Form **990**

Department of the Treasury
Internal Revenue Service

Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except black lung benefit trust or private foundation)

▶ The organization may have to use a copy of this return to satisfy state reporting requirements.

OMB No 1545-0047

2010

Open to Public Inspection

A For the 2010 calendar year, or tax year beginning JUL 1, 2010 and ending JUN 30, 2011

B Check if applicable: ☐ Address change ☐ Name change ☐ Initial return ☐ Terminated ☐ Amended return ☐ Application pending

C Name of organization: CCC FOUNDATION, INC.

Doing Business As

Number and street (or P.O. box if mail is not delivered to street address): PO BOX 399 | Room/suite

City or town, state or country, and ZIP + 4: MANITOWOC, WI 54221-0399

D Employer identification number: 39-1741423

E Telephone number: 920-683-1937

G Gross receipts $ 43,917.

F Name and address of principal officer: PETER DESCHLER 619 STONEY BROOK DRIVE, MANITOWOC, WI 54220

H(a) Is this a group return for affiliates? ☐ Yes ☒ No

H(b) Are all affiliates included? ☐ Yes ☐ No

If "No," attach a list. (see instructions)

I Tax-exempt status: ☒ 501(c)(3) ☐ 501(c) ( ) ◀ (insert no.) ☐ 4947(a)(1) or ☐ 527

J Website: ▶ N/A

H(c) Group exemption number ▶

K Form of organization: ☐ Corporation ☐ Trust ☐ Association ☒ Other ▶ Found **L** Year of formation: **M** State of legal domicile: WI

Part I Summary

Activities & Governance

1	Briefly describe the organization's mission or most significant activities: SUPPORT OF LOCAL THEATRE		
2	Check this box ▶ ☐ if the organization discontinued its operations or disposed of more than 25% of its net assets.		
3	Number of voting members of the governing body (Part VI, line 1a)	3	0
4	Number of independent voting members of the governing body (Part VI, line 1b)	4	0
5	Total number of individuals employed in calendar year 2010 (Part V, line 2a)	5	0
6	Total number of volunteers (estimate if necessary)	6	8
7a	Total unrelated business revenue from Part VIII, column (C), line 12	7a	0.
b	Net unrelated business taxable income from Form 990-T, line 34	7b	0.

			Prior Year	Current Year
Revenue	8	Contributions and grants (Part VIII, line 1h)	187,595.	10,050.
	9	Program service revenue (Part VIII, line 2g)	0.	0.
	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)	28,447.	32,793.
	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	0.	0.
	12	Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	216,042.	42,843.
Expenses	13	Grants and similar amounts paid (Part IX, column (A), lines 1-3)	28,271.	35,897.
	14	Benefits paid to or for members (Part IX, column (A), line 4)	0.	0.
	15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	0.	0.
	16a	Professional fundraising fees (Part IX, column (A), line 11e)	0.	0.
	b	Total fundraising expenses (Part IX, column (D), line 25) ▶ 0.		
	17	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24f)	5,572.	6,415.
	18	Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	33,843.	42,312.
	19	Revenue less expenses. Subtract line 18 from line 12	182,199.	531.

			Beginning of Current Year	End of Year
Net Assets or Fund Balances	20	Total assets (Part X, line 16)	1,247,139.	1,247,704.
	21	Total liabilities (Part X, line 26)	0.	0.
	22	Net assets or fund balances. Subtract line 21 from line 20	1,247,139.	1,247,704.

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Part II Signature Block

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

Sign Here ▶ Signature of officer: Peter W. Deschler Date: 5/2/12

▶ Type or print name and title: Peter W. Deschler, President

Paid Preparer Use Only

Print/Type preparer's name: Ned Jacquart | Preparer's signature: Ned Jacquart CPA | Date: 2/18/12 | Check ☐ if self-employed | PTIN

Firm's name ▶ Ihlenfeld, Skatrud & Anderson, Inc. | Firm's EIN ▶

Firm's address ▶ 429 North 9th Street Manitowoc, WI 54220 | Phone no. 920-682-6365

May the IRS discuss this return with the preparer shown above? (see instructions) ☐ Yes ☐ No

916-19 8

Part III Statement of Program Service Accomplishments

Check if Schedule O contains a response to any question in this Part III ☐

1 Briefly describe the organization's mission:
Support of Local Theatre

2 Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ? ☐ Yes ☒ No
If "Yes," describe these new services on Schedule O

3 Did the organization cease conducting, or make significant changes in how it conducts, any program services? ☐ Yes ☒ No
If "Yes," describe these changes on Schedule O.

4 Describe the exempt purpose achievements for each of the organization's three largest program services by expenses Section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported

4a (Code:) (Expenses $ 35,897. including grants of $ 35,897.) (Revenue $)
SUPPORT PAID TO CAPITAL CIVIC CENTER, INC.

4b (Code) (Expenses $ including grants of $) (Revenue $)

4c (Code) (Expenses $ including grants of $) (Revenue $)

4d Other program services. (Describe in Schedule O)
(Expenses $ including grants of $) (Revenue $)

4e Total program service expenses ▶ 35,897.

Part IV Checklist of Required Schedules

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? *If "Yes," complete Schedule A*	1	X	
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2	X	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? *If "Yes," complete Schedule C, Part I*	3		X
4	**Section 501(c)(3) organizations.** Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? *If "Yes," complete Schedule C, Part II*	4		X
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? *If "Yes," complete Schedule C, Part III*	5		
6	Did the organization maintain any donor advised funds or any similar funds or accounts where donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? *If "Yes," complete Schedule D, Part I*	6		X
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? *If "Yes," complete Schedule D, Part II*	7		X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? *If "Yes," complete Schedule D, Part III*	8		X
9	Did the organization report an amount in Part X, line 21; serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? *If "Yes," complete Schedule D, Part IV*	9		X
10	Did the organization, directly or through a related organization, hold assets in term, permanent, or quasi-endowments? *If "Yes," complete Schedule D, Part V*	10		X
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable.			
a	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? *If "Yes," complete Schedule D, Part VI*	11a		X
b	Did the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? *If "Yes," complete Schedule D, Part VII*	11b	X	
c	Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? *If "Yes," complete Schedule D, Part VIII*	11c		X
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? *If "Yes," complete Schedule D, Part IX*	11d		X
e	Did the organization report an amount for other liabilities in Part X, line 25? *If "Yes," complete Schedule D, Part X*	11e		X
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? *If "Yes," complete Schedule D, Part X*	11f		X
12a	Did the organization obtain separate, independent audited financial statements for the tax year? *If "Yes," complete Schedule D, Parts XI, XII, and XIII*	12a	X	
b	Was the organization included in consolidated, independent audited financial statements for the tax year? *If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI, XII, and XIII is optional*	12b		X
13	Is the organization a school described in section 170(b)(1)(A)(ii)? *If "Yes," complete Schedule E*	13		X
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		X
b	Did the organization have aggregate revenues or expenses of more than $10,000 from grantmaking, fundraising, business, and program service activities outside the United States? *If "Yes," complete Schedule F, Parts I and IV*	14b		X
15	Did the organization report on Part IX, column (A), line 3, more than $5,000 of grants or assistance to any organization or entity located outside the United States? *If "Yes," complete Schedule F, Parts II and IV*	15		X
16	Did the organization report on Part IX, column (A), line 3, more than $5,000 of aggregate grants or assistance to individuals located outside the United States? *If "Yes," complete Schedule F, Parts III and IV*	16		X
17	Did the organization report a total of more than $15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? *If "Yes," complete Schedule G, Part I*	17		X
18	Did the organization report more than $15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? *If "Yes," complete Schedule G, Part II*	18		X
19	Did the organization report more than $15,000 of gross income from gaming activities on Part VIII, line 9a? *If "Yes," complete Schedule G, Part III*	19		X
20a	Did the organization operate one or more hospitals? *If "Yes," complete Schedule H*	20a		X
b	If "Yes" to line 20a, did the organization attach its audited financial statements to this return? **Note.** Some Form 990 filers that operate one or more hospitals must attach audited financial statements (see instructions)	20b		

Part IV Checklist of Required Schedules *(continued)*

			Yes	No
21	Did the organization report more than $5,000 of grants and other assistance to governments and organizations in the United States on Part IX, column (A), line 1? *If "Yes," complete Schedule I, Parts I and II*	21	X	
22	Did the organization report more than $5,000 of grants and other assistance to individuals in the United States on Part IX, column (A), line 2? *If "Yes," complete Schedule I, Parts I and III*	22		X
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? *If "Yes," complete Schedule J*	23		X
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than $100,000 as of the last day of the year, that was issued after December 31, 2002? *If "Yes," answer lines 24b through 24d and complete Schedule K. If "No", go to line 25*	24a		X
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
c	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	**Section 501(c)(3) and 501(c)(4) organizations.** Did the organization engage in an excess benefit transaction with a disqualified person during the year? *If "Yes," complete Schedule L, Part I*	25a		X
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? *If "Yes," complete Schedule L, Part I*	25b		X
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified person outstanding as of the end of the organization's tax year? *If "Yes," complete Schedule L, Part II*	26		X
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor, or a grant selection committee member, or to a person related to such an individual? *If "Yes," complete Schedule L, Part III*	27		X
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions):			
a	A current or former officer, director, trustee, or key employee? *If "Yes," complete Schedule L, Part IV*	28a		X
b	A family member of a current or former officer, director, trustee, or key employee? *If "Yes," complete Schedule L, Part IV*	28b		X
c	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? *If "Yes," complete Schedule L, Part IV*	28c		X
29	Did the organization receive more than $25,000 in non-cash contributions? *If "Yes," complete Schedule M*	29		X
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? *If "Yes," complete Schedule M*	30		X
31	Did the organization liquidate, terminate, or dissolve and cease operations? *If "Yes," complete Schedule N, Part I*	31		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? *If "Yes," complete Schedule N, Part II*	32		X
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? *If "Yes," complete Schedule R, Part I*	33		X
34	Was the organization related to any tax-exempt or taxable entity? *If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1*	34	X	
35	Is any related organization a controlled entity within the meaning of section 512(b)(13)?	35		X
a	Did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? *If "Yes," complete Schedule R, Part V, line 2* ☐ Yes ☒ No			
36	**Section 501(c)(3) organizations.** Did the organization make any transfers to an exempt non-charitable related organization? *If "Yes," complete Schedule R, Part V, line 2*	36	X	
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? *If "Yes," complete Schedule R, Part VI*	37		X
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19? **Note.** All Form 990 filers are required to complete Schedule O	38	X	

