Form 990-PF

Return of Private Foundation

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

OND NO 1343-0032	
2017	
Open to Public Inspection	ıП

▶ Do not enter social security numbers on this form as it may be made public. Department of the Treasury ► Go to www.rs.gov/Form990PF for instructions and the latest information. and ending For calendar year 2017 or tax year beginning A Employer identification number Name of foundation 20-1878599 SMS FOUNDATION, INC. Number and street (or P O box number if mail is not delivered to street address) B Telephone number 608-577-8260 PO BOX 5324 City or town, state or province, country, and ZIP or foreign postal code C If exemption application is pending, check her MADISON, WI 53705-0324 Initial return of a former public charity D 1. Foreign organizations, check here G Check all that apply: Initial return Final return Amended return 2. Foreign organizations meeting the 85% test, check here and attach computation Address change Name change X Section 501(c)(3) exempt private foundation H Check type of organization E If private foundation status was terminated 01 Section 4947(a)(1) nonexempt charitable trust Other taxable private foundation under section 507(b)(1)(A), check here I Fair market value of all assets at end of year | J | Accounting method If the foundation is in a 60-month termination under section 507(b)(1)(B), check here Other (specify) (from Part II, col. (c), line 16) 8,255,249. (Part I, column (d) must be on cash basis.) ▶\$ Part I Analysis of Revenue and Expenses
(The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a)) (d) Disbursements (a) Revenue and (b) Net investment (c) Adjusted net expenses per books (cash basis only) 580,500 N/A Contributions, gifts, grants, etc., received Check It the foundation is not required to attach Sch B STATEMENT 117,035 117,035 4 Dividends and interest from securities 5a Gross rents b Net rental income or (loss) STATEMENT 261,098 6a Net gain or (loss) from sale of assets not on line 10 b Gross sales price for all assets on line 6a 1,013,784. 287,558 7 Capital gain net income (from Part IV, line 2) 8 Net short-term capital gain Income modifications Gross sales less returns and allowances b Less Cost of goods sold c Gross profit or (loss) SCANNED MAY 11 Other income 404,593. 958,633. 12 Total. Add lines 1 through 11 Ō. Compensation of officers, directors, trustees, etc. 14 Other employee salaries and wages 15 Pension plans, employee benefits 0. 818. STMT 3 16a Legal fees 0. 2,549. 2,549. STMT 4 b Accounting fees STMT 5 20,773. 0. c Other professional fees 17 Interest 3,900 STMT 6 Taxes 22 Depreciation and depletion 3 2018 Occupancy Travel, conferences, and meetings 22 Printing and publications
23 Other expenses
24 Total operating and administrative
expenses. Add lines 13 through 23
25 Contributions, gifts, grants paid OGDE 28,040. 23,322 435,000. 435,000. 25 Contributions, gifts, grants paid 26 Total expenses and disbursements. 23,322 435,000. 463,040 Add lines 24 and 25 27 Subtract line 26 from line 12: 495,593 2 Excess of revenue over expenses and disbursements 381,271 b Net investment income (if negative, enter -0-) N/A c Adjusted net income (if negative, enter -0-)

723501 01-03-18 LHA For Paperwork Reduction Act Notice, see instructions

Form 990-PF (2017)

For	m 99	0-PF (2017) SMS FOUNDATION, INC.	20-1878599			Page 2
<u></u>	art	Balance Sheets Attached schedules and amounts in the description	Beginning of year		of year	
<u> </u>	art	column should be for end-of-year amounts only	(a) Book Value	(b) Book Value	(c) Fair Market	
	1	Cash - non-interest-bearing	22,571.	65,304	. 65	<u>,304.</u>
	2	Savings and temporary cash investments	367,168.	462,011	. 462	,011.
	3	Accounts receivable				
		Less, allowance for doubtful accounts				
	4	Pledges receivable ►			1	
		Less allowance for doubtful accounts ▶			<u> </u>	
	5	Grants receivable				
	6	Receivables due from officers, directors, trustees, and other			1	
		disqualified persons				
	7	Other notes and loans receivable			-	
		Less: allowance for doubtful accounts				
s	8	Inventories for sale or use				
ssets	9	Prepaid expenses and deferred charges				
AS	10a	Investments - U S. and state government obligations				
		Investments - corporate stock STMT 8	6,667,652.	7,727,934	. 7,727	<u>,934.</u>
	c	Investments - corporate bonds				
	11	Investments - land buildings, and equipment basis				
		Less accumulated depreciation				
	12	Investments - mortgage loans				
	13	Investments - other				
	14	Land, buildings, and equipment basis				_
		Less accumulated depreciation				
	15	Other assets (describe				
	16	Total assets (to be completed by all filers - see the				
	ļ	instructions Also, see page 1, item I)	7,057,391.	8,255,249	. 8,255	,249.
	17	Accounts payable and accrued expenses				
	18	Grants payable				
Ø	19	Deferred revenue				
Liabilities	20	Loans from officers, directors, trustees, and other disqualified persons			_	
ᇴ	21	Mortgages and other notes payable				
تَ	22	Other liabilities (describe)				
_	23	Total liabilities (add lines 17 through 22)	0.	0	<u>. </u>	
		Foundations that follow SFAS 117, check here				
		and complete lines 24 through 26, and lines 30 and 31				
ces	24	Unrestricted			_	
	25	Temporarily restricted				
Bal	26	Permanently restricted			_	
Pu		Foundations that do not follow SFAS 117, check here				
Assets or Fund Balan		and complete lines 27 through 31.	_]	_	. 1	
õs	27	Capital stock, trust principal, or current funds	0.		<u>-</u>	
set	28	Paid-in or capital surplus, or land, bldg , and equipment fund	0.		<u>-</u>	
As	29	Retained earnings, accumulated income, endowment, or other funds	7,057,391.	8,255,249		
Net	30	Total net assets or fund balances	7,057,391.	8,255,249	<u> </u>	
_						
_	31	Total liabilities and net assets/fund balances	7,057,391.	8,255,249	<u> </u>	
F	art	III Analysis of Changes in Net Assets or Fund Ba	alances			
_	Tota	Il net assets or fund balances at beginning of year - Part II, column (a), line	30			
1		st agree with end-of-year figure reported on prior year's return)	••		1 7,057	7,391.
2	•	er amount from Part I, line 27a		<u>†</u>	2 495	5,593.
		er increases not included in line 2 (itemize)	SEE ST	ATEMENT 7		2,265.
3		lines 1, 2, and 3	200 01			5,249.
		reases not included in line 2 (itemize)		ļ	5	0.
		il net assets or fund balances at end of year (line 4 minus line 5) - Part II, co	olumn (b), line 30			5,249.
0	ıUta	in not assets of runa palanoes at the or year fine 4 millos line of - Fart II, of	organii (o)) niio oo			-PF (2017)

