

Form **990-EZ**

Short Form
Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except black lung benefit trust or private foundation)

► For organizations with gross receipts less than \$100,000 and total assets less than \$250,000 at the end of the year

► The organization may have to use a copy of this return to satisfy state reporting requirements

Department of the Treasury
Internal Revenue Service



A For the 2004 calendar year

- B Check if applicable:
 Address change
 Name change
 Initial return
 Final return
 Amended return
 Application pending



79671 *****AUTO**3-DIGIT 530
WORKBOUND INC
PO BOX 386
SHEBOYGAN WI 53082-0386

P168 R
B 38 S

D Employer identification number
39 : 1713299
E Telephone number
(920) 459-2400
F Group Exemption Number

• Section 501(c)(3) organizations and 4947(a)(1) nonexempt charitable trusts must attach a completed Schedule A (Form 990 or 990-EZ).

G Accounting method Cash Accrual
Other (specify) ►

I Website: ► **www.workbound.org**

H Check if the organization is not required to attach Schedule B (Form 990, 990-EZ, or 990-PF).

J Organization type (check only one) — 501(c) (3) ◀ (insert no) 4947(a)(1) or 527

K Check if the organization's gross receipts are normally not more than \$25,000. The organization need not file a return with the IRS, but if the organization received a Form 990 Package in the mail, it should file a return without financial data. Some states require a complete return.

L Add lines 5b, 6b, and 7b, to line 9 to determine gross receipts, if \$100,000 or more, file Form 990 instead of Form 990-EZ ► \$ **52600**

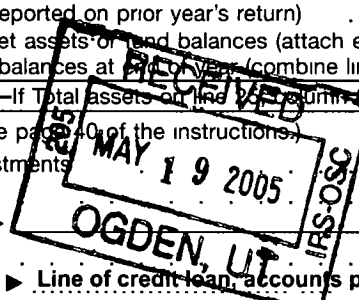
Part I Revenue, Expenses, and Changes in Net Assets or Fund Balances (See page 37 of the instructions.)

	1	2	3	4	5a	5b	5c	6a	6b	6c	7a	7b	7c	8	9	10	11	12	13	14	15	16	17	18	19	20	21	
Revenue	1 Contributions, gifts, grants, and similar amounts received	2 Program service revenue including government fees and contracts	3 Membership dues and assessments	4 Investment income	5a Gross amount from sale of assets other than inventory	5b Less: cost or other basis and sales expenses	5c Gain or (loss) from sale of assets other than inventory (line 5a less line 5b) (attach schedule).	6 Special events and activities (attach schedule). If any amount is from gaming, check here	6a Gross revenue (not including \$ of contributions reported on line 1)	6b Less: direct expenses other than fundraising expenses	6c Net income or (loss) from special events and activities (line 6a less line 6b)	7a Gross sales of inventory, less returns and allowances	7b Less: cost of goods sold	7c Gross profit or (loss) from sales of inventory (line 7a less line 7b)	8 Other revenue (describe)	9 Total revenue (add lines 1, 2, 3, 4, 5c, 6c, 7c, and 8)	10 Grants and similar amounts paid (attach schedule)	11 Benefits paid to or for members	12 Salaries, other compensation, and employee benefits	13 Professional fees and other payments to independent contractors	14 Occupancy, rent, utilities, and maintenance	15 Printing, publications, postage, and shipping	16 Other expenses (describe office, travel, interest, & misc expenses)	17 Total expenses (add lines 10 through 16)	18 Excess or (deficit) for the year (line 9 less line 17)	19 Net assets or fund balances at beginning of year (from line 27, column (A)) (must agree with end-of-year figure reported on prior year's return)	20 Other changes in net assets or fund balances (attach explanation)	21 Net assets or fund balances at end of year (combine lines 18 through 20)
Expenses																												
Net Assets																												

Part II Balance Sheets—If total assets or fund balances (line 27, column (B)) are \$250,000 or more, file Form 990 instead of Form 990-EZ

(See page 37 of the instructions.)

