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Department of the Treasury Internal Revenue Service

### Return of Organization Exempt From Income Tax

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

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

Open to Public Inspection

OMB No 1545-0047

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

A For the 2015 calendar year, or tax year beginning and ending D Employer identification number Check if applicable C Name of organization Address change FIRST WEBER FOUNDATION, INC. X Name change 20-3601589 Doing business as Initial return Number and street (or P.O. box if mail is not delivered to street address) Room/suite E Telephone number 608-443-2280 5250 E TERRACE DR termi City or town, state or province, country, and ZIP or foreign postal code 223,312. G Gross receipts \$ MADISON, WI 53718-8345 H(a) Is this a group return F Name and address of principal officer JAMES IMHOFF, JR. Yes X No Application for subordinates? pending SAME AS C ABOVE H(b) Are all subordinates included? JYes L Tax-exempt status X 501(c)(3) 501(c) ( )◀ (insert no ) 4947(a)(1) or If "No," attach a list (see instructions) J Website: WWW.FIRSTWEBER.COM/FOUNDATION H(c) Group exemption number ▶ Form of organization: X Corporation Year of formation: 2005 M State of legal domicile: WI Trust Association Part I Summary Briefly describe the organization's mission or most significant activities FIRST WEBER FOUNDATION HAS BEEN Governance ESTABLISHED TO EXPAND ITS COMMITMENT TO STRENGTHEN OUR COMMUNITIES  $\perp$  if the organization discontinued its operations or disposed of more than 25% of its net assets 12 3 Number of voting members of the governing body (Part VI, line 1a) 12 4 Number of independent voting members of the governing body (Part VI, line 1b) Activities & 0 Total number of individuals employed in calendar year 2015 (Part V, line 2a) 5 12 6 Total number of volunteers (estimate if necessary) 0. 7 a Total unrelated business revenue from Part VIII, polymp 12 7a 0. 7b b Net unrelated business taxable income from Form 990-1, line 34 **Prior Year Current Year** SEP 3 0 2016 0 208,817. Contributions and grants (Part VIII, line 1h 0. 0. Program service revenue (Part VIII, line 2g 0. 190. Investment income (Part VIII, column (A), lines 3, 4 (and 100) 10 2,444. 0. Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) 11 211,451. 0. Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12) 12 182,338. 0. Grants and similar amounts paid (Part IX, column (A), lines 1-3) 13 0. 0 • Benefits paid to or for members (Part IX, column (A), line 4) 14 0. 0. Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10) 15 0. 0. 16a Professional fundraising fees (Part IX, column (A), line 11e) 3,095. b Total fundraising expenses (Part IX, column (D), line 25) 9,489. Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e) 0. 0. 191,827. 18 Total expenses Add lines 13-17 (must equal Part IX, column (A), line 25) 19,624. Revenue less expenses Subtract line 18 from line 12 **Beginning of Current Year End of Year** 107,821. 114,570. 20 Total assets (Part X, line 16) 370 50,495. 21 Total liabilities (Part X, line 26) 64,075. 44,451 Net assets or fund balances Subtract line 21 from line 20 Part II | Signature Block Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any Sign Signature of officer JAMES IMHOFF, JR.,
Type or print name and title CHAIRPERSON Here Check Print/Type preparer's name signatur Păid SCOTT HAUMERSEN, self-employed P00084908 CPA 39-0974031 Firm's name WEGNER CPAS, Firm's EIN Preparer Firm's address 2110 LUANN LN Use Only Phone no. 608 - 274 - 4020 MADISON, WI 53713-3074 X Yes May the IRS discuss this return with the preparer shown above? (see instructions)

	990 (2015) FIRST WEBER FOUNDATION, INC.	20-3601589 Page 2
Pa	rt III Statement of Program Service Accomplishments	
	Check if Schedule O contains a response or note to any line in this Part III	X
1	Briefly describe the organization's mission	
	FIRST WEBER FOUNDATION HAS BEEN ESTABLISHED TO EXPAND I	
	TO STRENGTHEN OUR COMMUNITIES THROUGH BOTH CHARITABLE CO	
	AND VOLUNTEER LEADERSHIP. THE FOUNDATION FOCUSES ON GIVE	
	IN AREAS OF WISCONSIN WHERE FIRST WEBER HAS A MAJOR PRES	SENCE, SEEKING
2	Did the organization undertake any significant program services during the year which were not listed on	
	the prior Form 990 or 990-EZ?	Yes X No
_	If "Yes," describe these new services on Schedule O	Yes X No
3	Did the organization cease conducting, or make significant changes in how it conducts, any program services?	LYes L&_No
_	If "Yes," describe these changes on Schedule O	
4	Describe the organization's program service accomplishments for each of its three largest program services, as	-
	Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to other	ers, the total expenses, and
40	revenue, if any, for each program service reported  (Code) (Expenses \$ 184,991. including grants of \$ 182,338.) (Revenue)	
4a	(Code)(Expenses \$ 184,991. Including grants of \$ 182,338.) (Revenue FIRST WEBER FOUNDATION PROVIDES FINANCIAL SUPPORT TO CHARACTERIST CONTROL OF SUPPORT CONTROL OF SUPPORT TO CHARACTERIST CONTROL OF SUPPORT CONTROL OF SUPPORT CONTROL OF SUPPORT CONTROL OF	
	ORGANIZATIONS THROUGHOUT WISCONSIN AND THE UNITED STATES	
	THOSE THAT PROVIDE ASSISTANCE TO PEOPLE IN NEED OF HOUS	
	AND OTHER BASIC NECESSITIES. SINCE 2006, THE FOUNDATION	
	CONTRIBUTED OVER \$1,700,000 BENEFITING OVER 500 ELIGIBLE	
	ORGANIZATIONS.	
	0.00.27.20.00	
4b	(Code) (Expenses \$	ue\$)
		<del></del>
		<del></del>
4c	(Code) (Expenses \$) (Reven	ue \$)
		-
	Other program services (Describe in Schedule O)	·
-Tu		1
	(Expenses \$ including grants of \$ ) (Revenue \$  Total program service expenses ► 184,991.	
	. C.	Form <b>990</b> (2015)
53200 12-18		, 5 5 5 (2010)

Form 990 (2015) FIRST WEBER FOUNDATION, INC.

Part IV Checklist of Required Schedules

3 Ind the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I Section 501(q)3 organizations. Did the organization engage in lobbying activities, or have a section 501(q) logical partial forms of the organization and property in "Yes," complete Schedule C, Part II Section 501(q)(4), 501(q)(5), or 501(q)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III 5 but the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advise on the distribution or investment of amounts in such funds or accounts If "Yes," complete Schedule D, Part II 7 Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part III 7 Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV 1 If the organization report an amount for another services or services in temporarily restricted endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V 1 If the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part V 1 Did the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part V II Did the organization report an amount for other lasbilities in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part X II D				Yes	No
2 Is the organization required to complete Schedule B, Schedule of Contributors? 3 Did the organization engage in direct or indirect political campagn activities on behalf of or in opposition to candidates for public office? If 'Yes,' complete Schedule C, Part I 4 Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year If 'Yes,' complete Schedule C, Part II 5 Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-197 If 'Yes,' complete Schedule C, Part II 6 Did the organization as section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-197 If 'Yes,' complete Schedule C, Part II 6 Did the organization in Revenue Procedure 98-197 If 'Yes,' complete Schedule C, Part II 7 Did the organization in Revenue or hold a consensation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If 'Yes,' complete Schedule D, Part II 8 Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If 'Yes,' complete Schedule D, Part IV 8 Did the organization report an amount for lined by the securities in Part X, line 107 If 'Yes,' complete Schedule D, Part VI 9 Did the organization report an amount for investments - other securities in Part X, line 107 If 'Yes,' complete Schedule D, Part VI 10 Did the organization report an amount for investments - other securities in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 167 If 'Yes,' complete Schedule D, Part VI 10 Did the organization report an amount for other liabilities in Part X, line 13 that is 5% or	1	•		l	
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Schedule D, Part III  Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV  Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part VI  If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Part VI, VIII, VIII, VII, VII, VIII, VII, V			7	ļ	X
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Form <b>990</b> (20			Forn	n <b>990</b>	(2015)

Form 990 (2015) FIRST WEBER FOUNDATION, INC.