SMS FOUNDATION, INC. 20-1878599 Form 990-PF (2017) Page 3 Part IV Capital Gains and Losses for Tax on Investment Income (b) How acquired (c) Date acquired (d) Date sold (a) List and describe the kind(s) of property sold (for example, real estate, Purchase (mo., day, yr.) (mo., day, yr.) 2-story brick warehouse, or common stock, 200 shs. MLC Co.) D - Donation 1a PUBLICLY TRADED SECURITIES-PURCHASED VARIOUS VARIOUS b PUBLICLY TRADED SECURITIES-ACQUIRED BY VARIOUS VARIOUS c DONATION D d CAPITAL GAINS DIVIDENDS (g) Cost or other basis (h) Gain or (loss) (f) Depreciation allowed (e) Gross sales price (or allowable) plus expense of sale ((e) plus (f) minus (g)) 736,190. 673,296 62,894. 47,070. 100,000. 52,930 177,594. 177,594 d Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69. (I) Gains (Col. (h) gain minus col. (k), but not less than -0-) or (j) Adjusted basis (k) Excess of col. (i) Losses (from col. (h)) (i) FMV as of 12/31/69 as of 12/31/69 over col. (j), if any 62,894. 47,070. 177,594. d If gain, also enter in Part I, line 7 287,558. 2 Capital gain net income or (net capital loss) If (loss), enter -0- in Part I, line 7 3 Net short-term capital gain or (loss) as defined in sections 1222(5) and (6) If gain, also enter in Part I, line 8, column (c). N/A If (loss), enter -0- in Part I, line 8 Part V Qualification Under Section 4940(e) for Reduced Tax on Net Investment Income (For optional use by domestic private foundations subject to the section 4940(a) tax on net investment income.) If section 4940(d)(2) applies, leave this part blank Yes X No Was the foundation liable for the section 4942 tax on the distributable amount of any year in the base period? If "Yes," the foundation doesn't qualify under section 4940(e). Do not complete this part. Enter the appropriate amount in each column for each year, see the instructions before making any entries (d)
Distribution ratio
(b) divided by col. (c)) (b) (c) Base period years Calendar year (or tax year beginning in) Net value of noncharitable-use assets Adjusted qualifying distributions 6,701,862 .054854 367,626. 2016 355,199. 6,553,164. .054203 2015 6,575,873. 324,746. .049384 2014 779,302. 279,859 .048424 2013 4.708.163. .048617 2012 228,898. .255482 2 Total of line 1, column (d) 3 Average distribution ratio for the 5-year base period - divide the total on line 2 by 5.0, or by the number of years .051096 the foundation has been in existence if less than 5 years 3 7,471,419. 4 Enter the net value of noncharitable-use assets for 2017 from Part X, line 5 381,760. 5 Multiply line 4 by line 3 3,813. 6 Enter 1% of net investment income (1% of Part I, line 27b) 385,573<u>.</u> 7 Add lines 5 and 6 435,000. 8 Enter qualifying distributions from Part XII, line 4 If line 8 is equal to or greater than line 7, check the box in Part VI, line 1b, and complete that part using a 1% tax rate See the Part VI instructions. Form 990-PF (2017) 723521 01-03-18

