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Form 990-PF

## Return of Private Foundation

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

OMB No 1545-0052

Open to Public Inspection

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.

For calendar year 2016 or tax year beginning , and ending Name of foundation Employer identification number PETER V. WESTHAYSEN MEDICAL EDUCATI TRUST 31-6290396 Number and street (or P O box number if mail is not delivered to street address) Room/suite Telephone number (see instructions) 10322 INDIANAPOLIS BLVD 219-853-3532 City or town, state or province, country, and ZIP or foreign postal code If exemption application is pending, check here HIGHLAND IN 46322 G Check all that apply Initial return Initial return of a former public charity 1. Foreign organizations, check here Final return Amended return 2. Foreign organizations meeting the Address change Name change 85% test, check here and attach computation Section 501(c)(3) exempt private foundation Check type of organization. If private foundation status was terminated under Section 4947(a)(1) nonexempt charitable trust  $\mathbf{X}$  Other taxable private foundation section 507(b)(1)(A), check here X Cash Fair market value of all assets at J Accounting method If the foundation is in a 60-month termination end of year (from Part II, col (c), under section 507(b)(1)(B), check here Other (specify) 1,304,132 (Part I column (d) must be on cash basis ) line 16) ▶ \$ (d) Disbursements Part I Analysis of Revenue and Expenses (The total of (a) Revenue and (b) Net investment (c) Adjusted net for charitable amounts in columns (b), (c), and (d) may not necessarily equal expenses per income income books purposes the amounts in column (a) (see instructions) ) (cash basis only) Contributions, gifts, grants, etc., received (attach schedule) Check > X if the foundation is **not** required to attach Sch. B 2 Interest on savings and temporary cash investments 8,488 8,488 3 23,639 23,639 4 Dividends and interest from securities 5a Gross rents Net rental income or (loss) Stmt 1 28,108 Net gain or (loss) from sale of assets not on line 10 Gross sales price for all assets on line 6a 353,814 Capital gain net income (from Part IV, line 2) **⊕** 0 Net short-term capital gain Income modifications 10a Gross sales less returns and allowances Less Cost of goods sold C Gross profit or (loss) (attach schedule) 11 Other income (attach schedule) 12 Total. Add lines 1 through 11 60,235 32,127 13 Compensation of officers, directors, trustees, etc. Operating and Administrative Expenses 14 Other employee salaries and wages 13,116 13,116 15 Pension plans, employee benefits Legal fees (attach schedule) See Stmt 2 688 688 16a Stmt 3 928 928 Accounting fees (attach schedule) С Other professional fees (attach schedule) 17 Interest 18 Taxes (attach schedule) (see instructions) 19 Depreciation (attach schedule) and depletion 5500 20 Occupancy 21 Travel, conferences, and meetings 22 Printing and publications Stmt 4 3,157 3,157 23 Other expenses (att. sch.) 24 Total operating and administrative expenses. 17,889 17,889 Add lines 13 through 23 0 55,000 25 Contributions, gifts, grants paid 55,000 72,889 17,889 0 26 Total expenses and disbursements. Add lines 24 and 25 55,000 27 Subtract line 26 from line 12: -12,654 Excess of revenue over expenses and disbursements Net investment income (if negative, enter -0-) 14,238 Adjusted net income (if negative, enter -0-) 0

For Paperwork Reduction Act Notice, see instructions.

Form 990-PF (2016)

Form 99	0-PF (2016) PETER V. WESTHAYSEN MEDICAL EDUCA			Page <b>2</b>
Part	Balance Sheets Attached schedules and amounts in the description column	Beginning of year	End of	<del></del>
	Silvara de la cita di your amatrica di y	(a) Book Value	(b) Book Value	(c) Fair Market Value
1	Cash - non-interest-bearing	<u> </u>		_ <del></del>
2	Savings and temporary cash investments			
3	Accounts receivable ►		ŀ	
Í	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		ĺ	
ĺ	disqualified persons (attach schedule) (see	ĺ		
]	instructions)			
7	Other notes and loans receivable (att. schedule)		1	
	Less, allowance for doubtful accounts ▶ 0			
ω 8	Inventories for sale or use			
Assets a 6 a	Prepaid expenses and deferred charges			
V 10a	The second secon	30,005	32,261	32,261
ь	Investments – corporate stock (attach schedule) See Stmt 6	1,074,883	1,060,852	1,271,871
ء ا	Investments - corporate bonds (attach schedule)			
11	Investments – land, buildings, and equipment basis			
''	Less accumulated depreciation (attach sch )	]		
12	Investments – mortgage loans			
13	Investments – other (attach schedule)			· · · · · · · · · · · · · · · · · · ·
14	Land, buildings, and equipment basis			
'**	Less accumulated depreciation (attach sch )		Ì	
1 45				
15	Other assets (describe > )			
16	Total assets (to be completed by all filers – see the instructions. Also, see page 1, item l)	1,104,888	1,093,113	1,304,132
+		=/=00/000		
17	Accounts payable and accrued expenses			
ري 18 دي ع	Grants payable			
19	Deferred revenue  Loans from officers, directors, trustees, and other disqualified persons	<del></del>		
20				
Liabilities 20 21 22	Mortgages and other notes payable (attach schedule)			
22	Other liabilities (describe )	0	0	
23	Total liabilities (add lines 17 through 22)	<del> </del>	<del>-</del>	
	Foundations that follow SFAS 117, check here and complete lines 24 through 26 and lines 30 and 31.		Į	
Se				
E 24	Unrestricted	<del></del>		
E 25	Temporarily restricted	}		
Net Assets or Fund Balances 25 26 27 30 31 31	Permanently restricted	\		
.5	Foundations that do not follow SFAS 117, check here		ĺ	
7	and complete lines 27 through 31.			
9 27	Capital stock, trust principal, or current funds	<b></b>		
9 28	Paid-in or capital surplus, or land, bldg , and equipment fund	1 104 000	1 002 112	•
Ø 29	Retained earnings, accumulated income, endowment, or other funds	1,104,888	1,093,113	
<b>a</b> 30	Total net assets or fund balances (see instructions)	1,104,888	1,093,113	
31	Total liabilities and net assets/fund balances (see			
	instructions)	1,104,888	1,093,113	
Part				
	al net assets or fund balances at beginning of year - Part II, column (a), line 30 (mi	ust agree with	1 1	4 44. 44-
end	d-of-year figure reported on prior year's return)		1	1,104,888
	ter amount from Part I, line 27a		2	-12,654
3 Oth	ner increases not included in line 2 (itemize) > See Statement 7		3	879
4 Ad	d lines 1, 2, and 3		4	1,093,113
<b>5</b> De	creases not included in line 2 (itemize)		5	
6 To	al net assets or fund balances at end of year (line 4 minus line 5) - Part II, column	(b), line 30		1,093,113

