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## **Return of Private Foundation**

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

2009

OMB No 1545-0052

Intern	al Rev	enue Service Note. The Touridation may t	<del></del>			
For c	alen	far year 2009, or tax year beginning AUG	1, 2009	, and ending	JUL 31, 2010	- <u>-</u> -
G C	heck	all that apply Initial return	Initial return of a fo	rmer public charity	Final return	1
		Amended return	Address chan	ge	Name change	
llse	the i	Name of foundation			A Employer identification	number
	ine i ibel	CHARLES GEORGE RESCH	II MEMORIAL			
	erwis	e FOUNDATION, INC.			39-1333315	
	rint	Number and street (or P O box number if mail is not de	Invered to street address)	Room/suite	<b>B</b> Telephone number	
	type	E 0 0 7 E E I (1)			(715)241-2	117
See		I GIIV OF HIWIT STATE ADDITIE CODE			C If exemption application is p	ending, check here
Instr	u C l l O	<sup>ns.</sup> WAUSAU, WI 54401			D 1. Foreign organizations	
H C	heck	type of organization. X Section 501(c)(3) ex	empt private foundation		<ol><li>Foreign organizations me check here and attach or</li></ol>	eeting the 85% test, proputation
	] Sec	tion 4947(a)(1) nonexempt charitable trust	Other taxable private found:	ation	E If private foundation sta	
I Fa	r ma	ket value of all assets at end of year   J   Accounting	ng method X Cash	Accrual	under section 507(b)(1	
(fre	om F	art II, col (c), line 16)	her (specify)		F If the foundation is in a	60-month termination
<b></b>	\$	252698 . (Part I, colu	mn (d) must be on cash i	basis)	under section 507(b)(1	
Pa	rt I	Analysis of Revenue and Expenses	(a) Revenue and	(b) Net investment	(c) Adjusted net	(1) Disbursements for chantable purposes
_		(The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a))	expenses per books	income	income	(cash basis only)
	1	Contributions, gifts, grants, etc , received	1950.		N/A	
	2	Check X If the foundation is not required to attach Sch. B				
	3	Interest on savings and temporary cash investments	416.	416.		STATEMENT 1
	4	Dividends and interest from securities	6033.	6033.		STATEMENT 2
Ì	5a	Gross rents				
	b	Net rental income or (loss)				
		Net gain or (loss) from sale of assets not on line 10	TILED	for a		
Revenue	b	Gross sales pnce for all assets on line 6a	RECEIVED	\ <u>\@\</u>	,	
e e	7	Capital gain net income (from Part IV, line 2)	Kin .	$n \mid \tilde{\omega} \mid 0$ .		
Œ	8	Net short-term capital gain	1610	10 700		
	9	Income modifications	10 DEC 16 20	1		
	10a	Gross sales less returns and allo∔ances	OGDEN	UT		
	b	Less Cost of goods sold	GOE			
	C	Gross profit or (loss)				
	11	Other income				
!	12	Total. Add lines 1 through 11	8399.	6449.		
	13	Compensation of officers, directors, trustees, etc	0.	0.		0.
	14	Other employee salaries and wages				
	15	Pension plans, employee benefits				
ses	16a	Legal fees STMT 3	1375.	0.	<del></del>	1375.
Jen	b	Accounting fees STMT 4	540.	0.		540.
Ext	C	Other professional fees		-		
ive	17	Interest				
Operating and Administrative Expens	18	Taxes STMT 5	162.	0.		0.
nist	19	Depreciation and depletion				
<u>=</u>	20	Оссиралсу				
Ą	21	Travel, conferences, and meetings				
pue	22	Printing and publications				
ğ	23	Other expenses STMT 6	2314.	0.		10.
ati	24	Total operating and administrative				
per		expenses. Add lines 13 through 23	4391.	0.		1925.
0	25	Contributions, gifts, grants paid	3400.			3400.
		Total expenses and disbursements.				
		Add lines 24 and 25	7791.	0.		5325.
	27	Subtract line 26 from line 12				
	l	Excess of revenue over expenses and disbursements	608.			<u></u>
	l .	Net investment income (if negative, enter -0-)		6449		3, -, 1,
_	C	Adjusted net income (if negative, enter -0-)			N/A	
9235 02-0	01 2-10	LHA For Privacy Act and Paperwork Reduction	Act Notice, see the instru	ctions.		Form <b>990-PF</b> (2009)

Beginning of year

(a) Book Value

Form 990-PF (2009)

FOUNDATION, INC.

