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Form **990-PF**

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

Do not enter Social Security numbers on this form as it may be made public.
Information about Form 990-PF and its separate instructions is at www.irs.gov/form990pf.
The dinning and ending

Depa	rtmen	at of the Treasury venue Service	Ι.					rity numbers nd its separat								UI	<u>J</u>
		ndar year 2013				out Foi	ш ээц-гг а	nu its separa		and en		s gov/to	<u>m99001</u>		Open to	Public In	spection
Na	ne of	f foundation										A Empi	oyer ide	ntification	number		
_		D1/17 7 11 D				. m. r. c						1 ,		15220			
		RMEIER and street (or PO									Room/suite	+		15339			
		3 CANNA		II III II	Jenvered	10 20 60	(address)			- [noon/suite		hone nur ! 39)	nder 263-	7283		
	_	own, state or pr		untry, and z	ZIP or fo	oreian c	ostal code					+ -			ending, check	here	
		LES, FL				3 1									y ,		
G(heck	all that apply:		Initial retu	rn		[nı	tıal return of a	former p	ublic ch	arıty	D 1. Fo	reign org	anızatıons	s, check her	e	ightharpoonup
				Final retur			L An	nended return				2. For	eign organ	uzations me	eting the 85%	test	
		 		Address c				me change			·	che	eck here ar	nd attach co	eting the 85% imputation	, 1001,	
H (_	type of organiz ction 4947(a)(1						e foundation le private foun	dation						tus was terr (A), check i		
- L	_	arket value of all			_		ing method:		uation	Accru	 al	1			60-month te		
•		Part ĪI, col (c),		J. 10 01 , 500.			ther (specify			, ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	- .				(B), check I		
جي	\$		<u>9,416</u>			l, colu	ımn (d) mus	st be on cast	basis)								
	irt l	Analysis of R (The total of amonecessarily equi	ounts in colu	mns (b), (c), a	ind (d) m	ay not		venue and es per books	(b)	Net inve	estment ne	(c)	Adjusted Income		for charit	sbursem able pur basis or	poses
S	1	Contributions,								` '		20/	N/A			2 ' P	574 f
	2	Check X	if the foundation	n is not required	to attach (Sch B	**************************************	in.			11	and distillation			", 12 K.S.	30° 3000-	13000
Щ	3	Interest on saving cash investments					<u> </u>	<u> </u>	_	200	250	├			CONTRACTOR	MENT	m 1
$\frac{2}{2}$	4	Dividends and	interest fro	om securitie	es			05,359	'	203	, 359.	1			STATE	MEN	Teach
홋	l ba	Gross rents Net rental income	a or floss)					A 1 4 4 5		SE 1, 1994. 3		NAME OF THE PERSON	· ************************************	- 6 - Z - 1 - 1 - 1		· Silve	- 141-14 - 141-14
\tilde{S}	6a	Net gain or (loss)	· · · ·	assets not or	line 10			30,210			3/2	1.00	7			W	
, ue	b	Gross sales price	for all		7,73	34.	KY I	4 4 A	4.00	10000375	\$ (%)	200		25	· - â	(1)	
Revenue SCANNED	7	Capital gain net ii	ncome (from	Part IV, line 2	?)		25	为。秦州	6		,210.				· /*, : ///	` ?\	
ш	0	Net short-term		n					_	77 / A CO.		<u> </u>				* ***	wt Air
	9	Income modific Gross sales less										1 X 1 1			***************************************	%, ' ·	3 3 4-3
	10a h	and allowances Less Cost of good	nde sold								or steel	3			- 550 NO	- 27/2 ² 3 (18)	
	ı	Gross profit or				-	\$0 \$ 100 KH C	CK , Showskins		*		1 200	444	, 1			
	11	Other income	. ,												145		3,300
	12	Total. Add line	es 1 throug	h 1 <u>1</u>			3	35,569	F	3 335	<u>F569.</u>				900	****	
	13	Compensation of		•	es, etc		<u> </u>	0	 								0.
	14	Other employed Pension plans,		_					151 S	SEP-	1 5 20	14 10			·		
es		Legal fees	, employee	Dellelits					1			<u> </u>					
ens		Accounting fee	es	S	ТМТ	2		5,500)GD	JO.N.SI		i -	_	_	5,	500.
Ä	C	Other profession	onal fees	S.	TMT	3		51,645		5-1	-,645		=-				0.
tve		Interest						44 04	Ļ		- 001	ļ					
stra	18	Taxes			TMT	4	<u></u>	11,521	<u>·</u>		,921.	_					0.
iri	19 20	Depreciation ar Occupancy	na depletio	n					╁			-				8/8/8*	
Adn	21	Travel, confere	ences, and r	meetinas					 					_			
bu	22	Printing and pu	•									1					
ng a	23	Other expenses	s	S	TMT	5		115			0.						<u> 115.</u>
ratii	24	Total operatin	g and adm	inistrative			ļ —		1							_	c 1 =
Operating and Administrative Expenses		expenses. Add						68,781		59	,566.	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	i.sgar	, <u>1,528</u> 00		Σ Ω	615. 000.
_		Contributions,						38,000	· · · · · · · · · · · · · · · · · · ·	AMPAN,			₩~~~x	86 8 7 (48)	4	JU,	500.
	∠0	Total expense Add lines 24 ar		ursements	•		5	06,781		59	,566.				4	43,	615.
	27	Subtract line 2		12				77 48	A.S.		7	953					
		Excess of revenue			ursemen	ts		71,212					20 - 20 - 50 - 50 - 50 - 50 - 50 - 50 -	ત્રું છે.			7992) <u>44. – </u>
	b	Net investmen	it income (i	f negative, en	ter -0-)		1.2	* * * * * * * * * * * * * * * * * * * *		276	,003.	466 1. "8" 11 11 11 11 11 11 11 11 11 11 11 11 11	-48 VIX	The Marie	ş'		2000 Jan 1900 Samuelan 1900
	C	Adjusted net in	ncome (dine	egative enter	-0-)		PC - 3		«:-	<i>.</i>		1	N/A		L, 📸	7	

