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Return of Private Foundation or Section 4947(a)(1) Nonexempt Charitable Trust Treated as a Private Foundation Note The foundation may be able to use a copy of this return to satisfy state reporting requirements.

OMB No 1545-0052

Depa	artmen nal Re	it of the Treasury venue Service	Note The fou		I reated as a Priva be able to use a copy of the			ortina reauire	ments.		201	1
		ndar year 2011 or ta		JUL		, and ending		JUN 3				
		f foundation				•	-	A Employe			number	
M	ĮΑD	IGAN FAMI	LY FOUND	ATION				23-	740	0242		
Nui	nber a	and street (or PO box r	number if mail is not de	elivered to street	address)	Room	1/suite	B Telephor	ne num	ber		
2	62	7 NICOLE	DRIVE					920	.46	8.06	50	
	-	own, state, and ZIP			-			C If exemption	on apple	cation is pe	ending, check here	•
			<u> 54311</u>									
G (Check	call that apply:	Initial return			former public charity	,	D 1 Foreig	ın orga	nizations	, check here	•
			Final return Address ch		Amended return			Foreign	organiz	ations med	eting the 85% test,	
н (hock	type of organizatio		9-	Name change kempt private foundation							
i i i	_	ection 4947(a)(1) no		· · · · · · · · · · · · · · · · · · ·	Other taxable private found	dation					us was terminated (A), check here	•
l Fa		arket value of all ass		J Accounti		Accrual					60-month termination	
		Part II, col (c), line	-		ther (specify)			-			(B), check here	,
	\$, (-//	936,636.	(Part I, colu	mn (d) must be on cash	basis.)				· \-/(')'	, ,,	
	art I	→ (The total of amounts)	nue and Expenses is in columns (b), (c), an e amounts in column (a	d (d) may not	(a) Revenue and expenses per books	(b) Net investm	ent		justed come	net	(d) Disbursement for charitable purpo	ses
	1	Contributions, gifts							/A		(cash basis only)
	'2	Check X if the						14	<i>/</i> A.			
	3	Interest on savings and cash investments		OUII U		 						
	4		rest from securities	3	48,693	. 48,6	593.	,			STATEMENT	1
	5a	Gross rents				1						
2	Ь	Net rental income or (i	loss)									
J U	6a	Net gain or (loss) from		line 10	-19,062							
enu e	b	Gross sales price for a assets on line 6a	68 <u>68</u>	<u>,192.</u>								
G & "	7		ne (from Part IV, line 2)				0.			RE	CEIVED	\blacksquare
Revenue	8	Net short-term cap	•						 	1 \ \		. -
	9	Income modification Gross sales less return							8	ΛΙΙ	2 4 2012	-080
	10a	and allowances Less Cost of goods s	and d			 			 शि	AU		RS-1
É	1	Gross profit or (los	<u> </u>			1			1	00		"-
2	11	Other income	,							UG	DEN, UI	二
0	12	Total. Add lines 1	through 11		29,631	48,6	593.	,	-			
	13	Compensation of office	cers, directors, trustees	s, etc	0		0.					0.
	14	Other employee sa	•									
ဟ	15	Pension plans, em	ployee benefits									
nse	16a	Legal fees			2 205							
X De	. b	Accounting fees		MT 2	3,825	. 3,8	325.	1				0.
i E	17	Other professional Interest	riees					 		-		
ativ	18	Taxes	ST	мт 3	893		0.					0.
iistr	19	Depreciation and o		•				1				•
Ē	20	Occupancy										
Ad	21	Travel, conference	s, and meetings		5,436	•	0.				5,4	36.
and	22	Printing and public										
Operating and Administrative Expenses	23	Other expenses		MT 4	219	. 2	219.					0.
rati	24	Total operating ar			10.050							. -
Ope		expenses Add lin			10,373	. 4,0)44.	•			5,4	<u> 36.</u>
•	25	Contributions, gifts			27,072	•		 			27,0	14.
	26	Total expenses an Add lines 24 and 2			37,445	1 4)44.				32,5	ΩR
	27	Subtract line 26 fro			3/,443	• + •	<u>, 44 •</u>				34,3	<u> </u>
		Excess of revenue over		rsements	-7,814							
		Net investment in			.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	44,6	549.					
		Adjusted net inco				1 /		N	/A			

Form **990-PF**

Part III Analysis of Changes in Net Assets or Fund Balances 1 Total net assets or fund balances at beginning of year - Part II, column (a), line 30 (must agree with end-of-year figure reported on prior year's return) 1 753,519. 2 Enter amount from Part I, line 27a 2 -7,814. 3 Other increases not included in line 2 (itemize) 3 0. 4 Add lines 1, 2, and 3 4 745,705. 5 Decreases not included in line 2 (itemize) 5 0. 6 Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b), line 30 6 745,705.

Form **990-PF** (2011)

