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Form **990-PF**

Department of the Treasury Internal Revenue Service

SCANNED MAY 2 1 2912

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

2010

Fo	For calendar year 2010, or tax year beginning , and ending							
G	Che	ck all that apply	Initial return	Initial return of a for	mer public cha	rity	Final re	turn
			X Amended return	Address change	☐ Na	me c	hange	
Na	ame of	foundation		····	·	А	Employer identification nu	mber
SE	NTR	Y INSURANCE FOUND	DATION, INC.				39-1037	370
N	umber	and street (or P O box number	r if mail is not delivered to street ad	dress)	Room/suite	В	Telephone number (see pag	e 10 of the instructions)
		ORTH POINT DRIVE					(715) 346-	6000
Cı	ty or to	wn, state, and ZIP code				C If	exemption application is pe	nding, check here
_		NS POINT			54484-1283		Foreign organizations, che	
H		ck type of organization	(-)(-)			2	. Foreign organizations mee	eting the 85% test,
<u> </u>		ction 4947(a)(1) nonexe		Other taxable private	foundation	e If	check here and attach con private foundation status w	
ı	Fair	market value of all asse			Accrual		nder section 507(b)(1)(A), c	
	line	ear (from Part II, col (c) 16) ▶\$),	Decity)	····		the foundation is in a 60-mi	_
P:	art I		e and Expenses (The total of	I Task be on eash basi		u	nder section 507(b)(1)(B), c	
			and (d) may not necessarily equal	(a) Revenue and	(b) Net investm	ent	(c) Adjusted net	(d) Disbursements for charitable
			see page 11 of the instructions))	expenses per books	ıncome		ıncome	purposes
	1	Contributions rufts grants e	etc , received (attach schedule)	1,048,278				(cash basis only)
	2		on is not required to attach Sch. B	1,040,270				
	3		temporary cash investments	679,411	679	,411	679,411	
	4	Dividends and interest from	om securities			,	, <u> </u>	***************************************
<u>a</u>	5 8	Gross rents						
		Net rental income or (los	· · · · · · · · · · · · · · · · · · ·					
Revenue	6 6		ale of assets not on line 10	-1,402				
Š	_	Gross sales price for all asse						
æ	1 -	Capital gain net income (-					
	8	Net short-term capital ga	iin					,
	1	Income modifications Gross sales less returns and			^			
	1	Gross sales less returns and Less Cost of goods solo					1	
	1	Gross profit or (loss) (atta						
	11	Other income (attach sch	•					
	12	Total. Add lines 1 through		1,726,287	670	,411	670 411	
S	13	Compensation of officers	s, directors, trustees, etc	1,720,207		,411	679,411	
Se	14	Other employee salaries	and wages				-	·
)en	15	Pension plans, employee	e benefits					
Expenses	16 a	Legal fees (attach sched	4RECEIVED					
_	1	o Accounting fees (attach.:						
ŧ	°	Other professional fees ((attach schedule)	51,790			51,790	
ř	17	Interest 9	WAT + + ZUIL O		·			
ij	18 19	Taxes (attach schedule) (see	page 14 of the instructions) ! O	7,036			<u> </u>	
Ξ	20	Depreciation (attach school	eduley and depletion					
ĕ	21	Travel, conferences, and	meetings		<u>.</u>			
P	22	Printing and publications	_					
a	23	Other expenses (attach s		17,300	· · · · · · · · · · · · · · · · · · ·		17,300	
Operating and Administrative	24	Total operating and add	ministrative expenses.	,250			,500	
Ē		Add lines 13 through 23	-	76,126			69,090	
þe	25	Contributions, gifts, grant	ts paid	3,131,602				3,131,602
	1-0	Total expenses and disburs	ements. Add lines 24 and 25	3,207,728			69,090	3,131,602
	27	Subtract line 26 from line	· -	_				
		Excess of revenue over exp		-1,481,441				····
	1	Net investment income			679	<u>,411</u>		,
	°	Adjusted net income (if	negative, enter -0-)]			610.321	

