Form **990-PF**

Department of the Treasury
Internal Revenue Service

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

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

OMB No 1545-0052

2009

For calendar year 2009, or tax year beginning 10/01 **, 2009, and ending** 09/30 **, 20** 10

G Check all that apply [ ] Initial return [ ] Initial return of a former public charity [ ] Final return
[ ] Amended return [ ] Address change [ ] Name change

Use the IRS label. Otherwise, print or type. See Specific Instructions.

Name of foundation: OSHKOSH CORPORATION FOUNDATION, INC.

Number and street (or P O box number if mail is not delivered to street address): 2307 OREGON STREET — Room/suite:

City or town, state, and ZIP code: OSHKOSH, WI 54902

A Employer identification number 39-6062129

B Telephone number (see page 10 of the instructions) (920) ~~235~~ 233-9206

C If exemption application is pending, check here ▶ [ ]

D 1. Foreign organizations, check here ▶ [ ]

2. Foreign organizations meeting the 85% test, check here and attach computation ▶ [ ]

E If private foundation status was terminated under section 507(b)(1)(A), check here ▶ [ ]

F If the foundation is in a 60-month termination under section 507(b)(1)(B), check here ▶ [ ]

H Check type of organization [X] Section 501(c)(3) exempt private foundation
[ ] Section 4947(a)(1) nonexempt charitable trust [ ] Other taxable private foundation

I Fair market value of all assets at end of year *(from Part II, col (c), line 16)* ▶ $ 2,073,050.

J Accounting method [X] Cash [ ] Accrual
[ ] Other (specify) ________
(Part I, column (d) must be on cash basis)

Part I **Analysis of Revenue and Expenses** *(The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a) (see page 11 of the instructions))*

		(a) Revenue and expenses per books	(b) Net investment income	(c) Adjusted net income	(d) Disbursements for charitable purposes (cash basis only)
Revenue	1 Contributions, gifts, grants, etc., received (attach schedule)	750,000.			
	2 Check ▶ [ ] if the foundation is not required to attach Sch B				
	3 Interest on savings and temporary cash investments	17,612.	17,612.		ATCH 1
	4 Dividends and interest from securities				
	5a Gross rents				
	b Net rental income or (loss)				
	6a Net gain or (loss) from sale of assets not on line 10				
	b Gross sales price for all assets on line 6a				
	7 Capital gain net income (from Part IV, line 2)				
	8 Net short-term capital gain				
	9 Income modifications				
	10a Gross sales less returns and allowances				
	b Less Cost of goods sold				
	c Gross profit or (loss) (attach schedule)				
	11 Other income (attach schedule)				
	12 **Total.** Add lines 1 through 11	767,612.	17,612.		
Operating and Administrative Expenses	13 Compensation of officers, directors, trustees, etc	0.			
	14 Other employee salaries and wages				
	15 Pension plans, employee benefits				
	16a Legal fees (attach schedule)				
	b Accounting fees (attach schedule) ATCH 2	5,800.	2,900.	0.	2,900.
	c Other professional fees (attach schedule)				
	17 Interest				
	18 Taxes (attach schedule) (see page 14 of the instructions)**	300.			
	19 Depreciation (attach schedule) and depletion				
	20 Occupancy				
	21 Travel, conferences, and meetings				
	22 Printing and publications				
	23 Other expenses (attach schedule) ATCH 4	2,185.	35.		2,150.
	24 **Total operating and administrative expenses.** Add lines 13 through 23	8,285.	2,935.	0.	5,050.
	25 Contributions, gifts, grants paid	752,250.			752,250.
	26 **Total expenses and disbursements.** Add lines 24 and 25	760,535.	2,935.	0.	757,300.
	27 Subtract line 26 from line 12				
	a **Excess of revenue over expenses and disbursements**	7,077.			
	b **Net investment income** (if negative, enter -0-)		14,677.		
	c **Adjusted net income** (if negative, enter -0-)			-0-	

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Part II Balance Sheets

Attached schedules and amounts in the description column should be for end-of-year amounts only (See instructions)

		Beginning of year (a) Book Value	End of year (b) Book Value	End of year (c) Fair Market Value
Assets	1 Cash - non-interest-bearing	858,885.	848,440.	848,440.
	2 Savings and temporary cash investments	1,207,088.	1,224,610.	1,224,610.
	3 Accounts receivable ▶			
	Less: allowance for doubtful accounts ▶			
	4 Pledges receivable ▶			
	Less allowance for doubtful accounts ▶			
	5 Grants receivable			
	6 Receivables due from officers, directors, trustees, and other disqualified persons (attach schedule) (see page 16 of the instructions)			
	7 Other notes and loans receivable (attach schedule) ▶			
	Less allowance for doubtful accounts ▶			
	8 Inventories for sale or use			
	9 Prepaid expenses and deferred charges			
	10 a Investments - U S and state government obligations (attach schedule)			
	b Investments - corporate stock (attach schedule)			
	c Investments - corporate bonds (attach schedule)			
	11 Investments - land, buildings, and equipment basis ▶			
	Less accumulated depreciation (attach schedule) ▶			
	12 Investments - mortgage loans			
	13 Investments - other (attach schedule)			
	14 Land, buildings, and equipment basis ▶			
	Less accumulated depreciation (attach schedule) ▶			
	15 Other assets (describe ▶)			
	16 **Total assets** (to be completed by all filers - see the instructions Also, see page 1, item I)	2,065,973.	2,073,050.	2,073,050.
Liabilities	17 Accounts payable and accrued expenses			
	18 Grants payable			
	19 Deferred revenue			
	20 Loans from officers, directors, trustees, and other disqualified persons			
	21 Mortgages and other notes payable (attach schedule)			
	22 Other liabilities (describe ▶)			
	23 **Total liabilities** (add lines 17 through 22)			
Net Assets or Fund Balances	**Foundations that follow SFAS 117, check here ▶ ☐ and complete lines 24 through 26 and lines 30 and 31.**			
	24 Unrestricted			
	25 Temporarily restricted			
	26 Permanently restricted			
	Foundations that do not follow SFAS 117, check here and complete lines 27 through 31. ▶ [X]			
	27 Capital stock, trust principal, or current funds	2,065,973.	2,073,050.	
	28 Paid-in or capital surplus, or land, bldg , and equipment fund			
	29 Retained earnings, accumulated income, endowment, or other funds	0.	0.	
	30 **Total net assets or fund balances** (see page 17 of the instructions)	2,065,973.	2,073,050.	
	31 **Total liabilities and net assets/fund balances** (see page 17 of the instructions)	2,065,973.	2,073,050.	

Part III Analysis of Changes in Net Assets or Fund Balances

1	Total net assets or fund balances at beginning of year - Part II, column (a), line 30 (must agree with end-of-year figure reported on prior year's return)	1	2,065,973.
2	Enter amount from Part I, line 27a	2	7,077.
3	Other increases not included in line 2 (itemize) ▶	3	
4	Add lines 1, 2, and 3	4	2,073,050.
5	Decreases not included in line 2 (itemize) ▶	5	
6	Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b), line 30	6	2,073,050.