Part IV Capital Gains an	d Losses for Tax on In	vestment	Income					
	the kind(s) of property sold (e.g. ouse; or common stock, 200 shs			(b) How P - Pu D - Do	acquired rchase mation	(c) Date a (mo., da		(d) Date sold (mo., day, yr.)
1a								
b SEE ATTACHED S	STATEMENT							
<u>c</u>				 				
<u>d</u>								
(e) Gross sales price	(f) Depreciation allowed (or allowable)		t or other basis xpense of sale				ın or (loss) (f) mınus (
a								
b								
C								
d 69 100			07 25					10 062
e 68,192. Complete only for assets showing g	ain in column (h) and owned by	the foundation	87,25	94.		I) Gains (Co	ol (b) gain	-19,062.
Outspice only for assets showing g	(j) Adjusted basis		cess of col. (1)			il. (k), but n	ot less than	1 -0-) or
(i) F.M.V. as of 12/31/69	as of 12/31/69		col. (j), if any			Losses (from col. (h))
a	· - · · · ·							
b								
C								
d								
e								-19,062.
2 Capital gain net income or (net capital	If gain, also enter If (loss), enter -0	in Part I, line i in Part I, line	7 7	} 2				-19,062.
3 Net short-term capital gain or (loss) a								
If gain, also enter in Part I, line 8, coli	, ,	u (5).		}				
If (loss), enter -0- in Part I, line 8	1 0 1: 4040() (<u> </u>	T	<u> </u>			N/A	
	ler Section 4940(e) for				ment in	come		
(For optional use by domestic private for	undations subject to the section 4	1940(a) tax on	net investment ir	rcome.)				
If section 4940(d)(2) applies, leave this j	part blank.							
Was the foundation liable for the section	- AQA2 tay on the distributable am	iount of any ve	ar in the hace ne	rınd?				Yes X No
If "Yes," the foundation does not qualify			•	ilou ·				103 (22) 110
1 Enter the appropriate amount in each				es.				
(a) Base period years	Adjusted qualifying dis	tributions	Net value of no	(c)	le-use asset	s ,	Distrib	(d) jution ratio jided by col. (c))
Calendar year (or tax year beginning a 2010	11) , , , ,	0,536.			10,59		col. (b) ulv	• 050008
2009		8,171.			91,76			.055179
2008		2,969.			03,12			.054664
2007		1,783.			23,19			.062905
2006		7,654.			25,13			.033515
						-		
2 Total of line 1, column (d)						2		.256271
3 Average distribution ratio for the 5-ye	ear base period - divide the total (on line 2 by 5,	or by the number	of years				
the foundation has been in existence	ıf less than 5 years					3		.051254
								050 000
4 Enter the net value of noncharitable-t	use assets for 2011 from Part X,	line 5				4		858,039.
								42 000
5 Multiply line 4 by line 3						5		43,978.
& Enter 19/ of not investment income (19/. of Port I. line 27h)							446.
6 Enter 1% of net investment income (176 OF Part I, line 270)					6		440.
7 Add lines 5 and 6						7		44,424.
, , ad into o and o						-		
8 Enter qualifying distributions from Pa	art XII, line 4					8		32,508.
If line 8 is equal to or greater than lin		1h and comp	late that part usur	na a 10/ ta	y rate			<u> </u>
ii iiiic o is cquai to oi aicatci timii iiii	בין טוופטע נוזכ טטא ווו ז מוג עו. וווופ	ib, and comb	icic iliai pari usii	iya i/o ta	A 1416.			

	990-PF (2011) MADIGAN FAMILY FOUNDATION 2	<u>3-740</u>	0242	-4:-	Page 4
	rt VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 49	+6 - see	instru	CTIO	ns)
1a	Exempt operating foundations described in section 4940(d)(2), check here \(\bigs \) and enter "N/A" on line 1.				
	Date of ruling or determination letter: (attach copy of letter if necessary-see instructions)	.		_	
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check here and enter 1%	1		8	93.
	of Part I, line 27b				
	All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of Part I, line 12, col. (b).				•
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	2	_		0.
3	Add lines 1 and 2	3		8	93.
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	4			0.
5	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-	5		8	93.
6	Credits/Payments:				
	2011 estimated tax payments and 2010 overpayment credited to 2011 6a 920.				
	Exempt foreign organizations - tax withheld at source				
	Tax paid with application for extension of time to file (Form 8868)				
	Backup withholding erroneously withheld			_	
7	Total credits and payments. Add lines 6a through 6d	7		9	20.
8	Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached	8			
9	Tax due If the total of lines 5 and 8 is more than line 7, enter amount owed	9			
10		10			27.
	Enter the amount of line 10 to be: Credited to 2012 estimated tax	11			0.
Pa	rt VII-A Statements Regarding Activities			1.0	
1a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in			Yes	No
	any political campaign?		_1a_		X
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see instructions for definition)?		1b		X_
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials published	or			
	distributed by the foundation in connection with the activities				
C	Did the foundation file Form 1120-POL for this year?		1c		X
d	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year:				
	(1) On the foundation. \blacktriangleright \$ (2) On foundation managers. \blacktriangleright \$ 0 .				
е	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation				
	managers. ► \$ 0 .				
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?		_ 2		X
	If "Yes," attach a detailed description of the activities.				
3	$Has the foundation \ made \ any \ changes, \ not \ previously \ reported \ to \ the \ IRS, \ in \ its \ governing \ instrument, \ articles \ of \ incorporation, \ or \ o$				
	bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes		3	_	X
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?		4a		X
b	If "Yes," has it filed a tax return on Form 990-T for this year?	N/A	4b		
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?		5		X
	If "Yes," attach the statement required by General Instruction T		Ì		
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either:				
	By language in the governing instrument, or				
	• By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state la	ıW			
	remain in the governing instrument?		6	X	
7	Did the foundation have at least \$5,000 in assets at any time during the year?		7	X	
	If "Yes," complete Part II, col. (c), and Part XV				
8a	Enter the states to which the foundation reports or with which it is registered (see instructions)				
	WI				
b	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate)				
	of each state as required by General Instruction G? If "No," attach explanation SEE STATEME	NT 9	8b		X
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for calendarian	lar			
	year 2011 or the taxable year beginning in 2011 (see instructions for Part XIV)? If "Yes," complete Part XIV		9		Х
10	Did any persons become substantial contributors during the tax year? it "yes" attach a schedule listing their names and addresses		10		x

b Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that

had not been removed from jeopardy before the first day of the tax year beginning in 2011?

Form 990-PF (2011) MADIGAN FAMILY FOUNDATIO			23-74002	42 Page 6
Part VII-B Statements Regarding Activities for Which F		Required (contin	ued)	
5a During the year did the foundation pay or incur any amount to:				
(1) Carry on propaganda, or otherwise attempt to influence legislation (section	1 4945(e))?	Ye	s X No	-
(2) Influence the outcome of any specific public election (see section 4955); o		ectly,		
any voter registration drive?	• • •		s X No	
(3) Provide a grant to an individual for travel, study, or other similar purposes'	7		s X No	
(4) Provide a grant to an organization other than a charitable, etc., organization				
509(a)(1), (2), or (3), or section 4940(d)(2)?		Ye	s X No	
(5) Provide for any purpose other than religious, charitable, scientific, literary,	or educational purposes, or f			
the prevention of cruelty to children or animals?			s X No	
b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify und	ter the exceptions described i			
section 53.4945 or in a current notice regarding disaster assistance (see instru			N/A	5b
Organizations relying on a current notice regarding disaster assistance check h			▶	
c If the answer is "Yes" to question 5a(4), does the foundation claim exemption fr		ined		
expenditure responsibility for the grant?		ou I∕A	ıs 🗀 No	
If "Yes," attach the statement required by Regulations section 53 4945		.,		
6a Did the foundation, during the year, receive any funds, directly or indirectly, to	• •			
a personal benefit contract?	pay promiting on	□ v _e	s X No	
b Did the foundation, during the year, pay premiums, directly or indirectly, on a p	ersonal henefit contract?			6b X
If "Yes" to 6b, file Form 8870	ersonal benefit contract.		⁻	- X
7a At any time during the tax year, was the foundation a party to a prohibited tax s	halter transaction?	v	s X No	
b If "Yes," did the foundation receive any proceeds or have any net income attribu		16		7b
Information About Officers Directors Trust		nagers Highly		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
Part VIII Paid Employees, and Contractors	ees, i ouildation wa	inagers, riigini	,	
1 List all officers, directors, trustees, foundation managers and their	compensation.			
	(b) Title, and average	(c) Compensation	(d) Contributions to employee benefit plans and deferred	(e) Expense account, other
(a) Name and address	hours per week devoted to position	(If not paid, enter -0-)	and deferred compensation	account, other allowances
JAMES E. MADIGAN	TRUSTEE			
2627 NICOLET DRIVE				
GREEN BAY, WI 54311	5.00	0.	0.	0.
	TRUSTEE			
540 WESLEY STREET				
GREEN BAY, WI 54302	5.00	0.	0.	0.
	TRUSTEE			
804 S MADISON	11.00100			
GREEN BAY, WI 54302	5.00	0.	0.	0.
	TRUSTEE		<u> </u>	<u> </u>
2739 E SHORE DRIVE	11100122			
GREEN BAY, WI 54302	5.00	0.	0.	0.
2 Compensation of five highest-paid employees (other than those inc			· · · · · ·	•
	(b) Title, and average		(d) Contributions to employee benefit plans and deferred	(e) Expense
(a) Name and address of each employee paid more than \$50,000	hours per week devoted to position	(c) Compensation	and deferred compensation	account, other allowances
NONE	dovoted to position		compandation	anomanoco
NONE				
		 		
