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. ► Go to www.irs.gov/Form990PF for instructions and the latest information.

Departr	neni	of the Treasury				social security numbers on			2017
		dar year 2017 d	or tay year		o to www.	irs.gov/Form990PF for inst	, and ending	ormation.	Open to Public Inspection
		foundation	i lax year	nedimining	·	 	, and ending	A Employer identification	n number
11441111	5 01	loundation						M Employer Identification	n nombei
ΤPC	انالا(THOFF F	AMTT.V	FOUNT	атток	J		37-6474122	2
		nd street (or PO b					Room/suite	B Telephone number	
42	4	S WOOD	SMILL	ROAD	#325		325	314-336-05	560
	_	own, state or pro				postal code	1	C If exemption application is	
		STERFIE						, , , , , , , , , , , , , , , , , , , ,	(
G Ch	eck	all that apply:		Initial return		Initial return of a fo	ormer public charity	D 1. Foreign organization	s, check here
				Final return		Amended return		0 -	
				Address char	ige	Name change		Foreign organizations m check here and attach c	eeting the 85% test, omputation
H Ch	eck	type of organiza	ation:	X Section	501(c)(3) e	xempt private foundation	$_{\varrho} \psi$	E If private foundation sta	atus was terminated
	Se	ction 4947(a)(1)) nonexem	pt charitable t	rust 🔲	Other taxable private foundate	ation	under section 507(b)(1	
I Fair	ma	rket value of all	assets at e	end of year	Account	ing method: X Cash	Accrual	F If the foundation is in a	60-month termination
(fro	m P	art II, col. (c), lu	ne 16)		o	ther (specify)	<u>'</u>	under section 507(b)(1	
<u></u>					Part I, colui	mn (d) must be on cash basi	s.)		
Par	<u>t I</u>	Analysis of Re (The total of amo necessarily equa	evenue and ounts in colur of the amount	d Expenses mns (b), (c), and ts in column (a))	(d) may not	(a) Revenue and expenses per books	(b) Net investment income	(c) Adjusted net income	(d) Disbursements for charitable purposes (cash basis only)
	1	Contributions,	gifts, grant	s, etc., receive	:d	91,620.		N/A	
\setminus	2	Check	f the foundation	n is not required to a					
小	3	Interest on saving cash investments	s and tempo	orary		55.	55.		STATEMENT 1
· `	4	Dividends and	nterest fro	m securities		30,821.	30,821.		STATEMENT 2
3	5a	Gross rents							
B	b	Net rental income	or (loss) _						
e 🖂	6a	Net gain or (loss) to Gross sales price				<4,480.	<u> </u>		
<u>`</u>	Ь	assets on line 6a			<u>520.</u>				
MAY Revenue	7	Capital gain net in	•				0.		
	8	Net short-term		n		<u> </u>			
	9	Income modific Gross sales less r							
2	10a	and allowances	4	<u> </u>					
		Gross profit or			-			-	
Ø.	11	Other income	(1033)				<u> </u>	· · · · · · · · · · · · · · · · · · ·	
	12	Total. Add line	s 1 througi	h 11		118,016.	30,876.		
	13	Compensation of			etc	0.	0.		0.
- 1	14	Other employee							
		Pension plans,					K	CEIVED OI	
Ses	16a	Legal fees					S AP	2000 (2)	
E E	þ	Accounting fee	S		T 3	1,500.		R 1 6 2018 S	0.
Щ	C	Other profession	nal fees	STM	T 4	8,099.	8,7019-9-	TOEN LIT	0.
<u> [</u>	17	Interest						GDEN, UT	
# 1	18	Taxes			T 5	4,740.	0.		0.
inis	19	Depreciation ar	nd depletio	n			<u> </u>		
튛	20	Occupancy							
¥ 2	21	Travel, confere	· ·	meetings		ļ			
ā	22	Printing and pu							
	23 24	Other expenses Total operating		inietrativa					
era 1	-7	expenses Add	-			14,339.	8,099.		0.
ö,	25	Contributions,		-		156,500.	<u> </u>		156,500.
	26	Total expenses		-					
		Add lines 24 ar				170,839.	8,099.		156,500.
7	27	Subtract line 26		12:				-	
		Excess of revenue			ements	<52,823.	 >		
		Net investment					22,777.		
		Adjusted net in						N/A	

723501 01-03-18 LHA For Paperwork Reduction Act Notice, see instructions.