	(A) Beginning of year	(B) End of year
22 Cash, savings, and investments	9634	410
23 Land and buildings	0	0
24 Other assets (describe)	0	0
25 Total assets	9634	410
26 Total liabilities (describe)	10000	5870
27 Net assets or fund balances (line 27 of column (B) must agree with line 21)	(366)	(5460)



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59

12

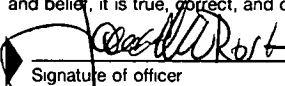
Part III Statement of Program Service Accomplishments (See page 41 of the instructions.)		Expenses (Required for 501(c)(3) and (4) organizations and 4947(a)(1) trusts, optional for others)	
What is the organization's primary exempt purpose? SEE ATTACHMENT 1			
Describe what was achieved in carrying out the organization's exempt purposes. In a clear and concise manner, describe the services provided, the number of persons benefited, or other relevant information for each program title.			
28	CAREER GUIDANCE (SEE ATTACHMENT 1)		
	(Grants \$)	28a	49270
29			
	(Grants \$)	29a	
30			
	(Grants \$)	30a	
31	Other program services (attach schedule)	(Grants \$)	31a
32	Total program service expenses (add lines 28a through 31a)	32	49270

Part IV List of Officers, Directors, Trustees, and Key Employees (List each one even if not compensated. See page 41 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 & deferred compensation	(E) Expense account and other allowances
SEE ATTACHMENT 2				

Part V Other Information (Note the attachment requirement in General Instruction V, page 14.)		Yes	No
33	Did the organization engage in any activity not previously reported to the IRS? If "Yes," attach a detailed description of each activity		✓
34	Were any changes made to the organizing or governing documents but not reported to the IRS? If "Yes," attach a conformed copy of the changes		✓
35	If the organization had income from business activities, such as those reported on lines 2, 6, and 7 (among others), but not reported on Form 990-T, attach a statement explaining your reason for not reporting the income on Form 990-T		
a	Did the organization have unrelated business gross income of \$1,000 or more or 6033(e) notice, reporting, and proxy tax requirements?		✓
b	If "Yes," has it filed a tax return on Form 990-T for this year?		✓
36	Was there a liquidation, dissolution, termination, or substantial contraction during the year? (If "Yes," attach a statement.)		✓
37a	Enter amount of political expenditures, direct or indirect, as described in the instructions. ▶ 37a		
b	Did the organization file Form 1120-POL for this year?		
38a	Did the organization borrow from, or make any loans to, any officer, director, trustee, or key employee or were any such loans made in a prior year and still unpaid at the start of the period covered by this return?		✓
b	If "Yes," attach the schedule specified in the line 38 instructions and enter the amount involved. 38b		
39	501(c)(7) organizations. Enter: a Initiation fees and capital contributions included on line 9 39a		
b	Gross receipts, included on line 9, for public use of club facilities 39b		
40a	501(c)(3) organizations. Enter. Amount of tax imposed on the organization during the year under: section 4911 ▶ 0, section 4912 ▶ 0; section 4955 ▶ 0		
b	501(c)(3) and (4) organizations Did the organization engage in any section 4958 excess benefit transaction during the year or did it become aware of an excess benefit transaction from a prior year? If "Yes," attach an explanation.		✓
c	Amount of tax imposed on organization managers or disqualified persons during the year under 4912, 4955, and 4958 ▶ 0		
d	Enter: Amount of tax on line 40c, above, reimbursed by the organization ▶ 0		
41	List the states with which a copy of this return is filed. ▶ WISCONSIN		
42	The books are in care of ▶ DOROTHY LAMBERT Telephone no. ▶ (920) 459-2400 Located at ▶ 1436 S. 15 ST., SHEBOYGAN, WI		
43	Section 4947(a)(1) nonexempt charitable trusts filing Form 990- and enter the amount of tax-exempt interest received or accrued		

Please Sign Here

Under penalties of perjury, I declare that I have examined this return, including attachments, and believe it is true, correct, and complete. Declaration of preparer (other than the taxpayer) is based on all information of which the preparer has any knowledge.

Signature of officer

Jonathan L. Rost, President
 Type or print name and title

Paid Preparer's Use Only

Preparer's signature ▶
 Firm's name (or yours if self-employed), address, and ZIP + 4 ▶

SCHEDULE A
(Form 990 or 990-EZ)

Organization Exempt Under Section 501(c)(3)

(Except Private Foundation) and Section 501(e), 501(f), 501(k),
501(n), or Section 4947(a)(1) Nonexempt Charitable Trust

Supplementary Information—(See separate instructions.)

