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990. Form

Return of Organization Exempt From Income Tax

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

2011

OMB No 1545-0047

Department of the Treasury

Open to Public

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<u> </u>	For the	2011 calend	dar year, or tax year begi			'-01, 2011, and e	nding			06-30, 20 12
В	Check if a	pplicable	C Name of organization WI:	CONSIN SCHOLASTIC	CHESS FE	DERATION				D Employer identification no
	Address o	hange	Doing Business As							20-1197133
ı	Name cha	ange	Number and street (or PO bo	x if mail is not delivered to street ac	ddress)		Room/	suite		E Telephone number
ı 🗌	nıtıal retu	ırn	10307 TRILLIUM	RD						
	Terminate	d	City or town, state or country,	and ZIP + 4						49,812
	Amended	return	MEQUON, WI 5309	92		•			- 1	G Gross receipts \$
	Applicatio	n pending -	F Name and address of princi	pal officer ROBERT PAT	rerson-su	MWALT				
			SAME AS C ABOVE	2			H(a)	ls this a gro affiliates?	oup retu	ırn for Yes X No
	Tax-exem	pt status X	501(c)(3) 501(c) () (Insert no) 4947(a	a)(1) or	527	— H(b)		ates in	cluded? Yes No
J	Vebsite	▶ WIS	CONSINSCHOLASTIC	HESS.ORG			H(c)	If "No," atta Group exer	ich a lis nption i	st (see instructions)
K	orm of o	rganization	Corporation Trust X Ass	ociation Other		L Year of formation 2	2004	M State	of lega	I domicile WI
Pa	rt I	Summar								
	1			sion or most significant act	tivities TO	PROMOTE CHES	S FOR	THE YO	UTH	IN GREATER
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t o				ACH PROGRAM, CONDU						
v e	2			n discontinued its operation				net accets		
l r t n	3			erning body (Part VI, line 1					3	1 7
la en	4			rs of the governing body (I					4	7
e n	5			n calendar year 2011 (Par					5	,
e &	6			necessary)					6	35
_	1									35
				Part VIII, column (C), line					7a	
	0	Net unrelate	d dusiness taxable income	from Form 990-T, line 34	• • • • • •	• • • • • • • • •		•	7b	0
R	_	0 4 - 1 - 1 - 1 - 1	(D \(\text{U} \)	- 41-1		-		Pnor Year		Current Year
_ e _ v	1			∍ 1h)		<u>-</u>				3,555
e	9			e 2g)						46,257
n u	1			(A), lines 3, 4, and 7d)		<u> </u>				0
9	11			nes 5, 6d, 8c, 9c, 10c, and						0
-	12			(must equal Part VIII, colu		 				49,812
1			· · · · · · · · · · · · · · · · · · ·	IX, column (A), lines 1-3)		· · · · · ·				0
E	14			X, column (A), line 4)		-				0
j ×)		er compensation, employe				0			
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⊒ n s			sing expenses (Part IX, co	· —			<i>*</i> •	<u> </u>	.*	2, 3,
Σ-e s				nes 11a-11d, 11f-24e) .		<u> </u>				47,209
ာ ်				t equal Part IX, column (A)	, line 25)					47,209
<u> </u>	19	Revenue les	s expenses Subtract line	18 from line 12	77.					2,603
Net Assets					LIVE	LIVED	Beginnin	g of Current Y		End of Year
or	20		(Part X, line 16)	· · · · · · · · · · · · · · · · · · ·	$\sqrt{\cdots}$		1	10	, 351	
Fund Bai-	21		es (Part X, line 26)		ลี - กกรา	9 9 9 9 9 9	<u> </u>			1,056
ances	22		r fund balances Subtract	line 21 from line 20	<u>.1 ? ? ! .</u> .	4 .9 . 2012 . 149	<u> </u>	10	, 351	3,589
Pa			re Block		C) di	100				
true, c	penames orrect, ar	s of perjury, it decis nd complete Decl	are that I have examined this return aration of preparer (other than office	n, including accompanying scheduli er) is based on all information of w	nich preparer has	and to the best of my v	lowledge	and belief, it	is	
		—				M		1 0		00 04 0010
Sig	n		RT PATTERSON-SUMW. e of officer	ALT .	Dige 1/0	A AA	-//	11	Date	09-24-2012
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Her	е		RT PATTERSON-SUMW. print name and title	ALLI, ERESIDENT	/!V~r.[/	1 / With				10/45/10
		<u> </u>	·	December 1997	· · · · · · · · · · · · · · · · · · ·	Date	 1	Check X	., -	OTIN .
D - '	J	Print/Type pre		Preparer's signature		09-24-2012				PTIN P00217585
Paid			UTENHOOFD	JOHN TOUTENHOOFD		03-24-2012	Farmin	self-employe	<u>"u</u>	E0021/J0J
	parer		T Accoun		Firm's EIN Phone no					
USE	Only	Firm's address		land Ave - Ste 31	U		Prione	TIU	A 1	14-704-4718
		1	Mılwauke	L		4.				
				hown above? (see instructions	ions)	· · · · · · · · · · ·	• • • •		EEA	X Yes No
ror l	raperv	vork Keducti	on Act Notice, see the se	sparate instructions.						Form 990 (2011)

