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Form **990-PF**

Return of Private Foundation

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

OMB No 1545-0052

	reacted as a Private Foundation Note. The foundation may be able to use a copy of this return to satisfy state reporting requirements.								ZU IU
	ar year 2010, or tax					, and e			<u> </u>
-	all that apply.	n eturn		Initial return of a fo	ormer public o		Final return		
Name of fo	oundation		<u> </u>			-		A Employer identification	number
	EMIL EWA					•	1	39-1687505	
Number and	PO BOX 1		livered to street	address)			Room/suite	B Telephone number 262-567-55	55
City or tow	vn, state, and ZIP coo		F2066	0.1	477			C If exemption application is pr	
H Check ty	OCONOMOW ype of organization:		53066		rivate foundation	· · · · · · · · · · · · · · · · · · ·		D 1. Foreign organizations 2 Foreign organizations me check here and attach co.	
	tion 4947(a)(1) none:				axable private founda	ition		1	
	ket value of all assets		J Accounti			Accr	rual	E If private foundation stat under section 507(b)(1)	(A), check here
	art II, col (c), line 1			her (sp				F If the foundation is in a 6	
▶ \$	1,9		(Part I, colu		must be on cash b			under section 507(b)(1)	
	(The total of amounts in necessarily equal the am	columns (b), (c), and nounts in column (a))) Revenue and benses per books		ivestment ome	(c) Adjusted net income	(d) Disbursements for charitable purposes (cash basis only)
1	Contributions, gifts, g	rants, etc., recer Idation is not required to			230,000.	<u> </u>		N/A	· · · · · · · · · · · · · · · · · · ·
_ Ir	nterest on savings and te		allacii ocii o		17.		17.		STATEMENT 1
	Dividends and interes	t from securities			37,951.	3	7,951.		STATEMENT 2
5a G	Gross rents								., //
b∧	vet rental income or (loss)						/	
ლ 6a №	Net gain or (loss) from sale Gross sales price for all			OE.	7801.			· · · · · · · · · · · · · · · · · · ·	, , , , , , ,
5 Da	issets on line 6a	84	749RE	<u>UE</u>	17-5-01		,,	, 3	, ,,,,
2 7 C	Capital gain net income (fi Net short-term capital	, ,					0.	,	
	ncome modifications	•	199 MA	Y. 1	2 2011 23				
Jan G	Gross sales less returns and allowances		(2)			***			
bu	ess Cost of goods sold		0	3DE	EN, UI	14	·. ·	, · · · · · · · · · · · · · · · · · · ·	
c G	Gross profit or (loss)					* *			
1	Other income				1,527.		<u>1,527.</u>		STATEMENT 3
	Total. Add lines 1 thre				265,715. 0.	3	9,495. 0.		
4	Compensation of officers, Other employee salari		, etc			-	<u> </u>		0.
15 P	Pension plans, emplo	3							
8 16a L	egal fees	•							
b A	Accounting fees								
ĭ c c	Other professional fee	es ST	MT 4		7,592.		<u>7,592.</u>		<u>0.</u>
ا 17 الآ 1 18 عن	nterest 「axes			<u> </u>					
انتدري	axes Depreciation and dept	letion							· · · · · · · · · · · · · · · · · · ·
20 0	Occupancy								
	ravel, conferences, a	ınd meetings							
	Printing and publication				-				,
E 23 0	Other expenses		MT 5		160,652.		232.		0.
≥ te 24 T	otal operating and a				160 044		T 004		
	expenses. Add lines Contributions, gifts, g	=			168,244. 81,200.		<u>7,824.</u>		0.
26 T	Continuations, gitts, g Fotal expenses and d	•			01,200.	R & 3	į.	· ·	81,200.
.	Add lines 24 and 25				249,444.		7,824.		81,200.
27 S	Subtract line 26 from	line 12:							3 / 2 /
a E	xcess of revenue over ex	penses and disbur	sements		16,271.	· ,	-		<u> </u>
1	let investment incon			-		3	1,671.		<u> </u>
000004	Adjusted net income			<u> </u>		11		N/A	Form 990-PF (2010)

_		90-PF (2010) EMIL EWALD FAMILY FOUND	ATION, INC.	39-	1687505 Page 2
	art	Balance Sheets Atlached schedules and amounts in the description column should be for end-of-year amounts only	Beginning of year	End o	f year
뜨	art	column should be for end-of-year amounts only	(a) Book Value	(b) Book Value	(c) Fair Market Value
	1	Cash - non-interest-bearing	22,701.	22,722.	22,722.
	2	Savings and temporary cash investments	65,045.	27,369.	
	3	Accounts receivable ►	,		1 1 11
	l	Less: allowance for doubtful accounts ▶	,		1 + -m²+
	4	Pledges receivable ►	, .		
		Less: allowance for doubtful accounts ▶			, , ,
	5	Grants receivable			
	6	Receivables due from officers, directors, trustees, and other			
	•	disqualified persons			
	7	Other notes and loans receivable			
	'	Less: allowance for doubtful accounts			
es.	R	Inventories for sale or use			
Assets	١	Prepaid expenses and deferred charges			
As	10a	Investments - U.S. and state government obligations	· ·		
	1	Investments - corporate stock STMT 6	1,242,169.	1 311 249	1,832,033.
	1	Investments - corporate bonds	1,242,103.	<u> </u>	1,032,033.
	1 .	Investments - land, buildings, and equipment basis			#F \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \
	''	Less accumulated depreciation	•	*	
	12	Investments - mortgage loans			
	13	Investments - other	_		
	1	Land, buildings, and equipment: basis			<u> </u>
	''	Less accumulated depreciation			
	15	Other assets (describe STATEMENT 7)	119,874.	104,720.	104,720.
	.~	<u> </u>	115,074.	104,720.	104,120.
	16	Total assets (to be completed by all filers)	1,449,789.	1,466,060.	1,986,844.
	17	Accounts payable and accrued expenses		272007000	2,300,0110
	18	Grants payable			
S	19	Deferred revenue			
Liabilities	20	Loans from officers, directors, trustees, and other disqualified persons			5 6 6 6 C
abil	21	Mortgages and other notes payable			
J	22	Other liabilities (describe)			
				•	• • • •
_	23	Total liabilities (add lines 17 through 22)	0.	0.	į
		Foundations that follow SFAS 117, check here			
		and complete lines 24 through 26 and lines 30 and 31.			, , ,
Çe	24	Unrestricted			, ,
lan	25	Temporarily restricted			· * ; ·
Ba	26	Permanently restricted			*
S I	İ	Foundations that do not follow SFAS 117, check here			4 23° - 2 " " " " " " " " " " " " " " " " " "
Ē		and complete lines 27 through 31.			, ,
tso	27	Capital stock, trust principal, or current funds	0.	0.	
sse	28	Paid-in or capital surplus, or land, bldg., and equipment fund	2,719,540.	2,949,540.	*
Net Assets or Fund Balances	29	Retained earnings, accumulated income, endowment, or other funds	-1,269,751.	-1,483,480.	
Se	30	Total net assets or fund balances	1,449,789.	1,466,060.	,
_	31	Total liabilities and net assets/fund balances	1,449,789.	1,466,060.	
P	art	Analysis of Changes in Net Assets or Fund Ba	alances		
_			 		
		net assets or fund balances at beginning of year - Part II, column (a), line 3	30		
		st agree with end-of-year figure reported on prior year's return)		_1_	1,449,789.
		r amount from Part I, line 27a		2	16,271.
		r increases not included in line 2 (itemize)		3	0.
		lines 1, 2, and 3		4	1,466,060.
		eases not included in line 2 (itemize)			0.
<u>b</u>	ıota	net assets or fund balances at end of year (line 4 minus line 5) - Part II, col	uma (b), line 30	[6]	1,466,060.
					Form 990-PF (2010)

