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Form **990-PF**

Return of Private Foundation

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

on made public.

Department of the Treasury

▶ 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.lrs.gov/form990pf.

FOL	calendar year 2016 or tax year deginning		, and ending		
	me of foundation ORTER ART FOUNDATION TRUS	m		A Employer identification	number
	ONIER ART FOUNDATION TRUS			35-6067146	
	nber and street (or P O box number if mail is not delivered to street		Room/suite	B Telephone number	
1	0765 LANTERN RD		202	877-289-02	99
City	or town, state or province, country, and ZIP or foreign p	ostal code	· · · · · · · · · · · · · · · · · · ·	C If exemption application is p	ending, check here
_F	ISHERS, IN 46038-3597				
G C	Check all that apply: Initial return	Initial return of a former	public charity	D 1. Foreign organizations	s, check here
	Final return	Amended return		2. Foreign organizations me	seting the 85% test
	X Address change	Name change		Foreign organizations me check here and attach co	omputation
HC	Check type of organization: X Section 501(c)(3) ex			E If private foundation sta	
<u></u>		Other taxable private foundationing method: X Cash	Assemble	under section 507(b)(1)	
	air market value of all assets at end of year J Accounti from Part II, col. (c), line 16)	ing memod. LA Cash L ther (specify)	Accrual	F If the foundation is in a	
(<i>II</i>	•\$ 2 359 (Part L colu	mn (d) must be on cash basis	}	under section 507(b)(1)	(b), check here
	art Analysis of Revenue and Expenses) Net investment	(a) Adjusted not	(d) Disbursements
ين.	(The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a))	expenses per books	income	(c) Adjusted net income	for charitable purposes (cash basis only)
	1 Contributions, gifts, grants, etc., received	20,721.	· · · · · · · · · · · · · · · · · · ·	N/A	(0.0
	2 Check I if the foundation is not required to attach Sch B	· · · · · ·			
	3 Interest on savings and temporary cash investments		· · · · · ·	1	
	4 Dividends and interest from securities				
	5a Gross rents				
	b Net rental income or (loss)				
9	6a Net gain or (loss) from sale of assets not on line 10				
Revenue	b Gross sales price for all assets on line 6a		· · · · · · · · · · · · · · · · · · ·		
ev.	7 Capital gain net income (from Part IV, line 2)		0.		
-	8 Net short-term capital gain			·	
	9 Income modifications 10a and allowances	DEG			
		RECEIVE			
	b Less Cost of goods sold c Gross profit or (loss)	141	U		
	11 Other income	15-1-1111 0 -	. 8 -		
	12 Total. Add lines 1 through 11	1 20.721 20	17 9 0.		
	13 Compensation of officers, directors, trustees, etc	DARRE			0
	14 Other employee salaries and wages	THE PLANT	TT		
	15 Pension plans, employee benefits				
ses	16a Legal fees				
xpenses	b Accounting fees STMT 1	425.	0.		0
Ξ	c Other professional fees STMT 2	2,650.	0.	·	0
iš	17 Interest		<u></u>		
tra	18 Taxes				
inis	19 Depreciation and depletion				
μþ	20 Occupancy				
d A	21 Travel, conferences, and meetings22 Printing and publications			 -	- -
) ar	23 Other expenses			 	
ıting	24 Total operating and administrative				
perating and Administrative E	expenses. Add lines 13 through 23	3,075.	0.		0
ွဝ	25 Contributions, gifts, grants paid	16,563.			16,563
j	26 Total expenses and disbursements.				
9	Add lines 24 and 25	19,638.	0.	,	16,563
Operating and	27 Subtract line 26 from line 12:				
2	Excess of revenue over expenses and disbursements	1,083.			
30	b Net investment income (if negative, enter -0-)		0.		
	C Adjusted net income (if negative enter -0-)			N/A	

623501 11-23-16 LHA For Paperwork Reduction Act Notice, see instructions.

