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## Form 990-PF Department of the Treasury Internal Revenue Service

**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. OMB No 1545-0052

		year 2014 or tax year beginning			<del></del>	T	· · · · · · · · · · · · · · · · · · ·
Nam	e of four	ndation				A Employer identification	on number
ים	יייייייר	OFF FAMILY FOUND	א ייד האז			37-647412	2
		reet (or P.O box number if mail is not delive			Room/sulte	B Telephone number	
		WOODSMILL ROAD	•		325	314-336-0	560
City	or town,	state or province, country, and ZIP	r foreign postal code	<del> </del>		C If exemption application is	
		ERFIELD, MO 630 hat apply Initial return		itial return of a for	rmer public charity	D 1. Foreign organizatio	ns, check here
•		Final return		mended return			
		Address chan		ame change		Foreign organizations recheck here and attach	meeting the 85% test, computation
CI	neck type	of organization X Section 5	01(c)(3) exempt priva	te foundation		E If private foundation s	
	Section	4947(a)(1) nonexempt charitable tr	ıst Other taxat	ole private foundat	ion	under section 507(b)(	. [
Fai	r market	value of all assets at end of year   J	_		Accrual	F If the foundation is in	a 60-month termination
		II, col (c), line 16)	Other (specifi			under section 507(b)(	1)(B), check here 🕨 🖳
<u> </u>		1,026,840.		<del></del>			(4)
Pa	rt [ An (Th	alysis of Revenue and Expenses e total of amounts in columns (b), (c), and (i essanly equal the amounts in column (a) )	expens	evenue and ses per books	(b) Net investment income	(c) Adjusted net income	(d) Disbursements for chantable purposes (cash basis only)
	1 Con	tributions, gifts, grants, etc., receive	1 2	72,793.		N/A	
		ck I if the foundation is not required to at	ich Sch B				
	3 Inter	rest on savings and temporary in investments		33.	33.		STATEMENT 1
	4 Divi	dends and interest from securities		20,817.	20,817.	<u> </u>	STATEMENT 2
		ss rents .					
		rental income or (loss)		<6,869.	<del></del>		
ne	Da Net	gain or (loss) from sale of assets not on liness sales price for all tes on line 6a	317.	<del>\0,003.</del>			
Revenue		ital gain net income (from Part IV, line 2)		<del></del>	0.	***************************************	
윤	-	short-term capital gain					
		ome modifications		*****			
1	Gms	ss sales less returns allowances					
		s Cost of goods sold			The Art of		
	c Gro	ss profit or (loss)					
		er income	<u> </u>	06 774			
		al. Add lines 1 through 11		86,774.	20,850.		
		npensation of officers, directors, trustees, e	с	0.	0.	<del> </del>	0
		er employee salaries and wages ision plans, employee benefits				<del> </del>	
ses	16a Leg	• • • •				<u> </u>	<del></del>
ens		counting fees STM	т з	1,500.	0.		0
쫎		er professional fees STM		4,780.	4,780.	,	0
<u>8</u>		reet					
trat	18 Tax	es STM	T 5	1,113.	0.	,	0
and Administrative Expen	<b>19</b> Dep	preciation and depletion			<del></del> .		
Ę		cupancy			<del> </del>		
φþ		vel, conferences, and meetings				<u> </u>	
		nting and publications				<del> </del>	
ting		er expenses al operating and administrative	•				
perating		penses. Add lines 13 through 23		7,393.	4,780.		0
Q		ntributions, gifts, grants paid	1	45,450.	17,000	<u>'</u>	145,450
		al expenses and disbursements.	· · · · ·			1	
	Δdr	d lines 24 and 25	1	152,843.	4,780.	,	145,450
_	<b>27</b> Sut	otract line 26 from line 12:					
		ess of revenue over expenses and disburse	ments . 1	133,931.	<del></del>		
	a Exc				1		
2350 1-24	b Net	i investment income (if negative, enter justed net income (if negative, enter -0-	<del></del>		16,070.	N/A	

1	Total net assets or fund balances at beginning of year - Part II, column (a), line 30		
	(must agree with end-of-year figure reported on prior year's return)	1	687,573.
2	Enter amount from Part I, line 27a	2	133,931.
3	Other increases not included in line 2 (itemize)	3	0.
4	Add lines 1, 2, and 3	4	821,504.
	Decreases not included in line 2 (itemize)	5	0.
6	Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b), line 30	6	821,504.

