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For calendar year 2014 or tax year beginning , 2014, and ending , 20

Name of foundation
THE BRUNSWICK FOUNDATION, INC.

Number and street (or P O. box number if mail is not delivered to street address) Room/suite
1 N. FIELD CT.

City or town, state or province, country, and ZIP or foreign postal code
LAKE FOREST, IL. 60045

A Employer identification number
36-6033576

B Telephone number (see instructions)
847-735-4344

C If exemption application is pending, check here

D 1. Foreign organizations, check here
2. Foreign organizations meeting the 85% test, check here and attach computation

E If private foundation status was terminated under section 507(b)(1)(A), check here

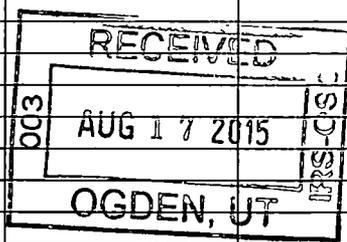
F If the foundation is in a 60-month termination under section 507(b)(1)(B), check here

G Check all that apply. Initial return Initial return of a former public charity
Final return Amended return
Address change Name change

H Check type of organization Section 501(c)(3) exempt private foundation
 Section 4947(a)(1) nonexempt charitable trust Other taxable private foundation

I Fair market value of all assets at end of year (from Part II, col. (c), line 16) **\$ 2,502,048** (Part I, column (d) must be on cash basis)
J Accounting method. Cash Accrual
 Other (specify) _____

Part I Analysis of Revenue and Expenses (The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a) (see instructions).)		(a) Revenue and expenses per books	(b) Net investment income	(c) Adjusted net income	(d) Disbursements for charitable purposes (cash basis only)
1 Contributions, gifts, grants, etc., received (attach schedule)		300,000			
2 Check <input type="checkbox"/> if the foundation is not required to attach Sch B					
3 Interest on savings and temporary cash investments					
4 Dividends and interest from securities		48,943	48,943		
5a Gross rents					
b Net rental income or (loss)					
6a Net gain or (loss) from sale of assets not on line 10		12,569			
b Gross sales price for all assets on line 6a 2,351,780					
7 Capital gain net income (from Part IV, line 2)			12,569		
8 Net short-term capital gain				0	
9 Income modifications					
10a Gross sales less returns and allowances					
b Less Cost of goods sold					
c Gross profit or (loss) (attach schedule)					
11 Other income (attach schedule)					
12 Total. Add lines 1 through 11		361,512	61,512	0	
13 Compensation of officers, directors, trustees, etc.					
14 Other employee salaries and wages					
15 Pension plans, employee benefits					
16a Legal fees (attach schedule)					
b Accounting fees (attach schedule)					
c Other professional fees (attach schedule)					
17 Interest					
18 Taxes (attach schedule) (see instructions)		25			
19 Depreciation (attach schedule) and depletion					
20 Occupancy					
21 Travel, conferences, and meetings					
22 Printing and publications					
23 Other expenses (attach schedule)					
24 Total operating and administrative expenses. Add lines 13 through 23.		25	0	0	0
25 Contributions, gifts, grants paid		220,425			220,425
26 Total expenses and disbursements. Add lines 24 and 25		220,450	0	0	220,425
27 Subtract line 26 from line 12					
a Excess of revenue over expenses and disbursements		141,062			
b Net investment income (if negative, enter -0-)			61,512		
c Adjusted net income (if negative, enter -0-)				0	



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Part II Balance Sheets		Attached schedules and amounts in the description column should be for end-of-year amounts only (See instructions.)		Beginning of year	End of year	
		(a) Book Value	(b) Book Value	(c) Fair Market Value		
Assets	1	Cash - non-interest-bearing		84,766	166,554	166,554
	2	Savings and temporary cash investments				
	3	Accounts receivable ▶				
		Less allowance for doubtful accounts ▶			0	
	4	Pledges receivable ▶				
		Less allowance for doubtful accounts ▶			0	
	5	Grants receivable				
	6	Receivables due from officers, directors, trustees, and other disqualified persons (attach schedule) (see instructions)				
	7	Other notes and loans receivable (attach schedule) ▶				
		Less allowance for doubtful accounts ▶			0	
	8	Inventories for sale or use				
	9	Prepaid expenses and deferred charges				
	10 a	Investments - U S and state government obligations (attach schedule)				
	b	Investments - corporate stock (attach schedule)		2,276,756	2,336,030	2,335,494
	c	Investments - corporate bonds (attach schedule)				
	11	Investments - land, buildings, and equipment basis				
	Less accumulated depreciation (attach schedule) ▶			0		
12	Investments - mortgage loans					
13	Investments - other (attach schedule)					
14	Land, buildings, and equipment basis					
	Less accumulated depreciation (attach schedule) ▶			0		
15	Other assets (describe ▶)					
16	Total assets (to be completed by all filers - see the instructions Also, see page 1, item I)		2,361,522	2,502,584	2,502,048	
Liabilities	17	Accounts payable and accrued expenses				
	18	Grants payable	15,496	15,496		
	19	Deferred revenue				
	20	Loans from officers, directors, trustees, and other disqualified persons				
	21	Mortgages and other notes payable (attach schedule)				
	22	Other liabilities (describe ▶)				
23	Total liabilities (add lines 17 through 22)		15,496	15,496		
Net Assets or Fund Balances	Foundations that follow SFAS 117, check here <input checked="" type="checkbox"/> and complete lines 24 through 26 and lines 30 and 31.					
	24	Unrestricted	2,346,026	2,487,088		
	25	Temporarily restricted				
	26	Permanently restricted				
	Foundations that do not follow SFAS 117, . . . <input type="checkbox"/> check here and complete lines 27 through 31.					
	27	Capital stock, trust principal, or current funds				
	28	Paid-in or capital surplus, or land, bldg, and equipment fund				
29	Retained earnings, accumulated income, endowment, or other funds					
30	Total net assets or fund balances (see instructions)		2,346,026	2,487,088		
31	Total liabilities and net assets/fund balances (see instructions)		2,361,522	2,502,584		

Part III Analysis of Changes in Net Assets or Fund Balances		
1	Total net assets or fund balances at beginning of year - Part II, column (a), line 30 (must agree with end-of-year figure reported on prior year's return)	2,346,026
2	Enter amount from Part I, line 27a	141,062
3	Other increases not included in line 2 (itemize) ▶	
4	Add lines 1, 2, and 3	2,487,088
5	Decreases not included in line 2 (itemize) ▶	
6	Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b), line 30	2,487,088

Part IV Capital Gains and Losses for Tax on Investment Income

(a) List and describe the kind(s) of property sold (e.g., real estate, 2-story brick warehouse, or common stock, 200 shs MLC Co)		(b) How acquired P - Purchase D - Donation	(c) Date acquired (mo, day, yr)	(d) Date sold (mo, day, yr)
1a PIMCO TOTAL RETURN FUND		P	var	12/22/2014
b CAPITAL GAINS				
c				
d				
e				
(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale	(h) Gain or (loss) (e) plus (f) minus (g)	
a 2,333,892		2,339,211	(5,319)	
b 17,888			17,888	
c			0	
d			0	
e			0	
Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69			(i) Gains (Col (h) gain minus col (k), but not less than -0-) or Losses (from col (h))	
(i) F M V as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col (i) over col (j), if any		
a		0	(5,319)	
b		0	17,888	
c		0	0	
d		0	0	
e		0	0	
2 Capital gain net income or (net capital loss)		{ If gain, also enter in Part I, line 7 If (loss), enter -0- in Part I, line 7 }	2	12,569
3 Net short-term capital gain or (loss) as defined in sections 1222(5) and (6)			{ If gain, also enter in Part I, line 8, column (c) (see instructions). If (loss), enter -0- in Part I, line 8 }	3

Part V Qualification Under Section 4940(e) for Reduced Tax on Net Investment Income

(For optional use by domestic private foundations subject to the section 4940(a) tax on net investment income.)

If section 4940(d)(2) applies, leave this part blank.

Was the foundation liable for the section 4942 tax on the distributable amount of any year in the base period? Yes No
 If "Yes," the foundation does not qualify under section 4940(e) Do not complete this part

1 Enter the appropriate amount in each column for each year; see the instructions before making any entries

(a) Base period years Calendar year (or tax year beginning in)	(b) Adjusted qualifying distributions	(c) Net value of noncharitable-use assets	(d) Distribution ratio (col (b) divided by col (c))
2013	273,310	2,405,162	0.1136
2012	267,113	2,435,196	0.1097
2011	328,729	2,388,489	0.1376
2010	437,824	2,156,788	0.2030
2009	617,760	5,482,334	0.1127
2 Total of line 1, column (d)			0.6766
3 Average distribution ratio for the 5-year base period - divide the total on line 2 by 5, or by the number of years the foundation has been in existence if less than 5 years			0.1353
4 Enter the net value of noncharitable-use assets for 2014 from Part X, line 5			2,481,022
5 Multiply line 4 by line 3			335,682
6 Enter 1% of net investment income (1% of Part I, line 27b)			615
7 Add lines 5 and 6			336,297
8 Enter qualifying distributions from Part XII, line 4			220,425

If line 8 is equal to or greater than line 7, check the box in Part VI, line 1b, and complete that part using a 1% tax rate See the Part VI instructions

Part VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 - see instructions)

1a	Exempt operating foundations described in section 4940(d)(2), check here <input type="checkbox"/> and enter "N/A" on line 1. Date of ruling or determination letter _____ (attach copy of letter if necessary - see instructions)	1	1,230
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check here <input type="checkbox"/> and enter 1% of Part I, line 27b		
c	All other domestic foundations enter 2% of line 27b Exempt foreign organizations enter 4% of Part I, line 12, col (b)		
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-)	2	
3	Add lines 1 and 2	3	1,230
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-)	4	
5	Tax based on investment income. Subtract line 4 from line 3 If zero or less, enter -0-	5	1,230
6	Credits/Payments		
a	2014 estimated tax payments and 2013 overpayment credited to 2014	6a	2,086
b	Exempt foreign organizations - tax withheld at source	6b	
c	Tax paid with application for extension of time to file (Form 8868)	6c	
d	Backup withholding erroneously withheld	6d	
7	Total credits and payments Add lines 6a through 6d	7	2,086
8	Enter any penalty for underpayment of estimated tax Check here <input type="checkbox"/> if Form 2220 is attached	8	
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed	9	0
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid	10	856
11	Enter the amount of line 10 to be Credited to 2015 estimated tax 856 Refunded	11	0

Part VII-A Statements Regarding Activities

	Yes	No
1a During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any political campaign?		X
b Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see Instructions for the definition)? <i>If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials published or distributed by the foundation in connection with the activities</i>		X
c Did the foundation file Form 1120-POL for this year?		X
d Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year (1) On the foundation ▶ \$ _____ (2) On foundation managers ▶ \$ _____		
e Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers ▶ \$ _____		
2 Has the foundation engaged in any activities that have not previously been reported to the IRS? <i>If "Yes," attach a detailed description of the activities</i>		X
3 Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, or bylaws, or other similar instruments? <i>If "Yes," attach a conformed copy of the changes</i>		X
4a Did the foundation have unrelated business gross income of \$1,000 or more during the year?		X
b If "Yes," has it filed a tax return on Form 990-T for this year?		
5 Was there a liquidation, termination, dissolution, or substantial contraction during the year? <i>If "Yes," attach the statement required by General Instruction T</i>		X
6 Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either • By language in the governing instrument, or • By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state law remain in the governing instrument?	X	
7 Did the foundation have at least \$5,000 in assets at any time during the year? <i>If "Yes," complete Part II, col (c), and Part XV</i>	X	
8a Enter the states to which the foundation reports or with which it is registered (see instructions) ▶ b If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate) of each state as required by <i>General Instruction G</i> ? <i>If "No," attach explanation</i>	X	
9 Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for calendar year 2014 or the taxable year beginning in 2014 (see instructions for Part XIV)? <i>If "Yes," complete Part XIV</i>		X
10 Did any persons become substantial contributors during the tax year? <i>If "Yes," attach a schedule listing their names and addresses</i>		X

Part VII-A Statements Regarding Activities (continued)

11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of section 512(b)(13)? If "Yes," attach schedule (see instructions)	11		X
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had advisory privileges? If "Yes," attach statement (see instructions)	12		X
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application? Website address ▶ N/A	13	X	
14	The books are in care of ▶ BRUNSWICK CORPORATION Telephone no ▶ 847-735-4344 Located at ▶ 1 N. FIELD CT. LAKE FOREST, IL. ZIP+4 ▶ 60045-4811			
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - Check here and enter the amount of tax-exempt interest received or accrued during the year ▶ 15 N/A			
16	At any time during calendar year 2014, did the foundation have an interest in or a signature or other authority over a bank, securities, or other financial account in a foreign country? See the instructions for exceptions and filing requirements for FinCEN Form 114, (formerly TD F 90-22.1) If "Yes," enter the name of the foreign country ▶	16	Yes	No X

Part VII-B Statements Regarding Activities for Which Form 4720 May Be Required

File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.

