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

2009

Note. The foundation may be able to use a copy of this return to satisfy state reporting requirements.

For calendar year 2009, or tax year beginning

, and ending

G Check all that apply:

☐ Initial return☐ Initial return of a former public charity☐ Final return☐ Amended return☐ Address change☐ Name changeUse the IRS  
label.  
Otherwise,  
print  
or type:  
See Specific  
Instructions.

Name of foundation

WIGGINTON EDUCATIONAL FOUNDATION

C/O FIFTH THIRD BANK

Number and street (or P.O. box number if mail is not delivered to street address)

233 WASHINGTON

Room/suite

City or town, state, and ZIP code

GRAND HAVEN, MI 49417

A Employer identification number

38-2388277

B Telephone number

(616) 847-2244

C If exemption application is pending, check here ☐D 1. Foreign organizations, check here ☐2. Foreign organizations meeting the 85% test,  
check here and attach computation ☐E If private foundation status was terminated  
under section 507(b)(1)(A), check here ☐F If the foundation is in a 60-month termination  
under section 507(b)(1)(B), check here ☐

H Check type of organization:

☒ Section 501(c)(3) exempt private foundation☐ Section 4947(a)(1) nonexempt charitable trust ☐ Other taxable private foundation

I Fair market value of all assets at end of year

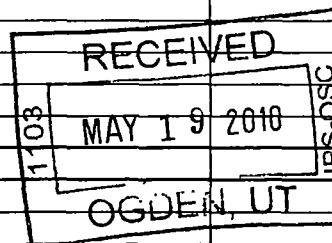
(from Part II, col. (c), line 16)

J Accounting method:

☒ Cash☐ Accrual☐ Other (specify)

\$ 380,096. (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))		(a) Revenue and expenses per books	(b) Net investment income	(c) Adjusted net income	(d) Disbursements for charitable purposes (cash basis only)
1 Contributions, gifts, grants, etc., received		31.		N/A	
2 Check <input checked="" type="checkbox"/> if the foundation is not required to attach Sch. B					
3 Interest on savings and temporary cash investments					
4 Dividends and interest from securities		11,343.	11,343.		STATEMENT 1
5a Gross rents					
b Net rental income or (loss)					
6a Net gain or (loss) from sale of assets not on line 10		-5,230.			
b Gross sales price for all assets on line 6a		17,090.			
7 Capital gain net income (from Part IV, line 2)			0.		
8 Net short-term capital gain					
9 Income modifications					
10a Gross sales less returns and allowances					
b Less Cost of goods sold					
c Gross profit or (loss)					
11 Other income					
12 Total. Add lines 1 through 11		6,144.	11,343.		
13 Compensation of officers, directors, trustees, etc		0.	0.		
14 Other employee salaries and wages					
15 Pension plans, employee benefits					
16a Legal fees					
b Accounting fees		STMT 2 975.	487.		488.
c Other professional fees		STMT 3 3,669.	3,669.		0.
17 Interest					
18 Taxes		STMT 4 111.	111.		0.
19 Depreciation and depletion					
20 Occupancy					
21 Travel, conferences, and meetings					
22 Printing and publications					
23 Other expenses		STMT 5 120.	0.		120.
24 Total operating and administrative expenses. Add lines 13 through 23		4,875.	4,267.		608.
25 Contributions, gifts, grants paid		18,178.			18,178.
26 Total expenses and disbursements. Add lines 24 and 25		23,053.	4,267.		18,786.
27 Subtract line 26 from line 12:					
a Excess of revenue over expenses and disbursements		-16,909.			
b Net investment income (if negative, enter -0-)			7,076.		
c Adjusted net income (if negative, enter -0-)				N/A	



B

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**Part II Balance Sheets**

Attached schedules and amounts in the description column should be for end-of-year amounts only

		Beginning of year	End of year	
		(a) Book Value	(b) Book Value	(c) Fair Market Value
<b>Assets</b>	1 Cash - non-interest-bearing			
	2 Savings and temporary cash investments	46,441.	14,421.	14,421.
	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			
	7 Other notes and loans receivable ▶			
	Less: allowance for doubtful accounts ▶			
	8 Inventories for sale or use			
	9 Prepaid expenses and deferred charges			
	10a Investments - U.S. and state government obligations			
	b Investments - corporate stock <b>STMT 6</b>	203,444.	215,814.	196,843.
	c Investments - corporate bonds <b>STMT 7</b>	175,245.	177,986.	168,832.
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 ▶)				
<b>16 Total assets (to be completed by all filers)</b>	<b>425,130.</b>	<b>408,221.</b>	<b>380,096.</b>	
<b>Liabilities</b>	17 Accounts payable and accrued expenses			
	18 Grants payable			
	19 Deferred revenue			
	20 Loans from officers, directors, trustees, and other disqualified persons			
	21 Mortgages and other notes payable			
	22 Other liabilities (describe ▶)			
<b>23 Total liabilities (add lines 17 through 22)</b>	<b>0.</b>	<b>0.</b>		
<b>Net Assets or Fund Balances</b>	Foundations that follow SFAS 117, check here ▶ <input type="checkbox"/>			
	and complete lines 24 through 26 and lines 30 and 31.			
	24 Unrestricted			
	25 Temporarily restricted			
	26 Permanently restricted			
	Foundations that do not follow SFAS 117, check here ▶ <input checked="" type="checkbox"/>			
	and complete lines 27 through 31.			
	27 Capital stock, trust principal, or current funds	12,357.	12,357.	
28 Paid-in or capital surplus, or land, bldg., and equipment fund	0.	0.		
29 Retained earnings, accumulated income, endowment, or other funds	412,773.	395,864.		
<b>30 Total net assets or fund balances</b>	<b>425,130.</b>	<b>408,221.</b>		
<b>31 Total liabilities and net assets/fund balances</b>	<b>425,130.</b>	<b>408,221.</b>		

**Part III Analysis of Changes in Net Assets or Fund Balances**

1 Total net assets or fund balances at beginning of year - Part II, column (a), line 30 (must agree with end-of-year figure reported on prior year's return)	1	425,130.
2 Enter amount from Part I, line 27a	2	-16,909.
3 Other increases not included in line 2 (itemize) ▶	3	0.
4 Add lines 1, 2, and 3	4	408,221.
5 Decreases not included in line 2 (itemize) ▶	5	0.
6 Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b), line 30	6	408,221.

