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Form **990-PF** Department of the Treasury Internal Revenue Service

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

Do not enter social security numbers on this form as it may be made public.
Information about Form 990-PF and its separate instructions is at www.lrs.gov/form990pf.

EMITLE EWALLD FAMILY FOUNDATION, INC. 39-1687505	For	calendar year 2014 or tax year beginning		, and ending		
PO BOX 147 Check the province, country, and ZIP or foreign postal code CCONOMONOC, WI 53066-0147 Initial return of a former public charrily Amended return Amended r	Nai	ne of foundation			A Employer identificatio	n number
PO BOX 147 City or twin, state or province, country, and ZIP or foreign postal code OCONOMOWOC, WI 53066-0147 G. Check all that apply: Initial return					39-168750	5
Contributions, gifts, grants, etc., received 2 Contributions, gifts, grants, etc., received 3 Society of the resting periods of the received periods of the resting periods of the re			address)	Room/suite		
CCONOMOWOC, WI 53066-0147 6 Check all that apply: Initial return Amended return	_		-4-1 - 4-			
6 Check all that apply:			ostai code		C If exemption application is	pending, check here
The composition of the state			Initial return of a fo	rmer public charity	D 1 Foreign organization	s shock here
Check type of organization: Section 9487(g)(1) nonexempts charitable trust: Other travable private foundation	u			ittier public charity	D I Foleigh organization	S, CHECK HEIE
He Check type of organization: XI Section 501(c)(3) exempt private foundation I Fair market value of all assess at end of year I Accounting method: XI Cash Accrual (from Part II, col. (c), line 16) S 3, 292, 894. (Part I, column (c) must be on cash bases) Part II. Analysis of Revenue and Expenses (cash bases) Part II. Analysis of Revenue and Expenses (cash bases) Part III. Analysis of Revenue and Expenses (cash bases) Part II. Analysis of Revenue and Expenses (cash bases) Part II. Analysis of Revenue and Expenses (cash bases) Part II. Analysis of Revenue and Expenses (cash bases) Part II. Analysis of Revenue and Expenses (cash bases) Part II. Analysis of Revenue and Expenses (cash bases) Part II. Analysis of Revenue and Expenses (cash bases) Part II. Analysis of Revenue and Expenses (cash bases) Part II. Analysis of Revenue and Expenses (cash bases) Part II. Analysis of Revenue and Expenses (cash bases) Part II. Analysis of Revenue and Expenses (cash bases on Invited) (c) Adjusted net income (c) (c) Analysis of Revenue and Expenses (c) Analysis of Reven			=		2 Foreign organizations m	eeting the 85% test,
Section 4947(a)(1) nonexempt charatable trust	H C				1	
The column Part		_		tion		
S 3, 292, 894, Part	I Fa	r market value of all assets at end of year J Accounting	ng method: X Cash	Accrual	F If the foundation is in a	60-month termination
Part I Analysis of Revenue and Expenses (a) and on may not necessarily equal the amounts in column (b) (a) and (d) may not necessarily equal the amounts in column (b) (a) and (d) may not necessarily equal the amounts in column (b) (a) and (d) may not necessarily equal the amounts in column (b) (a) and (d) may not necessarily equal the amounts in column (b) (a) (a) (a) (a) (a) (a) (a) (a) (a) (a					under section 507(b)(1)(B), check here
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Check	Pa	(The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a)				for charitable purposes
Interest on savage and temporary 30		1 Contributions, gifts, grants, etc., received	427,000.		N/A	
4 Dividends and interest from securities 5 a Gross rents 5 b Net retreit income or (loses) 6 Not gain or (lose) from saile of assets not on line 10 6 these salies price for all 124. 7 Capital gain net income (from Part IV, line 2) 8 Not short-iterm capital gain 9 Income modificants 10 Gross salies less returns 10 a saile less returns 10 a saile less returns 11 Other income 12 Total. Add lines 1 through 11 495,233. 68,233. 13 Compensation of officers, directors, trustees, atc 14 Other employee salaries and wages 15 Pension plans, employee benefits 16 a Legal fees 16 Accounting fees 17 Total saile sai						
Sa Gross rents Sa Not part of lose) Fore sale of assets not on line 10 124						
1			68,079.	68,079.		STATEMENT 2
Sample S						
Day			124			
10	Jue	Gross sales price for all	121.			
10	e.			124.		
10a Gross sales less returns 10a Gross sales less returns 10 Less Cost of goods sold 10 Citer income 12 Total. Add lines 1 through 11 495,233. 68,233. 13 Compensation of officers, directors, trustees, etc 0. 0. 0. 0. 0. 14 Citer employee salaries and wages 15 Pension plans, employee benefits 16a Legal fees 16a	æ	•				
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14 Other employee salaries and wages 15 Pension plans, employee benefits 16a Legal fees b Accounting fees c Other professionarities STMT 3 17 Interest STMD 4 19 Denegation Applytic pletics 2015 20 Occapilaticy 21 Travel, conferences and meetings STMT 5 22 Prisung and administrative expenses. Add lines 13 through 23 25 Contributions, gifts, grants paid 26 Total expenses and disbursements. Add lines 24 and 25 28 Pension plans, employee benefits 29 Bension plans, employee benefits 3 8,991. 8,991. 2 2,930. 804. 2 2,930. 804. 3 2,930. 804. 4 2,930. 804. 5 2,930. 804. 6 2,930. 804. 7 2,930. 804. 8 3,991. 8,991. 9 3,991. 18 1,991. 18 1,991. 18 1,991. 18 1,991. 18 1,991. 18 1,991. 18 2,930. 18 3,991. 18 3,9	_					1
15 Pension plans, employee benefits 16a Legal fees b Accounting fees c Other professional cess c Other professional cess c Other professional cess that Taxes STMP 4 2,930. 804. 0. 19 Denegoption Aphiticipation 2015 Contributions of the professional cess and meetings Contributions, gifts, grants paid 20 Occapation and administrative expenses. Add lines 13 through 23 25 Contributions, gifts, grants paid 26 Total expenses and disbursements. Add lines 24 and 25 342,294. 9,795. 180,550.				<u> </u>		
16a Legal fees b Accounting fees c Other professional legs c Other legs			_			
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c Other professional descriptions (Contributions, gifts, grants paid 25 Contributions, gifts, grants paid 26 Contributions, gifts, grants paid 27 Contributions, gifts, grants paid 28 Contributions, gifts, grants paid 29 Contributions, gifts, grants paid 20 Contributions	en					
23 Other expenses STMT 5 149,823. 0. 0. 0. 0. 0. 0. 0. 0. 0. 0. 0. 0. 0.	Ex	c Other professional des STMT 3	8,991.	8,991.		0.
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23 Other expenses STMT 5 149,823. 0. 0. 0. 0. 0. 0. 0. 0. 0. 0. 0. 0. 0.	stra	110034	2,930.	804.		0.
23 Other expenses STMT 5 149,823. 0. 0. 0. 0. 0. 0. 0. 0. 0. 0. 0. 0. 0.	inis					
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23 Other expenses STMT 5 149,823. 0. 0. 0. 0. 0. 0. 0. 0. 0. 0. 0. 0. 0.	pq /	The state of the s	·		•	
24 Total operating and administrative expenses. Add lines 13 through 23	ga		149,823.	0.		0.
25 Contributions, girts, grants paid 180, 550. 180, 550. 26 Total expenses and disbursements. Add lines 24 and 25 342, 294. 9, 795. 180, 550.	atin	· · · · · · · · · · · · · · · · · · ·				
25 Contributions, girts, grants paid 180, 550. 180, 550. 26 Total expenses and disbursements. Add lines 24 and 25 342, 294. 9, 795. 180, 550.	per			9,795.		
Add lines 24 and 25 342,294. 9,795. 180,550.	0		180,550.			180,550.
		·	246 22:			100
	\dashv		342,294.	9,795.		180,550.
		27 Subtract line 26 from line 12:	152 020			
a Excess of revenue over expenses and disbursements b Net investment income (if negative, enter -0-) 58,438.		 	154,939.	50 120		
b Net investment income (if negative, enter -0-) C Adjusted net income (if negative, enter -0-) N/A		-		30,430.	N/A	
	42350		nstructions.		41/41	Form 990-PF (2014)

