/	7
202	100
MAY 10	÷
_	

Return of Private Foundation
or Section 4947(a)(1) Trust Treated as Private Foundation
Do not enter social security numbers on this form as it may be made public Form 990-PF

	nt of the Treasury evenue Service	► Go to www	rs gov/Form990PF for instr	uctions and the latest info	ormation $\Box V $	Open to Public Inspection
For cale	ndar year 2020 (or tax year beginning MAR	8, 2021	, and ending	AUG 31, 2021	
Name o	f foundation	· · · · · · · · · · · ·	 .		A Employer identification	number
Onl	y in Wi	sconsin Giving I	nc		86-2470197	
Number a	and street (or PO b	ox number if mail is not delivered to street a	address)	Room/suite	B Telephone number	
240	0 State	Hwy 69			608-527-58	50
		ovince, country, and ZIP or foreign p	ostal code		C If exemption application is pe	anding, check here
New	Glarus	<u>, WI 53574</u>				
G Checl	k all that apply	X Initial return	Initial return of a fo	ormer public charity	D 1 Foreign organizations	, check here
		Final return	Amended return		2 Ferriga greenvations ma	ating the 9594 test
		Address change	Name change		2 Foreign organizations me check here and attach cou	nputation
	k type of organiz			U_{I}	E If private foundation state	us was terminated
			Other taxable private founda		under section 507(b)(1)	(A), check here $ ightharpoonup$
		assets at end of year J Account		Accrual	F If the foundation is in a	
•	Part II, col (c), li	·	ther (specify)		under section 507(b)(1)	(B), check here $ ightharpoonup$
▶ \$	I Analysis of D	215,330. (Part I, colur	nn (d), must be on cash bas	IS)		
Part	The total of amo	evenue and Expenses ounts in columns (b), (c), and (d) may not	(a) Revenue and expenses per books	(b) Net investment income	(c) Adjusted net income	(d) Disbursements for charitable purposes
		the amounts in column (a))		meome		(cash basis only)
1		gifts, grants, etc , received	500,000.		N/A	
2	Interest on saving	if the foundation is not required to attach Sch. B is and temporary				
	cash investments				-	
\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \		interest from securities				
	Gross rents	()				, , *
	Net rental income					3 - 4 - 1 - 12 - 12 - 12 - 12 - 12 - 12 -
O)	Gross sales price	from sale of assets not on line 10 for all	, , , , ,	<u>. </u>		
Revenu 2		icome (from Part IV, line 2)	7 7	0.		1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
å å	Net short-term					17 6 7 7 1 1 1 2 1 1
9	Income modific	•				The state of the s
	Gross sales less r and allowances				- W	Takana Janasa
. ! .	Less Cost of goo	de sold				
	Gross profit or					,
11	Other income	(1000)				ν '
12	Total Add line	s 1 through 11	500,000.	0.		
13		officers, directors, trustees, etc	0.	0.		0.
14	Other employer	e salaries and wages	7			
15		employee benefits				
រូ <u>ម</u> 16a	Legal fees	•				
	Accounting fee	s		RE	OCU/CE T	
Expens	Other profession	onal fees		7,1		
	Interest			9	V 1 6 2021 8	
5 18	Taxes			99 NO	1 6 2021 6	
19	Depreciation ar	nd depletion				
E 20	Occupancy			06		
Operating and Administrative 7 2 2 3 4 8 1 1 1 8 1 2 1 1 1 1 1 1 1 1 1 1 1 1 1	Travel, confere	nces, and meetings			DEN, UT	
22	Printing and pu					
g 23	Other expenses	Stmt 1	100.	0.		100.
[24	Total operating	g and administrative				
per	expenses Add	l lines 13 through 23	100.	0.		100.
23		gifts, grants paid	284,570.		1	284,570.
26		s and disbursements				_
	Add lines 24 ar	<u>1d</u> 25	284,670.	0.		284,670.
27	Subtract line 26	6 from line 12				1
а	Excess of revenue	over expenses and disbursements	215,330.			
b	Net investment	t income (if negative, enter -0-)		0.		
<u>c</u>		come (if negative, enter -0-)	l		N/A	
023501 12	2-02-20 LHA	For Paperwork Reduction Act Notice	e, see instructions.			Form 990-PF (2020)

215,330.