		Yes	No
1a	During the year did the foundation (either directly or indirectly)		
(1)	Engage in the sale or exchange, or leasing of property with a disqualified person? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
(2)	Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
(3)	Furnish goods, services, or facilities to (or accept them from) a disqualified person? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		
(4)	Pay compensation to, or pay or reimburse the expenses of, a disqualified person? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
(5)	Transfer any income or assets to a disqualified person (or make any of either available for the benefit or use of a disqualified person)? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
(6)	Agree to pay money or property to a government official? (Exception. Check "No" if the foundation agreed to make a grant to or to employ the official for a period after termination of government service, if terminating within 90 days) <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
b	If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations section 53.4941(d)-3 or in a current notice regarding disaster assistance (see instructions)? Organizations relying on a current notice regarding disaster assistance check here ▶ <input type="checkbox"/>	1b	X
c	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected before the first day of the tax year beginning in 2014?	1c	X
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation defined in section 4942(j)(3) or 4942(j)(5))		
a	At the end of tax year 2014, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning before 2014? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If "Yes," list the years ▶		
b	Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2) (relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer "No" and attach statement - see instructions)	2b	
c	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here ▶		
3a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
b	If "Yes," did it have excess business holdings in 2014 as a result of (1) any purchase by the foundation or disqualified persons after May 26, 1969, (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest, or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Schedule C, Form 4720, to determine if the foundation had excess business holdings in 2014)	3b	
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a	X
b	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2014?	4b	X

Part VII-B Statements Regarding Activities for Which Form 4720 May Be Required (continued)

5a During the year did the foundation pay or incur any amount to

(1) Carry on propaganda, or otherwise attempt to influence legislation (section 4945(e))? Yes No

(2) Influence the outcome of any specific public election (see section 4955), or to carry on, directly or indirectly, any voter registration drive? Yes No

(3) Provide a grant to an individual for travel, study, or other similar purposes? Yes No

(4) Provide a grant to an organization other than a charitable, etc., organization described in section 4945(d)(4)(A)? (see instructions). Yes No

(5) Provide for any purpose other than religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals? Yes No

b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify under the exceptions described in Regulations section 53.4945 or in a current notice regarding disaster assistance (see instructions)? Yes No
 Organizations relying on a current notice regarding disaster assistance check here

c If the answer is "Yes" to question 5a(4), does the foundation claim exemption from the tax because it maintained expenditure responsibility for the grant? Yes No
 If "Yes," attach the statement required by Regulations section 53.4945-5(d)

6a Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? Yes No

b Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract? Yes No
 If "Yes" to 6b, file Form 8870

7a At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction? Yes No

b If "Yes," did the foundation receive any proceeds or have any net income attributable to the transaction? Yes No

Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors

1 List all officers, directors, trustees, foundation managers and their compensation (see instructions).

(a) Name and address	(b) Title, and average hours per week devoted to position	(c) Compensation (if not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
SEE SCHEDULE 3		0	0	0

2 Compensation of five highest-paid employees (other than those included on line 1 - see instructions). If none, enter "NONE."

(a) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
NONE				

Total number of other employees paid over \$50,000. Yes No 0

Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors (continued)

3 Five highest-paid independent contractors for professional services (see instructions). If none, enter "NONE."

(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE		

Total number of others receiving over \$50,000 for professional services ▶		0

Part IX-A Summary of Direct Charitable Activities

List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of organizations and other beneficiaries served, conferences convened, research papers produced, etc.	Expenses
1 THE BRUNSWICK FOUNDATION DOES NOT CONDUCT ANY DIRECT CHARITABLE ACTIVITIES; THEREFORE, PART IX-A IS NOT APPLICABLE.	0
2 -----	
3 -----	
4 -----	

Part IX-B Summary of Program-Related Investments (see instructions)

Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2	Amount
1 THE BRUNSWICK FOUNDATION DOES NOT MAKE PROGRAM-RELATED INVESTMENTS; THEREFORE, PART IX-B IS NOT APPLICABLE.	0
2 -----	
3 All other program-related investments See instructions -----	
Total. Add lines 1 through 3 ▶	0

Part X Minimum Investment Return (All domestic foundations must complete this part. Foreign foundations, see instructions.)

1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes:		
a	Average monthly fair market value of securities	1a	2,306,837
b	Average of monthly cash balances	1b	211,967
c	Fair market value of all other assets (see instructions)	1c	
d	Total (add lines 1a, b, and c)	1d	2,518,804
e	Reduction claimed for blockage or other factors reported on lines 1a and 1c (attach detailed explanation)	1e	
2	Acquisition indebtedness applicable to line 1 assets	2	
3	Subtract line 2 from line 1d	3	2,518,804
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions)	4	37,782
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	2,481,022
6	Minimum investment return. Enter 5% of line 5	6	124,051

Part XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations and certain foreign organizations check here and do not complete this part)

1	Minimum investment return from Part X, line 6	1	124,051
2a	Tax on investment income for 2014 from Part VI, line 5	2a	1,230
b	Income tax for 2014. (This does not include the tax from Part VI.)	2b	
c	Add lines 2a and 2b	2c	1,230
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	122,821
4	Recoveries of amounts treated as qualifying distributions	4	
5	Add lines 3 and 4	5	122,821
6	Deduction from distributable amount (see instructions)	6	
7	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1	7	122,821

Part XII Qualifying Distributions (see instructions)

1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:		
a	Expenses, contributions, gifts, etc. - total from Part I, column (d), line 26	1a	220,425
b	Program-related investments - total from Part IX-B	1b	0
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes	2	
3	Amounts set aside for specific charitable projects that satisfy the:		
a	Suitability test (prior IRS approval required)	3a	
b	Cash distribution test (attach the required schedule)	3b	
4	Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4	4	220,425
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income. Enter 1% of Part I, line 27b (see instructions)	5	
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	220,425

Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation qualifies for the section 4940(e) reduction of tax in those years

Part XIII Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2013	(c) 2013	(d) 2014
1 Distributable amount for 2014 from Part XI, line 7				122,821
2 Undistributed income, if any, as of the end of 2014.				
a Enter amount for 2013 only				
b Total for prior years 20____, 20____, 20____		0		
3 Excess distributions carryover, if any, to 2014				
a From 2009	337,729			
b From 2010	343,847			
c From 2011	202,584			
d From 2012	129,568			
e From 2013	153,463			
f Total of lines 3a through e	1,167,191			
4 Qualifying distributions for 2014 from Part XII, line 4 ▶ \$ _____ 220,425				
a Applied to 2013, but not more than line 2a				
b Applied to undistributed income of prior years (Election required - see instructions).		0		
c Treated as distributions out of corpus (Election required - see instructions)				
d Applied to 2014 distributable amount				122,821
e Remaining amount distributed out of corpus	97,604			
5 Excess distributions carryover applied to 2014 (If an amount appears in column (d), the same amount must be shown in column (a))				0
6 Enter the net total of each column as indicated below:				
a Corpus Add lines 3f, 4c, and 4e Subtract line 5	1,264,795			
b Prior years' undistributed income Subtract line 4b from line 2b		0		
c Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed		0		
d Subtract line 6c from line 6b Taxable amount - see instructions		0		
e Undistributed income for 2013 Subtract line 4a from line 2a Taxable amount - see instructions			0	
f Undistributed income for 2014 Subtract lines 4d and 5 from line 1 This amount must be distributed in 2015				0
7 Amounts treated as distributions out of corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3) (Election may be required - see instructions)	0			
8 Excess distributions carryover from 2009 not applied on line 5 or line 7 (see instructions)	337,729			
9 Excess distributions carryover to 2015. Subtract lines 7 and 8 from line 6a	927,066			
10 Analysis of line 9				
a Excess from 2010	343,847			
b Excess from 2011	202,584			
c Excess from 2012	129,568			
d Excess from 2013	153,463			
e Excess from 2014	97,604			

Part XIII Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2013	(c) 2013	(d) 2014
1 Distributable amount for 2014 from Part XI, line 7				122,821
2 Undistributed income, if any, as of the end of 2014:				
a Enter amount for 2013 only				
b Total for prior years 20____, 20____, 20____		0		
3 Excess distributions carryover, if any, to 2014:				
a From 2009	337,729			
b From 2010	343,847			
c From 2011	202,584			
d From 2012	129,568			
e From 2013	153,463			
f Total of lines 3a through e	1,167,191			
4 Qualifying distributions for 2014 from Part XII, line 4 ▶ \$				220,425
a Applied to 2013, but not more than line 2a				
b Applied to undistributed income of prior years (Election required - see instructions)		0		
c Treated as distributions out of corpus (Election required - see instructions)				
d Applied to 2014 distributable amount				122,821
e Remaining amount distributed out of corpus	98,679			
5 Excess distributions carryover applied to 2014 (If an amount appears in column (d), the same amount must be shown in column (a).)				0
6 Enter the net total of each column as indicated below:				
a Corpus Add lines 3f, 4c, and 4e Subtract line 5	1,265,870			
b Prior years' undistributed income Subtract line 4b from line 2b		0		
c Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed		0		
d Subtract line 6c from line 6b Taxable amount - see instructions		0		
e Undistributed income for 2013 Subtract line 4a from line 2a Taxable amount - see instructions			0	
f Undistributed income for 2014 Subtract lines 4d and 5 from line 1 This amount must be distributed in 2015				0
7 Amounts treated as distributions out of corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3) (Election may be required - see instructions)	0			
8 Excess distributions carryover from 2009 not applied on line 5 or line 7 (see instructions)	337,729			
9 Excess distributions carryover to 2015. Subtract lines 7 and 8 from line 6a	928,141			
10 Analysis of line 9:				
a Excess from 2010	343,847			
b Excess from 2011	202,584			
c Excess from 2012	129,568			
d Excess from 2013	153,463			
e Excess from 2014	98,679			

Part XIV Private Operating Foundations (see instructions and Part VII-A, question 9)

1 a If the foundation has received a ruling or determination letter that it is a private operating foundation, and the ruling is effective for 2014, enter the date of the ruling ▶ N/A

b Check box to indicate whether the foundation is a private operating foundation described in section 4942(j)(3) or 4942(j)(5)

	Tax year				(e) Total
	(a) 2014	(b) 2013	(c) 2012	(d) 2011	
2 a Enter the lesser of the adjusted net income from Part I or the minimum investment return from Part X for each year listed					0
b 85% of line 2a	0	0	0	0	0
c Qualifying distributions from Part XII, line 4 for each year listed					0
d Amounts included in line 2c not used directly for active conduct of exempt activities					0
e Qualifying distributions made directly for active conduct of exempt activities Subtract line 2d from line 2c	0	0	0	0	0
3 Complete 3a, b, or c for the alternative test relied upon					
a "Assets" alternative test - enter					
(1) Value of all assets					0
(2) Value of assets qualifying under section 4942(j)(3)(B)(i)					0
b "Endowment" alternative test - enter 2/3 of minimum investment return shown in Part X, line 6 for each year listed					0
c "Support" alternative test - enter					
(1) Total support other than gross investment income (interest, dividends, rents, payments on securities loans (section 512(a)(5)), or royalties)					0
(2) Support from general public and 5 or more exempt organizations as provided in section 4942(j)(3)(B)(iii)					0
(3) Largest amount of support from an exempt organization					0
(4) Gross investment income					0

Part XV Supplementary Information (Complete this part only if the foundation had \$5,000 or more in assets at any time during the year - see instructions.)

1 Information Regarding Foundation Managers:
 a List any managers of the foundation who have contributed more than 2% of the total contributions received by the foundation before the close of any tax year (but only if they have contributed more than \$5,000) (See section 507(d)(2))

NONE
 b List any managers of the foundation who own 10% or more of the stock of a corporation (or an equally large portion of the ownership of a partnership or other entity) of which the foundation has a 10% or greater interest

NONE
 2 Information Regarding Contribution, Grant, Gift, Loan, Scholarship, etc., Programs:
 Check here if the foundation only makes contributions to preselected charitable organizations and does not accept unsolicited requests for funds. If the foundation makes gifts, grants, etc. (see instructions) to individuals or organizations under other conditions, complete items 2a, b, c, and d

a The name, address, and telephone number or e-mail address of the person to whom applications should be addressed

SEE ATTACHED
 b The form in which applications should be submitted and information and materials they should include:

SEE ATTACHED
 c Any submission deadlines

d Any restrictions or limitations on awards, such as by geographical areas, charitable fields, kinds of institutions, or other factors:

Schedule of Contributors

2014

▶ Attach to Form 990, Form 990-EZ, or Form 990-PF.

▶ Information about Schedule B (Form 990, 990-EZ, or 990-PF) and its instructions is at www.irs.gov/form990.

Name of the organization THE BRUNSWICK FOUNDATION, INC.	Employer identification number 36-6033576
---	---

Organization type (check one):

Filers of:

Section:

Form 990 or 990-EZ

501(c)() (enter number) organization

4947(a)(1) nonexempt charitable trust **not** treated as a private foundation

527 political organization

Form 990-PF

501(c)(3) exempt private foundation

4947(a)(1) nonexempt charitable trust treated as a private foundation

501(c)(3) taxable private foundation

Check if your organization is covered by the **General Rule** or a **Special Rule**.

Note. Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions.

General Rule

- For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions.

Special Rules

- For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3 % support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of (1) \$5,000 or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1. Complete Parts I and II
- For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 *exclusively* for religious, charitable, scientific, literary, or educational purposes, or the prevention of cruelty to children or animals. Complete Parts I, II, and III.
- For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions *exclusively* for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an *exclusively* religious, charitable, etc., purpose. Do not complete any of the parts unless the **General Rule** applies to this organization because it received *nonexclusively* religious, charitable, etc., contributions totaling \$5,000 or more during the year ▶ \$ _____

Caution. An organization that is not covered by the General Rule and/or the Special Rules does not file Schedule B (Form 990, 990-EZ, or 990-PF), but it **must** answer "No" on Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on its Form 990-PF, Part I, line 2, to certify that it does not meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

Name of organization THE BRUNSWICK FOUNDATION, INC.	Employer identification number 36-6033576
--	--

Part I Contributors (see instructions). Use duplicate copies of Part I if additional space is needed.

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	BRUNSWICK CORPORATION 1 N. FIELD CT. LAKE FOREST, IL 60045-4811	\$ 300,000.00	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions)
-----	----- ----- -----	\$ -----	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions)
-----	----- ----- -----	\$ -----	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions)
-----	----- ----- -----	\$ -----	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions)
-----	----- ----- -----	\$ -----	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions)
-----	----- ----- -----	\$ -----	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions)
-----	----- ----- -----	\$ -----	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions)

Name of organization

Employer identification number

Part II **Noncash Property** (see instructions). Use duplicate copies of Part II if additional space is needed.

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
-----	----- ----- -----	\$-----	-----
-----	----- ----- -----	\$-----	-----
-----	----- ----- -----	\$-----	-----
-----	----- ----- -----	\$-----	-----
-----	----- ----- -----	\$-----	-----
-----	----- ----- -----	\$-----	-----
-----	----- ----- -----	\$-----	-----
-----	----- ----- -----	\$-----	-----

Name of organization

Employer identification number

Part III *Exclusively* religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8), or (10) that total more than \$1,000 for the year from any one contributor. Complete columns (a) through (e) and the following line entry. For organizations completing Part III, enter the total of *exclusively* religious, charitable, etc., contributions of \$1,000 or less for the year. (Enter this information once. See instructions.) ▶ \$ _____
 Use duplicate copies of Part III if additional space is needed.

