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## SCANNED NOV 0 2 2015

Form 990-PF

### **Return of Private Foundation**

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

OMB No. 1545-0052

Department of the Treasury

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

		nue Service ► Information about Form 990-PF and its se				form990pf. Open	to Public Inspection
		dar year 2014 or tax year beginning JUNE	1 , 201	4, and e		MAY 31	, 20 <sub>15</sub>
		undation			A Employe	r identification number	er
		STO FOUNDATION			<del></del> -	39-6045769	<del></del>
		d street (or P.O box number if mail is not delivered to street address)	Room	1/suite	B Telephon	ie number (see instructi	ons)
		ASTINGS WAY				715-839-2045	
	-	n, state or province, country, and ZIP or foreign postal code			C If exempt	tion application is pend	ıng, check here ▶ 🗌
		IRE WI 54703					
G	Check		of a former public	charity	D 1. Foreig	n organizations, check	here ▶ 🔲
		☐ Final return ☐ Amended			2. Foreig	n organizations meeting	the 85% test,
	<u> </u>	✓ Address change ☐ Name chan	<del></del>			here and attach computed foundation status was	
		type of organization: Section 501(c)(3) exempt p				07(b)(1)(A), check here	<b>&gt;</b>
		on 4947(a)(1) nonexempt charitable trust   Other tax					_
		narket value of all assets at J Accounting method	I: ☐ Cash 🛂 A	ccrual	F If the fou	ndation is in a 60-mont	h termination
		f year (from Part II, col. (c), ☐ Other (specify)  5) ► \$ 18492264 (Part I, column (d) must be			under se	ction 507(b)(1)(B), chec	k nere ▶ ∐
_	_		on cash basis.)	<u>,                                    </u>			[/a=
	art I	Analysis of Revenue and Expenses (The total of amounts in columns (b), (c), and (d) may not necessarily equal	(a) Revenue and	(b) Net	investment	(c) Adjusted net	(d) Disbursements for charitable
		the amounts in column (a) (see instructions).)	expenses per books	i in	come	income	purposes (cash basis only)
_	1			Part Statement			(Section City)
D'	2	Contributions, gifts, grants, etc., received (attach schedule)	The state of the s				
5	3	Check ► ☐ if the foundation is <b>not</b> required to attach Sch. B Interest on savings and temporary cash investments		<del> </del>		· 中华大学的中华大学 1997年 1998年	
Ji	4	Dividends and interest from securities	98481	1	98481		· · · · · · · · · · · · · · · · · · ·
3	5a	Gross rents	644519	ļ	644519		
∜	b	Net rental income or (loss)		2 1000		ABART SCHWING	
Z ~	6a	Net gain or (loss) from sale of assets not on line 10	11. 14.17 图题	AVECUATION OF	A CAR COMMAN	Transfer parents	<u>x</u>
Revenue	b	Gross sales price for all assets on line 6a		100000	7. <b>3. 41. 42. 4</b> 3. 43.		*
∑ <b>ē</b>	7	Capital gain net income (from Part IV line 2)	A STATE OF THE STA	A SAME TO A SAME TO A	· · · · · · · · · · · · · · · · · · ·	THE RESERVE OF THE PARTY OF THE	1.56
<u>, 6</u>	8	Net short-term capital gain		########		AND THE PROPERTY OF THE PARTY O	2
\$	9	Income modifications		AND THE RES		<u> </u>	
abla	10a	Gross sales less returns and allowance	3-24 - 4-1-34 32 32 14/85	3500	Control of the second	* C * でい * カ (学園)	
ವಿ	b	Less: Cost of goods sold	4 2	1	S. Malentyl v	The second second	
ענו	c	Gross profit or (loss) (attach schedule)	-, -,	Y	La Fill 14	7 - 1 - 4-90	the state of the s
	11	Other income (attach schedule)		и,	* 315 TF 1		
	12	Total. Add lines 1 through 11	743000		743000		Car.
	13	Compensation of officers, directors, trustees, etd.	743000		743000		<u> </u>
Expenses	14	Other employee salaries and wages		<del> </del>			
Ĕ	15	Pension plans, employee benefits					
ğ	16a	Legal fees (attach schedule)		†			
	ь	Accounting fees (attach schedule)					
ive	С	Other professional fees (attach schedule)	21433		17146		4287
ī	17	Interest					
ist	18	Taxes (attach schedule) (see instructions)	7701		577		
Ē	19	Depreciation (attach schedule) and depletion					
Operating and Administrativ	20	Occupancy					
Ø p	21	Travel, conferences, and meetings					
ĕ	22	Printing and publications					
ğ	23	Other expenses (attach schedule)	12829		12829		
¥	24	Total operating and administrative expenses.					
erà		Add lines 13 through 23	41963	ļ. <u>.</u>	30552		4287
Č	25	Contributions, gifts, grants paid	973803			,	973803
_	26	Total expenses and disbursements. Add lines 24 and 25	1015766	ļ	30552		978090
	27	Subtract line 26 from line 12:	·	.[	٠,	ļ ·	, ,
		Excess of revenue over expenses and disbursements	-272766	<u> </u>			
		Net investment income (if negative, enter -0-)		<u> </u>	712448		
		Adjusted net income (if negative, enter -0-)		<u> </u>		<u> </u>	
For	Paper	work Reduction Act Notice, see instructions.	Cat N	o 11289X		<b>1</b> Fo	orm 990-PF (2014)

For Paperwork Reduction Act Notice, see instructions.

Cat No 11289X

Pa	irt II	Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only. (See instructions.)		End o	<u> </u>
			(a) Book Value	(b) Book Value	(c) Fair Market Value
	1	Cash—non-interest-bearing	-546649		-1399
	2	Savings and temporary cash investments	8971372		8158969
	3	Accounts receivable ▶			
		Less: allowance for doubtful accounts ▶	to the contract of the contract of		
	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)			
	_	· · · · · · · · · · · · · · · · · · ·	Children Co. And Andrews Co. Built Beauthy admit		
	7	Other notes and loans receivable (attach schedule) ▶			\$ 127 Jan 1992 1993
		Less: allowance for doubtful accounts ▶			
Assets	8	Inventories for sale or use			
Š	9	Prepaid expenses and deferred charges			
⋖	10a	Investments—U.S. and state government obligations (attach schedule)			
	Ь	Investments—corporate stock (attach schedule)	1568357	1568357	10334694
	C	Investments—corporate bonds (attach schedule)	- Company to		CATALOGRAPHICA MARKET CO. C.
	11				
		Less: accumulated depreciation (attach schedule) ▶			
	12	Investments—mortgage loans			
	13	Investments—other (attach schedule)			
	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)	9993080	9725927	18492264
	17	Accounts payable and accrued expenses	1686	1715	
S	18	Grants payable CONTRIBUTIONS tayable			
Liabilities	19	Deferred revenue			
<u> </u>	20	Loans from officers, directors, trustees, and other disqualified persons			
Ë	21	Mortgages and other notes payable (attach schedule)			- Salanding Spiller Strate
	22	Other liabilities (describe FEDERAL EXCISE TAX )	-2158		1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
	23	Total liabilities (add lines 17 through 22)	-472	5141	1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1
S		Foundations that follow SFAS 117, check here ▶ □ and complete lines 24 through 26 and lines 30 and 31.			k jijanjuguy in in 1 Taggi kilona Yoga
Š	24	Unrestricted			, , , , , ,
Balances	25	Temporarily restricted			
ã	26	_			
pun:	20				
Ŧ		Foundations that do not follow SFAS 117, check here ▶ □ and complete lines 27 through 31.			
ō	27	Capital stock, trust principal, or current funds			
ţ	28	Paid-in or capital surplus, or land, bldg., and equipment fund	2202002	2202002	
Net Assets or	29	Retained earnings, accumulated income, endowment, or other funds	2383002	•	
As	30	Total net assets or fund balances (see instructions)	7610550		- F
et	31	Total liabilities and net assets/fund balances (see	9993552	9720786	
Z	•	instructions)	0002000	0725027	4 5 1
Pa	rt III	Analysis of Changes in Net Assets or Fund Balances	9993080	9725927	<u>'                                    </u>
		I net assets or fund balances at beginning of year-Part II, colu	st agree with		
		of-year figure reported on prior year's return)			9993552
2		r amount from Part I, line 27a		2	-272766
3		or ingresses not included in line 2 (itemize)			-272700
4		lines 1, 2, and 3		4	9720786
5	Decr	reases not included in line 2 (itemize)		_	0
6	Tota	I net assets or fund balances at end of year (line 4 minus line 5)—	Part II, column (b), li	ne 30 <b>6</b>	9720786
			. , , , ,		- 000 DE

