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Form **990-EZ****Short Form**
Return of Organization Exempt From Income Tax

OMB No 1545-1150

2009Department of the Treasury
Internal Revenue ServiceUnder section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code
(except black lung benefit trust or private foundation)
▶ Sponsoring organizations of donor advised funds and controlling organizations as defined in section 512(b)(13) must file Form 990. All other organizations with gross receipts less than \$500,000 and total assets less than \$1,250,000 at the end of the year may use this form.
▶ The organization may have to use a copy of this return to satisfy state reporting requirements**Open to Public Inspection****A** For the 2009 calendar year, or tax year beginning 10/01, 2009, and ending 9/30, 2010**B** Check if applicable

- ☒ Address change
☐ Name change
☐ Initial return
☐ Termination
☐ Amended return
☐ Application pending

Please use IRS label or print or type. See Specific Instructions.

C WREA Foundation, Inc.
6405 Century Avenue #201
Middleton, WI 53562-2850**D** Employer identification number

39-1852926

E Telephone number

(608) 831-5115

F Group Exemption Number ▶

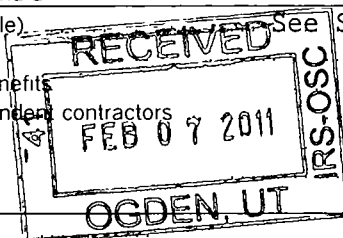
• Section 501(c)(3) organizations and 4947(a)(1) nonexempt charitable trusts must attach a completed Schedule A (Form 990 or 990-EZ).

G Accounting method ☐ Cash ☒ Accrual
Other (specify) ▶**I** Website: ▶ www.wrea.net/foundation**H** Check ☐ if the organization is not required to attach Schedule B (Form 990, 990-EZ, or 990-PF)**J** Tax-exempt status (check only one) — ☒ 501(c) (3) (insert no) 4947(a)(1) or 527**K** Check ☐ if the organization is not a section 509(a)(3) supporting organization and its gross receipts are normally not more than \$25,000. A Form 990-EZ or Form 990 return is not required, but if the organization chooses to file a return, be sure to file a complete return.**L** Add lines 5b, 6b, and 7b, to line 9 to determine gross receipts, if \$500,000 or more, file Form 990 instead of Form 990-EZ

▶ \$ 74,255.

Part I Revenue, Expenses, and Changes in Net Assets or Fund Balances (See the instructions for Part I.)

REVENUE	1	Contributions, gifts, grants, and similar amounts received	1	64,377.
	2	Program service revenue including government fees and contracts	2	
	3	Membership dues and assessments	3	
	4	Investment income	4	9,878.
	5a	Gross amount from sale of assets other than inventory	5a	
	5b	Less cost or other basis and sales expenses	5b	
	5c	Gain or (loss) from sale of assets other than inventory (Subtract line 5b from line 5a)	5c	
	6	Special events and activities (complete applicable parts of Schedule G) If any amount is from gaming, check here <input type="checkbox"/>	6	
	6a	Gross revenue (not including \$ of contributions reported on line 1)	6a	
6b	Less direct expenses other than fundraising expenses	6b		
6c	Net income or (loss) from special events and activities (Subtract line 6b from line 6a)	6c		
7a	Gross sales of inventory, less returns and allowances	7a		
7b	Less cost of goods sold	7b		
7c	Gross profit or (loss) from sales of inventory (Subtract line 7b from line 7a)	7c		
8	Other revenue (describe ▶)	8		
9	Total revenue. Add lines 1, 2, 3, 4, 5c, 6c, 7c, and 8	9	74,255.	
EXPENSES	10	Grants and similar amounts paid (attach schedule)	10	2,070.
	11	Benefits paid to or for members	11	
	12	Salaries, other compensation, and employee benefits	12	
	13	Professional fees and other payments to independent contractors	13	
	14	Occupancy, rent, utilities, and maintenance	14	
	15	Printing, publications, postage, and shipping	15	8,672.
	16	Other expenses (describe ▶ See Statement 2)	16	42,144.
	17	Total expenses. Add lines 10 through 16	17	52,886.
18	Excess or (deficit) for the year (Subtract line 17 from line 9)	18	21,369.	
ASSETS	19	Net assets or fund balances at beginning of year (from line 27, column (A)) (must agree with end-of-year figure reported on prior year's return)	19	420,779.
	20	Other changes in net assets or fund balances (attach explanation)	20	
	21	Net assets or fund balances at end of year. Combine lines 18 through 20	21	442,148.

