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### Form 990-PF

Return of Private Foundation

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

Do not enter social security numbers on this form as it may be made public. ▶ Information about Form 990-PF and its separate instructions is at www.lrs.gov/form990pf. OMB No 1545-0052

Department of the Treasury Internal Revenue Service For calendar year 2016 or tax year beginning and ending A Employer identification number Name of foundation POTTHOFF FAMILY FOUNDATION 37-6474122 Number and street (or P O box number if mail is not delivered to street address) Room/suite B Telephone number 424 S WOODSMILL ROAD #325 325 314-336-0560 City or town, state or province, country, and ZIP or foreign postal code C If exemption application is pending, check here CHESTERFIELD, MO 63017 G Check all that apply: Initial return Initial return of a former public charity D 1. Foreign organizations, check here Final return Amended return Foreign organizations meeting the 85% test, check here and attach computation Address change Name change H Check type of organization: Section 501(c)(3) exempt private foundation E If private foundation status was terminated Section 4947(a)(1) nonexempt charitable trust Other taxable private foundation under section 507(b)(1)(A), check here I Fair market value of all assets at end of year J Accounting method: Accrual F If the foundation is in a 60-month termination Other (specify) (from Part II, col (c), line 16) under section 507(b)(1)(B), check here 108,139. (Part I, column (d) must be on cash basis) ▶\$ Part I | Analysis of Revenue and Expenses (d) Disbursements (b) Net investment (a) Revenue and (c) Adjusted net (The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a)) for charitable purposes (cash basis only) expenses per books income ıncome Contributions, gifts, grants, etc., received 206,180 N/A if the foundation is not required to attach Sch. B Interest on savings and temporary cash investments 5 STATEMENT 33,287 33,287 STATEMENT Dividends and interest from securities 5a Gross rents b Net rental income or (loss) 43,969 STATEMENT 6a Net gain or (loss) from sale of assets not on line 10 615,857. 110,307 7 Capital gain net income (from Part IV, line 2) Net short-term capital gain Income modifications 10a Gross sales less returns and allowances b Less Cost of goods sold c Gross profit or (loss) Ņ S 11 Other income 4 MAY 18 283,441 143,599 ZU112 Total. Add lines 1 through 11 蛇 0. 13 Compensation of officers, directors, trustees, etc. OGNE: 14 Other employee salaries and wages 15 Pension plans, employee benefits 16a Legal fees **b** Accounting fees 6,592 6,592. c Other professional fees STMT 4 0. 17 Interest 18 Taxes 19 Depreciation and depletion 20 Occupancy 21 Travel, conferences, and meetings Printing and publications 707 0 0. STMT 5 Other expenses Total operating and administrative 7,299 6,592 0. expenses. Add lines 13 through 23 140,500. 140,500 Contributions, gifts, grants paid Total expenses and disbursements. 147,799 140,500. 6,592 Add lines 24 and 25 27 Subtract line 26 from line 12: 135,642 2 Excess of revenue over expenses and disbursements 137,007 b Net investment income (if negative, enter -0-) N/A c Adjusted net income (if negative, enter -0-)

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

Form **990-PF** (2018

JMH-PO31

For	rm 99	90-PF (2016) POTTHOFF FAMILY FOUNDAT			6474122 Page 2
P	art	Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only	Beginning of year	End of	<del></del>
Ė	1 .	<del></del>	(a) Book Value	(b) Book Value	(c) Fair Market Value
	1	Cash - non-interest-bearing		- 100 100	
	2	Savings and temporary cash investments	27,827.	108,139.	108,139.
	3	Accounts receivable ►			
		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			
छ	8	Inventories for sale or use		,	
Assets	9	Prepaid expenses and deferred charges			
ĕ	10a	Investments - U.S. and state government obligations			<del>.</del>
		Investments - corporate stock			·
		Investments - corporate bonds			
	1	Investments - land, buildings, and equipment basis			
	` `	Less accumulated depreciation			
	12	Investments - mortgage loans			
	13	Investments - other STMT 6	913,616.	968,946.	0.
	14	Land, buildings, and equipment; basis	313,010.	300/3100	
	'	Less accumulated depreciation			
	15	Other assets (describe )			
	1 -	Total assets (to be completed by all filers - see the			
	'0	Instructions. Also, see page 1, item I)	941,443.	1,077,085.	108,139.
-	17	Accounts payable and accrued expenses	741,443.	1,011,003.	100,133.
	18	Grants payable			
"	19	Deferred revenue			
Liabilities	20	<del>-</del>			
薑		Loans from officers, directors, trustees, and other disqualified persons  Mortgages and other notes payable			
Ξ.	21	Other liabilities (describe )			
	22	Other liabilities (describe			
	23	Total liabilities (add lines 17 through 22)	0.	0.	
_		Foundations that follow SFAS 117, check here		<u> </u>	
	ĺ	and complete lines 24 through 26 and lines 30 and 31.			
ės	24	Unrestricted			
au	25	Temporarily restricted			
Bai	26	Permanently restricted			
alances		Foundations that do not follow SFAS 117, check here			
亞		and complete lines 27 through 31			
ŏ	27	Capital stock, trust principal, or current funds	0.	0.	
sets	28	Paid-in or capital surplus, or land, bldg., and equipment fund	0.	0.	
As	29	Retained earnings, accumulated income, endowment, or other funds	941,443.	1,077,085.	
<b>Vet</b>	30	Total net assets or fund balances	941,443.	1,077,085.	
_					
	31	Total liabilities and net assets/fund balances	941,443.	1,077,085.	
P	art	III Analysis of Changes in Net Assets or Fund Ba	lances		
1	Tota	I net assets or fund balances at beginning of year - Part II, column (a), line 3	0		
•		st agree with end-of-year figure reported on prior year's return)		1	941,443.
2	•	r amount from Part I, line 27a		2	135,642.
		r increases not included in line 2 (itemize)		3	0.
_		lines 1, 2, and 3		4	1,077,085.
		eases not included in line 2 (itemize)		5	0.
6	Tota	I net assets or fund balances at end of year (line 4 minus line 5) - Part II, col	umn (b), line 30	6	1,077,085.
					Form <b>990-PF</b> (2016)

(a) List and des 2-story brick v	cribe the k	osses for Tax on In ind(s) of property sold (e.g. or common stock, 200 shs	, real estate,	t mcome	( <b>b)</b> Ho P - D -	ow acquired Purchase Donation		acquired day, yr.)	(d) Date sold (mo., day, yr.)
1a	0.00	(NISMISSION)							
b SEE ATTACHEI	STA	T.EWENT.							
d									<del></del>
е					<del>                                     </del>				
(e) Gross sales price	(f)	Depreciation allowed (or allowable)		st or other basis expense of sale				Gain or (loss is (f) minus i	
<u>a</u>	<del> </del>		<del></del>						
<u>b</u>	<del> </del>								
d									
e 615,857	1			505,55	in			-	110,307.
Complete only for assets show		column (h) and owned by t	he foundation		-		(I) Gains (	Col. (h) gaın	
	<del></del>	(j) Adjusted basis		cess of col. (i)		C	ol. (k), but	not less that	n -0-) <b>or</b>
(i) F.M.V. as of 12/31/69		as of 12/31/69		col. (j), if any			Losses	(from col. (	h))
a									
b									
C									
d	<u> </u>								
e	<u> </u>								<u>110,307.</u>
2 Capital gain net income or (net c	apıtal loss	) { If gain, also enter   If (loss), enter -0-	ın Part I, line ın Part I, line	7 7	}	2			110,307.
3 Net short-term capital gain or (lo	ss) as def	ined in sections 1222(5) and	d (6):						
If gain, also enter in Part I, line 8		c).						37 / 3	
Part V Qualification U		Section 4940(e) for	Poducod	Tay on Not	Invo	3   stmont in		N/A	
Was the foundation liable for the se f "Yes," the foundation does not qua 1 Enter the appropriate amount in	alify under	section 4940(e). Do not cor	mplete this pa	rt.		<del></del>			Yes X No
(a) Base period years		(b)			(c)		$\Box$		(d) oution ratio
Base period years Calendar year (or tax year beginn	ing in)	Adjusted qualifying dist	ributions	Net value of no		able-use asset	s	(col. (b) div	oution ratio rided by col. (c))
2015		128	8,500.		1,	221,10	3.		.105232
2014			5,450.			947,83			.153454
2013			5,000.			878,09	1.		.142354
2012			8,862.			856,32			.150482
2011		104	4,000.			<u>186,26</u>	3.		.558335
2 Total of line 1, column (d)							2		1.109857
3 Average distribution ratio for the the foundation has been in exist			n line 2 by 5,	or by the number	of year	S	3		.221971
4 Enter the net value of noncharita	ble-use as	sets for 2016 from Part X, I	ne 5				4_		1,349,204.
Multiply line 4 by line 3							5		299,484.
6 Enter 1% of net investment inco	me (1% of	Part I, line 27b)					_ 6		1,370.
7 Add lines 5 and 6							7		300,854.
B Enter qualifying distributions from If line 8 is equal to or greater that See the Part VI instructions.			1b, and comp	lete that part usin	g a 1%	tax rate.	8		140,500.
Goo the Fait VI histroctions.									