Part IV Checklist of Required Schedules (continued)

			Yes	No
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		X
	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or			
	domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	X	
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on			
	Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		X
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current			
	and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete			
	Schedule J	23		X
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the			ł
	last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete			ĺ
	Schedule K If "No", go to line 25a	24a		<u>X</u>
ь	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		<u></u> .
¢	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease			
	any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit			
	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		_X_
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and			
	that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete			
	Schedule L, Part I	25b		X
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or			
	former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If "Yes,"			l
	complete Schedule L, Part II	26		X
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial	ļ		
	contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member			7.7
	of any of these persons? If "Yes," complete Schedule L, Part III	27		X
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV			
	instructions for applicable filing thresholds, conditions, and exceptions)	200-		х
a	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV  A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a 28b		X
b	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer,	200		
С	director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		x
20	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes, " complete Schedule M	29		X
29 30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation	2.5		
30	contributions? If "Yes," complete Schedule M	30		х
31	Did the organization liquidate, terminate, or dissolve and cease operations?			<u>                                   </u>
31	If "Yes," complete Schedule N, Part I	31		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete			
	Schedule N, Part II	32		X
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			
	sections 301 7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part I	33		X
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and	ļ	ŀ	
	Part V, line 1	34		X
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		X
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity			}
	within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?	ł		1.
	If "Yes," complete Schedule R, Part V, line 2	36	<u> </u>	X
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization	ļ		
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37	<del> </del>	X
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?			
	Note. All Form 990 filers are required to complete Schedule O	38	X	12.5
		Form	1 99U	(2015)

Form 990 (2015)

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

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Form 990 (2015) FIRST WEBER FOUNDATION. 20-3601589 Part VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions.  $\mathbf{x}$ Check if Schedule O contains a response or note to any line in this Part VI Section A. Governing Body and Management Yes No 12 1a Enter the number of voting members of the governing body at the end of the tax year 1a If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O 12 b Enter the number of voting members included in line 1a, above, who are independent Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other Х officer, director, trustee, or key employee? 2 3 Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, or trustees, or key employees to a management company or other person? 3 Х X Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? X Did the organization become aware during the year of a significant diversion of the organization's assets? 5 Х Did the organization have members or stockholders? 6 7a Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or Х more members of the governing body? 7a b Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or Х 7b persons other than the governing body? Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: X a The governing body? 8a b Each committee with authority to act on behalf of the governing body? X 8b Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the X organization's mailing address? If "Yes," provide the names and addresses in Schedule O Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code) Yes No 10a X 10a Did the organization have local chapters, branches, or affiliates? b If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? 10b X 11a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? 11a b Describe in Schedule O the process, if any, used by the organization to review this Form 990 X 12a Did the organization have a written conflict of interest policy? If "No," go to line 13 12a X b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? 12b c Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe X in Schedule O how this was done 12c X 13 Did the organization have a written whistleblower policy? 13 X Did the organization have a written document retention and destruction policy? 14 Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? a The organization's CEO, Executive Director, or top management official 15a X 15b Other officers or key employees of the organization If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions) 16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year? 16a Х b If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?

Se	ction	C.	Disc	losure

532008 12-16-15

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

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

Own website. 

Other (explain in Schedule O)

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

State the name, address, and telephone number of the person who possesses the organization's books and records ► JAMES IMHOFF, JR. - 608-443-2280

5250 E TERRACE DR STE I, MADISON, WI 53718-8345

Form **990** (2015)

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

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

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

- 1a Complete this table for all persons required to be listed Report compensation for the calendar year ending with or within the organization's tax year
- List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation Enter -0- in columns (D), (E), and (F) if no compensation was paid
  - List all of the organization's current key employees, if any See instructions for definition of "key employee."
- List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations
- List all of the organization's former officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations
- List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations

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

(A) Name and Title	(B) Average hours per week	POSITION (do not check more than one box, unless person is both an officer and a director/trustee)					h an	(D) Reportable compensation from	(E) Reportable compensation from related	(F) Estimated amount of other
	(list any hours for related organizations below line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC)	organizations (W-2/1099-MISC)	compensation from the organization and related organizations
(1) JAMES IMHOFF, JR.	1.00									
PRESIDENT		X		X				0.	0.	0.
(2) KEVIN DONNELL	0.50									0
VICE PRESIDENT	0.50	X		X		-		0.	0.	0.
(3) ROBERT WEBER	0.50	٠,		<b></b>					_	0
TREASURER	0.50	X		Х				0.	0.	0.
(4) TAMMY MADDENTE	0.50	x		x				0.	0.	ø.
SECRETARY	0.50	^		Δ				0.		<u>.</u>
(5) NANCY HILTON	0.30	X						0.	0.	0.
DIRECTOR (6) MICHAEL SPRANGER	0.50	72				<del> </del>				
DIRECTOR	0.30	x						0.	0.	0.
(7) NORMA WAGEMAN	0.50				-	<del>                                     </del>				-
DIRECTOR		X					Ì	0.	0.	0.
(8) CINDY FLEMING	0.50									
DIRECTOR		X						0.	0.	0.
(9) MEGAN LANG	0.50	]								
DIRECTOR		X	<u> </u>		_			0.	0.	0.
(10) PAM BIRSCHACH	0.50	Į								
DIRECTOR		X	<u> </u>	-		-		0.	0.	0.
(11) SANDY EBBEN	0.50	١								
DIRECTOR	0.50	X	<del> </del>	-	<u> </u>	-		0.	0.	0.
(12) JULIE LANG	0.50									_
DIRECTOR		X	├		-	1	-	0.	0.	0.
		+			1					
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Form **990** (2015)

Part VII   Section A. Officers, Directors, Trus (A) Name and title	(B) Average hours per	(C) Position (do not check more than one box, unless person is both an					one n an	(D)  Reportable compensation	(E)  Reportable compensation			(F) imate ount	
	week (list any hours for related organizations below line)	stee or director	institutional trustee	Officer P		Highest compensated		from the organization (W-2/1099-MISC)	from related organizations (W-2/1099-MISC	C)	comp fro orga and	other pensa om the nizati relate nizatie	e ion ed
									-				
		-											
<u> </u>													
		ļ 											
1.2.11							_						
1b Sub-total c Total from continuation sheets to Part V	II, Section A						<b>&gt;</b>	0.		0.			0.
d Total (add lines 1b and 1c)  Total number of individuals (including but r	not limited to th	nose	liste	ed al	bov	e) wł	10 re	0 . eceived more than \$100	),000 of reportable	0.	_		0.
compensation from the organization												Yes	No
3 Did the organization list any former officer line 1a? If "Yes," complete Schedule J for s	such individual										3		Х
4 For any individual listed on line 1a, is the si and related organizations greater than \$15	0,000? If "Yes,	, " <i>c</i> c	mpl	ete S	Sch	edul	e J f	for such individual			4		х
5 Did any person listed on line 1a receive or rendered to the organization? If "Yes," con							elat	ed organization or indiv	idual for services		5	_	х
Section B. Independent Contractors  1 Complete this table for your five highest co										pens	ation fi	rom	
the organization Report compensation for (A)					<u>vith</u>	or w	<u>rithir</u>	(B)			(C	;)	
Name and business	address	N	ON	<u>E</u>				Description of s	services		omper	ISALIO	
			_										
											_		
								· · · · · · · · · · · · · · · · · · ·					
	<u> </u>							<u> </u>					
Total number of independent contractors (	(including but i	not I	ımıte	ed to	the	se li	stec	d above) who received r	nore than				-
\$100,000 of compensation from the organ	ization >					0					Form !	990	2015