Form 990-PF (2020)

Add lines 1, 2, and 3

5 Decreases not included in line 2 (itemize)

6 Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b), line 29

Reserved

8 Reserved

_	990-PF(2020) Only in Wisconsin Giving Inc			<u>86-247</u>			Page 4	
	art VI Excise Tax Based on Investment Income (Section 4940(a),		48 - see	instructio	ons)			
1a	Exempt operating foundations described in section 4940(d)(2), check here 🕨 🔲 and enter "N	I/A" on line 1	ηŢ			_		i
	Date of ruling or determination letter (attach copy of letter if necessary	y-see instructions)						į
b	Reserved) [1			0.	
C	All other domestic foundations enter 1 39% of line 27b. Exempt foreign organizations, enter 4%							
	of Part I, line 12, col (b)]					İ
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only, others, et	enter -0-)		2			0.	
	Add lines 1 and 2		Ī	3			0.	
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only; others, a	enter -0-)		4			0.	
5	Tax based on investment income Subtract line 4 from line 3. If zero or less, enter -0-	•	Ī	5			0.	
6	Credits/Payments							
а	2020 estimated tax payments and 2019 overpayment credited to 2020 6a	.	0.					
	Exempt foreign organizations - tax withheld at source 6b		0.					l
	Tax paid with application for extension of time to file (Form 8868) 6c		0.					
	Backup withholding erroneously withheld 6d		0.					
	Total credits and payments Add lines 6a through 6d	<u> </u>		7			0.	
8	Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached		ŀ	8			0.	
	Tax due If the total of lines 5 and 8 is more than line 7, enter amount owed		_	9			0.	
10	Overpayment If line 7 is more than the total of lines 5 and 8, enter the amount overpaid			10				
	Enter the amount of line 10 to be Credited to 2021 estimated tax	Pof	unded 🕨	11				
	art VII-A Statements Regarding Activities		undea 🚩					
	During the tax year, did the foundation attempt to influence any national, state, or local legislation of	or did it participate o	r intervene i	n	1	Yes	No	
	any political campaign?	or did it participate o	i ilitor volto i		1a		Х	
Ь	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes? Si	See the instructions fo	or the definit	ion	1b		X	
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any i			1011	"		1	
	distributed by the foundation in connection with the activities	materials published t	J1		j .			
	Did the foundation file Form 1120-POL for this year?				1-1-		$\overline{\mathbf{x}}$	
	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year:				10	_		
u	(1) On the foundation. ► \$ 0. (2) On foundation managers ► \$		0.		-	3	χ.	
_	· · · · · · · · · · · · · · · · · · ·						Ì	
е	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax managers > \$ 0.	ix imposea on iounaa	ation			,	, '	
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?				2			
	If "Yes," attach a detailed description of the activities							
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrum	nent, articles of incor	poration, or		<u> </u>		 -	
	bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes				3		<u> </u>	
	Did the foundation have unrelated business gross income of \$1,000 or more during the year?			N/A	4a			
	If "Yes," has it filed a tax return on Form 990-T for this year?			М/М	4b		Х	
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?				5			
_	If "Yes," attach the statement required by General Instruction T							
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either.						1	
	By language in the governing instrument, or						1	
	By state legislation that effectively amends the governing instrument so that no mandatory direct	tions that conflict wil	in the state l	aw	-			
	remain in the governing instrument?				6	Х		
7	Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Pa	art II, col (c), and Pa	rt XV		7	Х		
8a	Enter the states to which the foundation reports or with which it is registered. See instructions	-			i l			
	WI							
b	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney	/ General (or designa	te)					
	of each state as required by General Instruction G? If "No," attach explanation				8b	Х		\wedge
9	Is the foundation claiming status as a private operating foundation within the meaning of section 49	942(j)(3) or 4942(j)(5) for calend	dar)
	year 2020 or the tax year beginning in 2020? See the instructions for Part XIV If "Yes," complete P				9_		<u>X</u>	سا
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing	g their names and addres	ses S	tmt 2	10	Х		

of holdings acquired by gift or bequest, or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Form 4720,

b Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that

4a Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?

