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Form 990-PF

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

OMB No 1545-0052

2009 Treated às a Private Foundation Department of the Treasury Internal Revenue Service Note: The foundation may be able to use a copy of this return to satisfy state reporting requirements 2010 , 2009, and ending 11/30 For calendar year 2009, or tax year beginning 12/18 G Check all that apply: X Initial return Initial Return of a former public charity Final return Amended return Address change Name change Employer identification number Use the IRS label. WILLIAM AND SANDRA HAACK FAMILY 27-1525501 Otherwise, FOUNDATION, INC. B Telephone number (see the instructions) print 10700 W. RESEARCH DRIVE #140 or type MILWAUKEE, WI 53226 See Specific If exemption application is pending, check here Instructions. 1 Foreign organizations, check here 2 Foreign organizations meeting the 85% test, check Check type of organization: X Section 501(c)(3) exempt private foundation here and attach computation Section 4947(a)(1) nonexempt charitable trust Other taxable private foundation Ε If private foundation status was terminated Fair market value of all assets at end of year J Accounting method X Cash under section 507(b)(1)(A), check here (from Part II, column (c), line 16) Other (specify) If the foundation is in a 60-month termination ▶\$ 524,813 (Part I, column (d) must be on cash basis ) under section 507(b)(1)(B), check here Part I Analysis of Revenue and (a) Revenue and (b) Net investment (c) Adjusted net (d) Disbursements Expenses (The total of amounts in expenses per books ıncome ıncome for charitable columns (b), (c), and (d) may not necespurposes sarıly equal the amounts ın column (a) (cash basis only) (see the instructions)) 525,155 Contributions, gifts, grants, etc, received (att sch) if the foundn is not req to att Sch B Interest on savings and temporary N/A cash investments 4 Dividends and interest from securities 7,536 7,536 5a Gross rents b Net rental income or (loss) 89,247 6a Net gain/(loss) from sale of assets not on line 10 REVENUE **b** Gross sales price for all assets on line 6a 175,849. Capital gain net income (from Part IV, line 2) 89,247. 8 Net short-term capital gain Income modifications 10a Gross sales less returns and allowances **b** Less Cost of c Gross profit/(loss) (att sch) 11 Other income (attach schedule) Total. Add lines 1 through 11 938 96,783 13 Compensation of officers, directors, trustees, etc. 14 Other employee safaries and wages 15 Pension plans, employee benefits. 16a Legal fees (attach schedule) b Accounting fees (attach sch) c Other prof fees (attach-sch) JUL 15 20H OPERATING 17 Interest ш 18 Taxes (attach schedule X see inst Depreciation (attach Consch) and depletion 19 sch) and depletion į V E Occupancy Travel, conferences, and meetings 22 Printing and publications 23 Other expenses (attach schedule) SEE STATEMENT 363 363 Total operating and administrative 363 expenses. Add lines 13 through 23 363 Contributions, gifts, grants paid PART .XV 25,000. 25 25,000 Total expenses and disbursements. 25,000. Add lines 24 and 25 25,363 363 Subtract line 26 from line 12: a Excess of revenue over expenses

