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Form **990-PF**

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

OMB No 1545-0052

2014

Department of the Treasury Internal Revenue Service

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Open to Public Inspection

For ca	lenda	ar year 2014, or tax year beginning	, 2014	l, and ending		,	
					Α	Employer identification nur	nber
		SAMPSON CHARITABLE FUND, I. SANTA MONICA BLVD.	INC.	}	В	39-1796526 Telephone number (see inst	ructions
		INT, WI 53217			b	414-351-4500	ructionsy
1 021	101	M1, W1 33217			_		
			Initial return of a fori		С	If exemption application is	pending, check here
G Ch	eck a	ill that apply Initial return	D	1 Foreign organizations, chec	ck here		
		Final return	Amended return			2 Foreign organizations meet	ung the 85% test check
11 01		Address change	Name change	foundation		here and attach computation	
H Ch		ype of organization \overline{X} Section 50 ection 4947(a)(1) nonexempt charitable to	I(c)(3) exempt private	private foundation	E	If private foundation status	was terminated
I Fau			counting method X C		_	under section 507(b)(1)(A)	
		t II, column (c), line 16)	Other (specify)	,asii []/\ccidai	F	If the foundation is in a 60	month termination
► \$;	674,010. (Part I	column (d) must be of	n cash basis) +	•	under section 507(b)(1)(B)	
Part	ΠA	nalysis of Revenue and	(a) Revenue and	(b) Net investmen	ıt	(c) Adjusted net	(d) Disbursements
		xpenses (The total of amounts in	expenses per books	income		income	for charitable
	CC Sa	olumns (b), (c), and (d) may not neces- arily equal the amounts in column (a)					purposes (cash basis only)
		see instructions))					(000:100:00:00:00;)
	1	Contributions, gifts, grants, etc, received (attach schedule).	γ			77	
	2	Ck ► X of the foundn is not required to attach Sch B	<u> </u>	ļ., , , , , , , , , , , , , , , , , , ,			· · · · · · · · · · · · · · · · · · ·
	3	Interest on savings and temporary cash investments					
	4	Dividends and interest from securities	1,940.	1,94	0.		4.4.4.5.4.5.
	1 - 1	a Gross rents. b Net rental income		848. 4. 57		4 36 8 37 80 7	*****
_		or (loss)	142 610	\$2.3.4 \$4.2.40			
R E		b Gross sales price for all 570, 651.	143,618.		- ~		
E	7	Capital gain net income (from Part IV, line 2)		143,61	Ω		
Ë	8	Net short-term capital gain	2 2020	145,01	<u> </u>	* * * * * * * * * * * * * * * * * * *	
Ü	9	Income modifications RECEIVED		X 1.5 2	~. c 🚱		
E	10	returns and					
	١,	b Less Cost o	8	5 \$ \$	<u>^</u> × ⊘ ₩		
		goods sold 5 MAY 1 9 2015			- ,3		4.000
	11	Other income (attach-schedule)		Bar we			N 1 1 2 1 2 1 2 1 2 1 2 1 2 1 2 1 2 1 2
		OGDEN, UT					
	12	Total. Add lines 1 through 11	145,558.	145,55	8.	0.	- 1. T. J. W. 1. 1.
	13	Compensation of officers, directors, trustees, etc.	0.				
	14	Other employee salaries and wages					<u> </u>
ſ),	15	Pension plans, employee benefits Legal fees (attach schedule)					
5 6		Accounting fees (attach sch) SEE ST 1	5,215.	5,21	5		
M-N-STRAT-VE	1	Other prof fees (attach sch) SEE ST 2	180.	18			
N I	17	Interest					
E T	18	Taxes (attach schedule)(see instrs)					
AA	19	Depreciation (attach sch) and depletion					
	20	Occupancy					1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
	21	Travel, conferences, and meetings					
A E	22	Printing and publications					
× P E	23	Other expenses (attach schedule)	39.	2	9.		
→ N	24	SEE STATEMENT 3 Total operating and administrative	39.		9.		
⊒ ∃ S E S	~~	expenses Add lines 13 through 23	5,434.	5,42	4.		
_	25	Contributions, gifts, grants paid PART XV	28,903.		e पू	₹** <i>2</i>	28,903.
	26	Total expenses and disbursements Add lines 24 and 25	24 227	5,42	1	0.	20 002
	27	Subtract line 26 from line 12:	34,337.	5,42	4.)	28,903.
		Excess of revenue over expenses	and the same of the Marketine of the same of				
		and disbursements.	111,221.	140 10		1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	
		Net investment income (if negative enter -0-) Adjusted net income (if negative, enter -0-)		140,13	4.	0.	