Part IV Capital Gains and Losses for Tax on Investment Income

(a) List and describe the kind(s) of property sold (e g , real estate, 2-story brick warehouse, or common stock, 200 shs MLC Co)	(b) How acquired P-Purchase D-Donation	(c) Date acquired (mo., day, yr)	(d) Date sold (mo , day, yr)
1a			
b			
c			
d			
e			

	(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale	(h) Gain or (loss) (e) plus (f) minus (g)
a				
b				
c				
d				
e				

Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69

	(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	(l) Gains (Col. (h) gain minus col (k), but not less than -0-) or Losses (from col (h))
a				
b				
c				
d				
e				

2 Capital gain net income or (net capital loss) . . . . . { If gain, also enter in Part I, line 7 / If (loss), enter -0- in Part I, line 7 } | 2 |

3 Net short-term capital gain or (loss) as defined in sections 1222(5) and (6):
If gain, also enter in Part I, line 8, column (c) (see pages 13 and 17 of the instructions).
If (loss), enter -0- in Part I, line 8 . . . . | 3 |

Part V Qualification Under Section 4940(e) for Reduced Tax on Net Investment Income

(For optional use by domestic private foundations subject to the section 4940(a) tax on net investment income)

If section 4940(d)(2) applies, leave this part blank

Was the foundation liable for the section 4942 tax on the distributable amount of any year in the base period? . . . . [X] Yes [ ] No

If "Yes," the foundation does not qualify under section 4940(e) Do not complete this part

1 Enter the appropriate amount in each column for each year, see page 18 of the instructions before making any entries

(a) Base period years Calendar year (or tax year beginning in)	(b) Adjusted qualifying distributions	(c) Net value of noncharitable-use assets	(d) Distribution ratio (col (b) divided by col (c))
2008			
2007			
2006			
2005			
2004			

2 Total of line 1, column (d)	2	
3 Average distribution ratio for the 5-year base period - divide the total on line 2 by 5, or by the number of years the foundation has been in existence if less than 5 years	3	
4 Enter the net value of noncharitable-use assets for 2009 from Part X, line 5	4	
5 Multiply line 4 by line 3	5	
6 Enter 1% of net investment income (1% of Part I, line 27b)	6	
7 Add lines 5 and 6	7	
8 Enter qualifying distributions from Part XII, line 4	8	

If line 8 is equal to or greater than line 7, check the box in Part VI, line 1b, and complete that part using a 1% tax rate See the Part VI instructions on page 18.

Part VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 - see page 18 of the instructions)

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 ruling letter if necessary - see instructions)		
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check here ▶ ☐ and enter 1% of Part I, line 27b	1	294.
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	
3	Add lines 1 and 2	3	294.
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	294.
6	Credits/Payments:		
a	2009 estimated tax payments and 2008 overpayment credited to 2009 — 6a: 816.		
b	Exempt foreign organizations-tax withheld at source — 6b: 0.		
c	Tax paid with application for extension of time to file (Form 8868) — 6c: 0.		
d	Backup withholding erroneously withheld — 6d:		
7	Total credits and payments Add lines 6a through 6d	7	816.
8	Enter any **penalty** for underpayment of estimated tax. Check here ☐ if Form 2220 is attached	8	
9	**Tax due.** If the total of lines 5 and 8 is more than line 7, enter **amount owed** ▶	9	
10	**Overpayment.** If line 7 is more than the total of lines 5 and 8, enter the **amount overpaid** ▶	10	522.
11	Enter the amount of line 10 to be **Credited to 2010 estimated tax** ▶ 522. **Refunded** ▶	11	

Part VII-A Statements Regarding Activities

			Yes	No
1a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any political campaign?	1a		X
b	Did it spend more than $100 during the year (either directly or indirectly) for political purposes (see page 19 of the instructions for definition)?	1b		X
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials published or distributed by the foundation in connection with the activities			
c	Did the foundation file **Form 1120-POL** for this year?	1c		X
d	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year (1) On the foundation ▶ $ 0. (2) On foundation managers ▶ $ 0.			
e	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? *If "Yes," attach a detailed description of the activities*	2		X
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, or bylaws, or other similar instruments? *If "Yes," attach a conformed copy of the changes*	3		X
4a	Did the foundation have unrelated business gross income of $1,000 or more during the year?	4a		X
b	If "Yes," has it filed a tax return on **Form 990-T** for this year?	4b	N/A	
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year? *If "Yes," attach the statement required by General Instruction T.*	5		X
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either • By language in the governing instrument, or • By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state law remain in the governing instrument?	6	X	
7	Did the foundation have at least $5,000 in assets at any time during the year? *If "Yes," complete Part II, col. (c), and Part XV*	7	X	
8a	Enter the states to which the foundation reports or with which it is registered (see page 19 of the instructions) ▶ 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	
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for calendar year 2009 or the taxable year beginning in 2009 (see instructions for Part XIV on page 27)? *If "Yes," complete Part XIV*	9		X
10	Did any persons become substantial contributors during the tax year? *If "Yes," attach a schedule listing their names and addresses*	10		X

Part VII-A Statements Regarding Activities *(continued)*

			Yes	No
11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of section 512(b)(13)? If "Yes," attach schedule (see page 20 of the instructions)	11		X
12	Did the foundation acquire a direct or indirect interest in any applicable insurance contract before August 17, 2008?	12		X
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	X	

Website address ▶ N/A

14 The books are in care of ▶ JANA HEFT Telephone no ▶ 920-233-9206

Located at ▶ P.O. BOX 2566 OSHKOSH, WI ZIP + 4 ▶ 54903-2566

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 ▶ 15 N/A

Part 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? ☐ Yes ☒ No			
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person? ☐ Yes ☒ No			
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? ☒ Yes ☐ No			
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? ☐ Yes ☒ No			
	(5) Transfer any income or assets to a disqualified person (or make any of either available for the benefit or use of a disqualified person)? ☐ Yes ☒ No			
	(6) Agree to pay money or property to a government official? (**Exception.** Check "No" if the foundation agreed to make a grant to or to employ the official for a period after termination of government service, if terminating within 90 days.) ☐ Yes ☒ 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)?	1b		X
	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?	1c		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)).			
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? ☐ Yes ☒ No			
	If "Yes," list the years ▶ N/A , , ,			
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 page 20 of the instructions)	2b	N/A	
c	If the provisions of section 4942(a)(2) are being applied to **any** of the years listed in 2a, list the years here ▶ N/A , , ,			
3a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year? ☐ Yes ☒ No			
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 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, Form 4720, to determine if the foundation had excess business holdings in 2009.)*	3b	N/A	
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a		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		X