**Part II** Balance Sheets. If Total assets on line 25, column (B) are \$1,250,000 or more, file Form 990 instead of Form 990-EZ

(See the instructions for Part II.)

	(A) Beginning of year	(B) End of year
22 Cash, savings, and investments	443,464.	22 450,350.
23 Land and buildings		23
24 Other assets (describe ▶ See Statement 3)	16,074.	24 22,606.
25 Total assets	459,538.	25 472,956.
26 Total liabilities (describe ▶ See Statement 4)	38,759.	26 30,808.
27 Net assets or fund balances (line 27 of column (B) must agree with line 21)	420,779.	27 442,148.

BAA For Privacy Act and Paperwork Reduction Act Notice, see separate instructions.

Form 990-EZ (2009)

TEEA0803L 01/30/10

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9 10

Part V Other Information (Note the statement requirements in the instrs for Part V.) See Statement 6

	Yes	No
33 Did the organization engage in any activity not previously reported to the IRS? If 'Yes,' attach a detailed description of each activity		X
34 Were any changes made to the organizing or governing documents? If 'Yes,' attach a conformed copy of the changes	X	
35 If the organization had income from business activities, such as those reported on lines 2, 6a, and 7a (among others), but not reported on Form 990-T, attach a statement explaining why the organization did not report the income on Form 990-T		
a Did the organization have unrelated business gross income of \$1,000 or more or was it subject to section 6033(e) notice, reporting, and proxy tax requirements?		X
b If 'Yes,' has it filed a tax return on Form 990-T for this year?		
36 Did the organization undergo a liquidation, dissolution, termination, or significant disposition of net assets during the year? If 'Yes,' complete applicable parts of Schedule N		X
37 a Enter amount of political expenditures, direct or indirect, as described in the instructions 37 a 0.		
b Did the organization file Form 1120-POL for this year?		X
38 a Did the organization borrow from, or make any loans to, any officer, director, trustee, or key employee or were any such loans made in a prior year and still outstanding at the end of the period covered by this return?		X
b If 'Yes,' complete Schedule L, Part II and enter the total amount involved 38 b N/A		
39 Section 501(c)(7) organizations Enter		
a Initiation fees and capital contributions included on line 9 39 a N/A		
b Gross receipts, included on line 9, for public use of club facilities 39 b N/A		
40 a Section 501(c)(3) organizations Enter amount of tax imposed on the organization during the year under section 4911 0. , section 4912 0. , section 4955 0.		
b Section 501(c)(3) and 501(c)(4) organizations Did the organization engage in any section 4958 excess benefit transaction during the year or is it aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If 'Yes,' complete Schedule L, Part I 40 b X		
c Section 501(c)(3) and 501(c)(4) organizations Enter amount of tax imposed on organization managers or disqualified persons during the year under sections 4912, 4955, and 4958 0.		
d Section 501(c)(3) and 501(c)(4) organizations Enter amount of tax on line 40c reimbursed by the organization 0.		
e All organizations At any time during the tax year, was the organization a party to a prohibited tax shelter transaction? If 'Yes,' complete Form 8886-T 40 e X		
41 List the states with which a copy of this return is filed WI		

42 a The organization's books are in care of **Janelle M. Elmer** Telephone no **(608) 831-5115**
 Located at **6405 Century Avenue #201 Middleton WI** ZIP + 4 **53562-2850**

b At any time during the calendar year, did the organization have an interest in or a signature or other authority over a financial account in a foreign country (such as a bank account, securities account, or other financial account)? **42 b** X
 If 'Yes,' enter the name of the foreign country

See the instructions for exceptions and filing requirements for **Form TD F 90-22.1, Report of a Foreign Bank and Financial Accounts**

c At any time during the calendar year, did the organization maintain an office outside of the U S ? **42 c** X
 If 'Yes,' enter the name of the foreign country

43 Section 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ in lieu of **Form 1041** — Check here ☐ N/A
 and enter the amount of tax-exempt interest received or accrued during the tax year **43** N/A

	Yes	No
44 Did the organization maintain any donor advised funds? If 'Yes,' Form 990 must be completed instead of Form 990-EZ		X
45 Is any related organization a controlled entity of the organization within the meaning of section 512(b)(13)? If 'Yes,' Form 990 must be completed instead of Form 990-EZ		X

Part VI Section 501(c)(3) organizations and section 4947(a)(1) nonexempt charitable trusts only. All section 501(c)(3) organizations and section 4947(a)(1) nonexempt charitable trusts must answer questions 46-49b and complete the tables for lines 50 and 51.