	and Losses for Tax ibe the kind(s) of property		t Income	(b) Ho	w acquired	(c) Date	acquired	(d) Date sold		
	rehouse; or common stock			1 2-1	Purchase Donation	(mo., c	day, yr.)	(mo., day, yr.)		
1a PUBLICLY TRADEI	SECURITIES				P	VARI	OUS	VARIOUS		
<u>b</u>				 						
d										
e								 		
(e) Gross sales price	(f) Depreciation allow (or allowable)		st or other basis expense of sale				(h) Gain or (loss) (e) plus (f) minus (g)			
a 84,749.			88,52	9.				-3,780.		
<u>b</u>						-				
c d		· · · · · · · · · · · · · · · · · · ·								
e				-	· ·					
Complete only for assets showing	g gain in column (h) and o	wned by the foundation	n on 12/31/69			(I) Gains (0	Col. (h) gain	minus		
(i) F.M.V. as of 12/31/69	(j) Adjusted basis as of 12/31/69		ccess of col. (i)		C	ol. (k), but Losses	not less tha (from col. (n -0-) or (h))		
	as 01 12/3 1/09	Over	col. (j), if any					·		
b				+			-	-3,780.		
c	·						-			
d										
e										
2 Capital gain net income or (net cap	$ \begin{cases} \text{If gain, a} \\ \text{If (loss)}, \end{cases} $	also enter in Part I, line , enter -0- in Part I, line	7 7	}	2			-3,780.		
3 Net short-term capital gain or (loss	•			Ĺ						
If gain, also enter in Part I, line 8, o		(1)		}						
If (loss), enter -0- in Part I, line 8 Part V Qualification Ui	nder Section 4940	(a) for Reduced	l Tay on Not	Inve	stment In	come	N/A			
(For optional use by domestic private		• •				Come				
		Section 4540(a) tax or	i ilet mivestiliellt il	1601116.)						
If section 4940(d)(2) applies, leave th	ıs part blank.									
Was the foundation liable for the section				rod?				Yes X No		
If 'Yes," the foundation does not qualing 1 Enter the appropriate amount in e				00						
	ach comminior each year,	(b)	thaking any entri	(c)				(d)		
(a) Base period years Calendar year (or tax year beginnin	ig in) Adjusted quali	fying distributions	Net value of no		able-use asset	s	(d) Distribution ratio (col. (b) divided by col. (c))			
2009		69,150.		1,	490,28			.046400		
2008		239,795.			329,77			.180328		
2007		237,830.			919,45			.123905		
2006 2005		232,710. 257,721.			854,50			.125484		
2005		451,141.	L	<u> </u>	<u>597,30</u>	9.		.161347		
2 Total of line 1, column (d)						2		.637464		
3 Average distribution ratio for the 5	year base period - divide t	the total on line 2 by 5,	or by the number	of year	S	- 				
the foundation has been in existen	ice if less than 5 years					3		.127493		
. .										
4 Enter the net value of noncharitable	le-use assets for 2010 from	n Part X, line 5				4		1,759,146.		
5 Multiply line 4 by line 3						5	1	224,279.		
· manupy mo v by mo o						-	-	224,210.		
6 Enter 1% of net investment income	e (1% of Part I, line 27b)					6		317.		
7 Add lines 5 and 6						7	<u> </u>	<u>224,596.</u>		
8 Enter qualifying distributions from	Part XII, line 4					8		81,200.		
If line 8 is equal to or greater than	line 7, check the box in Pa	rt VI, line 1b, and comp	olete that part usin	g a 1%	tax rate.					
See the Part VI instructions.										