Part IV Capital Gains a	and Losses for Tax on Ir	vestment	Income					· · · · · · · · · · · · · · · · · · ·
(a) List and descr 2-story brick wa	ribe the kind(s) of property sold (e g rehouse; or common stock, 200 she	, real estate, s MLC Co )		` Þ - F	w acquired Purchase Donation	(c) Date acqu (mo., day, y	ured yr.)	(d) Date sold (mo , day, yr )
1a 667 SHS CENTURY	Y TEL INC				P	01/20/		01/03/14
	IDATED EDISON				P	01/20/		01/03/14
c 490 SHS INTEL				ļ	P	01/20/	12	01/03/14
d				-				
<u>e</u>	<del></del>		<del> </del>	<del></del>		(1) 0		<u> </u>
(e) Gross sales price	(f) Depreciation allowed (or allowable)		t or other basis xpense of sale			(h) Gain ( (e) plus (f)		(g)
a 21,088.			25,28					<4,200.
b 22,660.		<u> </u>	24,94					<2,283. <386.
c 12,569.			12,95	3.				< 300.
<u>d</u>		<u> </u>	-				_	
Complete only for constant showing	g gain in column (h) and owned by	the foundation	on 12/31/60	-	·	/I) Garag /Col. /	h) asia	minue
Complete only for assets showin	(j) Adjusted basis		cess of col (I)			(I) Gains (Col. ( ol. (k), but not li	ess thai	n -0-) or
(i) F M.V as of 12/31/69	as of 12/31/69		cot (j), if any			Losses (fro	m col (	(h))
2				$\neg +$				<4,200.
a b								<2,283.
C								<386.
d								
е		Ĺ						
2 Capital gain net income or (net ca	pital loss) { If gain, also enter of the loss of the l	r in Part I, line - in Part I, line	7 7	}	2			<6,869.
3 Net short-term capital gain or (los								
If gain, also enter in Part I, line 8,		id (O).		J	1			
If (loss), enter -0- in Part I, line 8				<u>. ]  </u>	3		<u> N/A</u>	
Part V   Qualification U	nder Section 4940(e) for	Reduced	Tax on Net	Inve	stment ir	come		· · · · · · · · · · · · · · · · · · ·
(For optional use by domestic private	foundations subject to the section	4940(a) tax on	net investment in	ncome.)				
If section 4940(d)(2) applies, leave th	nis nart hlank							
								<u> </u>
Was the foundation liable for the sect			•	riod?		•		Yes X No
If "Yes," the foundation does not qual  1 Enter the appropriate amount in 6	each column for each year; see the i	ompiete triis pa	rr fore making any e	ntries				
(a)	(b)	ilatituotiona be	Total making any c	(c)				(d)
Base periód years Calendar year (or tax year beginnii	Advicted avalifying dia	tributions	Net value of no		ble-use asse	ts (col		oùtión ratio vided by col. (c))
2013		5,000.	• , =		878,09		(-)	.142354
2012	12	8,862.			856,32	8.		.150482
2011		4,000.			186,26			.558335
2010								
2009								
2 Total of line 1, column (d)						2		.851171
3 Average distribution ratio for the	5-year base period - divide the total	on line 2 by 5,	or by the number	r of year	s			
the foundation has been in exister	nce if less than 5 years					3		.283724
								047 020
4 Enter the net value of noncharitat	ole-use assets for 2014 from Part X,	line 5 .				. 4		947,839.
								260 025
5 Multiply line 4 by line 3						. 5		268,925.
	/40/ - 4 D- A4 K 07h)							161.
6 Enter 1% of net investment incon	ne (1% of Part I, line 270)			٠	•••	6		
7 Add trace Food 6						7		269,086.
7 Add lines 5 and 6						<del>-'- -</del>		200,000.
8 Enter qualifying distributions from	n Part XII line 4					8		145,450.
	i line 7, check the box in Part VI, lîne				tax rate	· <u></u>		-,,- <u>-</u> -,- <u>-</u> -
See the Part VI instructions	TIME T, CHECK THE DUX III FAIL VI, IIIIC	, 10, and 60111) 		.g u 1/0 	.u. 1010.			
								Form 000 DE (0014)

