods sold b Gross profit or (loss) (attach Other income (attach schedule) 11 310 0 0 12 Total. Add lines 1 through 11 13 Compensation of officers, directors, trustees, etc. Operating and Administrative Expenses 14 Other employee salaries and wages 15 Pension plans, employee benefits 16a Legal fees (attach schedule) Stmt 1 310 Accounting fees (attach schedule) Other professional fees (attach schedule) 17 18 Taxes (attach schedule) (see page 14 of the instructions) 19 Depreciation (attach schedule) and depletion 20 Occupancy Travel, conferences, and meetings 22 Printing and publications 10 Stmt 2 Other expenses (att sch) Total operating and administrative expenses. 320 0 Add lines 13 through 23 0 25 Contributions, gifts, grants paid 320 0 0 26 Total expenses and disbursements. Add lines 24 and 25 27 Subtract line 26 from line 12 Excess of revenue over expenses and disbursements -10 0 Net investment income (if negative, enter -0-) 0

Adjusted net income (if negative, enter -0-)

	David 1	Attached schedules and amounts in the description column	Beginning of year	Ena c	r year
	Part :	Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only (See instructions)	(a) Book Value	(b) Book Value	(c) Fair Market Value
	1	Cash—non-interest-bearing	347	338	338
	2	Savings and temporary cash investments		ć	
	3	Accounts receivable ▶			,
		Less. allowance for doubtful accounts ▶	l i		
	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 (att. schedule)			·····
		Less allowance for doubtful accounts ▶	İ		
Ŋ	8	Inventories for sale or use			
Assets	9	Prepaid expenses and deferred charges			
As	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 sch.)			
	12	Investments—mortgage loans			
	13	Investments—other (attach schedule) See Statement 3	75	75	75
	14	Land, buildings, and equipment basis	, ,	, ,	, ,
		Less accumulated depreciation (attach sch)	İ		
	15	Other assets (describe)			
	16	Total assets (to be completed by all filers—see the			
	10	instructions Also, see page 1, item I)	422	413	413
	17	Accounts payable and accrued expenses	122	113	113
	18	Grants payable Grants payable			
Liabilities	19	Deferred revenue			
≝	20	Loans from officers, directors, trustees, and other disqualified persons			
ab	21	Mortgages and other notes payable (attach schedule)	-		
Ï	22	Other liabilities (describe			
	23	•	. 0		
	23	Total liabilities (add lines 17 through 22) Foundations that follow SFAS 117, check here ▶ X	0		
S		and complete lines 24 through 26 and lines 30 and 31.	.		
nces	24		422	413	
an		Unrestricted	422	413	
or Fund Bala	25	Temporarily restricted		 	
d l	26	Permanently restricted		······································	
n		Foundations that do not follow SFAS 117, check here ▶ □ and complete lines 27 through 31.			
rЕ	27	· -	İ		
0	27	Capital stock, trust principal, or current funds			
Net Assets	28	Paid-in or capital surplus, or land, bldg, and equipment fund			
SS	29	Retained earnings, accumulated income, endowment, or other funds			
ţ	30	Total net assets or fund balances (see page 17 of the	422	412	
Š		instructions)	422	413	
	31	Total liabilities and net assets/fund balances (see page 17	422	413	
_	Daw	of the instructions)	422	413	<u>, , , , , , , , , , , , , , , , , , , </u>
	Part				<u> </u>
1		I net assets or fund balances at beginning of year—Part II, column (a), line 30 (mu	st agree with		400
_		of-year figure reported on prior year's return)		1	422
2		er amount from Part I, line 27a		2	-10
3		er increases not included in line 2 (itemize) > See Statement 4		3	1
4		lines 1, 2, and 3		4	413
5		reases not included in line 2 (itemize)	h) line 20	5	412
_6	rota	I net assets or fund balances at end of year (line 4 minus line 5)—Part II, column (u), line 30	6	413