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
-----	----- ----- -----	----- ----- -----	----- ----- -----
(e) Transfer of gift			
Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee	
----- ----- -----		----- ----- -----	
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
-----	----- ----- -----	----- ----- -----	----- ----- -----
(e) Transfer of gift			
Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee	
----- ----- -----		----- ----- -----	
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
-----	----- ----- -----	----- ----- -----	----- ----- -----
(e) Transfer of gift			
Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee	
----- ----- -----		----- ----- -----	
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
-----	----- ----- -----	----- ----- -----	----- ----- -----
(e) Transfer of gift			
Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee	
----- ----- -----		----- ----- -----	

SCHEDULE 1

**THE BRUNSWICK FOUNDATION, INC.
2014 RETURN OF PRIVATE FOUNDATION
EXEMPT FROM INCOME TAX
EIN 36-6033576**

FORM 990-PF -- PAGE 1 - PART I - LINE 18

	<u>COLUMN (a)</u>	<u>COLUMN (b)</u>
<u>LINE 18 - TAXES</u>		
ILLINOIS ANNUAL FILING FEES	25	0
	<hr/>	<hr/>
TOTAL TAXES	<u>25</u>	<u>0</u>

SCHEDULE 2

**THE BRUNSWICK FOUNDATION, INC.
2014 RETURN OF PRIVATE FOUNDATION
EXEMPT FROM INCOME TAX
EIN 36-6033576**

FORM 990-PF -- PAGE 2 - PART II - LINE 10b (COLS. b AND c)

INVESTMENTS - CORPORATE STOCK

	<u>COST</u>	<u>FAIR MARKET VALUE</u>
<u>CORPORATE STOCK, LINE 10b</u>		
<u>EQUITY MUTUAL FUNDS</u>		
BMO Total Return Fund	2,336,030	2,335,494
TOTAL STOCK INVESTMENTS	<u>2,336,030</u>	<u>2,335,494</u>

SCHEDULE 3

**THE BRUNSWICK FOUNDATION, INC.
2014 RETURN OF PRIVATE FOUNDATION
EXEMPT FROM INCOME TAX
EIN 36-6033576**

FORM 990-PF -- PAGE 6 - PART VIII - LINE 1

LIST OF OFFICERS, DIRECTORS & TRUSTEES

<u>NAME AND ADDRESS</u>	<u>TITLE/TIME</u>	<u>COMPENSATION</u>	<u>CONTRIBS. BENEFIT PLANS</u>	<u>EXPENSE ACCOUNT OTHER</u>
JUDITH P. ZELISKO 1 N. FIELD CT. LAKE FOREST, IL 60045	PRESIDENT DIRECTOR PART-TIME	0	0	0
B. RUSSELL LOCKRIDGE 1 N FIELD CT. LAKE FOREST, IL 60045	VICE PRESIDENT DIRECTOR PART-TIME	0	0	0
WILLIAM L. METZGER 1 N FIELD CT. LAKE FOREST, IL 60045	TREASURER DIRECTOR PART-TIME	0	0	0
MARSHA T VAUGHN 1 N FIELD CT LAKE FOREST, IL 60045	SECRETARY PART-TIME	0	0	0
KRISTEN M. COLEMAN 1 N FIELD CT LAKE FOREST, IL 60045	ASST SEC DIRECTOR PART-TIME	0	0	0
CHRISTOPHER DEKKER 1 N FIELD CT LAKE FOREST, IL 60045	DIRECTOR PART-TIME	0	0	0

SCHEDULE 4

**THE BRUNSWICK FOUNDATION, INC
2014 RETURN OF PRIVATE FOUNDATION
EXEMPT FROM INCOME TAX
EIN 36-6033576**

FORM 990-PF -- PAGE 11 - PART XV - LINE 3a

Category and Payee	Scholarship Recipients	City	State	FOUNDATION Status	Type of Grant	Amount
Education						
University of Illinois Foundaton		Chicago	IL	PC	Education	\$1,000.00
Florida Gulf Coast University Found		Fort Myers	FL	PC	Education	\$4,000.00
						\$5,000.00
Health						
American Found for Suicide Preven		Boca Raton	FL	PC	Health	\$500.00
Welfare						
Big Brothers Big Sisters of Fond du Lac Co		Fond du Lac	WI	PC	Welfare	\$100.00
Civil Air Patrol - Lakeshore 119		Muskegon	MI	PC	Welfare	\$125.00
Lambs Farm, Inc		Libertyville	IL	PC	Welfare	\$1,000.00
Literacy for Adults in Brevard		Cocoa	FL	PC	Welfare	\$125.00
Mano A Mano		Round Lake Park	IL	PC	Welfare	\$1,000.00
No More Sidelines		North Muskegon	MI	PC	Welfare	\$125.00
Northern Illinois Food Bank		Geneva	IL	PC	Welfare	\$1,000.00
Spirit of America Foundation, Inc		Mentor	OH	PC	Welfare	\$20,000.00
Thiensville Mequon Rotary Park Found		Mequon	WI	PC	Welfare	\$200.00
Zachanas Sexual Abuse Center		Gurnee	IL	PC	Welfare	\$5,000.00
						\$28,675.00
Scholarships						
Miami Dade College	Acosta-Burgos, Kassandra	Miami	FL	I	Scholarship	\$2,500.00
Florida Institute of Technology	Alex, Reggie	Melbourne	FL	I	Scholarship	\$2,500.00
University of Florida	Allie, Aneesa	Gainesville	FL	I	Scholarship	\$2,500.00
University of Wisconsin - Fox Valley	Anderson, Logan	Menasha	WI	I	Scholarship	\$2,500.00
Georgetown University	Armstrong, Rachel	Washington	DC	I	Scholarship	\$2,500.00
Upper Iowa University	Benson, Sarah	Fayette	IA	I	Scholarship	\$2,000.00
Empsona State University	Boyer, Adam	Empsona	KS	I	Scholarship	\$2,000.00
Ball State University	Brauner, Jacob	Muncie	IN	I	Scholarship	\$2,500.00
College of Wooster	Brennan, Owen	Wooster	OH	I	Scholarship	\$2,500.00
University of Illinois	Briggs, Andrew	Champaign	IL	I	Scholarship	\$2,500.00
Marquette University	Brody, Maleah	Milwaukee	WI	I	Scholarship	\$2,500.00
Rogers State University	Byrd, Kelsy	Claremore	OK	I	Scholarship	\$2,000.00
University of North Dakota	Cochran, MacKenzie	Grand Forks	ND	I	Scholarship	\$2,500.00
Eastern Florida State College	Coyle, Taylor	Cocoa	FL	I	Scholarship	\$2,500.00
University of Pittsburgh	Craig, Alicia	Pittsburgh	PA	I	Scholarship	\$2,500.00
Aquinas College	Daqen, Enk	Grand Rapids	MI	I	Scholarship	\$2,500.00
John Paul the Great Catholic Univ	Danner, Reagan	Escondido	CA	I	Scholarship	\$1,250.00
Nazareth College of Rochester	Dickey, Katherine	Rochester	NY	I	Scholarship	\$2,000.00
University of Michigan, Ann Arbor	Drees, Zachary	Ann Arbor	MI	I	Scholarship	\$2,500.00
Texas Tech University	Duffee, Robin	Lubbock	TX	I	Scholarship	\$2,000.00
Moraine Park Technical College	Duncan, Kathrine	West Bend	WI	I	Scholarship	\$2,000.00
Manan University	Freund, Britnee	Fond du Lac	WI	I	Scholarship	\$2,500.00
Case Western Reserve University	Fung, Nicholas	Cleveland	OH	I	Scholarship	\$2,500.00
University of Florida	Gale, Christopher	Gainesville	FL	I	Scholarship	\$2,000.00
University of Central Missoun	Goller, Elizabeth	Warrensburg	MO	I	Scholarship	\$2,000.00
Wayne State University	Gossman, Daniel	Detroit	MI	I	Scholarship	\$2,500.00
University of Maryland Ballu Cty	Govatos, Kaitlyn	Baltimore	MD	I	Scholarship	\$2,000.00
University of Wisconsin - Madison	Grosh, Colin	Madison	WI	I	Scholarship	\$2,500.00
University of Central Florida	Guadron, Heather	Orlando	FL	I	Scholarship	\$2,500.00
University of South Florida	Guthne, Dorothy	Tampa	FL	I	Scholarship	\$2,500.00
University of South Florida	Haberthier, Frances	Orlando	FL	I	Scholarship	\$2,500.00
University of Illinois	Hardin, Jacqueline	Champaign	IL	I	Scholarship	\$2,500.00
Southwestern Illinois College	Haselhorst, Rachel	Belleville	IL	I	Scholarship	\$2,000.00
North Carolina State University	Hawkins, Delaina	Raleigh	NC	I	Scholarship	\$2,000.00
American University	Helmick-Schwarzmueller, Samanta	Washington	DC	I	Scholarship	\$2,500.00
James Madison University	Hittabidle, Cara	Harrisonburg	VA	I	Scholarship	\$2,000.00
University of Michigan, Ann Arbor	Hodge, Delaney	Ann Arbor	MI	I	Scholarship	\$2,000.00
Tennessee Wesleyan College	Ingram, Erica	Athens	TN	I	Scholarship	\$1,250.00
St. Lawrence University	Ireland, Bridget	Canton	NY	I	Scholarship	\$2,000.00
Ball State University	Kinsey, Manlyn Rose	Muncie	IN	I	Scholarship	\$2,500.00
Montana State University	Kirchhoff, Nell	Bozeman	MT	I	Scholarship	\$2,500.00
Eastern Illinois University	Krch, Amanda	Charleston	IL	I	Scholarship	\$2,500.00
Lakeland College	Leisemann, Joshua	Sheboygan	WI	I	Scholarship	\$2,500.00
University of Wisconsin - Whitewater	Mackie, Dayna	Whitewater	WI	I	Scholarship	\$2,500.00
University of Wisconsin-Oshkosh	McDemot, Brenna	Oshkosh	WI	I	Scholarship	\$2,500.00
Manan University	Meyer, Kayla	Fond du Lac	WI	I	Scholarship	\$2,500.00
University of Florida	Mihalinec, Louis	Gainesville	FL	I	Scholarship	\$2,000.00
Valparaiso University	Momssey, Christopher	Valparaiso	IN	I	Scholarship	\$2,500.00
University of Illinois	Murray, Alexander	Champaign	IL	I	Scholarship	\$2,500.00
Rutgers University	Nesnav, Olivia	New Brunswick	NJ	I	Scholarship	\$2,000.00
DePaul University	Padilla, Leslie	Chicago	IL	I	Scholarship	\$2,500.00
North Dakota State University	Patron, Adam	Fargo	ND	I	Scholarship	\$2,500.00
Bemidj State University	Patron, Tyler	Bemidji	MN	I	Scholarship	\$2,500.00
Seattle Pacific University	Perry, Melissa	Seattle	WA	I	Scholarship	\$2,000.00
University of California, Santa Barbara	Pollard, Connor	Santa Barbara	CA	I	Scholarship	\$2,000.00
Ripon College	Quackenboss, Abigail	Ripon	WI	I	Scholarship	\$2,500.00
Wheaton College	Recknagel, Joshua	Wheaton	IL	I	Scholarship	\$2,500.00
University of San Diego	Reitz, Nicole	San Diego	CA	I	Scholarship	\$2,500.00
University of South Florida	Romer, Shelbi	Orlando	FL	I	Scholarship	\$2,500.00
College De Victoriaville	Samson, Marc-Gabriel	Victoriaville	Quebec	I	Scholarship	\$2,500.00
University of Wisconsin-Oshkosh	Schmitz, Jennifer	Oshkosh	WI	I	Scholarship	\$2,500.00
University of Wisconsin - La Crosse	Schrader, Robert	La Crosse	WI	I	Scholarship	\$2,500.00
University of Richmond	Schuldt, Bntney	Richmond	VA	I	Scholarship	\$2,500.00
University of Wisconsin - Stout	Sheahan, Rebecca	Menomonie	WI	I	Scholarship	\$2,500.00
Mississippi State University	Shotts, Ryan	Mississippi State	MS	I	Scholarship	\$2,000.00
Missoun Univ Sciences & Tech	Spaulding, Lauren	Rolla	MO	I	Scholarship	\$2,000.00

SCHEDULE 4

**THE BRUNSWICK FOUNDATION, INC
2014 RETURN OF PRIVATE FOUNDATION
EXEMPT FROM INCOME TAX
EIN 36-6033576**

FORM 990-PF -- PAGE 11 - PART XV - LINE 3a

Category and Payee	Scholarship Recipients	City	State	FOUNDATION Status	Type of Grant	Amount
Carthage College	Stintmater, Karoline	Kenosha	WI	I	Scholarship	\$2,500 00
Florida Gulf Coast Univ	Valle Joseph	FL Meyers	FL	I	Scholarship	\$2,500 00
University of Wisconsin - Madison	Vang, Pa Ying	Madison	WI	I	Scholarship	\$2,500 00
Univ of North Carolina - Chapel Hill	Vaughn, Brian	Chapel Hill	NC	I	Scholarship	\$2,500 00
McMaster University	Vuong, Patricia	Hamilton	Ontano	I	Scholarship	\$1,250 00
University of Texas	Watkins, Ernest	Austin	TX	I	Scholarship	\$2,000 00
University of South Florida	Weiland, Stephanie	Tampa	FL	I	Scholarship	\$2,500 00
University of South Florida	Weiland, Vivian	Tampa	FL	I	Scholarship	\$2,500 00
University of Louisville	White, Kathryn	Louisville	KY	I	Scholarship	\$2,000 00
University of Wisconsin - Madison	Williams, Madilyn	Madison	WI	I	Scholarship	\$2,000 00
Bingham Young University	Wilson, Carne	Provo	UT	I	Scholarship	\$2,500 00
University of Wisconsin - Stevens Point	Wolfenber, Joann	Stevens Point	WI	I	Scholarship	\$2,000 00
University of Tennessee, Knoxville	Workman, Charles	Knoxville	TN	I	Scholarship	\$2,500 00
Augustana College - IL	Wresch, Delaney	Rock Island	IL	I	Scholarship	\$2,500 00
North Dakota State University	Yon, Kelsey	Faroo	ND	I	Scholarship	\$2,000 00
						\$186,250 00

**BRUNSWICK FOUNDATION
2014 SONS & DAUGHTERS SCHOLARSHIP PROGRAM
- High School/Secondary School Senior Application Procedure -**

For more than 50 years, The Brunswick Foundation has supported causes and programs that complement the business interests of Brunswick Corporation and enhance the interests of the Company's employees and the communities in which they live and work. One such program is the Sons & Daughters Scholarship Program. We are pleased that you are going to attend a university and have decided to apply for a Brunswick Foundation Sons & Daughters Scholarship. Detailed below are the scholarship program guidelines, as well as the scholarship application process.

