

**Return of Private Foundation**

Department of the Treasury  
Internal Revenue Service

or Section 4947(a)(1) Nonexempt Charitable Trust Treated as a Private Foundation  
Note: The organization may be able to use a copy of this return to satisfy state reporting requirements

**2004**

For calendar year 2004, or tax year beginning **10/01**, 2004, and ending **09/30/2005**  
 G Check all that apply:  Initial return  Final return  Amended return  Address change  Name change

**Name of organization**  
WINDWAY FOUNDATION, INC.  
**Employer identification number**  
39-6046987  
**Number and street (or P.O. box number if mail is not delivered to street address) Room/suite**  
 PO BOX 897  
**Telephone number (see page 10 of the instructions)**  
 (920) 457-8600  
**City or town, state, and ZIP code**  
 SHEBOYGAN, WI 53081

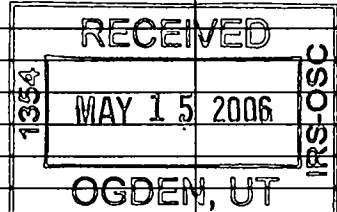
**H Check type of organization.**  Section 501(c)(3) exempt private foundation  
 Section 4947(a)(1) nonexempt charitable trust  Other taxable private foundation  
**I Fair market value of all assets at end of year (from Part II, col. (c), line 16)** ▶ \$ **25,130.17**  
**J Accounting method:**  Cash  Accrual  Other (specify) \_\_\_\_\_  
 (Part I, column (d) must be on cash basis.)

**C** If exemption application is pending check here . . . . .   
**D 1** Foreign organizations, check here . . . . .   
**2** Foreign organizations meeting the 85% test check here and attach computation . . . . .   
**E** If private foundation status was terminated under section 507(b)(1)(A), check here . . . . .   
**F** If the foundation is in a 60-month termination under section 507(b)(1)(B), check here . . . . .

**Part I Analysis of Revenue and Expenses**  
 (The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a) (see page 11 of the instructions))

	(a) Revenue and expenses per books	(b) Net investment income	(c) Adjusted net income	(d) Disbursements for charitable purposes (cash basis only)
1 Contributions, gifts, grants, etc., received (attach schedule) . . . . .	100,000.00	STMT 1		
2 Check <input type="checkbox"/> if the foundation is not required to attach Sch B				
3 Interest on savings and temporary cash investments				
4 Dividends and interest from securities . . . . .				
5a Gross rents . . . . .				
b Net rental income or (loss)				
6a Net gain or (loss) from sale of assets not on line 10				
b Gross sales price for all assets on line 6a				
Capital gain net income (from Part IV, line 2)				
8 Net short-term capital gain . . . . .				
9 Income modifications . . . . .				
10a Gross sales less returns and allowances . . . . .				
b Less Cost of goods sold . . . . .				
c Gross profit or (loss) (attach schedule) . . . . .				
11 Other income (attach schedule) . . . . .				
12 Total. Add lines 1 through 11 . . . . .	100,000.00			
13 Compensation of officers, directors, trustees, etc. . . . .	NONE			
14 Other employee salaries and wages . . . . .				
15 Pension plans, employee benefits . . . . .				
16a Legal fees (attach schedule) . . . . .				
b Accounting fees (attach schedule) . . . . .				
c Other professional fees (attach schedule) . . . . .				
17 Interest . . . . .				
18 Taxes (attach schedule) (see page 14 of the instructions)				
19 Depreciation (attach schedule) and depletion				
20 Occupancy . . . . .				
21 Travel, conferences, and meetings . . . . .				
22 Printing and publications . . . . .				
23 Other expenses (attach schedule) STMT, 2 . . . . .	10.00			10.00
24 Total operating and administrative expenses. Add lines 13 through 23 . . . . .	10.00			10.00
25 Contributions, gifts, grants paid . . . . .	141,466.00			141,466.00
26 Total expenses and disbursements. Add lines 24 and 25 . . . . .	141,476.00			141,476.00
27 Subtract line 26 from line 12 . . . . .				
a Excess of revenue over expenses and disbursements . . . . .	-41,476.00			
b Net investment income (if negative, enter -0-) . . . . .		-0-		
c Adjusted net income (if negative, enter -0-) . . . . .			-0-	