Total number of other employees paid over \$50,000		ı		0
- Otto Indiana of other origination paid over pooledo			Form	990-PF (2011)

Form 990-PF (2011) MADIGAN FAMILY FOUNDATION 23	-740024	12 Page 7
Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors (continued)		
3 Five highest-paid independent contractors for professional services. If none, enter "NONE."		
(a) Name and address of each person paid more than \$50,000 (b) Type of service	(c	Compensation
NONE		
To be such as forthern and the first of the such as th	•	0
Total number of others receiving over \$50,000 for professional services Part IX-A Summary of Direct Charitable Activities		
List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of organizations and other beneficiaries served, conferences convened, research papers produced, etc.	Ex	penses
1 SERVICES OF FOUNDATION: OFFICER ON BOARDS OF CHARITABLE ORGANIZATIONS, TRAVEL, CONFERENCE AND MEETING EXPENSES FOR SERRA INTERNATIONAL AND THE EQUESTRIAN ORDER OF THE HOLY		5,655.
2		
3		
4		
Part IX-B Summary of Program-Related Investments		
Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2.	Ar	mount
1 <u>N/A</u>	_	0
2	_	0.
All other program-related investments. See instructions. 3		
Total. Add lines 1 through 3		0.

P	art X Minimum Investment Return (All domestic foundations must complete this part. Foreign four	ndations, s	ee instructions.)
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes:		
а	Average monthly fair market value of securities	1a	847,257.
b	Average of monthly cash balances	1b	847,257. 23,849.
C	Fair market value of all other assets	10	
d	Total (add lines 1a, b, and c)	1d	871,106.
е	Reduction claimed for blockage or other factors reported on lines 1a and		
	1c (attach detailed explanation) 1e 0 .		
2	Acquisition indebtedness applicable to line 1 assets	2	0.
3	Subtract line 2 from line 1d	3	871,106.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions)	4	13,067.
5	Net value of noncharitable-use assets Subtract line 4 from line 3. Enter here and on Part V, line 4	5	858,039.
6	Minimum investment return. Enter 5% of line 5	6	42,902.
P	art XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations are foreign organizations check here and do not complete this part.)	id certain	
1	Minimum investment return from Part X, line 6	1	42,902.
2a	Tax on investment income for 2011 from Part VI, line 5		
b	Income tax for 2011. (This does not include the tax from Part VI.)		
C	Add lines 2a and 2b	2c	893.
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	42,009.
4	Recoveries of amounts treated as qualifying distributions	4	0.
5	Add lines 3 and 4	5	42,009.
6	Deduction from distributable amount (see instructions)	6	0.
<u>7</u>	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1	7	42,009.
_	art XII Qualifying Distributions (see instructions)	 	
	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:	4.	22 500
	Expenses, contributions, gifts, etc total from Part I, column (d), line 26	1a	32,508.
ь 2	Program-related investments - total from Part IX-B Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes	1b 2	0.
3	Amounts set aside for specific charitable projects that satisfy the:	2	
	Suitability test (prior IRS approval required)		
a b	Cash distribution test (attach the required schedule)	3a	
4	Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4	3b 4	32,508.
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment	4	34,300.
J	income. Enter 1% of Part I, line 27b	5	0
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	32,508.
,	Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation of		
	4940(e) reduction of tax in those years.	quaiiiico IUI I	110 20011011

Part XIII Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2010	(c) 2010	(d) 2011
1 Distributable amount for 2011 from Part XI,				10.000
line 7				42,009.
2 Undistributed income, if any, as of the end of 2011			0.	
a Enter amount for 2010 only b Total for prior years:			0.	
t rotation prior years.		0.		
3 Excess distributions carryover, if any, to 2011:				
a From 2006				
b From 2007 5, 282.				
c From 2008 3,693.				
d From 2009 5,947.				
e From 2010 900 .				
f Total of lines 3a through e	15,822.			
4 Qualifying distributions for 2011 from				
Part XII, line 4: ▶\$ 32,508.				
a Applied to 2010, but not more than line 2a			0.	
b Applied to undistributed income of prior			•	
years (Election required - see instructions)		0.		
c Treated as distributions out of corpus				
(Election required - see instructions)	0.			
d Applied to 2011 distributable amount				32,508.
e Remaining amount distributed out of corpus	0.		. 	
Excess distributions carryover applied to 2011 (If an amount appears in column (d), the same amount must be shown in column (a))	9,501.			9,501.
6 Enter the net total of each column as indicated below:				
a Corpus Add lines 3f, 4c, and 4e Subtract line 5	6,321.			
b Prior years' undistributed income. Subtract				
line 4b from line 2b		0.		
c Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed		0.		
d Subtract line 6c from line 6b. Taxable				
amount - see instructions		0.		
e Undistributed income for 2010. Subtract line				
4a from line 2a. Taxable amount - see instr.			0.	
f Undistributed income for 2011. Subtract				
lines 4d and 5 from line 1. This amount must				
be distributed in 2012				0.
7 Amounts treated as distributions out of				
corpus to satisfy requirements imposed by				
section 170(b)(1)(F) or 4942(g)(3)	0.			
8 Excess distributions carryover from 2006				
not applied on line 5 or line 7	0.			
9 Excess distributions carryover to 2012.				
Subtract lines 7 and 8 from line 6a	6,321.			
10 Analysis of line 9:				
a Excess from 2007				
b Excess from 2008				
c Excess from 2009 5, 421.				
d Excess from 2010 900.				
e Excess from 2011				<u>L</u>