Form **990-PF** (2014)

Part IV Capital Gains	and Lo	osses for Tax on Ir	nvestmen	t 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)	b) How acquired P - Purchase D - Donation			acquired day, yr.)	(d) Dat (mo., d	
1a BMO CAPITAL GA	AIN D	IVIDENDS					P	01/0	1/13	12/3	1/14
<u>b</u>											
<u>c</u>					ļ						
d e					├						
(e) Gross sales price	(A) December of level (A) October 18 to 19								Gain or (loss s (f) minus		
a 124	,			•	\neg			, , ,	···		124.
b		·····									
<u>c</u>											
<u>d</u>											
Complete only for secrete above	100 0010 10	solumn (h) and award by	the foundation	40/04/00	\dashv						
Complete only for assets show							col) Gains (((k) but	Col. (h) gain not less tha	minus n -0-) or	
(i) F.M.V. as of 12/31/69		(j) Adjusted basis as of 12/31/69		cess of col. (ı) col. (ı), ıf any			001		(from col. (
<u>a</u>	 			(1),	\dashv						124.
<u>b</u>	 				┪						124.
C		·	1								
d											
e							_				
		∫ If gain, also enter	r in Part I, line	7	٦						
2 Capital gain net income or (net o	apital loss)	- ın Part I, lıne	7	J,	2					124.
3 Net short-term capital gain or (lo			nd (6):		٦		:				
If gain, also enter in Part I, line 8		c).							3T / 3		
If (loss), enter -0- in Part I, line 8		Section 4940(e) for	Reduced	Tax on Net	Inv	estn	ent Inc	ome	N/A	<u> </u>	
(For optional use by domestic priva											
			1510(a) tax on	not invostration in	COINC	-)					
If section 4940(d)(2) applies, leave	this part bl	ank.									
Was the foundation liable for the se	ction 4942	tax on the distributable am	ount of any ye	ar in the base per	od?					Yes	X No
If "Yes," the foundation does not qua											
1 Enter the appropriate amount in	each colu	mn for each year; see the ir	nstructions bel	fore making any e	ntries			_			
(a) Base period years		(b)	tributions	Not value of no	(c)				Distrib	(d) oution ratio	
Calendar year (or tax year beginn	ing in)	Adjusted qualifying dist		Net value of no					(col. (b) div	ided by col.	
2013	-		6,814. 9,634.				4,323 2,017				47957 44639
2012			7,001.	_			$\frac{2,01}{9,804}$				52715
2010			$\frac{7,001}{1,200}$.				9,304				$\frac{32713}{46159}$
2009		6	9,150.		-	49	$\frac{3,130}{0,286}$	+			$\frac{46400}{46400}$
			3 / 2 3 3 4			,	0,200	+			10100
2 Total of line 1, column (d)								2		. 2	37870
3 Average distribution ratio for the	5-year bas	se period - divide the total c	on line 2 by 5,	or by the number	of yea	ars					
the foundation has been in exist			•	-				3		.04	47574
4 Enter the net value of noncharita	ble-use as:	sets for 2014 from Part X, I	line 5					4		3,044	,923.
5 Multiply line 4 by line 3								5		144	<u>,859.</u>
6 Enter 1% of net investment inco	ne (1% of	Part I, line 27b)						6			584.
7 Add to a Fand O								_		1 4 5	442
7 Add lines 5 and 6								7		145	<u>,443.</u>
8 Enter qualifying distributions from	m Part XII,	line 4						8		180	,550.
If line 8 is equal to or greater tha	n line 7, ch	eck the box in Part VI, line	1b, and comp	lete that part using	g a 19	6 tax r	ate.				
See the Part VI instructions.											

