

## 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



#### DLN: 93491317024535

OMB No 1545-0052

Department of the Treasury Internal Revenue Service

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

▶ Do not enter social security numbers on this form as it may be made public. ► Information about Form 990-PF and its instructions is at <u>www.irs.gov/form990pf</u>.

Open to Public

For	cale	ndar year 2014, or tax year beginning 01-	01-2014	, a	nd ending 1	2-31-2014	
		indation E KUENZL FOUNDATION INC			A Employer id	entification numb	er
IH	E JOHN	E RUENZL FOUNDATION INC			39-1998578		
Num	ber and	street (or P O box number if mail is not delivered to street address	Room/suite		<b>B</b> Telephone nu	mber (see instructio	ns)
PC	BOX 28	386			(920) 231-5890	)	
Cıtv	or town	, state or province, country, and ZIP or foreign postal code			<b>C</b> If exemption	application is pendir	a, check here 🕨 🗀
		VI 549032886			<u>-</u>		, , , ,
<u></u>	2001 2	Il that apply   Initial return   Initial return of a	former public charity		<b>B.</b> 4 . F		
G C	теск а	Final return A mended return	Tormer public charity	<b>'</b>	_	ganizations, check h rganizations meeting	
		Address change Name change			test, chec	k here and attach co	mputation
		pe of organization Section 501(c)(3) exempt priva				undation status was n 507(b)(1)(A), chec	
		4947(a)(1) nonexempt charitable trust Other taxa					
		ret value of all assets at end from Part II, col. (c),	I Cash I Acci	ual		ation is in a 60-mont n 507(b)(1)(B), che	
lin	e 16)	\$ 39,454,138 (Part I, column (d) must	be on cash basis.)				
Pa	rt I	Analysis of Revenue and Expenses (The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a) (see instructions))	(a) Revenue and expenses per books	(b) N	Net investment income	(c) Adjusted net income	(d) Disbursements for charitable purposes (cash basis only)
	1	Contributions, gifts, grants, etc , received (attach					
		schedule)					
	2	Check ► 🔽 if the foundation is <b>not</b> required to attach					
		Sch B					
	3	Interest on savings and temporary cash investments	19,667		19,667		
	4	Dividends and interest from securities	337,966		295,244		
	5a	Gross rents					
di	b	Net rental income or (loss)	468,998				
Revenue	6a	Net gain or (loss) from sale of assets not on line 10	408,998				
9 9	Ь	Gross sales price for all assets on line 6a 10,778,667					
ě	7	Capital gain net income (from Part IV, line 2)			468,998		
	8	Net short-term capital gain					
	9	Income modifications					
	10a	Gross sales less returns and allowances					
	Ь	Less Cost of goods sold					
	c	Gross profit or (loss) (attach schedule)					
	11	Other Income (attach schedule)	706,561		50,785		
	12	Total. Add lines 1 through 11	1,533,192		834,694		
	13	Compensation of officers, directors, trustees, etc	0		0		0
. 6	14	Other employee salaries and wages					
Š	15	Pension plans, employee benefits					
Expenses	16a	Legal fees (attach schedule)	<b>95.</b> 14,815		7,408		7,407
	b	Accounting fees (attach schedule)  Other professional fees (attach schedule)	<b>14,815 48,302</b>		48,302		7,407
Operating and Administrative	17	Interest	10,302		10,302		
rat	18	Taxes (attach schedule) (see instructions)	135,886		6,109		0
2	19	Depreciation (attach schedule) and depletion					
₫	20	Occupancy					
Ă	21	Travel, conferences, and meetings					
anc	22	Printing and publications					
2	23	Other expenses (attach schedule)					ļ
atil.	24	Total operating and administrative expenses.			<u> </u>		
Ē		Add lines 13 through 23	199,003		61,819		7,407
0	25	Contributions, gifts, grants paid	1,036,000				1,036,000
	26	<b>Total expenses and disbursements.</b> Add lines 24 and 25	1,235,003		61,819		1,043,407
	27	Subtract line 26 from line 12					
	a	Excess of revenue over expenses and disbursements	298,189				
	Ь	Net investment income (If negative, enter -0-)			772,875		ļ
	c	Adjusted net income (If negative, enter -0 -)					]

Da	rt II	Ralance Sheets Attached schedules and amounts in the description column	Beginning of year	End o	f year
		Balance Sheets  Attached schedules and amounts in the description column should be for end-of-year amounts only (See instructions)	(a) Book Value	(b) Book Value	(c) Fair Market Value
	1	Cash—non-interest-bearing	34,157	69,144	
	2	Savings and temporary cash investments	619,132	1,475,082	1,475,082
	3	Accounts receivable			
		Less allowance for doubtful accounts -			
	4	Pledges receivable 🟲			
		Less allowance for doubtful accounts -			
	5	Grants receivable			
	6	Receivables due from officers, directors, trustees, and other			
		disqualified persons (attach schedule) (see instructions)			
	7	Other notes and loans receivable (attach schedule)   442,514			
		Less allowance for doubtful accounts 🟲0	547,058	442,514	442,514
٢	8	Inventories for sale or use			
sets	9	Prepaid expenses and deferred charges			
Ą	10a	Investments—U S and state government obligations (attach schedule)			
	b	Investments—corporate stock (attach schedule)	24,589,014	24,828,647	27,987,123
	С	Investments—corporate bonds (attach schedule)	4,101,708	2,249,360	2,264,190
	11	Investments—land, buildings, and equipment basis 🕨			
		Less accumulated depreciation (attach schedule) ▶			
	12	Investments—mortgage loans			
	13	Investments—other (attach schedule)	12,493,644	12,511,450	7,216,085
	14	Land, buildings, and equipment basis 🟲			
		Less accumulated depreciation (attach schedule) ▶			
	15	Other assets (describe 🟲)			
	16	Total assets (to be completed by all filers—see the			
		instructions Also, see page 1, item I)	42,384,713	41,576,197	39,454,138
	17	Accounts payable and accrued expenses			
	18	Grants payable			
φ	19	Deferred revenue			
abilities	20	Loans from officers, directors, trustees, and other disqualified persons			
ap	21	Mortgages and other notes payable (attach schedule)			
_	22	Other liabilities (describe			
	23	Total liabilities (add lines 17 through 22)	0	0	
		Foundations that follow SFAS 117, check here			
es		and complete lines 24 through 26 and lines 30 and 31.			
nc	24	Unrestricted			
<u>8</u>		Temporarily restricted			
O E	26	Permanently restricted			
Fund Balances		Foundations that do not follow SFAS 117, check here			
or F		and complete lines 27 through 31.			
	27	Capital stock, trust principal, or current funds	0	0	
Assets	28	Paid-in or capital surplus, or land, bldg , and equipment fund	0	0	
ΑS	29	Retained earnings, accumulated income, endowment, or other funds	42,384,713	41,576,197	
Net	30	Total net assets or fund balances (see instructions)	42,384,713	41,576,197	
Z	31	Total liabilities and net assets/fund balances (see instructions)	42,384,713	, ,	
Dа	rt II		,,	<b>,</b> ,	
1		Total net assets or fund balances at beginning of year—Part II, column	(a) line 30 (must a	gree	
_			(a), fille 30 (filust a		42,384,713
2				<del></del>	298,189
3		Other increases not included in line 2 (itemize)		<del>                                     </del>	298,189
<i>3</i> 4		Add lines 1, 2, and 3			42,682,902
5		Decreases not included in line 2 (itemize)		· · · · · · · · · · · · · · · · · · ·	1,106,705
6		Total net assets or fund balances at end of year (line 4 minus line 5)—F			41,576,197
•		- Total het assets of fand balances at end of year (fille 7 fillings fille 5)—r	arcii, colullii (D), II		T = , U , I J /