Part VII-B Statements Regarding Activities for Which Form 4720 May Be Required *(continued)*

5a During the year did the foundation pay or incur any amount to:

(1) Carry on propaganda, or otherwise attempt to influence legislation (section 4945(e))? ☐ Yes ☒ No

(2) Influence the outcome of any specific public election (see section 4955), or to carry on, directly or indirectly, any voter registration drive? ☐ Yes ☒ No

(3) Provide a grant to an individual for travel, study, or other similar purposes? ☐ Yes ☒ No

(4) Provide a grant to an organization other than a charitable, etc, organization described in section 509(a)(1), (2), or (3), or section 4940(d)(2)? (see page 22 of the instructions) ☐ Yes ☒ No

(5) Provide for any purpose other than religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals? ☐ Yes ☒ No

b If any answer is "Yes" to 5a(1)-(5), did **any** of the transactions fail to qualify under the exceptions described in Regulations section 53 4945 or in a current notice regarding disaster assistance (see page 22 of the instructions)? **5b** N/A

Organizations relying on a current notice regarding disaster assistance check here ▶ ☐

c If the answer is "Yes" to question 5a(4), does the foundation claim exemption from the tax because it maintained expenditure responsibility for the grant? N/A ☐ Yes ☐ No

If "Yes," attach the statement required by Regulations section 53 4945-5(d)

6a Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? ☐ Yes ☒ No

b Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract? **6b** No: 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 shelter transaction? ☐ Yes ☒ No

b If yes, did the foundation receive any proceeds or have any net income attributable to the transaction? **7b** N/A

Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors

1 List all officers, directors, trustees, foundation managers and their compensation (see page 22 of the instructions).

(a) Name and address	(b) Title, and average hours per week devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
ATTACHMENT 5		0.	0.	0.

2 Compensation of five highest-paid employees (other than those included on line 1 - see page 23 of the instructions). If none, enter "NONE."

(a) Name and address of each employee paid more than $50,000	(b) Title, and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
NONE				

Total number of other employees paid over $50,000 ▶ 0

Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors *(continued)*

3 Five highest-paid independent contractors for professional services (see page 23 of the instructions). If none, enter "NONE."

(a) Name and address of each person paid more than $50,000	(b) Type of service	(c) Compensation
NONE		

Total number of others receiving over $50,000 for professional services ▶ NONE

Part IX-A Summary of Direct Charitable Activities

List the foundation's four largest direct charitable activities during the tax year Include relevant statistical information such as the number of organizations and other beneficiaries served, conferences convened, research papers produced, etc	Expenses
1 NONE	
2	
3	
4	

Part IX-B Summary of Program-Related Investments (see page 23 of the instructions)

Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2	Amount
1 NONE	
2	
All other program-related investments See page 24 of the instructions	
3 NONE	
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 page 24 of the instructions.)

1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc , purposes:		
a	Average monthly fair market value of securities	1a	
b	Average of monthly cash balances	1b	2,105,928.
c	Fair market value of all other assets (see page 24 of the instructions)	1c	0.
d	**Total** (add lines 1a, b, and c)	1d	2,105,928.
e	Reduction claimed for blockage or other factors reported on lines 1a and 1c (attach detailed explanation) 1e		
2	Acquisition indebtedness applicable to line 1 assets	2	0.
3	Subtract line 2 from line 1d	3	2,105,928.
4	Cash deemed held for charitable activities. Enter 1 1/2 % of line 3 (for greater amount, see page 25 of the instructions)	4	31,589.
5	**Net value of noncharitable-use assets.** Subtract line 4 from line 3 Enter here and on Part V, line 4	5	2,074,339.
6	**Minimum investment return.** Enter 5% of line 5	6	103,717.

Part XI **Distributable Amount** (see page 25 of the instructions) (Section 4942(j)(3) and (j)(5) private operating foundations and certain foreign organizations check here ▶ ☐ and do not complete this part)

1	Minimum investment return from Part X, line 6			1	103,717.
2a	Tax on investment income for 2009 from Part VI, line 5	2a	294.		
b	Income tax for 2009 (This does not include the tax from Part VI)	2b			
c	Add lines 2a and 2b			2c	294.
3	Distributable amount before adjustments. Subtract line 2c from line 1			3	103,423.
4	Recoveries of amounts treated as qualifying distributions			4	
5	Add lines 3 and 4			5	103,423.
6	Deduction from distributable amount (see page 25 of the instructions)			6	
7	**Distributable amount** as adjusted Subtract line 6 from line 5 Enter here and on Part XIII, line 1			7	103,423.

Part XII **Qualifying Distributions**(see page 25 of the instructions)

1	Amounts paid (including administrative expenses) to accomplish charitable, etc , purposes.		
a	Expenses, contributions, gifts, etc - total from Part I, column (d), line 26	1a	757,300.
b	Program-related investments - total from Part IX-B	1b	0.
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc , purposes	2	0.
3	Amounts set aside for specific charitable projects that satisfy the		
a	Suitability test (prior IRS approval required)	3a	0.
b	Cash distribution test (attach the required schedule)	3b	0.
4	**Qualifying distributions.** Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4	4	757,300.
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income Enter 1% of Part I, line 27b (see page 26 of the instructions)	5	N/A
6	**Adjusted qualifying distributions.** Subtract line 5 from line 4	6	757,300.

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

Part XIII Undistributed Income (see page 26 of the instructions)

	(a) Corpus	(b) Years prior to 2008	(c) 2008	(d) 2009
1 Distributable amount for 2009 from Part XI, line 7				103,423.
2 Undistributed income, if any, as of the end of 2009				
a Enter amount for 2008 only			0.	
b Total for prior years 20____,20____,20____		0.		
3 Excess distributions carryover, if any, to 2009:				
a From 2004 ... 275,057.				
b From 2005 ... 563,299.				
c From 2006 ... 592,882.				
d From 2007 ... 852,937.				
e From 2008 ... 618,962.				
f Total of lines 3a through e	2,903,137.			
4 Qualifying distributions for 2009 from Part XII, line 4 ▶ $ 757,300.				
a Applied to 2008, but not more than line 2a			0.	
b Applied to undistributed income of prior years (Election required - see page 26 of the instructions)		0.		
c Treated as distributions out of corpus (Election required - see page 26 of the instructions)	0.			
d Applied to 2009 distributable amount				103,423.
e Remaining amount distributed out of corpus	653,877.			
5 Excess distributions carryover applied to 2009 *(If an amount appears in column (d), the same amount must be shown in column (a).)*	0.			0.
6 **Enter the net total of each column as indicated below:**				
a Corpus Add lines 3f, 4c, and 4e. Subtract line 5	3,557,014.			
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 page 27 of the instructions		0.		
e Undistributed income for 2008 Subtract line 4a from line 2a Taxable amount - see page 27 of the instructions			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) (see page 27 of the instructions)	0.			
8 Excess distributions carryover from 2004 not applied on line 5 or line 7 (see page 27 of the instructions)	275,057.			
9 **Excess distributions carryover to 2010.** Subtract lines 7 and 8 from line 6a	3,281,957.			
10 Analysis of line 9				
a Excess from 2005 ... 563,299.				
b Excess from 2006 ... 592,882.				
c Excess from 2007 ... 852,937.				
d Excess from 2008 ... 618,962.				
e Excess from 2009 ... 653,877.				