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Part VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or	4948 - see	instru	ıctio	ns)
1a Exempt operating foundations described in section 4940(d)(2), check here \(\bigs \) and enter	"N/A" on line 1.				
Date of ruling or determination letter: (attach copy of letter if necess	ary-see instructions)	1 1			
b Domestic foundations that meet the section 4940(e) requirements in Part V, check here	X and enter 1%	1 1		5	84.
of Part I, line 27b					
c All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of line 27b.	Part I, line 12, col. (b).	1 1			
2 Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others		2			0.
3 Add lines 1 and 2	,	3		5	84.
4 Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Other	s enter -0-)	4			0.
5 Tax based on investment income Subtract line 4 from line 3. If zero or less, enter -0-	,	5		5	84.
6 Credits/Payments:			_		
a 2014 estimated tax payments and 2013 overpayment credited to 2014	6a 1,600	.			
	6b	4 1			
-	6c	-			
	Bd .	1			
7 Total credits and payments. Add lines 6a through 6d		1,		1 6	00.
8 Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached	4	8		<u> </u>	•••
9 Tax due If the total of lines 5 and 8 is more than line 7, enter amount owed		9			
10 Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid		10		1 0	16.
11 Enter the amount of line 10 to be: Credited to 2015 estimated tax	1,016. Refunded	10		<u> </u>	0.
Part VII-A Statements Regarding Activities	T, OTO - Relunded	1 ''			••
1a During the tax year, did the foundation attempt to influence any national, state, or local legislatio	n or did it participate or interven	- In	1	Vac	No
any political campaign?	in or did it participate or litterveri	5 III	1a	103	X
b Did it spend more than \$100 during the year (either directly or indirectly) for political purposes ('can instructions for the definition	, 10	1b		X
If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and co			10		<u> </u>
distributed by the foundation in connection with the activities	opies of any materials publisf	ea or			
c Did the foundation file Form 1120-POL for this year?			.		x
•			10		<u> </u>
d Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the yea			1		
(1) On the foundation. ► \$ 0. (2) On foundation managers. ►		_			i
e Enter the reimbursement (if any) paid by the foundation during the year for political expenditure managers. ► \$ 0 •	tax imposed on roundation				
managers. \$ 0.2 Has the foundation engaged in any activities that have not previously been reported to the IRS?					_V
			2		X
If "Yes," attach a detailed description of the activities					
3 Has the foundation made any changes, not previously reported to the IRS, in its governing instru	ument, articles of incorporation,	Dr			- T
bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes			3		X
4a Did the foundation have unrelated business gross income of \$1,000 or more during the year?		N/A	4a		<u> </u>
b If "Yes," has it filed a tax return on Form 990-T for this year? 5. Was there a liquidation, termination, discolution, or substantial contraction discolution.		N/A	4b		X
5 Was there a liquidation, termination, dissolution, or substantial contraction during the year?			5		
If "Yes," attach the statement required by General Instruction T					
6 Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either:					
By language in the governing instrument, or Director logislation that effectively appeal to a provide the second state of the second stat		- •			
By state legislation that effectively amends the governing instrument so that no mandatory directions in the coverning instrument.	ections that conflict with the stat	e iaw		v	1
remain in the governing instrument?			6	X	<u> </u>
7 Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," comple	te Part II, col (c), and Part X	/	7	X	
On Contraction of the contract					
8a Enter the states to which the foundation reports or with which it is registered (see instructions)	P		1 1		
WI	. 01/ /				
b If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorn	iey General (or designate)		_	7.7	•
of each state as required by General Instruction G? If "No," attach explanation			8b	X	<u> </u>
9 Is the foundation claiming status as a private operating foundation within the meaning of section		endar	1		,,
year 2014 or the taxable year beginning in 2014 (see instructions for Part XIV)? If "Yes," comp			9		X
10 Did any persons become substantial contributors during the tax year? if "Yes," attach a schedule list	ting their names and addresses		10		X
		Fo	rm 990	-PF ((2014)

		<u>-168750</u>	5	Page 5
_	art 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 privile	ges?	i	
	If "Yes," attach statement (see instructions)	12		Х
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	X	
	Website address ► N/A			
14	The books are in care of ▶ E • FRIED Telephone no. ▶ 4	14-427-	2000	
	Located at ▶ 36833 E. WISCONSIN AVE., OCONOMOWOC, WI	+4 ► 53060	6	
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - Check here			\Box
	and enter the amount of tax-exempt interest received or accrued during the year	; J	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,		Yes	No
	securities, or other financial account in a foreign country?	16		Х
	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	he 🗀	•	
	foreign country			
Pá	art 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
1:	a 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?	X No		
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from)	_		
		X No		
		X No		
	·· · · · · · · · · · · · · · · · · · ·	X No		
	(5) Transfer any income or assets to a disqualified person (or make any of either available			i
	for the benefit or use of a disqualified person)?	X 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.)	▼ No		
1	b If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations			
•		N/A 1b		
	Organizations relying on a current notice regarding disaster assistance check here			_
	© 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?	10		х
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation	"	1	 -
_	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			
		X No	1 1	
	If "Yes," list the years ▶ , , , ,		l i	
	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	ŀ		
		N/A 2b		
	of the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here.	20	+ -	
3:	a Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time			
0.	during the year?	Y 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	- NO		
٠	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,	٠		
		N/A 3b		
A	•	—	+	X
	a Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a	+	
C	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that	ŀ		v
	had not been removed from jeopardy before the first day of the tax year beginning in 2014?	4b		X (2014)
		Form 99	ソリーアア	(ZU 14)

