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Form **990****Return of Organization Exempt From Income Tax**

OMB No 1545-0047

2012**Open to Public Inspection**Department of the Treasury
Internal Revenue Service

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

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

A For the 2012 calendar year, or tax year beginning January, 2012, and ending December 31, 2012	
B Check if applicable: ☐ Address change ☐ Name change ☐ Initial return ☐ Terminated ☐ Amended return ☐ Application pending	C Name of organization Brewers Community Foundation Inc.
	Doing Business As
	Number and street (or P O box if mail is not delivered to street address) Room/suite Miller Park, One Brewers Way
	City, town or post office, state, and ZIP code Milwaukee, WI 53214-3651
	F Name and address of principal officer Cecilia Gore - Same as above
D Employer identification number 39-1970152	
E Telephone number 414-902-4544	
G Gross receipts \$ 3,299,473	
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)	
I Tax-exempt status ☒ 501(c)(3) ☐ 501(c) () ◀ (insert no) ☐ 4947(a)(1) or ☐ 527	
J Website: ▶	
K Form of organization ☒ Corporation ☐ Trust ☐ Association ☐ Other ▶	
L Year of formation 2000	
M State of legal domicile WI	

Part I Summary

1 Briefly describe the organization's mission or most significant activities: <u>Grant making organization, activities that support youth activities and the general well being of children.</u>	
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 4
4 Number of independent voting members of the governing body (Part VI, line 1b)	4 1
5 Total number of individuals employed in calendar year 2012 (Part V, line 2a)	5 0
6 Total number of volunteers (estimate if necessary)	6 25
7a Total unrelated business revenue from Part VIII, column (C), line 12	7a 0
b Net unrelated business taxable income from Form 990-T, line 34	7b
8 Contributions and grants (Part VIII, line 1h)	Prior Year 1,193,290 Current Year 1,420,966
9 Program service revenue (Part VIII, line 2g)	
10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)	5,424 16,714
11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	1,016,899 922,233
12 Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12)	2,215,613 2,359,913
13 Grants and similar amounts paid (Part IX, column (A), lines 1–3)	2,089,219 1,877,261
14 Benefits paid to or for members (Part IX, column (A), line 4)	
15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5–10)	
16a Professional fundraising fees (Part IX, column (A), line 11e)	
b Total fundraising expenses (Part IX, column (D), line 25) ▶	
17 Other expenses (Part IX, column (A), lines 11a–11d, 11f–24e)	185,556 146,194
18 Total expenses. Add lines 13–17 (must equal Part IX, column (A), line 25)	2,274,775 2,023,455
19 Revenue less expenses. Subtract line 18 from line 12	(59,162) 336,458
20 Total assets (Part X, line 16)	Beginning of Current Year 1,560,755 End of Year 1,757,953
21 Total liabilities (Part X, line 26)	445,650 306,390
22 Net assets or fund balances. Subtract line 21 from line 20	1,115,105 1,451,563

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	<i>Cecilia T. Gore</i>	Date
	Cecilia T. Gore, Executive Director	8/15/2013

Paid Preparer Use Only	Print/Type preparer's name	Preparer's signature	Date	Check ☐ if self-employed	PTIN
	Firm's name ▶	Firm's EIN ▶			
	Firm's address ▶	Phone no			

May the IRS discuss this return with the preparer shown above? (see instructions) ☐ Yes ☐ No

For Paperwork Reduction Act Notice, see the separate instructions.

Cat No 11282Y

Form 990 (2012)

SCANNED SEP 10 2013

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Part III Statement of Program Service AccomplishmentsCheck if Schedule O contains a response to any question in this Part III ☒

- 1** Briefly describe the organization's mission:
Grant making organization, activities that support health, education, recreation, and basic needs, with a particular focus on
lower-income and disadvantaged youth and their families.
- 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 ☒ 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 ☒ 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 \$ 81,000 including grants of \$ 81,000) (Revenue \$)
Brewers Buddies program to provide local and disadvantaged children the opportunity to attend baseball games and to encourage
their interest in sports.

4b (Code:) (Expenses \$ 61,250 including grants of \$ 61,250) (Revenue \$)
Selig Scholarship program to help sponsor a scholarship program for disadvantaged youths in Wisconsin

4c (Code:) (Expenses \$ 56,246 including grants of \$ 30,065) (Revenue \$)
Student Achiever Program recognizes students for their academic achievement while promoting an interest in sports.

4d Other program services (Describe in Schedule O.)
 (Expenses \$ 1,780,362 including grants of \$ 1,704,946) (Revenue \$)

4e Total program service expenses **▶** 1,978,858

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)? If "Yes," complete Schedule A	1 ✓	
2 Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	2 ✓	
3 Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I	3	✓
4 Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If "Yes," complete Schedule C, Part II	4	✓
5 Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5	✓
6 Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6	✓
7 Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7	✓
8 Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8	✓
9 Did the organization report an amount in Part X, line 21, 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? If "Yes," complete Schedule D, Part IV	9	✓
10 Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10 ✓	
11 If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable.		
a Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI	11a	✓
b Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b	✓
c Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c ✓	
d Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX	11d	✓
e Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	✓
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)? If "Yes," complete Schedule D, Part X	11f	✓
12a Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII	12a ✓	
b Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b	✓
13 Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13	✓
14a Did the organization maintain an office, employees, or agents outside of the United States?	14a	✓
b Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV	14b	✓
15 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the United States? If "Yes," complete Schedule F, Parts II and IV	15	✓
16 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals located outside the United States? If "Yes," complete Schedule F, Parts III and IV	16	✓
17 Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)	17	✓
18 Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18 ✓	
19 Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III	19 ✓	
20a Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a	✓
b If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b	