Schedule C, to determine if the foundation had excess business holdings in 2020)

had not been removed from jeopardy before the first day of the tax year beginning in 2020?

4b X Form 990-PF (2020)

X

3b

4a

N/A

023551 12-02-20

Form 990-PF (2020)

Form 990-PF (2020) Only in Wisconsin Giving Inc		(4/0197 Page 7
Part VIII Information About Officers, Directors, Trustees, Foundation Paid Employees, and Contractors (continued)	n Managers, Highly	
3 Five highest-paid independent contractors for professional services. If none, enter "N	IONE."	
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE		
Total number of others receiving over \$50,000 for professional services		▶ 0
Part IX-A Summary of Direct Charitable Activities		
List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical	al information such as the	Evenene
number of organizations and other beneficiaries served, conferences convened, research papers produce	ed, etc	Expenses
1 <u>N/A</u>		
2		
3		
4		
Port IV P Common of Discours Balated Investments		
Part IX-B Summary of Program-Related Investments Describe the two largest program-related investments made by the foundation during the tax year on line	ne 1 and 2	Amount
1 N/A	35 1 4110 2	Amount
I N/A		
-		
2		
All other program-related investments See instructions		
3		
Total. Add lines 1 through 3	•	0.

P	Minimum Investment Return (All domestic foundations must complete this part. Foreign fou	ndations, see	instructions)
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes	300	
a	Average monthly fair market value of securities	1a	0.
b	Average of monthly cash balances	1b	<u>0.</u> 57,302.
	Fair market value of all other assets	1c	
d	Total (add lines 1a, b, and c)	1d	57,302.
e	Reduction claimed for blockage or other factors reported on lines 1a and		
	1c (attach detailed explanation) 1e 0.		
2	Acquisition indebtedness applicable to line 1 assets	2	0.
3	Subtract line 2 from line 1d	3	57,302.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions)	4	860.
5	Net value of noncharitable-use assets Subtract line 4 from line 3. Enter here and on Part V, line 4.	5	56,442.
6	Minimum investment return Enter 5% of line 5 Adjusted for Short Tax Period	6	1,369.
ĮP.	art∤XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations are foreign organizations, check here ■ and do not complete this part)	nd certain	
1	Minimum investment return from Part X, line 6	1	1,369.
2a	Tax on investment income for 2020 from Part VI, line 5		
b	Income tax for 2020 (This does not include the tax from Part VI)		
C	Add lines 2a and 2b	2c	0.
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	1,369.
4	Recoveries of amounts treated as qualifying distributions	4	0.
5	Add lines 3 and 4	5	1,369.
6	Deduction from distributable amount (see instructions)	6	0.
7_	Distributable amount as adjusted Subtract line 6 from line 5. Enter here and on Part XIII, line 1	7	1,369.
P	art∤XIII Qualifying Distributions (see instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:		
а	Expenses, contributions, gifts, etc - total from Part I, column (d), line 26	1a	284,670.
b	Program-related investments - total from Part IX-B	1b	0.
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes	2	
3	Amounts set aside for specific charitable projects that satisfy the		
а	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	284,670.
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment		
	income Enter 1% of Part I, line 27b	5	0.
6	Adjusted qualifying distributions Subtract line 5 from line 4	6	284,670.
	Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation 4940(e) reduction of tax in those years	qualifies for the	section

Form **990-PF** (2020)

