See a Social Security Number? Say Something!
Report Privacy Problems to https://public.resource.org/privacy
Or call the IRS Identity Theft Hotline at 1-800-908-4490

Form **990**

Return of Organization Exempt From Income Tax

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

▶ Do not enter social security numbers on this form as it may be made public.

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

OMB No 1545-0047

2014

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

A For the 2014 calendar year, or tax year beginning January , 2014, and ending December 31 , 20 14

B Check if applicable:
☐ Address change
☐ Name change
☐ Initial return
☐ Final return/terminated
☐ Amended return
☐ Application pending

C Name of organization **Brewers Community Foundation, Inc**

Doing business as

Number and street (or P O box if mail is not delivered to street address) Room/suite

Miller Park, One Brewers Way

City or town, state or province, country, and ZIP or foreign postal code

Milwaukee, WI 53214-3651

D Employer identification number **39-1970152**

E Telephone number **414-902-4544**

G Gross receipts $ **5,272,429**

F Name and address of principal officer **Cecelia Gore**
Same as "C" above

H(a) Is this a group return for subordinates? ☐ Yes ☑ No

H(b) Are all subordinates included? ☐ Yes ☐ No
If "No," attach a list (see instructions)

H(c) Group exemption number ▶

I Tax-exempt status ☑ 501(c)(3) ☐ 501(c) ( ) ◀ (insert no) ☐ 4947(a)(1) or ☐ 527

J Website: ▶ **http://milwaukee.brewers.mlb.com/mil/foundation**

K Form of organization ☑ Corporation ☐ Trust ☐ Association ☐ Other ▶

L Year of formation **2000**

M State of legal domicile **WI**

Part I Summary

1	Briefly describe the organization's mission or most significant activities: **Grant making organization, activities that support youth activities and the general well being of children**		
2	Check this box ▶ ☐ if the organization discontinued its operations or disposed of more than 25% of its net assets.		
3	Number of voting members of the governing body (Part VI, line 1a)	3	4
4	Number of independent voting members of the governing body (Part VI, line 1b)	4	1
5	Total number of individuals employed in calendar year 2014 (Part V, line 2a)	5	0
6	Total number of volunteers (estimate if necessary)	6	25
7a	Total unrelated business revenue from Part VIII, column (C), line 12	7a	0
b	Net unrelated business taxable income from Form 990-T, line 34	7b	

		Prior Year	Current Year
8	Contributions and grants (Part VIII, line 1h)	1,147,531	2,786,328
9	Program service revenue (Part VIII, line 2g)		
10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)	130,844	56,549
11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	982,792	1,193,762
12	Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12)	2,261,167	4,036,639
13	Grants and similar amounts paid (Part IX, column (A), lines 1–3)	2,224,145	2,863,677
14	Benefits paid to or for members (Part IX, column (A), line 4)		
15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5–10)		
16a	Professional fundraising fees (Part IX, column (A), line 11e)		
b	Total fundraising expenses (Part IX, column (D), line 25) ▶		
17	Other expenses (Part IX, column (A), lines 11a–11d, 11f–24e)	193,498	330,209
18	Total expenses. Add lines 13–17 (must equal Part IX, column (A), line 25)	2,417,643	3,193,886
19	Revenue less expenses. Subtract line 18 from line 12	(156,476)	842,753

		Beginning of Current Year	End of Year
20	Total assets (Part X, line 16)	1,505,778	2,630,741
21	Total liabilities (Part X, line 26)	210,691	492,901
22	Net assets or fund balances. Subtract line 21 from line 20	1,295,087	2,137,840

Part II Signature Block

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

Sign Here

Cecelia P. Gore
Signature of officer

8/13/2015
Date

Cecelia Gore, Executive Director
Type or print name and title

Paid Preparer Use Only

Print/Type preparer's name	Preparer's signature	Date	Check ☐ if self-employed	PTIN

Firm's name ▶ | Firm's EIN ▶

Firm's address ▶ | Phone no.

May the IRS discuss this return with the preparer shown above? (see instructions) ☐ Yes ☐ No

921

A

Part III Statement of Program Service Accomplishments

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

1 Briefly describe the organization's mission:

Grant making organizaion, activities that support health, education, recreation, and basic needs, with a particular focus on lower-income and disadvantaged youth and their families.

2 Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ? . . . . . ☐ Yes ☑ No

If "Yes," describe these new services on Schedule O

3 Did the organization cease conducting, or make significant changes in how it conducts, any program services? . . . . . ☐ Yes ☑ No

If "Yes," describe these changes on Schedule O.

4 Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported.

4a (Code:) (Expenses $ 148,195 including grants of $ 148,195) (Revenue $)

Sojourner Family Peace Center goals are to endsure the safety for victims of family violence.

4b (Code:) (Expenses $ 116,689 including grants of $ 111,689) (Revenue $)

Special Olympics Wisconsin is a statewide organization which provides individuals with intellectual disabilities year round sports training and athletic competition.

4c (Code:) (Expenses $ 95,000 including grants of $ 95,000) (Revenue $)

Ronald McDonald House provides housing for families while their children are receiving medical treatment at local hospitals.

4d Other program services (Describe in Schedule O.)
(Expenses $ 2,508,793 including grants of $ 2,508,793) (Revenue $)

4e Total program service expenses ▶ 2,937,754

Part IV Checklist of Required Schedules

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

Part IV Checklist of Required Schedules *(continued)*

			Yes	No
21	Did the organization report more than $5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? *If "Yes," complete Schedule I, Parts I and II*	21	✓	
22	Did the organization report more than $5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? *If "Yes," complete Schedule I, Parts I and III*	22	✓	
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? *If "Yes," complete Schedule J*	23		✓
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than $100,000 as of the last day of the year, that was issued after December 31, 2002? *If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a*	24a		✓
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
c	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	**Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations.** Did the organization engage in an excess benefit transaction with a disqualified person during the year? *If "Yes," complete Schedule L, Part I*	25a		✓
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? *If "Yes," complete Schedule L, Part I*	25b		✓
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? *If "Yes," complete Schedule L, Part II*	26		✓
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? *If "Yes," complete Schedule L, Part III*	27		✓
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions):			
a	A current or former officer, director, trustee, or key employee? *If "Yes," complete Schedule L, Part IV*	28a		✓
b	A family member of a current or former officer, director, trustee, or key employee? *If "Yes," complete Schedule L, Part IV*	28b		✓
c	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? *If "Yes," complete Schedule L, Part IV*	28c		✓
29	Did the organization receive more than $25,000 in non-cash contributions? *If "Yes," complete Schedule M*	29	✓	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? *If "Yes," complete Schedule M*	30		✓
31	Did the organization liquidate, terminate, or dissolve and cease operations? *If "Yes," complete Schedule N, Part I*	31		✓
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? *If "Yes," complete Schedule N, Part II*	32		✓
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301 7701-2 and 301.7701-3? *If "Yes," complete Schedule R, Part I*	33		✓
34	Was the organization related to any tax-exempt or taxable entity? *If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1*	34	✓	
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a	✓	
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? *If "Yes," complete Schedule R, Part V, line 2*	35b	✓	
36	**Section 501(c)(3) organizations.** Did the organization make any transfers to an exempt non-charitable related organization? *If "Yes," complete Schedule R, Part V, line 2*	36		✓
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? *If "Yes," complete Schedule R, Part VI*	37		✓
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? **Note.** All Form 990 filers are required to complete Schedule O	38	✓	

Part V Statements Regarding Other IRS Filings and Tax Compliance

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

				Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable	1a	84		
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable . . .	1b	84		
c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1c		✓	
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return	2a	0		
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? .	2b			
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to *e-file* (see instructions) . .				
3a	Did the organization have unrelated business gross income of $1,000 or more during the year?	3a			✓
b	If "Yes," has it filed a Form 990-T for this year? *If "No" to line 3b, provide an explanation in Schedule O* .	3b			
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a			✓
b	If "Yes," enter the name of the foreign country. ▶ ---------- See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).				
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? . . .	5a			✓
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b			✓
c	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c			
6a	Does the organization have annual gross receipts that are normally greater than $100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?	6a			✓
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6b			
7	**Organizations that may receive deductible contributions under section 170(c).**				
a	Did the organization receive a payment in excess of $75 made partly as a contribution and partly for goods and services provided to the payor?	7a		✓	
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		✓	
c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7c			✓
d	If "Yes," indicate the number of Forms 8282 filed during the year	7d			
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e			✓
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f			✓
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g			
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h			
8	**Sponsoring organizations maintaining donor advised funds.** Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year?	8			
9	**Sponsoring organizations maintaining donor advised funds.**				
a	Did the sponsoring organization make any taxable distributions under section 4966?	9a			
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person? . . .	9b			
10	**Section 501(c)(7) organizations.** Enter:				
a	Initiation fees and capital contributions included on Part VIII, line 12	10a			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities .	10b			
11	**Section 501(c)(12) organizations.** Enter:				
a	Gross income from members or shareholders	11a			
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)	11b			
12a	**Section 4947(a)(1) non-exempt charitable trusts.** Is the organization filing Form 990 in lieu of Form 1041?	12a			
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year .	12b			
13	**Section 501(c)(29) qualified nonprofit health insurance issuers.**				
a	Is the organization licensed to issue qualified health plans in more than one state?	13a			
	Note. See the instructions for additional information the organization must report on Schedule O.				
b	Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans	13b			
c	Enter the amount of reserves on hand	13c			
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a			✓
b	If "Yes," has it filed a Form 720 to report these payments? *If "No," provide an explanation in Schedule O*	14b			

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

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

Section A. Governing Body and Management

			Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year . . 1a 4 If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O.			
b	Enter the number of voting members included in line 1a, above, who are independent . 1b 1			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?	2		✓
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, or trustees, or key employees to a management company or other person? .	3		✓
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		✓
5	Did the organization become aware during the year of a significant diversion of the organization's assets? .	5		✓
6	Did the organization have members or stockholders?	6	✓	
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?	7a		✓
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?	7b		✓
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:			
a	The governing body?	8a	✓	
b	Each committee with authority to act on behalf of the governing body?	8b	✓	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? *If "Yes," provide the names and addresses in Schedule O*	9		✓

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

			Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	10a		✓
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	10b		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	✓	
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990.			
12a	Did the organization have a written conflict of interest policy? *If "No," go to line 13*	12a	✓	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	✓	
c	Did the organization regularly and consistently monitor and enforce compliance with the policy? *If "Yes," describe in Schedule O how this was done*	12c	✓	
13	Did the organization have a written whistleblower policy?	13	✓	
14	Did the organization have a written document retention and destruction policy?	14	✓	
15	Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
a	The organization's CEO, Executive Director, or top management official	15a		✓
b	Other officers or key employees of the organization	15b		✓
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).			
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	16a		✓
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?	16b		

Section C. Disclosure

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

18 Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply.

☐ Own website ☐ Another's website ☑ Upon request ☐ Other *(explain in Schedule O)*

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

20 State the name, address, and telephone number of the person who possesses the organization's books and records ▶

Bob Quinn, One Brewers Way, Milwaukee, WI 53214 (414) 902-4400

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

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

Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.