Form 990-PF (2014) EMIL EWALD FAMILY FOUNI			<u> 39-16875</u>	05 Page 6				
Part VII-B Statements Regarding Activities for Which	h Form 4720 May Be	Required (contin	nued)	_				
5a During the year did the foundation pay or incur any amount to:		-						
(1) Carry on propaganda, or otherwise attempt to influence legislation (sec	tion 4945(e))?	Y	es X No					
(2) Influence the outcome of any specific public election (see section 4955); or to carry on, directly or indir	ectly,						
any voter registration drive?		es X No	1 1					
(3) Provide a grant to an individual for travel, study, or other similar purpose	•							
(4) Provide a grant to an organization other than a charitable, etc., organization		<u> </u>	es X No					
4945(d)(4)(A)? (see instructions)			es X No					
(5) Provide for any purpose other than religious, charitable, scientific, litera	ary or educational nurnoses or		10					
the prevention of cruelty to children or animals?	, 0. 00000000000, 0.		es X No					
b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify	under the exceptions described		63 [22] 110					
section 53.4945 or in a current notice regarding disaster assistance (see ins		iii negulaliolis	N/A	5b				
Organizations relying on a current notice regarding disaster assistance chec			N/A ► ⊢	30				
c If the answer is "Yes" to question 5a(4), does the foundation claim exemptio			. — . l					
expenditure responsibility for the grant?		1/A Y	es L No					
If "Yes," attach the statement required by Regulations section 53 4								
6a Did the foundation, during the year, receive any funds, directly or indirectly,	to pay premiums on							
a personal benefit contract?		Y	es X No					
b Did the foundation, during the year, pay premiums, directly or indirectly, on	a personal benefit contract?			6b X				
If "Yes" to 6b, file Form 8870								
7a At any time during the tax year, was the foundation a party to a prohibited ta		Y	es 🗶 No 📙	L				
b If "Yes," did the foundation receive any proceeds or have any net income attr				7b				
Part VIII Information About Officers, Directors, Tru	stees, Foundation Ma	anagers, Highl	У					
Paid Employees, and Contractors								
1 List all officers, directors, trustees, foundation managers and the								
(a) Name and address	(b) Title, and average hours per week devoted	(c) Compensation (If not paid,	(d) Contributions to employee benefit plans and deferred	(e) Expense account, other				
	to position	enter -0-)	and deferred compensation	allowances				
EMIL EWALD	PRES., TREAS.	, DIRECTO						
PO BOX 147								
OCONOMOWOC, WI 53066-0147	0.10	0.	0.	0.				
CRAIG A. EWALD	VP, SEC., DIR	ECTOR						
PO BOX 147								
OCONOMOWOC, WI 53066-0147	0.10	0.	l 0.	0.				
BRIAN J. EWALD	DIRECTOR							
PO BOX 147								
OCONOMOWOC, WI 53066-0147	┦ 0.10	l o.	0.	0.				
DANIEL T. EWALD	DIRECTOR	· ·	· ·	•••				
PO BOX 147	- BIRBETOR							
OCONOMOWOC, WI 53066-0147	0.10	_	0.	^				
2 Compensation of five highest-paid employees (other than those i		onter "NONE "	0.	0.				
2 - Germanden of the manest para employees (other than those i		enter NONE.	(d) Contributions to	(e) Expense				
(a) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week	(c) Compensation	(d) Contributions to employee benefit plans and deferred	aċcount, other				
NONE	devoted to position		compensation	allowances				
NONE	_		ŀ					
								
		!						
		ļ						
			<u> </u>					
Total number of other employees paid over \$50,000			▶	-0				
			Form	990-PF (2014)				

Form **990-PF** (2014)

	m 990-PF (2014) EMIL EWALD FAMILY FOUNDATION, INC.	<u> 39-16875</u>) 5 Page 8
LP	Minimum Investment Return (All domestic foundations must complete this part. Foreign four	ndations, see instruct	tions)
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes:		
a		1a 2,8	844,570.
b		1b .	154,437.
C	Fair market value of all other assets	1c	92,285.
d	Total (add lines 1a, b, and c)	1d 3,0	091,292.
е	Reduction claimed for blockage or other factors reported on lines 1a and		<u>-</u>
	1c (attach detailed explanation) 1e 0 •		
2	Acquisition indebtedness applicable to line 1 assets	2	0.
3	Subtract line 2 from line 1d	3 3,0	91,292.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions)	4	46,369.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5 3,0	044,923.
6	Minimum investment return. Enter 5% of line 5	6	152,246.
P	art XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations and	id certain	
_	foreign organizations check here and do not complete this part.)		
1	Minimum investment return from Part X, line 6	1	152,246.
	Tax on investment income for 2014 from Part VI, line 5		
	Income tax for 2014. (This does not include the tax from Part VI.)		504
C	Add lines 2a and 2b	2c	584.
3	Distributable amount before adjustments. Subtract line 2c from line 1		151,662.
4	Recoveries of amounts treated as qualifying distributions	4	500.
5	Add lines 3 and 4		L52,162.
6	Deduction from distributable amount (see instructions)	6	0.
7	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1	7	L52,162.
L	art XII Qualifying Distributions (see instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:		
а	Expenses, contributions, gifts, etc total from Part I, column (d), line 26	1a 1	<u>180,550.</u>
þ	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 1	180,550.
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	5	584.
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	L79,966.
	Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation of	jualifies for the section	

Form **990-PF** (2014)

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,	30-540	, 54 5 7 5 15 25 15	2010	2311
line 7				152,162.
2 Undistributed income, if any, as of the end of 2014	_			
a Enter amount for 2013 only			0.	
b Total for prior years:				
,		0.		
3 Excess distributions carryover, if any, to 2014:				
a From 2009				
b From 2010				
c From 2011 6,232.				
d From 2012				
e From 2013				
f Total of lines 3a through e	6,232.			
4 Qualifying distributions for 2014 from				
Part XII, line 4: ►\$ 180,550.				
a Applied to 2013, but not more than line 2a			0.	
b Applied to undistributed income of prior				•
years (Election required - see instructions)		0.		
c Treated as distributions out of corpus				
(Election required - see instructions)	0.			
d Applied to 2014 distributable amount				152,162.
e Remaining amount distributed out of corpus	28,388.			
5 Excess distributions carryover applied to 2014 (If an amount appears in column (d), the same amount must be shown in column (a))	0.			0.
6 Enter the net total of each column as indicated below:				
& Corpus Add lines 3f, 4c, and 4e Subtract line 5	34,620.			
b Prior years' undistributed income. Subtract	<u> </u>			
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 instr.		İ	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			- <u>-</u>	
not applied on line 5 or line 7	0.			
9 Excess distributions carryover to 2015.	<u> </u>			
Subtract lines 7 and 8 from line 6a	34,620.	l		
0 Analysis of line 9:				
a Excess from 2010		ļ		
b Excess from 2011 6,232.	į			
c Excess from 2012	į			
d Excess from 2013	1			
e Excess from 2014 28,388.				
2358 I 1-24-14				Form 990-PF (2014)