	7. WESTHAYSEN MEDICA		31-6290396	5	Page
(a) List and des	cribe the kind(s) of property sold (e.g., real estate, varehouse, or common stock, 200 shs MLC Co.)		(b) How acquired P – Purchase D – Donation	(c) Date acquired (mo , day, yr )	(d) Date sold (mo , day, yr )
1a N/A			B = Bonation		<del> </del>
b					<del> </del>
c					
d					
e					
(e) Gross sales price	(f) Depreciation allowed (or allowable)	1	r other basis ense of sale	1	n or (loss) (f) minus (g)
a					
b					
С					
d					
e					
Complete only for assets showing	ng gain in column (h) and owned by the	foundation on 12/31/6	69	(I) Gains (Co	l (h) gain minus
(i) F M V as of 12/31/69	(j) Adjusted basis as of 12/31/69	•	ss of col (i)	col (k), but no	t less than -0-) or rom col (h))
a					
b					
C					
d					
e					
2 Capital gain net income or (net	capital loss) If gain, also enter if (loss), enter -0- i	<b>_</b>		2	_
3 Net short-term capital gain or (lo	oss) as defined in sections 1222(5) and				
	3, column (c) (see instructions) If (loss)			3	
	nder Section 4940(e) for Redu	iced Tax on Net	investment inco	ome	<del></del>
	e foundations subject to the section 494				
	•		,		
If section 4940(d)(2) applies, leave t	nis part blank				
	ction 4942 tax on the distributable amou alify under section 4940(e). Do not com	• •	base period?		X Yes No
1 Enter the appropriate amount in	each column for each year; see the ins	structions before maki	ng any entries		
(a)  Base period years  Calendar year (or tax year beginning ii	(b)		(c) e of noncharitable-use asse		(d) tribution ratio divided by col. (c))
2015					
2014					
2013					<del></del>
2012					<del></del>
2011					<del></del>
2 Total of line 1, column (d) 3 Average distribution ratio for the	5-year base period - divide the total or	line 2 by 5, or by the		2	
	has been in existence if less than 5 year		-	3	
4 Enter the net value of noncharita	able-use assets for 2016 from Part X, lir	ne 5		4	<del></del>
5 Multiply line 4 by line 3				5	
6 Enter 1% of net investment inco	me (1% of Part I, line 27b)			6	
7 Add lines 5 and 6				7	
8 Enter qualifying distributions from	m Part XII, line 4			8	

If line 8 is equal to or greater than line 7, check the box in Part VI, line 1b, and complete that part using a 1% tax rate. See the

Part VI instructions

Form	orm 990-PF (2016) PETER V. WESTHAYSEN MEDICAL EDUCATI 31-6290396								
	rt VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 - see instructions)								
1a	Exempt operating foundations described in section 4940(d)(2), check here ▶ ☐ and enter "N/A" on line 1.								
	Date of ruling or determination letter: (attach copy of letter if necessary—see instructions)								
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check	_1_				<u> 285</u>			
	here ▶ ☐ and enter 1% of Part I, line 27b								
С	All other domestic foundations enter 2% of line 27b Exempt foreign organizations enter 4% of								
	Part I, line 12, col (b)					_			
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-)	2				0			
3	Add lines 1 and 2	3				285			
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	4				0			
5	Tax based on investment income. Subtract line 4 from line 3 If zero or less, enter -0-	5				285			
6	Credits/Payments								
а	2016 estimated tax payments and 2015 overpayment credited to 2016 6a 360								
b	Exempt foreign organizations – tax withheld at source	ł			•				
C	Tax paid with application for extension of time to file (Form 8868)								
d	Backup withholding erroneously withheld 6d 6d								
7	Total credits and payments. Add lines 6a through 6d	7			•	360			
8	Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached	8							
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed	9							
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid	10				75			
11	Enter the amount of line 10 to be Credited to 2017 estimated tax ▶ 75 Refunded ▶	11		-					
Pa	rt VII-A Statements Regarding Activities					<del></del>			
1a	•				Yes	No			
	participate or intervene in any political campaign?			1a		<u>X</u>			
þ	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see				<b>)</b>	37			
	Instructions for the definition)?			1b		<u>X</u>			
	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			4.	.	x			
С	Did the foundation file Form 1120-POL for this year?			1c					
d	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year								
	(1) On the foundation > \$ (2) On foundation managers > \$	-							
е	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed								
_	on foundation managers \$			2	Ì	x			
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?								
•	If "Yes," attach a detailed description of the activities  Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of								
3	incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes			3	ŀ	- <b>X</b>			
4-	Did the foundation have unrelated business gross income of \$1,000 or more during the year?			4a		$\frac{\hat{\mathbf{x}}}{\mathbf{x}}$			
4a	If "Yes," has it filed a tax return on Form 990-T for this year?	1	N/A	4b		_==_			
ь 5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?	•	<del>-</del>	5		x			
J	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								
	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 Pai	t XV		7	X				
8a	Enter the states to which the foundation reports or with which it is registered (see instructions)								
	None					,			
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	X				
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 2016 or the taxable year beginning in 2016 (see instructions for Part XIV)? If "Yes,"				[				
	complete Part XIV			9		<u>X</u>			
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their					_			
	names and addresses			10		X			
	<del></del>		F	om 99	0-PF	(2016)			

