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For Paperwork Reduction Act Notice see the separate instructions

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Form	IJ	IJ	u

## **Return of Organization Exempt From Income Tax** Under section 501(c) 527 or 4947(a)(1) of the Internal Revenue Code (except private foundations)

OMB No 1545-0047

2013

Dep	artment of	the Treasury	•	I Security numbers on this fo					Open to			
l te	mal Reven	ue Serv	► Information about	Form 990 and its instruction	ns is at ww	w irs.go	ov/form990		Inspec	tien		
<u>A</u>	For the	2013 cale	ndar year, or tax year beginning	01/01	2013, and e	ending	12/3		20 13			
В	Check f	appi cabi	CN me forga izatio COMMUNI	TY SHARES OF WISCONSIN	INC		0	Employe	er identification n	umber		
	Address	cha ge	Doig Baness As						39 1172378			
	Name ch	nange	Numbe a distreet (or PO box fm	ail is not delivered to street addres	ss) Roc	om/suite	E	E Telephone number				
	l talret	um	612 W Main St Ste 200						608 256 1066			
	Termi at	ed	City o tow state o pro ice cou	try and ZIP o foreign postal code	е							
	Amende		Madison, WI 53703					Gross re		331 312		
	Applicati	on pending	F Name a d address of p c pal office	Emily Dickmann			H(a) is this a group	p return for s	subordinates? 🔲 Yes	s ☑ No		
			612 W Main St Ste 200 Madisor	WI 53703			H(b) Are all sut	bordinates	s included? 🔲 Yes	No 🗆 No		
<u></u>	Tax-exe	npt status	✓ 501(c)(3)	) ◀ (isert o) 🗌 4947(a)	)(1) or 🔲 5:	27	If No attac	chalist (s	see instructions)			
J	Website	► ww	w communityshares com				H(c) Group ex	emption	number >			
K	Form of	organizat on	✓ Corporatio ☐ Trust ☐ Associa	tio ☐ Other ►	L Year of f	omation	1973	M State	of legal dom cile	wı		
P	art I	Summ	ary									
	1	Bnefly de	escribe the organization s miss	ion or most significant acti	ivities R	aise vis	ibility and s	upport f	for the work of	our		
8		sixty two	member nonprofits				·					
Jan		_	-									
Activities & Governance	2	Check th	is box ▶☐ if the organization	discontinued its operations	s or dispos	sed of r	more than 2	5% of	its net assets			
ě	3	Number o	of voting members of the gove	ming body (Part VI line 1a	1)			3		66		
9	4	Number of	of independent voting member	s of the governing body (P	art VI line	1b)		4		66		
jes S	5		nber of individuals employed in					5		12		
ž	6		nber of volunteers (estimate if		·			6		142		
Ąct	7a		elated business revenue from	**	2			7a	· · · · · · · · · · · · · · · · · · ·	0		
•	b		ated business taxable income	• •	_			7b		0		
		1101 011101	4.04 240000 (4.42.00 1001110				Prio Yea	1 12	Current Ye			
	8	Contribut	tions and grants (Part VIII line	1h)			11	45 456	1	259 162		
Revenue	9		service revenue (Part VIII line					61 276		72 056		
Š	10	•	nt income (Part VIII column (A	•		<u> </u>		183		94		
æ	11		renue (Part VIII column (A) line	•	110)			-103		0		
	12		enue—add lines 8 through 11 (n			»	1.2	06 915		331 312		
_	13	•			1 (7) 11110 12	-,						
			nd similar amounts paid (Part I)	• • •		<del> </del>	0	15 522		631 829		
	14	-	paid to or for members (Part IX		lines E 40	" ⊢		20 520		462.062		
Expenses	15		other compensation employee I		intes 5-10	" ├─	4	28 522		462 862		
Ë	16a		nal fundraising fees (Part IX c			_						
읈	_b		draising expenses (Part IX col		121 37	8 -						
	17		penses (Part IX column (A) lin		₹ <b>∫</b>	ւ	•	53 199		191 212		
	18		enses Add lines 13-17 (must		line 25)	√	11	97 243		285 903		
_	19	Revenue	less expenses Subtract line 1	8 from line 12		<u> </u>	i ning of Curre	9 672	End of Ye	45 409		
80				3 AUG 0 4 70	014 5	)   699						
Net Assets o Fund Balances	20		ets (Part X line 16)	S And May Vi	014	}		76 772	1	130 801		
A P	21		ilities (Part X line 26)			<del>-</del>		74 304		582 924		
			ts or fund balances Subtract I	ine 21 from (ine 20 ) [-] [N	N.		5	02 468		<u>547 877</u>		
J	art II	Signat	ture Block									
			ry I declare that I have examed this i						nykowledge ad	belefits		
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_		<u> </u>	ntily Didamann					t/31/	2014.			
Sıç		▼ Sg a	ature of officer				Date	' '				
He	re		ly Dickmann President									
_			orp nt ame a d title		_		_					
Pa	ud	P t/Ty	pe p eparer's ame	Preparer s sig ature		Date		Check [	T If PTIN			
	epare	r L						self-emp				
	e Onl	l —	ame >				Firm s	EIN ▶				
<b>-</b> 3	, Jill	,	ddress ▶				Phone	no				
Ma	y the IF		s this return with the preparer	shown above? (see instruc	tions)				☐ Yes	s 🗌 No		
_			ction Act Notice see the separa			Cat No 1	11282Y		Form 9	<b>990</b> (2013)		

Part I	V Checklist of Required Schedules			_ <u>-</u> -
			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	1	
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		1
4	<b>Section 501(c)(3) organizations.</b> 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		1
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		1
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		1
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		1
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8		1
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		<b>√</b>
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		1
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VIII, IX, or X as applicable.	10		_
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI	11a	1	
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	-	1
С	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		1
đ	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		1
e	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		1
	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		1
12 a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII	12a	✓	
Ь	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		1
13	Is the organization a school described in section 170(b)(1)(A)(II)? If "Yes," complete Schedule E	13		<b>√</b>
14 a	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		1
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		1
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV.	16		1
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		1
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		<b>√</b>
	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		<b>▼</b>
	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		1
	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		<b>  ▼</b>

Part	Checkist of nequired schedules (continued)		I	A1-
			Yes	No
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	1	
22	Did the organization report more than \$5,000 of grants or other assistance to individuals in the United States on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		<b>✓</b>
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? If "Yes," complete Schedule J	23		✓
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a	24a		✓
	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24b 24c		
d 25a	with a disqualified person during the year? If "Yes," complete Schedule L, Part I	24d 25a		✓
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	25b		✓
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If so, complete Schedule L, Part II	26		✓
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part III	27		✓
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 b	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a 28b		1
С	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		1
29 30	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	30		<b>√</b>
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		1
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II	32		1
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		1
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1	34		1
35a b	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a 35b	_	✓
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2	36		✓
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		1
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? <b>Note.</b> All Form 990 filers are required to complete Schedule O	38	1	
			000	

				-90 -
Part				
	Check if Schedule O contains a response or note to any line in this Part V	<u> </u>	<u> </u>	
			Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable 1a 8			
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable			
С	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 12	_		
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>✓</b>
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, 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			ł
	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		1
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	ļ	L
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the	l _		
	organization solicit any contributions that were not tax deductible as charitable contributions?	6a		<b>✓</b>
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).			
а	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>/</b>	
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b	<b>✓</b>	ļ
С	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			
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		<b>✓</b>
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		<b>-</b>
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			
. b				
11	Section 501(c)(12) organizations. Enter:  Gross income from members or shareholders			
a b	Gross income from members or shareholders			
	against amounts due or received from them.)			
100		120		
12a b	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041? If "Yes," enter the amount of tax-exempt interest received or accrued during the year	12a		
	· · · · · · · · · · · · · · · · · · ·			
13	Section 501(c)(29) qualified nonprofit health insurance issuers.	13a		
а	Is the organization licensed to issue qualified health plans in more than one state?	138		
b	<b>Note.</b> See the instructions for additional information the organization must report on Schedule O. Enter the amount of reserves the organization is required to maintain by the states in which			
	the organization is licensed to issue qualified health plans			
С	Enter the amount of reserves on hand			
	Did the organization receive any payments for indoor tanning services during the tax year?	14a		1
l4a h	If "Ves " has it filed a Form 720 to report these payments? If "No " provide an explanation in Schedule O	14h	<del>                                     </del>	<b>-</b>

	90 (2013)	<del></del>		Page O
Part	,			
	response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. S			ions. . 🔽
Secti	Check if Schedule O contains a response or note to any line in this Part VI	<u> </u>	<u> </u>	. <u>v</u>
0000	On 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 66			
	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 66	<u>.</u>		
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		1
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		1
5	Did the organization become aware during the year of a significant diversion of the organization's assets? .	5		<b>√</b>
6	Did the organization have members or stockholders?	6_	<u> </u>	<b>/</b>
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		1
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	ı	✓
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:			
а	The governing body?	8a	1	
Ър	Each committee with authority to act on behalf of the governing body?	8b	1	
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		1
<u>Secti</u>	on B. Policies (This Section B requests information about policies not required by the Internal Rever	ue C		
40-	D1111	40-	Yes	No
10a b	Did the organization have local chapters, branches, or affiliates?	10a	-	<del>                                     </del>
	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 filling the form?	11a	_	1
ь	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	1	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	1	Γ
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done	12c	1	
13	Did the organization have a written whistleblower policy?	13	✓	
14	Did the organization have a written document retention and destruction policy?	14	✓	<u> </u>
15	Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
а	The organization's CEO, Executive Director, or top management official	15a	1	
b	Other officers or key employees of the organization	15b		✓
40	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			
Coot:	organization's exempt status with respect to such arrangements?	16b	L	<u> </u>
	on C. Disclosure  List the states with which a copy of this Form 990 is required to be filed ▶ wi			
17 18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section available for public inspection. Indicate how you made these available. Check all that apply.	า 501(	(c)(3)s	only)
	☐ 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 int financial statements available to the public during the tax year.	erest	policy	y, and
20	State the name, physical address, and telephone number of the person who possesses the books and records	of the	•	
	organization: ► Kayhleen Messinger - Financial Mgr. (608)256-1066			

		_	- 4
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Form	aan	/2M1	3

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

Check if Schedule O contains a response or note to any line in this Part VII										 $\neg$
Check it Schedule U contains a response or note to any line in this Part VII.	 _	_	_	_	_	_	_	_	_	 - 1
Chief the Control of Control of the	 •	-		_ <u>-</u> _	<u> </u>		•	 		 ㅗ