Add lines 1, 2, and 3

Decreases not included in line 2 (itemize)

Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b), line 30

603,560

603,560.

4

5

6

Pa	rt IV Capital Gains and	Losses for Tax on Investmen	nt Income			
L	(a) List and describe 2-story brick warehouse	(b) How acqu P — Purcha D — Donati	ise (month day, yea			
1	a PUBLICLY TRADED SEC	CURITIES		P		
	b SECURITIES LITIGAT	ION PROCEEDS		P	VARIOUS	VARIOUS
	c					
	d					
	e					
	(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other ba plus expense of sa		(h) Gain (e) plus (f)	or (loss) minus (g)
	a 570,276.		42	7,033.		143,243.
	b 375.					375.
	С					·
	d					·
	e					
	Complete only for assets show	ving gain in column (h) and owned t	by the foundation on 12/31.	69	(I) Gains (C	
	(i) Fair Market Value as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of column over column (j), if a		gain minus column than -0-) or Losses	
	a					143,243.
	b					375.
	c					
	d					
	e				-	
2	Capital gain net income or (ne	et capital loss) — If gain, also If (loss), en	enter in Part I, line 7 ter -0- in Part I, line 7		2	143,618.
3	Net short-term capital gain or	(loss) as defined in sections 1222(5) and (6) [.]			
	If gain, also enter in Part I, lin in Part I, lin	e 8, column (c) (see instructions). If	f (loss), enter -0-		3	0.
Da		r Section 4940(e) for Reduce	d Tay on Net Investm	ent Inco		<u>.</u>
		oundations subject to the section 4940				
Was		this part blank ction 4942 tax on the distributable a alify under section 4940(e). Do not c		ase period	? Yes	X No
1	Enter the appropriate amount in	each column for each year, see the ins	structions 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 as	sets ((d Distributi (column (b) divide	on ratio
	2013	23,228.	58	1,515.		0.039944
	2012	31,622.		6,371.		0.067804
	2011	43,809.	67	4,575.		0.064943
	2010	41,097.	85	8,900.		0.047848
	2009	44,632.	83	5,975.		0.053389
2	Total of line 1, column (d)				2	0.273928
3	Average distribution ratio for the number of years the foundation	he 5-year base period — divide the t n has been in existence if less than	otal on line 2 by 5, or by t 5 years	he	3	0.054786
4	Enter the net value of nonchar	ritable-use assets for 2014 from Par	t X, line 5	-	4	628,424.
5	Multiply line 4 by line 3				5	34,429.
6	Enter 1% of net investment inc	come (1% of Part I, line 27b)		_	6	1,401.
7	Add lines 5 and 6			_	7	35,830.
8	Enter qualifying distributions fr				8	28,903.
	If line 8 is equal to or greater that Part VI instructions	in line 7, check the box in Part VI, line	1b, and complete that part u	ısıng a 1% t	ax rate See the	

