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Form **990-PF**

Department of the Treasury

Return of Private Foundation

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

e foundation may be able to use a conv of this return to satisfy state reporting requirements

2009

OMB No 1545-0052

intern	aı Kev	enue Service Note. The Tourioation may t	be able to use a copy of this	return to sausiy state repor	ung requirements.	<u></u>
Ford	alen	dar year 2009, or tax year beginning MAY	1, 2009	, and ending	APR 30, 2010	
G C	heck	all that apply: Initial return	Initial return of a fo	rmer public charity	Final return	
		Amended return	Address chang	je 🔲	Name change	
Hea	the I	Name of foundation			A Employer identification	number
	ine i ibel					
		e RAIBROOK FOUNDATION,	INC.		39-1683091	
	orint	Number and street (or P O box number if mail is not de	- -	Room/suite	B Telephone number	
	type	DO M. TOIM MADMOD		4	920-746-29	95
	Spec	I GIV OF IDWII. STATE, ALIO ZIP CODE			C If exemption application is po	ending, check here
Insti	uctio	^{ns.} STURGEON BAY, WI 542	35		D 1. Foreign organizations	
H C	heck	type of organization: X Section 501(c)(3) ex	empt private foundation		Foreign organizations me check here and attach co	eting the 85% test, mputation
] Sec	ction 4947(a)(1) nonexempt charitable trust	Other taxable private founda	tion	E If private foundation stat	
1 Fa	ır ma	rket value of all assets at end of year J Accounting	ng method: X Cash	Accrual	under section 507(b)(1)	
(fr	om P	Part II, col. (c), line 16)	her (specify)		F If the foundation is in a 6	60-month termination
•	\$	27244802 . (Part I, colu	mn (d) must be on cash b	pasis)	under section 507(b)(1)	
Pa	rt I	Analysis of Revenue and Expenses	(a) Revenue and	(b) Net investment	(c) Adjusted net	(d) Disbursements
		(The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a))	expenses per books	income	income	for charitable purposes (cash basis only)
	1	Contributions, gifts, grants, etc., received	577639.		N/A	
	2	Check rithe foundation is not required to attach Sch. B				
	3	Interest on savings and temporary cash investments	2481.	2481.		
	4	Dividends and interest from securities	920014.	920014.		
		Gross rents				
		Net rental income or (loss)				
	_	Net gain or (loss) from sale of assets not on line 10	188805.			
Revenue	b	Gross sales price for all assets on line 6a 11136513.				
, Kel	7	Capital gain net income (from Part IV, line 2)		188805.		
æ	8	Net short-term capital gain				
	9	Income modifications	• •		31358.	
		Gross sales less returns	-		<u> </u>	
		Less Cos of goods sold				
=======================================		0				
2010		20 06 MIN 1001	857.	857.		STATEMENT 1
-	12	Total Add fines 1 through 11	1689796.	1112157.	31358.	
8			266216.	0.	313301	266216.
ب	14	Compensation of officers prectors trustees etc. Other employee salaries and wages	2002201			
DE		Pension plans, employee benefits				
Ses Ses		Legal fees STMT 2	864.	0.	*********	864.
正	h	Accounting fees STMT 3	25697.	0.		25697.
Operating and Administrative Expens	,	Other professional fees STMT 4	177538.	177538.		0.
	17	Interest	177330			
黛	10	Taxes STMT 5	43255.	14579.		14147.
Str	18 19	Depreciation and depletion	4750.	4750.	_	
Ë	20	Occupancy	16200.	<u>4730:</u>		16200.
퉏	20	Travel, conferences, and meetings	9826.	0.		9826.
þ	21		9020.			7020.
ē	22	Printing and publications Other expenses STMT 6	22935.	0.	· · · · · · · · · · · · · · · · · · ·	22935.
ting	23	•	44933.	<u> </u>		
erai	24	Total operating and administrative	567281.	196867.		355885.
ŏ	0.5	expenses Add lines 13 through 23	731633.	130007.		731633.
-	20	Contributions, gifts, grants paid	131033.			131033.
	26	Total expenses and disbursements	1200014	106067		1087518.
		Add lines 24 and 25	1298914.	196867.		100/310.
		Subtract line 26 from line 12:	30000			
		Excess of revenue over expenses and disbursements	390882.	01 5 0 0 0		
		Net investment income (if negative, enter -0-)		915290.	21250	
	C	Adjusted net income (if negative, enter -0-)			31358.	<u> </u>

1	lotal net assets or fund balances at beginning of year - Part II, column (a), line 30				
	(must agree with end-of-year figure reported on prior year's return)			1	22984317.
2	Enter amount from Part I, line 27a			2	390882.
3	Other increases not included in line 2 (itemize)	SEE	STATEMENT 7	3	31358.
4	Add lines 1, 2, and 3			4	23406557.
5	Decreases not included in line 2 (itemize) ▶			5	0.
6	Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b), line 3	0		6	23406557.
_					

Page 3

P	<u>Part</u> IV ∣ Capital Gains a	nd Losses for Tax on In	vestment	Income					
	(a) List and descri 2-story brick wan	be the kınd(s) of property sold (e.g. ehouse; or common stock, 200 shs	, real estate, . MLC Co.)		(b) Ho P - D -	w acquired Purchase Donation	(c) Date (mo., c	acquired day, yr.)	(d) Date sold (mo., day, yr.)
1a									
b	SEE ATTACHED	STATEMENT							
<u>C</u>	;	···					_	_	
d	<u> </u>	<u>-</u>					_		
е			_		L.,.				- ·
	(e) Gross sales price	(f) Depreciation allowed (or allowable)		st or other basis expense of sale				Gain or (loss s (f) minus (
a	i				+				
_ <u>b</u>									
<u>_</u>									<u> </u>
_ <u>d</u> e	44406540		_	1094770	Ω				188805.
		gain in column (h) and owned by t	the foundation		•		(I) Gains ((Col. (h) gain	
	Complete only for additional and wing	(i) Adjusted basis		cess of col. (1)	-	C	òl. (k), but	not less that	า -0-) o r
	(i) F.M.V. as of 12/31/69	as of 12/31/69		col. (j), if any			Losses	(from col. (h))
a	ı								_
<u>b</u>)		· · · · · · · · · · · · · · · · · · ·						
	;			· · · · · · · · · · · · · · · · · · ·					
<u>d</u>	l				_				
<u>e</u>					_	<u> </u>			188805.
2	Capital gain net income or (net cap	ortal loss) { If gain, also enter If (loss), enter -0-	in Part I, line in Part I, line	7 7	} [2			188805.
3	Net short-term capital gain or (loss	`							
	If gain, also enter in Part I, line 8, o		` '] [
_	If (loss), enter -0- in Part I, line 8 Part V Qualification Ur	nder Section 4940(e) for			_للـ	3		N/A	
Wa If	section 4940(d)(2) applies, leave thi as the foundation liable for the secti "Yes," the foundation does not qualit	on 4942 tax on the distributable am by under section 4940(e). Do not co	mplete this pa	ırt.					Yes X No
1	Enter the appropriate amount in ea	ach column for each year; see instri	uctions before	making any entrie	es.				
	(a) Base period years Calendar year (or tax year beginnin	g in) Adjusted qualifying dis	tributions	Net value of no	(c) ncharit	able-use asse	ts	Distrib (col. (b) div	(d) oution ratio rided by col. (c))
_	2008	12	42355.		2	432154	2.		.051080
_	2007	15	63142.			480252			.063023
_	2006	8	88814.		1	580591	9.		.056233
	2005								
_	2004			<u> </u>				,	
2	Total of line 1, column (d)						2		.170336
	Average distribution ratio for the 5	-year base period - divide the total o	on line 2 by 5,	or by the number	of year	s			
	the foundation has been in existen	ce if less than 5 years					3		.056779
4	Enter the net value of noncharitable	e-use assets for 2009 from Part X,	line 5				4		24696201.
5	Multiply line 4 by line 3						5		1402226.
6	Enter 1% of net investment incomi	e (1% of Part I, line 27b)					6		9153.
7	Add lines 5 and 6						7		1411379.
8	Enter qualifying distributions from						8	<u></u>	1087518.
	If line 8 is equal to or greater than See the Part VI instructions.	line 7, check the box in Part VI, line	1b, and comp	olete that part using	g a 1%	tax rate.			