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 no	or any relate	d org	anız	atic	n c	ompe	nsa	ited any currer	nt officer, director	r, or trustee.
				-	C) sition					
<b>(A)</b> Name and Title	(B)			neck	more	than o		(D) Reportable	(E) Reportable	<b>(F)</b> Estimated
Name and Title	Average hours per					is both or/trust		compensation	compensation from	
	week (list any hours for related organizations below dotted line)	Individua or directo	Institutional trustee	١.	Key employee	Highest compensated employee	Former	from the organization (W-2/1099-MISC)	related organizations (W-2/1099-MISC)	other compensation from the organization and related organizations
Emily Dickmann	1									
President	0	1		1				0	0	0
Brynne McBride	1									
Vice President	0	1		✓	<u> </u>			0	0	0
Kathleen McFeeley	1							}		
Treasurer	0	1		✓				0	0	0
Richard Storck	1									
Secretary	0	✓		✓				0	0	. 0
David Allen	0.5						İ			
Director	0	<b>✓</b>						0	0	0
Nino Amato	0.5									
Director	0	✓		<u> </u>				0	0	0
Kelly Anderson	0.5					1				
Director	0	<b>✓</b>					L	0	0	0
Fred Appleton	0.5									
Director	0	<b>✓</b>						0	0	0
Mike Basford	0.5	]								
Director	0	1						0	0	0
Carousel Bayrd	0.5									
Director	0	✓						0	0	. 0
Katie Beilfuss	0.5			i						
Director	0_	✓_						0	0	0
Carol Bracewell	0.5									
Director	0	✓		<u> </u>				0	0	0
Kathleen Brandenburg	0.5									
Director	0	1	L_					0	0	0
Natalie Byrne	0.5									
Director	0	✓						0	0	0

				(	C)					
(A)	(B)	ļ.,.			ition			(D)	(E)	(F)
Name and Title	Average					e than o		Reportable	Reportable	Estimated
	hours per week (list an	offic	er an	dad		or/trus	tee)	compensation from	compensation from related	amount of other
	hours for	Individual trustee or director	l Ingt	Officer	<u>چ</u>	ਭੁਵੂ	Former	the	organizations	compensation
	related organization	, are	Institutional trustee	ğ	Key employee	og at	曹	organization (W-2/1099-MISC)	(W-2/1099-MISC)	from the organization
	below dotted	ᆲᇴ	onal		3	8 8		(44-2/1099-WIGC)		and related
	line)	🙀	텵		8	뒇				organizations
		8	<b>8</b>			Highest compensated employee				
Denny Caneff	0.5				ŀ	1	ł	_		_
Director	0	<b>/</b>	<u> </u>	<u> </u>			-	0	0	0
Michael Childers	0.5			1				_		_
Director	0	<b>/</b>			-		├	0	0	0
Nora Cusack	0.5				ĺ			_		_
Director	. 0	<b>/</b>	1	-				0	0	0
Jeanne Duffy	0.5							_		_
Director	0	1	<b>├</b>	├	-	-	├	0	0	0
Mary Jo Elert	0.5							_		_
Director	0	<b>                                     </b>	<del> </del>				-	0	0	0
Michele Erikson	0.5						ł	1		_
Director	0	<b>                                     </b>	+		├			0	0	0
Kelly Forman	0.5	1								
Director	0	-	-	-	-			0	0	0
Gary Funk	0.5	· /						_		
Director City City	0	<del>  •</del>	-	-	-	-	-	0	0	0
Cecilia Gillhouse	0.5	1						_		
Director	0	+	┼	-			-	0	0	0
Mary Girard	0.5									•
Director		+	╁		_	-		0	0	0
Jim Goronson	0.5	1							ا	
Director  Iiii Crahlaweki	0	+			-		-	0	0	0
Jill Groblewski Director	0.5 0	1						0	٥	^
		+ •	$\vdash$	$\vdash$	-	-	-	0	U	0
Miriam Grunes	0.5	1						_	أم	^
Director	0	+ ▼	-		-		-	0	0	0
Jon Hain	0.5 0	1							اء	_
Director		1 🔻	l	L	L			0	0	0 Form <b>990</b> (2013)

			<u> </u>		-	C)					
Na	(A) me and Title	(B) Average hours per week (list any	box,	unles	neck ss pe d a c	rson	than on the state of the state	n an tee)	(D)  Reportable compensation from	(E) Reportable compensation from related	(F) Estimated amount of other
		hours for related organizations below dotted line)	ndividua or directo	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC)	organizations (W-2/1099-MISC)	compensation from the organization and related organizations
Kristin Hansen		0.5									
Director		0	1						0	0	0
Jake Immel		0 5									
Director		0	✓						0	0	0
Bob Jacobson		0.5									
Director		0	✓						0	0	0
Jaimes Johnson		0.5									
Director		0	✓						0	0	0
Peter Joyce		0.5							İ		
Director		0	✓						0	0	0
Joan Karan		0.5									
Director		0	✓						o	o	0
Anne Katz		0.5									
Director		0	✓						0	0	0
Amy Kesling		0.5									
Director		0	✓						0	o	0
Pamela Kleiss		0.5									
Director		0	✓						0	0	0
Chad LaFlash		0.5									
Director		0	<b>√</b>						0	o	0
Kathy Lemke		0.5							i		
Director		0	✓						0	o	0
Patty Loosen		0.5									
Director		0	✓						O	o	0
Kevin Magee		0.5									
Director		0	✓					L	o	o	0
Denise Matyka		0.5								-	
Director		0	✓						o	o	0
<del>"</del>											Form <b>990</b> (2013)

				((	C)					
(A)	(B)	(B) Position (do not check more than one						(D)	related organizations (W-2/1099-MISC) compensation from the organization and related organizations  0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	
Name and Title	Average					than o		Reportable		
	hours per					or/truste		compensation	compensation from	
	week (list any hours for	익호	٦	Ş	줆	육포	귱	from the		
	related	divid	ä	Officer	g e	ples	Former	organization	(W-2/1099-MISC)	from the
	organizations below dotted		lon	`	Key employee	9 K	7	(W-2/1099-MISC)		
	line)	, trus	함		ĕ	ğ				
		8	Institutional trustee		-	Highest compensated employee				
						ē.				
Megin McDonell	0.5									
Director	0.5	1						0	ام	
Eleanor McEntee	0.5	<u> </u>								
Director	0	1						o	o	
Paige Metcalf	0.5									
Director	0	✓						o	o	
Andy Miller	0.5								-	<u>-                                      </u>
Director	0	1						o	ОО	
Marianne Morton	0.5									
Director	0	✓						0	о	
Deb Nemeth	0.5									
Director	0	✓						0	0	
Laura Olah	0.5				Ì					
Director	0	1						0	0	
Caroline Oldershaw	0.5									
Director	0	✓						0	0	
Lora Ott	0.5									
Director	0	✓			L			0	0	
Mindy Petersen	0.5									
Director	0	1	ļ	L				0	0	
Mark Porter	0.5		i							
Director	0	/						0	0	
Andrea Potter	0.5									
Director	0	1		<u> </u>				0	0	
Dani Rischall	0.5									
Director	0	✓		_				0	0	
Harriet Rowan	0.5									
Director	0	✓			1			0	0	Form <b>990</b> (201

	<u> </u>	Γ			C)			<u> </u>		
(4)	(0)				-, ition					<b>(5)</b>
(A) Name and Title	(B)					than o		(D) Reportable	(E) Reportable	(F) Estimated
Name and Title	Average hours per					is both or/trust			compensation from	amount of
	week (list any		_		_	,		from	related	other
	hours for related	호	State	Officer	Key employee	를	Former	the organization	organizations (W-2/1099-MISC)	compensation from the
	organizations	ecto	है	*	d di	yee	🍳	(W-2/1099-MISC)	,,	organization
	below dotted line)	1 5	自由		oye	릙				and related organizations
		Individual trustee or director	Institutional trustee		•	Highest compensated employee				<u>.</u>
			8			藍				
Rachel Scalise	0.5									
Director	0	1					1	٥	0	o
Dawn Shegonee	0.5	Ė	$\vdash$				T	† <u>°</u>	1	
Director	0	1					İ	o	o	0
Beverly Speer	0.5							_		
Director	0	1		İ				o	o	0
Steve Starkey	0.5									
Director	0	1						о	o	0
Jacinda Tessmann	0.5									
Director	0	✓		1			Ī	о	o	0
Lindsay VanVonderen	0.5									
Director	0	✓						o	0	0
Lori Webeckes	0.5									
Director	0	✓						0	0	0
Martha Worcester	0.5									
Director	0	✓						0	0	0
Jackie Yang	0.5									
Director	0	✓					<u>L.</u>	0	0	0
Anders Zanichkowsky	0.5									
Director	0	1						0	0	0
Laurel Bastian	0.5									
Director	0	✓						0	_0	0
Natalie DeMaioribus	0.5									
Director	0	✓						0	0	0
Julie Gutierrez	0.5									
Director	0	1						0	0	0
Jennifer Hanner	0.5									
Director	0	✓						0	0	0 Form <b>990</b> (2013)

