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SCANNED MAY 2 3 2016

Form **990-PF**

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	calen	dar year 2015 or tax year beginning	and ending				
Na	me of for	undation			A Emp	loyer identification number	
D	E W	ITT FAMILIES CONDUIT FOUNDAT	TON		20	2761226	
Nu	mber an	d street (or P O box number if mail is not delivered to street address)		Room/suite		-2761226 phone number (see instruction	e)
		N. RIVER, STE. B			1	6-393-8160	3)
		n, state or province, country, and ZiP or foreign postal code			T		
		AND MI 49424			C If exe	emption application is pending,	, check here
G	Check	all that apply 🔲 Initial return 🔲 Initial retu	rn of a former public o	charity	D 1 F	oreign organizations, check he	ere 🕨
		Final return Amended	return		2 F	oreign organizations meeting t	the
	_	Address change Name cha	inge		85	5% test, check here and attach	computation •
HC	Check	type of organization X Section 501(c)(3) exempt private	foundation		E If priv	ate foundation status was terr	ninated under
	Section	n 4947(a)(1) nonexempt charitable trust Other taxable	le private foundation			on 507(b)(1)(A), check here	▶ [
I Fa	air mai	rket value of all assets at J Accounting method		crual	F If the	foundation is in a 60-month te	rmination
er	nd of y	ear (from Part II, col. (c), Other (specify)				section 507(b)(1)(B), check h	i i
lır	ne 16)	▶ \$ 8,259 (Part I, column (d) must	be on cash basis)				
Pa	art f	Analysis of Revenue and Expenses (The total of	(a) Revenue and	(b) Not so			(d) Disbursements
		amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a) (see instructions))	expenses per books	(b) Net inv		(c) Adjusted net income	for charitable purposes
	1	Contributions, gifts, grants, etc , received (attach schedule)					(cash basis only)
	2	Check ► If the foundation is not required to attach Sch B	676,472	-			
မ	3	Interest on savings and temporary cash investments		 			
2016 2016	4	Dividends and interest from securities					
œ	5a	Gross rents	3		3		
	b	Net rental income or (loss)		ļ			
₩	۱ ـ		2 250				
≥	6a b	Net gain or (loss) from sale of assets not on line 10 Gross sales price for all assets on line 6a 674,122	-2,350	<u> </u>			
કે જે	7	Gross sales price for all assets on line 6a 674, 122 Capital gain net income (from Part IV, line 2)		ļ	06 534		
جَ لِكُ	8	Net short-term capital gain		5	96,534		
₽Ř.	9	Income modifications		ļ		0	
m, δί m, Ω	10a						
Rec in Batching/ MAY Corres Corres on Revenue	b	Gross sales less returns and allowances Less Cost of goods sold		 			
हुर इंटर	C	Gross profit or (loss) (attach specule)					
u.	11	Other income (attach schedule)		 			
	12	Total. Add lines 1 through 11:	674,125	5	96,537	0	
	13	Compensation of officers, directors, trustees etc	0/1/125		70, 23 /		
penses	14	Other employee salaries and wages					
ű	15	Pension plans, employee pension					
$\overline{}$	16a	Legal fees (attach schedule)		 			
Ú	b	Accounting fees (attach schedule 608 STMT 1	2,117		550		1,567
<u>ĕ</u> .	С	Other professional fees (attach schedule)		<u> </u>			1,307
rat	17	Interest		<u> </u>			
ist	18	Taxes (attach schedule) (see instructions) STMT 2	6,342				
۔⊑	19	Depreciation (attach schedule) and depletion					
튭	20	Occupancy					
4	21	Travel, conferences, and meetings					· · · _
Ĕ	22	Printing and publications					
Operating and Administrative Ex	23	Other expenses (att sch.) STMT 3	136		58		78
tin	24	Total operating and administrative expenses.					
Fa		Add lines 13 through 23	8,595		608	o	1,645
þę	25	Contributions, gifts, grants paid	663,882				663,882
_	26	Total expenses and disbursements. Add lines 24 and 25	672,477		608	0	665,527
	27	Subtract line 26 from line 12					
	а	Excess of revenue over expenses and disbursements	1,648				
	ь	Net investment income (if negative, enter -0-)			95,929		
	С	Adjusted net income (if negative, enter -0-)				0	

For Paperwork Reduction Act Notice, see instructions.

626

<u>F</u>	<u>orm</u> 99	0-PF(2015) DE WITT FAMILIES CONDUIT FO	UNDATI		26	Page 2
	Part	Balance Sheets Attached schedules and amounts in the description or should be for end-of-year amounts only (See instruct)	olumn	Beginning of year		of year
-	1	Cash – non-interest-bearing	ions j	(a) Book Value	(b) Book Value	(c) Fair Market Value
	2	Savings and temporary cash investments		6,611		
	3	Accounts receivable	8,259	8,259		
		Less allowance for doubtful accounts				
	4	Pledges receivable				
	-	Less allowance for doubtful accounts				
	5	Grants receivable				
	6	Receivables due from officers, directors, trustees, and other				
	"	disqualified persons (attach schedule) (see				
		instructions)				
	7	•				
	′	Other notes and loans receivable (att schedule)	0			
	8	Less allowance for doubtful accounts Inventories for sale or use	0			
Assets	9					
SS	10a	Prepaid expenses and deferred charges				
1	l .	Investments – U.S. and state government obligations (attach schedule)				
	b	Investments – corporate stock (attach schedule) Investments – corporate bonds (attach schedule)				
	С 11	·				
	''	Investments – land, buildings, and equipment basis Less accumulated depreciation (attach sch.)				
	12	Investments – mortgage loans				
	13	Investments – thortgage loans Investments – other (attach schedule)				
	14	Land, buildings, and equipment basis				
	14	Less accumulated depreciation (attach sch.)				
	15	Other assets (describe	,			
	16	Total assets (to be completed by all filers – see the)			
	10	instructions Also, see page 1, item I)		6 611	0 250	0.050
٦	17	Accounts payable and accrued expenses		6,611	8,259	8,259
	18	Grants payable		·····		
S	19	Deferred revenue				
ij	20	Loans from officers, directors, trustees, and other disqualified persons		· · · - · -		
Liabilities	21	Mortgages and other notes payable (attach schedule)	3			
בׁ	22	Other liabilities (describe	,			
ļ	23	Total liabilities (add lines 17 through 22)	′	0	0	
7		Foundations that follow SFAS 117, check here	$\overline{}$			
Š		and complete lines 24 through 26 and lines 30 and 31.				
ဦ	24	Unrestricted				
癝	25	Temporarily restricted	Ì		·	
ĕ	26	Permanently restricted		· · · · · · · · · · · · · · · · · · ·	· · · · · · · · · · · · · · · · · · ·	
Net Assets or Fund Balances	-	Foundations that do not follow SFAS 117, check here	▶ 🗓			
듸		and complete lines 27 through 31.	,			
<u></u>	27	Capital stock, trust principal, or current funds				
뜅	28	Paid-in or capital surplus, or land, bldg, and equipment fund		· · · · · · · · · · · · · · · · · · ·		
SS	29	Retained earnings, accumulated income, endowment, or other funds		6,611	8,259	
7	30	Total net assets or fund balances (see instructions)	•	6,611	8,259	
žΙ	31	Total liabilities and net assets/fund balances (see	•	0,011	0,237	
		instructions)		6,611	8,259	
	Part I		nces	<u> </u>	3,233	
_		net assets or fund balances at beginning of year - Part II, column (a),		st agree with		
		of-year figure reported on prior year's return)	22 (1100		1	6,611
2		r amount from Part I, line 27a			2	1,648
		r increases not included in line 2 (itemize) ▶			3	2,040
		ines 1, 2, and 3			4	8,259
5		eases not included in line 2 (itemize)			5	
6		net assets or fund balances at end of year (line 4 minus line 5) - Part	li, column (b), line 30	6	8,259