	2	
GMG BOIDD MION THO	20.107	0E00 D4
Form 990-PF (2017) SMS FOUNDATION, INC. Part VI Excise Tax Based on Investment Income (Section 4)	/ 20-187	8599 Page 4
		11301 40010113/
1a Exempt operating foundations described in section 4940(d)(2), check here		
Date of ruling or determination letter: (attach copy of letter	it necessary-see instructions)	2 012
b Domestic foundations that meet the section 4940(e) requirements in Part V, check her	re X and enter 1%	3,813.
of Part I, line 27b		
c All other domestic foundations enter 2% of line 27b Exempt foreign organizations, en	, , ,	0.
2 Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations or		3,813.
3 Add lines 1 and 2	3	3,813.
4 Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations o		3,813.
5 Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0	D+	3,813.
6 Credits/Payments:	2 225	
a 2017 estimated tax payments and 2016 overpayment credited to 2017	6a 3,925.	
b Exempt foreign organizations - tax withheld at source		
c Tax paid with application for extension of time to file (Form 8868)	6c 0.	
d Backup withholding erroneously withheld	6d 0.	
7 Total credits and payments Add lines 6a through 6d	7	3,925.
8 Enter any penalty for underpayment of estimated tax. Check here if Form 2220	is attached 8	0.
9 Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed	▶ 9	
10 Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overp		112.
11 Enter the amount of line 10 to be: Credited to 2018 estimated tax	112. Refunded ► 11	0
Part VII-A Statements Regarding Activities		
1a During the tax year, did the foundation attempt to influence any national, state, or local	al legislation or did it participate or intervene in	Yes No
any political campaign?		1a X
b Did it spend more than \$100 during the year (either directly or indirectly) for political	purposes? See the instructions for the definition	1b X
If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and co	opies of any materials published or	
distributed by the foundation in connection with the activities.		
c Did the foundation file Form 1120-POL for this year?		1c X
d Enter the amount (if any) of tax on political expenditures (section 4955) imposed during	ng the year	
(1) On the foundation \blacktriangleright \$ 0 . (2) On foundation mai	nagers. ► \$ 0.	
e Enter the reimbursement (if any) paid by the foundation during the year for political ex		,
managers ▶ \$ 0.		
2 Has the foundation engaged in any activities that have not previously been reported to	the IBS?	2 X
If "Yes," attach a detailed description of the activities.		
3 Has the foundation made any changes, not previously reported to the IRS, in its gover	rning instrument, articles of incorporation, or	
bylaws, or other similar instruments? If "Yes," attach a conformed copy of the change	-	3 X
4a Did the foundation have unrelated business gross income of \$1,000 or more during the		4a X
b If "Yes," has it filed a tax return on Form 990-T for this year?	N/A	4b
5 Was there a liquidation, termination, dissolution, or substantial contraction during the		5 X
If "Yes," attach the statement required by General Instruction T	your	
6 Are the requirements of section 508(e) (relating to sections 4941 through 4945) satis	stand outhers	
By language in the governing instrument, or	neo emer.	
,	ndetery directions that conflict with the state law	
By state legislation that effectively amends the governing instrument so that no main account to account a section of the	idatory directions that conflict with the state law	6 X
remain in the governing instrument?	II I - to Dook II and I / ob and Dook VA /	
7 Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes,"	complete Part II, col. (c), and Part XV	7 X
A Pakadha dara kandal dari da aka a a a a a a a a a a a a a a a a		
8a Enter the states to which the foundation reports or with which it is registered. See ins	tructions.	-
WI		-
b If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to	the Attorney General (or designate)	- <u>.</u>
of each state as required by General Instruction G? If "No," attach explanation		8b X
9 Is the foundation claiming status as a private operating foundation within the meaning	g of section 4942(j)(3) or 4942(j)(5) for calendar	
year 2017 or the tax year beginning in 2017? See the instructions for Part XIV. If "Yes	s," complete Part XIV	g X
10 Did any persons become substantial contributors during the tax year? It "Yes," attach a		10 X
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Form 990-PF (2017) SMS FOUNDATION, INC.			<u> 20-18/859</u>	99	Page 6
Part VII-B Statements Regarding Activities for Which Fo	orm 4720 May Be Re	equired _{(continu}	ied)		
5a During the year, did the foundation pay or incur any amount to				Yes	No
(1) Carry on propaganda, or otherwise attempt to influence legislation (section	4945(e))?	☐ Ye	s X No		
(2) Influence the outcome of any specific public election (see section 4955); or	to carry on, directly or indire				1
any voter registration drive?		Ye	s X No		
(3) Provide a grant to an individual for travel, study, or other similar purposes?	i.	Ye	s 🗓 No		
(4) Provide a grant to an organization other than a charitable, etc., organization	described in section			į	
4945(d)(4)(A)? See instructions		☐ Ye	s X No		1
(5) Provide for any purpose other than religious, charitable, scientific, literary, of	or educational purposes, or fo	Or	i		
the prevention of cruelty to children or animals?		☐ Ye	s X No	l	
b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify und	er the exceptions described i	n Regulations		1	1
section 53.4945 or in a current notice regarding disaster assistance? See instru			N/A	5b	1
Organizations relying on a current notice regarding disaster assistance, check hi	** ******		‴ <i>`</i> ▶□ï □		T
c If the answer is "Yes" to question 5a(4), does the foundation claim exemption from		ned	·· —	i	
expenditure responsibility for the grant?			s No		
If "Yes," attach the statement required by Regulations section 53.4945-5(d).		.,		1	1
6a Did the foundation, during the year, receive any funds, directly or indirectly, to p	av premijime on				
	ay premiuma un	[s X No		
a personal benefit contract?	reand banefit contract?	1 G		6b	x
b Did the foundation, during the year, pay premiums, directly or indirectly, on a pe	ersonal denemi contract?		 '	1	+
If "Yes" to 6b, file Form 8870.			s X No		
7a At any time during the tax year, was the foundation a party to a prohibited tax sl		Ye		71.	+-
b. If Yes, did the foundation receive any proceeds or have any net income attribut	table to the transaction?	Highly	N/A	7b	
Part VIII Information About Officers, Directors, Truste Paid Employees, and Contractors	es, Foundation Mar	nagers, riigniy			
	our componention				
1 List all officers, directors, trustees, and foundation managers and th		(c) Compensation	(d) Contributions to	(a) E	pense
(a) Name and address	(b) Title, and average hours per week devoted	(If not paid,	(d) Contributions to employee benefit plans and deferred	accour	it, other
(a) name and address	to position	`enter'-0-)	compensation	allow	ances
					•
SEE STATEMENT 9		0.	0.		0.
			1		
			ļ		_
2 Compensation of five highest-paid employees (other than those incl	uded on line 1). If none,	enter "NONE."			
	(b) Title, and average		(d) Contributions to employee benefit plans	(e) E	xpense nt, other
(a) Name and address of each employee paid more than \$50,000	hours per week devoted to position	(c) Compensation	employee benefit plans and deferred compensation	accour	vances
NONE			·		
				i	
				l	
	<u> </u>		<u> </u>		
		+	 	 	
			1		
		 		 	
