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Return of Private Foundation

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

OMB No 1545-0052

Department of the Treasury Internal Revenue Service

▶ 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.

Open to Public Inspection

For c	alenda	ar year 2014 or tax year beginning , a	nd ending			
Nan	e of foun	dation	 	A E	mployer identification number	
		E FAMILY FOUNDATION			6-3745791	
_	_	street (or P O box number if mail is not delivered to street address)	Roo		elephone number (see instruction	s)
		STATE STREET state or province, country, and ZIP or foreign postal code			63-355-2671	
		ENDORF IA 52722		C if	exemption application is pending	, check here
			n of a former public ch	arity D 1.	Foreign organizations, check hi	ere 🕨 🗍
•		Final return Amended	· ·	·		
		Address change Name cha			Foreign organizations meeting 85% test, check here and attack	-
	de e el e		·· · ···			
	-	/pe of organization X Section 501(c)(3) exempt private			private foundation status was ten ection 507(b)(1)(A), check here	minated under
			e private foundation X Cash Accr			
		ket value of all assets at a reference of a r	X Cash Accr	1	the foundation is in a 60-month to nder section 507(b)(1)(B), check I	. [-]
	ıa orye e 16) ▶		ho on each book \		ider seemen eer (s), 1), eneem	اسا
	irt i	Analysis of Revenue and Expenses (The total of				(d) Disbursements
Г	111.1	amounts in columns (b), (c), and (d) may not necessarily equal	(a) Revenue and expenses per	(b) Net investment income	(c) Adjusted net	for charitable
	,	the amounts in column (a) (see instructions))	books	lincome	income	purposes (cash basis only)
<u> </u>	1	Contributions, gifts, grants, etc., received (attach schedule)	106,773			
Z015	2	Check ► if the foundation is not required to attach Sch B				
. • •	3	Interest on savings and temporary cash investments	6		6	
50 0	4	Dividends and interest from securities	1,646	1,6	46	
>	5a	Gross rents				
NG A	b	Net rental income or (loss)				
Revenue	6a	Net gain or (loss) from sale of assets not on line 10 STMT 1	4,299			
⊋ ₹	þ	Gross sales price for all assets on line 6a 36,155				
E C	7	Capital gain net income (from Part IV, line 2)			0	
	8	Net short-term capital gain	,			
SCAININE!	9	Income modifications				
Ď	10a	Gross sales less returns and allowances	<u></u>			
	b	Less Cost of goods sold Gross profit or (loss) (attach schedule)				
	11	Other income (attach schedule)		<u></u>		
	12	Total. Add lines 1 through 11	112,724	1,6	52 0	
	13	Compensation of officers, directors, trustees, etc	0			<u> </u>
S S	14	Other employee salaries and wages				
8 70th	15	Pension plans, employee benefits				
	16a	Legal fees (attach schedule)				
آثار	b	Accounting fees (attach schedule) STMT 2	526			
Z Z	С	Other professional fees (attach schedule)				
ずを	17	Interest				
<u> 900</u>	18	Taxes (attach schedule) (see instructions) STMT 3	11			
	19	Depreciation (attach schedule).and_depletion				
90°E	20	Occupancy RECEIVED				
	21	Travel, conferences, and meetings-				
Corps Odden NOV 1	22	Printing and publications NOV 12 2015				
ַ בַּ	23	Other expenses (att sch)				
r Operating	24	Total operating and administrative expenses.				
ēr		Add lines 13 through 23 (CDCIN, UT	537		0 (0
ő	25	Contributions, gifts, grants paid	81,351			81,351
_	26	Total expenses and disbursements. Add lines 24 and 25	81,888		0 (81,351
	27	Subtract line 26 from line 12	20.000			
	a	Excess of revenue over expenses and disbursements	30,836		50	
	b	Net investment income (if negative, enter -0-) Adjusted net income (if negative, enter -0-)		1,6		
	C	Aujusteu jiet jijoone (ii negalive, enler -0-)	L	Ł.	1	/