AWARDS AND ELIGIBILITY

Students applying for this scholarship program are eligible for a single-year scholarship of up to \$2,500 (with a maximum of up to \$10,000 per recipient).

Eligible applicants must be 23 years of age or younger (exception for military duty) as of February 28, 2014, and are students:

- currently in the final year of high school/secondary school;
- with a grade point average of 2.0 or higher on a 4.0 scale;
- who are entering full-time to an accredited, nonprofit college, post-secondary institution, university or vocational school by the Fall of 2014;
- whose parent, stepparent or guardian is employed as a full-time employee of Brunswick Corporation, or one of its divisions/subsidiaries on February 28, 2014 and who has worked for Brunswick for at least one year of continuous service in the previous five years. Employees and spouses of employees are not eligible to apply.

SELECTION OF RECIPIENTS

Selections are made by an impartial, outside committee comprised of professionals from prominent universities. No representatives of Brunswick Corporation or The Brunswick Foundation are involved in the selection process.

No preference is accorded to an applicant by reason of a parent's position or length of employment. Consideration for all awards is based on the applicant's academic record, achievement test scores, and leadership abilities as demonstrated by extracurricular activities and work record. Financial need is an additional consideration for half of the awards.

All scholarship winners will be individually notified of the committee's decision no later than May 1, 2014.

RULES AND REGULATIONS

- The application must be completed by the student applicant only (**in English**), otherwise the application will not be accepted. No materials will be returned back to recipient.
- Scholarship recipients are required to complete a sufficient number of school credit hours each year to complete degree requirements within the normal time period. **The funds provided must be used only for educational expenses** (e.g. tuition, books and fees).
- It is the intent of The Brunswick Foundation to avoid granting a student financial aid in excess of educational expenses. In accordance with Internal Revenue Service regulations, financial aid in excess of actual education expenses will result in taxable income to the recipient.
- Payments will be disbursed each July, are made payable to the school, and mailed directly to the institution.
- Recipients of **single-year scholarships may reapply for the scholarship of up to \$2,500 each year** of their undergraduate studies (maximum of \$10,000 per recipient).
- Past recipients of **multi-year scholarships may not apply for any further assistance** from The Brunswick Foundation.
- The scholarship may not be used for graduate school or master degree.
- Copies or prior scholarship application forms will not be accepted.
- Scholarship recipients are not required to accept employment with Brunswick Corporation or any of its related subsidiaries upon graduation.
- Completing this application does not guarantee that you will receive a scholarship.
- The administration and financing of this program is exclusively the responsibility of The Brunswick Foundation, which has full authority to make rules and regulations governing the program and to make final decisions in all matters arising in connection therewith except for the selection of scholarship recipients. The Foundation may modify or discontinue the program at anytime.

*Questions may be directed to your parent's or guardian's local Human Resource Office
or Lisa DeBartolo at (847) 735-4344.*

DEADLINE FOR RECEIPT OF ALL MATERIAL IS February 28, 2014.

CHECKLIST FOR APPLICATION PROCESS

- Retain This Sheet For Your Own Information And Guidance -

The instructions below should help you through the application process. Check each box when you have completed that step of the process. **International applications and transcripts must be in English, otherwise the application will not be accepted.**

FORM I - APPLICATION

- Student must complete entire application (type or print for legible reproduction). If something is not applicable, mark "N/A".
- Review your application carefully, then sign, date, and **have your parent or guardian complete SECTION A of the Brunswick Employee Verification section of FORM I.**
- Make a photocopy for your records.**
- Return your completed application to your parent's or guardian's Human Resource Department for employee verification. If your application is not verified by the HR department, it will be returned and may not make the deadline.**
(No copies or old applications will be accepted).

FORM II AND III - TRANSCRIPT/TEST SCORE FORM

- Complete SECTION A of FORM II. Sign and date the form. Your parent or legal guardian must also sign if you are under age 18
- If you are receiving United States college/university credits while attending high school/secondary school, you also must complete FORM III.**
- Deliver form to your HS/Secondary School Official (and University Official if applicable) and request that they complete SECTION B of FORM II (and FORM III if applicable) and **attach an official current transcript.** The official(s) may return the form(s) and transcripts directly to The Brunswick Foundation, or you may attach to your application.
- Include ACT and/or SAT scores on application, if not included on transcript.
- The School Official may return the form(s) directly to **The Brunswick Foundation, 1 N. Field Ct., Lake Forest, IL 60045**, or you may attach it to your application.

FORM IV - REFERENCES FORM

- Complete SECTION A of FORM IV. Maximum of two reference letters - others will be discarded.
- Deliver FORM IV to a counselor/administrator/faculty member of your school. Ask them to complete SECTION B.
- The School Official may return the form(s) directly to the **Brunswick Foundation, 1 N. Field Ct., Lake Forest, IL 60045**, or you may attach it to your application

Use only the forms provided; do not submit additional materials or letters of recommendation. You will be notified if we have not received all of your documents pertaining to your application. Remember – it is your responsibility to see that all forms are submitted to The Brunswick Foundation on time.

DEADLINE FOR RECEIPT OF ALL MATERIAL IS February 28, 2014.

CHECKLIST FOR APPLICATION PROCESS - INTERNATIONAL
– Retain This Sheet For Your Own Information And Guidance –

The instructions below should help you through the application process. Check each box when you have completed that step of the process. **International applications and transcripts/test scores must be in English, otherwise the application will not be accepted.**

FORM I - APPLICATION

- Student must complete entire application (type or print for legible reproduction). If something is not applicable, mark "N/A"
- Form 1-2 Education: Complete all questions and include name of University/Post-Secondary Institution Attending, if applicable
- Review your application carefully; then sign, date, and **have your parent or guardian complete SECTION A of the Brunswick Employee Verification section of FORM I.**
- Make a photocopy for your records.**
- Return your completed application to your parent's or guardian's Human Resource Department for employee verification. If your application is not verified by the HR department, it will be returned and may not make the deadline.**
(No copies or old applications will be accepted)

FORM II AND III - TRANSCRIPT/TEST SCORE FORM

- Complete SECTION A of FORM II Sign and date the form. Your parent or legal guardian must also sign if you are under age 18
- If you took a university entrance examination (International Baccalaureate, A-levels, Matura or any other examination), a School Official must complete Form II Section B of the "High School/Secondary School Transcript/Test Scores Form" and attach your current transcript/test scores and examination results. (We must have at least your past three years of scores.) Please have school Official use a school stamp or initial documents, if not originals.
- If you are receiving college/university credits while attending High School/Secondary School, you also must complete FORM III.**
- The School Official may return the form(s) directly to the **Brunswick Foundation, 1 N. Field Ct., Lake Forest, IL 60045**, or you may attach it to your application.

FORM IV - REFERENCES FORM

- Complete SECTION A of FORM IV. Maximum of two reference letters - others will be discarded.
- Deliver FORM IV to a counselor/administrator/faculty member of your school. Ask them to complete SECTION B.
- The School Official may return the form(s) directly to the **Brunswick Foundation, 1 N. Field Ct., Lake Forest, IL 60045**, or you may attach it to your application.

Use only the forms provided; do not submit additional materials or letters of recommendation. You will be notified if we have not received all of your documents pertaining to your application. Remember – it is your responsibility to see that all forms are submitted to The Brunswick Foundation on time.

DEADLINE FOR RECEIPT OF ALL MATERIAL IS February 28, 2014.

**BRUNSWICK FOUNDATION
2014 SONS & DAUGHTERS SCHOLARSHIP PROGRAM**

FORM I - HIGH SCHOOL/SECONDARY SCHOOL SENIOR APPLICATION (PRINT OR TYPE)

Complete this form in **English** and forward it to your parent's or guardian's local Human Resource Department.

1 APPLICANT DATA

Last Name	First Name	Middle Initial	Email	
Address		City	State	Zip
Date of Birth		Male / Female	Daytime Phone Number	

2 EDUCATION (IF YOU ARE ATTENDING HIGH SCHOOL, SECONDARY SCHOOL AND UNIVERSITY, PLEASE INDICATE BELOW.)

Name of University Attending, if applicable	City	State / Country	No of Yr(s) Attended
Name of HS/Secondary School Attending	City	State / Country	No of Yr(s) Attended
HS/Secondary School Graduation Date (Anticipated)	Any Military Duty, if yes how many years		

List the universities to which you have applied to in the order of your preference.

First Choice School Name	City	State / Country
Second Choice School Name	City	State / Country

If you have already decided your major field of study, what is it? If not, indicate undecided. _____

Have you decided what career you hope to pursue upon graduation? If so, what are your career aspirations?

On a per week basis, state the approximate number of hours you spend in the classroom, lab and doing homework.

Classroom Hours	Lab Hours	Homework
-----------------	-----------	----------

Do you feel that your grades are an accurate reflection of your ability? If not, what circumstances prevented you from doing better?

3 ACTIVITIES AWARDS AND HONORS

List all school activities in which you have participated during high school/secondary school (i.e., student government, music, etc.).

Activity	No Yrs	Awards/Honors	Offices Held

List all outside of school activities in which you have participated without pay during school (i.e., civic involvement, volunteer work, family responsibilities, etc.).

Organization	No Yrs	Awards/Honors	Describe Involvement

4 WORK EXPERIENCE

Indicate history of employment.

Company	Position	Dates		Average Hrs /Week	Salary \$/Hour
		From - Mo /Yr	To - Mo /Yr		
		/ /	/ /		
		/ /	/ /		
		/ /	/ /		
		/ /	/ /		

5 APPLICATIONS FOR SCHOLARSHIPS/GRANTS/FINANCIAL AID FROM OTHER ORGANIZATIONS

List all scholarships, grants and financial aid programs that you have received/applied for or given and indicate amount awarded or indicate amount for which you are still waiting for notification.

Name of Scholarship/Grant/Financial Aid Program	Amount Awarded	Amount Applied For

6 **ESSAY**

Write an essay of no more than 500 words about the following question: Where do you see yourself in 10 years from now?

7 **CERTIFICATION**

I certify that all statements contained in this application are true and correct, that I believe myself eligible, and I hereby apply for The Brunswick Foundation Sons & Daughters Scholarship.

Signed

Applicant

____ / ____ / ____
Date



3 BRUNSWICK EMPLOYEE VERIFICATION

SECTION A Brunswick employee is to complete this section and then submit the completed application to their Human Resource Department for verification.

Applicant's Name: _____ Email _____

Employee's Name: _____ Phone No _____

Relationship to Applicant: Parent _____ Stepparent* _____ Guardian* _____ Employee Email _____

Employee's Location _____ Division/Group _____ City _____ State _____ Country _____

*If the relationship is that of stepparent or guardian, the applicant must reside with the qualifying employee on a full-time basis. Spouses of employees are not eligible to apply.

----- APPLICANT: DO NOT WRITE BELOW THIS LINE -----

SECTION B Employee's local Human Resource Department is to complete this section.

To qualify, the employee must have been working as a full-time employee of Brunswick Corporation or one of its divisions/subsidiaries on February 28, 2014 and must have had at least one year of continuous service in the previous five years. Certain aspects of the selection process require salary information. Complete the information as to the qualifying employee - if two employees qualify the applicant, include information on both. Employee does not qualify. _____

Position Held (Title): _____

Position Held (Title): _____

Date of Hire: _____ / _____ / _____ _____ / _____ / _____

Base Salary: _____ / _____ _____ / _____
Under Over Under Over
\$60,000 \$60,000 \$60,000 \$60,000

I verify that the above information is correct and that the applicant is qualified to compete for The Brunswick Foundation Sons & Daughters Scholarship based on this information.

Print Name of Person Approving Eligibility Title Phone No Fax No.

Signature Name of Person Approving Eligibility Date/Approved

Division/Group City State Country

Approved application should be submitted to:
The Brunswick Foundation, 1 N. Field Ct., Lake Forest, IL 60045
DEADLINE FOR RECEIPT OF ALL MATERIAL IS February 28, 2014.



FORM II - HIGH SCHOOL/SECONDARY SCHOOL TRANSCRIPT/TEST SCORE FORM

SECTION A Applicant is to complete this section (in English) and forward to your school.

Applicant's Name Phone Number Email
Employee (Parent Name) Division/Group City Email

STUDENT/PARENTAL CONSENT TO RELEASE INFORMATION

According to the Federal Family Rights and Privacy Act of 1984, no information about a student's academic performance may be disclosed without the written consent of the student, if he/she is 18 years of age or older, or the consent of his/her parent, if the student is under the age of 18.

Parent's/Guardian's Signature Date
Applicant's Signature (if 18 or older) Date

----- APPLICANT: DO NOT WRITE BELOW THIS LINE -----

SECTION B HS/Secondary School Official, please complete the following and attach a current official transcript.

Applicants ranks _____ in a class of _____. Cumulative grade point average _____ /4 0 scale. If grading scale is other than a 4.0, please include grade comparison explanation. (Please Provide)

ACT English _____ Math _____ Reading _____ Science _____ Composite _____ Not Applicable _____
SAT Critical Reading _____ Math _____ Writing _____ Not Applicable _____

INTERNATIONAL STUDENTS ONLY: Predicted University Entrance Examination Results for:

_____ International Baccalaureate _____ A-Level Examinations _____ Matura
_____ Other National Exam: _____ if actual examination results are available, please attach with application.