Part XIII Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2019	(c) 2019	(d) 2020
1 Distributable amount for 2020 from Part XI, line 7	•		_	1,369.
2 Undistributed income, if any, as of the end of 2020				1,307.
a Enter amount for 2019 only			0.	
b Total for prior years:				
g Total for prior years.		0.		
3 Excess distributions carryover, if any, to 2020				
a From 2015				
b From 2016			1	,
c From 2017				
d From 2018				
e From 2019				
f Total of lines 3a through e	0.			
4 Qualifying distributions for 2020 from		***************************************		
Part XII, line 4 ► \$ 284,670.				
a Applied to 2019, but not more than line 2a			0.	
b Applied to undistributed income of prior				
years (Election required - see instructions)		0.		
c Treated as distributions out of corpus				
(Election required - see instructions)	0.			
d Applied to 2020 distributable amount				1,369.
e Remaining amount distributed out of corpus	283,301.		W-14.	· · · · · · · · · · · · · · · · · · ·
5 Excess distributions carryover applied to 2020 (If an amount appears in column (d), the same amount must be shown in column (a))	0.			0.
6 Enter the net total of each column as indicated below				
2 Corpus Add lines 3f, 4c, and 4e Subtract line 5	283,301.			
b Prior years' undistributed income Subtract	203,301.			
line 4b from line 2b		0.		
c Enter the amount of prior years'				
undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously		0.		
assessed		0.		
d Subtract line 6c from line 6b Taxable		0.		
amount - see instructions e Undistributed income for 2019 Subtract line		<u> </u>		
4a from line 2a Taxable amount - see instr			0.	
f Undistributed income for 2020 Subtract				
lines 4d and 5 from line 1. This amount must				
be distributed in 2021				0.
7 Amounts treated as distributions out of				
corpus to satisfy requirements imposed by				
section 170(b)(1)(F) or 4942(g)(3) (Election				
may be required - see instructions)	0.			
8 Excess distributions carryover from 2015				
not applied on line 5 or line 7	0.			
9 Excess distributions carryover to 2021				
Subtract lines 7 and 8 from line 6a	283,301.			
10 Analysis of line 9				
a Excess from 2016				
b Excess from 2017				
c Excess from 2018				
d Excess from 2019				
e Excess from 2020 283,301.				

Form 990-PF (2020) Only in	Wisconsin (Giving Inc		86-2	470197 Page
Part:XIV Private Operating F	oundations (see in	structions and Part VI	-A, question 9)	N/A	
1 a If the foundation has received a ruling of	or determination letter that	it is a private operating			
foundation, and the ruling is effective fo	or 2020, enter the date of t	the ruling	▶		
b Check box to indicate whether the foun	dation is a private operatir	ng foundation described i	n section	4942(J)(3) or	4942(J)(5)
2 a Enter the lesser of the adjusted net	Tax year		Prior 3 years		
income from Part I or the minimum	(a) 2020	(b) 2019	(c) 2018	(d) 2017	(e) Total
investment return from Part X for		<u> </u>	 	- ' '	
each year listed					
b 85% of line 2a		-			
c Qualifying distributions from Part XII,				/	
, ,					
line 4, for each year listed				 	
d Amounts included in line 2c not					
used directly for active conduct of					
exempt activities				<u> </u>	· · · -
e Qualifying distributions made directly			/		
for active conduct of exempt activities			,		
Subtract line 2d from line 2c			/	ļ	
3 Complete 3a, b, or c for the alternative test relied upon					İ
a "Assets" alternative test - enter:			/		
(1) Value of all assets			/		
(2) Value of assets qualifying					
under section 4942(j)(3)(B)(i)					
b "Endowment" alternative test - enter 2/3 of minimum investment return					
shown in Part X, line 6, for each year					
listed					
c "Support" alternative test - enter:					
(1) Total support other than gross					
investment income (interest, dividends, rents, payments on					
securities loans (section					
512(a)(5)), or royalties)					
(2) Support from general public					
and 5 or more exempt organizations as provided in					
section 4942(j)(3)(B)(iii)				<u> </u>	
(3) Largest amount of support from					
an exempt organization					
(4) Gross investment income					
PartiXV Supplementary Info			f the foundation	had \$5,000 or mo	ore in assets
at any time during t	he year-see instru	uctions.)			
1 Information Regarding Foundation	•				
a List any managers of the foundation wh			ibutions received by the	foundation before the clo	se of any tax
year (but only if they have contributed r	nore than \$5,000) (See se	ection 507(a)(2))			
None				·-···	
b List any managers of the foundation wh			or an equally large portio	n of the ownership of a p	partnership or
other entity) of which the foundation ha	s a 10% or greater interes	Į.			
None				· · ·	
2 Information Regarding Contribute					
Check here I if the foundation of	inly makes contributions t	o preselected charitable (organizations and does n	ot accept unsolicited req	uests for funds If
the foundation makes gifts, grants, etc.,					·
a The name, address, and telephone num	per or email address of the	e person to whom applica	itions should be address	ed:	
See Statement 3					
b The form in which applications should b	e submitted and informat	on and materials they sh	ould include		
. ,,				·	
c Any submission deadlines					
d Any restrictions or limitations on award	s, such as by neonraphica	l areas, charitable fields	kinds of institutions or o	other factors	
	-,				