596,575

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

and disbursements

**b** Net investment income (if negative, enter -0-) C Adjusted net Income (if negative, enter -0-)

TEEA0504L 02/02/10

96,420

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Part VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 - see the in	structions)
1 a Exempt operating foundations described in section 4940(d)(2), check here and enter 'N/A' on line 1.	
Date of ruling or determination letter: (attach copy of letter if necessary - see instr.)	
<b>b</b> Domestic foundations that meet the section 4940(e) requirements in Part V,	1,928.
check here ▶ and enter 1% of Part I, line 27b	
c All other domestic foundations enter 2% of line 27b Exempt foreign organizations enter 4% of Part I, line 12, column (b)	
2 Tax under section 511 (domestic section 4947(a)(1) trusts and taxable	
foundations only. Others enter -0-).	0.
3 Add lines 1 and 2	1,928.
4 Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	0.
5 Tax based on investment income. Subtract line 4 from line 3 If zero or less, enter -0-	1,928.
6 Credits/Payments:	
a 2009 estimated tax pmts and 2008 overpayment credited to 2009	
b Exempt foreign organizations — tax withheld at source . 6b	
c Tax paid with application for extension of time to file (Form 8868)  6c 3,000.	
d Backup withholding erroneously withheld	
7 Total credits and payments Add lines 6a through 6d	3,000.
8 Enter any penalty for underpayment of estimated tax. Check here X if Form 2220 is attached	53.
9 Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed	0.
10 Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid	1,019.
11 Enter the amount of line 10 to be Credited to 2010 estimated tax 1, 019. Refunded 11	0.
Part VII-A   Statements Regarding Activities	
1 a 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?	Yes No
<b>b</b> Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see the instructions for definition)?	1b X
If the answer is 'Yes' to <b>1a</b> or <b>1b</b> , attach a detailed description of the activities and copies of any materials publishe or distributed by the foundation in connection with the activities	d
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 $\Rightarrow$ \$ 0. (2) On foundation managers $\Rightarrow$ \$	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>b</b> If 'Yes,' has it filed a tax return on <b>Form 990-T</b> for this year?	4b N/A
5 Was there a liquidation, termination, dissolution, or substantial contraction during the year?	5 X
If 'Yes,' attach the statement required by General Instruction T	
<ul> <li>Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either:</li> <li>By language in the governing instrument, or</li> </ul>	
<ul> <li>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?</li> </ul>	6 X
7 Did the foundation have at least \$5,000 in assets at any time during the year? If 'Yes,' complete Part II, column (c), and Part XV	7 X
8a Enter the states to which the foundation reports or with which it is registered (see the instructions)	
WI	_
<b>b</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 <i>General Instruction G<sup>2</sup> If 'No,' attach explanation</i>	. 8b X
9 Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942 for calendar year 2009 or the taxable year beginning in 2009 (see instructions for Part XIV)? If 'Yes,' complete Part	(j)(5) X/V <b>9</b> X
10 Did any persons become substantial contributors during the tax year? If 'Yes,' attach a schedule listing their names and addresses  SEE STATEMENT 7	10 X
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Par	t VII-A   Statements Regarding Activities Continued	<del></del>			
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 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 Website address ► N/A	n application?	13	Х	
1.4		e no. ► (414)	905	- <del></del>	<u>n</u>
14	Located at > 526 E. WISCONSIN AVENUE MILWAUKEE WI ZIP + 4 >			- 700	<u> </u>
15			N/A		
13	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - Check here	<b>►</b>   15	N/ A	-	N/A
Day	and enter the amount of tax-exempt interest received or accrued during the year	- 15			Ν/ Λ
Par	t VII-B   Statements Regarding Activities for Which Form 4720 May Be Required			Yes	No
_	File Form 4720 if any item is checked in the 'Yes' column, unless an exception applies.		H	162	110
l a	a During the year did the foundation (either directly or indirectly):	□v ☑n.			į
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person?	Yes X No			
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person?	Yes X No			
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?	Yes X No			
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?	Yes X 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 X 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 X No			 
ŀ	b If any answer is 'Yes' to 1a(1)-(6), did <b>any</b> 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 the instructi	ons)?	1 b	N	/A
	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)).				
á	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 X No			
	If 'Yes,' list the years ▶ 20 , 20 , 20				
I	<b>b</b> Are there any years listed in 2a for which the foundation is <b>not</b> applying the provisions of section 4942 (relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942	?(a)(2) (a)(2) to	_		 
	all years listed, answer 'No' and attach statement — see the instructions.)	hara	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  20, 20, 20, 20	nere			
3	a Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year?	Yes X No			
ı	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 approve 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	ed			
	determine if the foundation had excess business holdings in 2009.)		3 b	N	/A
4:	a Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?		4a		Х
l	<b>b</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		Х
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Part VII-B   Statements Regarding Activiti	ies for Which Form	1 4720 May Be Req	uired (continued	)			
5a During the year did the foundation pay or incu	ir any amount to:			_			
(1) Carry on propaganda, or otherwise attempt	ot to influence legislation	on (section 4945(e))?	Yes	X No			
(2) Influence the outcome of any specific pub on, directly or indirectly, any voter registra	lic election (see section ation drive?	n 4955), or to carry		X No			
(3) Provide a grant to an individual for travel, study, or other similar purposes?  Yes X 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 instructions)							
(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 X 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 instructions)?							
Organizations relying on a current notice rega	rding disaster assistan	ce check here	•				/A
c If the answer is 'Yes' to question 5a(4), does tax because it maintained expenditure respon	the foundation claim ex sibility for the grant?	emption from the	N/A Yes	— ∏ No			
If 'Yes,' attach the statement required by Regi	ulations section 53 494	5-5(d)					
6a Did the foundation, during the year, receive ar on a personal benefit contract?		• • • • •	Yes	XNo			
<b>b</b> Did the foundation, during the year, pay prem	iums, directly or indirec	ctly, on a personal bene	fit contract?		6 b		X
If 'Yes' to 6b, file Form 8870  7a At any time during the tax year, was the found	dation a party to a prob	uhited tay shelter transa	iction? Yes	X No			
<b>b</b> If yes, did the foundation receive any proceed				<u></u>	7b	N	/A
Part VIII Information About Officers, D				Emp	oyees	5,	
and Contractors							
1 List all officers, directors, trustees, foundation			(d) Contributions t	o (a)	Expense	0.300	ount
(a) Name and address	(b) Title and average hours per week devoted to position	(If not paid, enter -0-)	employee benefit plans and deferred compensation	1 0	ther allo		
WILLIAM R. HAACK	DIRECTOR	0.	0				0
10700 W. RESEARCH DR., 140	0						
MILWAUKEE, WI 53226							
_SANDRA_GHAACK	DIRECTOR	0.	0	•			0
10700 W. RESEARCH DR., 140	0						
MILWAUKEE, WI 53226 KIRSTEN J. HAACK	DIDECTOR	0.	0		-		0
10700 W. RESEARCH DR., 140	DIRECTOR	0.	U	•			U
MILWAUKEE, WI 53226	0						
KEVIN W. HAACK	DIRECTOR	0.	0				0
10700 W. RESEARCH DR., 140	0	0.		.			Ū
MILWAUKEE, WI 53226		•					
2 Compensation of five highest-paid employee	es (other than those inc	cluded on line 1 – see ir	structions). If none	, enter '	NONE.'		
(a) Name and address of each employee	(b) Title and average	(c) Compensation	(d) Contributions t	o <b>(e)</b>	Expense	e acc	ount,
paid more than \$50,000	hours per week devoted to position		employee benefit plans and deferre		ther allo	owano	ces
		<u>-</u>	compensation				
NONE							
	-:-						
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Total number of other employees paid over \$50,000		07/05/00		<u> </u>	orm <b>99</b> 0	0-PF	) (2000)

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Part VIII*   Information About Officers, Directors, Trustees, Foundation Managers, Highly Paranto and Contractors (continued)	id Employees,
3 Five highest-paid independent contractors for professional services — (see 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	<b>&gt;</b>
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 N/A	
2	
3	
·	
4	
Partix-B: Summary of Program-Related Investments (see instructions)	
Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2	Amount
1 <u>N/A</u>	
2	
All other program-related investments. See instructions	
3	
Total. Add lines 1 through 3	▶ 0
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Part X Minimum Investment Return (All domestic foundations must complete this part see instructions.)	. Foreign foi	undations,
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.	1 a	325,131.
<b>b</b> Average of monthly cash balances	1 b	140,655.
c Fair market value of all other assets (see instructions)	1 c	
d Total (add lines 1a, b, and c)	1 d	465,786.
e Reduction claimed for blockage or other factors reported on lines 1a and 1c		
(attach detailed explanation)	0.	
2 Acquisition indebtedness applicable to line 1 assets	2	0.
3 Subtract line 2 from line 1d	3	465,786.
4 Cash deemed held for charitable activities Enter 1-1/2% of line 3 (for greater amount, see instructions)	4	6,987.
5 Net value of noncharitable-use assets. Subtract line 4 from line 3 Enter here and on Part V, line 4	5	458,799.
6 Minimum investment return. Enter 5% of line 5 SHORT YEAR MODIFIED PERCENTAGE 4.767	1 % 6	21,871.
Part XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private o		ndations
and certain foreign organizations check here ▶ □ and do not complete this	part.)	
1 Minimum investment return from Part X, line 6	1	21,871.
2a Tax on investment income for 2009 from Part VI, line 5.	28.	
b Income tax for 2009 (This does not include the tax from Part VI)		
c Add lines 2a and 2b	2c	1,928.
3 Distributable amount before adjustments Subtract line 2c from line 1	3	19,943.
4 Recoveries of amounts treated as qualifying distributions	4	
5 Add lines 3 and 4	. 5	19,943.
6 Deduction from distributable amount (see instructions)	6	
7 Distributable amount as adjusted. Subtract line 6 from line 5 Enter here and on Part XIII, line 1	7	19,943.
PartixIII Qualifying Distributions (see instructions)		
1 Amounts paid (including administrative expenses) to accomplish charitable, etc. purposes	2.00	-
a Expenses, contributions, gifts, etc — total from Part I, column (d), line 26	1 a	25,000.
<b>b</b> Program-related investments — total from Part IX-B	1 b	
2 Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc, purposes.	2	
3 Amounts set aside for specific charitable projects that satisfy the	3.30	
a Suitability test (prior IRS approval required)	3a	
<b>b</b> Cash distribution test (attach the required schedule)	3ь	
4 Qualifying distributions Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4	4	25,000.
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 instructions)	5	
6 Adjusted qualifying distributions. Subtract line 5 from line 4	6	25,000.
Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating qualifies for the section 4940(e) reduction of tax in those years	whether the for	undation

