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

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

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

Information about Form 990 and its instructions is at www.irs.gov/form990.

OMB No 1545-0047

2013**Open to Public Inspection**

A For the 2013 calendar year, or tax year beginning <u>7/1/2013</u> and ending <u>6/30/2014</u>	
B Check if applicable: <input type="checkbox"/> Address change <input type="checkbox"/> Name change <input type="checkbox"/> Initial return <input type="checkbox"/> Terminated <input type="checkbox"/> Amended return <input type="checkbox"/> Application pending	C Name of organization <u>FORT ATKINSON COMMUNITY FOUNDATION</u>
	Doing Business As _____
	Number and street (or P O box if mail is not delivered to street address) Room/suite <u>PO BOX 218</u>
	City or town State ZIP code <u>FORT ATKINSON WI 53538</u>
	Foreign country name Foreign province/state/county Foreign postal code
	D Employer identification number <u>39-6220899</u>
E Telephone number <u>(920) 563-6616</u>	
G Gross receipts \$ <u>2,687,354</u>	
F Name and address of principal officer	
H(a) Is this a group return for subordinates? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
H(b) Are all subordinates included? <input type="checkbox"/> Yes <input type="checkbox"/> No	
If "No," attach a list (see instructions)	
I Tax-exempt status <input checked="" type="checkbox"/> 501(c)(3) <input type="checkbox"/> 501(c) () ◀ (insert no) <input type="checkbox"/> 4947(a)(1) or <input type="checkbox"/> 527	
J Website: ▶ _____	
K Form of organization <input type="checkbox"/> Corporation <input checked="" type="checkbox"/> Trust <input type="checkbox"/> Association <input type="checkbox"/> Other ▶	
L Year of formation <u>1973</u>	
M State of legal domicile <u>WI</u>	

Part I Summary

Activities & Governance	1 Briefly describe the organization's mission or most significant activities <u>TO PROVIDE FOR THE CHARITABLE NEEDS OF THE FORT ATKINSON METROPOLITAN AREA</u>			
	2 Check this box <input type="checkbox"/> if the organization discontinued its operations or disposed of more than 25% of its net assets			
	3 Number of voting members of the governing body (Part VI, line 1a) <u>5</u>			
	4 Number of independent voting members of the governing body (Part VI, line 1b) <u>5</u>			
	5 Total number of individuals employed in calendar year 2013 (Part V, line 2a) <u>1</u>			
	6 Total number of volunteers (estimate if necessary) <u>25</u>			
	7a Total unrelated business revenue from Part VIII, column (C), line 12 <u>0</u>			
	7b Net unrelated business taxable income from Form 990-T, line 34 <u>0</u>			
	Revenue	8 Contributions and grants (Part VIII, line 1h)	Prior Year	Current Year
		9 Program service revenue (Part VIII, line 2g)	468,237	1,457,187
10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)		0	35,782	
11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		1,695,506	1,194,385	
12 Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12)		0	0	
13 Grants and similar amounts paid (Part IX, column (A), lines 1–3)		2,163,743	2,687,354	
14 Benefits paid to or for members (Part IX, column (A), line 4)		557,280	1,434,359	
15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5–10)		0	0	
Expenses	16a Professional fundraising fees (Part IX, column (A), line 11e)	0	39,943	
	b Total fundraising expenses (Part IX, column (D), line 25b) <u>0</u>	0	0	
	17 Other expenses (Part IX, column (A), lines 11a–11d, 11f–24e)	138,839	144,837	
	18 Total expenses Add lines 13–17 (must equal Part IX, column (A), line 25)	696,119	1,619,139	
	19 Revenue less expenses Subtract line 18 from line 12	1,467,624	1,068,215	
Net Assets or Fund Balances	20 Total assets (Part X, line 16)	Beginning of Current Year	End of Year	
	21 Total liabilities (Part X, line 26)	21,583,830	23,916,745	
	22 Net assets or fund balances Subtract line 21 from line 20	837,476	1,180,049	

Part II Signature Block

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

Sign Here	Signature of officer <u>William Phillip Niemeyer</u>		Date <u>2/17/2015</u>
	Type or print name and title		
Paid Preparer Use Only	Print/Type preparer's name	Preparer's signature	Date
	ROBERT KABITZKE	<u>[Signature]</u>	2/9/2015
	Firm's name ▶ DAVID L SCRIMA, S C	Firm's EIN ▶ 39-1945841	Check <input type="checkbox"/> if self-employed
	Firm's address ▶ 328 W SUNSET DR, WAUKESHA, WI 53189	Phone no 262-542-8401	PTIN P00809862

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

☒ Yes ☐ No

For Paperwork Reduction Act Notice, see the separate instructions.

HTA

Form **990** (2013)

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Part III**Statement of Program Service Accomplishments**

Check if Schedule O contains a response or note to any line in this Part III

☒ X

1	Briefly describe the organization's mission TO PROVIDE FOR THE CHARITABLE NEEDS OF THE FORT ATKINSON METROPOLITAN AREA
<hr/>	
2	Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If "Yes," describe these new services on Schedule O
3	Did the organization cease conducting, or make significant changes in how it conducts, any program services? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If "Yes," describe these changes on Schedule O
4	Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported.
4a	(Code _____) (Expenses \$ _____ including grants of \$ 204,758) (Revenue \$ _____) SEE SCHEDULE O
<hr/>	
4b	(Code _____) (Expenses \$ _____ including grants of \$ 1,229,601) (Revenue \$ _____) SEE SCHEDULE O
<hr/>	
4c	(Code _____) (Expenses \$ _____ including grants of \$ _____) (Revenue \$ _____)
<hr/>	
4d	Other program services (Describe in Schedule O)
(Expenses \$ 0 including grants of \$ 0) (Revenue \$ 0)	
4e	Total program service expenses 0

Part IV Checklist of Required Schedules

	Yes	No
1 Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A	X	
2 Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	X	
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		X
4 Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If "Yes," complete Schedule C, Part II		X
5 Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III		X
6 Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	X	
7 Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II		X
8 Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III		X
9 Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV		X
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		X
11 If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable		
a Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI	X	
b Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII		X
c Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII		X
d Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX		X
e Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X		X
f Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	X	
12a Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII	X	
b Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional		X
13 Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E		X
14a Did the organization maintain an office, employees, or agents outside of the United States?		X
b Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV		X
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		X
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		X
17 Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)		X
18 Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II		X
19 Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III		X
20a Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H		X
b If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?		

Part IV Checklist of Required Schedules (continued)

	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? <i>If "Yes," complete Schedule I, Parts I and II</i>	X	
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? <i>If "Yes," complete Schedule I, Parts I and III</i>	X	
23 Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? <i>If "Yes," complete Schedule J</i>		X
24a Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? <i>If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a</i>		X
24b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?		X
24c Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?		X
24d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?		X
25a Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? <i>If "Yes," complete Schedule L, Part I</i>		X
25b Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? <i>If "Yes," complete Schedule L, Part I</i>		X
26 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? <i>If so, complete Schedule L, Part II</i>		X
27 Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? <i>If "Yes," complete Schedule L, Part III</i>		X
28 Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions)		
28a a A current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV</i>		X
28b b A family member of a current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV</i>		X
28c c An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? <i>If "Yes," complete Schedule L, Part IV</i>		X
29 Did the organization receive more than \$25,000 in non-cash contributions? <i>If "Yes," complete Schedule M</i>		X
30 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M</i>		X
31 Did the organization liquidate, terminate, or dissolve and cease operations? <i>If "Yes," complete Schedule N, Part I</i>		X
32 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If "Yes," complete Schedule N, Part II</i>		X
33 Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? <i>If "Yes," complete Schedule R, Part I</i>		X
34 Was the organization related to any tax-exempt or taxable entity? <i>If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1</i>		X
35a Did the organization have a controlled entity within the meaning of section 512(b)(13)?		X
35b b If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? <i>If "Yes," complete Schedule R, Part V, line 2</i>		X
36 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? <i>If "Yes," complete Schedule R, Part V, line 2</i>		X
37 Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? <i>If "Yes," complete Schedule R, Part VI</i>		X
38 Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? Note. All Form 990 filers are required to complete Schedule O	X	

Part V**Statements Regarding Other IRS Filings and Tax Compliance**Check if Schedule O contains a response or note to any line in this Part V ☐

		Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable.	0	
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable.	0	
c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?		
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return.	1	
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions).	X	
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?		X
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O.		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?		X
b	If "Yes," enter the name of the foreign country: See instructions for filing requirements for FinCen Form 114, Report of Foreign Bank and Financial Accounts (FBAR).		
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?		X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?		X
c	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?		X
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?		
7	Organizations that may receive deductible contributions under section 170(c).		
a	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?		X
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?		
c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?		X
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?		X
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?		X
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?		
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year?		X
9	Sponsoring organizations maintaining donor advised funds.		
a	Did the organization make any taxable distributions under section 4966?		X
b	Did the organization make a distribution to a donor, donor advisor, or related person?		X
10	Section 501(c)(7) organizations. Enter:		
a	Initiation fees and capital contributions included on Part VIII, line 12.		
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities.		
11	Section 501(c)(12) organizations. Enter:		
a	Gross income from members or shareholders.		
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)		
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year.		
13	Section 501(c)(29) qualified nonprofit health insurance issuers.		
a	Is the organization licensed to issue qualified health plans in more than one state? Note. See the instructions for additional information the organization must report on Schedule O.		
b	Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans.		
c	Enter the amount of reserves on hand.		
14a	Did the organization receive any payments for indoor tanning services during the tax year?		X
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O.		