Part XIV Private Operating Form		FOUNDATION		N/A	87505 Page 10
1 a If the foundation has received a ruling or				N/A	
foundation, and the ruling is effective for					
b Cneck box to indicate whether the found	•	· ·	in section	4942(j)(3) or4	942(j)(5)
2 a Enter the lesser of the adjusted net	Tax year	ing touribation described	Prior 3 years	1 4342())(3) 01 4	T
income from Part I or the minimum	(a) 2014	(b) 2013	(c) 2012	(d) 2011	(e) Total
	(4)2011	(6)2010	(0)2012	(4)2011	(0) 10.01
investment return from Part X for					
each year listed				 	· · · · · · · · · · · · · · · · · · ·
b 85% of line 2a					
c Qualifying distributions from Part XII,				}	
line 4 for each year listed			 		
d Amounts included in line 2c not					
used directly for active conduct of					
exempt activities			_	<u> </u>	ļ
e Qualifying distributions made directly			İ		
for active conduct of exempt activities.				1	
Subtract line 2d from line 2c					
3 Complete 3a, b, or c for the alternative test relied upon:					
a "Assets" alternative test - enter:					
(1) Value of all assets					
(2) Value of assets qualifying under section 4942(j)(3)(B)(i)					
b "Endowment" alternative test - enter					
2/3 of minimum investment return shown in Part X, line 6 for each year listed					
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)					
(2) Support from general public			 	 	-
and 5 or more exempt		Ì		1	
organizations as provided in section 4942(j)(3)(B)(iii)				1	
(3) Largest amount of support from				 	
• • • • • • • • • • • • • • • • • • • •					
an exempt organization			 		
(4) Gross investment income Part XV Supplementary Info	mation (Comple	te this part only	if the foundation	had \$5,000 or m	ore in assets
at any time during the			ii tiile iouiluatioi	i iiau \$5,000 oi iii	Ole III assets
					
 Information Regarding Foundation a List any managers of the foundation who 		than 20/ of the total con	tributions recoved by the	foundation before the ele	as of any toy
year (but only if they have contributed m	ore than \$5.000). (See s	ection 507(d)(2).)	iributions received by the	Touridation before the cid	se of ally lax
EMIL EWALD					
b List any managers of the foundation who	own 10% or more of th	e stock of a corporation	(or an equally large portion	on of the ownership of a p	artnership or
other entity) of which the foundation has			(a. a., aquan)g. p. p.,		
NONE					
2 Information Regarding Contribution	on, Grant, Gift, Loan	Scholarship, etc., P	rograms:		
				not accept unsolicited requ	uests for funds. If
the foundation makes gifts, grants, etc. (
a The name, address, and telephone numb	er or e-mail address of	the person to whom app	lications should be addre	ssed:	
,		F			
SEE STATEMENT 9					
b The form in which applications should be	submitted and informa	tion and materials they s	should include:		
c Any submission deadlines:					
A Any contrictions on limitations on average	auch oo by assers his	al arong showtable fi-14-	lundo of ingitivitions	ather feeters	
d Any restrictions or limitations on awards	, such as by geographic	ai ai tas, ciidi liddie ilelas	, kinus oi msulutions, or (Juiet iaciots:	

Part XV Supplementary Information	(continued)			· •					
3 Grants and Contributions Paid During the Year or Approved for Future Payment									
Recipient	If recipient is an individual,	Foundation	Durnoon of great or						
Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	status of recipient	Purpose of grant or contribution	Amount					
a Paid during the year									
		ļ	İ						
		i							
SEE STATEMENT ATTACHED	NONE	PC	CENTRAL CREATERS						
SINI SINI MININI AIIACHED	NONE	PC	GENERAL OPERATING SUPPORT	180,550.					
				200,000:					
			<u>-</u>	-					
			,						
Total			► 3a	180,550.					
b Approved for future payment									
NONE									
Total			▶ 3b	0.					

Part XVI-A Analysis of Income-Producing Activities

Enter gross amounts unless otherwise indicated.	Unrelated business income			ded by section 512, 513, or 514	(e)	
·	(a) Business	(b)	(C) Exclu-	(d)	Related or exempt	
1 Program service revenue:	code	Amount	sion code	Amount	function income	
a		-				
b						
C				-	-	
d						
e						
f		-				
g Fees and contracts from government agencies						
2 Membership dues and assessments						
3 Interest on savings and temporary cash						
investments			14			
4 Dividends and interest from securities			14	68,079.		
5 Net rental income or (loss) from real estate:						
a Debt-financed property						
b Not debt-financed property						
6 Net rental income or (loss) from personal						
property						
7 Other investment income						
8 Gain or (loss) from sales of assets other						
than inventory	ļ.		18	124.		
9 Net income or (loss) from special events						
10 Gross profit or (loss) from sales of inventory						
11 Other revenue:						
a						
b						
c						
d						
e				1		
· · · · · · · · · · · · · · · · · · ·		0.	-	68.233.	0.	
12 Subtotal. Add columns (b), (d), and (e)		0.		68,233.	0. 68.233.	
12 Subtotal. Add columns (b), (d), and (e) 13 Total. Add line 12, columns (b), (d), and (e)		0.		68,233.	0. 68,233.	
12 Subtotal. Add columns (b), (d), and (e) 13 Total. Add line 12, columns (b), (d), and (e) (See worksheet in line 13 instructions to verify calculations.)	a the Asse			13		
12 Subtotal. Add columns (b), (d), and (e) 13 Total. Add line 12, columns (b), (d), and (e)	o the Acco		cemp	13		
12 Subtotal. Add columns (b), (d), and (e) 13 Total. Add line 12, columns (b), (d), and (e) (See worksheet in line 13 instructions to verify calculations.) Part XVI-B Relationship of Activities to Line No. Explain below how each activity for which income	ne is reported i	omplishment of Ex		t Purposes	68,233.	
12 Subtotal. Add columns (b), (d), and (e) 13 Total. Add line 12, columns (b), (d), and (e) (See worksheet in line 13 instructions to verify calculations.) Part XVI-B Relationship of Activities to	ne is reported i	omplishment of Ex		t Purposes	68,233.	
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Form 990-PF (201				FOUNDATION,		39-1687505	Page 13
Part XVII	Information F	Regarding	Transfers	To and Transactio	ns and F	Relationships With Noncharitable	
	Exempt Orga					•	