Form 990-PF (2015)	DE	עדידיד	FAMILIES	COMDITTY	FOUNDATION	38-2761226
(2013)	יבע	**	LUTTILL	COMPOTI	LOUNDALION	

Part IV Capital Gains a	<u>nd Losses for Tax on Investn</u>	ent Income	·	<u> </u>		
	ribe the kind(s) of property sold (e.g., real estate, archouse, or common stock, 200 shs. MLC Co.)		(b) How acquired P – Purchase D – Donation	(c) Date (mo , d		(d) Date sold (mo , day, yr)
1a SEE WORKSHEET						
<u>b</u>						
С						
<u>e</u>		Т	<u> </u>			<u> </u>
(e) Gross sales price	(f) Depreciation allowed (or allowable)		expense of sale			or (loss) minus (g)
a						
		 				
C		 			<u> </u>	···-
d e		 -				
	g gain in column (h) and owned by the	foundation on 12/	31/69			
	(j) Adjusted basis		excess of col (i)			(h) gain minus less than -0-) or
(i) F M V as of 12/31/69	as of 12/31/69	1	r col (j), if any			om col (h))
a						
b						
С						
_d		<u> </u>				
е		<u>.l</u>				
2 Capital gain net income or (net o	apıtal loss) If gaın, also enter ı If (loss), enter -0- ı			2		596,534
· · · · · · · · · · · · · · · · · · ·	ss) as defined in sections 1222(5) and					
If gain, also enter in Part I, line 8	, column (c) (see instructions) If (loss)	, enter -0- ın	,			
Part I, line 8			<u> </u>	3		
	nder Section 4940(e) for Redu			ome		
(For optional use by domestic private	e foundations subject to the section 494	l0(a) tax on net in	vestment income)			
If section 4940(d)(2) applies, leave the	nis part blank					
Was the foundation liable for the sec	tion 4942 tax on the distributable amou	int of any year in t	he base period?			Yes X No
If "Yes," the foundation does not qua	lify under section 4940(e) Do not com	olete this part				
1 Enter the appropriate amount in	each column for each year, see the ins	tructions before m	naking any entries	_		
(a)	(b)		(c)		Diet	(d)
Base period years Calendar year (or tax year beginning in	Adjusted qualifying distribution	ns Net	value of noncharitable-use asse	ts	(coi (b) c	ribution ratio livided by col. (c))
2014	1,120	0,099		331	<u> </u>	176.922919
2013		0,459		521	<u>.</u>	<u>139.451228</u>
2012		0,393		424		83.870225
2011		2,405	26,			27.132582
2010	630	0,075	19,	632		32.094285
2 Total of line 1, column (d)				2		459.471239
• •	5-year base period - divide the total or	line 2 by 5, or by	the			
number of years the foundation I	nas been in existence if less than 5 year	rs		3		91.894248
4 Enter the net value of noncharita	ble-use assets for 2015 from Part X, lii	ne 5		4		5,326
5 Multiply line 4 by line 3				5		489,429
6 Enter 1% of net investment incom	me (1% of Part I, line 27b)			6		5,959
7 Add lines 5 and 6				7	_	495,388
8 Enter qualifying distributions from				8		665,527
If line 8 is equal to or greater that Part VI instructions	in line 7, check the box in Part VI, line	b, and complete t	that part using a 1% tax	rate See t	he	
				-		OOO DE

Forn	n 990-PF (2015) DE WITT FAMILIES CONDUIT FOUNDATION 38-2761226 art VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 – see instructions)		·	F	age 4
1a	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	Domostic foundations that went the senters (0.40/.)	1 5,			
	here ► X 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-)	2			0
3		3		5,	959
4		4			0
5	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-	5		5,	959
6	Credits/Payments				
а	2015 estimated tax payments and 2014 overpayment credited to 2015 6a 6,741				
b	Exempt foreign organizations – tax withheld at source				
С	Tax paid with application for extension of time to file (Form 8868) 6c				
d	Backup withholding erroneously withheld 6d				
7	<u></u>	7		6,	<u>741</u>
8		8			
9		9			
10		0			<u> 782</u>
11		1			
	rt 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			Yes	No
	participate or intervene in any political campaign?		<u>1a</u>		X
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see				
	Instructions for the definition)?		1b		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 d	Did the foundation file Form 1120-POL for this year?		1c		X
u	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year (1) On the foundation				
е	(1) On the foundation ▶ \$ (2) On foundation managers ▶ \$ Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed				
C	on foundation managers > \$				
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?		2		Х
_	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		X
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?		4a		X
b	If "Yes," has it filed a tax return on Form 990-T for this year?	N/A	4b		
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?	-,	5		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 	į			
	conflict with the state law remain in the governing instrument?		6	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 X	XV	7_	Χ	
8a	Enter the states to which the foundation reports or with which it is registered (see instructions) ▶ M				
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		8b	Х	
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 2015 or the taxable year beginning in 2015 (see instructions for Part XIV)? If "Yes,"				
	complete Part XIV		9		X
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their				
	names and addresses		10		<u>X</u> _
		F	orm 99	0-PF	(2015)

Forn	1990-PF(2015) DE WITT FAMILIES CONDUIT FOUNDATION 38-276122	6				Р	age 5
_Pi	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					Yes	No
	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 privileges? If "Yes," attach statement (see instructions)				12		Х
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption applications.	ation?			13	Х	
	Website address ► N/A						
14		hone n	>	616-3	393-	816	0
	280 N RIVER, STE B						
	Located at ► HOLLAND MI	ZIP+	4 ▶	4942	4		
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 – Check here		,				
	and enter the amount of tax-exempt interest received or accrued during the year	•	1	5			
16	At any time during calendar year 2015, did the foundation have an interest in or a signature or other authority					Yes	No
	over a bank, securities, or other financial account in a foreign country?				16		X
	See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes," enter the name of						
	the foreign country				<u> </u>		<u> </u>
	art VII-B Statements Regarding Activities for Which Form 4720 May Be Required			<u> </u>	· · · · · · ·		
4-	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.					Yes	No
та	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?	∐ Ye	es	X No			
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a			5 ₹			
	disqualified person?	⊢ Y		X No			
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?	Y		X No			
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?	Ye	es	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)? (6) Agree to pay many as proportion a government official? (Figure 1) and the second of the sec	Ye	es	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	\Box ,		₩.			
L	termination of government service, if terminating within 90 days)	Ye	es	X No			
b	If any answer is "Yes" to 1a(1)–(6), did any of the acts fail to qualify under the exceptions described in Regular	tions		3T / 7			
	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						7.7
2	were not corrected before the first day of the tax year beginning in 2015? Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private				1c	-	X
2	operating foundation defined in section 4942(j)(3) or 4942(j)(5))						
а	At the end of tax year 2015, did the foundation have any undistributed income (lines 6d and						
-	6e, Part XIII) for tax year(s) beginning before 2015?	☐ Ye		X No			
	If "Yes," list the years ▶ 20 , 20 , 20 , 20	□ ''	;5	V MO			
b	Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2)						
_	(relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to						
	all years listed, answer "No" and attach statement – see instructions)			N/A	2b	Ī	
С	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here			11/11	1		
	▶ 20 , 20 , 20 , 20						
За	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise						
	at any time during the year?	Ye	es	X No			
b	If "Yes," did it have excess business holdings in 2015 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					ļ	
	the 10-, 15-, or 20-year first phase holding period? (Use Schedule C, Form 4720, to determine if the						
	foundation had excess business holdings in 2015)			N/A	3ь	Ī	
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purpose	s?		,	4a		X
b	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its						
	charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2				4b	[X
					Form 99	0-PF	

