

WEGNER CPAS, LLP
2921 LANDMARK PL STE 300
MADISON, WI 53713-4236

AMERICAN WARRIOR INITIATIVE, INC.
4750 S BILTMORE LN
MADISON, WI 53718

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CLIENT'S COPY

AMERICAN WARRIOR INITIATIVE, INC.
4750 S BILTMORE LN
MADISON, WI 53718
ATTENTION: TODD GAVINSKI

ENCLOSED IS THE ORGANIZATION'S 2018 EXEMPT ORGANIZATION RETURN.

SPECIFIC FILING INSTRUCTIONS ARE AS FOLLOWS.

FORM 990-PF RETURN:

THIS RETURN HAS QUALIFIED FOR ELECTRONIC FILING. THE RETURN HAS BEEN TRANSMITTED ELECTRONICALLY TO THE IRS AND NO FURTHER ACTION IS REQUIRED.

NO AMOUNT IS DUE ON FORM 990-PF.

PLEASE NOTE THAT THE FORM 990-PF RETURN CONTAINS EXCESS DISTRIBUTION CARRYOVER OF \$1,402,784. THIS MAY BE APPLIED TO TAX YEAR 2019 AND SUBSEQUENT YEARS.

TAX-EXEMPT ORGANIZATIONS ARE REQUIRED TO MAKE AVAILABLE FOR PUBLIC INSPECTION A COPY OF THEIR ANNUAL RETURNS UPON REQUEST. RETURNS MUST BE AVAILABLE FOR A PERIOD OF THREE YEARS BEGINNING ON THE DATE THE RETURNS ARE REQUIRED TO BE FILED (INCLUDING EXTENSIONS) OR ARE ACTUALLY FILED, WHICHEVER IS LATER. WE HAVE ENCLOSED A PUBLIC DISCLOSURE COPY OF YOUR RETURN THAT MAY BE USED TO COMPLY WITH THE PUBLIC INSPECTION REQUIREMENTS.

A COPY OF FORM 990-PF MUST BE FURNISHED TO THE ATTORNEY GENERAL OF EACH STATE REQUIRED TO BE LISTED IN PART VII-A, LINE 8A; THE STATE IN WHICH THE FOUNDATION'S PRINCIPAL OFFICE IS LOCATED; AND THE STATE IN WHICH THE FOUNDATION WAS INCORPORATED OR CREATED. A COPY OF THE ANNUAL RETURN MUST BE SENT TO THE ATTORNEY GENERAL AT THE SAME TIME THE ANNUAL RETURN IS FILED WITH THE IRS.

WE SINCERELY APPRECIATE THE OPPORTUNITY TO SERVE YOU. PLEASE CONTACT US IF YOU HAVE ANY QUESTIONS CONCERNING THE TAX RETURN.

A COPY OF THE RETURN IS ENCLOSED FOR YOUR FILES. WE SUGGEST

THAT YOU RETAIN THIS COPY INDEFINITELY.

SINCERELY,

GLENN MILLER, CPA
PARTNER

TAX RETURN FILING INSTRUCTIONS

FORM 990-PF

FOR THE YEAR ENDING
DECEMBER 31, 2018

Prepared for	AMERICAN WARRIOR INITIATIVE, INC. 4750 S BILTMORE LN MADISON, WI 53718
Prepared by	WEGNER CPAS, LLP 2921 LANDMARK PL STE 300 MADISON, WI 53713-4236
Amount due or refund	NO AMOUNT IS DUE
Make check payable to	NO AMOUNT IS DUE.
Mail tax return and check (if applicable) to	NOT APPLICABLE
Return must be mailed on or before	NOT APPLICABLE
Special Instructions	<p>THIS RETURN HAS QUALIFIED FOR ELECTRONIC FILING. THE RETURN HAS BEEN TRANSMITTED ELECTRONICALLY TO THE IRS AND NO FURTHER ACTION IS REQUIRED.</p> <p>PLEASE NOTE THAT THE FORM 990-PF RETURN CONTAINS EXCESS DISTRIBUTION CARRYOVER OF \$1,402,784. THIS MAY BE APPLIED TO TAX YEAR 2019 AND SUBSEQUENT YEARS.</p>

Form **8879-EO**

IRS e-file Signature Authorization for an Exempt Organization

OMB No. 1545-1878

For calendar year 2018, or fiscal year beginning _____, 2018, and ending _____, 20____

2018

Department of the Treasury
Internal Revenue Service

▶ **Do not send to the IRS. Keep for your records.**
▶ **Go to www.irs.gov/Form8879EO for the latest information.**

Name of exempt organization

Employer identification number

AMERICAN WARRIOR INITIATIVE, INC.

47-3566126

Name and title of officer

**TODD GAVINSKI
BOARD MEMBER**

Part I Type of Return and Return Information (Whole Dollars Only)

Check the box for the return for which you are using this Form 8879-EO and enter the applicable amount, if any, from the return. If you check the box on line **1a, 2a, 3a, 4a, or 5a**, below, and the amount on that line for the return being filed with this form was blank, then leave line **1b, 2b, 3b, 4b, or 5b**, whichever is applicable, blank (do not enter -0-). But, if you entered -0- on the return, then enter -0- on the applicable line below. **Do not** complete more than one line in Part I.

1a Form 990 check here ▶ <input type="checkbox"/>	b Total revenue , if any (Form 990, Part VIII, column (A), line 12)	1b _____
2a Form 990-EZ check here ▶ <input type="checkbox"/>	b Total revenue , if any (Form 990-EZ, line 9)	2b _____
3a Form 1120-POL check here ▶ <input type="checkbox"/>	b Total tax (Form 1120-POL, line 22)	3b _____
4a Form 990-PF check here ▶ <input checked="" type="checkbox"/>	b Tax based on investment income (Form 990-PF, Part VI, line 5)	4b <u>0.</u>
5a Form 8868 check here ▶ <input type="checkbox"/>	b Balance Due (Form 8868, line 3c)	5b _____

Part II Declaration and Signature Authorization of Officer

Under penalties of perjury, I declare that I am an officer of the above organization and that I have examined a copy of the organization's 2018 electronic return and accompanying schedules and statements and to the best of my knowledge and belief, they are true, correct, and complete. I further declare that the amount in Part I above is the amount shown on the copy of the organization's electronic return. I consent to allow my intermediate service provider, transmitter, or electronic return originator (ERO) to send the organization's return to the IRS and to receive from the IRS (a) an acknowledgement of receipt or reason for rejection of the transmission, (b) the reason for any delay in processing the return or refund, and (c) the date of any refund. If applicable, I authorize the U.S. Treasury and its designated Financial Agent to initiate an electronic funds withdrawal (direct debit) entry to the financial institution account indicated in the tax preparation software for payment of the organization's federal taxes owed on this return, and the financial institution to debit the entry to this account. To revoke a payment, I must contact the U.S. Treasury Financial Agent at 1-888-353-4537 no later than 2 business days prior to the payment (settlement) date. I also authorize the financial institutions involved in the processing of the electronic payment of taxes to receive confidential information necessary to answer inquiries and resolve issues related to the payment. I have selected a personal identification number (PIN) as my signature for the organization's electronic return and, if applicable, the organization's consent to electronic funds withdrawal.