Part XIV Private Operating Foundations (see page 27 of the instructions and Part VII-A, question 9) NOT APPLICABLE

1a If 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(j)(5)

	Tax year	Prior 3 years			(e) Total
	(a) 2009	(b) 2008	(c) 2007	(d) 2006	
2a Enter the lesser of the adjusted net 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					
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(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					

Part XV Supplementary Information (Complete this part only if the foundation had $5,000 or more in assets at any time during the year - see page 28 of the instructions.)

1 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

NONE

2 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 page 28 of the instructions) to individuals or organizations under other conditions, complete items 2a, b, c, and d

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

ATTACHMENT 6

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

ATTACHMENT 7

c Any submission deadlines.

APPLICATIONS ACCEPTED AT ANYTIME

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

ATTACHMENT 8

Part XV Supplementary Information (continued)

3 Grants and Contributions Paid During the Year or Approved for Future Payment

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*				
ATTACHMENT 9				
Total . . . . ▶ **3a**				752,250.
b *Approved for future payment*				
ATTACHMENT 10				
Total . . . . ▶ **3b**				150,000.

Part XVI-A Analysis of Income-Producing Activities

Enter gross amounts unless otherwise indicated.	Unrelated business income		Excluded by section 512, 513, or 514		(e) Related or exempt function income (See page 28 of the instructions.)
	(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	
1 Program service revenue					
a					
b					
c					
d					
e					
f					
g Fees and contracts from government agencies					
2 Membership dues and assessments					
3 Interest on savings and temporary cash investments			14	17,612.	
4 Dividends and interest from securities					
5 Net rental income or (loss) from real estate:					
a Debt-financed property					
b Not debt-financed property					
6 Net rental income or (loss) from personal property					
7 Other investment income					
8 Gain or (loss) from sales of assets other than inventory					
9 Net income or (loss) from special events					
10 Gross profit or (loss) from sales of inventory					
11 Other revenue: a					
b					
c					
d					
e					
12 Subtotal. Add columns (b), (d), and (e)				17,612.	

13 **Total.** Add line 12, columns (b), (d), and (e) . . . 13 17,612.

(See worksheet in line 13 instructions on page 28 to verify calculations.)

Part XVI-B Relationship of Activities to the Accomplishment of Exempt Purposes

Line No. ▼	Explain below how each activity for which income is reported in column (e) of Part XVI-A contributed importantly to the accomplishment of the foundation's exempt purposes (other than by providing funds for such purposes). (See page 29 of the instructions.)
	N/A

Part XVII 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?			
a	Transfers from the reporting foundation to a noncharitable exempt organization of:			
	(1) Cash	1a(1)		X
	(2) Other assets	1a(2)		X
b	Other transactions			
	(1) Sales of assets to a noncharitable exempt organization	1b(1)		X
	(2) Purchases of assets from a noncharitable exempt organization	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 solicitations	1b(6)		X
c	Sharing of facilities, equipment, mailing lists, other assets, or paid employees	1c		X

d If the answer to any of the above is "Yes," complete the following schedule Column (b) should always show the fair market value of the goods, other assets, or services given by the reporting foundation If the foundation received less than fair market value in any transaction or sharing arrangement, show in column (d) the value of the goods, other assets, or services received

(a) Line no	(b) Amount involved	(c) Name of noncharitable exempt organization	(d) Description of transfers, transactions, and sharing arrangements
	N/A		N/A

2a Is the foundation directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described in section 501(c) of the Code (other than section 501(c)(3)) or in section 527? ☐ Yes ☒ No

b If "Yes," complete the following schedule

(a) Name of organization	(b) Type of organization	(c) Description of relationship
N/A		

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 taxpayer or fiduciary) is based on all information of which preparer has any knowledge

[signature] Signature of officer or trustee | 12/5/11 Date | EVP, CAHRO Title

Paid Preparer's Use Only

Preparer's signature Lisa A. Cattelan	Date 7.28.11	Check if self-employed ☐	Preparer's identifying number (See Signature on page 30 of the instructions) P00140623
Firm's name (or yours if self-employed), address, and ZIP code	ERNST & YOUNG U.S. LLP 875 E. WISCONSIN AVENUE MILWAUKEE, WI 53202	EIN ▶ 34-6565596	Phone no 414 273-5900

Schedule B
(Form 990, 990-EZ, or 990-PF)
Department of the Treasury
Internal Revenue Service

Schedule of Contributors

▶ **Attach to Form 990, 990-EZ, or 990-PF.**

OMB No 1545-0047

2009

Name of the organization
OSHKOSH CORPORATION FOUNDATION, INC.

Employer identification number
39-6062129

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
Form 990-PF	☒ 501(c)(3) exempt private foundation
	☐ 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

☒ 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)

Name of organization OSHKOSH CORPORATION FOUNDATION, INC.

Employer identification number 39-6062129

Part I Contributors (see instructions)

(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
1	OSHKOSH CORPORATION P.O. BOX 2566 OSHKOSH, WI 54903-2566	$ 750,000.	Person [X] Payroll [ ] Noncash [ ] (Complete Part II if there is a noncash contribution)
		$	Person [ ] Payroll [ ] Noncash [ ] (Complete Part II if there is a noncash contribution)
		$	Person [ ] Payroll [ ] Noncash [ ] (Complete Part II if there is a noncash contribution)
		$	Person [ ] Payroll [ ] Noncash [ ] (Complete Part II if there is a noncash contribution)
		$	Person [ ] Payroll [ ] Noncash [ ] (Complete Part II if there is a noncash contribution)
		$	Person [ ] Payroll [ ] Noncash [ ] (Complete Part II if there is a noncash contribution)

FORM 990PF, PART I - INTEREST ON TEMPORARY CASH INVESTMENTS

DESCRIPTION	REVENUE AND EXPENSES PER BOOKS	NET INVESTMENT INCOME
CHASE CHECKING ACCOUNT	90.	90.
CHASE CDS	16,929.	16,929.
CHASE MONEY MARKET	593.	593.
TOTAL	17,612.	17,612.

FORM 990PF, PART I - ACCOUNTING FEES

DESCRIPTION	REVENUE AND EXPENSES PER BOOKS	NET INVESTMENT INCOME	ADJUSTED NET INCOME	CHARITABLE PURPOSES
ERNST AND YOUNG LLP	5,800.	2,900.		2,900.
TOTALS	5,800.	2,900.	0.	2,900.