		(2010) EMIL EWALD FAMILY FOUNDATION,	IN	<u>c.</u>		_	39-	1687	<u> 505</u>		Page 4
Parl	t VI	Excise Tax Based on Investment Income (Section 494	Ю(а),	49	940(b), 4940(e), or 4	948	- see ir	ıstru	ctio	ns)
1a E	xempt	t operating foundations described in section 4940(d)(2), check here 🕨 🔲 and e	enter "N	√A"	on line 1.	ì			.,	•	
D	ate of i	ruling or determination letter: (attach copy of letter if ne	cessar	y-se	e instructions)			1	٠.		·
b D)omest	tic foundations that meet the section 4940(e) requirements in Part V, check here	▶] an	nd enter 1%	}	1			_ 6	<u>33.</u>
0	f Part I	l, line 27b						,	المراجع والمراجع	٠. ٠	٠, ٠
c A	All other	er domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4%	% of Pa	art I,	line 12, col. (b).	J				^.	
2 T	ax und	der section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. $\sf O$)thers e	enter	r -0-)		2				0.
3 A	\dd line	es 1 and 2					3			6	33.
		e A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. (Others (ente	er -0-)		4				0.
5 T	ax bas	sed on investment income. Subtract line 4 from line 3. If zero or less, enter -0-					5			6	<u>33.</u>
6 C	credits/	/Payments:							,		
a 2	010 es	stimated tax payments and 2009 overpayment credited to 2010	6a		1,	<u>481.</u>		'	• - '		
		t foreign organizations - tax withheld at source	6b		·			ĺ			
c T	ax paid	d with application for extension of time to file (Form 8868)	6c	\perp				,			•
		withholding erroneously withheld	6d								
		redits and payments. Add lines 6a through 6d					7	<u> </u>	:	1, 4	<u>81.</u>
		ny penalty f or underpayment of estimated tax. Check here if Form 2220 is atta	ached				8	<u> </u>			
		e. If the total of lines 5 and 8 is more than line 7, enter amount owed					9				
		yment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid			1		10			8	48.
		ne amount of line 10 to be: Credited to 2011 estimated tax			848. Refun	ded 🚩	11	L			0.
		A Statements Regarding Activities				-			- · · ·	V	NI.
		the tax year, did the foundation attempt to influence any national, state, or local legis	slation	or d	lid it participate or	ntervene	ın	}		Yes	
		itical campaign?	/					-	1a		X
		pend more than \$100 during the year (either directly or indirectly) for political purpo	•						1b		X
		answer is "Yes" to 1a or 1b, attach a detailed description of the activities and	а сорі	ies c	or any matenais _i	oublisne	a or	ļ	3.	* ,	
		uted by the foundation in connection with the activities foundation file Form 1120-POL for this year?						ŀ	*	** 3*	· .
		ne amount (if any) of tax on political expenditures (section 4955) imposed during the	o voor					ŀ	1c		<u>X</u>
		the foundation. \blacktriangleright \$ 0 . (2) On foundation managers				0.]		\$	4.
		ne reimbursement (if any) paid by the foundation during the year for political expend		_	anosed on foundat				٠,	, , 49	
		ers. > \$ 0.	intare ta	17 111	iposca on loundar	1011				100	,
		e foundation engaged in any activities that have not previously been reported to the l	RS?						2	. "	X
		," attach a detailed description of the activities						Ì		, Y.	***
		foundation made any changes, not previously reported to the IRS, in its governing	ınstrun	nent	t, articles of incorp	oration, c	or		53	.``	, î,
		or other similar instruments? If "Yes," attach a conformed copy of the chang			,				3		X
		foundation have unrelated business gross income of \$1,000 or more during the year						Ī	4a		X
b If	Yes,"	has it filed a tax return on Form 990-T for this year?					N	/A [4b		
5 V	Vas the	ere a liquidation, termination, dissolution, or substantial contraction during the year?	7						5		X
If	f "Yes,	," attach the statement required by General Instruction T							٠,٠,٠	, L	
6 A	re the i	requirements of section 508(e) (relating to sections 4941 through 4945) satisfied e	ither:							, 1	
•	By lan	nguage in the governing instrument, or						İ		21 X1	۰,,
•	By sta	ate legislation that effectively amends the governing instrument so that no mandator	ry direc	ction	is that conflict with	the state	law		٠, ا	f _{of} (
	remai	in in the governing instrument?							6	Х	
7 D	lid the f	foundation have at least \$5,000 in assets at any time during the year?						į	7	Х	
If	"Yes,	," complete Part II, col (c), and Part XV]			
		ne states to which the foundation reports or with which it is registered (see instruction	ons) 🕨	- _				أ			·,
_	WI								.		
b If	the an	nswer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the A	Attorney	y Ge	neral (or designate	:)			- / T	·, .	٠.
		state as required by General Instruction G? If "No," attach explanation						ļ	8b_	X	
		oundation claiming status as a private operating foundation within the meaning of se) for cale	ndar		1	1.5	5,2
		110 or the taxable year beginning in 2010 (see instructions for Part XIV)? If "Yes," of						ļ	9		_X_
10 D	id any	persons become substantial contributors during the tax year? if "Yes," attach a schedu	ule listin	g the	er names and address	es			10		<u>X</u>

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Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors (continued)	'	
3 Five highest-paid independent contractors for professional services. If none, enter "NONE."		
(a) Name and address of each person paid more than \$50,000 (b) Type of service	ce (c) Com	pensation
NONE		
The Loumber of others recovering over \$50,000 for professional converse	—	
Total number of others receiving over \$50,000 for professional services 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	
37/3		
1 <u>N/A</u>		
2		
3		
		
	=	
Part IX-B Summary of Program-Related Investments		
Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2.	Amount	
N/A		
		
All other program-related investments. See instructions.	-	
3		
F. A. I. Add Land J. Abras ab O	_	
Total. Add lines 1 through 3	Form 990-P	0. E (2010)
	FOIGH 33 U-F	• (ZUIU)

P	art X. Minimum Investment Return (All domestic foundations must complete this part. Foreign foundations	ndation	s, see instructions)
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes:		
а	Average monthly fair market value of securities	1a	1,610,661.
b	Average of monthly cash balances	1b	1,610,661. 62,977.
c	Fair market value of all other assets	1c	112,297.
d	Total (add lines 1a, b, and c)	1d	1,785,935.
е	Reduction claimed for blockage or other factors reported on lines 1a and		
	1c (attach detailed explanation) 1e 0.	,	
2	Acquisition indebtedness applicable to line 1 assets	2	0.
3	Subtract line 2 from line 1d	3	1,785,935.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions)	4	26,789.
5	Net value of noncharitable-use assets Subtract line 4 from line 3. Enter here and on Part V, line 4	5	1,759,146.
6	Minimum investment return Enter 5% of line 5	6	87,957.
P	art XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations are foreign organizations check here and do not complete this part.)	nd certai	
1	Minimum investment return from Part X, line 6	1	87,957.
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	
C	Add lines 2a and 2b	2c	633.
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	87,324.
4	Recoveries of amounts treated as qualifying distributions	4	0.
5	Add lines 3 and 4	5	87,324.
6	Deduction from distributable amount (see instructions)	6	0.
7_	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1	7	87,324.
Ρ	art XII. Qualifying Distributions (see 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	81,200.
þ	Program-related investments - total from Part IX-B	1b	0.
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes	2	
3	Amounts set aside for specific charitable projects that satisfy the:	14	
а	Suitability test (prior IRS approval required)	3a	
þ	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	81,200.
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	5	0.
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	81,200.

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4940(e) reduction of tax in those years.