77 N Form 990-PF (2016)

1

Fo	rm 99	O-PF (2016) C/O MUTUALWEALTH MGMT	GROUP	35-	6067146 Page 2		
Part II Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only		II Balance Sheets Attached schedules and amounts in the description	Beginning of year	End o			
느		column snould be for end-or-year amounts only	(a) Book Value	(b) Book Value	(c) Fair Market Value		
	1	Cash - non-interest-bearing		<5.	>		
	2	Savings and temporary cash investments	1,276.	2,364.			
	3	Accounts receivable >					
	1	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					
	7	Other notes and loans receivable					
		Less: allowance for doubtful accounts ▶					
ā	8	Inventories for sale or use					
Assets	9	Prepaid expenses and deferred charges					
Ä	10a	Investments - U.S. and state government obligations					
	ь	Investments - corporate stock		, , , , , , ,			
	C	Investments - corporate bonds					
	11	Investments - land, buildings, and equipment, basis		· · · · · · · · · · · · · · · · · · ·			
		Less accumulated depreciation					
	12	Investments - mortgage loans					
	13	Investments - other	· · · · · · · · · · · · · · · · · · ·				
	1	Land, buildings, and equipment basis					
	``	Less accumulated depreciation					
	15	Other assets (describe	\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \				
	ı	Total assets (to be completed by all filers - see the	-/				
	'"	instructions. Also, see page 1, item I)	1,276.	2,359.	2,359.		
_	17	Accounts payable and accrued expenses	1,270.	2,333.	2,333.		
	18	Grants payable					
	19	Deferred revenue					
Liabilities	20						
Ē	21	Loans from officers, directors, trustees, and other disqualified persons Mortgages and other notes payable		·			
Ë		• •	, 		•		
	~~	Other liabilities (describe	·				
	23	Total liabilities (add lines 17 through 22)	0.	0.	i		
_	<u> </u>	Foundations that follow SFAS 117, check here					
		and complete lines 24 through 26 and lines 30 and 31.					
ès	24	Unrestricted					
auc		Temporarily restricted					
Bal	26	Permanently restricted	· · · · · · · · · · · · · · · · · · ·	·			
Net Assets or Fund Balances	-"	Foundations that do not follow SFAS 117, check here					
Ē		and complete lines 27 through 31.	,				
ò	27	Capital stock, trust principal, or current funds	10,265.	10,265.			
ëets	28	Paid-in or capital surplus, or land, bldg., and equipment fund	0.	0.			
Ass	29	Retained earnings, accumulated income, endowment, or other funds	<8,989.				
ě	30	Total net assets or fund balances	1,276.	2,359.			
z	"	Total not about of folia balanous	1,270.	2,337.	,		
	31	Total liabilities and net assets/fund balances	1,276.	2,359.			
一				2,333.			
뜨	art	III Analysis of Changes in Net Assets of Fund	Dalances				
1	Total	net assets or fund balances at beginning of year - Part II, column (a), li	ne 30				
	(mus	st agree with end-of-year figure reported on prior year's return)		1	1,276.		
2	Ente	amount from Part I, line 27a		2	1,083.		
3	Othe	r increases not included in line 2 (itemize)		3	0.		
4	Add	lines 1, 2, and 3		4	2,359.		
		eases not included in line 2 (itemize)		5	0.		
6	Total	net assets or fund balances at end of year (line 4 minus line 5) - Part II	, column (b), line 30	6	2,359.		
	_				Form 990-PF (2016)		

Page 3

(a) List and describ 2-story brick ware	be the kind(s) of property sold (e. ehouse; or common stock, 200 sl	g., real estate, ns. MLC Co.)		(6)	How acquired - Purchase - Donation		Date acquired mo., day, yr.)	(d) Date sold (mo., day, yr.)
1a	·							
b NON	E							
C								
d								
e								
(e) Gross sales price	(f) Depreciation allowed (or allowable)		st or other basis expense of sale			((h) Gain or (loss e) plus (f) minus	
a								
b								
C								
d	····							
e							·	
Complete only for assets showing			T				ins (Col. (h) gain	
(i) F.M.V. as of 12/31/69	(j) Adjusted basis as of 12/31/69		cess of col. (i) col. (j), if any				, but not less that osses (from col.	
8								
b								
C		ļ						
d	****							
ê								
Capital gain net income or (net capi	tal loss) { If gain, also enter-			}	2			
Net short-term capital gain or (loss	C	•		_				
If gain, also enter in Part I, line 8, co If (loss), enter -0- in Part I, line 8		ina (<i>0)</i> .						
	der Section 4940(e) fo	r Reduced	Tax on Net	Inv	estment	ncor	ne	
or optional use by domestic private f	oundations subject to the section	4940(a) tay on	net investment in	rome))			
section 4940(d)(2) applies, leave this as the foundation liable for the section "Yes," the foundation does not qualify Enter the appropriate amount in ea	in 4942 tax on the distributable a under section 4940(e). Do not c	omplete this pa	ırt.					Yes X
		ilistructions be	tore making any e			т	. <u>-</u>	747
(a) Base period years Calendar year (or tax year beginning			Net value of no	(c) onchai	ritable-use ass		(d) Distribution ratio (col. (b) divided by col. (c))	
2015		26,251.			2,8			9.15306
2014		18,241.			3,2			5.67548
2013		19,484.			2,5			7.60202
2012		15,399.			4,6	22.		
2011		16,463.			10,3	<u> </u>	 	1.5938
Total of line 1, column (d)							2	27.33249
Average distribution ratio for the 5- the foundation has been in existence		on line 2 by 5,	or by the number	of ye	ars	ļ	3	5.46649
Enter the net value of noncharitable	-use assets for 2016 from Part X	. line 5				Ī	4	1,794
	access to Loto Homi at A	, <i>u</i>				Ì		<u> </u>
Multiply line 4 by line 3						}	5	9,80
Enter 1% of net investment income	(1% of Part I, line 27b)					ļ	6	(
Add lines 5 and 6							7	9,807
Enter qualifying distributions from l	Part XII, line 4						8	16,563
If line 8 is equal to or greater than li See the Part VI instructions.	ne 7, check the box in Part VI, lin	e 1b, and comp	olete that part usin	ng a 1	% tax rate.			
23521 11-23-16								Form 990-PF (2