	990-PF (2015) DE WITT FAM						<u>P</u>	age 6
P		ing Activities for Which Fo	rm 4720 May Be R	equired (cont	ınüed)	······	·····	,
5a	During the year did the foundation pay of	r incur any amount to						
	(1) Carry on propaganda, or otherwise	attempt to influence legislation (sec	tion 4945(e))?	\ \\	′es 🗓 No			
	(2) Influence the outcome of any specif	ic public election (see section 4955	i), or to carry on,				ĺ	
	directly or indirectly, any voter regist	ration drive?		\	′es X No			
	(3) Provide a grant to an individual for t	ravel, study, or other similar purpos	ses?	<u> </u>	′es 🗓 No		l	
	(4) Provide a grant to an organization o	ther than a charitable, etc , organiz	ation described in				l	
	section 4945(d)(4)(A)? (see instruct	ions)			′es X No			
	(5) Provide for any purpose other than		ary, or educational					Ì
purposes, or for the prevention of cruelty to children or animals?							İ	
b	If any answer is "Yes" to 5a(1)-(5), did a	•	under the exceptions d				ı	
~	Regulations section 53 4945 or in a curr				N/A	5b		
	Organizations relying on a current notice				1			
_	If the answer is "Yes" to question 5a(4),	=						
С	because it maintained expenditure respi	•	on nom the tax	N/A 🗍 Y	/aa		1	
			\	N/A []	′es ∐ No		ĺ	
c -	If "Yes," attach the statement required b	• • • • • • • • • • • • • • • • • • • •	•				l	
6a	Did the foundation, during the year, rece	eive any funds, directly or indirectly,	to pay premiums		ে ভান		l	
	on a personal benefit contract?				es X No			
b	Did the foundation, during the year, pay	premiums, directly or indirectly, on	a personal benefit contr	act?		6b		X
	If "Yes" to 6b, file Form 8870				<u></u>			
	At any time during the tax year, was the	, , ,			es X No		ı	
	If "Yes," did the foundation receive any				N/A	7b	<u> </u>	L
Pa		fficers, Directors, Trustees	, Foundation Mana	agers, Highly	Paid Employe	ees,		
	and Contractors							
1 1	List all officers, directors, trustees, fou	ndation managers and their com	pensation (see instruc	tions).				
			(b) Title, and average	(c) Compensation	(d) Contributions to	١,,,,,,		
	(a) Name and	address	hours per week	(If not paid,	employee benefit plans and deferred		pense a er allowa	
		_	devoted to position	enter -0-)	compensation			
K	CITH DE WITT	SPRING LAKE	DIRECTOR			1		
17	7490 W SPRING LAKE ROAD	MI 49456	0.25	0	0			0
GF	ARY D DEWITT	HOLLAND	PRESIDENT					
86	S1 ALLEN DRIVE	MI 49423_	0.25	0	_ 0	l		_0
	ONALD L DE WITT	HOLLAND	DIRECTOR					
	29 120TH AVENUE	MI 49424	0.25	0	0	,		0
				<u> </u>				
						ł		
	Compensation of five highest-paid er	nnlovees (other than those inclu-	ded on line 1 – see inst	tructions) If non	e enter	J		
4	"NONE."	inprojects (outer than those inclu-	404 OII IIIIG 1 — 366 IIISI		o, anter			
		***************************************			(d) Contributions to			
	(a) Name and address of each employee	paid more than \$50 000	(b) Title, and average hours per week	(c) Compensation	employee benefit		pense a	
	(a) Hame and assists of each employee	paid mora than \$60,000	devoted to position	(e) compensulon	plans and deferred compensation	othe	er allowa	ances
				· · · · · · · · · · · · · · · · · · ·	сопрепация	 		
NC	DNE			•		Ì		
						├		
_						 		
						1		
	<u> </u>					 		
								
						1		
						<u> </u>		
Tota	I number of other employees paid over \$	50,000				<u> </u>		0
					F	om 95	}0-PI	F (2015)

	ation About Officers, Directors, Trustees, Founda		mployees,
	ontractors (continued) dependent,contractors for professional services (see instructions)	tions) If none enter "NONE"	
o i ive ingliest-paid in	(a) Name and address of each person paid more than \$50,000		(a) Camanasta
NONE	(a) Name and address or each person paid more than \$50,000	(b) Type of service	(c) Compensation
Total number of others rec	eiving over \$50,000 for professional services		>
Part IX-A Sumr	mary of Direct Charitable Activities		
	direct charitable activities during the tax year. Include relevant statistical information suc ries served, conferences convened, research papers produced, etc.	h as the number of	Expenses
1 N/A			
2		· · <u> </u>	
3			
4			
Part IX-B Sumi	mary of Program-Related Investments (see instruc	tions)	<u> </u>
Describe the two largest program	-related investments made by the foundation during the tax year on lines 1 and 2		Amount
1 N/A			
2			
All other program-related investm	ients. See instructions		
3			
Total, Add lines 1 through	3		

For	n 990-PF (2015) DE WITT FAMILIES CONDUIT FOUNDATION 38-2761226		Page 8
P	art X Minimum Investment Return (All domestic foundations must complete this part. Foreign	n fou	ndations,
	see 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	997
b	Average of monthly cash balances	1b	4,410
С	Fair market value of all other assets (see instructions)	1c	0
d	Total (add lines 1a, b, and c)	1d	5,407
е	Reduction claimed for blockage or other factors reported on lines 1a and		
	1c (attach detailed explanation) 1e 0		
2	Acquisition indebtedness applicable to line 1 assets	1 2	0
3	Subtract line 2 from line 1d	3	5,407
4	Cash deemed held for charitable activities Enter 1½% of line 3 (for greater amount, see		
	instructions)	4	81
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4.	5	5,326
6	Minimum investment return. Enter 5% of line 5	6	266
_	art XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating		
٠	and certain foreign organizations check here ▶ and do not complete this part)	Touric	iations
1	Minimum investment return from Part X, line 6	4	266
2а	Tax on investment income for 2015 from Part VI, line 5	'	200
b	Income tax for 2015 (This does not include the tax from Part VI)	1	
c	Add lines 2a and 2b	2c	5,959
3	Distributable amount before adjustments Subtract line 2c from line 1	3	5,959
4	Recoveries of amounts treated as qualifying distributions	4	
5	Add lines 3 and 4	5	
6	Deduction from distributable amount (see instructions)	6	
7	,	-	
•	Distributable amount as adjusted Subtract line 6 from line 5. Enter here and on Part XIII,	<u> </u>	•
	line 1	7	0
P	art XII 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	665,527
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		
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	665,527
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 (see instructions)	5	5,959
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	659,568
	Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation	ation	
	qualifies for the section 4940(e) reduction of tax in those years		

Form	990-PF(2015) DE WITT FAM]	LIES CONDUI	T FOUNDATIO	ON 38-27612	26	Page 9
	art XIII Undistributed Income	(see instructions)				
			(a)	(b)	(c)	(d)
1	Distributable amount for 2015 from Part line 7	XI,	Corpus	Years prior to 2014	2014	2015
2	Undistributed income, if any, as of the er	nd of 2015				0
	Enter amount for 2014 only					
	Total for prior years 20, 20	, 20				
3	Excess distributions carryover, if any, to				······································	
а	From 2010	97,937				
b	From 2011	729,579				
С	From 2012	798,167				
	From 2013	636,736				
	From 2014	1,131,127				
_	Total of lines 3a through e		3,393,546			
4	Qualifying distributions for 2015 from Par	rt XII,				
_	line 4 \$ 665,527					
	Applied to 2014, but not more than line 2	F				
ь	Applied to undistributed income of prior y (Election required – see instructions)	rears				
_	Treated as distributions out of corpus (El	oction				······································
·	required – see instructions)	ection	665,527			
d	Applied to 2015 distributable amount		003,327			
	Remaining amount distributed out of corp	ous				
5	Excess distributions carryover applied to	F			· · · · · · · · · · · · · · · · · · ·	
	(If an amount appears in column (d), the	,				
	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	ot line 5	4,059,073			
b	Prior years' undistributed income Subtra	ct				
	line 4b from line 2b	<u> </u>				
С	Enter the amount of prior years' undistrib	i				
	income for which a notice of deficiency h	i i				
	been issued, or on which the section 494	·2(a)				
	tax has been previously assessed Subtract line 6c from line 6b Taxable	}-				
u	amount – see instructions					
	Undistributed income for 2014 Subtract	line				
·	4a from line 2a Taxable amount – see					
	instructions					
f	Undistributed income for 2015 Subtract	lines			-	
	4d and 5 from line 1. This amount must be	pe				
	distributed in 2016					0
7	Amounts treated as distributions out of c	orpus				
	to satisfy requirements imposed by section	on				
	170(b)(1)(F) or 4942(g)(3) (Election may	be				
	required—see instructions)	}	676,472			
8	Excess distributions carryover from 2010					
_	applied on line 5 or line 7 (see instruction	· ·				······
9	Excess distributions carryover to 2016).	2 200 601			
10	Subtract lines 7 and 8 from line 6a Analysis of line 9	 	3,382,601			·
а	Excess from 2011	151,044				
b	Excess from 2012	798,167				
C	Excess from 2013	636,736				
d	Excess from 2014	1,131,127				
_	Excess from 2015	665 527	[