_			<u> 168309</u>			ge 4
Pa	rt VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 49)48 -	see inst	ruct	ons	<u>;) </u>
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 here and enter 1%	_1_		18	30	<u>6.</u>
	of Part I, line 27b	İ				
	All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of Part I, line 12, col. (b)	l				_
	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	2				<u>ō.</u>
	Add lines 1 and 2	3		18	30	
	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	4		1.0		<u>0.</u>
	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-	_5		Τ.	30	<u>6.</u>
	Credits/Payments:					
	2009 estimated tax payments and 2008 overpayment credited to 2009 6a					
	Exempt foreign organizations - tax withheld at source Tax paid with application for extension of time to file (Form 8868) 6c 19000.					
	· · · · · · · · · · · · · · · · · · ·					
	Backup withholding erroneously withheld Table codds and asymptote. Add less So through Sd.	,		10	00	Λ
	Total credits and payments. Add lines 6a through 6d Enter any penalty for underpayment of estimated tax. Check here	7 8		13		6.
	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed	9				<u>••</u>
	Overpayment If line 7 is more than the total of lines 5 and 8, enter the amount overpaid	10			1 4	8.
	Enter the amount of line 10 to be: Credited to 2010 estimated tax	11				0.
	art VII-A Statements Regarding Activities				_	••
	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene	ın		Ye	es l	No
	any political campaign?		18	1		X
Ь	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see instructions for definition)?		11	,		X
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials published	d or				
	distributed by the foundation in connection with the activities.					
C	Did the foundation file Form 1120-POL for this year?		10	;		<u>X</u> _
d	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year:					
	(1) On the foundation. \blacktriangleright \$ (2) On foundation managers. \blacktriangleright \$					
е	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation					
	managers. ► \$0 .				ĺ	
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?		2		\perp	<u>X</u>
	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	ſ				
	bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes		3			<u>X</u>
	Did the foundation have unrelated business gross income of \$1,000 or more during the year?		/3 4		-	<u>X</u>
	If "Yes," has it filed a tax return on Form 990-T for this year?	N,			+	
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?		5	+	+	<u>X</u>
	If "Yes," attach the statement required by General Instruction T					
0	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?	ICIAA	6	. 2		
7	Did the foundation have at least \$5,000 in assets at any time during the year?		7		<u>.</u>	
'	If "Yes," complete Part II, col (c), and Part XV		<u> </u>	_ -^	_	—
Яa	Enter the states to which the foundation reports or with which it is registered (see instructions)					
Ja	WI					
h	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		81	b 2	ζ	
9	is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for cale	ndar				
	year 2009 or the taxable year beginning in 2009 (see instructions for Part XIV)? 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	0		X

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11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of	1		
	section 512(b)(13)? If "Yes," attach schedule (see instructions)	11	-	<u>X</u>
12	Did the foundation acquire a direct or indirect interest in any applicable insurance contract before			
	August 17, 2008?	12		<u>X</u>
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	X	
	Website address ► WWW.RAIBROOKFOUNDATION.COM			
14	The books are in care of ► KARL MAY Telephone no. ► 92			
	Located at ► 30 N. 18TH AVENUE, #4, STURGEON BAY, WI ZIP+4	▶ <u>54235</u>	5	
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - Check here		•	
	and enter the amount of tax-exempt interest received or accrued during the year	11	I/A	
Pa	art VII-B Statements Regarding Activities for Which Form 4720 May Be Required			
	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.		Yes	No
1a	During the year did the foundation (either directly or indirectly):			
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person?	∃No		
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from)	- · · ·		
	a disqualified person?	ן אינ		
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?			
		No		
		סאר		
	(5) Transfer any income or assets to a disqualified person (or make any of either available	a.		
	for the benefit or use of a disqualified person)?			
	(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	a		
	termination of government service, if terminating within 90 days.)	J No │		
b	If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations			
	section 53.4941(d)-3 or in a current notice regarding disaster assistance (see page 20 of the instructions)?	<u>1b</u>		<u>X</u>
	Organizations relying on a current notice regarding disaster assistance check here	· 🔲 📗		
C	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected			
	before the first day of the tax year beginning in 2009?	10		_X_
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation			
	defined in section 4942(j)(3) or 4942(j)(5)):			
а	At the end of tax year 2009, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning			
	before 2009?	No		
	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) (relating to incorrect			
	valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer "No" and attach			
		/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.	/ · · · <u> · · · · · · · · · · · · · · </u>		
·				
2.	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time			
υđ	during the year?	no		
		J 140		
U	If "Yes," did it have excess business holdings in 2009 as a result of (1) any purchase by the foundation or disqualified persons after			
	May 26, 1969; (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7)) to dispose			
	of holdings acquired by gift or bequest; or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Schedule C,			
		/A <u>3b</u>	 	
	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a	1	X
b	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that			
	had not been removed from jeopardy before the first day of the tax year beginning in 2009?	4b		<u>X</u>
		Form 99 6	v-PF (2009)

