

See a Social Security Number? Say Something! Report Privacy Problems to https://public.resource.org/privacy Or call the IRS Identity Theft Hotline at 1-800-908-4490



SCANNED JUL 0 3 2012

Form 990

Return of Organization Exempt From Income Tax

OMB № 1545-0047

2011

Department of the Treasury Internal Revenue Service 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

Open to Public

A	For the	2011 cale	ndar year, or tax year	beginning	January 01	, 2011,	and ending	Decer	nber 31	, 20 11	
В	Check if	applicable	C Name of organization	Brewers Comn	nunity Foundation				D Employ	er identification n	umber
	Address	change	Doing Business As							39-1970152	
	Name ci	-	Number and street (or	PO box if mail is	not delivered to stre	et address)	Room/suit	e	E Telepho	ne number	
\Box	Initial ref	-	Miller Park, One Brev	wers Wav						414-902-4544	
$\vec{\Box}$	Termina	-	City or town, state or c		4		<u> </u>				
\Box	Amende		Milwaukee, WI 53214	•					G Gross re	cointe \$	3,289,746
H		ion pending	F Name and address of p		Cecilia Gore - S	ame as above	<u> </u>	H/a) le thie		<u> </u>	✓ No
_	ppou.	g						1	•	ncluded? Yes	
_	Tay-eye	mpt status.	✓ 501(c)(3)	501(c) () ◄ (insert no)	4947(a)(1) or	527	 1 ' '		list (see instruction	
<u>:</u>	Website	•	301(0)(3)	301(6) () - (mocremo) <u>-</u>	_ 4947(a)(1) OI	<u> </u>	4		number ►	,
K			Corporation Trust	Association	Other ►	I Va	ear of formation			of legal domicite	WI
	art I	Summ		A330CIALION		1216	a or rorman	2000	W State	or legal dornicile	
	1		escribe the organizat	ion'e miesion	or most signific	ant activities	· Grant n	akina oraa	nization	activities that s	upport
	'		tivities and the general			ani activities		iaking orga		activities that s	upport
õ		youniac	avides and the general	ar wen being or							
Ē											
Ver	2	Chack th	is box ▶☐ if the org	anization disc	continued its on	orations or d	lieposod o	more ther	2504 of	to not accete	•
Activities & Governance	3		of voting members of						1 - 1	its het assets.	,
త	1		-	_					3		
ië.	4		of independent votin						4		
₹	5		nber of individuals e		-	-	e 2a)		5		0
Ş	6		nber of volunteers (e						6		25
	7a		elated business reve		•	•			7a	-	0
_	b	Net unre	ated business taxab	le income from	n Form 990-1, I	ine 34			7b		
		0	V (D					Prior Ye		Current Y	
e	8		tions and grants (Pa					1	,498,826		,193,290
Revenue	9	_	service revenue (Par				· ·				
ě	10		nt income (Part VIII,						14,327		5,424
	11		enue (Part VIII, colui						487,983		,016,899
	12		enue—add lines 8 thr				ine 12)		,001,136		2,215,613
	13	Grants a	nd similar amounts p	oaid (Part IX, c	olumn (A) tines	1-3) .		1	,326,486		2,089,219
	14	Benefits	paid to or for membi	ers (Part IX, co	olumn (A) Lline-4	VED	¬ -				
Expenses	15	Salaries,	other compensation,	employee bene	its (Part IX, col	ımn•(A),/lines	5-10)				
ë	16a	Profession	nal fundraising fees	(Part IX, cott)	nn (A),//line 11e	20.	1 · ·	// »	600	77.0	
쫎	b		draising expenses (F				l 🏙			a 4 2	1/多多
	17		penses (Part IX, colu						200,528		185,556
	18		enses. Add lines 13			nn (A), line 2!	5) . _	1	,527,614	- 2	2,274,775
_	19	Revenue	less expenses. Sub	tract line 18 fro	om line 12	<u> </u>	<u> </u>		473,522		(59,162)
S or							B	eginning of Cu		End of Ye	
sset	20		ets (Part X, line 16)				· · _	1	,713,290	1	,560,755
Net Assets or Fund Balances	21		ılıtıes (Part X, line 26	•			· · _		539,023		445,650
			ts or fund balances.	Subtract line 2	21 from line 20	<u>.</u>		1	,174,267	1	,115,105
_	art II		ture Block								
			ry, I declare that I have ex ete Declaration of prepare							ny knowledge and	belief, it is
	-, conce	T x		er (other than onc		TOTTI ALIOTT OF WIT	icii preparer i	as any know	euge ———		
C:-											
Sig	-	Sign	ature of officer	תר		-		Da		- / - / -	
He	re	ينيا (ا	- 	72		Executive	Dire	ctur		1/31/12	
		17,	or print name and title	le.			15:			10	
Pa	id	Printily	pe preparer's name	Prep	oarer's signature		Date	е	Check [
	epare								self-emp	oloyed	
Us	e Onl	y Firm's n	ame 🕨					Firm	n's EIN ▶		
		Firm's a	ddress ▶					Pho	ne no		
			s this return with the	· ·	· · · · · · · · · · · · · · · · · · ·	instructions)	<u> </u>	· _ ·			No No
For	Paperv	vork Redu	ction Act Notice, see	the separate in	structions.		Cat No	11282Y		Form 9	990 (2011)

	0 (2011)	Page 2
Part l		
1	Check if Schedule O contains a response to any question in this Part III	. 🗸
•	Briefly describe the organization's mission: Grant making organization, activities that support health, education, recreation, and basic needs, with a particular focus on lower-income and disadvantaged youth and their families.	·
	Did the expensation undertake any significant program convers during the year which were not letted on the	
2	Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ?	☑ No
3	Did the organization cease conducting, or make significant changes in how it conducts, any program services?	 No
	If "Yes," describe these changes on Schedule O.	
4	Describe the organization's program service accomplishments for each of its three largest program services, as measi expenses. Section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts are required to report the am grants and allocations to others, the total expenses, and revenue, if any, for each program service reported.	
4a	(Code:) (Expenses \$ 87,792 including grants of \$ 350) (Revenue \$)
4b	(Code) (Expenses \$81,000 including grants of \$) (Revenue \$	_)
	Brewers Buddies program to provide local and disadvantaged children the opportunity to attend baseball games and to encountries to be a second to be a secon	ırage
	their interest in sports.	
		
4c	(Code:) (Expenses \$ 59,618 including grants of \$) (Revenue \$ Selig Scholarship program to help sponsor a scholarship program for disadvantaged youths in Wisconsin.	_)
	Seng Scholarship program to help sponsor a scholarship program for disadvantaged youths in wisconsin.	
		•••••
And	Other program services (Describe in Schedula O.)	
4d	Other program services (Describe in Schedule O.) (Expenses \$ 1,971,699 including grants of \$ 1,905,330) (Revenue \$)	
4e	Total program service expenses ► 2.200.109	

Part I	V Checklist of Required Schedules			
		[Yes	No
	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes,"		,	
	complete Schedule A	1 2	/	
2 3	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)? Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to	4	*	
-	candidates for public office? If "Yes," complete Schedule C, Part I	3		✓_
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? <i>If "Yes," complete Schedule C, Part II</i>	4		✓
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 for which 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		√
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		1
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8	_	√
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		√
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10		√
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VIII, IX, or X as applicable.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI	11a		1
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		1
С	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		1
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		1
e f	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X 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.	11e		1
12 a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI, XII, and XIII	12a	1	
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		1
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		1
14 a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		✓
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate			
	foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV	14b		✓
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		1
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		1
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 (see instructions)	17		1
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	1	
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	1	
20 a	Did the organization operate one or more hospital facilities? <i>If "Yes," complete Schedule H</i>	20a	Ť	1
	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		

	0 (2011) `		F	age 4
Part	Checklist of Required Schedules (continued)	ī	Yes	No
21	Did the organization report more than \$5,000 of grants and other assistance to any government or organization in the United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	√ v	
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		✓
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		✓
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		✓_
	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24b 24c		√
d 25a	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? 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	24d 25a		√
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		1
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		✓
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part III	27		/
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 b	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a 28b		✓ ✓
С	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		1
29 30	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	30		√
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		1
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		✓
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		1
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	1	
35a b	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a 35b	1	
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		1
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? <i>If "Yes," complete Schedule R, Part VI</i>	37		1
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	1	

Part				
	Check if Schedule O contains a response to any question in this Part V	•	Yes	. L No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable 1a 88			
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable 1b 88	-		
C	Did the organization comply with backup withholding rules for reportable payments to vendors and	1		
	reportable gaming (gambling) winnings to prize winners?	1c	1	
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 2	┦		<u> </u>
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? .	2b		ļ
•	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)			<u> </u>
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		√
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		1
b	If "Yes," enter the name of the foreign country: ▶	440		-
-	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		1
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		1
C	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c		Ė
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		✓
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).			İ
а	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?	<u> </u>		
L	and services provided to the payor?	7a 7b	√	├
b	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was	/B	-	├
	required to file Form 8282?	7c		1
d	If "Yes," indicate the number of Forms 8282 filed during the year	· · ·		
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		1
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? .	7f		1
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	į		
	organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring	<u> </u>		
_	organization, have excess business holdings at any time during the year?	8	-	 ✓
9	Sponsoring organizations maintaining donor advised funds.	-		 ,
a b	Did the organization make any taxable distributions under section 4966?	9a 9b	-	 ' /
10	Section 501(c)(7) organizations. Enter:	35		+
а	Initiation fees and capital contributions included on Part VIII, line 12		}	
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	1		
11	Section 501(c)(12) organizations. Enter:	1		
а	Gross income from members or shareholders			
b	Gross income from other sources (Do not net amounts due or paid to other sources			
	against amounts due or received from them.)	↓		
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		Ь—
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year . 12b	4		
13	Section 501(c)(29) qualified nonprofit health insurance issuers.	40	├	
а	Is the organization licensed to issue qualified health plans in more than one state?	13a	-	+
b	Note. See the instructions for additional information the organization must report on Schedule O. 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	1]	
С	Enter the amount of reserves on hand	1	1	
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a	T	1
	If "Yes." has it filed a Form 720 to report these payments? If "No." provide an explanation in Schedule O	14h	t	

Part '	Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. S. Check if Schedule O contains a response to any question in this Part VI	See ins		
Section	on A. Governing Body and Management	<u> </u>		
			Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year . If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O.			
b 2	Enter the number of voting members included in line 1a, above, who are independent 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		√
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		√
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		✓
5	Did the organization become aware during the year of a significant diversion of the organization's assets? .	5		✓
6 7a	Did the organization have members or stockholders?	6 7a	√	
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?	7b		1
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:			
а	The governing body?	8a	√	
ь 9	Each committee with authority to act on behalf of the governing body?	8b	-	
	the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		1
Secti	on B. Policies (This Section B requests information about policies not required by the Internal Rever	iue C	,	1
40-	Did the construction have level shouters because of the top	400	Yes	No
10a b	Did the organization have local chapters, branches, or affiliates?	10a		V
	affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	10b		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	✓	
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990.	10-		ļ .
12a b	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a 12b	1	-
c	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done	12c	1	
13	Did the organization have a written whistleblower policy?	13	1	
14 15	Did the organization have a written document retention and destruction policy?	14	/	
а	The organization's CEO, Executive Director, or top management official	15a		
b	Other officers or key employees of the organization	15b		
16a	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions). Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?			
b	with a taxable entity during the year?	16a		✓
	organization's exempt status with respect to such arrangements?	16b		
	on C. Disclosure		_	
17 18	List the states with which a copy of this Form 990 is required to be filed ► Wisconsin Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Sectio available for public inspection. Indicate how you made these available. Check all that apply.	n 501	(c)(3)s	only
19	Own website Another's website Upon request Describe in Schedule O whether (and if so, how), the organization made its governing documents, conflict of and financial statements available to the public during the tax year	of inte	rest p	oolicy
20	State the name, physical address, and telephone number of the person who possesses the books and records organization: ► Joseph Zidanic, One Brewers Way, Milwaukee, WI 53214 (414) 902-4611	of the)	

	(2011)	

Page 7

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

eck if Schedule O contains a response to any question in this Part VII \ldots	

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.

