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#### **Return of Private Foundation**

or Section 4947(a)(1) Trust Treated as Private Foundation

OMB No 1545-0052

Department of the Treasury Internal Revenue Service

▶ Do not enter Social Security numbers on this form as it may be made public.

▶ Information about Form 990-PF and its separate instructions is at www.irs.gov/form990pf. Open to Public Inspection

		dar year 2013 or tax year beginning JUNE	.1 ,	, 2013, and	ending	MAY 31	, 20 14
Nar	ne of fo	undation			A Employe	r identification numb	er
		STO FOUNDATION				39-6045769	
Nur	nber an	d street (or P O box number if mail is not delivered to street address)		Room/suite	B Telephon	e number (see instructi	ons)
		TRE RD		310		715-839-2175	<u></u>
City	or tow	n, state or province, country, and ZIP or foreign postal code			C If exempt	tion application is pend	ling, check here ▶ 🔲
		TON DE 19805			1		
G	Check	all that apply:  Initial return  Initial return	•	oublic charity	D 1. Foreig	n organizations, check	here . ▶ _
		Final return Amended			2. Foreig	n organizations meetin	g the 85% test,
		Address change Name cha		<u> </u>	check	here and attach comp	tation · ▶
		type of organization: Section 501(c)(3) exempt p				foundation status was 07(b)(1)(A), check here	
		n 4947(a)(1) nonexempt charitable trust  Other tax			-		<u> </u>
		arket value of all assets at J Accounting method				ndation is in a 60-mont	
	ena oi line 16	year (from Part II, col. (c),			under se	ction 507(b)(1)(B), chec	k nere ▶
_			e on casn basis. T	. <del>)</del>		<b>1</b>	1
Pa	art I	Analysis of Revenue and Expenses (The total of amounts in columns (b), (c), and (d) may not necessarily equal	(a) Revenue a		t investment	(c) Adjusted net	(d) Disbursements for charitable
		the amounts in column (a) (see instructions).)	books	e   ' '	ncome	ıncome	purposes (cash basis only)
_	4			_			(Gabit Babis Gilly)
	1 2	Contributions, gifts, grants, etc., received (attach schedule)  Check ▶ ☐ if the foundation is not required to attach Sch B		<del>+</del>			
	3	Interest on savings and temporary cash investments		9079	00070	<del>-</del> -	
	4	Dividends and interest from securities		8861	99079 718861	<u> </u>	
	5a	Gross rents	<del></del>	0001	/ 10001		
	Ь	Net rental income or (loss)					
a)	6a	Net gain or (loss) from sale of assets not on line 10					
Ž	ь	Gross sales price for all assets on line 6a					
Revenue	7	Capital gain net income (from Part IV, line 2)			<del>-</del> · · ·		
2	8	Net short-term capital gain					
	9	Income modifications					
	10a	Gross sales less returns and allowances			_		-
:	Ь	Less: Cost of goods sold					
	c	Gross profit or (loss) (attach schedule)					
	11	Other income (attach schedule)					
	12	Total. Add lines 1 through 11	81	7940	817940		
<u></u>	13	Compensation of officers, directors, trustees, etc.					
Se	14	Other employee salaries and wages					
Expenses	15	Pension plans, employee beinefits D					
×	16a	Legal fees (attach schedule)					
9	b	Accounting fees (attach schedule)					
tive	С	Other professional fees (attach/schedule)	2	20881	16705		4176
Ħ	17	Interest					
Ę.	18	Taxes (attach schedule) (seeinstructions) Depreciation (attach schedule) and deptetion		8341	473		
Ē	19	_					
A	20	Occupancy					
פַ	21	Travel, conferences, and meetings			~		
ā	22	Printing and publications					
пg	23	Other expenses (attach schedule)	1	14037	14037		
ati	24	Add lines 13 through 23					
perating and Administrat	OF.			13259	31215	<del> </del>	4176
ŏ	25	Contributions, gifts, grants paid	1	00270	2404-	1	1000270
	26	Total expenses and disbursements. Add lines 24 and 25 Subtract line 26 from line 12:	104	13529	31215		1004446
	27			25500			
	a	Excess of revenue over expenses and disbursements  Net investment income (if negative, enter -0-)	-22	25588	700705		
	b	Adjusted net income (if negative, enter -0-)			786725		_
		Adjusted Het income (in negative, enter -0-)	1			1	1

For Paperwork Reduction Act Notice, see instructions.

Cat No 11289X

Form **990-PF** (2013)

Da	rt II	Ralance Sheets Attached schedules and amounts in the description column	Beginning of year	End of	<u> </u>
Fe	rt II	Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only. (See instructions)	(a) Book Value	(b) Book Value	(c) Fair Market Value
	1	Cash—non-interest-bearing	-338633	-546649	-546649
	2	Savings and temporary cash investments	8981077	8971372	8971372
	3	Accounts receivable ►	_		
		Less: allowance for doubtful accounts ▶			
	4	Pledges receivable ▶			
		Less: allowance for doubtful accounts ▶			
	5	Grants receivable			
	6	Receivables due from officers, directors, trustees, and other			
		disqualified persons (attach schedule) (see instructions)			
	7	Other notes and loans receivable (attach schedule) ▶		_	
		Less: allowance for doubtful accounts ▶			
S.	8	Inventories for sale or use			
Assets	9	Prepaid expenses and deferred charges			
As	10a	Investments—U.S. and state government obligations (attach schedule)			
	b	Investments - corporate stock (attach schedule)	1568357	1568357	10778417
	С	Investments - corporate bonds (attach schedule)			
	11	Investments—land, buildings, and equipment: basis ▶			
		Less: accumulated depreciation (attach schedule) ▶			
	12	Investments mortgage loans			
	13	Investments—other (attach schedule)			
	14	Land, buildings, and equipment: basis ▶			
		Less: accumulated depreciation (attach schedule) ▶	1 i		
	15	Other assets (describe ▶ )			-
	16	Total assets (to be completed by all filers-see the			
		instructions. Also, see page 1, item I)	10210801	9993080	19203140
	17	Accounts payable and accrued expenses	1688	1686	
m	18	Granto payable Contributions Mayable			
<u>ë</u>	19	Deferred revenue			
Liabilities	20	Loans from officers, directors, trustees, and other disqualified persons			
ia t	21	Mortgages and other notes payable (attach schedule)			
	22	Other liabilities (describe ► FEDERAL EXCISE TAX )	-10025	-2158	
	23	Total liabilities (add lines 17 through 22)	-8337	-472	
and Balances		Foundations that follow SFAS 117, check here			
Ĕ	24	Unrestricted			
<u>e</u>	25	Temporarily restricted			
	26	Permanently restricted			
屲		Foundations that do not follow SFAS 117, check here ▶ □ and complete lines 27 through 31.			
ō	27	Capital stock, trust principal, or current funds			
Net Assets or	28	Paid-in or capital surplus, or land, bldg., and equipment fund	2383002	2383002	
SS	29	Retained earnings, accumulated income, endowment, or other funds	7836137	7610550	
Ž	30	Total net assets or fund balances (see instructions)	10219139	9993552	
횰	31	Total liabilities and net assets/fund balances (see			
		instructions)	10210802	9993080	
Pa	rt III				
1		al net assets or fund balances at beginning of year-Part II, colu			
	end	-of-year figure reported on prior year's return)		1	10219139
2		er amount from Part I, line 27a			-225588
3	Oth	er increases not included in line 2 (itemize) ▶		3	
4	Add	illines 1, 2, and 3		4	9993551
5	Dec	creases not included in line 2 (itemize) ► al net assets or fund balances at end of year (line 4 minus line 5)—		5	0
_	Tota	al net assets or fund balances at end of year (line 4 minus line 5)—	Part II, column (b), lin	e 30 <b>6</b>	9993551
					5 000 DE (0040)

• ;