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Part VII-B 'Statements Regarding Activities for Which F	orm 4720 May Be F	Required (contin	ued)		
5a During the year did the foundation pay or incur any amount to:					
(1) Carry on propaganda, or otherwise attempt to influence legislation (section	1 4945(e))?	Y6	es X No		
(2) Influence the outcome of any specific public election (see section 4955); o	r to carry on, directly or indire	ectly,		1	
any voter registration drive?		Ye	es X No	-	
(3) Provide a grant to an individual for travel, study, or other similar purposes	?	Ye	es X No		
(4) Provide a grant to an organization other than a charitable, etc., organization	n described in section				
509(a)(1), (2), or (3), or section 4940(d)(2)?		Ye	es X No		
(5) Provide for any purpose other than religious, charitable, scientific, literary,	or educational purposes, or t	for	i		
the prevention of cruelty to children or animals?			es X No		
b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify und	der the exceptions described	in Regulations	1		
section 53.4945 or in a current notice regarding disaster assistance (see instru	ctions)?	•	N/A	5b	
Organizations relying on a current notice regarding disaster assistance check h			▶□□□		
c If the answer is "Yes" to question 5a(4), does the foundation claim exemption fr	om the tax because it mainta	ined			
expenditure responsibility for the grant?		I/A 🔲 Ye	es 🔲 No		
If "Yes," attach the statement required by Regulations section 53.4945		•			
6a Did the foundation, during the year, receive any funds, directly or indirectly, to	• •				
a personal benefit contract?	,, , , -	☐ Ye	es X No		
b Did the foundation, during the year, pay premiums, directly or indirectly, on a p	ersonal benefit contract?			6Ь	X
If "Yes" to 6b, file Form 8870.					
7a At any time during the tax year, was the foundation a party to a prohibited tax s	helter transaction?	T Ye	es X No	į	
b If yes, did the foundation receive any proceeds or have any net income attribute			N/A	7b	
		nagers. Highly		<u>,,,,</u>	
Part VIII Paid Employees, and Contractors	,	g- , - g,	•		
1 List all officers, directors, trustees, foundation managers and their	compensation.				
	(b) Title, and average	(c) Compensation	(d) Contributions to employee benefit plans and deferred	(e	Expense
(a) Name and address	hours per week devoted to position	(If not paid, enter -0-)	and deferred compensation	all	ount, other llowances
		•			
SEE STATEMENT 12		266216.	0.	,	0.
*					
2 Compensation of five highest-paid employees (other than those inc	luded on line 1). If none,	enter "NONE."			
(a) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week	(c) Compensation	(d) Contributions to employee benefit plans	(e	e) Expense count, other
(a) Name and address of each employee paid more than \$50,000	devoted to position	(c) Compensation	and deferred compensation	all	llowances
NONE					
			1	T	
Total number of other employees paid over \$50,000					0

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Part VIII Information About Officers, Directors, Trustees, Foundation Paid Employees, and Contractors (continued)	on Managers, Highly	
3 Five highest-paid independent contractors for professional services. If none, enter	NONE."	
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
WELLS FARGO ADVISORS, LLC - ONE NORTH]	
JEFFERSON AVENUE, ST. LOUIS, MO 63103	INVESTMENTS MGMT.	177538.
Total number of others receiving over \$50,000 for professional services		> 1
Part IX-A Summary of Direct Charitable Activities		
List the foundation's four largest direct charitable activities during the tax year. Include relevant statistic number of organizations and other beneficiaries served, conferences convened, research papers product N/A	al information such as the ced, etc.	Expenses
2		
3		
4		
Part IX-B Summary of Program-Related Investments		
Describe the two largest program-related investments made by the foundation during the tax year on lin	nes 1 and 2.	Amount
1 <u>N/A</u>		
2		
All other program-related investments. See instructions. 3		
Total. Add lines 1 through 3	>	0.

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Part X Minimum Investment Return (All domestic foundations must complete this part. Foreign foundations, see instructions.) Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes: 1 24696201. Average monthly fair market value of securities 1a 376084. Average of monthly cash balances 16 c Fair market value of all other assets 10 25072285. d Total (add lines 1a, b, and c) 1d Reduction claimed for blockage or other factors reported on lines 1a and 0. 1c (attach detailed explanation) 1e 0. Acquisition indebtedness applicable to line 1 assets 25072285. Subtract line 2 from line 1d 3 376084. Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions) 4 Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V. line 4 24696201. 5 1234810. Minimum investment return. Enter 5% of line 5 Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations and certain Part XI and do not complete this part.) foreign organizations check here 1234810. Minimum investment return from Part X, line 6 1 18306 Tax on investment income for 2009 from Part VI, line 5 2a 2b Income tax for 2009. (This does not include the tax from Part VI.) 18306. Add lines 2a and 2b 2с 1216504. Distributable amount before adjustments. Subtract line 2c from line 1 3 3 31358. Recoveries of amounts treated as qualifying distributions 4 1247862. Add lines 3 and 4 5 Deduction from distributable amount (see instructions) 6 0. 1247862 Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1 Part XII Qualifying Distributions (see instructions) Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes: 1087518. a Expenses, contributions, gifts, etc. - total from Part I, column (d), line 26 1a Program-related investments - total from Part IX-B 1b Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes 2 Amounts set aside for specific charitable projects that satisfy the: a Suitability test (prior IRS approval required) 3a Cash distribution test (attach the required schedule) 3b 1087518. Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4 4 Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income. Enter 1% of Part I, line 27b 5 10875 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 foundation qualifies for the section 4940(e) reduction of tax in those years.

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Part XIII Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2008	(c) 2008	(d) 2009
1 Distributable amount for 2009 from Part XI, line 7	· · · · ·	·		1247862.
2 Undistributed income, if any, as of the end of 2009				
a Enter amount for 2008 only			0.	
b Total for prior years:		_		
3 Excess distributions carryover, if any, to 2009:		0.		
1 1 1				
a From 2004				
b From 2005				
c From 2006 174006. d From 2007 333642.				
e From 2008 38796.				
	546444.			
f Total of lines 3a through e	240444.	<u> </u>		
4 Qualifying distributions for 2009 from Part XII, line 4: ▶ \$ 1087518.				
a Applied to 2008, but not more than line 2a			0.	
b Applied to undistributed income of prior		-		
years (Election required - see instructions)		0.		
c Treated as distributions out of corpus				
(Election required - see instructions)	0.			
d Applied to 2009 distributable amount	0.			1087518.
e Remaining amount distributed out of corpus	0.			100/510.
5 Excess distributions carryover applied to 2009	160344.			160344.
(If an amount appears in column (d), the same amount must be shown in column (a))	100311.			2003111
6 Enter the net total of each column as indicated below:				
& Corpus Add lines 3f, 4c, and 4e Subtract line 5	386100.			
b Prior years' undistributed income. Subtract				
line 4b from line 2b		0.		
c Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed		0.		
d Subtract line 6c from line 6b. Taxable				
amount - see instructions		0.		
e Undistributed income for 2008. Subtract line				
4a from line 2a. Taxable amount - see instr.			0.	
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)	0.			
8 Excess distributions carryover from 2004	_			
not applied on line 5 or line 7	0.			
9 Excess distributions carryover to 2010				
Subtract lines 7 and 8 from line 6a	386100.			
10 Analysis of line 9:				
a Excess from 2005				
b Excess from 2006 13662.				
c Excess from 2007 333642.				
d Excess from 2008 38796.				
e Excess from 2009	<u>.</u>	•	1	Form 990-PF (2009)