OMB No 1545-0047

2004

Department of the Treasury
Internal Revenue Service

▶ **MUST be completed by the above organizations and attached to their Form 990 or 990-EZ**

Name of the organization

WORKBOUND, INC.

Employer identification number

39 : 1713299

Part I Compensation of the Five Highest Paid Employees Other Than Officers, Directors, and Trustees
(See page 1 of the instructions. List each one. If there are 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 & deferred compensation	(e) Expense account and other allowances
Total number of other employees paid over \$50,000 ▶				

Part II Compensation of the Five Highest Paid Independent Contractors for Professional Services
(See page 2 of the instructions. List each one (whether individuals or firms). If there are none, enter "None.")

(a) Name and address of each independent contractor paid more than \$50,000	(b) Type of service	(c) Compensation
Total number of others receiving over \$50,000 for professional services ▶		

Part III Statements About Activities (See page 2 of the instructions.)		Yes	No
1	During the year, has the organization attempted to influence national, state, or local legislation, including any attempt to influence public opinion on a legislative matter or referendum? If "Yes," enter the total expenses paid or incurred in connection with the lobbying activities ▶ \$ _____ (Must equal amounts on line 38, Part VI-A, or line i of Part VI-B)		✓
	Organizations that made an election under section 501(h) by filing Form 5768 must complete Part VI-A. Other organizations checking "Yes" must complete Part VI-B AND attach a statement giving a detailed description of the lobbying activities.		
2	During the year, has the organization, either directly or indirectly, engaged in any of the following acts with any substantial contributors, trustees, directors, officers, creators, key employees, or members of their families, or with any taxable organization with which any such person is affiliated as an officer, director, trustee, majority owner, or principal beneficiary? (If the answer to any question is "Yes," attach a detailed statement explaining the transactions.)		
	a Sale, exchange, or leasing of property?		✓
	b Lending of money or other extension of credit?	✓	
	c Furnishing of goods, services, or facilities?	✓	
	d Payment of compensation (or payment or reimbursement of expenses if more than \$1,000)?	✓	
	e Transfer of any part of its income or assets?		✓
3a	Do you make grants for scholarships, fellowships, student loans, etc.? (If "Yes," attach an explanation of how you determine that recipients qualify to receive payments.)		✓
b	Do you have a section 403(b) annuity plan for your employees?		✓
4a	Did you maintain any separate account for participating donors where donors have the right to provide advice on the use or distribution of funds?		✓
b	Do you provide credit counseling, debt management, credit repair, or debt negotiation services?		✓

Part IV Reason for Non-Private Foundation Status (See pages 3 through 6 of the instructions.)

- The organization is not a private foundation because it is (Please check only **ONE** applicable box.)
- 5** A church, convention of churches, or association of churches Section 170(b)(1)(A)(i)
 - 6** A school. Section 170(b)(1)(A)(ii). (Also complete Part V)
 - 7** A hospital or a cooperative hospital service organization Section 170(b)(1)(A)(iii).
 - 8** A Federal, state, or local government or governmental unit. Section 170(b)(1)(A)(v)
 - 9** A medical research organization operated in conjunction with a hospital. Section 170(b)(1)(A)(iii). **Enter the hospital's name, city, and state ▶**
 - 10** An organization operated for the benefit of a college or university owned or operated by a governmental unit. Section 170(b)(1)(A)(iv). (Also complete the **Support Schedule** in Part IV-A.)
 - 11a** An organization that normally receives a substantial part of its support from a governmental unit or from the general public. Section 170(b)(1)(A)(vi) (Also complete the **Support Schedule** in Part IV-A)
 - 11b** A community trust Section 170(b)(1)(A)(vi). (Also complete the **Support Schedule** in Part IV-A.)
 - 12** An organization that normally receives **(1) more than 33 1/3%** of its support from contributions, membership fees, and gross receipts from activities related to its charitable, etc., functions—subject to certain exceptions, and **(2) no more than 33 1/3%** of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See section 509(a)(2). (Also complete the **Support Schedule** in Part IV-A.)
 - 13** An organization that is not controlled by any disqualified persons (other than foundation managers) and supports organizations described in **(1)** lines 5 through 12 above, or **(2)** section 501(c)(4), (5), or (6), if they meet the test of section 509(a)(2). (See section 509(a)(3).)