Part IV Capital Gains a	nd Losses for Tax on Investme	ent Income				
	be the kind(s) of property sold (e.g., real estate, whouse, or common stock, 200 shs MLC Co.)		(b) How acquired P—Purchase D—Donation	(c) Date ac (mo , day		(d) Date sold (mo , day, yr)
1a N/A '						
b ,		·				
С						
_ d	·					
е						
(e) Gross sales price	(f) Depreciation allowed (or allowable)	,	r other basis ense of sale	((h) Gain e) plus (f)	or (loss) minus (g)
_a		<u>-</u>				
_b				-		
<u>c</u>						
d		···				
Complete only for assets shown	g gain in column (h) and owned by the fo	undation on 12/31/6	80			
Complete only for assets showing						(h) gain minus less than -0-) or
(i) F M V as of 12/31/69	(j) Adjusted basis as of 12/31/69		ss of col (i) (j), if any			om col (h))
_ a						
_ b		,				
<u>c</u>						
Capital gain net income or (net capital)	apital loss) If gain, also enter in	b				
2. Not about form conital agin or (los	If (loss), enter -0- in ss) as defined in sections 1222(5) and (6		}	2		
, ,	, column (c) (see pages 13 and 17 of the	•				
If (loss), enter -0- in Part I, line 8		: iristi uctions).		3		
	nder Section 4940(e) for Reduc	ed Tax on Net	Investment Inco	-		
	nis part blank tion 4942 tax on the distributable amoun lify under section 4940(e). Do not compl		base period? Ye	s 🗓 No		
1 Enter the appropriate amount in	each column for each year, see page 18	of the instructions b	pefore making any ent	ries.		
(a) Base penod years Calendar year (or tax year beginning	(b)		(c) of nonchantable-use ass			(d) ibution ratio ivided by col (c))
2008	,			134	(00) (0) 0	(e))
2007				97		
2006				31		
2005	5	,000		299		1.515611
2004				528	-	
2 Total of line 1, column (d)		·· ······		2		1.515611
	5-year base period—divide the total on li	ine 2 by 5, or by the				
_	nas been in existence if less than 5 years	-		3		1.515611
4 Enter the net value of noncharita	ble-use assets for 2009 from Part X, line	5		4		411
5 Multiply line 4 by line 3				5		623
6 Enter 1% of net investment incor	ne (1% of Part I, line 27b)			6		
7 Add lines 5 and 6				7		623
8 Enter qualifying distributions from	n Part XII, line 4			8_		C
If line 8 is equal to or greater that Part VI instructions on page 18	n line 7, check the box in Part VI, line 1b	, and complete that	part using a 1% tax ra	ate See the	•	

Form	990-PF(2009) The Coss Foundation 41-1726797			P	age 4
Pa	Irt VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948—see page 18 of the instru	ictions)			
1a	Exempt operating foundations described in section 4940(d)(2), check here and enter "N/A" on line 1			·····	
	Date of ruling or determination letter (attach copy of letter if necessary—see instructions)				
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check	4			
	here ▶ and enter 1% of Part I, line 27b		T		
C	All other domestic foundations enter 2% of line 27b Exempt foreign organizations enter 4% of				
	Part I, line 12, col (b)				
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-)				C
3	Add lines 1 and 2		•		
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)				
5	Tax based on investment income. Subtract line 4 from line 3 If zero or less, enter -0-				
6	Credits/Payments				
а	2009 estimated tax payments and 2008 overpayment credited to 2009				
b	Exempt foreign organizations—tax withheld at source 6b				
С	Tax paid with application for extension of time to file (Form 8868) 6c				
d	Backup withholding erroneously withheld 6d				
7	Total credits and payments Add lines 6a through 6d				
8	Enter any penalty for underpayment of estimated tax. Check here			•	
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed				•
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid				
11	Enter the amount of line 10 to be. Credited to 2010 estimated tax ▶ Refunded ▶ 11		•		
Pa	rt VII-A Statements Regarding Activities				
1a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it			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		Х
	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.				
C	Did the foundation file Form 1120-POL for this year?		1c		X
d	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year:				
	(1) On the foundation. ▶ \$ (2) On foundation managers. ▶ \$				
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	ĺ			
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	Was there a liquidation, termination, dissolution, or substantial contraction during the year?		5		X
	If "Yes," attach the statement required by General Instruction T				
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either:				
	By language in the governing instrument, or				
	• By state legislation that effectively amends the governing instrument so that no mandatory directions that				
	conflict with the state law remain in the governing instrument?		6	X	ļ
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) ▶ SD				
b	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General				
	(or designate) of each state as required by General Instruction G? If "No," attach explanation	N/A	8b		<u> </u>
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or				
	4942(J)(5) for calendar year 2009 or the taxable year beginning in 2009 (see instructions for Part XIV on page				
	27)? If "Yes," complete Part XIV	.	9		X
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their				
	names and addresses		10		X