1 Did the	organization directly or indi	rectly engage in any of the followin	ng with any other organization	n described in sectio	n 501(c) of		Yes	No
		:)(3) organizations) or in section 52		zations?		i i	i	
		lation to a noncharitable exempt or	ganization of:					
(1) Ca						1a(1)		X
	her assets					1a(2)		X
	ransactions:							
	lles of assets to a noncharita					1b(1)		X
		oncharitable exempt organization				1b(2)		X
	ental of facilities, equipment,					1b(3)		X
• •	eimbursement arrangements	1				1b(4)		X
	ans or loan guarantees	ambarabia ar fundrainina naliadatis				1b(5)		X
		embership or fundraising solicitatio ailing lists, other assets, or paid em				1b(6)		X
		"Yes," complete the following sche		rave chow the fair m	arket value of the goode of		ate	
		foundation. If the foundation receive					τι ο ,	
		other assets, or services received.	oo loos alan lan market value	s in any transaction t	n analing arrangement, ar	1011		
(a)Line no	(b) Amount involved	(c) Name of noncharitable	e exempt organization	(d) Description	of transfers, transactions, and s	haring an	angeme	nts
		N/A		† ` <i>` '</i>				
- t	-							
				†	<u> </u>			
				†				
			<u> </u>	-				
		·			-			
				<u> </u>				
			 	 				
		<u> </u>						
<u> </u>								
		tly affiliated with, or related to, one		ations described	_	٦.,	T	٦.,
		r than section 501(c)(3)) or in sect	ion 527?		L_	Yes	LA] No
D II Yes,	complete the following sche (a) Name of org		(b) Type of organization) Description of relationsh	in .		
	N/A	Janization	(b) Type of organization		, Description of relationsh			
-	N/A			-				
				<u> </u>				
Uni	der penalties of perjury, I declare t	that I have exampled this return, includin	g accompanying schedules and s	tatements, and to the b	est of my knowledge	the IRS o	inavios (510
Sign and	belief is true, correct, and com	malete Declaration of preparer (other than	n taxpayer) is based on all informa	ation of which preparer h	retur	n with the	prepare	er
Here	$\rightarrow \omega$	u Oswala	15/14/15	PRESID		Yes	(365 11131	No
Š	ignature of officer or trustee		Date	Title				
t	Print/Type preparer's na	ame Preparer's si	gnature/	Date	Check if PTIN			
		17~5	Marce SH	:	self- employed			
Paid		RINE, CPATROX E		05/06/15		187		
Prepare	1	ER TILLY VIRCHO	W KRAUSE, LLE	?	Firm's EIN ▶ 39-08	599	10	
Use Oni	·							
	Firm's address ▶ PO							_
	MA.	DISON, WI 53707	-7398		Phone no. (608)2			
					Fo	rm 990	-PF	(2014)

FORM 990-PF INT	EREST ON SA	VINGS A	ND TEM	PORARY	CASH	INVES'	rments	STATE	MENT	1
SOURCE			(A REVE PER B	NUE	(B) NET INVESTMENT INCOME			(C) ADJUSTED NET INCOME		3
BMO HARRIS - CHE	CKING ACCOU	NT		30.	· -		30.			
TOTAL TO PART I,	LINE 3			30.			30.			
FORM 990-PF	DIVIDE	NDS AND	INTER	EST FR	OM SEC	URITII	ES	STATE	MENT	2
SOURCE	GRŌSS AMOUN		CAPITAL GAINS VIDEND	R	(A) EVENUE R BOOK		(B) I INVES NT INCO		(C) DJUSTI I INCO	
BMO INVESTMENT ACCOUNT - DIVIDENDS	68,0	79.		0.	68,07	9.	68,07	9.		
TO PART I, LINE	68,0	79.		0.	68,07	9.	68,07	9.		
FORM 990-PF		OTHER	PROFES	SIONAL	FEES			STATE	MENT	3
DESCRIPTION		EXPE	A) INSES BOOKS	NET I	B) NVEST- INCOME		(C) DJUSTED F INCOM		(D) ARITAI URPOSI	
BMO HARRIS - INVIFEES BAKER TILLY VIRCE	WOH		7,316.		7,316					0.
KRAUSE, LLP - 201 RETURN PREPARATION			1,675.		1,675	•				0.
TO FORM 990-PF, 1	PG 1, LN 16		8,991.		8,991	•	· -			0.