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**Part IV Capital Gains and Losses for Tax on Investment Income**

(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	(c) Date acquired (mo., day, yr.)	(d) Date sold (mo., day, yr.)
1a 503.199 UNITS FIFTH THIRD ALL CAP VALUE FUND	P	VARIOUS	06/29/09
b 597 UNITS GOLDMAN SACHS CORE FIXED INCOME			
c FUND	P	VARIOUS	06/29/09
d 945 UNITS LORD ABBETT BD DEB FD	P	VARIOUS	06/29/09
e			

(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale	(h) Gain or (loss) (e) plus (f) minus (g)
a 5,797.		8,996.	-3,199.
b			
c 5,188.		5,904.	-716.
d 6,105.		7,420.	-1,315.
e			

(i) F.M.V. as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col. (i) over col. (j), if any	(l) Gains (Col. (h) gain minus col. (k), but not less than -0-) or Losses (from col. (h))
a			-3,199.
b			
c			-716.
d			-1,315.
e			

2 Capital gain net income or (net capital loss)	{ If gain, also enter in Part I, line 7 If (loss), enter -0- in Part I, line 7 }	2	-5,230.
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). If (loss), enter -0- in Part I, line 8	{ }	3	N/A

**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.

Was the foundation liable for the section 4942 tax on the distributable amount of any year in the base period?

☐ Yes ☒ No

If "Yes," the foundation does not qualify under section 4940(e). Do not complete this part.

1 Enter the appropriate amount in each column for each year; see instructions 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 assets	(d) Distribution ratio (col. (b) divided by col. (c))
2008	24,193.	405,959.	.059595
2007	22,612.	474,442.	.047660
2006	21,995.	452,148.	.048646
2005	14,372.	438,496.	.032776
2004	14,184.	429,766.	.033004

2 Total of line 1, column (d)	2	.221681
3 Average distribution ratio for the 5-year base period - divide the total on line 2 by 5, or by the number of years the foundation has been in existence if less than 5 years	3	.044336
4 Enter the net value of noncharitable-use assets for 2009 from Part X, line 5	4	334,904.
5 Multiply line 4 by line 3	5	14,848.
6 Enter 1% of net investment income (1% of Part I, line 27b)	6	71.
7 Add lines 5 and 6	7	14,919.
8 Enter qualifying distributions from Part XII, line 4	8	18,786.

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.

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**Part VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 - see instructions)**

1a Exempt operating foundations described in section 4940(d)(2), check here <input type="checkbox"/> and enter "N/A" on line 1. Date of ruling or determination letter: _____ (attach copy of letter if necessary-see instructions)			
b Domestic foundations that meet the section 4940(e) requirements in Part V, check here <input checked="" type="checkbox"/> and enter 1% of Part I, line 27b		1	71.
c All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of Part I, line 12, col. (b)			
2 Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)		2	0.
3 Add lines 1 and 2		3	71.
4 Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)		4	0.
5 Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-		5	71.
<b>6 Credits/Payments:</b>			
a 2009 estimated tax payments and 2008 overpayment credited to 2009	6a		
b Exempt foreign organizations - tax withheld at source	6b		
c Tax paid with application for extension of time to file (Form 8868)	6c		
d Backup withholding erroneously withheld	6d		
7 Total credits and payments. Add lines 6a through 6d	7		0.
8 Enter any penalty for underpayment of estimated tax. Check here <input type="checkbox"/> if Form 2220 is attached	8		
9 Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed	9		71.
10 Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid	10		
11 Enter the amount of line 10 to be: Credited to 2010 estimated tax <input type="checkbox"/> Refunded <input type="checkbox"/>	11		

**Part VII-A Statements Regarding Activities**

	Yes	No
1a During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any political campaign?		X
1b Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see instructions for definition)? If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials published or distributed by the foundation in connection with the activities.		X
c Did the foundation file Form 1120-POL for this year?		X
d Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year: (1) On the foundation. <input type="checkbox"/> \$ 0. (2) On foundation managers. <input type="checkbox"/> \$ 0.		
e Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers. <input type="checkbox"/> \$ 0.		
2 Has the foundation engaged in any activities that have not previously been reported to the IRS? If "Yes," attach a detailed description of the activities.		X
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		X
4a Did the foundation have unrelated business gross income of \$1,000 or more during the year?		X
b If "Yes," has it filed a tax return on Form 990-T for this year?		
5 Was there a liquidation, termination, dissolution, or substantial contraction during the year? If "Yes," attach the statement required by General Instruction T.		X
6 Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either: • 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?		
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.		
8a Enter the states to which the foundation reports or with which it is registered (see instructions) <input type="checkbox"/> MI		
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) of each state as required by General Instruction G? If "No," attach explanation		
9 Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for calendar year 2009 or the taxable year beginning in 2009 (see instructions for Part XIV)? If "Yes," complete Part XIV		X
10 Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses		X

N/A

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**Part VII-A Statements Regarding Activities** (continued)

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		X
12	Did the foundation acquire a direct or indirect interest in any applicable insurance contract before August 17, 2008?	12		X
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application? Website address ► <b>N/A</b>	13	X	
14	The books are in care of ► <b>KATHLEEN DANIEL, FIFTH THIRD BANK</b> Telephone no. ► <b>616-847-2244</b> Located at ► <b>233 WASHINGTON, GRAND HAVEN, MI</b> ZIP+4 ► <b>49417</b>			
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	15		N/A

**Part 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
<b>1a</b> 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?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
(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)?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
(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.)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
<b>b</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 page 20 of the instructions)? Organizations relying on a current notice regarding disaster assistance check here	N/A	1b
<b>c</b> Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected before the first day of the tax year beginning in 2009?		1c
<b>2</b> 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)):		
<b>a</b> At the end of tax year 2009, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning before 2009? If "Yes," list the years ►	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
<b>b</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 all years listed, answer "No" and attach statement - see instructions.)	N/A	2b
<b>c</b> If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here. ►		
<b>3a</b> Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
<b>b</b> If "Yes," did it have excess business holdings in 2009 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 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 2009.)	N/A	3b
<b>4a</b> Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?		4a
<b>b</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 2009?		4b

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**Part VIII** Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors (continued)**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		

Total number of others receiving over \$50,000 for professional services

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	
2	
3	
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	
All other program-related investments. See instructions.	
3	
<b>Total.</b> Add lines 1 through 3	0.