P	Minimum Investment Return (All domestic foundations must complete this part. Foreign foundations	ndations, se	ee instructions.)
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes:		······································
а	Average monthly fair market value of securities	1a	962,273.
b	Average of monthly cash balances	1b	
C	Fair market value of all other assets	10	·
d	Total (add lines 1a, b, and c)	1d	962,273.
e	Reduction claimed for blockage or other factors reported on lines 1a and		
	1c (attach detailed explanation)		
2	Acquisition indebtedness applicable to line 1 assets	2	<u> </u>
3	Subtract line 2 from line 1d	3	962,273.
4	Cash deemed held for charitable activities Enter 1 1/2% of line 3 (for greater amount, see instructions)	4	14,434.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	947,839.
6	Minimum Investment return. Enter 5% of line 5	6	47,392.
P	Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations are foreign organizations check here  and do not complete this part.)	nd certain	
1	Minimum investment return from Part X, line 6	1	47,392.
2a	Tax on investment income for 2014 from Part VI, line 5		
b	Income tax for 2014. (This does not include the tax from Part VI )		
C	Add lines 2a and 2b	2c	321. 47,071.
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	47,071.
4	Recoveries of amounts treated as qualifying distributions	4	0.
5	Add lines 3 and 4	5	47,071.
6	Deduction from distributable amount (see instructions)	6	0.
7	Distributable amount as adjusted Subtract line 6 from line 5 Enter here and on Part XIII, line 1	7	47,071.
P	Qualifying Distributions (see instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:		
а	Expenses, contributions, gifts, etc - total from Part I, column (d), line 26	1a	145,450.
b	Program-related investments - total from Part IX-B	1b	0.
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes	2	
3	Amounts set aside for specific charitable projects that satisfy the		
а	Suitability test (prior IRS approval required)	3a	
b	Cash distribution test (attach the required schedule)	3b	
4	Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4	4	145,450.
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment		
	income. Enter 1% of Part I, line 27b	5	0.
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	145,450.
	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
	40.40/a) and uniting of tay in those years		

Part XIII Undistributed Income (see instructions)

		<del></del>		
ļ	(a) Corpus	(b) Years prior to 2013	(c) 2013	(d) 2014
1 Distributable amount for 2014 from Part XI,	, , , , , , , , , , , , , , , , , , ,			4- 0
line 7		} }	<u>.,, , ,, ,,,,,,,,,,,,,,,,,,,</u>	47,071.
2 Undistributed income, if any, as of the end of 2014				
a Enter amount for 2013 only	······································		0.	
b Total for prior years:				
· ·		0.	,-,	
3 Excess distributions carryover, if any, to 2014:				
a From 2009				
b From 2010				
c From 2011 97, 264.				
d From 2012 86,587.				
e From 2013 81,677.	265,528.			
f Total of lines 3a through e	203,320.			
4 Qualifying distributions for 2014 from				
Part XII, line 4 ► \$ 145, 450.			0.	
a Applied to 2013, but not more than line 2a				····
b Applied to undistributed income of prior		0.		
years (Election required - see instructions)				<del></del>
c Treated as distributions out of corpus	0.			
(Election required - see instructions)			<u>                                     </u>	47,071.
d Applied to 2014 distributable amount	98,379.			11,70,110
e Remaining amount distributed out of corpus	0.			0.
Excess distributions carryover applied to 2014 (If an amount appears in column (d), the same amount must be shown in column (a))	0.			
6 Enter the net total of each column as indicated below:	262.007			
& Corpus Add lines 3f, 4c, and 4e Subtract line 5	363,907.			
b Prior years' undistributed income Subtract		0		
line 4b from line 2b		0.		
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		0.		
assessed		<u> </u>		
d Subtract line 6c from line 6b. Taxable		0.		
amount - see instructions		V •		
e Undistributed income for 2013 Subtract line			0.	
4a from line 2a. Taxable amount - see instr			0.	
f Undistributed income for 2014 Subtract				
lines 4d and 5 from line 1. This amount must				0.
be distributed in 2015 7 Amounts treated as distributions out of			111111111111111111111111111111111111111	
corpus to satisfy requirements imposed by				
section 170(b)(1)(F) or 4942(g)(3) (Election				
may be required - see instructions)	0.			
8 Excess distributions carryover from 2009		· · · · · · · · · · · · · · · · · · ·	<del></del>	
	0.			
not applied on line 5 or line 7				
9 Excess distributions carryover to 2015.  Subtract lines 7 and 8 from line 6a	363,907.			
10 Analysis of line 9	300,007			
a Excess from 2010				
b Excess from 2011 97, 264.				
© Excess from 2012 86,587.				
d Excess from 2013 81,677.				
e Excess from 2014 98, 379.				
423581		······································		Form <b>990-PF</b> (2014)