Part	Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)											
`					((	C)						
	(A)	(B)	,,, <u> </u>	_4 _6		ition			(D)	(E)		(F)
	Name and title	Average					than our solutions		Reportable	Reportable		Estimated
		hours per					or/trust		compensation	compensation f	rom	amount of
		week (list any hours for	일	2	Q	~	g Ţ	F	from the	related organization	,	other compensation
		related	물꽃	∰	Officer	Ψ	함	Former	organization	(W-2/1099-MIS		from the
		organizations	ctal	합	֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֡֡֓֓֓֓	필	8 5	4	(W-2/1099-MISC)			organization
		below dotted line)	ੇ ਤੂ	<u>a</u>		Key employee	ă		1			and related organizations
		1	Individual trustee or director	Institutional trustee		l °	B		1			- 9
				8			Highest compensated employee		1			
Sarah	Hole	0.5						<del> </del>				
Direct		0	1						0		o	0
	e Jacobson	0.5										-
	Director		1						o		o	0
Brend	Brenda Konkel											
Direct	Director		✓						0		0	0_
Debby	Meyer	0.5										
Direct	or	0	<b>✓</b>			L_		_	0		0	0
Glenn	Mitroff	0.5	,									
Direct		0	<b>✓</b>				ļ		0		0	0
	el Pundsack	0.5	1									•
Direct	<u> </u>	0.5	<b>-</b>						0		0	0
Direct	Sanders	0.5	1						0		0	0
	chulte	0.5										
Direct		0	✓						0		o	0
	el Anders	40										
Execu	tive Director	0			✓				75,643		0	4,816
					<u> </u>	<u> </u>		ļ.,				
-45	0.1.1.1.1	l			l	L		Ļ	75.040		_	4.046
1b c	Sub-total	 VII Soctio	 n A	•	•		•		75,643		0	4,816
d				•	•	•	•	•	75,643		0	4,816
2	Total number of individuals (including but						ahove					<del></del>
-	reportable compensation from the organi			1030	, 1130		above	-, <b>••</b>	110 10001100 111	oro triarr \$10	0,000	<i>,</i>
	<u>-i </u>											Yes No
3	Did the organization list any former of							emp	oloyee, or high	est compen	sated	d
	employee on line 1a? If "Yes," complete 3										•	3 ✓
4	For any individual listed on line 1a, is the											
	organization and related organizations	greater that	an \$1	150,	000	? /	f "Ye	s, "	complete Sch	edule J for	sucl	
	individual											4 🗸
5	Did any person listed on line 1a receive of											
	for services rendered to the organization	? If "Yes," c	ompi	ete	Scr	nedi	ile J 1	or s	such person	<u></u>	•	5 √
_	on B. Independent Contractors	<del></del>								1	010	0.000
1	Complete this table for your five highest compensation from the organization. Rep											
	year.	ort compe	i isali	א ווכ	JI U	IE C	aleilu	iai j	year ending wit	ii Or Within ti	ie ori	gamzadon s tax
-	(A)			_					(B)	Γ		(C)
	Name and business add	ress							Description of s	ervices		Compensation
			_				-					
								<u> </u>				<del></del>
	Total number of independent contractor	re (includia	na h	ı+ ~	O+ 1	im.	od +-		nose listed sh	ove) who		
4	received more than \$100,000 of compens							, u	n n	0 v 0, vv 10		

Par	t VIII	Statement of Revenue						
		Check if Schedule O contain	ns a res	ponse or note to	any line in this l	Part VIII		🗆
					(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
ats at	1a	Federated campaigns	1a	0				
Grants nounts	b	Membership dues	1b	40,923				
8, E	С	Fundraising events	1c	0				
ons, Gifts, Grants Similar Amounts	d	Related organizations	1d	0				
% <u>E</u>	е	Government grants (contributions	) 1e	0				
P S	f	All other contributions, gifts, grant						
₫ ₫		and similar amounts not included abo	ve 1f	1,218,239				
Contributions, and Other Sim	9	Noncash contributions included in lines	1a-1f: \$	12,040				
<u>8 E</u>	h	Total. Add lines 1a-1f			1,259,162			
₽				Business Code				
Ϋ́Θ	<b>2</b> a	Contract Services		561000	72,056	72,056	0	0
æ	b							
Ş.	С			<u></u>				
Sel	d							
펿	е	***************************************						
Program Service Revenue	f	All other program service reve			0	0	0	_0
	g	Total. Add lines 2a-2f			72,056			
	3	Investment income (includin	-	1				
	١.	and other similar amounts)		<b>↓</b>	94	0	0	94
	4	Income from investment of tax-e	•	· · -	0	0	0	0
	5	Royalties		(ii) Personal	0	0	0	0
				(II) Fersonal				
	6a	Gross rents						
	b	Less: rental expenses						
	C	Rental income or (loss)  Net rental income or (loss)	U	0				
	d   7a	Gross amount from sales of (i) Sec	unties	(ii) Other				
	'4	assets other than inventory		(.,, 56.				
	Ь	Less: cost or other basis						
		and sales expenses .						
	c	Gain or (loss)	0	0				
	d	· · · · · · · · · · · · · · · · · · ·						
<u>a</u>								
venue	8a	Gross income from fundraisin events (not including \$	0					
Other Reve		of contributions reported on line See Part IV, line 18						
돗	ь	Less: direct expenses	. b					
		Net income or (loss) from fund		events . ►				
	9a	Gross income from gaming ac						
		See Part IV, line 19						
		Less: direct expenses						
	ı	Net income or (loss) from gam	-	ivities 🕨				
	10a	Gross sales of inventory,						
		returns and allowances	· a					
	ь	Less: cost of goods sold						
	С	Net income or (loss) from sale	s of inv					
	L	Miscellaneous Revenue		Business Code				
	11a							
	Ь							
	С							<u> </u>
	d	All other revenue						
	e	Total. Add lines 11a-11d		▶	0	ī		
	12	Total revenue. See instruction	าร	<b>▶</b> I	1 221 212	72.056	۸	1 04

Part IX Statement of Functional Expenses

Section	on 501(c)(3) and 501(c)(4) organizations must con	nplete all columns. A	ll other organization	s must complete co	lumn (A).
	Check if Schedule O contains a respon				
	ot include amounts reported on lines 6b, 7b, b, 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	631,829	631,829		
2	Grants and other assistance to individuals in the United States. See Part IV, line 22	0	0		
3	Grants and other assistance to governments, organizations, and individuals outside the United States. See Part IV, lines 15 and 16	0	0		
4 5	Benefits paid to or for members Compensation of current officers, directors, trustees, and key employees	75,643	48,098	15,391	12,154
6	Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)	75,515	10,000	.0,251	12,10
7 8	Other salaries and wages	303,537	193,007	61,758	48,772
9	section 401(k) and 403(b) employer contributions)  Other employee benefits	13,668 39,809	8,691	2,781 8,100	2,196 6,396
10 11	Payroll taxes	30,205	25,313 19,206	6,146	4,853
a b	Management	0 115	0	0 115	0
c	Accounting	6,900	0	6,900	0
e f	Professional fundraising services. See Part IV, line 17 Investment management fees	0	o	0	0
g	Other. (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O.)	28,148	21,033	44	7,071
12 13	Advertising and promotion	21,183 62,319	8,485 35,497	1,179 6,325	11,519 20,497
14 15	Information technology	0	0	0,323	0
16 17	Occupancy	50,069 7,396	35,079 7,193	8,375 9	6,615 194
18	Payments of travel or entertainment expenses for any federal, state, or local public officials	0.	0	0	0
19 20	Conferences, conventions, and meetings . Interest	0	0	0	0
21	Payments to affiliates	0	0	0	0
22 23	Depreciation, depletion, and amortization . Insurance	5,876 4,911	5,224 3,043	365 1,044	287 824
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 b	Subscriptions/dues	4,295	4,295	0	0
c d e	All other expenses				
25	Total functional expenses. Add lines 1 through 24e	1,285,903	1,045,993	118,532	121,378
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	1,257,550	1,212,00	,	

Part X **Balance Sheet** Check if Schedule O contains a response or note to any line in this Part X (A) (B) Beginning of year End of year 1 Cash-non-interest-bearing . . . . . . . . . 2 Savings and temporary cash investments . . . . . 316,403 2 350.848 3 3 719,397 720,345 4 27,400 45,560 Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. 5 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 6 Notes and loans receivable, net . . . . . . . . . 7 8 8 Inventories for sale or use . . . . . 4.866 9 7.960 9 Prepaid expenses and deferred charges 10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D 10a 34.376 10b **b** Less: accumulated depreciation . . . . 27,340 7.758 10c 7,036 11 Investments—publicly traded securities . . . . 11 12 Investments—other securities. See Part IV, line 11 . 12 13 Investments - program-related. See Part IV, line 11. 13 14 Intangible assets . . . . . . . . . . . . . . . . 14 15 15 Other assets. See Part IV, line 11 . . . . . . . . . 16 16 Total assets. Add lines 1 through 15 (must equal line 34) . . . 1,076,772 1,130,801 17 Accounts payable and accrued expenses . . . . . . 17 33,168 33,662 18 18 Grants payable . . . . . . . . . . 541,136 549,262 19 19 20 20 21 Escrow or custodial account liability. Complete Part IV of Schedule D. Loans and other payables to current and former officers, directors, -iabilities trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L . . . . . . . 22 23 23 Secured mortgages and notes payable to unrelated third parties . . . 24 24 Unsecured notes and loans payable to unrelated third parties . . . Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X 25 26 Total liabilities. Add lines 17 through 25 574,304 26 582.924 Organizations that follow SFAS 117 (ASC 958), check here ▶ ✓ and Net Assets or Fund Balances complete lines 27 through 29, and lines 33 and 34. Unrestricted net assets . . . . . . . . . . . . . . . . 215,094 27 279,793 287,374 28 268,084 28 Temporarily restricted net assets . . . . 0 29 Organizations that do not follow SFAS 117 (ASC 958), check here ▶ □ and complete lines 30 through 34. 30 30 Capital stock or trust principal, or current funds . . . . . . . . . 31 Paid-in or capital surplus, or land, building, or equipment fund . . . 31 32 Retained earnings, endowment, accumulated income, or other funds . 32 33 502,468 33 547,877 34 Total liabilities and net assets/fund balances . . . 1,076,772 34 1,130,801 Form **990** (2013)

Form 9	90 (2013)			P	age <b>12</b>
Par	XI Reconciliation of Net Assets				
	Check if Schedule O contains a response or note to any line in this Part XI		<u> </u>		
1	Total revenue (must equal Part VIII, column (A), line 12)	1		1,33	1,312
2	Total expenses (must equal Part IX, column (A), line 25)	2		1,28	5,903
3	Revenue less expenses. Subtract line 2 from line 1	3		4	5,409
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4		50	2,468
5	Net unrealized gains (losses) on investments	5			0
6	Donated services and use of facilities	6			0
7	Investment expenses	7			0
8	Prior period adjustments	8			0
9	Other changes in net assets or fund balances (explain in Schedule O)	9			0
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line				
	33, column (B))	10		54	7,877
Part	XII Financial Statements and Reporting				
	Check if Schedule O contains a response or note to any line in this Part XII		<u> </u>		. 🗆
				Yes	No
1	Accounting method used to prepare the Form 990: ☐ Cash ☑ Accrual ☐ Other		_ 66		
	If the organization changed its method of accounting from a prior year or checked "Other," ex	plain	in		
	Schedule O.				
2a	The state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the s			ļ	✓
	If "Yes," check a box below to indicate whether the financial statements for the year were com	oiled (	or		
	reviewed on a separate basis, consolidated basis, or both:				
	☐ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis			,	
b	and the second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second s		. 2b	✓	<u></u>
	If "Yes," check a box below to indicate whether the financial statements for the year were audite	ed on	а		
	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 or				
	of the audit, review, or compilation of its financial statements and selection of an independent account			✓	
	If the organization changed either its oversight process or selection process during the tax year, ex	plaın	ın		
	Schedule O.				
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set	forth	ın		
	the Single Audit Act and OMB Circular A-133?		· 3a		1
ь					
	required audit or audits, explain why in Schedule O and describe any steps taken to undergo such a	udits.	3b		<u></u>
			Fo	m <b>99</b> 0	(2013)