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Pa	rt VII-A Statements Regarding Activities (continued)					
					Yes	No
11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the					
•	meaning of section 512(b)(13)? If "Yes," attach schedule (see instructions)			11		X
12	Did the foundation 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		X
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption applicat	ion?		13	X	
	Website address ► N/A					
14	·	ione no 🕨	219-8	353-	373	4
	2801 WEST JEFFERSON STREET					
	Located at ▶ JOLIET IL	ZIP+4 ▶	60435	5-53	52	
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - Check here		•			▶ 📗
	and enter the amount of tax-exempt interest received or accrued during the year	▶ _	15			
16	At any time during calendar year 2016, 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					
Pa	rt VII-B Statements Regarding Activities for Which Form 4720 May Be Required					
	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.				Yes	No
1a	During the year did the foundation (either directly or indirectly)					
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person?	Yes	X No			
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a					
	disqualified person?	Yes	X No			
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?	Yes	X No X No X No			
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?	Yes	X No			
	(5) Transfer any income or assets to a disqualified person (or make any of either available for					
	the benefit or use of a disqualified person)?	Yes	X No			
	(6) Agree to pay money or property to a government official? (Exception. Check "No" if the					
	foundation agreed to make a grant to or to employ the official for a period after					
	termination of government service, if terminating within 90 days )	Yes	X No			
b	If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulation	ons	-			
	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		_			
	were not corrected before the first day of the tax year beginning in 2016?		N/A	1c	l	
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private					
	operating foundation defined in section 4942(j)(3) or 4942(j)(5))					
а	At the end of tax year 2016, did the foundation have any undistributed income (lines 6d and					
	6e, Part XIII) for tax year(s) beginning before 2016?	Yes	X No			
	If "Yes," list the years ▶ 20 , 20 , 20 , 20				]	
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				1	
	all years listed, answer "No" and attach statement – see instructions)		N/A	2b		
С	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here					
	<b>▶</b> 20 , 20 , 20 , 20					-
3 <b>a</b>						
	at any time during the year?	Yes	X No			
b	If "Yes," did it have excess business holdings in 2016 as a result of (1) any purchase by the foundation or		-		. [	
	disqualified persons after May 26, 1969, (2) the lapse of the 5-year period (or longer period approved by the					
	Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest, or (3) the lapse of				,	
	the 10-, 15-, or 20-year first phase holding period? (Use Schedule C, Form 4720, to determine if the					
	foundation had excess business holdings in 2016)		N/A	3ь	[	
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes	7		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 20	16?		4b		X
				. 00	0-PF	

orn	1990-PF (2016) PETER V. WESTHAYSEN MEDICAL EDU					Page 6
Pa	art VII-B Statements Regarding Activities for Which Form	<u>4720 May Be F</u>	equired (cont	inued)		
5a	During the year did the foundation pay or incur any amount to.					
	(1) Carry on propaganda, or otherwise attempt to influence legislation (section		L)	res 🗓 No		
	(2) Influence the outcome of any specific public election (see section 4955), or	to carry on,	_			
	directly or indirectly, any voter registration drive?		Ų ¹	∕es X No		
	(3) Provide a grant to an individual for travel, study, or other similar purposes?		<u> </u>	res 🏻 No		
	(4) Provide a grant to an organization other than a charitable, etc., organization	described in		<del></del>		
	section 4945(d)(4)(A)? (see instructions)		\ \ \\	res X No		
	(5) Provide for any purpose other than religious, charitable, scientific, literary, of	r educational		<del></del>		
	purposes, or for the prevention of cruelty to children or animals?		<u> </u>	res X No		
þ	If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify und			•		
	Regulations section 53 4945 or in a current notice regarding disaster assistance	e (see instructions)?	•	N/A	5b	
	Organizations relying on a current notice regarding disaster assistance check he	ere		<b>▶</b>		
C	If the answer is "Yes" to question 5a(4), does the foundation claim exemption from	om the tax	—			
	because it maintained expenditure responsibility for the grant?		N/A 🗌	res No		
	If "Yes," attach the statement required by Regulations section 53.4945-5(d)					
6a	Did the foundation, during the year, receive any funds, directly or indirectly, to p	ay premiums				
	on a personal benefit contract?		\\ <b></b> \	res X No		
þ	Did the foundation, during the year, pay premiums, directly or indirectly, on a pe	ersonal benefit conti	act?		6b	X
	If "Yes" to 6b, file Form 8870		· —			
	At any time during the tax year, was the foundation a party to a prohibited tax st			res X No	1	-
	If "Yes," did the foundation receive any proceeds or have any net income attribu			N/A	7b	
P	art VIII Information About Officers, Directors, Trustees, Fo	oundation Man	agers, Highly	Paid Employ	ees,	
	and Contractors	<del></del>				
1	list all officers, directors, trustees, foundation managers and their compens	sation (see instruc	tions).			
		(b) Title, and average	(c) Compensation	(d) Contributions to employee benefit	(e) Exp	ense account,
	(a) Name and address	hours per week devoted to position	(If not paid, enter -0-)	plans and deferred compensation		allowances
		<del> </del>		compensation	<del>├</del>	
N,	'A		1		1	
		+		<del></del>	<del> </del>	
		<del> </del>	<u> </u>		<del> </del>	
		+			<u> </u>	
	Compensation of five highest-paid employees (other than those included	on line 1 – see ins	tructions) If non	e enter	<del></del>	
_	"NONE."	017 11110 1 000 11110		0, 0.11.0.		
			<u> </u>	(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		ense account,
		devoted to position	· 	plans and deferred compensation	outer	allowances
NO	ONE					
			ļ		1	
					T	
= -						
		1	<u> </u>			
					<u> </u>	
Cota	I number of other employees paid over \$50,000					0