☐ Check this box if neither the organization nor any related organization compensated any current officer, director, or trustee.										
	(C)									
(A)	(B)	(B) Position			(D)	(E)	(F)			
Name and Title	Average	(do not check more than one box, unless person is both an					an	Reportable	Reportable	Estimated
	hours per week	officer and a director/trustee)			<u> </u>	compensation from	compensation from related	amount of other		
	(describe hours for	Individual trustee or director	nsti	Officer	Key employee	ligh empl	Former	the organization	organizations (W-2/1099-MISC)	compensation from the
	related	recto	utio	er	emp	est c	ēř	(W-2/1099-MISC)	(44-2/1099-14113C)	organization
	organizations in Schedule	Y E	naltı		loye	iomp				and related organizations
	0)	stee	Institutional trustee		о 	Highest compensated employee				organizations
			ĕ			ated				
(1) Wendy Selig-Prieb										
Board Chair	.1	1						o	o	0
(2) Robert Quinn	•••	<u> </u>								
Board Treasurer	.1	✓		1				0	o	0
(3) Tyler Barnes										
Board Member	.1	✓		\				0	0	0
(4) Cecelia Gore	_									
Executive Director	40				<u> </u>	✓		0	127,115	0
(5)										
(6)										
(7)										
(8)										
	_		_	ļ	_	<u> </u>	_			
(9)										
(10)										
(11)										
(12)										
(13)										
(14)										

Part	Section A. Officers, Directors, Trust	ees, key E	inbio)	yees			ugnes	st C	ompensated E	mpioyees (co	ntınu	iea)
	(A) Name and title		Position (do not check more the box, unless person is officer and a director/less)					an	(D) Reportable compensation	(E) Reportable compensation from	rom	(F) Estimated amount of
		week (describe hours for related organizations in Schedule O)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	from the organization (W-2/1099-MISC)	related organizations (W-2/1099-MIS		other compensation from the organization and related organizations
(15)												
(16)												
(17)												
(18)												
(19)												
(20)							:					
(21)											+	
(22)											-	
(23)											_	
(24)												
(25)											+	
1b	Sub-total	<u> </u>	<u> </u>	Ļ.	<u> </u>	<u> </u>	<u> </u>		0	127,	115	0
C	Total from continuation sheets to Part							>	0	127,	0	0
d 2	Total number of individuals (including but		d to th					e) w		<u> </u>		
3	Did the organization list any former of employee on line 1a? <i>If "Yes," complete</i>	ficer, direc	tor, c									
4	For any individual listed on line 1a, is the organization and related organizations individual	sum of re greater th	porta an \$	ble 150	con ,000	npe)? <i>[</i>	nsatio f "Ye	on a s,"	and other comp complete Sch	pensation from nedule J for	m the	
5	Did any person listed on line 1a receive of for services rendered to the organization	or accrue co	ompe	nsa	tion	fro	m any	/ un	related organiz	zation or indiv	vidua	
Section	on B. Independent Contractors											_ J V
1	Complete this table for your five highest compensation from the organization. Repyear.	-										
	(A) Name and business add	Iress							(B) Description of s	ervices		(C) Compensation
None.		-				_		-				
								L				
2	Total number of independent contractor	ors (includi	ng bi	ut n	ot	lımı	ted to	L o th	nose listed ab	ove) who		
	received more than \$100,000 of compen-	sation from	the c	orga	nıza	tion			0			

Part	VIII	Statement of Revenue				
			(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
20 00	1a	Federated campaigns 1a				
Contributions, Gifts, Grants and Other Similar Amounts	b	Membership dues 1b	_			
اع ق		- , ' , , , , , , , , , , 				
fts,	٠ د		-			
ig ig	d		<u> </u>			
Sir	e	Government grants (contributions) 1e	_			
utic	f	All other contributions, gifts, grants, and similar amounts not included above 1f 951.5				
di 😝			93			
d d	g	Noncash contributions included in lines 1a-1f [*] \$		_		
	h	Total. Add lines 1a-1f	-,,			
Program Service Revenue		Business Cod	•	 		
eve	2a			ļ ļ		
Š.	b					
Vic	С					
Ser	d					
шe	е				<u> </u>	
ogra	f	All other program service revenue .				
Pro	g	Total. Add lines 2a–2f	•			
	3	Investment income (including dividends, interes	t,			
		and other similar amounts)	5,424		5,424	
	4	Income from investment of tax-exempt bond proceeds ▶	•			
	5	Royalties	•			
		(i) Real (II) Personal				
	6a	Gross rents				
	b	Less: rental expenses				
	С	Rental income or (loss)	\dashv			
	d	Net rental income or (loss)	•	1	***************************************	
	7a	Gross amount from sales of (i) Securities (ii) Other			-	
		assets other than inventory	-			
	b	Less, cost or other basis	\dashv			
	_	and sales expenses				
	Ç	Gain or (loss)		†		
	d	Net gain or (loss)	•	†		
	"	rect gain or (1033)			.	
ā	8a	Gross income from fundraising		1		
evenue	"	events (not including \$ 229,197				
		of contributions reported on line 1c).				
Ē		See Part IV, line 18 a 174,6	20			
Other R	<u>ا</u>					
Ò			59,748			59,748
		Gross income from gaming activities.	35,740	'		35,748
	Ja	0 0 10/1 140	26			
	_					
				020 024	· · · · · ·	
		Gross sales of inventory, less	939,931	939,931		
	IUa					,
	١.	returns and allowances a 17,2	20			
	l	Less: cost of goods sold b				
	c		17,220	17,220		
		Miscellaneous Revenue Business Coc	e	ļ		
	11a					
	b					
	С			<u> </u>		
	d	All other revenue				
	е		-			
	12	Total revenue. See instructions	2,215,613	957,151	5,424	59,748

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).

	Check if Schedule O contains a respon	se to any question	in this Part IX		
	t include amounts reported on lines 6b, 7b, , 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 United States. See Part IV, line 21	2,089,219	2,089,219		
2	Grants and other assistance to individuals in the United States. See Part IV, line 22				
3	Grants and other assistance to governments, organizations, and individuals outside the United States. See Part IV, lines 15 and 16				
4 5	Benefits paid to or for members				
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 8	Other salaries and wages Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)				
9 10 11 a	Other employee benefits				
b	Legal				
С	Accounting	4,850		4,850	
d	Lobbying				
е	Professional fundraising services. See Part IV, line 17				
f	Investment management fees				
g	Other	5,502		5,502	
12	Advertising and promotion	29,196	22,269	6,927	
13	Office expenses	124,501	71,975	52,526	
14	Information technology				
15	Royalties				
16	Occupancy				
17 18	Travel	4,861		4,861	<u></u>
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 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.)				
а	Austion Evanges	13,411	13,411	-	
b	Bowl-A-Thon	3,235	3,235		
c				-	
d					
е	All other expenses				
25	Total functional expenses. Add lines 1 through 24e	2,274,775	2,200,109	74,666	0
26	Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation Check here following SOP 98-2 (ASC 958-720)				

Р	art X	Balance Sheet			
			(A) Beginning of year		(B) End of year
	1	Cash—non-interest-bearing	(2,140)	1	59,977
	2	Savings and temporary cash investments	1,183,428	2	1,103,163
	3	Pledges and grants receivable, net	477,845	3	387,615
	4	Accounts receivable, net	54,157	4	10,000
	5	Receivables from current and former officers, directors, trustees, key			
		employees, and highest compensated employees. Complete Part II of Schedule L		5	
				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	
ets	7			7	
Assets	7 8	Notes and loans receivable, net		8	
	9		· <u>-</u>	9	
	10a	Prepaid expenses and deferred charges		9	
	104	other basis. Complete Part VI of Schedule D		. 1	
	ь	Less: accumulated depreciation 10b		10c	
	11	Investments—publicly traded securities		11	
	12	Investments—other securities. See Part IV, line 11		12	
	13	Investments—program-related. See Part IV, line 11		13	
	14	Intangible assets		14	
	15	Other assets. See Part IV, line 11		15	
	16	Total assets. Add lines 1 through 15 (must equal line 34)	1,713,290	16	1,560,755
	17	Accounts payable and accrued expenses	39,023	17	45,650
	18	Grants payable		18	43,000
	19	Deferred revenue	500,000	19	400,000
	20	Tax-exempt bond liabilities		20	
	21	Escrow or custodial account liability. Complete Part IV of Schedule D.		21	
ဟ	22	Payables to current and former officers, directors, trustees, key	**		
Liabilities		employees, highest compensated employees, and disqualified persons			
ä	ļ	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 (including federal income tax, payables to related third			
		parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D			
			520.022	25	445.050
	26	Total liabilities. Add lines 17 through 25	539,023	20	445,650
ses		lines 27 through 29, and lines 33 and 34.			
au	27	Unrestricted net assets	573,283	27	670,450
Bal	28	Temporarily restricted net assets	600,984	28	444,655
ᅙ	29	Permanently restricted net assets		29	
Net Assets or Fund Balances		Organizations that do not follow SFAS 117, check here ▶ ☐ and complete lines 30 through 34.			
S O	30	Capital stock or trust principal, or current funds		30	
set	31	Paid-in or capital surplus, or land, building, or equipment fund		31	
As	32	Retained earnings, endowment, accumulated income, or other funds.		32	
<u>e</u>	33	Total net assets or fund balances	1,174,267	33	1,115,105
Z	34	Total liabilities and net assets/fund balances	1,713,290	-	1,560,755
		The second secon	, -,		Form 990 (2011)

Form 99	80 (2011)			Pa	ge 12	
Part	XI Reconciliation of Net Assets					
	Check if Schedule O contains a response to any question in this Part XI	<u>.</u> .	<u> </u>			
1	Total revenue (must equal Part VIII, column (A), line 12)	1		2,198	8,967	
2	Total expenses (must equal Part IX, column (A), line 25)	2		2,258	8,129	
3						
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4		1,174	4,267	
5	Other changes in net assets or fund balances (explain in Schedule O)					
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		1,11	5,105	
Part	XII Financial Statements and Reporting				_	
	Check if Schedule O contains a response to any question in this Part XII				_Ц	
				Yes	No	
1	Accounting method used to prepare the Form 990: Cash Accrual Other					
	If the organization changed its method of accounting from a prior year or checked "Other," ex Schedule O.	cpiain in				
•						
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a 2b	1	✓	
b	Were the organization's financial statements audited by an independent accountant? If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for o		20	-		
С	of the audit, review, or compilation of its financial statements and selection of an independent according	-	2c	1		
	If the organization changed either its oversight process or selection process during the tax year, ex		20			
	Schedule O.	Apiani iii				
d	If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year	ear were		}		
_	issued on a separate basis, consolidated basis, or both.					
	✓ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis					
За	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		1	
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo	ergo the				
	required audit or audits, explain why in Schedule O and describe any steps taken to undergo such a	audits	3b			

Form **990** (2011)

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.