_		96526			age 4
	rt VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 - see in	struction	s)		
1	a Exempt operating foundations described in section 4940(d)(2), check here and enter 'N/A' on line 1.				
	Date of ruling or determination letter (attach copy of letter if necessary – see instrs)				
		1		2,	<u>803.</u>
	check here. and enter 1% of Part I, line 27b				
	c All other domestic foundations enter 2% of line 27b Exempt foreign organizations enter 4% of Part I, line 12, column (b)				
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable				•
3	· · · · · · · · · · · · · · · · · · ·	3			0.
4		4			803.
5		5		2	<u> 0.</u> 303.
6	Credits/Payments			۷,	303.
_	a 2014 estimated tax pmts and 2013 overpayment credited to 2014 1,152.	- [,		
	b Exempt foreign organizations — tax withheld at source 6b				
	c Tax paid with application for extension of time to file (Form 8868)		,		
	Backup withholding erroneously withheld				
7	Total credits and payments Add lines 6a through 6d	7		1.	152.
8	Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached	В			 -
9		9		1.	551.
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid	0			
11	Enter the amount of line 10 to be Credited to 2015 estimated tax	1			
Pa	tWIFA Statements Regarding Activities				
1:	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it			Yes	No
	participate or intervene in any political campaign?		1 a		X
ı	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see Instructions for the definition)?		1 b		x
	If the answer is 'Yes' to 1a or 1b , attach a detailed description of the activities and copies of any materials published		\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	2.4	<u>^</u>
	or distributed by the foundation in connection with the activities		, , , , , , , , , , , , , , , , , , ,		
	Did the foundation file Form 1120-POL for this year?		1 c) · · · · · · · · · · · · · · · · · · ·	X
	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year			1.0	3
	(1) On the foundation •\$ 0. (2) On foundation managers •\$	0.	3.4	1	3
•	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers \$ 0.				8 /
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?		2	77	v
_	If 'Yes,' attach a detailed description of the activities			্রেজন্ম	∧
	·		* /4	30	
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, or bylaws, or other similar instruments? If 'Yes,' attach a conformed copy of the changes		3	~ _{>} & . •	×. Υ
4 =	Did the foundation have unrelated business gross income of \$1,000 or more during the year?		4 a		$\frac{X}{X}$
	If 'Yes,' has it filed a tax return on Form 990-T for this year?		4 b	N	/A
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?		5	14	X
-	If 'Yes,' attach the statement required by General Instruction T		S 33	W. P. C.	*
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either				3
-	By language in the governing instrument, or				
	 By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state law remain in the governing instrument? 		6	X	ļ~ .1
7	Did the foundation have at least \$5,000 in assets at any time during the year? If 'Yes,' complete Part II, column (c), and Part XV		7	X	<u> </u>
8 a	Enter the states to which the foundation reports or with which it is registered (see instructions)		× 12	1.	J. 75 %
	WI		, 16,		
b	If the answer is 'Yes' to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General		224	11	ľ` .
~	(or designate) of each state as required by General Instruction G ² If 'No,' attach explanation		8ь	_ X	
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 49	942(₁)(5)	A		. :4
-	for calendar year 2014 or the taxable year beginning in 2014 (see instructions for Part XIV)? If 'Yes,' complete F	Part XIV	9		Х
10	Did any persons become substantial contributors during the tax year? If 'Yes,' attach a schedule listing their names				_
	and addresses		10		X
BAA		Fo	rm 99 (J-PF (2	(014)

Form 990-PF (2014) STEVEN SAMPSON CHARITABLE FUND, INC. Part VII-A Statements Regarding Activities (continued)	39-	-17965	26	F	Page 5
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)	•	-	11		Х
Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified padvisory privileges? If 'Yes,' attach statement (see instructions)		ST 5	12	Х	
13 Did the foundation comply with the public inspection requirements for its annual returns and exempt Website address ► N/A	otion applica	ation?	13	X	ļ <u>.</u>
	one no •	414-3	51-4	500	
15 Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 — Check he and enter the amount of tax-exempt interest received or accrued during the year	ere	<u></u>	N/A		
16 At any time during calendar year 2014, did the foundation have an interest in or a signature or other author bank, securities, or other financial account in a foreign country?		15	16	Yes	N/A No
See the instructions for exceptions and filing requirements for FinCEN Form 114, (formerly TD F 90 enter the name of the foreign country	-22 1) If 'Y	'es,'	16	,	Х
Part VII-B Statements Regarding Activities for Which Form 4720 May Be Required			٠	<u> </u>	<u></u>
File Form 4720 if any item is checked in the 'Yes' column, unless an exception applies.		·	*	Yes	No
1 a During the year did the foundation (either directly or indirectly)			7 ,		
(1) Engage in the sale or exchange, or leasing of property with a disqualified person?	Yes	X No	, î		,
(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person?	Yes	X No		•	
(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?	Yes Yes	X No X No	4 、	,	
(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	X No	24.5	á s	X.•
(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	XNo	13.12		\$` *
b If any answer is 'Yes' to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described Regulations section 53 4941(d)-3 or in a current notice regarding disaster assistance (see instruction)	ın ns) ⁷		1 b	N	/A
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 act that were not corrected before the first day of the tax year beginning in 2014?	ts,		1 c	,	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))				N _s	
a 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?	Yes	XNo	100 m		1
If 'Yes,' list the years ► 20 , 20 , 20 , 20		_			
b Are there any years listed in 2a for which the foundation is not applying the provisions of section 49 (relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 49 all years listed, answer 'No' and attach statement — see instructions)			2 b	N	/A
c If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the yea ▶ 20 , 20 , 20 , 20 , 20	rs here		, , , , , , , , , , , , , , , , , , ,		, (
3 a Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year?	Yes	X No			\$.
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 approby the Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest, (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)	on oved r	_	3 b	,, `; N	/ <u>A</u>
4 a Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?			4 a		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 2014?			4 b		x
BAA		Fo	orm 99 0	0-PF (2014)