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>	☒	☐
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>	☐	☒
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>	☐	☒
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>	☐	☒
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>	☐	☒
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>	☐	☒
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>	☐	☒
27 Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? <i>If "Yes," complete Schedule L, Part III</i>	☐	☒
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>	☐	☒
b A family member of a current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV</i>	☐	☒
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>	☐	☒
29 Did the organization receive more than \$25,000 in non-cash contributions? <i>If "Yes," complete Schedule M</i>	☐	☒
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>	☐	☒
31 Did the organization liquidate, terminate, or dissolve and cease operations? <i>If "Yes," complete Schedule N, Part I</i>	☐	☒
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>	☐	☒
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>	☐	☒
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>	☒	☐
35a Did the organization have a controlled entity within the meaning of section 512(b)(13)?	☒	☐
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>	☐	☒
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>	☐	☒
38 Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? Note. All Form 990 filers are required to complete Schedule O	☒	☐

Part V Statements Regarding Other IRS Filings and Tax ComplianceCheck 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 1a 80		
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable 1b 80		
c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners? 1c	✓	
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return 2a 0		
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? 2b		
Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)			
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year? 3a	✓	
b	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O 3b	✓	
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)? 4a		✓
b	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? 5a		✓
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction? 5b		✓
c	If "Yes" to line 5a or 5b, did the organization file Form 8886-T? 5c		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions? 6a		✓
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible? 6b		
7	Organizations that may receive deductible contributions under section 170(c).		
a	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? 7a	✓	
b	If "Yes," did the organization notify the donor of the value of the goods or services provided? 7b	✓	
c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282? 7c		✓
d	If "Yes," indicate the number of Forms 8282 filed during the year 7d		
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? 7e		✓
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? 7f		✓
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required? 7g		✓
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C? 7h		✓
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year? 8		✓
9	Sponsoring organizations maintaining donor advised funds.		
a	Did the organization make any taxable distributions under section 4966? 9a		✓
b	Did the organization make a distribution to a donor, donor advisor, or related person? 9b		✓
10	Section 501(c)(7) organizations. Enter:		
a	Initiation fees and capital contributions included on Part VIII, line 12 10a		
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b		
11	Section 501(c)(12) organizations. Enter:		
a	Gross income from members or shareholders 11a		
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.) 11b		
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041? 12a		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year 12b		
13	Section 501(c)(29) qualified nonprofit health insurance issuers.		
a	Is the organization licensed to issue qualified health plans in more than one state? 13a		
Note. See the instructions for additional information the organization must report on Schedule O.			
b	Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans 13b		
c	Enter the amount of reserves on hand 13c		
14a	Did the organization receive any payments for indoor tanning services during the tax year? 14a		✓
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O 14b		

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 ☒

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 1a 4 If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O.	☒	☒
b Enter the number of voting members included in line 1a, above, who are independent 1b 1	☒	☒
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	☒	☒
3 Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, or trustees, or key employees to a management company or other person? 3	☒	☒
4 Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? 4	☒	☒
5 Did the organization become aware during the year of a significant diversion of the organization's assets? 5	☒	☒
6 Did the organization have members or stockholders? 6	☒	☒
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	☒	☒
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	☒	☒
8 Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:		
a The governing body? 8a	☒	☒
b Each committee with authority to act on behalf of the governing body? 8b	☒	☒
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	☒	☒

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	☒	☒
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	☒	☒
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	☒	☒
b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? 12b	☒	☒
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	☒	☒
13 Did the organization have a written whistleblower policy? 13	☒	☒
14 Did the organization have a written document retention and destruction policy? 14	☒	☒
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	☒	☒
b Other officers or key employees of the organization 15b	☒	☒
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	☒	☒
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 ► Wisconsin

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. ► Joseph Zidanic, One Brewers Way, Milwaukee, WI 53214 (414) 902-4611

Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent ContractorsCheck if Schedule O contains a response to any question in this Part VII ☐**Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees****1a** Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.

- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
- List all of the organization's **current** key employees, if any. See instructions for definition of "key employee."
- List the organization's five **current** highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

List persons in the following order: individual trustees or directors; institutional trustees; officers; key employees; highest compensated employees; and former such persons.

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

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted 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			
(1) Wendy Selig-Prieb Board Chair	.1	✓						0	0	0
(2) Robert Quinn Board Treasurer	.1	✓		✓				0	0	0
(3) Tyler Barnes Board Member	.1	✓		✓				0	0	0
(4) Cecelia Gore Executive Director	40					✓		0	121,038	0
(5) Rick Schlesinger Board Member	1	✓		✓				0	0	0
(6)										
(7)										
(8)										
(9)										
(10)										
(11)										
(12)										
(13)										
(14)										

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 dotted 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			
(15)										
(16)										
(17)										
(18)										
(19)										
(20)										
(21)										
(22)										
(23)										
(24)										
(25)										
1b Sub-total									121,038	
c Total from continuation sheets to Part VII, Section A										
d Total (add lines 1b and 1c)									121,038	

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 ▶

- 3** Did the organization list any **former** officer, director, or trustee, key employee, or highest compensated employee on line 1a? If "Yes," complete Schedule J for such individual
- 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? If "Yes," complete Schedule J for such individual
- 5** Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? If "Yes," complete Schedule J for such person

	Yes	No
3		✓
4		✓
5		✓

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

Part VIII Statement of RevenueCheck 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	1a	Federated campaigns	1a				
	b	Membership dues	1b				
	c	Fundraising events	1c	148,016			
	d	Related organizations	1d	12,500			
	e	Government grants (contributions)	1e				
	f	All other contributions, gifts, grants, and similar amounts not included above	1f	1,260,450			
	g	Noncash contributions included in lines 1a-1f: \$					
	h	Total. Add lines 1a-1f		1,420,966			
Program Service Revenue				Business Code			
	2a						
	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)			16,714	16,714	
	4	Income from investment of tax-exempt bond proceeds					
	5	Royalties					
		(i) Real	(ii) Personal				
	6a	Gross rents					
	b	Less: rental expenses					
	c	Rental income or (loss)					
	d	Net rental income or (loss)					
	7a	(i) Securities	(ii) Other				
	b	Less: cost or other basis and sales expenses					
	c	Gain or (loss)					
	d	Net gain or (loss)					
	8a	Gross income from fundraising events (not including \$ 148,016 of contributions reported on line 1c). See Part IV, line 18		a	197,279		
	b	Less: direct expenses		b	119,411		
	c	Net income or (loss) from fundraising events			77,868		77,868
	9a	Gross income from gaming activities. See Part IV, line 19		a	1,655,556		
	b	Less: direct expenses		b	830,145		
	c	Net income or (loss) from gaming activities			825,411	825,411	
	10a	Gross sales of inventory, less returns and allowances		a	18,954		
	b	Less: cost of goods sold		b			
c	Net income or (loss) from sales of inventory			18,954	18,954		
Miscellaneous Revenue			Business Code				
11a							
b							
c							
d	All other revenue						
e	Total. Add lines 11a-11d						
12	Total revenue. See instructions				2,359,913	844,365	16,714
							77,868