Revenue  
MAY 2 3 2005  
ANNEX  
Operating and Administrative Expenses



Part II Balance Sheets		Attached schedules and amounts in the description column should be for end-of-year amounts only (See instructions)		
		Beginning of year	End of year	
		(a) Book Value	(b) Book Value	(c) Fair Market Value
Assets	1 Cash - non-interest-bearing . . . . .	66,606.17	25,130.17	25,130.17
	2 Savings and temporary cash investments . . . . .			
	3 Accounts receivable ▶			
	Less allowance for doubtful accounts ▶			
	4 Pledges receivable ▶			
	Less allowance for doubtful accounts ▶			
	5 Grants receivable . . . . .			
	6 Receivables due from officers, directors, trustees, and other disqualified persons (attach schedule) (see page 15 of the instructions)			
	7 Other notes and loans receivable (attach schedule) ▶			
	Less allowance for doubtful accounts ▶			
	8 Inventories for sale or use . . . . .			
	9 Prepaid expenses and deferred charges . . . . .			
	10 a Investments - U S and state government obligations (attach schedule)			
	b Investments - corporate stock (attach schedule) . . . . .			
	c Investments - corporate bonds (attach schedule) . . . . .			
	11 Investments - land, buildings, and equipment basis ▶			
Less accumulated depreciation (attach schedule) ▶				
12 Investments - mortgage loans . . . . .				
13 Investments - other (attach schedule) . . . . .				
14 Land, buildings, and equipment basis ▶				
Less accumulated depreciation (attach schedule) ▶				
15 Other assets (describe ▶) . . . . .				
16 Total assets (to be completed by all filers - see page 16 of the instructions Also, see page 1, item I) . . . . .	66,606.17	25,130.17	25,130.17	
Liabilities	17 Accounts payable and accrued expenses . . . . .			
	18 Grants payable . . . . .			
	19 Deferred revenue . . . . .			
	20 Loans from officers, directors, trustees, and other disqualified persons . . . . .			
	21 Mortgages and other notes payable (attach schedule) . . . . .			
	22 Other liabilities (describe ▶) . . . . .			
23 Total liabilities (add lines 17 through 22) . . . . .				
Net Assets or Fund Balances	<b>Organizations that follow SFAS 117, check here ▶ <input type="checkbox"/></b> <b>and complete lines 24 through 26 and lines 30 and 31.</b>			
	24 Unrestricted . . . . .			
	25 Temporarily restricted . . . . .			
	26 Permanently restricted . . . . .			
	<b>Organizations that do not follow SFAS 117, check here and complete lines 27 through 31. ▶ <input checked="" type="checkbox"/></b>			
	27 Capital stock, trust principal, or current funds . . . . .			
	28 Paid-in or capital surplus, or land, bldg, and equipment fund . . . . .			
	29 Retained earnings, accumulated income, endowment, or other funds . . . . .			
30 Total net assets or fund balances (see page 17 of the instructions) . . . . .	66,606.17	25,130.17		
31 Total liabilities and net assets/fund balances (see page 17 of the instructions) . . . . .	66,606.17	25,130.17		

**Part III Analysis of Changes in Net Assets or Fund Balances**

1 Total net assets or fund balances at beginning of year - Part II, column (a), line 30 (must agree with end-of-year figure reported on prior year's return) . . . . .	1	66,606.17
2 Enter amount from Part I, line 27a . . . . .	2	-41,476.00
3 Other increases not included in line 2 (itemize) ▶	3	
4 Add lines 1, 2, and 3 . . . . .	4	25,130.17
5 Decreases not included in line 2 (itemize) ▶	5	
6 Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b), line 30 . . . . .	6	25,130.17

**Part IV Capital Gains and Losses for Tax on Investment Income**

(a) List and describe the kind(s) of property sold (e.g., real estate, 2-story brick warehouse, or common stock, 200 shs MLC Co)				(b) How acquired P-Purchase D-Donation	(c) Date acquired (mo., day, yr.)	(d) Date sold (mo., day, yr.)
1a						
b						
c						
d						
e						
(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale	(h) Gain or (loss) (e) plus (f) minus (g)			
a						
b						
c						
d						
e						
Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69				(l) Gains (Col. (h) gain minus col. (k), but not less than -0-) or Losses (from col. (h))		
(i) F M V as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col. (i) over col. (j), if any				
a						
b						
c						
d						
e						
2 Capital gain net income or (net capital loss) . . . . .	{ If gain, also enter in Part I, line 7 If (loss), enter -0- in Part I, line 7 }		2			
3 Net short-term capital gain or (loss) as defined in sections 1222(5) and (6): If gain, also enter in Part I, line 8, column (c) (see pages 13 and 17 of the instructions). If (loss), enter -0- in Part I, line 8 . . . . .	}		3			

**Part V Qualification Under Section 4940(e) for Reduced Tax on Net Investment Income**

(For optional use by domestic private foundations subject to the section 4940(a) tax on net investment income)

If section 4940(d)(2) applies, leave this part blank.

Was the organization liable for the section 4942 tax on the distributable amount of any year in the base period? . . .  Yes  No  
 If "Yes," the organization does not qualify under section 4940(e). Do not complete this part.

