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Form **990**Department of the Treasury
Internal Revenue Service**Return of Organization Exempt From Income Tax**

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

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

OMB No. 1545-0047

2012Open to Public
Inspection**A** For the 2012 calendar year, or tax year beginning

and ending

B Check if applicable

- ☐ Address change
☐ Name change
☐ Initial return
☐ Terminated
☐ Amended return
☐ Application pending

C Name of organization**BENEDICTINE LIFE FOUNDATION
OF WISCONSIN, INC**

Doing Business As

Number and street (or P.O. box if mail is not delivered to street address)

4200 COUNTY ROAD M

Room/suite

City, town, or post office, state, and ZIP code

MIDDLETON, WI 53562-2317**F** Name and address of principal officer **MARY DAVID WALGENBACH****4200 COUNTY ROAD M, MIDDLETON, WI 53562****D** Employer identification number**39-1830847****E** Telephone number**608-836-1631****G** Gross receipts \$**1,379,084.****H(a)** Is this a group return

for affiliates?

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

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

H(c) Group exemption number ▶**I** Tax-exempt status: ☒ 501(c)(3) ☐ 501(c)() (insert no.) ☐ 4947(a)(1) or ☐ 527**J** Website: ▶ **WWW.BENEDICTINENWOMEN.ORG****K** Form of organization: ☒ Corporation ☐ Trust ☐ Association ☐ Other ▶**L** Year of formation: **1995****M** State of legal domicile: **WI****Part I Summary**

Activities & Governance	1	Briefly describe the organization's mission or most significant activities	SUPPORT FOR BENEDICTINE WOMEN OF MADISON, INC.		
	2	Check this box ☐ if the organization discontinued its operations or disposed of more than 25% of its net assets.			
	3	Number of voting members of the governing body (Part VI, line 1a)	3	5	
	4	Number of independent voting members of the governing body (Part VI, line 1b)	4	5	
	5	Total number of individuals employed in calendar year 2012 (Part V, line 2a)	5	1	
	6	Total number of volunteers (estimate if necessary)	6	0	
	7a	Total unrelated business revenue from Part VIII, column (C), line 12	7a	0.	
	7b	Net unrelated business taxable income from Form 990-T, line 34	7b	0.	
Revenue	8	Contributions and grants (Part VIII, line 1h)	Prior Year	Current Year	
	9	Program service revenue (Part VIII, line 2g)	922,872.	1,324,413.	
	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)	0.	0.	
	11	Other revenue (Part VIII, column (A), lines 5, 6a, 8c, 9c, 10e, and 11b)	37,297.	22,361.	
	12	Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	0.	22,512.	
	13	Grants and similar amounts paid (Part IX, column (A), lines 1-3)	960,169.	1,369,286.	
	14	Benefits paid to or for members (Part IX, column (A), line 4)	330,156.	1,881,599.	
	15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	0.	0.	
	16a	Professional fundraising fees (Part IX, column (A), line 11e)	118,327.	72,628.	
	16b	Total fundraising expenses (Part IX, column (D), line 25) ▶ 89,421.	0.	0.	
Expenses	17	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	31,722.	70,684.	
	18	Total expenses - Add lines 13-17 (must equal Part IX, column (A), line 25)	480,205.	2,024,911.	
	19	Revenue less expenses - Subtract line 18 from line 12	479,964.	<655,625.>	
	Net Assets or Fund Balances	20	Total assets (Part X, line 16)	Beginning of Current Year	End of Year
		21	Total liabilities (Part X, line 26)	1,709,473.	1,042,296.
		22	Net assets or fund balances - Subtract line 21 from line 20	21,041.	9,490.
				1,688,432.	1,032,806.

Part II Signature Block

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

Sign Here ▶ Signature of officer *Mary David Walgenbach* Date **5-7-13**
 ▶ **MARY DAVID WALGENBACH, PRESIDENT**
 Type or print name and title

Paid Preparer Use Only
 Print/Type preparer's name **MEICHER & ASSOCIATES, LLP** Preparer's signature *[Signature]* Date **5/2/13** Check if self-employed ☐ PTIN **P00730653**
 Firm's name ▶ **MEICHER & ASSOCIATES, LLP** Firm's EIN ▶ **39-1659894**
 Firm's address ▶ **2349 DEMING WAY, SUITE 300** Phone no. **608-826-1900**
MIDDLETON, WI 53562

May the IRS discuss this return with the preparer shown above? (see instructions)

☒ Yes☐ No

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**BENEDICTINE LIFE FOUNDATION
OF WISCONSIN, INC**

Part III Statement of Program Service Accomplishments

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

☒ **X****1** Briefly describe the organization's mission:**SUPPORT FOR BENEDICTINE WOMEN OF MADISON, INC.****2** Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ?☐ Yes ☒ **X** No

If "Yes," describe these new services on Schedule O

3 Did the organization cease conducting, or make significant changes in how it conducts, any program services?☐ Yes ☒ **X** No

If "Yes," describe these changes on Schedule O

4 Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses.

Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported.

4a (Code _____) (Expenses \$ 1,873,252. including grants of \$ 1,873,252.) (Revenue \$ _____)
DISTRIBUTION TO BENEDICTINE WOMEN OF MADISON, INC.**4b** (Code _____) (Expenses \$ 8,347. including grants of \$ 8,347.) (Revenue \$ _____)
OTHER GRANTS:**VERA COURT COMMUNITY CENTER ASSISTANCE \$4,763****KOFFI AMUZU-GASSOU PERSONAL ASSISTANCE \$550****LIZ DOSS-ANDERSON PERSONAL ASSISTANCE \$500****LUKE HOUSE MEAL PROGRAM \$954****MISSIONARY BENEDICTINE SISTERS AFRICAN MISSIONARY SCHOOL \$805****WORLD VISION, INC. \$775****4c** (Code _____) (Expenses \$ _____ including grants of \$ _____) (Revenue \$ _____)**4d** Other program services (Describe in Schedule O.)(Expenses \$ 4,102. including grants of \$ _____) (Revenue \$ _____)**4e** Total program service expenses **1,885,701.**

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Part IV Checklist of Required Schedules

	Yes	No
1 Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? <i>If "Yes," complete Schedule A</i>	X	
2 Is the organization required to complete <i>Schedule B, Schedule of Contributors</i> ?	X	
3 Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? <i>If "Yes," complete Schedule C, Part I</i>		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? <i>If "Yes," complete Schedule C, Part II</i>		X
5 Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? <i>If "Yes," complete Schedule C, Part III</i>		X
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? <i>If "Yes," complete Schedule D, Part I</i>		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? <i>If "Yes," complete Schedule D, Part II</i>		X
8 Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If "Yes," complete Schedule D, Part III</i>	X	
9 Did the organization report an amount in Part X, line 21, for escrow or custodial account liability; serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? <i>If "Yes," complete Schedule D, Part IV</i>		X
10 Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? <i>If "Yes," complete Schedule D, Part V</i>	X	
11 If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable.		
a Did the organization report an amount for land, buildings, and equipment in Part X, line 10? <i>If "Yes," complete Schedule D, Part VI</i>		X
b Did the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part VII</i>		X
c Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part VIII</i>		X
d Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part IX</i>		X
e Did the organization report an amount for other liabilities in Part X, line 25? <i>If "Yes," complete Schedule D, Part X</i>		X
f Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? <i>If "Yes," complete Schedule D, Part X</i>		X
12a Did the organization obtain separate, independent audited financial statements for the tax year? <i>If "Yes," complete Schedule D, Parts XI and XII</i>	X	
b Was the organization included in consolidated, independent audited financial statements for the tax year? <i>If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional</i>		X
13 Is the organization a school described in section 170(b)(1)(A)(ii)? <i>If "Yes," complete Schedule E</i>		X
14a Did the organization maintain an office, employees, or agents outside of the United States?		X
b Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? <i>If "Yes," complete Schedule F, Parts I and IV</i>		X
15 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the United States? <i>If "Yes," complete Schedule F, Parts II and IV</i>		X
16 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals located outside the United States? <i>If "Yes," complete Schedule F, Parts III and IV</i>		X
17 Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? <i>If "Yes," complete Schedule G, Part I</i>		X
18 Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? <i>If "Yes," complete Schedule G, Part II</i>	X	
19 Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? <i>If "Yes," complete Schedule G, Part III</i>		X
20a Did the organization operate one or more hospital facilities? <i>If "Yes," complete Schedule H</i>		X
b If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?		