Part II Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only

39-1333315

(c) Fair Market Value

End of year

(b) Book Value

Page 2

	י ן	Cash - non-interest-bearing	5535.	9942.	9942.
	2	Savings and temporary cash investments			
	3	Accounts receivable -			
	}	Less allowance for doubtful accounts			
	4	Pledges receivable			
		Less allowance for doubtful accounts		1	
	5	Grants receivable			
	6	Receivables due from officers, directors, trustees, and other			
	•	disqualified persons			
	7	Other notes and loans receivable			
	′			1	
	_	Less allowance for doubtful accounts			
Assets	8	Inventories for sale or use			
\ss	9	Prepaid expenses and deferred charges .			
•	10a	Investments - U.S. and state government obligations			
	þ	Investments - corporate stock STMT 7	27046.	27046.	49444.
	C	Investments - corporate bonds			
	11	Investments - land, buildings, and equipment basis			, , , , , , , , , , , , , , , , , , , ,
		Less accumulated depreciation	<b>)</b>	j	
	12	Investments - mortgage loans			
	13	Investments - other STMT 8	212561.	208450.	190300.
	14	Land, buildings, and equipment basis			
		Less accumulated depreciation			
	15	Other assets (describe CSV LIFE INSURANCE )	2700.	3012.	3012.
	16	Total assets (to be completed by all filers)	247842.	248450.	252698.
				2101301	2320301
	18	Grants payable			
<b>/A</b>	19				
ij	1.1	Deferred revenue			
Liabilities	20	Loans from officers, directors, trustees, and other disqualified persons			
.≅	21	Mortgages and other notes payable			
	22	Other liabilities (describe			
	ļ		1		
_	23	Total liabilities (add lines 17 through 22)	0.	0.	
		Foundations that follow SFAS 117, check here			
r.n	}	and complete lines 24 through 26 and lines 30 and 31.	1		
ë	24	Unrestricted			
Balances	25	Temporarily restricted			
	26	Permanently restricted			
5		Foundations that do not follow SFAS 117, check here			
or Fund		and complete lines 27 through 31.			
ō	27	Capital stock, trust principal, or current funds	0.	0.	
Net Assets	28	Paid-in or capital surplus, or land, bldg, and equipment fund	0.	0.	
Ass	29	Retained earnings, accumulated income, endowment, or other funds	247842.	248450.	
et	30	Total net assets or fund balances	247842.	248450.	
Z	30	I oral lier assers of Iring Datalices	247042.	240430.	
	24	Total Cabination and anti-contest	247042	240450	
_	31	Total liabilities and net assets/fund balances	247842.	248450.	
P	arŧ	Analysis of Changes in Net Assets or Fund Bal	ances		
_	Total	not consta as fund halagees at heaves of the D. I. I		<del></del>	
		net assets or fund balances at beginning of year - Part II, column (a), line 30			247042
		t agree with end-of-year figure reported on prior year's return)		1	247842.
	_	amount from Part I, line 27a		2	608.
		r increases not included in line 2 (itemize)		3	0.
		lines 1, 2, and 3		4	248450.
		eases not included in line 2 (itemize)		5	0.
<u>6</u>	<u>Total</u>	net assets or fund balances at end of year (line 4 minus line 5) - Part II, colu	mn (b), line 30	6	248450.
					orm <b>990-PF</b> (2009)

\_\_\_ Page 3

(a) List and desc	ribe the kii	sses for Tax on In nd(s) of property sold (e g or common stock, 200 shs	, real estate,	псоте	P	How acqui - Purchas - Donatio	e ' '	) Date acquired mo , day, yr )	(d) Date sold (mo , day, yr )
1a									
b NO	NE	<del></del>			-				
<u>C</u>		··········			<del> </del>				
e									
(e) Gross sales price	(1)	Depreciation allowed (or allowable)		t or other basis xpense of sale	.1			(h) Gain or (los (e) plus (f) minus	
a									
<u>b</u>	ļ								
<u>c</u>									
<u>d</u>							-		
Complete only for assets showi	ng gain in (		he foundation	on 12/31/69			(I) G	ains (Col (h) ga	in minus
(i) F M V as of 12/31/69	T	j) Adjusted basis as of 12/31/69	(k) Ex	cess of col (i) col (j), if any			còl (k	c), but not less th osses (from col	an -0-) <b>or</b>
a									
_b									
<u>C</u>									
<u>d</u>		·.·-							
<u>e</u>	ļ				_				
2 Capital gain net income or (net c	apıtal loss)	If gain, also enter If (loss), enter -0-	in Part I, line - in Part I, line	7 7	. }	2			
3 Net short-term capital gain or (lo If gain, also enter in Part I, line 8 If (loss), enter -0- in Part I, line 8	, column (d		d (6)		}	,			
Part V Qualification U	Inder S	ection 4940(e) for	Reduced	Tax on Net	t Inv	estme	nt Inco	me	
If section 4940(d)(2) applies, leave to Was the foundation liable for the sectif "Yes," the foundation does not quartie the appropriate amount in	ction 4942 olify under	tax on the distributable am section 4940(e) Do not co	mplete this pa	ırt					Yes X No
(a) Base period years		(b)			(c)			Dist	(d) ribution ratio
Calendar year (or tax year beginn	ing in)	Adjusted qualifying dist		Net value of n	oncha			(col (b)	divided by col (c))
2008			3850.				5045.		.017108
2007			67284. 1199.	·			7011. 0645.		.402872 .013227
2006 2005			4685.				5217.		.062286
2004			2745.				1195.		.038556
2 Total of line 1, column (d)	<u>'</u>							2	.534049
3 Average distribution ratio for the the foundation has been in existe	-		on line 2 by 5,	or by the numbe	r of ye	ears		3	.106810
4 Enter the net value of noncharita	ble-use as:	sets for 2009 from Part X,	line 5					4	235742.
5 Multiply line 4 by line 3								5	25180.
6 Enter 1% of net investment inco	me (1% of	Part I, line 27b) .						6	64.
7 Add lines 5 and 6				•				7	25244.
8 Enter qualifying distributions fro					•		_	8	5325.
If line 8 is equal to or greater tha See the Part VI instructions.	n line 7, ch	neck the box in Part VI, line	1b, and comp	olete that part usi	ing a 1	1% tax rat	e		

CHARLES GEORGE RESCH II MEMORIAL FOUNDATION. INC.