Part AV Supplementary information	(continuea)			
3 Grants and Contributions Paid During the Y	ear or Approved for Future	Payment	·	
Recipient  Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager	Foundation status of	Purpose of grant or contribution	Amount
	any foundation manager or substantial contributor	recipient	**	
a Paid during the year				
AMERICAN HEART ASSOCIATION	NONE	PUBLIC CHARITY	GENERAL PURPOSE	
460 N LINDBERGH				
ST LOUIS, MO 63141		<u> </u>		2,500
	NONE		GENERAL PURPOSES	
GRACE HILL 2600 HADLEY STREET	NONE	PUBLIC CHARITY	GENERAL PURPOSES	
ST LOUIS, MO 63106				2,000
CREVE COEUR LIONS CLUB 12136 LAKE COMO DRIVE	NONE	PUBLIC CHARITY	CHARITABLE PURPOSES	
ST LOUIS, MO 63146			<u> </u>	2,500
JENSEN SCHMIDT TENNIS DOWN SYNDROME 2822 WINTERGREEN DRIVE FLORISSANT, MO 63033	NONE	PUBLIC CHARITY	general purposes	3,000
	NTINUATION SHE	ET (S.)	. ▶ 3	la 145,450
b Approved for future payment  NONE				
	<u></u>	<u> </u>	<u> </u>	
Total			<u>.                                    </u>	3b   0

423611 11-24-14 \*\* SEE PURPOSE OF GRANT CONTINUATIONS

		•	•	
Part XVI-A	Analyeis	of Incom	ma_Droduk	cing Activities
\$ \$41 \ 2\\\X\\\X\\X\\X\\X\\X\\X\\X\\X\\X\\X\\X\	Allalysis		HE-FIOUUS	Jiliy Activities

		ousiness_income	Evaluded b	y section 512, 513, or 514	·
Enter gross amounts unless otherwise indicated.	(a) Business	(b) Amount	(C) Exclu- sion	(d) Amount	(e) Related or exempt function income
1 Program service revenue:	code	Amount	code	Amount	
a	<del>                                     </del>		+		
	<del> </del>		<del> </del>		<del></del>
c			<del>  </del>		
d	<del>                                     </del>		<del>   </del>		
e					
g Fees and contracts from government agencies	<del></del>		<del>                                     </del>		<u> </u>
O Mambasakia disea and assessments					
3 Interest on savings and temporary cash			<del>                                     </del>		····
Investments	1 1		14	33.	
4 Dividends and interest from securities	<del></del>		14	20,817.	<u> </u>
5 Net rental income or (loss) from real estate		<del></del>			
a Debt-financed property					
b Not debt-financed property					<del> </del>
6 Net rental income or (loss) from personal				· -	
property	1 1		1 1		
7 Other investment income					
8 Gain or (loss) from sales of assets other					
than inventory			14	<6,869.	•
9 Net income or (loss) from special events	li i				
10 Gross profit or (loss) from sales of inventory					
11 Other revenue					
a					
b		<del></del>			
C					
d	-				
e					
12 Subtotal. Add columns (b), (d), and (e)		0.		13,981.	0.
13 Total. Add line 12, columns (b), (d), and (e)				. 13	13,981.
Part XVI-B Relationship of Activities t  Line No. Explain below how each activity for which inco the foundation's exempt purposes (other than	me is reported in c	olumn (e) of Part XVI-A			plishment of
423621 11-24-14					Form <b>990-PF</b> (2014

Form 990-PF (2014) POTTHOFF FAMILY FOUNDATION 37-6474122

Part XVII Information Regarding Transfers To and Transactions and Relationships With Noncharitable