Officer's PIN: check one box only

I authorize WEGNER LLP to enter my PIN 12690
ERO firm name Enter five numbers, but do not enter all zeros

as my signature on the organization's tax year 2018 electronically filed return. If I have indicated within this return that a copy of the return is being filed with a state agency(ies) regulating charities as part of the IRS Fed/State program, I also authorize the aforementioned ERO to enter my PIN on the return's disclosure consent screen.

As an officer of the organization, I will enter my PIN as my signature on the organization's tax year 2018 electronically filed return. If I have indicated within this return that a copy of the return is being filed with a state agency(ies) regulating charities as part of the IRS Fed/State program, I will enter my PIN on the return's disclosure consent screen.

Officer's signature ▶ _____ Date ▶ _____

Part III Certification and Authentication

ERO's EFIN/PIN. Enter your six-digit electronic filing identification number (EFIN) followed by your five-digit self-selected PIN.

39224553713

Do not enter all zeros

I certify that the above numeric entry is my PIN, which is my signature on the 2018 electronically filed return for the organization indicated above. I confirm that I am submitting this return in accordance with the requirements of **Pub. 4163**, Modernized e-File (MeF) Information for Authorized IRS e-file Providers for Business Returns.

ERO's signature ▶ _____ Date ▶ _____

**ERO Must Retain This Form - See Instructions
Do Not Submit This Form to the IRS Unless Requested To Do So**

LHA For Paperwork Reduction Act Notice, see instructions.

Form **8879-EO** (2018)

823051 10-26-18

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.
▶ Go to www.irs.gov/Form990PF for instructions and the latest information.

For calendar year 2018 or tax year beginning

, and ending

Name of foundation AMERICAN WARRIOR INITIATIVE, INC.		A Employer identification number 47-3566126
Number and street (or P.O. box number if mail is not delivered to street address) 4750 S BILTMORE LN	Room/suite	B Telephone number (608) 571-0508
City or town, state or province, country, and ZIP or foreign postal code MADISON, WI 53718		C If exemption application is pending, check here ... <input type="checkbox"/>
G Check all that apply: <input type="checkbox"/> Initial return <input type="checkbox"/> Initial return of a former public charity <input type="checkbox"/> Final return <input type="checkbox"/> Amended return <input checked="" type="checkbox"/> Address change <input type="checkbox"/> Name change		D 1. Foreign organizations, check here ... <input type="checkbox"/> 2. Foreign organizations meeting the 85% test, check here and attach computation ... <input type="checkbox"/>
H Check type of organization: <input checked="" type="checkbox"/> Section 501(c)(3) exempt private foundation <input type="checkbox"/> Section 4947(a)(1) nonexempt charitable trust <input type="checkbox"/> Other taxable private foundation		E If private foundation status was terminated under section 507(b)(1)(A), check here ... <input type="checkbox"/>
I Fair market value of all assets at end of year (from Part II, col. (c), line 16) ▶ \$ 1,497,847.	J Accounting method: <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual <input type="checkbox"/> Other (specify) _____	F If the foundation is in a 60-month termination under section 507(b)(1)(B), check here ... <input type="checkbox"/>

	(a) Revenue and expenses per books	(b) Net investment income	(c) Adjusted net income	(d) Disbursements for charitable purposes (cash basis only)
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).)				
Revenue				
1 Contributions, gifts, grants, etc., received	920,744.		N/A	
2 Check <input type="checkbox"/> if the foundation is not required to attach Sch. B				
3 Interest on savings and temporary cash investments	5,668.	5,668.		STATEMENT 1
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				
7 Capital gain net income (from Part IV, line 2)		0.		
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)				
11 Other income				
12 Total. Add lines 1 through 11	926,412.	5,668.		
Operating and Administrative Expenses				
13 Compensation of officers, directors, trustees, etc.	0.	0.		0.
14 Other employee salaries and wages				
15 Pension plans, employee benefits				
16a Legal fees				
b Accounting fees STMT 2	8,250.	0.		0.
c Other professional fees				
17 Interest				
18 Taxes				
19 Depreciation and depletion				
20 Occupancy				
21 Travel, conferences, and meetings				
22 Printing and publications				
23 Other expenses STMT 3	14,971.	7,484.		0.
24 Total operating and administrative expenses. Add lines 13 through 23	23,221.	7,484.		0.
25 Contributions, gifts, grants paid	661,692.			635,394.
26 Total expenses and disbursements. Add lines 24 and 25	684,913.	7,484.		635,394.
27 Subtract line 26 from line 12:				
a Excess of revenue over expenses and disbursements	241,499.			
b Net investment income (if negative, enter -0-)		0.		
c Adjusted net income (if negative, enter -0-)			N/A	

Part II Balance Sheets		Attached schedules and amounts in the description column should be for end-of-year amounts only.		
		Beginning of year	End of year	
		(a) Book Value	(b) Book Value	(c) Fair Market Value
Assets	1 Cash - non-interest-bearing	1,179,427.	616,727.	616,727.
	2 Savings and temporary cash investments		755,634.	755,634.
	3 Accounts receivable			
	Less: allowance for doubtful accounts			
	4 Pledges receivable	124,906.		
	Less: allowance for doubtful accounts	42,036.	124,906.	124,906.
	5 Grants receivable			
	6 Receivables due from officers, directors, trustees, and other disqualified persons			
	7 Other notes and loans receivable			
	Less: allowance for doubtful accounts			
	8 Inventories for sale or use			
	9 Prepaid expenses and deferred charges		580.	580.
	10a Investments - U.S. and state government obligations			
	b Investments - corporate stock			
	c Investments - corporate bonds			
	11 Investments - land, buildings, and equipment: basis			
Less: accumulated depreciation				
12 Investments - mortgage loans				
13 Investments - other				
14 Land, buildings, and equipment: basis				
Less: accumulated depreciation				
15 Other assets (describe)				
16 Total assets (to be completed by all filers - see the instructions. Also, see page 1, item I)	1,221,463.	1,497,847.	1,497,847.	
Liabilities	17 Accounts payable and accrued expenses	201.	6,572.	
	18 Grants payable	121,123.	122,749.	
	19 Deferred revenue			
	20 Loans from officers, directors, trustees, and other disqualified persons			
	21 Mortgages and other notes payable			
	22 Other liabilities (describe STATEMENT 4)	0.	26,888.	
23 Total liabilities (add lines 17 through 22)	121,324.	156,209.		
Net Assets or Fund Balances	Foundations that follow SFAS 117, check here <input checked="" type="checkbox"/> and complete lines 24 through 26, and lines 30 and 31.			
	24 Unrestricted	663,664.	663,664.	
	25 Temporarily restricted	436,475.	677,974.	
	26 Permanently restricted			
	Foundations that do not follow SFAS 117, check here <input type="checkbox"/> and complete lines 27 through 31.			
	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	1,100,139.	1,341,638.		
31 Total liabilities and net assets/fund balances	1,221,463.	1,497,847.		