Part		d Losses for Tax on Investr he kind(s) of property sold (e.g., real estat		ome	(b) How acquired	(c) D	ate acquired	(d) Date sold		
		use; or common stock, 200 shs. MLC Co			P—Purchase D—Donation		o, day, yr)	(mo., day, yr)		
<u>1a</u>								·		
<u>b</u>										
<u>C</u>							·			
<u>d</u>							- · · · · · · · · · · · · · · · · · · ·			
_ <u>e</u>	*** · · · · · · · · · · · · · · · · · ·						<u></u>	L		
	(e) Gross sales price	once (f) Depreciation allowed (g) Cost or other basis plus expense of sale				n or (loss) f) minus (g)				
<u>a</u>										
_ <u>b</u>										
<u>c</u>										
<u>d</u>										
<u>e</u>	Complete only for exacts sha		hu tha fau		40/04/00					
	Complete only for assets sho	owing gain in column (h) and owned						l. (h) gain minus		
	(i) F.M V. as of 12/31/69	(j) Adjusted basis as of 12/31/69		k) Excess over col	s of col (i) (j), if any		col. (k), but not less than -0-) or Losses (from col. (h))			
a										
<u>b</u>										
c					<u> </u>					
_ <u>d</u>										
<u>e</u>			L							
2	Capital gain net income of	or inet canital loss) ( ~ ~ ·	also ente ), enter -0		'	2				
3	Net short-term capital ga	in or (loss) as defined in sections	s 1222(5)	and (6):						
		t I, line 8, column (c) (see ınstru								
	Part I, line 8	<u> </u>	<u>.</u>		5	3				
Part	V Qualification Und	der Section 4940(e) for Red	uced Tax	x on N	et Investment	Inco	me			
Was t		ve this part blank. e section 4942 tax on the distribit t qualify under section 4940(e)				base p	enod?	☐ Yes ☐ No		
-1		ount in each column for each ye				akıng	any entries.	<del></del>		
_ <del>-</del> -	(a)	(b)	1000 111	0 1110110	(c)	<u> </u>	arry orientos.	(d)		
Cale	Base period years endar year (or tax year beginning in	Advisted avaliting distribution	ns Ne	t value of	noncharitable-use a	ssets	Dis (col. (b)	tribution ratio divided by col. (c))		
	2013		96579		196	59165	(55. (5)	.050693		
	2012		17470	<del>-</del> -		73443		.079003		
	2011		99564			7013		.033870		
	2010	<del></del>	74546			79636		.044865		
	2009		28088			36531		.039432		
2	Total of line 1, column (d	)				.	2	.24786		
3		for the 5-year base period—div				the				
	number of years the foun	dation has been in existence if l	ess than 5	5 years			3	.04957		
						Ì				
4	Enter the net value of nor	ncharitable-use assets for 2014	from Part	X, line	5	.	4	1770586-		
5	Multiply line 4 by line 3					. [	5	87773:		
6	Enter 1% of net investme	ent income (1% of Part I, line 27t	o)				6	712		
7	Add lines 5 and 6						7	88485		
-				• •		.	<del>-  </del> -	00403		
8		ons from Part XII, line 4 . eater than line 7, check the box i				that n	8 art using a	978090		
	Part VI instructions	Sales and the report the box i	uit VI,		, and complete	mat p	art using a	i /u tax rate dee tiii		

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Part	Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948—see in	ISTRUCTI	ons)				
1a	Exempt operating foundations described in section 4940(d)(2), check here ▶ ☐ and enter "N/A" on line 1.  Date of ruling or determination letter: (attach copy of letter if necessary—see instructions)						
b							
	here ► 🗸 and enter 1% of Part I, line 27b						
С	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-)		<u> </u>				
3	Add lines 1 and 2	712	4				
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)		<u> </u>				
5	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0	712	4				
6	Credits/Payments:		1				
a	2014 estimated tax payments and 2013 overpayment credited to 2014 6a 3255		1				
b	Exempt foreign organizations—tax withheld at source 6b		1 3				
C	Tax paid with application for extension of time to file (Form 8868) . 6c Backup withholding erroneously withheld 6d						
d 7		205					
8	Total credits and payments. Add lines 6a through 6d	325					
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed	386					
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid > 10	300	-				
11	Enter the amount of line 10 to be: Credited to 2015 estimated tax ▶ Refunded ▶ 11						
Part	VII-A Statements Regarding Activities						
1a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it	Ye	s No				
	participate or intervene in any political campaign?	1a	1				
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see Instructions for the definition)?	1b	1				
	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 published or distributed by the foundation in connection with the activities.						
С							
d							
	(1) On the foundation. ▶ \$ (2) On foundation managers. ▶ \$	<b>7.</b>					
е	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers. ▶ \$						
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?	2	<b>✓</b>				
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 /					
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	4a	1				
b	If "Yes," has it filed a tax return on Form 990-T for this year?	4b					
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?	5					
	If "Yes," attach the statement required by General Instruction T.	4	30.				
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either:	نبها يوودين	20 Jan				
	<ul> <li>By language in the governing instrument, or</li> <li>By state legislation that effectively amends the governing instrument so that no mandatory directions that</li> </ul>	医线 图					
	conflict with the state law remain in the governing instrument?	6 7	EF.				
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	6 √ 7 √	-				
, 8а	Enter the states to which the foundation reports or with which it is registered (see instructions)	<del>                                     </del>	n. 2				
-	Wisconsin		A.				
b	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General	9					
-	(or designate) of each state as required by General Instruction G? If "No," attach explanation	8b v	7				
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or	<u> </u>					
-	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	✓				
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their						
	names and addresses	10	1				

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Part	VII-A Statements Regarding Activities (continued)			
11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of section 512(b)(13)? If "Yes," attach schedule (see instructions)	11		<b>✓</b>
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		1
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?  Website address  NONE	13	1	
14	The books are in core of N. IOAN CENIED	5-839-	 2119	
		4703-3		
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	At any time during calendar year 2014, did the foundation have an interest in or a signature or other authority	,	Yes	No
	over a bank, securities, or other financial account in a foreign country?	16		1
	See the instructions for exceptions and filing requirements for FinCEN Form 114, (formerly TD F 90-22.1). If			
	"Yes," enter the name of the foreign country ▶			
Part	VII-B Statements Regarding Activities for Which Form 4720 May Be Required			
	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.		Yes	No
1a	During the year did the foundation (either directly or indirectly):			
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person? Yes   (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? $\checkmark$ Yes $\bigcirc$ No			
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?   Yes  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)?		4.9	
	(6) Agree to pay money or property to a government official? (Exception. Check "No" if the			
	foundation agreed to make a grant to or to employ the official for a period after termination of government service, if terminating within 90 days.)			
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	QS.		
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	15.11	1
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation defined in section 4942(j)(3) or 4942(j)(5)):			
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?	2	ناد د ناد د دست	
	If "Yes," list the years ▶ 20 , 20 , 20 , 20			7
b	Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2)	400	<b>有</b>	1
	(relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to	7/10	SCHOOL T	
_	all years listed, answer "No" and attach statement—see instructions.)	2b	251 38	<u> </u>
С	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			
3a	► 20 , 20 , 20 , 20 Did the foundation hold more than a 2% direct or indirect interest in any business enterprise	The second	7.2	
ou .	at any time during the year?			To the state of th
b	If "Yes," did it have excess business holdings in 2014 as a result of (1) any purchase by the foundation or		1	4.5.
	disqualified persons after May 26, 1969; (2) the lapse of the 5-year period (or longer period approved by the		<b>100</b>	
	Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest; or (3) the lapse of		17.	
	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.)		- 33	ļ. ·
40	· · · · · · · · · · · · · · · · · · ·	3b	ļ	<del>                                     </del>
4a b	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes? Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its	4a		/
-	charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2014?	4b	-	
		140	<u> </u>	