_ al	LVII	Check if Schedule O cont		or note to any line	e in this Part VIII			
		Oneokii Gorioddio G cont	an o a veepenee	9, 110.00 to 22.1, 111.1	(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	Revenue excluded from tax under sections 512 - 514
ats tts	1 a	Federated campaigns	1a					
ام يز	ь	Membership dues	1b					
A, E	С	Fundraising events	1c	_				
i i	d	Related organizations	1d			,		
S,C	е	Government grants (contribut	ions) 1e					
rion Sign	f	All other contributions, gifts, gran	its, and					
the the		sımılar amounts not included abo	ve 1f	208,817.	i			
90	g	Noncash contributions included in lines	1a-1f \$					
Contributions, Gifts, Grants and Other Similar Amounts	h	Total. Add lines 1a-1f		<b>•</b>	208,817.			
				Business Code				
ဗ	2 a			1		<u> </u>		
e Z	b							
en S	С	·						
Re Ja	d	·						-
Program Service Revenue	e		·					
_	†	All other program service reverse Total. Add lines 2a-2f	enue	<b>•</b>				
	<u>y</u>	Investment income (including	dividends intere					
	•	other similar amounts)		<b>•</b>	190.			190.
	4	Income from investment of ta	x-exempt bond p	roceeds				
	5	Royalties		•				
	_		(ı) Real	(II) Personal				
	6 a	Gross rents						
	b	Less rental expenses						
	С	: Rental income or (loss)						
	d	Net rental income or (loss)		▶				
	7 a	Gross amount from sales of	(ı) Securities	(ii) Other				
		assets other than inventory						
	b	Less cost or other basis						
		and sales expenses						
		: Gain or (loss)						
		Net gain or (loss)						
e l	8 a	Gross income from fundraisin	• •					
Other Revenue		including \$						
Re		contributions reported on line				1		
je		Part IV, line 18	а					
₽		<ul> <li>Less direct expenses</li> <li>Net income or (loss) from fund</li> </ul>	b drawing avents					
		Gross income from gaming a	-		<del></del>			
	y a	Part IV, line 19	a a	14,305.				1
i	ь	Less direct expenses	b	44 054				
		: Net income or (loss) from gan	· ·	<b>D</b>	2,444.			2,444.
		Gross sales of inventory, less	=					
		and allowances	а					
	b	Less cost of goods sold	b			[		
	C	Net income or (loss) from sale	es of inventory	<b></b>				
		Miscellaneous Revenu	ie	Business Code				
	11 a	ı						
	b			-				
	C					<del>                                     </del>		
	C							+
	_	Total. Add lines 11a-11d			211,451.	0.	0	2,634.
	12	Total revenue See instructions.			411,451.	U •		4,034

#### Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A) Check if Schedule O contains a response or note to any line in this Part IX (D) Fundraising (A) Total expenses (B) Do not include amounts reported on lines 6b, Program service Management and 7b, 8b, 9b, and 10b of Part VIII. expenses general expenses expenses Grants and other assistance to domestic organizations 182,338 182,338 and domestic governments. See Part IV, line 21 Grants and other assistance to domestic individuals See Part IV, line 22 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals See Part IV, lines 15 and 16 Benefits paid to or for members Compensation of current officers, directors, trustees, and key employees Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) Other salaries and wages Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions) Other employee benefits 10 Payroll taxes Fees for services (non-employees) a Management Legal 1,520 1,520 Accounting d Lobbying Professional fundraising services. See Part IV, line 17 Investment management fees Other (If line 11g amount exceeds 10% of line 25, 1,500. 1,500 3,000. column (A) amount, list line 11g expenses on Sch O.) Advertising and promotion 12 3,315 568. 355. 2,392. Office expenses 13 14 Information technology 15 Royalties 16 Occupancy 17 Travel Payments of travel or entertainment expenses for any federal, state, or local public officials 191. 191. Conferences, conventions, and meetings 19 20 Interest 21 Payments to affiliates Depreciation, depletion, and amortization 22 366. 512. 1,463. 585 23 Other expenses. Itemize expenses not covered 24 above. (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.) C All other expenses 191,827. 184,991. 3,741. 3,095. Total functional expenses. Add lines 1 through 24e 25 Joint costs Complete this line only if the organization 26 reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here

Form 990 (2015)
Part X Balance Sheet

	Check if Schedule O contains a response or note to any line in this Part X			
		(A) Beginning of year		(B) End of year
1	Cash - non-interest-bearing	15,457.	1	24,938.
2	Savings and temporary cash investments	78,547.	2	71,197.
3	Pledges and grants receivable, net	13,154.	3	17,864.
4	Accounts receivable, net		4	
5	Loans and other receivables from current and former officers, directors,			
	trustees, key employees, and highest compensated employees. Complete		]	
	Part II of Schedule L		5	
6	Loans and other receivables from other disqualified persons (as defined under			
	section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing			
	employers and sponsoring organizations of section 501(c)(9) voluntary			
	employees' beneficiary organizations (see instr) Complete Part II of Sch L		6	
7	Notes and loans receivable, net		7	
8	Inventories for sale or use		8	
9	Prepaid expenses and deferred charges	663.	9	571
10a	Land, buildings, and equipment cost or other			
	basis Complete Part VI of Schedule D 10a			
b	Less accumulated depreciation 10b		10c	
11	Investments - publicly traded securities			
12	Investments - other securities See Part IV, line 11		12	
13	Investments · program-related See Part IV, line 11			
14	Intangible assets			
15	Other assets See Part IV, line 11	105.001		111 500
16	Total assets. Add lines 1 through 15 (must equal line 34)			114,570
17		63,370.		270
18	• •	<u> </u>		50,225
19				
20	·			
	- · · · · · · · · · · · · · · · · · · ·		21	<del></del>
22			İ	
	•			
l			24	
25	· · · · · · · · · · · · · · · · · · ·			
			25	
200		63.370.		50,495
20		0373701		307230
27		44,451.	27	46,211
1				17,864
	, , , ,		<u> </u>	
23				
	_	l		
30			30	
	•		31	
L	•		32	
1		44,451.	33	64,075
50	Total liabilities and net assets/fund balances	107,821.	34	114,570
	2 3 4 5 6 7 8 9 10a b 11 12 13 14 15 16 17 18 19	2 Savings and temporary cash investments 3 Pledges and grants receivable, net 4 Accounts receivable, net 5 Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L 6 Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(8), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees beneficiary organizations (see instr). Complete Part II of Sch L 7 Notes and loans receivable, net 8 Inventories for sale or use 9 Prepaid expenses and deferred charges 10a Land, buildings, and equipment cost or other basis. Complete Part VI of Schedule D 1 Less accumulated depreciation 11 Investments: publicly traded securities. 12 Investments: other securities. See Part IV, line 11 13 Investments: program-related. See Part IV, line 11 14 Intangible assets. 15 Other assets. See Part IV, line 11 16 Total assets. Add lines 1 through 15 (must equal line 34) 17 Accounts payable and accrued expenses 18 Grants payable. 19 Deferred revenue. 20 Tax-exempt bond liabilities. 21 Escrow or custodial account liability. Complete Part IV of Schedule D 22 Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L 23 Secured mortgages and notes payable to unrelated third parties. 24 Unsecured notes and loans payable to unrelated third parties. 25 Other liabilities. Add lines 17 through 25  Organizations that follow SFAS 117 (ASC 958), check here   1 Total liabilities. Add lines 17 through 25  Organizations that do not follow SFAS 117 (ASC 958), check here  1 and complete lines 27 through 29, and lines 33 and 34.  27 Unrestricted net assets 28 Permanently restricted net assets 39 Permanently restricted net assets 30 Organizations that do not follow SFAS 117 (ASC 958), check here  1 and complete lines 30	1 Cash - non-interest-bearing 1 Savings and temporary cash investments 2 Savings and temporary cash investments 3 Pledges and grants receivable, net 4 Accounts receivable, net 5 Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L 6 Loans and other receivables from other disqualified persons (as defined under section 4958(p(1)), persons described in section 4958(p(3)(9), and contributing employees and sponsoning organizations of section 501(p(s)) voluntary employees' beneficiary organizations (see instr). Complete Part II of Sch L 7 Notes and loans receivable, net 8 Inventiones for sale or use 9 Prepaid expenses and deferred charges 10a Land, buildings, and equipment cost or other basis. Complete Part IV of Schedule D b Less accumulated depreciation 1 Investments - publicly traded securites 12 Investments - publicly traded securites 12 Investments - program-related See Part IV, line 11 13 Investments - program-related See Part IV, line 11 14 Intangible assets 15 Other assets See Part IV, line 11 16 Total assets. Add lines 1 through 15 (must equal line 34) 107, 821. 108 Accounts payable and accrued expenses 109 Deferred revenue 110 Tescribe Part II of Schedule D 120 Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons Complete Part IV of Schedule D 2 Loans and other payables to current and former officers, directors, trustees, key employees, including federal income tax, payables to related third parties 10 Unsecured notes and loans payable to unrelated third parties 11 Unrestricted net assets 12 Pacture of the payables to follow SFAS 117 (ASC 958), check here  under the parties, and other habilities not included on lines 17-24). Complete Part X of Schedule D 10 Total liabilities. Add lines 17 through 25 10 Organizations that follow SFAS 117 (ASC 958), check here  and complete lines 27 through 29, and lines	Cash - non-interest-bearing   15, 457, 1