Forn	990-PF(2009) FOUNDATION, INC.	39-	1333	315		Page 4
Pa	rt VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4940(c)	948 -	see ir	nstru	ction	าร)
1 a	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)					
þ	Domestic foundations that meet the section 4940(e) requirements in Part V, check here   and enter 1%	1			1	29.
	of Part I, line 27b					
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-)	2				0.
3	Add lines 1 and 2	3			1	29.
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	4				0.
5	Tax based on investment income. Subtract line 4 from line 3 If zero or less, enter -0-	5			1	29.
6	Credits/Payments					
а	2009 estimated tax payments and 2008 overpayment credited to 2009					
	Exempt foreign organizations - tax withheld at source 6b					
	Tax paid with application for extension of time to file (Form 8868) 6c					
	Backup withholding erroneously withheld 6d 6d					
	Total credits and payments Add lines 6a through 6d	7				0.
8	Enter any <b>penalty</b> for underpayment of estimated tax. Check here if Form 2220 is attached	8				
	Tax due If the total of lines 5 and 8 is more than line 7, enter amount owed	9		-	1	29.
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid	10	Ø	-		
11		11				
_	rt 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	10			Yes	No
	any political campaign?			1a		Х
ħ	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see 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	d or				
	distributed by the foundation in connection with the activities	<i>a</i> 0,				
	Did the foundation file Form 1120-POL for this year?			10		Х
	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year					
u	(1) On the foundation $\triangleright$ \$					
	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation					
-	managers > \$ 0.					
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?			2	1	Х
_	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, of bulgue, or other circles returned and the second appropriate the second ap	'		,	•	Х
4-	bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes			3 4a	<del></del>	X
	Did the foundation have unrelated business gross income of \$1,000 or more during the year?  If "Yes," has it filed a tax return on Form 990-T for this year?	N	/A	4a 4b	<del>                                     </del>	
		1,1	/ 11			X
J	Was there a liquidation, termination, dissolution, or substantial contraction during the year?  If "Yes," attach the statement required by General Instruction T.			5		
c						
0	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either					
	By language in the governing instrument, or	I				
	By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state    Property of the governor instrument of the governing instrument of the governor instrument of the governor instrument of the governor instrument of the governor instrument of the governing instrument of the governor instrument of the governing instrument of the governor instrument of th	law		_	v	
_	remain in the governing instrument?			6	X	
′	Did the foundation have at least \$5,000 in assets at any time during the year?			7	-	<del>                                     </del>
_	If "Yes," complete Part II, col. (c), and Part XV			1		1
82	Enter the states to which the foundation reports or with which it is registered (see instructions)					
	WI					
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			8b	X	ļ
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		1		
	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		X

orm	CHARLES GEORGE RESCH II MEMORIAL 1990-PF (2009) FOUNDATION, INC. 39-13			
	<u></u>	33315		Page 5
	At any time during the west did the found to a directly seements.			
• •	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of section 512(b)(13)? If "Yes," attach schedule (see instructions)			v
12	Did the foundation acquire a direct or indirect interest in any applicable insurance contract before	11	<del> </del>	X
	August 17, 2008?	1.0		X
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	12	X	
	Website address ► N/A	13	_ <u>^</u>	L
14	The books are in care of ► KATHY STRASSER  Telephone no ►715—	241_2	117	
• •	Located at ► 2607 FERN LN, WAUSAU, WI			
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - Check here	21101		
	and enter the amount of tax-exempt interest received or accrued during the year	N	I/A	
Pa	art VII-B Statements Regarding Activities for Which Form 4720 May Be Required		<u> </u>	
	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.	$\overline{}$	Yes	No
1a	During the year did the foundation (either directly or indirectly)	<b> </b>	163	110
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person?	, 1		1
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from)	'		1
	a disqualified person?	, [		
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?			
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?			
	(5) Transfer any income or assets to a disqualified person (or make any of either available	'		1
	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			
	termination of government service, if terminating within 90 days )	,		
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)?  N/A	. 1b	İ	
	Organizations relying on a current notice regarding disaster assistance check here	ր <del>  '''</del>	-	
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	<b>-</b>		
	before the first day of the tax year beginning in 2009?	10		Х
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation	1.6	-	
	defined in section 4942(j)(3) or 4942(j)(5))			
a	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?	,		
	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	- }		
	statement - see instructions )  N/A	2b		
C	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here	20	1	<del> </del>
3a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time			
	during the year?	,		
b	If "Yes," did it have excess business holdings in 2009 as a result of (1) any purchase by the foundation or disqualified persons after			
	May 26, 1969, (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7)) to dispose	1		
	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,			1
	Form 4720, to determine if the foundation had excess business holdings in 2009)  N/A	.   3b	ĺ	1
4a	Did the foundation invest during the year any amount in a manner that would reconside its charitable purposes?	12	<del> </del> -	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?