Part V **Statements Regarding Other IRS Filings and Tax Compliance**

Check if Schedule O contains a response to any question in this Part V

				Yes	No
1a	Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable	1a	0		
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable	1b	0		
c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?			1c X	
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return	2a	0		
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?			2b	
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to *e-file* (see instructions)				
3a	Did the organization have unrelated business gross income of $1,000 or more during the year?			3a	X
b	If "Yes," has it filed a Form 990-T for this year? *If "No," provide an explanation in Schedule O*			3b	
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?			4a	X
b	If "Yes," enter the name of the foreign country: ▶				
	See instructions for filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.				
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?			5a	X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?			5b	X
c	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?			5c	
6a	Does the organization have annual gross receipts that are normally greater than $100,000, and did the organization solicit any contributions that were not tax deductible?			6a	X
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?			6b	
7	**Organizations that may receive deductible contributions under section 170(c).**				
a	Did the organization receive a payment in excess of $75 made partly as a contribution and partly for goods and services provided to the payor?			7a	X
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?			7b	
c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?			7c	X
d	If "Yes," indicate the number of Forms 8282 filed during the year	7d			
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?			7e	
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?			7f	
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?			7g	
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?			7h	
8	**Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations.** Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year?			8	
9	**Sponsoring organizations maintaining donor advised funds.**				
a	Did the organization make any taxable distributions under section 4966?			9a	
b	Did the organization make a distribution to a donor, donor advisor, or related person?			9b	
10	**Section 501(c)(7) organizations.** Enter:				
a	Initiation fees and capital contributions included on Part VIII, line 12	10a			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b			
11	**Section 501(c)(12) organizations.** Enter:				
a	Gross income from members or shareholders	11a			
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)	11b			
12a	**Section 4947(a)(1) non-exempt charitable trusts.** Is the organization filing Form 990 in lieu of Form 1041?			12a	
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	12b			
13	**Section 501(c)(29) qualified nonprofit health insurance issuers.**				
a	Is the organization licensed to issue qualified health plans in more than one state?			13a	
	Note. See the instructions for additional information the organization must report on Schedule O.				
b	Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans	13b			
c	Enter the amount of reserves on hand	13c			
14a	Did the organization receive any payments for indoor tanning services during the tax year?			14a	X
b	If "Yes," has it filed a Form 720 to report these payments? *If "No," provide an explanation in Schedule O*			14b	

Form **990** (2010)

032005
12-21-10

Part VI **Governance, Management, and Disclosure** *For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions.*

Check if Schedule O contains a response to any question in this Part VI [X]

Section A. Governing Body and Management

			Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year — 1a: 0			
b	Enter the number of voting members included in line 1a, above, who are independent — 1b: 0			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?	2		X
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person?	3		X
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		X
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		X
6	Does the organization have members or stockholders?	6		X
7a	Does the organization have members, stockholders, or other persons who may elect one or more members of the governing body?	7a		X
b	Are any decisions of the governing body subject to approval by members, stockholders, or other persons?	7b		X
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:			
a	The governing body?	8a	X	
b	Each committee with authority to act on behalf of the governing body?	8b	X	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? *If "Yes," provide the names and addresses in Schedule O*	9		X

Section B. Policies *(This Section B requests information about policies not required by the Internal Revenue Code.)*

			Yes	No
10a	Does the organization have local chapters, branches, or affiliates?	10a		X
b	If "Yes," does the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with those of the organization?	10b		
11a	Has the organization provided a copy of this Form 990 to all members of its governing body before filing the form?	11a		X
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990.			
12a	Does the organization have a written conflict of interest policy? *If "No," go to line 13*	12a		X
b	Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b		
c	Does the organization regularly and consistently monitor and enforce compliance with the policy? *If "Yes," describe in Schedule O how this is done*	12c		
13	Does the organization have a written whistleblower policy?	13		X
14	Does the organization have a written document retention and destruction policy?	14		X
15	Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
a	The organization's CEO, Executive Director, or top management official	15a		X
b	Other officers or key employees of the organization	15b		X
	If "Yes" to line 15a or 15b, describe the process in Schedule O (See instructions.)			
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	16a		X
b	If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the organization's exempt status with respect to such arrangements?	16b		

Section C. Disclosure

17 List the states with which a copy of this Form 990 is required to be filed ▶WI

18 Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection. Indicate how you make these available. Check all that apply

[ ] Own website [ ] Another's website [X] Upon request

19 Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of interest policy, and financial statements available to the public.

20 State the name, physical address, and telephone number of the person who possesses the books and records of the organization: ▶

Ihlenfeld, Skatrud & Anderson, Inc. - 920-682-6365
429 N. 9th Street, Manitowoc, WI 54220

Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

Check if Schedule O contains a response to any question in this Part VII [ ]

Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.

- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid
- List all of the organization's **current** key employees, if any. See instructions for definition of "key employee."
- List the organization's five **current** highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than $100,000 from the organization and any related organizations.
- List all of the organization's **former** officers, key employees, and highest compensated employees who received more than $100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than $10,000 of reportable compensation from the organization and any related organizations

List persons in the following order: individual trustees or directors, institutional trustees; officers; key employees, highest compensated employees; and former such persons.

[X] Check this box if neither the organization nor any related organization compensated any current officer, director, or trustee

(A) Name and Title	(B) Average hours per week (describe hours for related organizations in Schedule O)	(C) Position (check all that apply): Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
Peter Deschler President	1.00	X		X				0.	0.	0.
Craig Pauly Vice President	1.00	X		X				0.	0.	0.
Ron A. Kaminski Secretary	1.00	X		X				0.	0.	0.
Jim Vopat Treasurer	1.00	X		X				0.	0.	0.
Mark Klaiber Board Member	1.00	X						0.	0.	0.
John L. Sadowski Board Member	1.00	X						0.	0.	0.
Matt Schliesman Board Member	1.00	X						0.	0.	0.
Paul Stockhausen Board Member	1.00	X						0.	0.	0.
Pete Stuntz Board Member	1.00	X						0.	0.	0.
Thomas Bare Board Member	1.00							0.	0.	0.

Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees *(continued)*

(A) Name and title	(B) Average hours per week (describe hours for related organizations in Schedule O)	(C) Position (check all that apply): Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
1b Sub-total ▶								0.	0.	0.
c Total from continuation sheets to Part VII, Section A ▶								0.	0.	0.
d Total (add lines 1b and 1c) ▶								0.	0.	0.

2 Total number of individuals (including but not limited to those listed above) who received more than $100,000 in reportable compensation from the organization ▶ 0

		Yes	No
3 Did the organization list any **former** officer, director or trustee, key employee, or highest compensated employee on line 1a? *If "Yes," complete Schedule J for such individual*	3		X
4 For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than $150,000? *If "Yes," complete Schedule J for such individual*	4		X
5 Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? *If "Yes," complete Schedule J for such person*	5		X

Section B. Independent Contractors

1 Complete this table for your five highest compensated independent contractors that received more than $100,000 of compensation from the organization. NONE

(A) Name and business address	(B) Description of services	(C) Compensation

2 Total number of independent contractors (including but not limited to those listed above) who received more than $100,000 in compensation from the organization ▶ 0

Part VIII Statement of Revenue

Section	Line	Description	Ref	Amount	(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
Contributions, gifts, grants and other similar amounts	1 a	Federated campaigns	1a					
	b	Membership dues	1b					
	c	Fundraising events	1c					
	d	Related organizations	1d					
	e	Government grants (contributions)	1e					
	f	All other contributions, gifts, grants, and similar amounts not included above	1f	10,050.				
	g	Noncash contributions included in lines 1a-1f $						
	h	Total. Add lines 1a-1f		▶	10,050.			
Program Service Revenue				Business Code				
	2 a							
	b							
	c							
	d							
	e							
	f	All other program service revenue						
	g	Total. Add lines 2a-2f		▶				
Other Revenue	3	Investment income (including dividends, interest, and other similar amounts)		▶	27,087.	27,087.		
	4	Income from investment of tax-exempt bond proceeds		▶				
	5	Royalties		▶				
			(i) Real	(ii) Personal				
	6 a	Gross Rents						
	b	Less: rental expenses						
	c	Rental income or (loss)						
	d	Net rental income or (loss)		▶				
			(i) Securities	(ii) Other				
	7 a	Gross amount from sales of assets other than inventory	6,780.					
	b	Less: cost or other basis and sales expenses	1,074.					
	c	Gain or (loss)	5,706.					
	d	Net gain or (loss)		▶	5,706.	5,706.		
	8 a	Gross income from fundraising events (not including $ ________ of contributions reported on line 1c). See Part IV, line 18	a					
	b	Less. direct expenses	b					
	c	Net income or (loss) from fundraising events		▶				
	9 a	Gross income from gaming activities See Part IV, line 19	a					
	b	Less direct expenses	b					
	c	Net income or (loss) from gaming activities		▶				
	10 a	Gross sales of inventory, less returns and allowances	a					
	b	Less. cost of goods sold	b					
	c	Net income or (loss) from sales of inventory		▶				
		Miscellaneous Revenue		Business Code				
	11 a							
	b							
	c							
	d	All other revenue						
	e	Total. Add lines 11a-11d		▶				
	12	Total revenue. See instructions.		▶	42,843.	32,793.	0.	0.

Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns.
All other organizations must complete column (A) but are not required to complete columns (B), (C), and (D).

Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1 Grants and other assistance to governments and organizations in the U.S. See Part IV, line 21	35,897.	35,897.		
2 Grants and other assistance to individuals in the U.S See Part IV, line 22				
3 Grants and other assistance to governments, organizations, and individuals outside the U.S. See Part IV, lines 15 and 16				
4 Benefits paid to or for members				
5 Compensation of current officers, directors, trustees, and key employees				
6 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
7 Other salaries and wages				
8 Pension plan contributions (include section 401(k) and section 403(b) employer contributions)				
9 Other employee benefits				
10 Payroll taxes				
11 Fees for services (non-employees):				
a Management				
b Legal				
c Accounting				
d Lobbying				
e Professional fundraising services. See Part IV, line 17				
f Investment management fees				
g Other				
12 Advertising and promotion				
13 Office expenses				
14 Information technology				
15 Royalties				
16 Occupancy				
17 Travel				
18 Payments of travel or entertainment expenses for any federal, state, or local public officials				
19 Conferences, conventions, and meetings				
20 Interest				
21 Payments to affiliates				
22 Depreciation, depletion, and amortization				
23 Insurance				
24 Other expenses. Itemize expenses not covered above. (List miscellaneous expenses in line 24f. If line 24f amount exceeds 10% of line 25, column (A) amount, list line 24f expenses on Schedule O.)				
a Trustee Fees	6,415.		6,415.	
b				
c				
d				
e				
f All other expenses				
25 **Total functional expenses.** Add lines 1 through 24f	42,312.	35,897.	6,415.	0.
26 **Joint costs.** Check here ▶ ☐ if following SOP 98-2 (ASC 958-720). Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation				

Part X Balance Sheet

			(A) Beginning of year		(B) End of year
Assets	1	Cash - non-interest-bearing	0.	1	
	2	Savings and temporary cash investments	127,061.	2	70,633.
	3	Pledges and grants receivable, net		3	
	4	Accounts receivable, net		4	
	5	Receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L		5	
	6	Receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions)		6	
	7	Notes and loans receivable, net		7	
	8	Inventories for sale or use		8	
	9	Prepaid expenses and deferred charges		9	
	10a	Land, buildings, and equipment. cost or other basis. Complete Part VI of Schedule D — 10a			
	b	Less: accumulated depreciation — 10b		10c	
	11	Investments - publicly traded securities		11	
	12	Investments - other securities. See Part IV, line 11	1,120,078.	12	1,177,071.
	13	Investments - program-related. See Part IV, line 11		13	
	14	Intangible assets		14	
	15	Other assets. See Part IV, line 11	0.	15	0.
	16	**Total assets.** Add lines 1 through 15 (must equal line 34)	1,247,139.	16	1,247,704.
Liabilities	17	Accounts payable and accrued expenses		17	
	18	Grants payable		18	
	19	Deferred revenue		19	
	20	Tax-exempt bond liabilities		20	
	21	Escrow or custodial account liability. Complete Part IV of Schedule D		21	
	22	Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L		22	
	23	Secured mortgages and notes payable to unrelated third parties		23	
	24	Unsecured notes and loans payable to unrelated third parties		24	
	25	Other liabilities. Complete Part X of Schedule D		25	
	26	**Total liabilities.** Add lines 17 through 25	0.	26	0.
Net Assets or Fund Balances		**Organizations that follow SFAS 117, check here ▶ [X] and complete lines 27 through 29, and lines 33 and 34.**			
	27	Unrestricted net assets	1,247,139.	27	1,247,704.
	28	Temporarily restricted net assets		28	
	29	Permanently restricted net assets		29	
		Organizations that do not follow SFAS 117, check here ▶ [ ] and complete lines 30 through 34.			
	30	Capital stock or trust principal, or current funds		30	
	31	Paid-in or capital surplus, or land, building, or equipment fund		31	
	32	Retained earnings, endowment, accumulated income, or other funds		32	
	33	Total net assets or fund balances	1,247,139.	33	1,247,704.
	34	Total liabilities and net assets/fund balances	1,247,139.	34	1,247,704.

Form 990 (2010)

Part XI Reconciliation of Net Assets

Check if Schedule O contains a response to any question in this Part XI [X]

1	Total revenue (must equal Part VIII, column (A), line 12)	1	42,843.
2	Total expenses (must equal Part IX, column (A), line 25)	2	42,312.
3	Revenue less expenses Subtract line 2 from line 1	3	531.
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	1,247,139.
5	Other changes in net assets or fund balances (explain in Schedule O)	5	34.
6	Net assets or fund balances at end of year. Combine lines 3, 4, and 5 (must equal Part X, line 33, column (B))	6	1,247,704.

Part XII Financial Statements and Reporting

Check if Schedule O contains a response to any question in this Part XII [ ]

			Yes	No
1	Accounting method used to prepare the Form 990: [X] Cash [ ] Accrual [ ] Other: If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O.			
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?	2a		X
b	Were the organization's financial statements audited by an independent accountant?	2b	X	
c	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant?	2c	X	
	If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O			
d	If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were issued on a separate basis, consolidated basis, or both: [ ] Separate basis [X] Consolidated basis [ ] Both consolidated and separate basis			
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?	3a		X
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits	3b		

Form 990 (2010)

SCHEDULE A (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Public Charity Status and Public Support

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.
▶ Attach to Form 990 or Form 990-EZ. ▶ See separate instructions.

OMB No 1545-0047

2010

Open to Public Inspection

Name of the organization: CCC FOUNDATION, INC.

Employer identification number: 39-1741423

Part I Reason for Public Charity Status (All organizations must complete this part.) See instructions

The organization is not a private foundation because it is: (For lines 1 through 11, check only one box.)

1 [ ] A church, convention of churches, or association of churches described in **section 170(b)(1)(A)(i).**

2 [ ] A school described in **section 170(b)(1)(A)(ii).** (Attach Schedule E.)

3 [ ] A hospital or a cooperative hospital service organization described in **section 170(b)(1)(A)(iii).**

4 [ ] A medical research organization operated in conjunction with a hospital described in **section 170(b)(1)(A)(iii).** Enter the hospital's name, city, and state: ______

5 [ ] An organization operated for the benefit of a college or university owned or operated by a governmental unit described in **section 170(b)(1)(A)(iv).** (Complete Part II.)

6 [ ] A federal, state, or local government or governmental unit described in **section 170(b)(1)(A)(v).**

7 [ ] An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in **section 170(b)(1)(A)(vi).** (Complete Part II)

8 [ ] A community trust described in **section 170(b)(1)(A)(vi).** (Complete Part II)

9 [ ] An organization that normally receives. (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions - subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975 See **section 509(a)(2).** (Complete Part III)

10 [ ] An organization organized and operated exclusively to test for public safety. See **section 509(a)(4).**

11 [X] An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2) See **section 509(a)(3).** Check the box that describes the type of supporting organization and complete lines 11e through 11h.

a [X] Type I b [ ] Type II c [ ] Type III - Functionally integrated d [ ] Type III - Other

e [ ] By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified persons other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2).

f If the organization received a written determination from the IRS that it is a Type I, Type II, or Type III supporting organization, check this box [ ]

g Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons?

		Yes	No
(i) A person who directly or indirectly controls, either alone or together with persons described in (ii) and (iii) below, the governing body of the supported organization?	11g(i)		X
(ii) A family member of a person described in (i) above?	11g(ii)		X
(iii) A 35% controlled entity of a person described in (i) or (ii) above?	11g(iii)		X

h Provide the following information about the supported organization(s).

(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1-9 above or IRC section (see instructions))	(iv) Is the organization in col. (i) listed in your governing document? Yes	No	(v) Did you notify the organization in col. (i) of your support? Yes	No	(vi) Is the organization in col. (i) organized in the U.S.? Yes	No	(vii) Amount of support
CAPITOL CIVIC CENTRE	39-1569595	501(C)(3)	X		X		X		10,050.
Total									10,050.