Form	990 (2015) FIRST WEBER FOUNDATION, INC.	<u> 20-360</u> :	1589	Pag	<sub>je</sub> 12
Pai	rt XI Reconciliation of Net Assets				
	Check if Schedule O contains a response or note to any line in this Part XI				
1	Total revenue (must equal Part VIII, column (A), line 12)	1	21:	L,4	<u>51.</u>
2	Total expenses (must equal Part IX, column (A), line 25)	2	<u> 191</u>	1,8	27.
3	Revenue less expenses Subtract line 2 from line 1	3	19	9,6	24.
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	44	1,4	51.
5	Net unrealized gains (losses) on investments				
6	Donated services and use of facilities	6			
7	Investment expenses	7			
8	Prior period adjustments	8			
9	Other changes in net assets or fund balances (explain in Schedule O)	9			0.
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33,				
	column (B))	10	64	1.0	75.
Pa	rt XII Financial Statements and Reporting				
	Check if Schedule O contains a response or note to any line in this Part XII				
				Yes	No
1	Accounting method used to prepare the Form 990 Cash X Accrual Other				
	If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule	0			
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a	Х	
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed	d on a			
	separate basis, consolidated basis, or both				
	X Separate basis Consolidated basis Both consolidated and separate basis				
b	Were the organization's financial statements audited by an independent accountant?		2b		X
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate	e basis,			
	consolidated basis, or both				
	Separate basis Consolidated basis Both consolidated and separate basis				
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the	e audıt,	1 1		
	review, or compilation of its financial statements and selection of an independent accountant?		2c	X	
	If the organization changed either its oversight process or selection process during the tax year, explain in Sch	edule O			
За	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Si	ngle Audıt			
	Act and OMB Circular A-133?	=	3a		Х
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the requ	ired audit			
	or audits, explain why in Schedule O and describe any steps taken to undergo such audits		3b		

Form **990** (2015)

#### SCHEDULE A

Department of the Treasury

Internal Revenue Service

(Form 990 or 990-EZ)

Public Charity Status and Public Support Complete if the organization is a section 501(c)(3) organization or a section

4947(a)(1) nonexempt charitable trust.

Attach to Form 990 or Form 990-EZ.

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

OMB No 1545-0047

Inspection

Name of	the organization				_		Employer	identification number
	FIRS	T WEBER FO	UNDATION, IN	c.			2	0-3601 <u>58</u> 9
Part I	Reason for Public (				ıs part ) Se	e instruction		
The organ	nization is not a private found	ation because it is (	For lines 1 through 11, o	heck only	one box)			
1 📺	A church, convention of ch					)(A)(i).		
2	A school described in secti							
3	A hospital or a cooperative	hospital service orga	anization described in se	ection 170	(b)(1)(A)(ii	ı).		
4	A medical research organiz					•	)(iii). Enter	the hospital's name,
	city, and state							
5 🗀	An organization operated for	or the benefit of a co	llege or university owner	d or opera	ted by a go	overnmental	unit describ	ed in
	section 170(b)(1)(A)(ıv). (C	Complete Part II)						
6	A federal, state, or local gov	vernment or governn	nental unit described in	section 17	70(b)(1)(A)	(v).		
7 X	An organization that norma	lly receives a substa	intial part of its support f	rom a gov	ernmental	unit or from	the general	public described in
	section 170(b)(1)(A)(vi). (C	omplete Part II)						
8 <u> </u>	A community trust describe	ed in section 170(b)	(1)(A)(vi). (Complete Par	t II )				
9 🗀	An organization that norma	lly receives (1) more	than 33 1/3% of its sup	port from	contribution	ons, member	ship fees, a	nd gross receipts from
	activities related to its exen	npt functions - subje	ct to certain exceptions,	and (2) no	more tha	n 33 1/3% of	its support	from gross investment
	income and unrelated busin	ness taxable income	(less section 511 tax) fr	om busine	sses acqu	red by the o	rganization	after June 30, 1975
	See section 509(a)(2). (Cor	mplete Part III )						
10	An organization organized a	and operated exclus	ively to test for public sa	fety. See	section 50	9(a)(4).		
11	An organization organized a	and operated exclus	ively for the benefit of, to	perform	the functio	ns of, or to c	arry out the	purposes of one or
	more publicly supported or	ganizations describe	ed in section 509(a)(1) o	r section	509(a)(2)	See <b>section</b>	<b>509(a)(3)</b> . C	Check the box in
_	_Ines 11a through 11d that	describes the type o	of supporting organization	n and con	iplete lines	11e, 11f, an	d 11g	
a L	Type I. A supporting orga	anızatıon operated, s	supervised, or controlled	by its sup	ported org	janization(s),	typically by	giving
	the supported organization	• • •		a majority	of the direc	ctors or trust	ees of the s	upporting
_	organization You must o							
b L	Type II. A supporting org							
	control or management o			ame perso	ons that co	ontrol or man	age the sup	ported
r	organization(s) You mus	•						
c L	Type III functionally interest						ally integrate	ed with,
_	its supported organizatio							
d L	Type III non-functionally							
	that is not functionally int	-					d an attent	iveness
_	requirement (see instruct	•	•	-			. II. T III.	
<b>e</b> ∟	Check this box if the orga					i Type i, Type	e II, Type III	
	functionally integrated, or	• •	nally integrated support	ung organi	zation			<u> </u>
	ter the number of supported of	•	ad arganization(a)					
g Pi	ovide the following information  (i) Name of supported	(ii) EIN	(iii) Type of organization	(iv) Is the c	rganization	(v) Amount o	f monetary	(vi) Amount of
	organization		(described on lines 1-9		in your document?	suppor	t (see	other support (see
			above (see instructions))	Yes	No	ınstruc	tions)	instructions)
								<del></del>
-		,						
		1						
								***
					1			
					L			
Takal		I	1	1	1	1		l

LHA For Paperwork Reduction Act Notice, see the Instructions for

Form 990 or 990-EZ. 532021 09-23-15

### Schedule A (Form 990 or 990 EZ) 2015 FIRST WEBER FOUNDATION, INC. 20-3601589 Page 2 Part II | Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)

(Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III If the organization fails to qualify under the tests listed below, please complete Part III)