Part	V Capital Gains and	Losses for Tax on Investm	ent Income				
	(a) List and describe the 2-story brick warehouse	kind(s) of property sold (e.g., real estate e, or common stock, 200 shs. MLC Co.)	,	(b) How acquired P—Purchase D—Donation	(c) Date a	•	(d) Date sold (mo , day, yr )
1a							
<u>b</u>							
<u>c</u>							
<u>d</u>				-			
<u>e</u>	— т						
	(e) Gross sales price	(f) Depreciation allowed (or allowable)		r other basis ense of sale			ın or (loss) (f) mınus (g)
a			<u> </u>				······································
b							
			<u>-</u>				<del></del>
d							
е							
	Complete only for assets show	ving gain in column (h) and owned l	by the foundation	on 12/31/69	(1)	Gains (Co	(h) gain minus
	(i) F M V as of 12/31/69	(j) Adjusted basis as of 12/31/69		ss of col (i)		(k), but no	t less than -0-) <b>or</b> from col (h))
a							
<u> </u>			<u>-</u>				
							<u>-</u>
d							<del></del>
<u>е</u>		( If gain	also enter in Pa	art Lline 7	ļ		
2	Capital gain net income or	(not canital loce) /	enter -0- in Pa		2		
3	If gain, also enter in Part I	or (loss) as defined in sections , line 8, column (c) (see instruc	tions). If (loss)	), enter -0- in <b>\</b>			
					3		
Part		er Section 4940(e) for Redurate foundations subject to the					
Was 1	s," the foundation does not o	section 4942 tax on the distribution and the distribution and the distribution 4940(e). D	o not complete	this part.			☐ Yes ☐ No
	(a)	unt in each column for each yea	ar; see the instr		aking any	entries.	(d)
Cal	Base period years endar year (or tax year beginning in)	(b) Adjusted qualifying distributions	Net value o	(c) of noncharitable-use a	ssets		stribution ratio divided by col (c))
	2012	161	7470	204	73443		.079003
	2011		9564		07013		.033870
	2010		4546		79636		.044865
	2009		8088		36531		.039432
	2008		1978	1910	07068		.046160
2 3	Total of line 1, column (d)	or the 5-year base period—divi					.024333
		ation has been in existence if le					.048666
4	Enter the net value of nonc	charitable-use assets for 2013 fi	rom Part X, line	5	. 4	_	19659165
5	Multiply line 4 by line 3 .				. 5		956733
6	Enter 1% of net investmen	t income (1% of Part I, line 27b	)		. 6		7867
7	Add lines 5 and 6				. 7	_	964600
8		ns from Part XII, line 4 ter than line 7, check the box in					1004446 1% tax rate See the

Part '		nstru	<u>ictioi</u>	1S)				
1a	Exempt operating foundations described in section 4940(d)(2), check here ▶ ☐ and enter "N/A" on line 1.			H				
	Date of ruling or determination letter: (attach copy of letter if necessary—see instructions)							
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check here ▶ ✓ and enter 1% of Part I, line 27b		7867					
С	All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of							
_	Part I, line 12, col. (b).							
2	2 Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)							
3	Add lines 1 and 2		7867					
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)							
5	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0		7867					
6	Credits/Payments:							
a b	2013 estimated tax payments and 2012 overpayment credited to 2013   6a   10025   Exempt foreign organizations—tax withheld at source   6b							
C	Tax paid with application for extension of time to file (Form 8868) . 6c							
d	Backup withholding erroneously withheld 6d							
7	Total credits and payments. Add lines 6a through 6d	1	0025	_				
8	Enter any <b>penalty</b> for underpayment of estimated tax. Check here  if Form 2220 is attached 8							
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed ▶ 9							
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid <b>10</b>		2158					
11	Enter the amount of line 10 to be: Credited to 2014 estimated tax ▶ 2158 Refunded ▶ 11			L				
	VII-A Statements Regarding Activities		Vaa	Na				
1a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any political campaign?	40	Yes	No ✓				
h	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see	1a		_				
-	Instructions for the definition)?	1b		1				
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials							
	published or distributed by the foundation in connection with the activities.	-						
C	· · · · · · · · · · · · · · · · · ·							
d	d Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year:  (1) On the foundation. ▶ \$ (2) On foundation managers. ▶ \$							
е	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed							
	on foundation managers. ► \$			l				
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?	2		✓				
_	If "Yes," attach a detailed description of the activities.			İ				
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes							
40	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	3 4a		1				
4a b	If "Yes," has it filed a tax return on <b>Form 990-T</b> for this year?	4a 4b		<b>-</b>				
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?	5	-	1				
	If "Yes," attach the statement required by General Instruction T.	<u> </u>		_				
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either:		r					
	By language in the governing instrument, or							
	By state legislation that effectively amends the governing instrument so that no mandatory directions that	-	l					
_	conflict with the state law remain in the governing instrument?	6	<b>✓</b>					
7 8a	Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col. (c), and Part XV Enter the states to which the foundation reports or with which it is registered (see instructions) ▶	7_	✓					
oa	DELAWARE & WISCONSIN							
b	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General							
_	(or designate) of each state as required by General Instruction G? If "No," attach explanation	8b	~					
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or	_ <del></del>	T .					
	4942(j)(5) for calendar year 2013 or the taxable year beginning in 2013 (see instructions for Part XIV)? If "Yes,"	-						
	complete Part XIV	9		1				
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their							
	names and addresses	10	<u></u>	lacksquare				

Page 5
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Par	VII-A Statements Regarding Activities (continued)			
11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of section 512(b)(13)? If "Yes," attach schedule (see instructions)	11		1
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had advisory privileges? If "Yes," attach statement (see instructions)	12		1
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	✓	
14	Website address ► NONE  The backs are in care of ► IOAN CELLED.  Talcabana no. ► 71	5-839-	2110	
17	Located at N 2025 N MASTINGS WAY FAIL CLAIDS W//	1703-3		<b></b>
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of <b>Form 1041</b> —Check here			<b>▶</b> □
	and enter the amount of tax-exempt interest received or accrued during the year	-		_
16	At any time during calendar year 2013, did the foundation have an interest in or a signature or other authority		Yes	No
	over a bank, securities, or other financial account in a foreign country?	16		1
	See the instructions for exceptions and filing requirements for Form TD F 90-22.1. If "Yes," enter the name of the foreign country ▶			
Dor	t VII-B Statements Regarding Activities for Which Form 4720 May Be Required			
Par	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.	1	Yes	No
1a	During the year did the foundation (either directly or indirectly):	-		-
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person? Yes  No (2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person?			
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? Yes			
	(6) Agree to pay money or property to a government official? (Exception. Check "No" if the foundation agreed to make a grant to or to employ the official for a period after termination of government service, if terminating within 90 days.)	:		
b	If any answer is "Yes" to 1a(1)–(6), did <b>any</b> of the acts fail to qualify under the exceptions described in Regulations section 53.4941(d)-3 or in a current notice regarding disaster assistance (see instructions)?	1b		1
	Organizations relying on a current notice regarding disaster assistance check here			
С	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected before the first day of the tax year beginning in 2013?	1c		1
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation defined in section 4942(j)(3) or 4942(j)(5)):			
а	At the end of tax year 2013, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning before 2013?			
b	Are there any years listed in 2a for which the foundation is <b>not</b> applying the provisions of section 4942(a)(2) (relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to <b>all</b> years listed, answer "No" and attach statement—see instructions.)	2b		
С	If the provisions of section 4942(a)(2) are being applied to <b>any</b> of the years listed in 2a, list the years here.  ▶ 20 , 20 , 20 , 20			
3a				
b	disqualified persons after May 26, 1969; (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest; or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Schedule C, Form 4720, to determine if the foundation had excess business holdings in 2013.)	3b		
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a		1
b	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2013?	4b		/
		- 00		

Form 99	0-PF (2013)										F	age 6
Part	VII-B	<b>Statements Regarding Activities</b>			4720	May Be R	equire	<b>d</b> (continued	1)			
5a		e year did the foundation pay or incur a						· -				
		on propaganda, or otherwise attempt to						☐ Yes 📝 I	No			
		nce the outcome of any specific public										j
		ly or indirectly, any voter registration dri						☐ Yes 🗹 I				1
		de a grant to an individual for travel, stu						✓ Yes 🔲	No			
		le a grant to an organization other thar n 509(a)(1), (2), or (3), or section 4940(d				ation desc		। ∐Yes ☑।	No			,
		le for any purpose other than religious, ses, or for the prevention of cruelty to c				ary, or educ		∏Yes [∕]।	No			
b	If any answer is "Yes" to 5a(1)–(5), did any of the transactions fail to qualify under the exceptions described in Regulations section 53.4945 or in a current notice regarding disaster assistance (see instructions)? 5b							Ī				
		ions relying on a current notice regardin							П			<del></del> -
С	If the ans	wer is "Yes" to question 5a(4), does to the maintained expenditure responsibility	he four	ndation claim	exem	ption from			No.			
		ittach the statement required by Regula		_					110			i
<b>6</b> a	Did the fo	oundation, during the year, receive any onal benefit contract?	funds,	directly or in	directly		emiums	;	No			
b	•	oundation, during the year, pay premium					henefi		NO	6b	-	<b>√</b>
		o 6b, file Form 8870.	io, dii c	ony or mano	ony, on	a persona	Derien	. contract:				
7a		e during the tax year, was the foundation a	a party i	to a prohibite	d tax sh	elter transac	ction?	☐ Yes 🔽 I	No			
b		did the foundation receive any proceeds							_	7b		٦
Par		nformation About Officers, Direc	tors, 1	rustees, F	ounda	tion Man	agers,	<b>Highly Paid</b>	Em	ploy	ees,	_
		and Contractors							_			
	LIST all O	ficers, directors, trustees, foundation					<del>, `                                     </del>	<u>·</u>				
		(a) Name and address	hou	e, and average rs per week	i (lf r	mpensation not paid,	emplo	Contributions to oyee benefit plans	- 1 -	e) Experother a		
SEF A	TTACHED S	SCEDULE	devot	ed to position	91	ter -0-)	and der	erred compensation	<del>"</del>  -			
									十			
-												
							l					
2	Compenius "NONE."	sation of five highest-paid employee	es (oth	er than tho	se incl	uded on li	ne 1—	see instruction	ons)	). If no	one,	enter
	(a) Name and	address of each employee paid more than \$50,00	0	(b) Title, and a hours per v devoted to p	week -	(c) Compe	nsation	(d) Contributions employee benef plans and deferre compensation	fit (ed		nse aco allowar	
NONE										-		
				1								
				<u>.</u>					$\perp$			
						1						
Total	number -f	other employees noid over \$50,000				<u></u>						
TOTAL	number of	other employees paid over \$50,000 .	• •		· . · ·	• • •		<u></u> ▶		orm <b>99</b>	A DE	(00:0
									-	om <b>J</b>	O-FF	(2013)