PORTER ART FOUNDATION TRUST

Form 990-PF (2016) C/O MUTUALWEALTH MGMT GROUP Part VI Excise Tax Based on Investment Income (Section 494)	0(0) 4040(b) 4040(0) 074		067146		Page 4
1a Exempt operating foundations described in section 4940(d)(2), check here and e		1940 -	see instru	Cuor	15)
					•
Date of ruling or determination letter: (attach copy of letter if new b Domestic foundations that meet the section 4940(e) requirements in Part V, check here					0.
of Part I, line 27b	and enter 1%				••
·	(of Port I line 12 and (b)				
 c All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% 2 Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. 0 		- <u>,</u>			0.
3 Add lines 1 and 2	uleis enter -0-)	3			-0.
4 Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. C	Others enter -0-1	4			0.
5 Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-	oniers enter -0-)	5			0.
6 Credits/Payments:					
a 2016 estimated tax payments and 2015 overpayment credited to 2016	6a	1 1			
b Exempt foreign organizations - tax withheld at source	6b	1			
c Tax paid with application for extension of time to file (Form 8868)	6c	1			,
d Backup withholding erroneously withheld	6d	1 1			. ;
7 Total credits and payments. Add lines 6a through 6d	_ 00	7			0.
8 Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is atta	sched	8			
9 Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed	L. Cried	9			0.
10 Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid		10			
11 Enter the amount of line 10 to be: Credited to 2017 estimated tax	Refunded	11			
Part VII-A Statements Regarding Activities	Helanded	1			
1a During the tax year, did the foundation attempt to influence any national, state, or local legis	slation or did it participate or intervene	ın		Yes	No
any political campaign?	salion of the Reparticipate of intervent	, ,,,,	1a		X
b Did it spend more than \$100 during the year (either directly or indirectly) for political purpo	ses (see instructions for the definition	1/2	1b	\vdash	X
If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities a		-	<u> </u>		
distributed by the foundation in connection with the activities	and copies of any materials publis	1100 01			
c Did the foundation file Form 1120-POL for this year?			10		X
d Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the	e vear				<u> </u>
(1) On the foundation. > \$ 0. (2) On foundation managers	-				1
e Enter the reimbursement (if any) paid by the foundation during the year for political expend		-			
managers. > \$ 0.	mare an imposed on identition				
2 Has the foundation engaged in any activities that have not previously been reported to the l	RS?		2		X
If "Yes," attach a detailed description of the activities					
3 Has the foundation made any changes, not previously reported to the IRS, in its governing	instrument, articles of incorporation.	or			
bylaws, or other similar instruments? If "Yes," attach a conformed copy of the chang	• • •		3		X
4a Did the foundation have unrelated business gross income of \$1,000 or more during the year			48		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's	?	•	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 e	either:				
By language in the governing instrument, or					
 By state legislation that effectively amends the governing instrument so that no mandator 	ry directions that conflict with the stat	e 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," coi	mplete Part II, col (c), and Part X	/	7		X
	•				
8a Enter the states to which the foundation reports or with which it is registered (see instruction ${ t IN}$	ons) ►				1
b If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the A	Attorney General (or decignate)				
of each state as required by General Instruction G? If "No," attach explanation	attorney delicial (of designate)	N/	/A 8b		
9 Is the foundation claiming status as a private operating foundation within the meaning of se	ection 4942(i)(3) or 4942(i)(5) for oal		00	 	
year 2016 or the taxable year beginning in 2016 (see instructions for Part XIV)? If "Yes," or		onual	9		X
10 Did any persons become substantial contributors during the tax year? # "Yes," attach a sched		TMT	3 10	Х	
To any persons second second constitutions during the day year: if 165, attach a school	are named their marines and addresses	<u>,</u>	Form 99		(2016)