18 Exempt operating foundations described on section 4940(x)(2), check here ▶ □ and enter YM/ on lan 5.  Discribed for fulling of determination letter:  (attach copy of letter in decessary-see instructions)  Discribed foundations that meet the section 4940(e) requirements in Part V, check here ▶ □ and enter 1%  of Part I, line 27, on 1, in 27, and of line 27b. Exempt foreign organizations enter 4% of Part I, line 12, col. (b).  2 Tax under section 511 (domestic section 4947(e)(1) trusts and taxable foundations only. Others enter -0-)  3 3 2, 740.  3 3 2, 740.  4 0.  4 3 Add lines 1 and line in investment income. Subtract line 4 from line 3. If zero or less, enter -0-  5 2, 740.  5 Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-  5 2, 740.  Codictive Payments:  2 2 16 estimated tax payments and 2015 overpayment credited to 2016  Exempt foreign organizations - tax withheld at source  1 ax past with an application for extractions of time to life (from 8688)  8 disclay withhelding errorecusty withheld  7 Total credits and payments. Add lines 6 through 68  3 Tax based on payments. Add lines 6 through 68  3 Tax based on payments. Add lines 6 through 68  3 Tax based on payments. Add lines 6 through 68  3 Tax based on payments. The lines of an 6 sin more then line 7, enter amount oved  4 Total credits and payments. Add lines 6 through 68  3 Tax based on payments. Add lines 6 through 68  10 Total credits and payment of estimated tax. Check here □ if Form 2220 is attached  7 Total credits and payments. Add lines 6 through 68  10 Total credits and payments of estimated tax. Check here □ if Form 2220 is attached  11 Ereter this amount of line 10 to be; Credited to 2017 estimated tax ▶  12 Total credits and payments. Add lines 6 through 69  13 Tax based on the form 1100-120 to be; Credited to 2017 estimated tax ▶  14 Tax based on the form 1100-120 to be; Credited to 2017 estimated tax ▶  15 Ded 1 spand more than \$100 dump the year (either directly or indirectly) or indirectly propose	orm 99 Part	0-PF (2016) POTTHOFF FAMILY FOUNDATION  VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e)			6474: - see in			Page 4
o Domestar foundations that meet the section 4940(e) requirements in Part V, check here	1a Ex		)					<u></u>
of Part I, line 27b c All other domastic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of Part I, line 12, cot. (b). 2 Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-) 3 Add lines 1 and 2 3 C, 740.  3 Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-) 5 Tax based on investment income. Subtract line 4 from line 3. I zero or less, enter -0- 5 Tax based on investment income. Subtract line 4 from line 3. I zero or less, enter -0- 5 Exempt foreign organizations -1 awithheld at source 8 B 20 16 estimated dax payments and 2015 overpayment credited to 2016 8 Exempt foreign organizations -1 awithheld at source 1 Tax and with application for extension of time to file (Form 8868) 9 Backup withholding erroneously withheld 1 Total credits and payments. Add lines 6a through 6d 8 Either any penalty for underpayment of estimated tax. Check here   If Form 2200 s attached 8 Either any penalty for underpayment of estimated tax. Check here   If Form 2200 s attached 9 Tax due. If the total of lines 5 and 6 is more than line 7, enter amount owed 9 1,740. 1 Overpayment I filine 7 is more than the total or lines 5 and 8, enter the amount overpaid 1 Overpayment I filine 7 is more than 610 during the year (either device) for political purposes (see instructions for the definition)? 1 If Part VII.A Statements Regarding Activities 1 Juring the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any political campaign?  5 Did it spend more than 510 during the year (either directly) for political purposes (see instructions) for the definition)?  1 If the answers > 1/2 is not 15, attach a detailed description of the activities. 2 Did the foundation file Form 1120-PDL for this year? 3 Either the amount (if any) paid by the foundation during the year (if) on the foundation may activities that have not previously been reported to	Da	te of ruling or determination letter: (attach copy of letter if necessary-see instructions)						
e. All other domestic foundations enter 2% of time 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-)  3 Add lines 1 and 2  4 Subtile A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)  5 Tax based on investment isome. Subtract line 4 from line 3. If zero or liss, enter -0-  5 Credista? Payments:  2 2,740.  6 Credista? Payments:  3 2,740.  6 Credista? Payments:  4 2 2016 estimated tax payments and 2015 overpayment oredited to 2016  6 East 1,000.  7 1,000.  8 Enter any penalty for underpayment of estimated tax. Check here 1 of Form 2220 is attached 2 of Form	<b>b</b> Do	mestic foundations that meet the section 4940(e) requirements in Part V, check here 🕨 🔲 and enter 1%	<b>}</b> [	1			2,7	<u>40.</u>
2 Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-) 3 3 2,740. 4 Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-) 5 Tax based on investment lincome. Subtract line 4 from line 3. If zero or less, enter -0- 5 Tax based on investment lincome. Subtract line 4 from line 3. If zero or less, enter -0- 5 Tax based on investment lincome. Subtract line 4 from line 3. If zero or less, enter -0- 5 Tax based on investment lincome. Subtract line 4 from line 3. If zero or less, enter -0- 5 Tax based on investment lincome. Subtract line 4 from line 3. If zero or less, enter -0- 5 Exampt foreign organizations - tax withheld at source 6 Tax paid with application for extension of time to file (Form 8568) 6 Backup withholding erroneusly withheld 7 Total credits and payments. Add lines 6e through 6d 8 Enter any penalty for underpayment of estimated tax. Check here if it form 2220 is attached 8 Tax dee. If the total of lines 5 and 8 is more than line 7, enter amount owed 9 1,740. 10 Overpayment If line 7 is more than the total of lines 5 and 8, enter the amount overpaid 10 Overpayment If line 7 is more than the total of lines 5 and 8, enter the amount overpaid 11 During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any political campaign? 10 If 4 spend more than \$100 during the year (either directly) or political purposes (see instructions for the definition)? 11 If the answer is 7'Vas' to 7 ard 15, attach a defaafed description of the activities of the definition? 12 If the state amount (if any) of tax on political expenditures (section 4955) imposed during the year. 13 If Yes, attach a defaafed description of the activities 14 If Yes, attach a defaafed description of the activities 15 If Yes, attach a defaafed description of the activities 16 If Yes, attach the statement required by General Instruction T 16 Are the requirements of	of	Part I, line 27b						
3 Add lines 1 and 2 Subtille A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-) 5 Tax based on investment lincome. Subtract line 4 from line 3. If zero or less, enter -0- 6 CreditsPayments. 2 2016 estimated tax payments and 2015 overpayment credited to 2016 b Exempt foreign organizations - tax withheld at source 6 Tax paid with application for extension of line to line (Form 8868) 6 Ed	c All	other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of Part I, line 12, col. (b).	/					
4 Subtlible A (mocrome) bax (domestic section 4947(a)(1) trusts and taxable foundations only, Others enter -0-) 5 Tax based on investment income. Subtract line 4 from line 3, if zero or less, enter -0- 6 Credits/Payments; a 2016 estimated tax payments and 2015 overpayment credited to 2016 6 Exempt foreign organizations - tax withheld at source 6 Tax paid with application for extension of time to file (Form 8868) 6 Exempt foreign organizations - tax withheld at source 6 Tax paid with application for extension of time to file (Form 8868) 6 Edit	<b>2</b> Ta	x under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	ļ	2				<u>0.</u>