Form 990-PF (2014)  Part IV Capital Gains	and Loca	os for Toy on Invo	stmont Income			Page 3	
(a) List and describ	e the kınd(s)	of property sold (e g , remmon stock, 200 shs M	al estate,	(b) How acquired P—Purchase D—Donation	(c) Date acquired (mo , day, yr )	(d) Date sold (mo , day, yr )	
1a PUBLICLY TRADED	SECURITI	ES		P			
<b>b</b> CAPITAL GAINS D				P			
С				1			
d							
(e) Gross sales price		(f) Depreciation allowe	107	t or other basis		or (loss)	
	712446	(or allowable)	(pense of sale		) minus (g)		
a 10,513,446				10,309,66	9	203,777	
	265,221					265,221	
С							
d							
е							
Complete only for assets	showing gai					(h) gaın mınus	
(i) FMV as of 12/31/69	)	<b>(j)</b> Adjusted basis as of 12/31/69		cess of col (ı) col (j), ıf any		ess than -0-) <b>or</b> om col (h))	
a						203,777	
b						265,221	
С							
d							
e							
		oss) as defined in sectio 8, column (c) (see instru 			3		
Part V Qualification	Under Se	ction 4940(e) for R	educed Tax or	Net Investme	nt Income		
For optional use by domestic	prıvate foun	dations subject to the se	ection 4940(a) tax	on net investment	income )		
f section 4940(d)(2) applies	, leave this p	art blank					
Vas the foundation liable for t f "Yes," the foundation does					eriod?	│ Yes	
<b>1</b> Enter the appropriate am	ount in each	column for each year, s	ee instructions befo	ore making any ent	ries		
(a) Base period years Calendar year (or tax year beginning in)	Adjusted	(b) qualifying distributions	(c) Net value of noncha	rıtable-use assets	(d) Distribution ratio (col (b) divided by col (c))		
2013	1	1,027,843		22,390,433	(-,	0 045905	
2012		1,065,070		21,274,833		0 050062	
2011		1,116,508		21,786,286		0 051248	
2010		1,151,525		23,211,313		0 049611	
2009		1,114,205		23,132,280		0 048167	
2 Total of line 1, colu	mn (d)				2	0 244993	
		e 5-year base period—div on has been in existence			3	0 048999	
4 Enter the net value	of noncharita	able-use assets for 2014	from Part X, line 5	5	4	38,641,474	
5 Multiply line 4 by lir	ne 3			[	5	1,893,394	
6 Enter 1% of net inv	estment inco	me (1% of Part I, line 2	7b) <b></b> .		6	7,729	
7 Add lines 5 and 6.					7	1,901,123	
8 Enter qualifying dist	rıbutıons fro	m Part XII, line 4			8	1,043,407	
If line 8 is equal to o the Part VI instruct		an line 7, check the box	ın Part VI, lıne 1b,	and complete that	part using a 1% tax		

	990-PF (2014)  1 VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948—see page 18 of the inst	w.etio		age <b>4</b>
1a		ructio	ns)	
14	on line 1			
	Date of ruling or determination letter (attach copy of letter if necessary–see instructions)			
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check		1	5,458
	here Fand enter 1% of Part I, line 27b			
c	All other domestic foundations enter 2% of line 27b Exempt foreign organizations enter 4% of Part I, line 12, col (b)			
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only Others			
_	enter -0-) 2			0
3	Add lines 1 and 2		1	5,458
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-)  4			0
5	Tax based on investment income. Subtract line 4 from line 3 If zero or less, enter -0		1	 5,458
6	C redits/P ayments			<del></del>
а	2014 estimated tax payments and 2013 overpayment credited to 2014 <b>6a</b> 20,040			
b	Exempt foreign organizations—tax withheld at source 6b			
c	Tax paid with application for extension of time to file (Form 8868) 6c 15,000			
d	Backup withholding erroneously withheld 6d			
7	Total credits and payments Add lines 6a through 6d		3!	5,040
8	Enter any <b>penalty</b> for underpayment of estimated tax. Check here  if Form 2220 is attached.			68
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed 9			
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid <b>10</b>		19	<del>9,514</del>
11	Enter the amount of line 10 to be Credited to 2015 estimated tax 19,514 Refunded 11			0
	t VII-A Statements Regarding Activities			
1a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did	1.	Yes	No
b	It participate or intervene in any political campaign?	1a		No
D	for definition)?	1b		No
	If the answer is "Yes" to <b>1a</b> or <b>1b</b> , attach a detailed description of the activities and copies of any materials	10		
	published or distributed by the foundation in connection with the activities.			
С	Did the foundation file Form 1120-POL for this year?	1c		No
d	Enter the amount (If any) of tax on political expenditures (section 4955) imposed during the year			
	(1) On the foundation $\blacktriangleright$ \$0 (2) On foundation managers $\blacktriangleright$ \$0			
e	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed			
	on foundation managers 🕨 \$0			
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?	2		No
	If "Yes," attach a detailed description of the activities.			
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles			
	of incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes	3		No
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	4a	Yes	
ь -	If "Yes," has it filed a tax return on <b>Form 990-T</b> for this year?	4b	Yes	
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?	5		No
6	If "Yes," attach the statement required by General Instruction T.  Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either			
Ü	By language in the governing instrument, or			
	<ul> <li>By state legislation that effectively amends the governing instrument so that no mandatory directions</li> </ul>			
	that conflict with the state law remain in the governing instrument?	6	Yes	
7	Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col. (c),			
	and Part XV.	7	Yes	
8a	Enter the states to which the foundation reports or with which it is registered (see instructions)			
	<u>▶</u> WI			
b	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney			
	General (or designate) of each state as required by General Instruction G? If "No," attach explanation.	8b	Yes	
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3)			
	or 4942(j)(5) for calendar year 2014 or the taxable year beginning in 2014 (see instructions for Part XIV)?  If "Yes," complete Part XIV	9		No
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names			.10
	and addresses.	10		No