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- ' Page **2**

1 Cach - non-interest-beam 1	Dwat	II Rajance Sheets Attached schedules and amounts in the description column	Beginning of year	End of	year
2 Sevengs and Lemporary cash myestments Accounts researable b Less allowance for doubtful accounts ▶ Less allowance for doubtful accounts ▶ Less allowance for doubtful accounts ▶ Caracter receivable Less allowance for doubtful accounts ▶ Caracter receivable Less allowance for doubtful accounts ▶ Caracter receivable Receivables due from officers, directors, trustees, and other dequalified persons (attach schedule) (see institutions) 7 Dier relies authers receivable (see institutions) 10 Investments – U.S. and faile government obligations (attach schedule) 11 Investments – Corporate bonds (attach schedule) 12 Investments – corporate bonds (attach schedule) 13 Investments – corporate bonds (attach schedule) 14 Investments – corporate bonds (attach schedule) 15 Investments – corporate bonds (attach schedule) 16 Investments – corporate bonds (attach schedule) 17 Investments – ordinate schedule) 18 Less accountated depreciation (stach schedule) 19 Investments – ordinate schedule) 19 Investments – ordinate schedule) 10 Investments – ordinate schedule) 10 Investments – ordinate schedule) 11 Investments – ordinate schedule) 12 Investments – ordinate schedule) 13 Investments – ordinate schedule) 14 Less accountated depreciation (stach schedule) 15 Cother assets (describe ≯ 16 Other assets (describe ≯ 16 Other assets (describe ≯ 16 Other assets (describe ≯ 17 Total assets (for the properties of the schedule) 19 Deferred revenue 10 Deferred revenue 10 Deferred revenue 10 Deferred revenue 11 Total assets (for the properties of the schedule) 12 Other increases of united attach accided inter of the schedule) 13 Total liabilities and chart schedule) 14 United the schedule of the s	Part	Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only (See instructions)	(a) Book Value	(b) Book Value	(c) Fair Market Value
Accounts receivable ► Less allowance for doubtful accounts ► 4 Pledges receivable ► Less allowance for doubtful accounts ► 5 Grants receivable 8 Receivables due from officers, directors, fusitees, and other disciplination of the state of	1	Cash – non-interest-bearing	4,114	8,225	8,225
Less allowance for doubtful accounts PHodge recovable Less allowance for doubtful accounts Caratis recovable Less allowance for doubtful accounts Caratis recovable Less allowance for doubtful accounts Caratis recovable Caratis rec	2	Savings and temporary cash investments			
Piledges receivable	3	Accounts receivable ▶		į	·
Less allowance for doubtful accounts ► Grants recreable Receivables due from officers, directors, rustees, and other disqualified persons (attach schedule) (see instructions) 7 Obernels and learn exception of the desired of the control of the		Less allowance for doubtful accounts ▶			<u>.</u>
5 Grants receivable 6 Reconstible due from officers, directors, trustees, and other disqualified persons (attach schedule) (see instructions) 7 Order inside and local persons (attach schedule) ≥ Less allowance for doubtful accounts ► 8 Inventiones for sale or use and search (attach schedule) ≥ 10a Investments – corporate stock (attach schedule) ≥ 10a Investments – corporate stock (attach schedule) ≥ 11b Investments – corporate bonds (attach schedule) ≥ 12b Investments – bond (attach schedule) ≥ 12b Investments – corporate bonds (attach schedule) ≥ 12b Investments – bond (attach schedule	4	Pledges receivable ▶		į	
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18 Grants payable 19 Deferred revenue 20 Loans from officers, directors, trustees, and other disqualified persons 21 Mortgages and other notes payable (attach schedule) 22 Other liabilities (describe ▶ 23 Total liabilities (describe ▶ 31 Total liabilities (add lines 17 through 22) 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 pnor year's return) 2 Enter amount from Part I, line 27a 3 Other increases not included in line 2 (itemize) ▶ 4 Add lines 1, 2, and 3 5 Decreases not included in line 2 (itemize) ▶		instructions. Also, see page 1, item I)	155,361	186,197	182,074
19 Deferred revenue 20 Loans from officers, directors, trustees, and other disqualified persons 21 Mortgages and other notes payable (attach schedule) 22 Other liabilities (describe ►) 23 Total liabilities (add lines 17 through 22) Foundations that follow SFAS 117, check here and complete lines 24 through 26 and lines 30 and 31. Unrestricted 25 Temporarily restricted 26 Permanently restricted 27 Foundations that do not follow SFAS 117, check here and complete lines 27 through 31. 27 Capital stock, trust principal, or current funds 28 Paid-in or capital surplus, or land, bldg, and equipment fund 29 Retained earnings, accumulated income, endowment, or other funds 30 Total reassets or fund balances (see instructions) 31 Total liabilities and net assets/fund balances (see instructions) 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 pnor year's return) 2 Enter amount from Part I, line 27a 3 Other increases not included in line 2 (itemize) ► 4 Add lines 1, 2, and 3 5 Decreases not included in line 2 (itemize) ► 5 ■	17	Accounts payable and accrued expenses			
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24 Unrestricted 25 Temporarily restricted 26 Permanently restricted 27 Foundations that do not follow SFAS 117, check here and complete lines 27 through 31. 28 Paid-in or capital surplus, or land, bldg , and equipment fund 29 Retained earnings, accumulated income, endowment, or other funds 30 Total net assets or fund balances (see instructions) 31 Total liabilities and net assets/fund balances (see instructions) 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) 2 Enter amount from Part I, line 27a 3 Other increases not included in line 2 (itemize) ▶ 4 Add lines 1, 2, and 3 5 Decreases not included in line 2 (itemize) ▶ 5					
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Instructions) 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) 2 Enter amount from Part I, line 27a 3 Other increases not included in line 2 (itemize) 4 Add lines 1, 2, and 3 5 Decreases not included in line 2 (itemize) 5	10 25	Temporarily restricted			
Instructions) 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) 2 Enter amount from Part I, line 27a 3 Other increases not included in line 2 (itemize) 4 Add lines 1, 2, and 3 5 Decreases not included in line 2 (itemize) 5	뜅 26	· · · · · · · · · · · · · · · · · · ·			
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Instructions) 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) 2 Enter amount from Part I, line 27a 3 Other increases not included in line 2 (itemize) 4 Add lines 1, 2, and 3 5 Decreases not included in line 2 (itemize) 5) 28 28	Paid-in or capital surplus, or land, bldg , and equipment fund			
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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) 2 Enter amount from Part I, line 27a 3 Other increases not included in line 2 (itemize) ▶ 4 Add lines 1, 2, and 3 5 Decreases not included in line 2 (itemize) ▶ 5	~ 31	Total liabilities and net assets/fund balances (see			
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) 2 Enter amount from Part I, line 27a 3 Other increases not included in line 2 (itemize) ► 4 Add lines 1, 2, and 3 5 Decreases not included in line 2 (itemize) ► 5			155,361	186,197	
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3 Other increases not included in line 2 (itemize) ▶ 4 Add lines 1, 2, and 3 5 Decreases not included in line 2 (itemize) ▶ 5				1_1_	
4 Add lines 1, 2, and 3 5 Decreases not included in line 2 (itemize) ► 5					30,836
5 Decreases not included in line 2 (itemize) ▶ 5		·		3	
					186,197
		·	a	 	
6 Total net assets or fund balances at end of year (line 4 minus line 5) – Part II, column (b), line 30 6 186, 197 Form 990-PF (2014)	<u>6</u> T	otal net assets or fund balances at end of year (line 4 minus line 5) – Part II, column	1 (b), line 30	6	