#### SCHEDULE A (Form 990 or 990-EZ)

## **Public Charity Status and Public Support**

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

2013

OMB No 1545-0047

Department of the Treasury Internal Revenue Service ► Attach to Form 990 or Form 990-EZ. ► Information about Schedule A (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

Open to Public

Name	of the organization						- 1	Employer id	lentificatio	n number	-
	MUNITY SHARES	OF WISCONSIN IN	IC						39-11	172378	
Pa			<b>rity Status</b> (All orga				<u>-</u> -		nstruction	ons.	
The 1 2 3 4	A church, con A school desc A hospital or a A medical resc	vention of churc cribed in <b>section</b> a cooperative ho	ation because it is: (For hes, or association of 170(b)(1)(A)(ii). (Attact spital service organization on operated in conjunce:	churche ch Sched ation des	s describ ule E.) cribed in	ed in sec section	tion 170 170(b)(1)(	(b)(1)(A)(i (A)(iii).		(iii). Enter the	
5	☐ An organization	<del>-</del>	the benefit of a colle	ge or un	iversity o	wned or	operated	by a go	vernmen	tal unit descri	bed in
6 7	An organization	on that normally	nment or government receives a substantia (A)(vi). (Complete Par	al part of					nit or fror	n the general	public
8 9	An organization receipts from support from	on that normally activities related gross investme	n section 170(b)(1)(A receives: (1) more that d to its exempt funct int income and unre- fter June 30, 1975. Se	an 33¹/₃% ions—su lated bus	6 of its si bject to i siness ta	upport fro certain ex xable inc	xceptions come (les	s, and (2) ss sectio	no more	e than 331/3%	of its
10 11	=										
f	If the organiz		written determination	on from	the IRS	that it is	a Type	I, Type	ll, or Typ	oe III supporti	ing
g	Since August following pers		ne organization accep	oted any	gift or co	ontributio	n from a	ny of the	•		
	(iii) below,	the governing bo	ndirectly controls, eitlody of the supported of	organızat	ion?					nd Yes	No
	(iii) A 35% cor	ntrolled entity of	on described in (i) abo a person described in	(i) or (ii) a	above? .					11g(ii) 11g(ii)	
(i)	Name of supported organization	(ii) EIN	on about the supported (iii) Type of organization (described on lines 1-9 above or IRC section (see instructions))	(iv) is the c	organization sted in your document?	(v) Did y the organ col (i)	rou notify nization in of your port?	organizat	s the ion in col zed in the S.?	(vii) Amount of m support	onetary
				Yes	No	Yes	No	Yes	No		
(A)											
(B)											
(C)											
(D)											
(E)											

Total

Part	Support Schedule for Organiza	ations Descr	ribed in Sect	ions 170/h)/1	)(A)(iv) and	170(h)(1)(A)(	<u>vi)</u>
rait	(Complete only if you checked the						
	Part III. If the organization fails to						damy andor
Secti	on A. Public Support	y quality area	<u> </u>	3.00 D 0.0 tt, p	iodoo oompio		
	dar year (or fiscal year beginning in)	(a) 2009	<b>(b)</b> 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
1	Gifts, grants, contributions, and	(0) 0000	(,	(5, _5,	(-,	(0,10,10	(7)
•	membership fees received. (Do not					ļ	
	include any "unusual grants.")						
2	Tax revenues levied for the						
	organization's benefit and either paid						
	to or expended on its behalf						
3	The value of services or facilities						
	furnished by a governmental unit to the						
	organization without charge						ļ
4	Total. Add lines 1 through 3						· · · <u> </u>
5	The portion of total contributions by						
	each person (other than a						
	governmental unit or publicly						
	supported organization) included on line 1 that exceeds 2% of the amount						
	shown on line 11, column (f)						
6	Public support. Subtract line 5 from line 4.						
	on B. Total Support			<u></u> .			
	dar year (or fiscal year beginning in)	(a) 2009	<b>(b)</b> 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
7	Amounts from line 4						
8	Gross income from interest, dividends,						
	payments received on securities loans,						
	rents, royalties and income from similar						
	sources						ļ
9	Net income from unrelated business						
	activities, whether or not the business						
40	is regularly carried on						<del></del>
10	Other income. Do not include gain or loss from the sale of capital assets						
	(Explain in Part IV.)					•	
11	Total support. Add lines 7 through 10						
12	Gross receipts from related activities, etc.	. (see instructi	ons)			12	·-·-
13	First five years. If the Form 990 is for th	•	•			ear as a secti	on 501(c)(3)
	organization, check this box and stop he	re				· . · ·	🟲 🗀
Secti	on C. Computation of Public Suppor						
14	Public support percentage for 2013 (line 6		-			14	<u>%</u>
15	Public support percentage from 2012 Sch					15	%
16a	331/3% support test—2013. If the organization gua						
	box and stop here. The organization qua 331/3% support test—2012. If the organ		•	-			
Ь	check this box and <b>stop here</b> . The organ						► □
17a	10%-facts-and-circumstances test-20	-			•		
	10% or more, and if the organization me						
	Part IV how the organization meets the "f	acts-and-circu	imstances" tes	st. The organiz	ation qualifies	as a publicly	
_	organization						· · ▶ []
Ь	10%-facts-and-circumstances test—20						
	15 is 10% or more, and if the organizate Explain in Part IV how the organization m						
	supported organization					ii quaiiles as	<b>&gt;</b> ¬
18	Private foundation If the organization di				or 17h chec	k this hov and	1 see

Section A. Public Support

### 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.)

Calen	dar year (or fiscal year beginning in) ▶	(a) 2009	<b>(b)</b> 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total				
1	Gifts, grants, contributions, and membership fees										
	received. (Do not include any "unusual grants.")	973,929	1,024,550	1,115,302	1,145,456	1,218,239	5,477,476				
2	Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the				04.070	70.050	222 242				
3	organization's tax-exempt purpose Gross receipts from activities that are not an	61,803	64,651	72,526	61,276	72,056	332,312				
	unrelated trade or business under section 513	0	0	0	0	_0	0				
4	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf	0	0	0	o	o	0				
5	The value of services or facilities furnished by a governmental unit to the				_						
_	organization without charge	0	0	0	0	0	0				
6 7a	<b>Total.</b> Add lines 1 through 5 Amounts included on lines 1, 2, and 3 received from disqualified persons .	1,035,732	1,089,201	1,187,828 0	1,206,732	1,290,295 0	5,809,788				
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	o	0	o	0	o	0				
С	Add lines 7a and 7b	0	0	0	0	0	0				
8	Public support (Subtract line 7c from line 6.)						5,809,788				
Secti	on B. Total Support		•				•				
Calen	dar year (or fiscal year beginning in) ▶	(a) 2009	<b>(b)</b> 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total				
9	Amounts from line 6	1,035,732	1,089,201	1,187,828	1,206,732	1,290,295	5,809,788				
10a	Gross income from interest, dividends,										
	payments received on securities loans, rents, royalties and income from similar sources .	1,370	1,165	679	183	94	3,491				
b	Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975	0	0	0	0	o	0				
С	Add lines 10a and 10b	1,370	1,165	679	183	94	3,491				
11	Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on	0	0	0	0	o	0				
12	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)	0	0	0	0	0	0				
13	<b>Total support.</b> (Add lines 9, 10c, 11, and 12.)	1,037,102	1,090,366	1,188,507	1,206,915	1,290,389	5,813,279				
14	First five years. If the Form 990 is for the organization, check this box and stop her	e organization	's first, secon	d, third, fourth	, or fifth tax ye		n 501(c)(3)				
Section	on C. Computation of Public Suppor		_								
15	Public support percentage for 2013 (line 8			3. column (f))		15	99.94 %				
16	Public support percentage from 2012 Sch	• •	-			16	99.86 %				
	on D. Computation of Investment Inc			<u> </u>							
17	Investment income percentage for 2013 (		_ <del>-</del>	y line 13, colur	nn (f))	17	0.06 %				
18	Investment income percentage from 2012			-		18	0 %				
19a											
	17 is not more than 331/3%, check this box										
b	331/3% support tests – 2012. If the organiz line 18 is not more than 331/3%, check this b										
20	Private foundation. If the organization di	-	-				_				

SCHEUUIE A (F	Om 990 or 990-EZ) 2013
Part IV	Supplemental Information. 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)

### **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.

10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b.

Attach to Form 990.

Open to Public Inspection

OMB No 1545-0047

Department of the Treasury Internal Revenue Service

▶ Information about Schedule D (Form 990) and its instructions is at www.irs.gov/form990.

Name of the organization **Employer identification number COMMUNITY SHARES OF WISCONSIN INC** 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) . . Aggregate value at end of year . . . . 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 Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used 6 only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose Part II Conservation Easements. Complete if the organization answered "Yes" to Form 990, Part IV, line 7. 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 2b **b** Total acreage restricted by conservation easements . . . . . . . . Number of conservation easements on a certified historic structure included in (a) . . . Number of conservation easements included in (c) acquired after 8/17/06, and not on a 2d 3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the Number of states where property subject to conservation easement is located ▶ Does the organization have a written policy regarding the periodic monitoring, inspection, handling of Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation easements during the year 6 7 Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B) 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. Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Part III Complete if the organization answered "Yes" to Form 990, Part IV, line 8. 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 . . . . . . . . . . . . . . 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: Assets included in Form 990, Part X .