FORM 990-PF	ТАХ	ES		STATEMENT		
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITAI PURPOSI		
FOREIGN TAXES PAID ON INVESTMENT INCOME DEPARTMENT OF TREASURY - 2013 FORM 990PF EXCISE TAX	804.	804.			0.	
BALANCE DUE DEPARTMENT OF TREASURY - 2014 FORM 990PF EXCISE TAX	526.	0.			0.	
ESTIMATED PAYMENT	1,600.	0.			0.	
TO FORM 990-PF, PG 1, LN 18	2,930.	804.			0.	
FORM 990-PF		STATEMENT				
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITAI PURPOSI		
JOHN HANCOCK LIFE INSURANCE COMPANY (LIFE INS. PREMIUM) JOHN HANCOCK LIFE INSURANCE	145,255.	0.		_	0.	
COMPANY (DECREASE IN POLICY CASH VALUE)	4,239.	0.			0.	
BMO HARRIS BANK CHECKING ACCOUNT - SERVICE CHARGES	329.	0.			0.	
TO FORM 990-PF, PG 1, LN 23	149,823.	0.			0.	
FORM 990-PF OTHER INCREASES	S IN NET ASS	ETS OR FUND BA	ALANCES S	STATEMENT	6	
DESCRIPTION				AMOUNT		
RECOVERY OF PRIOR YEAR DISTRI	BUTION			5(00.	
TOTAL TO FORM 990-PF, PART I	II, LINE 3		_	5(00.	

FORM 990-PF CO	ORPORATE STOCK		STATEMENT 7
DESCRIPTION		BOOK VALUE	FAIR MARKET VALUE
CORPORATE STOCK		1,486,083.	2,963,657.
TOTAL TO FORM 990-PF, PART II, LII	NE 10B	1,486,083.	2,963,657.
FORM 990-PF	OTHER ASSETS		STATEMENT 8
DESCRIPTION	BEGINNING OF YR BOOK VALUE	END OF YEAR BOOK VALUE	FAIR MARKET VALUE
INVESTMENT IN LIFE INSURANCE - TOTAL PREMIUMS PAID TO DATE LESS: DIFFERENCE BETWEEN	1,597,805.	1,743,060.	1,743,060.
PREMIUMS PAID TO DATE AND ACCOUNT VALUE	-1,503,401.	-1,652,895.	-1,652,895.
TO FORM 990-PF, PART II, LINE 15	94,404.	90,165.	90,165.

FORM 990-PF

GRANT APPLICATION SUBMISSION INFORMATION PART XV, LINES 2A THROUGH 2D

STATEMENT

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NAME AND ADDRESS OF PERSON TO WHOM APPLICATIONS SHOULD BE SUBMITTED

EMIL EWALD PO BOX 147 OCONOMOWOC, WI 53066

FORM AND CONTENT OF APPLICATIONS

APPLICATION SHOULD BE IN WRITING AND SHOULD FULLY IDENTIFY THE CHARITY, ITS PURPOSE, AND THE INTENDED USE OF THE DONATION.

ANY SUBMISSION DEADLINES

NONE.

RESTRICTIONS AND LIMITATIONS ON AWARDS

DONATIONS WILL BE MADE ONLY TO 501(C)(3) TAX-EXEMPT ORGANIZATIONS.

EMIL EWALD FAMILY FOUNDATION, INC. 2014 GIFTS

RECIPIENT	2014 AMOUNT		DATE	<u>CK#</u>
AMERICAN LEGION DEPARTMENT OF WISCONSIN P.O BOX 388 PORTAGE, WI 53901-0388	\$	1,000.00	12/22/2014	2080
ANDEAN HEALTH & DEVELOPMENT UW DEPT OF FAMILY MEDICINE 1100 DELAPLAINE COURT MADISON, WI 53715	\$	500.00	12/22/2014	2081
VISION FORWARD BADGER ASSOCIATION OF THE BLIND 912 N. HAWLEY ROAD MILWAUKEE, WI 53213-3292	\$	2,000.00	12/22/2014	2082
THE BLOOD CENTER OF SE WISCONSIN,INC. P O. BOX 2178 MILWAUKEE, WI 53201-2178	\$	1,000.00	12/22/2014	2083
BOY SCOUTS OF AMERICA 804 BLUEMOUND ROAD WAUKESHA, WI 53188	\$	3,000.00	12/22/2014	2084
BOYS & GIRLS CLUBS OF GREATER MILW. P O. BOX 12486 MILWAUKEE, WI 53212-9960	\$	1,000 00	12/22/2014	2085
CENTER FOR DEAF BLIND PERSON,INC. ATTN MS. RUTH SILVER,EXEC. DIR. 3195 S SUPERIOR STREET MILWAUKEE, WI 53207	\$	2,000.00	12/22/2014	2086
CIVIL WAR PRESERVATION TRUST 1140 PROFESSIONAL CT HAGERSTOWN, MD 21740-5852	\$	1,000.00	12/22/2014	2087
COMMUNITY CLOTHES CLOSET 1465 B OPPOERTUNITY WAY MENASHA, WI 54952	\$	500.00	12/22/2014	2088

CONSERVANCY OF SOUTHWEST FLORIDA PO BOX 8988 NAPLES, FL 34101-9978	\$ 500.00 500.00	1/31/2014 12/22/2014	2074 2089
DISABLED AMERICAN VETERANS P.O BOX 14301 CINCINNATI, OH 45250-0301	\$ 1,000.00	12/22/2014	2090
EASTERSEAL OF SE WISCONSIN ATTN. ROBERT GLOWACKI 2222 S 114TH STREET WEST ALLIS, WI 53227	\$ 1,000 00	12/22/2014	2125
FATHER FLANAGAN'S GIRLS & BOYS TOWN P O. BOX 6000 BOYSTOWN, NE 68010-9988	\$ 1,000.00	12/22/2014	2091
FIRST BAPTIST CHURCH OF NAPLES 3000 ORANGE BLOSSOM DRIVE NAPLES, FL 34109	\$ 50,000.00	12/26/2014	2126
FOUNDATION OF W A.T D A P O BOX 5345 MADISON, WI 53705-0345	\$ 5,000.00	12/22/2014	2092
GLOBAL AID NETWORK (GAIN)	\$ 10,000.00	12/29/2014	2130
HABITAT FOR HUMANITY-COLLIER COUNTY 11145 TAMIAMI TRAIL EAST NAPLES,FL 34113	\$ 1,000 00	12/22/2014	2093
HARTFORD FOOD PANTRY HARTFORD, WI 53027	\$ 1,000 00	12/22/2014	2094
HUMANE SOCIETY OF COLLIER COUNTY 370 AIRPORT PULLING RD. NORTH NAPLES, FL 34104	\$ 1,000.00	12/22/2014	2095