	1990-PF (2015) DE WITT FAMI					Page 1
Pi	urt XIV Private Operating Fou	undations (see in	istructions and Par	rt VII-A, question	9)	
1a	If the foundation has received a ruling or	determination letter ti	hat it is a private opera	ting	'	
	foundation, and the ruling is effective for	2015, enter the date	of the ruling	_		
b	Check box to indicate whether the found	ation is a private oper	ating foundation descri	bed in section	4942(j)(3) or 494	2(j)(5)
2a	Enter the lesser of the adjusted net	Tax year		Prior 3 years	· · · · · · · · · · · · · · · · · · ·	(e) Total
	income from Part I or the minimum	(a) 2015	(b) 2014	(c) 2013	(d) 2012	(e) Iotai
	investment return from Part X for		<u>}</u>	İ		
	each year listed					
b	85% of line 2a					
С	Qualifying distributions from Part XII,					
	line 4 for each year listed					
d	Amounts included in line 2c not used directly		}			
	for active conduct of exempt activities					
е	Qualifying distributions made directly					_
	for active conduct of exempt activities					
	Subtract line 2d from line 2c					
3	Complete 3a, b, or c for the					
	alternative test relied upon					
а	"Assets" alternative test – enter					
	(1) Value of all assets					
	(2) Value of assets qualifying under				1	
	section 4942(j)(3)(B)(i)					
b	"Endowment" alternative test – enter 2/3					
	of minimum investment return shown in					
	Part X, line 6 for each year listed					
С	"Support" alternative test – enter					
	(1) Total support other than gross		II.			
	investment income (interest,					
	dividends, rents, payments on securities loans (section					
	512(a)(5)), or royalties)					
	(2) Support from general public					
	and 5 or more exempt					
	organizations as provided in			1		
	section 4942(j)(3)(B)(III)					
	(3) Largest amount of support from					
	an exempt organization				-	i . -
	(4) Gross investment income art XV Supplementary Inform	nation (Complete	this part only if	the foundation !	and \$5,000 or mor	l
F	art XV Supplementary Inform any time during the y	•	•	the foundation i	iad \$5,000 or mor	e in assets at
1	Information Regarding Foundation Ma		tions. ₁		·-	
a	List any managers of the foundation who	=	re than 2% of the total	contributions received	d by the foundation	
_	before the close of any tax year (but only				=	
	SEE STATEMENT 4			(000 000 00) (0)(-, ,	
b	List any managers of the foundation who	own 10% or more of	the stock of a corporat	ion (or an equally larg	e portion of the	
_	ownership of a partnership or other entity		•		,- ,	
	N/A	,	5			
2	Information Regarding Contribution, (Grant, Gift, Loan, Sci	holarship, etc., Progr	ams:		
	Check here \blacktriangleright \boxed{X} if the foundation only				does not accept	
	unsolicited requests for funds. If the four					
	other conditions, complete items 2a, b, c	, and d				
а	The name, address, and telephone numl	per or e-mail address	of the person to whom	applications should b	e addressed	
	N/A					
					<u> </u>	
b	The form in which applications should be	submitted and inform	nation and materials the	ey should include		
	N/A					
С	Any submission deadlines					
	N/A					
d	Any restrictions or limitations on awards,	such as by geograph	ical areas, charitable fi	elds, kınds of ınstıtutı	ons, or other	
	factors					
	N/A					200 05
DAA						Form 990-PF (20

Supplementary Information (continued) 3 Grants and Contributions Paid During the Year or Approved for Future Payment If recipient is an individual, Recipient Foundation show any relationship to Purpose of grant or status of Amount any foundation manager contribution recipient Name and address (home or business) or substantial contributor a Paid during the year SEE STATEMENT 5 663,882 Total ▶ 3a 663,882 b Approved for future payment N/A Total ▶ 3b

Form 990-PF (2015)	DE	$W \perp L L$	FAMILIES	COMDITTE	FOUNDATION	3 2.	- 2761226

Enter gross amo	ounts unless otherwise indicated	Unrelate	d 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
1 Program se	rvice revenue					(See instructions)
a						
b						
				-		
e		- }				
' - <u>-</u>		-				
-	d contracts from government agencies					
•	dues and assessments	ļ				
	savings and temporary cash investments			114		
	nd interest from securities			14		
	acome or (loss) from real estate					
	anced property			-		
	t-financed property come or (loss) from personal property					
7 Other invest						
	s) from sales of assets other than inventory			18	-2,350	
•	or (loss) from special events			1 2	-2,350	
	or (loss) from sales of inventory					·-·
	ue a					
			· · · · · · · · · · · · · · · · · · · ·			
e						
		-		0	2 247	
ı∡ oudtotal Ad	id columns (b), (d), and (e)	1		VI :	-2,34/1	U
	dd columns (b), (d), and (e) line 12. columns (b), (d), and (e)			<u> </u>	-2,347 13	<u></u>
13 Total. Add I	ine 12, columns (b), (d), and (e)	<u> </u>		<u> </u>	13	-2,347
3 Total. Add I	ine 12, columns (b), (d), and (e) in line 13 instructions to verify calculations)	Accomplishm		·	13	-2,347
I 3 Total. Add I See worksheet	ine 12, columns (b), (d), and (e) in line 13 instructions to verify calculations)	e is reported in c	ent of Exempt I	Purpose	13	-2,347
3 Total. Add I See worksheet Part XVI-B Line No.	ine 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 c	ent of Exempt I	Purpose	13	-2,347
3 Total. Add I See worksheet Part XVI-B Line No.	ine 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 c	ent of Exempt I	Purpose	13	-2,347
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I3 Total. Add I See worksheet Part XVI-B Line No. ▼	ine 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 c	ent of Exempt I	Purpose	13	-2,347
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13 Total. Add I See worksheet Part XVI-B Line No. ▼	ine 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 c	ent of Exempt I	Purpose	13	-2,347

Form 990-PF (2015) DE WITT FAMILIES CONDUIT FOUNDATION 38-2761226

Part X				ansfers To an	d Transactio	ns and Relationsh	nips With Noncharitab	le		
d Did		Exempt Organiza						T 1	·	N
		• '		-		other organization descr		 -	Yes	No
			er than section	on 501(c)(3) organ	nizations) or in se	ction 527, relating to po	intical			į
-	anization		ation to a ne	maharitahla ayamı		•				
		om the reporting found	ation to a no	incharitable exem	pt organization of					7.7
	Cash							1a(1)		<u>X</u>
	Other as							1a(2)		X
	er transa									
		assets to a noncharit		-				1b(1)		<u>X</u>
		es of assets from a no		· -	ion			1b(2)		X
(3)	Rental o	f facilities, equipment,	or other ass	sets				1b(3)		X
(4)	Reimbui	rsement arrangements	3					1b(4)		<u>X</u>
(5)	Loans o	r loan guarantees						1b(5)		X
(6)	Perform	ance of services or me	embership oi	r fundraising solici	itations			1b(6)		<u>X</u>
c Sha	iring of fa	acilities, equipment, m	ailing lists, o	ther assets, or pa	ıd employees			1c	i	X
d If th	e answe	r to any of the above i	s "Yes," com	plete the following	g schedule Colur	mn (b) should always sh	now the fair market			
						the foundation received				
valu	ie in any	transaction or sharing	arrangemer	nt, show in column	n (d) the value of	the goods, other assets	or services received			
(a) Line	e no	(b) Amount involved	(c) Name	of noncharitable exem	pt organization	(d) Description of	transfers, transactions, and sharing a	rangemen	ts	
N/A										
					-					
				*					-	
									-	
						 				