For Paperwork Reduction Act Notice, see the separate instructions.

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Form 990 (2011) WISCONSIN SCHOLASTIC CHESS FEDERATION

Part IV

WISCONSIN SCHOLASTIC CHESS FEDERATION

Checklist of Required Schedules

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes,"			
	complete Schedule A	1	X	
2	Is the organization required to complete Schedule B, Schedule of Contributors? (see instructions)?	2	X	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to		0	
	candidates for public office? If "Yes," complete Schedule C, Part I	3		X
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h)			
	election in effect during the tax year? If "Yes," complete Schedule C, Part II	4		Χ
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		X
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		Х
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes,"			
	complete Schedule D, Part III	8		Х
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		Х
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		Х
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI,	-	34	
	VII, VIII, IX, or X as applicable		19.5	
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes,"	Year -		
	complete Schedule D, Part VI	11a		Х
t	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		Х
c	Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more			
	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		Х
c	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		Х
е		11e		Х
f				
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f		Х
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			
	Schedule D, Parts XI, XII, and XIII	12a		Х
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		Х
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		Х
14a		14a		Х
b				
	fundraising, business, investmetnt, and program service activities outlisde the United States, or aggregate			
	foreign investments valued at \$100,000 or more? If "Yes,' complete Schedule F, Parts I and IV	14b		Х
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		Х
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		Х
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		Х
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		Х
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		Х
20a	- Control of the Cont	20a		Х
	If "Ves" to line 20a, did the organization attach its audited financial statements to this return?	20b		

Form 990 (2011) WISCONSIN SCHOLASTIC CHESS FEDERATION 20-1197133 Pa

Part IV Checklist of Required Schedules (continued)

Yes

21 Did the organization report more than \$5,000 of grants and other assistance to any government or organization

	•		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 12 If "Yes," complete Schedule I, Parts I and II	21		_X_
22	Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States			
	on Part IX, column (A), line 27 If "Yes," complete Schedule I, Parts I and III	22		X
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the		ĺ	
	organization's current and former officers, directors, trustees, key employees, and highest compensated			
	employees? If "Yes," complete Schedule J	23		X
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than			
	\$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b			
	through 24d and complete Schedule K if "No," go to line 25	24a		Χ
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year			
	to defease any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction			
	with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		Х
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		Х
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		Х
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		Х
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L,	333	. %	
	Part IV instructions for applicable filing thresholds, conditions, and exceptions)	* 4 12 20 20 20 20 20 20 20 20 20 20 20 20 20	-	` ;
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a	25	Χ
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete			
	Schedule L, Part IV	28b		Х
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		Х
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		X
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified		1	
	conservation contributions? If "Yes," complete Schedule M	30	ŀ	Х
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N,			
	Part I	31		Х
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		Х
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			
	sections 301 7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part I	33		X
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II, III,			
	IV, and V, line 1	34		Х
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		X
b	Did the organization receive any payment from or engage in any transaction with a controlled entity within the			
	meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		Х
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable			
	related organization? If "Yes," complete Schedule R, Part V, line 2	36		X
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R,			
	Part VI	37		X
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and			
	197 Note. All Form 990 filers are required to complete Schedule O	38	Х	