Supplementary Information (continued) Part XV 3 Grants and Contributions Paid During the Year or Approved for Future Payment If recipient is an individual, Foundation status of Purpose of grant or contribution show any relationship to Amount any foundation manager or substantial contributor Name and address (home or business) recipient a Paid during the year Agrace Hospice None ÞС Exempt Purpose of 5395 E Cheryl Parkway Organization Madison, WI 53711 13,320. Albany EMS None ÞС Exempt Purpose of 208 N Water St Drganization Albany, WI 53502 123,125. Argyle - Adams Fire Department None GOV Exempt Purpose of 103 N Broad St Organization Argyle, WI 53504 194,795. Argyle EMS None Exempt Purpose of PC 106 N Broad St Organization Argyle, WI 53504 174,795. Ben Jackson Foundation Inc. None ÞС Exempt Purpose of W5327 Windmill Ridge Rd Organization New Glarus, WI 53574 44,520. See continuation sheet(s) ▶ 3a 4,671,050. Total **b** Approved for future payment None **▶** 3b Total Form 990-PF (2020)

3 Grants and Contributions Paid During the	Year (Continuation)		-	
Recipient	If recipient is an individual, show any relationship to any foundation manager	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	or substantial contributor	recipient	- Commodition	
Big Brothers - Big Sisters	None	PC	Exempt Purpose of	
1505 Ninth St			Organization	
Monroe, WI 53566				41,520
Blanchardville Police Department	None	GOV	Exempt Purpose of	
208 Mason St			Organization	
Blanchardville, WI 53516				145,625
Brodhead EMS	None	PC	Exempt Purpose of	
1003 12th St			Organization	
Brodhead, WI 53520				225,315
Brodhead Police Association	None	PC	Exempt Purpose of	
1004W Exchage St			Organization	
Brodhead, WI 53520				161,295
Friends of Governor Dodge State Park	None	PC	Exempt Purpose of	
4175 State Hwy 23 N Dodgeville, WI 53533			Organization	246 315
bodgeville, wi 33333	-			246,315
Future Farmers of American and its	None	PC	Exempt Purpose of	
State Associations			Organization	
6060 FFA Drive				
Indianapolis, IN 46278				491,130
Green County Abuse Prevention Team	None	PC	Exempt Purpose of	
2841 6th St Monroe, WI 53566			Organization	11 820
10110e, WI 33300			-	11,820
2000 Complete Complet				
Green County Crime Stopper 2827 6th St	None	PC	Exempt Purpose of Organization	
Monroe, WI 53566			Organizacion	157,295
Green County EMS	None	₽C	Exempt Purpose of	
1800 12th St			Organization	
Monroe, WI 53566				204,795
Green County humane Society	None	PC	Exempt Purpose of	
N3156 нwy 81			Organization	
Monroe, WI 53566			<u> </u>	158,795
Total from continuation sheets				4,120,495