						· · · · · <u></u>				
					· — ·		···			
-	-			 						
2a Is th	ne found:	ation directly or indirec	tly affiliated	with or related to	one or more tax	-exempt organizations				
		section 501(c) of the	-			· -		☐ Va	s X	No
		nplete the following so	•	than bootion oo /	0)(0)) 01 11 000110				- 111	, 110
		Name of organization		(b) Type of o	organization		(c) Description of relationship			
N/A		· · · · · · · · · · · · · · · · · · ·					<u></u>			
	-									
			-							
	Under pen	alties of penjury, I declare th	at I have exami	l ned this return, includin	ig accompanying sche	edules and statements, and to	the best of my knowledge and belief	. it is true.		
	correct, ar	nd complete Declaration of	oremaner (other t	han taxpayer) is based	on all information of	which preparer has any knowle	edge May the IRS disc		um.	\neg
Sign		1 I	// .	ش)	11		with the preparer			
Here		/ A A /	/ , /	Λ			(see instructions)? X Y	es 🗌	No
1616				11////		5-12-16	DDECTDENT			
	Signs	ature of officer or frustee	\sqrt{V}	// '4 /	Date		PRESIDENT			
					T	-				
	Print/Ty	pe preparer's pame			Preparer's signatur	· //	Date		Check	_
Paid	MADIE	A TIMENTOMES			11/	1//	. ارسیم ا	ارزل	self-em	ployed
reparer	MARK		ים מקו	A TIMAN ATAT	COMPANY	DIC	<u> </u>	<u>///- </u>	0	
Jse Only	Firm's n				COMPANY,	P.L.C.		0104		
•	Firm's a			RS ROAD				1968		
	I	НОГР	AND, MI	[49423			Phone no 616	5-396	o – T	せるち

Schedule B (Form 990, 990-EŽ, 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

2015

Name of the organization '

Employer identification number

DE WITT FAMI	LIES CONDUIT FOUNDATION	38-2761226		
Organization type (check				
Filers of:	Section:			
Form 990 or 990-EZ	501(c)() (enter number) organization			
	4947(a)(1) nonexempt charitable trust not treated as a private found	lation		
	527 political organization			
Form 990-PF	X 501(c)(3) exempt private foundation			
	4947(a)(1) nonexempt charitable trust treated as a private foundation	n		
	501(c)(3) taxable private foundation			
Note. Only a section 501(c instructions	is covered by the General Rule or a Special Rule .)(7), (8), or (10) organization can check boxes for both the General Rule and a	a Special Rule See		
General Rule				
X For an organization	n filing Form 990, 990-EZ, or 990-PF that received, during the year, contributio	ons totaling \$5,000		
	or property) from any one contributor. Complete Parts I and II. See instructions			
Special Rules				
regulations under s	n described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 ¹ / ₃ % sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or id that received from any one contributor, during the year, total contributions of	r 990-EZ), Part II, line		
	f the amount on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1 Cor			
For an organization	n described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that rece	eived from any one		
contributor, during	the year, total contributions of more than \$1,000 exclusively for religious, char	itable, scientific,		
literary, or education	onal purposes, or for the prevention of cruelty to children or animals. Complete	Parts I, II, and III		
For an organization	n described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that rece	eived from any one		
	the year, contributions exclusively for religious, charitable, etc., purposes, but			
	nd more than \$1,000. If this box is checked, enter here the total contributions the			
	an exclusively religious, charitable, etc., purpose. Do not complete any of the place to this organization because it received nonexclusively religious, charitable			
• •	more during the year	> \$		
Caution. An organization the	hat is not covered by the General Rule and/or the Special Rules does not file S	Schedule B (Form 990,		
•	must answer "No" on Part IV, line 2, of its Form 990, or check the box on line i			
Form 990-PF, Part I, line 2,	, to certify that it does not meet the filing requirements of Schedule B (Form 99	JU, JJU-⊑Z, Of JJU-PF)		

PAGE 1 OF 1

Page 2

Name of organization
DE WITT FAMILIES CONDUIT FOUNDATION

Employer identification number

38-2761226

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	SHIRLEY DEDOES 10777 FM RD 902 COLLINSVILLE	TX 76233	\$ 81,671	Person Payroll Noncash (Complete Part II for noncash contributions)		
(a) No.	(b) Name, address, and ZIP + 4		(c) Total contributions	(d) Type of contribution		
2	GARY & JOYCE DEWITT : 861 ALLEN DRIVE HOLLAND		\$ 383,040	Person Payroll Noncash (Complete Part II for noncash contributions)		
(a) No.	(b) Name, address, and	ZIP + 4	(c) Total contributions	(d) Type of contribution		
3	DONALD L DEWITT TRUS' 8029 120TH AVENUE HOLLAND	Г МІ 49424	\$ 160,094	Person Payroll Noncash (Complete Part II for noncash contributions)		
(a) No.	(b) Name, address, and	ZIP + 4	(c) Total contributions	(d) Type of contribution		
4	DAWN R DEWITT-BRINKS 1440 WAUKAZOO DRIVE HOLLAND	MI 49424	\$ 11,874	Person Payroll Noncash (Complete Part II for noncash contributions)		
(a) No.	(b) Name, address, and	ZIP + 4	(c) Total contributions	(d) Type of contribution		
5	LISA VANDERKOLK 10764 RILEY STREET ZEELAND	MI 49464	\$ 39,793	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		
			\$	Person Payroll Noncash (Complete Part II for noncash contributions)		

PAGE 1 OF 2

Page 3

Name of organization

DE WITT FAMILIES CONDUIT FOUNDATION

Employer identification number

38-2761226

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
1	425 SHS UNITED HEALTH		
		\$ 48,684	10/22/15
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
1	335 SHS JOHNSON & JOHNSON STK		
		\$ 32,987	10/22/15
(a) No from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
2	6000 SHS HANESBRAND INC		
		\$ 193,050	11/02/15
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
2	6000 SHS HANESBRAND INC		
		\$ 189,990	11/23/15
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
3	250 SHS AVGO		
		\$ 31,300	11/20/15
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
3	700 SHS COMCAST		
		\$ 44,002	11/20/15

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Name of organization
DE WITT FAMILIES CONDUIT FOUNDATION

Employer identification number

38-2761226

Part 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		
3	825 SHS HORMEL					
		\$	56,662	11/20/15		
(a) No. from Part I	(b) Description of noncash property given		(c) FMV (or estimate) (see instructions)	(d) Date received		
3	250 SHS UNITED HEALTH					
:		\$	28,130	11/20/15		
(a) No. from Part I	(b) Description of noncash property given		(c) FMV (or estimate) (see instructions)	(d) Date received		
4	375 SHS HANESBRANDS INC COM STK					
		\$	11,874	11/23/15		
(a) No. from Part I	(b) Description of noncash property given		(c) FMV (or estimate) (see instructions)	(d) Date received		
5	1300 SHS HANESBRANDS INC					
		\$	39,793	12/10/15		
(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		
		\$				

Form 990-PF	, Ca	pital Gains and Losses	for Tax on Inv	estment In	come	2015
	For calenda	year 2015, or tax year beginning		, and ending		
Name	ı	•			Employer Ide	ntification Number
DE WITT FA	MILIES C	CONDUIT FOUNDATION			38-2761	.226
(a)	List and describe the 2-story brick wareh	ne kınd(s) of property sold, e g , real estate, ouse, 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)
(1) 335 SHAR		NOSUHOL & NOSUH		D	VARIOUS	10/22/15
(2) 425 SHAR		IITED HEALTH		D	08/26/10	10/22/15
(3) 6000 SHA		ANESBRAND INC		<u>D</u>	01/01/38	11/02/15
(4) 250 SHAR		GO		<u>D</u>	VARIOUS	11/23/15
(5) 700 SHAR (6) 825 SHAR		MCAST		D	04/30/10	11/23/15
(6) 825 SHAR (7) 250 SHAR		RMEL IITED HEALTH		D D	07/26/10	11/23/15
(8) 6000 SHA		IANESBRAND INC		<u></u> D	09/24/10	11/23/15
(9) 375 SHAR		NESBRAND INC		D D	01/01/38	11/24/15
(10) 1300 SHA		ANESBRAND INC		D	01/01/38	12/10/15
(11)					1 2, 5 2, 5 3	12/10/13
(12)						
(13)						
(14)						
(15)	 					
						