623531 11-23-16

Page 5

Part VII-A Statements Regarding Activities (continued)			
		es N	<u> </u>
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 application? N/A	13		_
Website address ▶ N/A			_
14 The books are in care of ► MUTUALWEALTH MGMT GROUP Telephone no. ► 877 – 28	39-02	299	_
Located at ▶ 10765 LANTERN RD #202, FISHERS, IN ZIP+4 ▶46			_
15 Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - Check here			Τ
and enter the amount of tax-exempt interest received or accrued during the year	N/	'A	
16 At any time during calendar year 2016, did the foundation have an interest in or a signature or other authority over a bank,		res N	<u>-</u>
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	ł	Ì	
Part VII-B Statements Regarding Activities for Which Form 4720 May Be Required	بيار		_
File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.	7	Yes N	<u>-</u>
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?	1 1		
(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from)	1	ł	
a disqualified person?		Ī	
(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?			
(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?			
(5) Transfer any income or assets to a disqualified person (or make any of either available	1	- 1	
for the benefit or use of a disqualified person)?			
(6) Agree to pay money or property to a government official? (Exception. Check "No"	1 1	1	
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 Regulations			
section 53.4941(d)-3 or in a current notice regarding disaster assistance (see instructions)? N/A	_{1b}	1	
Organizations relying on a current notice regarding disaster assistance check here	"		—
c Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected	1 1		
before the first day of the tax year beginning in 2016?	1c	l x	,
2 Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation	 '' 		<u>-</u>
defined in section 4942(j)(3) or 4942(j)(5));	1		
a 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? Line sha of tax year 2010, did the foundation have any undistributed medine (lines od and de, Fart Alli) for tax year(s) deglining Yes X No			
If "Yes," list the years ▶ , , ,			
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		
c If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here.	1		_
	1 (
3a Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time	1	Ì	
during the year?			
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	1	ì	
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	3ъ		
4a Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a	1	_
b Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that	74	- 	<u>-</u>
had not been removed from jeopardy before the first day of the tax year beginning in 2016?	4b	1 2	7
		- PF (20	
rı	лш ээ О	,- r - r- (20	10)

Part VII-B	Statements Regarding Activities for Which F	Form 4720 May Be F	Required (continu	ued)			
5a During the	year did the foundation pay or incur any amount to:						
(1) Carry	on propaganda, or otherwise attempt to influence legislation (section	1 4945(e))?	Y6	es X No		İ	
(2) Influer	nce the outcome of any specific public election (see section 4955); o	r to carry on, directly or indire	ectly,	ŀ			
any vo	ter registration drive?	• • •	Ye	es 🗶 No			
(3) Provid	e a grant to an individual for travel, study, or other similar purposes'	?		es 🗶 No			
	e a grant to an organization other than a charitable, etc., organization					1	
4945(d)(4)(A)? (see instructions)		☐ Y€	s X No			
•	e for any purpose other than religious, charitable, scientific, literary,	or educational purposes, or f					
	evention of cruelty to children or animals?	, , ,		es 🗶 No		,	
b If any answ	ver is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify und	ler the exceptions described i	n Regulations	1			
	4945 or in a current notice regarding disaster assistance (see instru		ŭ	N/A	5b		
Organizatio	ins relying on a current notice regarding disaster assistance check h	ere		▶□ !			
	er is "Yes" to question 5a(4), does the foundation claim exemption fr		ned				
	e responsibility for the grant?		. ,	es 🔲 No			
=	ttach the statement required by Regulations section 53 4945]	
	ndation, during the year, receive any funds, directly or indirectly, to						
	benefit contract?		□ Ye	es 🗶 No			
•	ndation, during the year, pay premiums, directly or indirectly, on a p	ersonal benefit contract?			6b		X
	6b, file Form 8870			T T			
7a At any time	during the tax year, was the foundation a party to a prohibited tax s	helter transaction?		es 🗶 No		Ì	
	the foundation receive any proceeds or have any net income attribu			N/A	7b		
Part VIII	Information About Officers, Directors, Trust		nagers, Highly				
	Paid Employees, and Contractors	•					
1 List all offi	cers, directors, trustees, foundation managers and their	compensation.					
	A Norman and add to a	(b) Title, and average hours per week devoted	(c) Compensation	(d) Contributions to		(e) Expo	ense
	(a) Name and address	to position	(If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	ا	allowar	ices
		TRUSTEE					
10765 L	ANTERN RD #202						
FISHERS	, IN 46038-3597	0.50	0.	0	•		0.
					1		
					-		
-							
					1		
<u></u>							
					1		
2 Compensa	tion of five highest-paid employees (other than those inc	,	enter "NONE."				
(a) Nai	me and address of each employee paid more than \$50,000	(b) Title, and average hours per week	(c) Compensation	(d) Contributions to employee benefit plans and deferred	, a	(e) Exp ccount,	ense other
		devoted to position	(C) compensation	and deferred compensation		allowa	nces
N	ONE						
	·						
				<u> </u>			
Total number of	f other employees paid over \$50,000			<u> </u>			0
				For	n 99 0	0-PF	(2016)