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**Part X Minimum Investment Return** (All domestic foundations must complete this part. Foreign foundations, see instructions.)

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	1a	306,193.
b Average of monthly cash balances	1b	33,811.
c Fair market value of all other assets	1c	
d Total (add lines 1a, b, and c)	1d	340,004.
e Reduction claimed for blockage or other factors reported on lines 1a and 1c (attach detailed explanation)	1e	0.
2 Acquisition indebtedness applicable to line 1 assets	2	0.
3 Subtract line 2 from line 1d	3	340,004.
4 Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions)	4	5,100.
5 Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	334,904.
6 Minimum investment return. Enter 5% of line 5	6	16,745.

**Part XI Distributable Amount** (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations and certain foreign organizations check here ☐ and do not complete this part.)

1 Minimum investment return from Part X, line 6		1	16,745.
2a Tax on investment income for 2009 from Part VI, line 5	2a	71.	
b Income tax for 2009. (This does not include the tax from Part VI.)	2b		
c Add lines 2a and 2b		2c	71.
3 Distributable amount before adjustments. Subtract line 2c from line 1		3	16,674.
4 Recoveries of amounts treated as qualifying distributions		4	0.
5 Add lines 3 and 4		5	16,674.
6 Deduction from distributable amount (see instructions)		6	0.
7 Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1		7	16,674.

**Part XII Qualifying Distributions** (see instructions)

1 Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:		
a Expenses, contributions, gifts, etc. - total from Part I, column (d), line 26	1a	18,786.
b Program-related investments - total from Part IX-B	1b	0.
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)	3b	
4 Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4	4	18,786.
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	5	71.
6 Adjusted qualifying distributions. Subtract line 5 from line 4	6	18,715.

**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.

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**Part XIII. Undistributed Income** (see instructions)

	(a) Corpus	(b) Years prior to 2008	(c) 2008	(d) 2009
<b>1</b> Distributable amount for 2009 from Part XI, line 7				16,674.
<b>2</b> Undistributed income, if any, as of the end of 2009				
<b>a</b> Enter amount for 2008 only			17,939.	
<b>b</b> Total for prior years:		0.		
<b>3</b> Excess distributions carryover, if any, to 2009:				
<b>a</b> From 2004				
<b>b</b> From 2005				
<b>c</b> From 2006				
<b>d</b> From 2007				
<b>e</b> From 2008				
<b>f</b> Total of lines 3a through e	0.			
<b>4</b> Qualifying distributions for 2009 from Part XII, line 4: ▶ \$ 18,786.				
<b>a</b> Applied to 2008, but not more than line 2a			17,939.	
<b>b</b> Applied to undistributed income of prior years (Election required - see instructions)		0.		
<b>c</b> Treated as distributions out of corpus (Election required - see instructions)	0.			
<b>d</b> Applied to 2009 distributable amount				847.
<b>e</b> Remaining amount distributed out of corpus	0.			
<b>5</b> Excess distributions carryover applied to 2009 (If an amount appears in column (d), the same amount must be shown in column (a))	0.			0.
<b>6</b> Enter the net total of each column as indicated below:				
<b>a</b> Corpus. Add lines 3f, 4c, and 4e. Subtract line 5	0.			
<b>b</b> Prior years' undistributed income. Subtract line 4b from line 2b		0.		
<b>c</b> Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed		0.		
<b>d</b> Subtract line 6c from line 6b. Taxable amount - see instructions		0.		
<b>e</b> Undistributed income for 2008. Subtract line 4a from line 2a. Taxable amount - see instr.			0.	
<b>f</b> Undistributed income for 2009. Subtract lines 4d and 5 from line 1. This amount must be distributed in 2010				15,827.
<b>7</b> Amounts treated as distributions out of corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3)	0.			
<b>8</b> Excess distributions carryover from 2004 not applied on line 5 or line 7	0.			
<b>9</b> Excess distributions carryover to 2010. Subtract lines 7 and 8 from line 6a	0.			
<b>10</b> Analysis of line 9:				
<b>a</b> Excess from 2005				
<b>b</b> Excess from 2006				
<b>c</b> Excess from 2007				
<b>d</b> Excess from 2008				
<b>e</b> Excess from 2009				

**Part XIV Private Operating Foundations** (see instructions and Part VII-A, question 9)

N/A

**1 a** If the foundation has received a ruling or determination letter that it is a private operating foundation, and the ruling is effective for 2009, enter the date of the ruling

**b** Check box to indicate whether the foundation is a private operating foundation described in section ☐ 4942(j)(3) or ☐ 4942(j)(5)

**2 a** Enter the lesser of the adjusted net income from Part I or the minimum 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 used directly for active conduct of exempt activities

**e 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:

(1) 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**

**Part XV** **Supplementary Information (Complete this part only if the foundation had \$5,000 or more in assets at any time during the year-see the instructions.)**

## 1 Information Regarding Foundation Managers:

**a** List any managers of the foundation who have contributed more than 2% of the total contributions received by the foundation before the close of any tax year (but only if they have contributed more than \$5,000). (See section 507(d)(2).)