Form **990-PF** (2009)

Form				Foundati				726797				P	age 6
P	art VII-B St	tatem	ents Re	egarding Activ	ities for Which I	Form 4	720 May Be R	Required (co	ntinu	ed)			
5a	During the year of	did the f	foundatio	n pay or incur any	amount to:								
	(1) Carry on pro	pagand	la, or othe	erwise attempt to i	nfluence legislation (s	section 49	45(e))?		Yes	X No			
	(2) Influence the	outcor	me of any	specific public ele	ection (see section 49	55), or to	carry on,						
	directly or inc	directly,	, any vote	er registration drive	?				Yes	X No	1		
	(3) Provide a gra	ant to a	n individu	ual for travel, study	, or other similar purp	oses?			Yes	X No			
	(4) Provide a gra	ant to a	n organiz	ation other than a	charitable, etc , organ	nization d	escribed in	_		_			
	section 509(a)(1), (2	2), or (3),	or section 4940(d)	(2)? (see page 22 of	the instru	ctions)		Yes	X No			
					naritable, scientific, lite			_		_			
				on of cruelty to chi		•			Yes	X No			
b				=	ansactions fail to qual	lify under	the exceptions de	escribed in					
				-	egarding disaster ass		· ·			N/A	5b	1	
					disaster assistance c			,	•	· 🖂	-52		
С					oundation claim exem				•				
•				re responsibility for		p		N/A	Yes	□ No			
				=	ons section 53.4945-5	(d)		,					
6a					ids, directly or indirect		nremiums						
Ju	on a personal be			ar, roodive arry ful	ido, directly of intellect	a,, to pay	promunis		Yes	X No			
b				ar nav nremijime	directly or indirectly,	on a nere	onal benefit cont	ract?	. 63	170	6b	į į	x
.,	If "Yes" to 6b, file			ar, pay premiums,	ancony or maneony,	on a pers	onar benent WIII	-aot -			00		
7a	•			was the foundation	a party to a prohibited	d tav cha	Iter transaction?		Yes	X No			
b					ave any net income a			on?	163	N/A	7b		
					pirectors, Truste				v Pai				L
1. 4			tractors		mectors, muster	cs, i ou	indation man	agers, mgm	y i ai	a Employ	rees,		
1 1					nagers and their con	nneneati	on (see page 22	of the instructi	one)				
	List dii Omeers, di		s, trustee	23, Touridation ma	nagers and their con	IIpensaci			(4)	Contributions to	\top		
			(a) No	ame and address			(b) Title, and average hours per week	(c) Compensation (if not paid, enter	1	mployee benefit		opense a	ccount,
			(a) Na	ille allu audress			devoted to position	-0-)	pia	ans and deferred compensation	othe	er allowa	nces
								 	 '	Compensation	+		
	wrence M Coss				iver Falls	1	Pres,Sec,Tre						_
42	2 160th St			LM.	54022	+	0.04		<u> </u>		0		
								<u> </u>	-		+-		
									+	- :-	+		
					_			Į.					
2	-			oaid employees (c	ther than those inclu	uded on I	ine 1—see page	23 of the instru	ıctions	s).			
	If none, enter "N	NONE."				r							
							(b) Title, and average		1 ' 4	Contributions to mployee benefit		cpense a	ecount
	(a) Name	e and ad	dress of ea	ach employee paid m	ore than \$50,000		hours per week devoted to position	(c) Compensation	pla	ans and deferred		er allowa	
										compensation	┿		
NC	ONE												
													
						,							
					<u> </u>						Д		
								ļ			\perp		
								}					
												·	·
					== ==								
Tota	I number of other	employ	ees paid	over \$50,000								$\cdot \top$	
										F	om 99	0-PF	(2009)

Form 990-PF (20	009) The Coss Foundation	41-1726797	Page 7
Part VIII	Information About Officers, Directors, Trustees, Fou	ndation Managers, Highly Paid En	nployees,
2 Fine bimbe	and Contractors (continued)	a 22 of the instructional If name outer PAIO	ALE P
3 Five highe	est-paid independent contractors for professional services (see pag (a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE ,	(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
110112			
	·		
			