Sec	tion A. Public Support						
Cale	ndar year (or fiscal year beginning in) 🕨	(a) 2011	<b>(b)</b> 2012	(c) 2013	(d) 2014	(e) 2015	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received (Do not						
	include any "unusual grants ")	123,118.	155,391.	178,243.	178,453.	208,817.	844,022.
2	Tax revenues levied for the organ-						
	ization's benefit and either paid to						
	or expended on its behalf						
	The value of services or facilities						
-	furnished by a governmental unit to						
	the organization without charge						
	Total. Add lines 1 through 3	123,118.	155,391.	178,243.	178,453.	208,817.	844,022.
	The portion of total contributions		<u>,</u>				
•	by each person (other than a						
	governmental unit or publicly						
	supported organization) included						
	on line 1 that exceeds 2% of the						
	amount shown on line 11,						
	column (f)						4,372.
	Public support. Subtract line 5 from line 4						839,650.
	etion B. Total Support						3377334
	ndar year (or fiscal year beginning in)	(a) 2011	<b>(b)</b> 2012	(c) 2013	(d) 2014	<b>(e)</b> 2015	(f) Total
	Amounts from line 4	123,118.	155,391.	178,243.	178,453.	208,817.	844,022.
	Gross income from interest,		,	,	,		/
9	dividends, payments received on						
	securities loans, rents, royalties						
	and income from similar sources	378.	392.	358.	313.	190.	1,631.
0	Net income from unrelated business	3,3.	3,24	333.	313.	170.	
3	activities, whether or not the						
	business is regularly carried on						
10	Other income Do not include gain						
IU	or loss from the sale of capital	[					
	assets (Explain in Part VI)			i			
14	Total support. Add lines 7 through 10						845,653.
	Gross receipts from related activities,	etc (see instructi	nne)		ı	12	97,631.
	First five years. If the Form 990 is for	•	-	d fourth or fifth to	ay year as a sectio		21,001.
13	organization, check this box and stor	=	amar, accoriu, um	a, iouitii, Oi iiitii te	in year as a section	11 30 1(0)(3)	
Sec	ction C. Computation of Publ		rcentage				
	Public support percentage for 2015 (I			column (fi)		14	99.29 %
	Public support percentage from 2014		-			15	84.66 %
	33 1/3% support test - 2015. If the c	•	•	n line 13. and line	14 is 33 1/3% ог п		
.54	stop here. The organization qualifies	•				5, 55511 11.15 50	<b>▶ X</b>
h	33 1/3% support test - 2014. If the o				l line 15 is 33 1/3%	or more, check th	
	and stop here. The organization qual						▶□
170	10% -facts-and-circumstances tes		· · · · · ·		e 13, 16a, or 16b, a	and line 14 is 10%	or more.
17 d	and if the organization meets the "fac	-					
	meets the "facts-and-circumstances"		•	•	•	t Thou the organ	
L	10% -facts-and-circumstances tes	•	•		-	17a and line 15 in	10% or
D		_					
	more, and if the organization meets the						,
40	organization meets the "facts-and-circ		-	= = =	•		
18	Private foundation. If the organization	ni diu not check a	DOX OFFICE 13, 15	a, 100, 17a, 0f 1/1		edule A (Form 990	

532022 09-23-15

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

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

Sed	ction A. Public Support		·	·		·1	
	ndar year (or fiscal year beginning in) 🕨	(a) 2011	<b>(b)</b> 2012	(c) 2013	(d) 2014	<b>(e)</b> 2015	(f) Total
1	Gifts, grants, contributions, and				ļ		
	membership fees received (Do not						
	ınclude any "unusual grants ")						
2	Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3	Gross receipts from activities that						
	are not an unrelated trade or bus-						
4	Tax revenues levied for the organ-						
•	ization's benefit and either paid to	1					
	or expended on its behalf	1					
5	The value of services or facilities						
3	furnished by a governmental unit to	-				!	
	the organization without charge	İ			ļ		
6	Total. Add lines 1 through 5		1				
	Amounts included on lines 1, 2, and			1		1	-
7 8	3 received from disqualified persons						
t	Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the						
	amount on line 13 for the year		<del> </del>				
	Add lines 7a and 7b	·		-	† "		
	Public support. (Subtract line 7c from line 6) ction B. Total Support	<u> </u>			.i	<u> </u>	
-		(n) 2011	<b>(b)</b> 2012	(c) 2013	(d) 2014	(e) 2015	(f) Total
	endar year (or fiscal year beginning in)	(a) 2011	(0) 2012	(C) 2013	(0) 2014	(e) 2015	(i) rotai
_	Amounts from line 6  Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
,	Unrelated business taxable income	<u> </u>					
	(less section 511 taxes) from businesses					İ	
	acquired after June 30, 1975	ļ				<u> </u>	
	c Add lines 10a and 10b						
11	·						
12	Other income Do not include gain or loss from the sale of capital assets (Explain in Part VI)						
13	Total support. (Add lines 9, 10c, 11, and 12)						
	First five years. If the Form 990 is fo		's first, second, thi	rd, fourth, or fifth t	ax year as a secti	on 501(c)(3) organiz	zation,
	check this box and stop here	•	·				
Se	ction C. Computation of Publ	ic Support Pe	ercentage				
	Public support percentage for 2015 (			column (f))		15	%
16				.,,		16	%
	ction D. Computation of Inve			)		<u> </u>	
17						17	%
18				,		18	%
	a 33 1/3% support tests - 2015. If the			on line 14, and lin	e 15 is more than		
19	more than 33 1/3%, check this box a						▶□
	b 33 1/3% support tests - 2014. If the	•					and
	line 18 is not more than 33 1/3%, ch	eck this box and s	stop here. The org	janization qualifies	as a publicly sup	ported organization	
<u>20</u>	Private foundation. If the organization	on did not check a	a box on line 14, 19	9a, or 19b, check t			<u> </u>
E 0.0	22 00-23-15				Sci	hedule A (Form 99	0 or 990-EZ) 2015

### Part IV | Supporting Organizations

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

	Sections A, D, and E If you checked 11d of Part I, complete Sections A and D, and complete Part V)	<del>-</del>	_	
Sec	tion A. All Supporting Organizations			
			Yes	No
1	Are all of the organization's supported organizations listed by name in the organization's governing			
	documents? If "No" describe in Part VI how the supported organizations are designated. If designated by			
	class or purpose, describe the designation If historic and continuing relationship, explain	1		
2	Did the organization have any supported organization that does not have an IRS determination of status			
	under section 509(a)(1) or (2)? If "Yes," explain in Part VI how the organization determined that the supported	į		
	organization was described in section 509(a)(1) or (2)	2		
За	Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer			
	(b) and (c) below	3a		
b	Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and			
	satisfied the public support tests under section 509(a)(2)? If "Yes," describe in Part VI when and how the			
	organization made the determination.	3b		
С	Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B)			
	purposes? If "Yes," explain in Part VI what controls the organization put in place to ensure such use.	3c		<u> </u>
4a	Was any supported organization not organized in the United States ("foreign supported organization")? If			
	"Yes," and if you checked 11a or 11b in Part I, answer (b) and (c) below	4a		
b	Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign			
	supported organization? If "Yes," describe in Part VI how the organization had such control and discretion	:		İ
	despite being controlled or supervised by or in connection with its supported organizations	4b	ļ	
c	Did the organization support any foreign supported organization that does not have an IRS determination			
	under sections 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in Part VI what controls the organization used			
	to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B)			
	purposes.	4c	<u> </u>	ļ
5a	Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes,"	İ		
	answer (b) and (c) below (if applicable) Also, provide detail in Part VI, including (i) the names and EIN			
	numbers of the supported organizations added, substituted, or removed, (ii) the reasons for each such action,			
	(iii) the authority under the organization's organizing document authorizing such action; and (iv) how the action			
	was accomplished (such as by amendment to the organizing document)	5a	-	
b	Type I or Type II only. Was any added or substituted supported organization part of a class already			
	designated in the organization's organizing document?	5b		
С	Substitutions only. Was the substitution the result of an event beyond the organization's control?	_5c	<u> </u>	
6	Did the organization provide support (whether in the form of grants or the provision of services or facilities) to		ł	
	anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class		1	
	benefited by one or more of its supported organizations, or (iii) other supporting organizations that also	ļ		
	support or benefit one or more of the filing organization's supported organizations? If "Yes," provide detail in		1	ļ
	Part VI.	6	<del> </del>	
7	Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor			
	(defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with	ŀ		+
	regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).	7	<del> </del>	<del> </del>
8	Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7?		1	
	If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).	8	+	
9a	Was the organization controlled directly or indirectly at any time during the tax year by one or more			
	disqualified persons as defined in section 4946 (other than foundation managers and organizations described			
	In section 509(a)(1) or (2))? If "Yes," provide detail in Part VI.	9a	-	
b	Did one or more disqualified persons (as defined in line 9a) hold a controlling interest in any entity in which		1	
	the supporting organization had an interest? If "Yes," provide detail in Part VI.	<u>9b</u> _	<del> </del>	-
С	Did a disqualified person (as defined in line 9a) have an ownership interest in, or derive any personal benefit	_	1	1
	from, assets in which the supporting organization also had an interest? If "Yes," provide detail in Part VI.	9c	+	<del>                                     </del>
10a	Was the organization subject to the excess business holdings rules of section 4943 because of section			1
	4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated		}	1
	supporting organizations)? If "Yes," answer 10b below.	10a	+	
h	Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to	1	1	1