		<b>Exempt Organi</b>	izations					<del></del>		
1 D	id the org	anization directly or indir	rectly engage in any of the foll	lowing with any	y other organization	n described ın sectio	n 501(c) of		Yes	No
th	ne Code (d	other than section 501(c)	)(3) organizations) or ın sectio	on 527, retating	j to political organi	zations?				
аT	ransfers f	rom the reporting founda	ation to a noncharitable exemp	pt organization	of					
(*	1) Cash							1a(1)		<u>X</u>
(2	2) Othera	assets						1a(2)		X
<b>b</b> 0	ther trans	actions:								
•	•		ble exempt organization					1b(1)		<u>X</u>
(2	2) Purcha	ases of assets from a nor	ncharitable exempt organization	on				1b(2)		<u>X</u>
(3	3) Rental	of facilities, equipment,	or other assets					1b(3)		<u>X</u>
(4	4) Reimb	ursement arrangements		-				1b(4)		<u>X</u>
(!	5) Loans	or loan guarantees						1b(5)		X
•	•		mbership or fundraising solic					1b(6)	<u> </u>	X
			iling lists, other assets, or pair					10		_X_
			"Yes," complete the following						sets,	
			oundation. If the foundation re		an fair market valui	e in any transaction	or sharing arrangement, s	how in		
			other assets, or services recei		arganization	(d) p	of townstand towns to the control of	aha		
(a) Line	e no (	b) Amount involved	(c) Name of nonchar		organization	(u) Description	of transfers, transactions, and	snaring ar	rangeme	nts
		<del></del> -	N/	А	-	<del> </del>			<u> </u>	
-	$\overline{}$				<del></del>	<del> </del>				
	-									
			-							
		<del> </del>								
		<del></del>								
					<del></del>					
			<u> </u>							
		•	ctly affiliated with, or related to			zations described	_	<b>—</b>	(T)	_
		• •	er than section 501(c)(3)) or in	n section 527?			. L	Yes	LX	□ No
<u>b</u>	f "Yes," co	mplete the following sch		(h) Tun	a of a consider		a) December of relations			
		(a) Name of org	Janization	ן (ם) ועס	e of organization		c) Description of relations	nip		
		N/A					<del></del>			
		<del> </del>								
				<del></del>			<del></del>			
	Under	penalties of perjury, I declare	e that I have examined this return, in	ncluding accompa	anying schedules and	statements, and to the	best of my knowledge			
Sig	n and be	elief, Als true, correct, and col	implete. Declaration of preparer (oth	her than taxpayer	is based on all inform	nation of which preparer	nas any knowledge ret	y the IRS um with t	ne prepa	rer
Her		X/on all XX	Landida -	_	4/16/15	RETIRE		own below		] No
	Sign	ature of officer or trustee	e /) /	D;	ate	Title				
		Print/Type preparer's n		er's signature		Date	Check X if PTIN			
			ا م ۱	1 20. 41.	DOI:		self- employed			
Pai	d	JOHN M. HI			Doune	4/14/15		0389		:
Pre	parer		N M HILLHØUSE	E CPA L	ıLC		Firm's EIN ► 20-0	3432	229	
Use	e Only									
			24 S WOODSMILI							
		CH	HESTERFIELD, N	MO 6301	.7	<del></del>	Phone no 314-3			
							F	orm <b>99</b>	0-PF	(2014)