Provide the following information about the supported organizations. (See page 5 of the instructions)

(a) Name(s) of supported organization(s)	(b) Line number from above

- 14** An organization organized and operated to test for public safety Section 509(a)(4) (See page 5 of the instructions)

Part IV-A Support Schedule (Complete only if you checked a box on line 10, 11, or 12.) *Use cash method of accounting.*

Note: You may use the worksheet in the instructions for converting from the accrual to the cash method of accounting.

Calendar year (or fiscal year beginning in)	(a) 2003	(b) 2002	(c) 2001	(d) 2000	(e) Total
15 Gifts, grants, and contributions received (Do not include unusual grants. See line 28.)	59450	70486	62150	70930	263016
16 Membership fees received					
17 Gross receipts from admissions, merchandise sold or services performed, or furnishing of facilities in any activity that is related to the organization's charitable, etc., purpose					
18 Gross income from interest, dividends, amounts received from payments on securities loans (section 512(a)(5)), rents, royalties, and unrelated business taxable income (less section 511 taxes) from businesses acquired by the organization after June 30, 1975					
19 Net income from unrelated business activities not included in line 18.					
20 Tax revenues levied for the organization's benefit and either paid to it or expended on its behalf.					
21 The value of services or facilities furnished to the organization by a governmental unit without charge. Do not include the value of services or facilities generally furnished to the public without charge.					
22 Other income. Attach a schedule. Do not include gain or (loss) from sale of capital assets.					
23 Total of lines 15 through 22	59450	70486	62150	70930	263016
24 Line 23 minus line 17	59450	70486	62150	70930	263016
25 Enter 1% of line 23	595	705	622	709	
26 Organizations described on lines 10 or 11:					
a Enter 2% of amount in column (e), line 24					26a 5260
b Prepare a list for your records to show the name of and amount contributed by each person (other than a governmental unit or publicly supported organization) whose total gifts for 2000 through 2003 exceeded the amount shown in line 26a. Do not file this list with your return. Enter the total of all these excess amounts					26b 150716
c Total support for section 509(a)(1) test: Enter line 24, column (e)					26c 263016
d Add. Amounts from column (e) for lines:	18 0	19 0			
	22 0	26b 150716			26d 150716
e Public support (line 26c minus line 26d total)					26e 112299
f Public support percentage (line 26e (numerator) divided by line 26c (denominator))					26f 43 %
27 Organizations described on line 12:					
a For amounts included in lines 15, 16, and 17 that were received from a "disqualified person," prepare a list for your records to show the name of, and total amounts received in each year from, each "disqualified person." Do not file this list with your return. Enter the sum of such amounts for each year:					
(2003) _____ (2002) _____ (2001) _____ (2000) _____					
b For any amount included in line 17 that was received from each person (other than "disqualified persons"), prepare a list for your records to show the name of, and amount received for each year, that was more than the larger of (1) the amount on line 25 for the year or (2) \$5,000. (Include in the list organizations described in lines 5 through 11, as well as individuals.) Do not file this list with your return. After computing the difference between the amount received and the larger amount described in (1) or (2), enter the sum of these differences (the excess amounts) for each year:					
(2003) _____ (2002) _____ (2001) _____ (2000) _____					
c Add. Amounts from column (e) for lines:	15 _____	16 _____			
	17 _____	20 _____	21 _____		
d Add. Line 27a total _____ and line 27b total _____					27c _____
e Public support (line 27c total minus line 27d total)					27d _____
f Total support for section 509(a)(2) test. Enter amount from line 23, column (e)					27e _____
g Public support percentage (line 27e (numerator) divided by line 27f (denominator))					27f _____
h Investment income percentage (line 18, column (e) (numerator) divided by line 27f (denominator))					27g _____ %
					27h _____ %
28 Unusual Grants: For an organization described in line 10, 11, or 12 that received any unusual grants during 2000 through 2003, prepare a list for your records to show, for each year, the name of the contributor, the date and amount of the grant, and a brief description of the nature of the grant. Do not file this list with your return. Do not include these grants in line 15.					