Page 2

Pa	त्त II	Balance Sheets Attached schedules and amounts in the description column	Beginning of year	End o	of year	
		snould be for end-of-year amounts only (See instructions)	(a) Book Value	(b) Book Value	(c) Fair Market Value	
	1	Cash—non-interest-bearing	1,360			
	2	Savings and temporary cash investments	143,001	373,764	373,764	
	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 15 of the				
		instructions)				
	7	Other notes and loans receivable (attach schedule)				
S	'	Land allowands for doubtful and the	-	1		
Assets	8	Inventories for sale or use	-			
\S	9	Prepaid expenses and deferred charges				
~		A Investments—U.S. and state government obligations (attach schedule)	1,539,535	7,947,744	7,947,744	
		Investments—corporate stock (attach schedule)	1,000,000	1,541,144	1,341,144	
		Investments—corporate bonds (attach schedule)	11,709,465	4,118,557	4,118,557	
	11	Investments—land, buildings, and equipment basis	11,700,400	4,110,007	4,110,007	
	Ì	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)	13,393,361	12,440,065	12,440,065	
	17	Accounts payable and accrued expenses		290,445	,	
w	18	Grants payable	14,601	252,300		
Liabilities	19	Deferred revenue			,	
Ħ	20	Loans from officers, directors, trustees, and other disqualified persons				
<u> </u>	21	Mortgages and other notes payable (attach schedule)				
_	22	Other liabilities (describe ▶)				
	23	Total liabilities (add lines 17 through 22)	14,601	542,745		
		Foundations that follow SFAS 117, check here				
nces		and complete lines 24 through 26 and lines 30 and 31.				
2	24	Unrestricted				
aga	25	Temporarily restricted				
8	26	Permanently restricted				
Net Assets or Fund Bala	:	Foundations that do not follow SFAS 117, check here and complete lines 27 through 31.				
5	27	Capital stock, trust principal, or current funds	ļ			
S	28	Paid-in or capital surplus, or land, bldg, and equipment fund				
Se	29	Retained earnings, accumulated income, endowment, or other funds	13,378,760	11,783,130		
As	30	Total net assets or fund balances (see page 17 of the		, ,		
et		instructions)	13,378,760	11,783,130		
Z	31	Total liabilities and net assets/fund balances (see page 17				
		of the instructions)	13,393,361	12,325,875		
	rt III	Analysis of Changes in Net Assets or Fund Balances				
1		net assets or fund balances at beginning of year—Part II, column (a), line	30 (must agree with			
_		f-year figure reported on prior year's return)		1	13,378,760	
_		amount from Part I, line 27a		2	-1,481,441	
		nes 1, 2, and 3		4	11,897,319	
		eases not included in line 2 (itemize)	5			
0	ı otal	net assets or fund balances at end of year (line 4 minus line 5)—Part II, co	olumn (b), line 30	6	11,897,319	

• •	kind(s) of property sold (e.g., real est e, or common stock, 200 shs MLC Co			(b) How acquired P—Purchase D—Donation		Date acquired no , day, yr)	(d) Date sold (mo , day, yr)	
a 35,400 shares of K12 Inc. sto	ock			D		10/26/2010	11/2/2010	
<u>b</u>				- <u></u>				
<u>c </u>								
d	·							
<u>e</u>	·····							
(e) Gross sales price	(f) Depreciation allowed (or allowable)			other basis nse of sale		(h) Gain or (loss) (e) plus (f) minus (g)		
a 1,001,126				1,002,528			-1,402	
b								
d d			<u> </u>					
e		-						
	ng gain in column (h) and owned	d hy the	foundation	on 12/31/69		(I) Cores (Cal. (h) and minus	
Complete only for assets shown	(j) Adjusted basis	u by the				(i) Gains (Col (i col (k), but not le		
(i) F M V as of 12/31/69	as of 12/31/69			is of col (i) (j), if any		Losses (fror		
a		<u> </u>		0//			-1,402	
b					_			
C								
d								
е								
2 Capital gain net income or (rt I, line 7	2		-1,402	
3 Net short-term capital gain of					-		1,702	
	ine 8, column (c) (see pages							
instructions) If (loss), enter				}	3		-1,402	
Part V Qualification Und		educe	d Tax o	n Net Investme	ent Ir	ncome		
Vas the foundation liable for th	t qualify under section 4940	(e). Do	not com	plete this part				
	unt in each column for each	year; s	see page	18 of the instruc	tions	before making		
(a) Base period years	(b)	į		(c)		Distrit	(d) oution ratio	
Calendar year (or tax year beginning in	Adjusted qualifying distribution	ons	Net value o	of noncharitable-use a	ssets		rided by col (c))	
2009	2,539	9,999		13,702	,749		0 185364	
2008		5,444		14,684			0 093666	
2007		4,333		13,151		 	0.087014	
2006 2005		3,474 2,464		5,486			0 168316	
2005	93.	<u> 2,404)</u>			,739		1 269109	
2 Total of line 1, column (d)						2	1 803469	
3 Average distribution ratio fo	r the 5-vear base period—div	vide th	e total or	line 2 by 5 or b	, }		1 000400	
	ndation has been in existent				'	3	0 360694	
4 Enter the net value of nonch	naritable-use assets for 2010) from	Part X, Iır	ne 5	. [4	11,900,280	
5 Multiply line 4 by line 3 .					.	5	4,292,360	
6 Enter 1% of net investment	ıncome (1% of Part I, line 27	7b) .				6	<i>.</i> 6,794	
7 Add lines 5 and 6						7	4,299,154	
8 Enter qualifying distributions If line 8 is equal to or greate the Part VI instructions on p	er than line 7, check the box	ın Part	 VI, line 1	b, and complete	that p	8 part using a 1%	3,131,602 tax rate. See	