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Page	ь

Par	Statements Regarding Activities	for W	Vhich Form	4720	May Be R	equire	ed (contir	nued)	
5a	During the year did the foundation pay or incur a	ny amo	ount to:						
	(1) Carry on propaganda, or otherwise attempt t						☐ Yes	✓ No	
	(2) Influence the outcome of any specific public	electi	on (see sect	ion 495	5); or to ca	arry on,			
	directly or indirectly, any voter registration dr					-t -	Yes	✓ No	
	(3) Provide a grant to an individual for travel, stu	dy, or e	other similar	purpos	es?	<i>:</i> .	✓ Yes	☐ No	
	(4) Provide a grant to an organization other than	n a cha	ritable, etc.,	organiz	ation desci	ribed in			
	section 4945(d)(4)(A)? (see instructions)						☐ Yes	✓ No	
	(5) Provide for any purpose other than religious, purposes, or for the prevention of cruelty to o				ary, or educ		☐Yes	√ No	
b	If any answer is "Yes" to 5a(1)-(5), did any of the				under the	excepti		_	
	Regulations section 53.4945 or in a current notice	regardi	ng disaster a	ssistanc	e (see instr	uctions	)?		5b ✓
	Organizations relying on a current notice regardi							▶□	
C	If the answer is "Yes" to question 5a(4), does t					the tax			
	because it maintained expenditure responsibility	for the					Yes	□No	
	If "Yes," attach the statement required by Regula	tions s							
6a	Did the foundation, during the year, receive any					emiums			
	on a personal benefit contract?		-	-			☐Yes	√ No	
b	Did the foundation, during the year, pay premiun	ns. dire	ctly or indire	ctlv. on	a personal	benefit		_	6b ✓
	If "Yes" to 6b, file Form 8870.	,	, ,	<b>,,</b>					
7a	At any time during the tax year, was the foundation a	a party	to a prohibited	d tax sh	elter transac	tion?	☐ Yes	✓ No	
	If "Yes," did the foundation receive any proceeds						ransactior	າ?ີ.	7b
Par	t VIII Information About Officers, Direc	tors, 1	rustees, F	ounda	tion Mana	agers,	Highly F	Paid E	mployees,
	and Contractors								
1	List all officers, directors, trustees, foundation	n mana	agers and th	eir con	npensation	(see i	nstructio	ns).	
	(a) Name and address		e, and average rs per week		mpensation not paid,		Contributions byee benefit		(e) Expense account,
	(-)	devot	ed to position		ter -0-)	and def	erred compe	nsation	other allowances
SEE A	ATTACHED SCHEDULE								
2	Compensation of five highest-paid employee "NONE."	es (oth	er than tho	se incl	uded on li	ne 1—:	see instr	uction	s). If none, enter
			(b) Title, and a	average			(d) Contribu		
	(a) Name and address of each employee paid more than \$50,00	10	hours per v	veek	(c) Comper	nsation	employee plans and o		(e) Expense account, other allowances
			devoted to p	osition			compens		
NONE				•••					
					!				
			1		]				
			<u>L</u>				1		
Total	number of other employees paid over \$50,000							. ▶	
									Form <b>990-PF</b> (2014)

3	Five highest-paid independent contractors for professional services (see instructions). If none, enter "NONI	.,,
	(a) Name and address of each person paid more than \$50,000 (b) Type of service	(c) Compensation
IONE		<u> </u>
	,	
otal	number of others receiving over \$50,000 for professional services	· · · · · ·
		<del></del> _
<sup>2</sup> ari	IX-A Summary of Direct Charitable Activities	
Lief	the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of	
org	nizations and other beneficiaries served, conferences convened, research papers produced, etc	Expenses
1		
•		
2		
3		
4		
Par	IX-B Summary of Program-Related Investments (see instructions)	
	cribe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2	Amount
1		
•		
2		
		<u> </u>
	ther program-related investments. See instructions	
3		
	Add lines 1 through 3	

Part		ign four	ndations,
	see instructions.)		
1	Fair market value of assets not used (or held for use) directly in carrying out chantable, etc.,		-
	purposes:		
а	Average monthly fair market value of securities	1a	9644710
ь	Average of monthly cash balances	1b	8330787
C	Fair market value of all other assets (see instructions)	1c	
d	<b>Total</b> (add lines 1a, b, and c)	1d	17975497
е	Reduction claimed for blockage or other factors reported on lines 1a and		
	1c (attach detailed explanation)		
2	Acquisition indebtedness applicable to line 1 assets	2	
3	Subtract line 2 from line 1d	3	17975497
4	Cash deemed held for charitable activities. Enter 1 1/2 % of line 3 (for greater amount, see		
	instructions)	4	269632
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	17705865
6	Minimum investment return. Enter 5% of line 5	6	885293
Part	Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating f and certain foreign organizations check here   ☐ and do not complete this part.)	oundat	ions
1	Minimum investment return from Part X, line 6	1	885293
2a	Tax on investment income for 2014 from Part VI, line 5 2a 7124		
b	Income tax for 2014. (This does not include the tax from Part VI.)   2b		
C	Add lines 2a and 2b	2c	7124
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	878169
4	Recoveries of amounts treated as qualifying distributions	4	
5	Add lines 3 and 4	5	878169
6	Deduction from distributable amount (see instructions)	6	
7	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII,		
	line 1	7	878169
Part	XII Qualifying Distributions (see instructions)		
1		<u> সংস্থা</u>	· · · · · · · · · · · · · · · · · · ·
-	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:		
a b	Expenses, contributions, gifts, etc.—total from Part I, column (d), line 26	1a	978090
2	Program-related investments—total from Part IX-B	1b	
_	purposes		
3		2	
_	Amounts set aside for specific charitable projects that satisfy the		
a	Suitability test (prior IRS approval required)	3a	
b	Cash distribution test (attach the required schedule)	3b	
4	Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4	4	978090
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income.	_	
•	Enter 1% of Part I, line 27b (see instructions)	5	7124
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	970966
	Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating qualifies for the section 4940(e) reduction of tax in those years.	ig wheth	er the foundation

	00-PF (2014)		<u>,</u>		Page <b>9</b>
Part	XIII Undistributed Income (see instruction	ons)			
1	Distributable amount for 2014 from Part XI, line 7	(a) Corpus	(b) Years prior to 2013	(c) 2013	(d) 2014
2 a	Undistributed income, if any, as of the end of 2014: Enter amount for 2013 only			972011	878169
ь 3 а	Total for prior years: 20,20,20 Excess distributions carryover, if any, to 2014: From 2009				
b c d	From 2010				
e f	From 2013				
a	Qualifying distributions for 2014 from Part XII, line 4: ▶ \$ 978090  Applied to 2013, but not more than line 2a.	223		972011	
b	Applied to undistributed income of prior years (Election required—see instructions) Treated as distributions out of corpus (Election	and the second			
d	required—see instructions)				6078
e 5	Remaining amount distributed out of corpus Excess distributions carryover applied to 2014 (If an amount appears in column (d), the same amount must be shown in column (a).)		The state of the s		
6	Enter the net total of each column as indicated below:		· · ·		70,760
a b	Corpus. Add lines 3f, 4c, and 4e. Subtract line 5 Prior years' undistributed income Subtract line 4b from line 2b				ALC: A CONTRACT OF THE PARTY OF
С	Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed				
d	Subtract line 6c from line 6b. Taxable amount—see instructions				
e	Undistributed income for 2013. Subtract line 4a from line 2a. Taxable amount—see instructions				
f	Undistributed income for 2014. Subtract lines 4d and 5 from line 1. This amount must be distributed in 2015		_	,	872091
7	Amounts treated as distributions out of corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3) (Election may be required—see instructions)			-	
8	Excess distributions carryover from 2009 not applied on line 5 or line 7 (see instructions) .			٠	
9	Excess distributions carryover to 2015. Subtract lines 7 and 8 from line 6a				
10 a b c d	Analysis of line 9  Excess from 2010				'
ее	Excess from 2014	1			