Services   See instructions . If none, enter "NONE."	Part V	Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid I and Contractors (continued)	Em	ployees,
(a) Name and address of each person paid more than \$50,000 (b) Type of service (c) Compens ONE    Compension	3 F		ON	E."
obtain number of others receiving over \$50,000 for professional services >>  Part IX-A Summary of Direct Charitable Activities  Lest the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of organizations and other beneficiarnes served, conferences convened, research papers produced, etc.  1 2 3 4  Part IX-B Summary of Program-Related Investments (see instructions)  Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2  Amount  1 All other program-related investments See instructions  All other program-related investments See instructions  3 bital. Add lines 1 through 3				(c) Compensation
obtal number of others receiving over \$50,000 for professional services  Part IX-A Summary of Direct Charitable Activities  List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of organizations and other beneficianes served, conferences convened, research papers produced, etc.  1	NONE			
otal number of others receiving over \$50,000 for professional services				
otal number of others receiving over \$50,000 for professional services				
otal number of others receiving over \$50,000 for professional services				
otal number of others receiving over \$50,000 for professional services				
Part IX-B Summary of Direct Charitable Activities  List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of organizations and other beneficianes served, conferences convened, research papers produced, etc.  2  3  4  Part IX-B Summary of Program-Related Investments (see instructions)  Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2  Amount  All other program-related investments See instructions  3  All other program-related investments See instructions  All other program-related investments See instructions				
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Part IX-B Summary of Direct Charitable Activities  List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of organizations and other beneficianes served, conferences convened, research papers produced, etc.  2  3  4  Part IX-B Summary of Program-Related Investments (see instructions)  Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2  Amount  All other program-related investments See instructions  3  All other program-related investments See instructions  All other program-related investments See instructions				
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Part IX-B Summary of Direct Charitable Activities  List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of organizations and other beneficianes served, conferences convened, research papers produced, etc.  2  3  4  Part IX-B Summary of Program-Related Investments (see instructions)  Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2  Amount  All other program-related investments See instructions  3  All other program-related investments See instructions  All other program-related investments See instructions				
Part IX-B Summary of Direct Charitable Activities  List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of organizations and other beneficianes served, conferences convened, research papers produced, etc.  2  3  4  Part IX-B Summary of Program-Related Investments (see instructions)  Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2  Amount  All other program-related investments See instructions  3  All other program-related investments See instructions  All other program-related investments See instructions	Total n	umber of others receiving over \$50 000 for professional services	_	
List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of organizations and other beneficiaries served, conferences convened, research papers produced, etc.  1				
organizations and other beneficiaries served, conferences convened, research papers produced, etc  1	Part I	X-A Summary of Direct Charitable Activities		
2  Arrount  All other program-related investments See instructions	List th	e foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number zations and other beneficiaries served, conferences convened, research papers produced, etc	of	Expenses
3  Part IX-B Summary of Program-Related Investments (see instructions)  Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2  Amount  All other program-related investments See instructions  3  All other program-related investments See instructions	1			
3  Part IX-B Summary of Program-Related Investments (see instructions)  Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2  Amount  All other program-related investments See instructions  3  All other program-related investments See instructions				
3  Part IX-B Summary of Program-Related Investments (see instructions)  Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2  Amount  All other program-related investments See instructions  3  All other program-related investments See instructions				i
All other program-related investments See instructions  All other program-related investments See instructions  All other program-related investments See instructions  All other states of the following the fax year on lines 1 and 2  All other program-related investments See instructions  All other program-related investments See instructions	2			
All other program-related investments See instructions  All other program-related investments See instructions  All other program-related investments See instructions  All other states of the following the fax year on lines 1 and 2  All other program-related investments See instructions  All other program-related investments See instructions				
All other program-related investments See instructions  All other program-related investments See instructions  All other program-related investments See instructions  All other states of the following the fax year on lines 1 and 2  All other program-related investments See instructions  All other program-related investments See instructions				
Part IX-B Summary of Program-Related Investments (see instructions)  Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2  Amount  All other program-related investments See instructions  3  otal. Add lines 1 through 3	3			
Part IX-B Summary of Program-Related Investments (see instructions)  Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2  Amount  All other program-related investments See instructions  3  otal. Add lines 1 through 3				
Part IX-B Summary of Program-Related Investments (see instructions)  Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2  Amount  All other program-related investments See instructions  3  otal. Add lines 1 through 3				
Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2  Amount  All other program-related investments See instructions  3  Otal. Add lines 1 through 3	4			
Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2  Amount  All other program-related investments See instructions  3  Otal. Add lines 1 through 3				
Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2  Amount  All other program-related investments See instructions  3  Otal. Add lines 1 through 3				
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All other program-related investments. See instructions.  3	Descr	be the two largest program-related investments made by the foundation during the tax year on lines 1 and 2		Amount
All other program-related investments. See instructions  3  Otal. Add lines 1 through 3	1	•		
All other program-related investments. See instructions  3  Otal. Add lines 1 through 3				
All other program-related investments. See instructions  3  Otal. Add lines 1 through 3		•••••••••••••••••••••••••••••••••••••••		
3	2			
3				
3				
3	All oth	er program-related investments. See instructions		<del>  -</del>
otal. Add lines 1 through 3				
	Total.	Add lines 1 through 3	_	
	/	add miles temporally services and a service service services and a service services and a service services and a service service service services and a service service service services and a service service services and a service service service services and a service service services and a service service service services and a service service service service services and a service service service services and a service service service service service service services and a service service service service services and a service service service service services and a service service service services and a service		<u> </u> Form <b>990-PF</b> (201

Part	Minimum Investment Return (All domestic foundations must complete this part. Foreitsee instructions.)	ign found	ations,
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc.,	PER S	
_	purposes:		
a	Average monthly fair market value of securities	1a	11389621
ь	Average of monthly cash balances	1b	8568922
C	Fair market value of all other assets (see instructions)	1c	
d	Total (add lines 1a, b, and c)	1d	19958543
е	Reduction claimed for blockage or other factors reported on lines 1a and		
•	1c (attach detailed explanation)		
2	Acquisition indebtedness applicable to line 1 assets	2	
3	Subtract line 2 from line 1d	3	19958543
4	Cash deemed held for charitable activities. Enter 1 1/2 % of line 3 (for greater amount, see		
_	instructions)	4	299378
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	19659165
6	Minimum investment return. Enter 5% of line 5	6	982958
Part	and certain foreign organizations check here ▶ □ and do not complete this part.)	oundatioi	ns 
1	Mınımum investment return from Part X, line 6	1	982958
2a	Tax on investment income for 2013 from Part VI, line 5		
b	Income tax for 2013. (This does not include the tax from Part VI.) 2b	1	
С	Add lines 2a and 2b	2c	7867
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	975091
4	Recoveries of amounts treated as qualifying distributions	4	
5	Add lines 3 and 4	5	975091
6	Deduction from distributable amount (see instructions)	6	
7	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII,		
	<u>line 1 </u>	7	975091
Part	XII Qualifying Distributions (see instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:	T - I	
· a	Expenses, contributions, gifts, etc.—total from Part I, column (d), line 26	1a	1004445
b	Program-related investments—total from Part IX-B	1b	1004446
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc.,	· · · ·	
_	purposes	2	
3	Amounts set aside for specific charitable projects that satisfy the:		
а	Suitability test (prior IRS approval required)	3a	
ь	Cash distribution test (attach the required schedule)	3b	
4	Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4	4	1004446
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income	<del></del>	1004446
-	Enter 1% of Part I, line 27b (see instructions)	5	7007
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	7867 996579
•	Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating		
	qualifies for the section 4940(e) reduction of tax in those years.	y whether	the foundation
	7		000 DE