5 Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0- CreditsPayments:  a 2016 estimated tax payments and 2015 overpayment credited to 2016 b Exempt foreign organizations - tax withheld all source Tax pad with application for extension of them to the (Form 8868) d Backup withholding erroneously withheld Total credits and payments. Add lines 6a through 6d d Backup withholding erroneously withheld Total credits and payments. Add lines 6a through 6d Eciter any penalty for underpayment of estimated tax. Check here ☐ it Form 2220 is attached Tax dee. If the total of lines 5 and 8 is more than line 7, enter amount owed To Overpayment If line 7 is more than the total of lines 5 and 8, enter the amount overpald Overpayment If line 7 is more than the total of lines 5 and 8, enter the amount overpald Tax dee. If the total of lines 5 and 8 is more than line 7, enter amount owed Tax dee. If the total of lines 5 and 8 is more than line 7, enter amount owed Tax dee. If the total of lines 5 and 8 is more than line 7, enter amount owed Tax dee. If the total of lines 5 and 8 is more than line 7, enter amount owed Tax dee. If the total of lines 5 and 8 is more than line 7, enter amount owed Tax dee. If the total of lines 5 and 8 is more than line 7, enter amount owed Tax dee. If the total of lines 5 and 8, enter the amount overpald The first the amount of line 10 to be; Credited to 2017 estimated tax Tax deep and the foundation Tax deep and the total of lines 5 and 8, enter the amount overpald The first the amount of line 10 to be; Credited to 2017 estimated tax Tax deep and the foundation of the definition of the definit	3 Ad	d lines 1 and 2	ļ	3			<u>2,7</u>	
6. Credits/Payments: a 2016 estimated tax payments and 2015 overpayment credited to 2016 b. Exempt foreign organizations - tax withheld at source c Tax pand with application for extension of time to file (Form 8868) 6. 6. 6. 6. 6. 6. 6. 6. 6. 6. 6. 6. 6. 6				4				0.
a 2016 of estimated tax payments and 2015 overpayment credited to 2016			-	5			<u>2,7</u>	<u>40.</u>
Exempt foreign organizations - tax withheld at source  © Tax paid with application for extension of time to file (Form 8868)  Backup withholding erroneously withheld  7 Total credits and payments. Add lines 6a through 6d  7 Total credits and payments. Add lines 6a through 6d  7 Total credits and payments. Add lines 6a through 6d  8 Enter any penalty for underpayment of estimated tax. Check here								
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d Backup withholding stroneously withheld 7 Total credits and payments. Add lines 6a through 6d 8 Enter any penalty for underpayment of estimated tax. Check here								
7 Total credits and payments. Add limes 6a through 6d 8 Enter any penalty for underpayment of estimated tax. Check here ☐ if Form 2220 is attached 9 Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed 10 Overpayment If line 7 is more than line 7, enter amount owed 11 Tester the amount of line 10 to be: Credited to 10 lines 5 and 8, enter the amount overpaid 11 Tester the amount of line 10 to be: Credited to 10 lines 5 and 8, enter the amount overpaid 12 Tester than amount of line 10 to be: Credited to 10 lines 5 and 8, enter the amount overpaid 13 During the tax year, and the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any political campaign? 14 Tester than 15 100 during the year (either directly or indirectly) for political purposes (see instructions for the definition)? 15 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. 16 Did in the foundation. In a connection with the activities. 17 If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities. 18 Did in the foundation. In a connection with the activities. 19 Did any political expenditure tax imposed on foundation managers. In a connection with the activities. 20 Did any political expenditure tax imposed on foundation managers. In a connection with the activities. 21 Did any political expenditure tax imposed on foundation managers. In a connection with the activities. 22 X 23 X 24 X 25 X 26 X 27 X 27 X 28 As the foundation made any changes, not previously been reported to the IRS? 28 As the foundation made any changes, not previously been reported to the IRS? 29 If yes, nast filed a tax return on Form 990-T for this year? 30 X 31 X 32 X 33 X 34 X 35 X 36 X 37 X 38 As the foundation have made any changes, not previously feed to the files of the changes of the changes of the changes of the changes of the								
8 Enter the amount of the contraction of estimated tax. Check here ☐ if Form 2220 is attached				_	i .			^ ^
9 Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed  10 Overpayment if line 7 is more than the total of lines 5 and 8, enter the amount overpaid  10 Enter the amount of line 10 to be: Credited to 2017 estimated tax ▶ Refunded ▶ 11  Part 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 participate or intervene in any political campaign?  1a During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any political campaign?  1a During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any political campaign?  1b Dd it spend more than \$100 during the year (either directly or indirectly) for political purposes (see instructions for the definition)?  1b M S			}				Τ'Ω	<u> </u>
10 Overpayment If line 7 is more than the total of lines 5 and 8, enter the amount overpaid  11 Enter the amount of line 10 to be: Credited to 2017 satimated tax ▶  12 During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any political campaign?  13 During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any political campaign?  14 Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see instructions for the definition)?  15 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.  16 Did the foundation file Farm 1120-P0L for this year?  18 Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year:  19 O. (2) On foundation managers. ▶ \$ O. •  10 Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers. ▶ \$ O. •  19 Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers. ▶ \$ O. •  20 Has the foundation mapaged in any activities that have not previously been reported to the IRS?  21 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  22 Has the foundation made any changes, not previously preported to the IRS, in its governing instrument, articles of incorporation, or bylaws, or other similar instruments? If "Yes," attach the statement required spots forms 990-T for this year?  23 Was there a liquidation, termination, dissolution, or substantial contraction during the year?  24 Weyes, "attach the statement requir			_		l I	_	1 7	4.0
11 Enter the amount of line 10 to be: Credited to 2017 estimated tax ▶ Refunded ▶ 11  Part VII-A   Statements Regarding Activities  1 During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any political campaign?  1 Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see instructions for the definition)?  1 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.  2 Did the foundation life Form 1120-P0L for this year?  3 C Enter the amount (if any) to tax on political expenditures (section 4955) imposed during the year:  4 (1) On the foundation. ▶ \$ O . (2) On foundation managers. ▶ \$ O .  5 Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers. ▶ \$ O .  6 Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers. ▶ \$ O .  7 Has the foundation engaged in any activities that have not previously been reported to the IRS?  8 Has the foundation managers. ▶ \$ O .  9 Has the foundation managers of the expenditure tax imposed on foundation managers. ▶ \$ O .  1 Has the foundation managers of the expenditure tax imposed on foundation or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes  1 Has the foundation have unrelated business gross income of \$1,000 or more during the year?  1 Has the foundation have unrelated business gross income of \$1,000 or more during the year?  1 Has the fact the statement required by General Instruction T  2 Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either:  9 By language in the governing instrument, or  8 Be there the states to which the foundation reports or with which it is registered (see in		·					1,/	40.
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	•		Cr.	ብእ <i>ተ</i> ጥ	, <b>,</b> ,		v	
	IU DIG	i any persons become substaintal continuators during the tax year of "Yes," attach a schedule listing their names and addresse	s 5	1111				(2010)