Part XV Supplementary Informati	on			
3 Grants and Contributions Paid During the	Year (Continuation)			
Recipient	If recipient is an individual, show any relationship to	Foundation	Purpose of grant or	Amount
Name and address (home or business)	any foundation manager or substantial contributor	status of recipient	contribution	, and and
Wahata fan Waranata Garata				
Habitat for Humanity Green County 305 2nd St	None	₽C	Exempt Purpose of Organization	
Monroe, WI 53566			organization	36,520.
				11,111
Heroes Hunt for Veterans	None	PC	Exempt Purpose of	
N2965 City Rd			Organization	10.000
Waupan, WI 53963		-		18,320.
Hunger Task Force	None	PC	Exempt Purpose of	
201 South Hawley Court			Organization	
Milwaukee, WI 53214				83,125.
Ice Age Trail Alliance	None	PC	Exempt Purpose of	
2110 Main St	None		Organization	
Cross Plains, WI 52528				225,000.
		1		
Make - A - Wish Wisconsın	None	PC	Exempt Purpose of	
1818 Parmenter St Middleton, WI 53562			Organization	72 020
marrown, wr soot			-	72,020.
Monroe Clinic Hospital Hospice	None	PC	Exempt Purpose of	
515 22nd Ave			Organization	
Monroe, WI 53566				151,795.
Monticello Fire Department	None	gov	Exempt Purpose of	
412 N Main St			Organization	
Monticello, WI 53570				184,795.
NAMI Green County	None	PC	Exempt Purpose of	
1505 9th St			Organization	
Monroe, WI 53566				154,795.
New Glarus Area EMS 401 3rd St	None	PC	Exempt Purpose of	
New Glarus, WI 53574			Organization	164,795.
				104,755.
New Glarus Fire Department	None	gov	Exempt Purpose of	
218 4th Ave			Organization	
New Glarus, WI 53574			<u> </u>	215,315.
Total from continuation sheets				<u> </u>

Part XV Supplementary Information	1			
3 ` Grants and Contributions Paid During the Y	ear (Continuation)			
Recipient	If recipient is an individual, show any relationship to	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	any foundation manager or substantial contributor	recipient	Contribution	
Paralyzes Veterans of America - WI 750 N Lincoln Memorial Dr	None	PC	Exempt Purpose of Organization	
Milwaukee, WI 53202				22,520.
Ronald McDonald House 2716 Marshall Court Madison, WI 53705	None	PC	Exempt Purpose of Organization	235,315.
Second Harvest Food Bank 2802 Dairy Drive Madison, WI 53710	None	PC	Exempt Purpose of Organization	125,625.
SWCAP Weekend Food Program 149 N Iowa St Dodgeville, WI 53533	None	PC	Exempt Purpose of Organization	78,020.
The Neighborhood House Community Center 29 S Mills St	None	PC	Exempt Purpose of Organization	
Madison, WI 53715				214,795.
Wisconsın Literacy Inc. 211 S Paterson St Madison, WI 53703	None	рc	Exempt Purpose of Organization	246,815.
YWCA Rock County 1735 S Washington Janesville, WI 53546	None	PC	Exempt Purpose of Organization	47,020.
Total from continuation sheets				

Part XVI-A	Analysis of Income-Produci	ng Activities
Enter erece amounts	unlace otherwise indicated	Unrelated by

	nounts unless otherwise indicated		ed business income		Ided by section 512, 513, or 514	-{ (e)
1 Program se	ervice revenue	(a) Business code	(b) Amount	Exclu- sion code	(d) Amount	Related or exempt function income
•				 		
		-		1		
		-	 -	_	 	
		1		-	· 	
d						
e		-				
f		_				
g Fees an	d contracts from government agencies					
2 Membershi	p dues and assessments					
3 Interest on	savings and temporary cash					
investment						
4 Dividends a	and interest from securities			 		
	ncome or (loss) from real estate			<u> </u>		-
	nanced property					
	t-financed property					
	ncome or (loss) from personal					
property						
7 Other inves	stment income			<u> </u>		
8 Gain or (los	ss) from sales of assets other					
than invent	ory					
9 Net income	or (loss) from special events					
	at or (loss) from sales of inventory					
11 Other rever	-					
		_		<u> </u>		
						
d		_		ļ		
е		-				
	dd columns (b), (d), and (e)		0.	l	0.	
13 Total Add	line 12, columns (b), (d), and (e)				13 _	0.
(See workshee	t in line 13 instructions to verify calculations.)					
Part XVI-	B Relationship of Activities	to the Acco	mplishment of Exe	emnt	Purposes	
	·				<u> </u>	
Line No	Explain below how each activity for which inc			contrit	outed importantly to the accord	nplishment of
▼	the foundation's exempt purposes (other tha	n by providing tu	nas for such purposes)			
N,	/A					
ľ						
					West 1	