Porm 990-PF (2009) RAIBROO Part XIV Private Operating F	K FOUNDATIO		A guartian (I)		83091 Page 10
	·		-A, question 9)	N/A	
1 a If the foundation has received a ruling of					
foundation, and the ruling is effective for		-	▶ └─	14040(1/0) 1	240(-)(5)
b Check box to indicate whether the found		ig toundation described (4942(j)(3) or49	942(j)(5)
2 a Enter the lesser of the adjusted net	Tax year (a) 2009	(b) 2008	Prior 3 years (c) 2007	(d) 2006	(e) Total
income from Part I or the minimum	(a) 2003	(0) 2000	(6) 2007	- (0) 2000	(6) 10(2)
investment return from Part X for					
each year listed					
b 85% of line 2a					
c 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					
e 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:					
a "Assets" alternative test - enter:					
(1) Value of all assets					
(2) Value of assets qualifying under section 4942(1)(3)(B)(1)					
b "Endowment" alternative test - enter					
2/3 of minimum investment return shown in Part X, line 6 for each year listed					
c "Support" alternative test - enter:					
(1) Total support other than gross					
investment income (interest,					
dividends, rents, payments on					
securities loans (section 512(a)(5)), or royalties)					
(2) Support from general public					· · · · · · · · · · · · · · · · · · ·
and 5 or more exempt					
organizations as provided in section 4942(j)(3)(B)(iii)					
(3) Largest amount of support from					
an exempt organization					
(4) Gross investment income					
Part XV Supplementary Info	rmation (Comple	te this part only	if the foundatio	n had \$5.000 or m	ore in assets
at any time during t				. ,	
1 Information Regarding Foundation	n Managers:		····		
a List any managers of the foundation wh	_	than 2% of the total cont	ributions received by th	e foundation before the clo	se of any tax
year (but only if they have contributed in			······································		
NONE					
b List any managers of the foundation wh	o own 10% or more of th	e stock of a corporation	or an equally large por	tion of the ownership of a p	partnership or
other entity) of which the foundation has			. , , , , ,	• •	·
NONE					
2 Information Regarding Contributi	on, Grant, Gift, Loan,	Scholarship, etc., Pr	ograms:		-
_ _		• • •	_	not accept unsolicited requ	uests for funds. If
the foundation makes gifts, grants, etc.	(see instructions) to indiv	riduals or organizations u	nder other conditions,	complete items 2a, b, c, an	d d.
a The name, address, and telephone num	ber of the person to who	m applications should be	addressed:		
SEE STATEMENT 13					
b The form in which applications should b	e submitted and informa	tion and materials they sl	nould include:		
				· · · · · · · · · · · · · · · · · · ·	
c Any submission deadlines:					
d Any restrictions or limitations on awards	s, such as by geographic	al areas, charitable fields	kinds of institutions of	other factors:	
The state of the s	., 200 40 0, googiapino		or monditionity of		

Page 11

Recipient If recipient is an individual, show any relationship to any foundation manager or substantial contributor Purpose of grant or contribution	Amount 731633.
a Paid during the year	731633.
a Paid during the year SEE ATTACHED SCHEDULE	731633.
Total	731633.
b Approved for future payment	
NONE	
Total	0.

Part XVI-A Analysis of Income-Producing Activities

Enter gross amounts unless atherwise indicated	Unrelated	business income	Excluded	by section 512, 513, or 514	(a)
Enter gross amounts unless otherwise indicated.	(a) Business	(b) Amount	(C) Exclu- sion code	(d) Amount	(e) Related or exempt function income
1 Program service revenue:	code		code	711100111	
a	· · ·				
b	l l				
<u> </u>					
d					
e	— 	_			
g Fees and contracts from government agencies	<u> </u>				
g Fees and contracts from government agencies 2 Membership dues and assessments	-		 		
3 Interest on savings and temporary cash			 		
investments			14	2481.	
4 Dividends and interest from securities		· · · ·	14	920014.	
5 Net rental income or (loss) from real estate:			1 2	720014.	
a Debt-financed property				+	
b Not debt-financed property					
6 Net rental income or (loss) from personal					
property					
7 Other investment income			18	857.	
8 Gain or (loss) from sales of assets other				057.	
than inventory			18	188805.	
9 Net income or (loss) from special events				100003.	
O Gross profit or (loss) from sales of inventory					
1 Other revenue:					
a					
b					
c					
d	, i				
е					
2 Subtotal. Add columns (b), (d), and (e)		0.		1112157.	0
3 Total. Add line 12, columns (b), (d), and (e)	· · · · · · · · · · · · · · · · · · ·		<u> </u>	13	
See worksheet in line 13 instructions to verify calculation	ns.)				
Part XVI-B Relationship of Activiti		nplishment of Ex	kempt P	Purposes	
Line No. Explain below how each activity for which			contribute	d importantly to the accomp	olishment of
the foundation's exempt purposes (other	than by providing fund	is for such purposes).			
				- •	
					
		· · · · · · · · · · · · · · · · · · ·			
					
					
			•		
				<u> </u>	
•					

9) RAIBROOK FOUNDATION, INC. 39-1683091
Information Regarding Transfers To and Transactions and Relationships With Noncharitable **Exempt Organizations** Yes No

1 Did the organization directly or indirectly engage in any of the following with any other organization described in section 501(c) of

the Code (other than section 501(c)(3) organizations) or in section 527, relating to political organizations?										
8	Trans	fers from the reporting founda	ation to a noncharitable exempt org	ganization of:						
	(1) C	ash					1a(1)	X		
(2) Other assets										
t	Other	transactions:								
(1) Sales of assets to a noncharitable exempt organization										
	(2) P	urchases of assets from a nor	ncharitable exempt organization				1b(2)	X		
	(3) R	ental of facilities, equipment, o	or other assets				1b(3)	X		
	(4) R	eimbursement arrangements					1b(4)	X		
	(5) L	oans or loan guarantees					1b(5)	X		
	(6) P	erformance of services or me	mbership or fundraising solicitation	ns			1b(6)	X_		
C	Sharır	ng of facilities, equipment, mai	ılıng lists, other assets, or paid emj	ployees			1c	X		
C	I If the	answer to any of the above is	"Yes," complete the following sche	dule. Column (b) should	always show the fai	r market value of the (goods, other asse	ts,		
	or ser	vices given by the reporting fo	oundation. If the foundation receive	ed less than fair market va	alue in any transacti	ion or sharing arrange	ment, show in			
_	colum		other assets, or services received.		1					
a)	Line no	(b) Amount involved	(c) Name of noncharitable	exempt organization	(d) Descript	tion of transfers, transaction	ons, and sharing arra	ngements		
_			N/A							
										