Form **990-PF** (2009)

. , CHARLES GEORGE RESCH II	MEMORIAL			
Form 990-PF (2009) FOUNDATION, INC.			39 <b>–</b> 133331	L 5 Page <b>6</b>
Part VII-B Statements Regarding Activities for Which I	orm 4720 May Be F	Required (continu	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))?	Ye	s X No	
(2) Influence the outcome of any specific public election (see section 4955), o	r to carry on, directly or indire			
any voter registration drive?			s X No	
(3) Provide a grant to an individual for travel, study, or other similar purposes	7	L Ye	s X No	
(4) Provide a grant to an organization other than a charitable, etc., organizatio	n described in section	<b></b>	(Tab)	
509(a)(1), (2), or (3), or section 4940(d)(2)?			s X No	
(5) Provide for any purpose other than religious, charitable, scientific, literary,	or educational purposes, or f			
the prevention of cruelty to children or animals?			s X No	
b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify und		n Regulations	N7 / 73 - 6	.
section 53 4945 or in a current notice regarding disaster assistance (see instru			N/A 5	ib
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 for				
expenditure responsibility for the grant?		/A L Ye	s L No	
If "Yes," attach the statement required by Regulations section 53 494.				
6a Did the foundation, during the year, receive any funds, directly or indirectly, to a personal benefit contract?	pay premiums on	□ v <sub>o</sub>	s X No	
<b>b</b> Did the foundation, during the year, pay premiums, directly or indirectly, on a p	oreanal hanofit contract?	TE		ib X
If "Yes" to 6b. file Form 8870.	erzonai Denenii Contract:	•	-	""
7a At any time during the tax year, was the foundation a party to a prohibited tax s	helter transaction?		s X No	
b If yes, did the foundation receive any proceeds or have any net income attribut			/-	7b
Information About Officers Directors Trust		nagers. Highly		
Part VIII Paid Employees, and Contractors				
1 List all officers, directors, trustees, foundation managers and their	compensation.			
	(b) Title, and average	(c) Compensation	(d) Contributions to	(e) Expense
earthe has ame (c)	hours per week devoted	(If not paid.	employee benefit plans	account, other
(a) Name and address	hours per week devoted to position	(If not paid, enter -0-)	employee benefit plans and deferred compensation	(e) Expense account, other allowances
KATHY STRASSER	hours per week devoted		employee benefit plans and deferred compensation	account, other allowances
KATHY STRASSER 2607 FERN LN	hours per week devoted to position  DIRECTOR	enter -0-)	compensation	allowances
KATHY STRASSER 2607 FERN LN WAUSAU, WI 54401	hours per week devoted to position DIRECTOR 1.00		employee benefit plans and deferred compensation	account, other allowances
KATHY STRASSER 2607 FERN LN WAUSAU, WI 54401 MARK RESCH	hours per week devoted to position  DIRECTOR	enter -0-)	compensation	allowances
KATHY STRASSER 2607 FERN LN WAUSAU, WI 54401 MARK RESCH N1468 SUGARBUSH RD	hours per week devoted to position  DIRECTOR  1.00  DIRECTOR	'enter'-0-)	compensation 0 .	allowances  O .
KATHY STRASSER 2607 FERN LN WAUSAU, WI 54401 MARK RESCH N1468 SUGARBUSH RD ANTIGO, WI 54409	hours per week devoted to position  DIRECTOR  1.00  DIRECTOR  0.00	enter -0-)	compensation	allowances
KATHY STRASSER 2607 FERN LN WAUSAU, WI 54401 MARK RESCH N1468 SUGARBUSH RD ANTIGO, WI 54409 KELLY RESCH	hours per week devoted to position  DIRECTOR  1.00  DIRECTOR	'enter'-0-)	compensation 0 .	allowances  O .
KATHY STRASSER 2607 FERN LN WAUSAU, WI 54401 MARK RESCH N1468 SUGARBUSH RD ANTIGO, WI 54409 KELLY RESCH 4143 RBY LN	hours per week devoted to position  DIRECTOR  1.00  DIRECTOR  0.00  DIRECTOR	0 .	0 •	O.
KATHY STRASSER 2607 FERN LN WAUSAU, WI 54401 MARK RESCH N1468 SUGARBUSH RD ANTIGO, WI 54409 KELLY RESCH	hours per week devoted to position  DIRECTOR  1.00  DIRECTOR  0.00	'enter'-0-)	compensation 0 .	allowances  O .
KATHY STRASSER 2607 FERN LN WAUSAU, WI 54401 MARK RESCH N1468 SUGARBUSH RD ANTIGO, WI 54409 KELLY RESCH 4143 RBY LN	hours per week devoted to position  DIRECTOR  1.00  DIRECTOR  0.00  DIRECTOR	0 .	0 •	O.
KATHY STRASSER 2607 FERN LN WAUSAU, WI 54401 MARK RESCH N1468 SUGARBUSH RD ANTIGO, WI 54409 KELLY RESCH 4143 RBY LN	hours per week devoted to position  DIRECTOR  1.00  DIRECTOR  0.00  DIRECTOR	0 .	0 •	O.
KATHY STRASSER 2607 FERN LN WAUSAU, WI 54401 MARK RESCH N1468 SUGARBUSH RD ANTIGO, WI 54409 KELLY RESCH 4143 RBY LN	hours per week devoted to position  DIRECTOR  1.00  DIRECTOR  0.00  DIRECTOR  0.00	0 . 0 .	0 • 0 •	O.