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	1,877,261	1,877,261		
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				
8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)				
9 Other employee benefits				
10 Payroll taxes				
11 Fees for services (non-employees):				
a Management				
b Legal				
c Accounting	50		50	
d Lobbying				
e Professional fundraising services. See Part IV, line 17				
f Investment management fees	1,942		1,942	
g Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O)	10,842		10,842	
12 Advertising and promotion	39,881	36,791	3,090	
13 Office expenses	86,505	59,696	26,809	
14 Information technology				
15 Royalties				
16 Occupancy				
17 Travel	1,864		1,864	
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				
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 Auction Expenses	5,110	5,110		
b				
c				
d				
e All other expenses				
25 Total functional expenses. Add lines 1 through 24e	2,023,455	1,978,858	44,597	0
26 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here ☐ if following SOP 98-2 (ASC 958-720)				

Part X Balance SheetCheck 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	59,997	1	182,130
	2 Savings and temporary cash investments	1,103,163	2	485,652
	3 Pledges and grants receivable, net	387,615	3	292,942
	4 Accounts receivable, net	10,000	4	0
	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 instructions). Complete Part II of Schedule L		6	
	7 Notes and loans receivable, net		7	
	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		12	
	13 Investments—program-related. See Part IV, line 11		13	797,229
	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)	1,560,755	16	1,757,953	
Liabilities	17 Accounts payable and accrued expenses	45,650	17	6,390
	18 Grants payable		18	
	19 Deferred revenue	400,000	19	300,000
	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	445,650	26	306,390
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	670,450	27	221,972
	28 Temporarily restricted net assets	444,655	28	1,229,591
	29 Permanently restricted net assets		29	
	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	1,115,105	33	1,451,563
34 Total liabilities and net assets/fund balances	1,560,755	34	1,757,953	

Part XI Reconciliation of Net AssetsCheck 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	2,359,913
2	Total expenses (must equal Part IX, column (A), line 25)	2	2,023,455
3	Revenue less expenses. Subtract line 2 from line 1	3	336,458
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	1,115,105
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	
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10	1,451,563

Part XII Financial Statements and ReportingCheck if Schedule O contains a response to any question in this Part XII ☐

- 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
- 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
- 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.
- 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? . . .
- 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

	Yes	No
2a		✓
2b	✓	
2c	✓	
3a		✓
3b		

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

Brewers Community Foundation Inc.

Employer identification number

39-1970152

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?
 - (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).

	Yes	No
11g(i)		
11g(ii)		
11g(iii)		

(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	
(A)									
(B)									
(C)									
(D)									
(E)									
Total									

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

Cat No 11285F

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.")	965,584	1,094,567	1,552,100	1,193,290	1,420,966	6,226,507
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	965,584	1,094,567	1,552,100	1,193,290	1,420,966	6,226,507
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)						1,472,797
6 Public support. Subtract line 5 from line 4						4,753,710

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	965,584	1,094,567	1,552,100	1,193,290	1,420,966	6,226,507
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	31,435	19,814	14,327	5,424	16,714	87,714
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						6,314,221
12 Gross receipts from related activities, etc. (see instructions)					12	113,812
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	75.29 %
15 Public support percentage from 2011 Schedule A, Part II, line 14	15	69.28 %
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 ☐		

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

**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

Brewers Community Foundation Inc

Employer identification number

39-1970152

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 ► \$

(ii) Assets included in Form 990, Part X ► \$

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 ► \$

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

d ☐ Loan or exchange programs

b ☐ Scholarly research

e ☐ Other

c ☐ Preservation for future generations

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	0				
b Contributions	500,000				
c Net investment earnings, gains, and losses	9,184				
d Grants or scholarships					
e Other expenditures for facilities and programs					
f Administrative expenses	(1,250)				
g End of year balance	507,934				

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 ☐ %

c Temporarily restricted endowment ☐ 100%

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)	✓	
3a(ii)		
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).)				

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. (Column (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) Greater Milwaukee Foundation - Endowment	289,295	end-of-year market value
(2) Greater Milwaukee Foundation- Scholarship	507,934	end-of-year market value
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
(10)		
Total. (Column (b) must equal Form 990, Part X, col (B) line 13.) ►	797,229	

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 ☐

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	3,299,473
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	
e	Add lines 2a through 2d	2e	
3	Subtract line 2e from line 1	3	
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	(939,560)
c	Add lines 4a and 4b	4c	(939,560)
5	Total revenue. Add lines 3 and 4c . (This must equal Form 990, Part I, line 12.)	5	2,359,913

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

1	Total expenses and losses per audited financial statements	1	2,963,015
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	
e	Add lines 2a through 2d	2e	
3	Subtract line 2e from line 1	3	
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:		
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	
b	Other (Describe in Part XIII.)	4b	(939,560)
c	Add lines 4a and 4b	4c	(939,560)
5	Total expenses. Add lines 3 and 4c . (This must equal Form 990, Part I, line 18.)	5	2,033,455

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.