Part V Statements Regarding Other IRS Filings and Tax Compliance

	Check if Schedule O contains a response to any question in this Part V			. 🗆
		_	Yes	No
1a	Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable		\$:	, van
b	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable		3 ³³ , ·	- 577
С	Did the organization comply with backup withholding rules for reportable payments to vendors and			
	reportable gaming (gambling) winnings to prize winners?	1c	X	
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax	` *,**	·	
	Statements, filed for the calendar year ending with or within the year covered by this return 2a 0			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b		<u>X</u>
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)	شمــــــ		
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		X
b	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	3b		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority			
	over, a financial account in a foreign country (such as a bank account, securities account, or other financial			
	account)?	4a	· · · ·	X
b	If "Yes," enter the name of the foreign country		Ş	
_	See instructions for filing requirements for Form TD F 90-22 1, Report of Foreign Bank and Financial Accounts	س_ ــ سا		28
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		<u>X</u>
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		X
С	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?	5c		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the			
	organization solicit any contributions that were not tax deductible?	6a		X
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or			
	gifts were not tax deductible?	6b		
, -	Organizations that may receive deductible contributions under section 170(c).	· .*	٠ ک	Î
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods	<u>-</u> `		فسنسا
_	and services provided to the payor?	7a		X
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was	. .		
	required to file Form 8282?	7c		<u>X</u>
d	If "Yes," indicate the number of Forms 8282 filed during the year	y	- 15	2 ـ ـ ـ مثند
e f	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e 7f		X
	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?			X
g h	If the organization received a contribution of qualified interlectual property, did the organization file a Form 1098-C?	7g 7h		X
₹''	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting	711		<u>X</u>
•	organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring		,	
	organization, have excess business holdings at any time during the year?	8	75	
9	Sponsoring organizations maintaining donor advised funds.	-	,	`_`.
a	Did the organization make any taxable distributions under section 4966?	9a	~	X
b	Did the organization make a distribution to a donor, donor advisor, or related person?	9b		X
0	Section 501(c)(7) organizations. Enter		- ^ ·	
a	Initiation fees and capital contributions included on Part VIII, line 12			Ì
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities			i
1	Section 501(c)(12) organizations. Enter	,, [
а	Gross income from members or shareholders		-	, v.s
b	Gross income from other sources (Do not net amounts due or paid to other sources	,		
	against amounts due or received from them)		.,	
2a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year			ì
3	Section 501(c)(29) qualified nonprofit health insurance issuers.			
а	Is the organization licensed to issue qualified health plans in more than one state?	13a		
	Note. See the instructions for additional information the organization must report on Schedule O			
b	Enter the amount of reserves the organization is required to maintain by the states in which			
	the organization is licensed to issue qualified health plans			,
С	Enter the amount of reserves on hand		,	
4a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		X
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14b		

Form 990 (2011) WISCONSIN SCHOLASTIC CHESS FEDERATION 20-1197133 Part Vi · Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions Check if Schedule O contains a response to any question in this Part VI

Sec	tion A. Governing Body and Management			
			Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year		1,2 (
	If there are material differences in voting rights among members of the governing body, or	7	" " " " " " " " " " " " " " " " " " "	
	If the governing body delegated broad authority to an executive committee or similar	, .		1. 1.2
	committee, explain in Schedule O			, l
b	Enter the number of voting members included in line 1a, above, who are independent	. ,		
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with			, , , , , , , , , , , , , , , , , , , ,
	any other officer, director, trustee, or key employee?	2		Х
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		Х
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		X
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		X
6	Did the organization have members or stockholders?	6		X
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint			
	one or more members of the governing body?	7a		Х
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		Х
8	Did the organization contemporaneously document the meetings held or written actions undertaken during	ž, t Š	7.7.5	V 21
	the year by the following	۰,	v 1,7	47
а	The governing body?	8a	X	
b	Each committee with authority to act on behalf of the governing body?	8b	Х	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at			
	the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		Х
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Revenue Code)			
			Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	10a		X
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters,			
	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	Х	
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990			
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a		Х
b	Were officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b		
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes,"			
	describe in Schedule O how this was done	12c		
13	Did the organization have a written whistleblower policy?	13		X
14	Did the organization have a written document retention and destruction policy?	14		X
15	Did the process for determining compensation of the following persons include a review and approval by			
	independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
а	The organization's CEO, Executive Director, or top management official	15a		_X_
b	Other officers or key employees of the organization	15b		X
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions)			
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement	<u> </u>		
	with a taxable entity during the year?	16a		X
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its			
	participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the			
	organization's exempt status with respect to such arrangements?	16b		
Sec	tion C. Disclosure			
17	List the states with which a copy of this Form 990 is required to be filed WI			
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only)			_
	available for public inspection. Indicate how you make these available. Check all that apply			
	Own website			
19	Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of interest policy,			
	and financial statements available to the public during the tax year			
20	State the name, physical address, and telephone number of the person who possesses the books and records of the			
	organization ▶ ROBERT PATTERSON-SUMWALT (262)573-5624 10307 TRILLIUM RD MEQUON, WI 53092			