20 **1 1**

Open to Public Inspection

Employer identification number Name of the organization 39-1970152 **Brewers Community Foundation Inc.** 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.) A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). 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.) A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). 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.) A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.) An organization that normally receives: (1) more than 331/3% 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 331/3% 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.) An organization organized and operated exclusively to test for public safety. See section 509(a)(4). 11 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 **b** Type II c Type III-Functionally integrated 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) If the organization received a written determination from the IRS that it is a Type II, or Type III supporting Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons? (i) A person who directly or indirectly controls, either alone or together with persons described in (ii) and Yes No (iii) below, the governing body of the supported organization? 11g(i) (ii) A family member of a person described in (i) above? 11g(ii) (iii) A 35% controlled entity of a person described in (i) or (ii) above? . 11g(iii) Provide the following information about the supported organization(s) (ii) EIN (III) Type of organization (iv) is the organization (v) Did you notify (vii) Amount of (i) Name of supported (vi) Is the in col (i) listed in your the organization in organization in col organization (described on lines 1~9 support col (i) of your above or IRC section governing document? (i) organized in the support? US? (see instructions)) Yes No Yes No Yes No (A) (B) (C) (D) (E)

Total

Schedule A (Form 990 or 990-EZ) 2011 Page 2 Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi) Part II (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) 2007 **(b)** 2008 (c) 2009 (d) 2010 (e) 2011 (f) Total Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.") . . . 686,055 965,584 1,094,567 1,552,100 1,193,290 5,491,596 revenues levied for the organization's benefit and either paid to or expended on its behalf . . . The value of services or facilities furnished by a governmental unit to the organization without charge Total. Add lines 1 through 3 686,055 965,584 1,094,567 1,552,100 1,193,290 5,491,596 The portion of total contributions by each person (other than unit governmental or publicly supported organization) included on line 1 that exceeds 2% of the amount

	into I that execeds 270 of the amedia								
	shown on line 11, column (f)							1,613,	400
6	Public support. Subtract line 5 from line 4							3,878,	196
Secti	on B. Total Support								
Calen	dar year (or fiscal year beginning in)	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e)	2011	(f) Total	1
7	Amounts from line 4	686,055	965,584	1,094,567	1,552,100	1	,193,290	5,491,	596
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	34,905	31,435	19,814	14,327		5,424	105,	905
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					ļ		5,597,	501
12	Gross receipts from related activities, etc	•	-			12		128,	_
13	First five years. If the Form 990 is for the		· ·		•				
	organization, check this box and stop he							<u> ▶</u>	
	on C. Computation of Public Suppor					, ,			
14	Public support percentage for 2011 (line		-			14		69.28	
15	Public support percentage from 2010 Sch					15		62.78	%
16a	331/3% support test—2011. If the organi								_
	box and stop here. The organization qua	•		_					✓
b	331/3% support test—2010. If the organ					15 18	33'/3%	or more,	_
	check this box and stop here. The organ	•		• • • • •		• •			
17a	10%-facts-and-circumstances test—20 10% or more, and if the organization me Part IV how the organization meets the "forganization".	ets the "facts-	and-circumsta	nces" test, che	eck this box ar	nd sto	p here. E	Explain in	
b	10%-facts-and-circumstances test—20 15 is 10% or more, and if the organization or Explain in Part IV how the organization or supported organization	tion meets the leets the "facts	e "facts-and-ci s-and-circums	rcumstances" tances" test. T	test, check th	ns bo	x and ste	op here.	
18	Private foundation. If the organization de instructions							see . ▶	

Schedule A (Form 990 or 990-EZ) 2011 Page 3 Support Schedule for Organizations Described in Section 509(a)(2) Part III (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) 2007 **(b)** 2008 (c) 2009 (d) 2010 (e) 2011 (f) Total Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants.") 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 Gross receipts from activities that are not an unrelated trade or business under section 513 revenues levied for organization's benefit and either paid to or expended on its behalf . The value of services or facilities furnished by a governmental unit to the organization without charge 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 . Public support (Subtract line 7c from line 6). Section B. Total Support Calendar year (or fiscal year beginning in) ▶ (a) 2007 **(b)** 2008 (c) 2009 (d) 2010 (e) 2011 (f) Total 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

	organization, check this box and stop here		🖊 📙
Secti	on C. Computation of Public Support Percentage		
15	Public support percentage for 2011 (line 8, column (f) divided by line 13, column (f))	15	%
16	Public support percentage from 2010 Schedule A, Part III, line 15	16	%
Secti	on D. Computation of Investment Income Percentage		
17	Investment income percentage for 2011 (line 10c, column (f) divided by line 13, column (f))	17	%
18	Investment income percentage from 2010 Schedule A, Part III, line 17	18	%
19a	331/2% support tests—2011. If the organization did not check the box on line 14, and line 15 is mo		

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)

(Explain in Part IV.) Total support. (Add lines 9, 10c, 11,

and 12.)

13

14

Part IV	Supplemental Information. Complete this part to provide the explanations required by Part II, line 10; Part II, line 17a or 17b; and Part III, line 12. Also complete this part for any additional information. (See instructions).
Not applica	able.

SCHEDULE D (Form 990)

Supplemental Financial Statements

OMB No 1545-0047

Department of the Treasury Internal Revenue Service ► Complete if the organization answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b.

► Attach to Form 990. ► See separate instructions.

Open to Public Inspection

Name of the organization Employer identification number **Brewers Community Foundation Inc.** 39-1970152 Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" to Form 990, Part IV, line 6. (b) Funds and other accounts Total number at end of year 1 2 Aggregate contributions to (during year) . 3 Aggregate grants from (during year) . . Aggregate value at end of year . 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 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. 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 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 Total number of conservation easements . . . 2a 2b Number of conservation easements on a certified historic structure included in (a) . . . Number of conservation easements included in (c) acquired after 8/17/06, and not on a historic structure listed in the National Register . 2d Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the 3 Number of states where property subject to conservation easement is located ▶ Does the organization have a written policy regarding the periodic monitoring, inspection, handling of 5 violations, and enforcement of the conservation easements it holds? Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation easements during the year 6 7 Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year 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)? 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 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: Revenues included in Form 990. Part VIII. line 1 **b** Assets included in Form 990, Part X

Part	III Organizations Maintaining	Collections of	Art, His	torical T	Treasures,	or Ot	her Similar A	Assets (continued)
3	Using the organization's acquisition, collection items (check all that apply):	accession, and c	ther reco	rds, chec	ck any of the	e follov	ving that are a	significant use of its
а	☐ Public exhibition		d	☐ Loan	or exchange	e prog	rams	
b	☐ Scholarly research		е	☐ Othe	r			
С	☐ Preservation for future generations							
4	Provide a description of the organization XIV.	tion's collections	and expla	ain how t	hey further t	the org	ganızatıon's ex	empt purpose in Part
5	During the year, did the organization	solicit or receive	donation	c of art	bietorical tre	aacura	e or other eim	ular
3	assets to be sold to raise funds rather							∏ Yes ∏ No
Part					-			
ı art	line 9, or reported an amoun	•		_	gainzation c		100 100 101	onn ooo, raitiv,
1a	Is the organization an agent, trustee,	custodian or ot	her intern	nediary fo	or contributi	ons or	other assets	not
	included on Form 990, Part X?							· 🗌 Yes 🗌 No
b	If "Yes," explain the arrangement in Pa	art XIV and comp	lete the fo	llowing t	able:			
				_				Amount
С	Beginning balance					10	;	
d	Additions during the year					10	1	
e	Distributions during the year .					16	•	
f	Ending balance					1f		
2a	Did the organization include an amount		Part X, line	21? .				. 🗌 Yes 🗌 No
	If "Yes," explain the arrangement in P				<i>(</i>) / 9 / 5		00 0 1 11 11	
Part	V Endowment Funds. Comple				(c) Two years			
4 -	D	(a) Current year	(6) Pil	or year	(c) Two years	S Dack	(d) Three years ba	ack (e) Four years back
1a	Beginning of year balance		<u> </u>					
b	Contributions							
C	losses		1					
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 t	he current year e	end balanc	e (line 1g	g, column (a))) held	as	
а	Board designated or quasi-endowmer		%					
b	Permanent endowment >	%						
С	Temporarily restricted endowment ▶							
2-	The percentages in lines 2a, 2b, and 2	•					languataunad fau	Ala a
За	Are there endowment funds not in the organization by:	e possession or	ine organi	zation th	at are neid a	ano ao	iministered for	
	(i) unrelated organizations							Yes No
	(ii) related organizations							. 3a(ii)
b	If "Yes" to 3a(ii), are the related organ		required o	n Sched	Jule R?			. 3b
4	Describe in Part XIV the intended use					•		
Part	VI Land, Buildings, and Equip	ment. See For	m 990, P	art X, lin	ne 10.			
	Description of property	(a) Cost or (investi		1 ' '	or other basis other)		Accumulated epreciation	(d) Book value
1a	Land							
b	Buildings							
С	Leasehold improvements							
d	Equipment							
е	Other	.						
Total.	Add lines 1a through 1e. (Column (d) r.	nust equal Form	990, Part	X, columi	n (B), line 10	(c).)	. <u>.</u> ▶	

Part VII Investments - Other Securities.	See Form 990, Part X,	line 12.	r age o
(a) Description of security or category (including name of security)	(b) Book value	(c) Method of val Cost or end-of-year m	
(1) Financial derivatives			
(2) Closely-held equity interests			
(3) Other			
(A)			
(B)			
(C)			
(D)			
(E)			
(F)			
(G)			
(H)			
(I)			
Total. (Column (b) must equal Form 990, Part X, col. (B) line 12.) ▶			
Part VIII Investments - Program Related		X, line 13.	
(a) Description of investment type	(b) Book value	(c) Method of val Cost or end-of-year m	
(1)			
(2)			
_(3)			
(4)			
(5)			· · ·
(6)			
(7)			
(8)			
(9)		+	
(10) Total. (Column (b) must equal Form 990, Part X, col. (B) line 13.)			
Part IX Other Assets. See Form 990, Pa	rt X line 15		
) Description		(b) Book value
(1)			
(2)			
(3)			
(4)			
(5)			
(6)			
(7)	-		
(8)			
(9)			
(10)			
Total. (Column (b) must equal Form 990, Part X, co			
Part X Other Liabilities. See Form 990,	Part X, line 25.		
1. (a) Description of liability	(b) Book value		
(1) Federal income taxes		_	
(2)		_	
(3)			
(4)		_	
(5)		_	
(6)		_}	
(7)			
(6) (7) (8) (9)		_	
		_	
(10)		_	
(11)		_	
Total. (Column (b) must equal Form 990, Part X, col (B) line 25) ► 2 FIN 48 (ASC 740) Footpote In Part XIV, provide	district the first section of		