PORTER ART FOUNDATION TRUST

Paid Employees, and Contractors (continued) 3 Five highest-paid independent contractors for professional services. If none, enter	AT HAIONE II	
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE	(b) Type of Service	(c) compensation
11 12 12 12 12 12 12 12 12 12 12 12 12 1		
	_	
		
Total number of others receiving over \$50,000 for professional services	<u> </u>	▶ 0
Part IX-A Summary of Direct Charitable Activities		
List the foundation's four largest direct charitable activities during the tax year. Include relevant statis	stical information such as the	5
number of organizations and other beneficiaries served, conferences convened, research papers pro	duced, etc.	Expenses
N/A		
		· · · · · · · · · · · · · · · · · · ·
3		
Part IX-B Summary of Program-Related Investments		
Describe the two largest program-related investments	lines 1 and 2	Amount
ı N/A		randant
All other control of the control of		
All other program-related investments. See instructions.		

Total. Add lines 1 through 3	>	0.

623561 11-23-16

P	art X Minimum Investment Return (All domestic foundations must complete this part. Foreign four	ndations, s	ee instructions.)
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes:	TT	
a	Average monthly fair market value of securities	 1a	1,821.
	Average of monthly cash balances	1b	
C	Fair market value of all other assets	1c	
d	Total (add lines 1a, b, and c)	1d	1,821.
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	2	0.
3	Subtract line 2 from line 1d	3	1,821.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions)	4	27.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	1,794.
6	Minimum Investment return. Enter 5% of line 5	6	90.
P	art XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations an	d certain	
	foreign organizations check here 🕨 🔛 and do not complete this part.)		
1	Minimum investment return from Part X, line 6	1	90.
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.)	* 1	
C	Add lines 2a and 2b	2c	0.
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	90.
4	Recoveries of amounts treated as qualifying distributions	4	0.
5	Add lines 3 and 4	5	90.
6	Deduction from distributable amount (see instructions)	6	0.
7	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1	7	90.
P	art XII Qualifying Distributions (see instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:		16 560
a	Expenses, contributions, gifts, etc total from Part I, column (d), line 26	1a	16,563.
	Program-related investments - total from Part IX-B	1b	<u> </u>
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:	حسيد	
	Suitability test (prior IRS approval required)	3a	
	Cash distribution test (attach the required schedule)	3b	16 563
4	Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4	4	16,563.
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment		•
	income. Enter 1% of Part I, line 27b	5	0.
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	16,563.
	Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation (qualifies for	the section
	4940(e) reduction of tax in those years.		
			Form 990-PF (2016)

Part XIII Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2015	(c) 2015	(d) 2016
1 Distributable amount for 2016 from Part XI.	Oorpus	Tears prior to 2013	2013	2010
line 7				90.
2 Undistributed income, if any, as of the end of 2016				
a Enter amount for 2015 only			0.	
b Total for prior years:				
,,		0.		
3 Excess distributions carryover, if any, to 2016:				
a From 2011 15,947.				
bFrom 2012 15,166.				
c From 2013 19,356.				
dFrom 2014 18,080.				
eFrom 2015 26,108.				
f Total of lines 3a through e	94,657.			
4 Qualifying distributions for 2016 from				
Part XII, line 4: ►\$ 16,563.		-		
a Applied to 2015, but not more than line 2a			0.	
b Applied to undistributed income of prior		0.		•
years (Election required - see instructions)				
c Treated as distributions out of corpus	0.			
(Election required - see instructions)	<u> </u>			90.
d Applied to 2016 distributable amount	16,473.			30.
e Remaining amount distributed out of corpus	0.	 		0.
5 Excess distributions carryover applied to 2016 (If an amount appears in column (d), the same amount must be shown in column (a))	0.			
6 Enter the net total of each column as indicated below:				
& Corpus Add lines 3f, 4c, and 4e Subtract line 5	111,130.			
b Prior years' undistributed income. Subtract				
line 4b from line 2b		0.		
e Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed		0.		
d Subtract line 6c from line 6b. Taxable				
amount - see instructions		0.		1
e Undistributed income for 2015. Subtract line				
4a from line 2a. Taxable amount - see instr.	1		0.	
f Undistributed income for 2016. Subtract				
lines 4d and 5 from line 1. This amount must				
be distributed in 2017				0.
7 Amounts treated as distributions out of			**	
corpus to satisfy requirements imposed by				
section 170(b)(1)(F) or 4942(g)(3) (Election				
may be required - see instructions)	0.		<u>-</u>	
8 Excess distributions carryover from 2011				
not applied on line 5 or line 7	15,947.		· . · ·	······································
9 Excess distributions carryover to 2017.				
Subtract lines 7 and 8 from line 6a	95,183.			
10 Analysis of line 9:				
a Excess from 2012 15,166.				
b Excess from 2013 19,356.				
c Excess from 2014 18,080.				
d Excess from 2015 26,108.				
e Excess from 2016 16,473.			L	Form 990-PF (2016)