Part	VIII Undistributed Income (see instruction	ons)			
1	Distributable amount for 2013 from Part XI,	(a) Corpus	(b) Years prior to 2012	<b>(c)</b> 2012	(d) 2013
	line 7				975091
2	Undistributed income, if any, as of the end of 2013:				
а	Enter amount for 2012 only			1001366	·
b	Total for prior years: 20,20,20	<u> </u>			<del> </del>
3	Excess distributions carryover, if any, to 2013:				
а	From 2008				
b	From 2009				,
C	From 2010				
d	From 2011				
е	From 2012				
f	Total of lines 3a through e				
4	Qualifying distributions for 2013 from Part XII,				
	line 4: ► \$ 1004446				
а	Applied to 2012, but not more than line 2a .			1001366	
b	Applied to undistributed income of prior years				
	(Election required—see instructions)				
С	Treated as distributions out of corpus (Election required—see instructions)				
d	Applied to 2013 distributable amount				3080
е	Remaining amount distributed out of corpus				
5	Excess distributions carryover applied to 2013				•
	(If an amount appears in column (d), the same				
	amount must be shown in column (a).)				
6	Enter the net total of each column as indicated below:				
а	Corpus. Add lines 3f, 4c, and 4e. Subtract line 5			1	
ь	Prior years' undistributed income. Subtract line 4b from line 2b				
С	Enter the amount of prior years' undistributed				
	income for which a notice of deficiency has				
	been issued, or on which the section 4942(a)				
	tax has been previously assessed				
d	Subtract line 6c from line 6b. Taxable				
	amount-see instructions				
е	Undistributed income for 2012. Subtract line				
	4a from line 2a. Taxable amount-see				
	instructions				
f	Undistributed income for 2013. Subtract lines				
	4d and 5 from line 1. This amount must be				
	distributed in 2014				972011
7	Amounts treated as distributions out of corpus				
	to satisfy requirements imposed by section		1		
	170(b)(1)(F) or 4942(g)(3) (see instructions) .				
8	Excess distributions carryover from 2008 not		Ι Τ		
	applied on line 5 or line 7 (see instructions).				
9	Excess distributions carryover to 2014. Subtract lines 7 and 8 from line 6a				
10	Analysis of line 9.		-		
a	Excess from 2009				
b	Excess from 2010	1			
c	Excess from 2011	1			
d	Evenes from 2012	1		}	
	Excess from 2013	1			
		<del></del>	<u> </u>		

Page <b>10</b>
or  4942(j)(5)
(e) Total
<del></del>
in assets at
the foundation
portion of the

Part	XIV Private Operating Founda	tions (see instru	ctions and Part	VII-A, question 9	)	
1a	If the foundation has received a ruling	or determination	letter that it is a	private operating		
	foundation, and the ruling is effective for	r 2013, enter the da	ite of the ruling .	•		
b	Check box to indicate whether the four	ndation is a private	operating foundat	tion described in se	ection	(3) or 4942(j)(5)
2a	Enter the lesser of the adjusted net	Tax year		Prior 3 years		(-) T-4-1
	income from Part I or the minimum	(a) 2013	<b>(b)</b> 2012	(c) 2011	(d) 2010	(e) Total
	investment return from Part X for each year listed					
ь	85% of line 2a					
c	Qualifying distributions from Part XII,					
	line 4 for each year listed					
d	Amounts included in line 2c not used directly					<u> </u>
	for active conduct of exempt activities .					
e	Qualifying distributions made directly					-
•	for active conduct of exempt activities.					
	Subtract line 2d from line 2c					
3	Complete 3a, b, or c for the					
•	alternative test relied upon:				İ	
а	"Assets" alternative test - enter:					
a	(1) Value of all assets					
	(2) Value of assets qualifying under					
	section 4942(j)(3)(B)(i)					
ь	"Endowment" alternative test-enter 2/3					<del> </del>
	of minimum investment return shown in Part X, line 6 for each year listed					
_	"Support" alternative test—enter					<del> </del>
·						
	(1) Total support other than gross investment income (interest,					
	dividends, rents, payments on					
	securities loans (section 512(a)(5)), or royalties)					
	512(a)(5)), or royalties)  (2) Support from general public					
	and 5 or more exempt					
	organizations as provided in section 4942(j)(3)(B)(iii)				•	
	section 4942(j)(3)(B)(iii)					-
	an exempt organization					
	(4) Gross investment income			1		
Part		on (Complete th	is part only if t	he foundation h	ad \$5.000 or m	ore in assets at
	any time during the year-				,	
1	Information Regarding Foundation				·	
а	List any managers of the foundation		uted more than 29	% of the total cont	ributions received	by the foundation
	before the close of any tax year (but o					•
NONE						
b	List any managers of the foundation	who own 10% o	r more of the sto	ck of a corporatio	n (or an equally la	arge portion of the
	ownership of a partnership or other e	ntity) of which the	foundation has a	10% or greater int	erest.	
NONE						
2	Information Regarding Contribution	n, Grant, Gift, Loa	n, Scholarship, e	etc., Programs:		
	Check here ▶ ☐ If the foundation	only makes cont	ributions to prese	elected charitable	organizations and	d does not accept
	unsolicited requests for funds. If the	foundation makes	gifts, grants, etc.	(see instructions)	to individuals or c	organizations under
	other conditions, complete items 2a,	b, c, and d.				
а	The name, address, and telephone no	umber or e-mail ac	dress of the pers	on to whom applic	ations should be	addressed <sup>.</sup>
	•		-	- •		
THE P	RESTO FOUNDATION, ATTN:. JOAN GE	HLER, 3925 N HAS	TINGS WAY, EAU (	CLAIRE,WI 54703, (7	715)839-2119	
	The form in which applications should					
	R FORM WITH PROPOSED BUDGET.		<del></del>			
	Any submission deadlines:					
NONE	Any restrictions of Unitations of	words such as b	w annaranh	roop chamballa f	oldo lundo of !-	otitutions of other
d	Any restrictions or limitations on av	wards, such as D	y geographical a	ireas, charitable fi	eius, kinas ot in	situtions, or other

NORTHWESTERN WI, EAU CLAIRE AND CHIPPEWA FALLS AREA ARE PREFERRED.

Part	XV Supplementary Information (conti	nued)			
3_	Grants and Contributions Paid During t	he Year or Approve	ed for Fut	ture Payment	
	Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of	Purpose of grant or contribution	Amount
	Name and address (home or business)	or substantial contributor	recipient	Contribution	
а	Paid during the year				
SEE A	TTACHED SCHEDULE				
			i I		
					ļ
			i		
			ļ		ļ
				Í	
				}	
	Total	<u></u>		▶ 3a	1000270
b	Approved for future payment				
			}		)
		<u>L</u>			
	Total			<b>▶</b> 3b	