Pai	rt VII-A Statements Regarding Activities (continued)			
11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the			
	meaning of section 512(b)(13)? If "Yes," attach schedule (see instructions)	11	Yes	
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had			
	advisory privileges? If "Yes," attach statement (see instructions)	. 12		No
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	Yes	1
13			163	
	Website address ► <u>N/A</u>			
14	The books are in care of ►GERALD STADTMUELLER Telephone no ►(920	<u>) 231-</u>	5890	
	Located at ► 100 CITY CENTER OSHKOSH WI ZIP+4 ► 54903			
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 —Check here			▶ ┌
	and enter the amount of tax-exempt interest received or accrued during the year			
16			v	l No
16	At any time during calendar year 2014, did the foundation have an interest in or a signature or other authority over	1 46	Yes	No
	a bank, securities, or other financial account in a foreign country?	16		No
	See instructions for exceptions and filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR) If "Yes", enter the name of the foreign country			
Pai	rt VII-B Statements Regarding Activities for Which Form 4720 May Be Required			•
	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.		Yes	No
1a	During the year did the foundation (either directly or indirectly)			
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person? Yes V No			
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from)			
	a disqualified person?			
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? Yes V No			
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? Yes V No			
	(5) Transfer any income or assets to a disqualified person (or make any of either available			
	for the benefit or use of a disqualified person)? <b>Yes V</b>			
	(6) Agree to pay money or property to a government official? (Exception. Check "No"			
	ıf the foundation agreed to make a grant to or to employ the official for a period			
	after termination of government service, if terminating within 90 days )			
b	If any answer is "Yes" to $1a(1)-(6)$ , did <b>any</b> of the acts fail to qualify under the exceptions described in Regulations			
	section 53 4941(d)-3 or in a current notice regarding disaster assistance (see instructions)?	1b		
	Organizations relying on a current notice regarding disaster assistance check here			
С	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts,			
	that were not corrected before the first day of the tax year beginning in 2014?	1c		No
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private			
_	operating foundation defined in section 4942(1)(3) or 4942(1)(5))			
а	At the end of tax year 2014, did the foundation have any undistributed income (lines 6d			
-	and 6e, Part XIII) for tax year(s) beginning before 2014? Yes Vo			
	If "Yes," list the years ▶ 20, 20, 20			
h	Are there any years listed in 2a for which the foundation is <b>not</b> applying the provisions of section 4942(a)(2)			
_	(relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2)			
	to <b>all</b> years listed, answer "No" and attach statement—see instructions )	2b		
c	If the provisions of section 4942(a)(2) are being applied to <b>any</b> of the years listed in 2a, list the years here			
·	> 20			
2-				
3a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year?			
L				
D	If "Yes," did it have excess business holdings in 2014 as a result of (1) any purchase by the foundation			
	or disqualified persons after May 26, 1969, (2) the lapse of the 5-year period (or longer period approved			
	by the Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest, or (3)			
	the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Schedule C, Form 4720, to determine			
_	If the foundation had excess business holdings in 2014.).	3b		<u>.</u> .
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a		No
b	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its			
	charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2014?	4b		No