				<u> </u>						
										
			<u> </u>							
	-					· · · · · · · · · · · · · · · · · · ·				
										
		_								
							 			
										
						·				
_	la Aba					1				
28		•	tly affiliated with, or related to, one	, -	inizations described			X No		
		s," complete the following sch	r than section 501(c)(3)) or in secti	1011 527 7			Yes	IVO		
L	11 163	(a) Name of org		(b) Type of organization	1	(c) Description of re	elationshin			
_		N/A	unzation	(b) Type of organization	·	(b) Booking and it of the	Janonomp			
_		N/A			1					
		· -								
_										
					1	·				
			ave examined this return, including acco				elief, it is true, correct	t,		
	and con	iplete Declaration of preparer (othe	r than taxpayer or fiduciary) is based on a	all information of which prepa	rer has any knowledge					
	\	Ral I.Mx		12-1-10	► TREAS	SURER				
Signature of officer or trustee			·	Date	Title					
É		Preparer's	1 1			Check if	Preparer's identifyi	ng number		
5	Paid Preparer's Use Only	signature P 4090	. LWood		11/22/10	seir- employed ▶				
•	Paid spare se On	Firm's name (or yours ASHE	R & WOOD LLC		·	EIN ►				
	Ter Use	ıf self-employed), 30 N								
		address, and ZIP code STUR		235		Phone no. 9	20-743-8			
						-	Form 990-	PF (2009)		

Schedule B

(Form 990, 990-EZ, or 990-PF)

Department of the Treasury Internal Revenue Service

Name of the organization

Schedule of Contributors

► Attach to Form 990, 990-EZ, or 990-PF.

OMB No 1545-0047

2009

Employer identification number

RAIBROOK FOUNDATION, INC. 39-1683091 Organization type (check one) Filers of: Section: Form 990 or 990-EZ] 501(c)() (enter number) organization 4947(a)(1) nonexempt charitable trust not treated as a private foundation 527 political organization X 501(c)(3) exempt private foundation Form 990-PF 4947(a)(1) nonexempt charitable trust treated as a private foundation 501(c)(3) taxable private foundation Check if your organization is covered by the General Rule or a Special Rule. Note. Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule See instructions General Rule X For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, \$5,000 or more (in money or property) from any one contributor Complete Parts I and II **Special Rules** For a section 501(c)(3) organization filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), and received from any one contributor, during the year, a contribution of the greater of (1) \$5,000 or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h or (ii) Form 990-EZ, line 1 Complete Parts I and II For a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, aggregate contributions of more than \$1,000 for use exclusively for religious, charitable, scientific, literary, or educational purposes, or the prevention of cruelty to children or animals Complete Parts I, II, and III For a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions for use exclusively for religious, charitable, etc., purposes, but these contributions did not aggregate to more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., purpose Do not complete any of the parts unless the General Rule applies to this organization because it received nonexclusively religious, charitable, etc., contributions of \$5,000 or more during the year. ▶ \$ Caution. An organization that is not covered by the General Rule and/or the Special Rules does not file Schedule B (Form 990, 990-EZ, or 990-PF), but it must answer "No" on Part IV, line 2 of its Form 990, or check the box on line H of its Form 990-EZ, or on line 2 of its Form 990-PF, to certify that it does not meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF)

LHA For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990, 990-EZ, or 990-PF.

Schedule B (Form 990, 990-EZ, or 990-PF) (2009)

	4	4
Page	⊥ of	1 of Part I

Name of organization

Employer identification number

RAIBROOK FOUNDATION, INC.

39-1683091

Part i	Contributors (see instructions)		
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
1	ESTATE OF GEORGE R BROOKS 30 N 18TH AVENUE, #4 STURGEON BAY, WI 54235	\$ <u>577639.</u>	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
		\$	Person Payroli Noncash (Complete Part II if there is a noncash contribution)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
		- - \$	Person Payroll Noncash (Complete Part II if there is a noncash contribution)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
		- - \$	Person Payroll Noncash (Complete Part II if there is a noncash contribution)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
		- _ \$	Person Payroll Noncash (Complete Part II if there is a noncash contribution)

of Part II

Name of organization

Employer identification number

RAIBROOK FOUNDATION, INC.

39-1683091

(a) No. Trom Part I (b) Description of noncash property given (c) FMV (or estimate) (see instructions) (d) Date received (d) Date received (e) FMV (or estimate) (see instructions) (d) Date received (e) FMV (or estimate) (see instructions) (d) Date received (e) FMV (or estimate) (see instructions) (d) Date received (e) FMV (or estimate) (see instructions) (d) Date received (e) FMV (or estimate) (see instructions) (d) Date received (e) FMV (or estimate) (see instructions) (d) Date received (e) FMV (or estimate) (see instructions) (d) Date received (e) FMV (or estimate) (see instructions) (d) Date received (e) FMV (or estimate) (see instructions) (d) Date received (e) FMV (or estimate) (see instructions) (d) Date received (e) FMV (or estimate) (see instructions) (d) Date received (e) FMV (or estimate) (see instructions) (d) Date received (e) FMV (or estimate) (see instructions) (d) Date received (e) FMV (or estimate) (see instructions) (d) Date received (e) FMV (or estimate) (see instructions)	Part II	Noncash Property (see instructions)		
(a) No. (b) FMV (or estimate) (c) (d) Date received (a) No. (b) FMV (or estimate) (see instructions) (a) No. (c) FMV (or estimate) (see instructions) (b) Date received (c) FMV (or estimate) (see instructions) (d) Date received (e) FMV (or estimate) (see instructions) (a) No. (b) FMV (or estimate) (see instructions) (a) No. (c) FMV (or estimate) (see instructions) (b) FMV (or estimate) (see instructions) (c) FMV (or estimate) (see instructions) (d) Date received (e) FMV (or estimate) (see instructions) (a) No. (b) FMV (or estimate) (see instructions) (d) Date received (e) FMV (or estimate) (see instructions) (d) Date received (e) FMV (or estimate) (see instructions) (d) Date received (e) FMV (or estimate) (see instructions) (d) Date received (e) FMV (or estimate) (see instructions) (d) Date received	No. from		FMV (or estimate)	
No. (b) FMV (or estimate) (c) Cot FMV (or estimate) Cot Co			- - - - \$	
(a) No. trom Description of noncash property given (c) FMV (or estimate) (see instructions) (d) Date received (see instructions) (see instructions) (d) Date received (see instructions) (e) FMV (or estimate) (see instructions) (for part I) (see instructions) (see instructions) (d) Date received (see instruc	No. from		FMV (or estimate)	
No. (b) FMV (or estimate) (c) Date received			- - - - - - - - - - - -	
(a) No. from Part I Description of noncash property given S	No. from		FMV (or estimate)	
No. from Description of noncash property given (a) No. from Description of noncash property given (b) FMV (or estimate) (see instructions) (c) FMV (or estimate) (d) Date received FMV (or estimate) (see instructions) (d) Date received (a) No. from Description of noncash property given (a) No. from Description of noncash property given (b) FMV (or estimate) (see instructions) (c) FMV (or estimate) (see instructions) (d) Date received Part I Description of noncash property given (see instructions)			- - - \$	
(a) No. from Part I (a) Description of noncash property given Part I (b) FMV (or estimate) (see instructions) (c) FMV (or estimate) (see instructions) (d) Date received (a) No. from Description of noncash property given (see instructions) (b) FMV (or estimate) (see instructions) (d) Date received	No. from		FMV (or estimate)	
No. from Description of noncash property given (see instructions) \$ (a) No. from Part I Description of noncash property given			\$	
(a) No. from Part I (b) FMV (or estimate) (see instructions) Date received	No. from		FMV (or estimate)	
No. (b) from Description of noncash property given (see instructions) Date received			- - - - - \$	
	No. from		FMV (or estimate)	
			- - - - - - - - - -	