Schedul	e D (Form 990) 2011			Page 4
Part	XI Reconciliation of Change in Net Assets from Form 990 to Audited Financial Sta	iteme	nts	
1	Total revenue (Form 990, Part VIII, column (A), line 12)	.	1	
2	Total expenses (Form 990, Part IX, column (A), line 25)	. 🗔	2	
3	Excess or (deficit) for the year. Subtract line 2 from line 1	. [3	
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	
8	Other (Describe in Part XIV.)		8	
9	Total adjustments (net). Add lines 4 through 8		9	
10	Excess or (deficit) for the year per audited financial statements. Combine lines 3 and 9	1	0	
Part	XII Reconciliation of Revenue per Audited Financial Statements With Revenue	per F	Retu	rn
1	Total revenue, gains, and other support per audited financial statements		1	3,229,999
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:	Ī		
а	Net unrealized gains on investments			
b	Donated services and use of facilities			
С	Recoveries of prior year grants			
d	Other (Describe in Part XIV.) 2d		}	
е	Add lines 2a through 2d		2e	
3	Subtract line 2e from line 1	1	3	
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:			
а	Investment expenses not included on Form 990, Part VIII, line 7b 4a			
b	- · · · · · · · · · · · · · · · · · · ·	4,386)	İ	
С	Add lines 4a and 4b		4c	(1,014,386)
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)	. [5	2,215,613
Part	XIII Reconciliation of Expenses per Audited Financial Statements With Expens	es pe	r Rei	turn
1	Total expenses and losses per audited financial statements		1	3,289,161
2	Amounts included on line 1 but not on Form 990, Part IX, line 25	j		
а	Donated services and use of facilities			
b	Prior year adjustments			
С	Other losses			
d	Other (Describe in Part XIV.)		ł	
е	Add lines 2a through 2d		2e	
3	Subtract line 2e from line 1	[3	
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:			
а	Investment expenses not included on Form 990, Part VIII, line 7b 4a			
b	Other (Describe in Part XIV.)	4,386)		
С	Add lines 4a and 4b	[4c	(1,014,386)
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)		5	2,274,775
Part	XIV Supplemental Information			
	lete this part to provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a an			
	, line 4; Part X, line 2; Part XI, line 8; Part XII, lines 2d and 4b, and Part XIII, lines 2d and 4b. Also	comp	lete t	his part to provide
•	dditional information.			
Brewe	ers Community Foundation (BCF) is exempt from income taxes under Section 501(c)(3) of the Internal	Reven	ue Co	de. Accordingly, no
provis	sion for income taxes is included in the accompanying financial statements. Generally accepted acco	unting	princ	iples require
disclo	sure of uncertain tax positions which meet certain criteria. Management has evaluated the tax-exem	pt statu	ıs of I	3CF and has
deterr	nined that it is more likely than not that BCF's status would be upheld in the event of an examination	by a ta	xing a	authority. In addition,
		_	_	
BCF d	loes not undertake any activities that may give rise to unrelated business taxable income or the asso	ciated	unrela	ited business income
tax. T	herefore, no tax provision and no amounts for current or future tax assets or liabilities is reported for	uncer	taın t	ax provisions.

	age 🔾
Part XIV Supplemental Information (continued)	
Part XII Line 4b: Expenses related to special events reported on Form 990 Part VIII.	
Part XIII Line 4b: Expenses related to special events reported on Form 990 Part VIII.	
	····
······································	

SCHEDULE G (Form 990 or 990-EZ)

Supplemental Information Regarding Fundraising or Gaming Activities

Complete if the organization answered "Yes" to Form 990, Part IV, lines 17, 18, or 19, or if the organization entered more than \$15,000 on Form 990-EZ, line 6a.

Attach to Form 990 or Form 990-EZ. See separate instructions.

OMB No 1545-0047

Department of the Treasury Internal Revenue Service Name of the organization

Employer identification number

Brewe	ers Community Foundation Inc.						1970152
Pari	Fundraising Activities. Form 990-EZ filers are				vered "Yes" to F	orm 990, Part IV, I	ine 17.
1	Indicate whether the organization		•		owing activities. C	heck all that apply.	
а	☐ Mail solicitations		e	Solicitati	on of non-govern	ment grants	
b	☐ Internet and email solicitation	ons	f [Solicitati	on of governmen	t grants	
С	☐ Phone solicitations		g [Special f	fundraising events	3	
d	☐ In-person solicitations						
2a	Did the organization have a wri						
	or key employees listed in Form	n 990, Part VII) o	r entity in c	onnection v	with professional	fundraising services?	Yes 🗌 No
b	If "Yes," list the ten highest pai compensated at least \$5,000 b			draisers) pi	ursuant to agreen	nents under which th	e fundraiser is to be
	(i) Name and address of individual or entity (fundraiser)	(ii) Activity	custody o	draiser have or control of outlons?	(iv) Gross receipts from activity	(v) Amount paid to (or retained by) fundraiser listed in col (i)	(vi) Amount paid to (or retained by) organization
			Yes	No			
1							
2							
3	·						
4				 			
5							
6							
7					-		
8							
9		+					
10					-		
Total				· . .			
3	List all states in which the organization or licensing	anızatıon is regi	stered or lic	ensed to s	solicit contribution	ns or has been notifi	ed it is exempt from
						••••••	·
					•••••		***************************************
							·
							•••••
							•••••
							·

	dule G rt II	(Form 990 or 990-EZ) 2011 Fundraising Events. Con than \$15,000 of fundraising gross receipts greater tha	g event contributions			
			(a) Event #1 Sausage Race (event type)	(b) Event #2 Davey Nelson Golf (event type)	(c) Other events 3 (total number)	(d) Total events (add col (a) through col (c))
Revenue	1 2	Gross receipts Less: Charitable	96,215	88,165	219,445	403,825
۳	2	contributions	7,838	46,338	175,021	229,197
	3	Gross income (line 1 minus line 2)	88,377	41,827	44,424	174,628
i	4	Cash prizes	-			
	5	Noncash prizes				
enses	6	Rent/facility costs				
Direct Expenses	7	Food and beverages	469	41,933	16,147	58,549
	8	Entertainment				
	9	Other direct expenses .	23,125	18,110	15,096	56,331
	10 11	Direct expense summary. Ad Net income summary. Comb	ine line 3, column (d), a	nd line 10		(114,880) 59,748
Pa	rt III	Gaming. Complete if the than \$15,000 on Form 9		red "Yes" to Form 990	0, Part IV, line 19, or i	reported more
Revenue			(a) Bingo	(b) Pull tabs/instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add col (a) through col (c))
Rev	1	Gross revenue			1,839,436	1,839,436
ses	2	Cash prizes			878,613	878,613
Direct Expenses	3	Noncash prizes				
Direct I	4	Rent/facility costs		-		
_	5	Other direct expenses .			20,892	20,892
	6	Volunteer labor	☐ Yes% ☐ No	☐ Yes% ☐ No	│	
	7	Direct expense summary. Ac	ld lines 2 through 5 in c	olumn (d)		(899,505)
	8	Net gaming income summar	y. Combine line 1, colur	nn d, and line 7	. <u>.</u>	939,931
9	a Is	nter the state(s) in which the or the organization licensed to o				🗹 Yes 🗌 No

10a Were any of the organization's gaming licenses revoked, suspended or terminated during the tax year? .

Yes
No

b If "Yes," explain:

Schedu	tle G (Form 990 or 990-EZ) 2011			Pa	ige 3
11 12	Does the organization operate gaming activities with nonmembers?	_	Yes Yes	_	
13	Indicate the percentage of gaming activity operated in:				
а	The organization's facility			100	%
b	An outside facility			0	%
14	Enter the name and address of the person who prepares the organization's gaming/special events books and records:				
	Name Joseph Zidanic				
	Address ► One Brewers Way, Milwaukee, WI 53214				-
15a	Does the organization have a contract with a third party from whom the organization receives gaming revenue?	П	Yes	୕୵	No
b		_		_	
С	If "Yes," enter name and address of the third party:				
	Name ▶				
	Address►				
16	Gaming manager information:				
	Name				
	Gaming manager compensation ▶ \$				
	Description of services provided ▶				- -
	☐ Director/officer ☐ Employee ☐ Independent contractor				
17 a	Mandatory distributions: Is the organization required under state law to make charitable distributions from the gaming proceeds to retain the state gaming license?		Yes	V	No
b	Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent in the organization's own exempt activities during the tax year ▶ \$				
Part	Supplemental Information. Complete this part to provide the explanations required by Part I, columns (iii) and (v), and Part III, lines 9, 9b, 10b, 15b, 15c, 16, and 17b, as applicable. Also copart to provide any additional information (see instructions).			hıs	
			·		
			·		

SCHEDULE 1 (Form 990)

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

20

OMB No 1545-0047

Open to Public Inspection

% □

Employer identification numbe 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. √Yes 39-1970152 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and Complete if the organization answered "Yes" to Form 990, Part IV, line 21 or 22. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States ▶ Attach to Form 990. the selection criteria used to award the grants or assistance? Part I General Information on Grants and Assistance Brewers Community Foundation Inc. Department of the Treasury Internal Revenue Service Name of the organization

															2011)
•	(h) Purpose of grant or assistance		•											86	Schedule I (Form 990) (2011)
	(g) Description of non-cash assistance														
	(f) Method of valuation (book, FMV, appraisal, other)														Cat No 50055P
	(e) Amount of non- cash assistance													line 1 table	Ö
	(d) Amount of cash grant													tions listed in the	
space is needed	(c) IRC section if applicable													vernment organiza	is for Form 990.
ted if additional	(p) EIN													501(c)(3) and govrganizations listed	see the Instruction
Part II can be duplicated if additional space is	1 (a) Name and address of organization or government	(1) See Attachment.	(2)	(6)	(4)	(5)	(9)	(7)	(8)	(6)	(10)	(11)	(12)	 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table Enter total number of other organizations listed in the line 1 table 	For Paperwork Reduction Act Notice, see the Instructions for Form