ATTACHMENT 3

FORM 990PF, PART I - TAXES

DESCRIPTION	REVENUE AND EXPENSES PER BOOKS
EXCISE TAX	300.
TOTALS	300.

FORM 990PF, PART I - OTHER EXPENSES

DESCRIPTION	REVENUE AND EXPENSES PER BOOKS	NET INVESTMENT INCOME	CHARITABLE PURPOSES
WI ANNUAL FILING FEE	10.	5.	5.
MEMBERSHIP FEES - ASSN SM FDTN	495.		495.
MEMBERSHIP FEES - WI DONORS	1,500.		1,500.
DONORS FORUM OF WI CONFERENCE	150.		150.
CHASE BANK FEES	30.	30.	
TOTALS	2,185.	35.	2,150.

FORM 990PF, PART VIII - LIST OF OFFICERS, DIRECTORS, AND TRUSTEES

ATTACHMENT 5

NAME AND ADDRESS	TITLE AND AVERAGE HOURS PER WEEK DEVOTED TO POSITION	COMPENSATION	CONTRIBUTIONS TO EMPLOYEE BENEFIT PLANS	EXPENSE ACCT AND OTHER ALLOWANCES
ROBERT G. BOHN 2307 OREGON STREET OSHKOSH, WI 54902	PRESIDENT, TRUSTEE .20	0.	0.	0.
BRYAN J. BLANKFIELD 2307 OREGON STREET OSHKOSH, WI 54902	VICE PRESIDENT, TRUSTEE .20	0.	0.	0.
DAVID M. SAGEHORN 2307 OREGON STREET OSHKOSH, WI 54902	V.P., TREAS, TRUSTEE .20	0.	0.	0.
CONNIE S. STELLMACHER 2307 OREGON STREET OSHKOSH, WI 54902	VP, ASST TREAS & SECRETARY 10.00	0.	0.	0.
MATTHEW K. ROHRKASTE 2307 OREGON STREET OSHKOSH, WI 54902	V.P., TRUSTEE .20	0.	0.	0.
CHARLES L. SZEWS 2307 OREGON STREET OSHKOSH, WI 54902	V.P., TRUSTEE .20	0.	0.	0.
	GRAND TOTALS	0.	0.	0.

FORM 990PF, PART XV - NAME, ADDRESS AND PHONE FOR APPLICATIONS

JANA HEFT
P.O. BOX 2566
OSHKOSH, WI 54903-2566
920-235-9151x 22206

990PF, PART XV - FORM AND CONTENTS OF SUBMITTED APPLICATIONS

ALL REQUESTS FOR FUNDING MUST BE RECEIVED IN WRITING AND INCLUDE BACKGROUND INFORMATION ON THE ORGANIZATION, DOLLAR AMOUNT REQUESTED, SUMMARY OF PROGRAM OR PROJECT TO BE FUNDED, AND TAX-EXEMPT STATUS OF ORGANIZATION.

990PF, PART XV - RESTRICTIONS OR LIMITATIONS ON AWARDS

FOCUS IS ON ORGANIZATIONS WITHIN CLOSE PROXIMITY OF WHERE OSHKOSH CORPORATION HAS OPERATIONS AND WHERE ITS EMPLOYEES LIVE. THE FOUNDATION ALSO SUPPORTS ORGANIZATIONS THAT HAVE A DIRECT RELEVANCE TO THE CORPORATION'S BUSINESS SEGMENTS. ORGANIZATIONS FOCUSING ON BASIC NEEDS AND CULTURAL DEVELOPMENT ARE PREFERRED.

Recipient Name and Address	Relationship	Foundation Status	Purpose of Grant	Amount
QUALIFIED CONTRIBUTIONS:				
AMERICAN CANCER SOCIETY P O BOX 3565 OSHKOSH, WI 54903	NONE	501(C)(3) & 170(B)(1)(A)(VI)	TO SUPPORT CANCER RESEARCH PROGRAMS	$ 4,600
AMERICAN HEART ASSOCIATION INC 7272 GREENVILLE AVE DALLAS, TX 75231	NONE	501(C)(3) & 170(B)(1)(A)(VI)	TO SUPPORT HEART DISEASE AND STROKE RESEARCH PROGRAMS	$ 1,600
AMERICAN NATIONAL RED CROSS 2025 E STREET NW WASHINGTON, DC 20006-5009	NONE	501(C)(3) & 170(B)(1)(A)(VI)	TO SUPPORT SOCIAL SERVICE PROGRAMS	$ 5,000
AMERICAN RED CROSS 1302 E WISCONSIN AVENUE APPLETON, WI 54911	NONE	501(C)(3) & 170(B)(1)(A)(VI)	TO SUPPORT SOCIAL SERVICE PROGRAMS	$ 10,600
BEST FRIENDS OF NEENAH-MENASHA 181 E NORTH WATER STREET NEENAH, WI 54956	NONE	501(C)(3) & 170(B)(1)(A)(VI)	TO SUPPORT MENTORING PROGRAMS	$ 5,000
BIG BROTHERS BIG SISTERS OF THE FOX VALLEY 117 SOUTH LOCUST STREET APPLETON, WI 54914	NONE	501(C)(3) & 509(A)(2)	TO SUPPORT MENTORING PROGRAMS	$ 10,000
BOY SCOUTS OF AMERICA - BAY LAKES P O BOX 267 APPLETON, WI 54912	NONE	501(C)(3) & 170(B)(1)(A)(VI)	TO SUPPORT CHARACTER EDUCATION PROGRAMS	$ 10,000
BOYS & GIRLS CLUB OF BERLIN 344 BROADWAY ST BERLIN, WI 54923	NONE	501(C)(3) & 170(B)(1)(A)(VI)	TO SUPPORT CHARACTER EDUCATION PROGRAMS	$ 15,000
BOYS & GIRLS CLUB - FOND DU LAC 382 WALKER STREET FOND DU LAC, WI 54935	NONE	501(C)(3) & 509(A)(2)	TO SUPPORT CHARACTER EDUCATION PROGRAMS	$ 2,500
BOYS & GIRLS CLUB OF OSHKOSH P O BOX 411 OSHKOSH, WI 54901-0411	NONE	501(C)(3) & 170(B)(1)(A)(VI)	TO SUPPORT CHARACTER EDUCATION PROGRAMS	$ 35,000
CATHOLIC CHARITIES INC OF THE DIOCESE OF ALTOONA-JOHNSTOWN 1300 TWELFTH AVENUE ALTOONA, PA 16601	NONE	501(C)(3) & 170(B)(1)(A)(I)	TO SUPPORT OPERATIONS OF THE FULTON COUNTY CATHOLIC MISSION	$ 10,000
CHANNEL ONE INC 131 35TH STREET SE ROCHESTER, MN 55904	NONE	501(C)(3) & 170(B)(1)(A)(VI)	TO SUPPORT FOOD PANTRY OPERATIONS	$ 15,000