Total number of	others receiving over \$50,000 for professional services		▶
Part IX-A	Summary of Direct Charitable Activities		
	on's four largest direct charitable activities during the tax year. Include relevant station of the tax year include relevant station of the papers produced, etc.		Expenses
		<u> </u>	<u> </u>
1 N/A			
2			
3			
4			
	·		
Part IX-B	Summary of Program-Related Investments (see pa	ge 24 of the instructions)	
	largest program-related investments made by the foundation during the tax year or	n lines 1 and 2	Amount
1 N/A			
2			
All other program	n-related investments See page 24 of the instructions		
3			
Total Add lines	1 through 3	▶ 1	

Form	1 990-PF (2009) The Coss Foundation 41-1726797		Page 8
Pa	Art X Minimum Investment Return (All domestic foundations must complete this part. For	eign	foundations,
	see page 24 of the instructions.)	Ū	•
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc.,		
	purposes		r
а	Average monthly fair market value of securities	1a	, o
b	Average of monthly cash balances	1b	342
С	Fair market value of all other assets (see page 24 of the instructions)	1c	75
d	Total (add lines 1a, b, and c)	1d	417
е	Reduction claimed for blockage or other factors reported on lines 1a and		
	1c (attach detailed explanation)		
2	Acquisition indebtedness applicable to line 1 assets	2	0
3	Subtract line 2 from line 1d	3	417
4	Cash deemed held for charitable activities Enter 1½ % of line 3 (for greater amount, see page 25 of		
	the instructions)	4	6
5	Net value of noncharitable-use assets. Subtract line 4 from line 3 Enter here and on Part V, line 4	5	411
6	Minimum investment return. Enter 5% of line 5	6	21
Pa	art XI Distributable Amount (see page 25 of the instructions) (Section 4942(J)(3) and (J)(5) private of	perati	ng
	foundations and certain foreign organizations check here and do not complete this part)		
1	Minimum investment return from Part X, line 6	1	21
2a	Tax on investment income for 2009 from Part VI, line 5		
b	Income tax for 2009 (This does not include the tax from Part VI)]	
C	Add lines 2a and 2b	2c	
3	Distributable amount before adjustments Subtract line 2c from line 1	3	21
4	Recoveries of amounts treated as qualifying distributions	4	
5	Add lines 3 and 4	5	21
6	Deduction from distributable amount (see page 25 of the instructions)	6	
7	Distributable amount as adjusted Subtract line 6 from line 5. Enter here and on Part XIII,		
	line 1	7	21
D.	art XII Qualifying Distributions (see page 25 of the instructions)		
	att Att		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:		
а	Expenses, contributions, gifts, etc —total from Part I, column (d), line 26	1a	0
b	Program-related investments—total from Part IX-B	1b	
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc.,		
	purposes	2	
3	Amounts set aside for specific charitable projects that satisfy the		
а	Suitability test (prior IRS approval required)	3a	
b	Cash distribution test (attach the required schedule)	3b	
4	Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4	4	0
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income		
	Enter 1% of Part I, line 27b (see page 26 of the instructions)	5	0
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	
	Note The amount on line 6 will be used in Part V. column (b), in subsequent years when calculating whether the found	ation	

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

Form **990-PF** (2009)