Part XIII Undistributed Income (see instructions)

1 Destributable amount for 2009 from Part XI, Inter 2 Undestributed income, if any, as of the end of 2009 a Enter amount for 2008 only b Tatal for proxy years. 20 _ 30 _ 50 _ 50 _ 50 _ 50 _ 50 _ 50 _ 5		(a) Corpus	<b>(b)</b> Years prior to 2008	<b>(c)</b> 2008	<b>(d)</b> 2009
2 Undesthalded income, if any, as of the end of 2009 a Enter amount for 2008 only b Total for prior years. 20 _ 20 _ 30 _ 3					19,943.
b Total for prior years. 20 20 20 20	1.11-1.1			_	
3 Excest distributions carryove; if amy, to 2009; a From 2004 b From 2005 c From 2006 d From 2007 e From 2007 e From 2007 e From 2008 d Total of lines 3a through e  4 Qualifying distributions for 2009 from Part XII, line 4: P. S. 25, 0.00. a Applied to 2008, but not more than line 2a  b Applied to 2008, but not more than line 2a  c Treated as distributions out of corpus (Election required — see instructions) d Applied to 2009 distributable amount e Remaining amount distributed out of corpus (Election required — see instructions) d Applied to 2009 distributable amount e Remaining amount distributed out of corpus 5, 0.57.  5, 0.57.  6 Enter the net total of each column as indicated below: a Corpus 40 line 81, 4c, and 4e, subtract line 5 b Pror years' undistributed income. Subtract line 4b from line 2b c Enter the amount of pror years' undistributed income for which a notice of deficiency has been issued, or on which the section 494(26) tax has been previously assessed d Subtract line 6c from line 6b Taxable amount — see instructions e Undistributed income for 2008 Subtract lines 4d and 5 from line 1 This amount must be distributed in 2010 7 Amounts treated as distributions carryover from 2004 and 5 from line 1 This amount must be distributed in 2010 7 Amounts treated as distributions carryover from 2004 b Excess from 2006 Excess from 2006 Excess from 2007 Excess from 2008	a Enter amount for 2008 only			0.	
a From 2005 c From 2006 d From 2007 c From 2006 d From 2007 d From 2008 1 Total of lines 3a through e  1 Qualifying distributions for 2009 from Part XII, line 4: P\$ 25,000. a Applied to 2008, but not more than line 2a b Applied to undistributed income of prior years (Election required — see instructions) c Treated as distributions out of corpus (Election required — see instructions) d Applied to 2009 distributable amount e Remaining amount distributed out of corpus 5 Exess distributions carryover applied to 200 (See instructions) 6 Enter the net total of each column as indicated below: a Corpus Add lines 3f, 4a, and 4e. Subtract line 46 from line 2 b Prior years' undistributed income. Subtract line 46 from line 2 b Prior years' undistributed income. Subtract line 46 from line 2 c Enter the amount of prior years' undistributed all income for which a rotice of deletions' and the subtract line 46 from line 2 d Subtract line 6c from line 6b Taxable amount — see instructions d Subtract line 6c from line 6b Taxable amount — see instructions d Indicated below: a Corpus to satisfy requirements unposed by section 170(6)(1)(f) or 4942(g)(3) (see instructions)  9 Excess distributions carryover from 2004 not applied on line 5 or line 7 (see instructions)  9 Excess from 2007 d Excess from 2007	<b>b</b> Total for prior years. 20, 20, 20		0.		
b From 2005 c From 2006 d From 2007 e From 2008 1 Total of lines 3a through e  4 Qualifying distributions for 2009 from Part XII, line 4: * \$ 25,000. a Applied to 2008, but not more than line 2a  5 Applied to 2008, but not more than line 2a  6 Applied to 2008, but not more than line 2a  6 Applied to 2009, but not more than line 2a  6 Applied to 2009 distributation out of corpus (Election required — see instructions)  6 Applied to 2009 distributable amount e Remaining amount distributed out of corpus 5 Excess distributions carryover for 2009 (If an amount appears in column (a) the same amount must be shown in column (a))  6 Enter the net total of each column as indicated below: a Corpus Add lines 3i, 4c, and 4c Subtract line 5  b Prior years' undistributed moome. Subtract line 4 from line 2b  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) that she been previously assessed d Subtract line 6c from line 6b Taxable amount — see instructions e Undistributed income for 2009 Subtract lines 4 and 5 from line 1 This amount must be distributed in 200  7 Amounts treated as distributions out of corpus to satisfy requirements imposed by section 170(b)(I)(F) or 4942(g)(3) (see instructions)  9 Excess distributions carryover from 2004 not applied on line 5 or line 7 (see instructions)  9 Excess from 2006 c Excess from 2006 c Excess from 2007 d Excess from 2007				1	
c From 2006 d From 2007 e From 2008 1 Total of lines 3a through e  1 Qualifying distributions for 2009 from Part XII, line 4: ► \$ 25,000. a Applied to 2008, but not more than line 2a b Applied to 2008, but not more than line 2a conditions out of corpus (Election required — see instructions) c Treated as distributions out of corpus (Election required — see instructions) d Applied to 2009 distributable amount e Permaning amount distributed out of corpus 5 Excess distributions carryover applied to 2009 (if an amount appears in column (a)) 6 Enter the net total of each column as indicated below: a Corpus Add lines 3i, 4c, and 4e. Subtract line 5 b Prior years' undistributed income. Subtract line 46 from line 20 c Enter the amount of prior years' undistributed and the column as indicated below: a Subtract line 64 from line 20 d Subtract line 65 from line 61 Taxable amount — see instructions c Indistributed income for 2008 Subtract lines 4d and 5 from line 1 This amount must be distributed income for 2009 Subtract lines 4d and 5 from line 1 This amount must be distributed income for 2009 Subtract lines 4d and 5 from line 1 This amount must be distributed income for 2009 Subtract lines 4d and 5 from line 1 This amount must be distributed in 2010 7 Amounts treated as distributions out of course of the column of the co					•
d From 2008  If Total of lines 3a through e  4. Qualifying distributions for 2009 from Part XII, line 4; P\$ 25,000.  a Applied to 2008, but not more than line 2a  b Applied to 2008, but not more than line 2a  b Applied to 2008, but not more than line 2a  b Applied to 2008, but not more than line 2a  c Treated as distributions out of corpus (Election required — see instructions)  d Applied to 2009 distributable amount e Remaining amount distributed out of corpus (Election required — see instructions)  5. Loss distributions carpover applied to 2009 (If an amount appears in column (a), the same amount mask be shown in column (a))  6. Enter the ret total of each column as indicated below:  a Corpus Add lines 3f, 4c, and 4e. Subtract line 5  b Prior years' undistributed income. Subtract line 4 from line 2b  c Enter the amount of prior years' undistributing discincing the second of which a notice of deficiency has been issued, or on which the section 49-42(a) list has been previously assessed d Subtract line 6c from line 6b Taxable amount — see instructions  e Indistributed income for 2008. Subtract lines 4 at 70m line 2b. Taxable amount — see instructions  f Undistributed income for 2008. Subtract lines 4 at 67 from line 1. This amount must be distributed in 2010  7. Amounts treated as distributions out of corpus to satisfy requirements imposed by seeing 170 (1)(f) or 4942(g)(3) (see instruction)  8. Excess distributions carryover from 2004 not applied on line 5 or line 7 (see instructions)  9. Excess from 2006 c Excess from 2006 c Excess from 2007 d Excess from 2007					
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Form 990-PF (2009)	e Excess from 2009 5, 057.	<u> </u>			