46 Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If 'Yes,' complete Schedule C, Part I

	Yes	No
46		X

47 Did the organization engage in lobbying activities? If 'Yes,' complete Schedule C, Part II

47		X
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48 Is the organization a school as described in section 170(b)(1)(A)(ii)? If 'Yes,' complete Schedule E

48		X
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49a Did the organization make any transfers to an exempt non-charitable related organization?

49a	X	
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b If 'Yes,' was the related organization a section 527 organization?

49b		X
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50 Complete this table for the organization's five highest compensated employees (other than officers, directors, trustees and key employees) who each received more than \$100,000 of compensation from the organization. If there is none, enter 'None.'

(a) Name and address of each employee paid more than \$100,000	(b) Title and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account and other allowances
None				

f Total number of other employees paid over \$100,000

51 Complete this table for the organization's five highest compensated independent contractors who each received more than \$100,000 of compensation from the organization. If there is none, enter 'None.'

(a) Name and address of each independent contractor paid more than \$100,000	(b) Type of service	(c) Compensation
None		

d Total number of other independent contractors each receiving over \$100,000

Sign Here

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge.

Signature of officer: *Mark D. Krebsbach* Date: 1-21-11

Type or print name and title: _____

Paid Preparer's Use Only

Preparer's signature: *Mark D. Krebsbach, CPA* Date: 1/13/11

Firm's name (or yours if self-employed), address, and ZIP + 4: Porter & Sack, CPAs, S.C.
6515 Watts Road, Suite 200
Madison, WI 53719-2726

Check if self-employed: ☐ Preparer's Identifying Number (See instructions): N/A

EIN: N/A Phone no: (608) 233-8333

May the IRS discuss this return with the preparer shown above? See instructions

☒ Yes ☐ No

SCHEDULE A
(Form 990 or 990-EZ)

Public Charity Status and Public Support

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.

2009

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

▶ Attach to Form 990 or Form 990-EZ. ▶ See separate instructions.

Name of the organization

WREA Foundation, Inc.

Employer identification number

39-1852926

Part I	Reason for Public Charity Status (All organizations must complete this part.) See instructions
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The organization is not a private foundation because it is (For lines 1 through 11, check only one box.)

- 1 ☐ A church, convention of churches or association of churches described in **section 170(b)(1)(A)(i).**
- 2 ☐ A school described in **section 170(b)(1)(A)(ii).** (Attach Schedule E)
- 3 ☐ A hospital or cooperative hospital service organization described in **section 170(b)(1)(A)(iii).**
- 4 ☐ A medical research organization operated in conjunction with a hospital described in **section 170(b)(1)(A)(iii)** Enter the hospital's name, city, and state _____
- 5 ☐ An organization operated for the benefit of a college or university owned or operated by a governmental unit described in **section 170(b)(1)(A)(iv).** (Complete Part II)
- 6 ☐ A federal, state, or local government or governmental unit described in **section 170(b)(1)(A)(v).**
- 7 ☒ An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in **section 170(b)(1)(A)(vi).** (Complete Part II)
- 8 ☐ A community trust described in **section 170(b)(1)(A)(vi).** (Complete Part II)
- 9 ☐ An organization that normally receives (1) more than 33-1/3 % of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions – subject to certain exceptions, and (2) no more than 33-1/3 % of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975 See **section 509(a)(2).** (Complete Part III)
- 10 ☐ An organization organized and operated exclusively to test for public safety See **section 509(a)(4).**
- 11 ☐ An organization organized and operated exclusively for the benefit of, to perform the functions of, or carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2) See **section 509(a)(3).** Check the box that describes the type of supporting organization and complete lines 11e through 11h
- a ☐ Type I b ☐ Type II c ☐ Type III – Functionally integrated d ☐ Type III – Other
- e ☐ By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified persons other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2)
- f ☐ If the organization received a written determination from the IRS that is a Type I, Type II or Type III supporting organization, check this box
- g ☐ Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons?

	Yes	No
11 g (i)		
11 g (ii)		
11 g (iii)		

h Provide the following information about the supported organizations

[illegible]

Total

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

Schedule A (Form 990 or 990-EZ) 2009

Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)

(Complete only if you checked the box on line 5, 7, or 8 of Part I.)