KATHY STRASSER 2607 FERN LN WAUSAU, WI 54401 MARK RESCH N1468 SUGARBUSH RD ANTIGO, WI 54409 KELLY RESCH 4143 RBY LN EAGAN, MN 56122	hours per week devoted to position  DIRECTOR  1.00  DIRECTOR  0.00  DIRECTOR  0.00  DIRECTOR  (b) Title, and average	O. O. enter "NONE."	O .  O .  O .	O. O. (e) Expense
KATHY STRASSER 2607 FERN LN WAUSAU, WI 54401 MARK RESCH N1468 SUGARBUSH RD ANTIGO, WI 54409 KELLY RESCH 4143 RBY LN EAGAN, MN 56122	hours per week devoted to position  DIRECTOR  1.00  DIRECTOR  0.00  DIRECTOR  0.00	0 . 0 .	0 •	allowances  O.  O.
KATHY STRASSER 2607 FERN LN WAUSAU, WI 54401 MARK RESCH N1468 SUGARBUSH RD ANTIGO, WI 54409 KELLY RESCH 4143 RBY LN EAGAN, MN 56122	hours per week devoted to position  DIRECTOR  1.00  DIRECTOR  0.00  DIRECTOR  0.00  DIRECTOR  (b) Title, and average	O. O. enter "NONE."	O .  O .  (d) Contributions to employee benefit plans and deferred	allowances  O.  O.  (e) Expense account, other
KATHY STRASSER 2607 FERN LN WAUSAU, WI 54401 MARK RESCH N1468 SUGARBUSH RD ANTIGO, WI 54409 KELLY RESCH 4143 RBY LN EAGAN, MN 56122  2 Compensation of five highest-paid employees (other than those incomplete than \$50,000	hours per week devoted to position  DIRECTOR  1.00  DIRECTOR  0.00  DIRECTOR  0.00  DIRECTOR  (b) Title, and average	O. O. enter "NONE."	O .  O .  (d) Contributions to employee benefit plans and deferred	allowances  O.  O.  (e) Expense account, other
KATHY STRASSER 2607 FERN LN WAUSAU, WI 54401 MARK RESCH N1468 SUGARBUSH RD ANTIGO, WI 54409 KELLY RESCH 4143 RBY LN EAGAN, MN 56122  2 Compensation of five highest-paid employees (other than those incomplete than \$50,000	hours per week devoted to position  DIRECTOR  1.00  DIRECTOR  0.00  DIRECTOR  0.00  DIRECTOR  (b) Title, and average	O. O. enter "NONE."	O .  O .  (d) Contributions to employee benefit plans and deferred	allowances  O.  O.  (e) Expense account, other
KATHY STRASSER 2607 FERN LN WAUSAU, WI 54401 MARK RESCH N1468 SUGARBUSH RD ANTIGO, WI 54409 KELLY RESCH 4143 RBY LN EAGAN, MN 56122  2 Compensation of five highest-paid employees (other than those incomplete than \$50,000	hours per week devoted to position  DIRECTOR  1.00  DIRECTOR  0.00  DIRECTOR  0.00  DIRECTOR  (b) Title, and average	O. O. enter "NONE."	O .  O .  (d) Contributions to employee benefit plans and deferred	allowances  O.  O.  (e) Expense account, other
KATHY STRASSER 2607 FERN LN WAUSAU, WI 54401 MARK RESCH N1468 SUGARBUSH RD ANTIGO, WI 54409 KELLY RESCH 4143 RBY LN EAGAN, MN 56122  2 Compensation of five highest-paid employees (other than those incomplete than \$50,000	hours per week devoted to position  DIRECTOR  1.00  DIRECTOR  0.00  DIRECTOR  0.00  DIRECTOR  (b) Title, and average	O. O. enter "NONE."	O .  O .  (d) Contributions to employee benefit plans and deferred	allowances  O.  O.  (e) Expense account, other
KATHY STRASSER 2607 FERN LN WAUSAU, WI 54401 MARK RESCH N1468 SUGARBUSH RD ANTIGO, WI 54409 KELLY RESCH 4143 RBY LN EAGAN, MN 56122  2 Compensation of five highest-paid employees (other than those incomplete than \$50,000	hours per week devoted to position  DIRECTOR  1.00  DIRECTOR  0.00  DIRECTOR  0.00  DIRECTOR  (b) Title, and average	O. O. enter "NONE."	O .  O .  (d) Contributions to employee benefit plans and deferred	allowances  O.  O.  (e) Expense account, other
KATHY STRASSER 2607 FERN LN WAUSAU, WI 54401 MARK RESCH N1468 SUGARBUSH RD ANTIGO, WI 54409 KELLY RESCH 4143 RBY LN EAGAN, MN 56122  2 Compensation of five highest-paid employees (other than those incomplete than \$50,000	hours per week devoted to position  DIRECTOR  1.00  DIRECTOR  0.00  DIRECTOR  0.00  DIRECTOR  (b) Title, and average	O. O. enter "NONE."	O .  O .  (d) Contributions to employee benefit plans and deferred	allowances  O.  O.  (e) Expense account, other
KATHY STRASSER 2607 FERN LN WAUSAU, WI 54401 MARK RESCH N1468 SUGARBUSH RD ANTIGO, WI 54409 KELLY RESCH 4143 RBY LN EAGAN, MN 56122  2 Compensation of five highest-paid employees (other than those incomplete than \$50,000	hours per week devoted to position  DIRECTOR  1.00  DIRECTOR  0.00  DIRECTOR  0.00  diuded on line 1). If none,  (b) Title, and average	O. O. enter "NONE."	O .  O .  (d) Contributions to employee benefit plans and deferred	allowances  O.  O.  (e) Expense account, other
KATHY STRASSER 2607 FERN LN WAUSAU, WI 54401 MARK RESCH N1468 SUGARBUSH RD ANTIGO, WI 54409 KELLY RESCH 4143 RBY LN EAGAN, MN 56122  2 Compensation of five highest-paid employees (other than those incomplete than \$50,000	hours per week devoted to position  DIRECTOR  1.00  DIRECTOR  0.00  DIRECTOR  0.00  diuded on line 1). If none,  (b) Title, and average	O. O. enter "NONE."	O .  O .  (d) Contributions to employee benefit plans and deferred	allowances  O.  O.  (e) Expense account, other