	<u> </u>	1	<u> </u>	1	0
Total number of other employees paid over \$50,000				990-P	F (2017)

Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors (continued)	8599 Page 7
3 Five highest-paid independent contractors for professional services. If none, enter "NONE."	
(a) Name and address of each person paid more than \$50,000 (b) Type of service	(c) Compensation
NONE	
	
	<u>▶</u>] 0
Part IX-A Summary of Direct Charitable Activities	
List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of organizations and other beneficiaries served, conferences convened, research papers produced, etc	Expenses
1 N/A	
1	
2	
3	
4	
4	
Part IX-B Summary of Program-Related Investments	
Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2.	Amount
1 N/A	
2	
<u> </u>	
All other program-related investments. See instructions.	-
3	
	
Total. Add lines 1 through 3	0.
	Form 990-PF (2017

Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes:		
Average monthly fair market value of securities	1 <u>a</u>	7,397,424. 187,773.
b Average of monthly cash balances	1b	187,773.
c Fair market value of all other assets	1c	
d Total (add lines 1a, b, and c)	1d	7,585,197.
Reduction claimed for blockage or other factors reported on lines 1a and		
1c (attach detailed explanation)	0.	
Acquisition indebtedness applicable to line 1 assets	2	0.
Subtract line 2 from line 1d	3	7,585,197.
Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions)	4	113,778.
Net value of noncharitable-use assets Subtract line 4 from line 3. Enter here and on Part V, line 4	5	7,471,419.
Minimum investment return. Enter 5% of line 5	6	373,571.
Part XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating f	foundations and certain	
foreign organizations, check here 🕨 🔛 and do not complete this part.)		
Minimum investment return from Part X, line 6	1	373,571
a Tax on investment income for 2017 from Part VI, line 5	3,813.	
Income tax for 2017. (This does not include the tax from Part VI.)		
Add lines 2a and 2b	2c	3,813
Distributable amount before adjustments. Subtract line 2c from line 1	3	369,758
Recoveries of amounts treated as qualifying distributions	4	_0
Add lines 3 and 4	5	369,758
Deduction from distributable amount (see instructions)	6	0
Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1	7	369,758
Part XII Qualifying Distributions (see instructions)		
Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes		
Expenses, contributions, gifts, etc total from Part I, column (d), line 26	1a	435,000
Program-related investments - total from Part IX-B	1b	0
Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes	2	····
Amounts set aside for specific charitable projects that satisfy the		
Suitability test (prior IRS approval required)	3a	
Cash distribution test (attach the required schedule)	3b	
Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4	4	435,000
Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment	i T	
	1 1	2 012
income Enter 1% of Part I, line 27b	5	3,813 431,187