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X

N/A

N/A

Yes X No

2b

3b

4a

statement - see instructions.)

during the year?

c If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here.

4a Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?

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.

b Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that

3a Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time

Form 4720, to determine if the foundation had excess business holdings in 2016.)

had not been removed from jeopardy before the first day of the tax year beginning in 2016?

Form 990-PF (2016) POTTHOFF FAMILY FOUNDATE  Part VII-B Statements Regarding Activities for Which		Required (contin	37-64741	22	Page 6
5a During the year did the foundation pay or incur any amount to:		rioquii ou (contin	lucu)		T
(1) Carry on propaganda, or otherwise attempt to influence legislation (section	on 4945(e))?	Y	es X No		
(2) Influence the outcome of any specific public election (see section 4955);	, ,,				
any voter registration drive?		Y	es X No		
(3) Provide a grant to an individual for travel, study, or other similar purposes	s?	Y	es X No	İ	
(4) Provide a grant to an organization other than a charitable, etc., organization	on described in section				
4945(d)(4)(A)? (see instructions)		Y	es X No		
(5) Provide for any purpose other than religious, charitable, scientific, literary	, or educational purposes, or	for			
the prevention of cruelty to children or animals?		Y	es X No		
b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify ur	der the exceptions described	ın Regulations			
section 53.4945 or in a current notice regarding disaster assistance (see instr	uctions)?		N/A	5b	
Organizations relying on a current notice regarding disaster assistance check	here				
c If the answer is "Yes" to question 5a(4), does the foundation claim exemption	from the tax because it mainta	ined			
expenditure responsibility for the grant?	N	I/A 🔲 Y	es 🔲 No		
If "Yes," attach the statement required by Regulations section 53 494	5-5(d).			İ	
<b>6a</b> Did the foundation, during the year, receive any funds, directly or indirectly, to	pay premiums on				
a personal benefit contract?		Y	es X No		1
<b>b</b> Did the foundation, during the year, pay premiums, directly or indirectly, on a	personal benefit contract?		_	6b	X
If "Yes" to 6b, file Form 8870.					
7a At any time during the tax year, was the foundation a party to a prohibited tax		Y <sub>0</sub>	es X No		
b If "Yes," did the foundation receive any proceeds or have any net income attrib				7b	
Part VIII Information About Officers, Directors, Trust Paid Employees, and Contractors	ees, Foundation Ma	nagers, Highly	У		
List all officers, directors, trustees, foundation managers and their	compensation.				
		(c) Compensation	(d) Contributions to	(e) Ex	 pense
(a) Name and address	(b) Title, and average hours per week devoted to position	(If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	(e) Exp account allowa	t, other
GERALD A POTTHOFF	TRUSTEE	Citter 0 j	Compensation	unome	111003
424 S WOODSMILL RD				İ	
CHESTERFIELD, MO 63017	0.50	0.	0.		0.
JUDITH POTTHOFF	TRUSTEE				
424 S WOODSMILL RD					
CHESTERFIELD, MO 63017	0.50	0.	0.		0.
SUSAN P BRODERICK	TRUSTEE				
424 S WOODSMILL RD				]	
CHESTERFIELD, MO 63017	0.00	0.	0.		0.
JOSEPH F POTTHOFF	TRUSTEE				
424 S WOODSMILL RD					
CHESTERFIELD, MO 63017	0.00	0.	0.		0.
2 Compensation of five highest-paid employees (other than those inc	Y	enter "NONE."	(d) Contributions to		
(a) Name 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	(e) Exp	t, other
NONE	devoted to position		compensation	allowa	inces
NONE	-				
	1				
		<u> </u>		L	
Total number of other employees paid over \$50,000	<del></del>		<u> </u>	000 55	0
			Form	990-PF	(2016)

Form 990-PF (2016) POTTHOFF FAMILY FOUNDATION	37-	6474122 Page 7
Part VIII Information About Officers, Directors, Trustees, Foundation Paid Employees, and Contractors (continued)	on Managers, Highly	
3 Five highest-paid independent contractors for professional services. If none, enter "I	NONE."	
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE	·	
Part IX-A Summary of Direct Charitable Activities		<u>▶</u>   0
List the foundation's four largest direct charitable activities during the tax year. Include relevant statistica number of organizations and other beneficiaries served, conferences convened, research papers produce	I information such as the ed, etc.	Expenses
1 N/A		
2		
3		
4		
Part IX-B Summary of Program-Related Investments		
Describe the two largest program-related investments made by the foundation during the tax year on line  1 N/A	s 1 and 2.	Amount
2		
All other program-related investments. See instructions.		
3		
Total. Add lines 1 through 3	<b></b>	0 . Form <b>990-PF</b> (2016)
		(2010)

P	art X Minimum Investment Return (All domestic foundations must complete this part. Foreign foundations	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	1,369,750.
b	Average of monthly cash balances	1b	
C	Fair market value of all other assets	1c	
ď	Total (add lines 1a, b, and c)	1d	1,369,750
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	<u> </u>
3	Subtract line 2 from line 1d	3	1,369,750
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions)	4	20,546
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	1,349,204
6_	Minimum investment return. Enter 5% of line 5	6	67,460.
<u>P</u>	<b>art XI</b> Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations and foreign organizations check here  and do not complete this part.)	d certain	
1	Minimum investment return from Part X, line 6	1	67,460.
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	2,740.
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	64,720.
4	Recoveries of amounts treated as qualifying distributions	4	0.
5	Add lines 3 and 4	5	64,720.
6	Deduction from distributable amount (see instructions)	6	0.
<u>7</u>	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1	7	64,720.
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	140,500.
b	Program-related investments - total from Part IX-B	1b	0.
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes	2	
3	Amounts set aside for specific charitable projects that satisfy the:		1 1 2 1 2
a	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	140,500.
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	140,500.
	Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation q 4940(e) reduction of tax in those years.	ualifies foi	the section

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,		Post		<u> </u>
line 7		<del></del>		64,720.
2 Undistributed income, if any, as of the end of 2016				
a Enter amount for 2015 only b Total for prior years:			0.	,,
g rotation prior years.		0.		
3 Excess distributions carryover, if any, to 2016:				<u> </u>
a From 2011 97, 264.				
b From 2012 86,587.				
c From 2013 81,677.				
d From 2014 98,379.				
e From 2015 67,933.				
f Total of lines 3a through e	431,840.			
4 Qualifying distributions for 2016 from	20270200			
Part XII, line 4: ►\$ 140,500.				
a Applied to 2015, but not more than line 2a			0.	
<b>b</b> Applied to undistributed income of prior				
years (Election required - see instructions)		0.		
c Treated as distributions out of corpus				
(Election required - see instructions)	0.			
d Applied to 2016 distributable amount				64,720.
e Remaining amount distributed out of corpus	75,780.			
5 Excess distributions carryover applied to 2016	0.		-	0.
(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:				
a Corpus Add lines 3f, 4c, and 4e Subtract line 5	507,620.			
<b>b</b> Prior years' undistributed income. Subtract				
line 4b from line 2b		0.		
c Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed		0.		
d Subtract line 6c from line 6b. Taxable		•		
amount - see instructions		0.		
e Undistributed income for 2015. Subtract line				
4a from line 2a. Taxable amount - see instr.			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.			· · · · · · · · · · · · · · · · · · ·
8 Excess distributions carryover from 2011				
not applied on line 5 or line 7	97,264.			
9 Excess distributions carryover to 2017.	440 075			
Subtract lines 7 and 8 from line 6a	410,356.			
Analysis of line 9:				
a Excess from 2012 86,587.				
b Excess from 2013 81,677.				
c Excess from 2014 98,379.				
d Excess from 2015 e Excess from 2016 75,780				
e Excess from 2016 75,780.				F 000 DE (0040)

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Form **990-PF** (2016)

Form 990-PF (2016) POTTHOF	F FAMILY FO	UNDATION	<del> </del>		<u>474122                                  </u>
Part XIV Private Operating F			I-A, question 9)	N/A	
1 a If the foundation has received a ruling of					
foundation, and the ruling is effective fo	•	•	▶∟	<del>-</del>	
<b>b</b> Check box to indicate whether the found		ng foundation described		4942(j)(3) or4	1942(j)(5)
2 a Enter the lesser of the adjusted net	Tax year	(b) 201E	Prior 3 years	(4) 0040	(0) 70401
income from Part I or the minimum	(a) 2016	<b>(b)</b> 2015	(c) 2014	(d) 2013	(e) Total
investment return from Part X for					
each year listed					
<b>b</b> 85% of line 2a					ļ-
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					
3 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 Info			if the foundation	n had \$5,000 or m	ore in assets
at any time during t	he year-see instr	uctions.)			
1 Information Regarding Foundation	n Managers:				
a List any managers of the foundation wh			ributions received by th	e foundation before the clo	ose of any tax
year (but only if they have contributed n	nore than \$5,000). (See s	ection 507(d)(2).)			
SEE STATEMENT 8					
<b>b</b> List any managers of the foundation wh			or an equally large port	tion of the ownership of a j	partnership or
other entity) of which the foundation has	s a 10% or greater interes	st.			
NONE			· •		
2 Information Regarding Contributi	on, Grant, Gift, Loan,	Scholarship, etc., Pr	ograms:		
Check here 🕨 🗶 If the foundation o	nly makes contributions t	o preselected charitable	organizations and does	not accept unsolicited req	uests for funds. If
the foundation makes gifts, grants, etc.	(see instructions) to indiv	iduals or organizations u	nder other conditions, o	complete items 2a, b, c, an	d d
a The name, address, and telephone num	ber or e-mail address of t	he person to whom appli	cations should be addre	essed:	
<b>b</b> The form in which applications should b	e submitted and informat	ion and materials they st	nould include:		
c Any submission deadlines:				***	
			.=		
d Any restrictions or limitations on awards	s, such as by geographica	ıl areas, charıtable fields,	kınds of institutions, or	other factors:	
			<del></del>		
623601 11-23-16					Form <b>990-PF</b> (2016)