Part XIII Undistributed Income (see instructions)

				
	(a) Corpus	(b) Years prior to 2009	(c) 2009	(d) 2010
1 Distributable amount for 2010 from Part XI,	Сограб	, days prior to 2000	2003	2010
line 7	, ,		,	87,324.
2 Undistributed income, if any, as of the end of 2010		-		
a Enter amount for 2009 only	×		0.	,
b Total for prior years:				
	,	0.		~
3 Excess distributions carryover, if any, to 2010:	i	,		·
a From 2005 178,974.	,			
b From 2006 140 , 686 .				,
c From 2007 142,729.				
d From 2008 175, 426.				•
e From 2009	·	•		•
f Total of lines 3a through e	637,815.			,
4 Qualifying distributions for 2010 from				*,*
Part XII, line 4: \triangleright \$ 81,200.	, •		_	
a Applied to 2009, but not more than line 2a			0.	, 1 , 1
b Applied to undistributed income of prior	ę ·	•		
years (Election required - see instructions)	-	0.		, ,
c Treated as distributions out of corpus	•			. * * *
(Election required - see instructions)	0.			24 222
d Applied to 2010 distributable amount		*		81,200.
e Remaining amount distributed out of corpus	0.	,	· · · · · · · · · · · · · · · · · · ·	6 124
5 Excess distributions carryover applied to 2010 (If an amount appears in column (d), the same amount	6,124.			6,124.
must be shown in column (a))	ų.	`.		, , ,
6 Enter the net total of each column as indicated below:			•	. ,
Corpus Add lines 3f, 4c, and 4e Subtract line 5	631,691.	٤.,	٠,	
b Prior years' undistributed income. Subtract	031,031.		· · · · · · · · · · · · · · · · · · ·	* ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' '
line 4b from line 2b	,47° "> "	0.		· · · · · · · · · · · · · · · · · · ·
c Enter the amount of prior years'				• ,
undistributed income for which a notice of	1			4
deficiency has been issued, or on which the section 4942(a) tax has been previously				, ,
assessed	, , ,	0.		
d Subtract line 6c from line 6b. Taxable	, , , ,			, ,
amount - see instructions		0.	/_	, , ,
e Undistributed income for 2009. Subtract line	*, /, 5	, ,		,,
4a from line 2a. Taxable amount - see instr.			0.	
f Undistributed income for 2010. Subtract			,	
lines 4d and 5 from line 1. This amount must				
be distributed in 2011		-	· · · · · · · · · · · · · · · · · · ·	0.
7 Amounts treated as distributions out of				·
corpus to satisfy requirements imposed by				,
section 170(b)(1)(F) or 4942(g)(3)	0.			·
8 Excess distributions carryover from 2005	150 050			,
not applied on line 5 or line 7	172,850.			· · · · · · · · · · · · · · · · · · ·
9 Excess distributions carryover to 2011.	450 041			
Subtract lines 7 and 8 from line 6a	458,841.	, , , , , , , , , , , , , , , , , , , ,	<u> </u>	~ <u>', -</u>
10 Analysis of line 9:		,		
a Excess from 2006 140,686. b Excess from 2007 142,729.	**	-	-	1
b Excess from 2007 c Excess from 2008 142,729.	· · · · · · · · · · · · · · · · · · ·		•	ı
d Excess from 2009	-	ĺ		,
e Excess from 2010	,			,
C LA0033 IIVIII 20 10	L			Form 990-PF (2010)

023581 12-07-10

Form 990-PF (2010) EMIL EW	ALD FAMILY	FOUNDATION,	INC.		87505 Page 10
Part XIV Private Operating F			-A, question 9)	N/A	
1 a If the foundation has received a ruling of		· · · · · · · · · · · · · · · · · · ·	į		
foundation, and the ruling is effective fo		•	▶ ∟		
b Check box to indicate whether the found		ng foundation described i		4942(j)(3) or 4	942(j)(5)
2 a Enter the lesser of the adjusted net	Tax year		Prior 3 years		
income from Part I or the minimum	(a) 2010	(b) 2009	(c) 2008	(d) 2007	(e) Total
investment return from Part X for					
each year listed					
b 85% of line 2a					
c Qualifying distributions from Part XII,					
line 4 for each year listed					
d Amounts included in line 2c not					
used directly for active conduct of					
exempt activities					
e Qualifying distributions made directly					
for active conduct of exempt activities.					
Subtract line 2d from line 2c					
3 Complete 3a, b, or c for the					
alternative test relied upon: a "Assets" alternative test - enter:					
(1) Value of all assets					
• •					
(2) Value of assets qualifying under section 4942(1)(3)(B)(1)	-	ĺ			
b "Endowment" alternative test - enter		-			
2/3 of minimum investment return					
shown in Part X, line 6 for each year listed					
c "Support" alternative test - enter:					
(1) Total support other than gross					
investment income (interest,					
dividends, rents, payments on					
securities loans (section					
512(a)(5)), or royalties) (2) Support from general public					
and 5 or more exempt					
organizations as provided in					•
section 4942(j)(3)(B)(iii)					-
(3) Largest amount of support from					
an exempt organization					
(4) Gross investment income Part XV Supplementary Info	rmation (Comple	to this part only i	if the foundation	had \$5 000 ar m	oro in cocoto
at any time during t	the vear-see the i	instructions)	ii the foundation	i nau \$5,000 or m	ore in assets
	- -			· · · · · · · · · · · · · · · · · · ·	
1 Information Regarding Foundation	_	than 20/ of the total costs	ributions reserved by the	foundation before the ele	
a List any managers of the foundation wh year (but only if they have contributed in	nore than \$5 000). (See s	trian 2% of the total contr ection 507(d)(2))	noutions received by the	ioungation before the cic	ise of any tax
	10.0 man 40,000): (000 b	(a)(L).)			
EMIL EWALD	400/ 445				
b List any managers of the foundation wh other entity) of which the foundation ha	s a 10% or more of the	ie stock of a corporation (st.	or an equally large portion	on of the ownership of a p	partnership or
	ou to to or grouter interest				
NONE		0.1.1.1.			<u></u>
2 Information Regarding Contribut					
Check here Lifthe foundation of the foundation makes gifts, grants, etc.	INITY Makes contributions to	to preselected charitable (organizations and does r	not accept unsolicited requ	uests for funds. If
				ompiete items za, b, c, an	<u> </u>
a The name, address, and telephone num	per of the person to whor	n applications should be	audressed:		
CEE CMAMPACINM O					
SEE STATEMENT 8		 			
b The form in which applications should t	e submitted and informat	tion and materials they sh	iould include;		
c Any submission deadlines:					
d Any restrictions or limitations on awards	s, such as by geographics	al areas, charitable fields	kinds of institutions or o	other factors	
,	,		0		
				· · · · · · · · · · · · · · · · · · ·	- 000 75
023601 12-07-10					Form 990-PF (2010)

3 Grants and Contributions Paid During the	Year or Approved for Future	Payment		
Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of	Purpose of grant or contribution	Amount
	or substantial contributor	recipient		
a Paid during the year SEE STATEMENT	NONE	PUBLIC CHARITY	SUPPORT	81,200.
				01 200
Total b Approved for future payment		Т	<u>> 3a</u>	81,200.
a Approved for luture payment				
NONE				
Total 023611 12-07-10		<u> </u>	▶ 3b	0 • orm 990-PF (2010)