1 Compared the foundation pay or incur any amount to (1) Carry on propaganda, or otherwise attempt to influence legislation (section 4945(e))?	Ра	Statements Rec	garding Activities for	Which Form 4/20 P	чау ве кеquireu ( <i>cont</i>	muea)			
(2) Influence the outcome of any specific public electron (see section 4955), or to carry on, directly or indirectly, any voter registration drive?	5a	During the year did the foundati	ion pay or incur any amount	to					
on, directly or indirectly, any vater registration drive?		(1) Carry on propaganda, or oth	nerwise attempt to influence	legislation (section 494	5(e))? <b>Yes</b> •	√ No			
(3) Provide a grant to an individual for travel, study, or other similar purposes?		(2) Influence the outcome of ar	ny specific public election (s	ee section 4955), or to	carry				
(4) Provide a grant to an organization other than a charitable, etc., organization described in section 4945(0)(4)(A)? (see instructions)		on, directly or indirectly, an	y voter registration drive?.		T Yes F	√ No			
in section 4945(d)(4)(A)? (see instructions)		(3) Provide a grant to an individ	dual for travel, study, or othe	er sımılar purposes?	┌ Yes ┌	√ No			
(5) Provide for any purpose other than religious, chantable, scientific, literary, or educational purposes, or for the prevention of cruelity to children or animals?		(4) Provide a grant to an organi	ızatıon other than a charıtab	le, etc , organization des	cribed				
educational purposes, or for the prevention of cruelity to children or animals?		ın section 4945(d)(4)(A)? (	(see instructions)		🔽 Yes 🗆	- No			
educational purposes, or for the prevention of cruelity to children or animals?		(5) Provide for any purpose oth	er than religious, charitable	, scientific, literary, or					
b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify under the exceptions described in Regulations section 53 4945 or in a current notice regarding diseaster assistance (see instructions)?			= *		Yes F	√ No			
Regulations section 53 4945 or in a current notice regarding disaster assistance (see instructions)?									
Organizations relying on a current notice regarding disaster assistance check here.  c If the answer is "Yes" to question 5a(4), does the foundation claim exemption from the tax because it maintained expenditure responsibility for the grant?.  If "Yes," attach the statement required by Regulations section 53,4945-5(d).  6a Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?.  Yes \( \bar{V} \) No  b Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract?.  At a tarry time during the tax year, was the foundation a party to a prohibited tax shelter transaction? \( \bar{V} \) Yes \( \bar{V} \) No  b If yes, did the foundation receive any proceeds or have any net income attributable to the transaction?  1 List all officers, directors, trustees, foundation managers and their compensation (see instructions).  (a) Name and address  (b) Title, and average devoted to position  O CERALD STADTMUELLER  PRESIDENT/SECRETARY  O SOSHKOSH, WI 54903  2 Compensation of five highest-paid employees (other than those included on line 1—see instructions). If none, enter "NONE."  (a) Name and address of each employee hourse preweek devoted to position  (b) Title, and average hourse preweek devoted to position  (c) Compensation  (d) Compensation  (d) Compensation  (e) Expense account, other allowances  (f) Title, and average hourse preweek devoted to position  (d) Compensation  (e) Expense account, other allowances  (f) Title, and average hourse preweek devoted to position  (d) Compensation  (e) Expense account, other allowances  (f) Title, and average hourse preweek devoted to position  (e) Expense account, other allowances  (f) Compensation  (g) Expense account, other allowances  (g) Compensation	_		· · · ·	· · ·	•		Yes		
c If the answer is "Yes" to question 5a(4), does the foundation claim exemption from the tax because it maintained expenditure responsibility for the grant?					<u>_</u>	_ —	+		
tax because it maintained expenditure responsibility for the grant?	_		<del>-</del>						
1/2 Part VIII    A tany time during the year, was the foundation a party to a prohibited tax shelter transaction?   Yes   No	٠	•	* **	<u> </u>					
Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?		·	·	_	res ;	NO			
a personal benefit contract?	_								
b Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract? 6b No  If "Yes" to 6b, file Form 8870.  7a At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction? Yes No  b If yes, did the foundation receive any proceeds or have any net income attributable to the transaction?	6a								
At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction? Yes No b If yes, did the foundation receive any proceeds or have any net income attributable to the transaction?					, ,				
Ta At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction?    b If yes, did the foundation receive any proceeds or have any net income attributable to the transaction? 7b    Part VIII	b	Did the foundation, during the y	ear, pay premiums, directly	or indirectly, on a persoi	nal benefit contract?	. 6b	No		
The information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors  1 List all officers, directors, trustees, foundation managers and their compensation (see instructions).  (a) Name and address  (b) Title, and average hours per week devoted to position  VICE PO BOX 2886 OSHKOSH, WI 54903  2 Compensation of five highest-paid employees (other than those included on line 1—see instructions). If none, enter "NONE."  (a) Name and address of each employee hours per week devoted to position  (b) Title, and average hours per week devoted to position  (c) Compensation  (d) Contributions to employee benefit plans and deferred compensation  (e) Expense account, other allowances  (e) Expense account, other allowances  (f) Compensation  (g) Compensation  (h) Title, and average hours per week devoted to position  (h) Title, and average hours per week devoted to position  (h) Title, and average hours per week devoted to position  (h) Title, and average hours per week devoted to position  (h) Compensation  (h) Contributions to employee benefit plans and deferred compensation  (h) Contributions to employee benefit plans and deferred compensation  (h) C		If "Yes" to 6b, file Form 8870.							
Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors  1 List all officers, directors, trustees, foundation managers and their compensation (see instructions).  (a) Name and address  (b) Title, and average hours per week devoted to position  JAMES J WILLIAMSON  VICE PO BOX 2886 PRESIDENT/SECRETARY O 50 GERALD STADIMUELER PRESIDENT/TREASURER O 50 O 0 O 0 O 0 O 0 O 0 O 0 O 0 O 0 O 0 O	7a	At any time during the tax year	, was the foundation a party	to a prohibited tax shelt	er transaction? <b>TYes</b> F	√ No			
1 List all officers, directors, trustees, foundation managers and their compensation (see instructions).  (a) Name and address (b) Title, and average hours per week devoted to position (If not paid, enter -0-) (If not paid, enter and deferred compensation and deferred compensation other allowances (e) Expense account, other allowances of each employee (STRADS NULLER PORD) (In the paid, enter -0-) (If not paid, enter employee benefit plans and deferred compensation of the paid, enter -0-) (If not paid, enter employee benefit plans and deferred compensation of the paid enter employees (In the paid, enter employees (In the paid, enter employees) (In the paid, enter employee in the paid enter employees) (In the paid, enter employees) (In the paid, enter employee in the paid enter employees) (In the paid, enter employees) (In the	b	If yes, did the foundation receive	ve any proceeds or have any	net income attributable	to the transaction?	. 7b			
ALSO A TRANSPORT OF THE PRESIDENT / TREASURER OSHKOSH, WI 54903  Can Name and address of each employee (b) Title, and average hours per week devoted to position  1. It is all officers, directors, trustees, foundation managers and their compensation (see instructions).  (a) Name and address (b) Title, and average hours per week devoted to position  (b) Title, and average hours per week devoted to position  (c) Compensation (miphoyee benefit plans and deferred compensation of the allowances of t	Da		ut Officers, Directors	, Trustees, Founda	tion Managers, Highly	Paid Em	ployees,		
(a) Name and address (b) Title, and average hours per week devoted to position    Compensation (If not paid, enter employee benefit plans and deferred compensation of the rallowances)    Compensation (If not paid, enter employee benefit plans and deferred compensation)   Compensation (If not paid, enter employee benefit plans and deferred compensation)   Compensation (If not paid, enter employee benefit plans and deferred compensation)   Compensation (If not paid, enter employee benefit plans and deferred compensation)   Compensation (If not paid, enter employee benefit plans and deferred compensation)   Compensation (If not paid, enter employee benefit plans and deferred compensation)   Compensation (If not paid, enter employee benefit plans and deferred compensation)   Compensation (If not paid, enter employee benefit plans and deferred compensation)   Compensation (If not paid, enter employee benefit plans and deferred compensation)   Compensation (If not paid, enter employee benefit plans and deferred compensation)   Compensation (If not paid, enter employee benefit plans and deferred compensation)   Compensation (If not paid, enter employee benefit plans and deferred compensation)   Compensation (If not paid, enter employee employee)   Compensation (If not paid, enter employee)   Compensation (If not		and Contractors							
An Name and address   Hours per week devoted to position   VICE   PO BOX 2886   PRESIDENT/SECRETARY   O 50   O 0   O 0	_1_	List all officers, directors, truste			T	1			
AMES J WILLIAMSON		(a) Namo and address			1	(e) Exper	nse account,		
JAMES J WILLIAMSON VICE 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0		(a) Name and address	•			other allowances			
OSHKOSH, WI 54903  GERALD STADTMUELLER PO BOX 2886 OSHKOSH, WI 54903  2 Compensation of five highest-paid employees (other than those included on line 1—see instructions). If none, enter "NONE."  (a) Name and address of each employee hours per week devoted to position  NONE  (b) Title, and average hours per week devoted to position  (c) Compensation  (d) Contributions to employee benefit plans and deferred compensation  (e) Expense account, other allowances  (e) Expense account, other allowances	JAME	5 J WILLIAMSON	·	0	<u> </u>	<del> </del>	0		
GERALD STADTMUELLER PRESIDENT/TREASURER O 0 0 0  O 0 0  O 0 0  O 0 0  O 0 0  O 0 0  O 0 0  O 0 0  O 0 0  O 0 0  O 0 0  O 0 0  O 0 0 0  O 0 0 0  O 0 0 0  O 0 0 0  O 0 0 0  O 0 0 0  O 0 0 0  O 0 0 0 0	PO E	3OX 2886	•						
PO BOX 2886 OSHKOSH, WI 54903  2 Compensation of five highest-paid employees (other than those included on line 1—see instructions). If none, enter "NONE."  (a) Name and address of each employee paid more than \$50,000  NONE  (b) Title, and average hours per week devoted to position  (c) Compensation  (d) Contributions to employee benefit plans and deferred compensation  (e) Expense account, other allowances	OSH	KOSH,WI 54903	0 50						
2 Compensation of five highest-paid employees (other than those included on line 1—see instructions). If none, enter "NONE."  (a) Name and address of each employee paid more than \$50,000  NONE  (b) Title, and average hours per week devoted to position  (c) Compensation  (d) Contributions to employee benefit plans and deferred compensation  (e) Expense account, other allowances	GERA	LD STADTMUELLER	PRESIDENT/TREASURER	. 0	0		0		
2 Compensation of five highest-paid employees (other than those included on line 1—see instructions). If none, enter "NONE."  (a) Name and address of each employee paid more than \$50,000  (b) Title, and average hours per week devoted to position  (c) Compensation  (d) Contributions to employee benefit plans and deferred compensation  (e) Expense account, other allowances	PO E	3OX 2886	0 50						
(a) Name and address of each employee paid more than \$50,000  (b) Title, and average hours per week devoted to position  (c) Compensation  (d) Contributions to employee benefit plans and deferred compensation  (e) Expense account, other allowances	OSH	KOSH, WI 54903							
(a) Name and address of each employee paid more than \$50,000  NONE  (b) Title, and average hours per week devoted to position  (c) Compensation  employee benefit plans and deferred compensation  other allowances	_2	Compensation of five highest-pa	aid employees (other than t	hose included on line 1—	see instructions). If none, e	nter "NONE	."		
NONE  (c) Compensation  (d) Expense account, other allowances  (e) Expense account, other allowances			. <b>(b)</b> Title, and avera	ae					
NONE  Compensation  Compensation  NONE  Compensation	(a)								
NONE CONTRACTOR OF THE PROPERTY OF THE PROPERT		paid more than \$50,000	devoted to positio	n		other a	nowances		
	NON	E			·				
Total number of other employees paid over \$50,000									
Total number of other employees paid over \$50,000									
Total number of other employees paid over \$50,000									
Total number of other employees paid over \$50,000									
Total number of other employees paid over \$50,000									
Total number of other employees paid over \$50,000									
Total number of other employees paid over \$50,000									
Total number of other employees paid over \$50,000				I	i i	1			
Total number of other employees paid over \$50,000									
Total number of other employees paid over \$50,000									