Form 990-PF (2014) STEVEN SAMPSON CHA			39-17	96526	Page				
Part VII-B Statements Regarding Activit	······································	1 4720 May Be Req	uired (continued)						
5 a During the year did the foundation pay or incu	•		п., п						
(1) Carry on propaganda, or otherwise attempt			Yes X	No	^ _				
(2) Influence the outcome of any specific pub on, directly or indirectly, any voter registra	lic election (see section ation drive?	n 4955), or to carry	Yes X	No					
(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) Yes X No									
(5) Provide for any purpose other than religio educational purposes, or for the prevention	us, charitable, scientific in of cruelty to children	c, literary, or or animals?	Yes X	No ·	*				
b If any answer is 'Yes' to 5a(1)-(5), did any of described in Regulations section 53 4945 or in (see instructions)?	the transactions fail to one a current notice regard	qualify under the excep ding disaster assistance	tions	5 b	N/A				
Organizations relying on a current notice rega	rding disaster assistanc	ce check here	▶	* *					
c If the answer is 'Yes' to question 5a(4), does tax because it maintained expenditure respon	sibility for the grant?		N/A Yes] No					
If 'Yes,' attach the statement required by Reg					35.				
6 a Did the foundation, during the year, receive are on a personal benefit contract?			∐Yes X]No					
b Did the foundation, during the year, pay prem If 'Yes' to 6b, file Form 8870	iums, directly or indirec	tly, on a personal bene	fit contract?	6 b	X				
7a At any time during the tax year, was the found	dation a party to a proh	ibited tax shelter transa	ection? Yes X	No					
b If 'Yes,' did the foundation receive any procee				N/A 7b					
Part VIII Information About Officers, D				mployees	7				
and Contractors									
1 List all officers, directors, trustees, foundation				1					
(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 other all	e account, lowances				
STEVEN J. SAMPSON	PRES/TRS/DIR	0.	0.		0				
16 RUE DE BIRAGUE PARIS, 75004 FRANCE	0.10								
ANN G. MANDELMAN 6938A N. SANTA MONICA BLVD. FOX POINT, WI 53217	VP/SEC/DIR 0.20	0.	0.		0				
SCOTT A. SAMPSON	DIRECTOR	0.	0.		0				
6938A N. SANTA MONICA BLVD.	0.10	j			Ū				
FOX POINT, WI 53217				ļ					
2 Compensation of five highest-paid employees (of	her than those included o	on line 1 – see instructio	ns). 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 other all	e account, lowances				
NONE									
									
			-						
				<u> </u>					
Table number of other amplitudes and area \$50,000			•						
Total number of other employees paid over \$50,000	<u>'</u>			1	0				

Part VIII Information About Officers, I and Contractors (continued)		39-179 htion Managers, Highly Paid E	
3 Five highest-paid independent contractors	for professional services (see ins	ructions). If none, enter 'NONE.'	· · · · · · · · · · · · · · · · · · ·
(a) Name and address of each person pa	aid 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			
List the foundation's four largest direct charitable activities during organizations and other beneficiaries served, conferences conveil	ng the tax year Include relevant statistical in	nformation such as the number of	Expenses
1 N/A			
2/22			
2			
3			
	W		
4			
			···
Part(IX-B Summary of Program-Relate	d Investments (see instructi	ons)	
Describe the two largest program-related investments	made by the foundation during the ta	ax year on lines 1 and 2	Amount
1			
<u>N/A</u>			
2			
All il			
All other program-related investments. See instru	CHOFIS		
3			
Total. Add lines 1 through 3		-	0.
BAA			Form 990-PF (2014)
			

Form 990-PF (2014) STEVEN SAMPSON CHARITABLE FUND, INC.	9-1796526	Page 8
Part X Minimum Investment Return (All domestic foundations must complete this part. For see instructions.)	reign founda	ations,
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	1 a	610,679.
b Average of monthly cash balances	1 b	27,315.
c Fair market value of all other assets (see instructions)	1 c	
d Total (add lines 1a, b, and c)	1 d	637,994.
e Reduction claimed for blockage or other factors reported on lines 1a and 1c		
(attach detailed explanation) 1 e 0.]	
2 Acquisition indebtedness applicable to line 1 assets	2	0.
3 Subtract line 2 from line 1d	3	637,994.
4 Cash deemed held for charitable activities Enter 1-1/2% of line 3 (for greater amount, see instructions)	4	9,570.
5 Net value of noncharitable-use assets. Subtract line 4 from line 3 Enter here and on Part V, line 4	5	628,424.
6 Minimum investment return. Enter 5% of line 5	6	31,421.
Part XI. Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private opera and certain foreign organizations check here ► ☐ and do not complete this part.)	iting foundat	ions
1 Minimum investment return from Part X, line 6	1	31,421.
2a Tax on investment income for 2014 from Part VI, line 5 2,803.	-	
b Income tax for 2014 (This does not include the tax from Part VI) 2 b]*.	
c Add lines 2a and 2b	2 c	2,803.
3 Distributable amount before adjustments. Subtract line 2c from line 1	3	28,618.
4 Recoveries of amounts treated as qualifying distributions	4	
5 Add lines 3 and 4	5	28,618.
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	28,618.
Part XII Qualifying Distributions (see Instructions)		
Amounts paid (including administrative expenses) to accomplish charitable, etc, purposes	3.7	
a Expenses, contributions, gifts, etc - total from Part I, column (d), line 26	1 a	28,903.
b Program-related investments — total from Part IX-B	1 ь	
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)	3 b	
4 Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4	4	28,903.
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	