OSHKOSH CORPORATION FOUNDATION, INC 39-6062129
990-PF, PART XV, Line 3a - Total Grants and Contributions Paid During the Year
YEAR ENDED 9/30/2010

Recipient Name and Address	Relationship	Foundation Status	Purpose of Grant	Amount
CHAPS ACADEMY N5367 MAYFLOWER RD SHIOCTON, WI 54170	NONE	501(C)(3) & 509(A)(2)	TO SUPPORT COUNSELING PROGRAMS	$ 5,000
CHILDRENS MUSEUM OF FOND DU LAC 51 SHEBOYGAN STREET FOND DU LAC, WI 54935	NONE	501(C)(3) & 509(A)(2)	TO SUPPORT MUSEUM PROGRAMS	$ 5,000
CLARITY CARE 424 WASHINGTON AVENUE OSHKOSH, WI 54901	NONE	501(C)(3) & 509(A)(2)	TO SUPPORT PROGRAMS FOR HANDICAP INDIVIDUALS	$ 5,000
CHRISTINE ANN DOMESTIC ABUSE SERVICES 124 W WASHINGTON AVENUE, SUITE 90 NEENAH, WI 54957	NONE	501(C)(3) & 170(B)(1)(A)(VI)	TO SUPPORT FAMILY VIOLENCE SERVICES	$ 25,000
COTS INC 913 S WEST AVENUE APPLETON, WI 54915	NONE	501(C)(3) & 509(A)(2)	TO SUPPORT HOMELESS SHELTER OPERATIONS	$ 10,000
FULTON COUNTY FOOD BASKET INCORPORATED P O BOX 512 MCCONNELLSBURG, PA 17233	NONE	501(C)(3) & 170(B)(1)(A)(VI)	TO SUPPORT FOOD DONATION PROGRAMS	$ 15,000
FOX CITIES PERFORMING ARTS CENTER 400 W COLLEGE AVENUE APPLETON, WI 54912	NONE	501(C)(3) & 170(B)(1)(A)(VI)	TO SUPPORT PERFORMING ARTS CENTER OPERATIONS	$ 50,000
HABITAT FOR HUMANITY OF OSHKOSH 1118 HIGH STREET OSHKOSH, WI 54901	NONE	501(C)(3) & 509(A)(2)	TO SUPPORT LOW INCOME HOUSING PROGRAMS	$ 10,000
HARBOR HOUSE DOMESTIC ABUSE PROGRAMS 720 WEST FIFTH STREET APPLETON, WI 54914	NONE	501(C)(3) & 170(B)(1)(A)(VI)	TO SUPPORT DOMESTIC ABUSE PROGRAMS	$ 10,000
JUNIOR ACHIEVEMENT OF WISCONSIN 6924 N PORT WASHINGTON ROAD MILWAUKEE, WI 53217	NONE	501(C)(3) & 509(A)(2)	TO SUPPORT FINANCIAL LITERACY PROGRAMS	$ 2,500
JUVENILE DIABETES RESEARCH FOUNDATION 26 BROADWAY 14TH FLOOR NEW YORK, NY 10005	NONE	501(C)(3) & 170(B)(1)(A)(VI)	TO SUPPORT JUVENILE DIABETES RESEARCH PROGRAMS	$ 2,500
LEAVEN, INC 1475 OPPORTUNITY WAY MENASHA, WI 54952	NONE	501(C)(3) & 170(B)(1)(A)(VI)	TO SUPPORT SOCIAL SERVICE PROGRAMS	$ 10,000
MAYO CLINIC FOUNDATION 200 FIRST STREET SW ROCHESTER, MN 55905	NONE	501(C)(3) & 170(B)(1)(A)(VI)	TO SUPPORT PROGRAM PROVIDING CLINICAL PRACTICE AND EDUCATION	$ 25,000

Recipient Name and Address	Relationship	Foundation Status	Purpose of Grant	Amount
NATIONAL ALLIANCE ON MENTAL ILLNESS - FOX VALLEY 516 W SIXTH STREET APPLETON, WI 54912	NONE	501(C)(3) & 509(A)(2)	TO SUPPORT MENTAL HEALTH SUPPORT SERVICE PROGRAMS	$ 1,000
NATIONAL FALLEN FIREFIGHTERS FOUNDATION 16825 S SETON AVE P O DRAWER 498 EMMITSBURG, MD 21727-8920	NONE	501(C)(3) & 170(B)(1)(A)(VI)	TO SUPPORT NATIONAL AND STATE ACTIVITIES TO HONOR FALLEN FIGHTERS AND ASSIST THEIR SURVIVORS	$ 10,000
NATIONAL FIRE SAFETY COUNCIL 101 COURT STREET OSHKOSH, WI 54901	NONE	501(C)(3) & 170(B)(1)(A)(VI)	TO SUPPORT FIRE SAFETY EDUCATION PROGRAMS	$ 500
NEENAH-MENASHA EMERGENCY SOCIETY P O BOX 744 NEENAH, WI 54957	NONE	501(C)(3) & 170(B)(1)(A)(VI)	TO PROVIDE UNDERPRIVALEDGED STUDENTS WITH SCHOOL SUPPLIES	$ 2,000
ORRVILLE UNITED WAY INC P O BOX 214 ORRVILLE, OH 44667	NONE	501(C)(3) & 170(B)(1)(A)(VI)	TO SUPPORT SOCIAL SERVICES PROGRAMS	$ 10,000
OSHKOSH AREA COMMUNITY FOUNDATION 404 NORTH MAIN STREET OSHKOSH, WI 54903	NONE	501(C)(3) & 170(B)(1)(A)(VI)	TO SUPPORT SCHOLARSHIP FUND	$ 88,750
OSHKOSH AREA COMMUNITY PANTRY 2551 JACKSON ST OSHKOSH, WI 54901	NONE	501(C)(3) & 170(B)(1)(A)(VI)	TO SUPPORT COMMUNITY FOOD PANTRY	$ 25,000
OSHKOSH AREA UNITED WAY 36 BROAD STREET OSHKOSH, WI 54901	NONE	501(C)(3) & 170(B)(1)(A)(VI)	TO SUPPORT SOCIAL SERVICE PROGRMAS	$ 50,000
OSHKOSH CHRISTIAN SCHOOLS 3450 VINLAND STREET OSHKOSH, WI 54901	NONE	501(C)(3) & 170(B)(1)(A)(II)	TO SUPPORT SCHOOL OPERATIONS	$ 3,000
OSHKOSH COMMUNITY YMCA 3303 WEST 20TH AVENUE OSHKOSH, WI 54901	NONE	501(C)(3) & 509(A)(2)	TO SUPPORT CHARACTER EDUCATION PROGRAMS	$ 15,000
OSHKOSH PUBLIC MUSEUM 1331 ALGOMA BOULEVARD OSHKOSH , WI 54901	NONE	501(C)(3) & 170(B)(1)(A)(V)	TO SUPPORT MUSEUM PROGRAMS	$ 1,000
PAINE ART CENTER & GARDENS 1410 ALGOMA BOULEVARD OSHKOSH, WI 54901-2719	NONE	501(C)(3) & 170(B)(1)(A)(VI)	TO SUPPORT ART CENTER & GARDENS OPERATIONS	$ 5,000
PEDIATRIC LOW GRADE ASTROCYTOMA FOUNDATION 62 PAGE ROAD NEWTONVILLE, MA 02460	NONE	501(C)(3) & 509(A)(2)	TO SUPPORT PEDIATRIC BRAIN TUMOR RESEARCH	$ 1,000