Part VIII Information About Officers, Directors, Transcription and Contractors (continued)	ustees, Foundation Managers, Highly	Paid Employees,
3 Five highest-paid independent contractors for professional serv	ices (see instructions). If none, enter "NONE".	
(a) Name and address of each person paid more than \$50,000	<b>(b)</b> Type of service	(c) Compensation
NONE		
<b>Total</b> number of others receiving over \$50,000 for professional servi	ces	0
Part IX-A Summary of Direct Charitable Activities		
List the foundation's four largest direct chantable activities during the tax year. Inclu	do relevant statistical information such as the number of	
organizations and other beneficiaries served, conferences convened, research paper		Expenses
1		
2		
3		
4		
Part IX-B Summary of Program-Related Investmen		
Describe the two largest program-related investments made by the foundation d	luring the tax year on lines 1 and 2	A mount
1		
2		
All other program-related investments See instructions		
3		
Total. Add lines 1 through 3		0

Part X Minimum Investment Return (All domestic foundations must complete this part. Foreign foundations. see instructions.) Fair market value of assets not used (or held for use) directly in carrying out charitable, etc. 1 purposes 1a 16.516.773 1h 744.661 1c 21.968.489 14 39.229.923 Reduction claimed for blockage or other factors reported on lines 1a and 1e 2 2 3 3 Subtract line 2 from line 1d. 39.229.923 Cash deemed held for charitable activities Enter 1 1/2% of line 3 (for greater amount, see 4 588.449 Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V. line 4. 5 38.641.474 5 1,932,074 **Distributable Amount** (see instructions) (Section 4942(1)(3) and (1)(5) private operating foundations and Part XT certain foreign organizations check here  $\blacktriangleright \Gamma$  and do not complete this part.) 1 1.932.074 Tax on investment income for 2014 from Part VI, line 5. . . . . . 15.458 2a Income tax for 2014 (This does not include the tax from Part VI). . . 193.861 209.319 2c 3 3 1.722.755 4 4 5 5 1.722.755 Distributable amount as adjusted Subtract line 6 from line 5 Enter here and on Part XIII, line 1. . . 7 1.722.755 7 Part XIII Oualifying Distributions (see instructions) Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes 1 Expenses, contributions, gifts, etc —total from Part I, column (d), line 26. . . . . . . . . . . . . 1a 1.043.407 1b 0 Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc. 2 2 3 Amounts set aside for specific charitable projects that satisfy the За. 3b 4 Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4 4 1,043,407 Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment 1,043,407 Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation qualifies for

the section 4940(e) reduction of tax in those years

	art AIII Olidistributed Income (see ilistr	(a) Corpus	(b) Years prior to 2013	<b>(c)</b> 2013	<b>(d)</b> 2014
1	Distributable amount for 2014 from Part XI, line 7				1,722,755
2	Undistributed income, if any, as of the end of 2014				
а	Enter amount for 2013 only			1,035,864	
b	Total for prior years 20, 20, 20		0		
	Excess distributions carryover, if any, to 2014				
а	From 2009				
b	From 2010				
C	From 2011				
d	From 2012				
е	From 2013				
f	Total of lines 3a through e		0		
4	Qualifying distributions for 2014 from Part				
	XII, line 4 🕨 \$1,043,407				
а	Applied to 2013, but not more than line 2a			1,035,864	
b	Applied to undistributed income of prior years (Election required—see instructions)		<b>%</b> o		
C	Treated as distributions out of corpus (Election required—see instructions)		0		
d	Applied to 2014 distributable amount				7,543
е	Remaining amount distributed out of corpus		0		
5	Excess distributions carryover applied to 2014		0		0
	(If an amount appears in column (d), the same amount must be shown in column (a).)				
6	Enter the net total of each column as indicated below:				
а	Corpus Add lines 3f, 4c, and 4e Subtract line 5		0		
	Prior years' undistributed income Subtract		0		
c	Enter the amount of prior years' undistributed				
	income for which a notice of deficiency has				
	been issued, or on which the section 4942(a)		0		
_	tax has been previously assessed				
a	Subtract line 6c from line 6b Taxable amount —see instructions		0		
е	Undistributed income for 2013 Subtract line				
	4a from line 2a Taxable amount—see			o	
£	Undistributed income for 2014 Subtract				
•	lines 4d and 5 from line 1 This amount must be distributed in 2015				1,715,212
7	Amounts treated as distributions out of		1		
	corpus to satisfy requirements imposed by				
	section 170(b)(1)(F) or 4942(g)(3) (Election may be required - see instructions)		0		
8	Excess distributions carryover from 2009 not				
	applied on line 5 or line 7 (see instructions)		0		
9	Excess distributions carryover to 2015.		0		
10	Subtract lines 7 and 8 from line 6a		-		
	Analysis of line 9 Excess from 2010				
	Excess from 2010				
	Excess from 2011				
	Excess from 2013				
	Excess from 2014				
_				I	

P	art XIV Private Operating Four	<b>idations</b> (see ii	nstructions and F	Part VII-A, question	on 9)	
1a	If the foundation has received a ruling or d foundation, and the ruling is effective for 20					
b	Check box to indicate whether the organiza	ition is a private o	perating foundation	n described in sectio	on <b>「</b> 4942(j)(3) d	or <b>Г</b> 4942(j)(5)
	Enter the lesser of the adjusted net	Tax year		Prior 3 years		(e) Total
	income from Part I or the minimum investment return from Part X for each	(a) 2014	<b>(b)</b> 2013	(c) 2012	(d) 2011	(e) iotai
	year listed					
b	85% of line 2a					
С	Qualifying distributions from Part XII,					
d	line 4 for each year listed					
-	directly for active conduct of exempt activities					
e	Qualifying distributions made directly for active conduct of exempt activities					
	Subtract line 2d from line 2c					
3	Complete 3a, b, or c for the alternative test relied upon					
а	"Assets" alternative test—enter					
	(1) Value of all assets					
	(2) Value of assets qualifying under section 4942(j)(3)(B)(i)					
b	"Endowment" alternative test— enter 2/3					
	of minimum investment return shown in Part X, line 6 for each year listed					
С	"Support" alternative test—enter					
	(1) Total support other than gross					
	<pre>investment income (interest, dividends, rents, payments</pre>					
	on securities loans (section					
	512(a)(5)), or royalties)					
	(2) Support from general public and 5 or more exempt					
	organizations as provided in					
	section 4942(j)(3)(B)(iii)					
	(3) Largest amount of support from an exempt organization					
	(4) Gross investment income					
Pa	rt XV Supplementary Information			the organizati	on had \$5,000 (	or more in
1	assets at any time during Information Regarding Foundation Manage		instructions.)			
	List any managers of the foundation who ha	ve contributed mo				dation
	before the close of any tax year (but only it	they have contrib	outed more than \$5	,000) (See section	507(d)(2))	
ь	List any managers of the foundation who ov	vn 10% or more of	the stock of a corp	ooration (or an equa	lly large portion of t	he
	ownership of a partnership or other entity)	of which the found	atıon has a 10% oı	r greater interest		
2	Information Regarding Contribution, Grant	, Gift, Loan, Schol	arship, etc., Progra	ms:		
	Check here 🛌 if the foundation only make	es contributions t	o preselected char	ritable organizations	and does not acce	pt
	unsolicited requests for funds If the found	atıon makes gıfts,	grants, etc (see in	structions) to indiv	iduals or organization	ons under
	other conditions, complete items 2a, b, c,	ana a 				
a	The name, address, and telephone number	or e-mail address	s of the person to w	hom applications sh	ould be addressed	
	GERALD J STADTMUELLER		•			
	P O BOX 2886					
	OSHKOSH,WI 54903 (920)231-5890					
h	The form in which applications should be s	ubmitted and info	mation and materia	als they should incli	ıde	
_	APPLICATIONS SHOULD BE SUBMITTE			•		ANT AND A
	DESCRIPTION OF HOW THE FUNDS WIL					
С	Any submission deadlines DECEMBER 1					
ام	Any restrictions or limitations on awards,	such as by geogra	nhical areas chari	table fields kinds of	institutions or oth	er
u	factors	sach as by geogra	pinicai aleas, ciidii	cable lielus, Killus Ol	maticutions, or other	Ci
	NONE					