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	1,100,139.
2 Enter amount from Part I, line 27a	2	241,499.
3 Other increases not included in line 2 (itemize)	3	0.
4 Add lines 1, 2, and 3	4	1,341,638.
5 Decreases not included in line 2 (itemize)	5	0.
6 Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b), line 30	6	1,341,638.

Part IV Capital Gains and Losses for Tax on Investment Income

	(a) List and describe the kind(s) of property sold (for example, 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	NONE			
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) FMV 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). 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 foundation liable for the section 4942 tax on the distributable amount of any year in the base period? Yes No
 If "Yes," the foundation doesn't qualify under section 4940(e). Do not complete this part.

1 Enter the appropriate amount in each column for each year; see 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))
2017	326,262.	726,011.	.449390
2016	351,862.	198,409.	1.773418
2015	201,208.	72,465.	2.776623
2014			
2013			

2	Total of line 1, column (d)	2	4.999431
3	Average distribution ratio for the 5-year base period - divide the total on line 2 by 5.0, or by the number of years the foundation has been in existence if less than 5 years	3	1.666477
4	Enter the net value of noncharitable-use assets for 2018 from Part X, line 5	4	1,256,055.
5	Multiply line 4 by line 3	5	2,093,187.
6	Enter 1% of net investment income (1% of Part I, line 27b)	6	0.
7	Add lines 5 and 6	7	2,093,187.
8	Enter qualifying distributions from Part XII, line 4	8	635,394.

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.

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

Table with 11 rows for excise tax calculations. Includes fields for exempt foundations, tax under section 511, credits/payments, and tax due/overpayment. Total tax due is 0.

Part VII-A Statements Regarding Activities

Table with 10 rows for activity statements. Includes questions about political campaigns, unrelated business income, and substantial contributors. Includes a 'SEE STATEMENT 5' reference.

Part VII-A Statements Regarding Activities (continued)

11 At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of section 512(b)(13)? If "Yes," attach schedule. See instructions
12 Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had advisory privileges?
13 Did the foundation comply with the public inspection requirements for its annual returns and exemption application?
Website address WWW.AMERICANWARRIORINITIATIVE.COM
14 The books are in care of TODD GAVINSKI Telephone no. (608) 571-0508
Located at 4750 S BILTMORE LN, MADISON, WI ZIP+4 53718
15 Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - check here and enter the amount of tax-exempt interest received or accrued during the year 15 N/A
16 At any time during calendar year 2018, did the foundation have an interest in or a signature or other authority over a bank, securities, or other financial account in a foreign country? Yes No 16 X

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.

1a During the year, did the foundation (either directly or indirectly):
(1) Engage in the sale or exchange, or leasing of property with a disqualified person? Yes No X No
(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person? Yes No X No
(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? Yes No X No
(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? Yes No X No
(5) Transfer any income or assets to a disqualified person (or make any of either available for the benefit or use of a disqualified person)? Yes No X No
(6) Agree to pay money or property to a government official? (Exception. Check "No" if the foundation agreed to make a grant to or to employ the official for a period after termination of government service, if terminating within 90 days.) Yes No X No
b If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations section 53.4941(d)-3 or in a current notice regarding disaster assistance? See instructions N/A
Organizations relying on a current notice regarding disaster assistance, check here
c Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected before the first day of the tax year beginning in 2018? 1c X
2 Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation defined in section 4942(j)(3) or 4942(j)(5)):
a At the end of tax year 2018, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning before 2018? Yes No X No
If "Yes," list the years
b Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2) (relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer "No" and attach statement - see instructions.) N/A
c If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here.
3a Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year? Yes No X No
b If "Yes," did it have excess business holdings in 2018 as a result of (1) any purchase by the foundation or disqualified persons after May 26, 1969; (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest; or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Schedule C, Form 4720, to determine if the foundation had excess business holdings in 2018.) N/A
4a Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes? 4a X
b Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2018? 4b X

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

5a During the year, did the foundation pay or incur any amount to:		Yes	No
(1) Carry on propaganda, or otherwise attempt to influence legislation (section 4945(e))?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
(2) Influence the outcome of any specific public election (see section 4955); or to carry on, directly or indirectly, any voter registration drive?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
(3) Provide a grant to an individual for travel, study, or other similar purposes?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
(4) Provide a grant to an organization other than a charitable, etc., organization described in section 4945(d)(4)(A)? See instructions	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		
(5) Provide for any purpose other than religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify under the exceptions described in Regulations section 53.4945 or in a current notice regarding disaster assistance? See instructions		5b	X
Organizations relying on a current notice regarding disaster assistance, check here	<input type="checkbox"/>		
c If the answer is "Yes" to question 5a(4), does the foundation claim exemption from the tax because it maintained expenditure responsibility for the grant?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
If "Yes," attach the statement required by Regulations section 53.4945-5(d).			
6a Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
b Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract?		6b	X
If "Yes" to 6b, file Form 8870.			
7a At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
b If "Yes," did the foundation receive any proceeds or have any net income attributable to the transaction?	N/A	7b	
8 Is the foundation subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or excess parachute payment(s) during the year?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		

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

1 List all officers, directors, trustees, and foundation managers and their compensation.

(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 6		0.	0.	0.

2 Compensation of five highest-paid employees (other than those included on line 1). 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 0

Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors (continued)

3 Five highest-paid independent contractors for professional services. 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 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 information such as the number of organizations and other beneficiaries served, conferences convened, research papers produced, etc.	Expenses
1	
SEE STATEMENT 7	661,692.
2	
3	
4	

Part IX-B Summary of Program-Related Investments

Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2.	Amount
1 N/A	
2	
All other program-related investments. See instructions.	
3	

Total. Add lines 1 through 3 0.