Part XV Supplementary Information (continued) Grants and Contributions Paid During the Year or Approved for Future Payment If recipient is an individual, Recipient Purpose of grant or contribution Foundation show any relationship to Amount any foundation manager status of Name and address (home or business) or substantial contributor recipient a Paid during the year GLEN ECHO HISTORIC PRESERVATION NONE PUBLIC CHARITY 3401 LUCAS&HUNT ST LOUIS, MO 63121 4,000. PLAY IT FORWARD MUSICAL FOUNDATION NONE PUBLIC CHARITY GENERAL PURPOSES 710 VILLA PLACE ST LOUIS MO 63132-3214 2,000, GRACE HILL NONE PUBLIC CHARITY GENERAL PURPOSES 2600 HADLEY STREET ST LOUIS, MO 63106 2,000. AIM COMMUNITY BAND NONE PUBLIC CHARITY 1514 SOMMET PL KIRKWOOD, MO 63122-0652 2,000. JENSEN SCHMIDT TENNIS DOWN SYNDROME NONE PUBLIC CHARITY GENERAL PURPOSES 2822 WINTERGREEN DRIVE FLORISSANT MO 63033 3 000. SEE CONTINUATION SHEET(S) ▶ 3a Total\_ 140 500 b Approved for future payment NONE Total

Form **990-PF** (2016)

Part XVI-A	Analysis of Income-Producing	Activities
------------	------------------------------	------------

Enter gross amounts unless otherwise indicated.	Unrelated t	usiness income	Excluded b	y section 512, 513, or 514	(e)
-	(a) Business	(b)	(C) Exclu- sion	(d)	Related or exempt
1 Program service revenue:	code	Amount	code	Amount	function income
a	-				
b	-				
C	-				
d	I I		<del></del>	·	<del></del>
f	-			-	
g Fees and contracts from government agencies	-				
2 Membership dues and assessments					
3 Interest on savings and temporary cash					
investments			14	5.	
4 Dividends and interest from securities			14	33,287.	
5 Net rental income or (loss) from real estate:					
a Debt-financed property					
b Not debt-financed property					
6 Net rental income or (loss) from personal property					
7 Other investment income					
8 Gain or (loss) from sales of assets other than inventory			14	43,969.	
9 Net income or (loss) from special events					
O Gross profit or (loss) from sales of inventory					
1 Other revenue:					
a	-				
b	-				
C	1 1				
d	_				
e 12 Subtotal. Add columns (b), (d), and (e)		· · · · · · · · · · · · · · · · · · ·		77,261.	0
3 Total. Add line 12, columns (b), (d), and (e)	<u> </u>		J •		77,261
See worksheet in line 13 instructions to verify calculations.)				13	11,401
	to the Asses	mliahmant st	Everent D		<del></del>
Part XVI-B Relationship of Activities	to the Accom	pusninent of	Exempt P	n boses	

Line No.	Explain below how each activity for which income is reported in column (e) of Part XVI-A contributed importantly to the accomplishment of the foundation's exempt purposes (other than by providing funds for such purposes).						
·							
-							

Form **990-PF** (2016)

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Form 990-PF (2		OFF FAMI				37-647			ige 13
Part XVII	Information Re Exempt Organ		nsfers To a	and Transactions	and Relations	hips With Noncha	ritable	е	
1 Did the or	ganization directly or indi	rectly engage in an	y of the following	ng with any other organiza	tion described in sect	tion 501(c) of		Yes	No
the Code	(other than section 501(c	)(3) organizations)	or in section 52	27, relating to political orga	anızatıons?				
a Transfers	from the reporting found	ation to a noncharit	table exempt or	ganization of:					
(1) Cash							1a(1)		X
<b>(2)</b> Other	r assets						1a(2)		X
<b>b</b> Other tran	sactions:								
(1) Sales	s of assets to a noncharita	ble exempt organız	ation				1b(1)		X
(2) Purcl	hases of assets from a no	ncharitable exempt	organization				1b(2)	<u> </u>	X
(3) Renta	al of facilities, equipment,	or other assets					1b(3)	L	X
(4) Reim	bursement arrangements						1b(4)	-	X
(5) Loan	s or loan guarantees						1b(5)		X
(6) Perfo	ormance of services or me	embership or fundra	aising solicitatio	ons			1b(6)		X
_	f facilities, equipment, ma	• .					1c	<u> </u>	X
				• •		market value of the goods, o		sets,	
	• • •				ilue in any transactior	n or sharing arrangement, s	how in		
<del></del>	1) the value of the goods,			<del></del>	<del></del>				
(a) Line no	(b) Amount involved	(c) Name		e exempt organization	(d) Description	n of transfers, transactions, and	sharing ar	rangeme	nts
	·- ·- ··		N/A						
	,								
								-	
	<del> </del>							-	
			•						
				·					
	<del></del>								
				<del> </del>	<del>                                     </del>				
	<del>-</del> -	<del></del>							
	- · · · · · · · · · · · · · · · · · · ·				-				
			-			·- · · <del>- · · · · · · · · · · · · · · · </del>			
ın section	ndation directly or indirect 501(c) of the Code (other complete the following sch	r than section 501(		or more tax-exempt orga tion 527?	nizations described		Yes	X	] No
<u> </u>	(a) Name of org			(b) Type of organization		(c) Description of relations	 1ір		
	N/A								
						•			
						·			·
Sign Here	elef, it is true, correct, and cor			ng accompanying schedules an in taxpayer) is based on all info		r has any knowledge retusho	the IRS irn with the win below	e prepare (see inst	er
Sign	nature of officer or trustee Print/Type preparer's na	· V	Preparer's s	ionature	Date	Check X If PTIN			
	Printrype preparer's na	ame	A l ho	ignature		self- employed			
Paid	JOHN M. HI	LLHOUSE	JOW'V	1) Wellew	4/24/17		0389		
Preparer Use Only	Firm's name ► JOH	N M HILL	HØUSE C	PA LLC		Firm's EIN ► 20-0			
<b>_</b>	Firm's address > 12	4 S WOOD	SMTT.T. R	D SUITE 325		•			-
		ESTERFIE				Phone no. 314-3	36-0	560	

Phone no. 314-336-0560 Form **990-PF** (2016)

### 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.lrs.gov/form990 .

OMB No 1545-0047

Name of the organization

**Employer identification number** 

	POTTHOFF FAMILY FOUNDATION	_   <u>37-6474122</u>
Organization type (chec		
Filers of:	Section:	
Form 990 or 990-EZ	501(c)( ) (enter number) organization	
	4947(a)(1) nonexempt charitable trust <b>not</b> 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	
	on is covered by the General Rule or a Special Rule.	al Dula. See metrustione
Note: Only a section 50	1(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Specia	ii nuie See instructions
General Rule		
	ation filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions total any one contributor. Complete Parts I and II See instructions for determining a contribu	• • • • • • • • • • • • • • • • • • • •
Special Rules		
sections 509(a) any one contrib	ation described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% supply(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 2 putor, during the year, total contributions of the greater of (1) \$5,000 or (2) 2% of the an P-EZ, line 1. Complete Parts I and II.	16a, or 16b, and that received from
year, total cont	ation described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received fr inbutions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or e of cruelty to children or animals Complete Parts I, II, and III.	· · · · · · · · · · · · · · · · · · ·
year, contributi is checked, ent purpose Don't	ation described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from sexclusively for religious, charitable, etc., purposes, but no such contributions totale ter here the total contributions that were received during the year for an exclusively religited complete any of the parts unless the <b>General Rule</b> applies to this organization becaus table, etc., contributions totaling \$5,000 or more during the year	ed more than \$1,000. If this box nous, charitable, etc ,
but it must answer "No"	n that isn't covered by the General Rule and/or the Special Rules doesn't file Schedule on Part IV, line 2, of its Form 990, or check the box on line H of its Form 990-EZ or on reset 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) (2016)

Name of organization

Employer identification number

### POTTHOFF FAMILY FOUNDATION

37-6474122

Part I	Contributors (See instructions). Use duplicate copies of Part I if additional	al space is needed	
(a) <u>No.</u>	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	GERALD POTTHOFF  643 EAST MONTROE ST  KIRKWOOD, MO 63122	\$ <u>176,180.</u>	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
2	GERALD POTTHOFF  643 EAST MONTROE ST  KIRKWOOD, MO 63122	\$30,000.	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
3		\$	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
4		\$	Person X Payroll
(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.)