1 Enter the appropriate amount in each column for each year; see page 18 of the instructions before making any entries

(a) Base period years Calendar year (or tax year beginning in)	(b) Adjusted qualifying distributions	(c) Net value of noncharitable-use assets	(d) Distribution ratio (col. (b) divided by col. (c))
2003	78,000.61	40,617.78	1.92035630702
2002	101,302.94	19,590.64	5.17098675694
2001	104,666.38	10,444.31	10.02137814753
2000	106,804.66	11,015.03	9.69626592029
1999	144,951.36	11,041.40	13.12798739290
2 Total of line 1, column (d) . . . . .			39.93697452468
3 Average distribution ratio for the 5-year base period - divide the total on line 2 by 5, or by the number of years the foundation has been in existence if less than 5 years . . . . .			7.98739490494
4 Enter the net value of noncharitable-use assets for 2004 from Part X, line 5 . . . . .			20,886.60
5 Multiply line 4 by line 3 . . . . .			166,829.52
6 Enter 1% of net investment income (1% of Part I, line 27b) . . . . .			
7 Add lines 5 and 6 . . . . .			166,829.52
8 Enter qualifying distributions from Part XII, line 4 . . . . .			141,476.00

If line 8 is equal to or greater than line 7, check the box in Part VI, line 1b, and complete that part using a 1% tax rate. See the Part VI instructions on page 18.

Part VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 - see page 18 of the instructions)

Table with 11 rows for excise tax calculations. Includes categories like 'Exempt operating foundations', 'Domestic organizations', 'Tax under section 511', and 'Credits/Payments'. Columns include line numbers and 'NONE' or 'Refunded' status.

Part VII-A Statements Regarding Activities

Table with 11 rows for activity statements. Includes questions about political campaigns, tax on political expenditures, and state registration. Columns include 'Yes', 'No', and 'N/A' responses.

Part VII-B Statements Regarding Activities for Which Form 4720 May Be Required

File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.

Table with columns for question descriptions, Yes/No checkboxes, and a summary table with Yes, No, and N/A columns. Rows include questions about disqualifying acts, taxes on failure to distribute income, and propaganda/influence.

**Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors**

**1 List all officers, directors, trustees, foundation managers and their compensation (see page 20 of the instructions).**

(a) Name and address	(b) Title, and average hours per week devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
SEE STATEMENT 3		NONE	NONE	NONE

**2 Compensation of five highest-paid employees (other than those included on line 1 - see page 21 of the instructions). If none, enter "NONE."**

(a) Name and address of each employee paid more than \$50,000	(b) Title and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
NONE				

Total number of other employees paid over \$50,000 . . . . . **NONE**

**3 Five highest-paid independent contractors for professional services - (see page 21 of the instructions). If none, enter "NONE."**

(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 . . . . . **NONE**

**Part IX-A Summary of Direct Charitable Activities**

List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of organizations and other beneficiaries served, conferences convened, research papers produced, etc	Expenses
1 N/A	
2	
3	
4	

**Part IX-B Summary of Program-Related Investments** (see page 22 of the instructions)

Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2	Amount
1 <u>NONE</u>	
2	
All other program-related investments See page 22 of the instructions	
3 <u>NONE</u>	
<b>Total.</b> Add lines 1 through 3	

**Part X Minimum Investment Return** (All domestic foundations must complete this part. Foreign foundations, see page 22 of the instructions.)

1 Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes		
a Average monthly fair market value of securities	1a	
b Average of monthly cash balances	1b	21,204.67
c Fair market value of all other assets (see page 22 of the instructions)	1c	NONE
d <b>Total</b> (add lines 1a, b, and c)	1d	21,204.67
e Reduction claimed for blockage or other factors reported on lines 1a and 1c (attach detailed explanation)	1e	
2 Acquisition indebtedness applicable to line 1 assets	2	NONE
3 Subtract line 2 from line 1d	3	21,204.67
4 Cash deemed held for charitable activities Enter 1 1/2% of line 3 (for greater amount, see page 23 of the instructions)	4	318.07
5 <b>Net value of noncharitable-use assets.</b> Subtract line 4 from line 3. Enter here and on Part V, line 4	5	20,886.60
6 <b>Minimum investment return.</b> Enter 5% of line 5	6	1,044.33

**Part XI Distributable Amount** (see page 23 of the instructions) (Section 4942(j)(3) and (j)(5) private operating foundations and certain foreign organizations check here  and do not complete this part.)