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OF WISCONSIN, INC**

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Part IV Checklist of Required Schedules (continued)

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

Note. All Form 990 filers are required to complete Schedule O

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

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

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

☒ X

Section A. Governing Body and Management

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

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

	Yes	No
10a 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	X
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	X
b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	X
c Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done	12c	X
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?		
a The organization's CEO, Executive Director, or top management official	15a	X
b Other officers or key employees of the organization	15b	X
If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions)		
16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	16a	X
b If "Yes," 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	

Section C. Disclosure

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

18 Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply
☐ Own website ☒ Another's website ☒ Upon request ☐ Other (explain in Schedule O)

19 Describe in Schedule O whether (and if so, how), the organization made 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 ►
LOIS FASCHING - (608) 836-1631
4200 COUNTY ROAD M, MIDDLETON, WI 53562

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

(A) Name and title	(B) Average hours per week (list any hours for related organizations below line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
1b Sub-total								0.	0.	0.
c Total from continuation sheets to Part VII, Section A								0.	0.	0.
d Total (add lines 1b and 1c)								0.	0.	0.

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

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

Section B. Independent Contractors

1 Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization. Report compensation for the calendar year ending with or within the organization's tax year

(A) Name and business address	(B) Description of services	(C) Compensation
NONE		

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

**BENEDICTINE LIFE FOUNDATION
OF WISCONSIN, INC**

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Part VIII Statement of Revenue

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

			(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
Contributions, Gifts, Grants and Other Similar Amounts	1 a Federated campaigns	1a				
	b Membership dues	1b				
	c Fundraising events	1c				
	d Related organizations	1d				
	e Government grants (contributions)	1e				
	f All other contributions, gifts, grants, and similar amounts not included above	1f 1,324,413.				
	g Noncash contributions included in lines 1a-1f \$					
	h Total. Add lines 1a-1f		1,324,413.			
Program Service Revenue	2 a	Business Code				
	b					
	c					
	d					
	e					
	f All other program service revenue					
	g Total. Add lines 2a-2f					
Other Revenue	3 Investment income (including dividends, interest, and other similar amounts)		21,171.	21,171.		
	4 Income from investment of tax-exempt bond proceeds					
	5 Royalties					
	6 a Gross rents	(i) Real (ii) Personal				
	b Less: rental expenses					
	c Rental income or (loss)					
	d Net rental income or (loss)					
	7 a Gross amount from sales of assets other than inventory	(i) Securities (ii) Other				
	b Less: cost or other basis and sales expenses					
	c Gain or (loss)					
	d Net gain or (loss)		1,190.	1,190.		
	8 a Gross income from fundraising events (not including \$ _____ of contributions reported on line 1c). See Part IV, line 18	a 30,409.				
	b Less: direct expenses	b 9,418.				
	c Net income or (loss) from fundraising events		20,991.		20,991.	
	9 a Gross income from gaming activities. See Part IV, line 19	a				
	b Less: direct expenses	b				
	c Net income or (loss) from gaming activities					
	10 a Gross sales of inventory, less returns and allowances	a				
	b Less: cost of goods sold	b				
	c Net income or (loss) from sales of inventory					
Miscellaneous Revenue		Business Code				
11 a UNREALIZED LOSS ON SEC	523000	<1,256.>		<1,256.>		
b						
c						
d All other revenue	523920	2,777.	2,777.			
e Total. Add lines 11a-11d		1,521.				
12 Total revenue. See instructions.		1,369,286.	25,138.	0.	19,735.	

**BENEDICTINE LIFE FOUNDATION
OF WISCONSIN, INC**

Form 990 (2012)

39-1830847 Page **10**

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)

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

Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1 Grants and other assistance to governments and organizations in the United States. See Part IV, line 21	1,881,599.	1,881,599.		
2 Grants and other assistance to individuals in the United States. See Part IV, line 22				
3 Grants and other assistance to governments, organizations, and individuals outside the United States. See Part IV, lines 15 and 16				
4 Benefits paid to or for members				
5 Compensation of current officers, directors, trustees, and key employees				
6 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
7 Other salaries and wages	62,300.		16,626.	45,674.
8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	705.		188.	517.
9 Other employee benefits	6,335.		1,691.	4,644.
10 Payroll taxes	3,288.		877.	2,411.
11 Fees for services (non-employees)				
a Management				
b Legal				
c Accounting	4,985.	907.	753.	3,325.
d Lobbying				
e Professional fundraising services. See Part IV, line 17				
f Investment management fees				
g Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Sch O.)				
12 Advertising and promotion				
13 Office expenses	23,322.	963.	2,087.	20,272.
14 Information technology				
15 Royalties				
16 Occupancy	8,667.	1,733.	867.	6,067.
17 Travel	1,435.	313.	299.	823.
18 Payments of travel or entertainment expenses for any federal, state, or local public officials				
19 Conferences, conventions, and meetings				
20 Interest				
21 Payments to affiliates				
22 Depreciation, depletion, and amortization				
23 Insurance	1,266.	63.	61.	1,142.
24 Other expenses. Itemize expenses not covered above. (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.)				
a UNREALIZED WRITE DOWN O	24,891.	0.	24,891.	0.
b OTHER	3,936.	63.	1,419.	2,454.
c SPECIAL EVENTS	2,182.	60.	30.	2,092.
d				
e All other expenses				
25 Total functional expenses. Add lines 1 through 24e	2,024,911.	1,885,701.	49,789.	89,421.
26 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation.				

Check here ☐ if following SOP 98-2 (ASC 958-720)

**BENEDICTINE LIFE FOUNDATION
OF WISCONSIN, INC**

Form 990 (2012)