Name of organization

Employer identification number

### POTTHOFF FAMILY FOUNDATION

37-6474122

art II	Noncash Property (See instructions). Use duplicate copies of R	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
	570 SHARES GENERAL ELETRIC		
1		\$\ \$\$	01/05/16
(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
		<b>\$</b>	
(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
			90, 990-EZ, or 990-PF)

Name of orga	anization		Employer identification number
POTTHO Part III	PF FAMILY FOUNDATION  Exclusively religious, charitable, etc , cont the year from any one contributor. Complete completing Part III, enter the total of exclusively religiou.  Use duplicate copies of Part III if addition	columns (a) through (e) and the follows, charitable, etc., contributions of \$1,000 of	37-6474122  d in section 501(c)(7), (8), or (10) that total more than \$1,000 for owing line entry. For organizations or less for the year (Enter this info once)  \$\\$\\$\$
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
	Transferee's name, address, a	(e) Transfer of gi	ft Relationship of transferor to transferee
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
		(e) Transfer of gi	ft
-	Transferee's name, address, a	nd ZIP + 4	Relationship of transferor to transferee
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
		(e) Transfer of git	ft
_	Transferee's name, address, a	nd ZIP + 4	Relationship of transferor to transferee
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
		(a) Transfer (c)	
-	Transferee's name, address, a	(e) Transfer of git	Relationship of transferor to transferee

FORM 99	0-PF	GAIN OR (LOSS)	FROM SALE	OF F	ASSETS		STA	TEMEN'	r 1
DESCRIP	(A) TION OF PROPERT	Y'			MANNER CQUIRED		TE IRED	DATE	SOLD
124 SHS	RIDGEWORTH US	GOVT		PUF	RCHASED				
	(B) GROSS	(C) COST OR	(D) EXPENSE	OF	(E)			(F)	
	SALES PRICE	OTHER BASIS	SALE		DEPRE	c.	GAIN	OR LO	oss ———
	1,246.	1,248.		0.		0.			<2.3
DESCRIP	(A) TION OF PROPERT	Y			MANNER CQUIRED	DA ACQU	TE IRED	DATE	SOLD
1860 SH	S VANGUARD ST E	BOND		PUF	RCHASED			<del></del>	<del></del>
	(B) GROSS SALES PRICE	(C) COST OR OTHER BASIS	(D) EXPENSE SALE	OF	(E) DEPRE	c.		(F)	oss
	150,580.	150,038.		0.		0.			542.
DESCRIP	(A) TION OF PROPERT	Ϋ́Υ			ANNER QUIRED	DA ACQU	TE IRED	DATE	SOLD
530 SHS	AFLAC	<del></del>		PUF	RCHASED				
	(B) GROSS SALES PRICE	(C) COST OR OTHER BASIS	(D) EXPENSE SALE	OF	(E) DEPRE	c.		(F)	oss
	37,889.	25,316.		0.		0.		12	,573.

DESCRIP	(A) TION OF	PROPERTY	_		_		NNER UIRED		TE	DA'	TE SOLD
411 SHS	AT&T				P	URC	HASED				
	GR	B) OSS	(C) COST OR	(D) EXPENSE	OF	,	(E)			(F)	
_	SALES	PRICE	OTHER BASIS	SALE			DEPRE	<u> </u>	GAIN	OR	LOSS
		16,041.	12,532.		0			0.			3,509.
DESCRIP	(A) FION OF	PROPERTY					NNER UIRED		TE IRED	DAT	E SOLD
235 SHS	CHEVRO	Ŋ	_		P	URC	HASED				
	GRO	B) DSS	(C) COST OR	(D) EXPENSE	OF	1	(E)	<b>~</b>	an Th	(F)	T 0.00
-	SALES	PRICE	OTHER BASIS	SALE			DEPRE	···	GAIN	OR	LOSS
		26,221.	25,015.		0	•		0.	<u> </u>		1,206.
DESCRIP	(A) rion of	PROPERTY					NNER UIRED	DA ACQU	TE IRED	DAT	E SOLD
350 SHS	СОМОСО	PHILLIPS	_		P	URC	HASED			04	/11/16
	-	3) OSS	(C) COST OR	(D) EXPENSE	OF	1	(E)			(F)	
_		PRICE	OTHER BASIS	SALE			DEPRE	c	GAIN	OR	LOSS
		16,808.	19,140.		0	•		0.		<	2,332.>
DESCRIP	(A) FION OF	PROPERTY					NNER UIRED	DA ACQU	TE IRED	DAT	'E SOLD
650 SHS	GENERAI	L ELECTRI			P	URC	HASED	01/2	0/12	04	/11/16
	GRO	3) OSS PRICE	(C) COST OR OTHER BASIS	(D) EXPENSE SALE	OF	ı	(E)	~	CATN	(F)	TOGG
-							DEPRE		GAIN	UK	LOSS
		20,103.	12,451.		0	•		0.			7,652.

TOTAL TO	O FORM 990-PF, P	ART I, LINE 6A						43,969.
CAPITAL	GAINS DIVIDENDS	FROM PART IV						40.
	146,909.	145,540.	<del></del>	0.		0.		1,369.
-	(B) GROSS SALES PRICE	(C) VALUE AT TIME OF ACQ.	(D) EXPENSE SALE	OF	(E) DEPRE		GAIN	OR LOSS
4750 SH	S GENERAL ELECTR	IC		DC	NATED			04/11/16
DESCRIP	(A) TION OF PROPERTY	<del>_</del>			IANNER QUIRED		TE VIRED	DATE SOLD
	149,176.	149,957.		0.		0.		<781.
	(B) GROSS SALES PRICE	(C) COST OR OTHER BASIS	(D) EXPENSE SALE	OF	(E) DEPRE	c.	GAIN	(F) OR LOSS
14872 R	IDGEWORTH US GOV	<del></del> T		PUF	RCHASED			07/28/16
DESCRIP	(A) TION OF PROPERTY				MANNER CQUIRED		TE VIRED	DATE SOLD
	14,440.	5,687.		0.		0.		8,753.
	(B) GROSS SALES PRICE	(C) COST OR OTHER BASIS	(D) EXPENSE SALE	OF	(E) DEPRE	c.	GAIN	(F)
175 SHS	PHILLIPS 66			PUF	RCHASED	01/2	20/12	11/30/16
DESCRIP	(A) TION OF PROPERTY	<del>,</del> 			MANNER CQUIRED		TE JIRED	DATE SOLD
	36,404.	24,964.		0.		0.		11,440.
	(B) GROSS SALES PRICE	(C) COST OR OTHER BASIS	(D) EXPENSE SALE	OF	(E) DEPRE		GAIN	(F) OR LOSS
1140 SH	S PFIZER	(a)	(5)	PUI	RCHASED		20/12	11/30/16
	TION OF PROPERTY	<u>.</u>		A(	MANNER CQUIRED	ACQU	ATE JIRED	DATE SOLD
	(A)			•	A A ATMED	יח	me	

FORM 990-PF INTERE	ST ON SAVII	NGS AND TEM	PORARY (	CASH IN	VESTMENTS	STATEMENT 2
SOURCE		(A REVEI PER BO	NUE	NET IN	(B) VESTMENT COME	(C) ADJUSTED NET INCOME
AMERITRADE			5.		5.	
TOTAL TO PART I, LI	NE 3		5.		5.	
FORM 990-PF	DIVIDEND	S AND INTER	EST FRO	M SECUR	ITIES	STATEMENT 3
SOURCE	GROSS AMOUNT	CAPITAL GAINS DIVIDENDS	RE'	(A) VENUE BOOKS	(B) NET INVES MENT INCO	(C) T- ADJUSTED ME NET INCOME
AMERITRADE	33,327	. 40	0.	33,287.	33,28	7.
TO PART I, LINE 4	33,327	4	0.	33,287.	33,28	7.
FORM 990-PF	O'	THER PROFES	SIONAL	FEES		STATEMENT 4
DESCRIPTION		(A) EXPENSES PER BOOKS			(C) ADJUSTED NET INCOM	
INVESTMENT MGT FEES		6,592.		6,592.		0.
TO FORM 990-PF, PG	1, LN 16C	6,592.		6,592.		0.
FORM 990-PF		OTHER E	XPENSES			STATEMENT 5
DESCRIPTION		(A) EXPENSES PER BOOKS	(B NET IN MENT I	-	(C) ADJUSTED NET INCOM	
TO BALANCE CASH	-	806.		0.		0.
BOOK TAX DIFFERENCE DIVIDENDS		<99.	>	0.		0.
TO FORM 990-PF, PG	1, LN 23	707.		0.		0.