is effective for 2009, enter the date of the r <b>b</b> Check box to indicate whether the foundati	-	erating foundation o	described in section	4942(j)(3) or	4942(J)(5)
2a Enter the lesser of the adjusted net	Tax year	The state of the s	Prior 3 years	1,5,120/(5/ 5/	
income from Part I or the minimum investment return from Part X for each year listed	(a) 2009	<b>(b)</b> 2008	(c) 2007	<b>(d)</b> 2006	(e) Total
<b>b</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					
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	<del></del>	L	<u> </u>		
Part XV Supplementary Information ( assets at any time during the Information Regarding Foundation Manag	<u>e year — see in</u>	part only if the structions.)	organization ha	nd \$5,000 or moi	re in
a List any managers of the foundation who holose of any tax year (but only if they have SEE STATEMENT 8	ave contributed m	ore than 2% of the than \$5,000) (See	total contributions r section 507(d)(2))	eceived by the foun	dation before the
<b>b</b> List any managers of the foundation who o a partnership or other entity) of which the to NONE	wn 10% or more c foundation has a 1	of the stock of a cor 0% or greater inter	poration (or an equiest.	ally large portion of	the ownership of
2 Information Regarding Contribution, Gran Check here X if the foundation only m requests for funds. If the foundation makes complete items 2a, b, c, and d	akes contributions gifts, grants, etc,	to preselected cha (see instructions)	arıtable organızaţıon to ındıvıduals or org	anızatıons under oth	ept unsolicited ner conditions,
a The name, address, and telephone number	r of the person to	whom applications	should be addresse	d:	
<b>b</b> The form in which applications should be s	ubmitted and info	rmation and materi	als they should inclu	de	
c Any submission deadlines:					
d Any restrictions or limitations on awards, s	uch as by geograp	phical areas, charita	able fields, kinds of	institutions, or other	factors.
BAA	TE	EA0310L 07/06/09			Form <b>990-PF</b> (2009)

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BAA

Part V Supplementary Information (continued)

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3 Grants and Contributions Paid During the Year or Approved for Future Payment If recipient is an individual, show any relationship to any foundation manager or substantial contributor Foundation Purpose of grant or contribution Recipient Amount status of recipient Name and address (home or business) a Paid during the year 25,000. JUNIOR ACHIEVEMENT OF WISCONSIN PUBLIC GENERAL 6924 N PORT WASHINGTON RD MILWAUKEE, WI 53217 25,000. За **Total** b Approved for future payment 3Ы Total