Part IV Capital Gains a	nd Losses for Tax on Investme	ent Income			· · · · · · · · · · · · · · · · · · ·
2-story brick wa	ribe the kind(s) of property sold (e.g., real estate, irrehouse, 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 N/A					
b					ļ
<u>C</u>		 -			
d					
e		(-) 01			
(e) Gross sales price	(f) Depreciation allowed (or allowable)		r other basis ense of sale		n or (loss) f) minus (g)
a b					
C					
d					
Complete only for assets showing	g gain in column (h) and owned by the fo	undation on 12/31/	/69		
	(j) Adjusted basis	1	ss of col (i)		i (h) gain minus t less than -0-) or
(I) F M V as of 12/31/69	as of 12/31/69		l (j), if any	Losses (f	rom col (h))
a					
b					· · · · · · · · · · · · · · · · · · ·
d					
e	_				
2 Capital gain net income or (net o	capital loss) If gain, also enter in If (loss), enter -0- in		2		
3 Net short-term capital gain or (lo	oss) as defined in sections 1222(5) and (_		-	
	3, column (c) (see instructions) If (loss),	enter -0- in			
Part V Qualification U	nder Section 4940(e) for Redu		3		
	ction 4942 tax on the distributable amou alify under section 4940(e) Do not comp		base period?		Yes X No
1 Enter the appropriate amount in	each column for each year, see the inst	ructions before mal	king any entries		
(a) Base period years Calendar year (or tax year beginning	(b) Adjusted qualifying distribution	s Netval	(c) ue of nonchantable-use assets		(d) stribution ratio) divided by col. (c))
2013		,218	191,44		0.763772
2012		3,928	201,74		0.366441
2011		7,880	128,00		0.999008
2010		,151	177,79		0.934535
2009	180	,452	230,60	8	0.782505
2 Total of line 1, column (d)				2	3.846261
•	e 5-year base period – divide the total on has been in existence if less than 5 yea	•	ne	3	0.769252
•	•				
4 Enter the net value of nonchar	table-use assets for 2014 from Part X, lir	ie 5		4	134,873
5 Multiply line 4 by line 3				5	103,751
6 Enter 1% of net investment inc	ome (1% of Part i, line 27b)			6	17
7 Add lines 5 and 6				7	103,768
8 Enter qualifying distributions fro	om Part XII, line 4			8	81,351
If line 8 is equal to or greater the Part VI instructions	nan line 7, check the box in Part VI, line 1	b, and complete the	at part using a 1% tax rate	See the	
					222

Form	990-PF (2014) WEIGLE FAMILY FOUNDATION 36-3745791			' Pa	ge 4
	rt VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 – see instructions)				
	Exempt operating foundations described in section 4940(d)(2), check here and enter "N/A" on line 1				
	Date of ruling or determination letter (attach copy of letter if necessary—see instructions)				
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check				33
	here ▶ and enter 1% of Part I, line 27b			-	
С	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-)				0
3	Add lines 1 and 2				33
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-)				0
5	Tax based on investment income. Subtract line 4 from line 3 If zero or less, enter -0-				33
6	Credits/Payments	·			
а	2014 estimated tax payments and 2013 overpayment credited to 2014				
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					
8					22
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed				33
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid			<u>-</u>	
11	Enter the amount of line 10 to be Credited to 2015 estimated tax ▶ Refunded ▶ 11				
	art VII-A Statements Regarding Activities				
1a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it	\vdash		es	No
	participate or intervene in any political campaign?	1:	3		<u> </u>
þ	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see				
	Instructions for the definition)?	11	•	_	X
	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				
C	Did the foundation file Form 1120-POL for this year?	10			X
d	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year				
	(1) On the foundation ▶ \$ (2) On foundation managers ▶ \$				
е	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed				
	on foundation managers > \$				
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?	2	:	- 1	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 governing instrument, articles of				
	incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes	3	. 1	İ	\mathbf{x}
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	4			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?	<u></u>			X
•	If "Yes," attach the statement required by General Instruction T	-			
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				
	• • •	1,	.	\mathbf{x}	
-	conflict with the state law remain in the governing instrument?		-	$\frac{\hat{\mathbf{x}}}{\mathbf{x}}$	
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	+	^	
8a	Enter the states to which the foundation reports or with which it is registered (see instructions) ▶ IA				
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	_ 8	b	X	
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or		T		
	4942(j)(5) for calendar year 2014 or the taxable year beginning in 2014 (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		\neg		
	names and addresses	1	0		x

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	rt 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					77
	meaning of section 512(b)(13)? If "Yes," attach schedule (see instructions)			11	-	<u> </u>
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified					77
	person had advisory privileges? If "Yes," attach statement (see instructions)			12		<u> </u>
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption applic	ation?	l	13	X	
14	Website address ► N/A The books are in care of ► DAVID B WEIGLE Telep	.hana N	563-3	55_	267	1
14	2611 STATE STREET		303 3	JJ	207	-
	Located at ▶ BETTENDORF IA	ZIP+4 ▶	52722			
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 – Check here	211 14 1	02,22		ı	-
	and enter the amount of tax-exempt interest received or accrued during the year	▶	15		,	
16	At any time during calendar year 2014, did the foundation have an interest in or a signature or other authority		10 1		Yes	No
	over a bank, securities, or other financial account in a foreign country?		1	16		X
	See the instructions for exceptions and filing requirements for FinCEN Form 114, (formerly TD F 90-22 1) If			,,,,		
	"Yes," enter the name of the foreign country					
Pa	rt VII-B Statements Regarding Activities for Which Form 4720 May Be Required					
	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.				Yes	No
1a	During the year did the foundation (either directly or indirectly)					
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person?	Yes	X No			
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a		_			:
	disqualified person?	Yes	X No			
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?	Yes	X No			
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?	Yes	X 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)?	Yes	X 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)	Yes	X No			
þ	If any answer is "Yes" to 1a(1)–(6), did any of the acts fail to qualify under the exceptions described in Regula	itions	/-			
	section 53 4941(d)-3 or in a current notice regarding disaster assistance (see instructions)?		N/A	1b		
	Organizations relying on a current notice regarding disaster assistance check here		▶ ∐		-	
С	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that		37/3			
_	were not corrected before the first day of the tax year beginning in 2014?		N/A	1c		
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private					
	operating foundation defined in section 4942(j)(3) or 4942(j)(5))					
а	At the end of tax year 2014, did the foundation have any undistributed income (lines 6d and	□ v	1977 AL-			
	6e, Part XIII) for tax year(s) beginning before 2014?	Yes	X No			
_	If "Yes," list the years ▶ 20 , 20 , 20 , 20 Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2)					
b	(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		}
С	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here		21/22	20		
·	► 20 , 20 , 20 , 20					
3a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise					
Ju	at any time during the year?	Yes	X No			
b	If "Yes," did it have excess business holdings in 2014 as a result of (1) any purchase by the foundation or					
-	disqualified persons after May 26, 1969, (2) the lapse of the 5-year period (or longer period approved by the					
	Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest, or (3) the lapse of	f				
	the 10-, 15-, or 20-year first phase holding period? (Use Schedule C, Form 4720, to determine if the	•				Ì
	foundation had excess business holdings in 2014)		N/A	3b]	
4a		es?	• -	4a		х
b						·
	charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in			4b		X

