



See a Social Security Number? Say Something!  
Report Privacy Problems to <https://public.resource.org/privacy>  
Or call the IRS Identity Theft Hotline at 1-800-908-4490



efile GRAPHIC print - DO NOT PROCESS

As Filed Data -

DLN: 93491226007767

Form 990-PF

Department of the Treasury  
Internal Revenue Service

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

Do not enter social security numbers on this form as it may be made public.  
Information about Form 990-PF and its instructions is at [www.irs.gov/form990pf](http://www.irs.gov/form990pf).

OMB No 1545-0052

2016

Open to Public Inspection

For calendar year 2016, or tax year beginning 04-01-2016, and ending 03-31-2017

Name of foundation  
WITTERN FAMILY CHARITABLE FOUNDATION

% MARK CRAIGMILE

Number and street (or P.O. box number if mail is not delivered to street address)  
8040 UNIVERSITY BLVD

Room/suite

City or town, state or province, country, and ZIP or foreign postal code  
DES MOINES, IA 50325

G Check all that apply

☐ Initial return

☐ Initial return of a former public charity

☐ Final return

☐ Amended return

☐ Address change

☐ Name change

H Check type of organization

☒ Section 501(c)(3) exempt private foundation

☐ Section 4947(a)(1) nonexempt charitable trust

☐ Other taxable private foundation

I Fair market value of all assets at end of year (from Part II, col (c), line 16)2,075,834

J Accounting method

☐ Cash

☒ Accrual

☐ Other (specify)

A Employer identification number  
42-1114774

B Telephone number (see instructions)  
(515) 274-3641

C If exemption application is pending, check here

D 1. Foreign organizations, check here

D 2. Foreign organizations meeting the 85% test, check here and attach computation

E If private foundation status was terminated under section 507(b)(1)(A), check here

F If the foundation is in a 60-month termination under section 507(b)(1)(B), check here

Part I

Analysis of Revenue and Expenses (The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a) (see instructions) )

Revenue

Operating and Administrative Expenses

1

2

3

4

5a

b

6a

b

7

8

9

10a

b

c

11

12

13

14

15

16a

b

c

17

18

19

20

21

22

23

24

25

26

27

a

b

c

Contributions, gifts, grants, etc., received (attach schedule)

Check if the foundation is not required to attach Sch. B

Interest on savings and temporary cash investments

Dividends and interest from securities

Gross rents

Net rental income or (loss)

Net gain or (loss) from sale of assets not on line 10

Gross sales price for all assets on line 6a

Capital gain net income (from Part IV, line 2)

Net short-term capital gain

Income modifications

Gross sales less returns and allowances

Less: Cost of goods sold

Gross profit or (loss) (attach schedule)

Other income (attach schedule)

Total. Add lines 1 through 11

Compensation of officers, directors, trustees, etc.

Other employee salaries and wages

Pension plans, employee benefits

Legal fees (attach schedule)

Accounting fees (attach schedule)

Other professional fees (attach schedule)

Interest

Taxes (attach schedule) (see instructions)

Depreciation (attach schedule) and depletion

Occupancy

Travel, conferences, and meetings

Printing and publications

Other expenses (attach schedule)

Total operating and administrative expenses. Add lines 13 through 23

Contributions, gifts, grants paid

Total expenses and disbursements. Add lines 24 and 25

Subtract line 26 from line 12

Excess of revenue over expenses and disbursements

Net investment income (if negative, enter -0-)

Adjusted net income (if negative, enter -0-)

140,000

58,378

33,570

231,948

0

10,471

18

10,489

96,200

106,689

125,259

81,477

91,948

10,471

96,218

For Paperwork Reduction Act Notice, see instructions.

Cat No 11289X

Form 990-PF (2016)

Part II Balance Sheets		Attached schedules and amounts in the description column should be for end-of-year amounts only (See instructions)			Beginning of year	End of year	
		(a) Book Value	(b) Book Value	(c) Fair Market Value			
Assets	<b>1</b>	Cash—non-interest-bearing . . . . .	15,728	17,676	17,676		
	<b>2</b>	Savings and temporary cash investments . . . . .	87,251	87,873	87,873		
	<b>3</b>	Accounts receivable ▶ _____ Less allowance for doubtful accounts ▶ _____					
	<b>4</b>	Pledges receivable ▶ _____ Less allowance for doubtful accounts ▶ _____					
	<b>5</b>	Grants receivable . . . . .					
	<b>6</b>	Receivables due from officers, directors, trustees, and other disqualified persons (attach schedule) (see instructions) . . . . .					
	<b>7</b>	Other notes and loans receivable (attach schedule) ▶ _____ Less allowance for doubtful accounts ▶ _____					
	<b>8</b>	Inventories for sale or use . . . . .					
	<b>9</b>	Prepaid expenses and deferred charges . . . . .					
	<b>10a</b>	Investments—U S and state government obligations (attach schedule)					
	<b>b</b>	Investments—corporate stock (attach schedule) . . . . .					
	<b>c</b>	Investments—corporate bonds (attach schedule) . . . . .					
	<b>11</b>	Investments—land, buildings, and equipment basis ▶ _____ Less accumulated depreciation (attach schedule) ▶ _____					
	<b>12</b>	Investments—mortgage loans . . . . .					
	<b>13</b>	Investments—other (attach schedule) . . . . .	1,809,963	1,880,791	1,970,285		
	<b>14</b>	Land, buildings, and equipment basis ▶ _____ Less accumulated depreciation (attach schedule) ▶ _____					
<b>15</b>	Other assets (describe ▶ _____)	0	0				
<b>16</b>	<b>Total assets</b> (to be completed by all filers—see the instructions Also, see page 1, item I)	1,912,942	1,986,340	2,075,834			
Liabilities	<b>17</b>	Accounts payable and accrued expenses . . . . .					
	<b>18</b>	Grants payable . . . . .					
	<b>19</b>	Deferred revenue . . . . .					
	<b>20</b>	Loans from officers, directors, trustees, and other disqualified persons					
	<b>21</b>	Mortgages and other notes payable (attach schedule) . . . . .					
	<b>22</b>	Other liabilities (describe ▶ _____)					
	<b>23</b>	<b>Total liabilities</b> (add lines 17 through 22) . . . . .	0	0			
	Net Assets or Fund Balances	<b>Foundations that follow SFAS 117, check here</b> ▶ <input type="checkbox"/> <b>and complete lines 24 through 26 and lines 30 and 31.</b>					
<b>24</b>		Unrestricted . . . . .					
<b>25</b>		Temporarily restricted . . . . .					
<b>26</b>		Permanently restricted . . . . .					
<b>Foundations that do not follow SFAS 117, check here</b> ▶ <input checked="" type="checkbox"/> <b>and complete lines 27 through 31.</b>							
<b>27</b>		Capital stock, trust principal, or current funds . . . . .	370,241	370,241			
<b>28</b>		Paid-in or capital surplus, or land, bldg, and equipment fund	151,588	151,588			
<b>29</b>		Retained earnings, accumulated income, endowment, or other funds	1,391,113	1,464,511			
<b>30</b>		<b>Total net assets or fund balances</b> (see instructions) . . . . .	1,912,942	1,986,340			
<b>31</b>	<b>Total liabilities and net assets/fund balances</b> (see instructions) .	1,912,942	1,986,340				