Section A. Public Support

Calendar year (or fiscal year beginning in) ▶	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
1 Gifts, grants, contributions and membership fees received (Do not include 'unusual grants'.)	59,439.	70,305.	79,146.	119,412.	64,377.	392,679.
2 Tax revenues levied for the organization's benefit and either paid to it or expended on its behalf						0.
3 The value of services or facilities furnished to the organization by a governmental unit without charge. Do not include the value of services or facilities generally furnished to the public without charge.						0.
4 Total. Add lines 1-through 3	59,439.	70,305.	79,146.	119,412.	64,377.	392,679.
5 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						0.
6 Public support. Subtract line 5 from line 4						392,679.

Section B. Total Support

Calendar year (or fiscal year beginning in) ▶	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
7 Amounts from line 4	59,439.	70,305.	79,146.	119,412.	64,377.	392,679.
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	8,043.	9,515.	13,462.	11,168.	9,877.	52,065.
9 Net income from unrelated business activities, whether or not the business is regularly carried on						0.
10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)						0.
11 Total support. Add lines 7 through 10						444,744.
12 Gross receipts from related activities, etc. (see instructions)					12	0.
13 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here ▶ <input type="checkbox"/>						

Section C. Computation of Public Support Percentage

14 Public support percentage for 2009 (line 6, column (f) divided by line 11, column (f))	14	88.3 %
15 Public support percentage from 2008 Schedule A, Part II, line 14	15	87.9 %
16a 33-1/3 support test – 2009. If the organization did not check the box on line 13, and the line 14 is 33-1/3 % or more, check this box and stop here. The organization qualifies as a publicly supported organization. ▶ <input checked="" type="checkbox"/>		
b 33-1/3 support test – 2008. If the organization did not check a box on line 13, or 16a, and line 15 is 33-1/3 % or more, check this box and stop here. The organization qualifies as a publicly supported organization ▶ <input type="checkbox"/>		
17a 10%-facts-and-circumstances test – 2009. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the 'facts-and-circumstances' test, check this box and stop here. Explain in Part IV how the organization meets the 'facts-and-circumstances' test. The organization qualifies as a publicly supported organization ▶ <input type="checkbox"/>		
b 10%-facts-and-circumstances test – 2008. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the 'facts-and-circumstances' test, check this box and stop here. Explain in Part IV how the organization meets the 'facts-and-circumstances' test. The organization qualifies as a publicly supported organization ▶ <input type="checkbox"/>		
18 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions ▶ <input type="checkbox"/>		

Part III Support Schedule for Organizations Described in Section 509(a)(2)

(Complete only if you checked the box on line 9 of Part I.)

Section A. Public Support

Calendar year (or fiscal yr beginning in) ▶	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
1 Gifts, grants, contributions and membership fees received (Do not include "unusual grants.")						
2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in a activity that is related to the organization's tax-exempt purpose						
3 Gross receipts from activities that are not an unrelated trade or business under section 513						
4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5 The value of services or facilities furnished by a governmental unit to the organization without charge						
6 Total. Add lines 1 through 5						
7a Amounts included on lines 1, 2, 3 received from disqualified persons						
b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of 1% of the amount on line 13 for the year						
c Add lines 7a and 7b						
8 Public support (Subtract line 7c from line 6)						

Section B. Total Support

Calendar year (or fiscal yr beginning in) ▶	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
9 Amounts from line 6						
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
c Add lines 10a and 10b						
11 Net income from unrelated business activities not included on line 10b, whether or not the business is regularly carried on						
12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)						
13 Total support. (add lns 9, 10c, 11, and 12)						
14 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here. ▶ <input type="checkbox"/>						

Section C. Computation of Public Support Percentage

15 Public support percentage for 2009 (line 8, column (f) divided by line 13, column (f))	15	%
16 Public support percentage from 2008 Schedule A, Part III, line 15	16	%

Section D. Computation of Investment Income Percentage

17 Investment income percentage for 2009 (line 10c, column (f) divided by line 13, column (f))	17	%
18 Investment income percentage from 2008 Schedule A, Part III, line 17	18	%
19a 33-1/3 support tests — 2009. If the organization did not check the box on line 14, and line 15 is more than 33-1/3%, and line 17 is not more than 33-1/3%, check this box and stop here. The organization qualifies as a publicly supported organization. ▶ <input type="checkbox"/>		
b 33-1/3 support tests — 2008. If the organization did not check a box on line 14 or 19a, and line 16 is more than 33-1/3%, and line 18 is not more than 33-1/3%, check this box and stop here. The organization qualifies as a publicly supported organization. ▶ <input type="checkbox"/>		
20 Private foundation. If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions. ▶ <input type="checkbox"/>		

Part IV	Supplemental Information. Complete this part to provide the explanations required by Part II, line 10, Part II, line 17a or 17b; and Part III, line 12. Provide any other additional information. See instructions.
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[illegible]

WREA Foundation, Inc.

