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Return of Private Foundation or Section 4947(a)(1) Trust Treated as Private Foundation

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	00	4 4	

Department of the Treasury

▶ Do not enter social security numbers on this form as it may be made public.

2014

		nue Service ► Information about Form 990-PF and its se	parate instructions	ıs at www.i	rs.gov/form9	90pf. Open	to Public Inspection
For	calend	dar year 2014 or tax year beginning	, 2014	, and endin	g		, 20
Na	ame of t	oundation			A Employer	identification number	
E	LLIO	TT FAMILY FOUNDATION INC			27-3458	082	_
Nu	ımber a	nd street (or P O box number if mail is not delivered to street address)		Room/suite	B Telephone	number (see instructions)	1
8	741 V	NATIONAL AVE			(414)32	1-4560	
Cı	ty or to	wn, state or province, country, and ZIP or foreign postal code			C If exempts	on application is pending,	check here
W	EST A	ALLIS, WI 53227			,	J.	
G	Check	all that apply Initial return Initial return	of a former public cha	arity	D 1. Foreigi	organizations, check hei	re ▶ 🔲
		Final return Amended re	turn		2 5		050/ 4004
		Address change Name change	je			n organizations meeting the nere and attach computati	
н	Check	type of organization X Section 501(c)(3) exempt priv	ate foundation		F If private t	oundation status was tern	ninated under —
	Sect	on 4947(a)(1) nonexempt charitable trust Other t	axable private found	ation		7(b)(1)(A), check here	
I F	air ma	rket value of all assets at J Accounting method	X Cash	Accrual	F If the four	dation is in a 60-month te	rmination —
e	end of y	/ear (from Part II, col (c), Other (specify)			1	tion 507(b)(1)(B), check h	
li	ne <u>16)</u>	▶ \$ 166,304 (Part I, column (d) must be	e on cash basis)				
Pa	rt l	Analysis of Revenue and Expenses (The total of	(a) Revenue and				(d) Disbursements
		amounts in columns (b), (c), and (d) may not necessarily equal	expenses per		investment	(c) Adjusted net	for charitable purposes
_		the amounts in column (a) (see instructions))	books		icome	ıncome	(cash basis only)
	1	Contributions, gifts, grants, etc , received (attach schedule)	10,00	00			
	2	Check ▶ if the foundation is not required to attach Sch B					
	3	Interest on savings and temporary cash investments					
	4	Dividends and interest from securities	5,52	20	5,520		
	5a	Gross rents					
	b	Net rental income or (loss)					
ø	6a	Net gain or (loss) from sale of assets not on line 10		<u> </u>			
2	ь	Gross sales pnce for all assets on line 6a					
Revenue	7	Capital gain net income (from Part IV, line 2)					
ď	8	Net short-term capital gain					
	9	Income modifications					
	10a	Gross sales less returns and allowances					
_	b	Less Cost of goods sold					
כנוה?	С	Gross profit or (loss) (attach schedule)					
	11	Other income (attach schedule)					
x	12	Total. Add lines 1 through 11	15,52	20	5,520		
~ ~	13	Compensation of officers, directors, trustees, etc					
MAY ses	14	Other employee salaries and wages					
	15	Pension plans, employee benefits					
₩ &	16a	Legal fees (attach schedule)				_	
OCAINIEL MAN and Administrative Expenses	b	Accounting fees (attach schedule)					
⋛≚	С	Other professional fees (attach schedule) ECEIVED · ·					
2 E	17	Interest					
اجَ و	18	Taxes (attach schedule) (see instructions) 2 1 2015	91	L3			
Ē	19						
Ad	20	Occupancy					
ָ קַ	21	Travel, conferences, and meetings OGDEN: UT					
<u>a</u>	22	Printing and publications					
Operating	23	Other expenses (attach schedule) STM103	40	00	400		
rat	24	Total operating and administrative expenses.					
)pe		Add lines 13 through 23	1,33		400	-	0
J	25	Contributions, gifts, grants paid	10,00				10,000
	26	Total expenses and disbursements. Add lines 24 and 25 .	11,3	L3	400		10,000
	27	Subtract line 26 from line 12					
	а	Excess of revenue over expenses and disbursements .	4,20	07		·	
	b	Net investment income (if negative, enter -0-)			5,120	·····	
	С	Adjusted net income (if negative, enter -0-)		F		0	ţ

For Paperwork Reduction Act Notice, see instructions.