	FAMILY FOU				00242 Page 10
Part XIV Private Operating I	· · · · · · · · · · · · · · · · · · ·		·A, question 9)	N/A	
1 a If the foundation has received a ruling					
foundation, and the ruling is effective for	•	=	▶ ∟	· · · · · · · · · · · · · · · · · · ·	
b Check box to indicate whether the four		ng foundation described <u>i</u>		4942(j)(3) or49)42(j)(5)
2 a Enter the lesser of the adjusted net	Tax year		Prior 3 years		
income from Part I or the minimum	(a) 2011	(b) 2010	(c) 2009	(d) 2008	(e) Total
investment return from Part X for					
each year listed					
b 85% of line 2a					
c Qualifying distributions from Part XII,					
line 4 for each year listed					
d Amounts included in line 2c not					-
used directly for active conduct of					
exempt activities					
e Qualifying distributions made directly					
for active conduct of exempt activities.					
Subtract line 2d from line 2c					
3 Complete 3a, b, or c for the		+			
alternative test relied upon:					
a "Assets" alternative test - enter:					
(1) Value of all assets					
(2) Value of assets qualifying under section 4942(j)(3)(B)(i)					
b "Endowment" alternative test - enter 2/3 of minimum investment return					
shown in Part X, line 6 for each year					
listed					
c "Support" alternative test - enter:					
(1) Total support other than gross					
investment income (interest,					
dividends, rents, payments on securities loans (section					
512(a)(5)), or royalties)					
(2) Support from general public					
and 5 or more exempt					
organizations as provided in section 4942(i)(3)(B)(iii)					
(3) Largest amount of support from					
an exempt organization					
(4) Gross investment income					
Part XV Supplementary Info	ormation (Comple	te this part only	if the foundation	n had \$5.000 or me	ore in assets
at any time during				. ,	
1 Information Regarding Foundati	on Managers:	·			
a List any managers of the foundation w	•	than 2% of the total cont	ributions received by the	e foundation before the clo	se of any tax
year (but only if they have contributed					oo o, a.,, aan
JAMES E. MADIGAN					
b List any managers of the foundation w	ho own 10% or more of th	ne stock of a cornoration i	or an equally large port	ion of the ownership of a n	artnership or
other entity) of which the foundation h			or an equally large port	ion of the ownership of a p	arthership of
NONE					
2 Information Regarding Contribu	tion, Grant, Gift, Loan	, Scholarship, etc., Pr	ograms:		
Check here ► X if the foundation			_	not accept unsolicited requ	iests for funds. If
the foundation makes gifts, grants, etc					
a The name, address, and telephone nur	nber of the person to who	m applications should be	addressed:	•	
2.		, ,			
b The form in which applications should	be submitted and informa	ition and materials they st	nould include:		
c Any submission deadlines;					
4 Any restrictions or limitations on	do auch oc by access	ol aroon, charatalia field-	kinds of institutions	other feeters:	
d Any restrictions or limitations on award	as, such as by geographic	ai areas, charitable lielos,	KINGS OF HISHLUHOUS, OF	other factors:	
					

Tare XV Cappionicitally information				
3 Grants and Contributions Paid During the '	rear or Approved for Future	Payment	1	
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	or substantial contributor	recipient		
a Paid during the year				
SEE ATTACHED SCHEDULE	NONE	PUBLIC CHARITY	PUBLIC CHARITY	
SEE ATTACHED SCHEDULE SEE ATTACHED SCHEDULE, WI 54311				27,072.
SEE ATTACHED SCHEDOLE, WI 34311				27,072
			<u> </u>	
Total			▶ 3a	27,072
b Approved for future payment	· [27,072
.,				
NONE				
	<u> </u>			
Total	<u> </u>		▶ 3h	0
10121			- 3n	

Part XVI-A **Analysis of Income-Producing Activities**

Enter gross amounts unless otherwise indicated.	Unrelated business income			ded by section 512 513, or 514	(e)
	(a) Business	(b)	(C) Exclu-	(d)	Related or exempt
1 Program service revenue:	code	Amount	sion	Amount	function income
a					
b					
C					
d					
e					
f					
g Fees and contracts from government agencies					
2 Membership dues and assessments					-
3 Interest on savings and temporary cash					
investments					
4 Dividends and interest from securities			14	48,693.	
5 Net rental income or (loss) from real estate:					
a Debt-financed property					
b Not debt-financed property					
6 Net rental income or (loss) from personal					
property					
7 Other investment income					
8 Gain or (loss) from sales of assets other					
than inventory			18	-19,062.	
9 Net income or (loss) from special events					
10 Gross profit or (loss) from sales of inventory					
11 Other revenue:					
a		_			
b		_	ļ		
C		_			
d			ļ		
e		· · · · · · · · · · · · · · · · · · ·			
12 Subtotal. Add columns (b), (d), and (e)		0.		29,631.	0.
13 Total Add line 12, columns (b), (d), and (e)				13	29,631.
(See worksheet in line 13 instructions to verify calculations.)		·			
Part XVI-B Relationship of Activities to	the Acco	emplishment of Ex	emp	t Purposes	
Line No.		n column (a) of Dark VIII A			
Explain below how each activity for which incore the foundation's exempt purposes (other than I			contric	outed importantly to the accon	nplishment of
NO INCOME FROM ANY ACTI	<u> </u>		7777	тмемте	
NO INCOME FROM ANI ACII	VIII O	TUEK TUWN TN	<u>опо</u>	IMENIO.	
					