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

Section A. Governing Body and Management

		Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year. 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.		
1b	Enter the number of voting members included in line 1a, above, who are independent.		
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?		X
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, or trustees, or key employees to a management company or other person?		X
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?		X
5	Did the organization become aware during the year of a significant diversion of the organization's assets?		X
6	Did the organization have members or stockholders?		X
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?	X	
7b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?		X
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:		
a	The governing body?	X	
b	Each committee with authority to act on behalf of the governing body?		
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.		X

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

	Yes	No
10a		X
b		
10b		
11a	X	
b		
11b		
12a	X	
b	X	
12b	X	
c	X	
12c	X	
13	X	
14	X	
15		
a		X
b		
15b		
16a		X
b		
16b		

Section C. Disclosure

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

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

19 Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year.

20 State the name, physical address, and telephone number of the person who possesses the books and records of the organization. **PREMIERBANK, TRUSTEE**
70 N MAIN ST, FORT ATKINSON, WI 53538

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 ☐
Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees
1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.

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

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

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(1) PHIL NIEMEYER VICE CHAIR	4 00	X		X				0	0	0
(2) DEAN BROWN DIRECTOR	4 00	X						0	0	0
(3) CHRIS ROGERS DIRECTOR	4 00	X						0	0	0
(4) MARY BEHLING DIRECTOR	4 00	X						0	0	0
(5) BETH MCLAUGHLIN CHAIRMAN	4 00	X		X				0	0	0
(6) JAMES VANCE SECRETARY	4 00			X				0	0	0
(7)										
(8)										
(9)										
(10)										
(11)										
(12)										
(13)										
(14)										

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

(A) Name and title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(15)										
(16)										
(17)										
(18)										
(19)										
(20)										
(21)										
(22)										
(23)										
(24)										
(25)										
1b Sub-total							0	0	0	
c Total from continuation sheets to Part VII, Section A							0	0	0	
d Total (add lines 1b and 1c)							0	0	0	

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

- 3** Did the organization list any **former** officer, director, or trustee, key employee, or highest compensated employee on line 1a? If "Yes," complete Schedule J for such individual
- 4** For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? If "Yes," complete Schedule J for such individual
- 5** Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? If "Yes," complete Schedule J for such person

	Yes	No
3		X
4		X
5		X

Section B. Independent Contractors

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

(A) Name and business address	(B) Description of services	(C) Compensation
		0
		0
		0
		0
		0
2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization	0	

Part VIII Statement of RevenueCheck if Schedule O contains a response or note to any line in this Part VIII ☐

				(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514	
Contributions, Gifts, Grants and Other Similar Amounts	1a	Federated campaigns	1a	0				
	b	Membership dues	1b	0				
	c	Fundraising events	1c	0				
	d	Related organizations	1d	0				
	e	Government grants (contributions)	1e	0				
	f	All other contributions, gifts, grants, and similar amounts not included above	1f	1,457,187				
	g	Noncash contributions included in lines 1a-1f.	\$	0				
	h	Total. Add lines 1a-1f		1,457,187				
Program Service Revenue			Business Code					
	2a	PROGRAM FEES	561000	35,782	35,782			
	b			0				
	c			0				
	d			0				
	e			0				
	f	All other program service revenue		0				
	g	Total. Add lines 2a-2f		35,782				
Other Revenue	3	Investment income (including dividends, interest, and other similar amounts)		496,780	496,780			
	4	Income from investment of tax-exempt bond proceeds		0				
	5	Royalties		0				
	6a	Gross rents	(i) Real	(ii) Personal				
		b	Less rental expenses					
	c	Rental income or (loss)	0	0				
	d	Net rental income or (loss)			0			
	7a	Gross amount from sales of assets other than inventory	(i) Securities	(ii) Other				
		b	Less cost or other basis and sales expenses	0	0			
	c	Gain or (loss)	697,605	0				
	d	Net gain or (loss)			697,605			
	8a	Gross income from fundraising events (not including \$ 0 of contributions reported on line 1c) See Part IV, line 18	a	0				
		b	Less direct expenses	b	0			
	c	Net income or (loss) from fundraising events			0			
	9a	Gross income from gaming activities See Part IV, line 19	a	0				
		b	Less direct expenses	b	0			
	c	Net income or (loss) from gaming activities			0			
	10a	Gross sales of inventory, less returns and allowances	a	0				
		b	Less cost of goods sold	b	0			
	c	Net income or (loss) from sales of inventory			0			
Miscellaneous Revenue		Business Code						
11a			0					
b			0					
c			0					
d	All other revenue		0					
e	Total. Add lines 11a-11d		0					
12	Total revenue. See instructions		2,687,354	532,562	0	0		

Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A).

Check if Schedule O contains a response or note to any line in this Part IX ☐

Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1 Grants and other assistance to governments and organizations in the United States. See Part IV, line 21	1,229,601	1,229,601		
2 Grants and other assistance to individuals in the United States. See Part IV, line 22	204,758	204,758		
3 Grants and other assistance to governments, organizations, and individuals outside the United States. See Part IV, lines 15 and 16	0			
4 Benefits paid to or for members	0			
5 Compensation of current officers, directors, trustees, and key employees	37,105		37,105	
6 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)	0			
7 Other salaries and wages	0			
8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	0			
9 Other employee benefits	0			
10 Payroll taxes	2,838		2,838	
11 Fees for services (non-employees)				
a Management				
b Legal	0			
c Accounting	2,500		2,500	
d Lobbying	0			
e Professional fundraising services. See Part IV, line 17	0			
f Investment management fees	0			
g Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O.)	0			
12 Advertising and promotion	1,963		1,963	
13 Office expenses	552		552	
14 Information technology	6,528		6,528	
15 Royalties	0			
16 Occupancy	0			
17 Travel	0			
18 Payments of travel or entertainment expenses for any federal, state, or local public officials	0			
19 Conferences, conventions, and meetings	139		139	
20 Interest	0			
21 Payments to affiliates	0			
22 Depreciation, depletion, and amortization	0	0	0	0
23 Insurance	1,808		1,808	
24 Other expenses. Itemize expenses not covered above (List miscellaneous expenses on line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.)				
a TRUSTEE / MANAGEMENT FEES - BADGER	13,398		13,398	
b TRUSTEE / MANAGEMENT FEES - PREMIER	79,640		79,640	
c ADMIN FEES	35,782		35,782	
d PROFESSIONAL FEES	503		503	
e All other expenses. ADMIN EXPENSE	2,024		2,024	
25 Total functional expenses. Add lines 1 through 24e	1,619,139	1,434,359	184,780	0
26 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here <input type="checkbox"/> if following SOP 98-2 (ASC 958-720)				

Part X Balance SheetCheck if Schedule O contains a response or note to any line in this Part X ☐