Recipient	If recipient is an individual, show any relationship to any foundation manager	Foundation status of	Purpose of grant or contribution	A mount
	or substantial contributor	recipient		
Name and address (home or business)  a Paid during the year  See Additional Data Table	any loundation manager or substantial contributor	recipient	Contribution	
<b>Total</b>		<del></del>		1,036,000

Form 990-PF (2014)  Part XVI-A Analysis of Income-Produci	na Activities	•			Page <b>1</b> 2
Enter gross amounts unless otherwise indicated		siness income	Excluded by section	512, 513, or 514	(e)
1 Program service revenue	(a) Business code	Business (b)		(d) A mount	Related or exempt function income (See instructions)
a b					
c					
<ul><li>e</li><li>f</li><li>g Fees and contracts from government agencies</li></ul>					
2 Membership dues and assessments 3 Interest on savings and temporary cash investments			14	19,667	
4 Dividends and interest from securities 5 Net rental income or (loss) from real estate			14	337,966	
<ul> <li>a Debt-financed property.</li> <li>b Not debt-financed property.</li> <li>6 Net rental income or (loss) from personal</li> </ul>					
property					
8 Gain or (loss) from sales of assets other than inventory			18	468,998	
<ul><li>9 Net income or (loss) from special events</li><li>10 Gross profit or (loss) from sales of inventory</li></ul>					
11 Other revenue a INCOME PER GAMBRINUS ENTERPRISES, INC K- 1	523000	658,036			
b income per century investment fund v k-	523000	-2,260		50.705	
c income per lee beverage co d			14	50,785	
e					
12 Subtotal Add columns (b), (d), and (e)		655,776		877,416 <b>3</b>	1,533,192
(See worksheet in line 13 instructions to verify care Part XVI-B Relationship of Activities to	the Accomp				
Line No. Explain below how each activity for which the accomplishment of the foundation's instructions )					

		(2014)										Pa	ge <b>13</b>
Part	XVII	Information Re Noncharitable					sactio	ns and	Relationships	s With			
		rganization directly or i 01(c) of the Code (othe	ndırectly e	engage	ın any of	the following wi						Yes	No
orga	nızat	ions?											
<b>a</b> Tran	nsfers	from the reporting four	ndation to	a nonc	harıtable	exempt organiz	ation of						
											1a(1)		No
(2)	Othe	rassets									1a(2)		No
<b>b</b> Oth	er tra	nsactions											
		s of assets to a noncha									_		No
		hases of assets from a											No
		al of facilities, equipme											No
		ıbursement arrangemer									1b(4)		No
		s or loan guarantees.									1b(5)		No
` .		rmance of services or n		•	_						1b(6)		No
		f facilities, equipment,									1c		No
of th in ai	ne god ny tra	wer to any of the above ods, other assets, or se nsaction or sharing arr	rvices giv angement	en by t , show	he report ın columr	ing foundation o <b>(d)</b> the value o	If the fo If the go	undation i ods, othe	received less tha r assets, or serv	in fair marke ices receive	et value ed	!	
(a) Line	No	(b) Amount involved	(c) Name	of noncl	naritable ex	empt organization	(d)	Description	of transfers, transac	ctions, and sha	ring arra	ngemer	nts
-													
	_												
	-												
		indation directly or indi									.Г <sub>Ү</sub> е	<sub>:s</sub> [•	No
		complete the following :				· // //							
		(a) Name of organization	n		(	<b>b)</b> Type of organiz	ation		(c) Descr	iption of relati	onship		
-													
								<u> </u>					
Sign	the	ler penalties of perjury, best of my knowledge a rmation of which prepar	and belief,	ıt ıs tru	ue, correc					an taxpaye	r) is bas	sed on	
Here	Ň.	*****				2015-11-11	_ \	*****	•	return	IRS disci		
	<u> </u>	Signature of officer or t	rustee			Date		Title		below (see ins	 tr.)? <mark>  ✓ 1</mark>	′es ┌ I	No
		Print/Type preparer's GERALD J STADTMUELLER C		Prepa	ırer's Sıgı	nature	Date		Check if self- employed ▶	PTIN P(	006114	166	
Paid Prepa Use	arer	Firm's name ► CLIFTONLARSONAL	LEN LLP	<u> </u>			1		Firm's EIN ► 4	1-074674	9		
Only		Fırm's address ▶											
- 4		PO BOX 2886 OSH	KOSH, WI	5490	32886				Phone no (92	0)231-589	90		_

Recipient  Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager	Foundation status of recipient	Purpose of grant or contribution	A mount
•	or substantial contributor			
a Paid during the year				
AMERICAN DIABETES FOUNDATION 1701 NORTH BEAUREGARD STREET ALEXANDRIA,VA 22311	NONE	PC	GENERAL PURPOSE	5,000
AMERICAN HEART ASSOCIATION 7272 GREENVILLE AVENUE DALLAS,TX 75231	NONE	PC	GENERAL PURPOSE	5,000
AMERICAN LEGION TIER-PUDDY POST 75 PO BOX 424 FOND DU LAC,WI 54936	NONE	NC	GENERAL PURPOSE	1,000
AMERICAN RED CROSS OF EASTERN WI 515 S WASHBURN ST 206 OSHKOSH, WI 54904	NONE	PC	GENERAL PURPOSE	10,000
APPLETON ICE INC 1717 E WITZKE BLVD APPLETON,WI 54911	NONE	PC	GENERAL PURPOSE	2,500
BILL KOEPKE MEMORIAL GOLF OUTING 1530 N MCCARTHY RD APT 6 APPLETON,WI 54913	NONE	PC	GENERAL PURPOSE	100
BOYS AND GIRLS CLUB OF OSHKOSH 501 EAST PARKWAY AVENUE OSHKOSH,WI 54901	NONE	PC	GENERAL PURPOSE	100,000
CHRISTINE ANN DOMESTIC ABUSE SERVICES 1416 SOUTH COMMERCIAL NEENAH, WI 54956	NONE	PC	GENERAL PURPOSE	10,000
CLARITY CARE 424 WASHINGTON AVE OSHKOSH,WI 54901	NONE	PC	GENERAL PURPOSE	10,000
COTS INC 913 S WEST AVE APPLETON,WI 54915	NONE	PC	GENERAL PURPOSE	1,000
DAY BY DAY WARMING SHELTER 449 HIGH AVE OSHKOSH,WI 54901	NONE	PC	GENERAL PURPOSE	20,000
EXPERIMENTAL AIRCRAFT ASSOCIATION 3000 POBEREZNY RD OSHKOSH,WI 54902	NONE	PC	YOUNG EAGLES	5,000
FRIENDS OF WISCONSIN PUBLIC TELEVISION 821 UNIVERSITY AVE NO 1076 MADISON, WI 53706	NONE	PC	GENERAL PURPOSE	5,000
GROWING OSHKOSH 530 BAY SHORE DR OSHKOSH,WI 54901	NONE	PC	GENERAL PURPOSE	15,000
HABITAT FOR HUMANITY OF OSHKOSH PO BOX 2692 OSHKOSH,WI 54903	NONE	PC	GENERAL PURPOSE	75,000
Total				1,036,000