				 	
				· · · · · · · · · · · · · · · · · · ·	··· ·
				,	~~ ~
	<u> </u>				·····
					u

orm 99		SAN FAMILY For the second seco			nd Polational	23-74			ige 13
ı uı t	Exempt Organ		is to allu ti	ansactions a		iips with Norici	iaiitabii	,	
	the organization directly or ind					on 501(c) of		Yes	No
	Code (other than section 501(o				izations?				
	insfers from the reporting found	dation to a noncharitable ex	xempt organizatioi	n of:					
٠.	Cash						1a(1)		X
٠.	Other assets ner transactions:						1a(2)		X
	Sales of assets to a noncharita	able evernt organization					15/1\		v
٠,	Purchases of assets from a no	· -	ızatıon				1b(1) 1b(2)		X
٠.	Rental of facilities, equipment,	· -	12411011				1b(3)		X
٠.	Reimbursement arrangements						1b(4)	 	X
٠.	Loans or loan guarantees	•					1b(5)		Х
	Performance of services or me	embership or fundraising s	solicitations				1b(6)		Х
c Sh	aring of facilities, equipment, ma	aılıng lısts, other assets, or	paid employees				10		X
d If t	he answer to any of the above is	s "Yes," complete the follow	ving schedule. Col	umn (b) should alv	ways show the fair m	arket value of the good	s, other as:	sets,	
	services given by the reporting t			ıan faır market valu	ie in any transaction	or sharing arrangemen	it, show in		
	umn (d) the value of the goods,	· · · · · · · · · · · · · · · · · · · 			(4)				
(a)Line r	o (b) Amount involved		charitable exempt	organization	(0) Description	of transfers, transactions, a	ind sharing ar	rangeme	nts
 -			N/A						
			·			.			
-									
_									
				······································					
-									
									
2a Is	the foundation directly or indirec	thy affiliated with or relate	d to one or more	tax-exemnt organi	zations described				
	section 501(c) of the Code (othe	-	-	. •			Yes	X	No
	Yes," complete the following sch								
	(a) Name of or	ganization	(b) Typ	e of organization	(c) Description of relation	nship		
	N/A								
		· · · · · · · · · · · · · · · · · · ·			·				
							-		
	Under penalties of perjury, I declare	that I have examined this return	rn including accomo	anving schedules and	statements, and to the b	nest of my knowledge -			
Sign	and belief, it is true, correct, and co					has any knowledge	May the IRS return with th	e prepar	er
Here	Jones &	Il Rough	een	8-17-12	TRUSTE	Е	shown below		itr)? No
	Signature of officer or truster	e //	D:	ate	Title	 -L	103	, <u> </u>	
	Print/Type preparer's n	name Pre	parer's signature		Date	Check If PTI	N		
	ν		171	1 11-		self- employed			
Paid		ORICK /	1 1-40	Jarobsky (P)	+ 8/4/17		00007		
Prep	arer Firm's name ► HAV	WKINS, ASH,	BAPTIE A	ND CO.,	LLP	Firm's EIN ► 39 -	09126	08	

920.336.9850

Phone no.

Use Only

Firm's address ► 400 REID STREET, SUITE V

DE PERE, WI 54115-2164

Part IV Capital Gains and Los	ses for Tax on Investme <u>nt Income</u>	B		•	
(a) List and 2-story bri	describe the kind(s) of property so ck warehouse; or common stock, :	old, e.g., real estate, 200 shs. MLC Co.	(b) How acquired P - Purchase D - Donation	(c) Date acquired (mo., day, yr.)	(d) Date sold (mo., day, yr.)
1a COCA COLA ENTER	RPRISES		P	04/01/92	02/01/12
b KEYCORP CAPITAL	-		P	06/13/06	
c KEYCORP CAPITAL	IX		P	03/21/07	12/15/11
d SEASPAN CORP			P	09/13/07	02/15/12
e SEASPAN CORP			P	09/13/07	02/15/12
f SEASPAN CORP			P	09/13/07	02/15/12
g					
h					
_!					
<u></u>					
_ k					
1				,	
m					
<u>n</u>			-		
0		T		<u> </u>	
(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale) Gain or (loss) plus (f) minus (g)	
a 10,000.		10,000.			0.
b 20,000.		20,575.			-575.
c 20,000.		20,000.			0.
d 1,516.		3,298.			-1,782.
e 10,612.		23,093.			-12,481.
f 6,064.		10,288.			-4,224.
g					
h					
1		<u> </u>			
<u>k</u>					
					
<u>m</u>					
n				•	
Complete only for assets showing	g gain in column (h) and owned by	the foundation on 12/31/69	(1) 0	sses (from col (h))	
(i) F.M.V. as of 12/31/69	(ı) Adjusted basıs as of 12/31/69	(k) Excess of col. (i) over col. (j), if any	Gains (excess	of col. (h) gain over not less than "-0-")	
2					0.
a b					-575 .
C					0.
d					-1,782.
е					-12,481.
f					-4,224.
g					
h					
1					
1					
k					
m					
n					
0					
Conital gain not income or /cot con	f If gain, also ente	er in Part I, line 7 0-" in Part I, line 7	_		10 000
2 Capital gain net income or (net cap		, I	2		<u>-19,062.</u>
3 Net short-term capital gain or (loss		nd (6):			
If gain, also enter in Part I, line 8, of If (loss), enter "-0-" in Part I, line 8	olumn (c).	ŗ	3	N/A	

Madigan Family Famadation Part XV- Supplementary Information 23-7400242

EMM Fiscal Statement

MADIGAN FAMILY FOUNDATION

Bonchon are highly-lith.

SUMMARY OF VISA CARD ACTIVITY FOR CYNTHIA MADIGAN BELL

Date Cleared	Transaction Date	Description	Location	Amount
01/02/12	01/04/12	USA COUNCIL OF SERRA INT	312-201-6549 IL	125.00 🛠 🔿
01/23/12	01/20/12	USA COUNCIL OF SERRA INT	ROSEMONT IL 312-201-6549 IL	288.69 40 00 € O
06/19/12 06/19/12	96/48/42 06/18/12		GREEN BAY	25.00
06/25/12	06/24/12	DELIA AIR 996827286100	PROVIDENCE RI	25.00
06/25/12	06/24/12	-DELTA-AIR 006827296101	PROVIDENCE RI	25 00 {
0h/2b/12	90/24/12	HILTON PROVIDENCE FB	PROVIDENCE RI	48 93
71.177.00	71.47.790	THE FOR PROVIDENCE HOTEE	PROVIDENCE R	928-38
		Total Visa Card Activity For CYNTHIA MADIGAN BELL	ELL	1,230.90
		Total Visa Card Activity		1.230.90