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

6 Adjusted qualifying distributions. Subtract line 5 from line 4

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28,903.

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Part XIII Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2013	(c) 2013	(d) 2014
1 Distributable amount for 2014 from Part XI, line 7		,		28,618.
2 Undistributed income, if any, as of the end of 2014				
a Enter amount for 2013 only		`	28,903.	
b Total for prior years 20, 20, 20		0.		
3 Excess distributions carryover, if any, to 2014)	1/4	
a From 2009	<u>,</u>	***	*	
b From 2010		·		
c From 2011		,	12	
d From 2012		`		
e From 2013]	, , , , , , , , , , , , , , , , , , ,		
f Total of lines 3a through e	0.	10 3 3 3 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		
4 Qualifying distributions for 2014 from Part	1.7		2	•
XII, line 4 * \$ 28,903.	· / î			
a Applied to 2013, but not more than line 2a	, · ·	`	28,903.	
b Applied to undistributed income of prior years	, ,			
(Election required – see instructions)	4,5,1	0.		
c Treated as distributions out of corpus				,
(Election required – see instructions).	0.			
d Applied to 2014 distributable amount	· , .			0.
e Remaining amount distributed out of corpus	0.	3,43,43	**************************************	107.605
5 Excess distributions carryover applied to 2014 (If an amount appears in column (d), the	0.			0.
same amount must be shown in column (a))	6.375			No. of the second
6 Enter the net total of each column as		grifi to a side of the		, , , , ,
indicated below:	1000			`\
a Corpus Add lines 3f, 4c, and 4e Subtract line 5	0.		BEST AND	***
b Prior years' undistributed income Subtract	**************************************	0		
line 4b from line 2b	1	0.	562 8404.72.53	
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)		0		
tax has been previously assessed		0.		1 2 3 2 5
d Subtract line 6c from line 6b Taxable amount – see instructions		٥		
		U.		
e Undistributed income for 2013 Subtract line 4a from line 2a. Taxable amount — see instructions			n	
The Za. Taxable amount — See mistractions				288 A-3.5
f Undistributed income for 2014 Subtract lines				
4d and 5 from line 1. This amount must be distributed in 2015.				28,618.
7 Amounts treated as distributions out of				20,010.
corpus to satisfy requirements imposed by				
section 170(b)(1)(F) or 4942(g)(3) (Electión may be required – see instructions)	0.			
8 Excess distributions carryover from 2009 not applied on line 5 or line 7 (see instructions)	0.			West of the country o
	<u>.</u>	· · · · · · · · · · · · · · · · · · ·		
9 Excess distributions carryover to 2015. Subtract lines 7 and 8 from line 6a	0.	, , , , , , , , , , , , , , , , , , ,		
10 Analysis of line 9		7. 4.	7 x 3 y 4 y	5.1.
a Excess from 2010	\ \\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\			* ()
b Excess from 2011				, ax*
c Excess from 2012				
d Excess from 2013				*
e Excess from 2014				,
				C. 000 DE (0014)