39-1830847 Page 11

Part X Balance Sheet

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

		(A) Beginning of year		(B) End of year
Assets	1 Cash - non-interest-bearing		1	
	2 Savings and temporary cash investments	194,328.	2	310,838.
	3 Pledges and grants receivable, net	832,382.	3	81,348.
	4 Accounts receivable, net		4	
	5 Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L		5	
	6 Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instr). Complete Part II of Sch L		6	
	7 Notes and loans receivable, net	600,000.	7	600,000.
	8 Inventories for sale or use		8	
	9 Prepaid expenses and deferred charges		9	
	10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	10a		
	b Less: accumulated depreciation	10b	10c	
	11 Investments - publicly traded securities		11	
	12 Investments - other securities. See Part IV, line 11	82,763.	12	50,110.
	13 Investments - program-related. See Part IV, line 11		13	
	14 Intangible assets		14	
	15 Other assets. See Part IV, line 11		15	
16 Total assets. Add lines 1 through 15 (must equal line 34)	1,709,473.	16	1,042,296.	
Liabilities	17 Accounts payable and accrued expenses	21,041.	17	9,490.
	18 Grants payable		18	
	19 Deferred revenue		19	
	20 Tax-exempt bond liabilities		20	
	21 Escrow or custodial account liability. Complete Part IV of Schedule D		21	
	22 Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L		22	
	23 Secured mortgages and notes payable to unrelated third parties		23	
	24 Unsecured notes and loans payable to unrelated third parties		24	
	25 Other liabilities (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	21,041.	26	9,490.
Net Assets or Fund Balances	Organizations that follow SFAS 117 (ASC 958), check here ☒ and complete lines 27 through 29, and lines 33 and 34.			
	27 Unrestricted net assets	437,596.	27	<293,087.>
	28 Temporarily restricted net assets	594,881.	28	669,488.
	29 Permanently restricted net assets	655,955.	29	656,405.
	Organizations that do not follow SFAS 117 (ASC 958), check here ☐ and complete lines 30 through 34.			
	30 Capital stock or trust principal, or current funds		30	
	31 Paid-in or capital surplus, or land, building, or equipment fund		31	
	32 Retained earnings, endowment, accumulated income, or other funds		32	
33 Total net assets or fund balances	1,688,432.	33	1,032,806.	
34 Total liabilities and net assets/fund balances	1,709,473.	34	1,042,296.	

Form 990 (2012)

**BENEDICTINE LIFE FOUNDATION
OF WISCONSIN, INC**

Form 990 (2012)

39-1830847 Page **12**

Part XI Reconciliation of Net Assets

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

1	Total revenue (must equal Part VIII, column (A), line 12)	1	1,369,286.
2	Total expenses (must equal Part IX, column (A), line 25)	2	2,024,911.
3	Revenue less expenses Subtract line 2 from line 1	3	<655,625.>
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	1,688,432.
5	Net unrealized gains (losses) on investments	5	
6	Donated services and use of facilities	6	
7	Investment expenses	7	
8	Prior period adjustments	8	
9	Other changes in net assets or fund balances (explain in Schedule O)	9	0.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10	1,032,807.

Part XII Financial Statements and Reporting

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

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

Form **990** (2012)

SCHEDULE A
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Public Charity Status and Public Support

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.

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

OMB No 1545-0047

2012

Open to Public
Inspection

Name of the organization **BENEDICTINE LIFE FOUNDATION OF WISCONSIN, INC** Employer identification number **39-1830847**

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

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

- 1 ☐ A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i).
- 2 ☐ A school described in section 170(b)(1)(A)(ii). (Attach Schedule E)
- 3 ☐ A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii).
- 4 ☐ A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state _____
- 5 ☐ An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv). (Complete Part II.)
- 6 ☐ A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v).
- 7 ☐ An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II.)
- 8 ☐ A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.)
- 9 ☐ An organization that normally receives: (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions - subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975 See section 509(a)(2). (Complete Part III)
- 10 ☐ An organization organized and operated exclusively to test for public safety. See section 509(a)(4).
- 11 ☒ An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See section 509(a)(3). Check the box that describes the type of supporting organization and complete lines 11e through 11h
- a ☒ Type I b ☐ Type II c ☐ Type III - Functionally integrated d ☐ Type III - Non-functionally integrated
- e ☒ By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified persons other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2).
- f If the organization received a written determination from the IRS that it is a Type I, Type II, or Type III supporting organization, check this box ☐
- g Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons?
- | | Yes | No |
|--|-------------------------------------|--------------------------|
| (i) A person who directly or indirectly controls, either alone or together with persons described in (ii) and (iii) below, the governing body of the supported organization? | ☒ | ☐ |
| (ii) A family member of a person described in (i) above? | ☒ | ☐ |
| (iii) A 35% controlled entity of a person described in (i) or (ii) above? | ☒ | ☐ |
- h Provide the following information about the supported organization(s)

(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1-9 above or IRC section (see instructions))	(iv) Is the organization in col. (i) listed in your governing document?		(v) Did you notify the organization in col. (i) of your support?		(vi) Is the organization in col. (i) organized in the U.S.?		(vii) Amount of monetary support
			Yes	No	Yes	No	Yes	No	
BENEDICTINE WOMEN OF MAD	39-1960785	501(C)(3)	X		X		X		1,873,252.
Total	1								1,873,252.

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

Schedule A (Form 990 or 990-EZ) 2012

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) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")						
2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3 The value of services or facilities furnished by a governmental unit to the organization without charge						
4 Total. Add lines 1 through 3						
5 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						
6 Public support. Subtract line 5 from line 4						

Section B. Total Support

Calendar year (or fiscal year beginning in) ►	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
7 Amounts from line 4						
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
9 Net income from unrelated business activities, whether or not the business is regularly carried on						
10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)						
11 Total support. Add lines 7 through 10						
12 Gross receipts from related activities, etc. (see instructions)					12	
13 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here ☐						

Section C. Computation of Public Support Percentage

14 Public support percentage for 2012 (line 6, column (f) divided by line 11, column (f))	14	%
15 Public support percentage from 2011 Schedule A, Part II, line 14	15	%
16a 33 1/3% support test - 2012. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization ☐		
b 33 1/3% support test - 2011. 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 - 2012. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization ☐		
b 10% -facts-and-circumstances test - 2011. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization ☐		
18 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions ☐		

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

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

Section A. Public Support

Calendar year (or fiscal year beginning in) ►	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")						
2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3 Gross receipts from activities that are not an unrelated trade or business under section 513						
4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5 The value of services or facilities furnished by a governmental unit to the organization without charge						
6 Total. Add lines 1 through 5						
7a Amounts included on lines 1, 2, and 3 received from disqualified persons						
b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
c Add lines 7a and 7b						
8 Public support. (Subtract line 7c from line 6)						

Section B. Total Support

Calendar year (or fiscal year beginning in) ►	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
9 Amounts from line 6						
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
c Add lines 10a and 10b						
11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12 Other income. Do not include gain or loss from the sale of capital assets. (Explain in Part IV.)						
13 Total support. (Add lines 9, 10c, 11, and 12)						
14 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here ☐						

Section C. Computation of Public Support Percentage

15 Public support percentage for 2012 (line 8, column (f) divided by line 13, column (f))	15	%
16 Public support percentage from 2011 Schedule A, Part III, line 15	16	%

Section D. Computation of Investment Income Percentage

17 Investment income percentage for 2012 (line 10c, column (f) divided by line 13, column (f))	17	%
18 Investment income percentage from 2011 Schedule A, Part III, line 17	18	%

19a 33 1/3% support tests - 2012. If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and **stop here**. The organization qualifies as a publicly supported organization ☐

b 33 1/3% support tests - 2011. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and line 18 is not more than 33 1/3%, check this box and **stop here**. The organization qualifies as a publicly supported organization ☐

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

SCHEDULE D
(Form 990)

Department of the Treasury
Internal Revenue Service

Supplemental Financial Statements

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

OMB No. 1545-0047

2012

Open to Public
Inspection

Name of the organization **BENEDICTINE LIFE FOUNDATION
OF WISCONSIN, INC**

Employer identification number
39-1830847

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

	(a) Donor advised funds	(b) Funds and other accounts
1 Total number at end of year		
2 Aggregate contributions to (during year)		
3 Aggregate grants from (during year)		
4 Aggregate value at end of year		
5 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control?		☐ Yes ☐ No
6 Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit?		☐ Yes ☐ No

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

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

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

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

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

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

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

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

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

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

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

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

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets.