Forn	1990-PF (2010) SENTRY INSURANCE FOUNDATION, INC.		39-103	7370	Pa	ge 4	
Pa	rt VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948—see p	age '					
1 a Exempt operating foundations described in section 4940(d)(2), check here ▶ ☐ and enter "N/A" on line 1 ☐							
	Date of ruling or determination letter (attach copy of letter if necessary—see instructions)						
t	Domestic foundations that meet the section 4940(e) requirements in Part V, check	1		13	,588		
	here and enter 1% of Part I, line 27b					Ÿ	
(All other domestic foundations enter 2% of line 27b Exempt foreign organizations enter 4%						
2	of Part I, line 12, col (b)	_					
3	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-) Add lines 1 and 2	2	 	40	,588		
4							
_	5 Tax based on investment income. Subtract line 4 from line 3 If zero or less, enter -0-						
6	Credits/Payments			- 10	,588		
í	2010 estimated tax payments and 2009 overpayment credited to 2010 6a 12,760						
	Exempt foreign organizations—tax withheld at source 6b						
	Tax paid with application for extension of time to file (Form 8868)						
(Backup withholding erroneously withheld 6d						
7	Total credits and payments Add lines 6a through 6d Q.R. OVERPAYMENT (1,456)	7]	11	,304		
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		2	,284		
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid	10					
11	Enter the amount of line 10 to be Credited to 2011 estimated tax ► Refunded ►	11					
Pa	rt VII-A Statements Regarding Activities						
1 8	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it				Yes	No	
	participate or intervene in any political campaign?			1a		X	
t	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		Х	
	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						
	Did the foundation file Form 1120-POL for this year? I Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year			1c		Х	
•	(1) On the foundation (2) On foundation (3) Simposed during the year (4) On foundation (5) Simposed during the year (6) On foundation managers (8) Simposed during the year (9) On foundation managers (9) Simposed during the year (1) On the foundation (1) Simposed during the year (2) On foundation managers (3) Simposed during the year (4) Simposed during the year (5) Simposed during the year (8) Simposed during the year (9) Simposed during the year (1) Simposed during the year (2) On foundation (3) Simposed during the year (4) Simposed during the year (5) Simposed during the year (6) Simposed during the year (7) Simposed during the year (8) Simposed during the year (9) Simposed during the year (1) Simposed during the year (1) Simposed during the year (2) Simposed during the year (3) Simposed during the year (4) Simposed during the year (5) Simposed during the year (6) Simposed during the year (7) Simposed during the year (8) Simposed during the year (9) Simposed during the year (10) Simposed during the year (11) Simposed during the year (12) Simposed during the year (13) Simposed during the year (14) Simposed during the year (15) Simposed during the year (16) Simposed during the year (17) Simposed during the year (18) Simposed during the ye						
•	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed						
	on foundation managers \$						
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?			2		Х	
	If "Yes," attach a detailed description of the activities						
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles						
	of incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes			3		Х	
	Did the foundation have unrelated business gross income of \$1,000 or more during the year?			4a		Χ	
_	of "Yes," has it filed a tax return on Form 990-T for this year?			4b			
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?			5		Х	
c	If "Yes," attach the statement required by General Instruction T						
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	х		
7	Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col (c), a	nd D	art YV	7	x		
	Enter the states to which the foundation reports or with which it is registered (see page 19 of the	na r	21 L A V	-			
	instructions) ► WI						
t	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	Х		
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 2010 or the taxable year beginning in 2010 (see instructions for Part XIV on page 27)?					
	If "Yes," complete Part XIV			9		Х	
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing						
	their names and addresses			10		X	