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

Schedule A (Form 990 or 990-EZ) 2010

032021 12-21-10

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

(Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

Section A. Public Support

Calendar year (or fiscal year beginning in) ▶	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 2010	(f) Total
1 Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants.")						
2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3 The value of services or facilities furnished by a governmental unit to the organization without charge						
4 **Total.** Add lines 1 through 3						
5 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						
6 **Public support.** Subtract line 5 from line 4						

Section B. Total Support

Calendar year (or fiscal year beginning in) ▶	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 2010	(f) Total
7 Amounts from line 4						
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
9 Net income from unrelated business activities, whether or not the business is regularly carried on						
10 Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV)						
11 **Total support.** Add lines 7 through 10						

12 Gross receipts from related activities, etc. (see instructions) 12

13 **First five years.** If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and **stop here** ▶ ☐

Section C. Computation of Public Support Percentage

14 Public support percentage for 2010 (line 6, column (f) divided by line 11, column (f)) 14 %

15 Public support percentage from 2009 Schedule A, Part II, line 14 15 %

16a **33 1/3% support test - 2010.** If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and **stop here.** The organization qualifies as a publicly supported organization ▶ ☐

b **33 1/3% support test - 2009.** If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and **stop here.** The organization qualifies as a publicly supported organization ▶ ☐

17a **10% -facts-and-circumstances test - 2010.** If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and **stop here.** Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization ▶ ☐

b **10% -facts-and-circumstances test - 2009.** If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and **stop here.** Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization ▶ ☐

18 **Private foundation.** If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions ▶ ☐

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

(Complete only if you checked the box on line 9 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)

Section A. Public Support

Calendar year (or fiscal year beginning in) ▶	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 2010	(f) Total
1 Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants ")						
2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3 Gross receipts from activities that are not an unrelated trade or business under section 513						
4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5 The value of services or facilities furnished by a governmental unit to the organization without charge						
6 **Total.** Add lines 1 through 5						
7a Amounts included on lines 1, 2, and 3 received from disqualified persons						
b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of $5,000 or 1% of the amount on line 13 for the year						
c Add lines 7a and 7b						
8 **Public support** (Subtract line 7c from line 6)						

Section B. Total Support

Calendar year (or fiscal year beginning in) ▶	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 2010	(f) Total
9 Amounts from line 6						
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
c Add lines 10a and 10b						
11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12 Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV.)						
13 **Total support** (Add lines 9, 10c, 11, and 12)						

14 **First five years.** If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and **stop here** ▶ ☐

Section C. Computation of Public Support Percentage

15	Public support percentage for 2010 (line 8, column (f) divided by line 13, column (f))	15	%
16	Public support percentage from 2009 Schedule A, Part III, line 15	16	%

Section D. Computation of Investment Income Percentage

17	Investment income percentage for **2010** (line 10c, column (f) divided by line 13, column (f))	17	%
18	Investment income percentage from **2009** Schedule A, Part III, line 17	18	%

19a **33 1/3% support tests - 2010.** If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and **stop here.** The organization qualifies as a publicly supported organization ▶ ☐

b **33 1/3% support tests - 2009.** If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and line 18 is not more than 33 1/3%, check this box and **stop here.** The organization qualifies as a publicly supported organization ▶ ☐

20 **Private foundation.** If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions ▶ ☐

SCHEDULE D (Form 990)

Department of the Treasury
Internal Revenue Service

Supplemental Financial Statements

▶ Complete if the organization answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11, or 12.
▶ Attach to Form 990. ▶ See separate instructions.

OMB No 1545-0047
2010
Open to Public Inspection

Name of the organization: CCC FOUNDATION, INC.
Employer identification number: 39-1741423

Part I **Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts.** Complete if the organization answered "Yes" to Form 990, Part IV, line 6.

		(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year		
2	Aggregate contributions to (during year)		
3	Aggregate grants from (during year)		
4	Aggregate value at end of year		

5 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? ☐ Yes ☐ No

6 Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit? ☐ Yes ☐ No

Part II **Conservation Easements.** Complete if the organization answered "Yes" to Form 990, Part IV, line 7.

1 Purpose(s) of conservation easements held by the organization (check all that apply)

☐ Preservation of land for public use (e.g., recreation or education)
☐ Preservation of an historically important land area
☐ Protection of natural habitat
☐ Preservation of a certified historic structure
☐ Preservation of open space

2 Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year.

			Held at the End of the Tax Year
a	Total number of conservation easements	2a	
b	Total acreage restricted by conservation easements	2b	
c	Number of conservation easements on a certified historic structure included in (a)	2c	
d	Number of conservation easements included in (c) acquired after 8/17/06, and not on a historic structure listed in the National Register	2d	

3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year ▶ ______

4 Number of states where property subject to conservation easement is located ▶ ______

5 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? ☐ Yes ☐ No

6 Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation easements during the year ▶ ______

7 Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year ▶ $ ______

8 Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)? ☐ Yes ☐ No

9 In Part XIV, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements.

Part III **Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets.**
Complete if the organization answered "Yes" to Form 990, Part IV, line 8.

1a If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIV, the text of the footnote to its financial statements that describes these items.

b If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items:

(i) Revenues included in Form 990, Part VIII, line 1 ▶ $ ______

(ii) Assets included in Form 990, Part X ▶ $ ______

2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items:

a Revenues included in Form 990, Part VIII, line 1 ▶ $ ______

b Assets included in Form 990, Part X ▶ $ ______

Part III | Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets *(continued)*

3 Using the organization's acquisition, accession, and other records, check any of the following that are a significant use of its collection items (check all that apply):

a ☐ Public exhibition
b ☐ Scholarly research
c ☐ Preservation for future generations
d ☐ Loan or exchange programs
e ☐ Other ____________

4 Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIV.

5 During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection? ☐ Yes ☐ No

Part IV | Escrow and Custodial Arrangements. Complete if the organization answered "Yes" to Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21

1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X? ☐ Yes ☐ No

b If "Yes," explain the arrangement in Part XIV and complete the following table:

		Amount
c Beginning balance	1c	
d Additions during the year	1d	
e Distributions during the year	1e	
f Ending balance	1f	

2a Did the organization include an amount on Form 990, Part X, line 21? ☐ Yes ☐ No

b If "Yes," explain the arrangement in Part XIV

Part V | Endowment Funds. Complete if the organization answered "Yes" to Form 990, Part IV, line 10.

	(a) Current year	(b) Prior year	(c) Two years back	(d) Three years back	(e) Four years back
1a Beginning of year balance					
b Contributions					
c Net investment earnings, gains, and losses					
d Grants or scholarships					
e Other expenditures for facilities and programs					
f Administrative expenses					
g End of year balance					

2 Provide the estimated percentage of the year end balance held as:

a Board designated or quasi-endowment ▶ ________%
b Permanent endowment ▶ ________%
c Term endowment ▶ ________%

3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by:

		Yes	No
(i) unrelated organizations	3a(i)		
(ii) related organizations	3a(ii)		
b If "Yes" to 3a(ii), are the related organizations listed as required on Schedule R?	3b		

4 Describe in Part XIV the intended uses of the organization's endowment funds.

Part VI | Land, Buildings, and Equipment. See Form 990, Part X, line 10.

Description of investment	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land				
b Buildings				
c Leasehold improvements				
d Equipment				
e Other				
Total. Add lines 1a through 1e *(Column (d) must equal Form 990, Part X, column (B), line 10(c).)* ▶				0.

Part VII Investments - Other Securities. See Form 990, Part X, line 12.

(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1) Financial derivatives		
(2) Closely-held equity interests		
(3) Other		
(A) CCC FOUNDATION		
(B) INVESTMENTS	1,069,708.	Cost
(C) JOHNSON TRUST INVESTMENTS	107,363.	Cost
(D)		
(E)		
(F)		
(G)		
(H)		
(I)		
Total. (Col (b) must equal Form 990, Part X, col (B) line 12.) ▶	1,177,071.	

Part VIII Investments - Program Related. See Form 990, Part X, line 13.

(a) Description of investment type	(b) Book value	(c) Method of valuation. Cost or end-of-year market value
(1)		
(2)		
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
(10)		
Total. (Col (b) must equal Form 990, Part X, col (B) line 13.) ▶		

Part IX Other Assets. See Form 990, Part X, line 15.

(a) Description	(b) Book value
(1)	
(2)	
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
(10)	
Total. *(Column (b) must equal Form 990, Part X, col (B) line 15.)* ▶	

Part X Other Liabilities. See Form 990, Part X, line 25.

1. (a) Description of liability	(b) Amount
(1) Federal income taxes	
(2)	
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
(10)	
(11)	
Total. *(Column (b) must equal Form 990, Part X, col (B) line 25.)* ▶	

2. FIN 48 (ASC 740) Footnote In Part XIV, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48 (ASC 740)

Part XI | Reconciliation of Change in Net Assets from Form 990 to Audited Financial Statements

1	Total revenue (Form 990, Part VIII, column (A), line 12)	1	42,843.
2	Total expenses (Form 990, Part IX, column (A), line 25)	2	42,312.
3	Excess or (deficit) for the year. Subtract line 2 from line 1	3	531.
4	Net unrealized gains (losses) on investments	4	
5	Donated services and use of facilities	5	
6	Investment expenses	6	
7	Prior period adjustments	7	34.
8	Other (Describe in Part XIV.)	8	
9	Total adjustments (net) Add lines 4 through 8	9	34.
10	Excess or (deficit) for the year per audited financial statements Combine lines 3 and 9	10	565.

Part XII | Reconciliation of Revenue per Audited Financial Statements With Revenue per Return

1	Total revenue, gains, and other support per audited financial statements			1	820,728.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:				
a	Net unrealized gains on investments	2a	210,317.		
b	Donated services and use of facilities	2b			
c	Recoveries of prior year grants	2c			
d	Other (Describe in Part XIV.)	2d	567,568.		
e	Add lines 2a through 2d			2e	777,885.
3	Subtract line 2e from line 1			3	42,843.
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1.				
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a			
b	Other (Describe in Part XIV)	4b			
c	Add lines 4a and 4b			4c	0.
5	Total revenue Add lines 3 and 4c. *(This must equal Form 990, Part I, line 12.)*			5	42,843.

Part XIII | Reconciliation of Expenses per Audited Financial Statements With Expenses per Return

1	Total expenses and losses per audited financial statements			1	760,903.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25.				
a	Donated services and use of facilities	2a			
b	Prior year adjustments	2b			
c	Other losses	2c			
d	Other (Describe in Part XIV.)	2d	718,591.		
e	Add lines 2a through 2d			2e	718,591.
3	Subtract line 2e from line 1			3	42,312.
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:				
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a			
b	Other (Describe in Part XIV.)	4b			
c	Add lines 4a and 4b			4c	0.
5	Total expenses. Add lines 3 and 4c. *(This must equal Form 990, Part I, line 18)*			5	42,312.