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

List persons in the following order: individual trustees or directors; institutional trustees; officers; key employees; highest compensated employees; and former such persons.

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

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(1) Wendy Selig- Prieb Board President	.1	✓						0	0	0
(2) Robert Quinn Board Treasurer	.1	✓		✓				0	0	0
(3) Tyler Barnes Board Member	.1	✓		✓				0	0	0
(4) Cecelia Gore Executive Director	40					✓		0	149,800	22,000
(5) Rick Schlesinger Board Member	.1	✓		✓				0	0	0
(6)										
(7)										
(8)										
(9)										
(10)										
(11)										
(12)										
(13)										
(14)										

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

(A) Name and title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(15)										
(16)										
(17)										
(18)										
(19)										
(20)										
(21)										
(22)										
(23)										
(24)										
(25)										
1b **Sub-total** ▶									149,800	22,000
c **Total from continuation sheets to Part VII, Section A** ▶										
d **Total (add lines 1b and 1c)** ▶									149,800	22,000

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

		Yes	No
3	Did the organization list any **former** officer, director, or trustee, key employee, or highest compensated employee on line 1a? *If "Yes," complete Schedule J for such individual* 3		✓
4	For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than $150,000? *If "Yes," complete Schedule J for such individual* 4		✓
5	Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? *If "Yes," complete Schedule J for such person* 5		✓

Section B. Independent Contractors

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

(A) Name and business address	(B) Description of services	(C) Compensation

2 Total number of independent contractors (including but not limited to those listed above) who received more than $100,000 of compensation from the organization ▶

Part VIII Statement of Revenue

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

				(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
Contributions, Gifts, Grants and Other Similar Amounts	1a	Federated campaigns	1a				
	b	Membership dues	1b				
	c	Fundraising events	1c	99,063			
	d	Related organizations	1d	17,900			
	e	Government grants (contributions)	1e				
	f	All other contributions, gifts, grants, and similar amounts not included above	1f	2,669,365			
	g	Noncash contributions included in lines 1a-1f: $		81,000			
	h	**Total.** Add lines 1a–1f			2,786,328		
Program Service Revenue			Business Code				
	2a						
	b						
	c						
	d						
	e						
	f	All other program service revenue					
	g	**Total.** Add lines 2a–2f					
Other Revenue	3	Investment income (including dividends, interest, and other similar amounts)			56,549		56,549
	4	Income from investment of tax-exempt bond proceeds					
	5	Royalties					
			(i) Real	(ii) Personal			
	6a	Gross rents					
	b	Less: rental expenses					
	c	Rental income or (loss)					
	d	Net rental income or (loss)					
			(i) Securities	(ii) Other			
	7a	Gross amount from sales of assets other than inventory					
	b	Less: cost or other basis and sales expenses					
	c	Gain or (loss)					
	d	Net gain or (loss)					
	8a	Gross income from fundraising events (not including $ 99,063 of contributions reported on line 1c). See Part IV, line 18	a	165,488			
	b	Less: direct expenses	b	100,642			
	c	Net income or (loss) from fundraising events			64,846		64,846
	9a	Gross income from gaming activities. See Part IV, line 19	a	2,226,209			
	b	Less: direct expenses	b	1,114,226			
	c	Net income or (loss) from gaming activities			1,111,983	1,111,983	
	10a	Gross sales of inventory, less returns and allowances	a	16,933			
	b	Less: cost of goods sold	b				
	c	Net income or (loss) from sales of inventory			16,933	16.933	
		Miscellaneous Revenue		Business Code			
	11a						
	b						
	c						
	d	All other revenue					
	e	**Total.** Add lines 11a–11d					
	12	**Total revenue.** See instructions.			4,036,639	1,128,916	121,395

Part IX Statement of Functional Expenses

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

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

Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1 Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21	2,782,177	2,782,177		
2 Grants and other assistance to domestic individuals. See Part IV, line 22	81,500	81,500		
3 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16				
4 Benefits paid to or for members				
5 Compensation of current officers, directors, trustees, and key employees				
6 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
7 Other salaries and wages				
8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)				
9 Other employee benefits				
10 Payroll taxes				
11 Fees for services (non-employees):				
a Management				
b Legal				
c Accounting	5,500		5,500	
d Lobbying				
e Professional fundraising services. See Part IV, line 17				
f Investment management fees	9,655		9,655	
g Other. (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O.)	7,840		7,840	
12 Advertising and promotion	189,575	46,296	30,623	112,656
13 Office expenses	99,487	27,781	50,455	21,251
14 Information technology				
15 Royalties				
16 Occupancy				
17 Travel	3,602		3,602	
18 Payments of travel or entertainment expenses for any federal, state, or local public officials				
19 Conferences, conventions, and meetings				
20 Interest				
21 Payments to affiliates				
22 Depreciation, depletion, and amortization				
23 Insurance				
24 Other expenses. Itemize expenses not covered above (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O.)				
a **Auction**	2,915			2,915
b **Meeting**	9,635		9,635	
c				
d				
e All other expenses	2,000		2,000	
25 **Total functional expenses.** Add lines 1 through 24e	3,193,886	2,937,754	119,310	136,822
26 **Joint costs.** Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here ▶ ☐ if following SOP 98-2 (ASC 958-720)				

Part X Balance Sheet

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

			(A) Beginning of year		(B) End of year
Assets	1	Cash—non-interest-bearing	2,444	1	134,348
	2	Savings and temporary cash investments	358,904	2	927,283
	3	Pledges and grants receivable, net	195,717	3	523,524
	4	Accounts receivable, net	11,747	4	
	5	Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L		5	
	6	Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions). Complete Part II of Schedule L		6	
	7	Notes and loans receivable, net		7	
	8	Inventories for sale or use		8	
	9	Prepaid expenses and deferred charges		9	
	10a	Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D — 10a			
	b	Less: accumulated depreciation — 10b		10c	
	11	Investments—publicly traded securities		11	
	12	Investments—other securities. See Part IV, line 11		12	
	13	Investments—program-related. See Part IV, line 11		13	1,045,586
	14	Intangible assets		14	
	15	Other assets. See Part IV, line 11	936,966	15	1,045,586
	16	**Total assets.** Add lines 1 through 15 (must equal line 34)	1,505,778	16	2,630,741
Liabilities	17	Accounts payable and accrued expenses	5,691	17	92,901
	18	Grants payable		18	400,000
	19	Deferred revenue	205,000	19	
	20	Tax-exempt bond liabilities		20	
	21	Escrow or custodial account liability. Complete Part IV of Schedule D		21	
	22	Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L		22	
	23	Secured mortgages and notes payable to unrelated third parties		23	
	24	Unsecured notes and loans payable to unrelated third parties		24	
	25	Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D		25	
	26	**Total liabilities.** Add lines 17 through 25	210,691	26	492,901
Net Assets or Fund Balances		**Organizations that follow SFAS 117 (ASC 958), check here ▶ ☐ and complete lines 27 through 29, and lines 33 and 34.**			
	27	Unrestricted net assets	21,986	27	(211,259)
	28	Temporarily restricted net assets	1,273,101	28	2,349,099
	29	Permanently restricted net assets		29	
		Organizations that do not follow SFAS 117 (ASC 958), check here ▶ ☐ and complete lines 30 through 34.			
	30	Capital stock or trust principal, or current funds		30	
	31	Paid-in or capital surplus, or land, building, or equipment fund		31	
	32	Retained earnings, endowment, accumulated income, or other funds		32	
	33	Total net assets or fund balances	1,295,087	33	2,137,840
	34	Total liabilities and net assets/fund balances	1,505,778	34	2,630,741

Part XI Reconciliation of Net Assets

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

1	Total revenue (must equal Part VIII, column (A), line 12)	1	4,036,639
2	Total expenses (must equal Part IX, column (A), line 25)	2	3,193,886
3	Revenue less expenses. Subtract line 2 from line 1	3	842,753
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	1,295,087
5	Net unrealized gains (losses) on investments	5	
6	Donated services and use of facilities	6	
7	Investment expenses	7	
8	Prior period adjustments	8	
9	Other changes in net assets or fund balances (explain in Schedule O)	9	
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10	2,137,840

Part XII Financial Statements and Reporting

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

			Yes	No
1	Accounting method used to prepare the Form 990: ☐ Cash ☑ Accrual ☐ Other _____ If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O.			
2a	Were the organization's financial statements compiled or reviewed by an independent accountant? If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both: ☐ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis	2a		✓
b	Were the organization's financial statements audited by an independent accountant? If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both: ☑ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis	2b	✓	
c	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant? If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O.	2c	✓	
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?	3a		✓
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits.	3b		

SCHEDULE A (Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Public Charity Status and Public Support

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

▶ Attach to Form 990 or Form 990-EZ.

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

OMB No 1545-0047

2014

Open to Public Inspection

Name of the organization	Employer identification number
Brewers Community Foundation, Inc	39-1970152

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

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

1 ☐ A church, convention of churches, or association of churches described in **section 170(b)(1)(A)(i).**

2 ☐ A school described in **section 170(b)(1)(A)(ii).** (Attach Schedule E.)

3 ☐ A hospital or a cooperative hospital service organization described in **section 170(b)(1)(A)(iii).**

4 ☐ A medical research organization operated in conjunction with a hospital described in **section 170(b)(1)(A)(iii).** Enter the hospital's name, city, and state:

5 ☐ An organization operated for the benefit of a college or university owned or operated by a governmental unit described in **section 170(b)(1)(A)(iv).** (Complete Part II.)

6 ☐ A federal, state, or local government or governmental unit described in **section 170(b)(1)(A)(v).**

7 ☑ An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in **section 170(b)(1)(A)(vi).** (Complete Part II.)

8 ☐ A community trust described in **section 170(b)(1)(A)(vi).** (Complete Part II.)

9 ☐ An organization that normally receives: (1) more than 33⅓% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions—subject to certain exceptions, and (2) no more than 33⅓% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See **section 509(a)(2).** (Complete Part III.)

10 ☐ An organization organized and operated exclusively to test for public safety. See **section 509(a)(4).**

11 ☐ An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in **section 509(a)(1)** or **section 509(a)(2).** See **section 509(a)(3).** Check the box in lines 11a through 11d that describes the type of supporting organization and complete lines 11e, 11f, and 11g.

a ☐ **Type I.** A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization. **You must complete Part IV, Sections A and B.**

b ☐ **Type II.** A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s). **You must complete Part IV, Sections A and C.**

c ☐ **Type III functionally integrated.** A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions). **You must complete Part IV, Sections A, D, and E.**

d ☐ **Type III non-functionally integrated.** A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions). **You must complete Part IV, Sections A and D, and Part V.**

e ☐ Check this box if the organization received a written determination from the IRS that it is a Type I, Type II, Type III functionally integrated, or Type III non-functionally integrated supporting organization.

f Enter the number of supported organizations . . . . . ☐

g Provide the following information about the supported organization(s).