Part X Minimum Investment Return (All domestic foundations must complete this part. Foreign foundations, see instructions.)

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	0.
b	Average of monthly cash balances	1b	1,275,183.
c	Fair market value of all other assets	1c	
d	Total (add lines 1a, b, and c)	1d	1,275,183.
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	1,275,183.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions)	4	19,128.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	1,256,055.
6	Minimum investment return. Enter 5% of line 5	6	62,803.

Part XI Distributable Amount (see 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	62,803.
2a	Tax on investment income for 2018 from Part VI, line 5	2a	
b	Income tax for 2018. (This does not include the tax from Part VI.)	2b	
c	Add lines 2a and 2b	2c	0.
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	62,803.
4	Recoveries of amounts treated as qualifying distributions	4	0.
5	Add lines 3 and 4	5	62,803.
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	62,803.

Part XII Qualifying Distributions (see 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	635,394.
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:		
a	Suitability test (prior IRS approval required)	3a	
b	Cash distribution test (attach the required schedule)	3b	
4	Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8; and Part XIII, line 4	4	635,394.
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	635,394.

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 instructions)

	(a) Corpus	(b) Years prior to 2017	(c) 2017	(d) 2018
1 Distributable amount for 2018 from Part XI, line 7				62,803.
2 Undistributed income, if any, as of the end of 2018:				
a Enter amount for 2017 only			0.	
b Total for prior years:		0.		
3 Excess distributions carryover, if any, to 2018:				
a From 2013				
b From 2014				
c From 2015	198,290.			
d From 2016	341,942.			
e From 2017	289,961.			
f Total of lines 3a through e	830,193.			
4 Qualifying distributions for 2018 from Part XII, line 4: ▶ \$	635,394.			
a Applied to 2017, 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 2018 distributable amount				62,803.
e Remaining amount distributed out of corpus	572,591.			
5 Excess distributions carryover applied to 2018 (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:				
a Corpus. Add lines 3f, 4c, and 4e. Subtract line 5	1,402,784.			
b Prior years' undistributed income. Subtract 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 assessed		0.		
d Subtract line 6c from line 6b. Taxable amount - see instructions		0.		
e Undistributed income for 2017. Subtract line 4a from line 2a. Taxable amount - see instr.			0.	
f Undistributed income for 2018. Subtract lines 4d and 5 from line 1. This amount must be distributed in 2019				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 2013 not applied on line 5 or line 7	0.			
9 Excess distributions carryover to 2019. Subtract lines 7 and 8 from line 6a	1,402,784.			
10 Analysis of line 9:				
a Excess from 2014				
b Excess from 2015	198,290.			
c Excess from 2016	341,942.			
d Excess from 2017	289,961.			
e Excess from 2018	572,591.			

Part XIV Private Operating Foundations (see instructions and Part VII-A, question 9) N/A

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 2018, enter the date of the ruling ▶

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

	Tax year				(e) Total
	(a) 2018	(b) 2017	(c) 2016	(d) 2015	
2 a Enter the lesser of the adjusted net income from Part I or the minimum investment return from Part X for 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					
e Qualifying distributions made directly for active conduct of exempt activities. Subtract line 2d from line 2c					
3 Complete 3a, b, or c for the alternative test relied upon:					
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)					
(3) Largest amount of support from an exempt organization					
(4) Gross investment income					

Part XV Supplementary Information (Complete this part only if the foundation had \$5,000 or more in assets at any time during the year-see 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 foundation only makes contributions to preselected charitable organizations and does not accept unsolicited requests for funds. If the foundation makes gifts, grants, etc., to individuals or organizations under other conditions, complete items 2a, b, c, and d.

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

SEE STATEMENT 8

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

c Any submission deadlines:

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

Part XV Supplementary Information (continued)

3 Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	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
Name and address (home or business)				
a Paid during the year				
A TRIBUTE TO VETERANS OF ADAMS COUNTY, INC PO BOX 404 FRIENDSHIP, WI 53934-0404	N/A	NC	DONATION TO VETERAN'S MEMORIAL	4,000.
AHERO 775 OLD MONTGOMERY HWY SHORTER, AL 36075-3764	N/A	PC	DONATION FROM ALABAMA BOOT CAMPS	16,000.
AMERICAN LEGION POST 742 1557 YORBA ST CORONA, CA 92882-1723	N/A	NC	DONATION MEMORIAL MILE MARCH	3,000.
ANGEL VAZQUEZ 4301 S VALLEY VIEW BLVD STE 2 LAS VEGAS, NV 89103-4007	N/A	I	CANCER TREATMENT IN MEXICO	15,000.
BRIAN VALLANDINGHAM 158 VILLA DR WALTON, KY 41094-9333	N/A	I	CAMERA SYSTEM	1,195.
Total	SEE CONTINUATION SHEET(S)			524,303.
b Approved for future payment				
CHRIS BARNSON 8918 107TH ST SW LAKEWOOD, WA 98498-3706	N/A	I	FAMILY GRANT	6,000.
CUSTOM CANINES 6610 FIELDWOOD RD MADISON, WI 53718-1821	N/A	PC	CUSTOM CANINES/SIMMELINK	15,000.
DANIELLE FIGUEROA 4512 36TH ST S APT B2 ARLINGTON, VA 22206-1866	N/A	I	FINANCIAL ASSISTANCE	15,000.
Total	SEE CONTINUATION SHEET(S)			138,178.

Part XVI-A Analysis of Income-Producing Activities

Enter gross amounts unless otherwise indicated.

Table with 5 main columns: (a) Business code, (b) Amount, (c) Exclusion code, (d) Amount, (e) Related or exempt function income. Rows include: 1 Program service revenue (a-f), 2 Membership dues and assessments, 3 Interest on savings and temporary cash investments (14, 5,668), 4 Dividends and interest from securities, 5 Net rental income or (loss) from real estate (a-b), 6 Net rental income or (loss) from personal property, 7 Other investment income, 8 Gain or (loss) from sales of assets other than inventory, 9 Net income or (loss) from special events, 10 Gross profit or (loss) from sales of inventory, 11 Other revenue (a-e), 12 Subtotal (0, 5,668, 0), 13 Total (5,668).

(See worksheet in line 13 instructions to verify calculations.)