(e) Gross sales pri	ce	(f) Depreciation allowed (or allowable)	(g) Cost or other plus expense of	basis sale	(h) Gain (e) plus (f)	or (loss) minus (g)
	306			1,760		31,546
	761		1.	1,338		33,423
(3) 190,				3,267		87,109
	456		1			20,371
	702			4,634		29,068
	176 379			3,964		38,212
(7) 28, (8) 190,	 			9,361 3,267		<u>19,018 </u>
	749			204	 	07,378 11,545
	572			708		38,864
(11)						
(12)						
(13)						
(14)						
(15)						
Complete only for a	ssets showing	gain in column (h) and owned by the t	foundation on 12/31/69			<u> </u>
(i) FMV as of 12/3	1/69	(j) Adjusted basis as of 12/31/69	(k) Excess of cover col (j), if	col (i) any	(I) Gains (Co col (k), but not les Losses (from	f (h) gain minus s than -0-) Of col (h))
(1)						31,546
(2)						33,423
(3)					 	87,109
(4)						20,371
(5)			-			29,068
(6)						38,212
(7)						19,018
(8) (9)			1			<u>87,378 </u>
(10)					 	11,545 38,864
(11)						JU, UU4
(12)			<u> </u>	·		
(13)						
(14)						
(15)						

5/11/2016 2:15 PM

FYE: 12/31/2015

Description							
		Total	Net Investment	. <u>-</u>	Adjusted Net		Charitable Purpose
ACCOUNTING FEES	\$	2,117	\$550	\$		\$	1,56
TOTAL	\$	2,117				\$_	1,56
Sta	tement 2	- Form 990-F	PF, Part I, Line	18 -	<u>Taxes</u>	<u> </u>	
Description							
		— Total	Net Investment		Adjusted Net		Charitable Purpose
FED EXCISE TAX-2015 EST							
TOTAL	\$ \$	6,342	\$. \$_ \$	0		
101111	٧	0,542	Υ	: '—		ج' :	
<u>Stateme</u> Description	nt 3 - For	m 990-PF, Pa	art I, Line 23 - C	the			
	nt 3 - For	m 990-PF, Pa — Total	Art I, Line 23 - C Net Investment	othe	r Expenses Adjusted Net		Charitable Purpose
Description	nt 3 - For	— Total	Net	othe:	Adjusted	\$	
Description		 Total	Net Investment \$	\$	Adjusted	\$	Purpose
Description EXPENSES		— Total	Net Investment	\$	Adjusted	\$	Purpose
Description EXPENSES BANK FEES OFFICE SUPPLIES	\$		Net Investment \$	\$	Adjusted Net		Purpose 5
Description EXPENSES BANK FEES			Net Investment \$	\$	Adjusted Net	\$ \$	Purpose 5
Description EXPENSES BANK FEES OFFICE SUPPLIES TOTAL	\$ \$	Total 116 20 136	Net Investment \$ 58	\$	Adjusted Net	\$_	Purpose 5 2 7
Description EXPENSES BANK FEES OFFICE SUPPLIES TOTAL Statement 4 - Form 990-F	\$ \$ PF, Part)	Total 116 20 136 (V, Line 1a -	Net Investment \$ 58	\$	Adjusted Net	\$_	Purpose 5 2 7
Description EXPENSES BANK FEES OFFICE SUPPLIES TOTAL Statement 4 - Form 990-F	\$ \$	Total 116 20 136 (V, Line 1a -	Net Investment \$ 58	\$	Adjusted Net	\$_	Purpose 5 2 7

38-2761226

Federal Statements

FYE: 12/31/2015

<u>Statement 5 - Form 990-PF, Part XV, Line 3a - Grants and Contributions Paid During the Year</u>

Name	Address	Address
Relationship Status	Purpose	Amount
ALAS DE AGUILIA-ALLENDALE BLDG	895 OTTAWA BEACH RD	HOLLAND MI 49424
NONE PC	ANNUAL SUPPORT	5,000
AMERICAN VALUES	2800 SHIRLINGTON RD	ARLINGTON VA 22206
NONE PC	ANNUAL SUPPORT	3,000
AWAKENING FOR TODAY	PO BOX 39	CANON CITY CO 81215
NONE PC	ANNUAL SUPPORT	1,000
BELAY YOUTH MINISTRY	PO BOX 8094	HOLLAND MI 49422
NONE PC	ANNUAL SUPPORT	1,200
BETHANY CHRISTIAN SERVICE	12048 JAMES STREET	HOLLAND MI 49424
NONE PC	ANNUAL SUPPORT	1,000
BENJAMIN'S HOPE	15468 RILEY STREET	HOLLAND MI 49424
NONE PC	ANNUAL SUPPORT	34,250
THE BIBLE LEAGUE NONE PC	1 BIBLE LEAGUE PLAZA ANNUAL SUPPORT	CRETE IL 60417
BIBLE STUDY FELLOWSHIP	19001 HUEBNER ROAD	SAN ANTONIO TX 78258
NONE PC	ANNUAL SUPPORT	8,000
BIBLE STUDY FELLOWSHIP RETREAT	19001 HUEBNER RD	SAN ANTONIO TX 78258-4(9)
NONE PC	ANNUAL SUPPORT	4,000
BILLY GRAHAM EVENG. ASSOC	1 BILLY GRAHAM PARKWAY	CHARLOTTE NC 28201
NONE PC	ANNUAL SUPPORT	1,000
BISHOP ENGLAND HIGH SCH.	363 SEVEN FARMS DRIVE	CHARLESTON SC 29492-7534
NONE PC	ANNUAL SUPPORT	1,000
BORCULO CHRISTIAN SCHOOL	6830 96TH AVENUE	ZEELAND MI 49464
NONE PC	ANNUAL SUPPORT	750
BOYS & GIRLS CLUB/GRTR HO	435 VAN RAALTE AVENUE	HOLLAND MI 49423
NONE PC	ANNUAL SUPPORT	500
THE BRIDGE YOUTH MIN CENT	210 EAST MAIN	ZEELAND MI 49464
NONE PC	ANNUAL SUPPORT	500
CALVARY CHRISTIAN REF CHURCH	400 BEELINE RD	HOLLAND MI 49424
NONE PC CHILDREN'S ADVOCACY CTR	ANNUAL SUPPORT	1,000
NONE PC	12125 UNION STREET ANNUAL SUPPORT	HOLLAND MI 49424
CAMP ROGER	8356 BELDING ROAD	ROCKFORD MI 49341
NONE PC	ANNUAL SUPPORT	800
CAMPUS CRUSADE FOR CHRIST	2665 CEDAR GROVE COURT	JENISON MI 49428
NONE PC	ANNUAL SUPPORT	2,500
CAMPUS CRUSADE FOR CHRIST	PO BOX 628222	ORLANDO FL 32862-8222
NONE PC	ANNUAL SUPPORT	12,056
CAMPUS CRUSADE FOR CHRIST	1609 CARROL CT STREET	LEBANON OH 45036
NONE PC	ANNUAL SUPPORT	1,800
CENTRAL MICHIGAN UNIV	1650 RESEARCH DRIVE	TROY MI 48083
NONE PC	ANNUAL SUPPORT	10,000
CENTRAL MICHIGAN UNIVERSITY	DEPT 77025	DETROIT MI 48277-0025
NONE PC	ANNUAL SUPPORT	40,000
CHILDREN'S BIBLE HOUR	PO BOX 1001	GRAND RAPIDS MI 49501
NONE PC	ANNUAL SUPPORT	1,250
CITY ON A HILL MINISTIES	100 SOUTH PINE STREET	ZEELAND MI 49464
NONE PC	ANNUAL SUPPORT	2,000
COMMUNITY REFORMED CHURCH	10376 FELCH STREET	ZEELAND MI 49464
NONE PC COMPASSIONATE HEART MIN.	ANNUAL SUPPORT 100 SOUTH PINE STREET	52,000 ZEELAND MI 49464
NONE PC	ANNUAL SUPPORT	11,250
NONE FC	MINUMU BUFFORI	11,250

38-2761226

Federal Statements

FYE: 12/31/2015

Statement 5 - Form 990-PF, Part XV, Line 3a - Grants and Contributions Paid During the Year (continued)