### Part XVI-A Analysis of Income-Producing Activities

nter aross	s amounts unless otherwise indicated.	Unrelated	business income	Excluded by	section 512, 513, or 514	
		(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	(e) Related or exempt function income (see the instructions)
-	ram service revenue			code		(see the instructions)
		<del>                                     </del>		<del>                                     </del>		,
_						
f						
_	and contracts from government agencies	ļ		<del>-  </del>		
	bership dues and assessments					
	st on savings and temporary cash investments	<del></del>	<del></del> -	14	7 526	
	ends and interest from securities	<del></del>		14	7,536.	
	ental income or (loss) from real estate:			+ +		
	financed property lebt-financed property			<del></del>		
	ntal income or (loss) from personal property	<u> </u>	·	+ +		
	r investment income		·	1 1		
	r (loss) from sales of assets other than inventory			18	89,247.	
	ncome or (loss) from special events		<del></del>	<del>  </del>		
	s profit or (loss) from sales of inventory					-
11 Other						
а						
e						<u></u>
12 Subto	otal Add columns (b), (d), and (e)				96,783.	
	* * * * * * * * * * * * * * * * * * * *					
13 Total	Add line 12, columns (b), (d), and (e)				13	96,783.
13 Total	* * * * * * * * * * * * * * * * * * * *	alculations)				96, 783.
13 Total See works	Add line 12, columns (b), (d), and (e)		hment of Exem	pt Purpose		96, 783.
13 Total See works Part XVI- Line No.	Add line 12, columns (b), (d), and (e) sheet in the instructions for line 13 to verify columns.  Relationship of Activities to the	Accomplis	<del></del>		es .	
13 Total See works Part XVI- Line No.	Add line 12, columns (b), (d), and (e) sheet in the instructions for line 13 to verify c	Accomplis	<del></del>		es .	
13 Total See works Part XVI- Line No.	Add line 12, columns (b), (d), and (e) sheet in the instructions for line 13 to verify columns.  Relationship of Activities to the	Accomplis	<del></del>		es .	
13 Total See works Part XVI- Line No.	Add line 12, columns (b), (d), and (e) sheet in the instructions for line 13 to verify columns.  Relationship of Activities to the	Accomplis	<del></del>		es .	
13 Total See works Part XVI- Line No.	Add line 12, columns (b), (d), and (e) sheet in the instructions for line 13 to verify columns.  Relationship of Activities to the	Accomplis	<del></del>		es .	
13 Total See works Part XVI- Line No.	Add line 12, columns (b), (d), and (e) sheet in the instructions for line 13 to verify columns.  Relationship of Activities to the	Accomplis	<del></del>		es .	
13 Total See works Part XVI- Line No.	Add line 12, columns (b), (d), and (e) sheet in the instructions for line 13 to verify columns.  Relationship of Activities to the	Accomplis	<del></del>		es .	
13 Total See works Part XVI- Line No.	Add line 12, columns (b), (d), and (e) sheet in the instructions for line 13 to verify columns.  Relationship of Activities to the	Accomplis	<del></del>		es .	
13 Total See works Part XVI- Line No.	Add line 12, columns (b), (d), and (e) sheet in the instructions for line 13 to verify columns.  Relationship of Activities to the	Accomplis	<del></del>		es .	
13 Total See works Part XVI- Line No.	Add line 12, columns (b), (d), and (e) sheet in the instructions for line 13 to verify columns.  Relationship of Activities to the	Accomplis	<del></del>		es .	
13 Total See works Part XVI- Line No.	Add line 12, columns (b), (d), and (e) sheet in the instructions for line 13 to verify columns.  Relationship of Activities to the	Accomplis	<del></del>		es .	
13 Total See works Part XVI- Line No.	Add line 12, columns (b), (d), and (e) sheet in the instructions for line 13 to verify columns.  Relationship of Activities to the	Accomplis	<del></del>		es .	
13 Total See works Part XVI- Line No.	Add line 12, columns (b), (d), and (e) sheet in the instructions for line 13 to verify columns.  Relationship of Activities to the	Accomplis	<del></del>		es .	
13 Total See works Part XVI- Line No.	Add line 12, columns (b), (d), and (e) sheet in the instructions for line 13 to verify columns.  Relationship of Activities to the	Accomplis	<del></del>		es .	
13 Total See works Part XVI- Line No.	Add line 12, columns (b), (d), and (e) sheet in the instructions for line 13 to verify columns.  Relationship of Activities to the	Accomplis	<del></del>		es .	
13 Total See works Part XVI- Line No.	Add line 12, columns (b), (d), and (e) sheet in the instructions for line 13 to verify columns.  Relationship of Activities to the	Accomplis	<del></del>		es .	
13 Total See works Part XVI- Line No.	Add line 12, columns (b), (d), and (e) sheet in the instructions for line 13 to verify columns.  Relationship of Activities to the	Accomplis	<del></del>		es .	
13 Total See works Part XVI- Line No.	Add line 12, columns (b), (d), and (e) sheet in the instructions for line 13 to verify columns.  Relationship of Activities to the	Accomplis	<del></del>		es .	
13 Total See works Part XVI- Line No.	Add line 12, columns (b), (d), and (e) sheet in the instructions for line 13 to verify columns.  Relationship of Activities to the	Accomplis	<del></del>		es .	
13 Total See works Part XVI- Line No.	Add line 12, columns (b), (d), and (e) sheet in the instructions for line 13 to verify columns.  Relationship of Activities to the	Accomplis	<del></del>		es .	
13 Total See works Part XVI- Line No.	Add line 12, columns (b), (d), and (e) sheet in the instructions for line 13 to verify columns.  Relationship of Activities to the	Accomplis	<del></del>		es .	
13 Total See works Part XVI- Line No.	Add line 12, columns (b), (d), and (e) sheet in the instructions for line 13 to verify columns.  Relationship of Activities to the	Accomplis	<del></del>		es .	
13 Total See works Part XVI- Line No.	Add line 12, columns (b), (d), and (e) sheet in the instructions for line 13 to verify columns.  Relationship of Activities to the	Accomplis	<del></del>		es .	

### Part XVII Information Regarding Transfers To and Transactions and Relationships With Noncharitable Exempt Organizations

_				<del></del>							
	desci	he organization directly ribed in section 501(c) o ing to political organizat	of the Code (ot	ngage in any of th her than section 5	ie following wit 501(c)(3) organ	h any otl lizations)	her organizatio ) or in section 5	า 27,		Yes	No
	a Trans	sfers from the reporting	foundation to	a noncharitable ex	xempt organiza	ation of					
	(1)	Cash							1a(1)		X
	(2)	Other assets							1a (2)		Х
	<b>b</b> Other	r transactions									
	<b>(1)</b> S	Sales of assets to a non	icharitable exei	mpt organization					1 b (1)		<u>X</u> _
	<b>(2)</b> F	Purchases of assets fror	m a noncharita	ble exempt organı	ızatıon				1 b (2)		Х
	<b>(3)</b> F	Rental of facilities, equip	oment, or other	r assets					1 b (3)		X
		Reimbursement arrange							1 b (4)		X
		oans or loan guarantee.						•	1 b (5)		X
		Performance of services							1 b (6)		X
	<b>c</b> Shari	ing of facilities, equipme	ent, mailing lis	ts, other assets, o	or paid employe	ees			1c		X
	the a	answer to any of the a loods, other assets, or s ransaction or sharing ai	services aiven l	by the reporting fo	oundation If th	e founda	ation received le	ess than fair marke	et value in	ue of	
(a	) Line no	(b) Amount involved		f noncharitable exempt				fers, transactions, and		aement	is
	/A	\	(J) minio						<u> </u>	· g - · · · · · ·	
_								<del></del>			
_						ļ					
_											
		e foundation directly or ribed in section 501(c) of		ated with, or relate her than section 5	ed to, one or m 501(c)(3)) or in	ore tax- section	exempt organız 527?	ations	Yes	X	No
_	DII Ye	es, complete the follows		(h) Tuno o	of argonization	Т		Doccription of rol	ationchin		
<u></u>	/A	(a) Name of organizati	on	<b>(b)</b> Type 0	of organization		(C,	Description of rel	allonsnip		
-14	<u> </u>			<del></del>				<del>-</del> -			
_		·				i					
_											
_				·				·			
	Under pen	altyes of perjury. I declare that I	I have examined thi	s return, including accor	mpanying schedule	s and stater	ments, and to the be	st of my knowledge and	belief, it is tru	e, corre	ct, and
s	complete	Declaration of preparer (othe) t	than taxpayer or fide	uciary) is based on all in	nformátion of which	preparer ha	as any knowledge	- Pracidout	i Aire	Br-	
SIGE	Sign	nature of officer or trustee	<del>-</del>	,	<del></del>	Date		Title			
N				7 01		Date	<i>f</i> ,		arer's Identify		
ተሠድሠ	Paid Pre-	Preparer's signature	ente	111 - Su	1)	6	5/2/11	self employed ► N/	Signature in A	the inst	rs) 
£	parer's Use	Firm's name (or QUAR)				<del>.</del>		EIN N/A			
	Only	employed), 411	E WISCONS		E 2040						
		ZIP code MILW	AUKEE, WI	53202-4497				Phone no ► (41	4) 277		
B/	\A								Form <b>99</b>	0-PF (	(2009)