Part XV Supplementary Information				
3 Grants and Contributions Paid During the		1		
Recipient  Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager	Foundation status of	Purpose of grant or contribution	Amount
	or substantial contributor	recipient		
		ļ		
SHELDON CONCERT HALL	NONE	PUBLIC CHARITY	GENERAL PURPOSES	
3648 WASHGINTON BLVD				
ST LOUIS, MO 63108				2,000.
ST PATRICKS CENTER	NONE	DIBLIC CHARTTY	GENERAL PURPOSES	
800 NORTH TUCKER BLVD				
ST LOUIS, MO 63101-1000				5,000.
	l.o.v.			
TRINITY LUTHERAN CHURCH 812 SOULARD ST	NONE	PUBLIC CHARITY	GENERALPURPOSES	
ST LOUIS, MO 63104				15,000.
ALZHEIMERS ASSOCIATION OF ST LOUIS	NONE	PUBLIC CHARITY	GENERAL PURPOSES	
9370 OLIVE BLVD ST LOUIS, MO 63132-3214				2,000.
				2,000.
BACKSTOPPERS	NONE	PUBLIC CHARITY	GENERAL PURPOSES	
PO BOX 66927 ST LOUIS MO 63166				10.000
31 LOUIS, NO 03100	-			10,000.
HOWARD PARK CENTER	NONE	PUBLIC CHARITY	GENERAL PURPOSES	
15834 CLAYTON RD ELLISVILLE, MO 63011				2 000
EBBISVIBBE, NO USUII				2,000.
USO OF MISSOURI	NONE	PUBLIC CHARITY	GENERAL PURPOSES	
PO BOX 10367				
ST LOUIS, MO 63145		<del></del>		3,000.
MISSOURI BOTANICAL GARDENS	none	PUBLIC CHARITY	GENERAL PURPOSES	
PO BOX 299				
ST LOUIS, MO 63166		/		2,000.
RANKEN JORDAN HOME	NONE	PUBLIC CHARITY	GENERAL PURPOSES	
11365 DORSETT RD				
MARYLAND HGTS, MO 63043		<del></del>		8,000.
SOUTHEAST MISSOURI UNIVERSITY	NONE	PUBLIC CHARITY	GENERAL PURPOSES	
ONE UNIVERSITY PLAZA MS 7300		1		
CAPE GIRARDEAU, MO 63701				3,000.
Total from continuation sheets	<u> </u>		<u></u>	135,450.

3 Grants and Contributions Paid During the				
Recipient	If recipient is an individual, show any relationship to	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	any foundation manager or substantial contributor	recipient		
UNITED WAY OF GREATER ST LOUIS	NONE	PUBLIC CHARITY	GENERAL PURPOSES	
PO BOX 500280				20.00
ST LOUIS, MO 63150-0280				20,000
FOREST PARK FOREVER	NONE	PUBLIC CHARITY	GENERAL PURPOSE	
5595 GRAND DRIVE IN FOREST PK				
ST LOUIS, MO 63112				4,000
LUTHERAN ASSOCIATION FOR SPECIAL	NONE	PUBLIC CHARITY	GENERAL PURPOSES	
EDUCATION				
3558 S. JEFFERSON AVE				
ST LOUIS, MO 63118				12,200
ELEVEN POINT RIVER CONSERVANCY	NONE	PUBLIC CHARITY	GENERAL PURPOSES	
RR 1, BOX 1272 ALTON, MO 65606				2,000
COCA	NONE	PUBLIC CHARITY	GENERAL PURPOSES	
524 TRINITY AVE				
ST LOUIS, MO 63130				2,000
	1007		GENERAL PURPOSES	
KIRK CARE PO BOX 220652	NONE	PUBLIC CHARITI	SENERAL PURPOSES	
KIRKWOOD, MO 63122-0652				2,000
MADCO	NONE	PUBLIC CHARITY	GENERAL PURPOSES	
ONE UNIVERSITY BLVD 243 AAB				
ST LOUIS, MO 63121				3,000
NEW MUSIC CIRCLE	NONE	DIIDI.TC CUADITY	GENERAL PURPOSES	
560 TRINITY AVE	NONE	FORDIC CHARITI	SENERAL FORFOSES	
UNIVERSITY CITY, MO 63130				2,000
INSTITUTE OF AMERICA ACUPUNCTE AND	NONE	PUBLIC CHARITY	GENERAL PURPOSE	
LIFE MEDICINE				
443 N NEW BALLAS RD #224				
ST. LOUIS, MO 63141				2,000
	NONE	nunt to our service	COMPOST DIMPOCE	
JAZZ FOUNDATION OF AMERICA 322 WEST 48TH STREET, 6TH FLOOR	NONE	PUBLIC CHARITY	GENERAL PURPOSE	
NEW YORK, NY 10036				2,000
Total from continuation sheets	<u> </u>	<u> </u>	<u> </u>	1