PF (2014)		<u> </u>			Page <b>10</b>
Private Operating Foundation				9)	
the foundation has received a ruling undation, and the ruling is effective for				l	
heck box to indicate whether the four		<del>-</del>			(j)(3) or 4942(j)(5)
nter the lesser of the adjusted net	Tax year	T operating rounds	Prior 3 years	3011011 [] 43421	1)(3) (1) 1 4342()(3)
come from Part I or the minimum vestment return from Part X for ach year listed	(a) 2014	<b>(b)</b> 2013	(c) 2012	(d) 2011	(e) Total
5% of line 2a		<u> </u>			<del>'</del>
ualifying distributions from Part XII, e 4 for each year listed					
nounts included in line 2c not used directly active conduct of exempt activities					
ualifying distributions made directly or active conduct of exempt activities. ubtract line 2d from line 2c					
omplete 3a, b, or c for the ternative test relied upon:			,		
Assets" alternative test-enter:			/	İ	
) Value of all assets			/		
section 4942(j)(3)(B)(i)  Endowment" alternative test—enter 2/3  minimum investment return shown in art X, line 6 for each year listed		,			
Support" alternative test - enter-		,			
Total support other than gross investment income (interest, dividends, rents, payments on securities loans (section 512(a)(5)), or royalties)					
2) Support from general public and 5 or more exempt organizations as provided in section 4942(j)(3)(B)(iii)					
3) Largest amount of support from an exempt organization					
Gross investment income .	/				
Supplementary Information			he foundation h	nad \$5,000 or i	more in assets at
any time during the year-		ns.)			
formation Regarding Foundation					
st any managers of the foundation v					
efore the close of any tax year (but o			, ,		
ist any managers of the foundation wnership of a partnership or other er					large portion of the
formation Regarding Contribution	n, Grant, Gift, Loa	an, Scholarship.	etc., Programs:		
heck here ▶ ☐ If the foundation				organizations ar	nd does not accept
nsolicited requests for funds. If the f					
solicited requests for futios, if the f	outloation makes	girio, giarito, etc.	(acc illatituditolia)	to maintadado or	organizations arrasi

1 Informatio	n Rega	arding Fo	unálat	ion Ma	nogere.

### NONE

Form 990-PF (2014) Part XIV

h

2a

c Qualifying distributions from Part XII, line 4 for each year listed . . . . Amounts included in line 2c not used directly for active conduct of exempt activities . . . Qualifying distributions made directly for active conduct of exempt activities.

each year listed . **b** 85% of line 2a

### **NONE**

### THE PRESTO FOUNDATION, ATTN: JOAN GEHLER, 3925 N HASTINGS WAY, EAU CLAIRE, WI 54703, (715)839-2119

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

### LETTER FORM WITH PROPOSED BUDGET.

c Any submission deadlines:

### NONE

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

### NORTHWESTERN WI, EAU CLAIRE AND CHIPPEWA FALLS AREA ARE PREFERRED

3	Grants and Contributions Paid During	ine Year or Approv	ed for Fut	ure Payment	<u> </u>
_	Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of	Purpose of grant or contribution	Amount
	Name and address (home or business)	or substantial contributor	recipient		
а	Paid during the year			-	
		}			
eee A	ATTACHED SCHEDULE.				1
JLE P	ATTACHED SCHEDULE.				
					1
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	···_		<u> </u>		
<del></del>	Total	<u> </u>	· · · ·	<u> ▶ 3</u>	a 97380
D	Approved for future payment				
		T .			
				ļ	ļ
					Ì
	Total	<u> </u>	<u></u>		Bb

		Analysis of Income-Producing Ac	<del></del>	<del></del>	<del></del>		r — — — — — — — — — — — — — — — — — — —
Ente	r gro	ess amounts unless otherwise indicated.	Unrelated bu	(b)	(c) Exclusion code	(d) Amount	(e) Related or exempt function income (See instructions.)
1	Pro	gram service revenue:	Dusiness code	Anodiii	LXCIUSION COde	Allount	(See mstructions.)
	а	•					
	b					1-11	
	C						
	d						
	е						
	f						
	g	Fees and contracts from government agencies					
2	Ме	mbership dues and assessments					
3	Inte	rest on savings and temporary cash investments			512(B)1	98481	
4		idends and interest from securities			512(B)1	644519	
5	Net	rental income or (loss) from real estate:	- 3 41	April - Application Herena	***		The state of the s
		Debt-financed property					
		Not debt-financed property					
6		rental income or (loss) from personal property					
7		ner investment income			<u> </u>		
8	Gai	n or (loss) from sales of assets other than inventory			<u> </u>		
9		income or (loss) from special events					
10		oss profit or (loss) from sales of inventory			† <del></del>		
11		ner revenue: a					
	b				1	<u> </u>	
	С						
	d				"		
	е						
					<del></del>		
12	Sul	ototal. Add columns (b), (d), and (e)	1 5		1.5	743000	
12 13	Sul To:	ototal. Add columns (b), (d), and (e)			Jr	743000 . 13	
13	To				Jr	743000	
<b>13</b> (See	To:	tal. Add line 12, columns (b), (d), and (e)	 ns.)				
13 (See Pa Lin	To wor t X e No	tal. Add line 12, columns (b), (d), and (e)	 ns.) Accomplishm	ent of Exemp	ot Purposes	13	743000
13 (See Pa Lin	To: wor	tal. Add line 12, columns (b), (d), and (e)  rksheet in line 13 instructions to verify calculation  VI-B Relationship of Activities to the A  Explain below how each activity for which accomplishment of the foundation's exempt pur	 ns.) Accomplishm	ent of Exemp	ot Purposes	13	743000
13 (See Pa Lin	To wor t X e No	tal. Add line 12, columns (b), (d), and (e)	 ns.) Accomplishm	ent of Exemp	ot Purposes	13	743000
13 (See Pa Lin	To wor t X e No	tal. Add line 12, columns (b), (d), and (e)  rksheet in line 13 instructions to verify calculation  VI-B Relationship of Activities to the A  Explain below how each activity for which accomplishment of the foundation's exempt pur	 ns.) Accomplishm	ent of Exemp	ot Purposes	13	743000
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Part	XVII		n Regarding Tra ganizations	nsfers To and Trans	sactions and I	Relationships <b>V</b>	Vith Noncha	ritable
1	in se orgar	he organization of the nizations?	directly or indirectly e Code (other than	engage in any of the fo section 501(c)(3) organ	nizations) or in s	ection 527, relatin	on described ag to political	Yes No
а				o a noncharitable exen		of:		
		asn ther assets .						1a(1) ✓
ь		r transactions:						1a(2) ✓
D			a noncharitable ov	empt organization .				15(1)
				able exempt organizati				1b(1) ✓ 1b(2) ✓
				er assets				1b(2) ✓ 1b(3) ✓
								1b(3) V
		oans or loan gua						1b(5) ✓
				hip or fundraising solic				1b(6) ✓
C				ists, other assets, or pa				1c /
d				es," complete the follow				
	value	of the goods, o	ther assets, or serv	ices given by the repor	rting foundation	. If the foundation	received less	than fair market
	value	ın any transaction	on or sharing arrang	gement, show in colum	n (d) the value o	of the goods, othe	r assets, or se	rvices received.
(a) Lin	e no (	b) Amount involved	(c) Name of none	chantable exempt organization	d) Desc	nption of transfers, tran	nsactions, and sha	anng arrangements
						_		
						-		
							<u> </u>	
				<del>.</del>				
								····
	-							
								· · · · · · · · · · · · · · · · · · ·
					<u>_</u>			
		<del></del>	·		-			
2a	le the	foundation dire	oth or indirectly o	ffiliated with, or related	140 000 000			
20	desci	ribed in section 5	501(c) of the Code (	other than section 501	i to, one or mo	re tax-exempt or on 5272	ganizations	7 Vaa
b			e following schedule		0)(0)) 0: 11: 3001:	011 027 :	[	_ res No
		(a) Name of organ		(b) Type of orga	nization	(c) Dec	scription of relation	nshin
				(2) 1) 50 01 01 90		(0) 50	deription or rotation	
-								<del>-</del>
							-,	
		/						
	Unde	er penalțies of perjury,	declare that have examin	ned this return, including accomp	panying schedules an	d statements, and to the	best of my knowle	dge and belief, it is true
Sign	corre	ect, and complete Deci	dration of preparer (other t	nan taxpayer) is based on all info	ormation of which prep	parer has any knowledge	May the	RS discuss this return
Here		//////////////////////////////////////		19/3//5	President		with the	preparer shown below
		ature of officer or tru	stee	Date	Title		(see instru	ictions)? [Yes No
Paid		Int/Type preparer	's name	Preparer's signature		Date	Check   If	PTIN
Prep	•	<u></u>				-	self-employed	
Use		Firm's name ▶				Firm'	s EIN ▶	
-50	~···y	Firm's address ▶				Phon		