Analysis of Income-Producing Activities Part XVI-A

Enter gross amounts unless otherwise indicated.	Unrelated	business income		ed by section 512, 513, or 514	(e)
	(a) Business	(b) Amount	(C) Exclu- sion	(d) Amount	Related or exempt function income
1 Program service revenue:	code	741100111	code	Amoun	- Idiletion income
a					
b	- 				**
C	-			-	·-··.
d	-				
e	-				
g Fees and contracts from government agencies	-				
2 Membership dues and assessments					
3 Interest on savings and temporary cash investments			14	17.	
4 Dividends and interest from securities			$\frac{14}{14}$	37,951.	
5 Net rental income or (loss) from real estate:	1,			37,731.	
a Debt-financed property	-				* •
b Not debt-financed property					
6 Net rental income or (loss) from personal					
property					
7 Other investment income			14	1,527.	
8 Gain or (loss) from sales of assets other					· · · · · · · · · · · · · · · · · · ·
than inventory			18	-3,780.	
9 Net income or (loss) from special events					· <u></u>
10 Gross profit or (loss) from sales of inventory		_			
11 Other revenue:					
a					
b	_				
c	1 [
d					
e					
12 Subtotal. Add columns (b), (d), and (e)	<u> </u>).	35,715.	0.
13 Total. Add line 12, columns (b), (d), and (e)				13	35,715
(See worksheet in line 13 instructions to verify calculations.)				

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

ne No. ▼	the foundation's exempt purposes (other than by providing funds for such purposes).
+	
+	
+	

Part)		IL EWALD FAM				39-16			ge 13
i ait /		on Regarding Trans rganizations	siers to a	ind Transactions a	and Relationsi	nips with Noncr	iaritable	€	
1 Did		or indirectly engage in any c	of the followin	g with any other organization	on described in secti	on 501(c) of		Yes	No
the	Code (other than section	501(c)(3) organizations) or	ın section 52	7, relating to political organ	nizations?			- ,,	
		foundation to a noncharitab	ole exempt org	ganization of:			1.2 ~	* 1	7 7
	Cash						1a(1)		X
	Other assets						1a(2)		<u>X</u>
	er transactions:								` -
		charitable exempt organizati					1b(1)		X
		n a noncharitable exempt or	rganization				1b(2)		X
	Rental of facilities, equip Reimbursement arrange	•					1b(3)		X
	Loans or loan guarantee						1b(4) 1b(5)		X
		or membership or fundrais	una solicitatio	ns			1b(6)		X
		nt, mailing lists, other asset					1c		X
		ove is "Yes," complete the fo		-	ways show the fair m	narket value of the good		ets,	
		rting foundation. If the foun						,	
colu		oods, other assets, or servi	ces received.						
(a) Line no	(b) Amount involve	ed (c) Name of		exempt organization	(d) Description	of transfers, transactions, a	nd sharing ari	rangeme	nts
			<u> N/A</u>						
				······································					
	-			- 					
			····						
									
			·						
			····	······································					-
									
				· · · · · ·					
					<u> </u>				
	 								
2a Isth	e foundation directly or i	ndirectly affiliated with, or re	plated to one	or more tay-exempt organi	zatione described		· 		
		(other than section 501(c)			zations described		Yes	X] No
	es,* complete the following		(0)) 01 111 0000	0.1 021			103		J 140
		of organization		(b) Type of organization	(c) Description of relatio	пѕһір		
	N	/A			-				
				· · · · · · · · · · · · · · · · · · ·					
					<u> </u>				
	Under penalties perjury,	declare that I have examined the	is return, includi	ng accompanying schedules and	d statements, and to the	best of my knowledge and	haliaf it is to		
Sign		of preparer (other than taxpayer o	or fiduciary) is ba	ised on all information of which i	preparer has any knowle	dge	beller, it is ut	re, corre	ci,
Here	1011	110/10/1	120.0.0	1 5 15	/// 、	ECT DENM			
	Signature of office	r or trustee	~ mx ic	↑ Date		ESIDENT	-		
	Print/Type prepar		Preparer's si			Check If PTII	N		
			Juso			self- employed			
Paid	JASON A	. SEDERQUIST	/ 1-	`` <i>``\'`</i> ``\	04/28/11				
Prepa	rer Firm's name ►	BAKER TILLY				Firm's EIN ▶		_	
Use C	Only	PO BOX 7398							
	Firm's address	MADISON, WI	53707	-7398		Phone no. (60	8)249	-66	22

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

Name of the organization

Employer identification number

	EMIL EWALD FAMILY FOUNDATION, INC.	39-1687505
Organization type (chec	ck one)	
Filers of:	Section:	
Form 990 or 990-EZ	501(c)() (enter number) organization	
	4947(a)(1) nonexempt charitable trust not treated as a private foundation	on
	527 political organization	
Form 990-PF	X 501(c)(3) exempt private foundation	
	4947(a)(1) nonexempt charitable trust treated as a private foundation	
	501(c)(3) taxable private foundation	
Note. Only a section 50 General Rule X For an organiza	ion is covered by the General Rule or a Special Rule . 21(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule, or (10) organization can check boxes for both the General Rule and a Special Rule, or (10) organization can check boxes for both the General Rule and a Special Rule, or (10) organization can check boxes for both the General Rule and a Special Rule.	
Special Rules		
509(a)(1) and 1	501(c)(3) organization filing Form 990 or 990·EZ that met the 33 1/3% support test of 170(b)(1)(A)(vi), and received from any one contributor, during the year, a contribution on (i) Form 990, Part VIII, line 1h or (ii) Form 990·EZ, line 1 Complete Parts I and II	-
aggregate cont	501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any on atributions of more than \$1,000 for use <i>exclusively</i> for religious, charitable, scientific, a of cruelty to children or animals. Complete Parts I, II, and III	
contributions for If this box is ch purpose Do no	501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any on for use <i>exclusively</i> for religious, charitable, etc., purposes, but these contributions did hecked, enter here the total contributions that were received during the year for an election of the parts unless the General Rule applies to this organization be stable, etc., contributions of \$5,000 or more during the year	d not aggregate to more than \$1,000 exclusively religious, charitable, etc ,
	on that is not covered by the General Rule and/or the Special Rules does not file Scl on Part IV, line 2 of its Form 990, or check the box on line H of its Form 990-EZ, or	•