Part									
3	Using the organization's acquisition, collection items (check all that apply):		her record	ds, check	any of the	e follov	ving that are a	significant use	e of its
а	☐ Public exhibition		d [	] Loan o	r exchang	e prog	rams		
b	☐ Scholarly research		e [	Other					
c	☐ Preservation for future generation	S							
4	Provide a description of the organiza XIII.	tion's collections a	and explai	n how the	ey further	the org	janization's ex	empt purpose	in Part
5	During the year, did the organization assets to be sold to raise funds rather								□ No
Part	Escrow and Custodial Arra Complete if the organization		" to Form	990, Pa	rt IV, line	9, or 1	reported an a	mount on For	rm
	990, Part X, line 21.								
1a	Is the organization an agent, trustee included on Form 990, Part X?								□ No
b	If "Yes," explain the arrangement in P	art XIII and comple	ete the foll	owing tab	ole:				
								Amount	
C	Beginning balance					1c			
d	Additions during the year					1d			
е	Distributions during the year					1e			
f	Ending balance					1f			
2a	Did the organization include an amou								∐ No
	If "Yes," explain the arrangement in P	art XIII. Check her	e if the exp	planation	has been	provide	ed in Part XIII	<u></u>	
Par	t V Endowment Funds.								
	Complete if the organization								
		(a) Current year	(b) Prior	year	(c) Two year	s back	(d) Three years ba	ck (e) Four year	s back
1a	Beginning of year balance								
b	Contributions								
С	Net investment earnings, gains, and losses			İ					
d	Grants or scholarships								
е	Other expenditures for facilities and programs								
f	Administrative expenses								
g	End of year balance						•		
2	Provide the estimated percentage of	he current vear en	d balance	(line 1a. c	column (a)	)) held a	as:		
a	Board designated or quasi-endowme	_	%	` .	` '	•			
b	Permanent endowment ▶	%							
c	Temporarily restricted endowment ▶	· %							
	The percentages in lines 2a, 2b, and 2	2c should equal 10	0%.						
За	Are there endowment funds not in th			ation that	are held	and ad	ministered for	the	
	organization by:		-					Yes	s No
	(i) unrelated organizations							. 3a(i)	
	(ii) related organizations							. 3a(ii)	
b	If "Yes" to 3a(ii), are the related organ							. 3b	
4	Describe in Part XIII the intended uses							<u> </u>	
Part	VI Land, Buildings, and Equip Complete if the organization		" to Form	990, Pa	rt IV, line	11a. S	See Form 990	, Part X, line	10.
	Description of property	(a) Cost or ot (investm	her basis	(b) Cost or o	other basis	(c) /	Accumulated epreciation	(d) Book val	
	Land		0		0				0
b	Buildings		0		0		0	-	<u>_</u>
c	Leasehold improvements		0		0		0	<del></del>	0
d	Equipment		0		34,376		27,340		7,036
e	Other		0		0		0	<del></del>	0
	Add lines 1a through 1e. (Column (d) r	nust equal Form 9		column (		(c).)			7,036

	Complete if the organization answered "Yes" to	Form 990, Part IV, line 1	11b. 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-h	neld equity interests		
(3) Other			
(A)			
(B)			
(C)			<del></del>
(D)			
(E)			
(F)			<u> </u>
(G)			
(H)			
	b) must equal Form 990, Part X, col. (B) line 12.)		
Part VIII	Investments—Program Related.	Form 000 Bort IV line 1	Ido Coo Form 000 Bart V line 12
<del> </del>	Complete if the organization answered "Yes" to		
	(a) Description of investment	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1)			
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)	b) must equal Form 990, Part X, col. (B) line 13.) ▶		
Part IX	Other Assets.		-
raitix	Complete if the organization answered "Yes" to	Form 990 Part IV line 1	11d See Form 990 Part X line 15
	(a) Description	10111 000, 1 41014, 11110	(b) Book value
(1)	,		
(2)			
(3)			
(4)			
(5)		. <u> </u>	
(6)			
(7)			
(8)			
(9)			
Total. (Colur	mn (b) must equal Form 990, Part X, col. (B) line 15.)	· · · · · · · · · · · · · · · · · · ·	▶
Part X	Other Liabilities.		
	Complete if the organization answered "Yes" to	Form 990, Part IV, line 1	l1e or 11f. See Form 990, Part X,
	line 25.		
1.	(a) Description of liability (b) Book va	alue	
(1) Federal in	come taxes		
(2)			
(3)			
(5)			
(6) (7)			
(8)		· · · · · · · · · · · · · · · · · · ·	
(9)			
( <del>'</del>	) (5 000 D (V ) (0) (V ) (5) b		
Total, (Column A	n) mustequal Form 990 Part X. col. IBUline 25 1 ➡ 1		
	o) must equal Form 990, Part X, col. (B) line 25.)	footnote to the organization's	financial statements that reports the

Part				Retur	n.
	Complete if the organization answered "Yes" to Form 990, F				040.050
1	Total revenue, gains, and other support per audited financial statements			1	846,659
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:	0-	1		
a	Net unrealized gains on investments	2a 2b	0		
Ь	Donated services and use of facilities	2c	0	_	
C	Recoveries of prior year grants	_	<del></del>		
d				2e	-484,653
е 3	Add lines 2a through 2d			3	1,331,312
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:	i ·			1,331,312
-	Investment expenses not included on Form 990, Part VIII, line 7b	4a	o		
a b	Other (Describe in Part XIII.)	4b	0	_	
C	Add lines 4a and 4b		<u> </u>	4c	0
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line			5	1,331,312
Part					
ı aı c	Complete if the organization answered "Yes" to Form 990, F				
1	Total expenses and losses per audited financial statements			1	801,250
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:				
а	Donated services and use of facilities	2a	0		
b	Prior year adjustments	2b	0		
С	Other losses	2c	0		
d	Other (Describe in Part XIII.)	2d	0		
е	Add lines 2a through 2d			2e	0
3	Subtract line 2e from line 1			3	801,250
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:				
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a	0		
b	Other (Describe in Part XIII.)	4b	484,653		
C	Add lines 4a and 4b			4c	484,653
_ 5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, lin	e 18.)	<u> </u>	5	1,285,903
	XIII Supplemental Information.				
	le the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a an				
	t XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part			rorma	tion.
Sched	lule D, Part XI, Line 2d - contributions designated by donors for specific memb	er no	nprofits		
Sched	lule D, Part XII, Line 4b - allocations of donor designated contributions to mem	ber n	onprofits		
			·		
				<b></b>	
<b></b>					
				<b>-</b>	
			•••••		
				·	
			_		
				Sc	thedule D (Form 990) 2013

SCHEDULE I (Form 990)

Grants and Other Assistance to Organizations, Governments, and Individuals in the United States Complete if the organization answered "Yes" to Form 999, Part IV, line 21 or 22.

2013

OMB No. 1545-0047

Department of the Treasury			► Attach to Form 990.	Form 990.			Open to Public	ublic
Name of the omenization	INTO	mation about Sche	dule I (Form 990) an	d its instructions i	<ul><li>Information about Schedule I (Form 990) and its instructions is at www.irs.gov/form990.</li></ul>		noadem	5
Name of the organization							Employer identification number	_
COMMUNITY SHARES OF WISCONSIN INC	WISCONSIN INC	:				•	39-1172378	
Part I General In	General Information on Grants and Assistar	Assistance						
1 Does the organiz	Does the organization maintain records to substantiate		int of the grants or	assistance, the g	the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and	or the grants or assi		
	the selection criteria used to award the grants or assistance?	or assistance?					· Ves	<b>%</b> □
Ses	Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.	es for monitoring	the use of grant fur	nds in the United	States.	;		
Part IV, line	<b>Grants and Utner Assistance to Governments and Organizations in the United States.</b> 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.	<b>vernments and</b> received more th	Organizations I lan \$5,000. Part	<b>n the United S</b> i Il can be duplic	<b>tates.</b> Complete if ated if additional s	the organization space is needed.	answered "Yes" to Fori	m 990,
1 (a) Name and address of organization or government	organization (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	ant
(1) Sch I, Stmt 1								
(2)								
(6)								
(4)								
(5)								
(9)								
6)								
(8)								
(6)								
(10)								
(11)								
(12)								
	Enter total number of section 501(c)(3) and government	vernment organiza	organizations listed in the line 1 table	ne 1 table			• 62	
3 Enter total number	Enter total number of other organizations listed in the line 1 table	in the line 1 table		•			<b>△</b>	
For Paperwork Reduction	For Paperwork Reduction Act Notice, see the Instructions for Form 990.	is for Form 990.		Ö	Cat No 50055P		Schedule I (Form 990) (2013)	90) (2013)

Schedule I (F	Schedule I (Form 990) (2013)
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	(c) Amount of	(d) Amount of	(e) Method of valuation (book	(f) Description of non-cash assistance
	recipients	cash grant	non-cash assistance	FMV, appraisal, other)	
-					
2					
8					
4					
5					
9					
7					
Part IV Supplemental Information. Provide the infor	the information r	equired in Part I, lir	ne 2, Part III, columr	mation required in Part I, line 2, Part III, column (b), and any other additional information.	onal information.
Schedule I, Part I, Line 2 · Community Shares of Wisconsin monitors its member nonprofits' continued eligibility for membership and for participation in public workplace giving campaign. Allocated funds are based on donor direction and are unrestricted.	nsin monitors its me nrestricted.	mber nonprofits' conti	nued eligibility for men	bership and for participation	in public workplace giving campaign.
				# 1	

Schedule I (Form 990) (2013)

Form Schedule I

Page 1

Line Number Part II

Description of Grants and Other Assistance to Governments and Organizations in the United States

		Recipient EIN	Amt. of cash grant	Amt. of non- cash asst.
Name and address	1000 Friends of Wisconsin	39-1857262	9,122	(
	16 N Carroll St 810			
	Madison, WI 53703			
RC code section	501(c)(3)			
Method of valuation				
Desc. of Non-Cash Asst.				
Purpose of grant	general support			
Name and address	ABC for Health	39-1783748	13,011	C
	32 N Bassett St			
	Madison, WI 53703			
IRC code section	501(c)(3)			
Method of valuation				
Desc. of Non-Cash Asst.				
Purpose of grant	general support			
Name and address	ACLU of Wisconsin Foundation	23-7052345	17,450	0
	207 E Buffalo Ste 325			
	Milwaukee, WI 53202			
IRC code section	501(c)(3)			
Method of valuation				
Desc. of Non-Cash Asst.				
Purpose of grant	general support			
Name and address	Bayview Foundation	39-6092644	11,779	0
	601 Bayview			
	Madison, WI 53715			
IRC code section	501(c)(3)			
Method of valuation				
Desc. of Non-Cash Asst.				
Purpose of grant	general support			
Name and address	Center for Media & Democracy	39-1777402	10,817	0
	520 University Ave 260			
	Madison, WI 53703			
IRC code section	501(c)(3)			
Method of valuation				
Desc. of Non-Cash Asst.				
Purpose of grant	general support			
Name and address	Chrysalis	39-1343633	9,414	0
	1342 Dewey Ct			
	Madison, WI 53703			
IRC code section	501(c)(3)			
Method of valuation				
Desc. of Non-Cash Asst.				
Purpose of grant	general support			
Name and address	Citizens Utility Board	39-1555109	5,093	0
	16 N Carroll St 640			
	Madison, WI 53703			
RC code section	501(c)(3)			
Method of valuation				•
Desc. of Non-Cash Asst.				
Purpose of grant	general support			
Name and address	Clean Wisconsin	39-1413448	16,792	0
		22		