39-1852926

Statement 1
Form 990-EZ, Part I, Line 10
Grants and Similar Amounts Paid

Donee's Name:	Joseph P. Phillips		
Donee's Address:	6405 Century Avenue, #201		
	Middleton, WI 53562		
Cash Amount Given:		\$	1,000.
Donee's Name:	Lori Neurohr		
Donee's Address:	6405 Century Avenue, #201		
	Middleton, WI 53562		
Cash Amount Given:		\$	1,070.

Statement 2
Form 990-EZ, Part I, Line 16
Other Expenses

Administrative Fees	\$	23,405.
Conferences, Conventions, and Meetings		1,383.
Depreciation		846.
Dues & Subscriptions		506.
Meeting expense		681.
Miscellaneous		207.
Office Expenses		655.
Professional Fees		3,447.
Special Project Expense		10,799.
Travel		215.
Total	\$	<u>42,144.</u>

Statement 3
Form 990-EZ, Part II, Line 24
Other Assets

	<u>Beginning</u>	<u>Ending</u>
Accounts Receivable	\$ 0.	\$ 4,743.
Due from WREA, Inc	211.	150.
Interest Receivable	4,230.	8,547.
Machinery and Equipment	1,633.	4,166.
Pledges and Grants Receivable	10,000.	5,000.
Total	\$ <u>16,074.</u>	\$ <u>22,606.</u>

Statement 4
Form 990-EZ, Part II, Line 26
Total Liabilities

	<u>Beginning</u>	<u>Ending</u>
Accounts Payable and Accrued Expenses	\$ 10,450.	\$ 29,808.
Due to WREA	28,309.	1,000.
Total	\$ <u>38,759.</u>	\$ <u>30,808.</u>

WREA Foundation, Inc.

39-1852926

Statement 5
Form 990-EZ, Part III, Line 28
Statement of Program Service Accomplishments

The foundation is formed to provide student scholarships, teacher grants and outreach programs to the community, to support continuing education and life-long learning, and to enhance and foster volunteerism.

Statement 6
Form 990-EZ, Part V
Regarding Transfers Associated with Personal Benefit Contracts

- (a) Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? No
- (b) Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? No

2009

Federal Supplemental Information

Page 1

Client WREAFOUN

WREA Foundation, Inc.

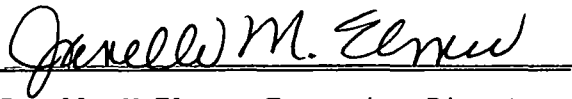
39-1852926

1/08/11

02.20PM

Wisconsin Retired Educators' Association Foundation, Inc.
6405 Century Avenue, Suite 201
Middleton, Wisconsin 53562-2858
FEIN: 39-1852926

Attached is a conformed copy of the Wisconsin Retired Educators' Association Foundation bylaws which were revised, effective May 5, 2010. The conformed copy agrees with the original document and all amendments to it. As Executive Director of the Wisconsin Retired Educator's Association, I, Janelle M. Elmer, hereby certify that the attached conformed copy is complete and correct.



Janelle M. Elmer, Executive Director
Wisconsin Retired Educators' Association
Foundation, Inc.

1/21/2011
Date

May 5, 2010

BYLAWS

WISCONSIN RETIRED EDUCATORS' ASSOCIATION FOUNDATION

Article I. NAME

The name of the foundation is the Wisconsin Retired Educators' Association (WREA) Foundation, hereafter referred to as the Foundation.

Article II. PURPOSE

The Foundation is formed to provide student scholarships, teacher grants and outreach programs to the community, to support continuing education and life-long learning, and to enhance and foster volunteerism. These purposes and activities are designed to be within the precepts of Chapter 181 of the Wisconsin Statutes and with federal taxation exemption under Internal Revenue Code 501(c)(3). The purposes of the Foundation are also expressly limited by the restrictions that are set forth in the Articles of Incorporation.