Complete if the organization answered "Yes" to Form 990, Part IV, line 8.

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

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

(i) Revenues included in Form 990, Part VIII, line 1	▶ \$	0.
(ii) Assets included in Form 990, Part X	▶ \$	50,110.

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

a Revenues included in Form 990, Part VIII, line 1	▶ \$	
b Assets included in Form 990, Part X	▶ \$	

**BENEDICTINE LIFE FOUNDATION
OF WISCONSIN, INC**
Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets (continued)

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

- a ☐ Public exhibition
b ☐ Scholarly research
c ☐ Preservation for future generations

- d ☐ Loan or exchange programs
e ☐ Other _____

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

5 During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets

to be sold to raise funds rather than to be maintained as part of the organization's collection? _____

☐ Yes ☒ No

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

1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X? _____

☐ Yes ☐ No

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

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

	Amount
1c	
1d	
1e	
1f	

2a Did the organization include an amount on Form 990, Part X, line 21? _____

☐ Yes ☐ No

b If "Yes," explain the arrangement in Part XIII. Check here if the explanation has been provided in Part XIII ☐

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

	(a) Current year	(b) Prior year	(c) Two years back	(d) Three years back	(e) Four years back
1a Beginning of year balance	655,955.	627,539.	609,115.	536,810.	674,651.
b Contributions	450.	1,171.	7,970.	1,339.	18,600.
c Net investment earnings, gains, and losses	15.	37,184.	71,205.	76,670.	<150,549.>
d Grants or scholarships	15.	9,939.	54,384.		
e Other expenditures for facilities and programs					
f Administrative expenses			6,367.	5,704.	5,892.
g End of year balance	656,405.	655,955.	627,539.	609,115.	536,810.

2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as:

- a Board designated or quasi-endowment ► _____ %
b Permanent endowment ► 100.00 %
c Temporarily restricted endowment ► _____ %

The percentages in lines 2a, 2b, and 2c should equal 100%

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

- (i) unrelated organizations
(ii) related organizations

	Yes	No
3a(i)		X
3a(ii)		X
3b		

b If "Yes" to 3a(ii), are the related organizations listed as required on Schedule R? _____

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

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

Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land				
b Buildings				
c Leasehold improvements				
d Equipment				
e Other				

Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10(c).) ►

0.

**BENEDICTINE LIFE FOUNDATION
OF WISCONSIN, INC**

Schedule D (Form 990) 2012

39-1830847 Page **3**

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

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

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

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

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

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

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

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

2. FIN 48 (ASC 740) Footnote. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48 (ASC 740). Check here if the text of the footnote has been provided in Part XIII ☐

**BENEDICTINE LIFE FOUNDATION
OF WISCONSIN, INC**

Schedule D (Form 990) 2012

39-1830847 Page 4

Part XI Reconciliation of Revenue per Audited Financial Statements With Revenue per Return

1	Total revenue, gains, and other support per audited financial statements		1	1,383,147.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:			
a	Net unrealized gains on investments	2a		
b	Donated services and use of facilities	2b		
c	Recoveries of prior year grants	2c		
d	Other (Describe in Part XIII.)	2d	88,918.	
e	Add lines 2a through 2d	2e		88,918.
3	Subtract line 2e from line 1	3		1,294,229.
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:			
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a		
b	Other (Describe in Part XIII.)	4b	75,057.	
c	Add lines 4a and 4b	4c		75,057.
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)	5		1,369,286.

Part XII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return

1	Total expenses and losses per audited financial statements		1	2,113,830.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:			
a	Donated services and use of facilities	2a		
b	Prior year adjustments	2b		
c	Other losses	2c		
d	Other (Describe in Part XIII.)	2d	88,918.	
e	Add lines 2a through 2d	2e		88,918.
3	Subtract line 2e from line 1	3		2,024,912.
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:			
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a		
b	Other (Describe in Part XIII.)	4b		
c	Add lines 4a and 4b	4c		0.
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)	5		2,024,912.

Part XIII Supplemental Information

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

PART XI, LINE 2D - OTHER ADJUSTMENTS:

UNCOLLECTABLE PLEDGES

FUNDRAISING EVENTS PART VIII, LINE 8

PART XI, LINE 4B - OTHER ADJUSTMENTS:

RELEASE OF RESTRICTED - TEMPORARY

RELEASE OF RESTRICTED - PERMENANT

Schedule D (Form 990) 2012

PART XII, LINE 2D - OTHER ADJUSTMENTS:

UNCOLLECTABLE PLEDGES

FUNDRAISING EVENTS PART VIII, LINE 8

Department of the Treasury
Internal Revenue Service

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

OMB No 1545-0047

2012

Open To Public Inspection

Employer identification number
39-1830847

Part I

Fundraising Activities. Complete if the organization answered "Yes" to Form 990, Part IV, line 17. Form 990-EZ filers are not required to complete this part

1. Indicate whether the organization raised funds through any of the following activities. Check all that apply.
- | | |
|---|--|
| a ☐ Mail solicitations | e ☐ Solicitation of non-government grants |
| b ☐ Internet and email solicitations | f ☐ Solicitation of government grants |
| c ☐ Phone solicitations | g ☐ Special fundraising events |
| d ☐ In-person solicitations | |

- 2 a** Did the organization have a written or oral agreement with any individual (including officers, directors, trustees or key employees listed in Form 990, Part VII) or entity in connection with professional fundraising services? ☐ **Yes** ☐ **No**
- b** If "Yes," list the ten highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be compensated at least \$5,000 by the organization.

(i) Name and address of individual or entity (fundraiser)	(ii) Activity	(iii) Did fundraiser have custody or control of contributions?		(iv) Gross receipts from activity	(v) Amount paid to (or retained by) fundraiser listed in col (i)	(vi) Amount paid to (or retained by) organization
		Yes	No			
Total						

- 3 List all states in which the organization is registered or licensed to solicit contributions or has been notified it is exempt from registration or licensing.

BENEDICTINE LIFE FOUNDATION

Schedule G (Form 990 or 990-EZ) 2012 **OF WISCONSIN, INC**

39-1830847 Page 2

Part II Fundraising Events. Complete if the organization answered "Yes" to Form 990, Part IV, line 18, or reported more than \$15,000 of fundraising event contributions and gross income on Form 990-EZ, lines 1 and 6b. List events with gross receipts greater than \$5,000

		(a) Event #1 SALES OF DONATED PROP	(b) Event #2	(c) Other events NONE	(d) Total events (add col (a) through col. (c))
		(event type)	(event type)	(total number)	
Revenue	1 Gross receipts	30,409.			30,409.
	2 Less: Contributions				
	3 Gross income (line 1 minus line 2)	30,409.			30,409.
Direct Expenses	4 Cash prizes				
	5 Noncash prizes				
	6 Rent/facility costs				
	7 Food and beverages				
	8 Entertainment				
	9 Other direct expenses	9,418.			9,418.
	10 Direct expense summary. Add lines 4 through 9 in column (d)				(9,418)
	11 Net income summary. Combine line 3, column (d), and line 10				20,991.