Part XIV | Supplemental Information

Complete this part to provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, lines 1b and 2b; Part V, line 4; Part X, line 2; Part XI, line 8; Part XII, lines 2d and 4b, and Part XIII, lines 2d and 4b Also complete this part to provide any additional information.

Part XII, Line 2d - Other Adjustments:

Revenues related to Capitol Civic Centre Inc.	567,567.
Rounding	1.
Total to Schedule D, Part XII, Line 2d	567,568.

Part XIII, Line 2d - Other Adjustments:

Expenses related to Capitol Civic Centre, Inc.	718,591.

SCHEDULE I
(Form 990)

Department of the Treasury
Internal Revenue Service

Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

Complete if the organization answered "Yes" to Form 990, Part IV, line 21 or 22.
▶ Attach to Form 990.

OMB No 1545-0047
2010
Open to Public Inspection

Name of the organization: CCC FOUNDATION, INC.
Employer identification number: 39-1741423

Part I General Information on Grants and Assistance

1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? ☐ Yes ☒ No

2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

Part II Grants and Other Assistance to Governments and Organizations in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 21, for any recipient that received more than $5,000. Check this box if no one recipient received more than $5,000. Part II can be duplicated if additional space is needed .. ▶ ☐

1 (a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Capital Civic Center, Inc. PO Box 399 Manitowoc, WI 54220	39-1569595	501(c)(3)	35,897.	0.			Support Local Theatre Operations

2 Enter total number of section 501(c)(3) and government organizations ▶ 1.

3 Enter total number of other organizations ▶ 1.

LHA **For Paperwork Reduction Act Notice, see the Instructions for Form 990.** **Schedule I (Form 990) (2010)**

032101 01-13-11

Part III **Grants and Other Assistance to Individuals in the United States.** Complete if the organization answered "Yes" to Form 990, Part IV, line 22.
Part III can be duplicated if additional space is needed.

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non-cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of non-cash assistance

Part IV **Supplemental Information.** Complete this part to provide the information required in Part I, line 2, and any other additional information.

SCHEDULE O (Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

Complete to provide information for responses to specific questions on Form 990 or 990-EZ or to provide any additional information.
▶ Attach to Form 990 or 990-EZ.

OMB No 1545-0047
2010
Open to Public Inspection

Name of the organization	Employer identification number
CCC FOUNDATION, INC.	39-1741423

Form 990, Part I, Item K, Other Organization Type:

Foundation

Form 990, Part VI, Section B, line 11: The 990 was reviewed by the Foundation President before signing and mailing.

Form 990, Part VI, Section C, Line 19: Documents available upon request.

Form 990, Part XI, line 5, Changes in Net Assets:

Prior period adjustments: 34.

SCHEDULE R
(Form 990)
Department of the Treasury
Internal Revenue Service

Related Organizations and Unrelated Partnerships

▶ Complete if the organization answered "Yes" to Form 990, Part IV, line 33, 34, 35, 36, or 37.
▶ Attach to Form 990. ▶ See separate instructions.

OMB No 1545-0047
2010
Open to Public Inspection

Name of the organization: CCC FOUNDATION, INC.

Employer identification number: 39-1741423

Part I **Identification of Disregarded Entities** (Complete if the organization answered "Yes" to Form 990, Part IV, line 33.)

(a) Name, address, and EIN of disregarded entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Total income	(e) End-of-year assets	(f) Direct controlling entity

Part II **Identification of Related Tax-Exempt Organizations** (Complete if the organization answered "Yes" to Form 990, Part IV, line 34 because it had one or more related tax-exempt organizations during the tax year.)

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501(c)(3))	(f) Direct controlling entity	(g) Section 512(b)(13) controlled entity? Yes	No
Capitol Civic Centre Inc. - 39-1569595 PO Box 399 Manitowoc, WI 54221-0399	Theatre	Wisconsin	501(c)(3)	Line 11a, I			X

For Paperwork Reduction Act Notice, see the Instructions for Form 990. **Schedule R (Form 990) 2010**

032161
12-21-10 LHA

Part III Identification of Related Organizations Taxable as a Partnership (Complete if the organization answered "Yes" to Form 990, Part IV, line 34 because it had one or more related organizations treated as a partnership during the tax year.)

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Predominant income (related, unrelated, excluded from tax under sections 512-514)	(f) Share of total income	(g) Share of end-of-year assets	(h) Disproportionate allocations? Yes	(h) No	(i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner? Yes	(j) No	(k) Percentage ownership

Part IV Identification of Related Organizations Taxable as a Corporation or Trust (Complete if the organization answered "Yes" to Form 990, Part IV, line 34 because it had one or more related organizations treated as a corporation or trust during the tax year)

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	(f) Share of total income	(g) Share of end-of-year assets	(h) Percentage ownership

Part V Transactions With Related Organizations (Complete if the organization answered "Yes" to Form 990, Part IV, line 34, 35, 35a, or 36.)

			Yes	No
Note. Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule.				
1	During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?			
a	Receipt of **(i)** interest **(ii)** annuities **(iii)** royalties or **(iv)** rent from a controlled entity	1a		X
b	Gift, grant, or capital contribution to other organization(s)	1b	X	
c	Gift, grant, or capital contribution from other organization(s)	1c		X
d	Loans or loan guarantees to or for other organization(s)	1d		X
e	Loans or loan guarantees by other organization(s)	1e		X
f	Sale of assets to other organization(s)	1f		X
g	Purchase of assets from other organization(s)	1g		X
h	Exchange of assets	1h		X
i	Lease of facilities, equipment, or other assets to other organization(s)	1i		X
j	Lease of facilities, equipment, or other assets from other organization(s)	1j		X
k	Performance of services or membership or fundraising solicitations for other organization(s)	1k		X
l	Performance of services or membership or fundraising solicitations by other organization(s)	1l		X
m	Sharing of facilities, equipment, mailing lists, or other assets	1m		X
n	Sharing of paid employees	1n		X
o	Reimbursement paid to other organization for expenses	1o		X
p	Reimbursement paid by other organization for expenses	1p		X
q	Other transfer of cash or property to other organization(s)	1q		X
r	Other transfer of cash or property from other organization(s)	1r		X

2 If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thresholds.

(a) Name of other organization	(b) Transaction type (a-r)	(c) Amount involved	(d) Method of determining amount involved
(1) Capitol Civic Centre, Inc.	B	35,897.	Cash payments
(2)			
(3)			
(4)			
(5)			
(6)			

Part VI **Unrelated Organizations Taxable as a Partnership** (Complete if the organization answered "Yes" to Form 990, Part IV, line 37.)

Provide the following information for each entity taxed as a partnership through which the organization conducted more than five percent of its activities (measured by total assets or gross revenue) that was not a related organization. See instructions regarding exclusion for certain investment partnerships

(a) Name, address, and EIN of entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Are all partners section 501(c)(3) organizations?		(e) Share of end-of-year assets	(f) Disproportionate allocations?		(g) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	(h) General or managing partner?	
			Yes	No		Yes	No		Yes	No

Part VII Supplemental Information

Complete this part to provide additional information for responses to questions on Schedule R (see instructions)

CAPITOL CIVIC CENTRE, INC.

FINANCIAL STATEMENTS
WITH INDEPENDENT AUDITOR'S REPORT

June 30, 2011 and 2010

CAPITOL CIVIC CENTRE, INC.
TABLE OF CONTENTS
June 30, 2011

Gerald H Kroening, CPA, 1973-2005
Eugene J Stangel, CPA
Dennis J Swetlik, CPA
Timothy E Zinkel, CPA

Lee C Whitney, CPA
Randal G Kahler, CPA
Debra L Braun, CPA
Amanda S Zeman, CPA
Brenda A Pike
Debra A Ney
Renee C Hilbelink

KROENING, STANGEL, & SWETLIK & ZINKEL LLP
CERTIFIED PUBLIC ACCOUNTANTS

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404 North 10th Street
Manitowoc, WI 54220
Phone 920 684 6668
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Two Rivers Office
1614 Washington Street
Two Rivers, WI 54241
Phone 920 793 3118

INDEPENDENT AUDITOR'S REPORT

To the Board of Directors and Finance Committee of
Capitol Civic Centre, Inc.
Manitowoc, Wisconsin

We have audited the accompanying combined statements of financial position of Capitol Civic Centre, Inc. (a Wisconsin nonprofit corporation) and its affiliate as of June 30, 2011 and 2010, and the related combined statements of activities and combined statements of cash flows for the years then ended. These combined financial statements are the responsibility of the Organization's management. Our responsibility is to express an opinion on these combined financial statements based on our audits.

We conducted our audits in accordance with auditing standards generally accepted in the United States of America. Those standards require that we plan and perform the audits to obtain reasonable assurance about whether the combined financial statements are free of material misstatement. An audit includes examining, on a test basis, evidence supporting the amounts and disclosures in the combined financial statements. An audit also includes assessing the accounting principles used and significant estimates made by management, as well as evaluating the overall financial statement presentation. We believe that our audits provide a reasonable basis for our opinions.

In our opinion, the combined financial statements referred to above present fairly, in all material respects, the financial position of Capitol Civic Centre, Inc. and its affiliate, as of June 30, 2011 and 2010, and the changes in their net assets and their cash flows for the years then ended in conformity with accounting principles generally accepted in the United States of America.