	_			
Schedule B	(Form 990)	990-F7	or ggn_PF	ronna

Name of organization

Page of o

of Part III

RAIBROOK FOUNDATION, 39-1683091 Exclusively religious, charitable, etc., individual contributions to section 501(c)(7), (8), or (10) organizations aggregating Part III more than \$1,000 for the year. Complete columns (a) through (e) and the following line entry. For organizations completing Part III, enter the total of exclusively religious, chantable, etc., contributions of \$1,000 or less for the year (Enter this information once See instructions) > \$ (a) No. from Part I (b) Purpose of gift (c) Use of gift (d) Description of how gift is held (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from Part I (b) Purpose of gift (c) Use of gift (d) Description of how gift is held (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from Part I (b) Purpose of gift (c) Use of gift (d) Description of how gift is held (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from (c) Use of gift (b) Purpose of gift (d) Description of how gift is held Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee

Part IV Cabital Gains and Los		33-100	5031 -	MGE I	<u> </u>
	ses for Tax on Investment Income		I/h) How acquired	l	
(a) List and 2-story bri	describe the kind(s) of property solo ck warehouse; or common stock, 20	d, e.g., real estate, 00 shs. MLC Co.	P - Purchase D - Donation	(c) Date acquired (mo., day, yr.)	(d) Date sold (mo., day, yr.)
1a ANCHOR CAPITAL	ADVISORS		P	VARIOUS	VARIOUS
b RENAISSANCE IN	ESTMENT MANAGEM	ENT	P	VARIOUS_	VARIOUS
c EARNEST PARTNER	RS		P	VARIOUS	VARIOUS
d ALLIANCEBERNSTE	EIN	-	P	VARIOUS	VARIOUS
e WELLS CAPITAL A	ADVISORS		P	VARIOUS	VARIOUS
WENTWORTH HAUSE	ER & VOLICH		P	VARIOUS	VARIOUS
g GOLDMAN SACHS A	ASSET MANAGEMENT		P	VARIOUS	VARIOUS
h CAPITAL GAINS I	DIVIDENDS		P		
1					
k	<u> </u>				
I					
<u>m</u>					· · · · · · · · · · · · · · · · · · ·
n 0				<u></u>	
(e) Gross sales price	(f) Depreciation allowed	(g) Cost or other basis	(h) Gain or (loss)	<u> </u>
	(or allowable)	plus expense of sale	(e) r	olus (f) minus (g)	
a 223624.		163280.			60344.
b 2687897.		2923868.			-235971.
c 381740.		283107.			98633.
d 1534326.		1687517.			<u>-153191.</u>
e 3084929.		2897016.			187913.
f 323740.		291676.			32064.
g 2799133.		2701244.			97889.
h 101124.					101124.
1					
k			·		
1					
m					
n					
0					
Complete only for assets showing	g gain in column (h) and owned by t	he foundation on 12/31/69		sses (from col. (h)	
(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	Gains (excess but r	of col. (h) gain ove iot less than "-0-")	r col. (k),
a					60344.
b					-235971.
C					98633.
d					<u>-153191.</u>
e					187913.
f					32064.
9					97889.
h					101124.
!			· -	•	
1					
k			.		
m l					
n .					
0					
<u> </u>					
2 Capital gain net income or (net cap	oital loss) { If gain, also enter foliated loss, en	in Part I, line 7 -" in Part I, line 7	2		188805.
3 Net short-term capital gain or (loss		\			
If gain, also enter in Part I, line 8, o		}		/-	
If (loss), enter "-0-" in Part I, line 8			3	N/A	

Raibrook Foundation, Inc. Contributions, Gifts, Grants Paid May 2009 through April 2010

		Recipient	Purpose of	
Name	Relationship	Status	Contribution	Paid Amount
Baileys Harbor Athlete Club, Inc	None	Public	Project Support	8,625 00
Brussels-Union Emergcy Med I Responders	None	Public	Project Support	10,000 00
City of Sturgeon Bay	None	Public	Project Support	17,607 83
Community Clinic of Door County, Inc	None	Public	Project Support	2,444 00
Corpus Christi Catholic Church	None	Public	Project Support	3,300 00
County of Door	None	Public	Project Support	2,950 00
Crossroads at Big Creek, Inc	None	Public	Project Support	2,143 00
Door Community Auditorium	None	Public	Project Support	1,047 37
Door County Economic Development Corp	None	Public	Project Support	2,311 00
Door County Environmental Council	None	Public	Project Support	2,000 00
Door County Historical Society	None	Public	Project Support	6,100 00
Door County Land Trust	None	Public	Project Support	40,000 00
Door County Maritime Museum	None	Public	Project Support	15,850 00
Door County Master Gardeners Assoc Inc	None	Public	Project Support	1,025 00
Door County Memorial Hosp Foundation	None	Public	Project Support	100,000 00
Door County YMCA	None	Public	Project Support	52,060 00
Family Center of Door County, Inc	None	Public	Project Support	1,650 00
First Baptist Church	None	Public	Project Support	10,000 00
Francis Hardy Gallery Inc of Door County	None	Public	Project Support	2,648 00
Friends of Peninsula State Park	None	Public	Project Support	7,833 00
Friends of the Door County Park	None	Public	Project Support	3,112 00
Friends of Whitefish Dunes	None	Public	Project Support	6,380 00
HELP of Door County	None	Public	Project Support	605 00
Holy Name Retreat	None	Public	Project Support	11,613 55
Jacksonport Historical Society	None	Public	Project Support	10,250 00
Jaycees of Wisconsin Foundation	None	Public	Project Support	21,183 00
Jim Larsen Boys & Girls Club	None	Public	Project Support	3,412 00
Kımberley House	None	Public	Project Support	421 00
Midsummer Music Ltd	None	Public	Project Support	2,000 00
Miller Art Museum	None	Public	Project Support	5,500 00
Peninsula Art School of Door County	None	Public	Project Support	3,000 00
Peninsula Players Theatre Foundation	None	Public	Project Support	13,882 75
Peninsula Symphonic Band Inc	None	Public	Project Support	2,818 00
Pheasants Forever of Door County	None	Public	Project Support	3,405 00
Scholarships, Inc	None	Public	Project Support	20,000 00
Sevastopol High School	None	Public	Project Support	7,173 00
Sevastopol School	None	Public	Project Support	3,718 00
Southern Door School	None	Public	Project Support	67,325 00
St John Bosco Catholic School	None	Public	Project Support	16,003 00
St Peters Lutheran Church & School	None	Public	Project Support	5,000 00
Sturgeon Bay Booster Club	None	Public	Project Support	1,892 00
Sturgeon Bay Moravian Church	None	Public	Project Support	9,696 00
Sturgeon Bay School District	None	Public	Project Support	96,803 04
Sturgeon Bay Visitor Center	None	Public	Project Support	8,000 00
Sunshine House	None	Public	Project Support	33,500 00
The Art & Nature Center, Inc	None	Public	Project Support	500 00
THE AIL & Halufe Center. IIIC		1 40110	r roject oupport	000 00