			THE TEUT OF APPROVED TOT I	
Recipient	If recipient is an individual, show any relationship to	Foundation status of	Purpose of grant or contribution	A mount
Name and address (home or business)	any foundation manager or substantial contributor	recipient		
a Paid during the year				
JASPER PICKETT FOUNDATION PO BOX 336 PICKETT, WI 54964	NONE	PC	GENERAL PURPOSE	1,000
JP MORGAN CHARITABLE GIVING TRUST 270 PARK AVE NEW YORK,NY 10017	NONE	PC	GENERAL PURPOSE	65,000
LIVING HEALTHY COMMUNITY CLINIC 510 DOCTORS COURT OSHKOSH,WI 54901	NONE	PC	GENERAL PURPOSE	15,000
NATIONAL PHILANTHROPIC TRUST 165 TOWNSHIP LINE RD JENKINTOWN,PA 19046	NONE	PC	GENERAL PURPOSE	25,000
NEENAH HIGH SCHOOL BOOSTER CLUB 1375 MARTINGALE LANE NEENAH, WI 54956	NONE	PC	GENERAL PURPOSE	6,500
NEIGHBORWORKS GREEN BAY 437 S JACKSON GREEN BAY, WI 54301	NONE	PC	GENERAL PURPOSE	25,000
NEKIMI FIRE DEPARTMENT 3790 PICKETT RD OSHKOSH,WI 54904	NONE	PC	GENERAL PURPOSE	2,500
NESHKORO AREA FIRE PROTECTION DISTRICT 610 S MAIN ST NESHKORO, WI 54960	NONE	PC	GENERAL PURPOSE	2,500
NOVA COUNSELING SERVICES 3240 JACKSON ST OSHKOSH,WI 54901	NONE	PC	GENERAL PURPOSE	10,000
OCCUPAWS GUIDE DOG ASSOCIATION 5659 ENCHANTED VALLEY RD CROSS PLAINS, WI 53528	NONE	PC	GENERAL PURPOSE	2,000
OSHKOSH AREA COMMUNITY FOUNDATION 230 OHIO ST 100 OSHKOSH,WI 54902	NONE	PC	US OIL VENTURE	25,000
OSHKOSH AREA COMMUNITY FOUNDATION 230 OHIO ST 100 OSHKOSH,WI 54902	NONE	PC	COMMAND VEHICLE	50,000
OSHKOSH AREA HUMANE SOCIETY 1925 SHELTER CT OSHKOSH,WI 54901	NONE	PC	GENERAL PURPOSE	15,000
OSHKOSH AREA UNITED WAY 36 BROAD STREET 100 OSHKOSH,WI 54901	NONE	PC	GENERAL PURPOSE	100,000
OSHKOSH CELEBRATION OF LIGHTS 2345 ABBEY AVE OSHKOSH,WI 54904	NONE	PC	GENERAL PURPOSE	3,000
Total				1,036,000

Recipient	If recipient is an individual, show any relationship to	Foundation status of	Purpose of grant or contribution	A mount
Name and address (home or business)	any foundation manager or substantial contributor	recipient		
a Paid during the year				
OSHKOSH COMMUNITY FOOD PANTRY 2551 JACKSON ST OSHKOSH,WI 54901	NONE	PC	GENERAL PURPOSE	100,000
OSHKOSH COMMUNITY YMCA 324 WASHINGTON AVE OSHKOSH,WI 54901	NONE	PC	GENERAL PURPOSE	100,000
OSHKOSH COMMUNITY YMCA 324 WASHINGTON AVE OSHKOSH,WI 54901	NONE	PC	STRONG KIDS	55,000
OSHKOSH COMMUNITY YMCA 324 WASHINGTON AVE OSHKOSH,WI 54901	NONE	PC	TECH VENTURE KIDS CAMP	5,000
OSHKOSH OPERA HOUSE FOUNDATION 222 PEARL AVENUE OSHKOSH,WI 54901	NONE	PC	GENERAL PURPOSE	25,000
OSHKOSH PUBLIC MUSEUM 1331 ALGOMA BLVD OSHKOSH,WI 54901	NONE	GOV	GENERAL PURPOSE	25,000
OSHKOSH SYMPHONY ORCHESTRA 36 BROAD STR STE LL20 OSHKOSH,WI 54901	NONE	PC	GENERAL PURPOSE	15,000
OXFORD FIRE DEPARTMENT W8593 STATE ROAD 82 OXFORD,WI 53952	NONE	PC	GENERAL PURPOSE	2,500
PAINE ART CENTER AND GARDENS 1410 ALGOMA BLVD OSHKOSH,WI 54901	NONE	PC	GENERAL PURPOSE	50,000
PAINE ART CENTER AND GARDENS 1410 ALGOMA BLVD OSHKOSH,WI 54901	NONE	PC	WOUNDED WARRIOR	1,400
REACH COUNSELING SERVICES 1370 S COMMERCIAL ST NEENAH, WI 54956	NONE	PC	GENERAL PURPOSE	2,500
SALVATION ARMY 417 ALGOMA BLVD OSHKOSH,WI 54901	NONE	PC	GENERAL PURPOSE	5,000
SCANDINAVIA VOLUNTEER FIRE DEPARTMENT 349 N MAIN ST SCANDINAVIA,WI 54977	NONE	PC	GENERAL PURPOSE	2,500
SOLUTIONS RECOVERY INC 621 EVANS ST OSHKOSH,WI 54901	NONE	PC	GENERAL PURPOSE	2,000
TOWN OF UTICA FIRE DEPARTMENT 1730 COUNTY ROAD FF OSHKOSH WI 54904	NONE	PC	GENERAL PURPOSE	2,500
OSHKOSH, WI 54904		]		1.026.022
Total				1,036,000