**Part III Analysis of Changes in Net Assets or Fund Balances**

<b>1</b>	Total net assets or fund balances at beginning of year—Part II, column (a), line 30 (must agree with end-of-year figure reported on prior year's return) . . . . .	<b>1</b>	1,912,942
<b>2</b>	Enter amount from Part I, line 27a . . . . .	<b>2</b>	125,259
<b>3</b>	Other increases not included in line 2 (itemize) ▶ _____	<b>3</b>	
<b>4</b>	Add lines 1, 2, and 3 . . . . .	<b>4</b>	2,038,201
<b>5</b>	Decreases not included in line 2 (itemize) ▶ _____	<b>5</b>	51,861
<b>6</b>	Total net assets or fund balances at end of year (line 4 minus line 5)—Part II, column (b), line 30 .	<b>6</b>	1,986,340

**Part IV Capital Gains and Losses for Tax on Investment Income**

(a) List and describe the kind(s) of property sold (e g , real estate, 2-story brick warehouse, or common stock, 200 shs MLC Co )	(b) How acquired P—Purchase D—Donation	(c) Date acquired (mo , day, yr )	(d) Date sold (mo , day, yr )
<b>1 a PUBLICLY TRADED SECURITIES</b>			
<b>b</b>			
<b>c</b>			
<b>d</b>			
<b>e</b>			

  

(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale	(h) Gain or (loss) (e) plus (f) minus (g)
<b>a</b> 1,432,482		1,398,912	33,570
<b>b</b>			
<b>c</b>			
<b>d</b>			
<b>e</b>			

  

Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69			(l) Gains (Col (h) gain minus col (k), but not less than -0-) or Losses (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	
<b>a</b>			33,570
<b>b</b>			
<b>c</b>			
<b>d</b>			
<b>e</b>			

  

<b>2</b> Capital gain net income or (net capital loss)	2	33,570
<b>3</b> Net short-term capital gain or (loss) as defined in sections 1222(5) and (6) If gain, also enter in Part I, line 8, column (c) (see instructions) If (loss), enter -0- in Part I, line 8	3	

**Part V Qualification Under Section 4940(e) for Reduced Tax on Net Investment Income**

(For optional use by domestic private foundations subject to the section 4940(a) tax on net investment income )

If section 4940(d)(2) applies, leave this part blank

Was the foundation liable for the section 4942 tax on the distributable amount of any year in the base period?

☐ Yes ☒ No

If "Yes," the foundation does not qualify under section 4940(e). Do not complete this part

**1** Enter the appropriate amount in each column for each year, see instructions before making any entries

(a) Base period years Calendar year (or tax year beginning in)	(b) Adjusted qualifying distributions	(c) Net value of noncharitable-use assets	(d) Distribution ratio (col (b) divided by col (c))
2015	100,743	1,967,917	0 051193
2014	95,880	2,016,996	0 047536
2013	78,212	1,893,118	0 041314
2012	47,950	1,632,566	0 029371
2011	35,300	1,181,489	0 029878
<b>2 Total</b> of line 1, column (d)			0 199292
<b>3</b> Average distribution ratio for the 5-year base period—divide the total on line 2 by 5, or by the number of years the foundation has been in existence if less than 5 years			0 039858
<b>4</b> Enter the net value of noncharitable-use assets for 2016 from Part X, line 5			1,966,897
<b>5</b> Multiply line 4 by line 3			78,397
<b>6</b> Enter 1% of net investment income (1% of Part I, line 27b)			815
<b>7</b> Add lines 5 and 6			79,212
<b>8</b> Enter qualifying distributions from Part XII, line 4			96,218

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

**Part VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948—see instructions)**

<b>1a</b>	Exempt operating foundations described in section 4940(d)(2), check here <input type="checkbox"/> and enter "N/A" on line 1 Date of ruling or determination letter _____ (attach copy of letter if necessary—see instructions)		
<b>b</b>	Domestic foundations that meet the section 4940(e) requirements in Part V, check here <input checked="" type="checkbox"/> and enter 1% of Part I, line 27b . . . . .	<b>1</b>	815
<b>c</b>	All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of Part I, line 12, col (b)		
<b>2</b>	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	<b>2</b>	
<b>3</b>	Add lines 1 and 2. . . . .	<b>3</b>	815
<b>4</b>	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	<b>4</b>	
<b>5</b>	<b>Tax based on investment income.</b> Subtract line 4 from line 3. If zero or less, enter -0- . . . . .	<b>5</b>	815
<b>6</b>	Credits/Payments		
<b>a</b>	2016 estimated tax payments and 2015 overpayment credited to 2016	<b>6a</b>	523
<b>b</b>	Exempt foreign organizations—tax withheld at source . . . . .	<b>6b</b>	
<b>c</b>	Tax paid with application for extension of time to file (Form 8868) . . . . .	<b>6c</b>	
<b>d</b>	Backup withholding erroneously withheld . . . . .	<b>6d</b>	
<b>7</b>	Total credits and payments. Add lines 6a through 6d. . . . .	<b>7</b>	523
<b>8</b>	Enter any <b>penalty</b> for underpayment of estimated tax. Check here <input type="checkbox"/> if Form 2220 is attached	<b>8</b>	
<b>9</b>	<b>Tax due.</b> If the total of lines 5 and 8 is more than line 7, enter <b>amount owed</b> . . . . . ▶	<b>9</b>	292
<b>10</b>	<b>Overpayment.</b> If line 7 is more than the total of lines 5 and 8, enter the <b>amount overpaid</b> . . . . . ▶	<b>10</b>	
<b>11</b>	Enter the amount of line 10 to be <b>Credited to 2017 estimated tax</b> ▶ <b>Refunded</b> ▶	<b>11</b>	