Form 99 Part		egarding Transfer	n Giving Inc s to and Transactions an	86-2 d Relationships With Nonc	470197 haritable	Pa	age 13
1 Die		· · · · · · · · · · · · · · · · · · ·	e following with any other organization	n described in section 501(c)		Yes	No
(01	her than section 501(c)(3) organ	nizations) or in section 527	7, relating to political organizations?	.,			
a Tra	ansfers from the reporting found	ation to a noncharitable ex	empt organization of				
	Cash				1a(1)		X
	Other assets				1a(2)	ļ	X
	ner transactions:	ble everet erangation			45/43	—	X
	Sales of assets to a noncharita Purchases of assets from a no		zation		1 <u>b(1)</u> 1b(2)	ļ	X
٠, ٠	Rental of facilities, equipment,	· -	zutton		1b(3)		X
	Reimbursement arrangements				1b(4)		X
	Loans or loan guarantees				1b(5)		Х
(6)	Performance of services or me	mbership or fundraising s	colicitations		1b(6)		Х
c Sh	aring of facilities, equipment, ma	uling lists, other assets, or	paid employees		1c		X
or		oundation. If the foundation	in received less than fair market value	rays show the fair market value of the go in any transaction or sharing arrangem		ets,	
(a) Line r	o (b) Amount involved	· '	charitable exempt organization	(d) Description of transfers, transactions	s, and sharing arra	angemer	ıts
			N/A				
			***			······································	
							
							
							
			70.				
2a Is	the foundation directly or indirec	tlv affiliated with, or relate	d to, one or more tax-exempt organiza	ations described			
	section 501(c) (other than sectio	•			Yes	X] No
b If"	Yes," complete the following sch	edule					
	(a) Name of org	panization	(b) Type of organization	(c) Description of rela	ationship		
	N/A						
	Under penalties of perjury, I declare t	hat I have examined this return	, including accompanying schedules and stat	tements, and to the best of my knowledge			
Sign			other than taxpayer) is based on all information		May the IRS of return with the shown below?	prepare	er

Sign Iere	and be	penalties of perjury, I declare that I have examined this lief, it is true, correct, and complete Declaration of pre			1-1/-201		nas any knowledge	May the IRS discuss this return with the preparer shown below? See instr	,
Paid Preparer Jse Only		Print/Type preparer's name Rebekuh Eley	Preparer's s	gnature Ltuh	Cley	Date 11/05/21	Check if self- employed	PTIN P01247672	
		Firm's name ► RSM US LLP						2-0714325	_
		CIII Cago, III	00000				THORETO 31	5 000 DE (000	-

Schedule B

(Form 990, 990-EZ, or 990-PF) Department of the Treasury Internal Revenue Service

Schedule of Contributors

Attach to Form 990, Form 990-EZ, or Form 990-PF.
 Go to www.irs.gov/Form990 for the latest information.

OMB No 1545 0047

2020

Name of the organization Employer identification number Only in Wisconsin Giving Inc 86-2470197 Organization type (check one) Filers of: Section: 501(c)(Form 990 or 990-EZ) (enter number) organization 4947(a)(1) nonexempt charitable trust not treated as a private foundation 527 political organization Form 990-PF X 501(c)(3) exempt private foundation 4947(a)(1) nonexempt charitable trust treated as a private foundation 501(c)(3) taxable private foundation Check if your organization is covered by the General Rule or a Special Rule. Note: Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule See instructions General Rule [X] For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions **Special Rules** For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of (1) \$5,000, or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1 Complete Parts I and II contributor, during the year, total contributions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I (entering "N/A" in column (b) instead of the contributor name and address), II, and III 🔟 For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990 EZ that received from any one contributor, during the year, contributions exclusively for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000 If this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., purpose Don't complete any of the parts unless the General Rule applies to this organization because it received nonexclusively religious, charitable, etc., contributions totaling \$5,000 or more during the year ▶ \$ Caution: An organization that isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990, 990-EZ, or 990-PF), but it must answer "No" on Part IV, line 2, of its Form 990, or check the box on line H of its Form 990-EZ or on its Form 990-PF, Part I, line 2, to certify that it doesn't meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF)