Brewers Community Foundation (BCF) is exempt from income taxes under Section 501(c)(3) of the Internal Revenue Code. Accordingly, no

provision for income taxes is included in the accompanying financial statements. Generally accepted accounting principles require

disclosure of uncertain tax positions which meet certain criteria. Management has evaluated the tax-exempt status of BCF and has

determined that it is more likely than not that BCF's status would be upheld in the event of an examination by a taxing authority. In addition,

BCF does not undertake any activities that may give rise to unrelated business taxable income or the associated unrelated business income

tax. Therefore, no tax provision and no amounts for current or future tax assets or liabilities is reported for uncertain tax provisions

Part XIII Supplemental Information *(continued)*

Part V Line 4: The foundation established the endowment fund as a temporarily restricted asset to accumulate contributions and earnings until distributions are authorized by the foundation governing board.

Part XII Line 4b: Expenses related to special events reported on Form 990 Part VIII

Part XIII Line 4b: Expenses related to special events reported on Form 990 Part VIII.

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.

2012

Open to Public Inspection

Employer identification number

39-1970152

Form 990-EZ filers are not required to complete this part.

- Total** ►

- [illegible]

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	(b) Event #2	(c) Other events	(d) Total events
		Sausage Race (event type)	Davey Nelson Golf (event type)	3 (total number)	(add col (a) through col (c))
Revenue	1 Gross receipts	148,898	94,320	102,077	345,295
	2 Less: Contributions	24,418	53,470	70,128	148,016
	3 Gross income (line 1 minus line 2)	124,480	40,850	39,949	197,279
Direct Expenses	4 Cash prizes				
	5 Noncash prizes				
	6 Rent/facility costs				
	7 Food and beverages	525	50,614	10,502	61,641
	8 Entertainment				
	9 Other direct expenses	30,447	13,108	14,215	57,770
	10 Direct expense summary. Add lines 4 through 9 in column (d) ▶				(119,411)
	11 Net income summary. Combine line 3, column (d), and line 10 ▶				77,868

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			1,655,556	1,655,556
	2 Cash prizes			815,340	815,340
Direct Expenses	3 Noncash prizes				
	4 Rent/facility costs				
	5 Other direct expenses			14,805	14,805
	6 Volunteer labor	☐ Yes _____ % ☐ No	☐ Yes _____ % ☐ No	☐ Yes _____ % ☐ No	
	7 Direct expense summary. Add lines 2 through 5 in column (d) ▶				(830,145)
	8 Net gaming income summary. Combine line 1, column d, and line 7 ▶				825,411

9 Enter the state(s) in which the organization operates gaming activities: Wisconsin

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: _____

- 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 | 100 % |
| 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 ▶ Joseph ZidanicAddress ▶ One Brewers Way, Milwaukee, WI 53214

- 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).

SCHEDULE I
(Form 990)

Department of the Treasury
Internal Revenue Service

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

Complete if the organization answered "Yes" to Form 990, Part IV, line 21 or 22.
▶ Attach to Form 990.

OMB No 1545-0047

2012

Open to Public
Inspection

Name of the organization

Employer identification number

Brewers Community Foundation

39-1970152

Part I General Information on Grants and Assistance

- 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? ☐ Yes ☐ No
- 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.

1 (a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
(1) See Attachment							
(2)							
(3)							
(4)							
(5)							
(6)							
(7)							
(8)							
(9)							
(10)							
(11)							
(12)							

- 2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table 91
- 3 Enter total number of other organizations listed in the line 1 table 2

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

Cat No 50055P

Schedule I (Form-990) (2012)

Part III **Grants and Other Assistance to Individuals in the United States.** Complete if the organization answered "Yes" to Form 990, Part IV, line 22.
Part III can be duplicated if additional space is needed.

	(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non-cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of non-cash assistance
1						
2						
3						
4						
5						
6						
7						
Part IV	Supplemental Information. Complete this part to provide the information required in Part I, line 2, Part III, column (b), and any other additional information.					

To monitor the use of grant funds, each organization provides an accountability report to demonstrate the funds were used for their intended purpose.

Name of Organization	EIN
Brewers Community Foundation Inc	39-1970152

Attachment to Form 990 Schedule I, Part II Line 1 (a)