Pa	irt XIII Undistributed Income (see page 26 of	the instructions)			
		(a)	(b)	(c)	(d)
1	Distributable amount for 2009 from Part XI,	Corpus	Years pnor to 2008	2008	2009
	line 7				21
2	Undistributed income, if any, as of the end of 2009				
a	Enter amount for 2008 only				
	Total for prior years 20, 20, 20				
3	Excess distributions carryover, if any, to 2009				
	From 2004 From 2005 4,835				
	From 2006				
	From 2007				
	From 2008				
_		4,835			
f 4	Total of lines 3a through e Qualifying distributions for 2009 from Part XII,	1,033			······································
•	line 4 • \$				
2	Applied to 2008, but not more than line 2a			İ	
	Applied to undistributed income of prior years				
	(Election required—see page 26 of the instructions)				
	Treated as distributions out of corpus (Election				
·	required—see page 26 of the instructions)				
Ь	Applied to 2009 distributable amount				
	Remaining amount distributed out of corpus				
5	Excess distributions carryover applied to 2009	21			21
•	(If an amount appears in column (d), the same				
	amount must be shown in column (a))				
6	Enter the net total of each column as				
	indicated below:				
а	Corpus Add lines 3f, 4c, and 4e Subtract line 5	4,814			
	Prior years' undistributed income Subtract				
	line 4b from line 2b				
С	Enter the amount of pnor years' undistributed				
	income for which a notice of deficiency has				
	been issued, or on which the section 4942(a)				
	tax has been previously assessed				
d	Subtract line 6c from line 6b. Taxable				
	amount—see page 27 of the instructions				
е	Undistributed income for 2008 Subtract line				
	4a from line 2a Taxable amount—see page				
	27 of the instructions				
f	Undistributed income for 2009 Subtract lines				
	4d and 5 from line 1. This amount must be				
	distributed in 2010				0
7	Amounts treated as distributions out of corpus				
	to satisfy requirements imposed by section				
	170(b)(1)(F) or 4942(g)(3) (see page 27 of the				
	instructions)				
8	Excess distributions carryover from 2004 not				
	applied on line 5 or line 7 (see page 27 of the				
_	instructions)				
9	Excess distributions carryover to 2010.				
	Subtract lines 7 and 8 from line 6a	4,814			
10	Analysis of line 9				
a	Excess from 2005 4,814				
þ	Excess from 2006				
C	Excess from 2007				
d	Excess from 2008				
<u>e</u>	Excess from 2009		L		<u> </u>

Pa	art XIV Private Operating Fou	undations (see pa	age 27 of the inst	ructions and Part	VII-A, question 9)
1a	If the foundation has received a ruling or	determination letter th	at it is a private opera	ting		
	foundation, and the ruling is effective for	2009, enter the date of	f the ruling	•		
b	Check box to indicate whether the foundation		-	bed in section 4	942(j)(3) or 494	2(j)(5)
2a	Enter the lesser of the adjusted net	Tax year		Prior 3 years		
	income from Part I or the minimum	(a) 2009	(b) 2008	(c) 2007	(d) 2006	, (e) Total
	investment return from Part X for			<u> </u>		· · · · ·
	each year listed	,				
b	85% of line 2a					
С	Qualifying distributions from Part XII,					
	line 4 for each year listed					
d	Amounts included in line 2c not used directly					
	for active conduct of exempt activities					
е	Qualifying distributions made directly					
	for active conduct of exempt activities.					
	Subtract line 2d from line 2c					
3	Complete 3a, b, or c for the					
	alternative test relied upon:			;		
а	"Assets" alternative test—enter					
	(1) Value of all assets			İ		
	(2) Value of assets qualifying under					
	section 4942(j)(3)(B)(i)					
b	"Endowment" alternative test—enter 2/3					
	of minimum investment return shown in				}	
	Part X, line 6 for each year listed					
С	"Support" alternative test-enter	·				
	(1) Total support other than gross					
	investment income (interest,					
	dividends, rents, payments on					
	securities loans (section					
	512(a)(5)), or royalties)					
	(2) Support from general public and 5 or more exempt					
	organizations as provided in					
	section 4942(j)(3)(B)(iii)					
	(3) Largest amount of support from					
	an exempt organization					
	(4) Gross investment income					
₽ŧ	art XV Supplementary Inform				ad \$5,000 or mor	e in assets at
	any time during the y		3 of the instruction	ons.)		
1	Information Regarding Foundation Ma	-				
а	List any managers of the foundation who				· · ·	
	before the close of any tax year (but only	if they have contribut	ed more than \$5,000)	(See section 507(d)(2	2))	
	N/A					
b	List any managers of the foundation who		<u>. </u>	, , , ,	e portion of the	
	ownership of a partnership or other entity	y) of which the foundat	tion has a 10% or grea	iter interest		
_	N/A					
2	Information Regarding Contribution, G		•			
	Check here ► X if the foundation only		·	=		
	unsolicited requests for funds. If the four			8 of the instructions) to	o individuals or	
	organizations under other conditions, co					
а	The name, address, and telephone num	ber of the person to w	nom applications shou	ild be addressed		
	N/A					
	The fame in which are less to the					
b	The form in which applications should be N/A	e submitted and inform	iauon and materials th	iey snould include		
						