1 Minimum investment return from Part X, line 6	1	1,044.33
2a Tax on investment income for 2004 from Part VI, line 5	2a	NONE
b Income tax for 2004. (This does not include the tax from Part VI)	2b	
c Add lines 2a and 2b	2c	NONE
3 Distributable amount before adjustments Subtract line 2c from line 1	3	1,044.33
4 Recoveries of amounts treated as qualifying distributions	4	NONE
5 Add lines 3 and 4	5	1,044.33
6 Deduction from distributable amount (see page 23 of the instructions)	6	NONE
7 <b>Distributable amount as adjusted</b> Subtract line 6 from line 5. Enter here and on Part XIII, line 1	7	1,044.33

**Part XII Qualifying Distributions** (see page 23 of the instructions)

1 Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:		
a Expenses, contributions, gifts, etc - total from Part I, column (d), line 26	1a	141,476.00
b Program-related investments - total from Part IX-B	1b	NONE
2 Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes	2	NONE
3 Amounts set aside for specific charitable projects that satisfy the:		
a Suitability test (prior IRS approval required)	3a	NONE
b Cash distribution test (attach the required schedule)	3b	NONE
4 <b>Qualifying distributions.</b> Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4	4	141,476.00
5 Organizations that qualify under section 4940(e) for the reduced rate of tax on net investment income. Enter 1% of Part I, line 27b (see page 24 of the instructions)	5	N/A
6 <b>Adjusted qualifying distributions.</b> Subtract line 5 from line 4	6	141,476.00

**Note:** The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation qualifies for the section 4940(e) reduction of tax in those years.

**Part XIII Undistributed Income** (see page 24 of the instructions)

	(a) Corpus	(b) Years prior to 2003	(c) 2003	(d) 2004
1 Distributable amount for 2004 from Part XI, line 7 . . . . .				1,044.33
2 Undistributed income, if any, as of the end of 2003				
a Enter amount for 2003 only . . . . .			NONE	
b Total for prior years <u>2002</u> . . . . .		NONE		
3 Excess distributions carryover, if any, to 2004				
a From 1999 . . . . .	144,399.29			
b From 2000 . . . . .	106,253.91			
c From 2001 . . . . .	104,144.16			
d From 2002 . . . . .	100,323.41			
e From 2003 . . . . .	75,969.72			
f Total of lines 3a through e . . . . .	531,090.49			
4 Qualifying distributions for 2004 from Part XII, line 4 ▶ \$ <u>141,476.00</u>				
a Applied to 2003, but not more than line 2a . . . . .			NONE	
b Applied to undistributed income of prior years (Election required - see page 24 of the instructions) . . . . .		NONE		
c Treated as distributions out of corpus (Election required - see page 24 of the instructions) . . . . .	NONE			
d Applied to 2004 distributable amount, . . . . .				1,044.33
e Remaining amount distributed out of corpus . . . . .	140,431.67			
5 Excess distributions carryover applied to 2004 (If an amount appears in column (d), the same amount must be shown in column (a) )	NONE			NONE
6 Enter the net total of each column as indicated below:				
a Corpus Add lines 3f, 4c, and 4e Subtract line 5	671,522.16			
b Prior years' undistributed income Subtract line 4b from line 2b . . . . .		NONE		
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 assessed . . . . .		NONE		
d Subtract line 6c from line 6b Taxable amount - see page 25 of the instructions . . . . .		NONE		
e Undistributed income for 2003 Subtract line 4a from line 2a Taxable amount - see page 25 of the instructions . . . . .			NONE	
f Undistributed income for 2004 Subtract lines 4d and 5 from line 1 This amount must be distributed in 2005 . . . . .				NONE
7 Amounts treated as distributions out of corpus to satisfy requirements imposed by section 170(b)(1)(E) or 4942(g)(3) (see page 25 of the instructions) . . . . .	NONE			
8 Excess distributions carryover from 1999 not applied on line 5 or line 7 (see page 25 of the instructions) . . . . .	144,399.29			
9 Excess distributions carryover to 2005. Subtract lines 7 and 8 from line 6a . . . . .	527,122.87			
10 Analysis of line 9				
a Excess from 2000 . . . . .	106,253.91			
b Excess from 2001 . . . . .	104,144.16			
c Excess from 2002 . . . . .	100,323.41			
d Excess from 2003 . . . . .	75,969.72			
e Excess from 2004 . . . . .	140,431.67			



**Part XIV Private Operating Foundations (see page 25 of the instructions and Part VII-A, question 9) NOT APPLICABLE**

**1 a** If the foundation has received a ruling or determination letter that it is a private operating foundation, and the ruling is effective for 2004, enter the date of the ruling . . . . .