1 (a) Organization and Address	(b) EIN	(c) IRC section if applicable	(d) Amount of Cash Grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
88 Nine Radio 5312 W. Vliet Street Milwaukee WI 53208	20-1257939	501 (c) (3)	\$ 10,000.00	none	N/A	N/A	To support general activities and the goals of the organization
ABLE Central Library Building 803 W. Wells Street Milwaukee WI 53233	39-1593301	501 (c) (3)	\$ 5,000.00	none	N/A	N/A	To support general activities and the goals of the organization
Aids Resource Center of Wisconsin 820 N. Plankinton Milwaukee, WI 53203	39-1534049	501 (c) (3)	\$ 25,000.00	none	N/A	N/A	To support general activities and the goals of the organization
Alma Center Inc 2578 N. Martin Luther King Drive Milwaukee WI 53212	36-4530524	501 (c) (3)	\$ 10,000.00	none	N/A	N/A	To support general activities and the goals of the organization
ALS 3333 N. Mayfair Road Suite 213 Wauwatosa WI 53222	39-1600985	501 (c) (3)	\$ 18,497.00	none	N/A	N/A	To support general activities and the goals of the organization
American Legion - Dept of Wisconsin 2930 American Legion Drive Portage WI 53901	39-0128222	501 (c) (19)	\$ 5,000.00	none	N/A	N/A	To support general activities and the goals of the organization
American Red Cross 2600 West Wisconsin Ave Milwaukee, WI 53233	39-0816839	501 (c) (3)	\$ 5,000.00	none	N/A	N/A	To support general activities and the goals of the organization
Big Brothers Big Sisters of Metro Mh 788 N. Jefferson St Suite 600 Milwaukee WI 53202	39-1239687	501 (c) (3)	\$ 5,000.00	none	N/A	N/A	To support general activities and the goals of the organization
Boerner Botanical Gardens 9400 Boerner Drive Hales Corners WI 53130	39-1487896	501 (c) (3)	\$ 5,000.00	none	N/A	N/A	To support general activities and the goals of the organization
Boys and Girls Club of Greater Milwaukee 1558 North 8th Street Milwaukee WI 53212	39-0806292	501 (c) (3)	\$ 30,000.00	none	N/A	N/A	To support general activities and the goals of the organization
City Year Inc 287 Columbus Ave Boston MA 02116	22-2882549	501 (c) (3)	\$ 50,000.00	none	N/A	N/A	To support general activities and the goals of the organization
Community Advocates 728 N. James Lovell Street Milwaukee WI 53233	39-1249426	501 (c) (3)	\$ 10,000.00	none	N/A	N/A	To support general activities and the goals of the organization
Danceworks 1661 N. Water St Milwaukee WI 53202	39-1734312	501 (c) (3)	\$ 5,000.00	none	N/A	N/A	To support general activities and the goals of the organization
Beckum Stapleton Little League Baseball Inc 4213 N 17th St Milwaukee WI 53209	23-7126228	501 (c) (3)	None	\$ 18,815.00	FMV	Uniforms	To support general activities and the goals of the organization
First Stage Milwaukee Inc Performing Arts Center 325 W. Walnut Street Milwaukee WI 53212	39-1634828	501 (c) (3)	\$ 13,500.00	none	N/A	N/A	To support general activities and the goals of the organization
Fisher House Wisconsin 5000 W. National Ave Milwaukee WI 53295	27-5461119	501 (c) (3)	\$ 75,000.00	none	N/A	N/A	To support general activities and the goals of the organization
Fondy Food Center 2647 W. Fodn du Lac Ave Milwaukee WI 53206	31-1751969	501 (c) (3)	\$ 5,000.00	none	N/A	N/A	To support general activities and the goals of the organization
Foundation for Children with Cancer N78 W14573 Appleton Ave #210 Menomonee Falls WI 53051	46-1888473	501 (c) (3)	\$ 5,000.00	none	N/A	N/A	To support general activities and the goals of the organization
Gilda's Club Southeastern Wisconsin 4050 N. Oakland Ave Milwaukee WI 53211	39-1955883	501 (c) (3)	\$ 5,000.00	none	N/A	N/A	To support general activities and the goals of the organization
Girl Scouts of Milwaukee Area 131 S 63rd Street PO Box 14999 Milwaukee WI 53214	39-0892833	501 (c) (3)	\$ 8,400.00	none	N/A	N/A	To support general activities and the goals of the organization

Name of Organization	EIN
Brewers Community Foundation Inc	39-1970152

Attachment to Form 990 Schedule I, Part II Line 1 (a)

1 (a) Organization and Address	(b) EIN	(c) IRC section if applicable	(d) Amount of Cash Grant	(e) Amount of non-cash assistance	(f) Method of valuation (book FMV appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Grand Avenue Club 210 E Michigan St Milwaukee WI 53202 4901	39-1708177	501 (c) (3)	\$ 10,000.00	none	N/A	N/A	To support general activities and the goals of the organization
Greater Milwaukee Foundation 101 W Pleasant St Ste 210 Milwaukee WI 53212	39-6036407	501 (c) (3)	\$ 515,000.00	none	N/A	N/A	To support general activities and the goals of the organization
Growing Power 5500 W Silver Spring Drive Milwaukee WI 53218	39-1876495	501 (c) (3)	\$ 10,000.00	none	N/A	N/A	To support general activities and the goals of the organization
Guest House of Milwaukee Inc 1218 N 13th Street Milwaukee WI 53205	39-1539301	501 (c) (3)	\$ 10,000.00	none	N/A	N/A	To support general activities and the goals of the organization
Hispanic Chamber of Commerce 1021 W National Avenue Milwaukee WI 53204	39-1293583	501 (c) (3)	\$ 17,178.00	none	N/A	N/A	To support general activities and the goals of the organization
Hispanic Professionals of Greater Mke 614 W National Ave Milwaukee WI 53204	90-0098434	501 (c) (3)	\$ 7,178.00	none	N/A	N/A	To support general activities and the goals of the organization
Hmong/American Friendship Assoc Inc 3824 W Vliet Street Milwaukee WI 53208	39-1456011	501 (c) (3)	\$ 5,000.00	none	N/A	N/A	To support general activities and the goals of the organization
Hometown Heroes 1000 Badger Cr Grafton WI 53024	90-0421984	501 (c) (3)	\$ 10,000.00	none	N/A	N/A	To support general activities and the goals of the organization
Hope House of Milwaukee 209 W Orchard St PO Box 04095 Milwaukee WI 53204	39-1592900	501 (c) (3)	\$ 8,000.00	none	N/A	N/A	To support general activities and the goals of the organization
House of Peace 1702 W Walnut Street Milwaukee WI 53205	39-1636105	501 (c) (3)	\$ 5,000.00	none	N/A	N/A	To support general activities and the goals of the organization
Impact 6737 W Washington Street Suite 2225 Milwaukee WI 53214 3151	39-0988784	501 (c) (3)	\$ 20,000.00	none	N/A	N/A	To support general activities and the goals of the organization
Joe Torre Safe At Home P O Box 3133 New York, NY 10163	03-0442514	501 (c) (3)	\$ 15,000.00	none	N/A	N/A	To support general activities and the goals of the organization
JR RBI - Boys & Girls Club 1558 North 6th Street Milwaukee WI 53212	39-0806292	501 (c) (3)	\$ 22,174.00	none	N/A	N/A	To support general activities and the goals of the organization
Koos for Kids 5818 Finch Lane Racine WI 53402	20-3335236	501 (c) (3)	\$ 5,390.00	none	N/A	N/A	To support general activities and the goals of the organization
LaCausa P O Box 04188 Milwaukee WI 53204	39-1247667	501 (c) (3)	\$ 10,000.00	none	N/A	N/A	To support general activities and the goals of the organization
Literacy Services 555 N Plankinton Ave Milwaukee WI 53203	39-1091203	501 (c) (3)	\$ 5,000.00	none	N/A	N/A	To support general activities and the goals of the organization
Little Brewers - Boys & Girls Club 1558 North 6th Street Milwaukee WI 53212	39-0806292	501 (c) (3)	\$ 19,326.00	none	N/A	N/A	To support general activities and the goals of the organization
Make a Wish Foundation 13195 W Hampton Avenue Butler WI 53007	39-1543541	501 (c) (3)	\$ 10,000.00	none	N/A	N/A	To support general activities and the goals of the organization
Marcus Center For the Performing Arts Inc 929 N Water St Milwaukee WI 53202	51-0532407	501 (c) (3)	\$ 10,000.00	none	N/A	N/A	To support general activities and the goals of the organization
Marquette University -Institute for the 750 N 18th Street Milwaukee WI 53233	39-0806251	501 (c) (3)	\$ 10,000.00	none	N/A	N/A	To support general activities and the goals of the organization