Name	Address	Address
Relationship Status	Purpose Purpose	Amount
PART SYNOD, MI RCA, CRAN HILI	L RA 14444 17 MILE ROAD	RODNEY MI 49342
NONE PC	ANNUAL SUPPORT	1,500
CRITTER BARN	9275 ADAMS STREET	ZEELAND MI 49464
NONE PC	EDUCATIONAL PROGRAMS	500
DANIEL ISLAND SCHOOL	2365 DANIEL ISLAND DR	DANIEL ISLAND SC 29492
NONE PC	ANNUAL SUPPORT	1,000
DAVE DRAVECKY'S OUTREACH	13840 GLENEAGLE DRIVE	COLORADO SPRINGS CO 80921
NONE PC	ANNUAL SUPPORT	5,000
EAGLE HARBOR INC	1044 EAGLE HARBOR LANE	SUMMERVILLE SC 29483
NONE PC	ANNUAL SUPPORT	200
ELIM CHRISTIAN SCHOOL	13020 SOUTH CENTRAL AVENU	
NONE PC	ANNUAL SUPPORT	500
ENGLEWOOD UNITED METH CHU	700 EAST DEARBORN STREET	ENGLEWOOD FL 34223
NONE PC	ANNUAL SUPPORT	5,000
FAMILY HOPE FOUNDATION	7086 8TH AVENUE	JENISON MI 49428
NONE PC FAMILY RESEARCH COUNCIL	ANNUAL SUPPORT	1,000
NONE PC	11311 JAMES STREET	HOLLAND MI 49424
FAMILY TALK	ANNUAL SUPPORT P.O. BOX 51010	5,500 COLORADO SPRINGS CO 80949
NONE PC	ANNUAL SUPPORT	li di
FELLOWSHIP OF CHRISTIAN A	1405 EAST 131ST STREET	5,000 BURNSVILLE MN 55337
NONE PC	ANNUAL SUPPORT	1,000
FERRIS STATE UNIVERSITY	1201 SOUTH STATE STREET	BIG RAPIDS MI 49307
NONE PC	ANNUAL SUPPORT	1,250
FLORIDA FELLOWSHIP FOUNDATION		ORLANDO FL 32854-1618
NONE PC	RELIGIOUS PROGRAMS	3,000
FOCUS ON THE FAMILY	8605 EXPLORER DRIVE	COLORADO SPRINGS CO 80920
NONE PC	ANNUAL SUPPORT	32,000
FRIENDSHIP MINISTRIES	2215 29TH STREET SE	GRAND RAPIDS MI 49508-158
NONE PC	ANNUAL SUPPORT	500
FULLER SEMINARY	135 NORTH OAKLAND	PASADENA CA 91182
NONE PC	ANNUAL SUPPORT	500
FIRST UNITED METHODIST CHURC	-	GAINESVILLE TX 76240
NONE PC	ANNUAL SUPPORT	15,000
GENEVA CAMP & RETREAT CEN	3995 NORTH LAKESHORE DRIV	HOLLAND MI 49424
NONE PC	ANNUAL SUPPORT	36,777
GOSPEL HOUSE CHURCH	14707 ALEXANDER ROAD	WALTON HILLS OH 44146
NONE PC	ANNUAL SUPPORT	500
GRACE YOUTH CAMP OF MICHI	2100 NORTH RIDGE ROAD	MEARS MI 49436
NONE PC	ANNUAL SUPPORT	5,000
GRAND VALLEY STATE UNIV	301 MICHIGAN STREET NE	GRAND RAPIDS MI 49503
NONE PC	ANNUAL SUPPORT	10,000
GRAND VALLEY STATE UNIV FOUND NONE PC		ALLENDALE MI 49401
NONE PC GREAT LAKES URBAN RESTOR.	ANNUAL SUPPORT 427 MAPLE AVENUE	HOLLAND MI 49423
NONE PC	ANNUAL SUPPORT	HOLLAND MI 49423
HAROLD MORRIS MINISTRIES	420 ADAMS LAKE BLVD	ATLANTA GA 30339
NONE PC	ANNUAL SUPPORT	1,000
HIS RADIO	2420 WADE HAMPTON BLVD	GREENVILLE SC 29615
NONE PC	RELIGIOUS PROGRAMS	250
HOLLAND HOSPITAL FOUND.	602 MICHIGAN AVENUE	HOLLAND MI 49423-9980
NONE PC	ANNUAL SUPPORT	500
	· · - · - · · · · · · · · · · · · ·	

38-2761226

Federal Statements

FYE: 12/31/2015

<u>Statement 5 - Form 990-PF, Part XV, Line 3a - Grants and Contributions Paid During the Year (continued)</u>

Name	Address	Address
Relationship Status	Purpose	Amount
HOLLAND RESCUE MISSION	356 FAIRBANKS AVE	HOLLAND MI 49423
NONE PC	ANNUAL SUPPORT	1,432
HOPE COLLEGE - ANNUAL FUND	265 COLLEGE AVENUE	HOLLAND MI 49423
NONE PC	EDUCATIONAL PROGRAMS	1,000
HOPE COLLEGE - GENERAL FUND	PO BOX 9000	HOLLAND MI 49422
NONE PC	EDUCATIONAL PROGRAMS	3,000
HOPE COLLEGE - MILLER	256 COLLEGE AVE	HOLLAND MI 49423
NONE PC	ANNUAL SUPPORT	31,461
HOPE COLLEGE	PO BOX 9000	HOLLAND MI 49422
NONE PC	ANNUAL SUPPORT	4,500
HOPE COLLEGE PATRONS OF THE ARTS		HOLLAND MI 49423
NONE PC	EDUCATIONAL PROGRAMS	300
HOPE COLLEGE - TENNIS CT.	P.O. BOX 9000	HOLLAND MI 49422-9904
NONE PC	ANNUAL SUPPORT	1,000
HOPE COLLEGE - LONDON MAY TERM	PO BOX 9000	HOLLAND MI 49422-9904
NONE PC	EDUCATIONAL PROGRAMS	250
HOPE COLLEGE - STUDENT CENTER	256 COLLEGE AVE	HOLLAND MI 49423
NONE PC	ANNUAL SUPPORT	50,000
HOPE COLLEGE - SCIENCE DEPT	256 COLLEGE AVE	HOLLAND MI 49423
NONE PC	ANNUAL SUPPORT	1,250
HOSPICE OF HOLLAND	270 HOOVER BLVD	HOLLAND MI 49423
NONE PC	ANNUAL SUPPORT	1,000
HOSPITAL CHAPLAINCY SVC,	3351 CLAYSTONE, SE	GRAND RAPIDS MI 49501
NONE PC	ANNUAL SUPPORT	250
INDIAN TRAILS CAMP	O-1859 LAKE MICHIGAN DR	GRAND RAPIDS MI 49534
NONE PC INSIGHT FOR LIVING	ANNUAL SUPPORT	250
NONE PC	PO BOX 26900 ANNUAL SUPPORT	PLANO TX 75026
INTERNATIONAL AID, INC.	17011 WEST HICKORY	500 SDRING LAKE MT 40456 0716
NONE PC	ANNUAL SUPPORT	SPRING LAKE MI 49456-9712
JUBILEE MINISTRIES	96 WEST 15TH STREET	1,300 HOLLAND MI 49423
NONE PC	ANNUAL SUPPORT	500
KIDS HOPE USA	100 SOUTH PINE AVENUE	ZEELAND MI 49464
NONE PC	ANNUAL SUPPORT	2,000
KUYPER COLLEGE	3333 EAST BELTLINE, NE	GRAND RAPIDS MI 49525-974
NONE PC	ANNUAL SUPPORT	200
LAKESHORE RESCUE MISSIONS	356 FAIRBANKS AVENUE	HOLLAND MI 49423
NONE PC	ANNUAL SUPPORT	6,000
LAKESHORE PREGNANCY CENTE	339 RIVER AVENUE	HOLLAND MI 49423
NONE PC	ANNUAL SUPPORT	3,000
LATIN AMERICAN CHRISTIAN	948 S BRADISH AVENUE	GLENDORA CA 91740
NONE PC	ANNUAL SUPPORT	2,000
LIFELINE OF SOUTH CAROLINA	1177 GREGORIE FERRY RD	MT PLEASANT SC 29466
NONE PC	ANNUAL SUPPORT	1,100
LIFETREE COMMUNITY CHURCH	10933 LAKE MICHIGAN DRIVE	
NONE PC	ANNUAL SUPPORT	1,000
MICHIGAN FAMILY FORUM	PO BOX 15216	LANSING MI 48933
NONE PC	ANNUAL SUPPORT	4,000
MICHIGAN STATE UNIVERSITY	446 W CIRCLE DRIVE	EAST LANSING MI 48824
NONE PC	ANNUAL SUPPORT	1,000
MISSION 21 INDIA	PO BOX 141312	GRAND RAPIDS MI 49514-131
NONE PC	ANNUAL SUPPORT	7,000