**b** Check box to indicate whether the organization is a private operating foundation described in section 4942(j)(3) or 4942(j)(5)

	Tax year	Prior 3 years			(e) Total
	(a) 2004	(b) 2003	(c) 2002	(d) 2001	
<b>2 a</b> Enter the lesser of the adjusted net income from Part I or the minimum investment return from Part X for each year listed . . . . .					
<b>b</b> 85% of line 2a . . . . .					
<b>c</b> Qualifying distributions from Part XII, line 4 for each year listed . . . . .					
<b>d</b> Amounts included in line 2c not used directly for active conduct of exempt activities . . . . .					
<b>e</b> Qualifying distributions made directly for active conduct of exempt activities. Subtract line 2d from line 2c . . . . .					
<b>3</b> Complete 3a, b, or c for the alternative test relied upon					
<b>a</b> "Assets" alternative test - enter					
<b>(1)</b> Value of all assets . . . . .					
<b>(2)</b> Value of assets qualifying under section 4942(j)(3)(B)(i) . . . . .					
<b>b</b> "Endowment" alternative test - enter 2/3 of minimum investment return shown in Part X line 6 for each year listed . . . . .					
<b>c</b> "Support" alternative test - enter					
<b>(1)</b> Total support other than gross investment income (interest, dividends, rents, payments on securities loans (section 512(a)(5)) or royalties) . . . . .					
<b>(2)</b> Support from general public and 5 or more exempt organizations as provided in section 4942(j)(3)(B)(iii) . . . . .					
<b>(3)</b> Largest amount of support from an exempt organization . . . . .					
<b>(4)</b> Gross investment income . . . . .					

**Part XV Supplementary Information (Complete this part only if the organization had \$5,000 or more in assets at any time during the year - see page 26 of the instructions.)**

**1 Information Regarding Foundation Managers:**

**a** List any managers of the foundation who have contributed more than 2% of the total contributions received by the foundation before the close of any tax year (but only if they have contributed more than \$5,000) (See section 507(d)(2) )

NONE

**b** List any managers of the foundation who own 10% or more of the stock of a corporation (or an equally large portion of the ownership of a partnership or other entity) of which the foundation has a 10% or greater interest

NONE

**2 Information Regarding Contribution, Grant, Gift, Loan, Scholarship, etc., Programs:**

Check here  if the organization only makes contributions to preselected charitable organizations and does not accept unsolicited requests for funds. If the organization makes gifts, grants, etc. (see page 26 of the instructions) to individuals or organizations under other conditions, complete items 2a, b, c, and d

**a** The name, address, and telephone number of the person to whom applications should be addressed

SEE STATEMENT 4

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

LETTER FORM STATING NEED

**c** Any submission deadlines

NONE

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

NONE

**Part XV** Supplementary Information (continued)

**3 Grants and Contributions Paid During the Year or Approved for Future Payment**

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
a <i>Paid during the year</i>  SEE STATEMENT 5				
<b>Total . . . . .</b>				<b>▶ 3a 141,466.00</b>
b <i>Approved for future payment</i>				
<b>Total . . . . .</b>				<b>▶ 3b</b>



Part XVII Information Regarding Transfers To and Transactions and Relationships With Noncharitable Exempt Organizations

1 Did the organization directly or indirectly engage in any of the following with any other organization described in section 501(c) of the Code (other than section 501(c)(3) organizations) or in section 527, relating to political organizations?
a Transfers from the reporting organization to a noncharitable exempt organization of
(1) Cash
(2) Other assets
b Other transactions
(1) Sales of assets to a noncharitable exempt organization
(2) Purchases of assets from a noncharitable exempt organization
(3) Rental of facilities, equipment, or other assets
(4) Reimbursement arrangements
(5) Loans or loan guarantees
(6) Performance of services or membership or fundraising solicitations
c Sharing of facilities, equipment, mailing lists, other assets, or paid employees
d If the answer to any of the above is "Yes," complete the following schedule

Table with 4 columns: (a) Line no, (b) Amount involved, (c) Name of noncharitable exempt organization, (d) Description of transfers, transactions, and sharing arrangements. Row 1 contains 'N/A' in columns (b) and (d).

2 a Is the organization directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described in section 501(c) of the Code (other than section 501(c)(3)) or in section 527? [ ] Yes [X] No

Table with 3 columns: (a) Name of organization, (b) Type of organization, (c) Description of relationship. All cells are empty.