Part XVI-B Relationship of Activities to the Accomplishment of Exempt Purposes

Table with 2 columns: Line No., Explain below how each activity for which income is reported in column (e) of Part XVI-A contributed importantly to the accomplishment of the foundation's exempt purposes (other than by providing funds for such purposes).

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

		Yes	No
1 Did the organization directly or indirectly engage in any of the following with any other organization described in section 501(c) (other than section 501(c)(3) organizations) or in section 527, relating to political organizations?			
a Transfers from the reporting foundation to a noncharitable exempt organization of:			
(1)	Cash		X
(2)	Other assets		X
b Other transactions:			
(1)	Sales of assets to a noncharitable exempt organization		X
(2)	Purchases of assets from a noncharitable exempt organization		X
(3)	Rental of facilities, equipment, or other assets		X
(4)	Reimbursement arrangements		X
(5)	Loans or loan guarantees		X
(6)	Performance of services or membership or fundraising solicitations		X
c Sharing of facilities, equipment, mailing lists, other assets, or paid employees			X
d If the answer to any of the above is "Yes," complete the following schedule. Column (b) should always show the fair market value of the goods, other assets, or services given by the reporting foundation. If the foundation received less than fair market value in any transaction or sharing arrangement, show in column (d) the value of the goods, other assets, or services received.			

(a) Line no.	(b) Amount involved	(c) Name of noncharitable exempt organization	(d) Description of transfers, transactions, and sharing arrangements
		N/A	

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

b If "Yes," complete the following schedule.

(a) Name of organization	(b) Type of organization	(c) Description of relationship
N/A		

Sign Here 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) is based on all information of which preparer has any knowledge.

Signature of officer or trustee: _____ Date: _____ Title: **BOARD MEMBER**

May the IRS discuss this return with the preparer shown below? See instr. Yes No

Paid Preparer Use Only	Print/Type preparer's name	Preparer's signature	Date	Check <input type="checkbox"/> if self-employed	PTIN
	GLENN MILLER, CPA				P00086726
	Firm's name ▶ WEGNER CPAS, LLP	Firm's address ▶ 2921 LANDMARK PL STE 300 MADISON, WI 53713-4236		Firm's EIN ▶ 39-0974031	Phone no. 608-274-4020

Part XV Supplementary Information

3 Grants and Contributions Paid During the Year (Continuation)

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
CHANCE RUFFINO 1500 ALLISON ST BRENHAM, TX 77833-5957	N/A	I	HOTEL EXPENSES	620.
CHRIS CHAPUT 828 AIKEN AVE PERRYVILLE, MD 21903-2738	N/A	I	FINANCIAL ASSISTANCE	2,000.
CONNIE BABINEAUX 306 W LAFAYETTE ST ABBEVILLE, LA 70510-4626	N/A	I	FINANCIAL SUPPORT TO HELP WITH SON'S FUNERAL COST (VETERAN)	5,500.
CORONA CHAMBER FOUNDATION 904 E 6TH ST CORONA, CA 92879-1612	N/A	PC	HONORING VETERANS BREAKFAST	5,000.
CRAIG WALLACE 562 NE LARCH AVE REDMOND, OR 97756-7675	N/A	I	FINANCIAL ASSISTANCE	4,571.
CUSTOM CANINES 6610 FIELDWOOD RD MADISON, WI 53718-1821	N/A	PC	CUSTOM CANINES/MM AND MADISON/LAS VEGAS	65,450.
CUSTOM CANINES 6610 FIELDWOOD RD MADISON, WI 53718-1821	N/A	PC	CUSTOM CANINES/PHILADELPHIA/LO GALA	30,000.
CUSTOM CANINES 6610 FIELDWOOD RD MADISON, WI 53718-1821	N/A	PC	CUSTOM CANINES/JAMINSON SWEET ST LOUIS	15,000.
CUSTOM CANINES 6610 FIELDWOOD RD MADISON, WI 53718-1821	N/A	PC	CUSTOM CANINES/ JOSHUA WEBSTER FEB 21	10,000.
CUSTOM CANINES 6610 FIELDWOOD RD MADISON, WI 53718-1821	N/A	PC	CUSTOM CANINES/ QUINCY KASPER FEB 22	10,000.
Total from continuation sheets				485,108.

Part XV Supplementary Information

3 Grants and Contributions Paid During the Year (Continuation)

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
CUSTOM CANINES 6610 FIELDWOOD RD MADISON, WI 53718-1821	N/A	PC	CUSTOM CANINES/ SEAN DALTON MARCH 7	10,000.
CUSTOM CANINES 6610 FIELDWOOD RD MADISON, WI 53718-1821	N/A	PC	CUSTOM CANINES/DOUG LEWIS MARCH 8	10,000.
CUSTOM CANINES 6610 FIELDWOOD RD MADISON, WI 53718-1821	N/A	PC	CUSTOM CANINES/DERRICK BROOKS/PAULETTE GEORGE	6,500.
CUSTOM CANINES 6610 FIELDWOOD RD MADISON, WI 53718-1821	N/A	PC	CUSTOM CANINES/MARK DUNN TRAINING	2,600.
DARBY'S WARRIOR SUPPORT 110 S MAIN ST STE C SEARCY, AR 72143-5426	N/A	PC	DONATION FROM ARKANSAS BOOT CAMP	10,000.
DENNIS DAVIS 16755 XYLITE ST NE ANDOVER, MN 55304-5026	N/A	I	FINANCIAL ASSISTANCE	3,495.
DOUG REYNOLDS 10541 WASHINGTON BLVD INDIANAPOLIS, IN 46280-1369	N/A	I	HOME REPAIRS	15,000.
EJ FOGEL 7893 BRENTWOOD BLVD BRENTWOOD, CA 94513-1056	N/A	I	LIFT CHAIR/INSTALLATION	2,433.
FOREST LAWN EAST CEMETARY 3700 FOREST LAWN DR MATTHEWS, NC 28104-7366	N/A	NC	WREATHS ACROSS AMERICA	2,500.
FRANCIS LOUIE DE LA CRUZ 4103 GEDROCK COURT ALEXANDRIA, VA 22306	N/A	I	FINANCIAL ASSISTANCE	15,000.
Total from continuation sheets				