Part XV Supplementary Information Grants and Contributions Paid During the	Year (Continuation)			
Recipient	If recipient is an individual, show any relationship to	Foundation	Purpose of grant or	
Name and address (home or business)	any foundation manager or substantial contributor	status of recipient	contribution	Amount
WOMEN'S SAFE HOUSE	NONE	PUBLIC CHARITY	GENERAL PURPOSE	
PO BOX 63010				
ST LOOUIS, MO 63163				25
OLD TOWNE ARTISAN STUDIO 51105 AVENIDA VILLA SUITE 101 LA QUINTA, CA 92253	NONE	PUBLIC CHARITY	GENERAL PURPOSE	2,00
Z. Z				
NAMI ST. LOUIS 1750 S. BRENTWOOD BLVD, SUITE 511 ST. LOUIS, MO 63144	NONE	PUBLIC CHARITY	GENERAL PURPOSE	4,000
ST. LOUIS ZOO	NONE	PUBLIC CHARITY	GENERAL PURPOSE	
FOREST PARK				2 22
ST. LOUIS, MO 63110				3,00
ST. LOUIS SYMPHONY	NONE	PUBLIC CHARITY	GENERAL PURPOSE	
718 N. GRAND BLVD ST. LOUIS, MO 63103				5,00
FOOD OUTREACH 3117 OLIVE	NONE	PUBLIC CHARITY	GENERAL PURPOSE	
ST LOUIS, MO 63103				3,00
ST VINCENT HOME FOR CHILDREN	NONE	PUBLIC CHARITY		
7401 FLORISSANT RD ST LOUIS, MO 63121-4835			GENERA PURPOSE	5,00
WASHINGTON UNIVERSITY	NONE	PUBLIC CHARITY		
ONE BROOKINGS DRIVE ST LOUIS, MO 63108				10,00
Total from continuation sheets		· · · · · · · · · · · · · · · · · · ·	· · · · · · · · · · · · · · · · · · ·	

	POTTHOFF FAMILY FOUNDATION	37-64/4122
Part XV	Supplementary Information	
	, - ,	
3a Grants	and Contributions Paid During the Year Continuation of Purpose of Grant or Contribution	
NAME OF	RECIPIENT - FOOD OUTREACH	
111111111111111111111111111111111111111	THE STATE OF THE S	<del></del>
CENTEDAT	PURPOSE	
GENERAL	FURFUSE	
GENERAL	PURPOSE	
<del></del>		
		<del></del>
<del></del>		
		-

# 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, or 990-PF) and its instructions is at www.irs.gov/form990

OMB No 1545-0047

Name of the organization

Employer identification number

	PC	37-6474122					
Organiz	ation type (check o	ne):					
Filers of	f:	Section:					
Form 99	0 or 990-EZ	501(c)( ) (enter number) organization					
		4947(a)(1) nonexempt charitable trust <b>not</b> treated as a private foundation					
Organization type (check one):  Filers of: Section:  Form 990 or 990-EZ							
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					
	•		le. See instructions.				
General	l Rule						
X	-	•	· · · · · · · · · · · · · · · · · · ·				
Special	Rules						
	sections 509(a)(1) any one contribute	and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or, during the year, total contributions of the greater of (1) \$5,000 or (2) 2% of the amour	or 16b, and that received from				
	year, total contribu	itions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educ	-				
	year, contributions is checked, enter I purpose. Do not c	exclusively for religious, charitable, etc., purposes, but no such contributions totaled more the total contributions that were received during the year for an exclusively religious complete any of the parts unless the <b>General Rule</b> applies to this organization because it	ore than \$1,000. If this box , charitable, etc., t received <i>nonexclusively</i>				
but it m	ust answer "No" on	nat is not covered by the General Rule and/or the Special Rules does not file Schedule E Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on its Form 1990 (Form 1990, 1990-EZ), or 990-PF).					

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990, 990-EZ, or 990-PF. Schedule B (Form 990, 990-EZ, or 990-PF) (2014)

Name of organization

Employer identification number

### POTTHOFF FAMILY FOUNDATION

37-6474122

Part I	Contributors (see instructions). Use duplicate copies of Part I if additional	space is needed.	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	GERALD POTTHOFF  643 EAST MONTROE ST  KIRKWOOD, MO 63122	\$ <u>225,613.</u>	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
2	GERALD POTTHOFF  643 EAST MONTROE ST  KIRKWOOD, MO 63122	\$ 47,180.	Person Payroll Noncash X (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
3		\$	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
4		\$	Person X Payroll  Noncash  (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)