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

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

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

(A)	(B)		,)	y ou		(D)	(E)	(F)
Name and Title	Average			Pos				Reportable	Reportable	Estimated
	hours per	(do no	ot che	ck mo	ore th	an one		compensation	compensation from	amount of
	week (describe	box, u	ınless	pers	on ıs	both an		from the	related organizations	other compensation
	hours for	office	r and	a dire	ctor/t	trustee)	e) organization		(W-2/1099-MISC)	from the
	related organizations	I t d	1 t	О	к	Нсе	F	(W-2/1099-MISC)	1	organization and related
	in Schedule	dur	nrinrfelom o dursufygmpr				organizations			
	O)	I S O	ı t	Ιc	e m	h p l	m e			
		l e t d e o	u e	f F	P	s n y	١,			
		u r ao ir	1		o y	a e				
		' '	o n		e	e d				
			a I	ļ	,					
(1) CHRIS BROWN										
DIRECTOR	1.00	X	<u> </u>	<u> </u>				С	0	0
(2) GUIDO VISCONTI										
DIRECTOR	1.00	X						С	0	0
(3) JOE CAYEN										
DIRECTOR	5.00	X						C	0	0
(4) KATIE DELAHUNT										
DIRECTOR	2.00	X	L					С	0	0
(5) KRISTEN HILDEBRANDT										
DIRECTOR	1.00	X						C	0	0
(6) MICHAEL O'BRIEN										
DIRECTOR	3.00	X						C	0	0
(7) ROBERT PATTERSON-SUMWALT										
PRESIDENT	40.00			X		<u> </u>		0	0	0
(8)						ŀ				
(9)							-			
(5)										
(10)										
(11)										
(40)										
(12)										
(13)										
(14)										

Page 8

Pa	rt VII . Section A. Officers, Directors, Trustees	, Key Emplo	yees,	and	Hig	ghes	t Con	nper	nsated Employee	s (continued)	
	(A) Name and Title	(B) Average hours per week (describe	box,	unles	Pos eck m s pers	son is	nan one both an ustee)		(D) Reportable compensation from the	(E) Reportable compensation from related organizations	(F) Estimated amount of other compensation
		hours for related organizations in Schedule O)	l t d nrure st c l d e o l a o l	I n s t i e e	Officer	е	H c e m g p e s s a t e d	F o r m e r	organization (W-2/1099-MISC)	(W-2/1099-MISC)	from the organization and related organizations
(15)				<u> </u>							
(16)											
(17)											
(18)											
(19)											
(20)											
(21)	*****										
(22)											
(23)											
(24)											
(25)											
С	Sub-total							► ► hore	0 than \$100,000 in	0	0
	reportable compensation from the organization									0	Yes No
4	Did the organization list any former officer, director o employee on line 1a? If "Yes," complete Schedule J f For any individual listed on line 1a, is the sum of repo organization and related organizations greater than \$	or such indiv rtable compo 150,000? If "	idual ensatio Yes," o	on a	 nd o plete	ther	comp	ensi	ation from the		3 X
5	Individual	npensation f	rom ar	ıy u	nrela	ated	organ	ızatı	on or individual		5 X
1	tion B. Independent Contractors Complete this table for your five highest compensated compensation from the organization Report compensive ar	="									
	(A) Name and business address								(B) Description of so	ervices	(C) Compensation
2	Total number of independent contractors (including by received more than \$100,000 of compensation from t				sted	abo	ove) w	ho	•		