Pai	t XV	-A Analysis of Income-Producing Ac	tivities				
nte	r gros	ss amounts unless otherwise indicated.		siness income	Excluded by section		(e) Related or exempt
1		gram service revenue:	(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	function income (See instructions)
	a b				<del> </del>		
	c -	<del></del>			<del> </del>		
	d ¯						
	е _						
	f						
	-	Fees and contracts from government agencies					
_		nbership dues and assessments					
3		est on savings and temporary cash investments dends and interest from securities			512(B)1	99079	
4 5		rental income or (loss) from real estate:			512(B)1	718861	
J		Debt-financed property			<del>                                     </del>		
		Not debt-financed property					
6		rental income or (loss) from personal property					
7	Othe	er investment income					
8		or (loss) from sales of assets other than inventory					
9		income or (loss) from special events			1		
10		ss profit or (loss) from sales of inventory					
11	_	er revenue: a			+		1
	ь с					<u></u>	
	d -				<del>                                     </del>		
	e			-			
12	Sub	total. Add columns (b), (d), and (e)				817940	
13		al. Add line 12, columns (b), (d), and (e)				13	817940
<b>13</b> (See	work	sheet in line 13 instructions to verify calculation	ns.)			13	817940
13 See Pa	work	Alpha Relationship of Activities to the A	ns.) <b>Accomplishm</b>	ent of Exem	ot Purposes		_
13 See Pa	work	Alpha Relationship of Activities to the A	ns.) <b>Accomplishm</b>	ent of Exem	ot Purposes		_
13 See Pa	work rt XV e No.	Alpha Relationship of Activities to the A	ns.) <b>Accomplishm</b>	ent of Exem	ot Purposes		_
13 See Pa	work rt XV e No.	Relationship of Activities to the A  Explain below how each activity for which accomplishment of the foundation's exempt put	ns.) <b>Accomplishm</b>	ent of Exem	ot Purposes		_
13 See Pa	work rt XV e No.	Relationship of Activities to the A  Explain below how each activity for which accomplishment of the foundation's exempt put	ns.) <b>Accomplishm</b>	ent of Exem	ot Purposes		
13 See Pa	work rt XV e No.	Relationship of Activities to the A  Explain below how each activity for which accomplishment of the foundation's exempt put	ns.) <b>Accomplishm</b>	ent of Exem	ot Purposes		
13 See Pa	work rt XV e No.	Relationship of Activities to the A  Explain below how each activity for which accomplishment of the foundation's exempt put	ns.) <b>Accomplishm</b>	ent of Exem	ot Purposes		
13 See Pa	work rt XV e No.	Relationship of Activities to the A  Explain below how each activity for which accomplishment of the foundation's exempt pure	ns.) <b>Accomplishm</b>	ent of Exem	ot Purposes		_
13 See Pa	work rt XV e No.	Relationship of Activities to the A  Explain below how each activity for which accomplishment of the foundation's exempt pure	ns.) <b>Accomplishm</b>	ent of Exem	ot Purposes		_
13 See Pa	work rt XV e No.	Relationship of Activities to the A  Explain below how each activity for which accomplishment of the foundation's exempt pure	ns.) <b>Accomplishm</b>	ent of Exem	ot Purposes		_
13 See Pa	work rt XV e No.	Relationship of Activities to the A  Explain below how each activity for which accomplishment of the foundation's exempt pure	ns.) <b>Accomplishm</b>	ent of Exem	ot Purposes		
13 See Pa	work rt XV e No.	Relationship of Activities to the A  Explain below how each activity for which accomplishment of the foundation's exempt pure	ns.) <b>Accomplishm</b>	ent of Exem	ot Purposes		_
13 See Pa	work rt XV e No.	Relationship of Activities to the A  Explain below how each activity for which accomplishment of the foundation's exempt pure	ns.) <b>Accomplishm</b>	ent of Exem	ot Purposes		_
13 See Pa	work rt XV e No.	Relationship of Activities to the A  Explain below how each activity for which accomplishment of the foundation's exempt pure	ns.) <b>Accomplishm</b>	ent of Exem	ot Purposes		_
13 See Pa	work rt XV e No.	Relationship of Activities to the A  Explain below how each activity for which accomplishment of the foundation's exempt pure	ns.) <b>Accomplishm</b>	ent of Exem	ot Purposes		_
13 See Pa	work rt XV e No.	Relationship of Activities to the A  Explain below how each activity for which accomplishment of the foundation's exempt pure	ns.) <b>Accomplishm</b>	ent of Exem	ot Purposes		_
13 See Pa	work rt XV e No.	Relationship of Activities to the A  Explain below how each activity for which accomplishment of the foundation's exempt pure	ns.) <b>Accomplishm</b>	ent of Exem	ot Purposes		_
13 See Pa	work rt XV e No.	Relationship of Activities to the A  Explain below how each activity for which accomplishment of the foundation's exempt pure	ns.) <b>Accomplishm</b>	ent of Exem	ot Purposes		_
13 See Pa	work rt XV e No.	Relationship of Activities to the A  Explain below how each activity for which accomplishment of the foundation's exempt pure	ns.) <b>Accomplishm</b>	ent of Exem	ot Purposes		_
13 See Pa	work rt XV e No.	Relationship of Activities to the A  Explain below how each activity for which accomplishment of the foundation's exempt pure	ns.) <b>Accomplishm</b>	ent of Exem	ot Purposes		_
13 (See Pa	work rt XV e No.	Relationship of Activities to the A  Explain below how each activity for which accomplishment of the foundation's exempt pure	ns.) <b>Accomplishm</b>	ent of Exem	ot Purposes		mportantly to the ctions.)
13 (See Pa	work rt XV e No.	Relationship of Activities to the A  Explain below how each activity for which accomplishment of the foundation's exempt pure	ns.) <b>Accomplishm</b>	ent of Exem	ot Purposes		

Part	XVII		n Regarding Tra	nsfers To and T	ransaction	s and l	Relationships	With Noncha	ritabl		ge 10
1	in sec	e organization o	directly or indirectly e Code (other than	engage in any of t section 501(c)(3)	the following organizations	with an ) or in s	y other organization 527, rela	ation described ating to political		Yes	No
а	Trans	fers from the rep	porting foundation t	o a noncharitable	exempt orga	nization	of:		; .n	-	
									1a(1)		
	• •	ther assets .							1a(2)		<b>\</b>
Ь		transactions:									
	(1) Sa	ales of assets to	a noncharitable ex	empt organization					1b(1)		<b>✓</b>
			ets from a nonchari						1b(2)		✓
			, equipment, or oth						1b(3)		✓
	(4) Re	eimbursement ai	rrangements						1b(4)		1
		oans or loan gua							1b(5)		1
	(6) Pe	erformance of se	ervices or members						1b(6)		1
С			quipment, mailing I						1c		1
d	If the	answer to any	of the above is "Ye	es " complete the	following sch	redule	Column (h) sh	uld alwave cho		fair m	arket
_			ther assets, or serv								
			on or sharing arrang								
(a) Line		b) Amount involved		chantable exempt organ				transactions, and sh			
(a) Line	; 110   <b>(</b> 1	Amount involved	(C) Name of none	mantable exempt organ	iization	(u) Desc	ription of transfers,	transactions, and sn	aring arra	angeme	ents
				<del></del>							
								<del></del>			
											_
							<del></del>				
-			-								
	1								_		
							<del></del>	····			
			<u>-</u>	<del></del>							
							<del></del>				
	<del>-  </del>	· · · · · · · · · · · · · · · · · · ·									
	-						<del></del> .				
		-									
	1- 41			***							
2a	is the	toundation dire	ectly or indirectly a	ffiliated with, or re	elated to, one	e or mo	re tax-exempt	organizations	_		
			501(c) of the Code		501(c)(3)) or	ın secti	on 52/?	[	] Yes		No
b	It "Ye		e following schedule	9.							
		(a) Name of organ	nization	(b) Type o	of organization		(c)	Description of relation	nship	_	
			,								
			_								
				$\rightarrow$			-				
			11	17							
	Unde	r penalties of penury,	declare that I have examilaration of preparer (other t	ned this return, including a	accompanying sch	nedules an	d statements, and to	the best of my knowle	dge and	belief, it	is true,
Sign	corre	ct, and complete Decl	laration of préparer (other t	fian taxpayer) is based on	all information of	which pre	parer has any knowle	dge May the	IRS disci	es this	return
Here			11/ W	19-4-	IN TR	26.7	DENT	with the	preparer	shown	below
		ature of officer or the	stee	Date	Title	<del>/- , ,</del>	<u>-</u>	(see instri	ctions)?	Yes(	□No
	<u> </u>	Print/Type/preparer		Preparer's signature	e		Date		PTIN		
Paid				l spans o organization	=			Check if			
Prep					<u>~</u>		_\	self-employed			
Use	Only	Firm's name 🕨	<del></del>	<del>.</del>		<del>_</del>	F	rm's EIN ▶			
		Firm's address ▶					P	none no			

#### The Presto Foundation 39-6045769 Year ended May 31, 2014

#### Investments - Corporate Stocks (Form 990 PF, Page 2, Part II, Line 10 b)

Stock	g. Of Year ook Value	nd of Year ook Value	<u>M</u>	larket Value
National Presto Ind Inc	\$ 865,032	\$ 865,032	\$	9,698,405
Anglo American plc	131,194	131,194		342,905
Anglogold Limited	247,484	247,484		168,416
Gold Fields Limited	182,537	182,537		102,851
Sibanye Gold	30,360	30,358		71,323
Berry Petroleum Co	56,875	56,875		333,840
Freeport McMoran Copper & Gold	54,877	54,877		60,677
Total	\$ 1,568,359	\$ 1,568,357	\$	10,778,417

#### The Presto Foundation 39-6045769 Year Ended May 31, 2014

#### Other Professional Services Form 990-PF Page 1, Part 1, Line 16 ( c)

Bookkeeping & Clerical	Services	20,881
	<u>Taxes</u> Form 990-PF Page 1, Part 1, Line 18	
Excise Tax Provision Foreign Tax		7,868 473 8,341
	Other Expenses Form 990-PF Page 1, Part 1, Line 23	
Broker Fees, ETC		14,037

#### The Presto Foundation 39-6045769 For The Year Ended May 31, 2014

<u>Name</u>	Title, and Time Devoted <u>to position</u>	Compensation	Contribution to employer Benefit Plan	Expense Account, other <u>Allowances</u>
Maryjo Cohen Eau Claire, Wl	President Trustee Partial	None	None	None
Lawrence J. Tienor Eau Claire, WI	Vice Pres , Treas., Trustee Partial	None	None	None
Randy F Lieble Eau Claire, Wl	Vice Pres , Sec , Trustee Partial	None	None	None
Vernon B. Haas Cadott, Wl	Assistant Treas., Trustee Partial	None	None	None
Eileen Phillips Cohen Eau Claire, Wl	Trustee Partial	None	None	None
Richard Myhers Eau Claıre, Wl	Trustee Partial	None	None	None