		(A) Beginning of year		(B) End of year
Assets	1 Cash—non-interest-bearing		1	
	2 Savings and temporary cash investments	2,976,488	2	2,156,100
	3 Pledges and grants receivable, net	21,022	3	3,226
	4 Accounts receivable, net	0	4	0
	5 Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees Complete Part II of Schedule L		5	
	6 Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions) Complete Part II of Schedule L		6	
	7 Notes and loans receivable, net	0	7	0
	8 Inventories for sale or use		8	
	9 Prepaid expenses and deferred charges		9	
	10a Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D	10a 3,000		
	b Less accumulated depreciation	10b 0	10c	3,000
	11 Investments—publicly traded securities	18,586,320	11	21,754,419
	12 Investments—other securities See Part IV, line 11	0	12	0
	13 Investments—program-related See Part IV, line 11	0	13	0
	14 Intangible assets	0	14	0
	15 Other assets See Part IV, line 11	0	15	0
16 Total assets. Add lines 1 through 15 (must equal line 34)	21,583,830	16	23,916,745	
Liabilities	17 Accounts payable and accrued expenses	30	17	542
	18 Grants payable	837,446	18	1,179,507
	19 Deferred revenue		19	
	20 Tax-exempt bond liabilities		20	
	21 Escrow or custodial account liability Complete Part IV of Schedule D		21	
	22 Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons Complete Part II of Schedule L		22	
	23 Secured mortgages and notes payable to unrelated third parties	0	23	0
	24 Unsecured notes and loans payable to unrelated third parties	0	24	0
	25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24) Complete Part X of Schedule D	0	25	0
	26 Total liabilities. Add lines 17 through 25	837,476	26	1,180,049
Net Assets or Fund Balances	Organizations that follow SFAS 117 (ASC 958), check here <input checked="" type="checkbox"/> and complete lines 27 through 29, and lines 33 and 34.			
	27 Unrestricted net assets	3,921,473	27	4,124,024
	28 Temporarily restricted net assets	16,824,881	28	18,612,672
	29 Permanently restricted net assets		29	
	Organizations that do not follow SFAS 117 (ASC958), check here <input type="checkbox"/> and complete lines 30 through 34.			
	30 Capital stock or trust principal, or current funds		30	
	31 Paid-in or capital surplus, or land, building, or equipment fund		31	
	32 Retained earnings, endowment, accumulated income, or other funds		32	
	33 Total net assets or fund balances	20,746,354	33	22,736,696
34 Total liabilities and net assets/fund balances	21,583,830	34	23,916,745	

Part XI Reconciliation of Net AssetsCheck if Schedule O contains a response or note to any line in this Part XI. ☐

1	Total revenue (must equal Part VIII, column (A), line 12)	1	2,687,354
2	Total expenses (must equal Part IX, column (A), line 25)	2	1,619,139
3	Revenue less expenses Subtract line 2 from line 1	3	1,068,215
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	20,746,354
5	Net unrealized gains (losses) on investments	5	922,127
6	Donated services and use of facilities	6	
7	Investment expenses	7	
8	Prior period adjustments	8	
9	Other changes in net assets or fund balances (explain in Schedule O)	9	
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10	22,736,696

Part XII Financial Statements and ReportingCheck if Schedule O contains a response or note to any line in this Part XII. ☐

- 1** Accounting method used to prepare the Form 990 ☐ Cash ☒ Accrual ☐ Other _____
If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O
- 2a** Were the organization's financial statements compiled or reviewed by an independent accountant?
If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both
☐ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis
- b** Were the organization's financial statements audited by an independent accountant?
If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both
☐ Separate basis ☒ Consolidated basis ☐ Both consolidated and separate basis
- c** If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant?
If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O
- 3a** As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?
- b** If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits

	Yes	No
2a		X
2b	X	
2c		X
3a		X
3b		

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.

▶ 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.

OMB No 1545-0047

2013

**Open to Public
Inspection**

Department of the Treasury
Internal Revenue Service

Name of the organization

FORT ATKINSON COMMUNITY FOUNDATION

Employer identification number

39-6220899

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

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

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

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

(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1–9 above or IRC section (see instructions))	(iv) Is the organization in col (i) listed in your governing document?		(v) Did you notify the organization in col (i) of your support?		(vi) Is the organization in col (i) organized in the U.S.?		(vii) Amount of monetary support
			Yes	No	Yes	No	Yes	No	
(A)									
(B)									
(C)									
(D)									
(E)									
Total									0

Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)

(Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

Section A. Public Support

Calendar year (or fiscal year beginning in) ►	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
1 Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants.")	799,313	1,091,054	527,691	468,237	1,492,969	4,379,264
2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						0
3 The value of services or facilities furnished by a governmental unit to the organization without charge						0
4 Total. Add lines 1 through 3	799,313	1,091,054	527,691	468,237	1,492,969	4,379,264
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						4,379,264

Section B. Total Support

Calendar year (or fiscal year beginning in) ►	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
7 Amounts from line 4	799,313	1,091,054	527,691	468,237	1,492,969	4,379,264
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	635,439	886,763	1,264,624	1,695,506	1,194,385	5,676,717
9 Net income from unrelated business activities, whether or not the business is regularly carried on						0
10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)						0
11 Total support. Add lines 7 through 10						10,055,981
12 Gross receipts from related activities, etc. (see instructions)					12	
13 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here ► <input type="checkbox"/>						

Section C. Computation of Public Support Percentage

14 Public support percentage for 2013 (line 6, column (f) divided by line 11, column (f))	14	43.55%
15 Public support percentage from 2012 Schedule A, Part II, line 14	15	41.24%
16a 33 1/3% support test—2013. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization. ► <input checked="" type="checkbox"/>		
b 33 1/3% support test—2012. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization. ► <input type="checkbox"/>		
17a 10%-facts-and-circumstances test—2013. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization. ► <input type="checkbox"/>		
b 10%-facts-and-circumstances test—2012. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization. ► <input type="checkbox"/>		
18 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions. ► <input type="checkbox"/>		

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

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

Section A. Public Support

Calendar year (or fiscal year beginning in) ►	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
1 Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants.")						0
2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						0
3 Gross receipts from activities that are not an unrelated trade or business under section 513						0
4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						0
5 The value of services or facilities furnished by a governmental unit to the organization without charge						0
6 Total. Add lines 1 through 5	0	0	0	0	0	0
7a. Amounts included on lines 1, 2, and 3 received from disqualified persons						0
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						0
c Add lines 7a and 7b	0	0	0	0	0	0
8 Public support. (Subtract line 7c from line 6.)						0

Section B. Total Support

Calendar year (or fiscal year beginning in) ►	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
9 Amounts from line 6	0	0	0	0	0	0
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						0
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						0
c Add lines 10a and 10b	0	0	0	0	0	0
11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						0
12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)						0
13 Total support. (Add lines 9, 10c, 11, and 12.)	0	0	0	0	0	0
14 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here ► <input type="checkbox"/>						

Section C. Computation of Public Support Percentage

15 Public support percentage for 2013 (line 8, column (f) divided by line 13, column (f))	15	0.00%
16 Public support percentage from 2012 Schedule A, Part III, line 15	16	0.00%

Section D. Computation of Investment Income Percentage

17 Investment income percentage for 2013 (line 10c, column (f) divided by line 13, column (f))	17	0.00%
18 Investment income percentage from 2012 Schedule A, Part III, line 17	18	0.00%

19a 33 1/3% support tests—2013. If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization ► ☐

b 33 1/3% support tests—2012. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and line 18 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization ► ☐

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

Part IV

Supplemental Information. 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)

Area for supplemental information with horizontal dashed lines.

**SCHEDULE D
(Form 990)**

Department of the Treasury
Internal Revenue Service

Supplemental Financial Statements

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

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

OMB No 1545-0047

2013

**Open to Public
Inspection**

Name of the organization

FORT ATKINSON COMMUNITY FOUNDATION

Employer identification number

39-6220899

Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts.

Complete if the organization answered "Yes" to Form 990, Part IV, line 6

	(a) Donor advised funds	(b) Funds and other accounts
1 Total number at end of year	6	
2 Aggregate contributions to (during year)	10,600	
3 Aggregate grants from (during year)	75,230	
4 Aggregate value at end of year	778,132	

5 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? ☒ Yes ☐ No

6 Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit? ☒ Yes ☐ No

Part II Conservation Easements.

Complete if the organization answered "Yes" to Form 990, Part IV, line 7

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

<input type="checkbox"/> Preservation of land for public use (e.g., recreation or education)	<input type="checkbox"/> Preservation of an historically important land area
<input type="checkbox"/> Protection of natural habitat	<input type="checkbox"/> Preservation of a certified historic structure
<input type="checkbox"/> Preservation of open space	

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

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

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

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

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

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

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

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

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

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

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

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

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

(i) Revenues included in Form 990, Part VIII, line 1 ▶ \$

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

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

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

b Assets included in Form 990, Part X ▶ \$

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets (continued)

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

a ☐ Public exhibition

d ☐ Loan or exchange programs

b ☐ Scholarly research

e ☐ Other

c ☐ Preservation for future generations

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

5 During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection?

☐ Yes ☐ No

Part IV Escrow and Custodial Arrangements.

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

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

☐ Yes ☐ No

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

	Amount
1c Beginning balance	0
1d Additions during the year	
1e Distributions during the year	
1f Ending balance	0

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

☐ Yes ☒ No

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

☐

Part V Endowment Funds.