Part XV Supplementary Information

3 Grants and Contributions Paid During the Year (Continuation)

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
GREENFIELD VETERANS HONOR GUARD 1104 GRAYSON DR GREENFIELD, IN 46140-2809	N/A	PC	DONATION TO COLOR GUARD - INDIANAPOLIS BOOT CAMOP	200.
HONOR FLIGHT OF SOUTHERN COLORADO PO BOX 50816 COLORADO SPRINGS, CO 80949-0816	N/A	PC	HONOR FLIGHT DONATION	5,000.
JEREMY CARTER 101 ANNIE RD RICHLANDS, NC 28574-8327	N/A	I	CAR RENTAL TO SEE DAUGHTER GRADUATE	866.
JEREMY WALSH 6550 W 96TH AVE WESTMINSTER, CO 80021-6432	N/A	I	MORTGAGE PAYMENT ASSISTANCE	5,253.
JERRY BLEVINS 2621 E 26TH ST MUNCIE, IN 47302-5548	N/A	I	BRANCH 530 NO EVENT FINANCIAL ASSISTANCE	8,026.
JOSH ABATOYE 15450 FM 439 KILLEEN, TX 76543-8016	N/A	I	TEMPLE BOOT CAMP - BOAT	13,612.
KEVIN JENSEN 27507 ROCK ISLAND RD HEMPSTEAD, TX 77445-8853	N/A	I	BRYAN, TX BOOT CAMP	21,000.
MADISON CAPITOLS HOCKEY USHL 2616 PLEASANT VIEW RD MIDDLETON, WI 53562-4805	N/A	NC	SEATS FOR SOLDIERS	500.
MAVERICKS CONTRUCTION & REPAIR 4419 CENTENNIAL BLVD # 262 COLORADO SPRINGS, CO 80907-3739	N/A	NC	AFA UNIVERSITY TRAINING FOR VET	3,883.
NATIONAL ABILITY CENTER 1000 ABILITY WAY PARK CITY, UT 84060-7464	N/A	PC	DONATION FROM PARK CITY BOOT CAMP	15,000.
Total from continuation sheets				

Part XV Supplementary Information**3 Grants and Contributions Paid During the Year (Continuation)**

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
NEADS 305 REDEMPTION ROCK TRL S PRINCETON, MA 01541-1211	N/A	PC	CORNHOLE TOURNAMENT PROCEEDS	3,704.
NEXT STEP SERVICE DOGS 921 S ANDREASEN DR ESCONDIDO, CA 92029-1934	N/A	PC	DONATION	20,000.
NORTHWEST BATTLE BUDDIES PO BOX 2511 BATTLE GROUND, WA 98604-2511	N/A	PC	SERVICE DOG FOR STEVE CEDDIA	20,000.
OPERATION DELTA DOG 19G CLINTON DR HOLLIS, NH 03049-6595	N/A	NC	SERVICE DOGS	20,000.
OPERATION K9 3770 PATTYS WAY SPRING BRANCH, TX 78070-6399	N/A	PC	OPERATION K9 FOR THOMAS BRINCH	10,000.
PARKER ORMSBY 5020 CROMWELL DR APT 634 KYLE, TX 78640-6548	N/A	I	HELP WITH PAYMENT OF BILLS	10,000.
PAUL LA CHANCE 501 RIVERVIEW DR GRAND JUNCTION, CO 81507-1413	N/A	I	RACE EXPENSES	433.
PHILLIP BLACKMON 6018 SHATTUCK DR GARLAND, TX 75044-3752	N/A	I	HOUSTON BOOT CAMP FINANCIAL ASSISTANCE	20,000.
PROJECT VETERANS PRIDE 4106 N 22ND ST PHOENIX, AZ 85016-6168	N/A	PC	DONATION CHRISTEEN VERCHOT-VET	10,000.
RACHEL HARRIS 1807 W BEVERLEY ST STAUNTON, VA 24401-2913	N/A	I	RENT ASSISTANCE	1,500.
Total from continuation sheets				

Part XV Supplementary Information

3 Grants and Contributions Paid During the Year (Continuation)

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
RICHARD HOPKINS 397 DUG LECKIE CUT OFF POLLOCK, LA 71467	N/A	I	FINANCIAL ASSISTANCE TORNADO	5,000.
RUSS MAYO 5124 PEACHTREE RD APT 121 CHAMBLEE, GA 30341-3016	N/A	I	NO EVENT FINANCIAL ASSISTANCE	2,000.
SALVATION ARMY 5600 RICKENBACKER RD BLDG 2AB BELL, CA 90201-6694	N/A	PC	DONATION HOMELESS VETERANS CHRISTMAS DINNER	3,500.
SAM HOOD 213 S WALKUP AVE CRYSTAL LAKE, IL 60014-6132	N/A	I	FINANCIAL ASSISTANCE	5,000.
SERVICE DOGS FOR AMERICA 920 SHORT ST JUD, ND 58454-4021	N/A	PC	NORTH DAKOTA SVC DOG	10,000.
SHANNON BECKER 6788 PRAIRIE VIEW DR SUN PRAIRIE, WI 53590-9425	N/A	I	FINANCIAL ASSISTANCE	9,785.
UNIVERSITY OF DELAWARE 631 S COLLEGE AVE NEWARK, DE 19716-2010	N/A	GOV	SEATS FOR SOLDIERS	500.
VA LOMA LINDA 11201 BENTON ST LOMA LINDA, CA 92357-1000	N/A	PC	DONATION FROM CORONA LTW 5K	3,500.
VERNON PARISH CHAMBER OF COMMERCE PO BOX 1228 LEESVILLE, LA 71496-1228	N/A	PC	WELCOME HOME SPONSOR	2,500.
VETERANS NONPROFIT 4317 DYER ST EL PASO, TX 79930-6732	N/A	PC	DONATION EL PASO BOOT CAMP	7,500.
Total from continuation sheets				

Part XV Supplementary Information

3 Grants and Contributions Paid During the Year (Continuation)

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
VETERANS WORKSHOP 4317 DYER ST EL PASO, TX 79930-6732	N/A	PC	PROJECT WELCOME HOME TROOPS	1,000.
VFW POST 7591 301 COTTAGE GROVE RD MADISON, WI 53716-1107	N/A	PC	DONATION FOR COLOR GUARD MADISON GALA	500.
VIETNAM VETS CHAPTER 635 OCONOMOWOC N50W35206 WISCONSIN AVE OCONOMOWOC, WI 53066-3342	N/A	PC	DONATION - COLOR GUARD PEWAUKEE BOOT CAMP	250.
WALTER DAVIS 5708 FLINSTONE DR WESTERVILLE, OH 43081	N/A	I	FINANCIAL ASSISTANCE	582.
WILL STORCH 801 FREEMONT ST E STE 2 WATERVILLE, MN 56096-1571	N/A	I	SAKATAH CHALLENGE SCHOLARSHIP	1,000.
ZACHARY HERRICK 11903 DAISY LN FREDERICKSBURG, VA 22407-8513	N/A	I	NEW CAR	17,845.
Total from continuation sheets				