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

Part II **Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)**
(Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

Section A. Public Support

Calendar year (or fiscal year beginning in) ▶	(a) 2010	(b) 2011	(c) 2012	(d) 2013	(e) 2014	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.") . . .	1,522,100	1,193,290	1,420,966	1,147,531	2,768,328	8,100,215
2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf . . .						
3 The value of services or facilities furnished by a governmental unit to the organization without charge						
4 **Total.** Add lines 1 through 3	1,522,100	1,193,290	1,420,966	1,147,531	2,768,328	8,100,215
5 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						1,668,630
6 **Public support.** Subtract line 5 from line 4.						6,431,585

Section B. Total Support

Calendar year (or fiscal year beginning in) ▶	(a) 2010	(b) 2011	(c) 2012	(d) 2013	(e) 2014	(f) Total
7 Amounts from line 4	1,552,100	1,193,290	1,420.966	1,147,531	2,768,328	8,100,215
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	14,327	5,424	16,714	130,844	56,549	233,585
9 Net income from unrelated business activities, whether or not the business is regularly carried on						
10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI)						
11 **Total support.** Add lines 7 through 10						8,324,073
12 Gross receipts from related activities, etc. (see instructions)					12	103,816

13 **First five years.** If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and **stop here** . . . . . ▶ ☐

Section C. Computation of Public Support Percentage

14	Public support percentage for 2014 (line 6, column (f) divided by line 11, column (f))	14	77.26 %
15	Public support percentage from 2013 Schedule A, Part II, line 14	15	77.25 %

16a **33 1/3% support test—2014.** If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and **stop here.** The organization qualifies as a publicly supported organization . . . . . ▶ ☑

b **33 1/3% support test—2013.** If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and **stop here.** The organization qualifies as a publicly supported organization . . . . . ▶ ☐

17a **10%-facts-and-circumstances test—2014.** If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and **stop here.** Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization . . . . . ▶ ☐

b **10%-facts-and-circumstances test—2013.** If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and **stop here.** Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization . . . . . ▶ ☐

18 **Private foundation.** If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions . . . . . ▶ ☐

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

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

Section A. Public Support

Calendar year (or fiscal year beginning in) ▶	(a) 2010	(b) 2011	(c) 2012	(d) 2013	(e) 2014	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")						
2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose . . .						
3 Gross receipts from activities that are not an unrelated trade or business under section 513						
4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf . . .						
5 The value of services or facilities furnished by a governmental unit to the organization without charge . . .						
6 **Total.** Add lines 1 through 5 . . .						
7a Amounts included on lines 1, 2, and 3 received from disqualified persons .						
b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of $5,000 or 1% of the amount on line 13 for the year						
c Add lines 7a and 7b						
8 **Public support** (Subtract line 7c from line 6.)						

Section B. Total Support

Calendar year (or fiscal year beginning in) ▶	(a) 2010	(b) 2011	(c) 2012	(d) 2013	(e) 2014	(f) Total
9 Amounts from line 6						
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources .						
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
c Add lines 10a and 10b						
11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
13 **Total support.** (Add lines 9, 10c, 11, and 12)						

14 **First five years.** If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and **stop here** . . . . . ▶ ☐

Section C. Computation of Public Support Percentage

15	Public support percentage for 2014 (line 8, column (f) divided by line 13, column (f))	15	%
16	Public support percentage from 2013 Schedule A, Part III, line 15	16	%

Section D. Computation of Investment Income Percentage

17	Investment income percentage for **2014** (line 10c, column (f) divided by line 13, column (f)) . . .	17	%
18	Investment income percentage from **2013** Schedule A, Part III, line 17	18	%

19a **33 1/3% support tests—2014.** If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and **stop here.** The organization qualifies as a publicly supported organization . ▶ ☐

b **33 1/3% support tests—2013.** If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and line 18 is not more than 33 1/3%, check this box and **stop here.** The organization qualifies as a publicly supported organization ▶ ☐

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

Part IV Supporting Organizations

(Complete only if you checked a box on line 11 of Part I. If you checked 11a of Part I, complete Sections A and B. If you checked 11b of Part I, complete Sections A and C. If you checked 11c of Part I, complete Sections A, D, and E. If you checked 11d of Part I, complete Sections A and D, and complete Part V.)

Section A. All Supporting Organizations

			Yes	No
1	Are all of the organization's supported organizations listed by name in the organization's governing documents? *If "No," describe in* ***Part VI*** *how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.*	1		
2	Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? *If "Yes," explain in* ***Part VI*** *how the organization determined that the supported organization was described in section 509(a)(1) or (2).*	2		
3a	Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? *If "Yes," answer (b) and (c) below.*	3a		
b	Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? *If "Yes," describe in* ***Part VI*** *when and how the organization made the determination.*	3b		
c	Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? *If "Yes," explain in* ***Part VI*** *what controls the organization put in place to ensure such use.*	3c		
4a	Was any supported organization not organized in the United States ("foreign supported organization")? *If "Yes" and if you checked 11a or 11b in Part I, answer (b) and (c) below.*	4a		
b	Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? *If "Yes," describe in* ***Part VI*** *how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.*	4b		
c	Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? *If "Yes," explain in* ***Part VI*** *what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes.*	4c		
5a	Did the organization add, substitute, or remove any supported organizations during the tax year? *If "Yes," answer (b) and (c) below (if applicable) Also, provide detail in* ***Part VI,*** *including (i) the names and EIN numbers of the supported organizations added, substituted, or removed, (ii) the reasons for each such action, (iii) the authority under the organization's organizing document authorizing such action, and (iv) how the action was accomplished (such as by amendment to the organizing document).*	5a		
b	**Type I or Type II only.** Was any added or substituted supported organization part of a class already designated in the organization's organizing document?	5b		
c	**Substitutions only.** Was the substitution the result of an event beyond the organization's control?	5c		
6	Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (a) its supported organizations; (b) individuals that are part of the charitable class benefited by one or more of its supported organizations; or (c) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? *If "Yes," provide detail in* ***Part VI.***	6		
7	Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (defined in IRC 4958(c)(3)(C)), a family member of a substantial contributor, or a 35-percent controlled entity with regard to a substantial contributor? *If "Yes," complete Part I of Schedule L (Form 990).*	7		
8	Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? *If "Yes," complete Part I of Schedule L (Form 990)*	8		
9a	Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? *If "Yes," provide detail in* ***Part VI.***	9a		
b	Did one or more disqualified persons (as defined in line 9(a)) hold a controlling interest in any entity in which the supporting organization had an interest? *If "Yes," provide detail in* ***Part VI.***	9b		
c	Did a disqualified person (as defined in line 9(a)) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? *If "Yes," provide detail in* ***Part VI.***	9c		
10a	Was the organization subject to the excess business holdings rules of IRC 4943 because of IRC 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? *If "Yes," answer (b) below.*	10a		
b	Did the organization have any excess business holdings in the tax year? *(Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)*	10b		

Part IV Supporting Organizations *(continued)*

			Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?			
a	A person who directly or indirectly controls, either alone or together with persons described in (b) and (c) below, the governing body of a supported organization?	11a		
b	A family member of a person described in (a) above?	11b		
c	A 35% controlled entity of a person described in (a) or (b) above? *If "Yes" to a, b, or c, provide detail in* ***Part VI.***	11c		

Section B. Type I Supporting Organizations

			Yes	No
1	Did the directors, trustees, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the tax year? *If "No," describe in* ***Part VI*** *how the supported organization(s) effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported organization, describe how the powers to appoint and/or remove directors or trustees were allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.*	1		
2	Did the organization operate for the benefit of any supported organization other than the supported organization(s) that operated, supervised, or controlled the supporting organization? *If "Yes," explain in* ***Part VI*** *how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised, or controlled the supporting organization.*	2		

Section C. Type II Supporting Organizations

			Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees of each of the organization's supported organization(s)? *If "No," describe in* ***Part VI*** *how control or management of the supporting organization was vested in the same persons that controlled or managed the supported organization(s).*	1		

Section D. All Type III Supporting Organizations

			Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the organization's tax year, (1) a written notice describing the type and amount of support provided during the prior tax year, (2) a copy of the Form 990 that was most recently filed as of the date of notification, and (3) copies of the organization's governing documents in effect on the date of notification, to the extent not previously provided?	1		
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported organization(s) or (ii) serving on the governing body of a supported organization? *If "No," explain in* ***Part VI*** *how the organization maintained a close and continuous working relationship with the supported organization(s).*	2		
3	By reason of the relationship described in (2), did the organization's supported organizations have a significant voice in the organization's investment policies and in directing the use of the organization's income or assets at all times during the tax year? *If "Yes," describe in* ***Part VI*** *the role the organization's supported organizations played in this regard.*	3		

Section E. Type III Functionally-Integrated Supporting Organizations

1 *Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (***see instructions***):*

a ☐ The organization satisfied the Activities Test. *Complete* ***line 2*** *below.*

b ☐ The organization is the parent of each of its supported organizations. *Complete* ***line 3*** *below.*

c ☐ The organization supported a governmental entity. *Describe in Part VI how you supported a government entity (see instructions).*

			Yes	No
2	Activities Test. ***Answer (a) and (b) below.***			
a	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? *If "Yes," then in* ***Part VI identify those supported organizations and explain*** *how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities.*	2a		
b	Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? *If "Yes," explain in* ***Part VI*** *the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement.*	2b		
3	Parent of Supported Organizations. ***Answer (a) and (b) below.***			
a	Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? *Provide details in* ***Part VI.***	3a		
b	Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each of its supported organizations? *If "Yes," describe in* ***Part VI*** *the role played by the organization in this regard.*	3b		

Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations

1 ☐ Check here if the organization satisfied the Integral Part Test as a qualifying trust on Nov. 20, 1970. **See instructions.** All other Type III non-functionally integrated supporting organizations must complete Sections A through E.

Section A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1 Net short-term capital gain	1		
2 Recoveries of prior-year distributions	2		
3 Other gross income (see instructions)	3		
4 Add lines 1 through 3	4		
5 Depreciation and depletion	5		
6 Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or maintenance of property held for production of income (see instructions)	6		
7 Other expenses (see instructions)	7		
8 **Adjusted Net Income** (subtract lines 5, 6 and 7 from line 4)	8		

Section B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1 Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year):			
a Average monthly value of securities	1a		
b Average monthly cash balances	1b		
c Fair market value of other non-exempt-use assets	1c		
d **Total** (add lines 1a, 1b, and 1c)	1d		
e **Discount** claimed for blockage or other factors (explain in detail in **Part VI**):			
2 Acquisition indebtedness applicable to non-exempt-use assets	2		
3 Subtract line 2 from line 1d	3		
4 Cash deemed held for exempt use. Enter 1-1/2% of line 3 (for greater amount, see instructions).	4		
5 Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
6 Multiply line 5 by .035	6		
7 Recoveries of prior-year distributions	7		
8 **Minimum Asset Amount** (add line 7 to line 6)	8		

Section C - Distributable Amount			Current Year
1 Adjusted net income for prior year (from Section A, line 8, Column A)	1		
2 Enter 85% of line 1	2		
3 Minimum asset amount for prior year (from Section B, line 8, Column A)	3		
4 Enter greater of line 2 or line 3	4		
5 Income tax imposed in prior year	5		
6 **Distributable Amount.** Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions)	6		

7 ☐ Check here if the current year is the organization's first as a non-functionally-integrated Type III supporting organization (see instructions).