High School/Secondary School Official:

Print Name Signature
Date Title
School Name Phone Number
School Address City State Zip

Please attach transcript to this form and return to
The Brunswick Foundation, 1 N. Field Ct., Lake Forest, IL 60045,
or hand deliver to student in a sealed envelope.

DEADLINE FOR RECEIPT OF ALL MATERIAL IS February 28, 2014.



FORM III - UNIVERSITY TRANSCRIPT/TEST SCORE INFORMATION FORM (INCLUDING UNIVERSITY CREDITS WHILE IN HIGH SCHOOL)

SECTION A Applicant is to complete this section (in English) and forward to your university.

Applicant's Name Phone Number Email
Employee (Parent Name) Division/Group City Email

STUDENT/PARENTAL CONSENT TO RELEASE INFORMATION

According to the Federal Family Rights and Privacy Act of 1984, no information about a student's academic performance may be disclosed without the written consent of the student, if he/she is 18 years of age or older, or the consent of his/her parent, if the student is under the age of 18.

Parent's/Guardian's Signature Date
Applicant's Signature (if 18 or older) Date

APPLICANT: DO NOT WRITE BELOW THIS LINE

SECTION B University Official, please complete the following and attach a current official transcript.

Cumulative grade point average ____ /4.0 scale. If grading scale is other than a 4.0, please include grade comparison explanation. (Please Provide)

ACT English ____ Math ____ Reading ____ Science ____ Composite ____ Not Applicable ____
SAT Critical Reading ____ Math ____ Writing ____ Not Applicable ____

INTERNATIONAL STUDENTS ONLY: Predicted University Entrance Examination Results for:

____ International Baccalaureate ____ A-Level Examinations ____ Matura
____ Other National Exam: _____ if actual examination results are available, please attach with application.

School Official:

Print Name Signature
Date Title
School Name Phone Number
School Address City State Zip

Please attach transcript to this form and return to The Brunswick Foundation, 1 N. Field Ct., Lake Forest, IL 60045, or hand deliver to student in a sealed envelope.

DEADLINE FOR RECEIPT OF ALL MATERIAL IS February 28, 2014.

FORM IV - REFERENCE FORM (PRINT OR TYPE)

SECTION A Applicant is to complete this section (in English) and forward to your school counselor, administrator or member of the faculty.

Applicant's Name _____ Phone No _____ Email _____

Employee Parent Name _____ Division/Group _____ Phone No _____ Email _____

----- **STUDENT DO NOT WRITE BELOW THIS LINE** -----

SECTION B A counselor, administrator or faculty personnel must complete this section in English language.

Please complete this form and mail it to The Brunswick Foundation. (If you know the applicant well enough, it would be very helpful to the Selection Committee if you could offer a brief example of the student's actions or behavior that leads you to the rating you assign below.)

The applicant's choice of a post-secondary education program is:

Extremely Appropriate Very Appropriate Appropriate Inappropriate No Basis for Judgement

Comment _____

The applicant's achievements reflect his/her ability:

Extremely Well Very Well Moderately Well Not Well No Basis for Judgement

Comment _____

The applicant's ability to set realistic and attainable goals is:

Excellent Good Fair Poor No Basis for Judgement

Comment _____

The quality of the applicant's commitment to school and community is:

Excellent Good Fair Poor No Basis for Judgement

Comment _____

The applicant is able to seek, find, and use learning resources:

Extremely Well Very Well Moderately Well Not Well No Basis for Judgement

Comment _____

The applicant demonstrates curiosity and initiative:

Extremely Well Very Well Moderately Well Not Well No Basis for Judgement

Comment _____

The applicant demonstrates good problem-solving skills, follows through and completes tasks:

Extremely Well Very Well Moderately Well Not Well No Basis for Judgement

Comment _____

The applicant's respect for others is:

Excellent Good Fair Poor No Basis for Judgement

Comment _____



The ability of this applicant to assume leadership roles is:

[] Excellent [] Good [] Fair [] Poor [] No Basis for Judgement

Comment

The level of maturity displayed by the applicant is:

[] Excellent [] Good [] Fair [] Poor [] No Basis for Judgement

Comment

The overall success in higher education predicted for this applicant will probably be:

[] Excellent [] Good [] Fair [] Poor [] No Basis for Judgement

Comment

Has the applicant ever been disciplined by the school? If yes, explain.

[] No [] Yes

Have the applicant's studies been seriously affected by outside work, illness or other factors? If yes, explain.

[] No [] Yes

In your opinion, has this applicant been working up to his or her true level of ability?

[] No [] Yes

SUPPLEMENTAL INFORMATION

Please complete this section, as it is very helpful to the Selection Committee while reviewing the application. Are there any other facts or impressions which you feel the Selection Committee should know about this student? Using the school's letterhead, please attach any further comments and/or personal recommendations, if needed.

Three horizontal lines for supplemental information.

Form fields: Print Name, Signature, Title, Date, School Name, Phone Number, School Address, City, State, Zip, Country.

You have the option to waive the right of future access to this person's recommendation/evaluation. (Please check one.)
[] I hereby waive my right to future access to this person's recommendation/evaluation.
[] I hereby do not waive my right to future access to this person's recommendation/evaluation.

Please return this form to:
The Brunswick Foundation, 1 N. Field Ct., Lake Forest, IL 60045
DEADLINE FOR RECEIPT OF ALL MATERIAL IS February 28, 2014.

**BRUNSWICK FOUNDATION
2014 SONS & DAUGHTERS SCHOLARSHIP PROGRAM
- U.S. College/University/Post Secondary School Undergraduate Application Procedure -**

For more than 50 years, The Brunswick Foundation has supported causes and programs that complement the business interests of Brunswick Corporation and enhance the interests of the Company's employees and the communities in which they live and work. One such program is the Sons & Daughters Scholarship Program. We are pleased that you are going to a university and have decided to apply for a Brunswick Foundation Sons & Daughters Scholarship. Detailed below are the scholarship program guidelines, as well as the scholarship application process.

AWARDS AND ELIGIBILITY

Students applying for this scholarship program are eligible for a single-year scholarship of up to \$2,500 (with a maximum of \$10,000 per recipient).

Eligible applicants must be 23 years of age or younger (exception for military duty) as of February 28, 2014, and are students:

- who are current university freshmen, sophomore or junior;
- with a grade point average of 2.0 or higher on a 4.0 scale;
- who are entering full-time to an accredited, nonprofit university or vocational school by the Fall of 2014;
- whose parent, stepparent or guardian is employed as a full-time employee of Brunswick Corporation, or one of its divisions/subsidiaries on February 28, 2014 and who has worked for Brunswick for at least one year of continuous service in the previous five years. Employees and spouses of employees are not eligible to apply.

SELECTION OF RECIPIENTS

Selections are made by an impartial, outside committee comprised of professionals from prominent universities. No representatives of Brunswick Corporation or The Brunswick Foundation are involved in the selection process.

No preference is accorded to an applicant by reason of a parent's position or length of employment. Consideration for all awards is based on the applicant's academic record, achievement test scores, and leadership abilities as demonstrated by extracurricular activities and work record. Financial need is an additional consideration for half of the awards.

All scholarship winners will be individually notified of the committee's decision no later than May 1, 2014.

RULES AND REGULATIONS

- The application must be completed by the student applicant only (**in English**), otherwise the application will not be accepted. No materials will be returned back to recipient.
- Scholarship recipients are required to complete a sufficient number of credit hours each year to complete degree requirements within the normal time period. **The funds provided must be used only for educational expenses** (e.g. tuition, books and fees).
- It is the intent of The Brunswick Foundation to avoid granting a student financial aid in excess of educational expenses. In accordance with Internal Revenue Service regulations, financial aid in excess of actual education expenses will result in taxable income to the recipient.
- Payments will be disbursed each July, are made payable to the school, and mailed directly to the institution.
- Recipients of **single-year scholarships may reapply for the scholarship of up to \$2,500 each year** of their undergraduate studies (maximum of \$10,000 per recipient).
- Past recipients of **multi-year scholarships may not apply for any further assistance** from The Brunswick Foundation.
- The scholarship may not be used for graduate school or master degree.
- Copies or prior scholarship application forms will not be accepted.
- Scholarship recipients are not required to accept employment with Brunswick Corporation or any of its related subsidiaries upon graduation.
- Completing this application does not guarantee that you will receive a scholarship.
- The administration and financing of this program is exclusively the responsibility of The Brunswick Foundation, which has full authority to make rules and regulations governing the program and to make final decisions in all matters arising in connection therewith except for the selection of scholarship recipients. The Foundation may modify or discontinue the program at anytime.

*Questions may be directed to your parent's or guardian's local Human Resource Office
or Lisa DeBartolo at (847) 735-4344.*

DEADLINE FOR RECEIPT OF ALL MATERIAL IS February 28, 2014.

CHECKLIST FOR APPLICATION PROCESS

- Retain This Sheet For Your Own Information And Guidance -

The instructions below should help you through the application process. Check each box when you have completed that step of the process. **International applications and transcripts must be in English, otherwise the application will not be accepted.**

FORM I - APPLICATION

- Student must complete entire application (type or print for legible reproduction). If something is not applicable, mark "N/A".
- Review your application carefully; then sign, date, and **have your parent or guardian complete SECTION A of the Brunswick Employee Verification section of FORM I.**
- Make a photocopy for your records.**
- Return your completed application to your parent's or guardian's Human Resource Department for employee verification. If your application is not verified by the HR department, it will be returned and may not make the deadline. (No copies or old applications will be accepted).**

FORM II AND III - TRANSCRIPT/TEST SCORE FORM

- Complete SECTION A of FORM II. Sign and date the form. Your parent or legal guardian must also sign if you are under age 18
- All first year United States college, university or Post-Secondary Institution students must complete Form III along with a HS/secondary school transcript/test scores.**
- Deliver form to your school Official (and HS/secondary school Official, if applicable) and request that they complete SECTION B of FORM II (and FORM III if applicable) and **attach an official current transcript.** The official(s) may return the form(s) and transcripts directly to The Brunswick Foundation, or you may attach to your application
- Include ACT and/or SAT scores on application, if not included on transcript.**
- The School Official may return the form(s) directly to **The Brunswick Foundation, 1 N. Field Ct., Lake Forest, IL 60045**, or you may attach it to your application.

FORM IV - REFERENCES FORM

- Complete SECTION A of FORM IV. Maximum of two reference letters - others will be discarded
- Deliver FORM IV to a counselor/administrator/faculty member of your school. Ask them to complete SECTION B.
- The School Official may return the form(s) directly to **The Brunswick Foundation, 1 N. Field Ct., Lake Forest, IL 60045**, or you may attach it to your application.

Use only the forms provided; do not submit additional materials or letters of recommendation. You will be notified if we have not received all of your documents pertaining to your application. Remember – it is your responsibility to see that all forms are submitted to The Brunswick Foundation on time.

DEADLINE FOR RECEIPT OF ALL MATERIAL IS February 28, 2014.

CHECKLIST FOR APPLICATION PROCESS - INTERNATIONAL
- Retain This Sheet For Your Own Information And Guidance -

The instructions below should help you through the application process. Check each box when you have completed that step of the process. **International applications and transcripts/test scores must be in English, otherwise the application will not be accepted.**

FORM I - APPLICATION

- Student must complete entire application (type or print for legible reproduction) If something is not applicable, mark "N/A".
- Form 1-2 Education: Complete name of HS/Secondary School Attended, Name of Current School Attending and the following questions Only complete ACT, SAT, GPA and class rank, if applicable
- Review your application carefully; then sign, date, and **have your parent or guardian complete SECTION A of the Brunswick Employee Verification section of FORM I.**
- Make a photocopy for your records.**
- Return your completed application to your parent's or guardian's Human Resource Department for employee verification. If your application is not verified by the HR department, it will be returned and may not make the deadline.**
(No copies or old applications will be accepted)

FORM II AND III - TRANSCRIPT/TEST SCORE FORM

- Complete SECTION A of FORM II. Sign and date the form. Your parent or legal guardian must also sign if you are under age 18.
- If you took a university entrance examination (International Baccalaureate, A-levels, Matura or any other examination), a School Official must complete Form II Section B of the "University/Post-Secondary Institution Transcript/Test Scores Form" and attach your current transcript/test scores and examination results If attended more than one year at the University/Post-Secondary Institution, we must receive test scores for all years attended Please have the School Official use a school stamp or initial documents, if not originals
- All first year University/Post-Secondary Institution students must complete Form III along with a HS/secondary school transcript/test scores. If originals are not available, please have the School Official use a school stamp or initial the documents.**
- The School Official may return the form(s) directly to **The Brunswick Foundation, 1 N. Field Ct., Lake Forest, IL 60045**, or you may attach it to your application.

FORM IV - REFERENCES FORM

- Complete SECTION A of FORM IV. Maximum of two reference letters - others will be discarded.
- Deliver FORM IV to a counselor/administrator/faculty member of your school. Ask them to complete SECTION B.
- The School Official may return the form(s) directly to **The Brunswick Foundation, 1 N. Field Ct., Lake Forest, IL 60045**, or you may attach it to your application.

Use only the forms provided; do not submit additional materials or letters of recommendation. You will be notified if we have not received all of your documents pertaining to your application. Remember – it is your responsibility to see that all forms are submitted to The Brunswick Foundation on time.

DEADLINE FOR RECEIPT OF ALL MATERIAL IS February 28, 2014.

**BRUNSWICK FOUNDATION
2014 SONS & DAUGHTERS SCHOLARSHIP PROGRAM**

FORM I - UNITED STATES COLLEGE/UNIVERSITY/ POST-SECONDARY INSTITUTION APPLICATION

(PRINT OR TYPE)

Complete this form in **English** and forward it to your parent's or guardian's local Human Resource Department.