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	6) PETER V. WESTHAYSEN MEDICAL EDUCA		Page 7
	Information About Officers, Directors, Trustees, Found and Contractors (continued)	ation Managers, Highly Paid E	mployees,
	t-paid independent contractors for professional services (see instru	ctions). If none, enter "NONE."	
	(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE			
T-1-1			
otal number of o	thers receiving over \$50,000 for professional services		
Part IX-A	Summary of Direct Charitable Activities		
	our largest direct charitable activities during the tax year. Include relevant statistical information si ter beneficiaries served, conferences convened, research papers produced, etc.	uch as the number of	Expenses
1 N/A			
2			
_		,	
3	,		
7			
Part IX-B	Summary of Program-Related Investments (see instruc	ctions)	
	est program-related investments made by the foundation during the tax year on lines 1 and 2		Amount
1 N/A	-		
2		<del></del>	
	ated investments. See instructions		
3			
Total. Add lines 1	through 3	<b>-</b>	

Form-990-PF (2016)

Forn	n 990-PF (2016) PETER V. WESTHAYSEN MEDICAL EDUCATI 31-6290396		Page 8
P	art X Minimum Investment Return (All domestic foundations must complete this part. Forei	gn fo	undations,
	see instructions)		
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc.,	İ	
	purposes.		1
а	Average monthly fair market value of securities	1a	1,261,674
b	Average of monthly cash balances	1b	31,133
C	Fair market value of all other assets (see instructions)	1c	0
d	Total (add lines 1a, b, and c)	1d	1,292,807
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	0
3	Subtract line 2 from line 1d	3	1,292,807
4	Cash deemed held for charitable activities. Enter 11/2% of line 3 (for greater amount, see	]	
	instructions)	4	19,392
5	Net value of noncharitable-use assets. Subtract line 4 from line 3 Enter here and on Part V, line 4	5	1,273,415
6	Minimum investment return. Enter 5% of line 5	6	63,671
P	art XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating	four	dations
	and certain foreign organizations check here ▶   and do not complete this part )		
1	Minimum investment return from Part X, line 6	1	63,671
2a	Tax on investment income for 2016 from Part VI, line 5		
b	Income tax for 2016 (This does not include the tax from Part VI )		
С	Add lines 2a and 2b	2c	285
3	Distributable amount before adjustments Subtract line 2c from line 1	3	63,386
4	Recoveries of amounts treated as qualifying distributions	4	<u> </u>
5	Add lines 3 and 4	5	63,386
6	Deduction from distributable amount (see instructions)	6_	<del></del>
7	Distributable amount as adjusted Subtract line 6 from line 5. Enter here and on Part XIII,	} (	
	line 1	7_	63,386
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	55,000
þ	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	<del></del>
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	<del></del>
4	Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4	4	55,000
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	0
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	55,000
	Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the found	ation	

--- - Form-990-PF (2016)