Part XIII	Undistributed	Income	(see instructions)
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Distributibate amount for 2017 from Part XI, Inter 7 369, 758.		(a) Corpus	(b) Years prior to 2016	(c) 2016	(d) 2017
2. Understander deement, et eye, and a few and of 2017 5. Total for princy years 0. 3. Excess distributions carryover, if any, to 2017; a From 2012 5. From 2013 6. From 2016 7. Total of the sa 3 through e 0. 4. Qualitying distributions for 2017 from Part XII, line 4. Ps _ 435, 0.00. 3. Applied to 2016, but not more than hair 2a 4. Applied to 2016, but not more than hair 2a 4. Applied to 2016, but not more than hair 2a 4. Applied to 2016 to 2016, but not more than hair 2a 4. Applied to 2016, but not more than hair 2a 4. Applied to 2016 to 2016 to 2016 to 2017 from part XII, line 4. Ps _ 435, 0.00. 3. Applied to 2016, but not more than hair 2a 4. Applied to 2016 t					
a Fenter amount for 2016 only b Total for prior years Discuss distributions carryover, if any, to 2017; a From 2013 b From 2013 c From 2014 d From 2015 e From 2016 d From 2016 d From 2016 d Total of these 3s through e O. 4 Applied to 2016, but not more than Inne 2a Applied to 2016, but not more than Inne 2a Applied to 2016, but not more than Inne 2a Applied to 2016, but not more than Inne 2a C Tratel as dischibutions out of corepus (Election required - see instructions) O. 2955, 940. Treated as dischibutions out of corepus (Election required - see instructions) O. 4 Applied to 2016, but not more than Inne 2a C Tratel as dischibutions out of corepus (Election required - see instructions) O. 4 Applied to 2016 distributions out of corepus (Election required - see instructions) O. 5 Center the net total of each column an indicated above an existing total of the semi-ancient of the section 494(3) but has been prevously assessed O. 5 Desire years (inches) been prevously assessed O. 5 Desire years (inches) been prevously assessed O. 5 Undistributed in come for 2015. Subtract line 4s from line 2b C Either the amount of priory years' On this section 494(3) but has been prevously assessed O. 5 Undistributed in come for 2015. Subtract line 4s from line 6b. Taxable amount - see instructions O. 6 Undistributed in come for 2015. Subtract line 4s from line 6b. Taxable amount - see instructions O. 6 Undistributed in come for 2015. Subtract line 4s from line 6b. Taxable amount - see instructions O. 73,818. 73,818. 73,818. O. O. Allisses of line in From ine 7 O. D. Taxable amount - see instructions O. Becase distribution carryover from 2012 ont applied on line 5 or line 7 O. Descriptions carryover from 2012 ont applied on line 5 or line 7 O. Descriptions carryover from 2012 ont applied on line 5 or line 7 O. Descriptions carryover from 2012 ont applied on line 5 or line 7 O. Descriptions carryover from 2012 ont applied on line 5 or line 7 O. Descriptions carryover from 2012 ont applied on line 5 or line 7 O. Descriptions car		<u> </u>			309,730.
Secret distributions carryover, if any, to 2017: a From 2012 b From 2015 c From 2016 f From 2017 f From 2016 f From 2017 f Fr	·			139 060	
3 Excess distributions carryover, if any, to 2017: a From 2012	•			139,000.	
3 Excest distributions carryover, if any, 10 2017: a From 2012 b From 2013 c From 2016 c From 2017 c From 2016 c From 2017 c F	b rotation prior years		0		
a From 2013	2 Excess distributions carryover if any to 2017:		<u>_</u>		
From 2013 From 2016 From	r				
From 2014 d From 2015 From 2016 1 Total of lines 3a through e 0.4 0.4 0.4 Outsifying distributions for 2017 from Part XII, line 4 ₱ \$ 435,000 a Applied to 2016, but not more than line 2a 5 Applied to 2016, but not more than line 2a 5 Applied to undistributed mome of prior years (Election required - see instructions) 0. clerated as distributions out of corpus (Election required - see instructions) 0. dApplied to 2017 distributable amount e Remaining amount distributed out of corpus 0. clerated as distributions control to 2017 iff iff in instructions comprove applied to 2017 iff iff in instructions depressed in instructions of the instruction of the instructions of the instruction of the instru		-			
d From 2015 e From 2016 Total of lines 3s through e	' ''' 	-			
e From 2016 1 Total of lines 3 through e 0.4 Clualitying distributions for 2017 from Part XII, line 4 ► \$ 435,000. a Applied to 10, but not more than line 2a b Applied to 10, but not more than line 2a b Applied to 10, but not more than line 2a c Treated as destributions out of corpus (Election required - see instructions) 0. c Treated as destributions out of corpus (Election required - see instructions) 0. d Applied to 2017 distributable amount e Remaining amount distributed out of corpus 5 Reseas distributions carryover applied to 2017 must be adven exclusive 30 6 Enter the net total of each column as indicated below. 2 Corpus Add lines 31, 4s, and 4s Subract line 5 b Prior years' undistributed income. Subtract line 6 b Prior years' undistributed income. Subtract line 6 b Prior years' undistributed income. Subtract line 6 c Enter the amount of prior years' undistributed income for winch a notice of deticency has been issued, or on which the section 49(2) bax has been reviously assessed 0. d Subtract line 6c from line 6b. Taxable amount - see instructions 1 Undistributed income for 2015. Subtract line 4 from line 2b 1 Undistributed income for 2017. Subtract lines 4 from line 2b. Taxable amount - see instructions 1 Undistributed income for 2017. Subtract lines 4 from line 2b. Taxable amount rise in the first lines 4 from line 2b. Taxable amount rise in the first lines 4 from line 2b. Taxable amount rise in the first lines 4 from line 2b. Taxable amount must be distributed outcome for 2017. Subtract lines 4 from line 1 Titing amount must be distributed on 2018 8 Excess first houltons carryover to 2019. Subtract lines 5 and 8 from line 6a 0. Analysis of line 5 or line 7 0. Taxable 3 distributions carryover to 2018. Subtract lines 5 from 2015 d Excess from 2015 d Excess from 2015 d Excess from 2015		-			
I Total of lines 3a through e 4. Qualifying distributions for 2017 from Part XII, Ine 4 № \$ 435 , 000. A Papied to 2016, but not more than line 2a A Papied to 2016, but not more than line 2a A Papied to 2016 but not more than line 2a Facility of the papied to 2017 distributions out of corpus (effection required - see instructions) 4. Appied to 2017 distributable amount effection required - see instructions) 4. Appied to 2017 distributable amount effection of the company of					
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c Excess from 2015 d Excess from 2016 e Excess from 2017		4			
d Excess from 2016 e Excess from 2017		1			
e Excess from 2017		4			
		1			
		<u> </u>		<u> </u>	5 000 DE (0.5.15)