Employer identification number

### POTTHOFF FAMILY FOUNDATION

37-6474122

art II	Noncash Property (see instructions). Use duplicate copies of Pa	art II if additional space is needed.	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
2	500 SHARES WALT DISNEY INC	\$\$	12/08/14
(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
		s	
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received

Name of organ	nization		Employer identification number
	FF FAMILY FOUNDATION	The Alice Annual is a Alice and Annual is a distributed to	37-6474122
Part III	the year from any one contributor. Complete c completing Part III, enter the total of exclusively religious	olumns (a) through (e) and the following the following chantable, etc., contributions of \$1,000 or le	n section 501(c)(7), (8), or (10) that total more than \$1,000 for ng line entry. For organizations ses for the year (Enter this info. once.)
(a) No. from Part I	Use duplicate copies of Part III if additional	(c) Use of gift	(d) Description of how gift is held
-			
		(e) Transfer of gift	
-	Transferee's name, address, ar	nd ZIP + 4	Relationship of transferor to transferee
-			
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
-		(e) Transfer of gift	
	Transferee's name, address, ar		Relationship of transferor to transferee
-			
(a) No.			
from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
		(e) Transfer of gift	
	Transferee's name, address, a	nd ZIP + 4	Relationship of transferor to transferee
-			
(a) No.			
from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
-		(e) Transfer of gift	
	Transferee's name, address, a	nd ZIP + 4	Relationship of transferor to transferee
423454 11-05-	14		Schedule B (Form 990, 990-EZ, or 990-PF) (2014

FORM 990-PF INTER	est on savii	NGS AND TEM	PORARY	CASH IN	VESTMENTS	STATEMENT	1
SOURCE	(A REVE PER B	NUE			(C) MENT ADJUSTED NET INCOME		
AMERITRADE			33.		33.		_
TOTAL TO PART I, L		33.		33.			
FORM 990-PF	DIVIDEND	S AND INTER	EST FR	OM SECUR	ITIES	STATEMENT	2
SOURCE	GROSS AMOUNT	CAPITAL GAINS DIVIDEND	R	(A) EVENUE R BOOKS	(B) NET INVES MENT INCO		
AMERITRADE	20,817	•	0.	20,817.	20,81	7.	
TO PART I, LINE 4	20,817	•	0.	20,817.	20,81	7.	
FORM 990-PF		ACCOUNTI	NG FEE	S	V1-12	STATEMENT	3
DESCRIPTION		(A) EXPENSES PER BOOKS	NET I	B) NVEST- INCOME	(C) ADJUSTED NET INCOM		
TAX RETURN PREPARA	TION	1,500.		0.			0.
TO FORM 990-PF, PG	1, LN 16B	1,500.	•	0.			0.
FORM 990-PF	0	THER PROFES	SSIONAL	FEES		STATEMENT	4
DESCRIPTION		(A) EXPENSES PER BOOKS	NET I	B) NVEST- INCOME	(C) ADJUSTEI NET INCOM		
INVESTMENT MGT FEE	s	4,780	•	4,780.		<del></del>	0.
TO FORM 990-PF, PG	1, LN 16C	4,780	•	4,780.			0.
	=						==

FORM 990-PF	TAXES				STATEMENT	
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVE: MENT INC		(C) ADJUSTED NET INCOM		
EXCISE TAX	1,113.		0.		<del></del>	0.
TO FORM 990-PF, PG 1, LN 18	1,113.		0.			0.
FORM 990-PF	OTHER INV	ESTMENTS			STATEMENT	6
DESCRIPTION		LUATION ETHOD	вос	OK VALUE	FAIR MARKE VALUE	T
SEE ATTACHED BOOK DIV >TAX DIVIDENDS		COST		688,363. 54.	893,753	
TOTAL TO FORM 990-PF, PART I	I, LINE 13	:		688,417.	893,7	53.
	F SUBSTANTIA PART VII-A,		UTOR	5	STATEMENT	7
NAME OF CONTRIBUTOR	ADDR	RESS				
GERALD POTTHOFF		E MONROE	63122	2		
FORM 990-PF	PART XV - I OF FOUNDATI		RS		STATEMENT	8

NAME OF MANAGER

GERALD A POTTHOFF JUDITH POTTHOFF