Pan	VII-A Statements Regarding Activities (continued)			
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		Х
12	Did the foundation acquire a direct or indirect interest in any applicable insurance contract before August 17, 2008?	12		Х
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	х	
••	Website address			
14	The books are in care of ► SENTRY INSURANCE A MUTUAL COMPANY Telephone no ► 715 346-60	00		
	Located at ► 1800 NORTH POINT DRIVE STEVENS POINT WI ZIP+4 ► 54481			
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	_		
16	At any time during calendar year 2010, did the foundation have an interest in or a signature or other authority	1	Yes	No
	over a bank, securities, or other financial account in a foreign country?	16		X
	See page 20 of the instructions for exceptions and filing requirements for Form TD F 90-22 1 If "Yes," enter			
	the name of the foreign country	Ь		
Pa	rt VII-B Statements Regarding Activities for Which Form 4720 May Be Required	т		
4 -	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.	<u> </u>	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 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? X Yes No			
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? X 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 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.)			
b				
U	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 22 of the instructions)?	1b		x
	Organizations relying on a current notice regarding disaster assistance check here	···		- ``
С	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 2010?	1c		Х
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private			
_	operating foundation defined in section 4942(j)(3) or 4942(j)(5))			
а	At the end of tax year 2010, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning before 2010?			
	If "Yes," list the years \triangleright 20, 20, 20			
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)	1		
	to all years listed, answer "No" and attach statement—see page 22 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			
	▶ 20, 20, 20			
3a	Did the foundation hold more than a 2% direct or indirect interest in any business			
	enterprise at any time during the year?			
b	If "Yes," did it have excess business holdings in 2010 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 2010.)	3b	N/A	
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a	14//	X
ъ Та	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable	70		 ^
~	purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2010?	4b		×
		تب		<u></u>

Forn	990-PF (2010) SENTRY INSURANCE FOL	INDAT	TION, INC					39-10	37370	F	age 6
Pa	t VII-B Statements Regarding Activi	ties fo	or Which Forn	n 47	20 May Be Re	quired	continued)			
5a	During the year did the foundation pay or incur a	ny amo	ount to								
	(1) Carry on propaganda, or otherwise attempt	to influ	uence legislation ((secti	on 4945(e))?		Yes	X No			
	(2) Influence the outcome of any specific publi			955),	or to carry						
	on, directly or indirectly, any voter registrati	on driv	re?				Yes	X No			
	(3) Provide a grant to an individual for travel, s	tudy, o	r other sımılar pur	pose	s?		Yes	X No		1	
	(4) Provide a grant to an organization other that	n a ch	arıtable, etc , orga	anıza	tion described				}	1	1
	in section 509(a)(1), (2), or (3), or section 4	940(d)	(2)? (see page 22	of th	e instructions)		Yes	X No			İ
	(5) Provide for any purpose other than religiou educational purposes, or for the prevention		•		•		Yes	X No			
b	If any answer is "Yes" to 5a(1)-(5), did any of the	transa	actions fail to qual	lıfy ur	nder the exception	ns describ	ed in				
	Regulations section 53 4945 or in a current notic			-	=				5b	N/A	l
	Organizations relying on a current notice regardii	ng disa	ster assistance cl	heck	here .		•	•			
С	If the answer is "Yes" to question 5a(4), does the	found	ation claim exemp	otion	from the						
	tax because it maintained expenditure responsib	lity for	the grant?				Yes	☐ No			
	If "Yes," attach the statement required by Regula	tions s	ection 53 4945–5	(d)							•
6a	Did the foundation, during the year, receive any f	unds, d	directly or indirectl	ly, to	pay						
	premiums on a personal benefit contract?						Yes	X No			1
b	Did the foundation, during the year, pay premium	is, dire	ctly or indirectly, o	on a p	ersonal benefit o	ontract?			6b	ļ	X
	If "Yes" to 6b, file Form 8870						_				
	At any time during the tax year, was the foundati	•	•				Yes	X No	<u> </u>		ļ
	If "Yes," did the foundation receive any proceeds								7b		
Р	Information About Officer	s, Dir	ectors, Truste	ees,	Foundation	Manage	rs, Highly	Paid E	mploy	ees,	
_	and Contractors							41	4		
	List all officers, directors, trustees, foun		Title, and average	-	Compensation		ontributions to				
	(a) Name and address		hours per week evoted to position	(if	not paid, enter -0-)	employ	ee benefit plan red compensa	is į `	e) Expen other al		
Se	Attached Statement										
			_								
		.		-							
		┿.									
		.									
	Compensation of five highest-paid empl		(other than the	000	ingluded on liv	-0.1 00	2 22 23 4	of the inc	441		
_	If none, enter "NONE."	Oyees	(Outer than the	USE	included on in	ie i—sei	e page 23 (or the ma	structi	onsj.	
		-	(b) Title and access			(d)	Contributions	to			-
(a	Name and address of each employee paid more than \$5	0,000	(b) Title, and avera hours per week devoted to position	΄	(c) Compensation	n e	mployee benef ans and deferre	it (e) Expen other al		
NC	NE .			\neg			compensation				
				$\neg \dagger$	·						
				Ì		Ì					
_					·						
	al number of other employees paid over \$50	000			<u> </u>	_					