qualifies for the section 4940(e) reduction of tax in those years

	990-PF (2016) PETER V. WESTHAYSEN ME		ri 31-629039	6	Page <b>9</b>
Pa	rt XIII Undistributed Income (see instructions	s)	····	<del></del>	
	- A COLO COLO DEL VI	(a) Corpus	(b) Years prior to 2015	(c) 2015	(d) 2016
1	Distributable amount for 2016 from Part XI,	Corpus	rears prior to 2013	2013	63,386
_	line 7				63,386
2	Undistributed income, if any, as of the end of 2016			19,732	
	Enter amount for 2015 only			19,132	······································
	Total for prior years 20 , 20 , 20 , 20		,		
3	Excess distributions carryover, if any, to 2016				
_	From 2011	-		•	
	From 2012	-		1	
	From 2013	-			
	From 2014	-			
_	From 2015	-			
	Total of lines 3a through e	<del> </del>	`		
4	Qualifying distributions for 2016 from Part XII,	İ			
	line 4. ▶ \$ 55,000			19,732	
	Applied to 2015, but not more than line 2a			19,732	
b	Applied to undistributed income of prior years				
	(Election required – see instructions)				
С	Treated as distributions out of corpus (Election				
	required – see instructions)				25 060
	Applied to 2016 distributable amount	<u></u>	,		35,268
е	Remaining amount distributed out of corpus	<del></del>			
5	Excess distributions carryover applied to 2016	<del> </del>			<del></del>
	(If an amount appears in column (d), the same				•
	amount must be shown in column (a).)				
6	Enter the net total of each column as				
	indicated below:			ĺ	
	Corpus Add lines 3f, 4c, and 4e Subtract line 5				······································
b	Prior years' undistributed income Subtract				
	line 4b from line 2b		<u> </u>		<del></del>
С	Enter the amount of prior years' undistributed			į	
	income for which a notice of deficiency has				
	been issued, or on which the section 4942(a)			1	
	tax has been previously assessed		<del> </del>		
d	Subtract line 6c from line 6b Taxable	,	İ		
	amount - see instructions				
е	Undistributed income for 2015 Subtract line				
	4a from line 2a Taxable amount – see				
	instructions	<u></u>			
f	Undistributed income for 2016 Subtract lines	ļ			
	4d and 5 from line 1. This amount must be				00.440
	distributed in 2017				28,118
7	Amounts treated as distributions out of corpus				
	to satisfy requirements imposed by section				
	170(b)(1)(F) or 4942(g)(3) (Election may be				
	required—see instructions)	<u></u>			······································
8	Excess distributions carryover from 2011 not				
	applied on line 5 or line 7 (see instructions)	<u></u>			······································
9	Excess distributions carryover to 2017.			l	
	Subtract lines 7 and 8 from line 6a				
10	Analysis of line 9				
а	Excess from 2012	4			
b	Excess from 2013	1	1	1	

Excess from 2014
Excess from 2015
Excess from 2016

_	990-RF (2016) PETER V. WES					Page <b>10</b>
	irt XIV Private Operating For				9)	
1a	If the foundation has received a ruling or			ting		
	foundation, and the ruling is effective for		<del>-</del>		Ĺ	
þ	Check box to indicate whether the found		ating foundation descr		942(j)(3) or 494	12(j)(5)
2a	Enter the lesser of the adjusted net	Tax year	4110010	Prior 3 years	1	(e) Total
	income from Part I or the minimum	(a) 2016	(b) 2015	(c) 2014	(d) 2013	<del></del>
	investment return from Part X for				(	
	each year listed		<del> </del>	Ĺ	<u> </u>	<u> </u>
b	85% of line 2a		<del> </del>	<u> </u>	<u> </u>	<del> </del>
С	Qualifying distributions from Part XII,		j	ľ		
	line 4 for each year listed		<u> </u>	<u> </u>	ļ	<del></del>
d	Amounts included in line 2c not used directly			}	İ	
	for active conduct of exempt activities		ļ	<b>}</b>	<b></b>	<del> </del>
е	Qualifying distributions made directly		1	·		}
	for active conduct of exempt activities		1	}	İ	ļ
	Subtract line 2d from line 2c		<del> </del>	<u> </u>	<u> </u>	<del> </del>
3	Complete 3a, b, or c for the					Į.
	alternative test relied upon					
а	"Assets" alternative test – enter		}			ľ
	(1) Value of all assets		<b></b>	<del></del>		<u> </u>
	(2) Value of assets qualifying under		}			i
	section 4942(j)(3)(B)(i)		<b>}</b> -	<del> </del>	<del> </del>	<del></del>
b	"Endowment" alternative test – enter 2/3		ļ	}		<u> </u>
	of minimum investment return shown in		ļ <u>.</u>			
	Part X, line 6 for each year listed		ļ	<del> </del>	<del> </del>	<del></del>
С	"Support" alternative test – enter					}
	(1) Total support other than gross					
	investment income (interest,		İ			
	dividends, rents, payments on securities loans (section					1
	512(a)(5)), or royalties)					İ
	(2) Support from general public					<del></del>
	and 5 or more exempt			ļ	<b>,</b>	1
	organizations as provided in			1		
	section 4942(j)(3)(B)(iii)		ļ		<u> </u>	<u> </u>
	(3) Large'st amount of support from					
	an exempt organization		-			
	(4) Gross investment income		11.	1. 6. 1.1.	107.000	<u> </u>
Pa	urt XV Supplementary Inform		•	the foundation h	ad \$5,000 or more	e in assets at
	any time during the ye		tions.)	<del></del>		<del></del>
1	Information Regarding Foundation Ma	•			t 11 6 14	
а	List any managers of the foundation who					
	before the close of any tax year (but only	if they have contribut	ed more than \$5,000)	(See section 507(d)(2	2))	
	N/A	100/ of	1h	(		
þ	List any managers of the foundation who				e portion of the	
	ownership of a partnership or other entity <b>N/A</b>	) of which the foundar	tion has a 10% or grea	iter interest		
		Stand Ciff Lana Cal	- desphie et - Deser		<u> </u>	
2	Information Regarding Contribution, C		-		daga nat aggart	•
			to preselected charita	=		
	unsolicited requests for funds. If the foun	-	ants, etc (see instruct	lions) to individuals of	organizations under	
	other conditions, complete items 2a, b, c The name, address, and telephone number		of the person to whom	analisations should b		
а	FIRST MIDWEST BANK T		or the person to whom 0322	applications should b	e addressed	
	FIRST MIDWEST BANK I	ROSIEE , I	0322			
<u> </u>	The form in which applications chould be	cubmitted and inform	estion and materials th	ov should include	<del></del>	<del></del>
þ	The form in which applications should be SEE ATTACHED APPLICA		iauon and materiais th	ey should include		
_	Any submission deadlines				<del></del>	
•	SEE ATTACHED APPLICA	TION FORM				
d	Any restrictions or limitations on awards,		ical areas, charitable f	ields, kinds of institution	ons, or other	
-	factors			,		
	See Statement 8					
DAA	<del></del>					Form 990-PF (2016)