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Form 990-PF (2014)

De	ırt II	Balance Sheets Attached schedules and amounts in the description column should be for end of year amounts only. (See instructions.)	Beginning of year	End	of year
Fe	irt H	should be for end-of-year amounts only (See instructions)	(a) Book Value	(b) Book Value	(c) Fair Market Value
	1	Cash - non-interest-bearing	59,977	58,664	58,664
	2	Savings and temporary cash investments	1,350	6,870	6,870
	3	Accounts receivable ▶			
		Less allowance for doubtful accounts ▶		_	
	4	Pledges receivable ▶			
	-	Less allowance for doubtful accounts			
	5	Grants receivable			
	6	Receivables due from officers, directors, trustees, and other			
		disqualified persons (attach schedule) (see instructions)			
	7	Other notes and loans receivable (attach schedule)			
	'	Less allowance for doubtful accounts			
S	8	Inventories for sale or use			
ssets	9	Prepaid expenses and deferred charges	-		
As	_	Investments - U S and state government obligations (attach schedule)			
		Investments - corporate stock (attach schedule) STM137	104,160	104,160	100,770
	ł		104,100	101,100	100,777
	ŀ	Investments - corporate bonds (attach schedule)			
	11	Investments - land, buildings, and equipment basis			
	١				
	12	Investments - mortgage loans			
	13	Investments - other (attach schedule)			
	14	Land, buildings, and equipment basis	-		
		Less accumulated depreciation (attach schedule)			
	15	Other assets (describe >)			
	16	Total assets (to be completed by all filers - see the			4.55.004
		ınstructions Also, see page 1, item l)	165,487	169,694	166,304
	17	Accounts payable and accrued expenses			_
S	18	Grants payable			_
Liabilities	19	Deferred revenue			4
薑	20	Loans from officers, directors, trustees, and other disqualified persons			_
<u>ia</u>	21	Mortgages and other notes payable (attach schedule)			_
_	22	Other liabilities (describe)			
	23	Total liabilities (add lines 17 through 22)	0	<u></u>	
S		Foundations that follow SFAS 117, check here			
ances	24	Unrestricted	165,487	169,694	
<u>a</u>	25	Temporarily restricted			
ä	26	Permanently restricted			
p		Foundations that do not follow SFAS 117, check here		•	
Fund Bala		and complete lines 27 through 31.			
ō	27	Capital stock, trust principal, or current funds			
	28	Paid-in or capital surplus, or land, bldg , and equipment fund		" -	
Assets	29	Retained earnings, accumulated income, endowment, or other funds			
ĕ	30	Total net assets or fund balances (see instructions)	165,487	169,694	
Net	31	Total liabilities and net assets/fund balances (see			
_	"	Instructions)	165,487	169,694	
D.	art II			203,00	<u>' </u>
		net assets or fund balances at beginning of year - Part II, column (a), line			
'		of-year figure reported on prior year's return)		1	165,487
2		amount from Part I, line 27a			
					
		r increases not included in line 2 (itemize)			
		eases not included in line 2 (itemize)	olumn (h) lung 20	5	
6	rotal	net assets or fund balances at end of year (line 4 minus line 5) - Part II, co	numm (b), ime 30		109,094