Part XV Supplementary Information

3 Grants and Contributions Approved for Future Payment (Continuation)

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
DAVID KELLEY 2711 158TH ST E TACOMA, WA 98445-4547	N/A	I	FINANCIAL ASSISTANCE	6,000.
DERRICK BARTLETT 368 MARTIN ST SE ATLANTA, GA 30312-2029	N/A	I	FORD F150 PICKUP	21,178.
DERRICK BROOKS 1401 3RD AVE SE AUSTIN, MN 55912	N/A	I	FINANCIAL ASSISTANCE	7,500.
GUARDIAN SERVICE DOGS 1228 ROYALE DR COLORADO SPRINGS, CO 80910-2020	N/A	PC	4 SERVICE DOG TRAININGS	40,000.
JAMES CURRAN 9 RYANS WAY WEYMOUTH, MA 02190-1000	N/A	I	FAMILY GRANT	5,000.
JOSEPH AND HEATHER ZUJKOWSKI 7910 BENNETT BRANCH RD MOUNT AIRY, MD 21771-4228	N/A	I	FAMILY GRANT	12,000.
PAUL ADAMS 1361 SHERIDAN DR OGDEN, UT 84404-4664	N/A	I	FAMILY GRANT - SON HAS AUTISM	10,500.
Total from continuation sheets				102,178.

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

2018

Name of the organization

AMERICAN WARRIOR INITIATIVE, INC.

Employer identification number

47-3566126

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 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.

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, 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 AMERICAN WARRIOR INITIATIVE, INC.	Employer identification number 47-3566126
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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	PATTERSON SCHWARTZ FOUNDATION 7234 LANCASTER PIKE STE 300B HOCKESSIN, DE 19707-9273	\$ 12,500.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
2	FAIRWAY INDEPENDENT MORTGAGE BRANCH 885 37156 REHOBOTH AVENUE EXT UNIT 1 REHOBOTH BEACH, DE 19971-3104	\$ 12,500.	Person <input type="checkbox"/> Payroll <input checked="" type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
3	FAIRWAY INDEPENDENT MORTGAGE BRANCH 245 801 ESTELLE DR FL 1 LANCASTER, PA 17601-2136	\$ 6,000.	Person <input type="checkbox"/> Payroll <input checked="" type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
4	FAIRWAY INDEPENDENT MORTGAGE BRANCH 365 3923 S GENERAL BRUCE DR TEMPLE, TX 76502-1026	\$ 19,500.	Person <input type="checkbox"/> Payroll <input checked="" type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
5	FAIRWAY INDEPENDENT MORTGAGE BRANCH 530 104 E TEXAS ST LEESVILLE, LA 71446-4054	\$ 15,000.	Person <input type="checkbox"/> Payroll <input checked="" type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
6	FAIRWAY INDEPENDENT MORTGAGE BRANCH 545 300 CONSTITUTION AVE UNIT 203 PORTSMOUTH, NH 03801-8610	\$ 5,750.	Person <input type="checkbox"/> Payroll <input checked="" type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)

Name of organization AMERICAN WARRIOR INITIATIVE, INC.	Employer identification number 47-3566126
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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
7	FAIRWAY INDEPENDENT MORTGAGE BRANCH 691 8200 HAVERSTICK RD STE 255 INDIANAPOLIS, IN 46240-4333	\$ 6,000.	Person <input type="checkbox"/> Payroll <input checked="" type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
8	FAIRWAY INDEPENDENT MORTGAGE BRANCH 715 514 S STRATFORD RD STE 240 WINSTON SALEM, NC 27103-1869	\$ 12,000.	Person <input type="checkbox"/> Payroll <input checked="" type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
9	FAIRWAY INDEPENDENT MORTGAGE BRANCH 776 525 WESTPARK DR STE 330 PEACHTREE CITY, GA 30269-1577	\$ 5,500.	Person <input type="checkbox"/> Payroll <input checked="" type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
10	FAIRWAY INDEPENDENT MORTGAGE BRANCH 975 1952 GALLOWS RD STE 212 VIENNA, VA 22182-3823	\$ 6,000.	Person <input type="checkbox"/> Payroll <input checked="" type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
11	FAIRWAY INDEPENDENT MORTGAGE BRANCH 415 8000 WARREN PKWY STE 100 FRISCO, TX 75034-2231	\$ 6,000.	Person <input type="checkbox"/> Payroll <input checked="" type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
12	FAIRWAY INDEPENDENT MORTGAGE BRANCH 875 110 MATTHEWS STATION ST STE 2D MATTHEWS, NC 28105-6716	\$ 15,570.	Person <input type="checkbox"/> Payroll <input checked="" type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)

Name of organization AMERICAN WARRIOR INITIATIVE, INC.	Employer identification number 47-3566126
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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
13	EVERBANK PO BOX 40766 JACKSONVILLE, FL 32203-0766	\$ 5,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
14	QUILICI FAMILY TRUST 5480 LAURA DR SAN JOSE, CA 95124-6121	\$ 5,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
	_____ _____ _____	\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
	_____ _____ _____	\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
	_____ _____ _____	\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
	_____ _____ _____	\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)

Name of organization AMERICAN WARRIOR INITIATIVE, INC.	Employer identification number 47-3566126
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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
		\$ _____	_____
		\$ _____	_____
		\$ _____	_____
		\$ _____	_____
		\$ _____	_____
		\$ _____	_____
		\$ _____	_____

Name of organization AMERICAN WARRIOR INITIATIVE, INC.	Employer identification number 47-3566126
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Part III Exclusively religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8), or (10) that total more than \$1,000 for the year from any one contributor. Complete columns (a) through (e) and the following line entry. For organizations completing Part III, enter the total of exclusively religious, charitable, etc., contributions of \$1,000 or less for the year. (Enter this info. once.) ▶ \$ _____
Use duplicate copies of Part III if additional space is needed.

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
(e) Transfer of gift			
Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee	
(e) Transfer of gift			
Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee	
(e) Transfer of gift			
Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee	
(e) Transfer of gift			
Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee	
(e) Transfer of gift			
Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee	

FORM 990-PF INTEREST ON SAVINGS AND TEMPORARY CASH INVESTMENTS STATEMENT 1

SOURCE	(A) REVENUE PER BOOKS	(B) NET INVESTMENT INCOME	(C) ADJUSTED NET INCOME
PARK BANK	5,668.	5,668.	
TOTAL TO PART I, LINE 3	5,668.	5,668.	