RELIGIOUS ACTIVITIES
5
CATEGORY

	Relationship	None	None	None	None	
	YTD Payments	1,000 00	20 00	1,000 00	4,000 00	6,050 00
	City State Zip	MIAMI, FL 33176	RIVERSIDE, CA 92501	JANESVILLE, WI 53345-2448	LAS VEGAS, NV 89136	* * CATEGORY TOTAL * *
	Address	9085 SW 87TH AVE	16900 GROVE COMMUNITY DR	514 SUTHERLAND AVE	P O BOX 751615	
IOUS ACTIVITIES	Recipient Name	CONGREGATION AHAVAT OLAM	GROVE COMMUNITY CHURCH	SALVATION ARMY	VEGAS CHRISTIAN CTR INC	
(TEGORY 0) RELIGIOUS ACTIVITIES	Acct Num Alpha Sort Code	181 CONGRE	381 GROVE	761 SALVAT	894 VEGAS	

	Relationship	None	None	None	None	None	None	None	None	None	None	None
	YTD Payments F	7,500 00	181,000 00	200 00	91,500 00	2,000 00	12,000 00	3,000 00	200 00	6,000 00	52,800 00	100,500 00
	City State Zip	MIAMI, FL 33129	EAU CLAIRE, WI 54702-0600	NORTHFIELD, MN 55057	EAU CLAIRE, WI 54701	ISSAQUAH, WA 98027	EAU CLAIRE, WI 54701	ANTIGO, WI 54409	EAU CLAIRE, WI 54703	MINNEAPOLIS, MN 55416	PLATTEVILLE, WI 53818-3099	EAU CLAIRE, WI 54701
	Address	2625 SW 3RD AVE	CENTER P O BOX 600	ENDOWMENT FOR JEWISH LIFE AT CARLETON	I N COLLEGE ST COLLEGE FOUNDATION 620 W CLAIREMONT AVE	1605 NW SAMMAMISH RD SUITE 200	500 MAIN ST	312 FORREST AV	1801 PIEDMONT RD	2800 JOPPA AVE SO	PLATTEVILLE 1 UNIVERSITY PLAZA	105 GARFIELD AVE
SCHOOLS, COLLEGES & RELATED AC	Recipient Name	BETH DAVID GORDON SCHOOL	L E PHILLIPS CAREER DEV	CARLETON COLLEGE	CHIPPEWA VALLEY TECHNICAL COLLEGE FOUNDATION	COLLEGE SUCCESS FOUNDATIO	EAU CLAIRE AREA SCHOOLS FLYNN ELEMENTARY STUDENTS SPECIAL	NEEDS FUND NORTHCENTRAL TECH COLLEGE	NORTH HIGH SCHOOL	TORAH ACADEMY	UNIVERSITY OF WISCONSIN PLATTEVILLE	UWEC-FOUNDATION, INC
CATEGORY 02 SCHOO	Acet Num Alpha Sort Code	69 BETHDA	101 CAREER	105 CARLET	165 CHIPPE	183 COLLEG	251 EAUCLA	669 NORTHC	661 NORTHH	835 TORAHA	856 UNIVER	857 UNIVER

460,300 00

	Relationship	None	None	None	None	None	None	None	None	None	None	None	None	None	None
	YTD Payments Ro	9,517 34	13,000 00	13,000 00	13,000 00	6,263.72	2,376 73	13,000 00	13,000 00	13,000.00	13,000 00	13,000.00	8,784.31 None	9,064 64	13,000 00
	City State Zip	MEQUON, WI 53097	MOBILE, AL 36688	CHICAGO, IL 60693	SUPERIOR, WI 54480	MADISON, WI 53706-1213	MADISON, WI 53706-1213	HOUGHTON, MI 49931	SEARCY, AR 72149	DULUTH, MN 55811	UNIVERSITY PARK, PA 16802-1200	MADISON, WI 53715-1383	MADISON, WI 53715-1383	TALLAHASSEE, FL 32303	TALLAHASSEE, FL 32306
	Address	CASHIER'S OFFICE 12800 NORTH LAKE DR	390 ALUMNI CIR ROOM 1300	15297 COLLECTIONS CTR DR	BURSAR/CASHIER'S OFFICE OLD MAIN 208 BEI MA DA:CATI IN PO ROX 2000	CASHIER'S OFC-SLICHTER HL 625 BABCOCK DR	CASHIER'S OFFICE SLICHER HALL	UNIVERSITY CASHIER'S OFFICE 1400 TOWNSENT DB	HU BOX 10770	T1130 1200 KENWOOD AVE	OFFICE OF THE BURSAR 103E SHIELDS BUILDING	BURSAR'S OFFICE 333 E CAMPUS MALL #10501	333 E CAMPUS MALL #10501	600 W COLLEGE AVE	STUDENT FINANCIAL SERVICE A1500 UNIVERSITY CTR
SCHLRSHPS FOR CHILD OF EMPLOY	e Recipient Name	CONCORDIA UNIVERSITY EMILY ALBRECHT	UNIV OF SOUTH ALABAMA KALMETTE BEHRENS CAMBRAY	WALDEN UNIVERSITY KATHRINE BEHRENS	UNIV OF WIS-SUPERIOR TYLER BREWER	UW MADISON DIV UNIV HSG REBECCA BRODZISKI	UW-MADISON LAURA BRODZISKI	MICHIGAN TECHNOLOGICAL MATTHEW BYRNE	HARDING UNIVERSITY JAMI CRAWFORD LUCAS	COLLEGE OF ST SCHOLASTICA TAYLOR CUNNINGHAM	PENN STATE UNIVERSITY RACHAEL DECKMAN	UW-MADISON BRETT DERLETH	UW-MADISON BURSAR'S OFC ANTHONY FERREIRA	FLORIDA STATE UNIVERSITY VALERIE GARDNER	FLORIDA STATE UNIVERSITY JOSEPH GARDNER
CATEGORY 03 SCHLI	Acct Num Alpha Sort Code	10 ALBREC	60 BEHREN	62 BEHREN	92 BREWER	93 BRODZI	90 BRODZI	95 BYRNE	189 CRAWFO	198 CUNNIN	197 DЕСКМА	202 DERLET	311 FERREI	351 GARDNE	352 GARDNE

SCHLRSHPS FOR CHILD OF EMPLOY

CATEGORY 03

Acet Num	Alpha Sort Code	Recipient Name	Address	City State Zip	YTD Payments	Relationship
349	349 GARRIS	UNIVERSITY OF MISSISSIPPI SARAH BENTON GARRISON	OFFICE OF BURSAR PO BOX 1848	UNIVERSITY, MS 38677	13,000 00	None
412	412 HAMMER	JORDAN HAMMER JORDAN HAMMER	857 HARBOR RD	MILTON, WI 53563	11,203.32	None
410	410 HAMMER	U W GREEN BAY JENNA HAMMER	BURSAR'S STUDENT OFFICE 2420 NICOLET DR	GREEN BAY, WI 54311-7001	13,000.00	None
417	417 HARRIS	UNIV OF WI EAU CLAIRE JESSICA SUE HARRIS	CASHIERS OFFICE P O BOX 5000	EAU CLAIRE, WI 54702-5000	10,848 61	None
448	448 HUGHES	DEANA HUGHES DEANA HUGHES	1126 OLD MILITARY	ARKADELPHIA, AR 71923	3,301 11	None
501	501 KENNED	UNIV OF WI - GREEN BAY AMANDA KENNEDY	BURSAR'S STUDENT BILLING 2420 NICOLET DR	GREEN BAY, WI 54311-7001	13,000 00	None
502	502 KENNED	UNIV OF WI EAU CLAIRE JUSTIN KENNEDY	CASHIERS OFFICE P O BOX 5000	EAU CLAIRE, WI 54702-5000	4,922 34	None
497	497 KNAPPS	PURDUE UNIVERSITY SARAH KNAPP	BURSAR'S OFFICE HOVDE HALL OF ADMIN	WEST LAFAYETTE, IN 47907	6,737 80	None
574	574 LARSON	WINONA STATE UNIVERSITY TAYLOR LARSON	910 FOKDOE MALL PO BOX 5838 175 W PARK ST	WINONA, WI 55987	13,000.00	None
555	555 LAVELL	EDGEWOOD COLLEGE JAMIE LA VELLE	1000 EDGEWOOD COLLEGE DR	MADISON, WI 53711	12,995 69	None
564	564 LINDSE	JACOB LINDSEY JACOB LINDSEY	2705 OUACHITA RD 3	CAMDEN, AR 71701	3,966 71	None
616	616 MAYHEA	WESTERN GOVERNORS UNIV HEATHER MAY	4001 SOUTH 700 E STE #700	SALT LAKE CITY, UT 84107	6,735.00	None
619	619 MCDANI	ARKANSAS STATE UNIVERSITY JORDAN MCDANIEL	P O BOX 2640	STATE UNIVERSITY, AR 72467	12,995 61	None
634	634 MOLL	UNIVERSITY OF ARKANSAS CARI MOLL	TREASURER'S OFFICE PO BOX 1404	FAYETTEVILLE, AR 72702	6,129 51	None