### The Presto Foundation 39-6045769 Year ended May 31, 2015

### Investments - Corporate Stocks (Form 990 PF, Page 2, Part II, Line 10 b)

Stock	g. Of Year ook Value	_	nd of Year ook Value	Market Value	
National Presto Ind Inc.	\$ 865,032	\$	865,032	\$	9,575,780
Anglo American plc	131,194		131,194		219,797
Anglogold Limited	247,484		247,484		102,180
Gold Fields Limited	182,537		182,537		99,074
Sibanye Gold	30,358		30,358		51,567
Berry Petroleum Co.	56,875		56,875		125,640
Freeport McMoran Copper & Gold	54,877		54,877		160,656
Total	\$ 1,568,357	\$	1,568,357	\$	10,334,694

### The Presto Foundation 39-6045769 Year Ended May 31, 2015

### Other Professional Services Form 990-PF Page 1, Part 1, Line 16 ( c)

Bookkeeping & Clerical	Services	21,433
	<u>Taxes</u> Form 990-PF Page 1, Part 1, Line 18	
Excise Tax Provision Foreign Tax		7,124 577 7,701
	Other Expenses Form 990-PF Page 1, Part 1, Line 23	
Broker Fees, ETC		12,829

### The Presto Foundation 39-6045769 For The Year Ended May 31, 2015

	Title, and Time Devoted		Contribution to employer	Expense Account, other
<u>Name</u>	to position	Compensation	Benefit Plan	<u>Allowances</u>
Maryjo Cohen Eau Claire, WI	President Trustee Partial	None	None	None
Randy F. Lieble Eau Claire, WI	Vice Pres., Sec., Trustee Partial	None	None	None
Vernon B. Haas Cadott, WI	Assistant Treas., Trustee Partial	None	None	None
Eileen Phillips Cohen Eau Claire, WI	Trustee Partial	None	None	None

39-6045769
YEAR ENDED MAY, 31 2015
GRANTS AND CONTRIBUTIONS
FORM 990 PF, PAGE 10, PART XV, LINE 3a

08/04/2015 10 58 41 am

RELIGIOUS ACTIVITIES
[0
CATEGORY

Relationship	None	None
YTD Payments R	1,000 00 None	3,000 00
City State Zip	JANESVILLE, WI 53345-2448	EUGENE, OR 97402
Address	514 SUTHERLAND AVE	SOCIETY OF LANE COUNTY P O BOX 24608
de Recipient Name	SALVATION ARMY	ST VINCENT DE PAUL SOÇIETY OF LANE COUNTY
Alpha Sort Co	SALVAT	STVINC
Recipient Code Alpha Sort Code	761 PC	PC
.Acct Num	192	789

4,000 00

\* \* CATEGORY TOTAL \* \*

YEAR ENDED MAY, 31 2015 GRANTS AND CONTRIBUTIONS FORM 990 PF, PAGE 10, PART XV, LINE 3a

SCHOOLS, COLLEGES & RELATED AC

CA1EGORY 02

<b>Relationship</b> None	None	None	None	None	None	None	None	None	None	None	None	None	
YTD Payments R 8,500 00	200 00	18,000 00	200 00	10,000 00	1,000 00	5,000 00	12,000 00	20 00	3,000 00	6,000 00	52,800 00	53,200 00	170,550 00
City State Zip MIAMI, FL 33129	NEW YORK, NY 10017	EAU CLAIRE, WI 54702-0600	NORTHFIELD, MN 55057	EAU CLAIRE, WI 54701	COLFAX, WI 54730	ISSAQUAH, WA 98027	EAU CLAIRE, WI 54701	CYNTHIANA, KY 41031	ANTIGO, WI 54409	MINNEAPOLIS, MN 55416	PLATTEVILLE, WI 53818-3099	EAU CLAIRE, WI 54701	)TAL * *
Address 2625 SW 3RD AVE	FUND 630 THIRD AVE	CENTER P O BOX 600	ENDOWMENT FOR JEWISH LIFE AT CARLETON	I N COLLEGE SI COLLEGE FOUNDATION 620 W CLAIREMONT AVE	601 UNIVERSITY AV	1605 NW SAMMAMISH RD SUITE 200	500 MAIN ST	ASJROTC 320 WEBSTER AV	312 FORREST AV	2800 JOPPA AVE SO	1 UNIVERSITY PLAZA	214 SCHOFIELD HALL , 105 GARFIELD AVE	* * CATEGORY TOTAL * *
Recipient Name BETH DAVID GORDON SCHOOL	P E F ISRAEL ENDOWMENT RACHEL CARDOZO FOUNDATION	SCHOLARSHIFS L E PHILLIPS CAREER DEV	CARLETON COLLEGE	CHIPPEWA VALLEY TECHNICAL COLLEGE FOUNDATION	COLFAX SCHOOL DISTRICT	COLLEGE SUCCESS FOUNDATIO	EAU CLAIRE AREA SCHOOLS FLYNN ELEMENTARY STUDENTS SPECIAL NIERDS ELINIO	NEEDS FOND HARRISON CTY HIGH SCHOOL	NORTHCENTRAL TECH COLLEGE	TORAH ACADEMY	U W PLATTEVILLE	UWEC-FOUNDATION, INC	
Alpha Sort Code BETHDA	CARDOZ	CAREER	CARLET	CHIPPE	COLFAX	COLLEG	EAUCLA	HARRIS	NORTHC	TORAHA	UNIVER	UNIVER	
Recipient Code PC	PC	PC	ЬС	PC	PC	PC	PC	PC	PC	PC	PC	PC	
Acet Num 69	103	101	105	165	143	183	251	418	699	835	856	857	