Form 990-PF (2017) SMS FOUNI	DATION, INC	Z		20-187	18599 Page 10
Part XIV Private Operating Fou	indations (see ins	tructions and Part VI	I-A, question 9)	N/A	
1 a If the foundation has received a ruling or d	etermination letter that	it is a private operating			
foundation, and the ruling is effective for 2	017, enter the date of t	ne ruling	▶ └		<u> </u>
b Check box to indicate whether the foundati	on is a private operatin	g foundation described		4942(j)(3) or 494	<u>2(j)(5)</u>
2 a Enter the lesser of the adjusted net	Tax year		Prior 3 years		
income from Part I or the minimum	(a) 2017	(b) 2016	(c) 2015	(d) 2014	<u>(e)</u> Total
investment return from Part X for					
each year listed			 	 	
b 85% of line 2a				 	
c Qualifying distributions from Part XII,					
line 4 for each year listed				 /	
d Amounts included in line 2c not			1	4 1	
used directly for active conduct of					
exempt activities			 	 	
e Qualifying distributions made directly				1	
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)			1	1	
b "Endowment" alternative test - enter			+	†	
2/3 of minimum investment return		1			
shown in Part X, line 6 for each year listed					
c "Support" alternative test - enter			<u> </u>	† 	
(1) Total support other than gross					
investment income (interest,	•			<u> </u>	
dividends, rents, payments on				1	
securities loans (section 512(a)(5)), or royalties)	f	,		ļ	
(2) Support from general public			-		
and 5 or more exempt					
organizations as provided in section 4942(j)(3)(B)(iii)				1	
(3) Largest amount of support from	7				
an exempt organization					
(4) Gross investment income					
Part XV Supplementary Inform			if the foundation	had \$5,000 or more	in assets
at any time during the	year-see instru	ıctions.)			
1 Information Regarding Foundation I	Managers:				
a List any managers of the foundation who h			tributions received by the	foundation before the close	of any tax
year (but only if they have contributed mor		ection 507(d)(2).)			
MATTHEW D. SILVERSTEIN	<u> </u>	<u> </u>			
b List any managers of the foundation who o		· ·	(or an equally large porti	on of the ownership of a par	tnership or
other entity) of which the foundation has a	10% or greater interes	İ			
NONE					
2 Information Regarding Contribution					
Check here \triangleright X if the foundation only					sts for funds. If
the foundation makes gifts, grants, etc., to					
a The name, address, and telephone number	or email address of the	e person to whom appli	cations should be addres	sed	
		,			
b. The farmer of the boundary of the latest and the same of the latest and the same of the latest and the same of the latest and the latest a			h	 	
b The form in which applications should be s	upmitted and informat	on and materials they s	noula include		
c Any submission deadlines					
o raty south assout academics					
d Any restrictions or limitations on awards, s	uch as by geographica	l areas, charitable fields	, kınds of ınstitutions, or	other factors	
•	- -		·		
					
723601 D1-03-18					Form 990-PF (2017)

723611 01-03-18

Total

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Part XVI-A	Analysis of Income-Producing Activities

		usiness income (b)	(C) Exclud	ed by section 512, 513, or 514 (d)	(e) Related or exempt
1 Program service revenue.	(a) Business code	Amount	sion	Amount	function income
a					
b					
С		-			
d		.=			
е	í l				
1					
g Fees and contracts from government agencies					
2 Membership dues and assessments					
3 Interest on savings and temporary cash					
investments			1_1		
4 Dividends and interest from securities			14	117,035.	
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			11		
8 Gain or (loss) from sales of assets other					
than inventory			18	261,098.	
9 Net income or (loss) from special events			1		
O Gross profit or (loss) from sales of inventory					
1 Other revenue:			}]		
a	_		1		
b	_		+-+		
c	_				
			1 1		
d	_		+ -+		
d e				370.433	
e		0.		378,133.	
e 2 Subtotal Add columns (b), (d), and (e) 3 Total. Add line 12, columns (b), (d), and (e)		0.			0 378,133
d e 2 Subtotal Add columns (b), (d), and (e) 3 Total. Add line 12, columns (b), (d), and (e) See worksheet in line 13 instructions to verify calculations)			13	
d e 2 Subtotal Add columns (b), (d), and (e) 3 Total. Add line 12, columns (b), (d), and (e) See worksheet in line 13 instructions to verify calculations)			13	
d e 2 Subtotal Add columns (b), (d), and (e) 3 Total. Add line 12, columns (b), (d), and (e) See worksheet in line 13 instructions to verify calculations Part XVI-B Relationship of Activities) s to the Accom	plishment of Ex	empt l	13 Purposes	378,133
d e 2 Subtotal Add columns (b), (d), and (e) 3 Total. Add line 12, columns (b), (d), and (e) See worksheet in line 13 instructions to verify calculations Part XVI-B Relationship of Activities Line No. Explain below how each activity for which in) s to the Accom	plishment of Ex	empt l	13 Purposes	378,133
d e 2 Subtotal Add columns (b), (d), and (e) 3 Total. Add line 12, columns (b), (d), and (e) See worksheet in line 13 instructions to verify calculations Part XVI-B Relationship of Activities) s to the Accom	plishment of Ex	empt l	13 Purposes	378,133
d e 2 Subtotal Add columns (b), (d), and (e) 3 Total. Add line 12, columns (b), (d), and (e) See worksheet in line 13 instructions to verify calculations Part XVI-B Relationship of Activities Line No. Explain below how each activity for which in) s to the Accom	plishment of Ex	empt l	13 Purposes	378,133
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d e 2 Subtotal Add columns (b), (d), and (e) 3 Total. Add line 12, columns (b), (d), and (e) See worksheet in line 13 instructions to verify calculations Part XVI-B Relationship of Activities Line No. Explain below how each activity for which in) s to the Accom	plishment of Ex	empt l	13 Purposes	378,133
d e 2 Subtotal Add columns (b), (d), and (e) 3 Total. Add line 12, columns (b), (d), and (e) See worksheet in line 13 instructions to verify calculations Part XVI-B Relationship of Activities Line No. Explain below how each activity for which in) s to the Accom	plishment of Ex	empt l	13 Purposes	378,133
d e 2 Subtotal Add columns (b), (d), and (e) 3 Total. Add line 12, columns (b), (d), and (e) See worksheet in line 13 instructions to verify calculations Part XVI-B Relationship of Activities Line No. Explain below how each activity for which in) s to the Accom	plishment of Ex	empt l	13 Purposes	378,133
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d e 2 Subtotal Add columns (b), (d), and (e) 3 Total. Add line 12, columns (b), (d), and (e) See worksheet in line 13 instructions to verify calculations Part XVI-B Relationship of Activities Line No. Explain below how each activity for which in) s to the Accom	plishment of Ex	empt l	13 Purposes	378,133
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d e 2 Subtotal Add columns (b), (d), and (e) 3 Total. Add line 12, columns (b), (d), and (e) See worksheet in line 13 instructions to verify calculations Part XVI-B Relationship of Activities Line No. Explain below how each activity for which in) s to the Accom	plishment of Ex	empt l	13 Purposes	378,133