					(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
	1a	Federated campaigns	1a				757 XXX C. (1)	First Art.
Contn-	b	Membership dues	1b					
butions,	С	Fundraising events	1c			12000		
Gifts,	d	Related organizations	1d				Programme Agreements	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
Grants and	е	Government grants (contributions)	1e					
Other	f	All other contributions, gifts, grants,						
Similar Amounts		and similar amounts not included above	1f	3,555				
	g	Noncash contributions included in lines						
	h	Total. Add lines 1a-1f		<u> </u>	3,555			
		•		Business Code	12. 12. 12. N	the state of the state of the same and the		
	2a	TOURNAMENT INCOME		713990	24,975	24,975		
Program	b							
Service	С	CHESS SET SALES		713990	4,261	4,261		
Revenue	d	CHESS SCHOOL	713990	13,761	13,761			
	е	PROGRAM BOOK		713990	3,260	3,260		
	f	All other program service revenue						
		Total. Add lines 2a-2f			46,257	4y 150		
	3	Investment income (including dividends, and other similar amounts)	interest				~~~	
	4	Income from investment of tax-exempt be						
	5	Royalties				47. A4 107.5°	V40 40	25
		(ı) Re	al	(II) Personal				
		Gross rents			i i i i i i i i i i i i i i i i i i i			1 1 1 1 1 1 1 1
	b	Less rental expenses						, 1, 1, 2, 3
		Rental income or (loss)			a de la companya de l			
	d	Net rental income or (loss)		<u> </u>				
	7a	Gross amount from sales of assets other than inventory	ities	(ii) Other				
o		Less cost or other basis and sales expenses						
t		Gain or (loss)					šá ilžuži	.55
n e		Net gain or (loss)		•			202004	
r R	8a	Gross income from fundraising events (not including \$						
e		of contributions reported on line 1c)			The state of the s			
v		See Part IV, line 18						
e n		Less direct expenses				CAREE.		riilika
u		Net income or (loss) from fundraising eve	ents	<u> </u>				
е	9a	Gross income from gaming activities						
		See Part IV, line 19						
		Less direct expenses			Mark Controller			The state of the s
	С	Net income or (loss) from gaming activities	es	<u> </u>				
	10a	Gross sales of inventory, less returns and allowances	. a					
		Less cost of goods sold			المام و المراج المراج المام الم المام المام ال			
	С	Net income or (loss) from sales of inventor	ory	<u></u> ▶				
		Miscellaneous Revenue		Business Code	<u> </u>			3 <u> . </u>
	11a	MISC		713990				
	b							
	С							
	d	All other revenue	• • •					
		Total. Add lines 11a-11d				N. 2 100 15 15		151.
	12	Total revenue. See instructions			49,812	46,257	0	(