**Part VII-A Statements Regarding Activities**

	Yes	No
<b>1a</b> 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?	<b>1a</b>	No
<b>b</b> Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see Instructions for definition)? . . . . . <i>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</i>	<b>1b</b>	No
<b>c</b> Did the foundation file <b>Form 1120-POL</b> for this year? . . . . .	<b>1c</b>	No
<b>d</b> Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year (1) On the foundation ▶ \$ _____ (2) On foundation managers ▶ \$ _____		
<b>e</b> Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers ▶ \$ _____		
<b>2</b> Has the foundation engaged in any activities that have not previously been reported to the IRS? . . . . . <i>If "Yes," attach a detailed description of the activities</i>	<b>2</b>	No
<b>3</b> 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? <i>If "Yes," attach a conformed copy of the changes</i>	<b>3</b>	No
<b>4a</b> Did the foundation have unrelated business gross income of \$1,000 or more during the year? . . . . .	<b>4a</b>	No
<b>b</b> If "Yes," has it filed a tax return on <b>Form 990-T</b> for this year? . . . . .	<b>4b</b>	
<b>5</b> Was there a liquidation, termination, dissolution, or substantial contraction during the year? . . . . . <i>If "Yes," attach the statement required by General Instruction T</i>	<b>5</b>	No
<b>6</b> Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either • By language in the governing instrument, or • By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state law remain in the governing instrument? . . . . .	<b>6</b>	Yes
<b>7</b> Did the foundation have at least \$5,000 in assets at any time during the year? <i>If "Yes," complete Part II, col (c), and Part XV</i> . . . . .	<b>7</b>	Yes
<b>8a</b> Enter the states to which the foundation reports or with which it is registered (see instructions) ▶ <u>IA</u>		
<b>b</b> If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate) of each state as required by General Instruction G? <i>If "No," attach explanation</i> .	<b>8b</b>	Yes
<b>9</b> Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for calendar year 2016 or the taxable year beginning in 2016 (see instructions for Part XIV)? <i>If "Yes," complete Part XIV</i> . . . . .	<b>9</b>	No
<b>10</b> Did any persons become substantial contributors during the tax year? <i>If "Yes," attach a schedule listing their names and addresses</i> . . . . .	<b>10</b>	No

**Part VII-A Statements Regarding Activities** (continued)

<b>11</b>	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).	<b>11</b>		<b>No</b>
<b>12</b>	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)	<b>12</b>		<b>No</b>
<b>13</b>	Did the foundation comply with the public inspection requirements for its annual returns and exemption application? Website address <b>▶</b> N/A	<b>13</b>	<b>Yes</b>	
<b>14</b>	The books are in care of <b>▶</b> MARK CRAIGMILE Telephone no <b>▶</b> (515) 271-8468			

Located at **▶** 8040 UNIVERSITY BLVD DES MOINES IA ZIP+4 **▶** 50325

<b>15</b>	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of <b>Form 1041</b> —Check here . . . . . <input type="checkbox"/> and enter the amount of tax-exempt interest received or accrued during the year . . . . . <b>▶</b> <b>15</b>			
<b>16</b>	At any time during calendar year 2016, did the foundation have an interest in or a signature or other authority over a bank, securities, or other financial account in a foreign country? See instructions for exceptions and filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR). If "Yes," enter the name of the foreign country <b>▶</b>	<b>16</b>	<b>Yes</b>	<b>No</b>

**Part VII-B Statements Regarding Activities for Which Form 4720 May Be Required**

**File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.**

<b>1a</b>	During the year did the foundation (either directly or indirectly)		<b>Yes</b>	<b>No</b>
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No			
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
	(5) Transfer any income or assets to a disqualified person (or make any of either available for the benefit or use of a disqualified person)? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
	(6) Agree to pay money or property to a government official? ( <b>Exception.</b> Check "No" if the foundation agreed to make a grant to or to employ the official for a period after termination of government service, if terminating within 90 days). <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
<b>b</b>	If any answer is "Yes" to 1a(1)–(6), did <b>any</b> 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)? <input type="checkbox"/> Organizations relying on a current notice regarding disaster assistance check here. <b>▶</b> <input type="checkbox"/>	<b>1b</b>		<b>No</b>
<b>c</b>	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected before the first day of the tax year beginning in 2016? <input type="checkbox"/>	<b>1c</b>		<b>No</b>
<b>2</b>	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation defined in section 4942(j)(3) or 4942(j)(5))			
<b>a</b>	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? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If "Yes," list the years <b>▶</b> 20____, 20____, 20____, 20____			
<b>b</b>	Are there any years listed in 2a for which the foundation is <b>not</b> 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 <b>all</b> years listed, answer "No" and attach statement—see instructions). <input type="checkbox"/>	<b>2b</b>		
<b>c</b>	If the provisions of section 4942(a)(2) are being applied to <b>any</b> of the years listed in 2a, list the years here <b>▶</b> 20____, 20____, 20____, 20____			
<b>3a</b>	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
<b>b</b>	If "Yes," did it have excess business holdings in 2016 as a result of (1) any purchase by the foundation or disqualified persons after May 26, 1969, (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest, or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Schedule C, Form 4720, to determine if the foundation had excess business holdings in 2016). <input type="checkbox"/>	<b>3b</b>		
<b>4a</b>	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	<b>4a</b>		<b>No</b>
<b>b</b>	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2016?	<b>4b</b>		<b>No</b>