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

		(a) Bingo	(b) Pull tabs/instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add col (a) through col. (c))
Revenue	1 Gross revenue				
Direct Expenses	2 Cash prizes				
	3 Noncash prizes				
	4 Rent/facility costs				
	5 Other direct expenses				
	6 Volunteer labor	☐ Yes _____ % ☐ No	☐ Yes _____ % ☐ No	☐ Yes _____ % ☐ No	
	7 Direct expense summary. Add lines 2 through 5 in column (d)				()
	8 Net gaming income summary. Combine line 1, column d, and line 7				

9 Enter the state(s) in which the organization operates gaming activities. _____

a Is the organization licensed to operate gaming activities in each of these states? ☐ Yes ☐ No

b If "No," explain: _____

10a Were any of the organization's gaming licenses revoked, suspended or terminated during the tax year? ☐ Yes ☐ No

b If "Yes," explain: _____

BENEDICTINE LIFE FOUNDATION

Schedule G (Form 990 or 990-EZ) 2012 **OF WISCONSIN, INC**

39-1830847 Page **3**

- 11** Does the organization operate gaming activities with nonmembers? ☐ Yes ☐ No
- 12** Is the organization a grantor, beneficiary or trustee of a trust or a member of a partnership or other entity formed to administer charitable gaming? ☐ Yes ☐ No
- 13** Indicate the percentage of gaming activity operated in:
- | | | |
|--------------------------------------|------------|---|
| a The organization's facility | 13a | % |
| b An outside facility | 13b | % |
- 14** Enter the name and address of the person who prepares the organization's gaming/special events books and records:

Name ▶ _____

Address ▶ _____

- 15a** Does the organization have a contract with a third party from whom the organization receives gaming revenue? ☐ Yes ☐ No
- b** If "Yes," enter the amount of gaming revenue received by the organization ▶ \$ _____ and the amount of gaming revenue retained by the third party ▶ \$ _____.
- c** If "Yes," enter name and address of the third party:

Name ▶ _____

Address ▶ _____

16 Gaming manager information:

Name ▶ _____

Gaming manager compensation ▶ \$ _____

Description of services provided ▶ _____

☐ Director/officer ☐ Employee ☐ Independent contractor

17 Mandatory distributions:

- a** Is the organization required under state law to make charitable distributions from the gaming proceeds to retain the state gaming license? ☐ Yes ☐ No
- b** Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent in the organization's own exempt activities during the tax year ▶ \$ _____

Part IV **Supplemental Information.** Complete this part to provide the explanations required by Part I, line 2b, columns (iii) and (v), and Part III, lines 9, 9b, 10b, 15b, 15c, 16, and 17b, as applicable. Also complete this part to provide any additional information (see instructions).

Name of the organization

**BENEDICTINE LIFE FOUNDATION
OF WISCONSIN, INC**

Name of the organization		BENEDICTINE LIFE OF WISCONSIN, INC
Part I	General Information on Grants and Assistance	

Employer identification number
39-1830847

1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?

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

Part II	Grants and Other Assistance to Governments and Organizations in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed.
---------	---

[illegible]

22 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table

33 Enter total number of other organizations listed in the line 1 table

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

Schedule I (Form 990) (2012)

SCHEDULE O
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

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

OMB No 1545-0047

2012

Open to Public
Inspection

Name of the organization	BENEDICTINE LIFE FOUNDATION OF WISCONSIN, INC	Employer identification number 39-1830847
--------------------------	--	--

FORM 990, PART III, LINE 4D, OTHER PROGRAM SERVICES:

OTHER PROGRAM EXPENSES INCLUDE COST OF SPECIAL EVENT THROUGH OUT THE
YEAR.

EXPENSES \$ 4,102. INCLUDING GRANTS OF \$ 0. REVENUE \$ 0.

FORM 990, PART VI, SECTION B, LINE 11: OUTSIDE CPA FIRM PREPARES FORM 990.
EXECUTIVE DIRECTOR REVIEWS FORM 990 PRIOR TO FILING. BOARD OF DIRECTORS
PRESENTED WITH A COPY OF FORM 990 PRIOR TO FILING.

FORM 990, PART VI, SECTION B, LINE 12C: ALL BOARD MEMBERS WILL BE ASKED
ANNUALLY TO REVIEW AND SIGN THE CONFLICT OF INTEREST FORM AT A REGULARLY
SCHEDULED BOARD MEETING AT WHICH THE IMPORTANCE OF COMPLIANCE, AND EXAMPLES
ON NON-COMPLIANCE, WILL BE INCLUDED. MEMBERS NOT IN COMPLIANCE WILL BE
ASKED TO PRESENT THE NATURE AND EXTENT OF THEIR NON-COMPLIANCE TO THE
ENTIRE BOARD WHO WILL DECIDE HOW BEST TO ADDRESS THE ISSUE AT THAT TIME.

FORM 990, PART VI, SECTION B, LINE 15A: COMPENSATION OF ALL EMPLOYEES IN
THE CONSOLIDATED ENTITY (INCLUDING THE BENEDICTINE WOMEN OF MADISON, INC)
ARE REVIEWED AND APPROVED BY THE PRIORESS OF BENEDICTINE WOMEN OF MADISON,
INC, BASED PRIMARILY ON THE RECOMMENDATIONS OF THE DEPARTMENT HEADS.

PERFORMANCE EVALUATION AND BENEFITS REVIEW FOR THE EXECUTIVE DIRECTOR WERE
DONE BY THE EXECUTIVE IN CONJUNCTION WITH THE PRIORESS. THE INDEPENDENT
COMMITTEE MEMBERS MET WITH THE EXECUTIVE DIRECTOR TO PRESENT THEIR
FINDINGS.

Name of the organization **BENEDICTINE LIFE FOUNDATION
OF WISCONSIN, INC**

Employer identification number
39-1830847

**FORM 990, PART VI, SECTION C, LINE 19: GOVERNING DOCUMENTS AND CONFLICT OF
INTEREST POLICY: AVAILABLE UPON REQUEST.**

**FINANCIAL STATEMENTS: GUIDESTAR WEBSITE AND BENEDICTINE WOMEN OF MADISON,
INC WEBSITE.**

Related Organizations and Unrelated Partnerships

► Complete if the organization answered "Yes" to Form 990, Part IV, line 33, 34, 35, 36, or 37.

▶ **Attach to Form 990.** ▶ **See separate instructions.**

2012

Open to Public Inspection

Name of the organization

BENEDICTINE LIFE FOUNDATION

OF WISCONSIN, INC

Employer identification number

39-1830847

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

[illegible]

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

[illegible]

For Paperwork Reduction Act Notice, see the Instructions for Form 990.

Schedule R (Form 990) 2012

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

[illegible]

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

[illegible]

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

Note. Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule.

1 During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?

a Receipt of (i) interest (ii) annuities (iii) royalties or (iv) rent from a controlled entity

b Gift, grant, or capital contribution to related organization(s)

c Gift, grant, or capital contribution from related organization(s)

d Loans or loan guarantees to or for related organization(s)

e Loans or loan guarantees by related organization(s)

f Dividends from related organization(s)

g Sale of assets to related organization(s)

h Purchase of assets from related organization(s)

i Exchange of assets with related organization(s)

j Lease of facilities, equipment, or other assets to related organization(s)

k Lease of facilities, equipment, or other assets from related organization(s)

l Performance of services or membership or fundraising solicitations for related organization(s)

m Performance of services or membership or fundraising solicitations by related organization(s)

n Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)

o Sharing of paid employees with related organization(s)

p Reimbursement paid to related organization(s) for expenses

q Reimbursement paid by related organization(s) for expenses

r Other transfer of cash or property to related organization(s)

s Other transfer of cash or property from related organization(s)

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

(a) Name of other organization	(b) Transaction type (a-s)	(c) Amount involved	(d) Method of determining amount involved
BOTH ENTITIES ARE 501(C)(3), THIS SECTION			
(1) N/A		0.	
(2)			
(3)			
(4)			
(5)			
(6)			

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

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

[illegible]

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

Benedictine Life Foundation of Wisconsin, Inc.