PORTER ART FOUNDATION TRUST

Form 990-PF (2016) C/O MUTUALWEALTH MGMT GROUP 35-6067146 Page 10 Part XIV | Private Operating Foundations (see instructions and Part VII-A, question 9) N/A 1 a If the foundation has received a ruling or determination letter that it is a private operating foundation, and the ruling is effective for 2016, enter the date of the ruling 4942(j)(5) 4942(j)(3) or b Check box to indicate whether the foundation is a private operating foundation described in section Prior 3 years 2 a Enter the lesser of the adjusted net Tax year (a) 2016 (b) 2015 (c) 2014 (d) 2013 (e) Total income from Part I or the minimum investment return from Part X for each year listed **b** 85% of line 2a c 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 e Qualifying distributions made directly for active conduct of exempt activities. Subtract line 2d from line 2c Complete 3a, b, or c for the alternative test relied upon: a "Assets" alternative test - enter: (1) Value of all assets (2) Value of assets qualifying under 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 c "Support" alternative test - enter: (1) Total support other than gross 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 section 4942(j)(3)(B)(iii) (3) Largest amount of support from an exempt organization (4) Gross investment income Part XV | Supplementary Information (Complete this part only if the foundation had \$5,000 or more in assets at any time during the year-see instructions.) Information Regarding Foundation Managers: a List any managers of the foundation who have contributed more than 2% of the total contributions received by the foundation before the close of any tax year (but only if they have contributed more than \$5,000). (See section 507(d)(2).) b List any managers of the foundation who own 10% or more of the stock of a corporation (or an equally large portion of the ownership of a partnership or other entity) of which the foundation has a 10% or greater interest. Information Regarding Contribution, Grant, Gift, Loan, Scholarship, etc., Programs: Check here Light if the foundation only makes contributions to preselected charitable organizations and does not accept unsolicited requests for funds. If the foundation makes gifts, grants, etc. (see instructions) to individuals or organizations under other conditions, complete items 2a, b, c, and d. a The name, address, and telephone number or e-mail address of the person to whom applications should be addressed: MARIANNE SAVAGE, 765-301-4532 1860 E MONONA DRIVE, PERU, IN 46970 b The form in which applications should be submitted and information and materials they should include: WRITTEN LETTER c Any submission deadlines: NONE d Any restrictions or limitations on awards, such as by geographical areas, charitable fields, kinds of institutions, or other factors: LMTD TO HIGH SCHOOL GRADS OF MIAMI CO., IN FOR HIGHER EDUC & TR IN PERFORMING ARTS. Form **990-PF** (2016) 623601 11-23-16

Part XV Supplementary Information (continued) Grants and Contributions Paid During the Year or Approved for Future Payment If recipient is an individual, show any relationship to any foundation manager Purpose of grant or contribution Foundation Amount status of Name and address (home or business) or substantial contributor recipient a Paid during the year AMANDA WEAVER NONE I EDUCATIONAL 479 MADISON AVENUE PERU, IN 46970 1,875. JACOB FEAZEL NONE I EDUCATIONAL 5231 S US ROUTE 31 PERU, IN 46970 1,875. ASHTA HARLER NONE EDUCATIONAL I 452 N CHATHAM ST JAMESVILLE, WI 53548 1,875. AVERY JACKSON NONE I EDUCATIONAL 1114 N COUNTRY CLUB RD PERU, IN 46970 2,500. MELANIE WOODRUFF EDUCATIONAL NONE I 373 W 6TH ST PERU, IN 46970 938. SEE CONTINUATION SHEET(S) 16,563. → 3a **b** Approved for future payment NONE **▶** 3b Total