С	Any submission deadlines:					
	N/A	cuch ac hy access	ical areas, chartable f	folds kinds of institute	one or other feeters	
a	Any restrictions or limitations on awards, N/A	, such as by geograph	icai areas, chantable t	ieius, kinus oi institutio	ons, or other factors	
	41/ 44					

3 Grants and Contributions Paid During the	Year or Approved for F	uture Payment		
Recipient	If recipient is an individual, show any relationship to any foundation manager	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)	or substantial contributor	recipient		
a Paid during the year				
N/A				
:				
Total			▶ 3a	
b Approved for future payment				
N/A				
		1	1	
Total			▶ 3b	- 000 DE

DAA

Part XVI-A	Analysis of Income-Producing Act	ivities				
Enter gross amo	ounts unless otherwise indicated		d business income	Exclude	d 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						thé instructions.)
b						
						<u></u>
d						
f						
g Fees ar	d contracts from government agencies				 	
-	dues and assessments					
	savings and temporary cash investments					
	nd interest from securities					
	come or (loss) from real estate					
	anced property					
	t-financed property					
	come or (loss) from personal property	··· · · · · · · · · · · · · · · · ·				
7 Other invest						
	s) from sales of assets other than inventory		· · ·			- '
	or (loss) from special events					
	or (loss) from sales of inventory					
	ue a					
				<u> </u>		
<u> </u>						
12 Subtotal Ac	ld columns (b), (d), and (e)		0		0	0
	* * * * * * * * * * * * * * * * * * * *	L	<u>~</u>	<u>. </u>		
13 Total. Add I	ine 12, columns (b), (d), and (e)	ne)	<u>_</u>		13 _	
13 Total. Add I See worksheet	ine 12, columns (b), (d), and (e) in line 13 instructions on page 28 to verify calculatio			•	13 _	
13 Total. Add I See worksheet Part XVI-B	ine 12, columns (b), (d), and (e) in line 13 instructions on page 28 to verify calculatio Relationship of Activities to the Activities	complishm	ent of Exempt P	urpose	13 _	0
13 Total. Add I See worksheet	ine 12, columns (b), (d), and (e) in line 13 instructions on page 28 to verify calculation Relationship of Activities to the Activities t	complishm is reported in o	ent of Exempt Pool	urpose A contrib	13es	0
13 Total. Add I See worksheet Part XVI-B Line No.	ine 12, columns (b), (d), and (e) in line 13 instructions on page 28 to verify calculatio Relationship of Activities to the Activities to the Activity for which income	complishm is reported in o	ent of Exempt Pool	urpose A contrib	13es	0
13 Total. Add I See worksheet Part XVI-B Line No.	ine 12, columns (b), (d), and (e) in line 13 instructions on page 28 to verify calculation Relationship of Activities to the Activities t	complishm is reported in o	ent of Exempt Pool	urpose A contrib	13es	0
13 Total. Add I See worksheet Part XVI-B Line No.	ine 12, columns (b), (d), and (e) in line 13 instructions on page 28 to verify calculation Relationship of Activities to the Activities t	complishm is reported in o	ent of Exempt Pool	urpose A contrib	13es	0
13 Total. Add I See worksheet Part XVI-B Line No.	ine 12, columns (b), (d), and (e) in line 13 instructions on page 28 to verify calculation Relationship of Activities to the Activities t	complishm is reported in o	ent of Exempt Pool	urpose A contrib	13es	0
13 Total. Add I See worksheet Part XVI-B Line No.	ine 12, columns (b), (d), and (e) in line 13 instructions on page 28 to verify calculation Relationship of Activities to the Activities t	complishm is reported in o	ent of Exempt Pool	urpose A contrib	13es	0
13 Total. Add I See worksheet Part XVI-B Line No.	ine 12, columns (b), (d), and (e) in line 13 instructions on page 28 to verify calculation Relationship of Activities to the Activities t	complishm is reported in o	ent of Exempt Pool	urpose A contrib	13es	0
13 Total. Add I See worksheet Part XVI-B Line No.	ine 12, columns (b), (d), and (e) in line 13 instructions on page 28 to verify calculation Relationship of Activities to the Activities t	complishm is reported in o	ent of Exempt Pool	urpose A contrib	13es	0
13 Total. Add I See worksheet Part XVI-B Line No.	ine 12, columns (b), (d), and (e) in line 13 instructions on page 28 to verify calculation Relationship of Activities to the Activities t	complishm is reported in o	ent of Exempt Pool	urpose A contrib	13es	0