323501 10-10-13 LHA For Paperwork Reduction Act Notice, see instructions.

-	47	Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only	Beginning of year		End of year			
2 8	arı	column should be for end-of-year amounts only	(a) Book Value	(b) Book Value	(c) Fair Market Value			
	1	Cash - non-interest-bearing	443,388.	1,104,221.	1,104,221.			
	2	Savings and temporary cash investments						
	3	Accounts receivable ▶						
		Less; allowance for doubtful accounts	CHANGE CANCEL CANCEL BEST	* 2320*C000*******************************				
	4	Pledges receivable ▶						
	`	Less allowance for doubtful accounts ▶	. V		Salahatan Salahata DYKOMESA			
	5	Grants receivable						
	٦	Receivables due from officers, directors, trustees, and other						
	ľ							
	١,	disqualified persons	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		Mark as the Toler			
	′	Other notes and loans receivable						
	١.	Less: allowance for doubtful accounts						
Assets	8	Inventories for sale or use						
\ss		Prepaid expenses and deferred charges						
_	1	Investments - U.S. and state government obligations						
	l þ	Investments - corporate stock						
	C	Investments - corporate bonds						
	11	Investments land, buildings, and equipment basis						
		Less accumulated depreciation						
	12	Investments - mortgage loans						
	13	Investments - other STMT 6	7,090,600.	6,263,076.	8,312,150.			
	14	Land, buildings, and equipment basis			77.5			
		Less accumulated depreciation						
	15	Other assets (describe ►)						
	16	Total assets (to be completed by all filers - see the						
		instructions. Also, see page 1, item 1)	7,533,988.	7,367,297.	9,416,371.			
_	17	Accounts payable and accrued expenses		•				
	ı	Grants payable						
Ø	19	Deferred revenue						
Liabilities	20	Loans from officers, directors, trustees, and other disqualified persons						
Эģ	21	Mortgages and other notes payable						
Ë	22	Other liabilities (describe >	-					
	23	Total liabilities (add lines 17 through 22)	0.	0.				
		Foundations that follow SFAS 117, check here	·					
		and complete lines 24 through 26 and lines 30 and 31.						
nces	24	Unrestricted						
ä	25	Temporarily restricted						
3ag		Permanently restricted		*				
<u>ام</u> ا		Foundations that do not follow SFAS 117, check here						
Fū		and complete lines 27 through 31.						
ō	27	Capital stock, trust principal, or current funds	7,533,988.	7,367,297.				
Net Assets or Fund Bala		Paid-in or capital surplus, or land, bldg., and equipment fund	0.	0.				
ISS		_ ` ` `	0.	0.				
et /		Retained earnings, accumulated income, endowment, or other funds	7,533,988.	~ •				
ž	30	Total net assets or fund balances	1,533,900.	7,367,297.				
	04	Takel Cabillation and and annual World believed	7 522 000	7 267 207				
_	31	Total liabilities and net assets/fund balances	7,533,988.	7,367,297.				
P	ärt∛	Analysis of Changes in Net Assets or Fund B	alances					
1	Total	net assets or fund balances at beginning of year - Part II, column (a), line		1				
		t agree with end-of-year figure reported on prior year's return)	-	1	7 533 988			
	•	amount from Part I, line 27a		—	7,533,988. <171,212.>			
		increases not included in line 2 (itemize) TIMING DIFF:	ERENCES	2	4,521.			
		ines 1, 2, and 3		3	7,367,297.			
		eases not included in line 2 (itemize)		⊢	1,301,231.			
			lump (h) lipo 20	5	7,367,297.			
<u> </u>	ıvldl	net assets or fund balances at end of year (line 4 minus line 5) - Part II, co	ionai (v), iiile 30	6				
2226					Form 990-PF (2013)			