Complete if the organization answered "Yes" to Form 990, Part IV, line 10

	(a) Current year	(b) Prior year	(c) Two years back	(d) Three years back	(e) Four years back
1a Beginning of year balance	0	0	0		
b Contributions					
c Net investment earnings, gains, and losses					
d Grants or scholarships					
e Other expenditures for facilities and programs					
f Administrative expenses					
g End of year balance	0	0	0	0	0

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

a Board designated or quasi-endowment ☐ %

b Permanent endowment ☐ %

c Temporarily restricted endowment ☐ %

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

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

(i) unrelated organizations

(ii) related organizations

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

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

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

Part VI Land, Buildings, and Equipment.

Complete if the organization answered "Yes" to Form 990, Part IV, line 11a. See Form 990, Part X, line 10

Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land	0	0		0
b Buildings	0	0	0	0
c Leasehold improvements	0	0	0	0
d Equipment	0	3,000	0	3,000
e Other	0	0	0	0
Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10(c).)				3,000

Part VII Investments—Other Securities.

Complete if the organization answered "Yes" to Form 990, Part IV, line 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	0	
(2) Closely-held equity interests	0	
(3) Other		
(A)		
(B)		
(C)		
(D)		
(E)		
(F)		
(G)		
(H)		
Total (Column (b) must equal Form 990, Part X, col. (B) line 12)	0	

Part VIII Investments—Program Related.

Complete if the organization answered "Yes" to Form 990, Part IV, line 11c. See Form 990, Part X, line 13.

(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)		
Total (Column (b) must equal Form 990, Part X, col. (B) line 13)	0	

Part IX Other Assets.

Complete if the organization answered "Yes" to Form 990, Part IV, line 11d. See Form 990, Part X, line 15.

(a) Description	(b) Book value
(1)	
(2)	
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
Total (Column (b) must equal Form 990, Part X, col. (B) line 15)	0

Part X Other Liabilities.

Complete if the organization answered "Yes" to Form 990, Part IV, line 11e or 11f. See Form 990, Part X, line 25.

1. (a) Description of liability	(b) Book value
(1) Federal income taxes	0
(2)	
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
Total (Column (b) must equal Form 990, Part X, col. (B) line 25)	0

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

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

Complete if the organization answered "Yes" to Form 990, Part IV, line 12a

1	Total revenue, gains, and other support per audited financial statements		1	3,609,481
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12			
a	Net unrealized gains on investments	2a	922,127	
b	Donated services and use of facilities	2b		
c	Recoveries of prior year grants	2c		
d	Other (Describe in Part XIII)	2d		
e	Add lines 2a through 2d		2e	922,127
3	Subtract line 2e from line 1		3	2,687,354
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1			
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a		
b	Other (Describe in Part XIII)	4b		
c	Add lines 4a and 4b		4c	0
5	Total revenue. Add lines 3 and 4c . (This must equal Form 990, Part I, line 12.)		5	2,687,354

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

Complete if the organization answered "Yes" to Form 990, Part IV, line 12a

1	Total expenses and losses per audited financial statements		1	1,619,139
2	Amounts included on line 1 but not on Form 990, Part IX, line 25			
a	Donated services and use of facilities	2a		
b	Prior year adjustments	2b		
c	Other losses	2c		
d	Other (Describe in Part XIII)	2d		
e	Add lines 2a through 2d		2e	0
3	Subtract line 2e from line 1		3	1,619,139
4	Amounts included on Form 990, Part IX, line 25, but not on line 1			
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a		
b	Other (Describe in Part XIII)	4b		
c	Add lines 4a and 4b		4c	0
5	Total expenses. Add lines 3 and 4c . (This must equal Form 990, Part I, line 18.)		5	1,619,139

Part XIII Supplemental Information

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

Part XIII Supplemental Information *(continued)*

**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 990, Part IV, line 21 or 22.

Department of the Treasury
Internal Revenue Service
Name of the organization

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

► Attach to Form 990.

Employer identification number

FORT ATKINSON COMMUNITY FOUNDATION

39-6220899

Part I General Information on Grants and Assistance

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

☒ Yes ☐ No

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

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

1 (a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
(1) RAINBOW HOSPICE FOUNDATION			35,000				
(2) FORT ATKINSON MEMORIAL HOSPITAL FOUNDATION - THOMPSON			26,076				
(3) CITY OF FORT ATKINSON WEST PARK			15,000				
(4) ROCK RIVER HERITAGE			893,660				
(5) EVERGREEN CEMETARY ASSOCIATION			9,230				
(6) NATIONAL DAIRY SHRINE			40,000				
(7) CITY OF FORT ATKINSON HAUMERSON'S POND			40,000				
(8) JEFFERSON COUNTY PARKS			5,000				
(9) CITY OF FORT ATKINSON VETERANS MEMORIAL PARK			22,366				
(10) CITY OF FORT ATKINSON BARRIE PARK BATHROOMS			16,420				
(11) BOYS AND GIRLS CLUB			35,336				
(12)							
2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table							9
3 Enter total number of other organizations listed in the line 1 table							2

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

HTA

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

	(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non-cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of non-cash assistance
1	SCHOLARSHIPS PAID OUT - SEE ATTACHED			204,758		
2						
3						
4						
5						
6						
7						

Part IV **Supplemental Information.** Provide the information required in Part I, line 2, Part III, column (b), and any other additional information.

Part I Line 2 See Schedule O Supplemental information to Form 990

Part III Line 1 See Schedule O Supplemental information to Form 990

SCHEDULE O
(Form 990)

Department of the Treasury
Internal Revenue Service

Supplemental Information to Form 990

Attach to Form 990 To be completed by organizations to provide
additional information for responses to specific questions for the
Form 990 or to provide any additional information

OMB No 1545-0047

2013

**Open to Public
Inspection**

Name of the
Organization

FORT ATKINSON COMMUNITY FOUNDATION

Employer identification number

39 6220899

Form 990

Page #1 - Part 1 #1-SUMMARY AND PART III #1

The Fort Atkinson Community Foundation is a community trust which is not organized for any specific charitable purpose or for the conduct of any particular charitable activities, but is organized generally to provide for the charitable needs of the Fort Atkinson metropolitan area. Accordingly, the Fort Atkinson Community Foundation Board has adopted a flexible procedure for approving grant requests. Normally a potential recipient of Foundation funds will submit an application and make an oral presentation to the Fort Atkinson Community Foundation Board setting forth the purposes for which the funds will be used, how the funds will be administered, and the nature of the recipient organization. If the Fort Atkinson Community Foundation Board believes the proposed grant may merit the Foundation's support, it makes such investigation as may be appropriate under the circumstances to assure that the proposed use and recipient are consistent with the Foundation's purposes as set out in its Declaration of Trust. Fort Atkinson, Wisconsin, is a relatively small community of 12,500 people. The members of the Board are familiar with most applicant organizations. Accordingly, intensive investigation of potential grant recipients would be needed only in unusual circumstances.

Many of the larger grants that this Foundation has made are paid out as construction progresses. Several monies are paid as reimbursement for invoices when materials are purchased. Reports are required from recipients of grants at completion and periodically as the project progresses. Representatives of the organizations receiving grants often appear at the quarterly meetings of the Foundation to give the Board a report and/or provide a written report.

Article I of the Fort Atkinson Community Foundation Declaration of Trust states:

The purpose of Fort Atkinson Community Foundation is to receive and accept property exclusively for educational, cultural, charitable or benevolent purposes for the benefit and improvement of residents of the Fort Atkinson, Wisconsin, metropolitan area in such a way that the quality of life in the Fort Atkinson metropolitan area shall be enhanced. Distributions may be made occasionally to qualified organizations located or operating outside of the Fort Atkinson metropolitan area provided that the Board determines there will be a substantial benefit derived therefrom for the residents of the Fort Atkinson metropolitan area.

In regard to the scholarship program that has been established, the Board determines the amount of the scholarship, and has also determined written guidelines concerning the qualifications and use of the scholarship. An advisory screening committee consisting of a Board member, school guidance and school administrative personnel and public members is appointed by the Board to preliminarily screen applications and make recommendations to the Board as to the most qualified applicants.

Fort Atkinson Community Foundation

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Final determination as to the amount and the recipient of each scholarship grant is made by the Board. If a student is eligible for additional payments in the future, the student must furnish their grades and provide proof they continue to meet all eligibility requirements of the scholarship.

With some of the most recent contributions designated as "Challenge Grants," the Foundation agreed to contribute sizeable donations to projects provided that the organization raised specific amounts from other sources, and in several cases, more than just matching the grant from this Foundation. This includes the following projects:

- (a) Addition and renovation of the museum operated by the Fort Atkinson Historical Society. The building is owned by the City of Fort Atkinson.
- (b) Major reconstruction and addition to the Fort Atkinson Hospital;
- (c) Addition to Fort Atkinson campus of MATC (technical college);
- (d) Renovation of an historic water tower in Fort Atkinson.
- (e) Major addition and remodeling to the Fort Atkinson Public Library, which is owned by the City of Fort Atkinson.