## THE PRESIO FOUNDATION 39-6045769 YEAR ENDED MAY, 31 2015 CRANTS AND CONTRIBITIONS

YEAR ENDED MAY, 31 2015 GRANTS AND CONTRIBUTIONS FORM 990 PF, PAGE 10, PART XV, LINE 3a

SCHLRSHPS FOR CHILD OF EMPLOY

CATEGORY 03

Relationship	None	None	None	None	None	None	None	None	None	None	None	None	None	None	None
YTD Payments F	8,610 00	13,000 00	12,932 20	14,283 85	13,000 00	13,000 00	13,000 00	13,000 00	13,000 00	12,522 82	8,730 39	12,503 69	13,000 00	11,114 62	11,089 86
City State Zip	CHICAGO, IL 60693	GREEN BAY, WI 54311	MADISON, WI 53715-1383	MADISON, WI 53715	HOUGHTON, MI 49931	MOBILE, AL 36688	UNIVERSITY PARK, PA 16802-1200	MADISON, WI 53715-1383	MADISON, WI 53715-1383	MADISON, WI 53715-1383	MAGNOLIA, AR 71753-9411	TALLAHASSEE, FL 32306	GREEN BAY, WI 54311	WHITEWATER, WI 53190-1790	EAU CLAIRE, WI 54702
Address	15297 COLLECTIONS CTR DR	BURSAR'S OFFICE SS1300 2420 NICOLET DR	333 E CAMPUS MALL 10501	333 E CAMPUS MALL #10501	UNIVERSITY CASHIER'S OFFICE	1400 IOWNSEND DK 390 ALUMNI CIR ROOM 1300	OFFICE OF THE BURSAR 103E SHIELDS BUILDING	BURSAR'S OFFICE 333 E CAMPUS MALL #10501	BURSAR'S OFFICE 333 E CAMPUS MALL #10501	BURSAR'S OFFICE 333 E CAMPUS MALL #10501	P O BOX 9411	600 W COLLEGE AV	BURSAR'S OFFICE 2420 NICOLET DR	CASHIER'S OFFICE 800 W MAIN ST	FINANCIAL AIDS OFFICE P O BOX 4004
le Recipient Name	WALDEN UNIVERSITY KATHRINE BEHRENS	U W GREEN BAY TYLER BREWER	U W MADISON LAURA BRODZISKI	U W MADISON BURSAR REBECCA BRODZISKI	MICHIGAN TECHNOLOGICAL MATTHEW BYRNE	UNIV OF SOUTH ALABAMA KALMETTE CAMBRAY	PENN STATE UNIVERSITY RACHAEL DECKMAN	UW-MADISON BRETT DERLETH	U W MADISON TYLER ETHERIDGE	U W MADISON ANTHONY FERREIRA	SOUTHERN ARKANSAS UNIV HINTON FOSTER	FLORIDA STATE UNIVERSITY VALERIE GARDNER	U W GREEN BAY JENNA HAMMER	U W WHITEWATER IORDAN HAMMER	U W EAU CLAIRE JESSICA SUE HARRIS
Alpha Sort Code	BEHREN	BREWER	BRODZI	BRODZI	BYRNE	CAMBRA	DECKMA	DERLET	ETHERI	FERREI	FOSTER	GARDNE	HAMMER	HAMMER	HARRIS
Recipient Code	PC	PC	PC	PC	PC	PC	PC	PC	PC	PC	PC	PC	PC	PC	PC
Acet Num	62	92	06	93	95	09	197	202	277	311	329	351	410	412	417

### THE PRESTO FOUNDATION 39-6045769 YEAR ENDED MAY, 31 2015

YEAR ENDED MAY, 31 2015 GRANTS AND CONTRIBUTIONS FORM 990 PF, PAGE 10, PART XV, LINE 3a

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	Relationship None	None		None	None	None	None	None	None	None	None	None	None	None	None	None
	YTD Payments	3 713 65		13,000 00	6,883 11	12,816 09	13,000 00	5,106 34	13,000 00	13,000 00	10,225 32	5,954 77	13,000 00	13,000 00	13,000 00	5,684 31
	City State Zip SHEBOYGAN, WI 53082	CONWAY AR 72035		LA CROSSE, WI 54601	EAU CLAIRE, WI 54702	WINONA, MN 55987-5838	WINONA, MN 55987-5838	FAYETTEVILLE, AR 72702	SEARCY, AR 72149	PROVIDENCE, RI 02903	STATE UNIVERSITY, AR 72467	FAYETTEVILLE, AR 72702	CHICAGO, IL 60607	BROOKINGS, SD 57007	WHITEWATER, WI 53190	MAGNOLIA, AR 71754-9411
	Address P O BOX 359	201 DONAGHEY AV		900 VITERBO DR	FINANCIAL AID OFFICE P O BOX 4004	ATTN CASHIER P O BOX 5838	175 W MARK ST P O BOX 5838	P O BOX 1404	HU BOX 10770	STUDENT FINANCIAL SERVICE P O BOX 5956	P O BOX 2640	P O BOX 1404	STUDENT FIN AID MC334 1200 W HARRISON ROOM 180	FINANCIAL AID OFC ENROLLMENT SERV CTR	BOX 3 H A CASHIER'S OFFICE P O BOX 88	P O BOX 9411
D OF EMPLOY		SHANE HEDRINGTON UNIV OF CENTRAL ARKANSAS	DEANA HUGHES	VITERBO UNIVERSITY SARA KEARNS	U W EAU CLAIRE JUSTIN KENNEDY	WINONA STATE UNIVERSITY TAYLOR LARSON	WINONA STATE UNIVERSITY JESSICA LAVORATA	UNIVERSITY OF ARKANSAS JACOB LINDSEY	HARDING UNIVERSITY JAMI CRAWFORD LUCAS	JOHNSON& WALES UNIVERSITY ALLYSON LYONS	ARKANSAS STATE UNIVERSITY JORDAN MCDANIEL	UNIVERSITY OF ARKANSAS CARI MOLL	UNIVERSITY OF ILLINOIS MORGAN NELSON	S DAKOTA STATE UNIVERSITY ANN PEDERSON	UW-WHITEWATER NICOLE PENNA	SOUTHERN ARKANSAS UNIV CHRISTA PIPKIN
SCHLRSHPS FOR CHILD OF EMPLOY	Alpha Sort Code HEDRIN	HUGHES		KEARNS	KENNED	LARSON	LAVORA	LINDSE	LUCAS	LYONS	MCDANI	MOLL	NELSON	PEDERS	PENNAN	PIPKIN
03 SCHLR	Recipient Code PC	PC		PC	PC	PC	PC	PC	PC	PC	PC	PC	PC	PC	PC	PC
CATEGORY	Acct Num R 423	448		503	502	574	577	564	189	589	619	634	673	869	713	774

O \Foundation\RecipientListingYearly\_for Lisa\_PY rep

# THE PRESTO FOUNDATION 39-6045769 YEAR ENDED MAY, 31 2015 GRANTS AND CONTRIBUTIONS FORM 990 PF, PAGE 10, PART XV, LINE 3a

	Relationship None	None	None	None	None	None	None	
į	YTD Payments Relationship 12,71876 None	12,982 10	13,000 00	11,442 82	13,000 00	13,000 00	13,000 00	423,787 61
	City State Zip EAU CLAIRE, WI 54702	LA CROSSE, WI 54409	MADISON, WI 53706-1383	MENOMONIE, WI 54751	BROOKINGS, SD 57007	MINNEAPOLIS, MN 55485-6443	DURHAM, NC 27708-0759	TOTAL * *
	Address FINANCIAL AIDS OFC P O BOX 4004	121 GRAFF MAIN HALL 1725 STATE ST	BURSAR'S OFFICE 333 E CAMPUS MALL #10501	FINANCIAL AIDS OFFICE 210 BOWMAN HALL	FINANCIAL AID OFC ENROLLMENT SERV CTR	BOX 311 A NW6443 P O BOX 1450	CASHIERING BAY 8,ROOM B 103	* * CATEGORY TOTAL * *
D OF EMPLOY	de Recipieut Name U W EAU CLAIRE ZACHARY PONASIK	U W LA CROSSE NOELLE PONASIK	U W MADISON MITCHELL RITZINGER	U W STOUT ALEX SEIDLITZ	S DAKOTA STATE UNIVERSITY KALYNN SLABAUGH	UNIV MN - TWIN CITIES MATTHEW SORENSEN	DUKE UNIVERSITY MICHAEL WEYENBERG	
SCHLRSHPS FOR CHILD OF EMPLOY	Alpha Sort Code PONASI	PONASI	RITZIN	SEIDLI	SLABAU	SORENS	WEYENB	
	Recipient Code PC	PC	PC	PC	PC	PC	PC	
CATEGORY 03	Acct Num 1 708	710	722	768	772	777	895	