FORM 990-PF ACCOUNTING FEES STATEMENT 2

DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
ACCOUNTING	8,250.	0.		0.
TO FORM 990-PF, PG 1, LN 16B	8,250.	0.		0.

FORM 990-PF OTHER EXPENSES STATEMENT 3

DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
BANK FEES AND SERVICE CHARGES	14,971.	7,484.		0.
TO FORM 990-PF, PG 1, LN 23	14,971.	7,484.		0.

FORM 990-PF OTHER LIABILITIES STATEMENT 4

DESCRIPTION	BOY AMOUNT	EOY AMOUNT
DUE TO FAIRWAY INDEPENDENT MORTGAGE CORPORATION	0.	26,888.
TOTAL TO FORM 990-PF, PART II, LINE 22	0.	26,888.

FORM 990-PF LIST OF STATES RECEIVING COPY OF RETURN STATEMENT 5

STATES

AL, AK, AR, CA, CO, CT, DC, FL, GA, HI, IL, KS, ME, MD, MA, MI, MN, MO, MS, MO, NV, NH, NJ, NM, NY
 NC, ND, OH, OK, OR, PA, RI, SC, TN, UT, VA, WA, WV, WI

FORM 990-PF PART VIII - LIST OF OFFICERS, DIRECTORS TRUSTEES AND FOUNDATION MANAGERS STATEMENT 6

NAME AND ADDRESS	TITLE AND AVRG HRS/WK	COMPEN- SATION	EMPLOYEE BEN PLAN CONTRIB	EXPENSE ACCOUNT
STEVEN JACOBSON 4750 S BILTMORE LANE MADISON, WI 53718-2108	DIRECTOR 1.00	0.	0.	0.
LEONARD KRUPINSKI 4750 S BILTMORE LANE MADISON, WI 53718-2108	DIRECTOR 1.00	0.	0.	0.
TODD GAVINSKI 4750 S BILTMORE LANE MADISON, WI 53718-2108	DIRECTOR 1.00	0.	0.	0.
SEAN PARNELL 4750 S BILTMORE LANE MADISON, WI 53718-2108	DIRECTOR 1.00	0.	0.	0.
LOUISE THAXTON 4750 S BILTMORE LANE MADISON, WI 53718-2108	DIRECTOR 1.00	0.	0.	0.
TOTALS INCLUDED ON 990-PF, PAGE 6, PART VIII		0.	0.	0.

FORM 990-PF

SUMMARY OF DIRECT CHARITABLE ACTIVITIES

STATEMENT 7

ACTIVITY ONE

THE AMERICAN WARRIOR INITIATIVE HAS REACHED OVER 25,000 REAL ESTATE AGENTS AROUND THE COUNTRY AT THE AMERICAN WARRIOR REAL ESTATE PROFESSIONAL (AWREP) BOOT CAMPS, BRINGING AWARENESS TO THE CHALLENGES FACING MEN AND WOMEN WHO HAVE SERVED IN THE MILITARY WHEN RETURNING FROM WAR. IN 2018, AWI LAUNCHED FREEDOM TOURS WITH GOLD STAR MOM KAREN VAUGHN. FROM HER UNIQUE PERSPECTIVE--AS A MOM WHOSE SON WAS KILLED IN ACTION IN AFGHANISTAN--KAREN SHARES A POWERFUL MESSAGE ON OUR OBLIGATION AS EVERYDAY CITIZENS TO HONOR THE SACRIFICE OF THOSE WHO'VE GIVEN SO MUCH FOR OUR FREEDOM. AWI HAS SPEARHEADED MORE THAN 100 GIVE-BACK INITIATIVES TO THE WOUNDED HEROES OF AMERICA. THESE WOUNDED HEROES HAVE BEEN SERVED THROUGH MORTGAGE-FREE HOUSING, BUSINESS GRANTS, HOME UPGRADES, SERVICE DOGS, AND MORE.

EXPENSES

TO FORM 990-PF, PART IX-A, LINE 1

661,692.

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

Department of the Treasury
Internal Revenue Service

▶ **File a separate application for each return.**
▶ **Go to www.irs.gov/Form8868 for the latest information.**

Electronic filing (e-file). You can electronically file Form 8868 to request a 6-month automatic extension of time to file any of the forms listed below with the exception of Form 8870, Information Return for Transfers Associated With Certain Personal Benefit Contracts, for which an extension request must be sent to the IRS in paper format (see instructions). For more details on the electronic filing of this form, visit www.irs.gov/e-file-providers/e-file-for-charities-and-non-profits.

Automatic 6-Month Extension of Time. Only submit original (no copies needed).

All corporations required to file an income tax return other than Form 990-T (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request an extension of time to file income tax returns.

	Enter filer's identifying number	
Type or print	Name of exempt organization or other filer, see instructions. AMERICAN WARRIOR INITIATIVE, INC.	Employer identification number (EIN) or 47-3566126
File by the due date for filing your return. See instructions.	Number, street, and room or suite no. If a P.O. box, see instructions. 4750 S BILTMORE LN	Social security number (SSN)
	City, town or post office, state, and ZIP code. For a foreign address, see instructions. MADISON, WI 53718	

Enter the Return Code for the return that this application is for (file a separate application for each return) 0 | 4

Application Is For	Return Code	Application Is For	Return Code
Form 990 or Form 990-EZ	01	Form 990-T (corporation)	07
Form 990-BL	02	Form 1041-A	08
Form 4720 (individual)	03	Form 4720 (other than individual)	09
Form 990-PF	04	Form 5227	10
Form 990-T (sec. 401(a) or 408(a) trust)	05	Form 6069	11
Form 990-T (trust other than above)	06	Form 8870	12

TODD GAVINSKI

- The books are in the care of ▶ **4750 S BILTMORE LN - MADISON, WI 53718**
Telephone No. ▶ **(608) 571-0508** 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 is for.

1 I request an automatic 6-month extension of time until **NOVEMBER 15, 2019**, to file the exempt organization return for the organization named above. The extension is for the organization's return for:
▶ calendar year **2018** or
▶ tax year beginning _____, and ending _____.

2 If the tax year entered in line 1 is for less than 12 months, check reason: Initial return Final return
 Change in accounting period

3a If this application is for Forms 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions.	3a	\$	0.
b If this application is for Forms 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit.	3b	\$	0.
c Balance due. Subtract line 3b from line 3a. Include your payment with this form, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions.	3c	\$	0.

Caution: If you are going to make an electronic funds withdrawal (direct debit) with this Form 8868, see Form 8453-EO and Form 8879-EO for payment instructions.