13 Total. Add I See worksheet Part XVI-B Line No.	ine 12, columns (b), (d), and (e) in line 13 instructions on page 28 to verify calculation Relationship of Activities to the Activities t	complishm is reported in o	ent of Exempt Pool	urpose A contrib	13es	0
13 Total. Add I See worksheet Part XVI-B Line No.	ine 12, columns (b), (d), and (e) in line 13 instructions on page 28 to verify calculation Relationship of Activities to the Activities t	complishm is reported in o	ent of Exempt Pool	urpose A contrib	13es	0
13 Total. Add I See worksheet Part XVI-B Line No.	ine 12, columns (b), (d), and (e) in line 13 instructions on page 28 to verify calculation Relationship of Activities to the Activities t	complishm is reported in o	ent of Exempt Pool	urpose A contrib	13es	0
13 Total. Add I See worksheet Part XVI-B Line No.	ine 12, columns (b), (d), and (e) in line 13 instructions on page 28 to verify calculation Relationship of Activities to the Activities t	complishm is reported in o	ent of Exempt Pool	urpose A contrib	13es	0
13 Total. Add I See worksheet Part XVI-B Line No.	ine 12, columns (b), (d), and (e) in line 13 instructions on page 28 to verify calculation Relationship of Activities to the Activities t	complishm is reported in o	ent of Exempt Pool	urpose A contrib	13es	0
13 Total. Add I See worksheet Part XVI-B Line No.	ine 12, columns (b), (d), and (e) in line 13 instructions on page 28 to verify calculation Relationship of Activities to the Activities t	complishm is reported in o	ent of Exempt Pool	urpose A contrib	13es	0
13 Total. Add I See worksheet Part XVI-B Line No.	ine 12, columns (b), (d), and (e) in line 13 instructions on page 28 to verify calculation Relationship of Activities to the Activities t	complishm is reported in o	ent of Exempt Pool	urpose A contrib	13es	0
13 Total. Add I See worksheet Part XVI-B Line No.	ine 12, columns (b), (d), and (e) in line 13 instructions on page 28 to verify calculation Relationship of Activities to the Activities t	complishm is reported in o	ent of Exempt Pool	urpose A contrib	13es	0
13 Total. Add I See worksheet Part XVI-B Line No.	ine 12, columns (b), (d), and (e) in line 13 instructions on page 28 to verify calculation Relationship of Activities to the Activities t	complishm is reported in o	ent of Exempt Pool	urpose A contrib	13es	0
13 Total. Add I See worksheet Part XVI-B Line No.	ine 12, columns (b), (d), and (e) in line 13 instructions on page 28 to verify calculation Relationship of Activities to the Activities t	complishm is reported in o	ent of Exempt Pool	urpose A contrib	13es	0
13 Total. Add I See worksheet Part XVI-B Line No.	ine 12, columns (b), (d), and (e) in line 13 instructions on page 28 to verify calculation Relationship of Activities to the Activities t	complishm is reported in o	ent of Exempt Pool	urpose A contrib	13es	0
13 Total. Add I See worksheet Part XVI-B Line No.	ine 12, columns (b), (d), and (e) in line 13 instructions on page 28 to verify calculation Relationship of Activities to the Activities t	complishm is reported in o	ent of Exempt Pool	urpose A contrib	13es	0
13 Total. Add I See worksheet Part XVI-B Line No.	ine 12, columns (b), (d), and (e) in line 13 instructions on page 28 to verify calculation Relationship of Activities to the Activities t	complishm is reported in o	ent of Exempt Pool	urpose A contrib	13es	0
13 Total. Add I See worksheet Part XVI-B Line No.	ine 12, columns (b), (d), and (e) in line 13 instructions on page 28 to verify calculation Relationship of Activities to the Activities t	complishm is reported in o	ent of Exempt Pool	urpose A contrib	13es	0
13 Total. Add I See worksheet Part XVI-B Line No.	ine 12, columns (b), (d), and (e) in line 13 instructions on page 28 to verify calculation Relationship of Activities to the Activities t	complishm is reported in o	ent of Exempt Pool	urpose A contrib	13es	0
13 Total. Add I See worksheet Part XVI-B Line No.	ine 12, columns (b), (d), and (e) in line 13 instructions on page 28 to verify calculation Relationship of Activities to the Activities t	complishm is reported in o	ent of Exempt Pool	urpose A contrib	13es	0