**NONE**

**b** List any managers of the foundation who own 10% or more of the stock of a corporation (or an equally large portion of the ownership of a partnership or other entity) of which the foundation has a 10% or greater interest.

**NONE**

**2 Information Regarding Contribution, Grant, Gift, Loan, Scholarship, etc., Programs:**

Check here ☐ if the foundation only makes contributions to preselected charitable organizations and does not accept unsolicited requests for funds. If the foundation makes gifts, grants, etc. (see instructions) to individuals or organizations under other conditions, complete items 2a, b, c, and d.

**a The name, address, and telephone number of the person to whom applications should be addressed:**

SEE STATEMENT 8

**b The form in which applications should be submitted and information and materials they should include:**

**c Any submission deadlines:**

d Any restrictions or limitations on awards, such as by geographical areas, charitable fields, kinds of institutions, or other factors:



Enter gross amounts unless otherwise indicated.

(See worksheet in line 13 instructions to verify calculations.)

Line No.	Explain below how each activity for which income is reported in column (e) of Part XVI-A contributed importantly to the accomplishment of the foundation's exempt purposes (other than by providing funds for such purposes).
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FORM 990-PF	DIVIDENDS AND INTEREST FROM SECURITIES	STATEMENT	1
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SOURCE	GROSS AMOUNT	CAPITAL GAINS DIVIDENDS	COLUMN (A) AMOUNT
FIFTH THIRD BANK	11,343.	0.	11,343.
TOTAL TO FM 990-PF, PART I, LN 4	11,343.	0.	11,343.

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FORM 990-PF	ACCOUNTING FEES	STATEMENT	2
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DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
REHMANN ROBSON	975.	487.		488.
TO FORM 990-PF, PG 1, LN 16B	975.	487.		488.

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FORM 990-PF	OTHER PROFESSIONAL FEES	STATEMENT	3
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DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
FIFTH THIRD BANK	3,669.	3,669.		0.
TO FORM 990-PF, PG 1, LN 16C	3,669.	3,669.		0.

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FORM 990-PF	TAXES	STATEMENT	4
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DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
EXCISE TAXES	111.	111.		0.
TO FORM 990-PF, PG 1, LN 18	111.	111.		0.

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FORM 990-PF	OTHER EXPENSES			STATEMENT	5
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES	
MICHIGAN ANNUAL REPORT	20.	0.		20.	
OAKS AGENCY BOND RENEWAL	100.	0.		100.	
TO FORM 990-PF, PG 1, LN 23	120.	0.		120.	

FORM 990-PF	CORPORATE STOCK		STATEMENT	6
DESCRIPTION	BOOK VALUE	FAIR MARKET VALUE		
FIFTH THIRD DISCIPLINED LARGE VALUE FUND	62,519.	53,090.		
BARON GROWTH FUND	11,551.	12,277.		
DODGE & COX INTL STOCK FUND	24,821.	22,416.		
FEDERATED KAUFMANN FUND - A	31,510.	27,133.		
T. ROWE PRICE GROWTH STOCK FUND	45,237.	41,605.		
HSBC FINANCE CORPORATION	18,853.	17,648.		
ARTISAN FDS INC INTL FD - (INCOME INVESTMENT)	266.	271.		
FEDERATED KAUFMANN FUND - A (INCOME INVESTMENT)	49.	49.		
ARTISAN FDS INC INTL FD	21,008.	22,354.		
TOTAL TO FORM 990-PF, PART II, LINE 10B	215,814.	196,843.		

FORM 990-PF	CORPORATE BONDS		STATEMENT	7
DESCRIPTION	BOOK VALUE	FAIR MARKET VALUE		
GOLDMAN SACHS CORE FIXED INCOME	37,203.	35,362.		
FIFTH THIRD STRATEGIC INCOME FUND	48,895.	42,027.		
LORD ABBETT BD DEB FUND CLASS A	35,153.	32,904.		
OPPENHEIMER INTL BOND- FD-A	25,244.	27,285.		
FIDELITY ADV SMALL CAP FUND-I (INCOME INVESTMENT)	63.	84.		
FIDELITY ADV SMALL CAP FUND-I	15,363.	14,744.		
FEDERATED ULTRA SHORT BD-INS	16,065.	16,426.		
TOTAL TO FORM 990-PF, PART II, LINE 10C	177,986.	168,832.		



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FORM 990-PF	GRANT APPLICATION SUBMISSION INFORMATION	STATEMENT	8
	PART XV, LINES 2A THROUGH 2D		

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NAME AND ADDRESS OF PERSON TO WHOM APPLICATIONS SHOULD BE SUBMITTED

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LISA DANICEK  
1415 S. BEECHTREE  
GRAND HAVEN, MI 49417

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TELEPHONE NUMBER

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616-842-6760

FORM AND CONTENT OF APPLICATIONS

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SEE FORM ATTACHED.

ANY SUBMISSION DEADLINES

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NONE

RESTRICTIONS AND LIMITATIONS ON AWARDS

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ELIGIBLE PERSONS INCLUDE WORTHY AND NEEDY STUDENTS RESIDING IN SCHOOL DISTRICTS OF THE CITY OF GRAND HAVEN OR THE COUNTIES OF OTTAWA AND MUSKEGON.