Part IV Capital Gains a	and Losses for Tax on Inve	stment Incom	e			
(a) List and describe the kind(s) of property sold (e.g., real estate, 2-story brick warehouse, or common stock, 200 shs MLC Co.) (b) How acquired P-Purchase D-Donation (n						(d) Date sold (mo , day, yr)
1a		_	_			
b		-				
С						
d						
e						
(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or of plus exper			(h) Gain (e) plus (f)	
а						
b						
С						···
d						
e						
Complete only for assets show	ring gain in column (h) and owned by	the foundation on 1	12/31/69	(1) (Gains (Col	(h) gain minus
(i) F M V as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess over col (col (k), but not le	ess than -0-) or m col (h))
a						
b						
С						
d						
е						
2 Capital gain net income or (net	capital loss)	o enter in Part I, lind nter -0- in Part I, lind	→ 1	2		
3 Net short-term capital gain or (loss) as defined in sections 1222(5) a	and (6)				
If gain, also enter in Part I, line	8, column (c) (see instructions) If (lo	ss), enter -0- in	3			
• •		• •	}	3		
	nder Section 4940(e) for Re		Net Investme	ent Incom	<u>—</u>	
(For optional use by domestic priva	ite foundations subject to the section	4940(a) tax on net	investment incom	e)		-
	·	()		- ,		
If section 4940(d)(2) applies, leave	this part blank					
Was the foundation liable for the se	ection 4942 tax on the distributable an	nount of any year in	the base period?	1		Yes X No
	ualify under section 4940(e) Do not c	• •	, and adda parties			
	n each column for each year; see the		making any entrie	es		-
(a)			<u> </u>			(d)
Base period years Calendar year (or tax year beginning	(b) Adjusted qualifying distributions	Net value of r	(c) noncharitable-use as	sets		oution ratio vided by col (c))
2013			102,0	62	0.0	
2012			59,0		0.0	
2011						
2010		-			-	
2009			-			
2 Total of line 1, column (d)				. 2	0.0)
	e 5-year base period - divide the total					
· ·	has been in existence if less than 5	•		. 3	0.0)
•		,				
4 Enter the net value of nonchar	table-use assets for 2014 from Part X	(. line 5		. 4		165,070
		,				
5 Multiply line 4 by line 3				. 5		0
, , , , , , , , , , , , , , , , , , , ,						
6 Enter 1% of net investment inc	ome (1% of Part I, line 27b)			. 6		51
	· · · · · · · · · · · · · · · · · · ·					
7 Add lines 5 and 6				. 7		51
8 Enter qualifying distributions from	om Part XII, line 4			. 8		10,000
	nan line 7, check the box in Part VI, lir			<u> </u>	See the	
Part VI instructions	<u> </u>					

Form	990-PF (2014) ELLIOTT FAMILY FOUNDATION INC 27-3458	3082	ı	Page 5
Pa	t VII-A Statements Regarding Activities (continued)			
	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)	11	1	X
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified			
	person had advisory privileges? If "Yes," attach statement (see instructions)	12		X
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	X	
	Website address ► N/A			
14	The books are in care of ▶ DAVID A AFFELDT Telephone no ▶ 414-	321-4	560	
	Located at ▶ 8741 W NATIONAL AVE, WEST ALLIS, WI ZIP+4 ▶ 5322	7		
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			
16	At any time during calendar year 2014, did the foundation have an interest in or a signature or other authority		Yes	No
	over a bank, securities, or other financial account in a foreign country?	16		X
	See the instructions for exceptions and filing requirements for FinCEN Form 114, (formerly TD F 90 22 1) If			
	"Yes," enter the name of the foreign country			
Pa	rt 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.		Yes	No
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 X No			
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a		;	
	disqualified person?		‡	
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?		1	
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?		1	
	(5) Transfer any income or assets to a disqualified person (or make any of either available for		1	
	the benefit or use of a disqualified person)?			
	(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 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)?	1b	<u> </u>	<u> </u>
	Organizations relying on a current notice regarding disaster assistance check here		1	
c	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that		1	
	were not corrected before the first day of the tax year beginning in 2014?	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))			
а	At the end of tax year 2014, did the foundation have any undistributed income (lines 6d and			
	6e, Part XIII) for tax year(s) beginning before 2014?			
	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			1,,
	all years listed, answer "No" and attach statement - see instructions)	2b	1	<u> </u>
С	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here		‡	
_	<u> </u>			
3a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise		-	
_	at any time during the year?			
b	If "Yes," did it have excess business holdings in 2014 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		1	
	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 2014)	3b	-	1
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a	1	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 tay year beginning in 20142	1 44	1	i Y