Form 990-PF (2010) SENTRY INSURANCE FOUNDATION, INC.	39-1037370 Page 7
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	<u> </u>
Part IX-A Summary of Direct Charitable Activities	
List the foundation's four largest direct chantable 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 NOT APPLICABLE	
2	
••••••	
3	
4	
Part IX-B Summary of Program-Related Investments (see page 24 of the instruction	ns)
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	

Total. Add lines 1 through 3

Form **990-PF** (2010)

Par		undati	ons,
	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	1	
а	Average monthly fair market value of securities	1 <u>a</u>	11,791,365
b	Average of monthly cash balances	1b	290,138
C	Fair market value of all other assets (see page 25 of the instructions)	1c	
d	Total (add lines 1a, b, and c)	1d	12,081,503
е	Reduction claimed for blockage or other factors reported on lines 1a and		
	1c (attach detailed explanation)		
2	Acquisition indebtedness applicable to line 1 assets	2	
3	Subtract line 2 from line 1d	3	12,081,503
4	Cash deemed held for charitable activities Enter 1½ % of line 3 (for greater amount, see page 25		
	of the instructions)	4	181,223
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4.	5	11,900,280
6	Minimum investment return. Enter 5% of line 5	6	595,014
Par	t XI Distributable Amount (see page 25 of the instructions) (Section 4942(j)(3) and (j)(5) private operations	erating	
	foundations and certain foreign organizations check here and do not complete this part)		
1	Minimum investment return from Part X, line 6	1	595,014
2a	Tax on investment income for 2010 from Part VI, line 5		
b	Income tax for 2010 (This does not include the tax from Part VI)	1	
С	Add lines 2a and 2b	2c	13,588
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	581,426
4	Recoveries of amounts treated as qualifying distributions	4	
5	Add lines 3 and 4	5	581,426
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	581,426
	Overlife in a Distribution of contract of the section of		
Par	Qualifying Distributions (see page 25 of the instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes		-
а	Expenses, contributions, gifts, etc —total from Part I, column (d), line 26	1a	3,131,602
b	Program-related investments—total from Part IX-B	1b	
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		
а		3a	
b	Cash distribution test (attach the required schedule)	3b	
4	Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4	4	3,131,602
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	
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	3,131,602
	Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the founda	ition	
	qualifies for the section 4940(e) reduction of tax in those years		

Part	Undistributed Incor	ne (see page 25 of t	ne instructions)			· · · · ·
4	Destributable and 15 0040 f	5	(a) Corpus	(b)	(c)	(d)
1	Distributable amount for 2010 fi	rom Part XI,	Corpus	Years prior to 2009	2009	2010
2		· -645- · · · · · · · · · · · · · · · · · · ·				581,426
	Undistributed income, if any, as	s of the end of 2010				
a	Enter amount for 2009 only	20 20				J
3	Total for prior years 20,					
	Excess distributions carryover,	1				1
a	From 2005	895,893	·			
D	From 2006	652,962				
C	From 2007	505,336				
d	From 2008	659,697				
e	From 2009	1,867,622				
f	Total of lines 3a through e		4,581,510			
4	Qualifying distributions for 2010					
		131,602			İ	
а	Applied to 2009, but not more the			·		
b	Applied to undistributed income	=				
	(Election required—see page 20					
С	Treated as distributions out of o	corpus (Election				
	required—see page 26 of the in					
	Applied to 2010 distributable an			. , , , , , , , , , , , , , , , , , , ,		581,426
е	Remaining amount distributed of	-	2,550,176			
5	Excess distributions carryover a					
	(If an amount appears in column					
	same amount must be shown in	n column (a))				
6	Enter the net total of each col	lumn as	,			
	indicated below:					
	Corpus Add lines 3f, 4c, and 4e		7,131,686			
b	Prior years' undistributed incom	e Subtract				
	line 4b from line 2b					
С	Enter the amount of prior years'	undistributed	_			
	income for which a notice of det	ficiency has				
	been issued, or on which the se	ection 4942(a)				
	tax has been previously assess	ed				
d	Subtract line 6c from line 6b Ta	axable				
	amount-see page 27 of the ins	structions				
е	Undistributed income for 2009	Subtract line			i	
	4a from line 2a Taxable amoun	nt—see page 27 of the				
	instructions					
f	Undistributed income for 2010	Subtract				<u> </u>
	lines 4d and 5 from line 1 This	amount must				
	be distributed in 2011					
7	Amounts treated as distributions	s out of				
	corpus to satisfy requirements in	mposed by				
	section 170(b)(1)(F) or 4942(g)(•				
	the instructions)	(, (3				
8	Excess distributions carryover fi	rom 2005	-			
	not applied on line 5 or line 7 (se					
	instructions)	, and a second	895,893			
9	Excess distributions carryove	er to 2011.	300,000			<u> </u>
	Subtract lines 7 and 8 from line		6,235,793			
10	Analysis of line 9		5,255,795			
	Excess from 2006	652,962				
b	Excess from 2007	505,336				
C	Excess from 2008	659,697				
d	Excess from 2009	1,867,622				
	Excess from 2010	2,550,176				
	27,0000 HOM 2010	<u> </u>	1			I