OSHKOSH CORPORATION FOUNDATION, INC 39-6062129
990-PF, PART XV, Line 3a - Total Grants and Contributions Paid During the Year
YEAR ENDED 9/30/2010

Recipient Name and Address	Relationship	Foundation Status	Purpose of Grant	Amount
RAWHIDE E7475 RAWHIDE ROAD NEW LONDON, WI 54961	NONE	501(C)(3) & 509(A)(2)	TO SUPPORT CHARACTER EDUCATION PROGRAMS	$ 10,000
REACH COUNSELING SERVICES 36 BROAD STREET OSHKOSH, WI 54901	NONE	501(C)(3) & 170(B)(1)(A)(VI)	TO SUPPORT SOCIAL SERVICES PROGRAMS	$ 10,000
SALVATION ARMY 417 ALGOMA BOULEVARD OSHKOSH, WI 54901	NONE	501(C)(3) & 170(B)(1)(A)(1)	TO SUPPORT SOCIAL SERVICES PROGRAMS	$ 11,200
SALVATION ARMY 332 WEST HIGH STREET ORRVILLE, OH 44667-1556	NONE	501(C)(3) & 170(B)(1)(A)(1)	TO SUPPORT SOCIAL SERVICES PROGRAMS	$ 5,000
SEMCAC P O BOX 549 RUSHFORD, MN 55971	NONE	501(C)(3) & 170(B)(1)(A)(VI)	TO SUPPORT FOOD PANTRY OPERATIONS	$ 10,000
ST JOSEPH FOOD PROGRAM 1465A OPPORTUNITY WAY MENASHA, WI 54952	NONE	501(C)(3) & 509(A)(2)	TO SUPPORT PROGRAM PROVIDING FOOD FOR THE NEEDY OF FOX VALLEY	$ 25,000
THE BUILDING FOR KIDS INC 100 WEST COLLEGE AVE APPLETON, WI 54911	NONE	501(C)(3) & 509(A)(2)	TO SUPPORT MUSEUM PROGRAMS	$ 3,000
THE GRAND OPERA HOUSE 222 PEARL AVENUE, P O BOX 1004 OSHKOSH, WI 54903-1004	NONE	501(C)(3) & 170(B)(1)(A)(VI)	TO SUPPORT OPERA HOUSE OPERATIONS	$ 10,000
TWIN CITY CATHOLIC EDUCATION SYSTEM 1050 ZEPHYR DRIVE NEENAH, WI 54956	NONE	501(C)(3) & 170(B)(1)(A)(VI)	TO SUPPORT EDUCATIONAL PROGRAMS	$ 3,000
UNITED WAY FOX CITIES 1455 MIDWAY ROAD MENASHA, WI 54952	NONE	501(C)(3) & 170(B)(1)(A)(VI)	TO SUPPORT SOCIAL SERVICES PROGRAMS	$ 50,000
UNITED WAY OF BEDFORD COUNTY 5 CORPORATE DRIVE BEDFORD, PA 15522-7982	NONE	501(C)(3) & 170(B)(1)(A)(VI)	TO SUPPORT SOCIAL SERVICES PROGRAMS	$ 10,000
UNITED WAY OF MANATEE COUNTY P O BOX 109 BRADENTON, FL 34206	NONE	501(C)(3) & 170(B)(1)(A)(VI)	TO SUPPORT SOCIAL SERVICES PROGRAMS	$ 5,000
UNITED WAY OF OLMSTEAD COUNTY 903 WEST CENTER STREET, SUITE 100 ROCHESTER, MN 55902	NONE	501(C)(3) & 170(B)(1)(A)(VI)	TO SUPPORT SOCIAL SERVICES PROGRAMS	$ 50,000

OSHKOSH CORPORATION FOUNDATION, INC 39-6062129
990-PF, PART XV, Line 3a - Total Grants and Contributions Paid During the Year
YEAR ENDED 9/30/2010

Recipient Name and Address	Relationship	Foundation Status	Purpose of Grant	Amount
UNITED WAY OF THE SHIPPENSBURG AREA P O BOX 3 SHIPPENSBURG, PA 17257	NONE	501(C)(3) & 170(B)(1)(A)(VI)	TO SUPPORT SOCIAL SERVICES PROGRAMS	$ 10,000
UNITED WAY OF WASHINGTON COUNTY MARYLAND 33 WEST FRANKLIN STREET SUITE 214 HAGERSTOWN, MD 21740	NONE	501(C)(3) & 170(B)(1)(A)(VI)	TO SUPPORT SOCIAL SERVICES PROGRAMS	$ 10,000
WINNEBAGO COUNTY LITERACY COUNCIL 106 WASHINGTON AVENUE OSHKOSH, WI 54901	NONE	501(C)(3) & 170(B)(1)(A)(VI)	TO PROVIDE TUTORING SERVICES TO HELP PEOPLE LEARN ENGLISH	$ 1,000
YMCA OF THE FOX CITIES 218 EAST LAWRENCE STREET APPLETON, WI 54911	NONE	501(C)(3) & 509(A)(2)	TO SUPPORT CHARACTER EDUCATION PROGRAMS	$ 15,000
YOUTH-GO 213 NICOLET BLVD NEENAH, WI 54956	NONE	501(C)(3) & 170(B)(1)(A)(VI)	TO SUPPORT PROGRAM WHERE YOUTHS CAN LEARN AND DEVELOP RESPONSIBILITIES	$ 2,500
			TOTAL QUALIFIED CONTRIBUTIONS PAID	$ 752,250 PART I, LINE 25, COL D & PART XV, LINE 3A
			TOTAL CONTRIBUTIONS PAID	$ 752,250

FORM 990PF, PART XV - CONTRIBUTIONS APPROVED FOR FUTURE PAYMENT

ATTACHMENT 10

RECIPIENT NAME AND ADDRESS	RELATIONSHIP TO SUBSTANTIAL CONTRIBUTOR AND FOUNDATION STATUS OF RECIPIENT	PURPOSE OF GRANT OR CONTRIBUTION	AMOUNT
FOX CITIES PERFORMING ARTS CENTER 400 WEST COLLEGE AVENUE APPLETON, WI 54912	NONE 501(C)(3)&170(B)(1)(VI	TO SUPPORT PERFORMING ARTS CENTER OPERATIONS	50,000.
OSHKOSH AREA COMMUNITY FOUNDATION 400 NORTH MAIN STREET OSHKOSH, WI 54903	NONE 501(C)(3)&170(B)(1)(VI	TO SUPPORT SCHOLARSHIP FUND	100,000
		TOTAL CONTRIBUTIONS APPROVED	150,000.