Financial Statements and
Supplementary Information

Years Ended December 31, 2012 and 2011

Contents

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Statements of Cash Flows	7
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Schedules of Functional Expenses	15 - 16



Independent Auditor's Report

To the Board of Directors
Benedictine Life Foundation of Wisconsin, Inc.
Madison, Wisconsin

We have audited the accompanying financial statements of Benedictine Life Foundation of Wisconsin, Inc. (a Wisconsin nonprofit corporation), which comprise the statements of financial position as of December 31, 2012 and 2011, and the related statements of changes in net assets, statements of activities and cash flows for the years then ended, and the related notes to the financial statements.

Management's Responsibility for the Financial Statements

Management is responsible for the preparation and fair presentation of these financial statements in accordance with accounting principles generally accepted in the United States of America; this includes the design, implementation, and maintenance of internal control relevant to the preparation of financial statements that are free from material misstatement, whether due to fraud or error.

Auditor's Responsibility

Our responsibility is to express an opinion on these financial statements based on our audits. We conducted our audits in accordance with auditing standards generally accepted in the United States of America. Those standards require that we plan and perform the audits to obtain reasonable assurance about whether the financial statements are free of material misstatement.

An audit involves performing procedures to obtain audit evidence about the amounts and disclosures in the financial statements. The procedures selected depend on the auditor's judgment, including the assessment of the risks of material misstatement of the financial statements, whether due to fraud or error. In making those risk assessments, the auditor considers internal control relevant to the entity's preparation and fair presentation of the financial statements in order to design audit procedures that are appropriate in the circumstances, but not for the purpose of expressing an opinion on the effectiveness of the entity's internal control. Accordingly, we express no such opinion. An audit also includes evaluating the appropriateness of accounting policies used and the reasonableness of significant accounting estimates made by management, as well as evaluating the overall presentation of the financial statements.

CERTIFIED PUBLIC ACCOUNTANTS AND CONSULTANTS

2349 Deming Way | Suite 300 | Middleton, WI 53562 | Tel 608 826 1900 | Fax 608 826 1901 | www.meichercpa.com
509 East Main Street | Waunakee, WI 53597 | Tel 608 849 7373
5944 Seminole Centre Court | Suite B | Fitchburg, WI 53711 | Tel 608 278 8094

Member American Institute of Certified Public Accountants | Wisconsin Institute of Certified Public Accountants
Private Companies Practice Section of the American Institute of Certified Public Accountants

We believe that the audit evidence we have obtained is sufficient and appropriate to provide a basis for our audit opinion.

Opinion

In our opinion, the 2012 and 2011 financial statements referred to above present fairly, in all material respects, the financial position of Benedictine Life Foundation of Wisconsin, Inc. as of December 31, 2012 and 2011, and the changes in their net assets and their cash flows for the years then ended in conformity with accounting principles generally accepted in the United States of America.

Report on Supplementary Information

Our audits were conducted for the purpose of forming an opinion on the financial statements of the Foundation taken as a whole. The schedules of functional expenses on pages 13 and 14 are presented for purposes of additional analysis and are not a required part of the financial statements of the Foundation. Such information has been subjected to the auditing procedures applied in the audit of the financial statements and, in our opinion, is fairly stated, in all material respects, in relation to the financial statements taken as a whole.

Meicher & Associates, LLP

Middleton, Wisconsin
March 5, 2013

Benedictine Life Foundation of Wisconsin, Inc.

**Statements of Financial Position
December 31, 2012 and 2011**

	<u>2012</u>	<u>2011</u>
Assets		
Current Assets		
Cash	\$ 309,740	\$ 193,080
Investments, at fair value	1,098	1,248
Current portion of pledges receivable	<u>45,559</u>	<u>672,935</u>
Total current assets	<u>356,397</u>	<u>867,263</u>
Other Assets		
Long-term pledges receivable, net	35,789	159,447
Note receivable - affiliated entity	600,000	600,000
Art work, at fair value	<u>50,110</u>	<u>82,763</u>
	<u>685,899</u>	<u>842,210</u>
	<u>\$ 1,042,296</u>	<u>\$ 1,709,473</u>
Liabilities and Net Assets		
Current Liabilities		
Accounts payable	\$ 775	\$ 271
Accounts payable - affiliated entity	<u>8,715</u>	<u>20,770</u>
Total current liabilities	<u>9,490</u>	<u>21,041</u>
Net Assets		
Unrestricted	(293,087)	437,596
Temporarily restricted	669,488	594,881
Permanently restricted	<u>656,405</u>	<u>655,955</u>
	<u>1,032,806</u>	<u>1,688,432</u>
	<u>\$ 1,042,296</u>	<u>\$ 1,709,473</u>

The accompanying notes are an integral part of the financial statements.

Benedictine Life Foundation of Wisconsin, Inc.

Statements of Changes in Net Assets
Years Ended December 31, 2012 and 2011

	<u>Unrestricted</u>	<u>Temporarily Restricted</u>	<u>Permanently Restricted</u>	<u>Total</u>
Net assets - January 1, 2011	\$ (80,631)	\$ 661,560	\$ 627,539	\$ 1,208,468
Transfer earnings on endowments	-	9,939	(9,939)	-
Increase (decrease) in net assets	<u>518,227</u>	<u>(76,618)</u>	<u>38,355</u>	<u>479,964</u>
Net assets - December 31, 2011	437,596	594,881	655,955	1,688,432
Transfer earnings on endowments	-	15	(15)	-
Increase (decrease) in net assets	<u>(730,683)</u>	<u>74,592</u>	<u>465</u>	<u>(655,626)</u>
Net assets - December 31, 2012	<u>\$ (293,087)</u>	<u>\$ 669,488</u>	<u>\$ 656,405</u>	<u>\$ 1,032,806</u>

The accompanying notes are an integral part of the financial statements.

Benedictine Life Foundation of Wisconsin, Inc.

Statements of Activities
Years Ended December 31, 2012 and 2011

	<u>2012</u>	<u>2011</u>
Unrestricted Net Assets		
Support and Revenue		
Contributions	\$ 111,887	\$ 734,832
Interest and dividend income	-	113
Miscellaneous	23,867	-
Net assets released from restriction	<u>1,247,393</u>	<u>263,487</u>
 Total support and revenue	 <u>1,383,147</u>	 <u>998,432</u>
Expenses		
Grants	1,881,599	330,156
Other	84,507	6,462
Salaries and benefits	74,173	118,327
Loss on write down of assets	24,890	-
Special events	11,600	4,570
Printing and production	9,992	4,476
Postage and mail service	8,750	1,017
Facility expenses	6,000	6,000
Professional fees	4,985	5,301
Licenses and subscriptions	3,078	64
Service contracts	2,667	2,590
Insurance	1,156	1,151
Supplies	358	41
Community relations	<u>75</u>	<u>50</u>
 Total expenses	 <u>2,113,830</u>	 <u>480,205</u>
 Increase (decrease) in unrestricted net assets	 <u>(730,683)</u>	 <u>518,227</u>

The accompanying notes are an integral part of the financial statements.

	<u>2012</u>	<u>2011</u>
Temporarily Restricted Net Assets		
Contributions	1,321,985	186,869
Net assets released from restrictions	<u>(1,247,393)</u>	<u>(263,487)</u>
Decrease in temporarily restricted net assets	<u>74,592</u>	<u>(76,618)</u>
Permanently Restricted Net Assets		
Endowment fund contributions	450	1,171
Net investment income	<u>15</u>	<u>37,184</u>
Increase in permanently restricted net assets	<u>465</u>	<u>38,355</u>
Total increase (decrease) in net assets	<u>\$ (655,626)</u>	<u>\$ 479,964</u>

Benedictine Life Foundation of Wisconsin, Inc.