Part XIV Private Operating Founda			t VII-A guesties	9)	N/A
Part XIV Private Operating Founda 1 a If the foundation has received a ruling or determined in the property of the private					N/ A
is effective for 2014, enter the date of the	ruling				T 4040()(5)
b Check box to indicate whether the founda		erating foundation of		4942(j)(3) or	4942(j)(5)
2a Enter the lesser of the adjusted net income from Part I or the minimum investment return from Part X for each year listed	Tax year (a) 2014	(b) 2013	Prior 3 years (c) 2012	(d) 2011	(e) Total
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				- 21	
 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					
 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		<u> </u>		05.000	
Part XV Supplementary Information assets at any time during the	(Complete this) See year — see in	part only if the	toundation had	\$5,000 or more	ın
1 Information Regarding Foundation Mana		30000011317			
a List any managers of the foundation who have	e contributed more the	han 2% of the total c	ontributions received	by the foundation befo	ore the
close of any tax year (but only if they hav NONE	e contributed more	than \$5,000) (See	section 507(d)(2))		
b List any managers of the foundation who own	10% or more of the	stock of a corporation	on (or an equally large	portion of the owners	ship of
a partnership or other entity) of which the NONE	foundation has a 1	0% or greater inter	est		
2 Information Regarding Contribution, Gra	nt. Gift. Loan. Scho	olarship, etc. Progra	ams:		
Check here ► X if the foundation only marequests for funds. If the foundation make complete items 2a, b, c, and d	kes contributions to	preselected charitab	le organizations and o	does not accept unsol nizations under othe	icited er conditions,
a The name, address, and telephone number o	r e-mail address of t	he person to whom a	applications should be	addressed	
b The form in which applications should be	submitted and infor	mation and materia	als they should inclu	de	
c Any submission deadlines					· · · · · · · · · · · · · · · · · · ·
d Any restrictions or limitations on awards,	such as by geograp	phical areas, charita	able fields, kinds of i	nstitutions, or other	factors

TEEA0310L 06/17/14

Form **990-PF** (2014)

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3 Grants and Contributions Paid During the Yo	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	Purpose of grant or contribution	Amount						
	substantial contributor	recipient								
Name and address (home or business) a Paid during the year SEE STATEMENT 6	substantial contributor	recipient	CONTINUENT							
Total		l	► 3a	28,903.						
b Approved for future payment										
Total			► 31)						

Part XVI-A Analysis of Income-Producing Activities

Cator area	s amounts unless otherwise indicated	Uprolated	business income	Evaluded by s	ection 512, 513, or 514	
- ,	ram service revenue	(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	(e) Related or exempt function income (See instructions)
_				_		
		1				
		† ·- ·- †				
e						
f						
g Fees	and contracts from government agencies					
2 Mem	bership dues and assessments					
3 Interes	st on savings and temporary cash investments		 			
4 Divid	ends and interest from securities			14	1,940.	
-	ental income or (loss) from real estate		·			*
	-financed property					
	debt-financed property					
	ntal income or (loss) from personal property					
	r investment income		·			
	r (loss) from sales of assets other than inventory			18	143,618.	
	ncome or (loss) from special events					· · · · · · · · · · · · · · · · · · ·
10 Gross	s profit or (loss) from sales of inventory			12 49 2		77 . 3
11 Other	r revenue	42 33 6		931		
a						
ь						
c						
d		-				
e		1 43 × ×		* 88	145 550	
	otal Add columns (b), (d), and (e)				145,558.	
		20 . 20			12	145 550
13 Total	l. Add line 12, columns (b), (d), and (e)				13	145,558.
13 Total					13	145,558.
13 Total (See works	l. Add line 12, columns (b), (d), and (e)	ons)	hment of Exem	pt Purpose		145,558.
13 Total (See works	Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculation. Relationship of Activities to the	ons) Accomplis			s	
13 Total (See works	Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculation. Relationship of Activities to the	ons) Accomplis			s	
13 Total (See works Part VVI Line No.	l. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculations.	ons) Accomplis			s	
13 Total (See works Part XVI Line No.	Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculation. Relationship of Activities to the	ons) Accomplis			s	
13 Total (See works Part VVI Line No.	Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculation. Relationship of Activities to the	ons) Accomplis			s	
13 Total (See works Part VVI Line No.	Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculation. Relationship of Activities to the	ons) Accomplis			s	
13 Total (See works Part VVI Line No.	Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculation. Relationship of Activities to the	ons) Accomplis			s	
13 Total (See works Part VVI Line No.	Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculation. Relationship of Activities to the	ons) Accomplis			s	
13 Total (See works Part VVI Line No.	Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculation. Relationship of Activities to the	ons) Accomplis			s	
13 Total (See works Part VVI Line No.	Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculation. Relationship of Activities to the	ons) Accomplis			s	
13 Total (See works Part VVI Line No.	Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculation. Relationship of Activities to the	ons) Accomplis			s	
13 Total (See works Part VVI Line No.	Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculation. Relationship of Activities to the	ons) Accomplis			s	
13 Total (See works Part VVI Line No.	Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculation. Relationship of Activities to the	ons) Accomplis			s	
13 Total (See works Part VVI Line No.	Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculation. Relationship of Activities to the	ons) Accomplis			s	
13 Total (See works Part VVI Line No.	Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculation. Relationship of Activities to the	ons) Accomplis			s	
13 Total (See works Part VVI Line No.	Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculation. Relationship of Activities to the	ons) Accomplis			s	
13 Total (See works Part VVI Line No.	Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculation. Relationship of Activities to the	ons) Accomplis			s	
13 Total (See works Part VVI Line No.	Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculation. Relationship of Activities to the	ons) Accomplis			s	
13 Total (See works Part VVI Line No.	Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculation. Relationship of Activities to the	ons) Accomplis			s	
13 Total (See works Part VVI Line No.	Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculation. Relationship of Activities to the	ons) Accomplis			s	
13 Total (See works Part VVI Line No.	Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculation. Relationship of Activities to the	ons) Accomplis			s	
13 Total (See works Part VVI Line No.	Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculation. Relationship of Activities to the	ons) Accomplis			s	
13 Total (See works Part VVI Line No.	Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculation. Relationship of Activities to the	ons) Accomplis			s	
13 Total (See works Part VVI Line No.	Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculation. Relationship of Activities to the	ons) Accomplis			s	
13 Total (See works Part VVI Line No.	Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculation. Relationship of Activities to the	ons) Accomplis			s	

