# TAX RETURN FILING INSTRUCTIONS

Wisconsin Form 1952

#### FOR THE YEAR ENDING

December 31, 2023

**Prepared For:** 

South Central Library System Foundation 1650 Pankratz St. Madison, WI 53704

**Prepared By:** 

Baker Tilly US, LLP 790 N. Water Street, Suite 2000 Milwaukee, WI 53202

**Amount Due or Refund:** 

Not applicable.

Make Check Payable To:

Not applicable.

Mail Tax Return and Check (if applicable) To:

Wisconsin Department of Financial Institutions Division of Corporate and Consumer Services PO Box 7879 Madison, WI 53707-7879

Return Must be Mailed On or Before:

December 31, 2024

**Special Instructions:** 

The return should be signed and dated by two authorized officers, one of which must be the Chief Fiscal Officer.

We recommend mailing via certified mail and requesting return receipt.



## #1952

# FINANCIAL REPORT

# Email: DFICharitableOrgs@dfi.wisconsin.gov Mailing Address: PO Box 7879 Madison, WI 53707-7879

ORGANIZA	ATION INFORMAT	ΓΙΟΝ - SECTI	ON A		
Name of charitable organization and a uses.	any trade names or	DBA (doing b	usiness as)	names the or	ganization
South Central Library	System Fou	undation	, Inc.		
2. WI Charitable Organization Number:	943	1		- 800	
3. Federal Employer Identification Num	iber:	39-202085	56		
4. Provide the name and contact information	ation of the individu	ual the Departr	ment should	1 contact abo	ut this form
First Name: Shannon	Last Name: Schultz				
Street Address: 1650 Pankratz St.	City: Madison		Stat WI	te:	
Zip Code: Phone: 53704 608-246-7975	Email: sschultz@scls.ir	nfo			
5. Did your organization use a professio counsel during the fiscal year in Wis		indraising	Ye	es  No	
If <b>YES</b> , provide contact information for pages, if necessary.	each fundraiser(s), fu	nd raising couns	sel(s), or per	rson. Attach ac	lditional
Name:		Fundraiser:	Fundraisin	g Counsel:	
Street Address:	City:	<u> </u>	Sta	te:	
Zip: Telephone Number: Does th time:	is fundraiser/fundraising cou	insel/person have cus	tody of contribu	tions at any	
6. Has any of the information your orgathe division changed? (i.e. name of the principal office, address of any Wisconsi articles, by-laws, etc.)  If YES, attach an explanation and a copy of	organization, addres in branch officers, acc	s of the counting period,		es No	

# FINANCIAL INFORMATION - SECTION B

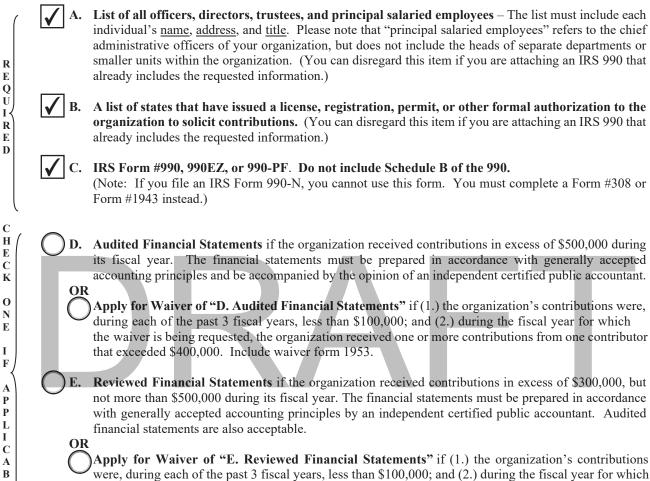
7. Organization's Fiscal Year End Date (month, day, and year). Enter the accounting period for the following financial information.