#### 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 WILLIAM AND	SANDRA HAACK FAMILY	Employer identification number
FOUNDATION,	INC.	27-1525501
Organization type (check one)		
Filers of:	Section:	
Form 990 or 990-EZ	501(c)() (enter number) orga	ınızatıon
	4947(a)(1) nonexempt charitable tru	ust <b>not</b> treated as a private foundation
	527 political organization	
Form 990-PF	X 501(c)(3) exempt private foundation	1
	4947(a)(1) nonexempt charitable tru	ust treated as a private foundation
	501(c)(3) taxable private foundation	ı
Check if your organization is covered <b>Note:</b> Only a section 501(c)(7), (8), or	by the <b>General Rule</b> or a <b>Special Rule</b> r (10) organization can check boxes for both the G	General Rule and a Special Rule See instructions
General Rule -		
X For an organization filing Form 99 contributor (Complete Parts I and	0, 990-EZ, or 990-PF that received, during the yeal III)	ar, \$5,000 or more (in money or property) from any one
Special Rules –		
For a section 501(c)(3) organization 509(a)(1)/170(b)(1)(A)(vi) and receive amount on (i) Form 990, Part VIII	on filing Form 990 or 990-EZ, that met the 33-1/3% d from any one contributor, during the year, a contributi , line 1h or (ii) Form 990-EZ, line 1. Complete Par	% support test of the regulations under sections on of the greater of (1) \$5,000 or (2) 2% of the ts I and II
aggregate contributions of more the	0) organization filing Form 990 or 990-EZ, that rec nan \$1,000 for use <i>exclusively</i> for religious, charita r animals Complete Parts I, II, and III	eived from any one contributor, during the year, able, scientific, literary, or educational purposes, or the
contributions for use exclusively for this box is checked, enter here the	O) organization filing Form 990 or 990-EZ, that reconcerning the seconcern strain or the seconcern	ontributions did not aggregate to more than \$1,000 If year for an <i>exclusively</i> religious, charitable, etc,
religious, charitable, etc, contribu	tions of \$5,000 or more during the year	<b>▶</b> \$
990-PF) but it must answer 'No' on P	covered by the General Rule and/or the Special Ru art IV, line 2 of their Form 990, or check the box of the filing requirements of Schedule B (Form 990	ules does not file Schedule B (Form 990, 990-EZ, or on line H of its Form 990-EZ, or on line 2 of its Form 0, 990-EZ, or 990-PF)
BAA For Privacy Act and Paperwor for Form 990, 990EZ, or 990-PF.	k Reduction Act Notice, see the Instructions	Schedule B (Form 990, 990-EZ, or 990-PF) (2009)

Schedule	<b>B</b> (Form 990, 990-EZ, or 990-PF) (2009)	Page	1 of 2 of Part I
Name of org	anization	1 .	loyer identification number
	M AND SANDRA HAACK FAMILY		-1525501
Part Ix	Contributors (see instructions )		
(a) Number	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
1	WILLIAM R. HAACK  10700 W. RESEARCH DRIVE, #140  MILWAUKEE, WI 53226	\$175,00	Person X Payroll Noncash  (Complete Part II if there is a noncash contribution)
(a) Number	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
2	SANDRA G. HAACK  10700 W. RESEARCH DRIVE, #140  MILWAUKEE, WI 53226	\$175,00	Person X Payroll Noncash  (Complete Part II if there is a noncash contribution)
(a) Number	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
3	WILLIAM R. HAACK  10700 W. RESEARCH DRIVE, #140  MILWAUKEE, WI 53226	\$16,75	(Complete Part II if there is a noncash contribution)
(a) Number	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
4	WILLIAM R. HAACK  10700 W. RESEARCH DRIVE, #140  MILWAUKEE, WI 53226	\$ <u>46,19</u>	Person Payroll Noncash  (Complete Part II if there is a noncash contribution)
(a) Number	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution

5

WILLIAM R. HAACK

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

Person Payroll

Schedule	<b>B</b> (Form 990, 990-EZ, or 990-PF) (2009)		of 2 of Part I
Name of org	anization AM AND SANDRA HAACK FAMILY	* * *	ridentification number
Part I≩	Contributors (see instructions )		
(a) Number	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
	WILLIAM R. HAACK  10700 W. RESEARCH DRIVE, #140  MILWAUKEE, WI 53226	\$11,643.	Person Payroll Noncash  (Complete Part II if there is a noncash contribution)
(a) Number	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
	WILLIAM R. HAACK  10700 W. RESEARCH DRIVE, #140  MILWAUKEE, WI 53226	\$37,848.	Person Payroll Noncash X (Complete Part II if there is a noncash contribution)
(a) Number	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution)
(a) Number	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution)
(a) Number	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a) Number	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
		s	Person Payroll

(Complete Part II if there is a noncash contribution )

Page

of 1

of Part II

Name of organization

WILLIAM AND SANDRA HAACK FAMILY

Employer identification number

27-1525501

(a) No. from Part I	(b)  Description of noncash property given		(c) FMV (or estimate) (see instructions)	(d) Date received
3	252 SHS BAYER AG SPONSORED ADR (BAYRY)			
		\$_	16,758.	4/07/10
(a) lo. from Part I	(b) Description of noncash property given		(c) FMV (or estimate) (see instructions)	(d) Date received
4	509 SHS BG PLC ADR FINAL INSTALLMENT NEW (BRGYY)			
		\$_	46,197.	4/07/10
(a) No. from Part I	(b) Description of noncash property given		(c) FMV (or estimate) (see instructions)	(d) Date received
5	654 SHS NATIONAL AUSTRALIA BK LTD SPONSORED ADR (NABZY)			
	•	\$_	16,971.	4/07/10
(a) No. from Part I	(b) Description of noncash property given		(c) FMV (or estimate) (see instructions)	(d) Date received
6	3,662 SHS SOCIETE GENERALE FRANCE SPONSORED ADR (SCGLY)		-	
		\$_	45,738.	4/07/10
(a) No. from Part I	(b)  Description of noncash property given		(c) FMV (or estimate) (see instructions)	(d) Date received
7	270 SHS AMERICAN EXPRESS CO., COMMON STOCK, .60PAR (AXP)			
		\$_	11,643.	4/07/10
(a) No. from Part I	(b)  Description of noncash property given		(c) FMV (or estimate) (see instructions)	(d) Date received
8	2,787 SHS BANCO SANTANDERS S.A. (STD)		<del> ·</del>	
		_  <sub>\$</sub>	37,848.	4/07/10