	990-PF (2014) ELLIOTT FAMILY FOUNT						27-3458		Page 6
Pa	rt VII-B Statements Regarding Activitie	s for	Which For	n 4720	0 May Be	Required	(continued)	
5a	During the year did the foundation pay or incur any an	nount to							
	(1) Carry on propaganda, or otherwise attempt to influ	ience le	gislation (section	on 4945((e))?	🗍	Yes X No	1	
	(2) Influence the outcome of any specific public electrons	on (see	section 4955),	or to car	rry on,		_	1	
directly or indirectly, any voter registration drive?									
(3) Provide a grant to an individual for travel, study, or other similar purposes? Yes X No									
(4) Provide a grant to an organization other than a charitable, etc., organization described in									
section 4945(d)(4)(A)? (see instructions)									
(5) Provide for any purpose other than religious, chantable, scientific, literary, or educational									
	purposes, or for the prevention of cruelty to children or animals?								
b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify under the exceptions described in								1 1	
	Regulations section 53 4945 or in a current notice reg	ardıng d	ısaster assıstaı	nce (see	nstructions	?		5b	
	Organizations relying on a current notice regarding dis	saster as	ssistance checl	k here			▶ □		
С	If the answer is "Yes" to question 5a(4), does the foun	dation c	laım exemption	from the	e tax		_		
	because it maintained expenditure responsibility for th	e grant?				🗍	Yes No	1 1	
	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 pre	emiums				
	on a personal benefit contract?					□	Yes X No		
b	Did the foundation, during the year, pay premiums, dir	ectly or	indirectly, on a	persona	al benefit con	ract? .		6b	X
	If "Yes" to 6b, file Form 8870								
7a	At any time during the tax year, was the foundation a	party to a	a prohibited tax	shelter	transaction?	. 🖂	Yes X No	İ	
b	If "Yes," did the foundation receive any proceeds or ha						LJ	7b	
Pa	t VIII Information About Officers, Dire							Emplo	ovees.
	and Contractors					• •	0 ,	•	•
1 L	ist all officers, directors, trustees, foundation mana	gers an	nd their compe	ensation	ı (see instru	ctions).			
		(b) Titl	e, and average	(c) Co	ompensation	(d) Cor	ntributions to	(e) Expe	ense account,
	(a) Name and address			not paid, nter -0-)		e benefit plans ed compensation	other a	allowances	
DAV	ID A AFFELDT	DIREC	TOR		<u> </u>				
874	1 W NATIONAL AVE, WI 53227	0.00			0		0		0
	NA L ELLIOTT	DIREC	TOR						
874	1 W NATIONAL AVE, WI 53227		0.00		0		0		0
	G ELLIOTT	DIREC			-				
874	1 W NATIONAL AVE, WI 53227		0.00	İ	0		0		0
	•		-						
				İ					
2 (Compensation of five highest-paid employees (other	than th	nose included	on line	1 - see instr	uctions). If	none, enter		
	NONE."						,		
						(d)	Contributions to		
	(a) Name and address of each employee paid more than \$50	,000	(b) Title, and a hours per v		(c) Comper		inployee benefit	(e) Exper	nse account, illowances
			devoted to po		` ,	Pio	compensation	Office a	llowarices
NON	3				 				
								-	
							-		
					-				
Tota	number of other employees paid over \$50,000					<u></u>			0
EEA	The second control part of the position of the part of	<u> </u>	· · · · · · · · ·	<u></u>	<u> </u>	<u> </u>		Form 99	0-PF (2014)
									- · · \===/

27-3458082

ELLIOTT FAMILY FOUNDATION INC

Form 990-PF (2014)

and Contractors (continued)		aid Employees
Five highest-paid independent contractors for professional services ((see instructions). If none, enter "NONE."	
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
DNE		
A-L		
· · · · · · · · · · · · · · · · · · ·	· · · · · · · · · · · · · · · · · · ·	
Part IX-A Summary of Direct Charitable Activities		
List the foundation's four largest direct charitable activities during the tax year. Include rel	elevant statistical information such as the number of	
organizations and other beneficiaries served, conferences convened, research papers pr	roduced, etc	Expenses
· · · · · · · · · · · · · · · · · · ·		
		
Part IX-B Summary of Program-Related Investments (se	ee instructions)	
Describe the two largest program-related investments made by the foundation during the	e tax year on lines 1 and 2	Amount
Il other program-related investments. See instructions		

EEA

Form **990-PF** (2014)

