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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) nonexampt charitable trust.

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

2012

Open to Public Inspection

Norte	of the organization					-		Employer	Libertifi ner	on number	2101
1,44	(Epiphanu	, Lutheran	Four	dobo	n, I	חכ .	30	- 13		2
A Company	Reason	for Public Ch	erity Status (All or	ganizatio	ns must	comple	te this p	art.) See	instruct	iona.	
	organization is no	ot a private found	dation because it is: (For linea	1 through	11, chec	k only or	ne box.)			·
1 2	☐ A courch, co	nuda to notinevik	rches, or association on 170(b)(1)(A)(II), (Att	of church	es descri	bed in se	ection 17	D(P)(1)(A)	I (1)-		
3	A hospital or	r a cooperative b	ospitai service organi	ach Sche Sation de	KOUIB E.) KOUIB E.)	n esation	470/h)#	VALGIR			
4	A medical re	search organizat	tion operated in conju	inction w	ith a hose	ital desc	ribedin a	nection f	70/b)M)//	Nillin. Enter	the
	hospital'a na	ime, city, and sta	ite:						(- /(- //	41111/1	
5	section 170	(b)(1)(A)(IV), (Cor							ovemme	ntal unit de	scribed in
6	A federal, st	ste, or local gove	mment or governme	ntal unit d	teecribed	in section	n 170(b)	(1)(A)(V).			
7	described in	section 170(b)(y receives a substant 1)(A)(vi). (Complete P	art II.)			a govern	imental i	unit or fro	om the gene	oliduq len
8			in section 170(b)(1)(
9	☐ An organizat	ion that normally	y receivea: (1) more t	han 331/s	% of its	support f	rom cont	ributiona	, membe	rship fees, i	and gross
	receipts from	n activities relate	ed to its exempt fund ent income and uni	ctions—e	ubject to	certain (exception	e, and (2	2) no mo	re than 331	/3% of its
	acquired by	the organization	after June 30, 1975.	See secti	on 509 (a)	BXBDIG IN	icome (le nciete Pe	1985 (5807) Fr (1))	on 311 t	ם וחסיזו (אב	72IU69363
10			d operated exclusive						1/4).		
11	An organizat	ion organized a	and operated exclusi	vely for I	the bene	fit of, to	perform	the fund	tions of	or to carr	v out the
	purposes of	one or more pu	bildly supported orga	anizationa	describe	ed in sec	tion 5091	a)(1) or a	section 5	09(a)(2), Sa	section
			describes the type o								
_	a End Type i									tionally inte	
0	other than fo	unis box, I certify	that the organization of the contraction of the con	u 18 not ca	ontrolled ** aublick	directly o	ir indirect	ly by one	or more	disqualified	persons
	or section 50	8(a)(2),	WO WIND DUTING WHEN OF	110	o publici	y auppoi	red Oiffer	ILZĘ IIO IS	4654106	a to ascabil	OOS(B)(1)
1	if the organi	zation received	a written determinat	ion from	the IRS	that it is	a Type	I, Type	II, or Ty	pe III supp	orting
	organization,	check this box									🗖
Ø	Since August following per	l 17, 2008, has 1 sons?	the organization acce	opted any	gift or c	ontributio	on from e	any of the	8		
			indirectly controls, elody of the supported					describe	ed in (II) a	nd T	/es No
	(ii) A family n	nember of a pers	on described in (i) ab	ove?						11600	X
			a person described i							11g(R)	<u> </u>
<u>_</u>			on about the suppor							, -	
Ø N	lame of supported organization	(A) EIN	(described on lines 1-9		organizacion istoci in yeur		rou natify ribation in		is the tion in col.	(MI) Amount o	
			above or IRC section (see instructional)		document?	col. (I	of your port?	(n organi	ized in the 8.7		
			(see naturalizad)	Yes	No	Yes	No	Yee	No		
WE	6,6/rown	39-194044	Line	X		X		X		10	
(B)	NO PA										
											