Part IV Capital Gains	and Losses for Tax on Ir	vestmen	t Income						
(a) List and desc 2-story brick wa	ribe the kind(s) of property sold (e.g arehouse; or common stock, 200 shs	., real estate, s. MLC Co.)		(e)	How a - Purc - Don	cquired chase	(c) Date (mo.,	acquired day, yr.)	(d) Date sold (mo., day, yr.)
1a PERSHING, LLC	- SEE ATTACHED S	TATEME	NT	۲			VARI	OUS	
b PERSHING, LLC						P	VARI		
c CAPITAL GAINS	DIVIDENDS								
d									
е								J	
(e) Gross sales price	(f) Depreciation allowed (or allowable)		st or other basis expense of sale					Gain or (loss) is (f) minus (
a 117,533.			107,39			-			10,143.
ь 827,659.			720,13	4.					107,525.
c 12,542.									12,542.
<u>d</u>				_					
e			10,01,00	_					
Complete only for assets snowin	ig gain in column (h) and owned by t							Col (h) gain i not less than	
(i) F M.V. as of 12/31/69	(j) Adjusted basis as of 12/31/69		cess of col. (i) col. (j), if any			COI.	Losses	(from col. (f	-0-) 01 1))
a							_		10,143.
b									107,525.
C									12,542.
d	·-			_					
e			<u> </u>						
2 Capital gain net income or (net ca	pital loss) $\begin{cases} If gain, also enter \\ If (loss), enter -0- \end{cases}$	ın Part I, line ın Part I, line	7 7	}	2				130,210.
3 Net short-term capital gain or (los		d (6):		٦.					
If gain, also enter in Part I, line 8,	column (c).			\downarrow				/-	
If (loss), enter -0- in Part I, line 8 Part V Qualification U	ndor Section 4040(a) for	Dadward	Tay on Nat		3			N/A	
						lent inc	Onle		
(For optional use by domestic private	toundations subject to the section 4	1940(a) tax on	net investment ind	come.	.)				
If section 4940(d)(2) applies, leave th	ns part blank.								
Was the foundation liable for the sect	ion 4942 tax on the distributable ami	ount of any ve	ar in the hase neri	od?					Yes X No
If "Yes," the foundation does not qual				ou.				ļ	163 22 110
	each column for each year; see the in			itries.					
(a)	(b)			(c)				Dioteihi	(d)
Base period years Calendar year (or tax year beginnir		ributions	Net value of non		table-	use assets		(col. (b) divid	ìtión ratio ded by col. (c))
2012		3,683.		8,	50	6,623	\cdot		.049806
2011		1,089.		8,	56	0,996	•	-	.045683
2010		2,957.				6,013			.043704
2009		8,815.				5,290			.047352
2008	349	9,468.		8,	. 22	2,905	·		.042499
2 Total of line 1, column (d)							2		.229044
	i-year base period - divide the total o	n line 2 by 5,	or by the number o	of yea	rs				
the foundation has been in existen	ce if less than 5 years		·	•			3		.045809
4 Enter the net value of noncharitable	le-use assets for 2013 from Part X, II	ne 5					4	8	3,976,071.
5 Multiply line 4 by line 3							5		411,185.
6 Enter 1% of net investment incom	e (1% of Part I, line 27b)						6		2,760.
7 Add lines 5 and 6							7		413,945.
B Enter qualifying distributions from	•						8	<u> </u>	443,615.
If line 8 is equal to or greater than See the Part VI instructions.	line 7, check the box in Part VI, line 1	1b, and comp	ete that part using	a 1%	tax ra	ate.			

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 2013 or the taxable year beginning in 2013 (see instructions for Part XIV)? If "Yes," complete Part XIV

10 Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses

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Form	n 990-PF (2013) DIERMEIER FAMILY FOUNDATION	36-4545	339		Page 5
P	art 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		х
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had advisory pri	vileges?			
	If "Yes," attach statement (see instructions)		12		х
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?		13	X	
	Website address ► N/A				
14	The books are in care of JEFFREY J. DIERMEIER Telephone no	(239)	263	-72	83
	Located at ► 2113 CANNA WAY, NAPLES, FL	ZIP+4 ▶34	105		
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - Check here			$\overline{}$	
	and enter the amount of tax-exempt interest received or accrued during the year	15	N	/A_	
16	At any time during calendar year 2013, did the foundation have an interest in or a signature or other authority over a bank,			Yes	
	securities, or other financial account in a foreign country?		16		X
	See the instructions for exceptions and filing requirements for Form TD F 90-22.1. If "Yes," enter the name of the foreign			1000	
	country		***** *****	al ; 💯	*
Pā	art VII 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.		2 (10)	Yes	No
1a	a During the year did the foundation (either directly or indirectly):		" steen		ile.
		X No	2000 00-7	7	
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from)			£. "	*. ´
		No	~-00% 2000		, XXX
		X No		36	
		X No	100 CS		607 500-2, 17 ₀
	(5) Transfer any income or assets to a disqualified person (or make any of either available	<u>च्</u> या		. · · · ·	*
		X No) 		63
	(6) Agree to pay money or property to a government official? (Exception Check "No"		3		
	If the foundation agreed to make a grant to or to employ the official for a period after	X No			
	,	A NO	2.2.5		
Ę	b If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations		1b		x
	section 53 4941(d)-3 or in a current notice regarding disaster assistance (see instructions)? Organizations relying on a current notice regarding disaster assistance check here	▶┌┐│	7 34	***	7.
	c 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 2013?		1c		X
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation		10		
_	defined in section 4942(j)(3) or 4942(j)(5)).			. '8.	
a	a At the end of tax year 2013, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning				
_		X No		35.5	
	If "Yes," list the years ▶ , , , ,		3		
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		2 3		
	valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer "No" and attach	İ	1/2		100
	statement - see instructions.)	N/A	2b		
C	c If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here.			tidek sa	<i>X</i>
	>				
3a	a Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time				
	during the year?	X No	X		
b	b If "Yes," did it have excess business holdings in 2013 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 dis	pose		~~ i	2,24.
	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,		ŷ.,		
	Form 4720, to determine if the foundation had excess business holdings in 2013)	N/A	3b		
	a Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	į	4a		X
b	b Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose t	hat			
	had not been removed from jeopardy before the first day of the tax year beginning in 2013?		4b		X

		_	I	
NAPLES, FL 34105	4.00	0.	0.	0.
				•
			!	
	_			
	_		!	
<u></u>		<u></u>		
2 Compensation of five highest-paid employees (other than those i		, enter "NONE."		
(a) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
NONE	1			
	7			
* *************************************				
	7			
Total number of other employees paid over \$50,000		•		

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0.