Pa	rt X Minimum Investment Return (All domestic foundations must complete this part. Foreign	found	ations,
	see instructions.)		
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc.,		
	purposes		
а	Average monthly fair market value of securities	1a _	103,517
b	Average of monthly cash balances	1b	64,067
С	Fair market value of all other assets (see instructions)	1c	0
d	Total (add lines 1a, b, and c)	1d	167,584
е	Reduction claimed for blockage or other factors reported on lines 1a and		
	1c (attach detailed explanation)		
2	Acquisition indebtedness applicable to line 1 assets	2	0
3	Subtract line 2 from line 1d	3	167,584
4	Cash deemed held for charitable activities Enter 1 1/2% of line 3 (for greater amount, see		
	ınstructions)	4	2,514
5	Net value of noncharitable-use assets. Subtract line 4 from line 3 Enter here and on Part V, line 4	5	165,070
6	Minimum investment return. Enter 5% of line 5	6	8,254
Pa	rt XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating for	oundat	ions
	and certain foreign organizations check here ▶ and do not complete this part)	· · · · · ·	
1	Minimum investment return from Part X, line 6	1	8,254
2a	Tax on investment income for 2014 from Part VI, line 5		
b	Income tax for 2014 (This does not include the tax from Part VI) 2b		
С	Add lines 2a and 2b	2c	51
3	Distributable amount before adjustments Subtract line 2c from line 1	3	8,203
4	Recoveries of amounts treated as qualifying distributions	4	
5	Add lines 3 and 4	5	8,203
6	Deduction from distributable amount (see instructions)	6	· · · · · · · · · · · · · · · · · · ·
7	Distributable amount as adjusted Subtract line 6 from line 5 Enter here and on Part XIII,		
	line 1	7	8,203
Pa	rt XII Qualifying Distributions (see instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes.		•
а	Expenses, contributions, gifts, etc - total from Part I, column (d), line 26	1a	10,000
b	Program-related investments - total from Part IX-B	1b	
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc.,		
	purposes	2	
3	Amounts set aside for specific charitable projects that satisfy the		
а	Suitability test (prior IRS approval required)	3a	
b	Cash distribution test (attach the required schedule)	3b	
4	Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4 .	4	10,000
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 (see instructions)	5	51
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	9,949
	Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the	e founda	tion
	available for the eartern 4040(a) radication of tax in those years		

Part .	90-PF (2014) ELLIOTT FAMILY FOUNDA XIII Undistributed Income (see instruc			27-345808	2 Page 9
Limite	,	(a)	(b)	(c)	(d)
1 D	Distributable amount for 2014 from Part XI,	Corpus	Years pnor to 2013	2013	(d) 2014
lır	ne7 [-		8,203
2 U	Indistributed income, if any, as of the end of 2014		1	1	
a E	nter amount for 2013 only			5,076	
bТ	otal for pnor years,,				
3 E	xcess distributions carryover, if any, to 2014		į		
a F	rom 2009		[
b F	rom 2010		-		
c F	rom 2011				
d F	rom 2012				
e F	rom 2013			!	
f T	otal of lines 3a through e				
	Qualifying distributions for 2014 from Part XII,				
	ne 4 ▶\$ 10,000_	:		1	
	applied to 2013, but not more than line 2a			5,076	
	applied to undistributed income of prior years				•••••
	Election required - see instructions)				
•	reated as distributions out of corpus (Election				
	equired - see instructions)				
	Applied to 2014 distributable amount				4,924
	Remaining amount distributed out of corpus	· · · · · · · · · · · · · · · · · · ·			1,72
	excess distributions carryover applied to 2014 .				
				···· ·-· · · ·	
	If an amount appears in column (d), the same				
	mount must be shown in column (a))			-	
-	Inter the net total of each column as				
	ndicated below:			-	
	Corpus Add lines 3f, 4c, and 4e Subtract line 5 .				
	Prior years' undistributed income Subtract				
	ne 4b from line 2b				
	inter the amount of prior years' undistributed				
	ncome for which a notice of deficiency has				
	een issued, or on which the section 4942(a)				
ta	ax has been previously assessed				
d S	Subtract line 6c from line 6b Taxable				
а	mount - see instructions				
e l	Indistributed income for 2013 Subtract line				
4	a from line 2a Taxable amount - see				
ır	nstructions				
fl	Indistributed income for 2014 Subtract lines				
4	d and 5 from line 1. This amount must be				
d	listributed in 2015				3,279
7 A	Amounts treated as distributions out of corpus		1		
to	o satisfy requirements imposed by section			+	
1	70(b)(1)(F) or 4942(g)(3) (Election may be				
	equired - see instructions)			·	
8 E	Excess distributions carryover from 2009 not				
	applied on line 5 or line 7 (see instructions)			ļ	
	excess distributions carryover to 2015.				
	Subtract lines 7 and 8 from line 6a				
	Analysis of line 9			***************************************	
	Excess from 2010		-		
	Excess from 2011				
	Excess from 2012			į	
	Excess from 2012			:	
	Excess from 2014		[