	•					
Form 990-PF (2017)	SMS	FOUNDATION,	INC.	20-1878599	P	
Part XVII Information Regarding Transfers to and Transactions and Relationships With Noncharitable						
Exe	empt Org	anizations				

		Exempt Organ	izations							
1	Did the	organization directly or indi	rectly engage in any	of the followin	g with any other organization	on described in section	on 501(c)		Yes	No
		han section 501(c)(3) organ			-		, ,			
2	•	rs from the reporting founda	•		-					
	(1) Cas	· -	2001 10 12 11011011011101	bic exempt org	junication of:			1a(1)		Х
								1a(2)		X
		ner assets						14(2)		
D		ansactions:						1		v
		es of assets to a noncharita						1b(1)		X
		rchases of assets from a nor	•	-				1b(2)	-	X
		ntal of facilities, equipment,			••••		••	1b(3)		X
	(4) Rei	imbursement arrangements						16(4)		X
	(5) Loa	ans or loan guarantees 👑						1b(5)		<u>X</u>
		formance of services or me			ns			1b(6)		<u>X</u>
C	Sharing	of facilities, equipment, ma	uling lists, other asse	ets, or paid em	ployees			1c		_X_
d	If the ar	iswer to any of the above is	"Yes," complete the	following sche	dule. Column (b) should alv	ways show the fair m	arket value of the goods, o	ther ass	ets,	
		ces given by the reporting to		_		-				
		(d) the value of the goods,				,				
(a)	ine no	(b) Amount involved			exempt organization	(d) Description	of transfers, transactions, and s	haring arr	angemer	nts
1-7		(-,	(5)	N/A		\-/ ·	<u> </u>			
	- 		 	21/11		 				
					 –					
			 			-	· ·			
									_	
		··			-					
					•					
							-			
22	le the fe	oundation directly or indirec	the affiliated with or	related to one	or more tay-evennt organi	zatione described				
20		on 501(c) (other than sectio	•		or more tax exempt organi	zations described	۲	☐ Yes	X	□No
				CHOH 327 F						
D	II Yes,	complete the following sch			(b) Type of organization		(c) Description of relations	hin		
		(a) Name of org	Janizanon		(b) Type of Organization		(c) Description of relations	·		
		N/A								
										
						1				
						J				
		der penalties of perjury, I declare to I bel <u>ief,</u> it is true, ø rrect, and com					Ma'	y the IRS		
	gn 📈	Deliet, it is the, confect, and con	G C	eparer (other than		. (()	sho	rn with the		
He	ere 🛭	X/augh 1	CI XX		14-9-18	PRESI	DENT	X Yes	, [] No
	S	ignature s i officer or trustee	, 7		Date	Title				
	•	Print/Type preparer's na	ame	Preparer's s	ignature	Date	Check If PTIN			
							self- employed			
Pa	aid	JAMES E. R	OSE, CPA	JAMES	E. ROSE, CP	02/26/18	P0	0089	463	
Pr	epare				W KRAUSE, LL		Firm's EIN ► 39 - 0			
U	se Only					_				
		Firm's address ▶ PO	BOX 7398	\						
			DISON, WI		_7398		Phone no. 608.2	19 F	622	
		l MA	DIDON, WI	. ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	, , , , ,			nrm 99		
							F-1	11 III 23		TZUI/

Schedule B

(Form 990, 990-EZ, or 990-PF)

Department of the Treasury Internal Revenue Service

Schedule of Contributors

► Attach to Form 990, Form 990-EZ, or Form 990-PF.

Go to www.irs.gov/Form990 for the latest information.

OMB No 1545-0047

2017

Employer identification number Name of the organization 20-1878599 SMS FOUNDATION, INC. Organization type (check one) Filers of: Section: Form 990 or 990-EZ ___ 501(c)() (enter number) organization 4947(a)(1) nonexempt charitable trust not treated as a private foundation 527 political organization Form 990-PF X 501(c)(3) exempt private foundation 4947(a)(1) nonexempt charitable trust treated as a private foundation 501(c)(3) taxable private foundation Check if your organization is covered by the General Rule or a Special Rule. Note: Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule See instructions General Rule X For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions Special Rules For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of (1) \$5,000, or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1 Complete Parts I and II For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I, II, and III For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions exclusively for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., purpose Don't complete any of the parts unless the General Rule applies to this organization because it received nonexclusively religious, charitable, etc., contributions totaling \$5,000 or more during the year Caution: An organization that isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990, 990-EZ, or 990-PF), but it must answer "No" on Part IV, line 2, of its Form 990, or check the box on line H of its Form 990-EZ or on its Form 990-PF, Part I, line 2, to

certify that it doesn't meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF)

Name of organization

Employer identification number

SMS F	OUNDATION, INC.	20	-1878599
Part I	Contributors (see instructions) Use duplicate copies of Part I if additional	al space is needed	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	MATTHEW D. SILVERSTEIN PO BOX 5324 MADISON, WI 53705	\$\$	Person X Payroll Noncash X (Complete Part II for noncash contributions.)
(a) No.	· (b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
2	MATTHEW D. SILVERSTEIN PO BOX 5324 MADISON, WI 53705	\$ 141,156.	Person X Payroll Noncash X (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	, (d) Type of contribution
3	MATTHEW D. SILVERSTEIN PO BOX 5324 MADISON, WI 53705	\$ 196,058.	Person X Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	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 Payroll Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions)