Form 990-PF (2014) STEVEN SAMPSON CHARITABLE FUND, INC. 39-1796526 Part XVII Information Regarding Transfers To and Transactions and Relationships With Noncharitable

	Ex	empt Organi	zations									
d-	escribed in	anization directl section 501(c)	of the Code (of	ngage in any o ther than section	f the following wi on 501(c)(3) orga	th any oth	ner organization	on 527,			Yes	No
		3		a noncharitable	e exempt organiz	ation of						
	1) Cash		3							1 a (1)		х
	2) Other as	ssets								1 a (2)		X
	ther transa											
			ncharitable exe	mot organizatio	on					1 b (1)		Х
-	-		om a noncharita	· -						1 b (2)		X
•	•		ipment, or othe		,aa					1 b (3)		X
•	•	rsement arrang	•	. 455613					—	1 b (4)		X
•	•	r loan guarante								1 b (5)		X
•	•	•	s or membersh	in or fundraisin	a solicitations				-	1 b (6)		X
•	•			•	s, or paid employ	-00			<u> </u>	1 c		X
• •	marking of it	aciiiles, equipii	nent, maning na	its, other asset.	s, or paid employ	ccs			L			
d If th ar	the answe le goods, ot ny transact	er to any of the ther assets, or settion or sharing a	above is 'Yes,' ervices given by t arrangement, st	complete the fo the reporting fou how in column i	ollowing schedule indation If the four (d) the value of the	Column ndation red he goods,	(b) should alverved less that other assets,	vays show the fair market or services	ne fair mar value in received	ket valı	ue of	
(a) Line	no (b)	Amount involved	(c) Name o	of noncharitable exe	mpt organization	(d)	Description of tran	sfers, transaction	ons, and shar	ring arran	gement	s
N/A												
								_				
						-						
									·-···			
												
						 						
												
												
												
d€	escribed in 'Yes,' com	section 501(c) plete the follow	of the Code (ot ving schedule	her than sectio	to, one or more to so to, one or more to so to s	section !	52 ⁷ ?) December		Yes	X	No
	(a) Na	me of organizal	แอก	(b) Typ	e of organization		(c) Description	i or relatio	ınsnıp		
N/A												
					<u> </u>							
	Under penalti correct, and c	es of perjury, I decla complete Declaration	are that I have exami n of preparer (other t	ned this return, inclu han taxpayer) is bas	uding accompanying so sed on all information o	hedules and of which prep	statements, and to arer has any know	o the best of my l Hedge	knowledge an	id belief if	t is true.	
Sign	1	1/ 1.							ſ	May the I	RS disc	uss
Here	$\propto l$	MMad	1		5/13/15		-Sec. 4		1	this return preparer	shown t	elow
	Signature o	of officer or trustee	WY \		Date	Title	e	ory		(see instr	1	
		t/Type preparer's na	ame	Preparer's			Date	Charli	X _{ii} Pi		Yes	No
		**		1~	Slt		5-13-2015	Check	△"		מיר.	
Paid	—	VID SCHUL			· <u>`</u>		3.12.001			00024	315	
Prepar	- 1	_	GOOSSEN &					Firm's EIN	45-411	9992		
Use O	nly Firm	_	5215 NORTH		ROAD			-				
			GLENDALE,	WI 53217				Phone no	(414)			
BAA									F	orm 99 (0-PF (2014)

2	N	1	Δ
_	u		-

FEDERAL STATEMENTS

PAGE 1

STEVEN SAMPSON CHARITABLE FUND, INC.