Raibrook Foundation, Inc. Contributions, Gifts, Grants Paid May 2009 through April 2010

		Recipient	Purpose of	
Name	Relationship	Status	Contribution	Paid Amount
Town of Brussels	None	Public	Project Support	14,241 00
Town of Sturgeon Bay	None	Public	Project Support	50,000 00
Treehouse Learning Center	None	Public	Project Support	500 00
United Way of Door County	None	Public	Project Support	1,832 00
Village of Forestville	None	Public	Project Support	6,636 00
Village of Sister Bay	None	Public	Project Support	5,000 00
Washington Island Preschool, INc	None	Public	Project Support	4,112 00
				731,632 54

FORM 990-PF	OTHER	INCOME		STATEMENT 1
DESCRIPTION		(A) REVENUE PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME
FRACTIONAL SHARES INCOME RETURN OF CAPITAL	_	62. 795.	62. 795.	
TOTAL TO FORM 990-PF, PART I,	LINE 11 =	857.	857.	
FORM 990-PF	LEGA	L FEES		STATEMENT 2
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME		(D) CHARITABLE PURPOSES
LEGAL FEES	864	0	•	864.
TO FM 990-PF, PG 1, LN 16A =	864	0	•	864.
FORM 990-PF	ACCOUNT	'ING FEES		STATEMENT 3
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME		(D) CHARITABLE PURPOSES
ACCOUNTING FEES	25697	· · 0	•	
TO FORM 990-PF, PG 1, LN 16B	25697	· 0	•	25697.
FORM 990-PF (THER PROFE	SSIONAL FEES		STATEMENT 4
DESCRIPTION	(A) EXPENSES PER BOOKS			
WACHOVIA MGMT FEES	177538	177538	•	0.
TO FORM 990-PF, PG 1, LN 16C	177538	177538	•	0.
=				

FORM 990-PF	TAX	ES	S'	PATEMENT 5
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME		(D) CHARITABLE PURPOSES
FOREIGN TAXES PAID PAYROLL TAXES PROPERTY TAXES EXCISE TAX	14579. 13824. 323. 14529.	0.		13824. 323. 0.
TO FORM 990-PF, PG 1, LN 18	43255.	14579.		14147.
FORM 990-PF	OTHER E	XPENSES	S'	PATEMENT 6
DESCRIPTION		(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
BANK CHARGES LICENSES COPIER RENTAL OPERATIONS INSURANCE MEMBERSHIPS & DUES JANITORIAL SERVICE MISCELLANEOUS	714. 10. 3374. 9170. 8362. 545. 750.	0. 0. 0. 0.		714. 10. 3374. 9170. 8362. 545. 750.
TO FORM 990-PF, PG 1, LN 23	22935.	0.		22935.
DESCRIPTION				TATEMENT 7
RECOVERY OF AMOUNTS TREATED ATTOTAL TO FORM 990-PF, PART I		G DISTRIBUTION	 	31358.

•		
FORM 990-PF CORPORATE STOCK	······································	STATEMENT 8
DESCRIPTION	BOOK VALUE	FAIR MARKET VALUE
WACHOVIA SECURITIES ACCOUNTS	14237997.	17431990.
TOTAL TO FORM 990-PF, PART II, LINE 10B	14237997.	17431990.
FORM 990-PF CORPORATE BONDS		STATEMENT 9
DESCRIPTION	BOOK VALUE	FAIR MARKET VALUE
WACHOVIA SECURITIES ACCOUNTS	7983906.	8623284.
TOTAL TO FORM 990-PF, PART II, LINE 10C	7983906.	8623284.
FORM 990-PF DEPRECIATION OF ASSETS NOT HELD FO	R INVESTMENT	STATEMENT 10
COST OR DESCRIPTION OTHER BASIS	ACCUMULATED DEPRECIATION	BOOK VALUE
LAPTOP COMPUTER (FROM BEST BUY) COMPUTER SET UP (BAY NETWORKS) TELEPHONE SYSTEM REFRIGERATOR 2 DRAWER LATERAL FILE (MAHOGONY) CREDENZA (MAHOGONY) STACK-ON STORAGE UNIT LEFT PEDESTAL DESK * RETURN DRESSER CONFERENCE ROOM TABLE 8 - CONFERENCE ROOM CHAIRS DESK & HUTCH (CHERRY) SINGLE PEDESTAL DESK MIKE'S DESK MALVETZ FURNITURE LAPTOP COMPUTER PROJECTOR WOOD FILE CABINET-MIKE'S	4836. 2336. 338. 411. 648. 484. 984. 485. 1094. 651. 1684. 630. 1301. 492. 400.	242. 1249. 1265. 164. 222. 351. 262. 533. 263. 594. 353. 911. 341. 1011. 137. 934. 705.
OFFICE 297. REFRIGERATOR 235.		234. 184.

RAIBROOK FOUNDATION, INC.			3	9-16830	091
MALVETZ FURNITURE LEASEHOLD IMPROVEMENTS	599. 15904.			47 154	70. 45.
TOTAL TO FM 990-PF, PART II, LN 14	45806.	1908	37.	2671	19.
FORM 990-PF OTH	ER LIABILITIES		STAT	EMENT	11
DESCRIPTION		BOY AMOUNT	EOY .	AMOUNT	
PAYROLL TAXES AND WITHHOLDING PAYA	BLE	487	74.	487	74.
TOTAL TO FORM 990-PF, PART II, LIN	IE 22 =	487	74.	487	74.
FORM 990-PF PART VIII - LIST TRUSTEES AND	OF OFFICERS, DI		STAT	EMENT	12
NAME AND ADDRESS	TITLE AND AVRG HRS/WK		EMPLOYEE BEN PLAN CONTRIB	EXPENS	
RALPH F. HERLACHE 30 N 18TH AVENUE, #4 STURGEON BAY, WI 54235	PRESIDENT/ADMIN	IISTRATOR 106150.	0.		0.
JULIE L. LALUZERNE 30 N 18TH AVENUE, #4 STURGEON BAY, WI 54235	SECRETARY/GRANT	ADMINISTRA 80136.	0.		0.
MICHAEL L. MADDEN 30 N 18TH AVENUE, #4 STURGEON BAY, WI 54235	VICE PRESIDENT 20.00	47630.	0.		0.
KARL S. MAY 30 N 18TH AVENUE, #4 STURGEON BAY, WI 54235	TREASURER	26150.	0.		0.
THOMAS O. WULF 30 N 18TH AVENUE, #4 STURGEON BAY, WI 54235	BOARD MEMBER 2.00	6150.	0.		0.
TOTALS INCLUDED ON 990-PF, PAGE 6,	PART VIII	266216.	0.		0.