Part	X I V P	rivate Operating Four	idations (see inst	tructions and Par	t VII-A, question 9)					
1a	If the found	ation has received a ruling or	determination letter that	it it is a private operati	ng					
	foundation,	dation, and the ruling is effective for 2014, enter the date of the ruling ▶								
		•	ation is a private operating foundation described in section 4942(j)(3) or 4942(j)(5)							
		sser of the adjusted net	Tax year	Prior 3 years						
	income from	n Part I or the minimum		(b) 0042	T	40.0044	(e) Total			
		return from Part X for	(a) 2014	(b) 2013	(c) 2012	(d) 2011				
	each year l	t e								
b	85% of line	^{2a}								
		listributions from Part XII, ich year listed								
d		uded in line 2c not used directly induct of exempt activities .								
е	for active co	distributions made directly conduct of exempt activities. e 2d from line 2c								
		a, b, or c for the est relied upon.								
а		ernative test - enter								
-	(1) Value of	- · · · · · · · · · · · · · · · · · · ·								
		of assets qualifying under 4942(j)(3)(B)(i)								
b	"Endowment	alternative test - enter 2/3		***	 					
		nvestment return shown in for each year listed			. ,					
С	"Support" a	Iternative test - enter								
		upport other than gross								
		ent income (interest,								
		ds, rents, payments on es loans (section								
		5)), or royalties)								
		t from general public								
		r more exempt ations as provided in								
	section	4942(j)(3)(B)(iii)								
		amount of support from								
		nvestment income								
art		pplementary Informat	tion (Complete th	nis part only if t	he foundation had	1 \$5 000 or more	in assets at			
		y time during the year			ne roundation nat	2 45,000 01 111016	iii assets at			
1		on Regarding Foundation Ma					-			
' a		anagers of the foundation who		e than 2% of the total	contributions received b	v the foundation				
_	before the	close of any tax year (but only	of they have contribute	ed more than \$5,000)	(See section 507(d)(2))				
				·		•				
										
b		anagers of the foundation who of a partnership or other entity				portion of the				
	Ownersub	or a partificionip or other entity	, or willout the foundati	ion nasa 10% or grea	nei interest					
				· ·		-				
2		n Regarding Contribution, (• • • •						
	Check her	$\mathbf{e} lacksquare rac{ \mathbf{X} }{ \mathbf{X} }$ if the foundation only	makes contributions to	o preselected charitat	ole organizations and do	es not accept				
•	unsolicited	requests for funds. If the four	dation makes gifts, gra	ants, etc (see instruct	ions) to individuals or or	ganizations under				
		itions, complete items 2a, b, c								
а	The name,	address, and telephone numl	oer or e-mail address o	of the person to whom	applications should be a	addressed				
b	The form II	n which applications should be	submitted and informa	ation and materials the	ey should include		- -			
С	Any submi	ssion deadlines								
	-									
d	Any restric	tions or limitations on awards,	such as by geographic	cal areas, charitable f	ields, kinds of institutions	s, or other				
	factors.		, 5 - 5 - 6 - 6	.,	,	• • • •				

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	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)	or substantial contributor	recipient		
a Paid during the year				
BELOIT COLLEGE				
	UNRELATED	PC	EDUCATIONAL	5,00
HILLSDALE COLLEGE				
	UNRELATED	PC	EDUCATIONAL	1,00
UNITED WAY				
	UNRELATED	PC	CHARITY	1,50
SALVATION ARMY				
	UNRELATED	PC	CHARITY	1,00
THE NATURE CONSERVANCY				
	UNRELATED	PC	EDUCATIONAL	50
1ST UNITED METHODIST				
	UNRELATED	PC	CHARITY	1,00
				_,
Total			▶ 3a	10,00
b Approved for future payment				
			,	
Total		<u> </u>		