Our audits were conducted for the purpose of forming an opinion on the combined financial statements as a whole. The schedules of expense detail and schedules of activities – by fund on pages 13 and 14 are presented for purposes of additional analysis and are not a required part of the combined financial statements. Such information is the responsibility of management and was derived from and relates directly to the underlying accounting and other records used to prepare the combined financial statements. The information has been subjected to the auditing procedures applied in the audit of the combined financial statements and certain additional procedures, including comparing and reconciling such information directly to the underlying accounting and other records used to prepare the combined financial statements or to the combined financial statements themselves, and other additional procedures in accordance with auditing standards generally accepted in the United States of America. In our opinion, the information is fairly stated in all material respects in relation to the combined financial statements as a whole.

Kroening, Stangel, Swetlik + Zinkel LLP
Manitowoc, Wisconsin
October 17, 2011

CAPITOL CIVIC CENTRE, INC.

COMBINED STATEMENTS OF FINANCIAL POSITION

June 30, 2011 and 2010

ASSETS

	6/30/11	6/30/10
CURRENT ASSETS		
Cash and cash equivalents	$ 24,139	$ 106,608
Miscellaneous receivables	1,525	767
Prepaid expenses and vouchers	19,885	11,927
Inventory	1,418	1,418
Total Current Assets	$ 46,967	$ 120,720
PROPERTY AND EQUIPMENT (NET)	$ 1,762,123	$ 1,827,042
INVESTMENTS (AT FAIR MARKET VALUE)	$ 1,284,482	$ 1,075,010
TOTAL ASSETS	$ 3,093,572	$ 3,022,722

LIABILITIES AND NET ASSETS

	6/30/11	6/30/10
CURRENT LIABILITIES		
Accounts payable	$ 8,269	$ 18,085
Other accrued liabilities	4,458	7,090
Deferred revenue	78,759	140,336
Line of credit	85,000	-
Total Current Liabilities	$ 176,486	$ 165,511
NET ASSETS		
Unrestricted	$ 1,786,564	$ 1,702,644
Temporarily restricted	5,855	40,000
Permanently restricted	1,124,667	1,114,617
Total Net Assets	$ 2,917,086	$ 2,857,261
TOTAL LIABILITIES AND NET ASSETS	$ 3,093,572	$ 3,022,772

The accompanying notes are an integral part of these statements.

CAPITOL CIVIC CENTRE, INC.
COMBINED STATEMENTS OF ACTIVITIES
For the Years Ended June 30, 2011 and 2010

	Year Ended June 30, 2011			
	Unrestricted	Temporarily Restricted	Permanently Restricted	Total
REVENUE, GAINS, AND OTHER SUPPORT				
Program revenue	$ 274,782	$ -	$ -	$ 274,782
Performances and other rentals	46,939	-	-	46,939
Ticket service revenue	53,880	-	-	53,880
Membership revenue	57,724	-	-	57,724
Facility fee income	24,142	-	-	24,142
Other revenue	50,963	-	-	50,963
Contributions	6,893	40,100	10,050	57,043
Grants	11,661	-	-	11,661
In-kind donations	200	-	-	200
Interest and dividends	27,371	-	-	27,371
Realized and unrealized gain (loss)	216,023	-	-	216,023
Net assets released from restrictions	74,245	(74,245)	-	-
TOTAL REVENUE, GAINS, AND OTHER SUPPORT	$ 844,823	($ 34,145)	$ 10,050	$ 820,728
EXPENSES				
Direct program expenses	$ 457,510	$ -	$ -	$ 457,510
Management and operating expenses	272,705	-	-	272,705
Fundraising expenses	30,688	-	-	30,688
TOTAL EXPENSES	$ 760,903	$ -	$ -	$ 760,903
CHANGE IN NET ASSETS	$ 83,920	($ 34,145)	$ 10,050	$ 59,825
NET ASSETS AT BEGINNING OF YEAR	1,702,644	40,000	1,114,617	2,857,261
NET ASSETS AT END OF YEAR	$ 1,786,564	$ 5,855	$ 1,124,667	$ 2,917,086

The accompanying notes are an integral part of these statements.

Year Ended June 30, 2010

Unrestricted	Temporarily Restricted	Permanently Restricted	Total
$ 319,508	$ -	$ -	$ 319,508
53,685	-	-	53,685
51,337	-	-	51,337
63,229	-	-	63,229
26,824	-	-	26,824
42,770	-	-	42,770
14,904	40,000	187,595	242,499
2,800			2,800
-	-	-	-
23,967	-	-	23,967
72,943	-	-	72,943
34,768	(34,768)	-	-
$ 706,735	$ 5,232	$ 187,595	$ 899,562
$ 450,684	$ -	$ -	$ 450,684
243,409	-	-	243,409
58,974	-	-	58,974
$ 753,067	$ -	$ -	$ 753,067
($ 46,332)	$ 5,232	$ 187,595	$ 146,495
1,748,976	34,768	927,022	2,710,766
$ 1,702,644	$ 40,000	$ 1,114,617	$ 2,857,261

CAPITOL CIVIC CENTRE, INC.
COMBINED STATEMENTS OF CASH FLOWS
For the Years Ended June 30, 2011 and 2010

	6/30/11	6/30/10
CASH FLOWS FROM OPERATING ACTIVITIES		
Change in net assets	$ 59,825	$ 146,495
Adjustments to reconcile change in net assets to net cash provided by operating activities		
Depreciation	84,384	86,784
(Gain) loss on investments	(216,023)	(68,061)
Contributions to permanently restricted assets	(10,050)	(187,595)
(Increase) decrease in operating assets		
Miscellaneous receivables	(758)	(713)
Prepaid expenses and vouchers	(7,958)	2,111
Inventory	-	-
Increase (decrease) in operating liabilities		
Accounts payable	(9,816)	9,962
Other accrued liabilities	(2,632)	(51)
Deferred revenue	(61,577)	35,021
NET CASH PROVIDED BY OPERATING ACTIVITIES	($ 164,605)	$ 23,953
CASH FLOWS FROM INVESTING ACTIVITIES		
Purchase of buildings and equipment	($ 19,466)	$ -
Net investment activity	16,602	5,363
NET CASH PROVIDED (USED) BY INVESTING ACTIVITIES	($ 2,864)	$ 5,363
CASH FLOWS FROM FINANCING ACTIVITIES		
Net borrowings (payments) on debt	$ 85,000	$ -
NET CASH PROVIDED (USED) BY FINANCING ACTIVITIES	$ 85,000	$ -
NET INCREASE (DECREASE) IN CASH	($ 82,469)	$ 29,316
CASH AT BEGINNING OF YEAR	106,608	77,292
CASH AT END OF YEAR	$ 24,139	$ 106,608

The accompanying notes are an integral part of these statements.

NOTE 1 – SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES

Nature of Activities

The Capitol Civic Centre, Inc. is a not-for-profit organization incorporated in Manitowoc, Wisconsin, in 1986. Its purpose is to encourage the preservation and operation of what previously was known as the Capitol Theatre. Included in this purpose is an enriching of the cultural heritage of the citizens of Manitowoc County and also an encouragement of education in the arts. During the year ended June 30, 1995, the organization changed its legal name from The Society to Preserve the Capitol, Inc. to Capitol Civic Centre, Inc. The Organization's primary sources of revenue are income earned from various programs and individual, corporate and foundation contributions. The combined financial statements include the accounts of the Organization and its endowment, Capitol Civic Centre Foundation, Inc.

Basis of Accounting

The combined financial statements of the Organization have been prepared on the accrual basis of accounting and accordingly reflect all significant receivables, payables, and other liabilities.

Net Asset Accounting

In accordance with the limitations, designations and restrictions placed on the use of resources available to the Organization, the following classifications are utilized according to the nature and purpose of the resources:

- Unrestricted Net Assets – Unrestricted net assets represent net assets that are not subject to donor imposed restrictions. Contributions are considered to be available for unrestricted use unless specifically restricted by the donor.

- Temporarily Restricted Net Assets – Temporarily restricted net assets are subject to donor-imposed restrictions that may or will be met, either by actions of the Organization and/or the passage of time. When a restriction is satisfied, temporarily restricted net assets are transferred to unrestricted net assets and are reported in the statement of activities as net assets released from restrictions.

- Permanently Restricted Net Assets – Permanently restricted net assets are subject to donor-imposed restrictions that will not terminate. Funds are held in perpetuity while the income is available for general use. Permanently restricted net assets also reflect the Organization's beneficial interest in various irrevocable trusts.

Deferred Revenue

Income from sponsorships and sales of tickets for future performances is deferred and recognized in the period in which the performance occurs.

Donated Assets

Donated marketable securities and other noncash donations are recorded as contributions at their estimated fair values at the date of donation.

NOTE 1 – SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES

Nature of Activities

The Capitol Civic Centre, Inc. is a not-for-profit organization incorporated in Manitowoc, Wisconsin, in 1986. Its purpose is to encourage the preservation and operation of what previously was known as the Capitol Theatre. Included in this purpose is an enriching of the cultural heritage of the citizens of Manitowoc County and also an encouragement of education in the arts. During the year ended June 30, 1995, the organization changed its legal name from The Society to Preserve the Capitol, Inc. to Capitol Civic Centre, Inc. The Organization's primary sources of revenue are income earned from various programs and individual, corporate and foundation contributions. The combined financial statements include the accounts of the Organization and its endowment, Capitol Civic Centre Foundation, Inc.

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Donated Assets

Donated marketable securities and other noncash donations are recorded as contributions at their estimated fair values at the date of donation.

NOTE 1 – SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES – (CONTINUED)

Subsequent Events

Management has evaluated subsequent events through October 17, 2011, the date on which the combined financial statements were available to be issued.