SUMMARY OF CHECKING ACTIVITY

Date Cleared	Date Written	Check Number	Payee	Amount
07/14/11	07/06/11	00001308	ORDER OF THE HOLY SEPLIE CHRE	300 005
08/22/11	08/16/11	00001309	SILVER LAKE COLLEGE	100 001
08/23/11	08/16/11	00001310	ST BERNARD SCH	100 001
10/24/11	10/18/11	00001311	PALILS PANTRY ST VINCENT DE PALI	0005
10/31/11	10/18/11	00001312	GREEN BAY AREA CATHOLIC FOLICAT	0000
12/27/11	11/16/11	00001323	ORDER OF THE HOLY SEPTIL CHRE	00 00
12/19/11	12/14/11	00001313	SERRA CI LIB OF WEST GREEN BAY	285 00
12/22/11	12/14/11	00001314	THE GATHERING PLACE INC	100 001
12/20/11	12/14/11	00001315	NATIONAL ALLIANCE ON MENTAL II	100 001
12/21/11	12/14/11	00001316	CATHOLIC FON BISHOPS APPEAL	20007
12/28/11	12/14/11	00001317	NOTRE DAME ACADEMY	20 05
12/19/11	12/14/11	00001318	FRIENDS OF ST VINCENT HOSP	100.00
12/21/11	12/14/11	00001319	SISTERS OF ST FRANCIS OF HOLY	00 05
12/21/11	12/14/11	00001320	USA COUNCIL OF SERPA INTI	0000
12/23/11	12/15/11	00001321	GLOBAL OUTREACH	20.00
	PLEASE SEE REVERSE SIDE Page Stateme	SE SIDE Statement Period Account No		
X 00274844		Year Ending 06/30/12 692-04002		



MADIGAN FAMILY FOUNDATION

	Amount	100 00 P 50.00 400 00 80 30 50.00 50.00 3,465.30
G ACTIVITY	Payee	MAUTHE CENTER BISHOP ROBERT BANKS SERRA INTL TOM MEJNICZAK OSHKOSH SERRA CLUB THE GATHERING PLACE
SUMMARY OF CHECKING ACTIVITY	Check Number	00001322 00001324 00001325 00001327 00001327 Total Checking Activity
	Date Written	12/15/11 02/20/12 04/24/12 05/23/12 05/23/12
	Date Cleared	01/10/12 02/29/12 05/01/12 06/06/12 05/29/12 05/31/12

3,600 1409

O - Donathens

18

990'

T. Travel

PLEASE SEE REVERSE SIDE Page Statement Period 8 of 10 Year Ending 06/30/12

Account No 692-04002

Fiscal Statement

MADIGAN FAMILY FOUNDATION

FISCAL YEAR ACTIVITY

43.75CR(3) 255.00 - ott 298.75 SALUM 51 14 7 472.11 7 437 31 7 339 00 7 94.85 7 400 00 X D Amount Credit 680 A 245.00 106.25 218,75 614 00 150 00 614.00 Debit ₹ 208-429-2349 ID 312-588-0700 IL ROSEMONT ROSEMONT ROSEMONT 262-785T188 920-4366363 **JERUSALEN** SUMMARY OF VISA CARD ACTIVITY FOR JAMES E MADIGAN Location Price **Electronic Transfers** Other Activity MCCORMICK SCHMICK #108 INTER: CHICAGO O'HARE INTER. CHICAGO O'HARE INTER. CHICAGO O'HARE INTER. CHICAGO O'HARE ITF SCHROEDERS GHSES AND ALG'TRIP CHARGES SERRA INTERNATIONAL Fees VOTRE DAME CENTER HOTEL EMA VISA SIGNATURE FEE VISA SIGNATURE REWARD **EMA ANNUAL FEE** Description Description Net Total Net Total Net Total IRS Quantity Transaction Date 09/16/11 09/19/11 09/19/11 09/13/11 03/07/12 05/16/12 21724712 Journal Entry Journal Entry Pre-Authdeb Transaction Date Cleared 09/28/11 09/28/11 02/29/12 83/98/12 09/28/11 09/28/11 05/18/12 11/18/11 04/25/12 09/23/11 06/05/12 Date

PLEASE SEE REVERSE SIDE Page Statement Period 18 of 25 Year Ending 06/30/12

X 00274883

Account No 692-04262

EMM Fiscal Statement

	Amount	1,117,81,7	4,770.62	4,770.62	Travel 4,371	2002 1231 5602 641	Amount	25 00 £ 25.00 £ 25.00 £ 230.00 £ 230.00 £ 50.0
E MADIGAN	Location	PROVIDENCE - RI			5um J		Payee	CTY SHERIFFS BENEVOLENT ASSN FR RICHARD MAUTHE PAYEE UNRECORDED SERRA CLUB OF LONDON ST NORBERTS COLLEGE NAMI BROWN CTY AMERICAN HEART ASSOC ST NORBERTS COLLEGE ETERNAL WORD TELEVISION NETWOR CATHOLIC RELIEF SERV NAMI WISCONSIN BAY LAKES COUNCIL BOY SCOUTS OF FRANCISCAN FON FOR HOLY LAND CATH YOUTH EXPEDITIONS AMERICAN CANCER SOCIETY SISTERS OF ST JOSEPH OF CAROND FR PETER MARY ROOKEY MACULAR DEGENERATION RESEARCH HAWKINS ASH BAPTIE & CO WIS KNIGHT OF COLUMBUS ST JOHNS ABBEY H B FOUAD TUAL FR TOM HAYENDORF
SUMMARY OF VISA CARD ACTIVITY FOR JAMES E MADIGAN	Description	HILTON PROVIDENCE HOTEL	Total Visa Card Activity For JAMES E MADIGAN	Total Visa Card Activity		SUMMARY OF CHECKING ACTIVITY	Check Number	00001968 00001970 00001971 00001972 00001973 00001974 00001974 00001976 00001978 00001978 00001981 00001983 00001983 00001984 00001985 00001986 00001987 00001987 00001987 00001987 00001987 00001987
	Transaction Date	21/42/90					Date Written	06/22/11 06/23/11 06/23/11 06/29/11 07/08/11 08/15/11 09/12/11 09/12/11 09/12/11 09/12/11 09/27/11 09/27/11 09/27/11 09/27/11 09/27/11 10/01/11 10/12/11 10/12/11 10/12/11 10/12/11 10/12/11 10/12/11 10/12/11 10/12/11
	Date Cleared						Date Cleared	07/07/11 07/11/11 08/17/11 07/28/11 07/08/11 09/20/11 09/27/11 09/27/11 09/27/11 09/27/11 09/27/11 09/27/11 10/07/11 10/07/11 10/07/11 10/07/11 10/07/11 10/19/11