Name of Organization	EIN
Brewers Community Foundation Inc	39-1970152

Attachment to Form 990 Schedule I, Part II Line 1 (a)

1 (a) Organization and Address	(b) EIN	(c) IRC section if applicable	(d) Amount of Cash Grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Medical College of Wisconsin - Marq Med Alum 8701 Watertown Plank Road Milwaukee WI 53226	39-1391593	501 (c) (3)	\$ 5,000.00	none	N/A	N/A	To support general activities and the goals of the organization
Menomonee Valley Partners Inc 301 W Wisconsin Ave Suite 400B Milwaukee, WI 53203	31-1683712	501 (c) (3)	\$ 5,000.00	none	N/A	N/A	To support general activities and the goals of the organization
Mental Health of America - Wisconsin 600 W Virginia Street Suite 502 Milwaukee WI 53204	39-0827843	501 (c) (3)	\$ 5,000.00	none	N/A	N/A	To support general activities and the goals of the organization
Meta House 2625 N Weil St Milwaukee WI 53212	39-1017822	501 (c) (3)	\$ 10,000.00	none	N/A	N/A	To support general activities and the goals of the organization
Milwaukee Ballet 504 W National Ave Milwaukee WI 53204	39-1134735	501 (c) (3)	\$ 5,000.00	none	N/A	N/A	To support general activities and the goals of the organization
USO United Service Organizations 11050 W Liberty Milwaukee WI 53224	39-1703157	501 (c) (3)	\$ -	10,000	N/A	N/A	To support general activities and the goals of the organization
Milwaukee Center of Independence 2020 W Wells Street Milwaukee WI 53233	39-0806257	501(c)(3)	\$ 5,000.00	none	N/A	N/A	To support general activities and the goals of the organization
Milwaukee College Preparatory School 2449 N 36th Street Milwaukee WI 53210	39-1881295	501(c)(3)	\$ 12,500.00	none	N/A	N/A	To support general activities and the goals of the organization
Milwaukee Community Service Corp 1441 N 7TH St Milwaukee WI 53205	39-1680843	501 (c) (3)	\$ 5,000.00	none	N/A	N/A	To support general activities and the goals of the organization
Milwaukee County Historical Society 910 Oak World 3rd Street Milwaukee WI 53203	39-1021989	501 (c) (3)	\$ 5,000.00	none	N/A	N/A	To support general activities and the goals of the organization
Milwaukee Film 229 E Wisconsin Ave Ste 200 Milwaukee WI 53202	26-3049630	501 (c) (3)	\$ 5,000.00	none	N/A	N/A	To support general activities and the goals of the organization
Milwaukee Public Library Foundation Inc 814 W Milwaukee Ave Milwaukee WI 53233-2309	39-1610233	501 (c) (3)	\$ 16,500.00	none	N/A	N/A	To support general activities and the goals of the organization
Milwaukee Public Theater 626 E Kilbourn Ave Suite 802 Milwaukee, WI 53202	23-7219570	501 (c) (3)	\$ 6,650.00	none	N/A	N/A	To support general activities and the goals of the organization
Milwaukee School of Languages 8400 W Burleigh Street Milwaukee WI 53222	39-1929112	501 (c) (3)	\$ 5,000.00	none	N/A	N/A	To support general activities and the goals of the organization
Beckum Stapleton Little League Baseball Inc 4213 N 17th St Milwaukee WI 53209	23-7126228	501 (c) (3)	\$ 5,147.00	5147	FMV	baseball scorecard	To support general activities and the goals of the organization
Milwaukee Symphony 700 N Water Street Suite 700 Milwaukee WI 53202	39-6023436	501 (c) (3)	\$ 5,000.00	none	N/A	N/A	To support general activities and the goals of the organization
Milwaukee Urban League 435 W North Ave Milwaukee WI 53212 3146	39-0826861	501 (c) (3)	\$ 10,100.00	none	N/A	N/A	To support general activities and the goals of the organization
Money Savvy Generation Foundation 910 Sherwood Dr # 17 Lake bluff IL 60044	20-0618098	501 (c) (3)	\$ 10,000.00	none	N/A	N/A	To support general activities and the goals of the organization
MRA Charities, LLC N72 W12922 Good Hope Road Menomonee Falls WI 53051	39-1856240	501 (c) (3)	\$ 10,000.00	none	N/A	N/A	To support general activities and the goals of the organization
Neighborhood Children's Sports League 4222 W Capitol Drive Suite 307 Milwaukee WI 53216	39-1795546	501 (c) (3)	\$ 5,000.00	none	N/A	N/A	To support general activities and the goals of the organization
Neighborhood House of Milwaukee 2819 W Richardson Place Milwaukee WI 53208-3546	39-0806269	501 (c) (3)	\$ 10,000.00	none	N/A	N/A	To support general activities and the goals of the organization

Name of Organization	EIN
Brewers Community Foundation Inc	39-1970152

Attachment to Form 990 Schedule I, Part II Line 1 (a)