Total number of other employees paid over \$50,000

# CHARLES GEORGE RESCH II MEMORIAL FOUNDATION, INC.

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Part VIII Information About Officers, Directors, Trustees, Foundation Paid Employees, and Contractors (continued)	n Managers, Highly	
3 Five highest-paid independent contractors for professional services. If none, enter "N	IONE."	
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE	3 7 7.	_
Total number of others receiving over \$50,000 for professional services		<b>▶</b> 0
Part IX-A Summary of Direct Charitable Activities		<del></del>
List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical number of organizations and other beneficiaries served, conferences convened, research papers produce		Expenses
1 N/A		
2		
3		
4		
Dot W.D.		
Part IX-B Summary of Program-Related Investments  Describe the two largest program-related investments made by the foundation during the tax year on line	on Lond 9	Amount
22.12	as I allu Z	Amount
1 N/A		
2		
All other program-related investments. See instructions		
3		
Total. Add lines 1 through 3	<b>&gt;</b>	0.

39-1333315 Form 990-PF (2009) FOUNDATION, INC. Page 8 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 228737. a Average monthly fair market value of securities 1a 7739. 16 b Average of monthly cash balances 2856. c Fair market value of all other assets 10 239332. 1d d Total (add lines 1a, b, and c) Reduction claimed for blockage or other factors reported on lines 1a and 0. 1e 1c (attach detailed explanation) Acquisition indebtedness applicable to line 1 assets 2 239332. 3 3 Subtract line 2 from line 1d 3590. Cash deemed held for charitable activities Enter 1 1/2% of line 3 (for greater amount, see instructions) 4 235742. 5 Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4. 11787. Minimum investment return. Enter 5% of line 5 Distributable Amount (see instructions) (Section 4942(1)(3) and (1)(5) private operating foundations and certain Part XI foreign organizations check here and do not complete this part ) 11787. 1 Minimum investment return from Part X, line 6 129. Tax on investment income for 2009 from Part VI, line 5 Income tax for 2009 (This does not include the tax from Part VI) 129. 2c Add lines 2a and 2b 11658. Distributable amount before adjustments Subtract line 2c from line 1 3 3 0. Recoveries of amounts treated as qualifying distributions 11658. 5 Add lines 3 and 4 0. 6 Deduction from distributable amount (see instructions) 11658. 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 1 5325. 1a Expenses, contributions, gifts, etc - total from Part I, column (d), line 26 0. 1b Program-related investments - total from Part IX-B h 2 Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes Amounts set aside for specific charitable projects that satisfy the 3a Suitability test (prior IRS approval required) 3b Cash distribution test (attach the required schedule) b 5325. 4 Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4 Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment

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

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5

6

income Enter 1% of Part I, line 27b

Adjusted qualifying distributions. Subtract line 5 from line 4

4940(e) reduction of tax in those years

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FOUNDATION, INC.

Part XIII Undistribute	ed Income (see in	structions)			
		(a) Corpus	(b) Years prior to 2008	(c) 2008	(d) 2009
1 Distributable amount for 2009 line 7	from Part XI,				11658.
2 Undistributed income, if any, as of	the end of 2009				
a Enter amount for 2008 only			İ	0.	
<b>b</b> Total for prior years.		<del></del>	* * * * * * * * * * * * * * * * * * * *		
			0.		
3 Excess distributions carryover	r, if any, to 2009	· · · · · · · · · · · · · · · · · · ·			
<b>a</b> From 2004					
<b>b</b> From 2005					
c From 2006					
d From 2007	53039.				
e From 2008	33333				
f Total of lines 3a through e		53039.			
4 Qualifying distributions for 20	00 from	33037.			····
Part XII, line 4 > \$	5325.				
		ĺ		0.	
a Applied to 2008, but not more					
b Applied to undistributed incor	· •		0.		
years (Election required - see			0.		
c Treated as distributions out of	i	0.	ļ		
(Election required - see instru			<u> </u>		5325.
d Applied to 2009 distributable	P	0.			3323.
e Remaining amount distributed				· · · · · · · · · · · · · · · · · · ·	6333.
5 Excess distributions carryover appl (If an amount appears in column (d) must be shown in column (a))	ted to 2009 , the same amount	6333.			0333.
6 Enter the net total of each co indicated below.	lumn as				
2 Corpus Add lines 3f, 4c, and 4e S	ubtract line 5	46706.			
b Prior years' undistributed inco	ome Subtract				
line 4b from line 2b			0.		
c Enter the amount of prior year undistributed income for whic deficiency has been issued, o the section 4942(a) tax has be assessed	h a notice of r on which		0.		
d Subtract line 6c from line 6b	Taxable		0.		
amount - see instructions			V •		
e Undistributed income for 200				0	
4a from line 2a Taxable amou				0.	
f Undistributed income for 200					
lines 4d and 5 from line 1. The	is amount must				_
be distributed in 2010					0.
7 Amounts treated as distribution	ons out of				
corpus to satisfy requirement	s imposed by				
section 170(b)(1)(F) or 4942(	(g)(3)	0.			
8 Excess distributions carryove	r from 2004				
not applied on line 5 or line 7		0.			
9 Excess distributions carryov	er to 2010.				
Subtract lines 7 and 8 from lii	ne 6a	46706.			
10 Analysis of line 9					
a Excess from 2005					
b Excess from 2006					
c Excess from 2007	46706.				