Part V **Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations** *(continued)*

Section D - Distributions		**Current Year**
1	Amounts paid to supported organizations to accomplish exempt purposes	
2	Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity	
3	Administrative expenses paid to accomplish exempt purposes of supported organizations	
4	Amounts paid to acquire exempt-use assets	
5	Qualified set-aside amounts (prior IRS approval required)	
6	Other distributions (describe in **Part VI**). See instructions.	
7	**Total annual distributions.** Add lines 1 through 6.	
8	Distributions to attentive supported organizations to which the organization is responsive (provide details in **Part VI**). See instructions.	
9	Distributable amount for 2014 from Section C, line 6	
10	Line 8 amount divided by Line 9 amount	

Section E - Distribution Allocations (see instructions)		**(i) Excess Distributions**	**(ii) Underdistributions Pre-2014**	**(iii) Distributable Amount for 2014**
1	Distributable amount for 2014 from Section C, line 6			
2	Underdistributions, if any, for years prior to 2014 (reasonable cause required-see instructions)			
3	Excess distributions carryover, if any, to 2014:			
a				
b				
c				
d				
e	From 2013			
f	**Total** of lines 3a through e			
g	Applied to underdistributions of prior years			
h	Applied to 2014 distributable amount			
i	Carryover from 2009 not applied (see instructions)			
j	Remainder. Subtract lines 3g, 3h, and 3i from 3f.			
4	Distributions for 2014 from Section D, line 7: $			
a	Applied to underdistributions of prior years			
b	Applied to 2014 distributable amount			
c	Remainder. Subtract lines 4a and 4b from 4.			
5	Remaining underdistributions for years prior to 2014, if any. Subtract lines 3g and 4a from line 2 (if amount greater than zero, see instructions).			
6	Remaining underdistributions for 2014. Subtract lines 3h and 4b from line 1 (if amount greater than zero, see instructions).			
7	**Excess distributions carryover to 2015.** Add lines 3j and 4c.			
8	Breakdown of line 7:			
a				
b				
c				
d	Excess from 2013 . .			
e	Excess from 2014 . . .			

Part VI **Supplemental Information.** Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; and Part III, line 12. Also complete this part for any additional information. (See instructions.)

SCHEDULE D (Form 990)

Department of the Treasury
Internal Revenue Service

Supplemental Financial Statements

▶ Complete if the organization answered "Yes" to Form 990, Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b.
▶ Attach to Form 990.
▶ Information about Schedule D (Form 990) and its instructions is at www.irs.gov/form990.

OMB No 1545-0047

2014

Open to Public Inspection

Name of the organization

Brewers Community Foundation Inc

Employer identification number

39-1970152

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

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

		(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year		
2	Aggregate value of contributions to (during year)		
3	Aggregate value of grants from (during year)		
4	Aggregate value at end of year		

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

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

Part II Conservation Easements.

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

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

☐ Preservation of land for public use (e.g., recreation or education) ☐ Preservation of a historically important land area
☐ Protection of natural habitat ☐ Preservation of a certified historic structure
☐ Preservation of open space

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

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

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

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

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

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

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

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

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

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

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

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

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

(i) Revenue included in Form 990, Part VIII, line 1 ▶ $ ----------
(ii) Assets included in Form 990, Part X ▶ $ ----------

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

a Revenue included in Form 990, Part VIII, line 1 ▶ $ ----------
b Assets included in Form 990, Part X ▶ $

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

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

a ☐ Public exhibition
b ☐ Scholarly research
c ☐ Preservation for future generations
d ☐ Loan or exchange programs
e ☐ Other _____

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

5 During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection? . . ☐ Yes ☐ No

Part IV Escrow and Custodial Arrangements.

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

1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X? . . . ☐ Yes ☐ No

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

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

2a Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability? ☐ Yes ☐ No

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

Part V Endowment Funds.

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

	(a) Current year	(b) Prior year	(c) Two years back	(d) Three years back	(e) Four years back
1a Beginning of year balance	603,148	507,934	0		
b Contributions	61,667	16,667	500,000		
c Net investment earnings, gains, and losses	36,560	83,724	9,184		
d Grants or scholarships					
e Other expenditures for facilities and programs					
f Administrative expenses	(6,324)	(5,177)	(1,250)		
g End of year balance	695,051	603,148	507,934		

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

a Board designated or quasi-endowment ▶ _____%
b Permanent endowment ▶ _____%
c Temporarily restricted endowment ▶ 100%

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

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

		Yes	No
(i) unrelated organizations	3a(i)	✓	
(ii) related organizations	3a(ii)		
b If "Yes" to 3a(ii), are the related organizations listed as required on Schedule R?	3b		

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

Part VI Land, Buildings, and Equipment.

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

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

Part VII Investments—Other Securities.
Complete if the organization answered "Yes" to Form 990, Part IV, line 11b. See Form 990, Part X, line 12.

(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation Cost or end-of-year market value
(1) Financial derivatives		
(2) Closely-held equity interests		
(3) Other		
(A)		
(B)		
(C)		
(D)		
(E)		
(F)		
(G)		
(H)		
Total. *(Column (b) must equal Form 990, Part X, col (B) line 12.)* ▶		

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

(a) Description of investment	(b) Book value	(c) Method of valuation Cost or end-of-year market value
(1)		
(2)		
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
Total. *(Column (b) must equal Form 990, Part X, col (B) line 13.)* ▶		

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

(a) Description	(b) Book value
(1) **Greater Milwaukee Foundation - Operations**	**695,051**
(2) **Greater Milwaukee Foundation - Scholarship**	**323,276**
(3) **Greater Milwaukee Foundation - Scholarship (Selig)**	**27,259**
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
Total. *(Column (b) must equal Form 990, Part X, col. (B) line 15.)* ▶	**1,045,586**

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

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

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

Part XI Reconciliation of Revenue per Audited Financial Statements With Revenue per Return.
Complete if the organization answered "Yes" to Form 990, Part IV, line 12a.

1	Total revenue, gains, and other support per audited financial statements			1	5,301,684
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:				
a	Net unrealized gains (losses) on investments	2a			
b	Donated services and use of facilities	2b			
c	Recoveries of prior year grants	2c			
d	Other (Describe in Part XIII.)	2d			
e	Add lines **2a** through **2d**			2e	
3	Subtract line **2e** from line **1**			3	
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:				
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a			
b	Other (Describe in Part XIII.)	4b	(1,265,045)		
c	Add lines **4a** and **4b**			4c	(1,265,045)
5	Total revenue. Add lines **3** and **4c.** *(This must equal Form 990, Part I, line 12.)*			5	4,036,639

Part XII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return.
Complete if the organization answered "Yes" to Form 990, Part IV, line 12a.

1	Total expenses and losses per audited financial statements			1	4,458,931
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:				
a	Donated services and use of facilities	2a			
b	Prior year adjustments	2b			
c	Other losses	2c			
d	Other (Describe in Part XIII.)	2d			
e	Add lines **2a** through **2d**			2e	
3	Subtract line **2e** from line **1**			3	
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:				
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a			
b	Other (Describe in Part XIII.)	4b	(1,265,045)		
c	Add lines **4a** and **4b**			4c	(1,265,045)
5	Total expenses. Add lines **3** and **4c.** *(This must equal Form 990, Part I, line 18.)*			5	3,193,886

Part XIII Supplemental Information.

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

Brewers Community Foundation (BCF) is exempt from income taxes under Section 501(c)(3) of the Internal Revenue Code. Accordingly, no provision for income taxes is included in the accompanying financial statements. Generally accepted accounting principles require disclosure of uncertain tax positions which meet certain criteria. Management has evaluated the tax-exempt status of BCF and has determined that it is more likely than not that BCF's status would be upheld in the event of an examination by a taxing authority. In addition, BCF does not undertake any activities that may give rise to unrelated business taxable income or the associated unrelated business income tax. Therefore, no tax provision and no amounts for current or future tax assets or liabilities is reported for uncertain tax provisions.

Part XIII Supplemental Information *(continued)*

Part V Line 4. The foundation established the endowment fund as a temporarily restricted asset to accumulate contributions and earnings until distributions are authorized by the foundation governing board.

Part XI Line 4b. Expenses related to special events reported on Form 990 Part VIII.

Part XII Line 4b: Expenses related to special events reported on Form 990 Part VIII.

SCHEDULE G (Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Supplemental Information Regarding Fundraising or Gaming Activities

Complete if the organization answered "Yes" to Form 990, Part IV, lines 17, 18, or 19, or if the organization entered more than $15,000 on Form 990-EZ, line 6a.

► **Attach to Form 990 or Form 990-EZ.**

► **Information about Schedule G (Form 990 or 990-EZ) and its instructions is at *www.irs.gov/form990.***

OMB No 1545-0047

2014

Open to Public Inspection

Name of the organization

Brewers Community Foundation Inc

Employer identification number

39-1970152

Part I Fundraising Activities. Complete if the organization answered "Yes" to Form 990, Part IV, line 17. Form 990-EZ filers are not required to complete this part.

1 Indicate whether the organization raised funds through any of the following activities. Check all that apply.

a ☐ Mail solicitations
b ☐ Internet and email solicitations
c ☐ Phone solicitations
d ☐ In-person solicitations
e ☐ Solicitation of non-government grants
f ☐ Solicitation of government grants
g ☐ Special fundraising events

2a Did the organization have a written or oral agreement with any individual (including officers, directors, trustees or key employees listed in Form 990, Part VII) or entity in connection with professional fundraising services? ☐ Yes ☐ No

b If "Yes," list the ten highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be compensated at least $5,000 by the organization.

	(i) Name and address of individual or entity (fundraiser)	(ii) Activity	(iii) Did fundraiser have custody or control of contributions? Yes	(iii) No	(iv) Gross receipts from activity	(v) Amount paid to (or retained by) fundraiser listed in col (i)	(vi) Amount paid to (or retained by) organization
1							
2							
3							
4							
5							
6							
7							
8							
9							
10							
Total	►						

3 List all states in which the organization is registered or licensed to solicit contributions or has been notified it is exempt from registration or licensing.

Part II **Fundraising Events.** Complete if the organization answered "Yes" to Form 990, Part IV, line 18, or reported more than $15,000 of fundraising event contributions and gross income on Form 990-EZ, lines 1 and 6b. List events with gross receipts greater than $5,000.

		(a) Event #1 Sausage Race (event type)	(b) Event #2 Davey Nelson Golf (event type)	(c) Other events 1 (total number)	(d) Total events (add col (a) through col (c))
Revenue	1 Gross receipts	95,172	117,009	52,370	264,551
	2 Less: Contributions	23,692	41,295	34,076	99,063
	3 Gross income (line 1 minus line 2)	71,480	75,714	18,294	165,488
Direct Expenses	4 Cash prizes				
	5 Noncash prizes				
	6 Rent/facility costs				
	7 Food and beverages	446	29,408		29,854
	8 Entertainment				
	9 Other direct expenses	17,283	41,295	12,210	70,788
	10 Direct expense summary. Add lines 4 through 9 in column (d) ▶				(100,642)
	11 Net income summary. Subtract line 10 from line 3, column (d) ▶				64,846

Part III **Gaming.** Complete if the organization answered "Yes" to Form 990, Part IV, line 19, or reported more than $15,000 on Form 990-EZ, line 6a.