Dm	990-PF (2014) WEIGLE FAM	ILY FOUNDATION		745791	· <u> </u>	<u>, , , , , , , , , , , , , , , , , , , </u>	Page 6
<u></u>	rt VII-B Statements Rega	rding Activities for Which Fo	rm 4720 May Be Re	equired (conti	nued)		
5a	During the year did the foundation pa						
		e attempt to influence legislation (sec		Y	es 🗶 No		
	(2) Influence the outcome of any spe	cific public election (see section 4955	, or to carry on,				
	directly or indirectly, any voter reg			Y	es X No		
		or travel, study, or other similar purpos		Y	es 🗓 No		
	(4) Provide a grant to an organization	n other than a charitable, etc , organiza	ation described in				
	section 4945(d)(4)(A)? (see instru	•		Y	es 🗶 No		
	(5) Provide for any purpose other that	n religious, charitable, scientific, litera	ry, or educational				
	purposes, or for the prevention of				es 🗓 No		
b		d any of the transactions fail to qualify		escribed in	/_		
	-	current notice regarding disaster assist			N/A	5b	+
		tice regarding disaster assistance che			▶		
С	If the answer is "Yes" to question 5a(4), does the foundation claim exemption	on from the tax	/	_		
	because it maintained expenditure re			N/A 🗌 Y	'es 📙 No		
		d by Regulations section 53 4945–5(d					
6a	Did the foundation, during the year, r	eceive any funds, directly or indirectly,	to pay premiums				
	on a personal benefit contract?				'es 🔀 No		
b	Did the foundation, during the year, p	pay premiums, directly or indirectly, on	a personal benefit contra	act?	-	6b	X
	If "Yes" to 6b, file Form 8870						
7a		the foundation a party to a prohibited t		٠	es X No		
<u>b</u>		ny proceeds or have any net income a			N/A	7b	ŀ
Pi		Officers, Directors, Trustees	, Foundation Mana	igers, Highly	Paid Employe	es,	
	and Contractors						
1	List all officers, directors, trustees,	foundation managers and their com	pensation (see instruct	tions).			
			(b) Title, and average	(c) Compensation	(d) Contributions to employee benefit	(e) Expense	account.
	(a) Name	and address	hours per week devoted to position	(If not paid, enter -0-)	plans and deferred	other allo	
				· - · · · · · · · · · · · · · · · · · ·	compensation		
D							
	AVID B WEIGLE	CHICAGO	DIRECTOR/MGR				
	400 N LAKE SHORE DRIVE	IL 60657	0.00	0	0		0
В	400 n lake shore drive Enjamin j Weigle	IL 60657 BETTENDORF	0.00 DIRECTOR/MGR			_	
B)	400 n LAKE SHORE DRIVE ENJAMIN J WEIGLE 5200 VALLEY DRIVE	IL 60657 BETTENDORF IA 52722	0.00 DIRECTOR/MGR 0.00	0			0
B)	400 N LAKE SHORE DRIVE ENJAMIN J WEIGLE 5200 VALLEY DRIVE ONATHAN H WEIGLE	IL 60657 BETTENDORF IA 52722 BETTENDORF	0.00 DIRECTOR/MGR 0.00 DIRECTOR/MGR		0		0
B)	400 N LAKE SHORE DRIVE ENJAMIN J WEIGLE 5200 VALLEY DRIVE ONATHAN H WEIGLE 015 COFFELT AVENUE	IL 60657 BETTENDORF IA 52722 BETTENDORF IA 52722	0.00 DIRECTOR/MGR 0.00 DIRECTOR/MGR 0.00		0		
2 J	400 N LAKE SHORE DRIVE ENJAMIN J WEIGLE 5200 VALLEY DRIVE ONATHAN H WEIGLE 015 COFFELT AVENUE OAN W MCGEE	IL 60657 BETTENDORF IA 52722 BETTENDORF IA 52722 BETTENDORF	0.00 DIRECTOR/MGR 0.00 DIRECTOR/MGR 0.00 DIRECTOR/MGR	0	0		. 0
1 3	400 N LAKE SHORE DRIVE ENJAMIN J WEIGLE 5200 VALLEY DRIVE ONATHAN H WEIGLE 015 COFFELT AVENUE OAN W MCGEE 15 HOLMES STREET	IL 60657 BETTENDORF IA 52722 BETTENDORF IA 52722 BETTENDORF IA 52722	0.00 DIRECTOR/MGR 0.00 DIRECTOR/MGR 0.00 DIRECTOR/MGR 0.00	0	0		0
2 J	400 N LAKE SHORE DRIVE ENJAMIN J WEIGLE 5200 VALLEY DRIVE ONATHAN H WEIGLE 015 COFFELT AVENUE OAN W MCGEE 15 HOLMES STREET Compensation of five highest-pai	IL 60657 BETTENDORF IA 52722 BETTENDORF IA 52722 BETTENDORF	0.00 DIRECTOR/MGR 0.00 DIRECTOR/MGR 0.00 DIRECTOR/MGR 0.00	0	0		. 0
1 3	400 N LAKE SHORE DRIVE ENJAMIN J WEIGLE 5200 VALLEY DRIVE ONATHAN H WEIGLE 015 COFFELT AVENUE OAN W MCGEE 15 HOLMES STREET	IL 60657 BETTENDORF IA 52722 BETTENDORF IA 52722 BETTENDORF IA 52722	0.00 DIRECTOR/MGR 0.00 DIRECTOR/MGR 0.00 DIRECTOR/MGR 0.00	0	0 0 0 e, enter		. 0
1 3	400 N LAKE SHORE DRIVE ENJAMIN J WEIGLE 5200 VALLEY DRIVE ONATHAN H WEIGLE 015 COFFELT AVENUE OAN W MCGEE 15 HOLMES STREET Compensation of five highest-pair	IL 60657 BETTENDORF IA 52722 BETTENDORF IA 52722 BETTENDORF IA 52722 d employees (other than those inclu	0.00 DIRECTOR/MGR 0.00 DIRECTOR/MGR 0.00 DIRECTOR/MGR 0.00 ded on line 1 - see inst	0 0 tructions). If non	0		0