Article III. FUNDING

Section 1. The Foundation is funded primarily through contributions made by members of WREA, by friends and supporters of WREA, and by grants, including foundations whose purposes are similar to the Foundation and which qualify as exempt organizations under section 501(c)(3) of the Internal Revenue Code of 1954, as amended, or any successor provision.

1. Contributions to the Foundation are recognized in the following classifications:

- | | |
|---------------|------------------|
| 1. Founder | \$2,500 and more |
| 2. Benefactor | \$1,000-\$2,499 |
| 3. Patron | \$500-\$999 |
| 4. Partner | \$100-\$499 |
| 5. Friend | \$25-\$99 |

b. Recognition of contributors is based on annual and/or lifetime gifts to the Foundation. Annual gifts accumulate to attain higher classifications. The board of trustees adopts policies governing contributions and public recognition of donors.

Article IV. ORGANIZATION

- Section 1.** Office - The principal office of the Foundation is 2564 Branch Street, Middleton, WI 53562. The name and address of the initial registered agent for the Foundation is Jane Elmer, 2564 Branch Street, Middleton, WI 53562.
- Section 2.** Management - Management of the affairs of the Foundation is vested in a board of trustees.
- Section 3.** Board of Trustees -
- a. Composition - As stated in Article V of the Articles of Incorporation, the board of trustees is comprised of the individuals serving on the executive council of the Wisconsin Retired Educators' Association, Inc. and one individual appointed by the WREA president to serve as the Foundation liaison. The board of trustees has the exclusive authority to manage the affairs of the Foundation in accordance with the provisions of these bylaws, the Articles of Incorporation, and the special restrictions that apply to the Foundation as an exempt 501(c)(3) corporation.
 - b. Meetings - The board of trustees meets at least once a year to conduct the business of the Foundation. Regular meetings are held on the same date, and at the same place, as any duly called meeting of the WREA executive council. Other meetings may be called at the discretion of the WREA president or at the request of a majority of the trustees.
 - c. Appointment and Term of the Liaison - The Foundation liaison is appointed by the WREA President and approved by the executive council for a two year term of office and shall serve no more than three consecutive terms. Any mid-term vacancy in the position is filled with an appointment by the WREA president.
 - d. All members of the Foundation board of trustees serve as volunteers without remuneration except for the reimbursement of expenses incurred in carrying out their responsibilities.
- Section 4.** Executive Director -
- The executive director of WREA also acts as the executive director of the Foundation.
- Section 5.** Annual Meeting -
- a. The annual meeting is held during the WREA annual convention and is chaired by the Foundation liaison. Those attending hear reports and make recommendations.

Article V. OFFICERS

The officers of WREA also act as officers of the Foundation.

Article VI. FISCAL YEAR and BUDGET

Section 1. The fiscal year for the Foundation is October 1 through September 30.

Section 2. Budget - An annual budget is prepared by the executive director for approval by the Foundation board of trustees.

Article VII. AMENDMENTS

These bylaws may be amended by the board of trustees at any duly called meeting of the board of trustees.

Article VIII. DISSOLUTION

In the event of circumstances which cause the dissolution of the Foundation, all funds and capital assets of the Foundation shall be transferred to any successor organization or disbursed to such not-for-profit educational or charitable agencies or institutions as the Foundation board of trustees shall designate as specified in the Articles of Incorporation.

Adopted, September, 1996
Revised 1997, 1998, 1999, 2000
April 2002 ~~August 2005~~
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12/23/2003, 01/14/2004, 09/22/2009

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**WREA BOARD OF DIRECTORS
AS OF 09/20/2010
ALPHA ORDER**