Part IX Statement of Functional Expenses

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

<u></u>	Check if Schedule O contains a response to any que	(A)	(B)	(C)	(D)
	not include amounts reported on lines 6b, 7b,	Total expenses	Program service	Management and	Fundraising
1	Ob, and 10b of Part VIII. Grants and other assistance to governments and		expenses	general expenses	expenses
1				3	23
•	organizations in the United States See Part IV, line 21. Grants and other assistance to individuals in		 		
2					1 · · · · · · · · · · · · · · · · · · ·
•	the United States See Part IV, line 22	·			<u> </u>
3	Grants and other assistance to governments,				
	organizations, and individuals outside the				
	United States See Part IV, lines 15 and 16				
4	Benefits paid to or for members			Be ickno	F
5	Compensation of current officers, directors,				
_	trustees, and key employees				
6	Compensation not included above, to disqualified				
	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)				
7	Other salaries and wages				
8	Pension plan accruals and contributions (include				
	section 401(k) and 403(b) employer contributions)				
9	Other employee benefits				
10	Payroll taxes				
11	Fees for services (non-employees)				
а	Management				
b	Legal				
С	Accounting				
d	Lobbying				
е	Professional fundraising services See Part IV, line 17.			(14) . (24) £(2)	
f	Investment management fees				
9	Other				
12	Advertising and promotion	408	408		
13	Office expenses	6,692	6,692		
14	Information technology				
15	Royalties				
16	Occupancy	6	6		
17	Travel	143	143		
18	Payments of travel or entertainment expenses				<u></u>
	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings				
20	Interest				
21	Payments to affiliates		1		
22	Depreciation, depletion, and amortization		1		
23	Insurance	1,520	1,520		
24	Other expenses Itemize expenses not covered		 		
	above (List miscellaneous expenses in line 24e If		Links 1		
	line 24e amount exceeds 10% of line 25, column	N. 18 11 11 11 11 11 11 11 11 11 11 11 11		美 学 45	2.7
	(A) amount, list line 24e expenses on Schedule O)		,		
а	LOCAL TOURNAMENT MANAGEMENT	14,270	12,843	1,427	
b	TOURNAMENT SUPPLIES				
c	CHESS SCHOOL SUPPLIES	21,262	19,136	2,126	
d					
e	All other expenses	2,908	 	2,908	
25	Total functional expenses. Add lines 1 through 24e	47,209	40,748	6,461	0
26	Joint costs. Complete this line only if the	1,,235	1	5,131	
	organization reported in column (B) joint costs				
	from a combined educational campaign and				
	fundraising solicitation Check here If following SOP 98-2 (ASC 958-720)				
	following SOP 98-2 (ASC 958-720)	I	1	1	L

	<u>سات</u>		(A)		(B)
			Beginning of year		End of year
	1	Cash - non-interest-bearing	10,351	1	2,715
	2	Savings and temporary cash investments		2	
	3	Pledges and grants receivable, net		3	
	4	Accounts receivable, net		4	1,930
	5	Receivables from current and former officers, directors, trustees, key	and the first of the second state of the	1 %	, d + 150 fe 5 mg.
		employees, and highest compensated employees. Complete Part II of			
		Schedule L		5	
	6	Receivables from other disqualified persons (as defined under section			J. 45 3 3 1 2 3 42 4
		4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing		3	
A S		employers and sponsoring organizations of section 501(c)(9) voluntary		1. "	
S		employees' beneficiary organizations (see instructions)		6	
e t	7	Notes and loans receivable, net		7	
S	8	Inventories for sale or use		8	
	9	Prepaid expenses and deferred charges		9	
	10a	Land, buildings, and equipment cost or	Vin. 2123	7	14 14 14 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
		other basis Complete Part VI of Schedule D 10a			
	b	Less accumulated depreciation 10b	Miteralistic emmalities in the light Million 17 stilled in	10c	Controller difference some in someth son was not seen
	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)	10,351	16	4,645
	17	Accounts payable and accrued expenses	,	17	1,056
	18	Grants payable		18	
. 1	19	Deferred revenue		19	
i	20	Tax-exempt bond liabilities		20	
a	21	Escrow or custodial account liability Complete Part IV of Schedule D		21	
ı	22	Payables to current and former officers, directors, trustees, key	(\$ ~4°	
!		employees, highest compensated employees, and disqualified persons		17.75	
ŧ		Complete Part II of Schedule L		22	
i	23	Secured mortgages and notes payable to unrelated third parties		23	
e	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		25	
	26	Total liabilities. Add lines 17 through 25	0	26	1,056
		Organizations that follow SFAS 117, check here ▶ ☐ and complete		. 5	
NF		lines 27 through 29, and lines 33 and 34.			
e u t n	27	Unrestricted net assets		27	
d	28	Temporarily restricted net assets		28	
A s B	29	Permanently restricted net assets		29	
s a		Organizations that do not follow SFAS 117, check here ▶ 🔀 and		:	
e I		complete lines 30 through 34.			الاستان مستحد مساد ماسيو خيئها السعوانيس يسولن يرييس
t a s n	30	Capital stock or trust principal, or current funds		30	
C	31	Paid-in or capital surplus, or land, building, or equipment fund	6,907	31	
o e r s	32	Retained earnings, endowment, accumulated income, or other funds	3,444	32	3,589
, 3	33	Total net assets or fund balances	10,351	33	3,589
	34	Total liabilities and net assets/fund balances	10,351	34	4,645
_		EEA			Form 990 (2011)

Both consolidated and separate basis

3a

3b

Form 990 (2011)

Х

Separate basis

Consolidated basis

b If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits

SCHEDULE A (Form 990 or 990-EZ)

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.