SCHLRSHPS FOR CHILD OF EMPLOY

CATEGORY 03

Relationship	None	None	None	None	None	None	None	None	None
YTD Payments	13,000 00	13,000.00	12,529.61	12,955.71	11,142 45	13,000 00	13,000 00	8,694 00	1,930 40
City State Zip	AUGUSTA, GA 30904	WHITEWATER, WI 53190	EAU CLAIRE, WI 54702	LA CROSSE, WI 54601	MENOMONIE, WI 54751	MINNEAPOLIS, MN 55485-6443	EAST LANSING, MI 48824	KNOXVILLE, TN 37996-0225	MONTICELLO, AR 71656-3597
Address	FANNING HALL-BUSINESS OFC 2500 WALTON WAY	P O BOX 88	FINANCIAL AIDS OFFICE P O BOX 4004	121 GRAFF MAIN HALL 1725 STATE ST	712 S BROADWAY ST	NW6443 P O BOX 1450	OFFICE OF FINANCIAL AID STUDENT SERVICE BLDG #252	211 STUDENT SERVICES BLDG	CASHIER'S OFFICE P O BOX 3597
Recipient Name	GEORGIA REGENTS UNIV MARY NICHOLSON	UW-WHITEWATER CASHIER OFC NICOLE PENNA	UW EAU CLAIRE ZACHARY PONASIK	UW LA CROSSE CASHIER'S OF NOELLE PONASIK	UW STOUT ALEX SEIDLITZ	UNIV MINNESOTA TWIN CITY MATTHEW SORENSEN	MICHIGAN STATE UNIVERSITY HAYLEY THEODORAKAKOS	UNIVERSITY OF TENNESSEE RACHEL TURNER	UNIV OF ARKANSAS ALEXIS WARNER
Acct Num Alpha Sort Code	998 NICHOL	713 PENNAN	708 PONASI	710 PONASI	768 SEIDLI	777 SORENS	623 THEODO	843 TURNER	897 WARNER

384,094.61

	Relationship	None	None	None	None	None	None	None	
	YTD Payments 1	400 00	2,000 00	100 00	200.00	100 00	100.00	100 00	3,300 00
	City State Zip	ANTIGO, WI 54409	STEVENS POINT, WI 54481-5819	CHIPPEWA FALLS, WI 54729	EAU CLAIRE, WI 54703	CHIPPEWA FALLS, WI 54729-0071	STRUM, WI 54770	EAU CLAIRE, WI 54701	* * CATEGORY TOTAL * *
	Address	115 NINTH AV	1804 CONANT STREET	ASSOC/HEYDE CTR FOR ARTS 3 SOUTH HIGH ST	THEATRE 1814 OXFORD AVE	PARK ZOO, INC P O BOX 71	PUBLIC LIBRARY P O BOX 10	PUBLIC LIBRARY 400 EAU CLAIRE ST	
CULTURAL, HISTORICAL, OTH ED	e Recipient Name	ANTIGO MUSIC ASSOCICATION	BARBERSHOP HARMONY SOC	CHIPPEWA VALLEY CULTURAL	EAU CLAIRE CHILDREN'S THEATRE	FRIENDS OF THE IRVINE PARK ZOO INC	FRIENDS OF THE STRUM PUBLIC LIBRARY	L E PHILLIPS MEMORIAL PUBLIC LIBRARY	
CATEGORY 04 CULTU	Acet Num Alpha Sort Code	47 ANTIGO	57 BARBER	146 CHIPPE	258 EAUCLA	339 FRIEND	346 FRIEND	557 LEPHIL	

	Relationship	None	None	None	None	None	None	None	None	None	None	None	None	None	None
	YTD Payments	200 00	200 00	100 00	1,000.00	2,650 00	25,000 00	1,000.00	2,500.00	3,500.00	750 00	300 00	150.00	100.00	1,000.00
	City State Zip	GREEN BAY, WI 54311	MADISON, WI 53717	ALTOONA, WI 54720	ATLANTA, GA 30303-1002	JANESVILLE, WI 53547-5391	NEW YORK, NY 10022	SALT LAKE CITY, UT 84101	ANTIGO, WI 54409	CORNELL, WI 54732	ROSEVILLE, MN 55113	EAU CLAIRE, WI 54701	EAU CLAIRE, WI 54701	CHIPPEWA FALLS, WI 54729	JANESVILLE, WI 53548
	Address	GREATER WISCONSIN 2900 CURRY LANE STE A	MIDWEST DIVISION 8317 ELDERBERRY RD	2519 N HILLCREST PKWY SUITE 100	250 WILLIAMS ST NW	3507 E RACINE ST P O BOX 5391	FOUNDATION 60 EAST 56TH ST 8TH FLOOR	205 W 700 SOUTH	LANGLADE MEMORIAL HOSP 112 E FIFTH AVE	412 SOUTH 3RD ST PO BOX 3	FOUNDATION OF AMERICA MINNESOTADAKOTAS CHAPTER	22// HW I 39 W, SULLE I/O WESTERN WISCONSIN 1812 BRACKETT AVE STE 5	HOSPITAL 900 WEST CLAIREMONT AVE	HOSPITAL 2661 COUNTY HIGHWAY I	23 W MILWAUKEE ST
HEALTH SERVICES & RELATED ACTI	de Recipient Name	ALZHEIMERS ASSOCIATION GREATER WISCONSIN	AMERICAN CANCER SOCIETY MIDWEST DIVISION	AMERICAN CANCER SOCIETY	AMERICAN CANCER SOCIETY	AMERICAN HEART ASSOCIATIO	BREAST CANCER RESEARCH FOUNDATION	CHILDRENS MIRACLE NETWORK	COMMUNITY HEALTH FOUND	CORNELL AREA AMBULANCE SV	CROHN'S & COLITIS	EPILEPSY FOUNDATION OF WESTERN WISCONSIN	FRIENDS OF SACRED HEART HOSPITAL	FRIENDS OF ST JOSEPH'S HOSPITAL	HEALTHNET OF JANESVILLE
CATEGORY 06 HEA	Acct Num Alpha Sort Code	15 ALZEIM	21 AMERIC	23 AMERIC	39 AMERIC	30 AMERIC	91 BREAST	127 CHILDR	184 COMMUN	192 CORNEL	193 CROHNS	275 EPILEP	762 FRIEND	345 FRIEND	419 HEALTH

	Relationship	None	None	None	None	None	None	None	None	
	YTD Payments	1,000 00	4,000.00	1,000 00	3,300.00	200 00	1,000.00	200 00	1,000 00	51,050.00
	City State Zip	BROOKFIELD, WI 53005	COMMACK, NY 11725	LOS ANGELES, CA 90036	PORTLAND, OR 97205	EAU CLAIRE, WI 54703	EAU CLAIRE, WI 54703	ROCHESTER, MN 55905	MILWAUKEE, WI 53226	* * CATEGORY TOTAL * *
	Address	SOCIETY OF WISCONSIN 200 S EXECUTIVE DR STE203	ASSOCIATION 65 AUSTIN BLVD	CHOLIM 143 N FORMOSA AV	CHAPTER 1220 SW MORRISON STE 510	2519 SHALE LEDGE RD	DEVELOPMENT 1221 WHIPPLE ST	200 IST ST S W	BRAIN TUMOR RESEARCH PROG 8701 WATERTOWN PLANK RD	PO BOX 26509
HEALTH SERVICES & RELATED ACTI	Recipient Name	LEUKEMIA & LYMPHOMA SOCIETY OF WISCONSIN	HEAD INJURY FOUNDATION LONG ISLAND HEAD INJURY	LOS ANGELES LADIES BIKUR	MARCH OF DIMES-PORTLAND CHAPTER	MARCH OF DIMES-WI CHAPTER WISCONSIN CHAPTER	MAYO CLINIC HEALTH SYSTEM DEVELOPMENT	MAYO FOUNDATION	MEDICAL COLLEGE OF WI	
CATEGORY 06 HEAL?	Acet Num Alpha Sort Code	556 LEUKEM	570 LONGIS	576 LOSANG	610 MARCHO	607 MARCHO	614 MAYOCL	611 MAYOFO	624 MEDICA	