1 APPLICANT DATA

Last Name	First Name	Middle Initial	Email
Address		City	State Zip Country
Date of Birth	Male / Female	Daytime Phone Number	

2 EDUCATION

Name of HS/Secondary School Attended	City	State	Country	Date Graduated
--------------------------------------	------	-------	---------	----------------

(Please Provide)

ACT English _____ Math _____ Reading _____ Science _____ Composite _____ Not Applicable _____

SAT Critical Reading _____ Math _____ Writing _____ Not Applicable _____ Cumulative H.S. GPA _____ /4.0 scale

Number _____ Out of _____ Students (Class rank at the end of H.S.) Military Duty? If yes how many years? _____

Name of Current School Attending	City	State	Graduation Date (Anticipated)
----------------------------------	------	-------	-------------------------------

What will be your grade level in the Fall of 2014? (Example: 2nd semester freshman) _____

If you are planning to transfer to another school to complete your degree requirements, name the school to which you intend to transfer and when this transfer will occur.

Name of School	Month / Year
----------------	--------------

If you have already decided your major of study, what is it? If not, indicate undecided. _____

Have you decided what career you hope to pursue upon graduation? If so, what are your career aspirations?

On a per week basis, state the approximate number of hours you spend in the classroom, lab and doing homework.

Classroom Hours	Lab Hours	Homework
-----------------	-----------	----------

Do you feel that your grades are an accurate reflection of your ability? If not, what circumstances prevented you from doing better?

3 ACTIVITIES AWARDS AND HONORS

List all school activities in which you have participated in (i.e., student government, music, etc.).

Activity	No. Yrs.	Awards/Honors	Offices Held

List all outside of school activities in which you have participated without pay during school (i.e., civic involvement, volunteer work, family responsibilities, etc.).

Organization	No. Yrs.	Awards/Honors	Describe Involvement

4 WORK EXPERIENCE

Indicate history of employment.

Company	Position	Dates		Average Hrs./Week	Salary \$/Hour
		From - Mo./Yr.	To - Mo./Yr.		
		/ /	/ /		
		/ /	/ /		
		/ /	/ /		
		/ /	/ /		

5 APPLICATIONS FOR SCHOLARSHIPS/GRANTS/FINANCIAL AID FROM OTHER ORGANIZATIONS

List all scholarships, grants and financial aid programs that you have received/applied for or given and indicate amount awarded or indicate amount for which you are still waiting for notification.

Name of Scholarship/Grant/Financial Aid Program	Amount Awarded	Amount Applied For
PRIOR YEAR		
CURRENT YEAR		

6 **ESSAY**

Write an essay of no more than 500 words about the following question: Where do you see yourself in 10 years from now.

7 **CERTIFICATION**

I certify that all statements contained in this application are true and correct, that I believe myself eligible, and I hereby apply for The Brunswick Foundation Sons & Daughters Scholarship.

Signed

Applicant

/ /
Date



8 BRUNSWICK EMPLOYEE VERIFICATION

SECTION A Brunswick employee is to complete this section and then **submit** the completed application to their Human Resource Department for verification.

Applicant's Name: _____ Email _____

Employee's Name: _____ Phone No. _____

Relationship to Applicant: Parent _____ Stepparent* _____ Guardian* _____ Employee Email _____

Employee's Location: _____
Division/Group City State Country

*If the relationship is that of stepparent or guardian, the applicant must reside with the qualifying employee on a full-time basis. Spouses of employees are not eligible to apply.

----- **APPLICANT: DO NOT WRITE BELOW THIS LINE** -----

SECTION B Employee's local Human Resource Department is to complete this section.

To qualify, the employee must have been working as a full-time employee of Brunswick Corporation or one of its divisions/subsidiaries on February 28, 2014 and must have had at least one year of continuous service in the previous five years. Certain aspects of the selection process require salary information. Complete the information as to the qualifying employee – **if two employees qualify the applicant, include information on both.** Employee does not qualify. _____

Position Held (Title) _____

Position Held (Title): _____

Date of Hire: _____ / _____ / _____ _____ / _____ / _____

Base Salary: _____ / _____ _____ / _____
Under Over Under Over
\$60,000 \$60,000 \$60,000 \$60,000

I verify that the above information is correct and that the applicant is qualified to compete for The Brunswick Foundation Sons & Daughters Scholarship based on this information

Print Name of Person Approving Eligibility Title Phone No. Fax No.

Signature Name of Person Approving Eligibility Date Approved

Division/Group City State Country

Approved application should be submitted to:
The Brunswick Foundation, 1 N. Field Ct., Lake Forest, IL 60045

DEADLINE FOR RECEIPT OF ALL MATERIAL IS February 28, 2014.



FORM II - UNITED STATES COLLEGE/UNIVERSITY/POST-SECONDARY INSTITUTION TRANSCRIPT/TEST SCORE FORM

SECTION A Applicant is to complete this section (in English) and forward to your school.

Applicant's Name Phone Number Email

Employee (Parent Name) Division/Group City Email

STUDENT/PARENTAL CONSENT TO RELEASE INFORMATION

According to the Federal Family Rights and Privacy Act of 1984, no information about a student's academic performance may be disclosed without the written consent of the student, if he/she is 18 years of age or older, or the consent of his/her parent, if the student is under the age of 18. Therefore, to complete The Brunswick Foundation Sons & Daughters Scholarship Program Application, this consent form must be signed prior to the school official completing SECTION B of this application. "I, hereby, consent to allow my (son's/daughter's) school to release all pertinent scholastic and educational information regarding me (my son/daughter) requested below and contained herein to properly complete The Brunswick Foundation Sons & Daughters Scholarship Program Application."

Parent's/Guardian's Signature Date

Applicant's Signature (if 18 or older) Date

APPLICANT: DO NOT WRITE BELOW THIS LINE

SECTION B School Official, please complete the following and attach a current official transcript/test scores.

Cumulative grade point average ____ /4.0 scale. If grading scale is other than a 4.0, please include grade comparison explanation. (Please Provide)

ACT English ____ Math ____ Reading ____ Science ____ Composite ____ Not Applicable ____
SAT Critical Reading ____ Math ____ Writing ____ Not Applicable ____

INTERNATIONAL STUDENTS ONLY: Predicted University Entrance Examination Results for:

____ International Baccalaureate ____ A-Level Examinations ____ Matura
____ Other National Exam: _____ if actual examination results are available, please attach with application.

School Official:

Print Name: Signature

Date Title

School Name Phone Number

School Address City State Zip

Please attach transcript to this form and return to
The Brunswick Foundation, 1 N. Field Ct., Lake Forest, IL 60045,
or hand deliver to student in a sealed envelope.

DEADLINE FOR RECEIPT OF ALL MATERIAL IS February 28, 2014.



FORM III - HS/SECONDARY SCHOOL TRANSCRIPT/TEST SCORE FORM (MUST BE COMPLETED BY FIRST YEAR UNIVERSITY STUDENT)

SECTION A Applicant is to complete this section (in English) and forward to your school.

Form with fields for Applicant's Name, Phone Number, Email, Employee (Parent Name), Division/Group, City, and Email.

STUDENT/PARENTAL CONSENT TO RELEASE INFORMATION

According to the Federal Family Rights and Privacy Act of 1984, no information about a student's academic performance may be disclosed without the written consent of the student, if he/she is 18 years of age or older, or the consent of his/her parent, if the student is under the age of 18.

Form with fields for Parent's/Guardian's Signature, Date, Applicant's Signature (if 18 or older), and Date.

----- APPLICANT: DO NOT WRITE BELOW THIS LINE -----

SECTION B HS/Secondary School Official, please complete the following information and attach an official transcript.

Applicants ranks _____ in a class of _____. Cumulative grade point average _____ /40 scale. If grading scale is other than a 40, please include grade comparison explanation. (Please Provide)

ACT English _____ Math _____ Reading _____ Science _____ Composite _____ Not Applicable _____
SAT Critical Reading _____ Math _____ Writing _____ Not Applicable _____

INTERNATIONAL STUDENTS ONLY: Predicted University Entrance Examination Results for:

_____ International Baccalaureate _____ A-Level Examinations _____ Matura
_____ Other National Exam. _____ if actual examination results are available, please attach with application

Form with fields for Print Name, Signature, Date, Title, School Name, Phone Number, School Address, City, State, and Zip.

Please attach transcript to this form and return to The Brunswick Foundation, 1 N. Field Ct., Lake Forest, IL 60045, or hand deliver to student in a sealed envelope.

DEADLINE FOR RECEIPT OF ALL MATERIAL IS February 28, 2014.

FORM IV - UNITED STATES COLLEGE/UNIVERSITY/POST-SECONDARY INSTITUTION REFERENCE FORM (PRINT OR TYPE)

SECTION A Applicant is to complete this section (in English) and forward to your school counselor, administrator or member of the faculty.

Applicant's Name Phone No. Email

Employee Parent Name Division/Group Phone No. Email

----- STUDENT DO NOT WRITE BELOW THIS LINE -----

SECTION B A counselor, administrator or faculty personnel must complete this section in English language.

Please complete this form and mail it to The Brunswick Foundation (If you know the applicant well enough, it would be very helpful to the Selection Committee if you could offer a brief example of the student's actions or behavior that leads you to the rating you assign below.)

The applicant's choice of a post-secondary education program is:

Extremely Appropriate Very Appropriate Appropriate Inappropriate No Basis for Judgement

Comment

The applicant's achievements reflect his/her ability:

Extremely Well Very Well Moderately Well Not Well No Basis for Judgement

Comment

The applicant's ability to set realistic and attainable goals is:

Excellent Good Fair Poor No Basis for Judgement

Comment

The quality of the applicant's commitment to school and community is:

Excellent Good Fair Poor No Basis for Judgement

Comment

The applicant is able to seek, find, and use learning resources:

Extremely Well Very Well Moderately Well Not Well No Basis for Judgement

Comment

The applicant demonstrates curiosity and initiative:

Extremely Well Very Well Moderately Well Not Well No Basis for Judgement

Comment

The applicant demonstrates good problem-solving skills, follows through and completes tasks:

Extremely Well Very Well Moderately Well Not Well No Basis for Judgement

Comment

The applicant's respect for others is:

Excellent Good Fair Poor No Basis for Judgement

Comment



The ability of this applicant to assume leadership roles is:

[] Excellent [] Good [] Fair [] Poor [] No Basis for Judgement

Comment

The level of maturity displayed by the applicant is:

[] Excellent [] Good [] Fair [] Poor [] No Basis for Judgement

Comment

The overall success in higher education predicted for this applicant will probably be:

[] Excellent [] Good [] Fair [] Poor [] No Basis for Judgement

Comment

Has the applicant ever been disciplined by the school? If yes, explain.

[] No [] Yes

Have the applicant's studies been seriously affected by outside work, illness or other factors? If yes, explain.

[] No [] Yes

In your opinion, has this applicant been working up to his or her true level of ability?

[] No [] Yes

SUPPLEMENTAL INFORMATION

Please complete this section, as it is very helpful to the Selection Committee while reviewing the application. Are there any other facts or impressions which you feel the Selection Committee should know about this student? Using the school's letterhead, please attach any further comments and/or personal recommendations, if needed.

Three horizontal lines for supplemental information.

Form fields: Print Name, Signature, Title, Date, School Name, Phone Number, School Address, City, State, Zip, Country.

You have the option to waive the right of future access to this person's recommendation/evaluation. (Please check one.)
[] I hereby waive my right to future access to this person's recommendation/evaluation.
[] I hereby do not waive my right to future access to this person's recommendation/evaluation.

Please return this form to:
The Brunswick Foundation, 1 N. Field Ct., Lake Forest, IL 60045
DEADLINE FOR RECEIPT OF ALL MATERIAL IS February 28, 2014.

THE BRUNSWICK FOUNDATION

2014 DEALER SONS & DAUGHTERS SCHOLARSHIP PROGRAM

APPLICATION PROCEDURE

We are pleased that you are going to attend college or are currently attending college and have decided to apply for The Brunswick Foundation Dealer Sons & Daughters Scholarship. Below is general scholarship program information for your reference.

Awards and Eligibility – A group of scholarships will be awarded to provide a single payment of up to \$2,000, with a maximum of \$8,000 per recipient. Eligible applicants must be 23 years or younger as of June 6, 2014 and are students

- ❖ who are currently in their final year of high school or are current college freshmen, sophomores or juniors,
- ❖ with a grade point average of 2.0 or higher on a 4.0 scale;
- ❖ who are enrolled in or are entering full-time to a U.S. accredited, nonprofit college, university or vocational school in the Fall of 2014,
- ❖ whose parent, stepparent or guardian is currently working as a full-time employee of an eligible Brunswick Corporation dealership and has been employed at that dealership for at least one year as of June 6, 2014. Eligible Brunswick Corporation dealers are those who have achieved "Gold" or "Platinum" level status as determined by Brunswick Dealer Advantage. Dealership employees and spouses are not eligible to apply.

Selection of Recipients – Selections are made by an impartial, outside committee comprised of professionals from prominent universities. No representatives of Brunswick are involved in the selection process.

No preference is afforded to an applicant by reason of a parent's position, length of employment, relationship with Brunswick or by the dealerships standing with Brunswick Corporation. Consideration for all awards is based on the applicant's academic record, achievement test scores, and leadership abilities as demonstrated by extracurricular activities and work record. Financial need is also an additional consideration for the awards. All scholarship winners will be individually notified of the committee's decision no later than mid-July 2014.