Employer identification number

SMS FOUNDATION. INC

20-1878599

	OUNDATION, INC.		<u>-1878599</u>
art II	Noncash Property (see instructions) Use duplicate copies of Property	art II if additional space is needed.	
(a) No. from Part i	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
	HARBOR INTERNATIONAL FUND - 3,598.366 SHARES		
1		<u> </u>	
		\$ 243,286.	12/28/17
(a) No. from	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
Part I	AMERICAN WASHINGTON MUTUAL - 3,080 SHARES		
2			
		\$\$_	12/28/17
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
			•
		_{\$}	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
(a)			<u> </u>
No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	
(a)			
No.	(b)	(c)	(d)
from Part I	Description of noncash property given	FMV (or estimate) (See instructions.)	Date received
—		 ·	
		\$	

FORM 990-PF	GAIN OR (LOSS) FROM	SALE	OF AS	SETS		STA	TEME	NT 1
. (A) DESCRIPTION OF PROPE	RTY				NNER UIRED		TE	DATE	SOLD
PUBLICLY TRADED SECU	RITIES-PURC	HASED		-		VARI	ous	VAR	lous
(B) GROSS SALES PRICE	(C) COST OTHER B		(D) PENSE SALE	OF	(E) DEPRE		GAIN	(F)	oss
736,19	90. 67	3,296.		0.		0.		62	894.
(A) DESCRIPTION OF PROPE	ERTY 				NNER UIRED		TE IRED	DATE	SOLD
PUBLICLY TRADED SECU DONATION	RITIES-ACQU	IRED BY				VARI	ous	VAR	IOUS
(B) GROSS SALES PRICE	(C) VALUE TIME OF		(D) PENSE SALE	OF	(E) DEPRE		GAIN	(F)	oss
100,00	70.	9,390.		0.		0.		20	,610.
CAPITAL GAINS DIVIDE									7,594.
FORM 990-PF	DIVIDENDS	AND INTERE	ST FRO	OM SEC	URITIE	s	STA	ATEME1	NT 2
SOURCE	GROSS AMOUNT	CAPITAL GAINS DIVIDENDS		(A) EVENUE R BOOK		(B) INVE T INC			C) ISTED INCOME
INVESTMENTS - CGD INVESTMENTS -	177,594.	177,594		. -	0.		0.		
DIVIDENDS/INTEREST	117,035.). 1	117,03	5.	117,0	35.		

FORM 990-PF	LEGAL	FEES	S	TATEMENT 3
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME		(D) CHARITABLE PURPOSES
STAFFORD ROSENBAUM LLP- LEGAL/RESEARCH QUALIFYING DONEES	818.	0.		0.
TO FM 990-PF, PG 1, LN 16A	818.	0.		0.
FORM 990-PF	ACCOUNTI	NG FEES	S	TATEMENT 4
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME		(D) CHARITABLE PURPOSES
BAKER TILLY VIRCHOW KRAUSE, LLP - 2016 TAX RETURN PREPARATION	2,549.	2,549.		0.
TO FORM 990-PF, PG 1, LN 16B	2,549.	2,549.		0.
FORM 990-PF C	THER PROFES	SIONAL FEES	s	TATEMENT 5
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME		
BUTTONWOOD PARTNERS, INC INVESTMENT MANAGEMENT FEES	20,773.	20,773.		0.
TO FORM 990-PF, PG 1, LN 16C	20,773.	20,773.		0.
-				

FORM 990-PF	TAX		STATEMENT 6		
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOM		
DEPT OF TREASURY: IRS-2017 EXCISE TAX ESTIMATED TAX PAYMENT	3,900.	0.		0.	
TO FORM 990-PF, PG 1, LN 18	3,900.	0.		0.	
DESCRIPTION				AMOUNT	
FORM 990-PF OTHER INCREASES	S IN NET ASS	ETS OR FUND BA	ALANCES	STATEMENT 7	
CHANGE IN UNREALIZED GAINS OF	T TNT/PCMMPNM	c	-		
CHANGE IN UNREALIZED GAINS OF	N INVESTMENT	5		702 265	
				702,265	
TOTAL TO FORM 990-PF, PART I	II, LINE 3		-	702,265	
TOTAL TO FORM 990-PF, PART I:	CORPORAT	E STOCK	=		
FORM 990-PF			- - - - -	702,265	
		ВО	OK VALUE 7,727,934.	702,265 STATEMENT 8 FAIR MARKET	

FORM 990-PF	PART VIII - LIS TRUSTEES AND	STATEMENT 9			
NAME AND ADDRESS		TITLE AND AVRG HRS/WK		EMPLOYEE BEN PLAN CONTRIB	EXPENSE ACCOUNT
SARAH E. SPENCER PO BOX 5157 MADISON, WI 53705		PRESIDENT, DIR 1.00	ECTOR 0.	0.	0.
MATTHEW D. SILVERS PO BOX 5324 MADISON, WI 53705	STEIN	VICE PRESIDENT 1.00	, DIRECTOR 0.	0.	0.
THOMAS G. TIERNEY 1010 HARRISON ST. MADISON, WI 53711		TREASURER 1.00	0.	0.	0.
DAVID B. BILLING PO BOX 1784 MADISON, WI 53701		SECRETARY 1.00	0.	0.	0.
MARK SPENCER PO BOX 5157 MADISON, WI 53705		DIRECTOR 1.00	0.	0.	0.
TOTALS INCLUDED OF	N 990-PF, PAGE 6	, PART VIII	0.	0.	0.