Unit	Year	Description	Mem ID	L Name	F Name	MI	Address 1	City	State	Zip	Phone	Cell Phone	Email
1A	2007	DIST I DIR	22931	Bekkum	Victor	A	70 26-1/2 Avenue	Cumberland	WI		54829 715-822-5560	715-214-6573	vbekkum@centurytel.net
5H	2006	LEGISLATIVE	12022	Chandler	Arnold	M	4429 Somerset Lane	Madison	WI	53711-2817	608-238-5582	608-886-7090	arnoldmchandler@gmail.com
0A	2010	TREASURER	17033	Chickenng	Douglas	E	7242 Lily Lane	Middleton	WI		53562 608-203-8060	715-498-0683	doughchickening@gmail.com
4G	2009	ARIZONA	23378	Clements	Judith	M	S75 W26250 Stoneridge Court	Waukesha	WI		53189 262-682-3985	262-352-0712	kjpclements@gmail.com
4G	2009	ARIZONA	18794	Clements	Palmer	F	S75 W26250 Stoneridge Court	Waukesha	WI	53189-9632	262-682-3985	262-352-0712	kjpclements@gmail.com
5F	2005	DIST V DIR	18160	Degenhardt	Janet		1163 Ontario Drive	Janesville	WI		53545 608-754-3591		djegenhardt@charter.net
0A	1992	EXECUTIVE DIR	24394	Elmer	Jane		2564 Branch Street	Middleton	WI		53562 608-824-1721	608-279-5363	jelmer@wrea.net
2B	2003	FND LIAISON	11192	Heisler	Mary	L	407 Willsher Drive	Fond du Lac	WI	54935-6104	920-922-0587	920-539-2000	mheisler@charter.net
3P	2009	COM SRV/HLTH	22979	Kroll	Ann	L	1410 21st Avenue South	Wisconsin Rapids	WI		54495 715-421-4025		annie41@solarus.net
2R	2009	PRES ELECT	24298	Lamp	Carol	L	241 Parkside Court	Kimberly	WI		54136 920-830-2415	920-851-2776	clamp@new.rr.com
2G	2006	DIST II DIR	10733	Lowery	Richard	T	PO Box 312	Townsend	WI	54175-0312	715-276-6666		oldteacher@ez-net.com
0A	2007	MMBR BNFTS	23859	Mennes	Mary	E	7747 Schurch Road	Barnesville	WI	53507-9546	608-924-1721	608-575-6787	memennes@mhnc.net
5H	2009	ED ISSUES	191274	Mercer	William	J	8570 Greenway Blvd Apt 304	Middleton	WI		53562 608-988-6485	608-988-6485	b_lmercer@yahoo.com
3I	2009	PRES	25219	Meyer	Berland		7203 Goldenrod Court	Wausau	WI		54401 715-241-6622	715-573-7562	b_meyer@pcpros.net
3K	2005	DIST III DIR	19059	Owen	Annette	L	15021 Hibiscus Road	Tomah	WI	54660-5342	608-372-6587	608-387-4857	daowen@mwf.net
1A	2007	DIST I DIR	19290	Perala	James	E	85 S Horseshoe Drive	Turtle Lake	WI		54889 715-986-2335	715-651-7763	jperala@live.com
2J	2007	SECRETARY	15406	Platz	June	R	1106 Whittier Avenue	Howards Grove	WI	53083	920-565-2577	920-912-4264	jrp.catbird@tds.net
4E	2007	RTRMNT PLNG	21000	Sabol	Mary	M	6100 Bel Mar Avenue	Racine	WI		53402 262-456-0554		msabol@wi.rr.com
2J	2010	DIST II DIR	22770	Schnabeck	Karen	D	1230 Carmen Avenue	Sheboygan	WI		53081 920-458-7290	920-918-3984	kds515@att.net
5F	2005	DIST V DIR	21171	Streich	Fern	A	79 S Huron Drive	Janesville	WI		53545 608-752-5684	608-751-6555	fstreich@milwpc.com
3J	2009	EX-OFFICIO	24616	Subera	Carol		PO Box 313	Colby	WI		54421 715-223-2915		cmsubera@hotmail.com
2H	2009	MEMBERSHIP	21770	Trentlage	Marcia		728 Thelesen Drive	Kimberly	WI		54136 920-687-8743	920-333-3098	mtrentlage@aol.com
4H	2008	DIST IV DIR	19051	Walters	Melvin		8057 Salisbury Road	West Bend	WI		53090 262-338-1014	262-384-1822	melandshirwalters@yahoo.com
4H	2008	DIST IV DIR	20460	Walters	Shirley		8057 Salisbury Road	West Bend	WI		53090 262-338-1014	262-384-1822	melandshirwalters@yahoo.com
5A	2009	PAST PRES	22103	Welch	Clara	L	3724 W Pitt Road	Afton	WI	53501-0075	608-563-0497	608-751-6183	cwelch@charter.net
2D	2008	NOMINATING	12578	Wilmann	Howard	E	511 Waldo Blvd	Manitowoc	WI		54220 920-682-5351	920-973-1228	hbwilmann511@sbcglobal.net

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