FORM 990-PF	OTHER INVESTMENTS		STATEMENT	6
DESCRIPTION		VALUATION METHOD	BOOK VAL	UE
SEE ATTACHED		COST	968,9	46.
TOTAL TO FORM 990-PF, PAR	RT II, LINE 13		968,9	46.
FORM 990-PF LIS	T OF SUBSTANTIAL CONTRIBUTE PART VII-A, LINE 10	FORS	STATEMENT	7
NAME OF CONTRIBUTOR GERALD POTTHOFF	ADDRESS 643 E MONROE			
	KIRKWOOD, MO 63	3122		
FORM 990-PF	PART XV - LINE 1A	<del></del>	STATEMENT	8

NAME OF MANAGER

GERALD A POTTHOFF JUDITH POTTHOFF

37-6474122 PAGE 1 OF

Part IV   Capital Gains and Los	ses for Tax on Investment Income	<u> </u>			
(a) List and 2-story br	describe the kind(s) of property so ck warehouse; or common stock, 2	ld, e.g., real estate, 200 shs. MLC Co.	(b) How acquired P - Purchase D - Donation	(c) Date acquired (mo., day, yr.)	(d) Date sold (mo., day, yr.)
<del></del>	ORTH US GOVT		P	-	
	ARD ST BOND		P		· ·
530 SHS AFLAC			P		
411 SHS AT&T			P		
235 SHS CHEVRO	7		P		
350 SHS CONOCO			P		04/11/1
650 SHS GENERAL	LELECTRIC		P	01/20/12	04/11/1
1140 SHS PFIZE	₹		P	01/20/12	11/30/1
175 SHS PHILLI			P	01/20/12	
14872 RIDGEWOR'			P		07/28/1
4750 SHS GENERA			D	<u> </u>	04/11/1
CAPITAL GAINS I	DIVIDENDS				
1					<u> </u>
1				<u> </u>	
<u> </u>		T		<u></u>	L
(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale		) Gain or (loss) blus (f) minus (g)	
1,246.		1,248.			<2
150,580.	<del></del>	150,038.	<del></del> -		542
37,889.		25,316.	<del></del> .		12,573
16,041.		12,532.			3,509
26,221.		25,015.			1,206
16,808.		19,140.			<2,332
20,103.		12,451. 24,964.			7,652 11,440
36,404. 14,440.		5,687.			8,753
149,176.		150,662.			<1,486
146,909.		78,497.			68,412
40.		70,137.			40
, , , , , , , , , , , , , , , , , , ,			-		
Complete only for assets showin	g gain in column (h) and owned by	the foundation on 12/31/69	(i) Los	sses (from col. (h))	) 
(i) F.M.V. as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col. (i) over col. (j), if any	Gains (excess but r	of col. (h) gain ove not less than "-0-")	r col. (K),
					<2
				<del></del>	542
					12,573
					3,509
				<del></del>	1,206
					<2,332
	<del></del>				$\frac{7,652}{11,440}$
		-		<del></del>	8,753
				<del></del>	<1,486
				<del></del> -	68,412
					40
	· <u>·</u>				
Capital gain net income or (net ca	ortal loss) [ If gain, also ente	r in Part I, line 7 0-" in Part I, line 7			110,307
		_	-		
Not chart form conital gain or floc	s) as defined in sections 1222(5) ai	na (6). I l	1		
Net short-term capital gain or (los If gain, also enter in Part I, line 8,		, ,			

### POTTHOFF FAMILY FOUNDATION

Supplementary Information Part XV Grants and Contributions Paid During the Year (Continuation) If recipient is an individual, Recipient Foundation Purpose of grant or show any relationship to contribution Amount status of any foundation manager Name and address (home or business) recipient or substantial contributor SHELDON CONCERT HALL PUBLIC CHARITY GENERAL PURPOSES NONE 3648 WASHGINTON BLVD 3,000. ST LOUIS, MO 63108 ST PATRICKS CENTER NONE PUBLIC CHARITY GENERAL PURPOSES 800 NORTH TUCKER BLVD ST LOUIS MO 63101-1000 <u>5,000.</u> TRINITY LUTHERAN CHURCH NONE PUBLIC CHARITY GENERALPURPOSES 812 SOULARD ST 5,000. ST LOUIS, MO 63104 ALZHEIMERS ASSOCIATION OF ST LOUIS PUBLIC CHARITY GENERAL PURPOSES NONE 9370 OLIVE BLVD 3,000, ST LOUIS MO 63132-3214 PUBLIC CHARITY GENERAL PURPOSES BACKSTOPPERS NONE PO BOX 66927 ST LOUIS, MO 63166 10,000. HOWARD PARK CENTER NONE PUBLIC CHARITY GENERAL PURPOSES 15834 CLAYTON RD 2,000. ELLISVILLE, MO 63011 PUBLIC CHARITY GENERAL PURPOSES USO OF MISSOURI NONE PO BOX 10367 ST LOUIS, MO 63145 3,000. PUBLIC CHARITY GENERAL PURPOSES NONE KIRKWOOD BAND BOOSTERS 801 ESSEX KIRKWOOD, MO 63122 2,000. MISSOURI BOTANICAL GARDENS NONE PUBLIC CHARITY GENERAL PURPOSES PO BOX 299 ST LOUIS MO 63166 2,500, PUBLIC CHARITY GENERAL PURPOSES NONE RANKEN JORDAN HOME 11365 DORSETT RD 8,000. MARYLAND HGTS MO 63043 Total from continuation sheets 127 500.

Part XV Supplementary Informati	ion			1
3 Grants and Contributions Paid During th	e Year (Continuation)			
Recipient	If recipient is an individual, show any relationship to	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	any foundation manager or substantial contributor	recipient	Contribution	
SOUTHEAST MISSOURI UNIVERSITY	NONE	DIIDI TO CUADITO	GENERAL PURPOSES	
ONE UNIVERSITY PLAZA MS 7300	NOME	FOBLIC CHARITI	SENERAL FORFOSES	
CAPE GIRARDEAU, MO 63701				3,000,
UNITED WAY OF GREATER ST LOUIS	NONE	PUBLIC CHARTTY	GENERAL PURPOSES	
PO BOX 500280	NONE			
ST LOUIS, MO 63150-0280				20,000.
ST LOUIS SYMPHONY	NONE	PUBLIC CHARITY		
718 N GRAND	NONE			
ST LOUIS, MO 63108				5,000.
FOREST PARK FOREVER	NONE	PIIBLIC CHARTTY	GENERAL PURPOSE	
5595 GRAND DRIVE IN FOREST PK	HONE	TODDIC CHARTIT	DENERAL FORFOLD	
ST LOUIS, MO 63112				4,000.
LUTHERAN ASSOCIATION FOR SPECIAL	NONE	PUBLIC CHARITY	GENERAL PURPOSES	
EDUCATION 3558 S. JEFFERSON AVE				
ST LOUIS, MO 63118				10,000.
ELEVEN POINT RIVER CONSERVANCY	NONE	DIIBI.TC CHARITY	GENERAL PURPOSES	
RR 1, BOX 1272	NONE	TOBBIC CHARTIT	DENTIFY TORT OFF	
ALTON, MO 65606	_			3,000.
COCA	NONE	PUBLIC CHARTTY	GENERAL PURPOSES	
524 TRINITY AVE	HONE			
ST LOUIS, MO 63130				2,000.
KIRK CARE	NONE	PIIBLIC CHARITY	GENERAL PURPOSES	
PO BOX 220652	NONE	FORDIC CHARTIT	SENSIONE FOR OBER	
KIRKWOOD, MO 63122-0652				2,000.
MADCO	NONE	PUBLIC CHARTTY	GENERAL PURPOSES	
ONE UNIVERSITY BLVD 243 AAB	NONE	TODDIC CHARTIT	TONI GOLD	
ST LOUIS, MO 63121		W		3,000,
NEW MUSIC CIRCLE	NONE	PUBLIC CHARTTY	GENERAL PURPOSES	
560 TRINITY AVE	NOME:	TODDIC CHARTIT		
UNIVERSITY CITY, MO 63130				2,000.
Total from continuation sheets				