determine whether the organization had excess business holdings.)

Sche	dule A (Form 990 or 990 EZ) 2015 FIRST WEBER FOUNDATION, INC.	<u>20-360158</u>	9 P	age <b>5</b>
Par	rt IV Supporting Organizations (continued)			
			Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?			
	A person who directly or indirectly controls, either alone or together with persons described in (b) and (c)			
_	below, the governing body of a supported organization?	11a		
h	A family member of a person described in (a) above?	11b		
	A 35% controlled entity of a person described in (a) or (b) above? If "Yes" to a, b, or c, provide detail in Part VI.	11c		$\vdash$
	tion B. Type I Supporting Organizations	1110	ــــــــــــــــــــــــــــــــــــــ	<u> </u>
Sec	tion b. Type I Supporting Organizations			
_			Yes	No
1	Did the directors, trustees, or membership of one or more supported organizations have the power to			
	regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the			
	tax year? If "No," describe in <b>Part VI</b> how the supported organization(s) effectively operated, supervised, or		1	
	controlled the organization's activities If the organization had more than one supported organization,			
	describe how the powers to appoint and/or remove directors or trustees were allocated among the supported	}	}	1
	organizations and what conditions or restrictions, if any, applied to such powers during the tax year.	1		<u> </u>
2	Did the organization operate for the benefit of any supported organization other than the supported			
	organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in		ļ	
	Part VI how providing such benefit carned out the purposes of the supported organization(s) that operated,			
	supervised, or controlled the supporting organization.	2		
Sec	tion C. Type II Supporting Organizations		1	
	<u> </u>		Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors		1.00	
•	or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control			
			1	
	or management of the supporting organization was vested in the same persons that controlled or managed			
<u> </u>	the supported organization(s).	1	L	<u></u>
Sec	tion D. All Type III Supporting Organizations		1	
		<u></u>	Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the			
	organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax			
	year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the			
	organization's governing documents in effect on the date of notification, to the extent not previously provided?	1		lacksquare
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported			
	organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how			
	the organization maintained a close and continuous working relationship with the supported organization(s)	2		
3	By reason of the relationship described in (2), did the organization's supported organizations have a			
_	significant voice in the organization's investment policies and in directing the use of the organization's			
	income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's			
	supported organizations played in this regard	3		
Sec	stion E. Type III Functionally-Integrated Supporting Organizations		<u> </u>	L
-				
1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the yea(see Inst	ructions):		
а	The organization satisfied the Activities Test Complete line 2 below.			
b	The organization is the parent of each of its supported organizations. Complete line 3 below.			
С	The organization supported a governmental entity Describe in Part VI how you supported a government entity	ly (see instructions		
2	Activities Test Answer (a) and (b) below.		Yes	No
а	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of			
	the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify			
	those supported organizations and explain how these activities directly furthered their exempt purposes,			1
	how the organization was responsive to those supported organizations, and how the organization determined	ļ		j
	that these activities constituted substantially all of its activities	2a		
b				
-	of the organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the			
	reasons for the organization's position that its supported organization(s) would have engaged in these			
	activities but for the organization's involvement.	21-		1
•	-	<u>2b</u>	$\vdash$	+
3	Parent of Supported Organizations Answer (a) and (b) below.	ĺ		
а	Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or	_		}
	trustees of each of the supported organizations? Provide details in Part VI.	3a	+-	<del>                                     </del>
b				
	of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard.	3b		l
53202	25 09-23-15 Schedule	A (Form 990 or 9	90-EZ	) 2015

Schedule A (Form 990 or 990 EZ) 2015 FIRST WEBER FOUNDATION			20-3601589 Pa
Part V Type III Non-Functionally Integrated 509(a)(3) Suppor			
1 Check here if the organization satisfied the Integral Part Test as a qualif			uctions. All
other Type III non-functionally integrated supporting organizations mus	t complete Sec	ctions A through E	
Section A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1 Net short-term capital gain	1		ļ
2 Recoveries of prior-year distributions	2		
3 Other gross income (see instructions)	3		
4 Add lines 1 through 3	4		
5 Depreciation and depletion	5		
6 Portion of operating expenses paid or incurred for production or			
collection of gross income or for management, conservation, or			
maintenance of property held for production of income (see instructions)	6		
7 Other expenses (see instructions)	7		
8 Adjusted Net Income (subtract lines 5, 6 and 7 from line 4)	8		
ection B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
Aggregate fair market value of all non-exempt-use assets (see			
instructions for short tax year or assets held for part of year)			
a Average monthly value of securities	1a_		
b Average monthly cash balances	1b		
c Fair market value of other non-exempt-use assets	1c		
d Total (add lines 1a, 1b, and 1c)	1d_		
e Discount claimed for blockage or other			
factors (explain in detail in Part VI)			
2 Acquisition indebtedness applicable to non-exempt-use assets	2		
3 Subtract line 2 from line 1d	3		
4 Cash deemed held for exempt use Enter 1-1/2% of line 3 (for greater amount	t,	<del></del>	
see instructions)	4		
5 Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
6 Multiply line 5 by 035	6	· · · · · · · · · · · · · · · · · · ·	
7 Recoveries of prior-year distributions	7	<del>-</del>	
8 Minimum Asset Amount (add line 7 to line 6)	8		
Section C - Distributable Amount			Current Year
1 Adjusted net income for prior year (from Section A, line 8, Column A)	1		
2 Enter 85% of line 1	2		
3 Minimum asset amount for prior year (from Section B, line 8, Column A)	3		
4 Enter greater of line 2 or line 3	4	· · · · · · · · · · · · · · · · · · ·	
5 Income tax imposed in prior year	5		
6 Distributable Amount. Subtract line 5 from line 4, unless subject to		<del></del>	
emergency temporary reduction (see instructions)	6		

Schedule A (Form 990 or 990-EZ) 2015

instructions)