Supplementary Information (continued) 3 Grants and Contributions Paid During the Year or Approved for Future Payment If recipient is an individual, Foundation Recipient 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 ATTACHED SCHEDULE NONE 55,000 55,000 Total **▶** 3a **b** Approved for future payment N/A Total **▶** 3b

 <del></del>
 ···
 ·
 Form 990-PF (2016)
Form <b>ソソレード</b> (2016)

	_	Exempt Organiza	<u>itions</u>					_		
1 Die	the orga	nization directly or indi	rectly engage	e in any of the foll	lowing with any	other organization described		Y	es	No
in:	section 50	1(c) of the Code (other	r than section	n 501(c)(3) organ	izations) or in se	ection 527, relating to political				
org	ganization	s?						1		
a Tra	ansfers fro	m the reporting found	ation to a non	icharitable exemp	pt organization o	f				
(1)	Cash							1 <u>a</u> (1)		X
(2)	Other as	sets						1a(2)		$\overline{\mathbf{x}}$
b Ot	her transa	ctions								
(1)	Sales of	assets to a noncharita	able exempt o	organization			Ī	1b(1)		X
(2)	Purchas	es of assets from a no	ncharitable e	xempt organizati	on		ļ	1b(2)		X
		f facilities, equipment,						1b(3)		X
(4)	Reimbui	sement arrangements	j					1b(4)		x
(5)	Loans o	r loan guarantees						1b(5)		X
(6)	Perform	ance of services or me	mbership or f	fundraising solici	tations			1b(6)		X
c Sh	aring of fa	icilities, equipment, ma	ailing lists, oth	her assets, or pai	id employees			1c		X
d Ift	he answe	r to any of the above is	"Yes," comp	lete the following	schedule Colu	mn (b) should always show the f	fair market			
va	lue of the	goods, other assets, o	r services giv	en by the reporti	ng foundation If	the foundation received less that	ın faır market			
<u>v</u> a	lue in any	transaction or sharing	arrangement	t, show in column	(d) the value of	the goods, other assets, or serv	rices received			
	ne no	(b) Amount involved	(c) Name	of noncharitable exemp	pt organization	(d) Description of transfers, t	ransactions, and sharing arra	ingements		
N/A										
					<del></del>					
			<u> </u>							
						<del> </del>				
<del></del>			· · · · · · · · · · · · · · · · · · ·							
		<del></del>	<del></del>							
			<del></del>				<del></del>			
			<del></del>				<del></del>			
			<del></del>	<del></del>	<del></del>					
			<del></del>				<del></del>			
										—-
0- 1-	46 - 6		Alv. officetod v	uth or valeted to						
		•				exempt organizations	Г	Yes	V	NI.
		section 501(c) of the opposite the following scl		nan section 50 i(c	c)(3)) or in section	5277	Ĺ	res	1	INO
<u> </u>		) Name of organization	TeduleT	(b) Type of o	organization	(c) Descri	ption of relationship			
N/		, ,		(-) -) -			<u></u>	··-		
		<del>_</del>								
							<del></del>			—
										—
									_	
						edules and statements, and to the best of	f my knowledge and belief, i	ıs true,		
	correct, ar	d complete Declaration of p	reparer (other the	an taxpayer) is based	on all information of	which preparer has any knowledge	May the IRS discus	s this return	,	$\neg$
Sign							with the preparer s			1
Here	. /			- 0.0		u.l.=	(see instructions)?	Yes	<u> </u>	No
j	<b>N</b> .	- Wester	., w.M. (	Officer	4	Hal17 .				
}	Signa	ture of afficer or thusiee	First Mi	iduest Bc	wk Date	Title				
	Pnnt/Ty	oe preparer's name			Preparer's signatu	re	Date	<u></u>	eck	ī.
D - 1 1								1	eck ( f-emple	j " oyed
Paid	Randa	all W. Shuman			Randall W	. Shuman	03/29			
Prepare	I Fırm's n			eth & Sh			PTIN POO	3645	37	
Use Onl	y Firm's a			t Ave Su			Firm's EIN ► 35-	L8343	348	
	$\perp$		er, IN					-836-		
								m 990-		

-3,799 38,499 -6,59228,108 Gain / Loss <del>1.</del>3 Charitable Charitable Purpose Purpose S Depreciation Adjusted Net Adjusted Statement 3 - Form 990-PF, Part I, Line 16b - Accounting Fees Statement 1 - Form 990-PF, Part I, Line 6a - Sale of Assets Expense Statement 2 - Form 990-PF, Part I, Line 16a - Legal Fees 688 688 928 928 3,799 325,706 321,907 Investment Investment Federal Statements Net Net Cost <del>ረ</del>› Received Purchase Purchase Purchase 38,499 Mo≪ 315,315 353,814 688 688 Sale Price 928 928 Total Total 8111 PETER V. WESTHAYSEN MEDICAL EDUCATI 1/01/16 12/31/16 \$ 4/04/12 12/31/16 FIRST MIDWEST BANK-LT SALES 1/01/01 12/31/16 Date Sold Date Acquired Description Description Description COMMON TRUST FUND COMMON TRUST FUND ACCOUNTING FEES Whom Sold FYE: 12/31/2016 31-6290396 Total Total LEGAL FEES Total