		(a) Bingo	(b) Pull tabs/instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add col (a) through col (c))
Revenue	1 Gross revenue			2,226,209	2,226,209
Direct Expenses	2 Cash prizes			1,090,693	1,090,693
	3 Noncash prizes				
	4 Rent/facility costs				
	5 Other direct expenses			23,533	23,533
	6 Volunteer labor	☐ Yes ____ % ☐ No	☐ Yes ____ % ☐ No	☑ Yes 100 % ☐ No	
	7 Direct expense summary. Add lines 2 through 5 in column (d) ▶				1,114,226
	8 Net gaming income summary. Subtract line 7 from line 1, column (d) ▶				1,111,983

9 Enter the state(s) in which the organization conducts gaming activities: Wisconsin

a Is the organization licensed to conduct gaming activities in each of these states? ☑ Yes ☐ No

b If "No," explain:

10a Were any of the organization's gaming licenses revoked, suspended or terminated during the tax year? ☐ Yes ☑ No

b If "Yes," explain:

11 Does the organization conduct gaming activities with nonmembers? . . . . . ☐ Yes ☑ No

12 Is the organization a grantor, beneficiary or trustee of a trust or a member of a partnership or other entity formed to administer charitable gaming? . . . . . ☐ Yes ☑ No

13 Indicate the percentage of gaming activity conducted in:

a	The organization's facility	13a	100 %
b	An outside facility	13b	%

14 Enter the name and address of the person who prepares the organization's gaming/special events books and records:

Name ▶ **Robert Quinn**

Address ▶ **One Brewers Way, Milwaukee WI 53214**

15a Does the organization have a contract with a third party from whom the organization receives gaming revenue? . . . . . ☐ Yes ☑ No

b If "Yes," enter the amount of gaming revenue received by the organization ▶ $ _____ and the amount of gaming revenue retained by the third party ▶ $ _____

c If "Yes," enter name and address of the third party:

Name ▶

Address ▶

16 Gaming manager information:

Name ▶

Gaming manager compensation ▶ $ _____

Description of services provided ▶

☐ Director/officer ☐ Employee ☐ Independent contractor

17 Mandatory distributions:

a Is the organization required under state law to make charitable distributions from the gaming proceeds to retain the state gaming license? . . . . . ☐ Yes ☑ No

b Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent in the organization's own exempt activities during the tax year ▶ $

Part IV **Supplemental Information.** Provide the explanations required by Part I, line 2b, columns (iii) and (v), and Part III, lines 9, 9b, 10b, 15b, 15c, 16, and 17b, as applicable. Also provide any additional information (see instructions).

SCHEDULE I
(Form 990)

Department of the Treasury
Internal Revenue Service

Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

Complete if the organization answered "Yes" to Form 990, Part IV, line 21 or 22.

▶ Attach to Form 990.

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

OMB No 1545-0047

2014

Open to Public Inspection

Name of the organization

Brewers Community Foundation Inc.

Employer identification number

39-1970152

Part I General Information on Grants and Assistance

1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? . . . . . ☑ Yes ☐ No

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

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

1 (a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
(1) See Attachments							
(2)							
(3)							
(4)							
(5)							
(6)							
(7)							
(8)							
(9)							
(10)							
(11)							
(12)							

2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table . . . . . ▶ 143

3 Enter total number of other organizations listed in the line 1 table . . . . . ▶ 0

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

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non-cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of non-cash assistance
1 Scholarships	34	81,500			
2					
3					
4					
5					
6					
7					

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

To monitor the use of grant funds, each organization provides an accountability report to demonstrate the funds were used for their intended purpose.

Name of Organization	EIN
Brewers Community Foundation Inc	39-1970152

Attachment to Form 990 Schedule I, Part II Line 1 (a)

1 (a) Organization and Address	(b) EIN	(c) IRC section if applicable	(d) Amount of Cash Grant	(e) Amount of non-cash assistance	(f) Method of valuation (book FMV appraisal other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
88 Nine Radio 5312 W Vliet Street Milwaukee WI 53208	20-1257939	501 (c) (3)	$ 5,000 00	none	N/A	N/A	To support general activities and the goals of the organization
Aids Resource Center of Wisconsin 820 N Plankington Milwaukee WI 53203	39 1534049	501 (c) (3)	$ 25,000 00	none	N/A	N/A	To support general activities and the goals of the organization
Aids Resource Center of Wisconsin 820 N Plankington Milwaukee WI 53203	39-1534049	501 (c) (3)	$ 25,000 00	none	N/A	N/A	To support general activities and the goals of the organization
ALS 3333 N Mayfair Road Suite 213 Wauwatosa WI 53222	39-1600965	501 (c) (3)	$ 4 000 00	none	N/A	N/A	To support general activities and the goals of the organization
ALS 3333 N Mayfair Road Suite 213 Wauwatosa WI 53222	39-1600965	501 (c) (3)	$ 1 000 00	none	N/A	N/A	To support general activities and the goals of the organization
Alverno College 3400 S 43rd St Milwaukee WI 53234	39 0806263	501 (c) (3)	$ 8 600 00	none	N/A	N/A	To support general activities and the goals of the organization
Alverno College 3400 S 43rd St Milwaukee WI 53234	39-0806263	501 (c) (3)	$ 50,000 00	none	N/A	N/A	To support general activities and the goals of the organization
Alzheimer s Association 620 76th Str Suite 160 Milwaukee WI 53214	39-1350965	501 (c) (3)	$ 6,200 00	none	N/A	N/A	To support general activities and the goals of the organization
Arizona Human Society 1521 W Dobbins Road Phoenix AZ 85041	86-0135567	501 (c) (3)	$ 5 077 22	none	N/A	N/A	To support general activities and the goals of the organization
Arizona Human Society 1521 W Dobbins Road Phoenix AZ 85041	86-0135567	501 (c) (3)	$ 875 00	none	N/A	N/A	To support general activities and the goals of the organization
Arts at Large Inc W4885 Valley Heights Dr Fredonia WI 53021	33-1114575	501 (c) (3)	$ 12,500 00	none	N/A	N/A	To support general activities and the goals of the organization
Artists Working in Education 2819 W Highland Avenue Milwaukee WI 53208	39-1945466	501 (c) (3)	$ 5,000 00	none	N/A	N/A	To support general activities and the goals of the organization
Aurora Health Care Foundation 750 W Virginia St P O Box 341880 Milwaukee WWI 53234	39-6044569	501 (c) (3)	$ 5,000 00	none	N/A	N/A	To support general activities and the goals of the organization
Beckum Stapleton Little League Baseball Inc 4213 N 17th St Milwukee WI 53209	23-7126228	501 (c) (3)	$ 10,000 00	$ 19,473 00	FMV	Uniforms	To support general activities and the goals of the organization
Benedict Center 135 W Wells St Ste 700 Milwaukee WI 53203	39 1226475	501 (c) (3)	$ 5,000 00	none	N/A	N/A	To support general activities and the goals of the organization
Best Buddies Wisconsin 10855 W Potter Road #14 Wauwatosa WI 53226	52 1614576	501 (c) (3)	$ 5,000 00	none	N/A	N/A	To support general activities and the goals of the organization
Big Brothers Big Sisters of Metro Milw 788 N Jefferson St Suite 600 Milwaukee WI 53202	39-1239687	501 (c) (3)	$ 10,000 00	none	N/A	N/A	To support general activities and the goals of the organization
Boerner Botanical Gardens 9400 Boerner Drive Hales Corners WI 53130	39 1487896	501 (c) (3)	$ 5 000 00	none	N/A	N/A	To support general activities and the goals of the organization
Boys and Girls Club of Greater Milwaukee 1558 North 6th Street Milwaukee WI 53212	39-0806292	501 (c) (3)	$ 35,100 00	$ 13,919 10	FMV	Uniforms	To support general activities and the goals of the organization
Boys and Girls Club of Greater Milwaukee 1558 North 6th Street Milwaukee WI 53212	39-0806292	501 (c) (3)	$ 25 000 00	none	N/A	N/A	To support general activities and the goals of the organization

Name of Organization	EIN
Brewers Community Foundation Inc	39-1970152

Attachment to Form 990 Schedule I, Part II Line 1 (a)

1 (a) Organization and Address	(b) EIN	(c) IRC section if applicable	(d) Amount of Cash Grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Brady Corp Foundation 6555 W Good Hope Rd Milwaukee WI 53223	20-3304824	501 (c) (3)	$ 15 000 00	none	N/A	N/A	To support general activities and the goals of the organization
Brady Corp Foundation 6555 W Good Hope Rd Milwaukee WI 53223	20-3304824	501 (c) (3)	$ 15,000 00	none	N/A	N/A	To support general activities and the goals of the organization
Brown Street Academy Milwaukee Public Schools 2029 N 20th Street Milwaukee WI 53205		170 (c)	$ 5 000 00	none	N/A	N/A	To support general activities and the goals of the organization
Camp for Kids c/o Greater MKE Foundation 101 W Pleasant St Suite 210 Milwaukee WI 53212	39-603640	501 (c) (3)	$ 50 000 00	none	N/A	N/A	To support general activities and the goals of the organization
Cardinal Stritch University 6801 N Yates Road #99 Milwaukee WI 53217	39-0806196	501 (c) (3)	$ 5 000 00	none	N/A	N/A	To support general activities and the goals of the organization
Center For Resilent Cities 1243 N 10th Street Suite 200 Milwaukee WI 53205	39 1854762	501 (c) (3)	$ 25,000 00	none	N/A	N/A	To support general activities and the goals of the organization
Center For Resilent Cities 1243 N 10th Street Suite 200 Milwaukee WI 53205	39-1854762	501 (c) (3)	$ 25,000 00	none	N/A	N/A	To support general activities and the goals of the organization
City Year Inc 287 Columbus Ave Boston MA 02116	22 2882549	501 (c) (3)	$ 50 000 00	none	N/A	N/A	To support general activities and the goals of the organization
City Year Milwaukee 648 North Plankinton Ave Suite 190 Milwaukee WI 53203	22-2882549	501 (c) (3)	$ 5 000 00	none	N/A	N/A	To support general activities and the goals of the organization
COA Youth & Family Centers 909 E North Ave Milwaukee WI 53212 3447	39 0806339	501 (c) (3)	$ 5 000 00	none	N/A	N/A	To support general activities and the goals of the organization
Danceworks 1661 N Water St Milwaukee WI 53202	39-1734312	501 (c) (3)	$ 5,000 00	none	N/A	N/A	To support general activities and the goals of the organization
Discovery World 500 N Harbor Dr Milwaukee WI 53202	39 1691578	501 (c) (3)	$ 10,000 00	none	N/A	N/A	To support general activities and the goals of the organization
Eastbrook Academy 5375 N Green Bay Ave Milwaukee WI 53209	39 1926815	501 (c) (3)	$ 10 000 00	none	N/A	N/A	To support general activities and the goals of the organization
Feeding America Eastern Wisconsin 1700 W Fond du Lac Ave Milwaukee WI 53205	39-1384593	501 (c) (3)	$ 5 000 00	none	N/A	N/A	To support general activities and the goals of the organization
Fisher House Wisconsin 5000 W National Ave Milwaukee WI 53295	27-5461119	501 (c) (3)	$ 7 500 00	none	N/A	N/A	To support general activities and the goals of the organization
Fisher House Wisconsin 5000 W National Ave Milwaukee WI 53295	27 5461119	501 (c) (3)	$ 23 800 00	none	N/A	N/A	To support general activities and the goals of the organization
Fondy Food Center 2647 W Fodn du Lace Ave Milwaukee WI 53206	31-1751969	501 (c) (3)	$ 5,000 00	none	N/A	N/A	To support general activities and the goals of the organization
Friends of WPT Inc 812 University Ave Rm 1076 Madison WI 53706	23-7300462	501 (c) (3)	$ 5 000 00	none	N/A	N/A	To support general activities and the goals of the organization
Froedtert Hospital Foundation 9200 W Wisconsin Ave Milwaukee WI 53226	39 1431192	501 (c) (3)	$ 10 100 00	none	N/A	N/A	To support general activities and the goals of the organization
GiGis Playhouse Milwaukee PO Box 703 Thensville WI 53092	20-0058563	501 (c) (3)	$ 5 000 00	none	N/A	N/A	To support general activities and the goals of the organization