General

- ❖ Application must be completed by the student applicant only and in English, otherwise it will not be accepted.
- ❖ The funds provided must be used only for educational expenses (tuition, books and fees). All checks will be made payable and mailed directly to the school on behalf of the award recipient.
- ❖ Checks will generally be disbursed in August.
- ❖ It is the intent to avoid having a student receive financial aid in excess of educational expenses. In accordance with Internal Revenue Service regulations, financial aid in excess of actual education expenses results in taxable income to the recipient.
- ❖ Recipients may reapply for another award each year assuming eligibility criteria are still met (maximum of \$8,000, per recipient).
- ❖ Grant can not be used for graduate school, master's degree or PhD.
- ❖ No copies or prior scholarship application forms will be accepted.
- ❖ Scholarship recipients are not required to accept employment with Brunswick or any of its related subsidiaries upon graduation.
- ❖ **Completing this application does not guarantee that you will receive a scholarship.**
- ❖ The administration and financing of this program is exclusively the responsibility of The Brunswick Foundation, which has full authority to make rules and regulations governing the program and to make final decisions in all matters arising in connection therewith except for the selection of scholarship recipients. The Brunswick Foundation may modify or discontinue the program at anytime.
- ❖ **Questions regarding the application process may be directed to Lisa DeBartolo, the Program Coordinator, at (847) 735-4379 or lisa.debartolo@brunswick.com.**
- ❖ **Questions regarding dealer eligibility may be directed to a Dealer Advantage Specialist at (877) GO-ADVTG (462-3884).**
- ❖ **Completed applications need to be mailed to the following address:**
The Brunswick Foundation - Dealer, Attn: Lisa DeBartolo, 1 N. Field Ct., Lake Forest, IL 60045

DEADLINE FOR APPLICATION IS JUNE 6, 2014

**RETAIN THIS SHEET FOR
YOUR OWN INFORMATION AND GUIDANCE
CHECKLIST FOR APPLICATION PROCESS**

The instructions below should help you through the application process. Check each box when you have completed that step of the process. All applications and transcripts must be in English.

FORM I – APPLICATION

- Student applicant must complete entire application (type or print). If something is not applicable, mark "N/A".
- If you're currently attending college, you must include High School information. ACT or SAT scores must also be completed, if applicable.**
- Review your application carefully and then sign and date it.

FORM II – BRUNSWICK DEALERSHIP EMPLOYEE VERIFICATION

- It is very important that Form II – Section A is completed and returned to your parent's/guardian's employer for dealer employee verification. If this form is not verified by your parent's/guardian's employer, it will be returned and may not make the deadline. Employer should return form back to employee. EMPLOYEE CANNOT VERIFY THEIR OWN CHILD'S APPLICATION. Someone else in the office must do the verification.**

FORM III and IV – TRANSCRIPT FORM

- Complete Section A of the Transcript Form applicable to you and sign and date. Your parent or legal guardian must also sign if you are under age 18. **Do not order a HS transcript until you have completed the academic year. Transcript can be mailed separately.**
 - If you are a High School Senior, you need to complete Form III.
 - If you are a High School Senior and receiving college credits, you need to complete Form III and IV.
 - If you have only completed one year of college, you're required to complete Form III and IV.
 - If you have completed more than two years of college, you need to complete only Form IV.
- Once you have completed Section A, forward the document to a school official to complete Section B and to receive a current official transcript(s) including required ACT or SAT Scores, if applicable. The school should return the Form(s) and Transcript(s) back to you or mail it to The Brunswick Foundation. **Transcript can be mailed separately - if you have not completed your final grades by June 6th. Mail transcript to the Foundation, as soon as available.**

FORM V – REFERENCE FORM

- Complete Section A of the Reference Form.
- Deliver Reference Form to a counselor/administrator/faculty member of your current school. Maximum of two reference letters – others will be discarded. Ask them to complete Section B and mail to address provided. Return the Form V directly to The Brunswick Foundation in the return envelope that you should provide.

MAILING OF THE APPLICATION

- Make photocopy of everything for your records.** No materials will be returned back to the recipient.
- Use only the forms provided; do not submit additional materials.
- Once you have completed the application along with the appropriate current official transcript(s), you can mail it to:

The Brunswick Foundation - Dealer, Attn: Lisa DeBartolo, 1 N. Field Ct., Lake Forest, IL 60045

Remember - It is your responsibility to make sure your application is complete, before submitting to The Brunswick Foundation. IF THERE IS MISSING INFORMATION, AN EMAIL WILL BE SENT TO THE EMAIL ADDRESS PROVIDED. FAILURE TO READ THE EMAIL AND PROVIDE THE MISSING INFORMATION WILL RESULT IN THE APPLICATION BEING DECLINED.

DEADLINE FOR APPLICATION IS JUNE 6, 2014

DEADLINE FOR APPLICATION IS JUNE 6, 2014



THE BRUNSWICK FOUNDATION 2014 DEALER SONS & DAUGHTERS SCHOLARSHIP PROGRAM

FORM I – APPLICATION - Applicant is to complete this form in English.

Applicant Data (print or type)

Last Name	First Name	MI	Email		
Address	Street	City	State	Zip	Country
/ /	Male	Female	()	Daytime Phone Number	
Date of Birth					

Education – (MUST BE COMPLETED - even if you are in College.)

Name of High School (Attending or Attended)	City	State	Date of Graduation
ACT English _____ Math _____ Reading _____ Science _____ Composite _____ Not Applicable _____			
SAT CR _____ Math _____ Writing _____ Not Applicable _____ Cumulative GPA in High School _____ /4 0 scale.			
Number _____ Out of _____ Students (Class rank in HS)	Any Military Duty, if yes how many years _____		
If currently in high school, list the U S colleges to which you have applied to in the order of your preference			
First Choice:	College Name	City	State
Second Choice:	College Name	City	State
Name of College Currently Attending (if applicable)	City	State	College Graduation Date (Anticipated)

Upon returning to college in the Fall of 2014, what will be your grade level? (Example 1st semester sophomore)

If you are planning to transfer to another school to complete your degree requirements, name the school to which you intend to transfer and when this transfer will occur.

Name of U.S. College Year	Transfer Date (Month /
---------------------------	------------------------

If you have already decided your major of study, what is it? If not, indicate undecided _____

Have you decided what career you hope to pursue upon graduation from college? If so, what? _____

On a per week basis, state the approximate number of hours you spend in the classroom, lab and doing homework.

Classroom Hours	Lab Hours	Homework
-----------------	-----------	----------

Do you feel that your grades are an accurate reflection of your ability? If not, what circumstances prevented you from doing better?

Activities Awards and Honors

List all **school** activities in which you have participated during high school/college (i.e., student government, music, etc.)

Activity	No. Yrs	Awards/Honors	Offices Held

List all outside of school activities in which you have participated without pay during school (i.e., civic involvement, volunteer work, family responsibilities, etc.)

Organization	No. Yrs	Awards/Honors	Describe Involvement

Work Experience

Indicate history of employment

Company	Position	Dates		Average Hrs /Week	Salary \$/Hour
		From - Mo /Yr	To - Mo /Yr		

Applications for Scholarships/Grants/Financial Aid from Other Organizations

List all scholarships, grants and financial aid programs that you have received/applied for in the prior and current years and also indicate current year amounts (Also include amounts for which you are still waiting for notification.)

Name of Scholarship/Grant/Financial Aid Program	Amount Awarded	Amount Applied For
Prior Year		

Current Year

2014 Brunswick Dealership Employee Verification

FORM II - Employee (i.e., parent/guardian) is to complete Section A and then submit to their employer for verification
Section A

Applicant's Name		Email			
Employee's Name	Phone No		Email		
Employee's Address	Street	City	State	Zip	Country
Relationship to Applicant	<input type="checkbox"/> Parent	<input type="checkbox"/> Stepparent *	<input type="checkbox"/> Guardian *		
Employee's Location	Dealership Name	City	State	Dealer #	

* If the relationship is that of step-parent or guardian, the applicant must reside with the qualifying Employee on a full-time basis. Spouses of employees are not eligible to apply.

EMPLOYER IS TO COMPLETE INFORMATION BELOW

Section B – Employee's Dealership Employer is to complete this section.

To qualify, the employee must be currently working as a full-time employee of your dealership with at least one-year of continuous service whose date of hire was not later than June 6, 2013. Further, the dealership must be either a "Gold" or "Platinum" dealership as determined by Brunswick Dealer Advantage as of the application date. Complete the information as it applies to who is qualifying the above applicant. **If two employees qualify the applicant, include information on both.** After completion of this verification, please return this form back to the employee. **EMPLOYEE CANNOT VERIFY OWN CHILD'S APPLICATION.**

Employee's Title: _____	Date of Hire: ____/____/____
Employee's Title: _____	Date of Hire: ____/____/____

I verify that the above information is correct and that the applicant is qualified to compete for The Brunswick Foundation Dealer Sons & Daughters Scholarship based on this information and also the Dealership has achieved either "Gold" or "Platinum" level status with Brunswick Dealer Advantage. **Employee cannot verify its own child's application.**

Print	Name of Person Approving Eligibility	Title	Phone Number	Email
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Signature	Name of Person Approving Eligibility	Date Approved	Fax Number
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Dealership Name	City	State	Dealer #
-----------------	------	-------	----------

Specify which Brunswick Brand Association (i.e., Billiards, Boat and/or Engine, Life Fitness): _____

Name of Primary Brunswick Corporation Contact (i.e., Sales Rep)	Phone Number
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Note: Should it be later determined that the applicant is not related to the employee or that the applicant's parent/guardian/stepparent is not an eligible employee of your dealership, The Brunswick Foundation reserves the right to revoke the award at any time and or seek reimbursement of any monies previously granted.

DEADLINE FOR APPLICATION IS JUNE 6, 2014

**THE BRUNSWICK FOUNDATION
2014 DEALER SONS & DAUGHTERS SCHOLARSHIP PROGRAM**

FORM III – HIGH SCHOOL TRANSCRIPT FORM *(If you have only completed one year of college this form must be completed.)*

Section A: - Applicant is to complete this section (in English) and forward to the High School

Applicant's Name _____ Phone No _____ Email _____

Employee (Parent Name) _____ Dealership Name _____ City _____ State _____ Email _____

STUDENT/PARENTAL CONSENT TO RELEASE INFORMATION

According to the Federal Family Rights and Privacy Act of 1984, no information about a student's academic performance may be disclosed without the written consent of the student, if he/she is 18 years of age or older, or the consent of his/her parent, if the student is under the age of 18

Therefore, to complete The Brunswick Foundation Dealer Sons & Daughters Scholarship Program Application, this consent form must be signed prior to the school registrar/principal/guidance counselor completing Section B of Form III and Form IV of this application.

"I, hereby, consent to allow my (son's/daughter's) school to release all pertinent scholastic and educational information regarding me (my son/daughter) requested below and contained herein to properly complete The Brunswick Foundation Dealer Sons & Daughters Scholarship Program Application."

Parent's/Guardian's Signature _____ Date _____

Applicant's Signature (if 18 or older) _____ Date _____

Section B: High School Official *(Please wait to complete the following information until the final grades are available. If grades are not available by June 6th, please mail form and transcript, as soon as possible.)*

MAIL TO: THE BRUNSWICK FOUNDATION, 1 N. FIELD CT., LAKE FOREST, IL 60045

Applicants ranks _____ in a class of _____. Cumulative HS GPA _____/4.0 scale If grading scale is other than a 4.0, please include grade comparison explanation

ACT English _____ Math _____ Reading _____ Science _____ Composite _____ Not Applicable _____

SAT Critical Reading _____ Math _____ Writing _____ Not Applicable _____

High School Official: ATTACH AN OFFICIAL TRANSCRIPT

Print Name _____ Signature _____

Date _____ Title _____

High School _____ ()
Phone Number _____

School Address _____ City _____ State _____ Zip _____ Country _____

DEADLINE FOR APPLICATION IS JUNE 6, 2014

**THE BRUNSWICK FOUNDATION
2014 DEALER SONS & DAUGHTERS SCHOLARSHIP PROGRAM**

FORM IV – COLLEGE UNDERGRADUATE TRANSCRIPT FORM

Section A: - Applicant is to complete this section (in English) and forward to their college.

Applicant's Name _____ Phone No _____ Email _____

Employee (Parent Name) _____ Dealership Name _____ City _____ State _____ Email _____

STUDENT/PARENTAL CONSENT TO RELEASE INFORMATION

According to the Federal Family Rights and Privacy Act of 1984, no information about a student's academic performance may be disclosed without the written consent of the student, if he/she is 18 years of age or older, or the consent of his/her parent, if the student is under the age of 18

Therefore, to complete The Brunswick Foundation Dealer Sons & Daughters Scholarship Program Application, this consent form must be signed prior to the school registrar/principal/guidance counselor completing Section B of Form III and Form IV of this application

"I, hereby, consent to allow my (son's/daughter's) school to release all pertinent scholastic and educational information regarding me (my son/daughter) requested below and contained herein to properly complete The Brunswick Foundation Dealer Sons & Daughters Scholarship Program Application "

Parent's/Guardian's Signature _____ Date _____

Applicant's Signature (if 18 or older) _____ Date _____

Section B: College Official – (Please wait to complete the following information, until the final grades are available. If grades are not available by June 6th, please mail form and transcript, as soon as possible.)

MAIL TO: THE BRUNSWICK FOUNDATION, 1 N. FIELD CT., LAKE FOREST, IL 60045

Cumulative College GPA _____ /4.0 scale. (If grading scale is other than a 4.0, please include grade comparison explanation.)

ACT English _____ Math _____ Reading _____ Science _____ Composite _____ Not Applicable _____

SAT Critical Reading _____ Math _____ Writing _____ Not Applicable _____

College Official: ATTACHED AN OFFICIAL TRANSCRIPT

Print Name _____ Signature _____

Date _____ Title _____

College Name _____ ()
Phone Number _____

School Address _____ City _____ State _____ Zip _____ Country _____

DEADLINE FOR APPLICATION IS JUNE 6, 2014

**THE BRUNSWICK FOUNDATION
2014 DEALER SONS & DAUGHTERS SCHOLARSHIP PROGRAM**

FORM V – REFERENCE FORM

SECTION A: - Applicant is to complete this section (in English) and forward to the school.

Applicant's Name _____ Phone No _____ Email _____

Employee Parent Name _____ Dealership Name _____ Email _____

SECTION B: - Counselor, administrator or faculty personnel must complete this section in English language.

Please complete this Form and mail to The Brunswick Foundation in the attached envelope provided by the applicant. If you know the applicant well enough, it would be very helpful to the Selection Committee if you could offer a brief example of the student's actions or behavior that leads you to the rating you assign below.