1 3	400 N LAKE SHORE DRIVE ENJAMIN J WEIGLE 5200 VALLEY DRIVE ONATHAN H WEIGLE 015 COFFELT AVENUE OAN W MCGEE 15 HOLMES STREET Compensation of five highest-pai	IL 60657 BETTENDORF IA 52722 BETTENDORF IA 52722 BETTENDORF IA 52722 d employees (other than those inclu	0.00 DIRECTOR/MGR 0.00 DIRECTOR/MGR 0.00 DIRECTOR/MGR 0.00 ded on line 1 - see insi	0	O O e, enter (d) Contributions to employee benefit plans and deferred		O O
1 3 2	400 N LAKE SHORE DRIVE ENJAMIN J WEIGLE 5200 VALLEY DRIVE ONATHAN H WEIGLE 015 COFFELT AVENUE OAN W MCGEE 15 HOLMES STREET Compensation of five highest-pai "NONE."	IL 60657 BETTENDORF IA 52722 BETTENDORF IA 52722 BETTENDORF IA 52722 d employees (other than those inclu	0.00 DIRECTOR/MGR 0.00 DIRECTOR/MGR 0.00 DIRECTOR/MGR 0.00 ded on line 1 - see insi	0 0 tructions). If non	0 0 e, enter (d) Contributions to employee benefit	(e) Expens	O O
1 3 2	400 N LAKE SHORE DRIVE ENJAMIN J WEIGLE 5200 VALLEY DRIVE ONATHAN H WEIGLE 015 COFFELT AVENUE OAN W MCGEE 15 HOLMES STREET Compensation of five highest-pair	IL 60657 BETTENDORF IA 52722 BETTENDORF IA 52722 BETTENDORF IA 52722 d employees (other than those inclu	0.00 DIRECTOR/MGR 0.00 DIRECTOR/MGR 0.00 DIRECTOR/MGR 0.00 ded on line 1 - see insi	0 0 tructions). If non	O O e, enter (d) Contributions to employee benefit plans and deferred	(e) Expens	O O
1 3 2	400 N LAKE SHORE DRIVE ENJAMIN J WEIGLE 5200 VALLEY DRIVE ONATHAN H WEIGLE 015 COFFELT AVENUE OAN W MCGEE 15 HOLMES STREET Compensation of five highest-pai "NONE."	IL 60657 BETTENDORF IA 52722 BETTENDORF IA 52722 BETTENDORF IA 52722 d employees (other than those inclu	0.00 DIRECTOR/MGR 0.00 DIRECTOR/MGR 0.00 DIRECTOR/MGR 0.00 ded on line 1 - see insi	0 0 tructions). If non	O O e, enter (d) Contributions to employee benefit plans and deferred	(e) Expens	O O
1 3 2	400 N LAKE SHORE DRIVE ENJAMIN J WEIGLE 5200 VALLEY DRIVE ONATHAN H WEIGLE 015 COFFELT AVENUE OAN W MCGEE 15 HOLMES STREET Compensation of five highest-pai "NONE."	IL 60657 BETTENDORF IA 52722 BETTENDORF IA 52722 BETTENDORF IA 52722 d employees (other than those inclu	0.00 DIRECTOR/MGR 0.00 DIRECTOR/MGR 0.00 DIRECTOR/MGR 0.00 ded on line 1 - see insi	0 0 tructions). If non	O O e, enter (d) Contributions to employee benefit plans and deferred	(e) Expens	O O
1 3 2	400 N LAKE SHORE DRIVE ENJAMIN J WEIGLE 5200 VALLEY DRIVE ONATHAN H WEIGLE 015 COFFELT AVENUE OAN W MCGEE 15 HOLMES STREET Compensation of five highest-pai "NONE."	IL 60657 BETTENDORF IA 52722 BETTENDORF IA 52722 BETTENDORF IA 52722 d employees (other than those inclu	0.00 DIRECTOR/MGR 0.00 DIRECTOR/MGR 0.00 DIRECTOR/MGR 0.00 ded on line 1 - see insi	0 0 tructions). If non	O O e, enter (d) Contributions to employee benefit plans and deferred	(e) Expens	O O
1 3 2	400 N LAKE SHORE DRIVE ENJAMIN J WEIGLE 5200 VALLEY DRIVE ONATHAN H WEIGLE 015 COFFELT AVENUE OAN W MCGEE 15 HOLMES STREET Compensation of five highest-pai "NONE."	IL 60657 BETTENDORF IA 52722 BETTENDORF IA 52722 BETTENDORF IA 52722 d employees (other than those inclu	0.00 DIRECTOR/MGR 0.00 DIRECTOR/MGR 0.00 DIRECTOR/MGR 0.00 ded on line 1 - see insi	0 0 tructions). If non	O O e, enter (d) Contributions to employee benefit plans and deferred	(e) Expens	O O
1 3 2	400 N LAKE SHORE DRIVE ENJAMIN J WEIGLE 5200 VALLEY DRIVE ONATHAN H WEIGLE 015 COFFELT AVENUE OAN W MCGEE 15 HOLMES STREET Compensation of five highest-pai "NONE."	IL 60657 BETTENDORF IA 52722 BETTENDORF IA 52722 BETTENDORF IA 52722 d employees (other than those inclu	0.00 DIRECTOR/MGR 0.00 DIRECTOR/MGR 0.00 DIRECTOR/MGR 0.00 ded on line 1 - see insi	0 0 tructions). If non	O O e, enter (d) Contributions to employee benefit plans and deferred	(e) Expens	O O
1 3 2	400 N LAKE SHORE DRIVE ENJAMIN J WEIGLE 5200 VALLEY DRIVE ONATHAN H WEIGLE 015 COFFELT AVENUE OAN W MCGEE 15 HOLMES STREET Compensation of five highest-pai "NONE."	IL 60657 BETTENDORF IA 52722 BETTENDORF IA 52722 BETTENDORF IA 52722 d employees (other than those inclu	0.00 DIRECTOR/MGR 0.00 DIRECTOR/MGR 0.00 DIRECTOR/MGR 0.00 ded on line 1 - see insi	0 0 tructions). If non	O O e, enter (d) Contributions to employee benefit plans and deferred	(e) Expens	O O
1 3 2	400 N LAKE SHORE DRIVE ENJAMIN J WEIGLE 5200 VALLEY DRIVE ONATHAN H WEIGLE 015 COFFELT AVENUE OAN W MCGEE 15 HOLMES STREET Compensation of five highest-pai "NONE."	IL 60657 BETTENDORF IA 52722 BETTENDORF IA 52722 BETTENDORF IA 52722 d employees (other than those inclu	0.00 DIRECTOR/MGR 0.00 DIRECTOR/MGR 0.00 DIRECTOR/MGR 0.00 ded on line 1 - see insi	0 0 tructions). If non	O O e, enter (d) Contributions to employee benefit plans and deferred	(e) Expens	O O