TOTAL PROPERTY CALL	into ana contributions	i ala baling c	ile real of Approved for	acare rayinene
Recipient  Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager	Foundation status of recipient	Purpose of grant or contribution	A mount
(	or substantial contributor			
a Paid during the year				
TRI-COUNTY COMMUNITY DENTAL CLINIC 9 TRI-PARK WAY APPLETON,WI 54914	NONE	PC	GENERAL PURPOSE	5,000
VAN DYNE FIRE DEPARTMENT N9515 VAN DYNE RD VAN DYNE,WI 54979	NONE	PC	GENERAL PURPOSE	2,500
WATERFEST INC 120 JACKSON ST OSHKOSH,WI 54901	NONE	NC	GENERAL PURPOSE	500
WINNEBAGO COUNTY HEROIN TASK FORCE 112 OTTER AVE OSHKOSH,WI 54901	NONE	PC	GENERAL PURPOSE	10,000
WINNEBAGO COUNTY HISTORICAL AND ARCHEOLOGICAL SOCIETY 234 CHURCH AVENUE OSHKOSH,WI 54901	NONE	PC	GENERAL PURPOSE	5,000
WINNEBAGO COUNTY LITERACY COUNCIL 106 WASHINGTON AVE OSHKOSH,WI 54901	NONE	PC	GENERAL PURPOSE	2,500
WINNECONNE AREA ASSISTANCE CENTER INC 102 S 3RD STR WINNECONNE, WI 54986	NONE	PC	GENERAL PURPOSE	5,000
Total				1,036,000

# **TY 2014 Accounting Fees Schedule**

Name: THE JOHN E KUENZL FOUNDATION INC

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
ACCOUNTING FEES	14,815	7,408		7,407

# **TY 2014 Applied to Prior Year Election**

Name: THE JOHN E KUENZL FOUNDATION INC

**EIN:** 39-1998578

**Election:** PURSUANT TO IRC SEC. 4942(H)(2) AND REG. 53.4942(A)3(D)(2),

THE ABOVE REFERENCED FOUNDATION HEREBY ELECTS TO TREAT CURRENT YEAR QUALIFYING DISTRIBUTIONS IN EXCESS OF THE IMMEDIATELY PRECEDING TAX YEAR'S UNDISTRIBUTED INCOME AS BEING MADE OUT OF UNDISTRIBUTED INCOME FOR THE TAX YEAR

ENDING 12/31/08.

# **TY 2014 Investments Corporate Bonds Schedule**

Name: THE JOHN E KUENZL FOUNDATION INC

Name of Bond	End of Year Book Value	End of Year Fair Market Value
DODGE & COX INCOME FUND	362,238	398,983
DOUBLELINE FDS TR	418,707	410,919
JP MORGAN HIGH YIELD BOND FUND	139,440	130,818
JP MORGAN SHORT DURATION BOND	333,413	330,062
JP MORGAN STRATEGIC INCOME	366,471	360,913
JPM CORE BOND FUND - SEL	499,683	504,251
JP MORGAN UNCONSTRAINED DEBT FUND	129,408	128,244

# **TY 2014 Investments Corporate Stock Schedule**

Name: THE JOHN E KUENZL FOUNDATION INC

Name of Stock	End of Year Book Value	End of Year Fair Market Value
ARTISIAN INTL VALUE FUND	307,331	426,638
CAPITAL PRIVATE CLIENT SVCS	689,645	711,339
CVS CORP	49,902	114,768
DELAWARE EMERGING MARKETS FUND	615,371	515,626
FOSTER WHEELER	11,100	27,291
ISHARES TR RUSSELL MIDCAP INDEX	374,589	513,147
JP MORGAN INTREPID AMERICAN	230,872	339,862
JP MORGAN LARGE CAP GROWTH FUND	225,131	353,362
JP MORGAN US LARGE CAP CORE PLUS	584,014	698,037
LEE BEVERAGE CO., INC.	15,779,348	17,704,909
MATTHEWS PACIFIC TIGER INSTL FUND	28,601	32,120
NEUBERGER BERMAN MULTI CAP	473,202	699,326
NUVEEN MUN HIGH INCOME OPPORTUNITY FUND	264,021	297,126
OAKMARK INTERNATIONAL FUND	323,403	298,539
PIONEER MUN HIGH INCOME ADVANTAGE TR	264,747	302,793
PRUDENTIAL JENNISON MID-CAP	716,197	787,596
SPDR S&P 500 EFT TRUST	960,248	1,263,660
T ROWE PRICE NEW ASIA	337,012	331,237
CS CYCLICAL SEC REL (2/15)	135,000	157,072
PARNASSUS EQUITY INDOME FUND	779,770	817,451
JP MORGAN SMALL CAP VALUE FUND	165,056	165,233
ISHARES MSCI EAFE INDEX FUND	823,522	739,449
BROWN ADV JAPAN ALPHA OPP FUND	168,684	169,786
ISHARES MSCI ALL COUNTRY ASIA	438,677	445,398
ISHARES MSCI EMERGING MARKET	83,204	75,358

efile GRAPHIC print - DO NOT PROCESS As Filed Data - DLN: 93491317024535

### **TY 2014 Investments - Other Schedule**

Name: THE JOHN E KUENZL FOUNDATION INC

Category/ Item	Listed at Cost or FMV	Book Value	End of Year Fair Market Value
CENTURY INVESTMENT FUND V	AT COST	71,526	0
GAMBRINUS	AT COST	8,969,399	3,821,066
PIMCO COMMODITIES PLUS STRATEGY	AT COST	245,477	161,609
JP MORGAN ACCESS MULTI-STRATEGY FUND II	AT COST	2,650,000	2,652,091
JP MORGAN REALTY INC FD - INSTL	AT COST	475,048	512,616
DB MARKET PLUS WTI	AT COST	70,000	38,703
CARTER VALIDUS MISSION CRITICAL REIT	AT COST	30,000	30,000

efile GRAPHIC print - DO NOT PROCESS As Filed Data - DLN: 93491317024535

### **TY 2014 Other Decreases Schedule**

Name: THE JOHN E KUENZL FOUNDATION INC

Description	Amount
ADJUSTMENTS TO VARIOUS INVESTMENTS' COST BASIS	1,106,705

### **TY 2014 Other Income Schedule**

Name: THE JOHN E KUENZL FOUNDATION INC

Description	Revenue And Expenses Per Books	Net Investment Income	Adjusted Net Income
INCOME PER GAMBRINUS ENTERPRISES, INC K-1	658,036		658,036
INCOME PER CENTURY INVESTMENT FUND V K-1	-2,260		-2,260
INCOME PER LEE BEVERAGE CO	50,785	50,785	50,785

efile GRAPHIC print - DO NOT PROCESS | As Filed Data - DLN: 93491317024535

### **TY 2014 Other Professional Fees Schedule**

Name: THE JOHN E KUENZL FOUNDATION INC

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
VALUATION FEES	48,302	48,302		0

### **TY 2014 Taxes Schedule**

Name: THE JOHN E KUENZL FOUNDATION INC

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
INCOME TAXES	129,777	0		0
FOREIGN TAX PAID	6,109	6,109		0

# **TY 2014 TransfersToControlledEntities**

Name: THE JOHN E KUENZL FOUNDATION INC

Name	US / Foreign Address	EIN	Description	Amount
LEE BEVERAGE CO INC	PO BOX 2886 OSHKOSH, WI 54903	39-0962742	N/A	0
GAMBRINUS ENTERPRISES INC	PO BOX 2886 OSHKOSH, WI 54903	39-1134746	N/A	0
Total				0