	n 990-PF (2010) SENTRY INSURANCE FOU				39-103	7370 Page 10
Pa	nt XIV Private Operating Foundations (s	ee page 27 of t	he instructions a	nd Part VII-A, qu	estion 9)	N/A
1 a	If the foundation has received a ruling or determination, and the ruling is effective for 2010, entit			•		
t	Check box to indicate whether the foundation is a	orivate operating for	undation described i	n section	4942(j)(3) or	4942(j)(5)
2 a	Enter the lesser of the adjusted net	Tax year		Prior 3 years		4.5 = 4.4
	income from Part I or the minimum investment return from Part X for each	(a) 2010	(b) 2009	(c) 2008	(d) 2007	(e) Total
	year listed					
t	85% of line 2a					
(Qualifying distributions from Part XII, line 4 for each year listed					
(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 "Assets" alternative test—enter					-
Ì	(1) Value of all assets					
	(2) Value of assets qualifying under section 4942(j)(3)(B)(i)					=
ŀ	"Endowment" alternative test—enter 2/3 of minimum investment return shown in Part X, line 6 for each year listed					<u>-</u>
("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	<u> </u>				
	(4) Gross investment income					
Pa	rt XV Supplementary Information (Cor assets at any time during the ye	•	_		,000 or more in	
1	Information Regarding Foundation Manag	ers:				
á	List any managers of the foundation who have con				the foundation	
	before the close of any tax year (but only if they ha	ive contributed mor	e than \$5,000) (See	e section 507(d)(2))		
	NE List any managers of the foundation who own 10%	or more of the etc.	ok of a pornovation (as an agually lassa a	antion of the	
	ownership of a partnership or other entity) of which		•		ortion of the	
2	Information Regarding Contribution, Gran	t Gift Loan Sci	holarshin etc. P	rograms.		<u> </u>
_	Check here If the foundation only makes unsolicited requests for funds. If the foundation maunder other conditions, complete items 2a, b, c, are	contributions to preakes gifts, grants, e	eselected charitable	organizations and de	•	tions
•	The name, address, and telephone number of the	person to whom ap	plications should be	addressed		
	NTRY INSURANCE FOUNDATION, INC 1800 The form in which applications should be submitted.					
. '	, The form in Willow approachers should be subfilled	a and information a	materials they Si	iodių moluus		
	TTER OF REQUEST STATING THE NATURE Any submission deadlines	OF THE ORGAN	IIZATION AND TH	HE AMOUNT OF C	ONTRIBUTION.	
NC	NE					
	Any restrictions or limitations on awards, such as l factors	oy geographical are	as, charitable fields,	, kinds of institutions	, or other	<u> </u>
NC	NF					

Form 990-PF (2010) SENTRY INSURANCE FOUNDATION, INC
Part XV Supplementary Information (continued)

3 Grants and Contributions Paid Durin	Grants and Contributions Paid During the Year or Approved			I for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager	Foundation status of	Purpose of grant or contribution	Amount				
Name and address (home or business)	or substantial contributor	recipient	Contabolion					
a Paid during the year SEE ATTACHED LISTING 1800 NORTH POINT DRIVE STEVENS POINT WI 54481	RELATED	YES	EDUCATION	3,131,602				
Total				0.404.000				
b Approved for future payment	- 		<u>▶</u> 3a	3,131,602				
Total		<u> </u>	<u> </u>					