Schedule I, Part IV, Staten	nent 1	COMMUNITY SHA	RES OF WISCON	SIN INC
•	634 W Main St Ste 300			
	Madison, VM 53703			
IRC code section	501(c)(3)			
Method of valuation				
Desc. of Non-Cash Asst.				
Purpose of grant	general support			
Name and address	Coalition of Wisconsin Aging Groups	39-1333172	9,005	0
	2850 Dairy Dr Ste 100			
IRC code section	Madison, WI 53718 501(c)(3)			
Method of valuation	501(6)(3)			
Desc. of Non-Cash Asst.				
Purpose of grant	general support			
Name and address	Common Wealth Development	39-1323500	8,784	0
	1501 Williamson St			
	Madison, WI 53703			
IRC code section	501(c)(3)			
Method of valuation				
Desc. of Non-Cash Asst.				
Purpose of grant	general support			
Name and address	Community GroundWorks	39-2024302	8,762	0
	3601 Memonal Dr Ste 4			
	Madison, WI 53704			
IRC code section	501(c)(3)			
Method of valuation  Desc. of Non-Cash Asst.				
Purpose of grant	general support			
	_ <del></del>	39-1279037	8,126	0
Name and address	Disability Rights Wisconsin 131 W Wilson St Ste 700	35-1279037	0,120	J
	Madison, WI 53703			
IRC code section	501(c)(3)			
Method of valuation	.,,,			
Desc. of Non-Cash Asst.				
Purpose of grant	general support			
Name and address	End Domestic Abuse Wisconsin	39-1380437	19,657	0
	245 E Washington Ave			
	Madison, WI 53703			
IRC code section	501(c)(3)			
Method of valuation				
Desc. of Non-Cash Asst.	general support			
Purpose of grant	<u> </u>			
Name and address	Fair Housing Center - Greater Madison	39-1286685	5,473	0
	600 E Mason St Ste 401 Milwaukee, WI 53202			
IRC code section	501(c)(3)			
Method of valuation	35 1(5)(5)			
Desc. of Non-Cash Asst.				
Purpose of grant	general support			
Name and address	Fair Wisconsin Education Fund	02-0559730	12,163	0
	203 S Paterson St Ste 100		•	
	Madison, WI 53703			
IRC code section	501(c)(3)			
Method of valuation				
Desc. of Non-Cash Asst.				
Purpose of grant	general support			
Name and address	Freedom Inc	43-2023570	6,060	0
	601 Bayview			

Schedule I, Part IV, Stater	ment 1	COMMUNITY SHA	RES OF WISCON	ISIN INC
	Madison, WI 53715			
IRC code section	501(c)(3)			
Method of valuation				
Desc. of Non-Cash Asst.				
Purpose of grant	general support			
Name and address	Friends of Wisconsin State Parks	39-1882260	21,864	0
	PO Box 2271			
	Madison, WI 53701			
IRC code section	501(c)(3)			
Method of valuation				
Desc. of Non-Cash Asst.				
Purpose of grant	general support			
Name and address	Gathering Waters Conservancy	39-1805090	11,369	0
	211 S Paterson St Ste 270			
	Madison, WI 53703			
IRC code section	501(c)(3)			
Method of valuation				
Desc. of Non-Cash Asst.				
Purpose of grant	general support			
Name and address	Gay Straight Alliance for Safe Schools	20-4088208	26,081	0
	122 E Olin Ave Ste 219			
	Madison, WI 53713			
IRC code section	501(c)(3)			
Method of valuation				
Desc. of Non-Cash Asst.				
Purpose of grant	general support		<del></del>	
Name and address	Grassroots Empowerment Project	39-2022805	6,633	0
	PO Box 8683			
	Madison, WI 53708			
IRC code section	501(c)(3)			
Method of valuation				
Desc. of Non-Cash Asst.				
Purpose of grant	general support			
Name and address	Housing Initiatives	39-1781842	8,942	0
	1110 Ruskin St			
170	Madison, WI 53704			
IRC code section	501(c)(3)			
Method of valuation				
Desc. of Non-Cash Asst. Purpose of grant	gonomi gunnari			
<del></del>	general support	· · · · · · · · · · · · · · · · · · ·		
Name and address	Interfaith Coalition for Worker Justice	39-1966613	6,144	0
	2300 S Park St Ste 115			
100 4	Madison, WI 53713			
IRC code section	501(c)(3)			
Method of valuation  Desc. of Non-Cash Asst.				
Purpose of grant	general support			
<del></del>			·	
Name and address	League of Women Voters of Wis Ed Network	39-1609121	13,861	0
	612 W Main St Ste 200			
100 4 4'	Madison, WI 53703			
IRC code section	501(c)(3)			
Method of valuation				
Desc. of Non-Cash Asst.	nanaral cunnort			
Purpose of grant	general support	<del> </del>		
Name and address	Legal Action of Wisconsin	39-1077192	11,622	0
	31 S Mills St			
	Madison, WI 53715			

Schedule I, Part IV, Staten	nent 1	COMMUNITY SHA	RES OF WISCON	SIN INC
IRC code section	501(c)(3)			
Method of valuation				
Desc. of Non-Cash Asst.				
Purpose of grant	general support			
Name and address	Madison Area Community Land Trust	39-1680095	5,281	0
	1501 Williamson St			
	Madison, WI 53703			
IRC code section	501(c)(3)			
Method of valuation				
Desc. of Non-Cash Asst.				
Purpose of grant	general support			
Name and address	Madison Audubon Society	39-1393389	10,009	0
	1400 E Washington Ave Ste 170			
	Madison, WI 53703			
IRC code section	501(c)(3)			
Method of valuation				
Desc. of Non-Cash Asst.				
Purpose of grant	general support			
Name and address	Midwest Environmental Advocates	39-2006475	5,934	0
	612 W Main St Ste 302			
	Madison, WI 53703			
IRC code section	501(c)(3)			
Method of valuation				
Desc. of Non-Cash Asst.				
Purpose of grant	general support			
Name and address	NARAL Pro-Choice Wi Foundation	39-2006641	11,502	0
	612 W Main St Ste 200			
	Madison, WI 53703			
IRC code section	501(c)(3)			
Method of valuation				
Desc. of Non-Cash Asst.				
Purpose of grant	general support			
Name and address	New Harvest Foundation	39-1505075	8,991	0
	PO Box 1786			
	Madison, WI 53701			
IRC code section	501(c)(3)			
Method of valuation				
Desc. of Non-Cash Asst.				
Purpose of grant	general support			
Name and address	Nuestro Mundo	03-0463659	7,155	0
	PO Box 3193			
	Madison, WI 53725			
IRC code section	501(c)(3)			
Method of valuation				
Desc. of Non-Cash Asst.				
Purpose of grant	general support		<del></del>	
Name and address	OutReach	39-1336583	15,121	0
	600 Williamson St Ste P1			
	Madison, WI 53703			
IRC code section	501(c)(3)			
Method of valuation				
Desc. of Non-Cash Asst.				
Purpose of grant				
	general support			
Name and address	general support Project Home	39-1279307	13,176	0
Name and address	_ <del></del>	39-1279307	13,176	0
Name and address	Project Home	39-1279307	13,176	0

Schedule I, Part IV, Stater	nent 1	COMMUNITY SHA	RES OF WISCON	SIN INC
Method of valuation				
Desc. of Non-Cash Asst.				
Purpose of grant	general support			
Name and address	Rape Crisis Center	23-7329215	32,888	0
	2801 Coho St Ste 301			
	Madison, WI 53713			
IRC code section	501(c)(3)			
Method of valuation				
Desc. of Non-Cash Asst.  Purpose of grant	general support			
	<u> </u>			
Name and address	REAP Food Group	39-2043788	10,230	0
	306 E Wilson St Ste 2E			
IRC code section	Madison, WI 53703			
Method of valuation	501(c)(3)			
Desc. of Non-Cash Asst.				
Purpose of grant	general support			
Name and address	River Alliance of Wisconsin	39-1781842	16,070	
Name and address	306 E Wilson St 2W	35-1701042	10,070	·
	Madison, WI 53703			
IRC code section	501(c)(3)			
Method of valuation	33.(3)(3)			
Desc. of Non-Cash Asst.				
Purpose of grant	general support			
Name and address	Sierra Club Foundation	94-6069890	17,061	0
Name and address	222 S Hamilton 1	34-0003030	17,001	J
	Madison, WI 53703			
IRC code section	501(c)(3)			
Method of valuation	(-)(-)			
Desc. of Non-Cash Asst.				
Purpose of grant	general support			
Name and address	Sustain Dane	43-1953180	6,423	0
	131 W Wilson St Ste 200			
	Madison, WI 53703			
IRC code section	501(c)(3)			
Method of valuation				
Desc. of Non-Cash Asst.				
Purpose of grant	general support			
Name and address	Tenant Resource Center	39-1360105	8,497	0
	1202 Williamson St 102			
	Madison, WI 53703			
IRC code section	501(c)(3)			
Method of valuation				
Desc. of Non-Cash Asst.				
Purpose of grant	general support			
Name and address	The Progressive	39-0773233	9,646	0
	409 E Main St			
	Madison, WI 53703			
IRC code section	501(c)(3)			
Method of valuation				
Desc. of Non-Cash Asst.				
Purpose of grant	general support			
Name and address	UNIDOS Against Domestic Violence	39-1967912	6,944	0
	128 E Olin Ave Ste 201			
	Madison, WI 53713			
IRC code section	501(c)(3)			
Method of valuation				

Schedule I, Part IV, State	ment 1	COMMUNITY SHA	RES OF WISCON	ISIN INC
Desc. of Non-Cash Asst.				
Purpose of grant	general support			
Name and address	Wisconsin Coalition Against Sexual Assault 2801 W Beltline Highway Ste 202	39-1560486	7,181	0
	Madison, WI 53713			
IRC code section	501(c)(3)			
Method of valuation				
Desc. of Non-Cash Asst.				
Purpose of grant	general support			
Name and address	Wi Council of the Blind & Visually Impaired 754 Williamson St	39-0977746	7,032	0
	Madison, WI 53703			
IRC code section	501(c)(3)			
Method of valuation				
Desc. of Non-Cash Asst.				
Purpose of grant	general support			
Name and address	Wisconsin Council on Children and Families	39-0806301	14,091	0
	555 W Washington Ave Ste 200			
	Madison, WI 53703			
IRC code section	501(c)(3)			
Method of valuation				
Desc. of Non-Cash Asst. Purpose of grant	general support			
Name and address	Wisconsin Democracy Campaign	39-1911104	15,263	0
	203 S Paterson St Ste 100			
IRC code section	Madison, WI 53703			
Method of valuation	501(c)(3)			
Desc. of Non-Cash Asst.				
Purpose of grant	general support			
Name and address	Wisconsin Early Childhood Association	39-1345572	0.400	
Name and address	744 Williamson St Ste 200	39-1345572	9,163	0
	Madison, WI 53703			
IRC code section	501(c)(3)			
Method of valuation				
Desc. of Non-Cash Asst.				
Purpose of grant	general support			
Name and address	Wisconsin Family Ties	39-1626869	7,487	0
	16 N Carroll St Ste 230		.,	_
	Madison, WI 53703			
IRC code section	501(c)(3)			
Method of valuation				
Desc. of Non-Cash Asst.				
Purpose of grant	general support			
Name and address	Wisconsin Literacy	39-1279307	12,556	0
	211 S Patterson St 260			
	Madison, WI 53703			
IRC code section	501(c)(3)			
Method of valuation				
Desc. of Non-Cash Asst.	annual automat			
Purpose of grant	general support			
Name and address	Wisconsin Wetlands Association	39-1852601	10,866	0
	214 N Hamilton St Ste 201			
IDC and another	Madison, WI 53703			
IRC code section Method of valuation	501(c)(3)			
Desc. of Non-Cash Asst.				
Desc. of Non-Cash Asst.				