Part V Private School Questionnaire (See page 7 of the instructions.)
(To be completed ONLY by schools that checked the box on line 6 in Part IV)

		Yes	No
29	Does the organization have a racially nondiscriminatory policy toward students by statement in its charter, bylaws, other governing instrument, or in a resolution of its governing body?		
30	Does the organization include a statement of its racially nondiscriminatory policy toward students in all its brochures, catalogues, and other written communications with the public dealing with student admissions, programs, and scholarships?		
31	Has the organization publicized its racially nondiscriminatory policy through newspaper or broadcast media during the period of solicitation for students, or during the registration period if it has no solicitation program, in a way that makes the policy known to all parts of the general community it serves? If "Yes," please describe; if "No," please explain. (If you need more space, attach a separate statement.)		
32a	Does the organization maintain the following		
a	Records indicating the racial composition of the student body, faculty, and administrative staff?		
b	Records documenting that scholarships and other financial assistance are awarded on a racially nondiscriminatory basis?		
c	Copies of all catalogues, brochures, announcements, and other written communications to the public dealing with student admissions, programs, and scholarships?		
d	Copies of all material used by the organization or on its behalf to solicit contributions?		
	If you answered "No" to any of the above, please explain (If you need more space, attach a separate statement)		
33	Does the organization discriminate by race in any way with respect to.		
a	Students' rights or privileges?		
b	Admissions policies?		
c	Employment of faculty or administrative staff?		
d	Scholarships or other financial assistance?		
e	Educational policies?		
f	Use of facilities?		
g	Athletic programs?		
h	Other extracurricular activities?		
	If you answered "Yes" to any of the above, please explain. (If you need more space, attach a separate statement.)		
34a	Does the organization receive any financial aid or assistance from a governmental agency?		
b	Has the organization's right to such aid ever been revoked or suspended? If you answered "Yes" to either 34a or b, please explain using an attached statement		
35	Does the organization certify that it has complied with the applicable requirements of sections 4.01 through 4.05 of Rev. Proc. 75-50, 1975-2 C.B. 587, covering racial nondiscrimination? If "No," attach an explanation		

Part VI-A Lobbying Expenditures by Electing Public Charities (See page 9 of the instructions.)
 (To be completed **ONLY** by an eligible organization that filed Form 5768)

Check **a** if the organization belongs to an affiliated group. Check **b** if you checked "a" and "limited control" provisions apply

Limits on Lobbying Expenditures		(a) Affiliated group totals	(b) To be completed for ALL electing organizations
(The term "expenditures" means amounts paid or incurred)			
36	Total lobbying expenditures to influence public opinion (grassroots lobbying)	36	
37	Total lobbying expenditures to influence a legislative body (direct lobbying)	37	
38	Total lobbying expenditures (add lines 36 and 37)	38	
39	Other exempt purpose expenditures	39	
40	Total exempt purpose expenditures (add lines 38 and 39)	40	
41	Lobbying nontaxable amount Enter the amount from the following table—		
	If the amount on line 40 is—		
	The lobbying nontaxable amount is—		
	Not over \$500,000	20% of the amount on line 40	41
	Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000	
	Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000	
	Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000	
	Over \$17,000,000	\$1,000,000	
42	Grassroots nontaxable amount (enter 25% of line 41)	42	
43	Subtract line 42 from line 36 Enter -0- if line 42 is more than line 36	43	
44	Subtract line 41 from line 38. Enter -0- if line 41 is more than line 38	44	

Caution: If there is an amount on either line 43 or line 44, you must file Form 4720.

4-Year Averaging Period Under Section 501(h)

(Some organizations that made a section 501(h) election do not have to complete all of the five columns below.
 See the instructions for lines 45 through 50 on page 11 of the instructions.)

	Lobbying Expenditures During 4-Year Averaging Period				
	(a) 2004	(h) 2003	(c) 2002	(d) 2001	(e) Total
45 Lobbying nontaxable amount					
46 Lobbying ceiling amount (150% of line 45(e))					
47 Total lobbying expenditures					
48 Grassroots nontaxable amount					
49 Grassroots ceiling amount (150% of line 48(e))					
50 Grassroots lobbying expenditures					

Part VI-B Lobbying Activity by Nonelecting Public Charities
 (For reporting only by organizations that did not complete Part VI-A) (See page 11 of the instructions.)

During the year, did the organization attempt to influence national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of:	Yes	No	Amount
a Volunteers			
b Paid staff or management (Include compensation in expenses reported on lines c through h.)			
c Media advertisements			
d Mailings to members, legislators, or the public			
e Publications, or published or broadcast statements			
f Grants to other organizations for lobbying purposes			
g Direct contact with legislators, their staffs, government officials, or a legislative body			
h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any other means			
j Total lobbying expenditures (Add lines c through h.)			