Name of Organization	EIN
Brewers Community Foundation Inc	39-1970152

Attachment to Form 990 Schedule I, Part II Line 1 (a)

1 (a) Organization and Address	(b) EIN	(c) IRC section if applicable	(d) Amount of Cash Grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Girl Scouts of Milwaukee Area 131 S 69th Street PO Box 14999 Milwaukee WI 53214	39-0892833	501 (c) (3)	$ 10,900 00	$ 2,541 00	FMV	Uniforms	To support general activities and the goals of the organization
Grafton American Little League 772 Wolf Creek Court Grafton WI 53024	52-1287146	501 (c) (3)	$ 10,000 00	none	N/A	N/A	To support general activities and the goals of the organization
Greater Milwaukee Foundation 101 W Pleasant St Ste 210 Milwaukee WI 53212	39 6036407	501 (c) (3)	$ 58,000 00	none	N/A	N/A	To support general activities and the goals of the organization
Greater Milwaukee Foundation Mayors Earn and Learn Fund 101 W Pleasant St Ste 210 Milwaukee WI 53212	39 6036407	501 (c) (3)	$ 10,000 00	none	N/A	N/A	To support general activities and the goals of the organization
Growing Power 5500 W Silver Spring Drive Milwaukee WI 53218	39-1876495	501 (c) (3)	$ 10,000 00	none	N/A	N/A	To support general activities and the goals of the organization
Guest House of Milwaukee Inc 1216 N 13th Street Milwaukee WI 53205	39-1539301	501 (c) (3)	$ 11,567 00	none	N/A	N/A	To support general activities and the goals of the organization
Guest House of Milwaukee Inc 1216 N 13th Street Milwaukee WI 53205	39-1539301	501 (c) (3)	$ 10,000 00	none	N/A	N/A	To support general activities and the goals of the organization
Hispanic Chamber of Commerce 1021 W National Avenue Milwaukee WI 53204	39-1293583	501 (c) (3)	$ 12,500 00	none	N/A	N/A	To support general activities and the goals of the organization
Hispanic Professionals of Greater Mke 614 W National Ave Milwaukee WI 53204	90-0098434	501 (c) (3)	$ 12,500 00	none	N/A	N/A	To support general activities and the goals of the organization
Hmong/American Friendship Assoc Inc 3824 W Vliet Street Milwaukee WI 53208	39-1456011	501 (c) (3)	$ 5,000 00	none	N/A	N/A	To support general activities and the goals of the organization
Holton Family Youth Center 510 E Burleight St Milwaukee WI 53212	27-2047833	501 (c) (3)	$ 10,000 00	none	N/A	N/A	To support general activities and the goals of the organization
Hometown Heroes 1000 Badger Cir Grafton WI 53024	90-0421984	501 (c) (3)	$ 10,000 00	none	N/A	N/A	To support general activities and the goals of the organization
Hope House of Milwaukee 209 W Orchard St PO Box 04095 Milwaukee, WI 53204	39-1592900	501 (c) (3)	$ 5,000 00	none	N/A	N/A	To support general activities and the goals of the organization
House of Peace 1702 W Walnut Street Milwaukee WI 53205	39-1636105	501 (c) (3)	$ 5,000 00	none	N/A	N/A	To support general activities and the goals of the organization
Hunger Task Force 201 S Hawley Court Milwaukee WI 53214	39 1345847	501 (c) (3)	$ 6,887 00	none	N/A	N/A	To support general activities and the goals of the organization
Impact 6737 W Washington Street Suite 2225 Milwaukee WI 53214 3151	39-0988784	501 (c) (3)	$ 20,000 00	none	N/A	N/A	To support general activities and the goals of the organization
Interfaith Older Adult Programs Inc 600 W Virginia St Suite 300 Milwaukee WI 53204	39-1217963	501 (c) (3)	$ 5,000 00	none	N/A	N/A	To support general activities and the goals of the organization
Joe torre Safe At Home Foundation 1250 4th Street 3rd Floor Santa Monica, CA 90401	03-0442514	501 (c) (3)	$ 10,000 00	none	N/A	N/A	To support general activities and the goals of the organization
Journey House (Felix Mantilla) 2110 W Scott St Milwaukee WI 53204	39-1203539	501 (c) (3)	none	$ 13 920 35	FMV	Uniforms	To support general activities and the goals of the organization
Journey House 2110 W Scott St Milwaukee WI 53204	39-1203539	501 (c) (3)	$ 10,000 00	none	N/A	N/A	To support general activities and the goals of the organization
JR RBI Boys & Girls Club 1558 North 6th Street Milwaukee WI 53212	39-0806292	501 (c) (3)	none	$ 26 187 40	FMV	Uniforms	To support general activities and the goals of the organization

Name of Organization	EIN
Brewers Community Foundation Inc	39 1970152

Attachment to Form 990 Schedule I, Part II Line 1 (a)

1 (a) Organization and Address	(b) EIN	(c) IRC section if applicable	(d) Amount of Cash Grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Junior Achievement 11111 W Liberty Drive Milwaukee WI 53224	39-0826295	501 (c) (3)	$ 8,000 00	none	NA	Uniforms	To support general activities and the goals of the organization
KaBoom! 4301 Connecticut Ave NW Suite MI-1 Washington DC 20008	52-1970904	501 (c) (3)	$ 86,800 00	none	NA	Uniforms	To support general activities and the goals of the organization
Koos for Kids 5816 Finch Lane Racine WI 53402	20-3335236	501 (c) (3)	$ 5,000 00	none	N/A	N/A	To support general activities and the goals of the organization
La Crosse Area Baseball Hall of Fame La Crosse Area Sport Commission Inc 2806 Cass Street La Crosse WI 54601	20-5095513	501 (c) (3)	$ 5,000 00	none	N/A	N/A	To support general activities and the goals of the organization
Literacy Services 555 N Plankinton Ave Milwaukee WI 53203	39 1091203	501 (c) (3)	$ 7,500 00	none	N/A	N/A	To support general activities and the goals of the organization
MACC Fund 10000 Innovation Dr Ste 135 Milwaukee WI 53226	39 1270290	501 (c) (3)	$ 5,000 00	none	N/A	N/A	To support general activities and the goals of the organization
MACC Fund 10000 Innovation Dr Ste 135 Milwaukee WI 53226	39 1270290	501 (c) (3)	$ 46,242 27	none	N/A	N/A	To support general activities and the goals of the organization
Make a Wish Foundation 13195 W Hampton Avenue Butler WI 53007	39-1543541	501 (c) (3)	$ 30,000 00	none	N/A	N/A	To support general activities and the goals of the organization
Make a Wish Foundation 13195 W Hampton Avenue Butler WI 53007	39 1543541	501 (c) (3)	$ 1 632 50	none	N/A	N/A	To support general activities and the goals of the organization
Milwaukee Film 229 E Wisconsin Ave Ste 200 Milwaukee WI 53202	26-3049630	501 (c) (3)	$ 35,000 00	none	N/A	N/A	To support general activities and the goals of the organization
Ronald McDonald House 8948 W Watertown Plank Rd Wauwatosa WI 53226	39 1433107	501 (c) (3)	$ 95,000 00	7207 11	N/A	N/A	To support general activities and the goals of the organization
Meta House 2625 N Weil St Milwaukee WI 53212	39-1017822	501 (c) (3)	$ 11,292 00	none	N/A	N/A	To support general activities and the goals of the organization
Milwaukee Art Museum 700 N Art Museum Drive Milwaukee WI 53202	39-0806316	501 (c) (3)	$ 6,000 00	none	N/A	N/A	To support general activities and the goals of the organization
Milwaukee Chapter The Links PO Box 647 Milwaukee WI 53201	39-1294267	501 (c) (3)	$ 5,000 00	none	N/A	N/A	To support general activities and the goals of the organization
Milwaukee County Historical Society 910 Old World 3rd Street Milwaukee WI 53203	39-1021989	501 (c) (3)	$ 5,000 00	none	N/A	N/A	To support general activities and the goals of the organization
Milwaukee Economic Development 809 North Broadway N 104 Milwaukee WI 53202	23-7129398	501 (c) (3)	$ 10,000 00	none	N/A	N/A	To support general activities and the goals of the organization
Milwaukee Habitat for Humanity 3726 N Booth Street Milwaukee WI 53212	39-1496741	501 (c) (3)	$ 25,000 00	none	N/A	N/A	To support general activities and the goals of the organization
Milwaukee Habitat for Humanity 3726 N Booth Street Milwaukee WI 53212	39 1496741	501 (c) (3)	$ 25,000 00	none	N/A	N/A	To support general activities and the goals of the organization
Milwaukee Jewish Federation 1360 N Prospect Avenue Milwaukee WI 53202	39 0806312	501 (c) (3)	$ 5,000 00	none	N/A	N/A	To support general activities and the goals of the organization
Milwaukee Preservation Alliance Inc PO box 510642 Milwaukee WI 53203	43-2026706	501 (c) (3)	$ 10,000 00	none	N/A	N/A	To support general activities and the goals of the organization
Milwaukee Public Museum 800 West Wells Street Milwaukee WI 53233	39 1723105	501 (c) (3)	$ 5,000 00	none	N/A	N/A	To support general activities and the goals of the organization

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Brewers Community Foundation Inc	39 1970152