Statements of Cash Flows
Years Ended December 31, 2012 and 2011

	<u>2012</u>	<u>2011</u>
Cash Flows from Operating Activities		
(Decrease) increase in net assets	\$ (655,626)	\$ 479,964
Adjustments to reconcile change in net assets to cash provided by (used in) operating activities:		
Loss on write down of assets	24,890	-
Change in allowance for uncollectible accounts	(5,000)	(2,970)
Changes in:		
Unrestricted unconditional promises to give	752,934	(514,154)
Other	-	85
Accounts payable	504	271
Accounts payable - affiliated entity	(12,055)	5,866
Contributions restricted for long-term use	<u>-</u>	<u>(900)</u>
Net cash provided by (used in) operating activities	<u>105,647</u>	<u>(31,838)</u>
Cash Flows from Investing Activities		
Proceeds from the sale of assets	7,763	-
Proceeds from sale of investments	-	616,221
Change in investments	<u>150</u>	<u>-</u>
Net cash provided by investing activities	<u>7,913</u>	<u>616,221</u>
Cash Flows from Financing Activities		
Collections of contributions restricted for long-term use	3,100	5,903
Note receivable with affiliated entity	<u>-</u>	<u>(600,000)</u>
Net cash provided by (used in) financing activities	<u>3,100</u>	<u>(594,097)</u>
Net increase (decrease) in cash	116,660	(9,714)
Cash at beginning of year	<u>193,080</u>	<u>202,794</u>
Cash at end of year	<u><u>\$ 309,740</u></u>	<u><u>\$ 193,080</u></u>

The accompanying notes are an integral part of the financial statements.

Benedictine Life Foundation of Wisconsin, Inc.

Notes to Financial Statements Years Ended December 31, 2012 and 2011

Note 1 - Nature of Operations and Summary of Significant Accounting Policies

Nature of Operations

Benedictine Life Foundation of Madison, Wisconsin, Inc. ("Foundation") is a not-for-profit corporation established September 5, 1995 under the laws of the State of Wisconsin. The Foundation operates to provide ongoing support and development for the program and capital needs of Benedictine Life Foundation of Wisconsin, Inc. and Benedictine Women of Madison, Inc. ("Organization") by conducting fundraising campaigns and receiving, investing, administering and distributing funds to and for the benefit of Benedictine Life Foundation of Wisconsin, Inc.

Financial Statement Presentation

The Foundation is required to report information regarding its financial position and activities according to three classes of net assets: unrestricted net assets, temporarily restricted net assets, and permanently restricted net assets. Unrestricted net assets are not subject to donor-imposed stipulations. Temporarily restricted net assets are subject to donor-imposed stipulations that may or will be met by actions of the Foundation. Permanently restricted net assets consist of endowment funds to be held indefinitely. Endowment contributions are permanently restricted until the endowments' goals are met. Earnings from these funds is expendable for program services related to each endowment's purpose.

Use of Estimates

The preparation of financial statements in conformity with accounting principles generally accepted in the United States of America requires the Foundation to make estimates and assumptions that affect the amounts reported in the financial statements and the accompanying notes. Actual results could differ from those estimates.

Income Taxes

The Foundation is exempt from Federal and State income taxes under Internal Revenue Code Section 501(c)(3). Accordingly, no provision for income taxes is included in the accompanying statements.

Cash and Cash Equivalents

For purposes of the statements of cash flows, the Foundation considers all highly liquid investments with an initial maturity of three months or less to be cash equivalents.

The Foundation maintains cash accounts with banks. Cash balances are insured up to a limit of \$250,000 by the Federal Deposit Insurance Corporation (FDIC). At times, cash balances may exceed the FDIC insurance limit.

Benedictine Life Foundation of Wisconsin, Inc.

Notes to Financial Statements
Years Ended December 31, 2012 and 2011

Note 1 - Summary of Significant Accounting Policies (Continued)

Investments

Investments are composed of marketable equity securities with readily determinable fair values. Unrealized gains and losses are included in the change in net assets in the accompanying statement of activities. Investment transactions are accounted for on a trade-date basis. Dividends are recorded on the ex-dividend date and interest is recognized on the accrual basis.

Promises to Give

Contributions are recognized when the donor makes a promise to give to the Foundation that is, in substance, unconditional. Contributions that are restricted by the donor are reported as increases in unrestricted net assets if the restrictions expire in the fiscal year in which the contributions are recognized. All other donor-restricted contributions are reported as increases in temporarily or permanently restricted net assets depending on the nature of the restrictions. When a restriction expires, temporarily restricted net assets are classified to unrestricted net assets.

Unconditional promises to give, due in subsequent years, are reported at the present value of their net realizable value, using a discount rate applicable to the years in which the promises are to be received.

Donated Assets and Contributed Services

Artwork and other donated assets are recorded as contributions at their estimated fair values at the date of donation. Contributions of donated services that create or enhance nonfinancial assets or that require specialized skills, are provided by individuals possessing those skills, and would typically need to be purchased if not provided by donation, are recorded at their fair values in the period received.

In December 2011, the Foundation had a collection of previously donated artwork reappraised in preparation for future sales of the artwork. The loss from write down to fair value based on the reappraisal was \$24,890 and was recorded by the Foundation during the year ended December 31, 2012.

Benedictine Life Foundation of Wisconsin, Inc.

Notes to Financial Statements
Years Ended December 31, 2012 and 2011

Note 2 - Promises to Give

Unconditional promises to give at December 31, 2012 and 2011 are summarized as follows:

	<u>2012</u>	<u>2011</u>
Receivable in less than one year	\$ 45,559	\$ 672,935
Receivable in one to five years, net of allowance of \$5,000 at December 31, 2011. No allowance for year ended December 31, 2012.	<u>35,789</u>	<u>164,447</u>
	<u>\$ 81,348</u>	<u>\$ 837,382</u>

Note 3 - Investments

Investments at fair value as of December 31, 2012 and 2011 consist of the following:

	<u>2012</u>	<u>2011</u>
Money market funds	<u>\$ 1,098</u>	<u>\$ 1,248</u>

Note 4 - Fair Value Measurements

The Financial Accounting Standards Board (FASB) Accounting Standards Codification (ASC) Topic 820, *Fair Value Measurements*, provides a revised definition of fair value and establishes a framework for measuring fair value. The standard also establishes a fair value hierarchy that distinguishes between inputs based on market data from independent sources (observable inputs) and reporting entity's internal assumptions based upon the best information available when external market data is limited or unavailable (unobservable inputs).

The fair value hierarchy in FASB ASC 820 prioritizes fair value measurements into three levels based on the nature of the inputs. The three levels of the fair value hierarchy under FASB ASC Topic 820 are as follows:

Benedictine Life Foundation of Wisconsin, Inc.

Notes to Financial Statements
Years Ended December 31, 2012 and 2011

Note 4 - Fair Value Measurements (Continued)

Level 1 - Inputs to the valuation methodology are unadjusted quoted prices for identical assets or liabilities in active markets. Level one investments include money market funds.

Level 2 - Inputs into the valuation methodology include:

- Quoted prices for similar assets or liabilities in active markets;
- Quoted prices for identical or similar assets or liabilities in inactive markets;
- Inputs other than quoted prices that are observable for the asset or liability;
- Inputs that are derived principally from or corroborated by observable market data by correlation or other means.