Form 990-P	F (2010) SENTRY INSURANCE FOUNDATION I-A Analysis of Income-Producing Acti				39-103	37370 Page 12
	oss amounts unless otherwise indicated.	Unrelated busin	ness income	Excluded by section	(e)	
5 -		(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	Related or exempt function income (See page 28 of
1 Progra	am service revenue					the instructions)
a No	OT APPLICABLE					
þ						
C						
d			· <u> </u>			
е				ļ		
f			- · · · ·			
_	ees and contracts from government agencies					
2 Memb	pership dues and assessments					
	st on savings and temporary cash investments			<u> </u>		
4 Divide	ends and interest from securities			<u> </u>		
	ental income or (loss) from real estate					<u> </u>
	ebt-financed property				·	
	ot debt-financed property			<u> </u>		Ļ
	ental income or (loss) from personal property					ļ
	investment income					
	or (loss) from sales of assets other than inventory					
	come or (loss) from special events					ļ
	s profit or (loss) from sales of inventory			1		ļ <u> </u>
	revenue a			_		
p		-				
<u> </u>		-				
	·	-				
e	Apl Add - alives (b) (d) - and (c)	-				
	otal Add columns (b), (d), and (e)	<u></u>			42	<u> </u>
	. Add line 12, columns (b), (d), and (e) ssheet in line 13 instructions on page 29 to verify calc	culations)			13	
	I-B Relationship of Activities to the Ac		of Exampt I	Purposos		
Line No.					nortantly to	
▼	the accomplishment of the foundation's exempt page 29 of the instructions)					
	NOT APPLICABLE					
			·			
						
	 				·	
						
			 _			
						
						
	 					
			·			
						
						

Firm's name

Firm's address

Use Only

39-1037370 Information Regarding Transfers To and Transactions and Relationships With Noncharitable Part XVII **Exempt Organizations** Did the organization directly or indirectly engage in any of the following with any other organization described Yes No 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) (2) Other assets 1a(2) **b** Other transactions (1) Sales of assets to a noncharitable exempt organization . . . 1b(1) (2) Purchases of assets from a noncharitable exempt organization 1b(2) (3) Rental of facilities, equipment, or other assets . . . 1b(3) (4) Reimbursement arrangements 1b(4) (5) Loans or loan guarantees 1b(5) (6) Performance of services or membership or fundraising solicitations 1b(6) c Sharing of facilities, equipment, mailing lists, other assets, or paid employees 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 (c) Name of nonchantable exempt organization (d) Description of transfers, transactions, and sharing arrangements 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 X No b If "Yes," complete the following schedule. (a) Name of organization (b) Type of organization (c) Description of relationship 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 Sign 5/2/2012 TREASURER Date Title Print/Type preparer's name Preparer's signature Date PTIN Paid Check | If **Preparer** self-employed

Firm's EIN

Phone no

Schedule B

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

Department of the Treasury Internal Revenue Service

Name of the organization

Schedule of Contributors

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

OMB No 1545-0047

2010

Employer identification number

OSMEDIA MOLEDAMOS SOL	N.D.(TIO), N.O.			
SENTRY INSURANCE FOL Organization type (check or	39-1037370			
- gamzanon s, po (sinosin a				
Filers of:	Section:			
Form 990 or 990-EZ	501(c)() (enter number) organization			
	4947(a)(1) nonexempt charitable trust not treat	ted as a private foundation		
	527 political organization			
Form 990-PF X 501(c)(3) exempt private foundation				
	4947(a)(1) nonexempt charitable trust treated a	as a private foundation		
501(c)(3) taxable private foundation				
	s covered by the General Rule or a Special Rule . 1(7), (8), or (10) organization can check boxes for both	the General Rule and a Special Rule See		
General Rule				
	i filing Form 990, 990-EZ, or 990-PF that received, duri one contributor Complete Parts I and II	ng the year, \$5,000 or more (in money or		
Special Rules				
sections 509(a)(1)	e)(3) organization filing Form 990 or 990-EZ that met the and 170(b)(1)(A)(vi), and received from any one contrib 2% of the amount on (i) Form 990, Part VIII, line 1h or	outor, during the year, a contribution of the greater		
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.				
the year, contributed aggregate to more year for an exclusive	c)(7), (8), or (10) organization filing Form 990 or 990-EZ ons for use <i>exclusively</i> for religious, charitable, etc., put than \$1,000. If this box is checked, enter here the total rely religious, charitable, etc., purpose. Do not complet nization because it received nonexclusively religious, c	urposes, but these contributions did not local contributions that were received during the te any of the parts unless the General Rule		
	nat is not covered by the General Rule and/or the Spec nust answer "No" on Part IV, line 2 of its Form 990, or			