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1 (a) Organization and Address	(b) EIN	(c) IRC section if applicable	(d) Amount of Cash Grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV appraisal other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Milwaukee Public Library Foundation Inc 814 W Milwaukee Ave Milwaukee WI 53233-2309	39-1610233	501 (c) (3)	$ 19,000 00	none	N/A	N/A	To support general activities and the goals of the organization
Milwaukee Public Library Foundation Inc 814 W Milwaukee Ave Milwaukee WI 53233 2309	39-1610233	501 (c) (3)	$ 15,000 00	none	N/A	N/A	To support general activities and the goals of the organization
Milwaukee Public Schools Foundation Inc Recreation Division 5225 W Vliet St Milwaukee WI 53208	39-1929112	501 (c) (3)	$ 5,000 00	none	N/A	N/A	To support general activities and the goals of the organization
Milwaukee Repertory Theater 108 E Wells Street Milwaukee WI 53202	39-0946025	501 (c) (3)	$ 5,000 00	none	N/A	N/A	To support general activities and the goals of the organization
Milwaukee Rescue Mission 830 N 19th Street Milwaukee WI 53232	39 0816851	501 (c) (3)	$ 10,000 00	none	N/A	N/A	To support general activities and the goals of the organization
Milwaukee Symphony 700 N Water Street Suite 700 Milwaukee WI 53202	39-6023436	501 (c) (3)	$ 5,000 00	none	N/A	N/A	To support general activities and the goals of the organization
Milwaukee Women Center 728 N James Lovell Street Milwaukee WI 53233	32 0211087	501 (c) (3)	$ 5,000 00	none	N/A	N/A	To support general activities and the goals of the organization
Milwaukee Urban League 435 W North Ave Milwaukee WI 53212-3146	39-0826861	501 (c) (3)	$ 10,000 00	none	N/A	N/A	To support general activities and the goals of the organization
Money Savvy Generation Foundation 910 Sherwood Dr # 17 Lake bluff IL 60044	20-0618098	501 (c) (3)	$ 5,000 00	none	N/A	N/A	To support general activities and the goals of the organization
NAMI Greater Milwaukee 3732 W Wisconsin Ave Milwaukee WI 53208	39 1329103	501 (c) (3)	$ 5 000 00	none	N/A	N/A	To support general activities and the goals of the organization
Negro Leagues Baseball Museum 1616 E 18th St Kansas City MO 64108	43-1570612	501 (c) (3)	$ 5,000 00	none	N/A	N/A	To support general activities and the goals of the organization
Neighborhood House of Milwaukee 2819 W Richardson Place Milwaukee WI 53208-3546	39-0806269	501 (c) (3)	$ 10 000 00	none	N/A	N/A	To support general activities and the goals of the organization
New Concept Self Development Center 1531 West Vliet Street Milwaukee WI 53205	39-1220236	501 (c) (3)	$ 10 000 00	none	N/A	N/A	To support general activities and the goals of the organization
Next Door Foundation 2545 N 29TH St Milwaukee WI 53210	39 1162969	501 (c) (3)	$ 29 273 08	none	N/A	N/A	To support general activities and the goals of the organization
Next Door Foundation 2545 N 29TH St Milwaukee WI 53210	39-1162969	501 (c) (3)	$ 21,976 92	none	N/A	N/A	To support general activities and the goals of the organization
Open Arms P O Box 2198 Litchfield Park AZ 85340	81-0576905	501 (c) (3)	$ 10,000 00	none	N/A	N/A	To support general activities and the goals of the organization
Operation Dream 1555 N Rivercenter Dr Milwaukee WI 53212	26-1455938	501 (c) (3)	$ 5,000 00	none	N/A	N/A	To support general activities and the goals of the organization
Our Next Generation 804 E Juneau Ave Milwaukee WI 53202	39-1761838	501 (c) (3)	$ 10,000 00	none	N/A	N/A	To support general activities and the goals of the organization
Pathfinders 4200 N Holton Street Suite 400 Milwaukee WI 53212	39-1185304	501 (c) (3)	$ 5,000 00	none	N/A	N/A	To support general activities and the goals of the organization
Pearls for Teen Girls 2100 N Palmer Street Milwaukee WI 53212 3220	39-1997970	501 (c) (3)	$ 10,000 00	$ 1,000 00	FMV	Show Tickets	To support general activities and the goals of the organization
Penfield Children s Center 833 North 26th Street Milwaukee WI 53233	39 1093701	501 (c) (3)	$ 10,000 00	none	N/A	N/A	To support general activities and the goals of the organization
Planned Parenthood of Wisconsin 302 North Jackson Street Milwaukee WI 53202	39-0863391	501 (c) (3)	$ 5,000 00	none	N/A	N/A	To support general activities and the goals of the organization

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Brewers Community Foundation Inc	39-1970152

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Playworks Wisconsin 610 North Water Street Milwaukee WI 53202	94-3251867	501 (c) (3)	$ 10,000.00	none	N/A	N/A	To support general activities and the goals of the organization
Progressive Community Health Center 3522 W Lisbon Ave Milwaukee WI 53208	39-1958810	501 (c) (3)	$ 5,000.00	none	N/A	N/A	To support general activities and the goals of the organization
Renaissance Theaterworks 158 N Broadway Milwaukee WI 53202	39-1783607	501 (c) (3)	$ 5,000.00	none	N/A	N/A	To support general activities and the goals of the organization
Running Rebels Community Organization 1300A W Fond Du Lac Ave Milwaukee WI 53205	39-3910464	501 (c) (3)	$ 5,000.00	none	N/A	N/A	To support general activities and the goals of the organization
Salvation Army of Greater Milwaukee 11415 W Watertown Plank Road Milwaukee WI 53226	39-0806889	501 (c) (3)	$ 5,000.00	none	N/A	N/A	To support general activities and the goals of the organization
Salvation Army of Greater Milwaukee 11415 W Watertown Plank Road Milwaukee WI 53226	39-0806889	501 (c) (3)	$ 18,662.00	none	N/A	N/A	To support general activities and the goals of the organization
Sharon Lynne Wilson Center for the Arts 17100 West North Ave Brookfield WI 53005	39-1787648	501 (c) (3)	$ 5,000.00	none	N/A	N/A	To support general activities and the goals of the organization
Sharp Literacy Inc % Marlene M Doerr 750 N Lincoln Memorial Dr RM 311 Milwaukee WI 53202 4019	39-1963963	501 (c) (3)	$ 10,000.00	none	N/A	N/A	To support general activities and the goals of the organization
Sharp Literacy Inc % Marlene M Doerr 750 N Lincoln Memorial Dr RM 311 Milwaukee WI 53202 4019	39-1963963	501 (c) (3)	$ 2,000.00	none	N/A	N/A	To support general activities and the goals of the organization
Sharp Literacy Inc % Marlene M Doerr 750 N Lincoln Memorial Dr - RM 311 Milwaukee WI 53202-4019	39-1963963	501 (c) (3)	$ 10,000.00	none	N/A	N/A	To support general activities and the goals of the organization
Sixteenth Street Community Health Center 1337 S Cesar E Chavez Dr 2nd Floor Milwaukee WI 53204	39-1180475	501 (c) (3)	$ 10,000.00	none	N/A	N/A	To support general activities and the goals of the organization
Social Development Foundation 4041 N Richards Str Milwaukee WI 53212	47-0923289	501 (c) (3)	$ 10,000.00	none	N/A	N/A	To support general activities and the goals of the organization
Sojourner Family Peace Center Inc P O Box 080319 Milwaukee WI 53208-8005	39-1276210	501 (c) (3)	$ 120,000.00	none	N/A	N/A	To support general activities and the goals of the organization
Sojourner Family Peace Center Inc P O Box 080319 Milwaukee WI 53208-8005	39-1276210	501 (c) (3)	$ 19,875.00	none	N/A	N/A	To support general activities and the goals of the organization
Sojourner Truth House P O Box 080319 Milwaukee WI 53208-8005	39-1276210	501 (c) (3)	$ 5,000.00	none	N/A	N/A	To support general activities and the goals of the organization
Sojourner Truth House P O Box 080319 Milwaukee WI 53208-8005	39-1276210	501 (c) (3)	$ 3,320.00	none	N/A	N/A	To support general activities and the goals of the organization
Special Olympics Wisconsin 10224 N Port Washington Road Mequon WI 53092	39-1176591	501 (c) (3)	$ 20,000.00	none	N/A	N/A	To support general activities and the goals of the organization
Special Olympics Wisconsin 10224 N Port Washington Road Mequon WI 53092	39-1176591	501 (c) (3)	$ 90,689.11	none	N/A	N/A	To support general activities and the goals of the organization
Special Olympics Wisconsin 10224 N Port Washington Road Mequon WI 53092	39-1176591	501 (c) (3)	$ 1,000.00	none	N/A	N/A	To support general activities and the goals of the organization
Sporting Hope Foundation 21020 North Pima Road Scottsdale AZ 85255	46-4542677	501 (c) (3)	$ 10,000.00	none	N/A	N/A	To support general activities and the goals of the organization
Stand Up To Cancer 1900 Avenue of the Stars Suite 1400 Los Angeles CA 90067	95-1644609	501 (c) (3)	$ 33,000.00	none	N/A	N/A	To support general activities and the goals of the organization

Name of Organization	EIN
Brewers Community Foundation Inc	39 1970152

Attachment to Form 990 Schedule I, Part II Line 1 (a)