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Total number of other employees paid over \$50,000

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Part VIII	Information About Officers, Directors, Trustees, Fo		
	and Contractors (continued)		
3 Five highes	st-paid independent contractors for professional services (see i	nstructions). 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>		
		j	
Total number of o	others receiving over \$50,000 for professional services		•
Part IX-A	Summary of Direct Charitable Activities		
	four largest direct charitable activities during the tax year. Include relevant statistical information beneficiaries served, conferences convened, research papers produced, etc.	nation such as the number of	Expenses
1 N/A			
			
2			
3			
4			
Part IX-B	Summary of Program-Related Investments (see I	nstructions)	
	rgest program-related investments made by the foundation during the tax year on lines 1 er		Amount
1 N/A			

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2

All other program-related investments. See instructions

Total. Add lines 1 through 3

•	Amounts paid (including administrative expenses) to description chantable, etc., purposes		1	
а	Expenses, contributions, gifts, etc - total from Part I, column (d), line 26	1a		81,351
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	- [ł	
а	Suitability test (prior IRS approval required)	3a		
b	Cash distribution test (attach the required schedule)	3b	<u> </u>	·
4	Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4	4	<u> </u>	81,351
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income		1	
	Enter 1% of Part I, line 27b (see instructions)	5		0
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6		81,351

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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Pai	t XIII Undistributed Income (see instructions)				
		(a)	(b)	(c)	(d)
	Distributable amount for 2014 from Part XI,	Corpus	Years prior to 2013	2013	2014
	line 7				6,711
	Undistributed income, if any, as of the end of 2014 Enter amount for 2013 only				
	Total for prior years 20, 20, 20				
	Excess distributions carryover, if any, to 2014				
	From 2009 169,032				
	From 2010 157, 323	1			
_	From 2011 121,508	i I			
-	From 2012 63 , 990	1			
	From 2013 136,668				
f	Total of lines 3a through e	648,521		·····	
	Qualifying distributions for 2014 from Part XII,				
	line 4 ▶ \$ 81,351				
а	Applied to 2013, but not more than line 2a				
b	Applied to undistributed income of prior years				1
	(Election required – see instructions)				
С	Treated as distributions out of corpus (Election				
	required – see instructions)				,
d	Applied to 2014 distributable amount				6,711
е	Remaining amount distributed out of corpus	74,640			
5	Excess distributions carryover applied to 2014				
	(If an amount appears in column (d), the same				, in the second second
	amount must be shown in column (a).)				
6	Enter the net total of each column as		•		
	indicated below:				
а	Corpus Add lines 3f, 4c, and 4e Subtract line 5	723,161			
	Prior years' undistributed income Subtract				
	line 4b from line 2b	,			
c	Enter the amount of prior years' undistributed				
·	income for which a notice of deficiency has				
	been issued, or on which the section 4942(a)				
	tax has been previously assessed				
	Subtract line 6c from line 6b Taxable		·		
u					
_	amount – see instructions Undistributed income for 2013 Subtract line				
е					
	4a from line 2a Taxable amount – see				
	Instructions				
Т	Undistributed income for 2014 Subtract lines				
	4d and 5 from line 1. This amount must be	ļ			
	distributed in 2015				0
7	Amounts treated as distributions out of corpus				
	to satisfy requirements imposed by section				
	170(b)(1)(F) or 4942(g)(3) (Election may be				
	required—see instructions)		ļ		
8	Excess distributions carryover from 2009 not				
	applied on line 5 or line 7 (see instructions)	169,032	2		
9	Excess distributions carryover to 2015.				
	Subtract lines 7 and 8 from line 6a	554,129)		
10	Analysis of line 9				
а	Excess from 2010 157, 323	-			
þ	Excess from 2011 121,508	<u>3</u>			
С	Excess from 2012 63,990	<u> </u>			
d	Excess from 2013 136, 668	3			1
_ е	Excess from 2014 74 , 640	0			
					000 DE

Page 11

Part XV Supplementary Informati	on (continued)			· · · · · · · · · · · · · · · · · · ·
3 Grants and Contributions Paid Duri		r Future Payment	- 	
Recipient	If recipient is an individual, show any relationship to any foundation manager	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business	S) or substantial contributor	- recipient		. <u> </u>
a Paid during the year SCHEDULE ATTACHED	n/A	n/A	GENERAL	81,35
Total		······································	▶ 3a	81,35
b Approved for future payment				
N/A				
Total			▶ 3b	