Donated Services

No material amounts have been reflected in the combined financial statements for donated services. The Organization pays for most services requiring specific expertise. However, many individuals volunteer their time and perform a variety of tasks that assist the Organization with specific programs, campaign solicitations, and various committee assignments.

Estimates

The preparation of combined financial statements in conformity with generally accepted accounting principles requires management to make estimates and assumptions that affect certain reported amounts and disclosures. Accordingly, actual results could differ from those estimates.

Inventories

Inventories are generally stated at the lower of cost (first-in, first-out) or market.

Income Tax Status

The Organization is exempt from federal income tax under Section 501(c)(3) of the Internal Revenue Code. In addition, the Organization qualifies for the charitable contribution deduction under Section 170(b)(1)(A) and has been classified as an organization that is not a private foundation under Section 509(a)(2).

Management has elected to apply FASB ASC740-10. This FASB details the accounting and disclosure requirements for the uncertainty in the income taxes. As of the end of the year there were no uncertain income tax positions. Management reviews the current tax positions on an annual basis to determine the uncertainty of them. The Company's informational tax returns for the years ended June 30, 2009, 2010, and 2011 are subject to examination by the Internal Revenue Service for three years after they were filed.

Property and Equipment

All significant acquisitions of property and equipment and all expenditures for repairs and maintenance that materially prolong the useful lives of assets are capitalized. Property and equipment are carried at cost or, if donated, at the approximate fair value at the date of donation. All acquisitions of property and equipment in excess of $500 are capitalized. Depreciation is computed using the straight-line method over the estimated useful lives of the assets as follows:

Building	40-60 years
Improvements	10-40 years
Fixtures & Equipment	5-20 years

NOTE 2 – CASH AND INVESTMENTS

The Organization maintains balances at various financial institutions. Accounts at each institution are insured by the Federal Deposit Insurance Corporation up to $250,000. There were no uninsured balances at June 30, 2011 and 2010.

Investments of the Capitol Civic Centre Foundation, Inc. consist of:

	6/30/11	6/30/10
National City Bank 4.625%	$ 26,348	$ 26,533
Target Corp Bond 5.375%	45,709	45,551
Federated 39 Investors Max-Cap Index Fund	103,656	80,618
First National Bank Money Market Trust	69,485	95,560
Emerging Mkts I shares (ETF)	23,657	18,548
Sector SPDR (ETF)	40,661	33,201
Dodge & Cox	76,924	59,377
The Manitowoc Co.	46,057	24,998
T. Rowe Price Capital	89,370	74,083
Vanguard Dividend Growth	65,947	51,946
Vanguard Morgan	118,265	87,747
Vanguard Small-cap	85,462	58,580
Vanguard Mid-cap	114,775	83,791
Dodge & Cox	10,895	8,410
T. Rowe Price	16,333	14,465
Vanguard Morgan Growth	16,878	12,525
Vanguard Small-cap Growth	7,550	5,175
Vanguard Mid-cap	11,373	9,181
Federated 36 Investors	14,728	14,922
Federated 288 Total Return	13,207	13,171
Bank First National,Money Market Trust	1,148	1,464
Bank First National CD .45%	-	30,071
Federated 39 Investors Max-Cap Index Fund	19,653	15,060
Allstate Corp. Bond 6.125%	31,011	32,160
Discover Bank CD 4.45%	25,411	26,187
General Electric Capital Corp. Bond 5%	27,327	26,363
General Electric Capital Corp. Bond 6%	26,286	26,903
General Electric Capital Corp. Bond 5.25%	32,261	31,381
Paccar Inc. Bond 6.875%	28,543	28,963
Wachovia Mortgage Bank CD 5%	31,938	32,056
US Healthcare SEC (ETF)	14,756	-
Dow Jones US Energy Sector (ETF)	8,612	-
AMEX Technology (ETF)	10,280	-
General Electric	25,330	-
	$ 1,279,836	$ 1,068,990

NOTE 2 – CASH AND INVESTMENTS - continued

FASB ASC 820, Fair Value Measurements, establishes a fair value hierarchy that prioritizes the inputs to valuation techniques used to measure fair value. This hierarchy consists of three broad levels. The organization uses level 1 inputs to measure the fair value of its investments. Level 1 inputs consist of unadjusted quoted market prices for identical assets and have the highest priority and provide the most reliable evidence of fair value.

NOTE 3 – PROPERTY AND EQUIPMENT

Property and equipment consisted of the following:

	6/30/11	6/30/10
Parking lot	$ 42,892	$ 42,892
Theatre building	225,620	225,620
Kadow Museum	86,500	86,500
Capitol Civic Centre Annex	60,000	60,000
Remodeling costs and improvements	2,173,435	2,173,435
Fixtures and equipment	726,853	707,388
	$ 3,315,300	$ 3,295,835
Less accumulated depreciation	1,553,177	1,468,793
NET PROPERTY AND EQUIPMENT	$ 1,762,123	$ 1,827,042

Depreciation expense for the years ending June 30, 2011 and June 30, 2010 was $84,384 and $86,784 respectively.

NOTE 4 - OPERATING LINE OF CREDIT

The Organization had a $100,000 and a $50,000 line of credit from Bank First National, Manitowoc, WI available at June 30, 2011 and 2010. The outstanding balances were $85,000 and $0 at June 30, 2011 and 2010, respectively. The current rate of interest on this line of credit is 5.5% and it is secured by a general business security agreement.

NOTE 5 – RESTRICTED NET ASSETS

Temporarily Restricted Net Assets

Temporarily restricted net assets consist of amounts restricted for building repairs and equipment upgrades.

Permanently Restricted Net Assets

Permanently restricted net assets are the Capitol Civic Centre Foundation, Inc. endowment fund and the J. O. & Victoria & Eileen Johnson Trust. The Johnson Trust is restricted for use for the construction of a covered parking ramp or for endowment purposes with the income to be used for general purposes of the Capitol Civic Centre, Inc.

NOTE 6 – SELF-FUNDED UNEMPLOYMENT COMPENSATION

The Organization has elected under Wisconsin law to be self-funded for claims of unemployment compensation by former employees. Under this self-funded arrangement, the Organization does not pay unemployment compensation tax but rather must reimburse the state for all claims paid.

The Organization was required to purchase a certificate of deposit in the amount of $4,288 as a bond to guarantee future payments.

NOTE 7 – ADVERTISING

Prepaid expenses include $0 and $8,197 of advertising costs for June 30, 2011 and 2010, respectively. Advertising costs are charged to expense in the year incurred. Advertising expenses for the years ended June 30, 2011 and 2010 were $45,849 and $40,993, respectively

NOTE 8 – CERTIFICATES OF DEPOSIT

A certificate of deposit totaling $4,644 is included in cash in the accompanying combined financial statements. It is an unemployment fund certificate of deposit. Any penalties for early withdrawal would not have a material effect on the combined financial statements.

NOTE 9 – CONCENTRATIONS OF CONTRIBUTIONS

For the years ending June 30, 2011 and 2010, the organization received contributions from one donor representing 5% and 9% of total contributions, respectively.

NOTE 10 – ENDOWMENT FUNDS

The Organization's permanently restricted assets consist of diversified mix of investments as detailed in footnote 2. The Foundation has been established to provide a total return to supplement the operating and capital needs of the Capitol Civic Centre.

Included in this fund is the Johnson Trust, the principal of which was designated by the donor for construction of a parking garage. As the income generated from this trust may be available to support the operations of the Capitol Civic Centre, it has been commingled with the endowment fund assets and managed under the same investment policy.

The foundation follows the Uniform Management of Institutional Funds Act of 1972 (UMIFA) and its own governing documents. UMIFA requires the historical dollar amount of a donor-restricted endowment fund to be preserved. In absence of donor restrictions, the net appreciation on a donor-restricted endowment fund is spendable under UMIFA. The foundation's donors have not placed restrictions on the investment income or net appreciation resulting from the donor-restricted funds.

Investment Return Objectives, Risk Parameters and Strategies

The Foundation has adopted a statement of investment policy, approved by the Foundation's Board of Trustees, for its endowment assets that attempt to provide a predictable stream of income to the organization while also maintaining the purchasing power of those endowment assets over

NOTE 10 – ENDOWMENT FUNDS – continued

the long-term. Accordingly, the investment process seeks to achieve a total real rate of return, including investment income as well as capital appreciation, which exceeds the annual distribution with acceptable levels of risk. Endowment assets are invested in a well diversified asset mix, which includes equity and debt securities, that is intended to result in a consistent rate of return that has sufficient liquidity to make an annual distribution of 3.5%, while growing the funds if possible. Therefore, the Foundation expects its endowment assets, over time, to produce a rate of return to equal or exceed a return higher than the Endowment & Foundation Index or other benchmarks as determined by the Board of Directors. Actual returns in any given year may vary from this amount. The investment policies related to the Organization's beneficial interests in perpetual assets are determined by the trustees of those perpetual assets rather than the Organization.

Spending Policy

The Organization has a policy of appropriating for distribution each year 3.5% of its endowment fund's average fair value of the prior year. In establishing this policy, the Organization considered the long-term expected return on its investment assets, the nature and duration of the individual endowment funds, many of which must be maintained in perpetuity because of donor-restrictions, and the possible effects of inflation. The Organization expects the current spending policy to allow its endowment funds to grow at a nominal average rate, which is consistent with the Organization's objective to maintain the purchasing power of the endowment assets, as well as to provide additional real growth through investment return.