(C)				-	-					<u> </u>	
(D)						 					
(E)		unito in esta commente de	O CONTRACTOR CONTRACTO	Sull Market	STATE STATE OF	the Theorem State	S OF THE PARTY OF THE	F-12 (19) F 190	ा रस्था शास्त्र		
Total										\$ 0	

Bohe	dule A (Form 890 or 990-EZ) 2012	=					F	700 Z
Γ_{i}	Support Schedule for Organiz	ations Desc	ribed in Sec	llons 170(b)(1)(A)(iv) and	170(b)(1)(A)(\	10 N	A
	(Complete only if you checked t						ialify und	er
500	Part III. If the organization fails to tion A. Public Support	o quainy und	er the tests in	sted below,	please compl	ete Part III.)		
_	endar year (or fiscal year beginning in)	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Tot	
1	Gifte, grants, contributions, and	lay zooo	[D] 2008	(6) 2010	(a) 2011	10/2012	li) loi	(A)
•	membership fees received. (Do not	1	1			Ī		
	include any "unusual grante.")		ļ	İ	İ			
2	Tax revenues levied for the							
	organization's benefit and either paid	Į.	Į.	•	,	ļ	[
_	to or expended on its behalf . , .					<u> </u>		
3	The value of services or facilities furnished by a governmental unit to the	İ	1		1	1	1	
	organization without charge	ŀ	1					
4	Total. Add lines 1 through 3				 	 	 	
5	The portion of total contributions by							- .
•	each person (other than a							
	governmental unit or publicly							
	supported organization) included on							
	line 1 that exceeds 2% of the amount						•	
_	shown on line 11, column (i)				, V			
Sect	Public support. Subtract line 5 from line 4.	Social and Color Buy	deren der der der		erk de Primit e manifestral	and the state of the second	_	
	ndar year (or fiscal year beginning in)	(a) 2008	(b) 2009	(o) 2010	(d) 2011	(e) 2012	(f) Total	el le
7	Amounta from line 4		,	1975575	1972211	190012	10,100	
8	Gross Income from Interest, dividenda,							
	payments received on securities loans,				\	`		
	rents, royaldes and income from similar sources			}	1	1 1		
8	Net Income from unrelated business							
D	activities, whether or not the business				i			
	Is regularly carried on							
10	Other Income. Do not include gain or					_		
	loss from the sale of capital assets					1		
	(Explain In Part IV.)	MENTAL PROPERTY OF THE	Wales and Residence and Residence	energentengentengerende	and the second second	CONTRACTOR CONTRACTOR		
11 12	Total aupport. Add lines 7 through 10 gross receipts from related activities, etc.					12		
13	First five years, if the Form 890 is for the						501(c)(3)	_
	organization, check this box and stop her							
Secti	on C. Computation of Public Support							
14	Public support percentage for 2012 (line 6			1, column (f))		14		%
15	Public support percentage from 2011 Sch					15		%
168	33"x% support test - 2012, if the organize box and etop here. The organization quali							
h	331/a% support test - 2011. If the organi			•				
U	check this box and stop here. The organiz							
17A	10%-facta-and-circumstances test -20	•				a, or 16b, and il	ne 14 la	_
	10% or more, and if the organization mee							
	Part IV how the organization meets the "fa			•	4	•	pported	
	organization						. •	
Ь	10%-facts-and-circumstances test-20							
	15 is 10% or more, and if the organization me							
	supported organization				_		. ►	
18	Private foundation, if the organization did						88	_
-	instructions							
						dule A (Form 190		012