FORM 990, SECTION III #4a

This Foundation has an extensive scholarship program as shown on the Detail of Grants attached to this return.

There are thirty-five (35) scholarship funds which benefit scores of individuals as shown on the List of Disbursements.

Procedure and operation of each scholarship fund through applications, screenings and recommendations is described in attachment to this return.

The amount of scholarship grants listed above is distributed from the various scholarship funds. The criteria of each scholarship fund are specifically set forth in documents under which the Foundation accepted the scholarship. The individuals who work on screening committees and the scholarship committee that makes recommendations to the Board are all volunteers. There were no direct expenses of the scholarship fund other than administration, time and expenses that cannot be segregated.

See attachment in reference to Page 1, Part I for additional material on the scholarships.

Of the revenue shown above, many of the amounts received were payments to endowment for different scholarship funds.

FORM 990, SECTION III, #4b

This Foundation does not have any other program that could be called an activity other than the scholarship fund listed above. The Foundation receives numerous grant requests for assistance to providing funds for many projects within the City of Fort Atkinson. Grants are primarily given for capital improvements and equipment, but not operating expenses.

The \$1,229,601 is the disbursement of cash to the various grant recipients. See Schedule I for recipients of grants in excess of \$5,000.

FORM 990, PART VI, SECTION A, #7a.

There are five directors of this Foundation, each serves for a five-year term. They are all staggered terms, so only one new director is appointed each year. Each director is appointed by a different facet of the Fort Atkinson community, and is not a representative of the organization that appoints the director.

Reference is made to Paragraph 2.2, 2.21 and 2.3 of the Fort Atkinson Community Foundation Declaration of Trust, which states as follows:

2.2 Except as hereinafter otherwise provided, all members of the Fort Atkinson Community Foundation Board shall hold office for a term of five years from the first day of January following their appointments; except that those first appointed shall serve for the original terms set forth in Paragraph 2.21 below, counting from the first day of January after their appointments, although their terms shall commence as soon as appointed.

Fort Atkinson Community Foundation

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2.21 The members of the Fort Atkinson Community Foundation Board shall be appointed as follows:

- (a) One member shall be appointed by the Board of Education, Joint School District No. 6 - original term, one year.
- (b) One member shall be appointed by the Board of Directors of the First National Bank of Fort Atkinson (aka PremierBank) - original term, two years.
- (c) One member shall be appointed by the Board of Directors of the Fort Atkinson Chamber of Commerce-original term, three years.
- (d) One member shall be appointed by the Board of Directors of the Fort Atkinson Historical Society-original term, four years.
- (e) One member shall be appointed by the City Council of Fort Atkinson, Wisconsin - original term, five years; the original appointed of the City Council of Fort Atkinson shall be deemed to be the Fort Atkinson City Manager.

2.3 All members of the Fort Atkinson Community Foundation Board shall serve until their successors are selected and qualified. No member shall be eligible for reappointment for successive terms with the exception of the original members of the Board, each of whom may be reappointed for one five-year term succeeding his original term.

FORM 990, PART VI, SECTION B, #11a.

The 990 is prepared by the independent auditor and reviewed by the members of the audit committee, then signed by the board chairman.

FORM 990, PART VI, SECTION B, #12c

A member of the board conducts an annual conflict of interest review and reports the results to the Board of Directors.

FORM 990, PART VI, SECTION B, #12c

All documents are available upon request at the Foundation's business office. In addition, a detail financial statement is published annually in the local newspaper.