Enter gross amounts unless otherwise indicated		ousiness income	Excluded by sec	ction 512, 513, or 514	(e)
	(a) Business	(b) Amount	(c) Exclusion code	(d) Amount	Related or exempt function income (See instructions)
1 Program service revenue	code				
a	-				
b					
c					
d					<u> </u>
e				· · ·	
f					_
g Fees and contracts from government agencies					
2 Membership dues and assessments					
3 Interest on savings and temporary cash investments .					
4 Dividends and interest from securities	523000	5,520	<u> </u>		
5 Net rental income or (loss) from real estate]		
a Debt-financed property					
b Not debt-financed property			_		
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					
b					
c					
d					
e					
12 Subtotal Add columns (b), (d), and (e)		5,520			
Line No. Explain below how each activity for which incomplishment of the foundation's exempt p	ome is reported	d in column (e) of F	art XVI-A contrib	outed importantly to th	
				-	
	·				
					-
					
					
~					
					
	-				
			. <u> </u>		

Par	XVII		n Regarding Traganizations	ansfers To an	nd Transact	ions an	d Relation	nships W	ith Nonch	narita	able	-
_	D.d 45		ctly or indirectly engage	as in any of the fol	lloweng with one	other era	onization dos			1	Yes	No
											162	NO
			code (other than section	on 50 r(c)(5) organ	nzadoris) or in s	section 52	r, relating to p	Johnsai				ĺ
	organizat				_4	_£						ĺ
		•	ting foundation to a no		-					. †	1	v
	. ,								l l	1a(1)		X
	• •									1a(2)		X
	Other tran									ļ Ī		7.
	• •		noncharitable exempt	-						1b(1)		X_
	•		from a noncharitable							1b(2)		X
			quipment, or other as:						The state of the s	1b(3)		X
	• •		ngements						F	1b(4)		X
	• •	-	ntees						- F	1b(5)		X
			ices or membership o	_					1	1b(6)		X
	_		pment, mailing lists, o	•						1c		_X
		-	e above is "Yes," con		-		-					
		-	assets, or services g	-	-							
			or sharing arrangeme									
(a) Lin	e no (b) /	Amount involved	(c) Name of non-	charitable exempt or	ganization	(d) Des	cription of trans	fers, transacti	ons, and share	ing arra	ingeme	ents
			_									
						ļ. 						
			_									
												
						ļ			_ 			
						ļ 						
												
						<u> </u>	. – –	 				
												
												
						 	 					
												
					 							
												
												
						L		··· ··································				
		-	or indirectly affiliated				organizations	5	Г	٦٧.	_ 🔽	No
			(c) of the Code (other	than section 50 it	c)(3)) or in sect	JON 5217			· · · · · L	Ye:	s A] NO
		•	lowing schedule	# T = # T =				/-\ D		. 1		
		a) Name of orgar	lization	(b) Type	e of organization			(c) Descript	tion of relations	snip		
		-	-									
	•											
					-							
	Linder n	enalties of penury I	declare that I have examin	ed this return, including	accompanying sch	edules and s	tatements, and to	the best of my l	knowledge and i	belief it	is true	
Sig	correct	and complete Decl	aration of preparer (other th	an taxpayer) is based o	on all information of	which prepare	er has any knowle	edge		30.101, 10		
		x x 200	37. Dun ()		- 5-1410	TRECT	OB		May the IRS with the prep			
Her		VID A AFFE nature of officer or tre		Dake)— <u> </u>	DIRECTO	OK		(see inst)?	74161 5110	Yes	
		Pnnt/Type prepar		Preparer s signa	ture 11	11/1/	Date	Ot :		TIN		
Paid	b	David A A		1 / 6	the lot	llvu	05-14-20	Che	∽ ⊔"	01235	5630	
	- parer	Firm's name	► Affeldt Lav			<u>v</u>	NJ-14-20	Firm's EIN	employed P(,143	,030	
	-	Firm's address		National Ave			 	Phone no				
USE	Only	rum s audress	Wash MINE	TAT ESSA				PHONE NO		F C A		

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.