Form **8868** (Rev January 2011) Department of the Treasury Internal Revenue Service

Application for Extension of Time To File an Exempt Organization Return

OMB No 1545-1709

▶ **File a separate application for each return.**

- If you are filing for an **Automatic 3-Month Extension, complete only Part I** and check this box . . . . ▶ [X]
- If you 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 filed Form 8868

Electronic filing *(e-file)* You can electronically file Form 8868 if you need a 3-month automatic extension of time to file (6 months for a corporation required to file Form 990-T), or an additional (not automatic) 3-month extension of time You can electronically file Form 8868 to request an extension of time to file any of the forms listed in Part I or Part II with the exception of Form 8870, Information Return for Transfers Associated With Certain Personal Benefit Contracts, which must be sent to the IRS in paper format (see instructions) For more details on the electronic filing of this form, visit *www irs.gov/efile* and click on *e-file for Charities & Nonprofits*

Part I **Automatic 3-Month Extension of Time.** Only submit original (no copies needed).

A corporation required to file Form 990-T and requesting an automatic 6-month extension - check this box and complete Part I only . . . . ▶ [ ]

All other corporations (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request an extension of time to file income tax returns.

Type or print File by the due date for filing your return See instructions	Name of exempt organization	**Employer identification number**
	OSHKOSH CORPORATION FOUNDATION, INC	39-6062129
	Number, street, and room or suite no. If a P O box, see instructions	
	2307 OREGON STREET	
	City, town or post office, state, and ZIP code For a foreign address, see instructions	
	OSHKOSH, WI 54902	

Enter the Return code for the return that this application is for (file a separate application for each return) . . . . [0 4]

Application Is For	**Return Code**	**Application Is For**	**Return Code**
Form 990	01	Form 990-T (corporation)	07
Form 990-BL	02	Form 1041-A	08
Form 990-EZ	03	Form 4720	09
Form 990-PF	04	Form 5227	10
Form 990-T (sec 401(a) or 408(a) trust)	05	Form 6069	11
Form 990-T (trust other than above)	06	Form 8870	12

- The books are in the care of ▶ CONNIE STELLMACHER

Telephone No ▶ 920 235-9151 FAX No ▶

- If the organization does not have an office or place of business in the United States, check this box . . . . ▶ [ ]
- If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) ______ If this is for the whole group, check this box . . . . . . ▶ [ ] If it is for part of the group, check this box . . . . ▶ [ ] and attach a list with the names and EINs of all members the extension is for

1 I request an automatic 3-month (6 months for a corporation required to file Form 990-T) extension of time until 02/15 , 20 11 , to file the exempt organization return for the organization named above The extension is for the organization's return for

▶ [ ] calendar year 20 ___ or

▶ [X] tax year beginning 10/01 , 20 09 , and ending 09/30 , 20 10 .

2 If the tax year entered in line 1 is for less than 12 months, check reason [ ] Initial return [ ] Final return [ ] Change in accounting period

3a	If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits See instructions	**3a**	$ 516.
b	If this application is for Form 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated tax payments made Include any prior year overpayment allowed as a credit	**3b**	$ 516.
c	**Balance Due.** Subtract line 3b from line 3a Include your payment with this form, if required, by using EFTPS (Electronic Federal Tax Payment System) See instructions	**3c**	$

Caution. If you are going to make an electronic fund withdrawal with this Form 8868, see Form 8453-EO and Form 8879-EO for payment instructions

For Paperwork Reduction Act Notice, see Instructions. Form **8868** (Rev 1-2011)

- If you are filing for an **Additional (Not Automatic) 3-Month Extension, complete only Part II** and check this box ▶ [X]

Note. Only complete Part II if you have already been granted an automatic 3-month extension on a previously filed Form 8868

- If you are filing for an **Automatic 3-Month Extension, complete only Part I** (on page 1)

Part II **Additional (Not Automatic) 3-Month Extension of Time.** Only file the original (no copies needed).

Type or print	Name of exempt organization	Employer identification number
	OSHKOSH CORPORATION FOUNDATION, INC	39-6062129
File by the extended due date for filing your return See instructions	Number, street, and room or suite no If a P O box, see instructions	
	2307 OREGON STREET	
	City, town or post office, state, and ZIP code For a foreign address, see instructions	
	OSHKOSH, WI 54902	

Enter the Return code for the return that this application is for (file a separate application for each return) 0 4

Application Is For	Return Code	Application Is For	Return Code
Form 990	01		
Form 990-BL	02	Form 1041-A	08
Form 990-EZ	03	Form 4720	09
Form 990-PF	04	Form 5227	10
Form 990-T (sec 401(a) or 408(a) trust)	05	Form 6069	11
Form 990-T (trust other than above)	06	Form 8870	12

STOP! Do not complete Part II if you were not already granted an automatic 3-month extension on a previously filed Form 8868.

- The books are in the care of ▶ JANA HEFT
  Telephone No ▶ 920 233-9206 FAX No ▶
- If the organization does not have an office or place of business in the United States, check this box . . . . ▶ [ ]
- If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) ______ . If this is for the whole group, check this box . . . . . . ▶ [ ] If it is for part of the group, check this box . . . . ▶ [ ] and attach a list with the names and EINs of all members the extension is for

4 I request an additional 3-month extension of time until 08/15 , 20 11

5 For calendar year ______ , or other tax year beginning 10/01 , 20 09 , and ending 09/30 , 20 10

6 If the tax year entered in line 5 is for less than 12 months, check reason [ ] Initial return [ ] Final return [ ] Change in accounting period

7 State in detail why you need the extension
ADDITIONAL TIME IS NEEDED TO COLLECT ALL THE INFORMATION NECESSARY TO FILE A COMPLETE AND ACCURATE RETURN.

8a	If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits See instructions	**8a**	$ 294.
b	If this application is for Form 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit and any amount paid previously with Form 8868	**8b**	$ 816.
c	**Balance Due.** Subtract line 8b from line 8a Include your payment with this form, if required, by using EFTPS (Electronic Federal Tax Payment System) See instructions	**8c**	$ NONE

Signature and Verification

Under penalties of perjury, I declare that I have examined this form, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete, and that I am authorized to prepare this form

Signature ▶ Title ▶ Date ▶

ERNST & YOUNG U.S. LLP
875 E. WISCONSIN AVENUE
MILWAUKEE, WI 53202

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