INTERNATIONAL COOPERATING MINISTRIES 1901 N ARMISTEAD AVE. HAMPTON, VA 23666-4311	25,000.00 25,000.00	8/21/2014 12/29/2014	2077 2129
LAKE COUNTRY LUTHERAN HIGH SCHOOL 401 CAMPUS DRIVE HARTLAND, WI 53029	\$ 2,000.00	12/22/2014	2096
LIFESTRIDERS INC. S11 W29667 US HWY 18 WAUKESHA, WI 53188	\$ 1,000.00	12/22/2014	2097
LAKE AREA FREE CLINIC 856 B ARMOUR ROAD OCONOMOWOC, WI 53066	\$ 1,000.00	12/22/2014	2098
MPTV FRIENDS INC 1036 N EIGHTH STREET MILWAUKEE, WI 53233	\$ 500.00	12/22/2014	2099
MILWAUKEE RESCUE MISSION 830 NORTH 19TH STREET MILWAUKEE, WI 53233-1616	\$ 1,000.00	12/22/2014	2100
MPS-SOUTH DIVISION HS ATTN: GALE ELLEN MICHALSKI 1515 W LAPHAM BLVD MILWAUKEE, WI 53204	\$ 1,000.00	12/22/2014	2101
NASHOTAH HOUSE 2777 MISSION ROAD NASHOTAH, WI 53058-9989	\$ 1,000.00	12/22/2014	2102
OCONOMOWOC AREA HISTORICAL SOCIETY PO BOX 969 OCONOMOWOC, WI 53066	\$ 1,000.00	12/22/2014	2103
OCONOMOWOC AREA SENIOR CENTER INC. 210 S. MAIN STREET OCONOMOWOC, WI 53066	\$ 1,000.00	12/22/2014	2104

PARALYZED VETERANS OF AMERICA 7 MILL BROOK ROAD WILTON, NH 03086-0907	\$ 100.00	12/22/2014	2105
Protected Harbor Christian Care Homes P.O. Box 771441 Naples, FL 34107-1441	\$ 500.00	11/20/2014	2079
ROCKY MOUNTAIN ELK FOUNDATION PO BOX 31794 BILLINGS, MT 59107-1794	\$ 500.00	12/26/2014	2127
SHEPHERDS MINISTRY 1805 15TH AVENUE UNION GROVE, WI 53182	\$ 1,000.00	12/22/2014	2106
SHRINERS HOSPITALS FOR CHILDREN P O BOX 1525 RANSON, WV 25438	\$ 15,000.00	12/29/2014	2131
ST. JOSEPH'S INDIAN SCHOOL P.O BOX 326 CHAMBERLAIN, SD 57326	\$ 100.00	5/27/2014	2076
ST. MATTHEW'S HOUSE 2001 AIRPORT ROAD SOUTH NAPLES, FL 34112	\$ 1,000.00	12/22/2014	2107
THE SALVATION ARMY 11315 W. WATERTOWN PLANK ROAD P.O. BOX 26019 MILWAUKEE, WI 53226-0019	\$ 3,000.00	12/22/2014	2108
SPECIAL OLYMPICS OF WI P.O. BOX 7638 MADISON, WI 53707-7638	\$ 500.00	12/22/2014	2109

ST VINCENT DEPAUL CONFERENCE OF ST. JEROME CHURCH C/O DAVID TOMSYCK 229 N WALNUT STREET OCONOMOWOC, WI 53066	\$ 250.00	12/22/2014	2110
ST.LABRE INDIAN SCHOOL PO BOX 797 ASHLAND, MT 59003	\$ 500.00	12/22/2014	2111
STARS & STRIPES HONOR FLIGHT P.O. Box 636 PORT WASHINGTON, WI 53074	\$ 2,000.00	12/22/2014	2112
SOCIETY OF ST. VINCENT DE PAUL 9601 W SILVER SPRING DR. MILWAUKEE, WI 53225	\$ 1,000.00	12/22/2014	2113
TEEN CHALLENGE WISCONSIN P.O BOX 250771 MILWAUKEE, WI 53225	\$ 500.00	12/22/2014	2114
USO P.O BOX 96860 WASHINGTON, DC 20077-7677	\$ 100.00	12/22/2014	2115
VALLEY OF OUR LADY MONASTERY E11096 YANKE DRIVE PRAIRIE DU SAC, WI 53578-9737	\$ 500.00	12/22/2014	2116
VETERANS OF FOREIGN WARS OF THE US P.O. BOX 8958 TOPEKA, KS 66608-8958	\$ 1,000.00	12/22/2014	2117
WATERTOWN HUMANE SOCIETY 418 WATER TOWER COURT WATERTOWN, WI 53094	\$ 500.00	12/22/2014	2118
WAUKESHA SHERIFF DEPT K-9 UNIT (WDSA -K9 UNIT) 515 W MORELAND BLVD WAUKESHA, WI 53187	\$ 500.00	12/22/2014	2119

WAUKESHA HUMANE SOCIETY P O. BOX 834 WAUKESHA, WI 53187-0834	\$	1,000.00	12/22/2014	2120
WILDLIFE IN NEED CENTER W340 S2383 HWY C OCONOMOWOC, WI 53066	\$	1,000 00	12/22/2014	2121
WISCONSIN HUMANE SOCIETY 4500 W WISCONSIN AVENUE MILWAUKEE, WI 53208-3156	\$	1,000 00	12/22/2014	2122
WISCONSIN HISTORICAL SOCIETY 816 STATE STREET MADISON, WI 53706-1488	\$	1,000 00	12/22/2014	2123
WI SCOTTISH RITE FOUNDATION, INC VALLEY OF MILWAUKEE 790 N VAN BUREN ST. MILWAUKEE, WI 53202-3809	\$	2,000.00	12/22/2014	2124
YMCA at PABST FARMS	\$	2,500.00	1/9/2014	2073
TOTAL	\$ 1	80,550.00	• =	