WIGGINTON EDUCATIONAL FOUNDATION  
 EIN: 38-2388277  
 FORM 990-PF  
 FOR THE YEAR ENDED DECEMBER 31, 2009

PAGE 6, PART VIII, INFORMATION ABOUT OFFICERS

NAME AND ADDRESS	TITLE HOURS WORKED	CONTRIBUTIONS TO BENEFIT PLANS	EXPENSE A/C ALLOWANCES	COMPENSATION
TRACY WILSON C/O GRAND HAVEN HIGH SCHOOL 17001 FERRIS STREET GRAND HAVEN, MI 49417	PRESIDENT 1-2 VOLUNTEER	0	0	0
ANNE RUNSCHKE C/O GRAND HAVEN HIGH SCHOOL 17001 FERRIS STREET GRAND HAVEN, MI 49417	VICE-PRESIDENT 1-2 VOLUNTEER	0	0	0
LISA DANICEK C/O EDUCATION SERVICE CENTER 1415 BEECHTREE GRAND HAVEN, MI 49417	TREASURER/SECRETARY 1-2 VOLUNTEER	0	0	0
JULIA HOULE C/O LAKESHORE MIDDLE SCHOOL 900 S CUTLER GRAND HAVEN, MI 49417	TRUSTEE 1-2 VOLUNTEER	0	0	0
PAUL KUNDE C/O CENTRAL HIGH SCHOOL 106 SOUTH SIXTH STREET GRAND HAVEN, MI 49417	TRUSTEE 1-2 VOLUNTEER	0	0	0
SUE MUELLER C/O LAKE HILLS ELEMENTARY SCHOOL 18181 DOGWOOD DRIVE SPRING LAKE MI 49456	TRUSTEE 1-2 VOLUNTEER	0	0	0
MIKE SHELTON C/O WHITE PINES MIDDLE SCHOOL 1400 S GRIFFIN STREET GRAND HAVEN MI 49417	TRUSTEE 1-2 VOLUNTEER	0	0	0
SANDRA TEEPLE C/O EDUCATION SERVICE CENTER 1415 BEECHTREE GRAND HAVEN, MI 49417	TRUSTEE 1-2 VOLUNTEER	0	0	0
TOTALS		0	0	0

WIGGINTON EDUCATIONAL FOUNDATION  
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PAGE 10, PART XV, LINE 3 - GRANTS AND CONTRIBUTIONS PAID DURING THE YEAR

RECIPIENT	RELATIONSHIP	STATUS	PURPOSE	AMOUNT
ANDREA MOLENKAMP C/O WIGGINTON EDUCATION FOUNDATION GRAND HAVEN, MI 49417	NONE	N/A	EDUCATIONAL CLASS SUPPLIES	45.00
JUSTIN HOWARD C/O WIGGINTON EDUCATION FOUNDATION GRAND HAVEN, MI 49417	NONE	N/A	EDUCATIONAL CORRESPONDANCE COURSE	102.00
JEREMIAH BETZ C/O WIGGINTON EDUCATION FOUNDATION GRAND HAVEN, MI 49417	NONE	N/A	MEDICAL MEDICATION	509.99
JOEL BROWN C/O WIGGINTON EDUCATION FOUNDATION GRAND HAVEN, MI 49417	NONE	N/A	MEDICAL BRACES	500.00
KEIGEN SHEDD C/O WIGGINTON EDUCATION FOUNDATION GRAND HAVEN, MI 49417	NONE	N/A	MEDICAL GLASSES	182.00
ETHAN BOVEN C/O WIGGINTON EDUCATION FOUNDATION GRAND HAVEN, MI 49417	NONE	N/A	EDUCATIONAL TUTORING	108.00
PATRICK STITES C/O WIGGINTON EDUCATION FOUNDATION SPRING LAKE, MI 49456	NONE	N/A	MEDICAL MEDICATION	169.49
IAN STREICHER C/O WIGGINTON EDUCATION FOUNDATION GRAND HAVEN, MI 49417	NONE	N/A	MEDICAL GLASSES & EYE EXAM	270.00
ROSCHANNA RUSSELL C/O WIGGINTON EDUCATION FOUNDATION GRAND HAVEN, MI 49417	NONE	N/A	EDUCATIONAL	337.50
JEREMY BETZ C/O WIGGINTON EDUCATION FOUNDATION GRAND HAVEN, MI 49417	NONE	N/A	MEDICAL	215.00
GRACE AND SAM YOUNG C/O WIGGINTON EDUCATION FOUNDATION GRAND HAVEN, MI 49417	NONE	N/A	EDUCATIONAL DESTINATION IMAGINATION FEES	70.00
ETHAN BOVEN C/O WIGGINTON EDUCATION FOUNDATION GRAND HAVEN, MI 49417	NONE	N/A	EDUCATIONAL TUTORING	108.00
PATRICK STITES C/O WIGGINTON EDUCATION FOUNDATION GRAND HAVEN, MI 49417	NONE	N/A	MEDICAL MEDICATION	169.39

WIGGINTON EDUCATIONAL FOUNDATION  
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PAGE 10, PART XV, LINE 3 - GRANTS AND CONTRIBUTIONS PAID DURING THE YEAR