# 39-6045769 YEAR ENDED MAY, 31 2015 GRANTS AND CONTRIBUTIONS FORM 990 PF, PAGE 10, PART XV, LINE 3a

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•	Relationship None	None	None	None	None	None	None
	YTD Payments Relationship 400 00 None	200 00	2,000 00	100 00	100 00	100 00	100 00
	City State Zip ANTIGO, WI 54409	EAU CLAIRE, WI 54702	STEVENS POINT, WI 54481-5819	CHIPPEWA FALLS, WI 54729	EAU CLAIRE, WI 54702	STRUM, WI 54770	EAU CLAIRE, WI 54701
	Address 115 NINTH AV	EAU CLAIRE CHAPTER P O BOX 773	1804 CONANT STREET	ASSOC/HEYDE CTR FOR ARTS 3 SOUTH HIGH ST	P O BOX 1204	PUBLIC LIBRARY P O BOX 10	PUBLIC LIBRARY 400 EAU CLAIRE ST
L, ОТН ЕD	Recipient Name ANTIGO MUSIC ASSOCICATION	ASSOC MALE CHORUSES OF AM EAU CLAIRE CHAPTER	BARBERSHOP HARMONY SOC	CHIPPEWA VALLEY CULTURAL	CHIPPEWA VALLEY MUSEUM	FRIENDS OF THE STRUM PUBLIC LIBRARY	L E PHILLIPS MEMORIAL PUBLIC LIBRARY
CULTURAL, HISTORICAL, OTH ED	Recipient Code Alpha Sort Code PC ANTIGO	ASSOCM	BARBER	CHIPPE	CHIPPE	FRIEND	LEPHIL
	Recipient Code PC	GROUP	PC	PC	PC	PC	PC
CA FEGORY 04	Acet Num 47	42	57	146	091	346	557

3,000 00

\* \* CATEGORY TOTAL \* \*

### 39-6045769 YEAR ENDED MAY, 31 2015 GRANTS AND CONTRIBUTIONS FORM 990 PF, PAGE 10, PART XV, LINE 3a

	Relationship	None	None	None	None	None	None	None	None	None	None	None	None	None	None	
	YTD Payments I		200 00	1,000 00	2,600 00	20,090 00	2,500 00	1,000 00	100 00	100 00	1,000 00	3,500 00	1,000 00	2,000 00	3,450 00	69,340 00
	City State Zip	GREEN BAY, WI 54311	MADISON, WI 53717	ATLANTA, GA 30303-1002	JANESVILLE, WI 53547-5391	NEW YORK, NY 10022	ANTIGO, WI 54409	JANESVILLE, WI 53548	CHIPPEWA FALLS, WI 54729	EAU CLAIRE, WI 54703	BROOKFIELD, WI 53005	PORTLAND, OR 97205	MILWAUKEE, WI 53226	•	ST LOUIS, MO 63179-0408	JTAL * *
	Address	GREATER WISCONSIN 2900 CURRY LANE STE A	MIDWEST DIVISION 8317 ELDERBERRY RD	250 WILLIAMS ST NW	3507 E RACINE ST P O BOX 5391	FOUNDATION 60 EAST 56TH ST 5TH FLOOR	LANGLADE MEMORIAL HOSP 112 E FIFTH AVE	23 W MILWAUKEE ST	FOUNDATION 2661 COUNTY HIGHWAY I	ADMINISTRATION 2106 DECLARATION DR	SOCIETY OF WISCONSIN 200 S EXECUTIVE DR STE203	GREATER OREGON CHAPTER 1220 SW MORRISON STE 510	BRAIN TUMOR RESEARCH PROG 8701 WATERTOWN PLANK RD	RESEARCH HOSPITAL, INC	P O BOX 790408	* * CATEGORY TOTAL * *
ELATED ACTI	e Recipient Name	ALZHEIMERS A' GREATER WISC	AMERICAN CANCER SOCIETY MIDWEST DIVISION	AMERICAN CANCER SOCIETY	AMERICAN HEART ASSOC	BREAST CANCER RESEARCH FOUNDATION	COMMUNITY HEALTH FOUND	HEALTHNET OF JANESVILLE	HSHS ST JOSEPH'S FOUNDATION	JOSHUA'S CAMP	LEUKEMIA & LYMPHOMA SOCIETY OF WISCONSIN	MARCH OF DIMES GREATER OREGON CHAPTER	MEDICAL COLLEGE OF WI BRAIN TUMOR RESEARCH PROG	ST JUDE CHILDREN'S RESEARCH HOSPITAL, INC	U S BANK CHILDREN'S MIRACLE NETWORK-ACE	HARDWAKE
HEALTH SERVICES & RELATED ACTI	Alpha Sort Code	ALZEIM	AMERIC	AMERIC	AMERIC	BREAST	COMMUN	НЕАГТН	HSHS	JOSHUA	LEUKEM	MARCHO	MEDICA	STJUDE	USBANK	
06 HEALT	Recipient Code	PC	PC	PC	PC	PC	PC	PC	PC	PC	PC	PC	PC	PC	PC	
CATEGORY	Acct Num		21	39	30	16	184	419	345	475	556	019	624	801	988	

ADT VV IINE 2.	ALLAY, LINE 32	
CODMINATOR DACE 10 DADT VV	770 1 1, 1 4 6 6 10, 1	
EODM	LONIN	

	elationship None	None	None	None	None
	YTD Payments Relationship 50 00 None	400 00	100 00	00 009	100 00
	City State Zip CHIPPEWA FALLS, WI 54729	WHITEWATER, WI 53563	CHIPPEWA FALLS, WI 54729	EAU CLAIRE, WI 54702	EAU CLAIRE, WI 54702
	Address ALL-STARS 4289 1247H ST	OLYMPICS 8327 N LIMA CENTER RD	CHIPPEWA LIONS CLUB 13857 85TH AVE	EAU CLAIRE LIONS CLUB P O BOX 42	SEYMOUR LIONS CLUB P O BOX 3064
CREATIONAL	le CHIPPEWA VALLEY SPIRIT ALL-STARS	JANESVILLE AREA SPECIAL OL YMPICS	LIONS INTERNATIONAL CHIPPEWA LIONS CLUB	LIONS INTERNATIONAL EAU CLAIRE LIONS CLUB	LIONS INTERNATIONAL SEYMOUR LIONS CLUB
SPORTS, ATHLETIC, RECREATIONAL	Alpha Sort Coc CHIPPE	JANESV	LIONSI	LIONSI	LIONSI
12 SPORTS	Recipient Code Alpha Sort Code PC CHIPPE	GROUP	PC	PC	PC
CATEGORY 12	Acct Num 1	472	559	999	563

1,250 00

\* \* CATEGORY TOTAL \* \*

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YEAR ENDED MAY, 31 2015
GRANTS AND CONTRIBUTIONS
FORM 990 PF, PAGE 10, PART XV, LINE 3a

YOUTH ACTIVITIES

CATEGORY 13

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Relationship None	None	None	None	None	None	None	None	None	None	None	None
YTD Payments F 550 00	100 00	750 00	1,000 00	2,000 00	300 00	1,000 00	1,000 00	1,000 00	200 00	200 00	2,000 00
City State Z.p ANTIGO, WI 54409	EAU CLAIRE, WI 54703	JANESVILLE, WI 53548	ANTIGO, WI S4409	EAU CLAIRE, WI 54701	CLEAR LAKE, SD 57226	JANESVILLE, WI 53545	JANESVILLE, WI 53547	RICE LAKE, WI 54868	CHIPPEWA FALLS, WI 54729-2542	EAU CLAIRE, WI 54702-1367	EAU CLAIRE, WI 54701
Address P O BOX 403	OF NORTHWESTERN WISCONSIN 424 GALLOWAY ST	JANESVILLE INC 200 W COURT	LANGLADE COUNTY 801 FIFTH AVE	GREATER CHIPPEWA VALLEY 201 E LAKE ST	P O BOX 350	P O BOX 161	P O BOX 211	P O BOX 291	CHIPPEWA CTY SHERIFF'S OF ATTN SHERIFF KOWALCZYK	32 E SFRUCE S1 MEHARA SHRINE CLUB P O BOX 1367	700 GRAHAM AVE
Recipient Name ANTIGO AREA REC FOUND	BIG BROTHERS/BIG SISTERS OF NORTHWESTERN WISCONSIN	BOYS & GIRLS CLUB OF JANESVILLE INC	BOYS & GIRLS CLUB OF LANGLADE COUNTY	BOYS & GIRLS CLUB OF GREATER CHIPPEWA VALLEY	DEUEL COUNTY 4-H	JANESVILLE YOUTH BASEBALL	JANESVILLE YOUTH FOOTBALL	KINSHIP OF RICE LAKE INC	NATIONAL CHILD SAFETY COU	SHRINE CIRCUS FUND MEHARA SHRINE CLUB	Y M C A - EAU CLAIRE
Alpha Sort Code ANTIGO	BIGBRO	BOYSGI	BOYSGI	BOYSGI	DEUEL	JANESV	JANESV	KINSHI	NATION	SHRINE	YMCAEA
Recipient Code PC	PC	PC	PC	PC	PC	PC	PC	PC	PC	PC	PC
Acet Num 43	70	82	83	84	672	473	471	478	645	770	959