Name of organization

Employer identification number

Only in Wisconsin Giving In	Onlv	in	Wisconsin	Giving	Inc
-----------------------------	------	----	-----------	--------	-----

86-2470197

<u> </u>	in wideonbin civing inc		<u></u>
Part I	Contributors (see instructions) Use duplicate copies of Part I if	additional space is needed	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	New Glarus Brewing Company 2400 State Hwy 69 New Glarus, WI 53574	\$\$	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		 \$	Person Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$ 	Person Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Oncash (Complete Part II for noncash contributions)
(a) No	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Oncash Complete Part II for noncash contributions)

Name of organization

Employer identification number

Only in Wisconsin Giving Inc

86-2470197

Part II	Noncash Property (see instructions) Use duplicate copies of Part II if	additional space is needed	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
		s	
(a) No. from Part I	(b) Description of noncash property gıven	(c) FMV (or estimate) (See instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
		\$	

Schedule B	(Form 990.	990-EZ.	or 990-PF	(2020)

Page 4

Name of o	rganization		Employer identification number				
Only :	in Wisconsin Giving Inc		86-2470197				
Part III		through (e) and the following line entricharitable etc., contributions of \$1,000 or le	ction 501(c)(7), (8), or (10) that total more than \$1,000 for the year				
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held				
		(e) Transfer of gift					
<u> </u>	Transferee's name, address, ar	nd ZIP + 4	Relationship of transferor to transferee				
(a) No.	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held				
Part I							
-	(e) Transfer of gift						
ļ	Transferee's name, address, ar	nd ZIP + 4	Relationship of transferor to transferee				
(a) No							
(a) No. from Part I	(b) Purpose of gift (c) Use of g		(d) Description of how gift is held				
	Transferee's name, address, ar	Relationship of transferor to transferee					
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held				
1	(e) Transfer of gift						
}	Transferee's name, address, an	d ZIP + 4	Relationship of transferor to transferee				

Statement 2

Form 990-PF	Other E	xpenses	Statement 1		
Description	(a) Expenses Per Books	(b) Net Invest- ment Income	(c) Adjusted Net Income	(d) Charitable Purposes	
Check Ordering	100.	0.		100.	
To Form 990-PF, Pg 1, ln 23	100.	0.		100.	

New Glarus, WI 53574

Par	Part VII-A, Line 10		
Name of Contributor	Address		
New Glarus Brewing Company	2400 WI-69		

Form 990-PF List of Substantial Contributors

Form 990-PF

Grant Application Submission Information Part XV, Lines 2a through 2d

Statement 3

Name and Address of Person to Whom Applications Should be Submitted

Only in Wisconsin Giving, Inc. 2400 Highway 69, PO Box 759 New Glarus, WI 53574

Telephone Number

920-232-4856

Email Address

giving@newglarusbrewing.com

Form and Content of Applications

Visit newglarusbrewing.com/donation for Grant Application and Policy

Any Submission Deadlines

If for a specific event, complete the application at least 45 days prior to the date of event.

Restrictions and Limitations on Awards

While any organization that supports the needs of our community and the people Wisconsin is eligible for a grant, preference is given to those that work in the areas of:

- Childhood Education
- Hunger Relief
- Health Care
- Housing

Only in Wisconsin Giving, Inc. EIN: 86-2470197

2020 Form 990-PF Attachment Explanation for Paper Filing

The Taxpayer First Act of 2019 requires e-filing of Form 990-PF Accordingly, the 2020 Form 990-PF was released for e-filing on 10/29/2021

However, Form 990-PF was rejected by the e-file system because the filing is an initial return with an exemption application pending, and the type of return indicated in the return header did not match the return type established with the IRS for the EIN