Schedule I, Part IV, State	ement 1	COMMUNITY SHA	COMMUNITY SHARES OF WISCONSIN IN		
Purpose of grant	general support				
Name and address	Women in Transition	39-1035770	11,604	0	
	2842 Moland St				
	Madison, WI 53704				
IRC code section	501(c)(3)				
Method of valuation					
Desc. of Non-Cash Asst	•				
Purpose of grant	general support				
Name and address	WORT 899 FM Community Radio	23-7328965	28,410		
	118 S Bedford St				
	Madison, WI 53703				
IRC code section	501(c)(3)				
Method of valuation					
Desc. of Non-Cash Asst					
Purpose of grant	general support				

4

#### SCHEDULE O (Form 990 or 990-EZ)

### 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.

20**13** 

Employer identification number

Open to Public Inspection

Department of the Treasury Internal Revenue Service Name of the organization ► Attach to Form 990 or 990-EZ.
► Information about Schedule O (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

39-1172378 **COMMUNITY SHARES OF WISCONSIN INC** Form 990, Part VI, Section B, Line 11b - A draft of the Form 990 is reviewed by the President, Treasurer, Executive Director, and Financial Director before it is filed with the IRS. Form 990, Part VI, Section B, Line 12c - The conflict of interest policy is reviewed with each new board member during their orientation and is reviewed by the entire board of directors at the first meeting each year. A board member with a conflict is asked to abstain from participating in the discussion and voting on the particular transaction. Form 990, Part VI, Section B, Line 15 - The personnel committee annually conducts a performance review of the Executive Director. The personnel committee uses data for comparable positions at similar agencies to determine compensation for the Executive Director. Form 990, Part VI, Section C, Line 19 - The organization makes its governing documents and conflict of interest policy available to the public upon request. Financial statements are included in the organization's annual report posted on the organization's website.

#### Schedule O, Statement 1

COMMUNITY SHARES OF WISCONSIN INC 39-1172378

Form 990

Page 1 Line Number

Reasonable Cause Explanations

Explanation

Form 8868 was filed and approved The new due date is August 15, 2014



## **FINANCIAL STATEMENTS**

December 31, 2013 and 2012

## CONTENTS

Independent Auditor's Report			1
Statements of Financial Position	•		2
Statements of Activities			3
Statements of Functional Expenses			5
Statements of Cash Flows .			7
Notes to Financial Statements			8



#### INDEPENDENT AUDITOR'S REPORT

To the Board of Directors
Community Shares of Wisconsin, Inc.
Madison, Wisconsin

We have audited the accompanying financial statements of Community Shares of Wisconsin, Inc., which comprise the statements of financial position as of December 31, 2013 and 2012, and the related statements of activities, functional expenses, and cash flows for the years then ended, and the related notes to the financial statements

#### Management's Responsibility for the Financial Statements

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

#### Auditor's Responsibility

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

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

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

#### **Opinion**

In our opinion, the financial statements referred to above present fairly, in all material respects, the financial position of Community Shares of Wisconsin, Inc. as of December 31, 2013 and 2012, and the changes in its net assets and its cash flows for the years then ended in accordance with accounting principles generally accepted in the United States of America.

Wegner CPAs LLP

Wegner CPAs, LLP Madison, Wisconsin May 9, 2014

# COMMUNITY SHARES OF WISCONSIN, INC. STATEMENTS OF FINANCIAL POSITION December 31, 2013 and 2012

ASSETS	2013	2012
CURRENT ASSETS Cash	\$ 232,278	\$ 197,927
Campaign pledges receivable - net	719,397	720,345
Miscellaneous receivables	45,560	27,400
Prepaid expenses	7,960	4,866_
Total current assets	1,005,195	950,538
EQUIPMENT		
Equipment	34,376	39,493
Less accumulated depreciation	27,340	31,735
Equipment - net	7,036	7,758
ASSETS DESIGNATED FOR LONG-TERM RESERVES	<b></b>	<b>27.00</b> :
Cash	87,624	87,624
Certificates of deposit	30,946	30,852
Total assets designated for long-term reserves	118,570	118,476
Total assets	\$ 1,130,801	\$ 1,076,772
LIABILITIES AND NET ASSETS CURRENT LIABILITIES		
Accounts payable	\$ 10,317	\$ 14,954
Accrued payroll and taxes	23,345	18,214
Due to designated member agencies	549,262	541,136
Total liabilities	582,924	574,304
NET ASSETS		
UNRESTRICTED		22.242
Undesignated	161,223	96,618
Designated by the Board of Directors for Undesignated distribution fund	32,000	32,000
Equipment fund	11,400	11,400
Operating contingency fund	75,170	75,076
Total board designated	118,570	118,476
Total unrestricted	279,793	215,094
Temporarily restricted	268,084	287,374
Total net assets	547,877	502,468
Total liabilities and net assets	\$ 1,130,801	\$ 1,076,772

# COMMUNITY SHARES OF WISCONSIN, INC. STATEMENTS OF ACTIVITIES Years ended December 31, 2013 and 2012

REVENUE, GAINS, AND OTHER SUPPORT Campaign contributions for next year	Unrestricted \$ -	Temporarily Restricted \$ 766,623	2013 Total \$ 766,623	
Less donor designations to member agencies Less allowance for uncollectible pledges	-	(461,159) (37,380)	(461,159) (37,380)	
Total campaign contributions	-	268,084	268,084	
Other contributions Membership dues Special events	445,792 40,922 19,716	- -	445,792 40,922 19,716	
Administrative fees Interest income Other	94 72,051	-	94 72,051	
Total revenue, gains, and other support	578,575	268,084	846,659	
EXPENSES Program services Supporting activities	561,340	-	561,340	
Management and general Fundraising Campaign fundraising	118,531 100,070 21,309	- - -	118,531 100,070 21,309	
Total supporting activities	239,910	-	239,910	
Total expenses	801,250	-	801,250	
NET ASSETS RELEASED FROM RESTRICTIONS Campaign contributions for current year Release of other time restrictions Release of purpose restrictions	287,374 - 	(287,374) - 	-	
Change in net assets	64,699	(19,290)	45,409	
Net assets - beginning of year	215,094	287,374	502,468	
Net assets - end of year	\$ 279,793	\$ 268,084	\$ 547,877	

Unrestricted	Temporarily Restricted	2012 Total
\$ - -	\$ 769,783 (446,861) (35,548)	\$ 769,783 (446,861) (35,548)
-	287,374	287,374
322,387 40,472 18,448 21,000 183 40,276	- - - - -	322,387 40,472 18,448 21,000 183 40,276
442,766	287,374	730,140
508,122	-	508,122
118,363 70,132 23,851	- - -	118,363 70,132 23,851
212,346		212,346
720,468	-	720,468
274,460 5,175 15,098	(274,460) (5,175) (15,098)	- - -
17,031	(7,359)	9,672
198,063	294,733	492,796
\$ 215,094	\$ 287,374	\$ 502,468

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# COMMUNITY SHARES OF WISCONSIN, INC. STATEMENTS OF FUNCTIONAL EXPENSES Years ended December 31, 2013 and 2012

2013	Program Services	Management and General
Personnel Professional fees Copying and printing Training and travel Postage	294,315 21,033 9,837 7,193 1,643	94,175 7,059 527 9 205
Insurance Office Occupancy Advertising Dues and publications	3,043 17,437 35,079 8,485 4,295	1,044 4,427 8,375 1,179
Telephone Member allocations Community development grants Miscellaneous Depreciation	5,055 144,176 3,000 1,525 5,224	559 - - 607 365
Total expenses	\$ 561,340	\$ 118,531
	Program	<b>M</b>
2012	Services	Management and General
Personnel Professional fees Copying and printing Training and travel Postage		
Personnel Professional fees Copying and printing Training and travel	\$ 271,682 13,962 7,257 4,673	\$ 94,704 7,587 532 25
Personnel Professional fees Copying and printing Training and travel Postage Insurance Office Occupancy Advertising	\$ 271,682 13,962 7,257 4,673 1,397 2,969 16,257 32,114 8,469	\$ 94,704 7,587 532 25 104 1,025 4,432 7,757

Fu	ndraising_		ampaign ndraising	 2013 Total
	62,930 5,196 5,969 31 5,579		11,442 1,875 4,530 163 1,146	\$ 462,862 35,163 20,863 7,396 8,573
	697 1,583 5,597 11,519		127 832 1,018 - -	4,911 24,279 50,069 21,183 4,295
	373 - - 353 243		68 - - 64 44	 6,055 144,176 3,000 2,549 5,876
\$	100,070	\$	21,309	\$ 801,250
Fu	ındraising		ampaign ndraising	 2012 Total
Fu \$	47,995 2,734 3,161 4 3,051			\$
-	47,995 2,734 3,161 4	<u>Fu</u>	14,141 1,875 4,835 167	\$ Total 428,522 26,158 15,785 4,869
-	47,995 2,734 3,161 4 3,051 519 1,284 3,931	<u>Fu</u>	14,141 1,875 4,835 167 546 153 810	\$ Total  428,522 26,158 15,785 4,869 5,098  4,666 22,783 44,960 16,377

COMMUNITY SHARES OF WISCONSIN, INC. STATEMENTS OF CASH FLOWS Years ended December 31, 2013 and 2012

	 2013	 2012
CASH FLOWS FROM OPERATING ACTIVITIES Change in net assets Adjustments to reconcile change in net assets	\$ 45,409	\$ 9,672
to net cash flows from operating activities Allowance for uncollectible campaign pledges Depreciation (Increase) decrease in assets	1,833 5,876	1,314 4,164
Campaign pledges receivable Miscellaneous receivables Due from Community CHIP - related party	(885) (18,160)	(34,965) 4,270 59,176
Prepaid expenses Increase (decrease) in liabilities	(3,094)	70
Accounts payable Accrued payroll and taxes Due to designated member agencies	 (4,637) 5,131 8,126	 6,516 649 23,105
Net cash flows from operating activities	39,599	73,971
CASH FLOWS FROM INVESTING ACTIVITIES Purchases of and interest retained in assets designated for long-term reserves Purchases of equipment	 (94) (5,154)	 (183) (5,108)
Net cash flows from investing activities	(5,248)	 (5,291)
Net change in cash	34,351	68,680
Cash - beginning of year	 197,927	 129,247
Cash - end of year	\$ 232,278	\$ 197,927

NOTES TO FINANCIAL STATEMENTS
December 31, 2013 and 2012

Community Shares of Wisconsin, Inc. (Community Shares), located in Madison, Wisconsin, is a nonprofit organization that provides support for organizations in charitable and educational activities. In addition, Community Shares provides community and citizen education for the continuation of private, nonprofit organizations in south-central Wisconsin. The significant accounting policies followed are described below to enhance the usefulness of the financial statements to the reader.