ACCT 9515 447002015 FROM 01/01/2016 TG 12/31/2016

FIRST MIDWEST BANK STATEMENT OF CAPITAL GAINS AND LOSSES WESTHAYSEN MED ED TR

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		TRUST YEAR EN	NDING 12/31/2	016		05.54:47	PM	
TAX PREFARER 21 TRUST ADMINISTRATOR, J.P INVESTMENT OFFICER: JRB			LEGEND :	F - FEDERAL E - EXEMPT FROM		- INHERITED OST UNKNOWN		
PROPERTY DESCRIPTION	SHARES	DATE	SALES PRICE	COST BASIS	GAIN/LOSS	MARKET DISCOUNT	TERM	1 NC
1495.4180 FIDELIT SOLD	Y RF ADVISOR S			783 - MINOR = 594				
ACQ	1192.3880	09/14/2010 04/11/2011	10671.87	11435.00	-763.13 -287.88	0.00		
**CHANGED** 10/03/16 W 300.0000 INTEL C	ES		2/12.12	3000.00	-287.88	0.00	LT	Y
SOLD ACQ	(	07/28/2016 01/09/1996	10401.10 10401.10		4224			
**CHANGED** 10/03/16 W	ES			2121.94	8279 16	0.00	LT	Y
130.0000 JOHNSON SCLD	(	07/28/2016	15180.88	****				
ACQ **CHANGED** 10/03/16 W			16180 88		13252.20	0.00	LT	Y
346 0750 FIRST M SCLD	(	05/31/2016	15000.00					
ACQ **CHANGED** 10/03/16 W	ES	02/01/2003	15000.00		-3465.48	0.00	LT	Y
2041.8830 FIRST M SOLD	(	08/31/2016	90000 00					
ACQ	966 3670 1075.5160	02/01/2003 11/15/2008		53283.90	-10689.38 -252.55	0.00		Y Y
**CHANGED** 10/03/16 W 447.9150 FIRST M	HIDWEST LARGE C	AP EQUITY FUND	- 606999209 -	MINOR = 310				
SOLD ACQ	390.7840	11/30/2016 11/15/2008	20000.00 17449 02	17373.83	75.19 -42.13	0 00	LT	Y
**CHANGED** 12/14/16 W	57 1310 🔍	04/15/2009	17449 02 2550.98	2593.11	~42.13	0 00		Y
9468.7250 FIRST M SOLD		NCOME - 6069994 11/30/2016						
ACQ **CHANGED** 12/14/16 W	9468 7250	10/31/2006	100000.00	104256.81	-4256.81	0.00	LT	Y
587.0210 SCOUT I	NTERNATIONAL -	02/10/2016	12345.05					
ACQ	360.5540	04/16/2009	7582.45	7550.00 2685 00	32.45 -715 50 -1136.90	0.00 0.00		Y Y
**CHANGED** 10/03/16 W	132.0130	09/14/2010	2793.10	3930.00	-1136.90	0.00		Ÿ
1841.6210 TEMPLET SOLD	ON INCOME TR G	LB BD ADVSOR -	880208400 - M	INOR = 495				
ACQ **CHANGED** 03/09/17 V	1841 6210 г л.м	02/10/2016 04/13/2012	20000.00	23996.33	-3996.33	0.00	LT	
1606.0800 TEMPLET	ON INCOME TR G	LB BD ADVSOR - 07/29/2016	880208400 - M	IINOR = 495				
ACQ	77 0280	04/13/2012 07/19/2013	863 48 17140 68	628 54 20000.00	234.94	0,00		
**CHANGED** 03/09/17 V		EXISTS			2007.52	0.50		
		TOTALS	315315.18	321906.65				
SUMMARY OF CAPITAL GAINS								
FEDERAL	SHORT TERM		LONG T	FERM ST WASH S				
NONCOVERED FROM ABOVE		0.0	0 29	.24	0.00 0		00*	
NCNCOVERED FROM ABOVE COVERED FROM ABOVE COMMON TRUST FUND CAPITAL GAIN DIV/DIST	-3798.82 183.75	0.00 0.00	U 20420	3.88	0 00 0		00	
CAPITAL GALA DI 1/DIGI	-3615.07				0.00 0			
STATE	-3013.07							
NONCOVERED FROM ABOVE			029	9.24			00-	
COVERED FROM ABOVE COMMON TRUST FUND	-3799.82	0.0	0 3725		0.05		00	
CAPITAL GAIN DIV/DIST	183.75							
•	-3615.07	0.0	0 33888			Ø## #########	==	
				* - 125	u GAIN DETAILED C	N TRANS PAGES, NO	)SA 1	JAE
CAPITAL LOSS CARRYOVER								
PEDEPAL	0.00		0	.00				
INDIANA	N/X		1	3/A				
•								