Around of a fight mon-cash assistance (e) Amount of cash grant non-cash assistance (e) Amount of mon-cash assistance (e) FMV, appraisal, other) Provide the information required in Part I, line 2, and any other additionability report to demonstrate the funds were used for their intended purpose.	(a) Type of grant or assistance					
Supplemental information. Complete this part to provide the information required in Part I, line 2, and any other additional information. Controlled the use of grant funds, each organization provides an accountability, report to demonstrate the funds were used for their intended purpose.		(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
Supplemental Information. Complete this part to provide the information required in Part I, line 2, and any other additional information. Ontion the use of grant funds, each organization provides an accountability report to demonstrate the funds were used for their intended purpose.						
Supplemental Information. Complete this part to provide the information required in Part I, line 2, and any other additional information. Ontion the use of grant funds, each organization provides an accountability report to demonstrate the funds were used for their intended purpose.						
W Supplemental Information. Complete this part to provide the information required in Part I, line 2, and any other additional information. Onlior the use of grant funds, each organization provides an accountability report to demonstrate the funds were used for their intended purpose.						
Supplemental Information. Complete this part to provide the information required in Part I, line 2, and any other additional information. Ontion the use of grant funds, each organization provides an accountability report to demonstrate the funds were used for their intended purpose.						
Supplemental Information. Complete this part to provide the information required in Part I, line 2, and any other additional information. Onlice the use of grant funds, each organization provides an accountability report to demonstrate the funds were used for their intended purpose.						
Supplemental Information. Complete this part to provide the information required in Part I, line 2, and any other additional information. Onitor the use of grant funds, each organization provides an accountability report to demonstrate the funds were used for their intended purpose.						
Supplemental Information. Complete this part to provide the information required in Part I, line 2, and any other additional information.						
	Supplemental Information. Com	plete this part to pro	wide the informatic	on required in Part I,	, line 2, and any other ad	ditional information.
	1 1 1 1 1 1 1 7 7 7 7 7 7 7 7 7 7 7 7 7	•	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1			4

Name of Organization Brewers Community Foundation Inc				-			EIN 39-1970152
		Attac	hment to Form 990	Schedule I, Part II Line	1 (a)		
1 (a) Organization and Address	(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
Aids Resource Center of Wisconsin 820 N Plankington Milwaukee WI 53203	39-1534049	501 (c) (3)	\$ 10,000 00	none	N/A	N/A	To support general activities and the goals of the organization
American Legion - Dept of Wisconsin 2930 American Legion Drive Portage WI 53901	39-0128222	501 (c) {19}	\$ 5,000 00 }	none	N/A	N/A	To support general activities and the goals of the organization
Arts at Large Inc W4885 Valley Heights Dr Fredonia WI 53021	33-1114575	501 (c) (3)	10,000 00	noné	N/A	N/A	To support general activities and the goals of the organization
Alma Center Inc 2578 N. Martin Luther King Drive Milwaukee WI 53212	36-4530524	501 (c) (3)	10,000 00	non e	N/A	N/A	To support general activities and the goals of the organization
American Heart Association	13-5613797	501 (c) (3)	\$ 10,000 00	none	N/A	N/A	To support general activities and the goals of the organization
Andre Lee Ellis & Co PO Box 080248 Méwaukee WI 53208	39-1824514	501 (c) (3)	5,000 00	noné	N/A.	N/A	To support general activities and the goals of the organization
Artists Working in Education 2819 W Highland Avenue Mitwaukee Wi 53208	39-1945466	501 (c) (3)	\$ 5,000 00]	none	N/A) N/A	To support general activities and the goals of the organization
Badger Associations	39-0808506	501 (c) (3)	5,000 00	noné	N/A	N/A	To support general activities and the goals of the organization
Benedict Center 135 W Webs St Ste 700 Milwaukee WI 53203	39-1226475	501 (c) (3)	\$ 12,500 00	none	N/A _	N/A	To support general activities and the goals of the organization
Big Brothers Big Sisters of Metro Milw 788 N Jefferson St Suite 600 Milwaukee WI 53202	39-1239687	501 (c) (3)	\$ 5,000 00 [none	N/A] N/A	To support general activities and the goals of the organization
Boerner Botanical Gardens 9400 Boerner Drive Hales Corners Wi 53130	39-1487898	501 (c) (3)	5,000 00	none	N/A] N/A	To support general activities and the goals of the organization
Boys and Girls Club of Dane County 2001 Taft St Madison WI 53713	39-1925617	501 (c) (3)	\$ 5,000 00	none	N/A	N/A	To support general activities and the goals of the organization
Boys and Girls Club of Kenosha Inc 1330 52ND St Kenosha WI 53140	39-1732935	501 (c) (3)	5,000 00	none	N/A	N/A	To support general activities and the goals of the organization
Brady Corp Foundation 6555 W Good Hope Rd Miwaukee WI 53223	20-3304824	501 (c) (3)	\$ 15,000 00	none	N/A	N/A	To support general activities and the goals of the organization
Brain Injury Association of WI Inc 21100 Capitol Drive Suite 5 Pewaukee WI 53072	39-1513035	501 (c) (3)	\$ 5,000 00	none	N/A	N/A	To support general activities and the goals of the organization
Bread of Healing Clinic 1821 North 16th Street Milwaukee WI 53205	81-0669867	501 (c) (3)	s 10,000 00]	none	N/A	N/A	To support general activities and the goals of the organization
Cardinal Stritch University 6801 N Yates Rd Milwaukee WI 53217	39-0806196	501 (c) (3)	\$ 5,000 00	none	N/A	N/A	To support general activities and the goals of the organization
Casa Guadalupe 479 N Main St West Bend WI 53090	20-4483105	501 (c) (3)	5,000 00	none -	N/A] N/A	To support general activities and the goals of the organization
Cathedral Center 845 N Van Buren St Mawaukee WI 53202	74-3038890	501 (c) (3)	s 5,000 00	none	N/A	N/A	To support general activities and the goals of the organization
Center for Teaching Entrepreneurship 2821 North 4th Street Milwaukee WI 53207	39 1776994	501 (c) (3)	5 000 00	none	NVA	N/A	To support general activities and the goals of the organization
Childrens Hospital of Wisconsin PO Box 1997 Milwaukee WI 53201-1997	39-0812532	501 (c) (3)	\$ 50,000 00	nane	N/A	N/A	To support general activities and the goals of the organization

Name of Organization Brewers Community Foundation Inc							EIN 39-1970152
		Attacl	hment to Form 990	Schedule I, Part II Line	1 (a)		
1 (a) Organization and Address	(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
City Events 45-2089416 Milwaukee WI 53222	45-2089416	501 (c) (3)	\$ 10,000 00	none	N/A	N/A	To support general activities and the goals of the organization
City Year Inc 287 Columbus Ave Boston MA 02116	22 2882549	501 (c) (3)	\$ 51,000 00	none	N/A	N/A	To support general activities and the goals of the organization
COA Youth & Family Centers 509 E North Ave Mäwaukee W153212-3447	39-0806339	501 (c) (3)	\$ 5,400 00	none	N/A	N/A	To support general activities and the goals of the organization
CORE/EI Centro Inc 511 West National Avenue No 409 Milwaukee WI 53204	39-2042797	501 (c) (3)	\$ 5,250 00	none	N/A	N/A	To support general activities and the goals of the organization
Danceworks 1661 N Water St Mänaukee WI 53202	39-1734312	501 (c) (3)	\$ 5,100 00	none	N/A	N/A	To support general activities and the goals of the organization
Discovery World 500 N Harbor Dr Mèvaukee Wi 53202	39-1691578	501 (c) (3)	\$ 10,000 00	none	N/A	N/A	To support general activities and the goals of the organization
Family House 3269 N 11th Street Milwaukee WI 53206	39-1574130	501 (c) (3)	\$ 5,000 00	none	N/A	N/A	To support general activities and the goals of the organization
Feeding America Eastern Wisconsin 1700 W. Fond du Lac Ave Milwaukee, WI 53205	39-1384593	501 (c) (3)	\$ 9,120 00	none	N/A	N/A	To support general activities and the goals of the organization
United Community Center DBA - Felox Mantilla 1028 S 9th St Milwaukee WI 53204 9957	39-1146191	501 (c) (3)	<u>s</u> -]	\$ 37,075 00	N/A	N/A	Fo support general activities and the goals of the organization
FigureHeads Inc 731 E Center St Méwaukee Wt 53212	20-5892228	501 (c) (3)	\$ 5,000 00	none	N/A	N/A	To support general activities and the goals of the organization
First Stage Milwaukee Inc. Performing Arts Center 325 W. Walnut Street Milwaukee. Wi 53212	39-1634828	501 (c) (3)	\$ 10,000 00	none	NA	N/A	To support general activities and the goals of the organization
Friends of Holton Inc 780 N. Water St Milwaukee. WI 53202	27-2047833	501 (c) (3)	\$ 10,000 00	none	Ĭ N/A	N/A	To support general activities and the goals of the organization
Girlfnends Ida M. Johnson Foundation 1809 N 4TH St Milwaukee WI 53212	27-3052599	501 (c) (3)	\$ 25,000 00	none	N/A	N/A	To support general activities and the goals of the organization
Girls on the Run 4430 N Cramer St Shorewood WI 53211	26-0403812	501 (c) (3)	\$ 5,000 00	none	N/A	N/A	To support general activities and the goals of the organization
Grand Avenue Club 210 E Michigan St Mikwaukee WI 53202 4901	39-1708177	501 (c) (3)	5,000 00	none	N/A	N/A	To support general activities and the goals of the organization
Greater Milwaukee Foundation 101 W Pleasant SI Ste 210 Milwaukee W1 53212	39-6038407	501 (c) (3)	\$ 50,000 00	none	N/A	N/A	To support general activities and the goals of the organization
Guest House of Milwaukee Inc 1216 N 13th Street Milwaukee VVI 53205	39-1539301	501 (c) (3)	\$ 35,000 00	none	NA	N/A	To support general activities and the goals of the organization
Hispanic Chamber of Commerce 1021 W National Avenue Milwaukee WI 53204	39-1293583	501 (c) (3)	7,300 00	none	NIA	N/A	To support general activities and the goals of the organization
Hispanic Professionals of Greater Mke 514 W National Ave Mawaukee WI 53204	90-0098434	501 (c) (3)	\$ 10,000 00	none	N/A	N/A	To support general activities and the goals of the organization
Hometown Heroes 1000 Badger Cir Graffon WI 53024	90-0421984	501 (c) (3)	\$ 10,000 00	none	N/A	N/A	To support general activities and the goals of the organization
Hope House of Milwaukee 209 W Orchard St PO Box 04095 Milwaukee WI 53204	39 1592900	501 (c) (3)	\$ 5,000 00	none	N/A	N/A	To support general activities and the goals of the organization