**Part VII-B Statements Regarding Activities for Which Form 4720 May Be Required** (Continued)

<b>5a</b> During the year did the foundation pay or incur any amount to <b>(1)</b> Carry on propaganda, or otherwise attempt to influence legislation (section 4945(e))? <span style="float:right;"><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</span> <b>(2)</b> Influence the outcome of any specific public election (see section 4955), or to carry on, directly or indirectly, any voter registration drive? <span style="float:right;"><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</span> <b>(3)</b> Provide a grant to an individual for travel, study, or other similar purposes? <span style="float:right;"><input checked="" type="checkbox"/> Yes <input type="checkbox"/> No</span> <b>(4)</b> Provide a grant to an organization other than a charitable, etc., organization described in section 4945(d)(4)(A)? (see instructions). <span style="float:right;"><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</span> <b>(5)</b> Provide for any purpose other than religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals? <span style="float:right;"><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</span> <b>b</b> If any answer is "Yes" to 5a(1)–(5), did <b>any</b> of the transactions fail to qualify under the exceptions described in Regulations section 53.4945 or in a current notice regarding disaster assistance (see instructions)? <span style="float:right;"><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</span> Organizations relying on a current notice regarding disaster assistance check here. <span style="float:right;"><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</span> <b>c</b> If the answer is "Yes" to question 5a(4), does the foundation claim exemption from the tax because it maintained expenditure responsibility for the grant? <span style="float:right;"><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</span> If "Yes," attach the statement required by Regulations section 53.4945–5(d)		<b>5b</b>	<b>No</b>
<b>6a</b> Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? <span style="float:right;"><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</span> <b>b</b> Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract? <span style="float:right;"><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</span> If "Yes" to 6b, file Form 8870		<b>6b</b>	<b>No</b>
<b>7a</b> At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction? <span style="float:right;"><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</span> <b>b</b> If yes, did the foundation receive any proceeds or have any net income attributable to the transaction? <span style="float:right;"><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</span>		<b>7b</b>	

**Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors**

<b>1 List all officers, directors, trustees, foundation managers and their compensation (see instructions).</b>				
(a) Name and address	Title, and average hours per week (b) devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	Expense account, (e) other allowances
HEIDI CHICO 8040 UNIVERSITY BLVD DES MOINES, IA 50325	PRESIDENT 0 5	0	0	0
F A WITTERN III 8040 UNIVERSITY BLVD DES MOINES, IA 50325	VICE PRESIDENT/ TREASURER 0 5	0	0	0
DEBORAH DOUGHERTY 8040 UNIVERSITY BLVD DES MOINES, IA 50325	SECRETARY 0 5	0	0	0
<b>2 Compensation of five highest-paid employees (other than those included on line 1—see instructions). If none, enter "NONE."</b>				
(a) Name and address of each employee paid more than \$50,000	Title, and average hours per week (b) devoted to position	(c) Compensation	(d) Contributions to employee benefit plans and deferred compensation	Expense account, (e) other allowances
<b>Total</b> number of other employees paid over \$50,000. <span style="float:right;"><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</span>				

**Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors** *(continued)*

**3 Five highest-paid independent contractors for professional services (see instructions). If none, enter "NONE".**

(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
<b>Total</b> number of others receiving over \$50,000 for professional services. . . . .		

**Part IX-A Summary of Direct Charitable Activities**

List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of organizations and other beneficiaries served, conferences convened, research papers produced, etc.

	Expenses
<b>1</b>	
<b>2</b>	
<b>3</b>	
<b>4</b>	

**Part IX-B Summary of Program-Related Investments** (see instructions)

Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2	Amount
<b>1</b>	
<b>2</b>	
All other program-related investments. See instructions.	
<b>3</b>	
<b>Total.</b> Add lines 1 through 3 . . . . .	



**Part X Minimum Investment Return** (All domestic foundations must complete this part. Foreign foundations, see instructions.)

<b>1</b>	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes		
<b>a</b>	Average monthly fair market value of securities.	<b>1a</b>	1,939,151
<b>b</b>	Average of monthly cash balances.	<b>1b</b>	57,699
<b>c</b>	Fair market value of all other assets (see instructions).	<b>1c</b>	0
<b>d</b>	<b>Total</b> (add lines 1a, b, and c).	<b>1d</b>	1,996,850
<b>e</b>	Reduction claimed for blockage or other factors reported on lines 1a and 1c (attach detailed explanation).	<b>1e</b>	
<b>2</b>	Acquisition indebtedness applicable to line 1 assets.	<b>2</b>	0
<b>3</b>	Subtract line 2 from line 1d.	<b>3</b>	1,996,850
<b>4</b>	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions).	<b>4</b>	29,953
<b>5</b>	<b>Net value of noncharitable-use assets.</b> Subtract line 4 from line 3. Enter here and on Part V, line 4.	<b>5</b>	1,966,897
<b>6</b>	<b>Minimum investment return.</b> Enter 5% of line 5.	<b>6</b>	98,345

**Part XI Distributable Amount** (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations and certain foreign organizations check here ☐ and do not complete this part.)

<b>1</b>	Minimum investment return from Part X, line 6.	<b>1</b>	98,345
<b>2a</b>	Tax on investment income for 2016 from Part VI, line 5.	<b>2a</b>	815
<b>b</b>	Income tax for 2016 (This does not include the tax from Part VI).	<b>2b</b>	
<b>c</b>	Add lines 2a and 2b.	<b>2c</b>	815
<b>3</b>	Distributable amount before adjustments. Subtract line 2c from line 1.	<b>3</b>	97,530
<b>4</b>	Recoveries of amounts treated as qualifying distributions.	<b>4</b>	
<b>5</b>	Add lines 3 and 4.	<b>5</b>	97,530
<b>6</b>	Deduction from distributable amount (see instructions).	<b>6</b>	
<b>7</b>	<b>Distributable amount</b> as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1.	<b>7</b>	97,530