	<del></del>	<u></u> .	<del></del>	·							_						_		
		Charitable Purpose	\$	ıts	Fair Market  Value  \$ 32,261		Fair Market Value	\$ 39,714	27,055	768,886	35,051	37,597	185,793	309,800	28,861	ر د ر	, , , , , , , , , , , , , , , , , , ,	26,511 105,301 96,986	4-6
	enses	Adjusted Net	0	ment Investmen	Basis of Valuation	Stock Investments	Basis of Valuation	Cost	Cost	Cost	Cost	Cost	Cost	Cost	Cost	Cost	Cost	Cost Cost	
nents	ine 23 - Other Exp	Net Investment	3,157 3,157 \$	and State Government Investments	End of Year \$ 32,261	- Corporate Stoc	End of Year	2,	3,957	9,011	8,623	12,508	323.165	59,177	29,981	0,130	000 60	106,000 81,738	
SATI Federal Statements	- Form 990-PF, Part I, Line 23 - Other Expenses	Total	3,157 3,157 \$	, Part II, Line 10a - US	Beginning of Year \$ \$ 30,005 \$	90-PF, Part II, Line 10b - Corporate	Beginning of Year	\$ 2,881 \$	3,957				305,886 423,498		_			56,000 56,000 63,703	
PETER V. WESTHAYSEN MEDICAL EDUCATI 90396 12/31/2016	Statement 4 -	Description	enses INVESTMENT FEES Total	Statement 5 - Form 990-PF	Description NT OBLIGATIONS TAX MANAGED F	Statement 6 - Form 990-PF,	Description	EXXON MOBIL	SOUTHERN CORP	_	VI C	I INC	SE	H FM SMALL CAP EQUITY	H FM GEMS TERA ENER	IDELITY RF ADVIS	TEMFLETON INCOME TR FEDERATED RF INST	NGUARD FIXED	
8111 PETER V. 31-6290396 FYE: 12/31/2016			Expenses INVESTM Total		GOVERNMENT			SE	550 SH SOUT	400 JOHNSON	335 PEPSICO	884 SH AT&T	29417.654	2476.693	1875.447 165 SH NE	1495.418	2688.732	9905.99 VAI 2995.345 FI	

## 8111 PETER V. WESTHAYSEN MEDICAL EDUCATI Federal Statements

31-6290396 FYE: 12/31/2016

# Statement 6 - Form 990-PF, Part II, Line 10b - Corporate Stock Investments (continued)

Description	m ·	eginning of Year		End of Year	Basis of Valuation	ட	air Market Value
395.333 MFS INTL VALUE 587.021 SCOUT INTERNATIONAL	ا س	2,500	φ.	12,500	Cost	φ.	14,445
248.174 FIDELITY GROWTH 25				35,000	Cost		33,945
3357.409 FEDERATED ULTRA BOND				65,000 30,500	Cost Cost		66,240 30,552
649.022 VANGUARD S/T INFL 606.391 VANGUARD INFLAT PROT				16,000 16,000	Cost Cost		15,992
772.165 VANGUARD L/T GVT BD			}	20,000	Cost	1	19,134
Total	ν-	1,074,883	ςς	1,060,852		ς,	1,271,871

8111 PETER V. WESTHAYSEN MEDICAL EDUCATI 31-6290396 Federal Statements 31-6290396 FYE: 12/31/2016 Statement 7 - Form 990-PF, Part III, Line 3 - Other Increases Description Amount ADJUSTMENT FOR 2015 ACTIVITY INCLUDED IN 2015 879 Total 879 Form 990-PF, Part III, Line 5 - Other Decreases Description Amount ADJUSTMENT FOR 2012 ACTIVITY INCLUDED IN 2013 ACTI ESTIMATED TAX PAYMENTS Total Form 990-PF, Part XV, Line 2b - Application Format and Required Contents Description SEE ATTACHED APPLICATION FORM Form 990-PF, Part XV, Line 2c - Submission Deadlines Description SEE ATTACHED APPLICATION FORM Statement 8 - Form 990-PF, Part XV, Line 2d - Award Restrictions or Limitations Description SCHOLARSHIPS FOR MEDICAL AND/OR NURSING EDUCATION PROGRAMS AT ACCREDITED COLLEGES AND UNIVERSITIES

Scholarship Award	Student	Student ID
\$4,000	Dana D Jones	0001953485
\$4,000	Gregory Evan Koval	0001737340
\$4,000	Viraj Maniar	0002482517
\$4,000	Ambika Rao	0002512047
\$3,500	William Zuke	0002346483
\$3,500	Nathan S Timm	0003323640
\$3,500	Luke Lauridsen	0002680946
\$3,250	Yena Choi	0002701800
\$3,250	Ryan DesCamp	0002164178
\$2,250	Parina Maniar	0002846405
\$2,250	Krishna Hegde	0002842999
\$2,250	Timothy O'Connor	0002975976

## RUSH UNIVERSITY SCHOOL OF MEDICINE Office of Student Financial Aid 600 S. Paulina, Ste 440 Chicago, IL 60612-3869

Scholarship Award	Student	Student ID
\$3,250	Tara Mojtahed	0070757

COLUMBIA UNIVERSITY
COLLEGE OF PHYSICIANS AND SIRGEONS
650 West 168<sup>th</sup> Street
BB1-139
New York, NY 10032

Scholarship Award	Student	Student ID
\$2,250	Megan Liu	C004076031

NORTHWESTERN UNIVERSITY FEINBERG SCHOOL OF MEDICNE 303 East Chicago Avenue Chicago, IL 60611

Scholarship Award	Student	Student ID	
\$3,250	Ariel Magallon	2933989	
\$2,250	Sarah Hockney	N/A	

UNIVERSITY OF LOUISVILLE Office of Student Financial Aid Instructional Building Ste 230 University of Louisville Louisville, KY 40292

Scholarship Award	Student		Student ID
\$2,250	Monzolesso Joel Kognagba	Bagah-	N/A

17 Medical Awards: \$53,000.00

INDIANA STATE UNIVERSITY Financial Aid Office 220 N. 7<sup>th</sup> Street 150 Tirey Hall Terre Haute, IN 47809

Scholarship Award	Student	Student ID
\$2,000.00	Hannah M. Scott	991655154

1 Nursing Award: \$2,000.00

18 Grand Total Awards for 2016: \$55,000.00