39-1796526

STATEMENT 1
FORM 990-PF, PART I, LINE 16B
ACCOUNTING FFFS

		(A) EXPENSES PER BOOKS	(B) NET INVESTMENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
TAX ADVISE AND PREPARATION	TOTAL	\$ 5,215. \$ 5,215.	\$ 5,215. \$ 5,215.	\$ 0.	\$ 0.

STATEMENT 2 FORM 990-PF, PART I, LINE 16C OTHER PROFESSIONAL FEES

	(A) EXPENSE: PER BOOK		(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
INVESTMENT FEES	<u> </u>	\$0. \$ 180. \$0. \$ 180.	\$ 0.	\$ 0.

STATEMENT 3 FORM 990-PF, PART I, LINE 23 **OTHER EXPENSES**

		(A) EXPENSES PER BOOKS	(B) NET INVESTMENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
ANNUAL REPORT FEE BANK SERVICE CHARGES POSTAGE	TOTAL	\$ 10. 16. 13. \$ 39.	\$ 16. 13. \$ 29.	<u>\$</u> 0.	\$ 0.

STATEMENT 4 FORM 990-PF, PART II, LINE 10B INVESTMENTS - CORPORATE STOCKS

CORPORATE STOCKS	VALUATION METHOD	BOOK VALUE	FAIR MARKET VALUE
CORPORATE STOCK - MERRILL LYNCH ACCOUNT	COST \$	562,73 <u>7</u> .	\$ 633,187.
	TOTAL Ş	562,737.	\$ 633,187.

STATEMENT 5 FORM 990-PF, PART VII-A, LINE 12 **EXPLANATION OF DISTRIBUTION TO DONOR ADVISED FUND**

THE STEVEN SAMPSON CHARITABLE FUND, INC. TREATED THE ENTIRE DISTRIBUTION OF \$8,903 TO THE JEWISH COMMUNITY FOUNDATION INC, SPECIFICALLY EARMARKED FOR THE STEVEN J. SAMPSON PHILANTHROPIC FUND, AS A QUALIFYING DISTRIBUTION ON THE 2014 TAX RETURN. FURTHERMORE, DISTRIBUTIONS FROM THE STEVEN J. SAMPSON PHILANTHROPIC FUND WILL BE

FEDERAL STATEMENTS

PAGE 2

STEVEN SAMPSON CHARITABLE FUND, INC.

39-1796526

STATEMENT 5 (CONTINUED) FORM 990-PF, PART VII-A, LINE 12 EXPLANATION OF DISTRIBUTION TO DONOR ADVISED FUND

MADE TO ACCOMPLISH THE PURPOSE SET FORTH IN INTERNAL REVENUE CODE SECTION 170(C)(2)(B).

STATEMENT 6 FORM 990-PF, PART XV, LINE 3A RECIPIENT PAID DURING THE YEAR

NAME AND ADDRESS	DONEE RELATIONSHIP	FOUND- ATION STATUS	PURPOSE O GRANT	F	AMOUNT
THE JEWISH COMMUNITY FOUNDATION INC 1360 N. PROSPECT AVENUE MILWAUKEE, WI 53202	TUBERT TORONT	PUB CHAR	CHARITABLE	\$	8,903.
MILWAUKEE UNIVERSITY SCHOOL 2100 W. FAIRY CHASM RD MILWAUKEE, WI 53217		PUB CHAR	CHARITABLE		1,000.
COLUMBIA UNIVERSITY 622 WEST 113TH STREET, MAIL CODE 45 NEW YORK, NY 10025		PUB CHAR	CHARITABLE		1,000.
HARVARD UNIVERSITY 124 MOUNT AUBURN STREET CAMBRIDGE, MA 02138		PUB CHAR	CHARITABLE		1,000.
AMERICAN FRIENDS OF THE MEDEM LIBRARY 115 EAST 89TH STREET, SUITE 5A NEW YORK, NY 10128		PUB CHAR	CHARITABLE		5,000.
MILWAUKEE JEWISH FEDERATION 1360 N. PROSPECT MILWAUKEE, WI 53202		PUB CHAR	CHARITABLE		10,000.
THE BRIDGE MENTAL HEALTH & HSG SOLUTIONS 248 WEST 108TH STREET NEW YORK, NY 10025		PUB CHAR	CHARITABLE		1,000.
JBFCS 135 WEST 50TH ST - 6TH FLOOR NEW YORK, NY 10020		PUB CHAR	CHARITABLE		1,000.

TOTAL \$ 28,903.