#### NOTE 1 - SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES

#### **Basis of Presentation**

Community Shares is required to report information regarding its financial position and activities according to three classes of net assets

Unrestricted net assets—Net assets that are not restricted by donors. Designations are voluntary board-approved segregations of unrestricted net assets for specific purposes, projects, or investments.

Temporarily restricted net assets—Net assets whose use has been limited by donor-imposed time restrictions or purpose restrictions. Temporarily restricted net assets at December 31, 2013 and 2012 consisted of contributions restricted for distributions to member agencies in the subsequent year

Permanently restricted net assets—Net assets that have been restricted by donors to be maintained by Community Shares in perpetuity

## **Campaign Pledges**

Campaign pledges consist of promises to give Unconditional promises to give are recognized as support in the period the promises are received. Conditional promises to give are recognized only when the conditions on which they depend are substantially met and the promises become unconditional. Promises to give receivable in less than one year are recorded at their net realizable value. All promises to give are receivable in less than one year.

The allowance for uncollectible pledges is maintained at a level adequate to absorb probable uncollectible pledges. Management determines the adequacy of the allowance based upon reviews of the campaign results from prior years. Pledges deemed uncollectible are charged to the allowance. Provisions for uncollectible pledges and recoveries previously charged off are added to the allowance.

#### Miscellaneous Receivables

Community Shares considers all miscellaneous receivables to be fully collectible. Accordingly, no allowance for doubtful accounts is presented. If amounts become uncollectible, they will be charged to operations when that determination is made.

#### **Donated Services**

Donated services that create or enhance nonfinancial assets or that require specialized skills, are provided by individuals possessing those skills, and would typically need to be purchased if not provided by donation, are recorded at their estimated fair values in the period received

NOTES TO FINANCIAL STATEMENTS December 31, 2013 and 2012

#### NOTE 1 - SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES (continued)

### **Equipment**

Acquisitions of equipment in excess of \$2,500 are capitalized. Purchases of equipment are recorded at cost. Donations of equipment are recorded as support at their estimated fair value on the date of donation. Such donations are reported as unrestricted support unless the donor has restricted the donated asset to a specific purpose. Assets donated with explicit restrictions regarding their use and contributions of cash that must be used to acquire equipment are reported as restricted support. Absent donor stipulations regarding how long those donated assets must be maintained, Community Shares reports expirations of donor restrictions when the donated or acquired assets are placed in service. Community Shares reclassifies temporarily restricted net assets to unrestricted net assets at that time. Depreciation is provided using the straight-line method over three to five years, the estimated useful lives of the assets.

#### **Member Agency Work Hours**

Each member agency of Community Shares is expected to complete designated work hours as required by the by-laws. Work hours can be completed in a variety of ways and are determined by the Funding Allocation Formula adopted annually by the Board of Directors. The value of member agency work hours has not been recognized in the financial statements since the criteria for recognition have not been met

#### **Expense Allocation**

The costs of providing the various programs and other activities have been summarized on a functional basis in the statements of activities and in the statements of functional expenses. Accordingly, certain costs have been allocated to program services and supporting activities benefited.

Program Services - consists of technical assistance to members and other nonprofit organizations, processing and distributing distributions to member nonprofits, administration of the Annual Awards, coordination of nonprofit workshops, participation in community programs and boards, and staffing of access committees and promotional activities related to member agencies' work and activities. Community Shares also coordinates Center for Change activities and programs. Community Shares records payments from Center for Change tenants as revenue and records all the expenses associated with Center for Change.

Management and General - consists of staff support for Board of Directors' meetings, in addition to staff support of Executive, Finance, and Personnel Committees, and performance of bookkeeping, accounting, budgeting, tax preparation, and audit functions

Fundraising - consists of coordination of special events, Community Shares' donor list maintenance and coordination of direct mail and major donor appeals

Campaign Fundraising - consists of staffing of Campaign Development Committee and execution of workplace payroll deduction campaigns

NOTES TO FINANCIAL STATEMENTS December 31, 2013 and 2012

#### NOTE 1 - SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES (continued)

#### **Estimates**

The preparation of financial statements requires management to make estimates and assumptions that affect certain reported amounts and disclosures. Accordingly, actual results could differ from those estimates.

#### **Endowment Fund**

Donations specified by the donor or the Board of Directors as endowment funds are placed in Community Shares' Endowment Fund operated by the Madison Community Foundation as further described in Note 2

#### **Income Tax Status**

Community Shares is a nonprofit public charity exempt under Internal Revenue Code Section 501(c)(3) and is therefore not subject to federal and state income or franchise taxes. The Community Shares' federal exempt organization returns are subject to examination by the Internal Revenue Service, generally for three years after they are filed. With few exceptions, Community Shares is no longer subject to such examinations for years before 2010.

#### Date of Management's Review

Management has evaluated subsequent events through May 9, 2014, the date which the financial statements were available to be issued.

#### NOTE 2 - ENDOWMENT FUND

The Community Shares of Wisconsin Endowment Fund (Fund) was established as a component fund of the Madison Community Foundation (Foundation) in 2002. The Foundation, as a charitable trust, serves the mutual interests of Dane County and those individuals and organizations who wish to enhance the quality of life in the community through charitable giving. Component funds of the Foundation are established by donors for the benefit of the community, and, when these funds are established, donors may indicate what organizations or causes should benefit from distributions from the fund. However, donors also grant the Foundation variance power that allows the Foundation to modify the donors' stipulations under certain circumstances as the Foundation monitors the changing needs of the community. Therefore, the Fund is not included in Community Shares' financial statements.

The amount available for annual distribution represents 4 75% percent of a rolling twelve-quarter average. Community Shares has elected to reinvest the annual distribution. All other interest and appreciation is added to the Fund. Principal may not be drawn from the Fund except with approval of the Foundation's Board of Governors. The fair value of the Fund at December 31, 2013 and 2012 was \$41,670 and \$32,713.

NOTES TO FINANCIAL STATEMENTS December 31, 2013 and 2012

#### NOTE 3 - CAMPAIGN PLEDGES RECEIVABLE

Campaign pledges receivable consisted of the following at December 31, 2013 and 2012

		2012		
2013 Campaigns 2012 Campaigns 2011 Campaigns	\$	695,305 61,473	\$	698,087 57,806
Campaign pledges receivable Less allowance for uncollectible pledges		756,778 37,381	· · · · · · · · · · · · · · · · · · ·	755,893 35,548
Campaign pledges receivable - net	\$	719,397	\$	720,345

#### **NOTE 4 - OTHER CONTRIBUTIONS**

Other contributions consisted of the following for 2013 and 2012

	 2013		2012
CHIP contributions	\$ 226,641	\$	187,923
CSOW donors Corporate contributions	144,479 43,586		89,865 36,885
In-kind	12,040		11,561
Prior year campaign adjustment Miscellaneous	 (6,844) 25,890		(5,342) 1,495
Other contributions	\$ 445,792	\$	322,387

#### NOTE 5 - DESCRIPTION OF LEASING ARRANGEMENTS

In February 2011 Community Shares began leasing office space under an operating lease agreement that expires in April 2016. The lease requires monthly payments of \$2,903 with annual increases of approximately 3% Community Shares also leases office space for the Center for Change Resource under a month-to-month lease arrangement requiring monthly payments of \$465

Community Shares leases a copier under a 36-month operating lease that commenced in March 2012 and requires monthly payments of \$138

Lease expense was \$40,401 and \$41,477 for 2013 and 2012

Future minimum lease payments are \$37,135, \$36,730, and \$12,260 for 2014, 2015, and 2016

NOTES TO FINANCIAL STATEMENTS December 31, 2013 and 2012

#### NOTE 6 - IN-KIND CONTRIBUTIONS

Community Shares received in-kind contributions in the amount of \$12,040 for 2013. Of that amount, \$8,235 was advertising received for program services and \$3,805 was printing and professional services received for program services.

Community Shares received in-kind contributions in the amount of \$11,561 for 2012. Of that amount, \$8,220 was advertising received for program services and \$3,341 was printing and professional services received for program services.

#### **NOTE 7 - RETIREMENT PLAN**

Community Shares sponsors a 401(k) retirement plan. The retirement plan provides for discretionary contributions for eligible employees who are at least 21 years old and have worked for Community Shares for at least one year. Employees are 100% vested in all contributions made on their behalf after completion of two years of service. A year of service is defined as at least 1,000 hours of service during the plan year. The Board approved a 5% contribution to the retirement plan for 2013 and 2012. Retirement expense was \$13,668 and \$12,298 for 2013 and 2012.

### NOTE 8 - RELATED PARTY TRANSACTIONS - COMMUNITY CHIP

Through the end of 2012, Community Shares and Community CHIP had member agencies in common, and board members representing those agencies served on both organizations' boards Community CHIP was a 501(c)(4) organization formed in 1971 to educate the community in regard to, and develop support for, all kinds of community organizations and projects

Community CHIP paid an administrative assessment fee to Community Shares for administrative services rendered. The administrative fees revenue-for Community Shares was \$21,000 for 2012.

In 2012, Community CHIP transferred excess annual fundraising revenue to Community Shares in the form of a grant. The grant to Community Shares was \$187,923 for 2012.

On January 1, 2013 the two organizations merged Community Shares is the surviving entity in the merger. The assets and liabilities that Community Shares assumed from Community CHIP in conjunction with the merger were immaterial.