						1	
Name of Organization							EIN 39-1970152
Brewers Community Foundation Inc							39-1970152
		Attac	hment to Form 990	Schedule I, Part II Line	1 (a)	·	
		Ī					1
1 (a) Organization and Address	(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
Impact 6737 W Washington Street	39-0988784	501 (c) (3)	5 10,000 00	none	N/A	N/A	To support general activities and the goals
Suite 2225 Milwaukee WI 53214 3151							of the organization
Aumaurae Wisself Sign							
Independence First							To support general
540 South 1st Street Mitwaukee WI 53204	39-1343425	501 (c) (3)	\$ 5,000 00	none	N/A	N/A	activities and the goals of the organization
milwadkae VII 33204							
Harry and Rose Samson Family Jewish Communi							To support general
6255 N Santa Monica Blvd Milwaukee WI 53217	39-0806234	501 (c) (3)	\$ 15,000 00	none	N/A	N/A	activities and the goals of the organization
Journey House					· · · · · · · · · · · · · · · · · · ·		To support general
1900 W Washington SI Milwaukee WI 53204	39-1203539	501 (c) (3)	\$ 10,000 00	none	N/A	N/A	activities and the goals of the organization
Komen							To support general
2025 W Oklahoma Avenue Suite 116	75-2844639	501 (c) (3)	\$ 12,710 00	none	N/A	N/A	activities and the goals of the organization
Milwaukee WI 53215							4
Le Casa de Esperanza Inc 410 Avcadian Ave	16-1640771	501 (c) (3)	\$ 5,000 00	none	T N/A	N/A	To support general activities and the goals
Waukesha WI 53186	10 10407 [1		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		• • • • • • • • • • • • • • • • • • •		of the organization
LISC Milwaukee 660 East Mason Street, 5th Floor	13-3030229	501 (c) (3)	\$ 10,000 00	none	N/A	N/A	To support general activities and the goals
Milwaukee WI 53202	10-0000220	557 (2)(5)	10,000 00				of the organization
Literacy Services 555 N Plankmon Ave	39-1091203	501 (c) (3)	\$ 10,000 00	none	N/A	N/A	To support general activities and the goals
Milwaukee WI 53203	35-1031203	301(0)(3)	10,000 00	none	TVA	1	of the organization
Marcus Center For the Performing Arts Inc 929 N Water St.	51-0532407	170 (b) (1) (A) (vi)	\$ 14,850 00	none	N/A	N/A	To support general activities and the goals
Milwaukee WI 53202	31-0332407	I TIO (D) (I) (A)	14,000 00	none		I IVA	of the organization
Meta House 2625 N Weil St	39-1017822	501 (c) (3)	s 17,000 00	none	N/A	N/A	To support general activities and the goals
Milwaukee WI 53212	35-1017022	301(0)(3)	17,000 00	110110	100		of the organization
Milwaukee Area Workforce Investment 2338 N 27th Street	39-1636835	501 (c) (3)	\$ 10,000 00	none	N/A	l N/A	To support general activities and the goals
Milwaukee WI 53210-3100	33-1030033	00.(0/(0)	10,000 00	10.00		, ,,,,	of the organization
Mitwaukee Christian Center 2137 W Greenfield Ave	39-0807066	501 (c) (3)	\$ 10,000 00	none	T N/A	N/A	To support general activities and the goals
Milwaukee WI 53204		1				·	of the organization
Milwaukee Community Service Corp 1441 N 7TH St	39-1680843	501 (c) (3)	\$ 5,000 00	none	N/A	N/A	To support general activities and the goals
Milwaukee WI 53205		1-,			-		of the organization
Milwaukee Film 229 E Wisconsin Ave Ste 200	26-3049630	501 (c) (3)	\$ 5,000 00	none	N/A	N/A	To support general activities and the goals
Milwaukee WI 53202							of the organization
Milwaukee Habitat for Humanity 3726 North Booth Street	39-1498741	501 (c) (3)	\$ 30,000.00	none	T N/A	N/A	To support general activities and the goals
Malwaukee WI 53212	<u> </u>						of the organization
Milwaukee Jewish Federation 1360 N Prospect Avenue	39-0806312	501 (c) (3)_	\$ 10,260 00	none	N/A	N/A	To support general activities and the goals
Milwaukee WI 53202							of the organization
Milwaukee Public Library Foundation Inc 814 W Milwaukee Ave	39-1610233	501 (c) (3)	\$ 10,000 00	none	N/A	I N/A	To support general activities and the goals
Milwaukee WI 53233-2309							of the organization
MA I II h I							To support
Milwaukee Urban Leaque 435 W North Ave	39-0826881	501 (c) (3)	\$ 11,000 00	поле	N/A	N/A	To support general activities and the goals
Milwaukee WI 53212-3146							of the organization
MANAGEMENT OF							To support general
Milwaukee Women's Center 4906 W Fond Du Lac Ave	32-0211087	501 (c) (3)	\$ 10,000 00	none	N/A	N/A	activities and the goals
Milwaukee WI 53218				<u> </u>			of the organization
Manage Sanata Carantana Farra 1							To succeed account
Money Savvy Generation Foundation 910 Sherwood Dr # 17	20-0618098	501 (c) (3)	\$ 10,000 00	none	N/A	N/A	To support general activities and the goals
Lake bluff IL 60044		<u> </u>		<u> </u>			of the organization
Manage Mana Callega							To support service
Mount Mary College 2900 N Menomonee River Plwy	39-0806154	501 (c) (3)	\$ 5,000 00	none	N/A	N/A	To support general activities and the goals
Mawaukee WI 53222							of the organization

Name of Organization Brewers Community Foundation Inc							EIN 39-1970152
		Attac	chment to Form 990	Schedule I, Part II Line	1 (a)		····
1 (a) Organization and Address	(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
MRA Chantes LLC N72 W12922 Good Hope Road Menomonee Falls WI 53051	39-1856240	501 (c) (3)	\$ 10,000 00	noné	N/A	N/A	To support general activities and the goals of the organization
Neighborhood House of Milwaukee 2819 W. Richardson Place Milwaukee WI 53208-3546	39-0806269	501 (c) (3)	\$ 5,150 00	noné	N/A	N/A	To support general activities and the goals of the organization
Next Door Foundation 2545 N 29TH SI Milwaukee WI 53210	39-1162969	501 (c) (3)	\$ 12,000 00	none	N/A	N/A	To support general activities and the goals of the organization
Our Next Generation 804 E Juneau Ave Milwaukee WI 53202	39-1761838	501 (c) (3)	\$ 10,000 00	none	N/A	N/A	To support general activities and the goals of the organization
Pathfinders 4200 N Holton Street, Suite 400 Mitwaukee WI 53212	39-1185304	501 (c) (3)	5 000 00	none	N/A	NA	To support general activities and the goals of the organization
Pearls for Teen Girls 2100 N Palmer Street Milwaukee WI 53212-3220	39-1997970	501 (c) (3)	\$ 10,000 00	none	N/A	N/A	To support general activities and the goals of the organization
Penfield Children's Center 833 North 26th Street Milwaukee WI 53233	39-1093701	501 (c) (3)	\$ 10,500.00	none	N/A	N/A	To support general activities and the goals of the organization
Renaissance Theaterworks 158 N Broadway Milwaukee WI 53202	39-1783607	501 (c) (3)	\$ 5,000 00	none	N/A	N/A	To support general activities and the goals of the organization
Repairers of the Breach 1335 West Viiet Street Milwaukee WI 53213	39-1707495	501 (c) (3)	5,000 00	none	N/A	N/A	To support general activities and the goals of the organization
Rotary Club of Milwaukee Community Trust 750 N Lincoln Memoral Dr Rm 320 Milwaukee WI 53202	39-0579290	_501 (c) (3)	\$ 30,000 00 }	none_] N/A	N/A	To support general activities and the goals of the organization
Running Rebets Community Organization 1300A W Fond Du Lac Ave Milwaukse WI 53205	39-3910464	501 (c) (3)	\$ 10,000 00	none	N/A	N/A	To support general activities and the goals of the organization
Safe & Sound 801 W Michagan St Milwaukee WI 53233	39 1940292	501 (c) (3)	\$ 10,000 00	none		N/A	To support general activities and the goals of the organization
Salvation Army of Greater Milwaukee	39-0806889	501 (c) (3)	\$ 5,000 00	none	N/A	N/A	To support general activities and the goals of the organization
Sharon Lynne Wilson Center for the Arts 17100 West North Ave Brookfield WI 53005	39-1787648	501 (c) (3)	5,000 00	none	N/A	N/A	To support general activities and the goals of the organization
Sharp Literacy Inc % Marlene M Doerr 750 N Lincoln Memorial Dr - RM 311 Milwaukee WI 53202-4019	39-1963963	501 (c) (3)	\$ 5,100,00	none	N/A	N/A	To support general activities and the goals of the organization
Sojourner Family Peace Center Inc P O Box 080319 Milwaukee WI 53208-8005	39-1276210	501 (c) (3)	30 000 00	none	N/A N/A	N/A	To support general activities and the goals of the organization
Sophia's Heart 2176 Christina Ct Hermitage TN 37076	26-3807015	501 (c) (3)	\$ 5,000 00	none	N/A	N/A	To support general activities and the goals of the organization
St Francis Children's Center 6700 N Port Washington Rd Mäwaukee WI 53217	39-6092761	501 (c) (3)	\$ 5,000 00	none	N/A	N/A	To support general activities and the goals of the organization
The Joe Torre Safe At Home Foundation P O Box 3133 New York, NY 10163	03-0442514	501 (c) (3)	\$ 5,000.00	none	N/A	N/A	To support general activities and the goals of the organization
The Moyer Foundation 2426 32nd Ave West, Suite 200 Seattle WA 98199	91 2065051	501 (c) (3)	\$ 5 000 00	none	N/A	N/A	To support general activities and the goals of the organization
The Women's Center 505 North East Avenue Waukesha WI 53186	39 1269698	501 (c) (3)	\$ 10,000 00	none	N/A	N/A	To support general activities and the goals of the organization