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 taxpayer or fiduciary) is based on all information of which preparer has any knowledge.
Sign Here: Signature of officer or trustee (Mary L. Dent-Hakim), Preparer's signature (Paul Muelh), Firm's name (FOLEY & LARDNER LLP), address (777 E. WISCONSIN AV MILWAUKEE, WI)

**Schedule of Contributors**

**2004**

Supplementary Information for  
line 1 of Form 990, 990-EZ, and 990-PF (see instructions)

Name of organization  
**WINDWAY FOUNDATION, INC.**

Employer identification number  
**39-6046987**

Organization type (check one):

**Filers of:**

**Section:**

Form 990 or 990-EZ

- 501(c)( ) (enter number) organization
- 4947(a)(1) nonexempt charitable trust **not** treated as a private foundation
- 527 political organization

Form 990-PF

- 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 -**

- For organizations filing Form 990, 990-EZ, or 990-PF that received, during the year, \$5,000 or more (in money or property) from any one contributor. (Complete Parts I and II )

**Special Rules -**

- For a section 501(c)(3) organization filing Form 990, or Form 990-EZ, that met the 33 1/3% support test of the regulations under sections 509(a)(1)/170(b)(1)(A)(vi) and received from any one contributor, during the year, a contribution of the greater of \$5,000 or 2% of the amount on line 1 of these forms. (Complete Parts I and II.)
- For a section 501(c)(7), (8), or (10) organization filing Form 990, or Form 990-EZ, that received from any one contributor, during the year, aggregate contributions or bequests of more than \$1,000 for use *exclusively* for religious, charitable, scientific, literary, or educational purposes, or the prevention of cruelty to children or animals (Complete Parts I, II, and III )
- For a section 501(c)(7), (8), or (10) organization filing Form 990, or Form 990-EZ, that received from any one contributor, during the year, some contributions for use *exclusively* for religious, charitable, etc., purposes, but these contributions did not aggregate to 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. Do not complete any of the Parts unless the **General Rule** applies to this organization because it received nonexclusively religious, charitable, etc., contributions of \$5,000 or more during the year ) . . . . . ▶ \$ \_\_\_\_\_

**Caution:** Organizations that are not covered by the General Rule and/or the Special Rules do not file Schedule B (Form 990, 990-EZ, or 990-PF), but they **must** check the box in the heading of their Form 990, Form 990-EZ, or on line 2 of their Form 990-PF, to certify that they do not meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF)

Name of organization **WINDWAY FOUNDATION, INC.**

Employer identification number

**39-6046987**

**Part I** Contributors (See Specific Instructions.)

(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
1	<b>WINDWAY CAPITAL CORPORATION</b>  <b>630 RIVERFRONT DR., SUITE 200</b>  <b>SHEBOYGAN, WI 53082-0897</b>	100,000.00	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution )
			Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
			Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution )
			Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution )
			Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution )
			Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution )

WINDWAY FOUNDATION, INC.

39-6046987

FORM 990PF, PART I - CONTRIBUTIONS, GIFTS AND GRANTS RECEIVED

NAME AND ADDRESS -----	DATE ----	DIRECT PUBLIC SUPPORT -----
WINDWAY CAPITAL CORPORATION 630 RIVERFRONT DR., SUITE 200 SHEBOYGAN, WI 53082-0897	VARIOUS	100,000.00
		-----
	TOTAL CONTRIBUTION AMOUNTS	100,000.00 =====

FORM 990PF, PART I - OTHER EXPENSES

=====

DESCRIPTION	REVENUE AND EXPENSES PER BOOKS	CHARITABLE PURPOSES
-----	-----	-----
SECRETARY OF STATE FILING FEE	10.00	10.00
TOTALS	----- 10.00 =====	----- 10.00 =====



FORM 990PF, PART VIII - LIST OF OFFICERS, DIRECTORS, AND TRUSTEES

NAME AND ADDRESS	TITLE AND TIME DEVOTED TO POSITION	COMPENSATION	CONTRIBUTIONS TO EMPLOYEE BENEFIT PLANS	EXPENSE ACCT AND OTHER ALLOWANCES
TERRY J. KOHLER 630 RIVERFRONT DRIVE, SUITE 200 SHEBOYGAN, WI 53081	PRESIDENT, DIRECTOR AV 1 HR/WK	NONE	NONE	NONE
MARY S. KOHLER 630 RIVERFRONT DRIVE, SUITE 200 SHEBOYGAN, WI 53081	V-PRESIDENT/DIRECTOR AV 1 HR/WK	NONE	NONE	NONE
MARY TEN HAKEN 630 RIVERFRONT DRIVE, SUITE 200 SHEBOYGAN, WI 53081	SECRETARY, DIRECTOR AV 1 HR/WK	NONE	NONE	NONE
ROLAND M. NEUMANN 607 NORTH 8 STREET, SUITE 400 SHEBOYGAN, WI 53081	TREASURER, DIRECTOR AV 1 HR/WK	NONE	NONE	NONE
	GRAND TOTALS	NONE	NONE	NONE