	dule A (Form 990 or 990-EZ) 2012				• •		Page 3
Pa	Support Schedule for Organiz						
	(Complete only if you checked t	he box on lin	e 9 of Part I o	or if the organ	Ization failed	to qualify und	der Part II.
	If the organization falls to qualify	under the to	ests listed be	low, please c	omplete Part	11.}	
	tion A. Public Support	·	,				
_	endar year (or fiscal year beginning in)	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(a) 2012	(f) Total
1	Giffa, granta, contributions, and membership feas		J		l		
2	received. (Do not include any "unusual grams.") Gross receipts from admissions, merchandise	}	<u> </u>				
-	sold or services performed, or facilities	ļ			ļ	ļ	
	furnished in any activity that is related to the	İ	1		1	Į	
9	organization's tax-exempt purpose					 	<u> </u>
3	unrelated trade or business under section 513	i	[ĺ			
4	Tax revenues levied for the		 	 	 		
•	organization's benefit and either paid			[1	
	to or expended on its behalf			i			
5	The value of services or facilities						
	furnished by a governmental unit to the					l	
	organization without charge		1			{	
0	Total. Add lines 1 through 5					<u> </u>	
7a	Amounts included on lines 1, 2, and 3						
	received from diaqualified persons .			İ			
ь	Amounts included on lines 2 and 3			,			
	received from other than disqualified						
	persons that exceed the greater of \$5,000		1	1			
_	or 1% of the amount on line 13 for the year						
8	Add lines 7s and 7b	san eskiptimenti ta nelis	eraterores especialistica	unanem animin ana	namena z tad wali s	THE OWNER OF THE STREET	
	line 8.)						
Sect	ion B. Total Support				AUMMENTALISMENT	Tiellai Elittingania	
	ndar year (or flace) year beginning in)	(a) 2008	(b) 2009	(e) 2010	(d) 2011	(e) 2012	(f) Total
9	Amounts from line 6	(m) 2000	15/2003	10/2010	(4) 2011	10/ 20:2	10 1012
10a						-	
_	payments received on securities loans, rents,		}			{	
	royalties and income from similar sources .						
b	Unrelated business taxable income (less						
	section 511 taxes) from businesses		}	·			
	acquired after June 30, 1975						
C							· · · · · · · · · · · · · · · · · · ·
11	Net income from unrelated business			ļ	1	1	
	activities not included in line 10b, whether or not the business is regularly carried on	ľ		}		- 1	
44	Other Income. Do not Include gain or				+		
12	loss from the sale of capital assets		1	ŀ		Į.	
	(Explain in Part IV.)				İ	ĺ	
13	Total support (Add lines 9, 10c, 11,						
	and 12.)		[1		
14	First five years. If the Form 990 is for the	organization	's first, second	, third, fourth,	or fifth tax ye	ar as a section	501(c)(3)
	organization, check this box and stop here				-	<u></u>	
Section	on C. Computation of Public Support	Percentage					
15	Public support percentage for 2012 (line 8,	column (f) dh	ided by line 13), column (f))		15	96
18	Public support percentage from 2011 Scho				<u> </u>	16	96
	on D. Computation of Investment Inc					1.2.	
17	Investment income percentage for 2012 (list					17	96
18	Investment income percentage from 2011					18	96
1 8 ø	331/a% support tests-2012. If the organiz						
L	33'a% support tests 2011, if the organiza			•			
	line 18 is not more than 33'a%, check this bo						
	Private foundation. If the organization did						
20	Litans teminonsite a me constitution and	HOL CHOCK B	OA OIT III IO 14,	10E OF 13D CI		M GOO (INDUITED	

Part IV	Supplemental Information. Complete this part to provide the explanations required by Part II, line 10; Part II, line 17a or 17b; and Part III, line 12. Also complete this part for any additional information. (See	Pago
	Instructions).	
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9961		

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	Schwalde A (Form 990 or 990-62	

EPIPHANY LUTHERAN FOUNDATION INC 3031 EPIPHANY LANE EAU CLAIRE WI 54703



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DECLARATION

Under penalties of perjury, I declare that I have examined the return identified in this letter, including any accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct and complete. I understand that this declaration will become a permanent part of that return.

Signature of officer or trustee

617/14 Date

ressurer

Title

JUN 18 2014