**Part XII Qualifying Distributions** (see instructions)

<b>1</b>	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes		
<b>a</b>	Expenses, contributions, gifts, etc.—total from Part I, column (d), line 26.	<b>1a</b>	96,218
<b>b</b>	Program-related investments—total from Part IX-B.	<b>1b</b>	0
<b>2</b>	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes.	<b>2</b>	0
<b>3</b>	Amounts set aside for specific charitable projects that satisfy the		
<b>a</b>	Suitability test (prior IRS approval required).	<b>3a</b>	0
<b>b</b>	Cash distribution test (attach the required schedule).	<b>3b</b>	0
<b>4</b>	<b>Qualifying distributions.</b> Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4.	<b>4</b>	96,218
<b>5</b>	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income. Enter 1% of Part I, line 27b (see instructions).	<b>5</b>	815
<b>6</b>	<b>Adjusted qualifying distributions.</b> Subtract line 5 from line 4.	<b>6</b>	95,403

**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.

**Part XIII Undistributed Income** (see instructions)

	(a) Corpus	(b) Years prior to 2015	(c) 2015	(d) 2016
<b>1</b> Distributable amount for 2016 from Part XI, line 7				97,530
<b>2</b> Undistributed income, if any, as of the end of 2016				
<b>a</b> Enter amount for 2015 only. . . . .			93,471	
<b>b</b> Total for prior years 2014, 2013, 2012				
<b>3</b> Excess distributions carryover, if any, to 2016				
<b>a</b> From 2011. . . . .				
<b>b</b> From 2012. . . . .				
<b>c</b> From 2013. . . . .				
<b>d</b> From 2014. . . . .				
<b>e</b> From 2015. . . . .				0
<b>f</b> Total of lines 3a through e. . . . .	0			
<b>4</b> Qualifying distributions for 2016 from Part XII, line 4 ▶ \$ <u>96,218</u>				
<b>a</b> Applied to 2015, but not more than line 2a			93,471	
<b>b</b> Applied to undistributed income of prior years (Election required—see instructions). . . . .				
<b>c</b> Treated as distributions out of corpus (Election required—see instructions). . . . .				
<b>d</b> Applied to 2016 distributable amount. . . . .				2,747
<b>e</b> Remaining amount distributed out of corpus	0			
<b>5</b> Excess distributions carryover applied to 2016 (If an amount appears in column (d), the same amount must be shown in column (a) )	0			0
<b>6</b> Enter the net total of each column as indicated below:	0			
<b>a</b> Corpus Add lines 3f, 4c, and 4e Subtract line 5				
<b>b</b> Prior years' undistributed income Subtract line 4b from line 2b. . . . .				
<b>c</b> 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. . . . .				
<b>d</b> Subtract line 6c from line 6b Taxable amount—see instructions. . . . .				
<b>e</b> Undistributed income for 2015 Subtract line 4a from line 2a Taxable amount—see instructions. . . . .				
<b>f</b> Undistributed income for 2016 Subtract lines 4d and 5 from line 1 This amount must be distributed in 2017. . . . .				94,783
<b>7</b> 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). . . . .				
<b>8</b> Excess distributions carryover from 2011 not applied on line 5 or line 7 (see instructions). . . . .				
<b>9</b> Excess distributions carryover to 2017. Subtract lines 7 and 8 from line 6a. . . . .	0			
<b>10</b> Analysis of line 9				
<b>a</b> Excess from 2012. . . . .				
<b>b</b> Excess from 2013. . . . .				
<b>c</b> Excess from 2014. . . . .				
<b>d</b> Excess from 2015. . . . .				
<b>e</b> Excess from 2016. . . . .	0			

**Part XIV Private Operating Foundations** (see instructions and Part VII-A, question 9)

**1a** 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. . . . . ▶

**b** Check box to indicate whether the organization is a private operating foundation described in section ☐ 4942(j)(3) or ☐ 4942(j)(5)

**2a** Enter the lesser of the adjusted net income from Part I or the minimum investment return from Part X for each year listed . . . . .

	Tax year	Prior 3 years			(e) Total
	(a) 2016	(b) 2015	(c) 2014	(d) 2013	
<b>b</b> 85% of line 2a . . . . .					
<b>c</b> Qualifying distributions from Part XII, line 4 for each year listed . . . . .					
<b>d</b> Amounts included in line 2c not used directly for active conduct of exempt activities . . . . .					
<b>e</b> Qualifying distributions made directly for active conduct of exempt activities. Subtract line 2d from line 2c . . . . .					
<b>3</b> Complete 3a, b, or c for the alternative test relied upon					
<b>a</b> "Assets" alternative test—enter					
<b>(1)</b> Value of all assets . . . . .					
<b>(2)</b> Value of assets qualifying under section 4942(j)(3)(B)(i)					
<b>b</b> "Endowment" alternative test— enter 2/3 of minimum investment return shown in Part X, line 6 for each year listed. . . . .					
<b>c</b> "Support" alternative test—enter					
<b>(1)</b> Total support other than gross investment income (interest, dividends, rents, payments on securities loans (section 512(a)(5)), or royalties) . . . . .					
<b>(2)</b> Support from general public and 5 or more exempt organizations as provided in section 4942(j)(3)(B)(iii). . . . .					
<b>(3)</b> Largest amount of support from an exempt organization					
<b>(4)</b> Gross investment income					

**Part XV Supplementary Information** (Complete this part only if the organization had \$5,000 or more in assets at any time during the year—see instructions.)

**1 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) )  
See Additional Data Table

**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  
NONE

**2 Information Regarding Contribution, Grant, Gift, Loan, Scholarship, etc., Programs:**

Check here ☒ 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 email address of the person to whom applications should be addressed

**b** The form in which applications should be submitted and information and materials they should include

**c** Any submission deadlines

**d** Any restrictions or limitations on awards, such as by geographical areas, charitable fields, kinds of institutions, or other factors

**Part XV** **Supplementary Information** (continued)**3 Grants and Contributions Paid During the Year or Approved for Future Payment**

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i> See Additional Data Table				
<b>Total</b> . . . . .			<b>3a</b>	96,200
<b>b</b> <i>Approved for future payment</i>				
<b>Total</b> . . . . .			<b>3b</b>	

## Enter gross amounts unless otherwise indicated

## Part XVI-B Relationship of Activities to the Accomplishment of Exempt Purposes

Form **990-PF** (2016)

## Part XVII

- |       | Yes | No |
|-------|-----|----|
| 1a(1) |     | No |
| 1a(2) |     | No |
| 1b(1) |     | No |
| 1b(2) |     | No |
| 1b(3) |     | No |
| 1b(4) |     | No |
| 1b(5) |     | No |
| 1b(6) |     | No |
| 1c    |     | No |

[illegible]

- 2a** Is the foundation directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described in section 501(c) of the Code (other than section 501(c)(3)) or in section 527? ☐ Yes ☒ No

- b** If "Yes," complete the following schedule

(a) Name of organization	(b) Type of organization	(c) Description of relationship

**Sign  
Here**

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge.