	Analysis of Income-Producing Act			Fuelude	d bureates 640, 640 - 544	
nter gross amou	ints unless otherwise indicated	Unrelate	ed business income	Exclude	d by section 512, 513, or 514	(e)
		(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	Related or exempt function income (See instructions)
 Program serv 	rice revenue			 		
			-	+		
				 		
				 		
f				1		- · · · · · · · · · · · · · · · · · · ·
	contracts from government agencies					
	dues and assessments					
	avings and temporary cash investments					6
	d interest from securities			14	1,646	
5 Net rental inc	come or (loss) from real estate					<u></u>
a Debt-fina	nced property					
b Not debt-	-financed property			_		
6 Net rental inc	come or (loss) from personal property					
7 Other investr			ļ	<u> </u>		
8 Gain or (loss) from sales of assets other than inventory		<u> </u>			4,299
	or (loss) from special events		<u> </u>			
10 Gross profit	or (loss) from sales of inventory					
11 Other revenu	ue a					
			 	+		<u>-</u>
		·				
d						
e		·		0	1,646	4,305
49 CHH+4+A A	d columns (h) (d) and (e)		1	U)		
	d columns (b), (d), and (e)	L	1		·	
13 Total. Add i	ne 12, columns (b), (d), and (e)	<u> </u>		<u></u>	13 _	5,951
13 Total. Add li (See worksheet	ne 12, columns (b), (d), and (e) in line 13 instructions to verify calculations)	ccomplish			13 _	
13 Total. Add in (See worksheet Part XVI-B	ne 12, columns (b), (d), and (e) in line 13 instructions to verify calculations) Relationship of Activities to the A		nent of Exempt I	Purpos	13 es	5,951
13 Total. Add li (See worksheet	ne 12, columns (b), (d), and (e) in line 13 instructions to verify calculations)	e is reported in	nent of Exempt I	Purpos	es buted importantly to the	5,951
13 Total. Add in (See worksheet Part XVI-B Line No.	ne 12, columns (b), (d), and (e) in line 13 instructions to verify calculations) Relationship of Activities to the A Explain below how each activity for which incom	e is reported in	nent of Exempt I	Purpos	es buted importantly to the	5,951
13 Total. Add in (See worksheet Part XVI-B Line No.	ne 12, columns (b), (d), and (e) in line 13 instructions to verify calculations) Relationship of Activities to the A Explain below how each activity for which incom	e is reported in	nent of Exempt I	Purpos	es buted importantly to the	5,951
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13 Total. Add in (See worksheet Part XVI-B Line No.	ne 12, columns (b), (d), and (e) in line 13 instructions to verify calculations) Relationship of Activities to the A Explain below how each activity for which incom	e is reported in	nent of Exempt I	Purpos	es buted importantly to the	5,951
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Form 990-PF (2014)

orm	n 990-PF (2014) WEIGLE FAMILY FOUNDATION 36-37457	91	Paç	ge 1 <u>3</u>
Pa	Information Regarding Transfers To and Transactions and Relationship Exempt Organizations	s With Noncharitable	-	
1	Did the organization directly or indirectly engage in any of the following with any other organization describe	d	Yes	No
	in section 501(c) of the Code (other than section 501(c)(3) organizations) or in section 527, relating to politic organizations?	al		
а	Transfers from the reporting foundation to a noncharitable exempt organization of			İ
	(1) Cash	1a(1)		X
	(2) Other assets	1a(2)		X
þ	Other transactions:			
	(1) Sales of assets to a noncharitable exempt organization	1b(1)		X
	(2) Purchases of assets from a noncharitable exempt organization	1b(2)		X
	(3) Rental of facilities, equipment, or other assets	1b(3)		X
	(4) Reimbursement arrangements	1b(4)		X
	(5) Loans or loan guarantees	1b(5)		X
	(6) Performance of services or membership or fundraising solicitations	1b(6)		X
С	Sharing of facilities, equipment, mailing lists, other assets, or paid employees	1c		X
d	If the answer to any of the above is "Yes," complete the following schedule. Column (b) should always show			

	nswer to any of the above is "Y f the goods, other assets, or se				
value in	any transaction or sharing arr	angement, show in column (d) the value of the go	oods, other assets, or servi	ces received
(a) Line no	(b) Amount involved	(c) Name of noncharitable exempt or	ganization	(d) Description of transfers, tra	ansactions, and sharing arrangements
N/A					
	 	· · · · · · · · · · · · · · · · · · ·			
		· · · · · · · · · · · · · · · · · · ·			
		 			
					
b If "Yes	ped in section 501(c) of the Coo "complete the following sched (a) Name of organization				Yes X No
N/A_				······································	· · · · · · · · · · · · · · · · · · ·
					
Sign Here	der penalties of perjury, I declare that I rect, and complete Declaration of prep	nave examined this return, including a arer (other than taxpayer) is based on	ccompanying schedules all information of which p	oreparer has any knowledge	May the IRS discuss this return with the preparer shown below (see instructions)? X Yes No
Paid	OHN E MOORHEAD		Preparer's signature	Male	Date Check X st self-employed
Use Only	Firm's name ► JOHN E				PTIN P00533476
230 0,		IVER DR STE 100		-	Firm's EIN ► 46-1429281
	MOLINE	, IL 6126 5 -138	3 /4		Phone no 309-757-0550

Schedule B (Form 990, 990-EZ, or 990-PF) Department of the Treasury Internal Revenue Service

Schedule of Contributors

▶ Attach to Form 990, Form 990-EZ, or Form 990-PF. ▶ Information about Schedule B (Form 990, 990-EZ, 990-PF) and its instructions is at www.irs.gov/form990. 2014

OMB No 1545-0047

Name of the organization

Employer identification number

WEIGLE FAMILY	FOUNDATION	36-3745791		
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			
	<u></u> ,			
	overed by the General Rul e or a Special Rule.), (8), or (10) organization can check boxes for both the General Rule and a Special Rul	e See		
General Rule				
-	ing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$ property) from any one contributor. Complete Parts I and II. See instructions for determitributions.			
Special Rules				
regulations under sec 13, 16a, or 16b, and t	escribed in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 ¹ / ₃ % support testions 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Pathat received from any one contributor, during the year, total contributions of the greater amount on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1 Complete Parts	art II, line of (1)		
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. Do not 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.				
990-EZ, or 990-PF), but it mi	It is not covered by the General Rule and/or the Special Rules does not file Schedule Beast answer "No" on Part IV, line 2, of its Form 990, or check the box on line H of its Form o certify that it does not meet the filing requirements of Schedule B (Form 990, 990-EZ,	n 990-EZ or on its		