	3 (Form 990, 990-EZ, or 990-PF) (2009)	<u> </u>	Р	age l	of 1	of Part III					
Name of organ					Employer Identifica						
	M AND SANDRA HAACK FAMILY	4. ()		F64 4 *	27-152550						
Part III	<i>Exclusively</i> religious, charitable, e organizations aggregating more t	etc, individual contribution than \$1,000 for the year.(C	ns to sectio omplete cols (a	n 501(c) ) through	(7), (8), or (10) (e) and the follow	). ing line entry.)					
	For organizations completing Part III, enter contributions of \$1,000 or less for the year	total of <i>exclusively</i> religious, cl (Enter this information once —	naritable, etc, see instruction	ns )	►s	N/A					
(a)	(b)	(c)			(d)						
No. from Part I	Purpose of gift	Use of gift	Description of how gift is held								
· uitt	N/A					<u>.                                      </u>					
		<u> </u>		<del></del>							
		(e)									
	Transferee's name, addres	Transfer of gift ss, and ZIP + 4	Relati	onship of	transferor to tran	sferee					
(a) No. from	(b)	(c)		_	(d)						
Part I	Purpose of gift	Use of gift		Desc	ription of how gi	ft is held 					
		(e) Transfer of gift									
	Transferee's name, addres		Relati	onship of	transferor to tran	sferee					
		,	<u></u>			<del>_</del>					
(a) No. from	(b) Purpose of gift	(c) Use of gift		Dose	(d) cription of how gi	# ic hold					
Part I	ruipose oi giit	Use of gift									
			-		<del></del>						
		(e) Transfer of gift									
	Transferee's name, addres		Relationship of transferor to transferee								
				<del></del>		0					
				·							
(a)	(b)	(6)	<u> </u>		(d)						
No. from	Purpose of gift	(b) (c) Purpose of gift Use of gift			cription of how gi	ft is held					
Part I											
		(e)									
		Transfer of gift									
	Transferee's name, addres	Transferee's name, address, and ZIP + 4				sferee					
			<u> </u>		<del></del>						
		<del></del>			<del></del>						

2009	FEDERAL S				PAGE		
CLIENT HAAC5501	WILLIAM AND SAN FOUNDA	DRA HAACK FA TION, INC.		27-15255			
5/23/11					02.00		
STATEMENT 1 FORM 990-PF, PART I, LINE 23 OTHER EXPENSES			٠				
	EXPE	NSES INVEST SOOKS INC	OME	(C) ADJUSTED NET INCOM			
ACCOUNT MANAGEMENT FEES	TOTAL \$ \$	363. 363. \$	363. 363.	·	\$ 0		
STATEMENT 2 FORM 990-PF, PART II, LINE 10B							
INVESTMENTS - CORPORATE ST	OCKS						
CORPORATE STOCKS		VALUATION METHOD		BOOK VALUE	FAIR MARKET VALUE		
MFB NORTHERN FDS LARGE CAP MFB NORTHERN FDS MID CAP NI MFB NORTHERN FDS SMALL CAP MFB NORTHERN FDS INTL EQUI MFB NORTHERN FDS EMERG MKT	MMCX NMMSX TY NMIEX	COST COST COST COST COST	\$ 'AL <u>\$</u>	106,201. 8,999. 9,209. 61,186. 41,399. 226,994.	9,638. 9,962. 61,730. 46,707.		
STATEMENT 3 FORM 990-PF, PART II, LINE 10C INVESTMENTS - CORPORATE BO	ONDS						
CORPORATE BONDS		VALUATION METHOD		BOOK VALUE	FAIR MARKET VALUE		
MFB NORTHERN FDS BD INDEX MFB NORTHERN FDS HIGH YIEL MFB NORTHERN FDS HIGH YIEL MFO PIMCO FDS PAC INVT HIG MFO VANGUARD FIX INC INFL	D OPP NMHYX D FIXED NHFIX H YIELD PHIYX	COST COST COST COST COST	\$	129,598. 17,999. 27,399. 10,500. 6,999.	\$ 133,349 18,345 27,794 10,489 7,409		
		TOI	AL \$	192,495.	\$ 197,386		
STATEMENT 4 FORM 990-PF, PART II, LINE 13 INVESTMENTS - OTHER		•					
COURT DATE TOLV EDADED CECH	D-TMTDC	VALUATION METHOD		BOOK VALUE	FAIR MARKET VALUE		
OTHER PUBLICLY TRADED SECU MFB NORTHERN FDS GLBL REAL MFC SPDR GOLD TR GLD		COST COST	\$	12,400. 17,384.			

TOTAL \$ 50,886. \$ 55,180.

2009

### FEDERAL STATEMENTS

PAGE 2

**CLIENT HAAC5501** 

WILLIAM AND SANDRA HAACK FAMILY FOUNDATION, INC.

27-1525501

5/23/11

02 00PM

STATEMENT 5 FORM 990-PF, PART III, LINE 5 OTHER DECREASES

BASIS ADJUSTMENT FOR DONATED ASSETS

TOTAL \$ 92,051. \$ 92,051.

# STATEMENT 6 FORM 990-PF, PART IV, LINE 1 CAPITAL GAINS AND LOSSES FOR TAX ON INVESTMENT INCOME

		(B) HOW	(C) DATE	(D) DATE
ITEM	(A) DESCRIPTION	ACOUIRED	ACQUIRED	SOLD
1	252 BAYER AG SP ADR	DONATED	VARIOUS	4/22/2010
2	509 BG PLC ADR FINAL INSTALLMENT	DONATED	VARIOUS	4/22/2010
3	654 NATIONAL AUSTRALIA BK LTD SP ADR	DONATED	VARIOUS	4/22/2010
4	3,662 SOCIETE GENERALE FRANCE SP ADR	DONATED	VARIOUS	4/22/2010
5	270 AMERICAN EXPRESS CO	DONATED	VARIOUS	4/22/2010
6	2,787 BANCO SANTANDERS S.A.	DONATED	VARIOUS	4/22/2010
7	416.46 PIMCO FUNDS PAC INVT MGMT SER COMM	PURCHASED	1/15/2010	5/13/2010

ITEM 1 2 3 4 5 6 7	(E) GROSS SALES 16,783. 44,399. 16,978. 43,650. 12,150. 38,599.	(F) DEPREC. ALLOWED	(G) COST BASIS 8,199. 20,568. 7,763. 23,730. 3,534. 19,310.	(H) GAIN (LOSS) 8,584. 23,831. 9,215. 19,920. 8,616. 19,289.	(I) FMV 12/31/69	(J) ADJ. BAS. 12/31/69	(K) EXCESS (I)-(J)	\$ (L) GAIN (LOSS) 8,584. 23,831. 9,215. 19,920. 8,616. 19,289. -208
7	38,599.		19,310. 3,498.	-208.			TOTAL	\$ -208. 89,247.