RECIPIENT	RELATIONSHIP	STATUS	PURPOSE	AMOUNT
SAMANTHA MICHMERHUIZEN C/O WIGGINTON EDUCATIONAL FOUNDATION. GRAND HAVEN, MI 49417	NONE	N/A	EDUCATIONAL CORRESPONDENCE COURSE	102 00
JUSTIN IPPEN C/O WIGGINTON EDUCATION FOUNDATION GRAND HAVEN, MI 49417	NONE	N/A	EDUCATIONAL CORRESPONDENCE COURSE	102 00
MASON CLARK C/O WIGGINTON EDUCATION FOUNDATION GRAND HAVEN, MI 49417	NONE	N/A	NORP	13 25
KELSEY ORDAZ C/O WIGGINTON EDUCATION FOUNDATION GRAND HAVEN, MI 49417	NONE	N/A	EDUCATIONAL OPEN DOOR FEES	172 25
JACQUILINE HABEL C/O WIGGINTON EDUCATION FOUNDATION GRAND HAVEN, MI 49417	NONE	N/A	EDUCATIONAL CORRESPONDENCE COURSE	104 00
ALEXANDER ROWLEY C/O WIGGINTON EDUCATION FOUNDATION GRAND HAVEN, MI 49417	NONE	N/A	EDUCATIONAL FIELD TRIP EXPENSE	90 00
STAN ZUROSKE C/O WIGGINTON EDUCATION FOUNDATION GRAND HAVEN, MI 49417	NONE	N/A	EDUCATIONAL FIELD TRIP EXPENSE	90 00
SAMANTHA MICHMERHUIZEN C/O WIGGINTON EDUCATION FOUNDATION GRAND HAVEN, MI 49417	NONE	N/A	MEDICAL MOLAR ROOT CANAL	1,025 00
KEYAIRA MCGOWAN C/O WIGGINTON EDUCATION FOUNDATION GRAND HAVEN, MI 49417	NONE	N/A	EDUCATIONAL CORRESPONDENCE COURSE	102 50
DANA BOYES C/O WIGGINTON EDUCATION FOUNDATION GRAND HAVEN, MI 49417	NONE	N/A	EDUCATIONAL CORRESPONDENCE COURSE	102 00
KAITLYN ROBINSON C/O WIGGINTON EDUCATION FOUNDATION GRAND HAVEN, MI 49417	NONE	N/A	EDUCATIONAL CORRESPONDENCE COURSE	102 00
ASHLEY WOONACOTT C/O WIGGINTON EDUCATION FOUNDATION GRAND HAVEN, MI 49417	NONE	N/A	EDUCATIONAL CORRESPONDENCE COURSE	102 00
JUSTIN HOWARD C/O WIGGINTON EDUCATION FOUNDATION GRAND HAVEN, MI 49417	NONE	N/A	EDUCATIONAL CORRESPONDENCE COURSE	102 00
KELSEY ORDA C/O WIGGINTON EDUCATION FOUNDATION GRAND HAVEN, MI 49417	NONE	N/A	CHILD CARE	18 00

WIGGINTON EDUCATIONAL FOUNDATION  
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PAGE 10, PART XV, LINE 3 - GRANTS AND CONTRIBUTIONS PAID DURING THE YEAR

RECIPIENT	RELATIONSHIP	STATUS	PURPOSE	AMOUNT
JENNA BIALOWAS C/O WIGGINTON EDUCATION FOUNDATION GRAND HAVEN, MI 49417	NONE	N/A	EDUCATIONAL FIELD TRIP EXPENSE	930 00
KYLE KRAUSE C/O WIGGINTON EDUCATION FOUNDATION GRAND HAVEN, MI 49417	NONE	N/A	EDUCATIONAL OUTDOOR EDUCATION FEE	90 00
STEVEN BENKERT C/O WIGGINTON EDUCATION FOUNDATION GRAND HAVEN, MI 49417	NONE	N/A	MEDICAL CONTACT LENSES	200 00
WILLIAM SQUIRE C/O WIGGINTON EDUCATION FOUNDATION GRAND HAVEN, MI 49417	NONE	N/A	MEDICAL	630 00
ANDREW NELSON C/O WIGGINTON EDUCATION FOUNDATION GRAND HAVEN, MI 49417	NONE	N/A	EDUCATIONAL CREDIT RECOVERY COURSE	104 00
ELISEO REYES C/O WIGGINTON EDUCATION FOUNDATION GRAND HAVEN, MI 49417	NONE	N/A	MEDICAL	215 00
JEREMIAH ANEY C/O WIGGINTON EDUCATION FOUNDATION GRAND HAVEN, MI 49417	NONE	N/A	MEDICAL	250 00
ETHAN BOVEN C/O WIGGINTON EDUCATION FOUNDATION GRAND HAVEN, MI 49417	NONE	N/A	EDUCATIONAL TUTORING	108 00
ETHAN BOVEN C/O WIGGINTON EDUCATION FOUNDATION GRAND HAVEN, MI 49417	NONE	N/A	EDUCATIONAL TUTORING	108 00
ELISEO REYES C/O WIGGINTON EDUCATION FOUNDATION GRAND HAVEN, MI 49417	NONE	N/A	MEDICAL	92 00
COURTNEY REYNOLDS C/O WIGGINTON EDUCATION FOUNDATION GRAND HAVEN, MI 49417	NONE	N/A	EDUCATIONAL ART FEES	45 00
JORDYN BUREL C/O WIGGINTON EDUCATION FOUNDATION GRAND HAVEN, MI 49417	NONE	N/A	EDUCATIONAL SUMMER TUTORING	150 00
LEVI GREGORY C/O WIGGINTON EDUCATION FOUNDATION SPRING LAKE, MI 49456	NONE	N/A	EDUCATIONAL IOWA UNIVERSITY CAMP FEE	225 00
ELISEO REYES C/O WIGGINTON EDUCATION FOUNDATION GRAND HAVEN, MI 49417	NONE	N/A	MEDICAL	92 00
REIS LANNIN C/O WIGGINTON EDUCATION FOUNDATION GRAND HAVEN, MI 49417	NONE	N/A	EDUCATIONAL MADHH CAMP FEE	400 00

WIGGINTON EDUCATIONAL FOUNDATION  
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PAGE 10, PART XV, LINE 3 - GRANTS AND CONTRIBUTIONS PAID DURING THE YEAR