3 NONE

Total. Add lines 1 through 3

All other program-related investments. See instructions.

Part X Minimum Investment Return (All domestic foundations must complete this part. Foreign foundations, see instructions.) Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes: 8,060,751. a Average monthly fair market value of securities 1a 1,052,011. b Average of monthly cash balances 1b 1c c Fair market value of all other assets 9,112,762. 1d d Total (add lines 1a, b, and c) e Reduction claimed for blockage or other factors reported on lines 1a and 0. 1c (attach detailed explanation) 1e 2 2 Acquisition indebtedness applicable to line 1 assets 3 Subtract line 2 from line 1d 136,691. 4 Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions) 8,976,071. Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4 448.804. Minimum investment return. Enter 5% of line 5 Part XII Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations and certain foreign organizations check here \blacktriangleright and do not complete this part.) 448,804. Minimum investment return from Part X, line 6 1 2,760. 2a Tax on investment income for 2013 from Part VI, line 5 2a 2b b Income tax for 2013. (This does not include the tax from Part VI.) 2.760 c Add lines 2a and 2b 2c Distributable amount before adjustments. Subtract line 2c from line 1 3 3 4 Recoveries of amounts treated as qualifying distributions 446,044. 5 Add lines 3 and 4 5 6 Deduction from distributable amount (see instructions) 7 446,044 Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1 Part XII Qualifying Distributions (see instructions) Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes: 443,615. Expenses, contributions, gifts, etc. - total from Part I, column (d), line 26 1a b Program-related investments - total from Part IX-B 1b 2 Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes 2 3 Amounts set aside for specific charitable projects that satisfy the: 3a a Suitability test (prior IRS approval required) 3b **b** Cash distribution test (attach the required schedule) 443,615. Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4 4 5 Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment 2,760. income. Enter 1% of Part I, line 27b 6 6 Adjusted qualifying distributions. Subtract line 5 from line 4

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

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4940(e) reduction of tax in those years.

Part XIII Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2012	(c) 2012	(d) 2013
1 Distributable amount for 2013 from Part XI,),	A COMPANY COM	
line 7		, - · - · · · · · · · · · · · · · · · ·		446,044.
2 Undistributed income, if any, as of the end of 2013			A. 887	
a Enter amount for 2012 only	***	Est to and the	417,202.	A COMPANY OF THE PARK OF THE P
b Total for prior years:		0.		
3 Excess distributions carryover, if any, to 2013:		0.	, 6544, 444 (Militaria) -	43 6/
a From 2008				ani vahi
b From 2009		The second secon		**************************************
c From 2010				200 V
d From 2011				38.5
e From 2012				
f Total of lines 3a through e	0.			
4 Qualifying distributions for 2013 from	, «		Marie Carlos	
Part XII, line 4: \triangleright \$ 443,615.				
a Applied to 2012, but not more than line 2a	, shows a state of the same		417,202.	
b Applied to undistributed income of prior				
years (Election required - see instructions)		0.		
c Treated as distributions out of corpus				
(Election required - see instructions)	0.	\$457.5		San Your Man
d Applied to 2013 distributable amount			2.7	26,413.
e Remaining amount distributed out of corpus	0.			
5 Excess distributions carryover applied to 2013 (If an amount appears in column (d), the same amount	0.	- C. (1)		0.
must be shown in column (a))				
6 Enter the net total of each column as				
indicated below: a Corpus Add lines 3f, 4c, and 4e Subtract line 5	0.			
b Prior years' undistributed income. Subtract	U•			
line 4b from line 2b		0.		
c Enter the amount of prior years'		`		
undistributed income for which a notice of				and the second
deficiency has been issued, or on which the section 4942(a) tax has been previously				
assessed		0.		
d Subtract line 6c from line 6b. Taxable			9%:3XZ	22 4 447 (22
amount - see instructions		0.		
e Undistributed income for 2012. Subtract line				
4a from line 2a. Taxable amount - see instr.			0.	*** *** ******************************
f Undistributed income for 2013. Subtract				
lines 4d and 5 from line 1. This amount must				440 604
be distributed in 2014		1. /ai 950 (a) 1. (a)	**************************************	419,631.
7 Amounts treated as distributions out of				
corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3)	0.			
8 Excess distributions carryover from 2008				<u>kontiti en </u>
not applied on line 5 or line 7	0.			
9 Excess distributions carryover to 2014.		STATE OF THE STATE		
Subtract lines 7 and 8 from line 6a	0.			
O Analysis of line 9:		**************************************		
a Excess from 2009				
b Excess from 2010				
c Excess from 2011				
d Excess from 2012	TOTAL TOTAL			
e Excess from 2013				