OMB No 1545-0047

2011

Department of the Treasury Internal Revenue Service Name of the organization

► Attach to Form 990 or Form 990-EZ. ► See separate instructions. Open to Public İnspection

Employer identification number

MIS	CON		CHESS FEDER							119/133	
.Pa	rt I	Reason for	Public Charit	y Status (All organia	zations mus	st complete	e this part) See inst	ructions		
The	orga			ause it is (For lines 1 th	-	-					
1		A church, convention	on of churches, or a	association of churches	described	ın section	170(b)(1)	(A)(i).			
2		A school described	in section 170(b)	(1)(A)(ii). (Attach Sched	lule E)						
3		A hospital or a coop	perative hospital se	ervice organization desc	ribed in se	ction 170(b)(1)(A)(ii	i).			
4		A medical research	organization opera	ated in conjunction with	a hospital	described	n section	170(b)(1)	(A)(iii). Er	nter the hos	spital's name,
		city, and state									
5		An organization ope	erated for the bene	fit of a college or univer	sity owned	or operate	d by a go	vernmenta	l unit desc	ribed in	
		section 170(b)(1)(A	A)(iv). (Complete F	Part II)							
6		A federal, state, or I	local government o	or governmental unit des	scribed in s	ection 17	0(b)(1)(A)((v).			
7		An organization that	t normally receives	a substantial part of its	s support fro	om a gove	rnmental ι	unit or from	n the gene	ral public	
		described in section	n 170(b)(1)(A)(vi).	(Complete Part II)							
8		A community trust of	described in sectio	on 170(b)(1)(A)(vi). (Cor	mplete Part	: II)					
9	\mathbf{X}	An organization that	t normally receives	(1) more than 33 1/3%	6 of its sup	port from c	ontribution	ns, membe	ership fees	s, and gros	s
		receipts from activit	ies related to its ex	cempt functions - subject	ct to certain	exception	s, and (2)	no more t	han 33 1/3	3% of its	
				and unrelated busines							
				e 30, 1975 See sectio i				-			
10				ed exclusively to test for							
11	$\overline{\Box}$			ed exclusively for the be					carry out t	he	
				orted organizations des					-		
				es the type of supporting						000000	
		a Type I	b 🗌 Тур	_		-Functiona			d	Type	III-Other
е				organization is not cont							
				ers and other than one		· -					
		509(a)(1) or section			oo.o pu.	onory supp	ortou orgu		2030/1000	30000011	
f		, , , ,		etermination from the II	RS that it is	a Tyne I	Tyne II or	Tyne III si	innortina		
-						• •	• •	• .	• •		
g				zation accepted any gif							• • • • • • • • •
9		following persons?	,oo, nao ino organ	azation described any gir	t or contino	ation ironi	any or the				
			directly or indirectly	y controls, either alone o	or together	with perso	ns describ	ned in (ii)			Yes No
				y of the supported orga							11g(ı)
				cribed in (i) above?							11g(ii)
				on described in (i) or (ii)							11g(iii)
h				it the supported organiz							119(111)
	(i) N	ame of supported	(II) EIN	(III) Type of organization	(iv) Is the o	rganization	(v) Did y	ou notify	(vı)	Is the	(vii) Amount of
	• • •	organization	',	(described on lines 1-9	in col (i) lis	-	the organ	•	organizat		support
				(see instructions)	governing d	locument?	col (i)	of your port?	(i) organi	zed in the S ?	
				(coo madadada)	Yes	No	Yes	No	Yes	No	
(A)											
]				
(B)											
			1								
(C)											
					1						_
(D)							I				
(E)											
			· · · · · · · · · · · · · · · · · · ·								
- -4-			,	*	1	, £ 2 4,,	ئيد د	, j, -	. 3.	, 3,	