1 (a) Organization and Address	(b) EIN	(c) IRC section if applicable	(d) Amount of Cash Grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Our Next Generation 804 E Juneau Ave Milwaukee WI 53202	39-1761838	501 (c) (3)	\$ 5,000.00	none	N/A	N/A	To support general activities and the goals of the organization
Pathfinders 4200 N Holton Street Suite 400 Milwaukee WI 53212	39-1185304	501 (c) (3)	\$ 5,000.00	none	N/A	N/A	To support general activities and the goals of the organization
Pearls for Teen Girls 2100 N Palmer Street Milwaukee WI 53212-3220	39-1997970	501 (c) (3)	\$ 10,000.00	none	N/A	N/A	To support general activities and the goals of the organization
Penfield Children's Center 833 North 26th Street Milwaukee WI 53233	39-1093701	501 (c) (3)	\$ 10,000.00	none	N/A	N/A	To support general activities and the goals of the organization
Repairers of the Breach 1335 West Vliet Street Milwaukee WI 53213	39-1707495	501 (c) (3)	\$ 5,000.00	none	N/A	N/A	To support general activities and the goals of the organization
Riverside University 1815 E Locust Street Milwaukee WI 53211	39-1900137	501 (c) (3)	\$ 10,000.00	none	N/A	N/A	To support general activities and the goals of the organization
Rotary Club of Milwaukee Community Trust 750 N Lincoln Memorial Dr Rm 320 Milwaukee WI 53202	39-0579290	501 (c) (3)	\$ 10,000.00	none	N/A	N/A	To support general activities and the goals of the organization
Running Rebels Community Organization 1300A W Ford Du Lac Ave Milwaukee WI 53205	39-3910464	501 (c) (3)	\$ 10,000.00	none	N/A	N/A	To support general activities and the goals of the organization
Safe & Sound 801 W Michigan St Milwaukee WI 53233	39-1940292	501 (c) (3)	\$ 10,000.00	none	N/A	N/A	To support general activities and the goals of the organization
Sharp Literacy Inc % Marlene M Doerr 750 N Lincoln Memorial Dr - RM 311 Milwaukee WI 53202-4019	39-1963963	501 (c) (3)	\$ 6,000.00	none	N/A	N/A	To support general activities and the goals of the organization
Soujourner Family Peace Center Inc P O Box 080319 Milwaukee WI 53208-8005	39-1276210	501 (c) (3)	\$ 10,000.00	none	N/A	N/A	To support general activities and the goals of the organization
St. Ann Center 2801 E Morgan Ave Milwaukee WI 53207	39-1757756	501 (c) (3)	\$ 5,000.00	none	N/A	N/A	To support general activities and the goals of the organization
St. Benedict the Moor 1015 N North Street Milwaukee WI 53233	39-0806284	501 (c) (3)	\$ 5,000.00	none	N/A	N/A	To support general activities and the goals of the organization
Stars and Stripes Honor Flight PO Box 636 Port Washington WI 53074	28-3760475	501 (c) (3)	\$ 12,000.00	none	N/A	N/A	To support general activities and the goals of the organization
Teach for America - Milwaukee 310 W Wisconsin Ave Suite 110M Milwaukee WI 53203	13-3541913	501 (c) (3)	\$ 25,000.00	none	N/A	N/A	To support general activities and the goals of the organization
The Healing Center 130 W Bruce Street Suite 400 Milwaukee WI 53204	39-0806181	501 (c) (3)	\$ 5,000.00	none	N/A	N/A	To support general activities and the goals of the organization
The Women's Center 505 N West Ave Waukesha WI 53186	39-1269698	501 (c) (3)	\$ 5,000.00	none	N/A	N/A	To support general activities and the goals of the organization
Town of Cedarburg 1293 Washington Ave Cedarburg WI 53012		170 (c) (1)	\$ 12,500.00	none	N/A	N/A	To support general activities and the goals of the organization
UNCF 600 W Walnut Street Suite 20 Milwaukee WI 53212	13-1624241	501 (c) (3)	\$ 5,000.00	none	N/A	N/A	To support general activities and the goals of the organization
United Way of Greater Milwaukee 221 W Vine St Milwaukee WI 53212	39-0806190	501 (c) (3)	\$ 6,000.00	none	N/A	N/A	To support general activities and the goals of the organization
UPAF 929 N Water St Milwaukee WI 53202	39-6100399	501 (c) (3)	\$ 12,500.00	none	N/A	N/A	To support general activities and the goals of the organization

Name of Organization
Brewers Community Foundation Inc

EIN
39-1970152

Attachment to Form 990 Schedule I, Part II Line 1 (a)

1 (a) Organization and Address	(b) EIN	(c) IRC section if applicable	(d) Amount of Cash Grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Urban Ecology Center Riverside Park 1500 E. Paul Place Milwaukee WI 53211	39-1712663	501 (c) (3)	\$ 16,500.00	none	N/A	N/A	To support general activities and the goals of the organization
Ushers New Look 3700 Crestwood Pkwy Nw Ste 460 Duluth GA 30096	56-2480934	501 (c) (3)	\$ 10,000.00	none	N/A	N/A	To support general activities and the goals of the organization
Victim's Memorial Fund (Sikh Temple) Sikh Temple of Wisconsin 600 W Walnut Street Suite 20 Milwaukee WI 53212	39-1928829	501 (c) (3)	\$ 10,000.00	none	N/A	N/A	To support general activities and the goals of the organization
Vision Forward Association 912 N Hawley Road Milwaukee WI 53212	39-2040359	501 (c) (3)	\$ 10,000.00	none	N/A	N/A	To support general activities and the goals of the organization
Wheaton Franciscan Healthcare 5000 W Chambers Street Milwaukee WI 53210	39-0816857	501 (c) (3)	\$ 15,000.00	none	N/A	N/A	To support general activities and the goals of the organization
Wings of Glory TC Amateur Athletic Union of the United States 4141 N 73rd Street Milwaukee WI 53216	27-3330395	501 (c) (3)	\$ 5,000.00	none	N/A	N/A	To support general activities and the goals of the organization
Wisconsin Breast Cancer Show House P O Box 170588 Milwaukee WI 53217	39-1926351	501 (c) (3)	\$ 5,000.00	none	N/A	N/A	To support general activities and the goals of the organization
Wisconsin Women's Business Initiative 2745 N Dr Martin Luther King Milwaukee WI 53212	39-1597954	501 (c) (3)	\$ 5,000.00	none	N/A	N/A	To support general activities and the goals of the organization
Women's Fund of Greater Milwaukee 316 N Milwaukee Street Suite 215 Milwaukee WI 53202	20-3514894	501 (c) (3)	\$ 5,000.00	none	N/A	N/A	To support general activities and the goals of the organization
YMCA of Metropolitan Milwaukee 181 W Wisconsin Ave Suite 4000 Milwaukee WI 53203	39-0806314	501 (c) (3)	\$ 135,000.00		N/A	N/A	To support general activities and the goals of the organization
YMCA of Greater Milwaukee 1915 N Martin Luther King Jr Drive Milwaukee WI 53212	39-0806258	501 (c) (3)	\$ 22,400.00	none	N/A	N/A	To support general activities and the goals of the organization