FORT ATKINSON COMMUNITY FOUNDATION

#39-6220899

FORM 990, SCHEDULE I, PART III

Payee	Posting Date	Amount
STUDENT ACADEMIC SERVICES BUILDING SECOND FLOOR FBO RYAN SMITH 2013 SCHOLARSHIP AWARD	07/23/2013	1,000
BARUCH COLLEGE BURSAR OFFICE FBO MARIAH ERDMAN 2013 SCHOLARSHIP AWARD	07/23/2013	5,000
BARUCH COLLEGE BURSAR OFFICE FBO MARIAH ERDMAN 2013 SCHOLARSHIP AWARD	07/23/2013	400
STUDENT REGISTRATION & FINANCIAL SERVICE UNIVERSITY OF PENNSYLVANIA FBO KYLE KLOPCIC 2013 SCHOLARSHIP AWARD	07/23/2013	4,000
UNIVERSITY OF WISCONSIN-WHITEWATER FBO NICHOLAS THOM 2013 SCHOLARSHIP AWARD EILEEN HARRISON EDUCATION SCHOLARSHIP	07/23/2013	2,000
UNIVERSITY OF MINNESOTA - TWIN CITIES FBO SHALANE HUNDT 3RD INSTALLMENT - CLASS OF 2011 JUANITA SCHREINER SCHOLARSHIP	07/23/2013	2,125
MACALASTER COLLEGE FBO KERRY HARTWICK 7TH INSTALLMENT - CLASS OF 2010 WALTER & LOUISE BUELL MERIT SCHOLARSHIP	07/23/2013	2,875
YALE UNIVERSITY FBO TYLER GORMAN 2012 SCHOLARSHIP AWARD WALTER & LOUISE BUELL GRADUATE	07/23/2013	1,500
YALE UNIVERSITY FBO JOHN KLEINSCHMIDT 2013 SCHOLARSHIP AWARD WALTER & LOUISE BUELL GRADUATE	07/23/2013	3,000
YALE UNIVERSITY FBO TYLER GORMAN 2ND INSTALLMENT - CLASS OF 2012 JUANITA SCHREINER SCHOLARSHIP	07/23/2013	1,800
LUTHER COLLEGE FBO JOHN WESTBY 2013 SCHOLARSHIP AWARD DR JAMES RUSSELL ATHLETIC SCHOLARSHIP	07/23/2013	1,500
UNIVERSITY OF WISCONSIN-WHITEWATER FBO ANTHONY GALSTON 2013 SCHOLARSHIP AWARD PAY IT FORWARD SCHOLARSHIP	07/23/2013	500
UNIVERSITY OF WISCONSIN-WHITEWATER FBO KATIE STEWART 1ST INSTALLMENT - CLASS OF 2013 SHAW KNOX AAUW ADOPT-A-STUDENT	07/23/2013	1,000
MADISON COLLEGE FBO NANCY HANSON 2013 SCHOLARSHIP AWARD AAUW WOMEN SECOND CHANCE SCHOLARSHIP	07/23/2013	1,000
UNIVERSITY OF WISCONSIN-STEVENS POINT FBO JOELLE BENDER 2013 SCHOLARSHIP AWARD RALPH & CLARA RUTLEDGE SCHOLARSHIP	07/23/2013	2,000
UNIVERSITY OF WISCONSIN-OSHKOSH FBO MORGAN BRITTAIN 2013 SCHOLARSHIP AWARD ROSE INSPIRE-A-DREAM SCHOLARSHIP	07/23/2013	1,000
UNIVERSITY OF MINNESOTA - TWIN CITIES FBO MARK BUDLONG 2013 SCHOLARSHIP AWARD WALTER & LOUISE BUELL GRADUATE	07/23/2013	1,500
UNIVERSITY OF WISCONSIN-MADISON FBO MICHELE COLEMAN 2013 SCHOLARSHIP AWARD WALTER & LOUISE BUELL GRADUATE	07/23/2013	4,000
UNIVERSITY OF WISCONSIN-MADISON FBO DEVIN HUNDT 2013 SCHOLARSHIP AWARD WALTER & LOUISE BUELL GRADUATE	07/23/2013	4,000
UNIVERSITY OF WISCONSIN-MADISON FBO SARAH SCHMIDT 2013 SCHOLARSHIP AWARD WALTER & LOUISE BUELL GRADUATE	07/23/2013	2,500
UNIVERSITY OF WISCONSIN-MADISON FBO BRIAN BUSS 2013 SCHOLARSHIP AWARD WALTER & LOUISE BUELL GRADUATE	07/23/2013	5,000
UNIVERSITY OF WISCONSIN-MADISON FBO RAMSEY STATZ 5TH INSTALLMENT - CLASS OF 2011 WALTER & LOUISE BUELL MERIT SCHOLARSHIP	07/23/2013	2,875
UNIVERSITY OF WISCONSIN-MADISON FBO MIRTEYUR SEYDOV 1ST INSTALLMENT - CLASS OF 2013 DR SYDNEY WEIDEMANN SCHOLARSHIP	07/23/2013	1,250
UNIVERSITY OF MINNESOTA FBO CORY HOLLINGER 1ST RENEWAL/1ST INSTALLMENT-CLASS OF 12 BATTERMAN FAMILY SCHOLARSHIP	07/24/2013	1,500
MADISON COLLEGE FBO KARRIE KLUSKEN 2013 SCHOLARSHIP AWARD AAUW-SECOND CHANCE SCHOLARSHIP	07/24/2013	1,000
UNIVERSITY OF WISCONSIN-STEVENS POINT FBO GRACE FIRARI 3RD RENEWAL/1ST INSTALLMENT-CLASS OF 10 BATTERMAN FAMILY SCHOLARSHIP	07/24/2013	1,500
UNIVERSITY OF WISCONSIN-OSHKOSH FBO TAYLOR BAUER 1ST RENEWAL/1ST INSTALLMENT-CLASS OF 12 BATTERMAN FAMILY SCHOLARSHIP	07/24/2013	1,500
MARQUETTE UNIVERSITY FBO OLIVIA AULT 1ST RENEWAL/1ST INSTALLMENT-CLASS OF 12 BATTERMAN FAMILY SCHOLARSHIP	07/24/2013	1,500
MARQUETTE UNIVERSITY FBO SCOTT ROSSING 1ST RENEWAL/1ST INSTALLMENT-CLASS OF 12 BATTERMAN FAMILY SCHOLARSHIP	07/24/2013	1,500
UNIVERSITY OF WISCONSIN-MADISON FBO THOMAS JOHNSON 3RD RENEWAL/1ST INSTALLMENT-CLASS OF 10 BATTERMAN FAMILY SCHOLARSHIP	07/24/2013	1,500
UNIVERSITY OF WISCONSIN-MADISON FBO TAYLOR BROWN 1ST RENEWAL/2ND INSTALLMENT-CLASS OF 11 BATTERMAN FAMILY SCHOLARSHIP	07/24/2013	1,500
UNIVERSITY OF WISCONSIN-MADISON FBO RACHEL HOMMEN 1ST RENEWAL/2ND INSTALLMENT-CLASS OF 11 BATTERMAN FAMILY SCHOLARSHIP	07/24/2013	1,500
UNIVERSITY OF WISCONSIN-MADISON FBO REBECCA MCENRY 2ND RENEWAL/1ST INSTALLMENT-CLASS OF 11 BATTERMAN FAMILY SCHOLARSHIP	07/24/2013	1,500
UNIVERSITY OF WISCONSIN-MADISON FBO AMANDA NAVINE 1ST RENEWAL/1ST INSTALLMENT-CLASS OF 12 BATTERMAN FAMILY SCHOLARSHIP	07/24/2013	1,500
UNIVERSITY OF WISCONSIN EAU CLAIRE FBO JULIA JOHNSON 3RD RENEWAL/1ST INSTALLMENT-CLASS OF 10 BATTERMAN FAMILY SCHOLARSHIP	07/24/2013	1,500
UNIVERSITY OF WISCONSIN-MADISON FBO EMILIE BAKKEN 3RD RENEWAL/1ST INSTALLMENT-CLASS OF 10 BATTERMAN FAMILY SCHOLARSHIP	07/24/2013	1,500
MILWAUKEE SCHOOL OF ENGINEERING FBO ERIC JOHNSON 2ND RENEWAL/1ST INSTALLMENT-CLASS OF 11 BATTERMAN FAMILY SCHOLARSHIP	07/24/2013	1,500
FLORIDA STATE UNIVERSITY FBO ALYSSA JONES 3RD RENEWAL/1ST INSTALLMENT-CLASS OF 10 BATTERMAN FAMILY SCHOLARSHIP	07/24/2013	1,500
TAYLOR UNIVERSITY FBO LAUREN RIGGS 3RD INSTALLMENT - CLASS OF 2011 JUANITA SCHREINER SCHOLARSHIP	07/25/2013	2,125
UNIVERSITY OF WISCONSIN-WHITEWATER FBO DALLAS RAMSDEN 1ST INSTALLMENT - CLASS OF 2013 DR SYDNEY WEIDEMANN SCHOLARSHIP	07/29/2013	1,250
UNIVERSITY OF WISCONSIN-STEVENS POINT FBO JOELLE BENDER 2013 SCHOLARSHIP AWARD JANE SHAW KNOX/AAUW GRADUATE SCHOLARSHIP	07/30/2013	1,700
PRINCETON UNIVERSITY/SA FBO ARJUN DHILLON 5TH INSTALLMENT - CLASS OF 2011 WALTER & LOUISE BUELL MERIT SCHOLARSHIP	07/30/2013	2,875
UNIVERSITY OF WISCONSIN-OSHKOSH FBO AMANDA CECHE 1ST INSTALLMENT - CLASS OF 2013 AAUW ADOPT-A-STUDENT SCHOLARSHIP	08/01/2013	1,000
KENNESAW STATE UNIVERSITY BURSAR'S OFFICE FBO NICKI SMILEY 2013 SCHOLARSHIP AWARD	08/01/2013	1,000
UNIVERSITY OF WISCONSIN-MADISON FBO EMILIE BAKKEN 1ST INSTALLMENT - CLASS OF 2013 AAUW ADOPT-A-STUDENT SCHOLARSHIP	08/06/2013	1,000
UNIVERSITY OF WISCONSIN-PLATTEVILLE FBO CLINTON BENSON 2013 SCHOLARSHIP AWARD JASON DAHNERT MEMORIAL SCHOLARSHIP	08/09/2013	3,500
UNIVERSITY OF WISCONSIN-MADISON FBO THOMAS JOHNSON 3RD RENEWAL FINAL PAYMENT-CLASS OF 2010 BATTERMAN FAMILY SCHOLARSHIP	08/13/2013	1,500
UNIVERSITY OF WISCONSIN-MADISON FBO EMILIE BAKKEN 3RD RENEWAL FINAL PAYMENT-CLASS OF 2010 BATTERMAN FAMILY SCHOLARSHIP	08/13/2013	1,500
UNIVERSITY OF WISCONSIN-MADISON FBO LEAH WESTON 3RD INSTALLMENT - CLASS OF 2012 WALTER & LOUISE BUELL MERIT SCHOLARSHIP	08/13/2013	2,875