illili - dd - yyyy	12	mm	31	dd	2023	уууу
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1.	Contributions	1	13,768
	<ul> <li>("Contribution" means a grant or pledge of money, credit, property, or other thing of any kind or value, except used clothing or household goods, to a charitable organization or for a charitable purpose. Bequests received directly from the public and indirect public support, such as contributions received through solicitation campaigns conducted by federated fundraising agencies like United Way should be included in this amount. "Contribution" does not include: <ul> <li>Income from bingo or raffles conducted under ch. 563, Wis. Stats.</li> <li>Government grants</li> <li>Bona fide fees, dues, or assessments paid by a member of a charitable organization, except that, if initial membership in a charitable organization is conferred solely as consideration for making a grant or pledge of money to the charitable organization in response to a solicitation, that grant or pledge of money is a contribution.)</li> </ul> </li></ul>		
2.	Other Revenues	2	5,131
3.	Total Revenue (line 1 plus line 2)	3	18,899
4.	Expenses:  a. Expenses Allocated to Program Services		
	e. Total Expenses	4e	7,550
5.	Excess or Deficit (line 3 minus line 4e)	5	11,349
6.	Net Assets at Beginning of Year	6	214,137
7.	Other Changes in Net Assets or Fund Balances (See 990, part XI)	7	30,392
8.	Net Assets at End of Year	8	255878

#### **ATTACHMENTS**

Check the box next to the items that are attached to your annual report. Items A., B., and C. are required. Item D. or E. (or Waiver Application of D. or E.) is required if the contributions received by your organization fall into the described ranges. (Note: If you are submitting this form with your initial application, DO NOT submit the following attachments. Submit the attachments cited in the application form instead).



the waiver is being requested, the organization received one or more contributions from one

contributor that exceeded \$200,000. Include waiver form 1953.

E Q U I R E

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#### **CERTIFICATION - SECTION C**

This document MUST be signed by the chief fiscal officer and another officer. Two <u>different</u> officer signatures required. Completion of this form is required under Section 202.12, Wisconsin Statutes.

We, the undersigned, state and acknowledge that we are duly constituted officers of this organization, and that, under penalties of perjury, we have reviewed this report, including all attachments, and to the best of our knowledge and belief, they are true, correct and complete in accordance with the laws of the State of Wisconsin applicable to this report.

Signature of Officer		
5		
Date		
	AND	
Name (Print)	<del>/ / \</del>	
Signature of Chief Fiscal Officer		
Signature of Chief Fiscal Officer		

#### **RETURN MATERIALS TO:**

Department of Financial Institutions
Division of Corporate and Consumer Services

Mailing Address: WDFI/ Charitable Orgs Section PO Box 7879 Madison, Wisconsin 53707-7879

E-Mail: DFICharitableOrgs@dfi.wisconsin.gov

This form is required under Section 202.12, Wisconsin Statutes. Refusal to provide this information may result in the denial of this registration application. Personally identifiable information on this form may be matched against tax information, outstanding child and family support data and law enforcement agencies. Failure to complete this application completely and accurately may result in denial or revocation of registration, and any other penalties as provided by law.

This document can be made available in alternate formats upon request to qualifying individuals with disabilities.

Print Clear

## South Central Library System Foundation, Inc.

FEIN: 39-2020856 WI Charitable Organization No. 9431-800 WI Form 1952 Supplemental Attachments

Page 1, Line 6 – change of information previously submitted to the division:

The Foundation changed address and the current address is as follows:

South Central Library System Foundation 1650 Pankratz Street Madison, WI 53704

#### South Central Library System Foundation, Inc.

FEIN: 39-2020856 WI Charitable Organization No. 9431-800 WI Form 1952

Supplemental Attachments

Page 4, Line A – List of officers and directors

#### **SCLS Foundation 2023 Board of Directors**

#### Officers

Theresa Walske, President PO Box 7574 Madison, WI 53707 lindntm@hotmail.com

Martha Van Pelt, Secretary 2329 Hidden Meadows Drive Sun Prairie, WI 53590 608-318-1580 Home mvanpelt@scls.info

Jessica Sayer 504G Eagle Heights Dr. Madison, WI 53705 920-495-6188 j.a.m.sayer@gmail.com

Janet Pugh 5021 Tomahawk Trail Madison, WI 53705 608-233-2139 Home janet.pugh@charter.net

Radha Sijapati 408 Midland Lane Monona, WI 53716 608-222-0646 Home 608-640-9762 Cell-preferred rsijapat@gmail.com

Amanda Wakeman Director, Jane Morgan Memorial Library, Cambria awakeman@jmml.org

Gary Poulson 637 Charles Lane Madison, WI 53711 608-698-0914 garypoulson@gmail.com Peter Kaland, Vice President 551 Harrison St. Columbus, WI 53925 pjkaland@charter.net

Mike Furgal, Treasurer 1411 14th Ave. Monroe, WI 53566 (608) 325-2670 gunner@wekz.net