FORM 990PF, PART XV - NAME, ADDRESS AND PHONE FOR APPLICATIONS  
=====

TERRY KOHLER  
C/O WINDWAY CAPITAL CORP.  
630 RIVERFRONT DR., SUITE 200  
SHEBOYGAN, WI 53081  
920-457-8600

FORM 990PF, PART XV - GRANTS AND CONTRIBUTIONS PAID DURING THE YEAR

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RECIPIENT NAME AND ADDRESS	RELATIONSHIP TO SUBSTANTIAL CONTRIBUTOR AND FOUNDATION STATUS OF RECIPIENT	PURPOSE OF GRANT OR CONTRIBUTION	AMOUNT
-----	-----	-----	-----
SEE ATTACHED SCHEDULE	NONE PUBLIC	GENERAL	141,466.00
			-----
		TOTAL CONTRIBUTIONS PAID	141,466.00
			=====

WINDWAY FOUNDATION INC  
 EIN 39-6046987  
 ATTACHMENT TO 2004 FORM 990-PF FYE 9/30/05

PART XV, LINE 3 - CONTRIBUTIONS PAID

RECIPIENT	STATUS OF RECIPIENT	PURPOSE	AMOUNT
1776 AMERICAN DREAM, APPLETON, WI	PUBLIC	GENERAL	4,800 00
ACCURACY IN MEDIA, INC , WASHINGTON, D.C.	PUBLIC	GENERAL	1,000 00
AMERICANS UNITED FOR LIFE, CHICAGO, IL	PUBLIC	GENERAL	5,000 00
BAY LAKES COUNCIL, BOY SCOUTS OF AMERICA, LITTLE CHUTE, WI	PUBLIC	GENERAL	1,000 00
CAMP FOREST SPRINGS INC /OAK FOREST CENTER, WESTBORO, WI	PUBLIC	GENERAL	5,000 00
COLLEGE OF ST THOMAS MORE, FT WORTH, TX	PUBLIC	GENERAL	3,000.00
EASTBROOK ACADEMY, MILWAUKEE, WI	PUBLIC	GENERAL	1,000 00
INDEPENDENT INSTITUTE, OAKLAND, CA	PUBLIC	GENERAL	5,000 00
INDEPENDENT WOMEN'S FORUM, WASHINGTON, D.C	PUBLIC	GENERAL	5,000.00
INSTITUTE OF RELIGION AND DEMOCRACY, WASHINGTON, D.C	PUBLIC	GENERAL	2,000 00
INTERNATIONAL CRANE FOUNDATION, BARABOO, WI	PUBLIC	GENERAL	20,000 00
KOREAN WAR VETERANS MEMORIAL ASSOCIATION OF WI, PLOVER, WI	PUBLIC	GENERAL	5,000 00
LAKE COUNTRY ACADEMY, MIND WORKS DIRECT INSTRUCTION INC., KOHLER, WI	PUBLIC	GENERAL	2,000 00
LAKELAND COLLEGE, SHEBOYGAN, WI	PUBLIC	GENERAL	5,000 00
LAKESHORE CHAPTER, TROUT UNLIMITED, SHEBOYGAN, WI	PUBLIC	GENERAL	10,000 00
LAO, HMONG & AMERICAN VETERANS MEMORIAL, SHEBOYGAN, WI	PUBLIC	GENERAL	5,000 00
MESSMER HIGH SCHOOL, MILWAUKEE, WI	PUBLIC	GENERAL	2,000 00
MILWAUKEE PUBLIC MUSEUM, MILWAUKEE, WI	PUBLIC	GENERAL	5,000 00
NATIONAL REVIEW INSTITUTE, NEW YORK, NY	PUBLIC	GENERAL	1,000 00
NATIONAL TAXPAYER'S UNION FOUNDATION, ALEXANDRIA, VA	PUBLIC	GENERAL	5,000 00
RELIGION & SOCIETY REPORT (ST CROIX REVIEW), STILLWATER, MN	PUBLIC	GENERAL	5,000 00
SAFE HARBOR, SHEBOYGAN, WI	PUBLIC	GENERAL	500 00
SHEBOYGAN AREA UNITED WAY, SHEBOYGAN, WI	PUBLIC	GENERAL	10,000 00
SHEBOYGAN BIRTHRIGHT, INC , SHEBOYGAN, WI	PUBLIC	GENERAL	500.00
SHEBOYGAN COUNTY HISTORICAL SOCIETY, SHEBOYGAN FALLS, WI	PUBLIC	GENERAL	200 00
THE PHILADELPHIA SOCIETY, CHICAGO, IL	PUBLIC	GENERAL	4,000.00
THE ROCKFORD INSTITUTE, ROCKFORD, IL	PUBLIC	GENERAL	10,000 00
THE THOREAU INSTITUTE, BANDON, OR	PUBLIC	GENERAL	2,000 00
THE ZOOLOGICAL SOCIETY OF MILWAUKEE, MILWAUKEE, WI	PUBLIC	GENERAL	2,966 00
VERITAS SOCIETY, MILWAUKEE, WI	PUBLIC	GENERAL	5,000 00
WISCONSIN FOUNDATION FOR INDEPENDENT COLLEGES, INC , MILWAUKEE, WI	PUBLIC	GENERAL	7,000 00
WISCONSIN HISTORICAL FOUNDATION, MADISON, WI	PUBLIC	GENERAL	1,000 00
WISCONSIN MARITIME MUSEUM INC., MANITOWOC, WI	PUBLIC	GENERAL	500 00
TOTAL CONTRIBUTIONS PAID			<u>141,466 00</u>