Fiscal Statement

MADIGAN FAMILY FOUNDATION

SUMMARY OF CHECKING ACTIVITY

Amount	1 500 00 0	50.00	50.00	20 00	25.00	25.00	15 00	34.95	100.00	20.00	0000	100	250.00	00 000	45.00	200.002	20 00	25 00	250 00	2000			200.00	45.00	25 00	20 00	20 00	20 00	100.00	20 00	20.00	20 00	20.00	20.00	50 00	25 00 25 00	
Ame		-												_																							
Payee	CATHOLIC FDN	AMERICAN DIABETES ASSN	ST PAUL UNIV CATH FDN	THE SALVATION ARMY	HONORABLE ORDER OF KY COLONELS	NATL LAW ENFORCEMENT OFFICERS	EASTER SEALS	DAILY WORD	GBAREA CALHOLIC EDUCATION INC	HOLISE OF BEACE	HOLV CROSS DABISH	CATH FON HOLY NAME RETREAT	GREEN BAY SYMPHONY	UNITED WAY	WI PUBLIC TV	MUNDELEIN SEMINARY	BISHOP DAVID RICKER	BISHOP WILLIAM	NEW CORALIVE REHAB INC	ALZHERWER S ASSIN	NEEVIL PLIBLIC MISELIA FON	HERITAGE HILL FON I	ST JOHN THE EVANGELIST SHELTER	CITIZENS AGAINST GOVT	K OF C MARQUETTE ASSEMBLY	MAYR JOHN SCHUH	BISHOP ROBERT BANKS	FATHER BILL KUHR	FATHER RICHARD MANTHE	BISHOP DAVID RICKER	BISHOP RUBERT MORNEAU	FR KAY CONAKU FR TOM HAGENDODE	DEV CHICK KEEFE	BISHOP DAVID ZUBIK	FATHER PETER CAMPBELL	FATHER PETER ROOKEY	
Check Number	16610000	00001992	00001993	00001995	00001996	788.0000	0000000	0000000	00000000	00002025	00002004	00002005	00041121	00002046	00005000	00002000	00002018	0000000	000000	00002011	00002012	00002013	00002014	00002015	00002017	00002019	00002020	00002021	00002022	00002034	00002024 00003035	00002026	00002027	00002031	00002033	00002029	PLEASE SEE REVERSE SIDE Page Statement Period Account No 20 of 25 Vear Ending 06/30/12 603.00362
Date Written	10/12/11	10/12/11	10/12/11	10/12/11	10/12/11	10/12/11	10/13/11	10/13/11	10/13/11	11/02/11	11/03/11	11/03/11	11/03/11	11/06/11	11/00/11	11/08/11	11/11/11	11/22/11	11/22/11	11/22/11	11/22/11	11/22/11	11/22/11	11/22/11	11/22/11	11/8/11	11/8711	11/20/11	11/28/11	11/28/11	11/28/11	11/28/11	11/28/11	11/28/11	11/29/11	11/29/11	PLEASE SEE 1 Page 20 of 25
Date Cleared	10/24/11	10/31/11	10/26/11	10/20/11	10/26/11	10/24/11	10/20/11	10/31/11	10/20/11	12/05/11	11/08/11	11/08/11	11/09/11	12/13/11	11/14/11	12/02/11	12/2/11	11/30/11	12/08/11	11/29/11	12/01/11	12/07/11	12/01/11	12/02/11	11/20/21	17/00/11	12/30/11	12/12/11	12/28/11	12/06/11	12/12/11	12/05/11	12/06/11	12/14/11	12/02/11	12/14/11	X D0274885

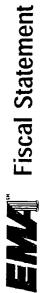
Fiscal Statement

MADIGAN FAMILY FOUNDATION

SHIMMARY OF CHECKING ACTIVITY

Date Cleared				
12/06/11	Date Written	Check Number	Payee	Amount
	11/29/11	00000030	SICTED CHANNIA MANDICANI	
12/12/11	11/29/11	00002032	SISTER SHAWN MADIGAN RICHOD DETED CHDICTENCEN	00:00L
12/13/11	11/29/11	00002034	STEVEL VILLIS	00 52
12/12/11	11/29/11	00002035	ST FRANCIS OF HOLV COOSS	00 001
12/05/11	11/29/11	00002036	EATHER FOWIN MOMBHON	00 00
12/28/11	11/29/11	00002037	SP MAP IETA DETEDNAL	30,00
12/06/11	11/29/11	00002039	EATHED DAVE BEETD	00 52
01/10/12	11/29/11	00002040	FATHED DICHARD	00 57
12/06/11	11/29/11	00002012	CAPTER RICHARD	25.00
12/07/11	11/29/11	00002041	FAIRE VINE CARROLL	25 00
12/23/11	11/29/11	0000042	JUHN CARD FULEY	20 00
12/08/11	11/29/11	0000043	FE ADAM CARDINAL MAIDA	20 00
12/20/11	12/01/11	##020000	PRANCIS CAKDINAL GEORGE	20 00
12/22/11	12/06/11	C000C043	DOOK PROPERTY OWNERS INC	35 00
01/03/12	12/09/11	00002047	OPERN PAY CITED AND	250.00
12/14/11	12/09/11	000000	GREEN DAT SIERRA CLUB	215 00
12/19/11	12/09/11	0000200	NEW COMMINION TO CHELLER INC	00 007
12/27/11	12/17/11	00002026	DENCE OF DOLVER RESEARCH	25 00
12/28/11	12/19/11	00002051	NOTER DAME ACADEMY	920.00
12/27/11	12/19/11	00002052	CATH EXTENSION	0000
12/28/11	12/19/11	00002053	OH TABOR CTR	20.00
12/22/11	12/19/11	00002054	DOOR CO LAND TRUST	35.00
11/52/21	17/9/11	00002055	RELEVANT RADIO	250 00
21/03/12	12/22/11	00002057	GREEN BAY SIERRA CLUB	300 00
21/81/10	01/03/12	00002058	CATHOLIC NEAR EAST WELFARE	20 00
21/82/20	01/03/12	00002059	FATHER BONIFACE SENAT	100.001
21/21/10	21/01/10	00005060	NWTC EDUCATIONAL FDN	00000
01/25/12	01/13/12	00002061	INSTITUTE FOR BIOSPIRITUAL RES	300.00
21/61/10	21/13/12	00002062		300.00
02/03/12	01/13/12	00002063	CATHOLIC LEAGUE	50.00
21/52/10	01/13/12	00002064	HOLY CROSS MISSION CTR	100 001
01/25/12	01/13/12	00002065	NORBERTINE COMM OF NM	100 001
01/30/12	01/13/12	00005066	COVENANT HOUSE	50.07
01/2//12	01/13/12	00002067	W CENTER FOR PERFORMING ARTS	00.001
02/08/12	01/31/12	00002068	THE HOLY I AND REVIEW	24 95
02/01/12	01/31/12	00002069	ORDER OF MAI TA AMEDICAN ASSN	1 500 00
02/07/12	02/02/12	00002070	HOLY CROSS PARISH	2,000,00
02/14/12	02/06/12	00002071	KANGAROO I AKE ASSN INC	20 00 00 00
03/27/12 03/05/12	02/22/12 02/22/12	00002072 00002073	NAMI BROWN CTY FASTED SEALS	100 001
			CASIER SEALS	200
	PLEASE SEE REVERSE SIDE Page Stateme	int Period		
A UU2/4886	C7 IO 17	Year Ending 06/30/12 692-04262		