UNIVERSITY OF WISCONSIN-EAU CLAIRE FBO JULIA JOHNSON 3RD RENEWAL FINAL PAYMENT-CLASS OF 2010 BATTERMAN FAMILY SCHOLARSHIP	08/13/2013	1,500
UNIVERSITY OF MINNESOTA FBO TAYLOR SMITHMAN 7/8TH - FINAL PAYMENT - CLASS OF 2010 WALTER & LOUISE BUELL MERIT SCHOLARSHIP	08/13/2013	5,750
UNIVERSITY OF WISCONSIN-STEVENS POINT FBO GRACE FIRARI 3RD RENEWAL FINAL PAYMENT-CLASS OF 2010 BATTERMAN FAMILY SCHOLARSHIP	08/13/2013	1,500
FLORIDA STATE UNIVERSITY FBO ALYSSA JONES 3RD RENEWAL FINAL PAYMENT-CLASS OF 2010 BATTERMAN FAMILY SCHOLARSHIP	08/13/2013	1,500
UNIVERSITY OF WISCONSIN-MADISON FBO CASSIDY LYONS 4TH INSTALLMENT - CLASS OF 2010 DR JAMES RUSSELL ATHLETIC SCHOLARSHIP	08/16/2013	625
UNIVERSITY OF WISCONSIN-WHITEWATER FBO LAUREN PFEIFER 2013 SCHOLARSHIP AWARD DR JAMES RUSSELL ATHLETIC SCHOLARSHIP	08/16/2013	1,500
BRANDEIS UNIVERSITY BRANDEIS OFFICE OF STUDENT FINANCIAL SER FBO KARINA WAGENPFEIL 3RD INSTALLMENT - CLASS OF 2012	08/16/2013	1,251
YALE UNIVERSITY FBO NATHAN KEMPEN 2013 SCHOLARSHIP AWARD ROBERT & JUDITH KNAPP SCHOLARSHIP	08/20/2013	2,500
YALE UNIVERSITY FBO NATHAN KEMPEN 2013 SCHOLARSHIP AWARD RUTLEDGE MEMORIAL SCHOLARSHIP	08/20/2013	1,500
UNIVERSITY OF WISCONSIN-OSHKOSH T BAUER-CANCELLED ENROLLMENT, CK #62517-724REFUND	08/23/2013	(1,500)
UNIVERSITY OF WISCONSIN-WHITEWATER FBO MARIA BEYER 2013 SCHOLARSHIP AWARD AAUW GRADUATE SCHOLARSHIP	08/23/2013	1,700
UNIVERSITY OF WISCONSIN-WHITEWATER FBO MARIA BEYER 2013 SCHOLARSHIP AWARD WALTER/LOUISE BUELL GRADUATE SCHOLARSHIP	08/23/2013	1,000
UNIVERSITY OF WISCONSIN-LACROSSE FBO MARLEE RICE 3RD INSTALLMENT - CLASS OF 2011 DR JAMES RUSSELL ATHLETIC SCHOLARSHIP	08/23/2013	313
UNIVERSITY OF WISCONSIN-LACROSSE FBO TAYLOR BAUER 1ST RENEWAL 2ND INSTALLMENT-CLASS OF 12 BATTERMAN FAMILY FOUNDATION SCHOLARSHIP	08/26/2013	1,500
UNIVERSITY OF WISCONSIN-WHITEWATER FBO OLIVIA AULT 1ST RENEWAL/2ND INSTALLMENT-CLASS OF 12 BATTERMAN FAMILY FOUNDATION SCHOLARSHIP	08/28/2013	1,500
UNIVERSITY OF WISCONSIN-MADISON FBO ELLEN RINGLE 7TH INSTALLMENT - CLASS OF 2010 STALLER MEMORIAL SCHOLARSHIP	09/06/2013	875
UNIVERSITY OF NORTH CAROLINA GREENSBORO FBO DANA ROBINSON 2013 SCHOLARSHIP AWARD F&H ROSE INSPIRE A DREAM SCHOLARSHIP	09/11/2013	1,000
MARQUETTE UNIVERSITY REFUND FBO OLIVIA AULT- CK ISSUED 7/24/13 BATTERMAN FOUNDATION SCHOLARSHIP	09/16/2013	(1,500)
MADISON COLLEGE FBO ABIGAIL WOLFEYER 2013 SCHOLARSHIP AWARD AAUW SECOND CHANCE SCHOLARSHIP	09/24/2013	1,000
MILWAUKEE SCHOOL OF ENGINEERING FBO AVERY KAN 1ST INSTALLMENT- CLASS OF 2013 JEROME HAKE ENGINEERING SCHOLARSHIP	12/12/2013	4,000
MILWAUKEE SCHOOL OF ENGINEERING FBO AVERY KAN 1ST INSTALLMENT- CLASS OF 2013 THEODORE BATTERMAN SCHOLARSHIP	12/12/2013	1,500
LAWRENCE UNIVERSITY ATTN FINANCIAL SERVICES FBO KELSEY LOREN MILES 1ST INSTALLMENT- CLASS OF 2013	12/17/2013	750
LAWRENCE UNIVERSITY ATTN FINANCIAL SERVICES FBO KELSEY LOREN MILES 1ST INSTALLMENT- CLASS OF 2013	12/17/2013	5,750
UNIVERSITY OF WISCONSIN-MILWAUKEE FBO MARIA CORPUS 1ST INSTALLMENT- AWARDED 2013 THEODORE BATTERMAN FAMILY SCHOLARSHIP	12/19/2013	1,500
UNIVERSITY OF WISCONSIN-MADISON FBO MIRTEYUR SEYDOV 2ND INSTALLMENT CLASS OF 2013 DR SYDNEY H. WEIDEMANN SCHOLARSHIP	01/03/2014	1,250
UNIVERSITY OF WISCONSIN-MADISON FBO FISNIK LUMANI 2013 SCHOLARSHIP AWARD JAMES & FRANCES LUTHER MEMOR SCHOLARSHIP	01/03/2014	1,700
UNIVERSITY OF WISCONSIN-OSHKOSH FBO MORGAN BRITTAIN 1ST INSTALLMENT- AWARDED 2013 M AND C STALLER MEMORIAL SCHOLARSHIP	01/03/2014	1,250
TAYLOR UNIVERSITY FBO LAUREN RIGGS 4TH AND FINAL INSTALLMENT- AWARDED 2011 JUANITA SCHREINER SCHOLARSHIP	01/03/2014	2,125
KENNESAW STATE UNIVERSITY BURSAR'S OFFICE FBO NICKI SMILEY 1ST INSTALLMENT- AWARDED 2013	01/03/2014	1,250
BRADLEY UNIVERSITY STUDENT FEES FBO ELIZABETH HART AWARDED IN 2013	01/03/2014	2,000
UNIVERSITY OF WISCONSIN-MADISON FBO EMILIE BAKKEN SPRING 2014 SEMESTER - AWARDED 2013 KNOX AAUW ADOPT A STUDENT SCHOLARSHIP	01/10/2014	1,000
UNIVERSITY OF WISCONSIN-MADISON FBO RAMSEY STATZ 8TH INSTALLMENT- AWARDED 2011 BUELL MERIT SCHOLARSHIP	01/10/2014	2,875
UNIVERSITY OF WISCONSIN-WHITEWATER FBO DALLAS RAMSDEN 2ND AND FINAL INSTALLMENT-AWARDED 2013 DR SYDNEY WEIDEMANN SCHOLARSHIP	01/10/2014	1,250
UNIVERSITY OF WISCONSIN-WHITEWATER FBO KATIE STEWART SPRING 2014 SEMESTER - AWARDED 2013 KNOX AAUW ADOPT A STUDENT SCHOLARSHIP	01/10/2014	1,000
MADISON COLLEGE FBO TRICIA ABENDROTH AWARDED 2013 AAUW SECOND CHANCE SCHOLARSHIP	01/10/2014	1,000
VITERBO UNIVERSITY FBO NAOMI ENGELKE 1ST INSTALLMENT- AWARDED 2013 JUANITA SCHREINER MEMORIAL SCHOLARSHIP	01/10/2014	1,000
UNIVERSITY OF WISCONSIN-OSHKOSH FBO DALTON SCHUERMAN AWARDED 2013 BUELL HONOR SCHOLARSHIP	01/10/2014	1,000
MARQUETTE UNIVERSITY FBO SCOTT ROSSING 1ST RENEWAL 2ND INSTALLMENT-AWARDED 2012 BATTERMAN FAMILY FOUNDATION SCHOLARSHIP	01/10/2014	1,500
FINANCIAL AID OFFICE DEPAUW UNIVERSITY FBO CARLY WALLACE AWARDED 2013	01/10/2014	1,500
UNIVERSITY OF MISSOURI FBO ALYSSA ROOST 1ST & 2ND INSTALLMENTS - CLASS OF 2013 BATTERMAN FOUNDATION SCHOLARSHIP	01/14/2014	3,000
UNIVERSITY OF WISCONSIN-MADISON FBO ASHLEY JENSEN 4TH/FINAL INSTALLMENT - CLASS OF 2010 JUANITA SCHREINER MEMORIAL SCHOLARSHIP	01/14/2014	750
UNIVERSITY OF WISCONSIN-WHITEWATER FBO OLIVIA AULT 2ND INSTALLMENT/1ST RENEWAL-CLASS OF 12 BATTERMAN FOUNDATION SCHOLARSHIP	01/14/2014	1,500
UNIVERSITY OF WISCONSIN-LACROSSE FBO TAYLOR BAUER 2ND INSTALLMENT/1ST RENEWAL-CLASS OF 12 BATTERMAN FOUNDATION SCHOLARSHIP	01/14/2014	1,500
VITERBO UNIVERSITY FBO NAOMI ENGELKE 1ST & 2ND INSTALLMENTS - CLASS OF 2013 BATTERMAN FOUNDATION SCHOLARSHIP	01/14/2014	3,000
UNIVERSITY OF MINNESOTA - TWIN CITIES FBO ERIC BENDER 1ST & 2ND INSTALLMENTS - CLASS OF 2013 W & L BUELL MERIT SCHOLARSHIP	01/14/2014	5,750
BRANDEIS UNIVERSITY BRANDEIS OFFICE OF STUDENT FINANCIAL SER FBO KARINA WAGENPFEIL 4TH INSTALLMENT - CLASS OF 1012	01/14/2014	3,751
MILWAUKEE SCHOOL OF ENGINEERING FBO ERIC JOHNSON 2ND INSTALLMENT/2ND RENEWAL-CLASS OF 11 BATTERMAN FOUNDATION SCHOLARSHIP	01/15/2014	1,500
MACALASTER COLLEGE FBO KERRY HARTWICK 8TH/FINAL INSTALLMENT - CLASS OF 2010 W & L BUELL MERIT SCHOLARSHIP	01/15/2014	2,875
UNIVERSITY OF WISCONSIN-MADISON FBO TAYLOR BROWN 2ND INSTALLMENT/2ND RENEWAL-CLASS OF 11 BATTERMAN FOUNDATION SCHOLARSHIP	01/15/2014	1,500