# Application for Extension of Time To File an Exempt Organization Return

OMB No 1545-1709

▶ File a separate application for each return

- If you are filing for an **Automatic 3-Month Extension**, complete **only Part I** and check this box
- If you are filing for an **Additional (not automatic) 3-Month Extension**, complete **only Part II** (on page 2 of this form).

**Do not complete Part II unless** you have already been granted an automatic 3-month extension on a previously filed Form 8868.

**Part I Automatic 3-Month Extension of Time - Only submit original (no copies needed)**

**Form 990-T corporations** requesting an automatic 6-month extension - check this box and complete Part I only.

All other corporations (including Form 990-C filers) must use Form 7004 to request an extension of time to file income tax returns. Partnerships, REMICs, and trusts must use Form 8736 to request an extension of time to file Form 1065, 1066, or 1041.

**Electronic Filing (e-file).** Form 8868 can be filed electronically if you want a 3-month automatic extension of time to file one of the returns noted below (6 months for corporate Form 990-T filers). However, you cannot file it electronically if you want the additional (not automatic) 3-month extension, instead you must submit the fully completed signed page 2 (Part II) of Form 8868. For more details on the electronic filing of this form, visit [www.irs.gov/efile](http://www.irs.gov/efile).

<b>Type or print</b>  <small>File by the due date for filing your return. See instructions.</small>	Name of Exempt Organization <b>WINDWAY FOUNDATION, INC.</b>	Employer identification number <b>39-6046987</b>
	Number, street, and room or suite no. If a P O box, see instructions <b>PO BOX 897</b>	
	City, town or post office, state, and ZIP code. For a foreign address, see instructions <b>SHEBOYGAN, WI 53081</b>	

**Check type of return to be filed (file a separate application for each return)**

- |   |  |                                    |
|---|--|------------------------------------|
| <input type="checkbox"/> Form 990               | <input type="checkbox"/> Form 990-T (corporation)                | <input type="checkbox"/> Form 4720 |
| <input type="checkbox"/> Form 990-BL            | <input type="checkbox"/> Form 990-T(sec. 401(a) or 408(a) trust) | <input type="checkbox"/> Form 5227 |
| <input type="checkbox"/> Form 990-EZ            | <input type="checkbox"/> Form 990-T (trust other than above)     | <input type="checkbox"/> Form 6069 |
| <input checked="" type="checkbox"/> Form 990-PF | <input type="checkbox"/> Form 1041-A                             | <input type="checkbox"/> Form 8870 |

• The books are in the care of ▶ ROBERTA CHILDS

Telephone No ▶ 920 457-8600 FAX No ▶ \_\_\_\_\_

• If the organization does **not** have an office or place of business in the United States, check this box

• If this is for a **Group Return**, enter the organization's four digit Group Exemption Number (GEN) \_\_\_\_\_ . If this is for the **whole** group, check this box  . If it is for part of the group, check this box  and attach a list with the names and EINs of all members the extension will cover

1 I request an automatic 3-month (6-months for a **Form 990-T corporation**) extension of time until 05/15, 2006, to file the exempt organization return for the organization named above. The extension is for the organization's return for:  
 ▶  calendar year \_\_\_\_\_ or  
 ▶  tax year beginning 10/01, 2004, and ending 09/30, 2005

2 If this tax year is for less than 12 months, check reason:  Initial return  Final return  Change in accounting period

3a If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions. \$ NONE

b If this application is for Form 990-PF or 990-T, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit. \$ NONE

c **Balance Due.** Subtract line 3b from line 3a. Include your payment with this form, or, if required, deposit with FTD coupon or, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions. \$ NONE

**Caution.** If you are going to make an electronic fund withdrawal with this Form 8868, see Form 8453-EO and Form 8879-EO for payment instructions.

For Privacy Act and Paperwork Reduction Act Notice, see Instructions.

Form **8868** (Rev. 12-2004)