The applicant's choice of a post-secondary education program is

Extremely Appropriate Very Appropriate Moderately Appropriate Inappropriate No Basis for Judgement

Comments: _____

The applicant's achievements reflect his/her ability

Extremely Well Very Well Moderately Well Not Well No Basis for Judgement

Comments _____

The applicant's ability to set realistic and attainable goals is

Excellent Good Fair Poor No Basis for Judgement

Comments: _____

The quality of the applicant's commitment to school and community is

Excellent Good Fair Poor No Basis for Judgement

Comments: _____

The applicant is able to seek, find, and use learning resources

Extremely Well Very Well Moderately Well Not Well No Basis for Judgement

Comments: _____

The applicant demonstrates curiosity and initiative

Extremely Well Very Well Moderately Well Not Well No Basis for Judgement

Comments _____

The applicant demonstrates good problem-solving skills, follows through and completes tasks

Extremely Well Very Well Moderately Well Not Well No Basis for Judgement

Comments _____

The applicant's respect for others is

Excellent Good Fair Poor No Basis for Judgement

Comments _____

The ability of this applicant to assume leadership roles is

Excellent Good Fair Poor No Basis for Judgement

Comments _____

The level of maturity displayed by the applicant is

Excellent Good Fair Poor No Basis for Judgement

Comments _____

The overall success in higher education predicted for this applicant will probably be

Excellent Good Fair Poor No Basis for Judgement

Comments _____

Has the applicant ever been disciplined by the school? If yes, explain –

No Yes _____

Have the applicant's studies been seriously affected by outside work, illness or other factors? If yes, explain –

No Yes _____

In your opinion, has this applicant been working up to his or her true level of ability?

No Yes _____

SUPPLEMENTAL INFORMATION: Please complete this section, as it is very helpful to the Selection Committee while reviewing the application. Are there any other facts or impressions, which you feel the selection committee should know about this student? Should you require additional space to provide further comments and/or personal recommendations, please use the school's letterhead and reference the applicant on the page

Print Name _____

Signature _____

Title _____

Date _____

School Name _____

Phone No _____

School Address _____

City _____

State _____

Zip _____

Country _____

I understand that I have the option to waive my right of future access to this person's recommendation/evaluation. (Check One)

- I hereby waive my right to future access to this person's recommendation/evaluation
- I hereby do not waive my right to future access to this person's recommendation/evaluation.

**Complete and Mail back to:
The Brunswick Foundation - Dealer
Attn: Lisa DeBartolo
1 N. Field Ct.
Lake Forest, IL 60045**



**THE BRUNSWICK FOUNDATION
2014 DEALER SONS & DAUGHTERS SCHOLARSHIP PROGRAM**

(Please attach with completed application.)

Should you be selected, we would like the opportunity to publicly announce the names of the award recipients and would like you and your parents/guardian to indicate consent for our use of your name for this purpose. We will only disclose your name upon your and your parent's/guardian's approval as indicated below. Not signing this acknowledgement has no impact on the decision making process for the award (i.e., no preference is afforded to an applicant who signs this acknowledgement).

- I hereby authorize The Brunswick Foundation, Brunswick Corporation or its related entities to identify me as a scholarship recipient in any publication promoting the scholarship program. This consent is limited to the use of my name and picture, if so provided.

Signature(s):

Applicant Name (print) Signature

Parent or Guardian (if recipient under 18) (print) Signature

Date

GUIDELINES FOR GRANTSEEKERS

Brunswick Corporation is a multi-national company serving outdoor and indoor recreation markets with consumer products that include bowling, billiards, boats, engines, and cardiovascular/training equipment. The Brunswick Foundation ("Foundation") is a private foundation funded by and serving as the Philanthropic Arm of Brunswick Corporation.

FOCUS

The focus of The Brunswick Foundation is to support causes and/or projects that are salutary to the business interests of Brunswick Corporation, support the volunteer activities of their employees, and assist their employees in their efforts to provide a higher education for the children of Brunswick Corporation and its subsidiaries.

For Direct Donations: Given the size of the Foundation, the Foundation will consider applications by invitation only by one or more of the Foundation's trustees. The Foundation prefers to follow their employees who volunteer and support causes related to boating, indoor recreation, fitness and other organizations associated with Brunswick's products. These donations are determined by the Board of Directors of The Brunswick Foundation, Inc.

Contributions are made only to 501 (c)(3) organizations (verification must be attached), never to individuals. Contributions are not made to religious organizations for religious purposes; for any form of political activity; to non-qualified military veteran organizations, fraternal orders or labor groups; for loans of any kind; or, for trips, tours, dinners, tickets or advertising. The Foundation does not have and is not able to donate equipment or products.

PROCEDURE

- WHO:** The Brunswick Foundation manages all donations from the Lake Forest Headquarters.
- WHAT:** A completed application form and the attachments listed on the back of the form. This form may be duplicated and/or retyped. Common applications are also accepted. **Verification from the IRS must be attached to the application to verify the organization is a 501 (c)(3).**
- WHEN:** Meetings are tentatively scheduled on a quarterly basis. If your proposal falls within the scope of the Foundation and its current interests, it will appear on the agenda for the next meeting. If your proposal does not fall within these areas of interest, we will notify you in writing.
- Where:** Completed applications can be submitted to:

**The Brunswick Foundation, Inc.
1 N. Field Court
Lake Forest, Illinois 60045**



BRUNSWICK

The Brunswick Foundation

GRANT APPLICATION

SEND COMPLETED APPLICATION TO:

Brunswick Foundation, Inc.
1 N. Field Court
Lake Forest, IL 60045

PLEASE TYPE OR PRINT

Answer each question within the space provided. Also note the required attachments listed on this form. Additional attachments are not encouraged unless they are absolutely essential to our understanding of your project. We will contact you should we need further information on which to base a decision.

Organization

Organization Name _____ Phone Number _____

Address

Street _____ City _____ State _____ Zip Code _____

Contact Person

Contact Name _____ Title _____

Title and Brief Description of Funding Request (no more than 25 words)

Description _____

Geographic Area to be Served

Client Group to be Served

Size of Group to be Served

Anticipated Project/ Program Period

Type of Request

Project Program General Operating Support

Total and source(s) of Firm Pledges/Commitments to Date

\$ _____ Source _____

\$ _____ Source _____

\$ _____ Source _____

\$ _____ Source _____

Amount Requested from the Brunswick Foundation

\$ _____

Other Funding Sources and Amounts Applied to for this Purpose

\$ _____ Source _____

\$ _____ Source _____

\$ _____ Source _____

\$ _____ Source _____

PURPOSE - What will this project or program accomplish?

NEED - What are the problems that this project will try to solve?

APPROACH - How do you plan to implement this project?

COORDINATION - Who else in your community is working on this problem? How will you coordinate with them?

EVALUATION - How will you determine that the project is working and that it is accomplishing its purpose? (Provide quantitative measurements.)

COMPETENCE - What evidence can you give of the ability of your organization to implement this successfully?

SUPPORT - What kind of local support is there?

RELEVANCE - Why should the Brunswick Foundation support this project?

GRANT USE - Specifically, how would a grant from the Brunswick Foundation be used?

FUTURE SUPPORT - How will this be financed in the future?

ADDITIONAL INFORMATION - What else would you like us to know about your project?

Please attach the following

- General financial information of your organization. Include your total current budget and the principal sources and amounts of ongoing annual support.
- A listing of your Board of Directors.
- A copy of verification from the IRS that your organization is filed as a 501 (c)(3) exemption.

Signed

Date

Title

DOLLARS FOR DOERS PROGRAM



INDIVIDUAL PARTICIPATION AND PERSONAL COMMITMENT ARE VITAL TO THE SUCCESS OF ANY PHILANTHROPIC EFFORT

The Dollars for Doers Program is offered to recognize the volunteer efforts of Brunswick Corporation Employees for nonprofit organizations.

WHO IS ELIGIBLE?

Active, Full-Time Employees of Brunswick Corporation.

WHICH ORGANIZATIONS ARE ELIGIBLE?

Eligible organizations must be federally tax exempt, nonprofit that have been granted exemption under section 501(c)(3) (Attach copy of verification from the IRS.) and ruled to be publicly supported under section 509(a) of the Internal Revenue Code. Contributions are not made to religious organizations for religious purposes; for any form of political activity; to non-qualified military veteran organizations, fraternal orders or labor groups; for loans of any kind; or, for trips, tours, dinners, tickets or advertising. The Foundation does not have and is not able to donate equipment or products.

WHAT TYPES OF VOLUNTEER ACTIVITIES ARE ELIGIBLE?

Examples of eligible volunteer activities include long-term efforts such as serving on a nonprofit Board of Directors or committee, scout leaders, etc. Participation in single short-term events such as a bowl-a-thon or food drive also qualifies.

Group Volunteer Service must;

- be performed without pay or compensation of any kind;
- demonstrate that a meaningful, positive contribution has been made to the nonprofit organization.

HOW MUCH IS AWARDED?

Individual volunteer grants range from \$75 to \$125. Group volunteer grants range up to \$1,000, depending on the number of employees involved, the amount of money raised and the time spent. A check will not be issued prior to the event. Individual and group grants will be reviewed and approved by the Brunswick Foundation. Organizations are eligible for one award per employee per calendar year for long-term efforts.

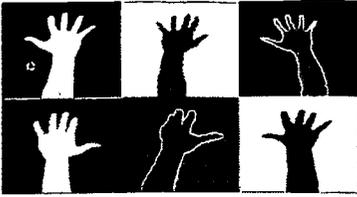
HOW DO I APPLY?

Employees obtain forms from their local Human Resources Office or on BC One under the Foundation Site. Single employee must complete "For Individual Volunteer Service" section and a group of employees must complete "For Group Volunteer Service" section on Part A of the request form, plus attach a copy of the 501(c)(3) verification (from the IRS). The form is then returned to their local Human Resources Office for employee verification (Part B) and then forwarded to The Brunswick Foundation, 1 N. Field Ct., Lake Forest, IL 60045. The application should be completed after the service(s) have been performed.

WHAT HAPPENS NEXT?

Checks are usually issued in February and September. Checks will be mailed directly to the organization. It is important that the address given is the correct mailing address. Employee and local HR Department will receive a letter confirming of the donation.

The administration and financing of this program is exclusively the responsibility of The Brunswick Foundation, which has full authority to make rules and regulations governing the program and to make final decisions in all matters arising in connection therewith. The Foundation may modify or discontinue the program at anytime.
DFD Request Form Revised 4/2014



REQUEST FOR A DOLLARS FOR DOERS GRANT

PART A - To be completed by the Brunswick Employee

Brunswick Employee's Name _____ Title _____ Email Address _____

Division/Group _____ Location (city, state) _____ Work Phone Number _____

*** Print Clearly ***

Official Name of Organization (Attach copy of 501(c)(3)) _____ Chapter/Division/Troop # _____ Attention To _____

Mailing Address _____ City _____ State _____ Zip Code _____

Specific Volunteer Service Performed:

For Individual Volunteer Service: I volunteer for the above organization: *(Please Check One)*

Weekly

Once Monthly

Annually/Seasonal

One Day Event

Date of Event _____

Amount Collected by the Individual \$ _____

For Group Volunteer Service: There were _____ Brunswick Employees involved in this effort. The **date of the event** was _____ Total of _____ hours per person were donated - raising \$ _____ for this cause

List names of other Brunswick Employees involved in this effort (attach additional sheet if necessary)

I certify that the above information is correct and fully complies with the provisions of the program as set forth on the reverse side of this form. I receive no compensation of any kind in exchange for my volunteer work.

Signature (Brunswick Employee) _____

Date _____

PART B - To be Completed by Brunswick Employee's Human Resources Office

I approve the activity described above for submission and request that a grant be considered for this effort

Signature _____

Title _____

Date _____

Application for Extension of Time To File an Exempt Organization Return

▶ **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	Name of exempt organization or other filer, see instructions. THE BRUNSWICK FOUNDATION, INC	Employer identification number (EIN) or 36-6033576
	Number, street, and room or suite no. If a P O box, see instructions 1 N. FIELD CT	Social security number (SSN)
File by the due date for filing your return See instructions	City, town or post office, state, and ZIP code. For a foreign address, see instructions	
	LAKE FOREST, IL 60046-4811	

Enter the extension code for the return that this application is for (file a separate application for each return) 0 4

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 ▶ **THE BRUNSWICK FOUNDATION, INC**

Telephone No. ▶ **847-735-4700** Fax No. ▶ **847-735-4287**

- 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 AUGUST 15, 20 15, to file the exempt organization return for the organization named above. The extension is for the organization's return for:
▶ calendar year 20 14 or

▶ tax year beginning _____, 20 _____, and ending _____, 20 _____.

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	\$	1500
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	\$	2086
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	\$	

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

- If you are filing for an **Additional (Not Automatic) 3-Month Extension**, complete only Part II and check this box **Note.** Only complete Part II if you have already been granted an automatic 3-month extension on a previously filed Form 8868.
- If you are filing for an **Automatic 3-Month Extension**, complete only Part I (on page 1).

Part II Additional (Not Automatic) 3-Month Extension of Time. Only file the original (no copies needed). Enter filer's identifying number, see instructions

Type or print	Name of exempt organization or other filer, see instructions.	Employer identification number (EIN) or
	Number, street, and room or suite no. If a P O. box, see instructions	Social security number (SSN)
	City, town or post office, state, and ZIP code. For a foreign address, see instructions	

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

Application Is For	Return Code	Application Is For	Return Code
Form 990 or Form 990-EZ	01		
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

INTERNAL REVENUE SERVICE
W & I - FIELD ASSISTANT
DOWNERS GR. VE. II. 00515
MAR 13 2015
RECEIVED
27500

STOP! Do not complete Part II if you were not already granted an automatic 3-month extension on a previously filed Form 8868.

- The books are in the care of Telephone No. 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.

- I request an additional 3-month extension of time until _____, 20_____.
- For calendar year _____, or other tax year beginning _____, 20_____, and ending _____, 20_____.
- If the tax year entered in line 5 is for less than 12 months, check reason: Initial return Final return
 Change in accounting period
- State in detail why you need the extension _____

8a 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.	8a	\$
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 and any amount paid previously with Form 8868.	8b	\$
c Balance due. Subtract line 8b from line 8a. Include your payment with this form, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions.	8c	\$

Signature and Verification must be completed for Part II only.

Under penalties of perjury, I declare that I have examined this form, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete, and that I am authorized to prepare this form.

Signature  Title President Date 2/26/15