Part XV Supplementary Information (continued) Grants and Contributions Paid During the Year or Approved for Future Payment If recipient is an individual, Recipient Purpose of grant or contribution Foundation show any relationship to **Amount** status of any foundation manager Name and address (home or business) or substantial contributor recipient a Paid during the year ÞС UNRESTRICTED AMERICAN CANCER SOCIETY N/A 250 WILLIAMS STREET 25,000. ATLANTA, GA 30303 ÞС UNRESTRICTED BIG SHOULDERS FUND OF CHICAGO N/A 212 WEST VAN BUREN, SUITE 900 40,000. CHICAGO, IL 60607 ÞС UNRESTRICTED CHAMPIONS FOR LEARNING N/A 3606 ENTERPRISE AVENUE, SUITE 150 20,000. NAPLES, FL 34104 РC UNRESTRICTED FAMILY AND CHILDREN'S CENTER, A\n LACROSSE 1707 MAIN ST LACROSSE, WI 54601 20,000. ₽C UNRESTRICTED HABITAT FOR HUMANITY OF GREATER N/A PORTLAND ME BOX 10505 1,000. PORTLAND, ME 04104 SEE CONTINUATION SHEET(S) 438,000. ▶ 3a Total **b** Approved for future payment NONE 3b 0. Total

Part XVI-A **Analysis of Income-Producing Activities**

Enter gross amounts unless otherwise indicated.	Unrelate	ed business income	Exclu	ded by section 512, 513, or 514	(a)
•	(a) Business	(b) Amount	(C) Exclu- sion code	(d) Amount	(e) Related or exempt function income
1 Program service revenue:	code		code	741100111	Tanonom moonio
a b	-				<u> </u>
	-		\vdash		
	-				
d	-				
e	-		\vdash		
g Fees and contracts from government agencies			\vdash		
2 Membership dues and assessments			\vdash		
3 Interest on savings and temporary cash					
Investments	ļ		1 1	205 250	
4 Dividends and interest from securities		, militaris, maillianis est XV	14	-	(, 4-2 ² / ₂ \ 200 (200 (200 (200))
5 Net rental income or (loss) from real estate:	150 (2005) 4			1. C. 2. C. 1. C.	
a Debt-financed property					
b Not debt-financed property					
6 Net rental income or (loss) from personal					
property					
7 Other investment income					
8 Gain or (loss) from sales of assets other				122 212	
than inventory			18	130,210.	
9 Net income or (loss) from special events					
10 Gross profit or (loss) from sales of inventory					
11 Other revenue:					
a	.				
b	.		\sqcup		
C					
d					
e					
12 Subtotal. Add columns (b), (d), and (e)	多少學(2)(1)	0.	* ** }	335,569.	0.
13 Total. Add line 12, columns (b), (d), and (e)				13	335,569.
(See worksheet in line 13 instructions to verify calculations)					
Part XVI:B Relationship of Activities	to the Acco	omplishment of Ex	emp	t Purposes	
Line No. Explain below how each activity for which inci	ome is reported i	n column (e) of Part XVI-A	contrib	uted importantly to the accom	nolishment of
the foundation's exempt purposes (other than					
N/A		,			
					
					
					
					-
· · · · · · · · · · · · · · · · · · ·					
· •					
	 				
		<u>.</u> .			
					···
				·	

| Information Regarding Transfers To and Transactions and Relationships With Noncharitable Exempt Organizations

1 Did the	organization directly or indi	rectly engage in any	of the following	ng with any other organizati	on described in sec	tion 501(c) of		Yes	No
the Cod	le (other than section 501(c)(3) organizations) o	or in section 5	27, relating to political orga	nizations?			.1	75.3°%
a Transfe	ers from the reporting found	ation to a noncharita	ible exempt or	ganization of:					Par S
(1) Ca:	sh						1a(1)	.	X
(2) Oth	ner assets						1a(2)		X
b Other tr	ansactions.						*	47.76	
(1) Sal	les of assets to a noncharita	ible exempt organiza	tion				1b(1)	**************************************	X
	rchases of assets from a no						1b(2)		X
	ntal of facilities, equipment,						1b(3)		X
	imbursement arrangements						1b(4)		X
	ans or loan guarantees						1b(5)		$\frac{1}{X}$
	rformance of services or me	embershin or fundrai	sına salıcıtatır	nne			1b(6)		$\frac{1}{X}$
	of facilities, equipment, ma	•	•				1c		X
-	nswer to any of the above is			• •	wave chaw the fair	market value of the goods		to.	
	ces given by the reporting fo							ıs,	
	(d) the value of the goods,				ue ili aliy ilalisaciloi	ii or sharing arrangement, s	HOW III		
a)Line no	(b) Amount involved			e exempt organization	(4) 5				
a /Line no	• •		r noncharitaut	e exempt organization	(U) Descriptio	n of transfers, transactions, and	sharing arra	ingeme	nts
		N/A							
	. =								
		i							
Î									
	•								
						· · · · · · · · · · · · · · · · · · ·			
						-	-		
						 			