RECIPIENT	RELATIONSHIP	STATUS	PURPOSE	AMOUNT
KAYLEE KNICKERBOCKER C/O WIGGINTON EDUCATION FOUNDATION GRAND HAVEN, MI 49417	NONE	N/A	MEDICAL GLASSES AND EXAM	195 00
SHEYANNE STEVENS C/O WIGGINTON EDUCATION FOUNDATION SPRING LAKE, MI 49456	NONE	N/A	EDUCATIONAL LIFEGUARD TRAINING COURSE	200 00
BRENT RUPPEL C/O WIGGINTON EDUCATION FOUNDATION MUSKEGON, MI 49441	NONE	N/A	EDUCATIONAL SUMMER ROBOTICS CLASS	55 00
BRITTANY DURHAM C/O WIGGINTON EDUCATION FOUNDATION GRAND HAVEN, MI 49417	NONE	N/A	EDUCATIONAL TUTORING	297 00
COLE SMITH C/O WIGGINTON EDUCATION FOUNDATION GRAND HAVEN, MI 49417	NONE	N/A	MEDICAL	490 00
MOLLY PEEK C/O WIGGINTON EDUCATION FOUNDATION GRAND HAVEN, MI 49417	NONE	N/A	EDUCATIONAL SUMMER SCHOOL	234 00
DARREN TILES C/O WIGGINTON EDUCATION FOUNDATION WEST OLIVE, MI 49460	NONE	N/A	EDUCATIONAL SUMMER SCHOOL	117 00
DAKOTA REYNOLDS C/O WIGGINTON EDUCATION FOUNDATION GRAND HAVEN, MI 49417	NONE	N/A	EDUCATIONAL SUMMER SCHOOL	130 00
GAGE FURGUSON C/O WIGGINTON EDUCATION FOUNDATION GRAND HAVEN, MI 49417	NONE	N/A	EDUCATIONAL SUMMER SCHOOL	234 00
THARAN WELLS C/O WIGGINTON EDUCATION FOUNDATION GRAND HAVEN, MI 49417	NONE	N/A	EDUCATIONAL SUMMER SCHOOL	234 00
MYLON BURKHARDT C/O WIGGINTON EDUCATION FOUNDATION GRAND HAVEN, MI 49417	NONE	N/A	EDUCATIONAL SUMMER SCHOOL	234 00
REBECCA MONTANA C/O WIGGINTON EDUCATION FOUNDATION GRAND HAVEN, MI 49417	NONE	N/A	EDUCATIONAL SUMMER SCHOOL	234 00
HOSKIE WILSON C/O WIGGINTON EDUCATION FOUNDATION GRAND HAVEN, MI 49417	NONE	N/A	EDUCATIONAL SUMMER SCHOOL	234 00

## WIGGINTON EDUCATIONAL FOUNDATION

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## PAGE 10, PART XV, LINE 3 - GRANTS AND CONTRIBUTIONS PAID DURING THE YEAR

RECIPIENT	RELATIONSHIP	STATUS	PURPOSE	AMOUNT
ALMA CHAVEZ C/O WIGGINTON EDUCATION FOUNDATION GRAND HAVEN, MI 49417	NONE	N/A	EDUCATIONAL SUMMER SCHOOL	117 00
NICOLE BURNS C/O WIGGINTON EDUCATION FOUNDATION GRAND HAVEN, MI 49417	NONE	N/A	EDUCATIONAL SUMMER SCHOOL	234 00
NICOLE BURNS C/O WIGGINTON EDUCATION FOUNDATION GRAND HAVEN, MI 49417	NONE	N/A	EDUCATIONAL CORRESPONDENCE COURSE	105 00
ETHAN BOVEN C/O WIGGINTON EDUCATION FOUNDATION SPRING LAKE, MI 49456	NONE	N/A	EDUCATIONAL TUTORING	216 00
FENNA HANSEN C/O WIGGINTON EDUCATION FOUNDATION GRAND HAVEN, MI 49417	NONE	N/A	EDUCATIONAL SUMMER SCHOOL	234 00
STEPHANIE CALDERON C/O WIGGINTON EDUCATION FOUNDATION SPRING LAKE, MI 49456	NONE	N/A	EDUCATIONAL TUTORING	297 00
ASIA BERNIS C/O WIGGINTON EDUCATION FOUNDATION SPRING LAKE, MI 49456	NONE	N/A	EDUCATIONAL CORRESPONDENCE COURSE	123 00
ALMA CHAVEZ C/O WIGGINTON EDUCATION FOUNDATION GRAND HAVEN, MI 49417	NONE	N/A	EDUCATIONAL CORRESPONDENCE COURSE	111 00
SAMANTHA MICHMERHUIZEN C/O WIGGINTON EDUCATION FOUNDATION GRAND HAVEN, MI 49417	NONE	N/A	MEDICAL DENTAL CROWN	625 00
JOZALIN FRANCES C/O WIGGINTON EDUCATION FOUNDATION GRAND HAVEN, MI 49417	NONE	N/A	MEDICAL	700 00
JOEL BROWN C/O WIGGINTON EDUCATION FOUNDATION GRAND HAVEN, MI 49417	NONE	N/A	EDUCATIONAL CREDIT RECOVERY CLASS	104 00
JESSICA BULLIS C/O WIGGINTON EDUCATION FOUNDATION GRAND HAVEN, MI 49417	NONE	N/A	EDUCATIONAL CREDIT RECOVERY CLASS	104 00
ETHAN BOVEN C/O WIGGINTON EDUCATION FOUNDATION SPRING LAKE, MI 49456	NONE	N/A	EDUCATIONAL TUTORING	108 00
SAMANTHA MICHMERHUIZEN C/O WIGGINTON EDUCATION FOUNDATION GRAND HAVEN, MI 49417	NONE	N/A	MEDICAL DENTAL CROWN	625 00
MASON CLARK C/O WIGGINTON EDUCATION FOUNDATION GRAND HAVEN, MI 49417	NONE	N/A	NORP SOCCER CLINIC	35 00

WIGGINTON EDUCATIONAL FOUNDATION  
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PAGE 10, PART XV, LINE 3 - GRANTS AND CONTRIBUTIONS PAID DURING THE YEAR