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990, 990-EZ, or 990-PF. Schedule B (Form 990, 990-EZ, or 990-PF) (2010)

that it does not meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

Name of organization

Employer identification number

EMIL H	EWALD	FAMILY	FOUNDATION,	INC.
--------	-------	--------	-------------	------

39-1687505

Part I	Contributors (see instructions)		
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
1	EMIL EWALD 156 ALWOOD LANE NAPLES, FL 34105	\$230,000.	Person X 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
		\$	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
		\$	Person Payroll Oncash Occash (Complete Part II if there is a noncash contribution.)
(a) No.	(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) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
		\$	Person Payroll Oncash Occash (Complete Part II if there is a noncash contribution)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
		\$	Person Payroll Oncash Ocomplete Part II of there is a noncash contribution Part II of the Part II of the Part II of the Part II of the Part II of the Part II of the Part II of the Part II of the Part II of the Part II of the Part II of the Payroll of Payroll of Payroll of Payroll of Payroll of Payroll of Payroll of Payroll of Payroll of Payroll of Payroll of Payroll of Payroll of Payroll of Payroll of Payroll of Payroll of Payroll of Payroll of Payroll of Payroll of Payroll of Payroll of Payroll of Payroll of Payroll of Payroll of Payroll of Payroll of Payroll of Payroll of Payroll of Payroll of Payroll of Payroll of Payroll of Payroll of Payroll of Payroll of Payroll of Payroll of Payroll of Payroll of Payroll of Payroll of Payroll of Payroll of Payroll of Payroll of Payroll of Payroll of Payroll of Payroll of Payroll of Payroll of Payroll of Payroll of Payroll of Payroll of Payroll of Payroll of Payroll of Payroll of Payroll of Payroll of Payroll of Payroll of Payroll of Payroll of Payroll of Payroll of Payroll of Payroll of Payroll of Payroll of Payroll of Payroll of Payroll of Payroll of Payroll of Payroll of Payroll of Payroll of Payroll of Payroll of Payroll of Payroll of Payroll of Payroll of Payroll of Payroll of Payroll of Payroll of Payroll of Payroll of Payroll of Payroll of Payroll of Payroll of Payroll of Payroll of Payroll of Payroll of Payroll of Payroll of Payroll of Payroll of Payroll of Payroll of Payroll of Payroll of Payroll of Payroll of Payroll of Payroll of Payroll of Payroll of Payroll of Payroll of Payroll of Payroll of Payroll of Payroll of Payroll of Payroll of Payroll of Payroll of Payroll of Payroll of Payroll of Payroll of Payroll of Payroll of Payroll of Payroll of Payroll of Payroll of Payroll of Payroll of Payroll of Payroll of Payroll of Payroll of Payroll of Payroll of Payroll of Payroll of Payroll of Payroll of Payroll of Payroll of Payroll of Payroll of Payroll of Payroll of Payroll of Payroll of Payroll of Payroll of Payroll of Payroll of Payroll of Payroll of Payroll of Pa

of Part II

Name of organization

Employer identification number

EMIL EWALD FAMILY FOUNDATION, INC.

39-1687505

Part II Nonce	ash Property (see instructions)		
(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
		s	
(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
		\$	990, 990-EZ, or 990-PF) (

No. m -t I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
-			

Transferee's name, address, and ZIP + 4

(e) Transfer of gift

Transferee's name, address, and ZIP + 4	Relationship of transferor to transferee
	

Relationship of transferor to transferee

FORM 990-PF INTEREST ON SAV	INGS AND TE	MPORARY CA	SH INVESTMENTS	STATEMENT 1
SOURCE				AMOUNT
M&I BANK CHECKING ACCOUNT				17.
TOTAL TO FORM 990-PF, PART I	, LINE 3, CO	OLUMN A		17.
FORM 990-PF DIVIDEN	DS AND INTE	REST FROM	SECURITIES	STATEMENT 2
SOURCE	GROS	S AMOUNT	CAPITAL GAINS DIVIDENDS	COLUMN (A) AMOUNT
M&I BROKERAGE ACCOUNT - DIVIDENDS M&I BROKERAGE ACCOUNT - INTE	REST	37,892. 59.	0.	37,892. 59.
TOTAL TO FM 990-PF, PART I,	LN 4	37,951.	0.	37,951.
FORM 990-PF	OTHER :	INCOME		STATEMENT 3
DESCRIPTION		(A) REVENUE PER BOOKS	(B) NET INVEST- MENT INCOME	
PTP WILLIAMS PIPELINE PARTNE (FINAL K-1) PTP WILLIAMS PARTNERS (INITI OTHER K-1 ADJUSTMENTS		-1,09 2,58		
TOTAL TO FORM 990-PF, PART I	, LINE 11 =	1,5	27. 1,527	· .
FORM 990-PF	OTHER PROFES	SSIONAL FE	ES	STATEMENT 4
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVE: MENT INCO		
MARSHALL & ILSLEY TRUST COMPANY - INVESTMENT AGENT SHERI NEHLS - BOOKKEEPING BAKER TILLY VIRCHOW	4,292 1,800		292. 300.	0.
KRAUSE, LLP - 2009 TAX RETURN PREPARATION FEE	1,500	. 1,	500.	0.
•	7,592	7	592.	0.

18 STATEMENT(S) 1, 2, 3, 4 09070428 727132 67194 2010.03050 EMIL EWALD FAMILY FOUNDATIO 671941

TO FORM 990-PF, PG 1, LN 16C

FORM 990-PF	OTHER EXPENSES			STATEMENT		
DESCRIPTION	(A) EXPENSES PER BOOKS	NSES NET INVI		(C) ADJUSTEL NET INCOM		
WI DEPT OF FINANCIAL INSTITUTIONS ANNUAL REPORT FEE JOHN HANCOCK LIFE INSURANCE COMPANY (LIFE INS. PREMIUM) JOHN HANCOCK LIFE INSURANCE	10. 145,255.		0.			0.
COMPANY (DECREASE IN POLICY CASH VALUE) M&I BANK CHECKING ACCOUNT - SERVICE CHARGES	15,154. 233.		0. 232.			0.
TO FORM 990-PF, PG 1, LN 23	160,652.		232.		· · · · · · · · · · · · · · · · · · ·	0.
=						
FORM 990-PF	CORPORAT	E STOCK			STATEMENT	6
DESCRIPTION			вос	OK VALUE	FAIR MARKE VALUE	т
CORPORATE STOCK			1	,311,249.	1,832,0	33.
TOTAL TO FORM 990-PF, PART II	, LINE 10B		1	,311,249.	1,832,0	33.
FORM 990-PF	OTHER .	ASSETS			STATEMENT	7
	BEGIN	NING OF		OF YEAR X VALUE	FAIR MARKE	т
DESCRIPTION		K VALUE	BOC	W ANDE	VALUE	
INVESTMENT IN LIFE INSURANCE TOTAL PREMIUMS PAID TO DATE LESS: DIFFERENCE BETWEEN	YR BOO	016,785.		.,162,040.	1,162,0	40.
INVESTMENT IN LIFE INSURANCE TOTAL PREMIUMS PAID TO DATE	YR BOO: - 1,		1			

FORM 990-PF

GRANT APPLICATION SUBMISSION INFORMATION PART XV, LINES 2A THROUGH 2D

STATEMENT

8

NAME AND ADDRESS OF PERSON TO WHOM APPLICATIONS SHOULD BE SUBMITTED

EMIL EWALD PO BOX 147 OCONOMOWOC, WI 53066

TELEPHONE NUMBER

FORM AND CONTENT OF APPLICATIONS

APPLICATION SHOULD BE IN WRITING AND SHOULD FULLY IDENTITY THE CHARITY, ITS PURPOSE, AND THE INTENDED USE OF THE DONATION.