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)

Schedule B (1	Form 990, 990-EZ, or 990-PF) (2010)		Page 1 of 1 of Part I
	ganization		Employer identification number
<u>SENTRY I</u>	NSURANCE FOUNDATION, INC.		39-1037370
Part I	Contributors (see instructions)		
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
1	SENTRY INSURANCE A MUTUAL COMPANY 1800 NORTH POINT DRIVE STEVENS POINT WI 54481 Foreign State or Province Foreign Country	\$ 1,048,278	Person Payroll Noncash (Complete Part II if there is a noncash contribution)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
2	Foreign State or Province Foreign Country	\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
3	Foreign State or Province Foreign Country	\$	Person Payroil Noncash (Complete Part II if there is a noncash contribution)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
.4	Foreign State or Province Foreign Country	\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
5	Foreign State or Province Foreign Country	\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
6	Foreign State or Province Foreign Country	\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution)

Schedule B	Form 990	990-EZ	or 990-PF	(2010
Scriedale D	(i Oilli 330,	330-LZ,	01 330-11	(2010

Page 1 of 1 of Part II

Name of organization
SENTRY INSURANCE FOUNDATION, INC.

Employer identification number 39-1037370

Part II Noncash Property (see instructions)

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
1	ADMINISTRATIVE SERVICES		
		\$ 45,750	VARIOUS
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
1	35,400 SHARES OF K12 INC STOCK		
		\$ 1,002,528	10/26/2010
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	

Schedule B (F	form 990, 990-EZ, or 990-PF) (2010)			Page 1 of 1 of Part I	
Name of org		_		Employer identification number	
	NSURANCE FOUNDATION, INC.			39-1037370	
Part III	Exclusively religious, charitable, etc., i aggregating more than \$1,000 for the year For organizations completing Part III, ente contributions of \$1,000 or less for the year	ear. Complete r the total of e	columns (a) through (exclusively religious, cl	e) and the following line entry naritable, etc.,	
(a) No.					
from Part i	(b) Purpose of gift	(c)) Use of gift	(d) Description of how gift is held	
		(e) T	ransfer of gift		
	Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee				
			••••••		
(a) No.	For Prov Country		<u> </u>		
from Part I	(b) Purpose of gift	(c)) Use of gift	(d) Description of how gift is held	
		(e) T	ransfer of gift		
			•		
	Transferee's name, address, and a	ZIP + 4	Relations	hip of transferor to transferee	
	For Prov Country				
(a) No.			<u> </u>	T	
from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held	
	(e) Transfer of gift				
	Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee				
	For Prov Country				
(a) No.		_		T	
from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held	
<u></u>					
	(e) Transfer of gift				
	Transferee's name, address, and 2	7IP + 4	Palations	thin of transferor to transferoe	
	Transieree 5 maine, address, and 4	<u> </u>	Relations	hip of transferor to transferee	
	For Prov Country				

Part I, line 1(a)				
<u>Date</u> <u>Contributo</u>	<u>or</u>	Contribution		
Various Sentry Ins	Sentry Insurance a Mutual Company		1,048,278	
Total	, ,	<u>\$</u>	1,048,278	
Part I, line 16c				
<u>Expense</u>	Expenses per books	Adjusted	net income	
Services and support	\$ 51,790	\$	51,790	
Total	\$ 51,790 \$ 51,790	\$	51,790	
Part I, line 18				
<u>Expense</u>	Expenses per books	Adjusted	net income	
Federal excise tax			•	
Total	\$ 7,036 \$ 7,036	<u>\$</u>	-	
				
Part I, line 23				
<u>Expense</u>	Expenses per books	Adjusted	net income	
Miscellaneous		\$	17,300	
Total	\$ 17,300 \$ 17,300	\$	17,300	
Part VIII, line 1				
<u>Name</u>	<u>Title</u>	Comp	ensation	
James J Weishan	Chairman and President	\$	•	
Peter G McPartland	Vice Pres , Director		-	
William M O'Reilly	Secretary, Director		-	
William J Lohr	Treasurer, Director		-	
Dale R Schuh	Director		-	
Total		\$	-	