+									
		· · · · · · · · · · · · · · · · · · ·							
L									
	undation directly or indirect	= :			zations described				1
	on 501(c) of the Code (other	٠,)(3)) or in sect	tion 527?		L	Yes	X] No
b If "Yes,"	complete the following sche			Y-					
	(a) Name of org	anization		(b) Type of organization		(c) Description of relations	11p		
	N/A								
					L				
	ler penalties of perjury, I declare t						the IRS dis	cours f	oie .
Sign and	belief, it is true, correct, and com	nplete Declaration of pro	eparer (other thai	n taxpayer) is based on all inform	nation of which prepare	retu	rn with the	prepare	r
iere	Xul m	Y	. c	1 A solue	Co- Ta		wn below (s	see insti	1′ I
 	gnature of officer or trustee	- Michael	<u> </u>	Date	Title		1 res	ч	No
	Print/Type preparer's na	me	Preparer's si	ionature	Date	Check If PTIN			
	Third typo proparor 3 na	ano	1 1000101010	igitaturo	5410	self- employed			
Paid	MITTITAN C	COLLEGE		M C COUTDES	00/25/14		14266	10	
				M C. SQUIRES	U0/45/14		04368		
Preparer		OLTTE TAX	LLP			Firm's EIN ► 86-10	16577	2	
Jse Only	\ <u>-</u>								
		1 SOUTH W							
	CH	ICAGO, IL	60606	<u> </u>		Phone no. (312)	<u> 486</u> -	<u> 10</u> (00
						Fc	rm 990-	PF /	2013)

Stairway Partners, LLC REALIZED GAINS AND LOSSES

Diermeier Family Foundation 00000005

From 01-01-13 Through 12-31-13

							Gain O	r Loss
Open Date	Close Date	Quantity	Security	Cost Basis	Amort. or Accretion	Proceeds	Short Term	Long Term
02-11-05	01-03-13	5,690	1Shares MSCI EAFE ETF	301,030 25		326,058 14		25,027 89
09-22-05	01-03-13	1,550	Shares Russell 3000 ETF	108,548 88		134,265 74		25,716 86
10-26-12	01-03-13	2,225	iShares Core MSCI Emerging Market ETF	107,389 63		117,532 98	10,143 35	
09-22-05	03-28-13	782	Shares Russell 3000 ETF	54,764 66		72,875 09		18,110 43
08-08-11	03-28-13	928	Shares Russell 3000 ETF	64,935 10		86,480 92		21,545 82
02-11-05	03-28-13	134	Shares Russell 3000 ETF	9,138 17		12,487 55		3,349 38
09-21-11	12-20-13	8,447 805	TIAA-CREF High Yield Bond Fund II	80,929 97		86,590 00		5,660 03
08-22-11	12-20-13	7,524 134	TIAA-CREF High Yield Bond Fund II	71,705 00		77,122 37		5,417 37
09-28-11	12-20-13	3,100 436	TIAA-CREF High Yield Bond Fund II	29,082 09		31,779 47		2,697 38
TOTAL GA						·	10,143 35	107,525 17 0 00
		**************************************		827,523.73×	. 0.00	945,192.26	10,143.35	107,525.17

TOTAL REALIZED GAIN/LOSS 117,668 53

FORM 990-PF	DIVIDEND	S AND INTER	EST FROM SECUR	ITIES ST	TATEMENT 1
SOURCE	GROSS AMOUNT	CAPITAL GAINS DIVIDEND	REVENUE	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME
PERSHING, LLC	217,901	. 12,54	2. 205,359.	205,359.	
TO PART I, LINE 4 =	217,901	12,54	205,359.	205,359.	
FORM 990-PF		ACCOUNTI	NG FEES	Sī	PATEMENT 2
DESCRIPTION		(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
TAX PREPARATION FEES (DELOITTE TAX, LLP)	_	5,500.	0.		5,500.
TO FORM 990-PF, PG 1	, LN 16B	5,500.			5,500.
FORM 990-PF	Oʻ	THER PROFES	SIONAL FEES	ST	PATEMENT 3
DESCRIPTION		(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
INVESTMENT MGMT FEES (STAIRWAY PARTNERS L BANK FEES (PERSHING)		51,605. 40.	51,605. 40.		0.
TO FORM 990-PF, PG 1	, LN 16C	51,645.	51,645.		0.

FORM 990-PF		TAX	ES		STATEMENT 4			
DESCRIPTION	(A) EXPENSI PER BOO		(B) NET INVE MENT INC		(C) ADJUSTEI NET INCOM			
EXCISE TAX FOREIGN TAXES PAID		500. 921.		0. 921.			0.	
TO FORM 990-PF, PG 1, LN 18	11,	521.	7,	921.			0.	
FORM 990-PF	ОТНІ	ER E	XPENSES			STATEMENT	5	
DESCRIPTION	(A) EXPENSI PER BOO		(B) NET INVE MENT INC		(C) ADJUSTEI NET INCOM			
IL FILING FEES	1	115.		0.		1	15.	
TO FORM 990-PF, PG 1, LN 23	1	115.		0.		1	15.	
FORM 990-PF	OTHER	INV	ESTMENTS			STATEMENT	6	
DESCRIPTION			LUATION ETHOD	вос	OK VALUE	FAIR MARKE VALUE	Т	
38,916 SHS ISHARES MSCI EAFE FUND 24,316 SHS ISHARES RUSSELL 30 INDEX FUND	000	(COST		L,870,527.	2,611,0		
22,962.533 SHS US HIGH YIELD INCOME TIAA-CREF BOND FUND II 129,004.304 SHS VANGUARD TOTA	Γ		COST	1	215,389. L,288,215.			
MARKET INDEX - SIGNAL 60,419.41 SHS VANGUARD SHORT- CORPORATE FUND 15,386 SHS ISHARES CORE MSCI	-TERM		COST	J	635,038.			
EMERGING INDEX FUND					742,605.	766,3	77.	
TOTAL TO FORM 990-PF, PART II	(, LINE 1	L3			5,263,076.	8,312,1	50.	