d Excess from 2008 e Excess from 2009

CHARLES GEORGE RESCH II MEMORIAL Form 990-PF (2009) FOUNDATION, INC. 39-1333315 Page 10 Part XIV | Private Operating Foundations (see instructions and Part VII-A, question 9) N/A 1 a 16 the foundation has received a ruling or determination letter that it is a private operating foundation, and the ruling is effective for 2009, enter the date of the ruling b Check box to indicate whether the foundation is a private operating foundation described in section 4942(j)(3) or 4942(1)(5) Tax year Pnor 3 years 2 a Enter the lesser of the adjusted net (a) 2009 (b) 2008 (c) 2007 (d) 2006 (e) Total income from Part I or the minimum 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 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(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 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 Supplementary Information (Complete this part only if the foundation had \$5,000 or more in assets Part XV at any time during the year-see the instructions.) Information Regarding Foundation Managers: a List any managers of the foundation who have contributed more than 2% of the total contributions received by the foundation before the close of any tax year (but only if they have contributed more than \$5,000) (See section 507(d)(2)) NONE b List any managers of the foundation who own 10% or more of the stock of a corporation (or an equally large portion of the ownership of a partnership or other entity) of which the foundation has a 10% or greater interest Information Regarding Contribution, Grant, Gift, Loan, Scholarship, etc., Programs: Check here 🕨 🗓 if the foundation only makes contributions to preselected charitable organizations and does not accept unsolicited requests for funds. If

the foundation makes gifts, grants, etc (see instructions) to individuals or organizations under other conditions, complete items 2a, b, c, and d

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

a The name, address, and telephone number of the person to whom applications should be addressed

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

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c Any submission deadlines

CHARLES GEORGE RESCH II MEMORIAL

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923611 02-02-10

FOUNDATION, INC.

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Form **990-PF** (2009)

Form 990-PF (2009) FOUNDATION, I			39–13333	15 Page 11
Part XV Supplementary Information				
3 Grants and Contributions Paid During the Yo	<del></del>	Payment	<u> </u>	
Recipient  Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
a Paid during the year ALL SAINTS SCHOOL 419 SIXTH AVENUE ANTIGO, WI 54409	NONE	EXEMPT ORGANIZATI	EDUCATIONAL	200.
CAMP LUTHER 1889 KOUBENIC ROAD THREE LAKES, WI 54562	NONE	EXEMPT ORGANIZATI	RELIGIOUS	1000.
PEACE LUTHERAN SCHOOL 300 LINCOLN STREET ANTIGO, WI 54409	NONE	EXEMPT ORGANIZATI	EDUCATIONAL	1200.
RED ROBIN SCHOLARSHIP FOUNDATION PO BOX 214 ANTIGO, WI 54409	NONE	EXEMPT ORGANIZATI	EDUCATIONAL	1000.
Total			▶ 3a	3400.
b Approved for future payment				
NONE				
Total 923611 02-02-10			▶ 3b	0.

Part XVI-A	Analysis of Income-Producing Activities

Enter gross amounts unless otherwise indicated.	Unrelated b	usiness income	Exclude	ed by section 512, 513, or 514	(n)
•	(a) Business	(b) Amount	(C) Exclu- sion	(d) Amount	(e) Related or exempt function income
1 Program service revenue	code		code	Amount	
a	-		-	-	
b			1		
C	-		1		
d	-				<del></del>
e	-	<del></del> -		-	<del></del>
1	-		ļ		
g Fees and contracts from government agencies		···-			<del></del>
2 Membership dues and assessments			<b> </b>		······································
3 Interest on savings and temporary cash					
investments			14	416.	
4 Dividends and interest from securities			14	6033.	
5 Net rental income or (loss) from real estate			<b></b>		
a Debt-financed property			ļļ.		
b Not debt-financed property			11		· · · · · · · · · · · · · · · · · · ·
6 Net rental income or (loss) from personal					
property					<del></del>
7 Other investment income					
8 Gain or (loss) from sales of assets other					
than inventory			<u> </u>		
9 Net income or (loss) from special events					
10 Gross profit or (loss) from sales of inventory			1		
11 Other revenue					
a	_				· <del></del>
b	_		<u> </u>		
c	_		1		<u> </u>
d			1 1		
e					
12 Subtotal Add columns (b), (d), and (e)		0.		6449.	0.
13 Total Add line 12, columns (b), (d), and (e)				13	6449.
(See worksheet in line 13 instructions to verify calculations.)				<del></del>	
Part XVI-B Relationship of Activities	to the Accom	plishment of E	kempt	Purposes	
Line No. Explain below how each activity for which inc	nme is renorted in c	olumn (e) of Part XVI-A	contribu	ited importantly to the accom-	olishment of
the foundation's exempt purposes (other tha				to the second	
		,		···	•
200001	<u>.</u>				
923621 02-02-10					Form <b>990-PF</b> (2009)

39-1<u>333315</u> Page 13 Part XVII Information Regarding Transfers To and Transactions and Relationships With Noncharitable