If "Yes" to any of the above, also attach a statement giving a detailed description of the lobbying activities

WORKBOUND, INC. DESCRIPTION OF SERVICES

Through an educational program that is combined with support from parents, teachers, employers and community resource people, all students can receive the education necessary to help them focus on their future. Academic, cultural, physical, social, and vocational education is essential to begin a career in the world of work. This is true for all students whether they begin a career directly out of high school or following college.

The skills needed by those entering the world of work have changed with the advent of a global market and economy and with ever increasing technology. These changes have made the traditional abilities obsolete. All students need academic, general, and vocational classes. The workforce for the future must be made up of people who are able to work with their heads and hands. They must be able to think and do in the world of work.

Workbound involves students, parents or significant adults, teachers, and the business community working together. Students enter the Workbound program on a voluntary basis; involvement in Workbound is not based on academic performance or financial position. Students become involved during their junior year in high school. The students choose one or two careers that interest them. Community business people in that particular field are then selected to work with the student, bringing them into the business environment so the student can receive first hand experience of the desired career. Guidance is given as to the options available to the student to achieve the desired career, along with the advantages and disadvantages of each option.

Follow up studies are being done on each student completing the Workbound program to determine the strengths and weaknesses of the program and the success the program has.

Over 175 students were involved with the program during the 2003-2004 school year.

WORKBOUNDED, INC.

Current Address
P O Box 386
Sheboygan, WI 53082-0386

Previous Address
N4250 Van Treeck Trl
Sheboygan Falls, WI 53085

2004 BOARD OF DIRECTORS

<u>Name, Company</u> <u>Address, Phone #</u>	<u>Position</u>	<u>Term</u>	<u>Annual</u> <u>Compensation</u>
Jon Rost Jon Rost & Associates LLC 406 Pennsylvania Ave. Sheboygan, WI 53081 (920) 451-3160	President <i>(Previous President was Mike Muth, Muth Mirror Systems)</i>	Ends 2006	None
Mike Harvey Van Der Vaart, Inc 1436 S. 15 St. Sheboygan, WI 53082-0490 (920) 459-2400	Treasurer <i>(Previous Treasurer was Jon Rost)</i>	Ends 2005	None
Brian Hanes School District of Oostburg 410 New York Avenue Oostburg, WI 53070 (920) 564-6138	Board Member	Ongoing	None
Dennis Ladwig Lakeshore Technical College Foundation 3620 Wilgus Ave. Sheboygan, WI 53081 (920) 205-5860	Board Member	Ends 2006	None
Joe Richardson III Richardson Industries 904 Monroe Street Sheboygan Falls, WI 53085 (920) 467-5992	Board Member	Ends 2005	None
Lee Riter School District of Sheboygan Falls 220 Amherst Avenue Sheboygan, Falls, WI 53085 (920) 467-7893 x3133	Board Member	Ongoing	None
Robert H. Leverenz 2826 Windepont Court Sheboygan, WI 53083 (920) 452-0467	Board Member	Ongoing	None
Jeff Ferniga Alpine Insulation 1941-B Ashland Avenue Sheboygan, WI 53081 (920) 458-8188	Board Member	Ends 2007	None

Bryan DeMaster Muth Company 4221 High Tech Lane Sheboygan, WI 53083 (920) 451-2000	Board Member	Ends 2007	None
Ann Wondergem Sheboygan County Health & Human Svcs 1011 North 8th Street Sheboygan, WI 53081 (920) 459-3213	Board Member	Ends 2007	None
Brenda Buehler Sheboygan Falls High School 220 Amherst Avenue Sheboygan Falls, WI 53085 (920) 467-7828	Board Member	Ends 2005	None
Kym Leibham P.O Box 386 Sheboygan, WI 53082-0386 (920) 207-0222	Executive Director <i>(Previous Executive Director was Tom O'Brien)</i>	Ongoing	\$28,000/yr
Tom & Pat O'Brien N4250 Van Treeck Trail Sheboygan Falls, WI 53085 (920) 467-3775	Consultants	Ongoing	\$6,000/yr Stipend + Health & Long Term Care Insurance