FORM'990-PF

PART XV - LINE 1A LIST OF FOUNDATION MANAGERS STATEMENT 7

NAME OF MANAGER

JEFFREY J. DIERMEIER JULIA M. DIERMEIER

	ER FAMILY FOUNI	DATION		45339
Part XV Supplementary Information 3 Grants and Contributions Paid During the N				
3 Grants and Contributions Paid During the \ Recipient	If recipient is an individual,	T		_
Name and address (home or business)	show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
PACE CENTER ONE WEST ADAMS STREET, SUITE 301	N/A	PC	UNRESTRICTED	
JACKSONVILLE, FL 32202	<u> </u>	ļ		50,000
PAWS ASSISTANCE DOGS 2496 KIRKWOOD AVENUE NAPLES, FL 34112	N/A	₽C	UNRESTRICTED	15,000
THE COMMUNITY HOUSE 415 EIGHTH STREET HINSDALE, IL 60521	N/A	₽C	UNRESTRICTED	25,000
THE GUADALUPE CENTER 509 HOPE CIRCLE IMMOKALEE, FL 34142	N/A	₽C	UNRESTRICTED	20,000
UCAN 3737 N. MOZART STREET CHICAGO, IL 60618	N/A	₽C	UNRESTRICTED	100,000.
UNIVERSITY OF CHICAGO CANCER RESEARCH FOUNDATION 5841 S. MARYLAND AVENUE CHICAGO, IL 60637	N/A	₽C	UNRESTRICTED	35,000
UNIVERSITY OF WISCONSIN ASTRONOMY 475 N. CHARTER STREET MADISON, WI 53706	N/A	₽C	UNRESTRICTED	25,000.
UNIVERSITY OF WISCONSIN FOUNDATION 1848 UNIVERSITY AVENUE MADISON, WI 53726	N/A	₽C	UNRESTRICTED	25,000.
WELLNESS HOUSE 131 N. COUNTY LINE RD. HINSDALE, IL 60521	N/A	PC	UNRESTRICTED	30,000.
YMCA OF THE COULEE REGION 3219 COMMERCE ST. LA CROSSE, WI 54603	N/A	PC	UNRESTRICTED	7,000.
Total from continuation sheets				332,000.

Form **8868** (Rev. January 2014)

Department of the Treasury Intérnal Revenue Service

Application for Extension of Time To File an Exempt Organization Return

File a separate application for each return.

▶ Information about Form 8868 and its instructions is at www.irs.gov/form8868 •

OMB No 1545-1709

If you are filing for an Automatic 3-Month Extension, complete				,-	► X			
If you are filing for an Additional (Not Automatic) 3-Month Ext	ension, c	omplete only Part II (on page 2 of t	this form).					
Do not complete Part II unless you have already been granted a	n automa	tic 3-month extension on a previous	ly filed For	m 8868.				
Electronic filing (e-file). You can electronically file Form 8868 if yo	ou need a	3 month automatic extension of tin	ne to file (6	months for a	corporation			
required to file Form 990-T), or an additional (not automatic) 3 mon								
of time to file any of the forms listed in Part I or Part II with the exc								
Personal Benefit Contracts, which must be sent to the IRS in pape	er format (see instructions). For more details (on the elect	tronic tiling of	this form,			
visit www irs gov/efile and click on e-file for Charities & Nonprofits	Onlyn	when the original (no occupe not	odod)					
Part I Automatic 3-Month Extension of Time		· · · · · · · · · · · · · · · · · · ·			· · · · · · · · · · · · · · · · · · ·			
A corporation required to file Form 990 T and requesting an autom Part I only	,				▶ □			
All other corporations (including 1120-C filers), partnerships, REMI	Cs, and tr	usts must use Form 7004 to reques	t an extens	sion of time				
to file income tax returns		Enter filer's identifying number						
Type or Name of exempt organization or other filer, see instruc	Employer identification number (EIN) or							
print								
	DIERMEIER FAMILY FOUNDATION							
File by the, due date for Number, street, and room or suite no. If a P O, box, se	e instruct	ions	Social security number (SSN),					
filing your 2113 CANNA WAY								
instructions City, town or post office, state, and ZIP code. For a fo	reign add	ress, see instructions						
NAPLES, FL 34105				·				
					[A]			
Enter the Return code for the return that this application is for (file	a separat	te application for each return)			04			
Application	Return	n Application			Return Code			
ls For	Code	Is For						
Form 990 or Form 990-EZ	01	Form 990 T (corporation)	07					
Form 990-BL	02	Form 1041 A	08					
Form 4720 (individual)	03	Form 4720 (other than individual)			09			
Form 990-PF	04	Form 5227	10					
Form 990 T (sec. 401(a) or 408(a) trust)	05	Form 6069	11					
Form 990 T (trust other than above) JEFFREY J. DIER	06 METER	Form 8870 12						
• The books are in the care of > 2113 CANNA WAY								
The books are in the care of 2113 CANNA WAI	- 1421							
Telephone No ▶ (239) 263-7283	&L_ 11.	Fax No						
 If the organization does not have an office or place of business If this is for a Group Return, enter the organization's four digit 0 	in the Un	emption Number (GEN)	If this is for	the whole or	oun check this			
	and atte	of a list with the names and FINs o	fall mamb	are the extens	con is for			
				ors the extern	5011 13 101.			
		tion return for the organization name		The extension	1			
	. Organiza	non retain for the organization have	00 450.0	,,,, o				
is for the organization's return for ► X calendar year 2013 or								
tax year beginning	an	, and ending						
Lax year of eginning	,			_				
2 If the tax year entered in line 1 is for less than 12 months, cl	neck reas	on: Initial return	Final return	n				
Change in accounting period								
The second control of the second seco								
3a If this application is for Forms 990-BL, 990-PF, 990-1, 4720, or 6009, enter the territative tax, less any nonrefundable credits. See instructions 3a \$								
h. If this application is for Forms 990-PF, 990-T, 4720, or 6069, enter any refundable credits and								
estimated tax payments made. Include any prior year overp			3b	\$	4,732.			
c Balance due. Subtract line 3b from line 3a Include your payment with this form, if required,								
by using FFTPS (Electronic Federal Tax Payment System). See instructions 3c \$								
Caution. If you are going to make an electronic funds withdrawal	(direct de	bit) with this Form 8868, see Form 8	3453-EO ar	nd Form 8879	EO for payment			
instructions.								