Name of Organization							EIN
Brewers Community Foundation Inc							39-1970152
		Attac	hment to Form 990	Schedule I, Part II Line	1 (a)		
_							· · · · · · · · · · · · · · · · · · ·
1 (a) Organization and Address	(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
UMOS Inc		1					To support general
2701 South Chase Avenue Milwaukee WI 53207	39-1047172	501 (c) (3)	5 7,000 00	none	N/A	NA	of the organization
United Cerebal Palsy of Southeastern WI inc 7519 W Oklahoma Ave	39-1143353	501 (c) (3)	\$ 15,340 00	none	N/A	N/A	To support general activities and the goals
Milwaukee WI 53219-2861 193							of the organization
United Neighborhood Centers of Milwaukee 1900 W Washington St	90-6031721	501 (c) (3)	\$ 10,000 00	none	N/A	N/A	To support general activities and the goals
Säver Spring Neighborhood Center Milwaukee WI 53204							of the organization
United Way of Greater Milwaukee 221 W Vine St	39-0806190	501 (c) (3)	\$ 8,500.00	none	N/A	N/A	To support general activities and the goals
Milwaukee WI 53212						-	of the organization
UPAF 929 N Water St	39-6100399	501 (c) (3)	\$ 8,000 00	none	N/A	N/A	To support general activities and the goals
Milwaukee WI 53202	30 070000	1			1		of the organization
Urban Ecology Center Riverside Park	39-1712663	501 (c) (3)	\$ 10,000.00	none	N/A	N/A	To support general activities and the goals
1500 E Parl Place Milwaukee WI 53211							of the organization
US Fund for UNICEF	42.4700440	F01 (2) (2)	12 500 00		- WA		To support general
125 Maiden Lane New York NY 10038	13-1760110	501 (c) (3)	12,500 00	none	N/A	N/A	activities and the goals of the organization
Ushers New Look 3700 Crestwood Pkwy Nw Ste 460	58-2480934	501 (c) (3)	\$ 10,000 00	none	N/A	N/A	To support general activities and the goals
Duhuth GA 30096	30-2400334	1 301 (0)(0)	10,000 00	Hone	142	N/A	of the organization
Walker's Point Youth & Family Center 911 West National Avenue	39-1589878	501 (c) (3)	\$ 5,000 00	none	T N/A	N/A	To support general activities and the goals
Milwaukee WI 53204-1345							of the organization
Whitewater Community Foundation PO Box 403	39-1815260	501 (c) (3)	\$ 10,000 00	none	N/A	N/A	To support general activities and the goals
Whatewater WI 53190							of the organization
Wisconsin Regional Training Partnership 303 E Vienna Ave	39-1838210	501 (c) (3)	\$ 10,000 00	none	N/A	N/A	To support general activities and the goals
Malwaukee WI 53212							of the organization
Wisconsin Sports Development Corporation 313 W Betline Hwy	39-1476965	501 (c) (3)	\$ 7,500 00	none	N/A_	N/A_	To support general activities and the goals
Suite 161 Madeon WI 53713			- 				of the organization
Wisconsin Women's Business Initiative 2745 N Dr Martin Luther King	39-1597954	501 (c) (3)	\$ 5,000 00	nonė	N/A	N/A	To support general activities and the goals
Milwaukee WI 53212				···			of the organization
Women's Fund of Greater Milwaukee 316 N Milwaukee Street	20-3514894	501 (c) (3)	\$ 11,500 00	none	N/A	N/A	To support general activities and the goals
Suite 215 Milwaukee WI 53202							of the organization
YMCA of Metropolitan Milwuakee	···				·		To support general
161 W Wisconsin Ave Suite 4000 Milwaukee WI 53203	39-0806314	501 (c) (3)	\$ 159,104 00	\$ 11,900 90	N/A	N/A	activities and the goals of the organization

SCHEDULE O (Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ

OMB No 1545-0047

Open to Public Inspection

Employer identification number

Department of the Treasury Internal Revenue Service Name of the organization 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.

Brewers Community Foundation Inc.	39-19/0152
Form 990, Part III, Line 4d - Other Program Services:	
Includes unrestricted and restricted grants through other programs such as Sausage Race, An Evenir	ng with Hank Aaron, Pink Tie Guy and
other various initiatives.	
Form 990, Part VI, Line 11 - Form 990 Review Process:	
Form 990 is reviewed by the Board prior to filing.	
Form 990, Part VI, Line 12c - Explanation of Monitoring and Enforcement of Conflicts:	
The policy is reviewed annually with the Board, Board signs off on the policy and disclose interests a	nnually at a formal board meeting.
Form 990, Part VI, Line 19 - Other Organization Documents Publicly Available	
Documents available at organization place of business upon request.	

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.

▶ See separate instructions. ▶ Attach to Form 990.

T	(
\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	
U	(

OMB No 1545-0047

Open to Public Inspection

Employer Identification number

(g) Section 512(b)(13) controlled entity? (f)
Direct controlling
entity Schedule R (Form 990) 2011 ž 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.) Yes 39-1970152 (f)
Direct controlling
entity (e) End-of-year assets (e)
Public charity status
(if section 501(c)(3)) Identification of Disregarded Entities (Complete if the organization answered "Yes" to Form 990, Part IV, line 33.) (d) Total income (d) Exempt Code section (c)
Legal domicile (state
or foreign country) Cat No 50135Y (c)
Legal domicite (state or foreign country) (b) Primary activity (b) Primary activity For Paperwork Reduction Act Notice, see the Instructions for Form 990. (a) Name, address, and EIN of disregarded entity (a) Name, address, and EIN of related organization (2) Brewers Community Foundation Inc. Name of the organization Part I (1) None. Part II 9 ପ € (2) **Đ** <u>ග</u> 9 Ξ 8 ල E

(k) Percentage, ownership Ϋ́ Percentage ownership Ξ 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.) 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.) (i) General or managing partner? end-of-year assets N/A ŝ (g) Share of Yes ¥ (i)
Code V—UBI
amount in box 20 of
Schedule K-1 Š (f) Share of total (Form 1065) income (e)
Type of entity
(C corp, S corp, (h) Disproportionate allocations? ŝ or trust) Yes S Corp. (g) Share of end-of-Ϋ́ year assets (d) Direct controlling entity N/A (f) Share of total ξ (c) Legal domicile foreign country) state or Ϋ́ (e)
Predominant
income (related,
unrelated,
excluded from
tax under
sections 512-514) ₹ Primary activity (d)
Unect controlling entity Promo. baseball ¥. (c)
Legal
domicile
(state or
foreign
country) ₹ Miller Park, One Brewers Way, Milwaukee, WI 53214 Name, address, and EIN of related organization (b) Primary activity (1) Milwaukee Brewers Baseball Club Inc. Promo. baseball (a) Name, address, and EIN Milwaukee, WI 53214 related organization **Brewers Baseball** (3) Brewers Way Miller Park, One (4) 39-1136376 (2) 37-0899413 (1) Milwaukee (2) Club LP Part III Part IV (2) ପ € © 9 9 8 ε

Schedule R (Form 990) 2011

١	S No	<u> </u>	>	>	>	>		>	>	>	>	>	>	>		>	<u> </u>	>	>	>	olds.	mining		ple	ģ		•			10) 2011
	Yes	1a	9	10	1 q	1e		+	19	무	i=	1j	¥	=	1m	무	<u>م</u>	1p	19	+	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.	(d) Method of determining amount involved		0.00 Not determinable	64,286.91 Actual Amt. Paid		ļ			Schedule R (Form 990) 2011
																					ansaction	Met	-	00 Not d	91 Actu			_		hedule F
	Ş		•					•						•		•			•		s and tr) nvolved		0	64,286.					8
	= 1	י שונא וי י שונא וי						•			•										tionship	(c) Amount involved								
	!		•								•	•	•								red rela		-							$\left\{ \right.$
	1			•		•		•		•			•	•	•		:	•			g cove	(b) Transaction type (a-r)	(Lp)							
		ıgalııza				•									•		•		•		ıncludır	Trans)							
	7 4 6							•			•	•					•	•	•		hıs line,			E	0					
	1	. de		•	•											•			•		nplete t									
												•	tion(s)	ion(s)		•	•		•		nust cor									
		i				•							rganıza	rganızat	sets with related organization(s)						n who r							•		
	oi .	liansact		•	•							· (S)	elated c	elated o	d organi						nation o									
	of this schedule.	Control								•	ation(s)	ization(ons for r	ons by r	related		•	•	•		or inforn									
	of this s	t from a	(8)	on(s)							organization(s)	d orgar	olicitatic	olicitatic	sets with		. sest	ses .	(s)	ion(s)	ctions fo	zation								
	II, or IV	in ally o	ization)	anızatı	zation(s)	(s)		•	•	•		m relate	aising sa	aisıng se	ther ass	. (s)uoi	r expen	r expen	nızatıon	ganızatı	e instru	(a) ter organiz								
	arts II, I	alties or	d organ	ated or	organiz	nization			(s)uoi	(s)uoi	sets to	sets fro	or fundra	or fundra	sts, or o	ganızat	on(s) fo	ion(s) fo	ed orga	ated or	" see th	(a) Name of other organization					· .			
	ted in P	(iii) rova	to relate	from rel	related	ed organ	,	ion(s) .	rganızat	rganızaf	other as	other as	ership c	ership c	arling lis	lated or	ganızatı	ganızat	to relat	from re	is "Yes,'	ž								
	ity is lis	e organi	button	pution	to or for	by relate	•	rganizat	elated o	elated o	ent, or c	ent, or c	r memb	r memb	ment, m	with re	lated or	lated or	roperty	roperty	above			lub LP	ub LP		:			
	any ent	, old III	al contr	al contr	antees	antees		elated o	from re	s with re	ednibm	ednibm	rvices o	rvices o	, equipi	ployees	id to re	ıd by re	ash or p	ash or p	y of the			seball C	seball C					
	line 1 if	iax yea (i) intere	or capit	or capit	an quar	an quar)	ets to re	of assets	of asset	cilities,	cilities,	se of se	se of se	facilities	paid err	ment pa	ment pa	fer of c	fer of c	er to an			wers Ba	wers Ba					
	omplete	During the tax year, did the organization engage in any of the following transactions with one of more related organizations issed in Farts in-1979. Beceint of (ii) interest (iii) annuties (iii) royalties or (iv) rent from a controlled entity	Gift. grant, or capital contribution to related organization(s)	Gift, grant, or capital contribution from related organization(s)	Loans or loan quarantees to or for related organization(s	Loans or loan quarantees by related organization(s)		Sale of assets to related organization(s)	Purchase of assets from related organization(s)	Exchange of assets with related organization(s)	Lease of facilities, equipment, or other assets to related	Lease of facilities, equipment, or other assets from related organization(s)	Performance of services or membership or fundraising solicitations for related organization(s)	Performance of services or membership or fundraising solicitations by related organization(s)	Sharing of facilities, equipment, mailing lists, or other as	Sharing of paid employees with related organization(s)	Reimbursement paid to related organization(s) for exper	Reimbursement paid by related organization(s) for expenses	Other transfer of cash or property to related organization(s)	Other transfer of cash or property from related organization(s)	ne answ			Milwaukee Brewers Baseball Club LP	Milwaukee Brewers Baseball Club LP					
	Note. Complete line 1 if any entity is listed in Parts II, III, or IV	B Cu	e G					Sal	a Pur			j Lea	k Per	l Per	m Sha	n Sh	o Rei	p Reli	a	Ę Ę	2 If th								_	
																					•			Ξ	(2)	69	9	(2)	9	4

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

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.

or gross revenue) that was not a related organization. See instructions regarding exclusion for certain investment partnerships.	ganization. See	INSTRUCTIONS	agarding exclusi	ori ior certa	in investment pa	irmersinps.				
(a) Name, address, and EIN of entity	(b) Primary activity	(c) Legal domicile	(d) Predominant	(e) Are all partners	(f) Share of	(g) Share of	(n) Disproportionate	(I) Code V—UBI		(k) Percentage
		(state or foreign country)		section 501(c)(3)	total income	ַ	allocations?	amount in box 20 of Schedule K-1	managing partner?	
			from tax under	organizations?				(Form 1065)		
			() = 10 100000	Yes No		•	Yes No		Yes No	
(1)										
(2)										
(6)										
(4)	,								-	
(5)										
(9)										
(4)										
(8)										
(6)										
(10)										_
(11)										
(12)										
(13)							-			_
(14)										
(15)	-									
(16)	•									
								Sche	dule R (Fo	Schedule R (Form 990) 2011

scneaule K (r	om 990) 2011	Page 3
Part VII	Supplemental Information Complete this part to provide additional information for responses to questions on Schedule R (see instructions).	
-		
		
		·

		·
		·
	······································	·



Financial Statements
December 31, 2011 and 2010

(With Independent Auditor's Report Thereon)

Financial Statements

Table of Contents

	Page
Report of Independent Auditors	1
Statements of Financial Position	2
Statements of Activities and Changes in Net Assets	3
Statements of Cash Flows	4
Notes to Financial Statements	5

KOSLER & COMPANY, S.C.