RECIPIENT	RELATIONSHIP	STATUS	PURPOSE	AMOUNT
JEREMIAH BETZ C/O WIGGINTON EDUCATION FOUNDATION GRAND HAVEN, MI 49417	NONE	N/A	MEDICAL	92 00
JUSTIN HOWARD C/O WIGGINTON EDUCATION FOUNDATION GRAND HAVEN, MI 49417	NONE	N/A	EDUCATIONAL CREDIT RECOVERY COURSE	104 00
JESSICA NICHOLL C/O WIGGINTON EDUCATION FOUNDATION GRAND HAVEN, MI 49417	NONE	N/A	EDUCATIONAL ART CLASS FEE	45 00
JOSHUA MELTON C/O WIGGINTON EDUCATION FOUNDATION GRAND HAVEN, MI 49417	NONE	N/A	MEDICAL	125 00
JEREMIAH BETZ C/O WIGGINTON EDUCATION FOUNDATION GRAND HAVEN, MI 49417	NONE	N/A	MEDICAL	92 00
JEREMIAH BETZ C/O WIGGINTON EDUCATION FOUNDATION GRAND HAVEN, MI 49417	NONE	N/A	MEDICAL	92 00
THEODORE KOOI C/O WIGGINTON EDUCATION FOUNDATION GRAND HAVEN, MI 49417	NONE	N/A	EDUCATIONAL CORRESPONDENCE COURSE	104 00
BRODY SMITH C/O WIGGINTON EDUCATION FOUNDATION GRAND HAVEN, MI 49417	NONE	N/A	NORP SKI CLUB	92 00
NICOLE BURNS C/O WIGGINTON EDUCATION FOUNDATION GRAND HAVEN, MI 49417	NONE	N/A	EDUCATIONAL CORRESPONDENCE COURSE	104 00
KELSEY BIALOWAS C/O WIGGINTON EDUCATION FOUNDATION GRAND HAVEN, MI 49417	NONE	N/A	MEDICAL ASSISTIVE HEARING DEVICES	225 00
ASHLEIGH DRIY C/O WIGGINTON EDUCATION FOUNDATION GRAND HAVEN, MI 49417	NONE	N/A	PERSONAL EXPENSES JOSTENS	99 95
GANELL MARTINEZ C/O WIGGINTON EDUCATION FOUNDATION GRAND HAVEN, MI 49417	NONE	N/A	PERSONAL EXPENSES	18 59
TRACY WILSON C/O WIGGINTON EDUCATION FOUNDATION GRAND HAVEN, MI 49417	NONE	N/A	ADOPT-A-FAMILY HOLM FAMILY	300 00
STEVE BALL C/O WIGGINTON EDUCATION FOUNDATION GRAND HAVEN, MI 49417	NONE	N/A	ADOPT-A-FAMILY JORDAN FAMILY	30 00
STEPHANIE EGREN C/O WIGGINTON EDUCATION FOUNDATION	NONE	N/A	ADOPT-A-FAMILY JORDAN FAMILY	221 17



WIGGINGTON EDUCATIONAL FOUNDATION  
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PAGE 10, PART XV, LINE 3 - GRANTS AND CONTRIBUTIONS PAID DURING THE YEAR

RECIPIENT	RELATIONSHIP	STATUS	PURPOSE	AMOUNT
GRAND HAVEN, MI 49417				
ROBIN LEPPANEN C/O WIGGINGTON EDUCATION FOUNDATION GRAND HAVEN, MI 49417	NONE	N/A	ADOPT-A-FAMILY WHIPPLE,FRAZIER, HUME, YOUNG	660 78
ANNA SLEEPER C/O WIGGINGTON EDUCATION FOUNDATION GRAND HAVEN, MI 49417	NONE	N/A	MEDICAL EYE CARE ONE	67 84
JENNIFER SLEEPER C/O WIGGINGTON EDUCATION FOUNDATION GRAND HAVEN, MI 49417	NONE	N/A	AUTO EXPENSE TIRES	150 18
JENNIFER SLEEPER C/O WIGGINGTON EDUCATION FOUNDATION GRAND HAVEN, MI 49417	NONE	N/A	AUTO EXPENSE TIRES	254 29
GAYNELL MARTINEZ C/O WIGGINGTON EDUCATION FOUNDATION GRAND HAVEN, MI 49417	NONE	N/A	PERSONAL EXPENSES	22 19
TOTAL				18,178 36



Wigginton Educational Foundation

# **GRANT APPLICATION OR REFERRAL FORM**

*(To be completed and turned in to the Secretary of Board of Trustees)*

Secretary, Wigginton Foundation

Grand Haven High School

17001 Ferris

Grand Haven, MI 49417

(616) 850-6000

Name \_\_\_\_\_ Birth Date \_\_\_\_\_ Grade \_\_\_\_\_

Parents' or Guardians' Name \_\_\_\_\_

Residence Address \_\_\_\_\_

Zip \_\_\_\_\_

Phone \_\_\_\_\_ Social Security # \_\_\_\_\_

Educational Objectives (College Aid Applicants See Below)\* \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Why a need for a grant (Use reverse side or attach a separate sheet) \_\_\_\_\_

\_\_\_\_\_

TOTAL COST OF PROGRAM ..... \$ \_\_\_\_\_

Family and Student Contribution .... \$ \_\_\_\_\_

\*Other Confirmed Sources of Aid ... \$ \_\_\_\_\_

Unmet Need and Request ..... \$ \_\_\_\_\_

Date grant is needed \_\_\_\_\_

What other sources of aid have been received? \_\_\_\_\_

What other sources of aid have been applied for? \_\_\_\_\_

What are the alternatives if a grant is not approved? \_\_\_\_\_

\_\_\_\_\_

Signature of Applicant or Person Making Referral

Date

*Trustees meet bi-monthly on the first Wednesday of the month, February, April, June, September, October and December.  
(Please submit request 5 days prior to the meeting.)*

*Feel free to attach any additional information you feel will help to process this referral or application.*

\*College Aid Applicants, **MUST** submit:

1. A copy of your Financial Aid Analysis and/or Financial Report from college.
2. Name of College you will be or are attending.
3. College Transcript for all credits earned.
4. All information that will show need, and amount of educational loans or scholarships

**THE DISTRIBUTION OF FUNDS IS THE SOLE DISCRETION OF THE BOARD OF TRUSTEES.**

SPACE BELOW FOR ADDITIONAL INFORMATION:

DO NOT WRITE BELOW THIS LINE

FOR TRUSTEE USE ONLY

Trustee's Input

BOARD OF TRUSTEES' ACTION: ☐ Approved ☐ Not Approved ☐ Tabled

Date