Par	t V	Type III Non-Functionally Integrated 509	(a)(3) Supporting Orga	anizations (continued)	
Section	on D -	- Distributions			Current Year
1	Amou	ints paid to supported organizations to accomplish exe	empt purposes		
		ints paid to perform activity that directly furthers exemp			
		izations, in excess of income from activity			- <u></u>
		nistrative expenses paid to accomplish exempt purpos	es of supported organization	S	
		unts paid to acquire exempt-use assets			
		fied set-aside amounts (prior IRS approval required)			
		distributions (describe in Part VI) See instructions.			
		annual distributions. Add lines 1 through 6			
		butions to attentive supported organizations to which t	the organization is responsive	<del></del>	
		ide details in Part VI) See instructions	•		
	•	butable amount for 2015 from Section C, line 6	<del>_</del> -		
		B amount divided by Line 9 amount		<del>.</del>	
			(i)	(ii)	(iii)
Section	on E -	- Distribution Allocations (see instructions)	Excess Distributions	Underdistributions Pre-2015	Distributable Amount for 2015
1	Distri	butable amount for 2015 from Section C, line 6			
2	Unde	rdistributions, if any, for years prior to 2015			
	(reaso	onable cause required-see instructions)			
3	Exces	ss distributions carryover, if any, to 2015.			
а					
b					· · · · · · · · · · · · · · · · · · ·
С					, ·
	From	2013			
е	From	2014			
f	Total	of lines 3a through e			
		ed to underdistributions of prior years			· · · · · · · · · · · · · · · · · · ·
h	Apple	ed to 2015 distributable amount			
		over from 2010 not applied (see instructions)			
i		ainder Subtract lines 3g, 3h, and 3i from 3f			
4		butions for 2015 from Section D,			
-	line 7	_			
а		ed to underdistributions of prior years			
		ed to 2015 distributable amount			
		ainder Subtract lines 4a and 4b from 4			
		aining underdistributions for years prior to 2015, if			
~		Subtract lines 3g and 4a from line 2 (if amount			
	-	er than zero, see instructions)			
6		aining underdistributions for 2015 Subtract lines 3h			
•		4b from line 1 (if amount greater than zero, see			
		uctions)			
7		ess distributions carryover to 2016. Add lines 3			
,	and 4				
		kdown of line 7			
_8_	breat	ACCOMPT OF HING 1			
<u>a</u>					
b_	Ev	on from 2012	<del> </del>		
		ss from 2013	<u> </u>		
<u>d</u>		ss from 2014			
_	LVOO	ee trom 2015	1	i .	i

Schedule A (Form 990 or 990-EZ) 2015

Schedule A	<u>(Form 990 or 990-E</u>						20-3601589	Page 8
Part VI	Part IV, Section A line 1, Part IV, Sec	., lines 1, 2, 3b, 3 ction D, lines 2 a	3c, 4b, 4c, 5a, 6, and 3, Part IV, Se	9a, 9b, 9c, 11a, ction E, lines 1c,	11b, and 11c, Part I	IV, Section B, line Part V, line 1, Pai	a or 17b, Part III, line 12, ss 1 and 2, Part IV, Section t V, Section B, line 1e, Participal information	on C, art V,
	(See instructions)	) (, and 0, and 1	art v, Section L,		Also complete tris	part for any add		
				<del></del> -				
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SCHEDULE I (Form 990) Department of the Treasury Internal Revenue Service

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

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

► Attach to Form 990.

OMB No 1545-0047	2015	Open to Public	Inspection

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

Name of the organization FTRST WEB	FIRST WEBER FOINDATION	THOM: INC.					20-3601589
Part   General Information on Grants and Assistance	and Assistance						1 1
1 Does the organization maintain records to substantiate the amount of	to substantiate th	e amount of the grants	or assistance, the	grantees' eligibility	for the grants or ass	the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection	[
	stance?	,	;				X Yes No
앎	ocedures for moni	toring the use of grant	funds in the United	States			
Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any	Domestic Organi	izations and Domestic	Governments.	omplete if the orga	nization answered "Y	es" on Form 990, Part	IV, line 21, for any
recipient that received more than \$5,000 Part II can be duplicated if additional space is needed	\$5,000 Part II car	be duplicated if additi	onal space is need	pel			
1 (a) Name and address of organization or government	( <b>p</b> ) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, EMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
AMERICAN CANCER SOCIETY, INC.							
MADISON WI 53717-2603		501(C)(3)	12,900	0			GENERAL SUPPORT
THE BOYS & GIRLS CLUB OF							
WASHINGTON COUNTY, INC 925 N							
SILVERBROOK DR - WEST BEND, WI							
53090-2487	39-1773689	501(C)(3)	5,750.	0	į		GENERAL SUPPORT
ON THE MICCONCIN INC							
MADISON WI 53713-3969	39-0824877	501(C)(3)	7,380.	0			GENERAL SUPPORT
, Second							
WESTON, WI 54476-4828	27-4271620	501(C)(3)	5,280.	0.			GENERAL SUPPORT
SECOND HARVEST FOODBANK OF							
SOUTHERN WISCONSIN, INC 2802				,			
DAIRY DR - MADISON, WI 53718-6751	39-1490691	501(C)(3)	9 000	0			GENERAL, SUPPORT
2 Enter total number of section 501(c)(3) and government organizations	and government or	rganizations listed in th	listed in the line 1 table				<b>*</b>
	ns listed in the line	1 table					0.

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990.

Schedule I (Form 990) (2015)

532102 10-28-15

Page 2

20-3601589

### SCHEDULE O

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

### Supplemental Information to Form 990 or 990-EZ

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

Attach to Form 990 or 990-EZ.

► Attach to Form 990 or 990-EZ.

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

2015
Open to Public Inspection

Name of the organization

FIRST WEBER FOUNDATION, INC.

Employer identification number 20 – 3601589

FIRST WEBER FOUNDATION, INC. 20 3001305
FORM 990, PART I, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:
THROUGH BOTH CHARITABLE CONTRIBUTIONS AND VOLUNTEER LEADERSHIP. THE
FOUNDATION FOCUSES ON GIVING PROGRAMS IN AREAS OF WISCONSIN WHERE FIRST
WEBER HAS A MAJOR PRESENCE, SEEKING TO SUPPORT HOUSING RELATED PROGRAMS
AND OTHER CATEGORIES OF GIVING THAT ARE CONSISTENT WITH OUR VALUES.
FORM 990, PART III, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:
TO SUPPORT HOUSING RELATED PROGRAMS AND OTHER CATEGORIES OF GIVING THAT
ARE CONSISTENT WITH OUR VALUES.
FORM 990, PART VI, SECTION B, LINE 11:
THE PREPARED FORM 990 IS REVIEWED BY THE MEMBERS OF THE ORGANIZATION'S
GOVERNING BODY BEFORE THE RETURN IS FILED WITH THE IRS.
FORM 990, PART VI, SECTION B, LINE 12C:
THE CONFLICT OF INTEREST POLICY IS REVIEWED AT LEAST ANNUALLY BY THE
DIRECTORS. ALL DIRECTORS AND OFFICERS ARE REQUIRED TO COMPLETE AND SIGN A
CONFLICT OF INTEREST STATEMENT ANNUALLY. A DIRECTOR OR OFFICER WITH A
CONFLICT OF INTEREST IS PROHIBITED FROM PARTICIPATING IN DELIBERATIONS AND
DECISIONS REGARDING THE TRANSACTION.
FORM 990, PART VI, SECTION C, LINE 19:
THE ORGANIZATION MAKES ITS GOVERNING DOCUMENTS, CONFLICT OF INTEREST
POLICY, AND FINANCIAL STATEMENTS AVAILABLE TO THE PUBLIC UPON REQUEST.

## ARTICLES OF INCORPORATION OF FIRST WEBER FOUNDATION, INC. (amended 2/2/2016)

The undersigned, natural persons of the age of eighteen years or more acting as Incorporators of a Corporation under the Wisconsin Non-Stock Corporation Law (Chapter 181 of the Wisconsin Statutes), adopt the following Articles of Incorporation for the Corporation,

#### ARTICLE 1 NAME

The name of the Corporation is First Weber Foundation, Inc.

### ARTICLE 2 PURPOSE

The Corporation is organized and shall be operated exclusively for charitable and educational purposes, including for such purposes the making of distributions to organizations that qualify as exempt organizations under section 501(c)3 of the Internal Revenue Code of 1986, as amended (the "Code"), or the corresponding section of any future federal tax code. The Corporation shall engage in activities relating to those purposes and shall invest in, receive, hold, use and dispose of all property, real or personal, as may be necessary or desirable to fulfill those purposes. The net earnings of the Corporation shall be devoted exclusively to those purposes.