May the IRS discuss this return with the preparer shown below  
(see instr )? ☒ Yes ☐ No

**Paid  
Preparer  
Use Only**

Print/Type preparer's name  LISA ORTNER	Preparer's Signature	Date	Check if self-employed <input type="checkbox"/>	PTIN  P01424879
Firm's name ▶ Deloitte Tax LLP				Firm's EIN ▶
Firm's address ▶ 699 Walnut Street Suite 1800  Des Moines, IA 50309				Phone no (515) 288-1200

**Form 990PF Part XV Line 1a - 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).**

HEIDI CHICO

FA WITTERN III

DEBORAH DOUGHERTY

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
GVCS Work-A-Thon 2905 NE 46th St Des Moines, IA 50317	PC		Youth Development	100
NAMA Foundation positioning for growth 20 N Wacker Dr CHICAGO, IL 60606	PC		Capital Campaign	2,000
St Anne's Episcopal School 2701 S York St DENVER, CO 80210	PC		Capital Campaign	6,000
Drake University 2507 University Ave Des Moines, IA 50311	PC		Endowed Scholarship Fund	25,000
Flandreau High School 600 W Community Dr Flandreau, SD 57028	Gov		Scholarship fund	4,000
<b>Total . . . . .</b> <b>3a</b>				96,200



Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
Avon 39 Walk to End Breast Cancer PO Box 66120 WASHINGTON, DC 20035	PC		Breast cancer research	4,600
Junior Achievement of Central IA 6100 Grand Ave DES MOINES, IA 50312	PC		Support summer camp	7,500
God's Got This-Sean Nielsen Foundation 3855 S Orilla Rd West Des Moines, IA 50061	PC		Support summer camp	500
Smile Train 41 Madison Ave 28th Fl NEW YORK, NY 10010	PC		Support cleft palate surgery	1,000
Youth Emergency Shelter Services 918 SE 11th St Des Moines, IA 50309	PC		Youth Development	100
<b>Total . . . . . ▶</b> <b>3a</b>				96,200

**Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment**

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
Des Moines Area Community College 1100 7th St Des Moines, IA 50314	PC		Employee child scholarship	3,000
Kirkwood Community College 6301 Kirkwood Blvd SW Cedar Rapids, IA 52404	PC		Employee child scholarship	1,000
University of Northern Iowa 1227 W 27th St Cedar Falls, IA 50614	PC		Employee child scholarship	1,000
East High Alumni Foundation 815 E 13th St Des Moines, IA 50316	PC		Capital Campaign	1,000
NAMA Foundation Leadership gift 20 N Wacker Dr Chicago, IL 60606	PC		Capital Campaign	20,000
<b>Total . . . . . ▶</b> <b>3a</b>				96,200

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
South Suburban YMCA 401 E Army Post Rd Des Moines, IA 50315	PC		Youth Development	500
Variety - The Children's Charity 505 Fifth Ave Suite 310 Des Moines, IA 50309	PC		Youth Development	2,000
Dowling Catholic 1400 Buffalo Rd West Des Moines, IA 50265	PC		Support youth education	2,500
Advocates Bldg Peaceful Comm PO BOX 771424 Steamboat Springs, CO 80477	PC		Support victims services	1,000
Maltz Jupiter Theatre Inc 1001 E Indiantown Rd Jupiter, FL 33477	PC		Regional Theatre	3,000
<b>Total . . . . . ▶</b> <b>3a</b>				96,200

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
Jester Park 11407 NW Jester Park Dr Granger, IA 50109	PC		Capital Campaign	3,000
Special Olympics-Greek Polar Plunge 551 SE Dovetail Rd Grimes, IA 50111	PC		Special Olympics	1,000
Cystic Fibrosis Fnd - Andrea's Angels 6931 Arlington Rd Suite 200 Bethesda, MD 20814	PC		Cystic fybrosis research	3,500
Easter Seals Camp Sunnyside 401 NE 66th Ave Des Moines, IA 50313	PC		Capital Campaign	400
Bergman Academy - Capital Campaign 100 45th St Des Moines, IA 50312	PC		Support youth education	2,500
<b>Total . . . . .</b> ▶ <b>3a</b>				96,200

**Note: To capture the full content of this document, please select landscape mode (11" x 8.5") when printing.**

## **TY 2016 Depreciation Schedule**

**Name:** WITTERN FAMILY CHARITABLE FOUNDATION

**EIN:** 42-1114774

**TY 2016 Other Decreases Schedule**

**Name:** WITTERN FAMILY CHARITABLE FOUNDATION

**EIN:** 42-1114774

Description	Amount
PRIOR PERIOD ADJUSTMENT	51,861

**TY 2016 Other Expenses Schedule****Name:** WITTERN FAMILY CHARITABLE FOUNDATION**EIN:** 42-1114774**Other Expenses Schedule**

Description	Revenue and Expenses per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
OFFICE SUPPLIES	18			18

**TY 2016 Other Professional Fees Schedule****Name:** WITTERN FAMILY CHARITABLE FOUNDATION**EIN:** 42-1114774

<b>Category</b>	<b>Amount</b>	<b>Net Investment Income</b>	<b>Adjusted Net Income</b>	<b>Disbursements for Charitable Purposes</b>
BANK CHARGES	10,471	10,471		



<b>Schedule B</b> (Form 990, 990-EZ, or 990-PF)  Department of the Treasury Internal Revenue Service	<b>Schedule of Contributors</b>  ▶ Attach to Form 990, 990-EZ, or 990-PF ▶ Information about Schedule B (Form 990, 990-EZ, or 990-PF) and its instructions is at <a href="http://www.irs.gov/form990">www.irs.gov/form990</a> .	OMB No 1545-0047  <b>2016</b>
	<b>Name of the organization</b> WITTERN FAMILY CHARITABLE FOUNDATION	<b>Employer identification number</b> 42-1114774

Organization type (check one)

<b>Filers of:</b>	<b>Section:</b>
Form 990 or 990-EZ	<input type="checkbox"/> 501(c)( ) (enter number) organization
	<input type="checkbox"/> 4947(a)(1) nonexempt charitable trust <b>not</b> treated as a private foundation
	<input type="checkbox"/> 527 political organization
Form 990-PF	<input checked="" type="checkbox"/> 501(c)(3) exempt private foundation
	<input type="checkbox"/> 4947(a)(1) nonexempt charitable trust treated as a private foundation
	<input type="checkbox"/> 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 other property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions.