Information about Schedule B (Form 990, 990-EZ, or 990-PF) and its instructions is at www irs gov/form990

OMB No 1545-0047

2014

	of the organization OTT FAMILY FOUNDA	TION INC		Employer identification number 27 - 34 58 082
	ization type (check one)	11011 1110		
Filers	of:	Section:		
Form 9	90 or 990-EZ	501(c)() (enter number) organization	
		4947(a)(1) no	nexempt charitable trust not treated as a private foundation	
		527 political o	rganization	
Form 9	90-PF	X 501(c)(3) exe	mpt private foundation	
		4947(a)(1) no	nexempt charitable trust treated as a private foundation	
		501(c)(3) taxa	able private foundation	
	······································		, 1 4	
Check	if your organization is cove	red by the General	Rule or a Special Rule.	
Note. (), or (10) organization	on can check boxes for both the General Rule and a Special F	Rule See
Genera	al Rule			
X	-	perty) from any one	or 990-PF that received, during the year, contributions totaling contributor. Complete Parts I and II. See instructions for deter	
Specia	I Rules			
	regulations under sections 13, 16a, or 16b, and that r	s 509(a)(1) and 170 received from any o	(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support (b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), ne contributor, during the year, total contributions of the greate 90, Part VIII, line 1h, or (ii) Form 990-EZ, line 1 Complete Par	Part II, line er of (1)
	contributor, during the year	ar, total contribution:	c)(7), (8), or (10) filing Form 990 or 990-EZ that received from s of more than \$1,000 exclusively for religious, charitable, scie evention of cruelty to children or animals. Complete Parts I, II,	entific,
	contribution, during the year contributions totaled more during the year for an exc General Rule applies to the	ar, contributions exc than \$1,000 If this lusively religious, cl his organization bed	c)(7), (8), or (10) filing Form 990 or 990-EZ that received from clusively for religious, charitable, etc., purposes, but no such box is checked, enter here the total contributions that were renantable, etc., purpose. Do not complete any of the parts unlecture it received nonexclusively religious, charitable, etc., con	eceived ess the tributions
990-EZ	Z, or 990-PF), but it must ar	nswer "No" on Part	General Rule and/or the Special Rules does not file Schedule E IV, line 2, of its Form 990, or check the box on line H of its Forneet the filing requirements of Schedule B (Form 990, 990-EZ	rm 990-EZ or on its

Name of organization
ELLIOTT FAMILY FOUNDATION INC

Employer identification number 27 - 3458082

Part I	Contributors (see instructions) Use duplicate copi	ies of Part I if additional space is i	needed
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	DONNA ELLIOTT 8741 W NATIONAL AVE Milwaukee, WI 53227	\$10,000	Person 🔀 Payroll 🗍 Noncash 🗍 (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
			Person
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person

	Federal Supporting Statements	2014 PG 01
Name(s) as shown on return		FEIN
ELLIOTT FAMI	LY FOUNDATION INC	27-3458082

FORM 990PF, PART II, LINE 10(B) STATEMENT #137 INVESTMENTS: CORPORATE STOCK SCHEDULE

CATEGORY	BOY	BOOK VALUE	EOY FMV
3000 shs AT&T common stock	104,160	104,160	100,770
TOTALS	104,160	104,160	100,770

		Federal Su	Federal Supporting Statements	nents	2014 PG 01	,
Name(s) as shown on return ELLIOTT FAMILY FOUNDATION INC					Your Social Security Number 27–3458082	
	FORM 990PF, PART I,		LINE 23 - OTHER EXPENSES SCHEDULE	ULE	STATEMENT #103	
DESCRIPTION	REVENUE AND EXPENSES	NET INVESTMENT	ADJUSTED NET INCOME	CHARITABLE PURPOSE		
FILING FEE FORM 1023	700	007	0	0		
TOTALS	400	400	0	0		
			11127		PG 01	
	FORM	990PF, PART I, LINE	FORM 990PF, PART I, LINE 18 – TAXES SCHEDULE		STATEMENT #110	_
DESCRIPTION FEDERAL TAXES	REVENUE AND EXPENSES 913	NET INVESTMENT O	ADJUSTED NET INCOME 0	CHARITABLE PURPOSE 0		
TOTALS	913	0	0	0		
						-
						-