orn	990-PF	(2009) Th	e Coss	Founda	tion				41-1	.726797			Pac	ge 13
P	art XVII		_	_	nsfers To	and Tra	ansactio	ns ar	nd Relation	onships Witl	n Noncha	ritable		
			t Organiz											
1					e in any of the	-			-			·	Yes	No
			ne Code (oth	er than section	n 501(c)(3) org	ganızatıor	ns) or in se	ection 5	527, relating	to political				
	organiza							_						
а			porting found	dation to a noi	ncharitable exe	empt orga	anızatıon o	f:						
	(1) Cas											1a(1)		X
_		er assets										1a(2)		X
b		ansactions.												7.7
				table exempt of	=							1b(1)		X
	• •				exempt organiz	ation						1b(2)		X
				t, or other ass	ets							1b(3)		X
		nbursement a	=	S								1b(4) 1b(5)		X
		ns or loan gua		omborship or	fundraising so	licitations						1b(5)		X
_					her assets, or							1c	- "	X
	_			=			=	mn (h)	should alwa	ays show the fail	r market			
ŭ		-				_				eived less than				
		-		_		_				assets, or service				
	(a) Line no		ount involved	1	f noncharitable e					on of transfers, tran		sharing arrange	ements	
1/	A													
										·				
			•											
				ļ										
				 				<u> </u>						
				 				-						
				<u> </u>				-						
								 						
				1										
								 						
										 				
				<u>† </u>			-	<u> </u>						
2a	Is the fo	undation dire	ctly or indire	ctly affiliated v	wth, or related	to, one o	or more tax	-exem	pt organizat	ions				
					han section 50							☐ Y6	es X	No
b	If "Yes,"	complete the	e following so	chedule										
		(a) Name of c	organization		(b) Type	of organiza	ation	<u> </u>		(c) Description	on of relations	hip		
	N/A							<u> </u>						
								-						
						•	· · ·	<u> </u>						
								 		-				
\neg								L						
										nents, and to the b rmation of whi <u>ch</u> pr	eparer has ar	w knowledge		
ı	L	None.	erence	701	Cart		e- 14	120	da	\mathcal{P}_{a}	week	6		
ט	Sign	ature of officer		<i>y</i> ,, c	<i></i>		Date	ITDU	L	Title	- ju			
<u> </u>									Date		<u> </u>	Preparer's identif		
<u> </u>	.w _	Preparer's	10	0/1	1					Check if self-emplo	hev	number (see Sig page 30 of the in		
	Paid Preparer's Use Only	signature	dan	my U41	chere				5.10.2	OPO Sell-ellipid				
- ا	Pa epa se (Firm's name	(or yours if		Associ	ates	, Ltd				T			
	ھ ے	self-employe	d), address,	PO Box							EIN ▶			·
		and ZIP code	e /	River	Falls,	WI	5402	2-00	092		Phone no	715-42	<u>5 - 6</u>	179

66458011 The Coss Foundation 41-1726797 FYE: 12/31/2009	Federal Statements	5/10/2010 9:04 AM
	Statement 1 - Form 990-PF, Part I, Line 16b - Accounting Fees	,
Description	Net Adjusted Total Investment Net	Charitable Purpose
Accounting Total	\$ 310 \$ \$ 0	w w
	Statement 2 - Form 990-PF, Part I, Line 23 - Other Expenses	
Description	Net Adjusted Total Investment Net	Charitable Purpose
Expenses Miscellaneous	10	}
Total	\$ 10 \$ 0 \$	·ν
		1-2

66458011 The Coss Foundation

41-1726797

Federal Statements

5/10/2010 9:04 AM

FYE: 12/31/2009

D	escription					
		ginning Year	End of Year	Basis of Valuation	_	Fair Market Value
Miscellaneous						
		\$ <u>75</u> \$	75	Cost	\$_	75
Total		\$ 75 \$	75		\$_	75

Statement 4 - Form 990-PF, Part III, Line 3 - Other Increases

Description	 Amount		
Rounding	\$ 1		
Total	\$ 1		