Special Rules

☐ For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33<sup>1</sup>/<sub>3</sub>% 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. Do not complete any of the parts unless the **General Rule** applies to this organization because it received *nonexclusively* religious, charitable, etc., contributions totaling \$5,000 or more during the year. . . . . ▶ \$ \_\_\_\_\_

**Caution.** An organization that is not covered by the General Rule and/or the Special Rules does not 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 990PF, Part I, line 2, to certify that it does not meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

<b>Name of organization</b> WITTERN FAMILY CHARITABLE FOUNDATION	<b>Employer identification number</b> 42-1114774
---	---

**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	8040 HOLDINGS INC PO BOX 1333  DES MOINES, IA 50306	\$ 140,000	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions )
-		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions )
-		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions )
-		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions )
-		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions )
-		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions )
-		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions )
-		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions )
-		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions )

Employer identification number

42-1114774

Part II	Noncash Property
---------	------------------

Schedule B (Form 990, 990-EZ, or 990-PF) (2016)

Employer identification number

42-1114774

**Exclusively religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8), or (10) that total more than \$1,000 for the year from any one contributor. Complete columns (a) through (e) and the following line entry. For organizations completing Part III, enter the total of exclusively religious, charitable, etc., contributions of \$1,000 or less for the year. (Enter this information once. See instructions.) ▶ \$**

Use duplicate copies of Part III if additional space is needed

Schedule B (Form 990, 990-EZ, or 990-PF) (2016)

March 01, 2017 To March 31, 2017

Account Name: WITTERN CHAR  
Account Number: MXX246

**Portfolio Statement ( Continued )**

Description	Rating	Par Value	Total Market/ Total Cost	Market Price/ Cost Price	Est Annual Income/ Accrued Inc	Yield Current/ Maturity
<b>Fixed Income</b>						
180546BX0 CLARION IOWA HOSP REV BUILD AMERICA BONDS-RECOVERY ZONE ECONOMIC DEV 9% 06 01 2030-2020	NR	50 000 000	53 382 50 52 526 29	106 77 105 05	4 500 00 1 500 00	8 43 6 59
36153FAB6 SWISS RE SOLUTIONS 6 45% 03 01 2019	A2	50 000 000	53 758 50 52 157 30	107 52 104 31	3 225 00 268 75	6 00 2 41
522364R75 LEAWOOD KANSAS TAXABLE-PUB IMPT-SER C 5 375% 09 01 2021-2017	Aaa	40 000 000	40,604 80 40 515 80	101 51 101 29	2 150 00 179 17	5 29 1 62
660142KM1 NORTH IOWA AREA CMNTY COLLEGE IOWA TAXABLE INDL NEW JOBS-II-1 6% 06 01 2018-2017	Aa2	20 000 000	20,064 80 20 000 00	100 32 100 00	1 200 00 400 00	5 98 1 48
78464A417 SPDR BARCLAYS CAPITAL HIGH YIELD BOND ETF	NR	2 134 000	78 808 62 78 828 04	36 93 36 94	4 686 26	5 95
83162CPB3 SMALL BUSINESS ADMINISTRATION SERIFS 2004-2011 CLASS 1 4 36% 10 01 2024	NR	3 346 480	3 537 26 3 455 24	105 70 103 25	162 64 3 16	4 60 3 97
921937835 VANGUARD TOTAL BOND MARKET FIF	NR	5 830 000	472 696 40 479 271 65	81 08 82 21	11 549 23	2 44
949746NX5 WELLS FARGO & COMPANY 5 625% 12 11 2017	A2	25 000 000	25 684 00 25 673 67	102 74 102 69	1,408 25 429 69	5 48 1 64
<b>Total Fixed Income</b>			<b>748,536 88 752,427 99</b>		<b>28,879 38 2,780 77</b>	<b>3 86</b>

Description	Ticker	Shares	Total Market/ Total Cost	Market Price/ Cost Price	Est Annual Income/ Accrued Inc	Current Yield
<b>Equities</b>						
00287Y109 ABBVIE INC	ABBV	196 000	12 771 36 11 975 60	65 16 61 10	501 76	3 93
020002101 ALU-STATF	ALL	279 000	22 735 71 18 918 99	81 49 67 81	412 92 108 41	1 82
030420103 AMERICAN WATER WORKS CO INC	AWK	285 000	22 164 45 19,604 05	77 77 68 79	427 50	1 93