1 (a) Organization and Address	(b) EIN	(c) IRC section if applicable	(d) Amount of Cash Grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV appraisal other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
St Joseph Academy 1600 W Oklahoma Ave Milwaukee WI 53215	39-0806262	501 (c) (3)	$ 5,000 00	none	N/A	N/A	To support general activities and the goals of the organization
Team Smile 2000 Swift Street North Kansas City MO 64116	75-3250075	501 (c) (3)	$ 12,580 12	none	N/A	N/A	To support general activities and the goals of the organization
Turn 2 Foundation 215 Park Ave South Suite 1905 New York NY 10003	34-1847687	501 (c) (3)	$ 10,000 00	none	N/A	N/A	To support general activities and the goals of the organization
United Way of Greater Milwaukee 221 W Vine St Milwaukee WI 53212	39-0806190	501 (c) (3)	$ 12,858 00	none	N/A	N/A	To support general activities and the goals of the organization
United Way of Greater Milwaukee 221 W Vine St Milwaukee WI 53212	39 0806190	501 (c) (3)	$ 25,000 00	none	N/A	N/A	To support general activities and the goals of the organization
UPAF 929 N Water St Milwaukee WI 53202	39-6100399	501 (c) (3)	$ 21,352 00	none	N/A	N/A	To support general activities and the goals of the organization
Ushers New Look 3700 Crestwood Pkwy Nw Ste 450 Duluth GA 30096	58-2480934	501 (c) (3)	$ 10,000 00	none	N/A	N/A	To support general activities and the goals of the organization
USO of Wisconsin 750 N Lincoln Memorial Dr Suite 303 Milwaukee WI 53202	39-1703157	501 (c) (3)	$ 10,000 00	none	N/A	N/A	To support general activities and the goals of the organization
UWM Foundation 161 W Wisconsin Ave suite 6000 Milwaukee WI 53203	23-7337744	501 (c) (3)	$ 10,000 00	none	N/A	N/A	To support general activities and the goals of the organization
Vision Forward Association 912 N Hawley Road Milwaukee WI 53212	39-2040359	501 (c) (3)	$ 10,000 00	none	N/A	N/A	To support general activities and the goals of the organization
Wisconsin Community Services 3732 W Wisconsrve Ave Suite 200 Milwaukee WI 53208	39 0808464	501 (c) (3)	$ 10 000 00	none	N/A	N/A	To support general activities and the goals of the organization
Wisconsin Hispanic Scholarship Fund 2997 S 20th Street Milwaukee WI 53215	39 1522543	501 (c) (3)	$ 4,000 00	none	N/A	N/A	To support general activities and the goals of the organization
Wisconsin Hispanic Scholarship Fund 2997 S 20th Street Milwaukee WI 53215	39 1522543	501 (c) (3)	$ 2 500 00	none	N/A	N/A	To support general activities and the goals of the organization
Wisconsin Women s Business Initiative 2745 N Dr Martin Luther King Milwaukee WI 53212	39-1597954	501 (c) (3)	$ 5,000 00	none	N/A	N/A	To support general activities and the goals of the organization
Yesterday s Negro League Foundation Greenberg and Hoeschn Trust Account 3127 W Wisconsin Ave Milwaukee WI 53208	39-1913557	170 (b) (1) (A) (vi)	$ 5 000 00	none	N/A	N/A	To support general activities and the goals of the organization
YMCA of Metropolitan Milwuakee 161 W Wisconsin Ave Suite 4000 Milwaukee WI 53203	39-0806314	501 (c) (3)	$ 50,000 00	none	N/A	N/A	To support general activities and the goals of the organization
YMCA of Greater Milwaukee 1915 N Martin Luther King Jr Drive Milwaukee WI 53212	39 0806258	501 (c) (3)	$ 10 000 00	none	N/A	N/A	To support general activities and the goals of the organization
Zoological Society of Milwaukee 10005 W Bluemound Rd Milwaukee WI 53226	39-6077242	501 (c) (3)	$ 5,000 00	none	N/A	N/A	To support general activities and the goals of the organization

SCHEDULE M (Form 990)

Department of the Treasury
Internal Revenue Service

Noncash Contributions

▶ Complete if the organizations answered "Yes" on Form 990, Part IV, lines 29 or 30.
▶ Attach to Form 990.
▶ Information about Schedule M (Form 990) and its instructions is at *www.irs.gov/form990.*

OMB No 1545-0047

2014

Open To Public Inspection

Name of the organization

Brewers Community Foundation

Employer identification number

39-1970152

Part I Types of Property

		(a) Check if applicable	(b) Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g	(d) Method of determining noncash contribution amounts
1	Art—Works of art				
2	Art—Historical treasures				
3	Art—Fractional interests				
4	Books and publications				
5	Clothing and household goods				
6	Cars and other vehicles				
7	Boats and planes				
8	Intellectual property				
9	Securities—Publicly traded	✓	1	81,000	Market Value
10	Securities—Closely held stock				
11	Securities—Partnership, LLC, or trust interests				
12	Securities—Miscellaneous				
13	Qualified conservation contribution—Historic structures				
14	Qualified conservation contribution—Other				
15	Real estate—Residential				
16	Real estate—Commercial				
17	Real estate—Other				
18	Collectibles				
19	Food inventory				
20	Drugs and medical supplies				
21	Taxidermy				
22	Historical artifacts				
23	Scientific specimens				
24	Archeological artifacts				
25	Other ▶ ( )				
26	Other ▶ ( )				
27	Other ▶ ( )				
28	Other ▶ ( )				

			Yes	No
29	Number of Forms 8283 received by the organization during the tax year for contributions for which the organization completed Form 8283, Part IV, Donee Acknowledgement	29		
30a	During the year, did the organization receive by contribution any property reported in Part I, lines 1 through 28, that it must hold for at least three years from the date of the initial contribution, and which is not required to be used for exempt purposes for the entire holding period?	30a		✓
b	If "Yes," describe the arrangement in Part II.			
31	Does the organization have a gift acceptance policy that requires the review of any non-standard contributions?	31		✓
32a	Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash contributions?	32a		✓
b	If "Yes," describe in Part II.			
33	If the organization did not report an amount in column (c) for a type of property for which column (a) is checked, describe in Part II.			

Part II **Supplemental Information.** Provide the information required by Part I, lines 30b, 32b, and 33, and whether the organization is reporting in Part I, column (b), the number of contributions, the number of items received, or a combination of both. Also complete this part for any additional information.

Column (b) identifies the number of contributions made in 2014.

SCHEDULE O (Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

Complete to provide information for responses to specific questions on Form 990 or 990-EZ or to provide any additional information.

▶ Attach to Form 990 or 990-EZ.

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

OMB No 1545-0047

2014

Open to Public Inspection

Name of the organization

Brewers Community Foundation Inc

Employer identification number

39-1970152

Form 990, Part III, Line 4d - Other Program Services

Includes unrestricted and restricted grants though other programs such as Sausage Race, An Evening with Hank Aaron, Pink Tie Guy, Brewers Buddies, Selig Scholarships and other various initiatives.

Form 990, Part VI Line 6- Organzied as Non-Profit with members that can elect board and approve significant decisions

Form 990, Park VI, Line 11b - Form 990 Review Process.

Form 990 is reviewed by the Board Prior to filing.

Form 990, Part VI, Line 12c - Explanation of Monitoring and Enforcement of Conflicts:

The policy is reviewed annually with the Boar, Boar signs off on the policy and disclose interests annually at a formal board meeting.

Form 990, Park VI, Line 19 - Other Organization Documents Publicly Available:

Documents available at organization place of business upon request.

Name of the organization	Employer identification number

SCHEDULE R (Form 990)

Department of the Treasury
Internal Revenue Service

Related Organizations and Unrelated Partnerships

▶ Complete if the organization answered "Yes" on Form 990, Part IV, line 33, 34, 35b, 36, or 37.

▶ Attach to Form 990.

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

OMB No 1545-0047

2014

Open to Public Inspection

Name of the organization

Brewers Community Foundation Inc

Employer identification number

39-1970152

Part I **Identification of Disregarded Entities** Complete if the organization answered "Yes" on Form 990, Part IV, line 33.

(a) Name, address, and EIN (if applicable) of disregarded entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Total income	(e) End-of-year assets	(f) Direct controlling entity
(1)					
(2)					
(3)					
(4)					
(5)					
(6)					

Part II **Identification of Related Tax-Exempt Organizations** Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related tax-exempt organizations during the tax year.

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501(c)(3))	(f) Direct controlling entity	(g) Section 512(b)(13) controlled entity?	
						Yes	No
(1)							
(2)							
(3)							
(4)							
(5)							
(6)							
(7)							

Part III **Identification of Related Organizations Taxable as a Partnership** Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related organizations treated as a partnership during the tax year.

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Predominant income (related, unrelated, excluded from tax under sections 512-514)	(f) Share of total income	(g) Share of end-of-year assets	(h) Disproportionate allocations? Yes	(h) No	(i) Code V—UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner? Yes	(j) No	(k) Percentage ownership
(1) Milwaukee Brewers Baseball Club LP	Promo. baseball	WI	N/A	N/A	N/A	N/A			N/A			
(2) Miller Park One Brewers Way												
(3) Milwaukee, WI 53214 39-1136376												
(4)												
(5)												
(6)												
(7)												

Part IV **Identification of Related Organizations Taxable as a Corporation or Trust** Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related organizations treated as a corporation or trust during the tax year.

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	(f) Share of total income	(g) Share of end-of-year assets	(h) Percentage ownership	(i) Section 512(b)(13) controlled entity? Yes	(i) No
(1) Milwaukee Brewers Baseball Club Inc Miller Park, One Brewers Way	Promo. baseball	WI	N/A	S Corp	N/A	N/A	N/A		✓
(2) Milwaukee, WI 53214 37-0899413									
(3)									
(4)									
(5)									
(6)									
(7)									

Part V **Transactions With Related Organizations** Complete if the organization answered "Yes" on Form 990, Part IV, line 34, 35b, or 36.

Note. Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule.

			Yes	No
1	During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II–IV?			
a	Receipt of **(i)** interest, **(ii)** annuities, **(iii)** royalties, or **(iv)** rent from a controlled entity	1a		✓
b	Gift, grant, or capital contribution to related organization(s)	1b		✓
c	Gift, grant, or capital contribution from related organization(s)	1c		✓
d	Loans or loan guarantees to or for related organization(s)	1d		✓
e	Loans or loan guarantees by related organization(s)	1e		✓
f	Dividends from related organization(s)	1f		✓
g	Sale of assets to related organization(s)	1g		✓
h	Purchase of assets from related organization(s)	1h		✓
i	Exchange of assets with related organization(s)	1i		✓
j	Lease of facilities, equipment, or other assets to related organization(s)	1j		✓
k	Lease of facilities, equipment, or other assets from related organization(s)	1k		✓
l	Performance of services or membership or fundraising solicitations for related organization(s)	1l		✓
m	Performance of services or membership or fundraising solicitations by related organization(s)	1m		✓
n	Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)	1n	✓	
o	Sharing of paid employees with related organization(s)	1o		✓
p	Reimbursement paid to related organization(s) for expenses	1p	✓	
q	Reimbursement paid by related organization(s) for expenses	1q		✓
r	Other transfer of cash or property to related organization(s)	1r		✓
s	Other transfer of cash or property from related organization(s)	1s		✓

2 If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thresholds.

(a) Name of related organization	(b) Transaction type (a–s)	(c) Amount involved	(d) Method of determining amount involved
(1) Milwaukee Brewers Baseball Club LP	n	0.00	Not Determinable
(2) Milwaukee Brewers Baseball Club LP	p	198,841	Actual Amount
(3)			
(4)			
(5)			
(6)			

Part VI **Unrelated Organizations Taxable as a Partnership** Complete if the organization answered "Yes" on Form 990, Part IV, line 37.

Provide the following information for each entity taxed as a partnership through which the organization conducted more than five percent of its activities (measured by total assets or gross revenue) that was not a related organization. See instructions regarding exclusion for certain investment partnerships.

(a) Name, address, and EIN of entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Predominant income (related, unrelated, excluded from tax under sections 512-514)	(e) Are all partners section 501(c)(3) organizations?		(f) Share of total income	(g) Share of end-of-year assets	(h) Disproportionate allocations?		(i) Code V–UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner?		(k) Percentage ownership
				Yes	No			Yes	No		Yes	No	
(1)													
(2)													
(3)													
(4)													
(5)													
(6)													
(7)													
(8)													
(9)													
(10)													
(11)													
(12)													
(13)													
(14)													
(15)													
(16)													

Part VII **Supplemental Information**

Provide additional information for responses to questions on Schedule R (see instructions).