Part XVI-A	Anabraia	of Income	Dundunian	A -41141
Part XVI-A I	Analysis	of income-	-Producina	Activities

Enter gross amounts unless otherwise indicated.	Unrelate	d business income	Exclu	ded by section 512, 513, or 514	(e)
	(a) Business	(b)	(C) Exclu-	(d)	Related or exempt
1 Program service revenue:	Business	Amount	sion	Amount	function income
			-		
b	-			*	
<u> </u>	-		-		
			-		
e					
I					
g Fees and contracts from government agencies					
2 Membership dues and assessments					
3 Interest on savings and temporary cash	İ				
investments					
4 Dividends and interest from securities					
5 Net rental income or (loss) from real estate:		÷ t			
a Debt-financed property					
b Not debt-financed property					
6 Net rental income or (loss) from personal	1				
property					_
7 Other investment income					
8 Gain or (loss) from sales of assets other					
than inventory					
9 Net income or (loss) from special events					
10 Gross profit or (loss) from sales of inventory					
11 Other revenue:					··
a	ļ		1		
b					
C					
d			╁		
e			 	 	
12 Subtotal. Add columns (b), (d), and (e)		0.	<u> </u>	0.	0.
13 Total. Add line 12, columns (b), (d), and (e)			٠	13	0.
(See worksheet in line 13 instructions to verify calculations.)				· · ·	···
	- th- A			A D	
Part XVI-B Relationship of Activities t	o the Acc	omplishment of Ex	kemp	ot Purposes	
Line No. Explain below how each activity for which inco	me is reported	ın column (e) of Part XVI-A	contri	buted importantly to the accor	nplishment of
the foundation's exempt purposes (other than					
3 THE ACTIVITY PROMOTES (CHARITA	BLE GIVING.			
					
		-14		····	· - · · · · · · · · · · · · · · · · · ·
					
	· · · · · · · · · · · · · · · · · · ·				
-					
623621 11-23-16	· · · · · · · · · · · · · · · · · · ·				Form 990-PF (2016)

Га	LLYAII	Exempt Organ		o and Transactions a	nd Relationships With Noncha	ritable		
1	Did the o			owing with any other organization	n described in section 501(c) of		/es	No
•				n 527, relating to political organi		- 1 -		\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\
9		· .	fation to a noncharitable exemp		Zations r	4	东	,
٠	(1) Cash		ation to a noncharitable exemp	t organization of,		1a(1)	alta	X
	(1) Oash					1a(2)		X
b	Other tran					18(2)	-	^
U	-	-	able everent ergenization			15/1		X
		s of assets to a noncharita	· •	_		15(1)	-	X
			oncharitable exempt organizatio	(III		1b(2)	_	X
	• •	al of facilities, equipment,				1b(3)		X
		bursement arrangements	•			1b(4)		$\frac{x}{x}$
		is or loan guarantees		1-1		1b(5)		X
			embership or fundraising solicit			1b(6)		X
	_		ailing lists, other assets, or paid		anno alcono de a formamento de un tra a de alcono de alc	10		
u					vays show the fair market value of the goods,		ıs,	
			other assets, or services receiv		e in any transaction or sharing arrangement, s	SHOW III		
(a):	ne no	(b) Amount involved		table exempt organization	(d) Description of transfers, transactions, and	eharing arra	naama	
(-)-		(b) Amount myored	N/Z		(u) Description of Pansiers, Pansactions, and	Sharing aira	ngerne	
			+ 17/2	n				
			 					
								
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			<u> </u>		<u> </u>			
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28		•	•	one or more tax-exempt organiz	zations described	- 7.,	T.	a
			er than section 501(c)(3)) or in	section 527?	L	Yes	ڶۿ	☐ No
<u> </u>	If "Yes," o	complete the following sch		1.007	(a) December of relations			
		(a) Name of or	ganization	(b) Type of organization	(c) Description of relations	snip		
_		N/A						
٥:	000	or penaities of perjury, I declare pelief, it is true, corr ect_and co) that I have examined this return, inc amplete Declaration of areparer (othe	cluding accompanying schedules and or than taxpayer) is based on all inform		ay the IRS di		
	gn 👢	A CMULUA	atbank, Trustee	1 7 2/ -		own below (
me	ere 📗	Dy Sull	the D Wanu	17-26-17	P VP + 70	∡ Yes	L.	J No∣
	Sig	nature di officer or truste	·	Date	Title			
		Print/Type preparer's n	ame Preparer	r's signature	Date Check if PTIN			
_			N /	11211.	JUL 0 5 2097 employed			
	aid	ROBERT E I		m Clam cpa	T T PO	0062		
	eparer	1 0	S. CASSEN AND	COMPANY PC	Firm's EIN ► 20-4	2223	τ./	
U	se Only							
			702 BROAD RIPP		(04.7)	000	.	
_		l II	NDIANAPOLIS, I	N 46220-2362	Phone no. (317)			
					· ·	Form 990)-PF	(2016)