FORM 990-PF

GRANT APPLICATION SUBMISSION INFORMATION PART XV, LINES 2A THROUGH 2D

STATEMENT

13

NAME AND ADDRESS OF PERSON TO WHOM APPLICATIONS SHOULD BE SUBMITTED

JULIE LALUZERNE 30 N. 18TH AVENUE, #4 STURGEON BAY, WI 54235

TELEPHONE NUMBER

920-746-2995

FORM AND CONTENT OF APPLICATIONS

APPLICATION FORMS ARE AVAILABLE AT THE FOUNDATION OFFICE AND ALSO ON THE WEBSITE.

ANY SUBMISSION DEADLINES

NONE.

RESTRICTIONS AND LIMITATIONS ON AWARDS

GEOGRAPHICAL AREA IS LIMITED TO DOOR COUNTY, WISCONSIN WITH AN EMPHASIS ON NASEWAUPEE, SEVASTOPOL AND STURGEON BAY.

Form **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

• If you	u are filing for an Automatic 3-Month Extension, complete only Part I and check this box	_	ightharpoons
- nyot	are filing for an Additional (Not Automatic) 3-Month Extension, complete only Part II (on page 2 of this	form).	
Do not	complete Part II unless you have already been granted an automatic 3-month extension on a previously fil	ed Form 8868.	
Part	Automatic 3-Month Extension of Time. Only submit original (no copies needed).		
A corpo	pration required to file Form 990-T and requesting an automatic 6-month extension - check this box and com	plete	
art I o	· · · · · · · · · · · · · · · · · · ·	p	▶ □
All othe	r corporations (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request an	extension of time	
	n corporations (including 1720-0 liters), partiterships, HEMIOS, and trusts must use Form 7004 to request an Income tax returns.	extension or time	
noted b (not aut you mu	onic Filing (e-file). Generally, you can electronically file Form 8868 if you want a 3-month automatic extension below (6 months for a corporation required to file Form 990-T). However, you cannot file Form 8868 electronic tomatic) 3-month extension or (2) you file Forms 990-BL, 6069, or 8870, group returns, or a composite or coinst submit the fully completed and signed page 2 (Part II) of Form 8868. For more details on the electronic files of spoylefile and click on e-file for Chanties & Nonprofits	cally if (1) you want nsolidated Form 990	the additional DT Instead,
Type or	Name of Exempt Organization	Employer identific	cation number
orint	RAIBROOK FOUNDATION, INC.	39-16830	191
File by the	Number street and room or quite no. If a D.O. hey and matriations		- -
due date l filing your	30 N. 18TH AVENUE. NO. 4		
eturn Se nstruction	•		
	STURGEON BAY, WI 54235		
Check	type of return to be filed (file a separate application for each return)		
$\overline{}$	form 990 Form 990-T (corporation) Form 47		
$\overline{}$	form 990-BL Form 990-T (sec 401(a) or 408(a) trust) Form 52	27	
=	form 990-EZ Form 990-T (trust other than above) Form 60		
L X J F	form 990-PF Form 1041-A Form 88	70	
	KARL MAY		
• The	books are in the care of ► 30 N. 18TH AVENUE, #4 - STURGEON BAY, W	T 54235	
	phone No. ► 920-746-2995 FAX No ► 920-746-2996		
	e organization does not have an office or place of business in the United States, check this box		
	-	s is for the whole gr	
		o lo lo: li lo milolo gi	OUD CHECK THIS
oox 🕨	and account the formation and and account the formation account the form	members the exten	•
box ►		members the exten	•
	request an automatic 3-month (6-months for a corporation required to file Form 990-T) extension of time unt		•
		ıl	sion will cover.
1	request an automatic 3-month (6-months for a corporation required to file Form 990-T) extension of time unt DECEMBER 15 , 2010 , to file the exempt organization return for the organization named as for the organization's return for	ıl	sion will cover.
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1 I	DECEMBER 15, 2010 , to file the exempt organization return for the organization named as for the organization's return for be calendar year or	ıl	sion will cover.
1	DECEMBER 15, 2010 , to file the exempt organization return for the organization named as for the organization's return for be calendar year or	bove The extension	sion will cover.
1	DECEMBER 15, 2010 , to file the exempt organization return for the organization named as for the organization's return for production or the organization's return for the organization named as for the organization's return for the organization named as for the organization organization named as for the organization's return for the organization named as for the organization's return for the organization named as for the organization's return for the organization named as for the organization's return for the organization named as for the organization named as for the organization named as for the organization organization named as for the organization is sufficiently as for the organization named as for the organization organization named as for the organization named	bove The extension	sion will cover.
1	DECEMBER 15, 2010 , to file the exempt organization return for the organization named as for the organization's return for calendar year or Calendar year or X tax year beginning MAY 1, 2009 , and ending APR 30, 2010 it his tax year is for less than 12 months, check reason Initial return Final return it his application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any	bove The extension Change in ac	counting period
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1 Iss	DECEMBER 15, 2010 , to file the exempt organization return for the organization named as for the organization's return for calendar year or X tax year beginning MAY 1, 2009 , and ending APR 30, 2010 this tax year is for less than 12 months, check reason Initial return Final return this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any correfundable credits. See instructions this application is for Form 990-PF or 990-T, enter any refundable credits and estimated	bove The extension Change in ac	counting period
1 Issue Is	DECEMBER 15, 2010 , to file the exempt organization return for the organization named as for the organization's return for calendar year or X tax year beginning MAY 1, 2009 , and ending APR 30, 2010 this tax year is for less than 12 months, check reason Initial return Final return this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any conrefundable credits. See instructions this application is for Form 990-PF or 990-T, enter any refundable credits and estimated ax payments made Include any prior year overpayment allowed as a credit.	bove The extension Change in ac	counting period
1	DECEMBER 15, 2010 , to file the exempt organization return for the organization named as for the organization's return for calendar year or calendar year or X tax year beginning MAY 1, 2009 , and ending APR 30, 2010 this tax year is for less than 12 months, check reason Initial return Final return this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any conrefundable credits. See instructions this application is for Form 990-PF or 990-T, enter any refundable credits and estimated ax payments made Include any prior year overpayment allowed as a credit blance Due. Subtract line 3b from line 3a Include your payment with this form, or, if required,	bove The extension Change in ac	counting period
1	DECEMBER 15, 2010 , to file the exempt organization return for the organization named as for the organization's return for calendar year or X tax year beginning MAY 1, 2009 , and ending APR 30, 2010 this tax year is for less than 12 months, check reason Initial return Final return this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any conrefundable credits. See instructions this application is for Form 990-PF or 990-T, enter any refundable credits and estimated ax payments made Include any prior year overpayment allowed as a credit.	bove The extension Change in ac	sion will cover.