SPORTS, ATHLETIC, RECREATIONAL

CATEGORY. 12

ts Relationship	400.00 None	00 None	00 None	00 None	500 00 None
YTD Payments	400	00:00	100 00	2,000 00	500
City State Zip	WHITEWATER, WI 53563	EAU CLAIRE, WI 54702	EAU CLAIRE, WI 54703	BAYFIELD, WI 54814	EAU CLAIRE, WI 54701
Address	OLYMPICS 8327 N LIMA CENTER RD	EAU CLAIRE LIONS CLUB P O BOX 42	SEYMOUR LIONS CLUB 3045 HARTWOOD DR	RESOURCES P O BOX 1146	INDIANHEAD AREA 2023 FAIRFAX ST
Recipient Name	JANESVILLE AREA SPÈCIAL OLYMPICS	LIONS INTERNATIONAL EAU CLAIRE LIONS CLUB	LIONS INTERNATIONAL SEYMOUR LIONS CLUB	RECREATION & FITNESS RESOURCES	SPECIAL OLYMPICS WIS INDIANHEAD AREA
Acct Num Alpha Sort Code	472 JANESV	Seo Lionsi	563 LIONSI	720 RECREA	779 SPECIA

3,600.00

CATEGORY. 13 YOU	YOUTH ACTIVITIES				
Acct Num Alpha Sort Code	de Recipient Name	Address	City State Zip	YTD Payments	Relationship
43 ANTIGO	ANTIGO AREA REC FOUND	P O BOX 403	ANTIGO, WI 54409	300.00	None
70 BIGBRO	BIG BROTHERS/BIG SISTERS OF NORTHWESTERN WISCONSIN	OF NORTHWESTERN WISCONSIN 312 S BARSTOW ST STE SI	EAU CLAIRE, WI 54701	625.00	None
85 BOYSCO	BOY SCOUTS OF AMERICA CHIPPEWA VALLEY COUNCIL	CHIPPEWA VALLEY COUNCIL 710 S HASTINGS WAY	EAU CLAIRE, WI 54701	50.00	None
82 BOYSGI	BOYS & GIRLS CLUB OF JANESVILLE INC	JANESVILLE INC 200 W COURT	JANESVILLE, WI 53548	750 00	None
83 BOYSGI	BOYS & GIRLS CLUB OF LANGLADE COUNTY	LANGLADE COUNTY 801 FIFTH AVE	ANTIGO, WI 54409	1,000 00	None .
84 BOYSGI	BOYS & GIRLS CLUB OF GREATER CHIPPEWA VALLEY	GREATER CHIPPEWA VALLEY 201 E LAKE ST	EAU CLAIRE, WI 54701	2,100 00	None
411 HALLIE	HALLIE GIRLS SOFTBALL	14115 CTY HWY UN	CHIPPEWA FALLS, WI 54729	5,000.00	None
473 JANESV	JANESVILLE YOUTH BASEBALL	P O BOX 161	JANESVILLE, WI 53545	1,000 00	None
471 JANESV	JANESVILLE YOUTH FOOTBALL	P O BOX 211	JANESVILLE, WI 53547	1,000 00	None
478 KINSHI	KINSHIP OF RICE LAKE INC	P O BOX 291	RICE LAKE, WI 54868	1,000.00	None
645 NATION	NATIONAL CHILD SAFETY COU	CHIPPEWA CTY SHERIFFS OF ATTN SHERIFF KOWALCZYK	CHIPPEWA FALLS, WI 54729-2542	200.00	None
672 NEBRAS	NEBRASKA 4-H FOUNDATION DEUEL COUNTY 4-H	32 E SPRUCE ST P O BOX 830719	LINCOLN, NE 68583	300 00	None
671 OLIVET	OLIVET BOYS & GIRLS CLUB OF READING & BERKS COUNTY PA	1161 PERSHING BLVD	READING, PA 19611	1,000 00	None
770 SHRINE	SHRINE CIRCUS FUND MEHARA SHRINE CLUB	MEHARA SHRINE CLUB P O BOX 1367	EAU CLAIRE, WI 54702-1367	200 00	None

Page 10 of 15

14,525 00

#### 39-6045769 YEAR ENDED MAY, 31 2014 GRANTS AND CONTRIBUTIONS FORM 990 PF, PAGE 10, PART XV, LINE 3a THE PRESTO FOUNDATION

. BEAUTI
VIRON
CONSERVATION EN
14 C
TEGORY

	YTD Payments Relationship	None	
	YTD Payments	1,000 00 None	1,000 00
	City State Zip	CHIPPEWA FALLS, WI 54729	* * CATEGORY TOTAL * *
	Address	RIDGE TRAIL INC P O BOX 763	
CATEGORY 14 CONSERVATION, ENVIRON, BEAUTI	Recinient Name	FRIENDS OF THE RIDGE TRAIL INC	
CATEGORY 14 CONSE	Acct	338 FRIEND	

	Relationship	None	None	None	
	YTD Payments	1,000.00	200 00	25,000 00	26,500.00
	City State Zip	ANTIGO, WI 54409	ALTOONA, WI 54720	CHIPPEWA FALLS, WI 54729-2861	* * CATEGORY TOTAL * *
	Address	700 EDISON ST	227 IST ST W	ASSOCIATION P O BOX 48	
CATEGORY 16 INNER CITY OR COMMUNITY ACTIVI	de Recipient Name	CITY OF ANTIGO FIRE DEPT	EAU CLAIRE CTY PARK&FORST	NORTHERN WI STATE FAIR ASSOCIATION	
CATEGORY 16 INNE	Acct Num Alpha Sort Code	48 ANTIGO	264 ECCTY	663 NORTHW	

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	YTD Payments Relationship	None	
	YTD Payments	300 00	300 00
	City State Zip	JANESVILLE, WI 53545	* * CATEGORY TOTAL * *
	Address	TO HELP OTHERS INC 65 SO HIGH ST	
CATEGORY 21 OTHER ACT DIRECTED TO INDIVID	Recipient Name	ECHO-EVERYONE COOPERATING TO HELP OTHERS INC	
CATEGORY 21 OTHER	Acet Num Alpha Sort Code	273 ECHOEV	

#### THE PRESTO FOUNDATION

39-6045769
YEAR ENDED MAY, 31 2014
GRANTS AND CONTRIBUTIONS
FORM 990 PF, PAGE 10, PART XV, LINE 3a

	City State Zip	EAU CLAIRE, WI 54701	JANESVILLE, WI 53545	EAU CLAIRE, WI 54703
	Address	FOUNDATION 306 S BARSTOW ST	COUNTY INC 205 N MAIN	CHIPPEWA VALLEY 3603 N HASTINGS WAY SUITE 200
CATEGORY 22 ACT. DIRECTED TO OTH. ORGANIZA	Recipient Name	EAU CLAIRE COMMUNITY FOUNDATION	UNITED WAY OF NORTH ROCK COUNTY INC	UNITED WAY OF THE GREATER
CATEGORY 22 ACT. D	Acct Num Alpha Sort Code	255 EAUCLA	860 UNITED	865 UNITED

YTD Payments Relationship

None

13,000.00

None

2,500 00

None

12,600.00

28,100 00

	Relationship	None	None	None	None	None	None	None	None	None	None		
	YTD Payments	200 00	5,000 00	700 00	200 00	1,000 00	400 00	10,000.00	2,800 00	750 00	100 00	21,450 00	1,000,270.00
	City State Zip	ANTIGO, WI 54409	CHICAGO, IL 60612	ROSEMONT, IL 60018	ANTIGO, WI 54409	QUANTICO, VA 22134	NORTH KINGSTOWN, RI 02852	GREEN BAY, WI 54307-9060	CHICAGO, IL 60631	EAU CLAIRE, WI 54703	TOPEKA, KS 66675	* * CATEGORY TOTAL * *	**GRAND TOTAL ** 1,
	Address	P O BOX 523	2027 WEST RACE #1W	6400 SHAFER COURT STE 650	P O BOX 384	ATTN· MCAF DONATIONS P O BOX 1775	CHARITABLE FOUNDATION 375 COMMERCE PARK ROAD	P O BOX 19060	8600 W BRYN MAWR AVE	1300 STARR AVE	P O BOX 758517		
OTHER PURPOSES AND ACTIVITIES	Recipient Name	ANTIGO ROTARY CLUB FOUND	BARNES FOUNDATION	HOUSEWARES CHARITY FOUND	LANGLADE CO HUMANE SOC	MCAF MARINE CORPS ASSOCIATION FOUNDATION	OCEAN STATE JOB LOT CHARITABLE FOUNDATION	SHOPKO FOUNDATION	TRUE VALUE FOUNDATION	VFW POST 305	WOUNDED WARRIOR PROJECT		
CATEGORY 23 OTHE	Acct Num Alpha Sort Code	44 ANTIGO	56 BARNES	440 HOUSEW	552 LANGLA	621 MCAF	670 OCEAN	771 SHOPKO	844 TRUEVA	891 VFWPOS	GNUOW 916		