ANY SUBMISSION DEADLINES

NONE.

RESTRICTIONS AND LIMITATIONS ON AWARDS

DONATIONS WILL BE MADE ONLY TO 501(C)(3) TAX-EXEMPT ORGANIZATIONS.

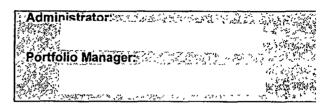
20

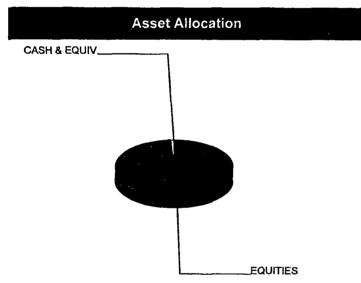


EMIL EWALD FOUNDATION INV AGY

Account Number: Statement Period:

01/01/10 - 12/31/10





А	sset Valuation	•
Description	Market Value	% of Account
Cash & Equiv Equities Miscellaneous	27,368.72 1,832,032.64 0.00	1.5% 98.5%
Total Portfolio	\$ 1,859,401.36	100.0%

Market Reconcilement		
Beginning Market Value	Current Period \$ 1,568,867.73	Year To Date \$ 1,568,867.73
Income		
Interest	58.51	58.51
Dividends	37,891.66	37,891.66
Other Income	1.526.13	1.526.13
Disbursements	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	.,
Fees/Expenses.	-4.292.31	-4,292.31
Realized Gains/(Losses)	-3,780.51	-3,780.51
Change In Market Appreciation/(Depreciation)	259,130.15	259,130.15
Non-Čash Asset Changes	0.00	0.00
Ending Market Value	\$ 1,859,401.36	\$ 1,859,401.36

EMIL EWALD FOUNDATION INV AGY

Account Number: Statement Period:

01/01/10 - 12/31/10

	_ Asset Position As of 1	2/31/10		
Asset Description	Units	Market Value Cost	Est. Annual Income	Current Yield
Cash Equivalents				
Marshall Prime Money Market CI I	27,368.720	27,368.72 27,368.72	61.00	0.22%
Fotal Cash Equivalents		\$ 27,368.72 \$ 27,368.72	61.00	0.22%
* Equities				
AT&T Inc Com	500.000	14,690.00 14,015.00	860.00	5.85%
Astrazeneca PLC Sponsored ADR	500.000	23,095.00 22,714.50	1,205.00	5.22%
Comcast Corp CI A	1,000.000	21,970.00 17,619.00	378.00	1.72%
Dominion Res Inc VA New Com	500.000	21,360.00 19,279.50	915.00	4.28%
Emerson Elec Co Com	300.000	17,151.00 14,513.97	414.00	2.41%
Fidelity Natl Information Svcs Inc Com	. 899.000	24,623.61 9,908.68	179.00	0.73%
Ford Mtr Co Del Com Par \$0.01	2,000.000	33,580.00 4,860.00	0.00	0.00%
shares Tr S&P 500 Index Fd	4,695.000	592,743.75 531,333.11	10,502.00	1.77%
shares Tr MCSI EAFE Index Fd	4,961.000	288,829.42 253,202.08	6,930.00	2.40%
shares Tr S&P Midcap 400 Index Fd	3,093.000	280,504.17 190,307.41	2,960.00	1.06%
shares Tr S&P Smallcap 600 Index Fd	2,156.000	147,621.32 100,024.49	1,588.00	1.08%
Johnson Ctls Inc Com	500.000	19,100.00 14,162.70	320.00	1.68%
Kraft Foods Inc CI A	2,458.000	77,451.58 21,944.27	2,851.00	3.68%
Nextera Energy Inc Com	500.000	25,995.00 26,400.00	1,000.00	3.85%



EMIL EWALD FOUNDATION INV AGY

Account Number: Statement Period:

01/01/10 - 12/31/11

	Asset Position As of 1	12/31/10 <u> </u>		
Asset Description	Units	Market Value Cost	Est. Annual Income	Curren Yiel
Philip Morris Intl Inc Com	3,553.000	207,957.09 48,742.90	9,095.00	4.37%
Williams Partners L P Com Unit LTD Partnership Int	758.000	35,360.70 22,221.57	2,084.00	5.89%
Total Equities		\$ 1,832,032.64 \$ 1,311,249.18	41,281.00	2.25%
Miscellaneous				
Original Investment Agency Agreement Dtd 11/06/2003	1.000	0.00 0.00	0.00	0.00%
Total Miscellaneous		\$ 0.00 \$ 0.00	0.00	0.00%
Cash				
Principal Cash		-221,965.23 -221,965.23	0.00	0.00%
Income Cash		221,965.23 221,965.23	0 00	0.00%
Total Cash		\$ 0.00 \$ 0.00	0.00	0.00%
Total Market Value		\$ 1,859,401.36 \$ 1,338,617.90	41,342.00	2.22%

EMIL EWALD FAMILY FOUNDATION, INC. 2010 GIFTS

RECIPIENT	AMO	TNUC	DATE	CK#
AMERICAN LEGION DEPARTMENT OF WISCONSIN P.O. BOX 388 PORTAGE, WI 53901-0388	\$	250.00	12/22/2010	1905
AMERICAN LUNG ASSOCIATION OF WISCONSIN 13100 W. LISBON ROAD, SUITE 700 BROOKFIELD, WI 53005-2508	\$	200.00	12/22/2010	1906
ANDEAN HEALTH & DEVELOPMENT DR. DAVID GAUS 14257 WATERS EDGE TRAIL NEW BERLIN, WI 53151	\$	500.00	12/17/2010	1881
AVALON TEC N9368 GREEN VALLEY ROAD WATERTOWN, WI 53094	\$	250.00	12/17/2010	1882
BADGER ASSOCIATION OF THE BLIND 912 N. HAWLEY ROAD MILWAUKEE, WI 53213-3292	\$	1,500.00	12/17/2010	1883
THE BLOOD CENTER OF SE WISCONSIN,INC. P.O. BOX 2178 MILWAUKEE, WI 53201-2178	\$	1,000.00	12/17/2010	1884
BOY SCOUTS OF AMERICA 330 SOUTH 84TH STREET MILWAUKEE, WI 53214-1468	\$	2,000.00	1/4/2010	1864
BOYS & GIRLS CLUBS OF GREATER MILW. P.O. BOX 12486 MILWAUKEE, WI 53212-9960	\$	500.00	5/7/2010	1866