(or: corrected



	Amount	25 00 D 50.00 1,000 00 1,000 00 100 00 250.00 100.00 250.00 1,500 00 1,50	26,866.90			1,583.39 LT 1,583.39 LT 22.52 LT 2.17 LT 2.17 LT 22.52 LT 1583.39 LT 2.17 LT 2.17 LT 2.52 LT 45.03 LT 45.03 LT
IIVITY	Payee	LEGION OF CHRIST INC US OLYMPIC COMM EQUESTRIAN ORDER OF THE HOLY NEW CURATIVE REHABITATION INC KNIGHTS OF COLUMBUS 14505 ORDER OF HOLY SEPULCHRE HOLY CROSS PARISH GRASSROOTS EMPOWERMENT PROJECT HOLY CROSS PARISH NAMI BROWN CTY LITURGICAL PUBLICATIONS INC UW GB FDN FR TOM HAGENDORF HOLY CROSS PARISH NATL SOC OF PROF ENGR FRANCISCAN FDN FOR HOLY LAND MUNDELEIN SEMINARY SISTERS OF ST FRANCIS GREEN BAY SIERRA CLUB	-	72.20 Sum () : a	Zaul. Cost Basis 27	merice I
SUMMARY OF CHECKING ACTIVITY	Check Number	00002074 00002075 00002076 00002078 00002080 00002081 00002082 00002083 00002084 00002086 00002089 00002090 00002090 00002090	Total Checking Activity	Total Donathons = #	REALIZED CAPITAL GAIN AND LOSS SUMMARY Date of Acquisition Date of Liquidation Sale An	CXE 08/11/08 59R 08/11/08 CXL 88/11/08 COR 08/11/08
	Date Written	02/22/12 02/22/12 02/27/12 02/27/12 03/06/12 03/27/12 03/29/12 05/07/12 05/09/12 05/22/12 05/22/12 05/22/12			Security Description	3 222 2 22 2 22
	Date Cleared	02/29/12 03/01/12 03/09/12 03/02/12 03/12/12 04/03/12 04/09/12 05/10/12 05/11/12 05/11/12 06/04/12 05/30/12 06/30/12			Quantity	\$ 3 0000 \$ 3 0000 \$ 2890 \$ 3 0000 \$ 2 890 \$ 3 0000 \$ 2 890 \$ 2 890 \$ 3 0000 \$ 5 890 \$ 5 800 \$

FORM 990-PF DIVIDEND	S AND	INTER	EST FROM	SECUF	RITIES	STATEMENT	_1
SOURCE		GROSS	AMOUNT		TAL GAINS	COLUMN (A) AMOUNT	
MERRILL LYNCH MERRILL LYNCH	-		48,438. 255.		0.	48,43 25	8.
TOTAL TO FM 990-PF, PART I, L	N 4 =		48,693.		0.	48,69	3.
FORM 990-PF	AC	COUNTI	NG FEES			STATEMENT	2
DESCRIPTION	EXPE	A) NSES BOOKS	(B) NET INVE MENT INC		(C) ADJUSTED NET INCOM		
ACCOUNTING FEES		3,825.	3 ,	,825.			0.
TO FORM 990-PF, PG 1, LN 16B	·	3,825.	3 ,	,825.			0.
FORM 990-PF		TAX	ES			STATEMENT	3
DESCRIPTION	EXPE	A) NSES BOOKS	(B) NET INVE MENT INC		(C) ADJUSTED NET INCOM		
EXCISE TAXES		893.		0.	·		0.
TO FORM 990-PF, PG 1, LN 18		893.		0.			0.
FORM 990-PF	0'	THER E	XPENSES			STATEMENT	4
FORM 990-PF DESCRIPTION	() EXPE	A)	XPENSES (B) NET INVI		(C) ADJUSTED NET INCOM	(D) CHARITAE	BLE
	() EXPE	A) NSES	(B) NET INV		ADJUSTED	(D) CHARITAE	BLE

FORM 990-PF (CORPORATE STOCK		STATEMENT 5
DESCRIPTION		BOOK VALUE	FAIR MARKET VALUE
STATEMENT ON FILE		418,942.	601,428.
TOTAL TO FORM 990-PF, PART II, L	INE 10B	418,942.	601,428.
FORM 990-PF (CORPORATE BONDS	-	STATEMENT 6
DESCRIPTION		BOOK VALUE	FAIR MARKET VALUE
STATEMENT ON FILE		286,302.	291,331.
TOTAL TO FORM 990-PF, PART II, L	INE 10C	286,302.	291,331.
FORM 990-PF O	THER INVESTMENTS		STATEMENT 7
DESCRIPTION	VALUATION METHOD	BOOK VALUE	FAIR MARKET VALUE
STATEMENT ON FILE	COST	23,275.	26,691.
TOTAL TO FORM 990-PF, PART II, L	INE 13	23,275.	26,691.
FORM 990-PF	OTHER ASSETS		STATEMENT 8
DESCRIPTION	BEGINNING OF YR BOOK VALUE		FAIR MARKET VALUE
EXCISE TAX RECEIVABLE	306.	27.	27.
TO FORM 990-PF, PART II, LINE 15	306.	27.	27.

FORM 990-PF EXPLANATION CONCERNING PART VII-A, LINE 8B

STATEMENT

9

EXPLANATION

NOT REQUIRED TO FILE WITH THE STATE DUE TO NEITHER SOLICITING NOR RECEIVING CONTRIBUTIONS.