\* \* CATEGORY TOTAL \* \*

10,100 00

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THE PRESTO FOUNDATION	39-6045769
THEF	

YEAR ENDED MAY, 31 2015 GRANTS AND CONTRIBUTIONS FORM 990 PF, PAGE 10, PART XV, LINE 3a

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	VTD Payments Relationship	1,000 00 None	None	
	YTD Payments	1,000 00	225 00	1,225 00
	City State Zip	CANTON, MS 39046	CORNELL, WI 54732	* * CATEGORY TOTAL * *
	Address	200 PARK DRIVE	100 OSBORNE ST	* * CATE
VILY ACTIVI	Recipient Name	CANTON POLICE DEPARTMENT	CORNELL AREA FIRE DEPT	
CATEGORY 16 INNER CITY OR COMMUNITY ACTIVI	Recipient Code Alpha Sort Code	CANTON	CORNEL	
16 INNER (		PC	PC	
CATEGORY	Acct	94	199	

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# THE PRESTO FOUNDATION 39-6045769 YEAR ENDED MAY, 31 2015 GRANTS AND CONTRIBUTIONS FORM 990 PF, PAGE 10, PART XV, LINE 3a

	YTD Payments Relationship 100 00 None	None	
	YTD Payments 100 00	300 00	400 00
	City State Zip EAU CLAIRE, WI 54702	JANESVILLE, WI 53545	* * CATEGORY TOTAL * *
	Address P O BOX 482	TO HELP OTHERS INC 65 SO HIGH ST	* * CATEGO
) TO INDIVID	e BOLTON REFUGE HOUSE	ECHO-EVER YONE COOPERATING TO HELP OTHERS INC	
ACT DIRECTED	Recipient Code Alpha Sort Code PC BOLTON	ЕСНОЕV	
CATEGORY 21 OTHER ACT DIRECTED TO INDIVID	Recrpient Code PC	PC	
CATEGORY	Acct Num 80	273	

# 39-6045769 YEAR ENDED MAY, 31 2015 GRANTS AND CONTRIBUTIONS FORM 990 PF, PAGE 10, PART XV, LINE 3a

CATEGORY 22	Y 22 ACT D	ACT DIRECTED TO OTH ORGANIZA	H ORGANIZA				•
Acct Num		Recipient Code Alpha Sort Code	e Recipient Name	Address	City State Zip	VTD Payments	YTD Payments Relationship
178	PC	COMMUN	COMMUNITY FOUNDATION	OF MIDDLE TENNESSEE 3833 CLEGHORN AV STE 400	NASHVILLE, TN 37215	1,500 00	None
255	PC	EAUCLA	EAU CLAIRE COMMUNITY FOUNDATION	FOUNDATION 306 S BARSTOW ST	EAU CLAIRE, WI 54701	15,000 00	None
838	PC	TRINIT	TRINITY EQUESTRIAN CENTER	S5300 STATE RD 37	EAU CLAIRE, WI 54701	2,500 00	None
848	PC	UNITED	UNITED WAY OF BON TON FOR UNITED WAY	GREATER MILWAUKEE 225 W VINE ST	MILWAUKEE, WI 53212	5,000 00	None
860	PC	UNITED	UNITED WAY OF NORTH ROCK COUNTY INC	COUNTY INC 205 N MAIN	JANESVILLE, WI 53545	2,500 00	None
865	PC	UNITED	UNITED WAY OF THE GREATER	CHIPPEWA VALLEY 3603 N HASTINGS WAY SUITE 200	EAU CLAIRE, WI 54703	12,600 00	None
				* * CATEGORY TOTAL * *	AL * *	39,100 00	

39-6045769 YEAR ENDED MAY, 31 2015 GRANTS AND CONTRIBUTIONS FORM 990 PF, PAGE 10, PART XV, LINE 3a

08/04/2015 10 58 41 am

,	Relationship None	None	None	None	None	None	None	None	None	None	None	None	None	None
	VTD Payments 500 00	5,000 00	100 00	200 00	4,900 00	300 00	100 00	1,000 00	10,000 00	400 00	10,000 00	2,800 00	215,000 00	750 00
	City State Zip ANTIGO, WI 54409	CHICAGO, IL 60652	EAU CLAIRE, WI 54702-1326	EAU CLAIRE, WI 54703	NEILLSVILLE, WI 54456	ANTIGO, WI 54409	BUTLER, WI 53007	QUANTICO, VA 22134	JACKSON, MS 39225	NORTH KINGSTOWN, RI 02852	GREEN BAY, WI 54307-9060	CHICAGO, IL 60631	HUNTSVILLE, AL 35899	EAU CLAIRE, WI 54703
	Address P O BOX 523	7744 S KEDZIE AVE	P O BOX 1326	MUTUAL ASSISTANCE ASSOC 423 WISCONSIN ST	HIGH GROUNDS P O BOX 457	P O BOX 384	OF WISCONSIN 13195 W HAMPTON AVE	ATTN MCAF DONATIONS P O BOX 1775	DISASTER RELIEF FUND P O BOX 22871	CHARITABLE FOUNDATION 375 COMMERCE PARK ROAD	P O BOX 19060	8600 W BRYN MAWR AVE	AT HUNTSVILLE UAH ADDITIVE MFG RESEARCH	301 SPARKMAN DR 1300 STARR AVE
ACTIVITIES	Recipient Name ANTIGO ROTARY CLUB FOUND	BARNES FOUNDATION	BLOODHOUND IN TRAINING	EAU CLAIRE AREA HMONG MUTUAL ASSISTANCE ASSOC	WI VIETNAM VET MEMORIAL HIGH GROUNDS	LANGLADE CO HUMANE SOC	MAKE A WISH FOUNDATION OF WISCONSIN	MCAF MARINE CORPS ASSOCIATION FOUNDATION	MISSISSIPPI STATE TROOPER DISASTER RELIEF FUND	OCEAN STATE JOB LOT CHARITABLE FOUNDATION	SHOPKO FOUNDATION	TRUE VALUE FOUNDATION	UNIVERSITY OF ALABAMA AT HUNTSVILLE	VFW POST 305
23 OTHER PURPOSES AND ACTIVITIES	Alpha Sort Code ANTIGO	BARNES	вгоорн	EAUCLA	HIGRND	LANGLA	MAKEAW	MCAF	MISSIS	OCEAN	SHOPKO	TRUEVA	UNIVER	VFWPOS
	Recipient Code PC	PC	PC	PC	PC	PC	PC	PC	PC	PC	PC	PC	PC	PC
CATEGORY	Acct Num I 44	99	74	252	968	552	909	621	626	670	177	844	867	891

251,050 00

\* \* CATEGORY TOTAL \* \*

THE PRESTO FOUNDATION
39-6045769
YEAR ENDED MAY, 31 2015
GRANTS AND CONTRIBUTIONS
FORM 990 PF, PAGE 10, PART XV, LINE 3a

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08/04/2015 10 58 41 am

973,802 61

\* \* GRAND TOTAL \* \*