If the asset or liability has a specified (contractual) term, the Level 2 input must be observable for substantially the full term of the asset or liability. The Foundation does not have any Level 2 investments.

Level 3 - Inputs to the valuation methodology are observable and significant to the fair value measurement. The Foundation does not have any Level 3 investments.

The following table presents the Foundation's investments by level within the hierarchy as of December 31, 2012 and 2011:

Assets at Fair Value as of December 31, 2012				
	Level 1	Level 2	Level 3	Total
Money market funds	\$ 1,098	\$ -	\$ -	\$ 1,098

Assets at Fair Value as of December 31, 2011				
	Level 1	Level 2	Level 3	Total
Money market funds	\$ 1,248	\$ -	\$ -	\$ 1,248

Benedictine Life Foundation of Wisconsin, Inc.

Notes to Financial Statements
Years Ended December 31, 2012 and 2011

Note 5 - Note Receivable – Affiliated Entity

The Foundation has a \$600,000 note receivable due from the Organization. The note requires quarterly interest payments, bearing interest at 3.5 percent annually. The principal balance and any unpaid interest are due on or before May 1, 2021.

Note 6 - Restrictions on Net Assets

Temporarily restricted net assets at December 31, 2012 and 2011 are available for the following purposes:

	<u>2012</u>	<u>2011</u>
New monastery construction	\$ 372,554	\$ 415,154
Sunday assembly	140,828	95,354
Land campaign	80,975	-
Natural resources	31,445	20,020
Oblates	10,165	24,728
Endowment fund earnings	9,954	9,939
Holiday art fair	6,142	-
Employee assistance	4,057	5,544
Scholarships	3,076	3,056
Kollasch fund	2,650	7,375
SA - Vera Court	2,211	1,561
Benedictine Sojourners program	2,175	-
Other	1,253	820
Care for the Earth	770	-
SA - Helping Hands	565	1,125
Book sale	338	5,373
Tours	330	1,732
Spirituality programs	-	3,100
	<u>\$ 669,488</u>	<u>\$ 594,881</u>

Benedictine Life Foundation of Wisconsin, Inc.

Notes to Financial Statements
Years Ended December 31, 2012 and 2011

Note 6 - Restrictions on Net Assets (Continued)

Endowment Funds

Permanently restricted net assets at December 31, 2012 and 2011 consist of two endowment funds established in July 2000. The endowment for ecumenism supports the ecumenical monastic formation of the sisters' community and the endowment for the environment is a way to share God's creation. Contributions to the endowment funds are subject to donor stipulations. The principal of all contributions remains in the endowment fund until the endowment goals are reached. The goal to fund the endowment for ecumenism is principal of \$2,000,000. The goal to fund the endowment for the environment is principal of \$1,000,000. Once the goal has been reached, the board of directors may also authorize grants from the principal in excess of the goal. Should the purposes for which the endowment funds were established cease to be part of the life and work of the sisters, the board of directors may designate that the principal and income be used for other purposes which are related to the original purpose of the endowments.

The Foundation has adopted investment and spending policies based on the requirements of the State Uniform Management of Institutional Funds Act.

Permanently restricted net assets at December 31, are as follows:

	<u>2012</u>	<u>2011</u>
Endowment for the environment	\$ 512,450	\$ 502,450
Endowment for ecumenism	<u>143,955</u>	<u>153,505</u>
	<u>\$ 656,405</u>	<u>\$ 655,955</u>

The board of directors may authorize grants from the income generated by the endowment funds. Annual expenditures are to be limited to 50 percent of the actual earnings rate (net of endowment administrative fees) for the previous three years. To date, no grants have been authorized. In 2011, the Foundation modified the ecumenical and environment endowment resolutions to allow for the loan of endowment principal to the Organization for a 10 year period including interest to be paid annually (see notes 5 and 8).

Benedictine Life Foundation of Wisconsin, Inc.

Notes to Financial Statements
Years Ended December 31, 2012 and 2011

Note 7 - Retirement Plan

Through May 31, 2011, Foundation employees were covered under the Benedictine Women of Madison 403(b) salary deferral plan. Covered employees had the option of making contributions into the plan. The Foundation contributed 6.5 percent of employee wages into the plan.

Effective June 1, 2011, Foundation employees are covered under the Benedictine Women of Madison, Inc. retirement savings plan. The plan is a 401(k) non-standardized profit sharing plan that allows covered employees the option of making contributions into the plan. The Foundation can make a discretionary matching contribution of a uniform percentage of employee wage deferrals into the plan.

Employer contributions to the 401(k) retirement savings plan were \$705 for the year ended December 31, 2012. Employer contributions to both retirement plans totaled \$5,660 for the year ended December 31, 2011.

Note 8 - Related Party Transactions

The Foundation is affiliated with Benedictine Women of Madison, Inc. At December 31, 2012 and 2011, the Foundation had a payable to the Organization of \$8,715 and \$20,770, respectively.

The Foundation has a note receivable due from the Organization (see note 5). Interest income received by the Foundation from the Organization under the note agreement was \$21,000 and \$12,774 during the years ended December 31, 2012 and 2011, respectively.

During the year ended December 31, 2012 and 2011, the Foundation transferred grants to the Organization totaling \$1,873,252 and \$326,200 respectively. During the years ended December 31, 2012 and 2011, the Foundation paid the Organization \$74,173 and \$118,327, respectively, for payroll and employee benefits related expenditures.

Note 9 - Subsequent Events

Management has evaluated subsequent events through March 5, 2013, which is the date the financial statements were available to be issued.

Supplementary Information

Benedictine Life Foundation of Wisconsin, Inc.

**Schedule of Functional Expenses
Year Ended December 31, 2012**

	<u>Program</u>	<u>Administrative</u>	<u>Fundraising</u>	<u>Total</u>
Salaries and benefits	\$ 313	\$ 19,711	\$ 54,149	\$ 74,173
Grants	1,881,599	-	-	1,881,599
Loss on write down of assets	-	24,890	-	24,890
Special events	60	30	11,510	11,600
Postage and mail service	-	65	8,685	8,750
Facility expenses	1,200	600	4,200	6,000
Printing and production	348	174	9,470	9,992
Other	63	1,419	83,100	84,582
Supplies	2	349	7	358
Professional fees	907	753	3,325	4,985
Service contracts	533	267	1,867	2,667
Licenses and subscriptions	613	355	2,110	3,078
Insurance	63	32	1,061	1,156
	<u>\$ 1,885,701</u>	<u>\$ 48,645</u>	<u>\$ 179,484</u>	<u>\$ 2,113,830</u>

Benedictine Life Foundation of Wisconsin, Inc.

Schedule of Functional Expenses
Year Ended December 31, 2011

	<u>Program</u>	<u>Administrative</u>	<u>Fundraising</u>	<u>Total</u>
Salaries and benefits	\$ -	\$ 43,656	\$ 74,671	\$ 118,327
Grants	330,156	-	-	330,156
Special events	741	-	3,829	4,570
Postage and mail service	-	94	923	1,017
Facility expenses	1,200	600	4,200	6,000
Printing and production	454	227	3,795	4,476
Other	4	1,602	4,906	6,512
Supplies	3	27	11	41
Professional fees	2,277	478	2,546	5,301
Service contracts	518	259	1,813	2,590
Licenses and subscriptions	10	54	-	64
Insurance	62	31	1,058	1,151
	<u>\$ 335,425</u>	<u>\$ 47,028</u>	<u>\$ 97,752</u>	<u>\$ 480,205</u>