3 Grants and Contributions Paid During the	Year (Continuation)			
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	or substantial contributor	recipient		
CHRIS CHEEVER	NONE	I	EDUCATIONAL	
LOO WEST 5TH ST				
PERU, IN 46970				2,50
PAYTON MILLER	NONE	ı	EDUCATIONAL	
162 E 900 S	NONE	1	EDUCATIONAL	
BUNKER HILL, IN 46914				2,50
CAYLEE ANDERSON	NONE	I	EDUCATIONAL	
157 W MAIN ST				
PERU, IN 46970				2,50
			 	
Total from continuation sheets				7,50

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

Department of the Treasury Internal Revenue Service

Schedule of Contributors

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

OMB No 1545-0047

2016

Name of the organization
PORTER ART FOUNDATION TRUST
C/O MUTUALWEALTH MGMT GROUP

Employer identification number

35-6067146

Organization type (check one) Filers of: Section: Form 990 or 990-EZ 501(c)() (enter number) organization 4947(a)(1) nonexempt charitable trust not treated as a private foundation 527 political organization Form 990-PF X 501(c)(3) exempt private foundation 4947(a)(1) nonexempt charitable trust treated as a private foundation 501(c)(3) taxable private foundation Check if your organization is covered by the General Rule or a Special Rule. Note: Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions. **General Rule** For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributors **Special Rules** For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of (1) \$5,000 or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h, or (II) Form 990-EZ, line 1 Complete Parts I and II For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I, II, and III. 🔟 For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions exclusively for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., purpose Don't complete any of the parts unless the General Rule applies to this organization because it received nonexclusively religious, chantable, etc., contributions totaling \$5,000 or more during the year ▶ \$ Caution: An organization that isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990, 990-EZ, or 990-PF), but it must answer "No" on Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on its Form 990-PF, Part I, line 2, to certify that it doesn't meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF)

LHA For Paperwork Reduction Act Notice, see the instructions for Form 990, 990-EZ, or 990-PF. Schedule B (Form 990, 990-EZ, or 990-PF) (2018)

Name of organization PORTER ART FOUNDATION TRUST C/O MUTUALWEALTH MGMT GROUP Employer identification number

35-6067146

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	JOANNE C KUBESCH 1325 S FRANCES SLOCUM TR PERU, IN 46970	\$20,721.	Person X Payroll Noncash (Complete Part II for noncash contributions.)	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution	
		\$	Person Payroll Noncash (Complete Part II for noncash contributions)	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution	
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution	
			Person Payroll Oncash Complete Part II for noncash contributions)	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution	
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution	
	18-16	\$\$	Person Payroll Noncash (Complete Part II for noncash contributions)	

Name of organization PORTER ART FOUNDATION TRUST C/O MUTUALWEALTH MGMT GROUP

Employer identification number

35-6067146

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		
		\$			
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received		
		\$			
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received		
		\$			
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received		
		\$			
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received		
		\$			
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received		
623453 10-18	R-16	\$Schedule B (Form	990, 990-EZ, or 990-PF) (2016		

FORM 990-PF	ACCOUNTING FEES		STATEMENT 1		
DESCRIPTION		(B) NET INVEST- MENT INCOME			
ACCOUNTING	425.	0.		0	· ·
TO FORM 990-PF, PG 1, LN 16B	425.	0.		0). —
FORM 990-PF C	THER PROFES	SIONAL FEES	S	PATEMENT	2
DESCRIPTION		(B) NET INVEST- MENT INCOME	ADJUSTED		
MARIANNE SAVAGE - SCHOLARSHIP PROGRAM ADMIN. MUTUALWEALTH TTEE FEE	2,400. 250.				0.
TO FORM 990-PF, PG 1, LN 16C	2,650.	0.			0.
F	PART VII-A,		S S	TATEMENT	3
NAME OF CONTRIBUTOR	ADDRESS				
JOANNE C KUBESCH		1325 S FRANCES SLOCUM TRAIL PERU, IN 46970			