### ARTICLE 3 POWERS

The Corporation shall have all powers conferred upon non-stock, nonprofit corporations organized under Chapter 181 of the Wisconsin Statutes and any successor provisions, but shall exercise those powers only in fulfillment of its purposes.

### ARTICLE 4 MEMBERS

The Corporation shall not have members.

### ARTICLE 5 BOARD OF DIRECTORS

The affairs of the Corporation shall be managed by a Board of Directors. The number and manner of election or appointment of Directors and their terms of office shall be as provided in the Bylaws, but the number of Directors shall not be less than three.

### ARTICLE 6 RESTRICTIONS

At all times, and notwithstanding the merger, consolidation, reorganization, termination, dissolution or winding up of the Corporation (voluntary or involuntary or by operation of law), or any other provisions hereof:

- (a) The Corporation shall not possess or exercise any power or authority, whether expressly, by interpretation, or by operation of law, that would pose a substantial risk of preventing it at any time from qualifying and continuing to qualify as a corporation described in section 501(c)3 of the Code, contributions to which are deductible for federal income tax purposes, nor shall the Corporation engage directly or indirectly in any activity that would pose a substantial risk of causing the loss of such qualification under section 501(c)3 of the Code.
- (b) At no time shall the Corporation engage in any activities that are unlawful under the laws of the United States, the State of Wisconsin, or any other jurisdiction where any of its activities are carried on.
- (c) No part of the assets or net earnings of the Corporation shall be used, nor shall the Corporation be organized or operated for purposes that are not exclusively charitable, scientific or educational within the meaning of section 501(c)3 of the Code.
- (d) The Corporation shall not be operated for the primary purpose of carrying on a trade or business for profit.
- (e) The Corporation shall not carry on propaganda or otherwise attempt to influence legislation to an extent that would disqualify it for tax exemption under section 501(c)3 of the Code by reason of attempting to influence legislation, nor shall the Corporation, directly or indirectly, participate or intervene in (including without limitation, the publishing or distributing of statements) any political campaign on behalf of or in opposition to any candidate for public office.
- (I) No solicitation of contributions to the Corporation shall be made, and no gift, bequest or devise to the Corporation shall be accepted, upon any condition or limitation that would pose a substantial risk of causing the Corporation to lose its tax exemption under section 501(c)3 of the Code.
- (g) Pursuant to the prohibitions contained in section 501(c)3 of the Code, no part of the net earnings, current or accumulated, of the Corporation shall inure to the benefit of any private individual, except that the Corporation shall be authorized and empowered to pay reasonable compensation for services rendered and to make payments and distributes in furtherance of the purposes set forth in Article 2.

- (h) Notwithstanding any other provision of these Articles, if at any time or times the Corporation is a private foundation within the meaning of section 509 of the Code, then during such time or times:
  - (I) The Corporation shall not be controlled, directly or indirectly, by one or more disqualified persons (as defined in section 4946 of the Code) other than foundation managers;
  - (2) The Corporation shall distribute its income for each taxable year at such time and in such manner as not to subject the Corporation to tax under section 4942 of the Code;
  - (3) The Corporation shall not engage in any act of self-dealing as defined in section 4941(d) of the Code;
  - (4) The Corporation shall not make any investments in such a mariner as to subject the Corporation to tax under section 4944 of the Code;
  - (5) The Corporation shall not make any taxable expenditures as defined in section 4945(d) of the Code; and
  - (6) The Corporation shall not maintain business holdings in a manner that subjects it to tax under section 4943 of the Code.

### ARTICLE 7 NON-DISCRIMINATION

The Corporation shall not discriminate in its hiring practices, in the compensation of its employees, in carrying out its charitable and educational purposes, or in any other manner, on the basis of age, race, creed, color, handicap, marital status, gender, sexual orientation, national origin, ancestry, arrest record or conviction record, as those terms are defined in Chapter 111 of the Wisconsin Statutes.

## ARTICLE 8 DISSOLUTION AND LIQUIDATION

The Corporation may be dissolved upon the adoption of a plan to dissolve by a vote of a majority of the Directors then in office. Upon any dissolution of the Corporation, no liquidating or other dividends or distribution of property owned by the Corporation shall be declared or paid to any private individual, and the assets of the Corporation shall be distributed directly to one or more organizations exempt under Section 501(c)3 of the Code, or the corresponding section of any future federal tax code, or otherwise for one or more exempt purposes within the meaning of said Section 501(c)3 of the Code, or shall be distributed to the federal government, or to a state or local government, for a public purpose. Any assets not so disposed of shall be disposed of by a court of competent jurisdiction of the county in which the principal office of the Corporation is

then located, either exclusively for those purposes or to organizations organized and operated exclusively for those purposes.

### ARTICLE 9 AMENDMENT

These Articles may be amended in any manner authorized by the Wisconsin Statutes at the time of amendment or as provided by the Bylaws of the Corporation.

### ARTICLE 10 MISCELLANEOUS

The name and address of the initial registered agent of the Corporation is NBSC Corporate Services, LLC, 440 Science Dr., PO Box 5510, Madison, WI 53705-0510.

The mailing address of the principal office of the Corporation is 5250 East Terrace Drive, Madison, WI 53718.

The names and addresses of the Incorporator is

George R. Kamperschroer Neider & Boucher, S.C. 440 Science Dr. PO Box 5510 Madison, WI 53705-0510

IN WITNESS WHEREOF, the undersigned has executed these Articles of Incorporation on the 17th Day of May, 2005.

George R Kamperschroer, Incorporator

This instrument drafted by George R. Kamperschroer Neider & Boucher, S.C. 440 Science Drive, Suite 300 Post Office Box 5510 Madison, WI 53705-0510 (608) 661-4500

P.4

<sup>\*\*</sup>First Weber Group Foundation, Inc. name was amended to First Weber Foundation, Inc. on 2/2/2016 with DFI.

### DO NOT STAPLE

Sec. 181.1005 Wis. Stats.

# State of Wisconsin Department of Financial Institutions Division of Corporate and Consumer Services



### ARTICLES OF AMENDMENT - NONSTOCK CORPORATION

A. The present corporate name (prior to any change effected by this amendment) is:
First Weber Group Foundation 1190.
(Enter Corporate Name)
Text of Amendment (Refer to the existing articles of incorporation and the instructions on the reverse of this form. Determine those items to be changed and set forth the number identifying the paragraph being changed and how the amended paragraph is to read.)
RESOLVED, THAT the articles of incorporation be amended as follows:
Article 1 - Name stated on the Articles of Incorporation be amended to show the original name of First Weber Group Foundation, Inc., shall change to First Weber Foundation, Inc
B. Amendment(s) adopted on September 9, 2015
(Indicate the method of adoption by checking (X) the appropriate choice below.)  STATE OF WISCONSIN FILED
OR  In accordance with sec. 181.1002, Wis. Stats. (By the Board of Directors)  FEB - 2 2016
In accordance with sec. 181.1003, Wis. Stats. (By Members)  OR
In accordance with sec. 181.1004, Wis. Stats. (By Members voting by Class)
C. Approval by 3 <sup>rd</sup> Person (Contingency Statement)
Written approval for amending the articles of incorporation was obtained from the person whose approval is required by a provision of the articles of incorporation authorized under sec. 181.1030.
D. Executed on 1/22/2015
Title: President Secretary James R. Imhoff, Jr.
or other officer title (Printed name)
This document was drafted by Mary Grunow, Director
(Name the individual who drafted the document)
DFI/CCS/104(R04/15) 387644-1 268CDY 1



For Office



#### State of Wisconsin

#### **Department of Financial Institutions**

#### **Endorsement**

#### **ARTICLES OF AMENDMENT - Ch. 181**

### FIRST WEBER GROUP FOUNDATION, INC.

Received Date: 1/26/2016 Filed Date: 2/2/2016

Filing Fee: \$25.00

Entity ID#: F037505

Total Fee: \$25.00

CHANGES NAME