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

Brewers Community Foundation Inc

Employer identification number

39-1970152

Form 990, Part III, Line 4d - Other Program Services:

Includes unrestricted and restricted grants through other programs such as Sausage Race, An Evening with Hank Aaron, Pink Tie Guy and

other various initiatives

Form 990, Part VI, Line 11 - Form 990 Review Process:

Form 990 is reviewed by the Board prior to filing.

Form 990, Part VI, Line 12c - Explanation of Monitoring and Enforcement of Conflicts:

The policy is reviewed annually with the Board, Board signs off on the policy and disclose interests annually at a formal board meeting

Form 990, Part VI, Line 19 - Other Organization Documents Publicly Available:

Documents available at organization place of business upon request.

Name of the organization

Employer identification number

SCHEDULE R
(Form 990)

Department of the Treasury
Internal Revenue Service
Name of the organization

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.

OMB No 1545-0047

2012

**Open to Public
Inspection**

Employer identification number

Brewers Community Foundation

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

(a) Name, address, and EIN (if applicable) of disregarded entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Total income	(e) End-of-year assets	(f) Direct controlling entity
(1)					
(2)					
(3)					
(4)					
(5)					
(6)					

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.)

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501(c)(3))	(f) Direct controlling entity	(g) Section 512(b)(13) controlled entity?	
						Yes	No
(1) None							
(2)							
(3)							
(4)							
(5)							
(6)							
(7)							

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

Cat No 50135Y

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.)

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Predominant income (related, unrelated, excluded from tax under sections 512-514)	(f) Share of total income	(g) Share of end-of- year assets	(h) Disproportionate allocations?		(i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner?		(k) Percentage ownership
							Yes	No		Yes	No	
(1) Milwaukee Brewers Baseball Club LP	Promo. baseball	WI	N/A	N/A	N/A	N/A			N/A			
(2) Miller Park One Brewers Way												
(3) Milwaukee, WI 53214 39-1136376												
(4)												
(5)												
(6)												
(7)												

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.)

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	(f) Share of total income	(g) Share of end-of-year assets	(h) Percentage ownership	(i) Section 512(b)(13) controlled entity?	
								Yes	No
(1) Milwaukee Brewers Baseball Club Inc Miller Park, One Brewers Way	Promo. baseball	WI	N/A	S Corp	N/A	N/A	N/A		✓
(2) Milwaukee, WI 53214 37-0899413									
(3)									
(4)									
(5)									
(6)									
(7)									

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 **1a** ☒ **Yes** ☒ **No**
- b** Gift, grant, or capital contribution to related organization(s) **1b** ☒ **Yes** ☒ **No**
- c** Gift, grant, or capital contribution from related organization(s) **1c** ☒ **Yes** ☒ **No**
- d** Loans or loan guarantees to or for related organization(s) **1d** ☒ **Yes** ☒ **No**
- e** Loans or loan guarantees by related organization(s) **1e** ☒ **Yes** ☒ **No**
- f** Dividends from related organization(s) **1f** ☒ **Yes** ☒ **No**
- g** Sale of assets to related organization(s) **1g** ☒ **Yes** ☒ **No**
- h** Purchase of assets from related organization(s) **1h** ☒ **Yes** ☒ **No**
- i** Exchange of assets with related organization(s) **1i** ☒ **Yes** ☒ **No**
- j** Lease of facilities, equipment, or other assets to related organization(s) **1j** ☒ **Yes** ☒ **No**
- k** Lease of facilities, equipment, or other assets from related organization(s) **1k** ☒ **Yes** ☒ **No**
- l** Performance of services or membership or fundraising solicitations for related organization(s) **1l** ☒ **Yes** ☒ **No**
- m** Performance of services or membership or fundraising solicitations by related organization(s) **1m** ☒ **Yes** ☒ **No**
- n** Sharing of facilities, equipment, mailing lists, or other assets with related organization(s) **1n** ☒ **Yes** ☒ **No**
- o** Sharing of paid employees with related organization(s) **1o** ☒ **Yes** ☒ **No**
- p** Reimbursement paid to related organization(s) for expenses **1p** ☒ **Yes** ☒ **No**
- q** Reimbursement paid by related organization(s) for expenses **1q** ☒ **Yes** ☒ **No**
- r** Other transfer of cash or property to related organization(s) **1r** ☒ **Yes** ☒ **No**
- s** Other transfer of cash or property from related organization(s) **1s** ☒ **Yes** ☒ **No**

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
(1) Milwaukee Brewers Baseball Club LP	n	0.00	Not Determinable
(2) Milwaukee Brewers Baseball Club LP	p	\$85,793.84	Actual Amount
(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.

(a) Name, address, and EIN of entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Predominant income (related, unrelated, excluded from tax under section 512-514)	(e) Are all partners section 501(c)(3) organizations?		(f) Share of total income	(g) Share of end-of-year assets	(h) Disproportionate allocations?		(i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner?		(k) Percentage ownership
				Yes	No			Yes	No		Yes	No	
(1)													
(2)													
(3)													
(4)													
(5)													
(6)													
(7)													
(8)													
(9)													
(10)													
(11)													
(12)													
(13)													
(14)													
(15)													
(16)													

Part VII Supplemental Information

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