March 01, 2017 To March 31, 2017

Account Name: WITTERN CHAR  
Account Number: MXX246

**Portfolio Statement ( Continued )**

Description	Ticker	Shares	Total Market/ Total Cost	Market Price/ Cost Price	Est Annual Income/ Accrued Inc	Current Yield
<b>Equities</b>						
03076C106 AMERIPRISE FINANCIAL	AMP	191.000	24,768.33 17,718.33	129.66 92.77	573.00	2.31
037533100 APPLE INC	AAPL	123.000	17,670.18 13,955.41	143.66 113.46	280.44	1.59
09247X101 BLACKROCK INC	BLK	64.000	24,544.64 21,488.96	383.51 335.77	640.00	2.61
09253U108 THE BLACKSTONE GROUP LP	BX	423.000	12,563.10 10,847.84	29.70 25.65	642.96	5.12
126650100 CVS CORPORATION	CVS	250.000	19,625.00 21,501.51	78.50 86.01	500.00	2.55
14149Y108 CARDINAL HEALTH INC	CAH	194.000	15,820.70 14,464.64	81.55 74.56	348.42 108.18	2.20
166764100 CHEVRON CORPORATION	CVX	328.000	35,217.36 32,386.70	107.37 98.74	1,416.96	4.02
17275R102 CISCO SYSTEMS INC	CSCO	638.000	21,564.40 19,487.71	33.80 30.55	740.08	3.43
20825C104 CONOCOPHILLIPS	COP	447.000	22,291.89 20,383.73	49.87 45.60	473.82	2.13
254709108 DISCOVER FINANCIAL SERVICES	DFS	315.000	21,542.85 17,825.85	68.39 56.59	378.00	1.75
263534109 DU PONT DE NEMOURS & CO	DD	295.000	23,697.35 20,564.45	80.33 69.71	448.40	1.89
29364G103 ENERGY CORP	FTR	170.000	12,913.20 12,180.50	75.96 71.65	591.60	4.58
30231G102 EXXON MOBIL CORPORATION	XOM	183.000	15,007.83 15,953.94	82.01 87.18	549.00	3.66
369550108 GENERAL DYNAMICS CORP	GD	137.000	25,646.40 20,944.48	187.20 152.88	460.32	1.79
369604103 GENERAL ELECTRIC CO	GE	703.000	20,949.40 20,228.83	29.80 28.78	674.88 168.72	3.22

March 01, 2017 To March 31, 2017

Account Name: WITTERN CHAR  
Account Number: MXX246

**Portfolio Statement ( Continued )**

Description	Ticker	Shares	Total Market/ Total Cost	Market Price/ Cost Price	Est Annual Income/ Accrued Inc	Current Yield
<b>Equities</b>						
37045V100 GENERAL MOTORS CO	GM	504.000	17,821.44 15,810.48	35.36 31.37	766.08	4.30
438516106 HONEYWELL INTERNATIONAL INC	HON	163.000	20,353.81 19,245.70	124.87 118.07	433.58	2.13
458140100 INTEL CORP	INTC	637.000	22,976.59 22,386.77	36.07 35.14	694.33	3.02
464287465 ISHARES MSCI EAFE INDEX FUND (ETF)	EFA	2,536.000	157,967.44 160,044.91	62.29 63.11	4,491.26	2.84
464287655 ISHARES RUSSELL 2000 INDEX FUND (ETF)	IWM	617.000	84,825.16 72,558.78	137.48 117.60	1,181.56	1.39
46625H100 JP MORGAN CHASE & CO	JPM	288.000	25,297.92 17,815.39	87.84 61.86	576.00	2.28
478160104 JOHNSON & JOHNSON	JNJ	124.000	15,444.20 12,778.56	124.55 103.05	396.80	2.57
577081102 MATTIL	MAI	498.000	12,753.78 15,951.34	25.61 31.83	756.96	5.94
59156R108 METLIFE INC	MET	339.000	17,905.98 16,007.58	52.82 47.22	542.40	3.03
594918104 MICROSOFT CORP	MSFT	384.000	25,290.24 20,216.27	65.86 52.65	599.04	2.37
595221103 MID-AMERICA APARTMENT COMMUNITIES INC	MAA	172.000	17,499.28 15,636.52	101.74 90.91	598.56	3.42
609207105 MONDELEZ INTERNATIONAL INC	MDLZ	476.000	20,506.08 21,113.88	43.08 44.36	361.76 90.44	1.76
649445103 NEW YORK COMMUNITY BANCORP INC	NYCB	1,011.000	14,123.67 14,639.18	13.97 14.48	687.48	4.87
655844108 NORFOLK SOUTHERN CORP	NSC	221.000	24,745.37 20,111.00	111.97 91.00	539.24	2.18
674599105 OCCIDENTAL PETROLEUM CORP	OXY	160.000	10,137.60 11,867.20	63.36 74.17	486.40 121.60	4.80

March 01, 2017 To March 31, 2017

Account Name: WITTERN CHAIR  
Account Number: MXX246

**Portfolio Statement ( Continued )**

Description	Ticker	Shares	Total Market/ Total Cost	Market Price/ Cost Price	Est Annual Income/ Accrued Inc	Current Yield
<b>Equities</b>						
68389X105 ORACLE CORPORATION	ORCL	312.000	13,918.32 12,007.38	44.61 38.49	237.12	1.70
693475105 PNC FINANCIAL SERVICES GROUP	PNC	232.000	27,895.68 19,855.82	120.24 85.59	510.40	1.83
717081103 PFIZER INC	PFE	675.000	23,091.75 21,963.56	34.21 32.54	864.00	3.74
74251V102 PRINCIPAL FINANCIAL GROUP	PIG	379.000	23,918.69 20,489.20	63.11 54.06	682.20	2.85
742718109 PROCTER & GAMBLE	PG	249.000	22,372.65 21,028.66	89.85 84.45	666.82	3.98
744573106 PUBLIC SERVICE ENTERPRISE GROUP	PEG	436.000	19,336.60 17,910.88	44.35 41.08	749.92	3.88
74834L100 QUEST DIAGNOSTICS INCORPORATED	DGX	264.000	25,922.16 21,113.71	98.19 79.98	475.20	1.83
806857108 SCHLUMBERGER LTD	SLB	199.000	15,541.90 15,911.05	78.10 79.96	398.00 99.50	2.56
828806109 SIMON PROPERTY GROUP INC	SPG	91.000	15,654.73 17,704.71	172.03 194.56	605.15	3.87
91913V100 VALERO ENERGY CORPORATION	VLO	234.000	15,511.86 12,810.95	66.29 54.75	655.20	4.22
922042858 VANGUARD FTSE EMERGING MARKETS ETF	VWO	951.000	37,773.72 37,763.75	39.72 39.71	869.21	2.30
922908553 VANGUARD RUS FTF	VNQ	829.000	68,467.11 74,981.56	82.59 90.45	3,027.51	4.42
92343V104 VERIZON COMMUNICATIONS	VZ	501.000	24,423.75 24,278.72	48.75 48.46	1,157.31	4.74
949746101 WELLS FARGO COMPANY (NFW)	WFC	517.000	28,776.22 24,027.58	55.66 46.48	785.84	2.73
<b>* Total Equities</b>			<b>1,221,748.40 1,128,362.61</b>		<b>34,855.39 696.85</b>	<b>2.85</b>