18

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

(Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III If the organization fails to qualify under the tests listed below, please complete Part III) Section A. Public Support Calendar year (or fiscal year beginning in) (a) 2007 (b) 2008 (c) 2009 (d) 2010 (e) 2011 (f) Total Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants") Tax revenues levied for the organization's benefit and either paid to or expended on The value of services or facilities furnished by a governmental unit to the organization without charge Total. Add lines 1 through 3 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f) Public support. Subtract line 5 from In 4 Section B. Total Support (d) 2010 Calendar year (or fiscal year beginning in) (a) 2007 (b) 2008 (c) 2009 (e) 2011 (f) Total Amounts from line 4 Gross income from interest, dividends, payments received on securities loans. rents, royalties and income from similar 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)...... Total support. Add lines 7 through 10 . 11 J., 12 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) 13 Section C. Computation of Public Support Percentage 14 % 15 15 % 33 1/3% support test - 2011. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box ightharpoons33 1/3% support test - 2010. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization 17a 10%-facts-and-circumstances test - 2011. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the 10%-facts-and-circumstances test - 2010. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the

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

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

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

Se	ction A. Public Support			·-··			
Cal	endar year (or fiscal year beginning in) 🕨	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total
1	Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants")	2,430	915	500	6,575	2,583	13,003
2	Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose	14,060		43,643			148,701
3	Gross receipts from activities that are not an unrelated trade or bus under sec 513						
4	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5	The value of services or facilities furnished by a governmental unit to the organization without charge						
6	Total. Add lines 1 through 5	16,490	52,510	44,143	45,978	2,583	161,704
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						
С	Add lines 7a and 7b						
8	Public support (Subtract line 7c from line 6)	A San March					161,704
$\overline{}$	ction B. Total Support				Ī		
_	endar year (or fiscal year beginning in)	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total
9	Amounts from line 6	16,490	52,510	44,143	45,978	2,583	161,704
10a	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources			53	58		111
b	Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
C	Add lines 10a and 10b			53	58		111
11	Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12	Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV)						
13	Total support. (Add lines 9, 10c, 11, and 12)	16,490	52,510	44,196	46,036	2,583	161,815
	First five years. If the Form 990 is for the o organization, check this box and stop here		. <u></u>	th, or fifth tax year	as a section 501(c)(3)	▶□
	ction C. Computation of Public Su						
	Public support percentage for 2011 (line 8, o		-			15	99.93 %
	Public support percentage from 2010 Scheo			· · · · · · · · · · · · · · · · · · ·		16	99.00 %
	ction D. Computation of Investmen					1 4 7 1	0.07
17 18	Investment income percentage for 2011 (line Investment income percentage from 2010 S					17	0.07 %
	33 1/3% support tests - 2011. If the organization from the support tests is 1/3%, check this box	zation did not ched	ck the box on line	14, and line 15 is n	nore than 33 1/3%	, and line	▶⊠
b	33 1/3% support tests - 2010. If the organization 18 is not more than 33 1/3%, check this	zation did not ched	ck a box on line 14	or line 19a, and lir	ne 16 is more than	33 1/3%, and	
20	Private foundation. If the organization did		-				

SCHEDULE O (Form 990 or 990-EZ)

Department of the Treasury

Internal Revenue Service Name of the organization

Supplemental Information to Form 990 or 990-EZ

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

Attach to Form 990 or 990-EZ.

OMB No 1545-0047

2011

Open to Public Inspection
Employer identification number

WISCONSIN SCHOLASTIC CHESS FEDERATION	20-1197133
01. Form 990 governing body review (Part VI, line 11)	
FORM REVIEWED BY PRESIDENT AND DIRECTORS COMPARED TO ALL FINANCIAL RECORDS H	BEFORE FILING.
02. Governing documents, etc, available to public (Part VI, line 19)	
CONFLICT OF INTEREST POLICY AND FINANCIAL STATEMENTS ARE MADE AVAILABLE TO I	PUBLIC ON
AS-NEEDED OR AS-REQUESTED BASIS.	
03. Explanation of other changes in net assets or fund balances (Part XI, li	ine 5)
CHANGE IN NET ASSETS	