CENTER FOR DEAF BLIND PERSON,INC. ATTN: MS RUTH SILVER,EXEC.DIR. 3195 S. SUPERIOR STREET MILWAUKEE, WI 53207	\$ 1,000.00 9/29/2010	1877
CIVIL WAR PRESERVATION TRUST 11 PUBLIC SQUARE, SUITE 200 HAGERSTOWN, MD 21740	\$ 1,000.00 12/17/2010	1885
DISABLED AMERICAN VETERANS P.O. BOX 14301 CINCINNATI, OH 45250-0301	\$ 500.00 12/22/2010	1907
FATHER FLANAGAN'S GIRLS & BOYS TOWN P.O. BOX 6000 BOYSTOWN, NE 68010-9988	\$ 1,000.00 12/17/2010	1886
FIRST BAPTIST CHURCH OF NAPLES 3000 ORANGE BLOSSOM DRIVE NAPLES, FL 34109	\$ 10,000.00 10/15/2010	1878
FOOD FOR THE POOR INC. 6401 LYONS ROAD COCONUT CREEK, FL 33073	\$ 500.00 12/17/2010	1887
FOUNDATION OF W.A.T.D.A. P.O. BOX 5345 MADISON, WI 53705-0345	\$ 6,500.00 5/19/2010 \$ 5,000.00 10/18/2010 \$ 7,500.00 12/29/2010	1868 1879 1913
HABITAT FOR HUMANITY 11145 TAMIAMI TRAIL EAST NAPLES,FL 34113	,	

INTERNATIONAL COOPERATING MINISTRIES 606 ABERDEEN ROAD HAMPTON, VA 23661-9993	\$ 10,000.00	6/18/2010	1870
JDRF-SOUTHEASTERN CHAPTER 3333 N MAYFIAR RD. SUITE 107 WAUWATOSA, WI 53222	\$ 2,500.00	8/9/2010	1872
HARTFORD FOOD PANTRY HARTFORD, WI 53027	\$ 500.00	12/22/2010	1904
LAKE COUNTRY LUTHERAN HIGH SCHOOL 401 CAMPUS DRIVE HARTLAND, WI 53029	\$ 1,000.00	12/22/2010	1908
LIFESTRIDERS INC. W288 S290 ELMHURST DR. WAUKESHA, WI 53188	\$ 1,000.00	12/17/2010	1888
MPTV FRIENDS INC BOX 88202 MILWAUKEE, WI 53288-0202	\$ 250.00	5/27/2010	1869
MILWAUKEE RESCUE MISSION 830 N. 19TH STREET MILWAUKEE, WI 53233-1616	\$ 1,000.00	12/17/2010	1889
NASHOTAH HOUSE 2777 MISSION ROAD NASHOTAH, WI 53058-9989	\$ 1,000.00	12/17/2010	1890

OCONOMOWOC AREA SENIOR CENTER INC. 210 S. MAIN STREET OCONOMOWOC, WI 53066	\$ 1,000.00	12/17/2010	1891
OCONOMOWOC FOOD PANTRY P.O. BOX 832 OCONOMOWOC, WI 53066	\$ 1,000.00	12/17/2010	1892
OCONOMOWOC/HARTLAND MASONIC LODGE #42 307 N. LAKE DRIVE OCONOMOWOC, WI 53066	\$ 1,000.00	7/14/2010	1871
OCON AREA HISTORICAL SOCIETY & MUSEUM P.O. BOX 969 OCONOMOWOC, WI 53066	\$ 1,000.00	12/17/2010	1893
ST. LABRE INDIAN SCHOOL ASHLAND, MT 59004-1001	\$ 500.00	8/10/2010	1873
ST. MATTHEW'S HOUSE 2001 AIRPORT ROAD SOUTH NAPLES, FL 34112	\$ 1,000.00	12/17/2010	1894
SCOTTISH RITE CHARITIES PO BOX 970021 BOSTON, MA 02297-0021	\$ 250.00	12/17/2010	1895
THE SALVATION ARMY 11315 W. WATERTOWN PLANK ROAD P.O. BOX 26019 MILWAUKEE, WI 53226-0019	\$ 2,500.00	12/17/2010	1896
SPRING CREEK CHURCH	\$ 1,000.00	8/16/2010	1874
C/O PASTOR CHIP BERNHARD	\$ 500.00	8/25/2010	1875
N35 W22000 CAPITAL DRIVE PEWAUKEE, WI 53072	\$ 2,500.00	12/28/2010	1910
SPECIAL OLYMPICS OF WI P.O. BOX 7638 MADISON, WI 53707-7638	\$ 250.00	5/7/2010	1865
ST. JUDE CHILDRENS RESEARCH 501 ST. JUDE PLACE MEMPHIS, TN 38105-1942	\$ 2,000.00	12/17/2010	1897

VALLEY OF OUR LADY MONASTERY E11096 YANKE DRIVE PRAIRIE DU SAC, WI 53578-9737	\$ 250.00	12/17/2010	1898
VETERANS OF FOREIGN WARS OF THE US P.O. BOX 8958 TOPEKA, KS 66608-8958	\$ 1,000.00	12/17/2010	1899
WAUKESHA HUMANE SOCIETY P.O. BOX 834 WAUKESHA, WI 53187-0834	\$ 1,000.00	12/17/2010	1900
WILDLIFE IN NEED CENTER W340 S2383 HWY C OCONOMOWOC, WI 53066	\$ 1,000.00	12/17/2010	1901
WISCONSIN HUMANE SOCIETY 4500 W. WISCONSIN AVENUE MILWAUKEE, WI 53208-3156	\$ 1,000.00	12/17/2010	1902
THE WISCONSIN MASONIC HOME,INC. ATTN: MARK STRAUTMAN 410 N. MAIN STREET DOUSMAN, WI 53118	\$ 5,000.00	12/28/2010	1911

WISCONSIN HISTORICAL SOCIETY 816 STATE STREET MADISON, WI 53706-1488 \$ 1,000.00 12/17/2010

1903

TOTAL

\$ 81,200.00