	. Exempt Organizations					
1	Did the organization directly or indirectly engage in any of the following	owing with any other organizati	on described in section 501(c) of		Yes	No
	the Code (other than section 501(c)(3) organizations) or in section	n 527, relating to political orga	nızatıons?			
a	Transfers from the reporting foundation to a noncharitable exemp	ot organization of.				
	(1) Cash			1a(1)		<u>X</u>
	(2) Other assets			1a(2)		X
þ	Other transactions					
	(1) Sales of assets to a noncharitable exempt organization			16(1)		X
	(2) Purchases of assets from a noncharitable exempt organization	on		1b(2)		X
	(3) Rental of facilities, equipment, or other assets			1b(3)		X
	(4) Reimbursement arrangements			1b(4)		X
	(5) Loans or loan guarantees			1b(5)		X
	(6) Performance of services or membership or fundraising solici	itations		1b(6)		X
C				10		X
đ	If the answer to any of the above is "Yes," complete the following s	schedule Column (b) should a	lways show the fair market value of the goo	ds, other ass	ets,	
	or services given by the reporting foundation. If the foundation re	• •	-			
	column (d) the value of the goods, other assets, or services received					
a)	Line no (b) Amount involved (c) Name of nonchard	table exempt organization	(d) Description of transfers, transactions,	and sharing arr	angeme	ents
	N/.	A				
		··				
		<del>-                                    </del>				
		·				
		<del></del>				
				···········		
		<del></del>				
_		<del></del>				
2a	Is the foundation directly or indirectly affiliated with, or related to, in section 501(c) of the Code (other than section 501(c)(3)) or in	• •	nizations described	Yes	ГХ	
b	If "Yes," complete the following schedule					
_	(a) Name of organization	(b) Type of organization	(c) Description of relat	ionship		
	N/A					
	Under penalties of penury, i declare that I have examined this return, including		• • • • •	, it is true, corre	ct,	,
	and complete Declaration of preparer (other than taxpayer or fiduciary) is base	ed on all information of which prepare	er has any knowledge			g ji
	7	1 /3/8/in	) / refa		*	,
5	Signature of officer or trustee	Date	Title			
<u> </u>	Preparer's		self-	reparer's identify		
5	Bignature Karen J. Novake	<u>-</u>	12/6/10   employed ▶  .	P00057		
	Firm's name (or yours BRETTENGEN, SMITS PO BOX 290	, NOVAK & BAST	TLE, S.C. $EIN > 39-1$	136882		
İ	1 self-employed), PO BOX 290			. <del></del>		· <del>-</del>
	address, and ZIP code ANTIGO, WI 54409		Phone no (7	15) 62	3-7	696
				Form <b>990</b>	-PF	(2009)

FORM 990-PF INTEREST ON SAVI	NGS A	ND TEM	PORARY CA	ASH IN	IVESTMENTS	STATEMENT	]
SOURCE						AMOUNT	
THRIVENT FINANCIAL FOR LUTHER	416						
TOTAL TO FORM 990-PF, PART I,	4	16					
FORM 990-PF DIVIDEND	S AND	INTER	EST FROM	SECUR	RITIES	STATEMENT	
SOURCE		GROSS	AMOUNT	CAPITAL GAINS DIVIDENDS		COLUMN (A) AMOUNT	
RW BAIRD THRIVENT MUTUAL FUND			144. 5889.		0.		44 89
TOTAL TO FM 990-PF, PART I, LN 4			6033.		0.	6033	
FORM 990-PF		LEGAL	FEES			STATEMENT	·····
DESCRIPTION	(A) EXPENSES PER BOOKS		(B) NET INVEST- MENT INCOME		(C) ADJUSTED NET INCOM		
LEGAL FEES	1375		0.			13	75
TO FM 990-PF, PG 1, LN 16A =		1375.		0.		13	75
FORM 990-PF	ACCOUNTING FEES					STATEMENT	
DESCRIPTION	EXPE	A) NSES BOOKS	(B) NET INVI MENT INC		(C) ADJUSTED NET INCOM		
ACCOUNTING FEES	<del></del>	540.	·	0.	· · · · · · · · · · · · · · · · · · ·	5	40
TO FORM 990-PF, PG 1, LN 16B		540.		0.			40

FORM 9.90-PF	TAX	ES		STATEMENT 5		
DESCRIPTION		NET INVES	ST-	(C) ADJUSTED NET INCOM	CHARITABLE	
EXCISE TAX	162.		0.			0.
TO FORM 990-PF, PG 1, LN 18 =	162.		0.			0.
FORM 990-PF			STATEMENT	6		
DESCRIPTION		NET INVES	ST-	(C) ADJUSTED NET INCOM	CHARITA	
FILING FEE LIFE INSURANCE	10. 2304.		0.			10.
TO FORM 990-PF, PG 1, LN 23	2314.		0.			10.
FORM 990-PF	CORPORAT	E STOCK			STATEMENT	7
DESCRIPTION			во	OK VALUE	FAIR MARKE VALUE	T
EMC CORP MASS VISA INC CLASS A		-		3667. 23379.	282 212	
TOTAL TO FORM 990-PF, PART II	27046.		49444.			
FORM 990-PF	OTHER INV			STATEMENT	8	
DESCRIPTION		LUATION IETHOD	ВО	OK VALUE	FAIR MARKE VALUE	Т
THRIVENT MUTUAL FUND	<del></del> -	FMV	208450.		190300.	
TOTAL TO FORM 990-PF, PART I	I, LINE 13	-	208450.		190300.	