Form 8868 (Rev. 1-2014)						Page 2
 If you are filing for an Additional (Not Automatic) 3-Month Ex 	xtension,	complete only Part II and check thi	s box		. >	X
Note. Only complete Part II if you have already been granted an	automatic	3-month extension on a previously t	iled Form	8868.	, -	
• If you are filing for an Automatic 3-Month Extension, comple	ete only P	art I (on page 1).				
Part II Additional (Not Automatic) 3-Month E	xtensio	n of Time. Only file the origin	al (no c	opies	needed).	
				MAIN'S	nber, see in:	tructions
Type or Name of exempt organization or other filer, see instru	uctions.					
print	, , , , , , , , , , , , , , , , , , ,			nployer identification number (EIN) or		
DIERMEIER FAMILY FOUNDATION				36-4545339		
due date for Number street and room or suite no. If a P.O. hov see instructions			Social e	ocial security number (SSN)		
filing your return See 2113 CANNA WAY				ecumy	name logi	*)
instructions City, town or post-office, state, and ZIP code For a fe	oreign add	tross see instructions			 -	
NAPLES, FL 34105	orong,, acc	acco, occ manachoria.				
Enter the Return code for the return that this application is for (file	0.0.000	to application for such set				0 4
the recent code for the retain that this application is to the	e a separa	tie application for each return)				0 4
Application	Return	[Anniestica				T
Is For	1 .	Application				Return
Form 990 or Form 990-EZ	Code	1s For			vî v	Code
Form 990 BL	01				, î	***
	02	Form 1041-A				08
Form 4720 (individual)	03	Form 4720 (other than individual)				09
Form 990-PF	04	Form 5227				10
Form 990-T (sec. 401(a) or 408(a) trust)	05	Form 6069			**	11
Form 990-T'(trust other than above)	06	Form 8870				12
STOP! Do not complete Part II if you were not already granted	an autor	natic 3-month extension on a prev	iously fil	ed For	m 8868.	
JEFFREY J. DIE						
• The books are in the care of > 2113 CANNA WAY	- NA.		· · · · · ·		······································	
Telephone No ▶ (239) 263-7283		Fax No. >				
 If the organization does not have an office or place of business 					>	
If this is for a Group Return, enter the organization's four digit						
box ▶ . If it is for part of the group, check this box ▶	and atta	ich a list with the names and ElNs of	all memb	ers the	extension is	for
		BER 15, 2014				
5 For calendar year 2013, or other tax year beginning						
6 If the tax year entered in line 5 is for less than 12 months, c	heck reas	on: La Initial return	Final	return		
Change in accounting period						
7 State in detail why you need the extension			······································			
TAXPAYER RESPECTFULLY REQUESTS			<u> </u>	INF	ORMATIC	N IN
ORDER TO FILE A COMPLETE AND A	ACCUR	ATE RETURN				
8a If this application is for Forms 990 BL, 990-PF, 990 T, 4720,	or 6069,	enter the tentative tax, less any				
nonrefundable credits. See instructions			8a	\$	2	760.
b If this application is for Forms 990-PF, 990-T, 4720, or 6069	, enter an	y refundable credits and estimated				
tax payments made. Include any prior year overpayment all	owed as a	credit and any amount paid				
previously with Form 8868.			8b	\$	4	732.
C Balance due. Subtract line 8b from line 8a. Include your pa	yment wit	h this form, if required, by using				
EFTPS (Electronic Federal Tax Payment System) See instru	uctions		8c	\$		0.
Signature and Verificat	ion mus	t be completed for Part II o	nly.			
Under penalties of perjury, I declare that I have examined this form, includi	ing accomp	anying schedules and statements, and to	the best o	f my kni	owledge and b	elief,
it is true, correct, and complete, and that I am authorized to prepare this fo					11 /	,
Signature: Title	<u>CPA</u>		Date	₹	5/14/19	
				F	orm 8868 (R	ev. 1 2014)