FORT ATKINSON COMMUNITY FOUNDATION

#39-6220899

FORM 990, SCHEDULE I, PART III

Payee	Posting Date	Amount
LUTHER COLLEGE FBO JOHN WESTBY 1ST & 2ND INSTALLMENTS - CLASS OF 2013 BATTERMAN FOUNDATION SCHOLARSHIP	01/16/2014	3,000
UNIVERSITY OF WISCONSIN-MADISON FBO LEAH WESTON 4TH INSTALLMENT - CLASS OF 2012 W & L BUELL MERTI SCHOLARSHIP	01/17/2014	2,875
UNIVERSITY OF WISCONSIN-RIVER FALLS FBO CIERRA ESSOCK CLASS OF 2013 BEN & ADA HAKE AGRICULTURE SCHOLARSHIP	01/17/2014	5,000
UNIVERSITY OF WISCONSIN-MADISON FBO ELLEN RINGLE 8TH/FINAL INSTALLMENT M & C STALLER MEMORIAL SCHOLARSHIP	01/17/2014	875
UNIVERSITY OF WISCONSIN-MADISON FBO JOSEPHINE LANGE 1ST & 2ND INSTALLMENTS - CLASS OF 2013 BATTERMAN FOUNDATION SCHOLARSHIP	01/20/2014	3,000
CARROLL UNIVERSITY FBO ALYSON GARTLAND 1ST INSTALLMENT - CLASS OF 2013 JUANITA SCHREINER MEMORIAL SCHOLARSHIP	01/20/2014	1,250
UNIVERSITY OF WISCONSIN-LACROSSE FBO TANNER BOOS 2013 WIEDERHOEFT LEGACY SCHOLARSHIP CHECK NUMBER 63920	01/20/2014	1,300
YALE UNIVERSITY FBO TYLER GORMAN 2ND INSTALLMENT- AWARDED 2012 JUANITA SCHREINER MEMORIAL SCHOLARSHIP	01/29/2014	1,800
UNIVERSITY OF WISCONSIN-MADISON FBO BRIAN BRITO 2ND INSTALLMENT- AWARDED 2012 JUANITA SCHREINER MEMORIAL SCHOLARSHIP	01/29/2014	2,000
UNIVERSITY OF WISCONSIN-MADISON FBO REBECCA MCHENRY 2ND RENEWAL/2ND INSTALLMENT-AWARDED 2011 THEODORE BATTERMAN SCHOLARSHIP	02/03/2014	1,500
UNIVERSITY OF WISCONSIN-OSHKOSH FBO ROSE STIEMKE AWARDED 2013 THRIFT SHOP/JEAN REICH MEM SCHOLARSHIP	02/03/2014	1,175
UNIVERSITY OF WISCONSIN-OSHKOSH FBO AMANDA CISKE 1ST RENEWAL/2ND INSTALLMENT AWARDED 2013 AAUW/ KNOX ADOPT A STUDENT SCHOLARSHIP	02/03/2014	1,000
UNIVERSITY OF WISCONSIN-OSHKOSH FBO ROSE STIEMKE RESIDUAL OF \$2000 SCHOLARSHIP THRIFT SHOP/ JEAN REICH MEM SCHOLARSHIP	02/04/2014	825
UNIVERSITY OF MINNESOTA FBO CORY HOLLINGER 1ST RENEWAL- 2ND PAYMENT BATTERMAN FAMILY FOUNDATION SCHOLARSHIP	02/04/2014	1,500
MILWAUKEE SCHOOL OF ENGINEERING FBO AVERY KAN 2ND INSTALLMENT THEODORE BATTERMAN FAMILY SCHOLARSHIP	03/13/2014	1,500
CARDINAL STRITCH UNIVERSITY FBO LORI MILLER 2013 SCHOLARSHIP AWARD JANE SHAW/AAUW GRADUATE SCHOLARSHIP	05/07/2014	1,700
UNIVERSITY OF WISCONSIN-MILWAUKEE FBO MARIA CORPUS 2ND INSTALLMENT 2ND RENEWAL BATTERMAN FAMILY FOUNDATION SCHOLARSHIP	05/29/2014	1,500
UNIVERSITY OF WISCONSIN-WHITEWATER FBO DUSTIN STELSE 2014 ONE-TIME SCHOLARSHIP PAYMENT BUELL GRADUATE SCHOLARSHIP	05/29/2014	2,000
UNIVERSITY OF WISCONSIN-WHITEWATER FBO MELISSA BLEILER 2014 ONE-TIME SCHOLARSHIP PAYMENT RUTLEDGE MEMORIAL SCHOLARSHIP	05/29/2014	500
OTHER SUNDRY RECONCILING ITEMS	VARIOUS	7,000
TOTAL SCHOLARSHIP DISBURSEMENTS		219,290
Beginning of Year Accounts Payable		(121,539)
End of Year Accounts Payable		107,007
GRAND TOTAL		204,758

Application for Extension of Time To File an Exempt Organization Return

OMB No. 1545-1709

► **File a separate application for each return.**
► **Information about Form 8868 and its instructions is at www.irs.gov/form8868.**

- If you are filing for an **Automatic 3-Month Extension**, complete only **Part I** and check this box ☐
 - If you are filing for an **Additional (Not Automatic) 3-Month Extension**, complete only **Part II** (on page 2 of this form)
- Do not complete Part II unless** you have already been granted an automatic 3-month extension on a previously filed Form 8868

Electronic filing (e-file). You can electronically file Form 8868 if you need a 3-month automatic extension of time to file (6 months for a corporation required to file Form 990-T), or an additional (not automatic) 3-month extension of time. You can electronically file Form 8868 to request an extension of time to file any of the forms listed in Part I or Part II with the exception of Form 8870, Information Return for Transfers Associated With Certain Personal Benefit Contracts, which must be sent to the IRS in paper format (see instructions). For more details on the electronic filing of this form, visit www.irs.gov/efile and click on *e-file for Charities & Nonprofits*

Part I Automatic 3-Month Extension of Time. Only submit original (no copies needed).

A corporation required to file Form 990-T and requesting an automatic 6-month extension—check this box and complete Part I only ☐

All other corporations (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request an extension of time to file income tax returns

Enter filer's identifying number, see instructions

Type or print File by the due date for filing your return. See instructions	Name of exempt organization or other filer, see instructions	Employer identification number (EIN) or
	FORT ATKINSON COMMUNITY FOUNDATION	39-6220899
	Number, street, and room or suite no. If a P.O. box, see instructions	Social security number (SSN)
	PO BOX 218	
	City, town or post office, state, and ZIP code. For a foreign address, see instructions	
	FORT ATKINSON, WI 53538	

Enter the Return code for the return that this application is for (file a separate application for each return)

01

Application Is For	Return Code	Application Is For	Return Code
Form 990 or Form 990-EZ	01	Form 990-T (corporation)	07
Form 990-BL	02	Form 1041-A	08
Form 4720 (individual)	03	Form 4720 (other than individual)	09
Form 990-PF	04	Form 5227	10
Form 990-T (sec. 401(a) or 408(a) trust)	05	Form 6069	11
Form 990-T (trust other than above)	06	Form 8870	12

- The books are in the care of ► PREMIERBANK, TRUSTEE

Telephone No. ► (920) 563-6616

Fax No. ►

- If the organization does not have an office or place of business in the United States, check this box ☐
- If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) _____ If this is for the whole group, check this box ☐ If it is for part of the group, check this box ☐ and attach a list with the names and EINs of all members the extension is for

- 1 I request an automatic 3-month (6 months for a corporation required to file Form 990-T) extension of time until 2/15/2015, to file the exempt organization return for the organization named above. The extension is for the organization's return for
- ☐ calendar year _____ or

► ☒ tax year beginning 7/1/2013, and ending 6/30/2014

- 2 If the tax year entered in line 1 is for less than 12 months, check reason ☐ Initial return ☐ Final return ☐ Change in accounting period

3a	If this application is for Forms 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions.	3a	\$	0
b	If this application is for Forms 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit.	3b	\$	0
c	Balance due. Subtract line 3b from line 3a. Include your payment with this form, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions.	3c	\$	0

Caution. If you are going to make an electronic funds withdrawal (direct debit) with this Form 8868, see Form 8453-EO and Form 8879-EO for payment instructions.