CERTIFIED PUBLIC ACCOUNTANTS
AND CONSULTANTS

N16 W23233 STONE RIDGE DRIVE, SUITE 150
WAUKESHA, WISCONSIN 53188
TELEPHONE (262) 522-3200 • FACSIMILE (262) 522-3201
WWW.KOSLERCPA.COM

REPORT OF INDEPENDENT AUDITORS'

Board of Directors Brewers Community Foundation, Inc. Milwaukee, Wisconsin

We have audited the accompanying statements of financial position of Brewers Community Foundation, Inc. (a Nonprofit Organization) as of December 31, 2011 and 2010, and the related statements of activities and changes in net assets, and cash flows for the years then ended. These financial statements are the responsibility of the Organization's management. Our responsibility is to express an opinion on these 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 financial statements are free of material misstatement. An audit includes examining, on a test basis, evidence supporting the amounts and disclosures in the 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 opinion.

In our opinion, the financial statements referred to above present fairly, in all material respects, the financial position of Brewers Community Foundation, Inc. as of December 31, 2011 and 2010, and the changes in its net assets and cash flows for the years then ended in conformity with accounting principles generally accepted in the United States of America.

Waukesha, Wisconsin

May 30, 2012

Brewers Community Foundation, Inc. Statements of Financial Position

Years ended December 31, 2011 and 2010

Assets	2011	2010
Current Assets:		
Cash and cash equivalents	\$ 718,484	\$ 580,304
Accounts receivable .	10,000	54,157
Pledge receivable - current, net	98,746	98,493
Cash and cash equivalents restricted for donations - current	109,794	210,831
Total current assets	937,024	943,785
Other Assets:		
Cash and cash equivalents restricted for donations - non-current	334,861	390,153
Pledge receivable - non-current, net	288,870	379,352
Total other assets	623,731	769,505
Total assets	\$ 1,560,755	\$ 1,713,290
Liabilities and Net Assets Current Liabilities: Accounts payable Accrued expenses Deferred revenue - current Total current liabilities	\$ 17,850 27,800 100,000 145,650	\$ - 39,023 100,000 139,023
Long Term Liabilities:		
Deferred revenue - non-current	300,000	400,000
Net Assets:		
Unrestricted net assets	670,450	573,283
Temporarily restricted net assets	444,655	600,984
Total net assets	1,115,105	1,174,267
Total liabilities and net assets	\$ 1,560,755	\$ 1,713,290

Brewers Community Foundation, Inc. Statements of Activities and Changes in Net Assets

Years ended December 31, 2011 and 2010

		2011 2010				
	Unrestricted	Restricted	Total	Unrestricted	Restricted	Total
Support and Revenue:						
Contributions	364,988	576,188	941,176	641,000	660,732	1,301,732
Special event revenue	1,985,397	284,163	2,269,560	986,819	236,767	1,223,586
Other	1,098	4,326	5,424	3,339	10,988	14,327
Total support and revenue	2,351,483	864,677	3,216,160	1,631,158	908,487	2,539,645
Net assets released from restrictions	1,021,006	(1,021,006)	-	878,427	(878,427)	-
Expenses:						
Grants	1,389,964	-	1,389,964	854,643	-	854,643
Special event expenses	1,306,375	-	1,306,375	624,914	-	624,914
Program expenses	482,927	-	482,927	477,400	-	477,400
Other administrative expenses	109,895	-	109,895	69,010		69,010
Total operating expenses	3,289,161	-	3,289,161	2,025,967		2,025,967
Non Operating Activity:						
Adjustment to discount on pledges	(9,771)	-	(9,771)	22,155	-	22,155
Realized (gain) loss on securities	(4,068)	-	(4,068)	18,000		18,000
Total non-operating activitiy	(13,839)	<u> </u>	(13,839)	40,155		40,155
Change in net assets	97,167	(156,329)	(59,162)	443,463	30,060	473,523
Beginning net assets	573,283	600,984	1,174,267	129,820	570,924	700,744
Ending net assets	670,450	444,655	1,115,105	573,283	600,984	1,174,267

Brewers Community Foundation, Inc. Statements of Cash Flows

Years ended December 31, 2011 and 2010

	2011	2010
Cash Flows From Operating Activities:		
Change in net assets	\$ (59,162)	\$ 473,523
Adjustments to reconcile change in net assets to net cash		•
provided by (used in) operating activities:		
Realized loss on investments	(3,424)	20,114
Accounts receivable	44,157	(46,657)
Pledge receivable	(100,000)	(500,000)
Discount on pledge receivable	(9,771)	22,155
Liabilities	6,627	20,869
Net cash used in operating activities	(121,573)	(9,996)
Cash Flows From Investing Activities:		
Proceeds from sales of investments	103,424	479,886
Net cash provided by investing activities	103,424	479,886
Net change in cash and cash equivalents	(18,149)	469,890
Cash and cash equivalents at beginning of year	1,181,288	711,398
Cash and cash equivalents at end of year	\$ 1,163,139	\$ 1,181,288

Notes to Financial Statements **Years ended December 31, 2011 and 2010**

1. Description of Business

Brewers Community Foundation, Inc. ("BCF"), a not-for-profit organization was incorporated in 1999 to raise funds to provide grants for various charitable organizations and activities to better the lives of children and improve communities throughout the State of Wisconsin. In December 2009, BCF changed its name from Brewers Charities, Inc. to BCF.

2. Summary of Significant Accounting Policies

a. Basis of Presentation

The accompanying financial statements have been prepared on the accrual basis of accounting in accordance with generally accepted accounting principles in the United States of America ("GAAP"). BCF receives revenues primarily from programs and contributions. Net assets and revenues are classified based on the existence or absence of donor-imposed restrictions. Accordingly, net assets of BCF and changes therein are classified and reported as follows:

Unrestricted net assets – Net assets that are not subject to donor imposed stipulations.

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

Permanently restricted net assets – Net assets subject to donor-imposed stipulations that they be maintained permanently by BCF. BCF has not received any contributions that would result in permanently restricted net assets.

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

b. Contributions

Contributions, including unconditional promises to give, are recorded as made. All contributions are available for unrestricted use unless they are specifically restricted by the donor. Conditional promises to give are recognized when the conditions on which the contributions depend are substantially met. Unconditional promises to give due in the next year are recorded at their net realizable value. Unconditional promises to give in subsequent years are reported at the present value of their net realizable value, using risk-free interest rates applicable to the years in which the promises are expected to be received. There was a

Notes to Financial Statements **Years ended December 31, 2011 and 2010**

\$400,000 and \$500,000 unconditional promise to give as of December 31, 2011 and 2010, respectively. There were no conditional promises to give as of December 31, 2011 and 2010, respectively.

c. Cash and Cash Equivalents

For purposes of the statements of cash flows, BCF considers the amounts representing cash and highly liquid debt instruments with a maturity of three months or less as of the purchase date to be cash and cash equivalents. Money market accounts held at brokerage firms are considered cash and cash equivalents for classification in the statements of financial position and cash flows.

d. Donated Services

Many individuals volunteer their time and perform a variety of tasks to assist BCF with specific programs, fund-raising efforts and various committee assignments. No amounts have been reported in the financial statements for these donated services.

e. Income Taxes

BCF is exempt from income taxes under Section 501(c)(3) of the Internal Revenue Code. Accordingly, no provision for income taxes is included in the accompanying financial statements. Generally accepted accounting principles require disclosure of uncertain tax positions which meet certain criteria. Management has evaluated the tax-exempt status of BCF and has determined that it is more likely than not that BCF's status would be upheld in the event of an examination by a taxing authority. In addition, BCF does not undertake any activities that may give rise to unrelated business taxable income or the associated unrelated business income tax. Therefore, no tax provision and no amounts for current or future tax assets or liabilities is reported for uncertain tax provisions.

f. Subsequent Events

Management evaluated subsequent events through May 30, 2012, the date financial statements were available to be issued. Events or transactions occurring after December 31, 2011, but prior to May 30, 2012, have been recognized in the financial statements for the year ended December 31, 2011. Events or transactions that provided evidence about conditions that did not exist at December 31, 2011 but arose before the financial statements were available to be issued have not been recognized in the financial statements for the year ended December 31, 2011.

Notes to Financial Statements Years ended December 31, 2011 and 2010

3. Pledge Receivable

Pledge receivable consists of unconditional promises to give to BCF for years subsequent to . December 31, 2011. Pledge receivable is stated at the present value of estimated future cash flows using a discount rate of 1.27% at December 31, 2011, compounded annually.

Pledge receivable consists of the following:

		2010
Gross pledge receivable	\$ 400,000	\$500,000
Discount to present value	(12,384)	(22,155)
Net pledge receivable	\$ 387,616	\$477,845

Unconditional promise to give consists of the following cash flows:

		2010		
		Present Value		
	Total	Discount	Net	Net
Amount due in				
2011	\$ -	\$ -	\$ -	\$ 98,493
2012	100,000	(1,254)	98,746	97,009
2013	100,000	(2,492)	97,508	95,547
2014	100,000	(3,715)	96,285	94,107
2015	100,000	(4,923)	95,077	92,689
Net unconditional promise to give	\$400,000	\$(12,384)	\$ 387,616	\$477,845

Notes to Financial Statements **Years ended December 31, 2011 and 2010**

4. Temporarily Restricted Net Assets

Temporarily restricted net assets were available for the following purposes:

	2011	2010
Selig Scholarship	\$ 423,861	\$479,153
Player Designated Programs	13,252	34,740
Susan G Komen	7,542	87,091
Total restricted net assets	\$ 444,655	_\$600,984

5. Related Party Transactions

Officers of the Milwaukee Brewers Baseball Club, Limited Partnership ("Brewers") also serve as Directors and Officers of BCF. In addition, BCF uses space and equipment owned by the Brewers.

Occasionally, revenues and services provided to BCF are processed by the Brewers. The net amount due to the BCF from the Brewers was \$0 and \$54,157 as of December 31, 2011 and 2010, respectively.

6. Collections

BCF owns a collection of autographed baseballs. The fair market value of the collection has not been determined and no amount for this collection has been included in the accompanying financial statements. The baseballs are held for safekeeping at Miller Park in Milwaukee, Wisconsin.

7. Concentration of Credit Risk

BCF maintains cash accounts at one financial institution and one brokerage institution. As of December 31, 2010, the Federal Deposit Insurance Corporation abolished the insurance limit on non-interest bearing accounts at financial institutions. The uninsured interest-bearing bank balance at December 31, 2011 and December 31, 2010 was \$98,856 and \$275,484, respectively. The cash accounts held at the brokerage institution are insured by the Securities Investor Protection Corporation up to \$500,000 as of December 31, 2011 and 2010. There were no uninsured balances as of December 31, 2011 and 2010.