PAGE 1 OF 1

Page 2

Name of organization
WEIGLE FAMILY FOUNDATION

Employer identification number 36-3745791

Part I	Contributors (see instruction	ons) Use duplicate copies of P	art I if additional space is nee	eded
(a) No.	(b) Name, address		(c) Total contributions	(d) Type of contribution
1	DAVID B WEIGLE 3400 N LAKE SHORE CHICAGO	DRIVE IL 60657	\$ 65,163	Person Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b Name, address		(c) Total contributions	(d) Type of contribution
2	BENJAMIN J WEIGLE 25200 VALLEY DRIVI BETTENDORF		\$ 41,610	Person Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b Name, address	-	(c) Total contributions	(d) Type of contribution
			\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(t Name, addres		(c) Total contributions	(d) Type of contribution
			\$	Person Payroli Noncash (Complete Part II for noncash contributions)
(a) No.		o) s, and ZIP + 4	(c) Total contributions	(d) Type of contribution
			\$	Person Payroli Noncash (Complete Part II for noncash contributions)
(a) No.	1	b) s, and ZIP + 4	(c) Total contributions	(d) Type of contribution
			\$	Person Payroll Noncash (Complete Part II for noncash contributions.)

Page 3

Name of organization WEIGLE FAMILY FOUNDATION

Schedule B (Form 990, 990-EZ, or 990-PF) (2014)

Employer identification number 36-3745791

Part II	nt II Noncash Property (see instructions) Use duplicate copies of Part 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		
1	700 SH PROCTER & GAMBLE CO STOCK				
		\$ 65,163	12/23/14		
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received		
2	500 SH PHILIP MORRIS INTL STOCK				
		\$ 41,610	12/18/14		
(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) 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		
		\$			

Foundation	
Family Fo	
Weigle F)
4613	

36-3745791 FYE: 12/31/2014

Federal Statements

Statement 1 - Form 990-PF, Part I, Line 6a - Sale of Assets

	-	Net Gain / Loss	\$ 4,299	\$ 4,299	
		Depreciation	\$	0 8	
		Expense	v.	\$	
		Cost	31,856 \$	31,856 \$	
How	Received	Sale Price	DONATION 36,155 \$	1 1	
			 တ	S S	
		Date Sold	VARIOUS		
	Description	Date Acquired	CORP 12/24/13 VARIOUS		
	De	Whom	LIBERTY INTERACTIVE CORP	TOTAL	

Statement 2 - Form 990-PF, Part I, Line 16b - Accounting Fees

Charitable Purpose	
Adjusted Net	x x
Net Investment	& &
Total	\$ 526
Description	PREPARATION OF 990-PF TOTAL

Statement 3 - Form 990-PF, Part I, Line 18 - Taxes

Charitable Purpose	n
Adjusted Net	0 \$
Net Investment	\$ \$
Total	\$ 111
Description	FORM 990-PF TOTAL

Statement 4 - Form 990-PF, Part II, Line 10b - Corporate Stock Investments

	Fair Market Value	\$ 173,849 \$ 173,849
	Basis of Valuation	COST
	End of Year	\$ 177,972 \$ 177,972
פומופווופווו + - ו סוווו סספיו ויי מינייו בייי	Beginning of Year	\$ 151,247 \$ 151,247
פומופווופוור + ו סומ	Description	FIDELITY BROKERAGE ACCOUNT VARIOUS CORPOATE STOCKS & MUTL FUNDS TOTAL

14613 Weigle Family Foundation

36-3745791

FYE: 12/31/2014

Federal Statements

Statement 5 - Form 990-PF, Part XV, Line 1a - Managers Who Contributed Over 2% or \$5,000

Name of Manager		Amount
DAVID B WEIGLE	\$	1,688,575
BENJAMIN J WEIGLE		234,655
JONATHAN H WEIGLE		157,398
JOAN W MCGEE	_	82,959
TOTAL	\$_	2,163,587

Weigle Family Foundation 36-3745791 2014 Contributions by Recipient

<u>Organization</u>	City, State	<u>Amount</u>
Bettendorf Public Library	Bettendorf, Iowa	\$80.00
Birdies for Charity	East Moline, IL	\$12,850.00
Blue Devils Athletic Boosters	Davenport, Iowa	\$50.00
Clarissa Cook Hospice	Bettendorf, Iowa	\$100.00
Colorado College	Colorado Springs, CO	\$100.00
Congregation Beth Israel	Chicago, IL	\$1,173.00
Friends Academy Annual Fund	Bayville, New York	\$250.00
Humility of Mary	Davenport, Iowa	\$5,000.00
Iowa College Foundation	Des Moines, Iowa	\$500.00
Jefferson Elementary School	Bettendorf, Iowa	\$50.00
Jewish Federation of the QC	Rock Island, IL	\$1,620.00
Junior Achievement	Davenport, Iowa	\$500.00
Junior League of the QC	Bettendorf, Iowa	\$315.00
Lake View Food Pantry	Chicago, IL	\$100.00
Make a Wish	Davenport, Iowa	\$25.00
Mayo Clinic Cancer Research	Rochester, MN	\$100.00
Putnam Museum	Davenport, Iowa	\$250.00
QC Symphony	Rock Island, IL	\$200.00
RiverBend Food Pantry	Davenport, Iowa	\$236.45
Sacred Heart Cathedral	Davenport, Iowa	\$100.00
Scott Community College Foundation	Bettendorf, Iowa	\$200.00
Student Hunger Drive	Davenport, Iowa	\$100.00
Temple Emanuel	Bettendorf, Iowa	\$21,586.00
Temple Emanuel Sisterhood	Davenport, Iowa	\$36.00
U of Iowa Childrens Hospital	Iowa City, IA	\$2,000.00
U of Iowa Foundation	Iowa City, IA	\$2,400 00
United Way of the QC	Davenport, Iowa	\$13,000.00
Univ of Penn	Philadelphia, PA	\$18,100.00
Vinyard of Hope	Davenport, Iowa	\$50.00
W&L Hillel House	Lexington, Virginia	\$100.00
Wartburg College	Waverly, Iowa	\$100.00
Womens Connection	Davenport, Iowa	\$80.00
Total		\$81,351.45