Paid During the Y or business)  PUNCTE AND 4  CA H FLOOR  E 101	lf recipient is an individual, show any relationship to any foundation manager or substantial contributor  NONE  NONE	PUBLIC CHARITY PUBLIC CHARITY	Purpose of grant or contribution  GENERAL PURPOSE  GENERAL PURPOSE	Amount 2,000
PUNCTE AND  4  CA H FLOOR	show any relationship to any foundation manager or substantial contributor  NONE  NONE	status of recipient  PUBLIC CHARITY  PUBLIC CHARITY  PUBLIC CHARITY	GENERAL PURPOSE  GENERAL PURPOSE	2,000
PUNCTE AND  4  CA H FLOOR	NONE NONE	PUBLIC CHARITY  PUBLIC CHARITY  PUBLIC CHARITY	GENERAL PURPOSE  GENERAL PURPOSE	2,000
CA H FLOOR	NONE	PUBLIC CHARITY PUBLIC CHARITY	GENERAL PURPOSE	2,000
CA H FLOOR	NONE	PUBLIC CHARITY		2,000
H FLOOR	NONE	PUBLIC CHARITY		
			GENERAL PURPOSE	
			GENERAL PURPOSE	3,000
	NONE	PUBLIC CHARITY	GENERAL PURPOSE	3,000
	NONE	PUBLIC CHARITY	GENERAL PURPOSE	
CIIIMD 511		<u> </u>	1	
SUITED 511				3,000
	NONE	PUBLIC CHARITY	GENERAL PURPOSE	5,000
	NONE	PUBLIC CHARITY	GENERAL PURPOSE	3,000
ER	NONE	PUBLIC CHARITY	GENERAL PURPOSE	
				2,000
	NONE	PUBLIC CHARITY	GENERAL PURPOSE	
	-			5,000
DREN	NONE	PUBLIC CHARITY	GENERA PURPOSE	5,000
		NONE	NONE PUBLIC CHARITY REN NONE PUBLIC CHARITY	NONE PUBLIC CHARITY GENERAL PURPOSE

MONTHLY STATEMENT

Reporting Period: December 1 - 31, 2016

CORPORATION

HOLDINGS DETAIL

CASH AND CASH ALTERNATIVES

	Quantity	Price	Market Value
FDIC INSURED DEPOSIT ACCOUNT IDA12 NOT COVERED BY SIPC	•	' \$	\$108,139.17
TOTAL CASH & CASH ALTERNATIVES			\$108,139.17

ANGE TRADED	_
IANGE TRADED FUN	(ETFs)
IANGE TRA	FUNDS
ŽΥ	Ω
EXC.	EXCHANGE

	Symbol/	Purchase		Closina		tao.C	Lorenized
Investment Description	CUSIP	Date	Quantity	Price	Market Value	Basis	Gain/(Loss)
VANGUARD INDEX FUNDS S&P 500 ETF	000	12/2/11	1,026	\$205.31	\$210,648.06	\$137-166:34	\$73,481.72
TOTAL EXCHANGE TRADED FUNDS (ETFs)					\$210,648.06	\$137,166.34	\$73,481.72
	TOTAL EXCHANGE	NNGE TRADED FI	TRADED FUNDS-LONG POSITION	NOILISC	210,648.06		

## MUTUAL FUNDS

nvestment Description	Symbol/ CUSIP	Purchase Date	Quantity	Closing Price	Market Value	Cost Basis	Unrealized Gain/(Loss)
SH-TRM GOVT BOND IDX ADMIRAL TOTAL MUTUAL FUNDS	Yogoy	8/1/16	14,732.256	\$20.25	\$298,328.18 \$298,328.18	\$301,000.00	\$(2,671.82)



Account 916-030885
POTTHOFF FAMILY FOUNDATION
ATTN GERALD A POTTHOFF & JUDITH POTTHOFF

MONTHLY STATEMENT

Reporting Period: December 1 - 31, 2016

CORPORATION

# HOLDINGS DETAIL (continued)

STOCKS

Investment Description	Symbol/ CUSIP	Purchase Date	Quantity	Closing Price	Market Value	Cost Basis	Unrealized Gain/(Loss)
ABBVIE INC COM	ABBV	1/20/12	450	\$62.62	\$28,179.00	\$15,579.57	\$12,599.43
ALTRIA GROUP INC COM	MO	1/20/12	875	67.62	59,167.50	25,042.66	34,124.84
AMEREN CORP	AEE	1/20/12	793	52.46	41,600.78	25,122.20	16,478.58
CINCINNATI FINANCIAL CORP COM	CINF	1/20/12	779	75.75	59,009.25	25,403.62	33,605.63
ELI LILLY & CO COM	ררא	1/20/12	620	73.55	45,601.00	24,647.18	20,953.82
GENERAL ELECTRIC CO COM	GE	9/14/09	1,000	31.60	31,600.00	15,276:99 30640	16,323.01
JOHNSON & JOHNSON COM	CNL	1/20/12	385	115.21	44,355.85	25,145.61	19,210.24
JP MORGAN CHASE & CO COM	JPM	1/20/12	089	86.29	58,677.20	25,331.38	33,345.82
KELLOGG CO COM	쪼	1/20/12	490	73.71	36,117.90	24,959.21	11,158.69
L-3 COMMUNICATIONS CORP 1:1 EXC 1/3/17 502413107	רדר	6/28/00	256	152.11	38,940.16	-6,901-82 31,700	32,038.34
MERCK & CO INC. COM	MRK	1/20/12	635	58.87	37,382.45	24,893.89	12,488.56
PROCTER GAMBLE CO COM	ЬG	9/26/01	096	84.08	80,716.80	-42,135.19 77708	38,581.61
* PRUDENTIAL FINANCIAL INC COM	PRU	1/20/12	440	104.06	45,786.40	25,211.14	20,575.26
, VERIZON COMMUNICATIONS COM	ZN	1/20/12	641	53.38	34,216.58	24,904.35	9,312.23
WALT DISNEY CO COM:	DIS	5/2/00	200	104.22	52,110.00	74 <del>,</del> 727 <del>.</del> 86 47.190	37,382.14

Questions,? Consult your Independent Advisor: HM CAPITAL MANAGEMENT LLC (314) 746-1777

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Ameritrade Institutional

POTTHOFF FAMILY FOUNDATION ATTN GERALD A POTTHOFF & JUDITH POTTHOFF Account 916-030885

Reporting Period: December 1 - 31, 2016

CORPORATION

### HOLDINGS DETAIL (continued) MONTHLY STATEMENT

STOCKS								
Investment Description		Symbol/ CUSIP	Purchase Date	Quantity	Closing Price	Market Value	Cost Basis	Unrealized Gain/(Loss)
WASTE MANAGEMENT INC-COM	INO-	WW	1/20/12	740	70.91	52,473.40	25,087.53	27,385.87
TOTAL STOCKS						\$745,934.27	\$370,370.20	\$375,564.07
	T	OTAL STOCKS	TOTAL STOCKS- LONG POSITION	>		745,934.27	#P7.81+	
TARTOR CONTROL		TELEGRAPHICA COLUMN	the state of the second second second second second second second second second second second second second se	STATE OF THE		NO DESCRIPTION OF THE PROPERTY		ENTERED SEE
TOTAL HOLDINGS						\$1,363,049.68	\$808,536.54	\$446,373.97
TOTAL ACCOUNT VALUE	ALUE					\$1,363,049.68		
			\$	金七つにより、以下の 中間のと前	100000	<u>.</u>	478264	
			<i>&gt;</i>	VANGUARD ST BOND	ST BOND	l	200 000 PE	
TRANSACTIONS DETAIL	DETAIL ·		>	VANGORADO SAF	山水	a	101 018946	
				CPSH			1000 B	
Transaction Settlement Date Date	nt Activity Type	Description		<b>0,</b> 0	Symbol/ CUSIP	@upan	Quantity/(, ''' Price	Transaction Amount
12/01 12/01	Dividends and Interest	AFLAC INC		1	AFL	<b>'</b> 4	<del>,</del>	\$227.90
		CM PAYABLE: 12/01/2016	/01/2016		TOTAL FON	)	390,1700,1	
		QUALIFIED	QUALIFIED DIVIDENDS 227.90		BOOK BASK	どろ		



Page 4 of 14

110.25

PSX

PHILLIPS 66 SOM

Dividends and Interest

12/01

12/01

PFE

PFIZER INC COM PAYABLE: 12/01/2016 QUALIFIED DIVIDENDS 342.00

Dividends and Interest

12/01

12/01

PAYABLE: 12/01/2016 QUALIFIED DIVIDENDS 110.25

342.00