# STATEMENT 7 FORM 990-PF, PART VII-A, LINE 10 SUBSTANTIAL CONTRIBUTORS DURING THE TAX YEAR

NAME OF SUBSTANTIAL CONTRIBUTOR

ADDRESS OF SUBSTANTIAL CONTRIBUTOR

WILLIAM HAACK

10700 W. RESEARCH DR., 140 MILWAUKEE, WI 53226

10700 W. RESEARCH DR., 140 MILWAUKEE, WI 53226

SANDRA HAACK

2009

### FEDERAL STATEMENTS

PAGE 3

**CLIENT HAAC5501** 

WILLIAM AND SANDRA HAACK FAMILY FOUNDATION, INC.

27-1525501

5/23/11

02.00PM

STATEMENT 8 FORM 990-PF, PART XV, LINE 1A FOUNDATION MANAGERS - 2% OR MORE CONTRIBUTORS

WILLIAM R. HAACK SANDRA G. HAACK

### WILLIAM AND SANDRA HAACK FAMILY FOUNDATION, INC.

### ACTION OF DIRECTORS IN LIEU OF A MEETING

The undersigned, constituting the initial Board of Directors of the William and Sandra Haack Family Foundation, Inc. (the "Foundation"), a Wisconsin nonstock, nonprofit corporation, acting pursuant to Chapter 181.0821 of the Wisconsin Nonstock Corporation Law, hereby consent to the adoption of the following resolutions, to have the same force and effect as if unanimously taken and adopted at a duly called meeting:

RESOLVED, that the Board of Directors of the Foundation hereby approves, adopts, and ratifies the amendment of the Foundation's bylaws, effective as of July 31, 2010, as follows:

Article VI is hereby deleted in its entirety and replaced with the following:

### "ARTICLE VI

#### Fiscal Year

The fiscal year of the corporation shall end on the last day of November in each year."

[Remainder of page intentionally left blank;

Signature page follows.]

IN WITNESS WHEREOF, the undersigned have executed this consent to be filed as a part of the minutes of the Foundation as of the day and year first above written.

Sandra G. Haack

Kirsten J. Haack

Rum W Haach

Kevin W. Haack

Representing all of the directors of the Foundation

# Application for Extension of Time To File an Exempt Organization Return

OMB No 1545-1709

Department of the Treasury

nternal Revenue	Service		File a sepa	rate application for ea	cn return.				
If you are	filing for an	Automatic 3-Month	Extension, comp	lete only Part I and ch	eck this box				<b>►</b> [X]
				Extension, complete o	•	nage 2 of the	s form)	1	
				an automatic 3-month					
				Only submit origina				5555	
0 0000	Automatic .	S-MOHUI EXICHS	ion or rime.	only Submit ongine	ii (iio copies	needed).			
A corporation	required to f	le Form 990-T and	requesting an au	tomatic 6-month exter	ision – check ti	nis box and o	comple	te Part I onl	y <b>-</b>
All other corp ncome tax re	oorations (incl eturns.	udıng 1120-C filers)	, partnerships, R	EMICS, and trusts mu	st use Form 700	04 to reques	t an ext	ension of til	me to file
ne additional form 990-T	l (not automa: Instead, you r	lic) 3-month extensi	on or (2) you file / completed and	orm 8868 if you want Form 990-T) Howeve Forms 990-BL, 6069, signed page 2 (Part II) & & Nonprofits	or 8870, group	returns, or a	compo	osite or cons	solidated
	Name of Exempt	Organization			<del></del>		Employ	er identification	number
Type or	WILLIAM	AND SANDRA H	AACK FAMILY	7			'		
orint	FOUNDATI			•			27-1525501		
ile by the fue date for	Number, street, a	nd room or suite number.	If a P O box, see inst	ructions					
iling your eturn See	10700 W.	RESEARCH DR	IVE #140						
nstructions		office, state, and ZIP cod		ss, see instructions					
	MILWAUKE	E, WI 53226							
Check type o		filed (file a separat	e application for	each return):					<del></del>
Form 990		Γ	Form 990-T (co		1	Form 472	20		
Form 990	)-BL	-	- '	ection 401(a) or 408(a)	trust)	Form 522			
Form 990		<u> </u>	_ `	ust other than above)		Form 606			
X Form 990		<del> -</del>	Form 1041-A	act ctrict trials above,		Form 887	-		
<ul> <li>If the orga</li> <li>If this is f check this the exten</li> <li>I reques until</li> </ul>	anization does for a Group Re s box ►  sion will cove st an automat 7/15	eturn, enter the orgatif it is for part of the r.  ic 3-month (6 month)	anization's four d the group, check as for a corporati the exempt orga	FAX No Peness in the United State igit Group Exemption this box Penes and at on required to file Formulation return for the	Number (GEN) tach a list with m 990-T) extens	the names a			
▶ □	calendar year	· 20 or							
<b>►</b> X	tax year begi	nning <u>12/18</u>	,20_ <u>09</u> _,	and ending $11/30$	), 20 _1	<u>0</u>			
2 If this to	ax year is for	less than 12 months	s, check reason:	Initial return	Final retu	rn 🔲 🤇	Change	ın accountii	ng period
3a If this a nonrefu	pplication is f indable credit	or Form 990-BL, 99 s. See instructions .	0-PF, 990-T, 472	0, or 6069, enter the t	entative tax, les	ss any	3a	\$	2,045.
		or Form 990-PF or 9 or year overpayme		refundable credits and credit .	d estimated tax	payments ·	3 b	\$	0.
deposit See ins	with FTD cou tructions	pon or, if required,	by using EFTPS		x Payment Sys	tem). ————	3c		2,045.
Caution. If you	ou are going t ructions	o make an electron	c fund withdrawa	al with this Form 8868,	see Form 8453	3-EO and Fo	rm 887	9-EO for <sup>-</sup>	
3AA For Pri	vacy Act and	Paperwork Reducti	on Act Notice, s	ee instructions.				Form <b>8868</b> (	(Rev. 4-2009)