5/11/2016 2:15 PM

38-2761226

Federal Statements

FYE: 12/31/2015

<u>Statement 5 - Form 990-PF, Part XV, Line 3a - Grants and Contributions Paid During the Year (continued)</u>

Name	Address	Address
Relationship Status	Purpose	Amount
MOODY CHURCH RADIO MINIST	1609 NORTH LASALLE BLVD	CHICAGO IL 60614-6095
NONE PC	ANNUAL SUPPORT	500
THE NAVIGATORS	PO BOX 6000	COLORADO SPRINGS CO 80934
NONE PC	ANNUAL SUPPORT	3,000
NORTHWESTERN COLLEGE	101 SEVENTH STREET, SW	ORANGE CITY IA 51041-196
NONE PC	ANNUAL SUPPORT	27,500
OAKLAND UNIVERSITY	DEVELOPMENT DEPARTMENT	ROCHESTER MI 48309-4497
NONE PC	ANNUAL SUPPORT	500
O.A.R. INC.	PO BOX 1875	HOLLAND MI 49422-1875
NONE PC	ANNUAL SUPPORT	500
ODCMG	201 MONROE AVENUE, NW	GRAND RAPIDS MI 49503
NONE PC	ANNUAL SUPPORT	500
OTTAWA REFORMED CHURCH	11390 STANTON STREET	WEST OLIVE MI 49460
NONE PC	ANNUAL SUPPORT	6,356
OUTDOOR DISCOVERY CENTER	A-4214 56TH STREET	HOLLAND MI 49423
NONE PC	ANNUAL SUPPORT	500 J
PINE REST	PO BOX 165	GRAND RAPIDS MI 49502-028
NONE PC PRISON FELLOWSHIP MINISTR	ANNUAL SUPPORT PO BOX 17500	500
NONE PC	ANNUAL SUPPORT	WASHINGTON DC 20041-7500
PROSTHETIC PROMISE IN HIS NAME	5403 FOXHILL RD	2,500 TEMPLE TX 76502
NONE PC	ANNUAL SUPPORT	
PUBLIC MUSEUM FOUND OF GR	272 PEARL ST NW	10,000 GRAND RAPIDS MI 49504-537
NONE PC	ANNUAL SUPPORT	200
QUEST MINISTRIES	16665 12 MILE RD	BIG RAPIDS MI 49308
NONE PC	ANNUAL SUPPORT	5,000
RAFIKE FOUNDATION, INC.	P.O. BOX 1988	EUSTIS FL 32727
NONE PC	ANNUAL SUPPORT	2,000
RCA ZEELAND CLASSIS	CAMPUS MINISTRY AT GVSU	ZEELAND MI 49464
NONE PC	ANNUAL SUPPORT	34,000
REFORMED CHURCH IN AMERICA	4500 60TH STREET SE	GRAND RAPIDS MI 49512
NONE PC	ANNUAL SUPPORT	4,500
REFORMED CHURCH IN AMERICA	4500 60TH ST SE	GRAND RAPIDS MI 49512
NONE PC	ANNUAL SUPPORT	2,000
RELIANT	11002 LAKE HART DRIVE	ORLANDO FL 32832
NONE PC	ANNUAL SUPPORT	500
RENEW TRC	4271 60TH ST	HOLLAND MI 49423
NONE PC	ANNUAL SUPPORT	7,000
SALT MINISTRIES	PO BOX 64	JENISON MI 49429-0064
NONE PC	ANNUAL SUPPORT PO BOX 36006	1,000
SALVATION ARMY NONE PC	ANNUAL SUPPORT	DALLAS TX 75235 10,000
SEACOAST CHR COMMUNITY CH	750 LONG POINT ROAD	MT PLEASANT SC 29464
NONE PC	ANNUAL SUPPORT	6,000
SONSCAPE RECREATION MINIS	PO BOX 700	DIVIDE CO 80814
NONE PC	ANNUAL SUPPORT	10,000
SOUTH OLIVE CHR SCHOOL SOCIETY	6230 120TH STREET	HOLLAND MI 49424
NONE PC	ANNUAL SUPPORT	500
SPECIAL OLYMPICS-AREA 12	590 HUIZENGA	ZEELAND MI 49464
NONE PC	ANNUAL SUPPORT	1,000
ST. THOMAS REFORMED CH.	P.O. BOX 301769	ST. THOMAS VI 00803
NONE PC	ANNUAL SUPPORT	1,000

5/11/2016 2:15 PM

FYE: 12/31/2015

Statement 5 - Form 990-PF, Part XV, Line 3a - Grants and Contributions Paid During the Year (continued)

Name	Address	Address	
Relationship Status	Purpose	Amount	
UNDER THE FIG TREE MINISTRIES	P. O. BOX 1256	HOLLAND MI 49422-1256	
NONE PC	ANNUAL SUPPORT	2,000	
VAN ANDEL INSTITUTE	333 BOSTWICK AVENUE NE	GRAND RAPIDS MI 49503	
NONE PC	ANNUAL SUPPORT	300	
WEDGEWOOD CHRISTIAN SERVICES	3300 36TH STREET SE	GRAND RAPIDS MI 49512-281	
NONE PC	ANNUAL SUPPORT	500	
WESTERN THEOLOGICAL SEMIN	101 EAST 13TH STREET	HOLLAND MI 49423	
NONE PC	ANNUAL SUPPORT	22,000	
WEST MICHIGAN TEEN CHALLE	440 PONTALUNA ROAD	MUSKEGON MI 49444	
NONE PC	ANNUAL SUPPORT	2,000	
WINNING AT HOME	300 SOUTH STATE STREET	ZEELAND MI 49464	
NONE PC	ANNUAL SUPPORT	20,000	
CENTER FOR WOMEN IN TRANSITION	411 BUTTERNUT DRIVE	HOLLAND MI 49424	
NONE PC	ANNUAL SUPPORT	500	
WOODWARD CROHNS & COLITIS FND	270 FURMAN FARM PLACE	DANIEL ISLAND SC 29492	
NONE PC	ANNUAL SUPPORT	200	
WORDS OF HOPE	PO BOX 1706	GRAND RAPIDS MI 49501	
NONE PC	ANNUAL SUPPORT	8,000	
WYCLIFFE BIBLE TRANSLATORS	PO BOX 628200	ORLANDO FL 32862-8211	
NONE PC	ANNUAL SUPPORT	4,200	
YOUNG LIFE CHARLESTON AREA	342 MEETING STREET	CHARLESTON SC 29403	
NONE PC	ANNUAL SUPPORT	3,000	
YOUNG LIFE OF HOLLAND	96 WEST 15TH STREET	HOLLAND MI 49423	
NONE PC	ANNUAL SUPPORT	500	
YOUTH FOR CHRIST HOLLAND	PO BOX 2121	HOLLAND MI 49422-2121	
NONE PC	ANNUAL SUPPORT	2,000	
YOUTH UNLIMITED	P.O. BOX 7259	GRAND RAPIDS MI 49510	
NONE PC	ANNUAL SUPPORT	1,000	
ZEELAND SOCIETY FOR CHR I INSTR	334 WEST CENTRAL AVENUE	ZEELAND MI 49464	
NONE PC	ANNUAL SUPPORT	5,000	
TOTAL		663,882	

DE WITT FAMILIES CONDUIT FOUNDATION 280 N. RIVER, STE. B HOLLAND, MI 49424

Treatment of Qualifying Distributions Election

Under IRC Section 4942(h)(2) and Reg. 53.4942(a)-3(d)(2), the nonoperating private foundation elects to treat current year qualifying distributions in excess of the immediately preceding tax year's undistributed income as being made out of:

[] Unc	distributed inco	me from the tax y	ears ending:
	Tax Year	Amount	
N Con	rpus	_	
ISI Dar	L R	W) M	
Name GARY DE	V_{1} Π		
Title PRESIDENT			