Endowment net asset composition by type of fund as of June 30, 2011 is as follows:

	Unrestricted	Permanently Restricted	Total
Donor-restricted endowment funds	-	$ 1,124,666	$ 1,124,666
Unrestricted donor-advised funds	$ 155,170	-	$ 155,170
Total funds	$ 155,170	$ 1,124,666	$ 1,279,836

Changes in endowment net assets as of June 30, 2011 are as follows:

	Unrestricted	Permanently Restricted	Total Net Endowment Assets
Endowment net assets, beginning of year	($ 45,626)	$ 1,114,616	$ 1,068,990
Contributions	-	10,050	10,050
Investment income	27,086	-	27,086
Net appreciation (depreciation)	216,022	-	216,022
Amounts appropriated for expenditure	(42,312)	-	(42,312)
Total funds	$ 155,170	$ 1,124,666	$ 1,279,836

NOTE 11 – RELATED PARTY

During the year the organization pays for printing services to a company which is owned by a board member of the organization. The total paid for the year ended June 30, 2011 was $24,098.

Note 12 – FUNCTIONAL EXPENSES

Total expenses of the organization are allocated between three functions on the combined statement of activities. These functions and definitions of each are listed below:

Direct Program Expenses
An organizations direct program expenses are those used to carry out and fulfill its mission purpose that result in goods or services being distributed to beneficiaries, customers, or members. Program expenses include both direct and indirect costs of providing services.

Management and Operating Expenses
An organization's management and operating expenses are those that are not identifiable with any other specific function, but provide for the overall support and direction of the organization.

Fundraising Expenses
An organization's fundraising expenses are those expenses associated with the efforts of raising money to run the operations of the organization.

The allocations of wages as of June 30, 2011 to the three above functions are as follows:

	Direct Program	Management & Operations	Fundraising	Total
Executive Director	-	50%	50%	100%
Operations Director	-	95%	5%	100%
Marketing Director	-	90%	10%	100%
Technical Director	30%	70%	-	100%
All Other Employees	100%	-	-	100%

SUPPLEMENTAL INFORMATION

CAPITOL CIVIC CENTRE, INC.
SUPPLEMENTAL SCHEDULES OF EXPENSE DETAIL
For the Years Ended June 30, 2011 and 2010

	6/30/11	6/30/10
DIRECT PROGRAM EXPENSES		
Salaries and wages	$ 95,217	$ 91,892
Payroll taxes and benefits	9,135	7,573
Artist fees and production expenses	162,481	175,830
Technical	30,270	27,881
Printing	6,935	6,595
Publicity	48,232	40,993
Concessions	7,239	5,603
Depreciation	84,384	86,784
Miscellaneous expenses	13,617	7,533
TOTAL DIRECT PROGRAM EXPENSES	$ 457,510	$ 450,684
MANAGEMENT AND OPERATING EXPENSES		
Salaries and wages	$ 76,814	$ 71,591
Payroll taxes and benefits	24,778	22,325
Insurance	16,918	17,394
Utilities	54,049	66,625
Repairs and maintenance	29,874	10,912
Licenses	6,034	2,607
Office expenses	16,159	11,582
Ticket service and credit card expenses	21,609	16,877
Professional fees	15,738	14,775
Fiduciary fees	6,415	5,572
Other operating expenses	4,317	3,149
TOTAL MANAGEMENT AND OPERATING EXPENSES	$ 272,705	$ 243,409
FUNDRAISING EXPENSES		
Salaries and wages	$ 23,263	$ 42,888
Payroll taxes and benefits	6,025	13,374
Fundraising expense	1,400	2,712
TOTAL FUNDRAISING EXPENSES	$ 30,688	$ 58,974

The accompanying notes are an integral part of these statements.

CAPITOL CIVIC CENTRE, INC.
SUPPLEMENTAL SCHEDULES OF ACTIVITIES – BY FUND
For the Years Ended June 30, 2011 and 2010

	Year Ended June 30, 2011		
	Operating Fund	Endowment Fund	Total
REVENUE, GAINS, AND OTHER SUPPORT			
Program revenue	$ 274,782	$ -	$ 274,782
Performances and other rentals	46,939	-	46,939
Ticket service revenue	53,880	-	53,880
Membership revenue	57,724	-	57,724
Facility fee income	24,142	-	24,142
Other revenue	50,963	-	50,963
Contributions	46,993	10,050	57,043
Grant	11,661	-	11,661
In-kind donations	200	-	200
Interest and dividends	284	27,087	27,371
Realized and unrealized gain (loss)	-	216,023	216,023
TOTAL REVENUE, GAINS, AND OTHER SUPPORT	$ 567,568	$ 253,160	$ 820,728
EXPENSES			
Direct program expenses	$ 457,510	$ -	$ 457,510
Management and operating expenses	266,290	6,415	272,705
Fundraising expenses	30,688	-	30,688
TOTAL EXPENSES	$ 754,488	$ 6,415	$ 760,903
EXCESS (DEFICIT) OF REVENUE OVER EXPENSES	($ 186,920)	$ 246,745	$ 59,825
TRANSFERS IN (OUT)	35,897	(35,897)	-
Change in net assets	($ 151,023)	$ 210,848	$ 59,825
NET ASSETS AT BEGINNING OF YEAR	$ 1,788,271	$ 1,068,990	$ 2,857,261
NET ASSETS AT END OF YEAR	$ 1,637,248	$ 1,279,838	$ 2,917,086

The accompanying notes are an integral part of these statements.

Year Ended June 30, 2010		
Operating Fund	Endowment Fund	Total
$ 319,508	$ -	$ 319,508
53,685	-	53,685
51,337	-	51,337
63,229	-	63,229
26,824	-	26,824
42,770	-	42,770
54,904	187,595	242,499
2,800	-	2,800
-	-	-
369	23,598	23,967
2,473	70,470	72,943
$ 617,899	$ 281,663	$ 899,562
$ 450,684	$ -	$ 450,684
237,837	5,572	243,409
58,974	-	58,974
$ 747,495	$ 5,572	$ 753,067
($ 129,596)	$ 276,091	$ 146,495
28,271	(28,271)	-
($ 101,325)	$ 247,820	$ 146,495
$ 1,889,596	$ 821,170	$ 2,710,766
$ 1,788,271	$ 1,068,990	$ 2,857,261

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

Application for Extension of Time To File an Exempt Organization Return

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

OMB No 1545-1709

- If you are filing for an **Automatic 3-Month Extension, complete only Part I** and check this box ▶ [X]
- If you are filing for an **Additional (Not Automatic) 3-Month Extension, complete only Part II** (on page 2 of this form).

Do not complete Part II unless you have already been granted an automatic 3-month extension on a previously filed Form 8868.

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

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

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

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

Type or print	Name of exempt organization	Employer identification number
	CCC FOUNDATION, INC.	39-1741423
File by the due date for filing your return See instructions	Number, street, and room or suite no. If a P.O box, see instructions. PO BOX 399	
	City, town or post office, state, and ZIP code. For a foreign address, see instructions. MANITOWOC, WI 54221-0399	

Enter the Return code for the return that this application is for (file a separate application for each return) 0 1

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

- The books are in the care of ▶ Ihlenfeld, Skatrud & Anderson, Inc. 429 N. 9th Street - Manitowoc, WI 54220

  Telephone No ▶ 920-682-6365 FAX No. ▶ 920-682-5499
- If the organization does not have an office or place of business in the United States, check this box ▶ [ ]
- If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) ______ . If this is for the whole group, check this box ▶ [ ] . If it is for part of the group, check this box ▶ [ ] and attach a list with the names and EINs of all members the extension is for.

1 I request an automatic 3-month (6 months for a corporation required to file Form 990-T) extension of time until February 15, 2012 , to file the exempt organization return for the organization named above The extension is for the organization's return for:

▶ [ ] calendar year ______ or

▶ [X] tax year beginning JUL 1, 2010 , and ending JUN 30, 2011 .

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

3a	If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits See instructions.	3a	$ 0.
b	If this application is for Form 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated tax payments made Include any prior year overpayment allowed as a credit	3b	$ 0.
c	**Balance due.** Subtract line 3b from line 3a Include your payment with this form, if required, by using EFTPS (Electronic Federal Tax Payment System) See instructions.	3c	$ 0.

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

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

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

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

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

Type or print

File by the extended due date for filing your return See instructions

Name of exempt organization: CCC FOUNDATION, INC.

Employer identification number: 39-1741423

Number, street, and room or suite no. If a P.O. box, see instructions.: PO BOX 399

City, town or post office, state, and ZIP code. For a foreign address, see instructions.: MANITOWOC, WI 54221-0399

Enter the Return code for the return that this application is for (file a separate application for each return) 0 1

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

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

- The books are in the care of ▶ Ihlenfeld, Skatrud & Anderson, Inc. 429 N. 9th Street - Manitowoc, WI 54220

Telephone No. ▶ 920-682-6365 FAX No. ▶ 920-682-5499

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

4 I request an additional 3-month extension of time until May 15, 2012 .

5 For calendar year ______ , or other tax year beginning JUL 1, 2010 , and ending JUN 30, 2011 .

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

7 State in detail why you need the extension

ALL RELEVANT INFORMATION NECESSARY TO COMPLETE AN ACCURATE RETURN IS STILL UNAVAILABLE AT THIS TIME.

8a	If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions.	8a	$ 0.
b	If this application is for Form 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit and any amount paid previously with Form 8868.	8b	$ 0.
c	**Balance due.** Subtract line 8b from line 8a. Include your payment with this form, if required, by using EFTPS (Electronic Federal Tax Payment System) See instructions.	8c	$ 0.

Signature and Verification

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

Signature ▶ Title ▶ CPA Date ▶