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JMH-P031

=	FOITHOFF FAMILIT FOUNDAT	Beginning of year		974122 Fayez
Par	Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only	(a) Book Value	(b) Book Value	(c) Fair Market Value
T_1	Cash - non-interest-bearing	1-1		
- 1	Savings and temporary cash investments	108,139.	294,696.	294,696.
	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			
ع <u>د</u>	Inventories for sale or use			
Assets	Prepaid expenses and deferred charges			
₹ 10	a Investments - U.S. and state government obligations			
	b Investments - corporate stock			
	c Investments - corporate bonds			
11	Investments - land, buildings, and equipment basis			
	Less accumulated depreciation			
12	Investments - mortgage loans			
13	Investments - other STMT 6	968,946.	729,566.	0.
14	Land, buildings, and equipment: basis			
	Less accumulated depreciation			
- 1	Other assets (describe)			
16	Total assets (to be completed by all filers - see the			224 525
	instructions. Also, see page 1, item I)	1,077,085.	1,024,262.	294,696.
1	Accounts payable and accrued expenses			
18	' '			
န္မ 19	Deferred revenue			
<u>ặ</u> 20	Loans from officers, directors, trustees, and other disqualified persons			
·	Mortgages and other notes payable			
7 22	Other liabilities (describe ►)			
99	Total liabilities (add lines 17 through 22)	0.	0.	
- 125	Foundations that follow SFAS 117, check here	0.		
	and complete lines 24 through 26, and lines 30 and 31.			
8 24	•	,		
E 25	, ·			
E 26	Permanently restricted			
2	Foundations that do not follow SFAS 117, check here			
교	and complete lines 27 through 31			
S 27		0.	0.	
왕 28		0.	0.	
¥ 29		1,077,085.	1,024,262.	
Net Assets or Fund Balances		1,077,085.	1,024,262.	
~				
31	Total liabilities and net assets/fund balances	1,077,085.	1,024,262.	
Par	t III Analysis of Changes in Net Assets or Fund B	alances		
1 To	al net assets or fund balances at beginning of year - Part II, column (a), line	30		
	ust agree with end-of-year figure reported on prior year's return)	- -	1	1,077,085.
	er amount from Part I, line 27a		2	<52,823.
	ier increases not included in line 2 (itemize)		3	0.
	d lines 1, 2, and 3	· · · · · · · · · · · · · · · · · · ·	4	1,024,262.
	creases not included in line 2 (itemize)		5	0.
	al net assets or fund balances at end of year (line 4 minus line 5) - Part II, co	olumn (b), line 30	6	1,024,262.
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191,304. 5 Multiply line 4 by line 3 5 228. Enter 1% of net investment income (1% of Part I, line 27b) 191,532. 7 Add lines 5 and 6 7 156,500. Enter qualifying distributions from Part XII, line 4

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.

_	990-PF (2017) POTTHOFF FAMILY FOUNDATION 37-64 rt VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 - se	74122 e instr	uctio	Page 4
1a	Exempt operating foundations described in section 4940(d)(2), check here and enter "N/A" on line 1.			
	Date of ruling or determination letter: (attach copy of letter if necessary-see instructions)			
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check here and enter 1%		4	56.
	of Part I, line 27b			
C	All other domestic foundations enter 2% of line 27b. Exempt foreign organizations, enter 4% of Part I, line 12, col. (b).			
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only; others, enter -0-)			0.
3	Add lines 1 and 2		4	56.
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only; others, enter -0-)			0.
5	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-		4	<u>56.</u>
6	Credits/Payments:	_		
a	2017 estimated tax payments and 2016 overpayment credited to 2017 6a 3,000.			
b	Exempt foreign organizations - tax withheld at source 6b 0.		_	
C	Tax paid with application for extension of time to file (Form 8868) 6c 6.			
d	Backup withholding erroneously withheld 6d 0.			
7	Total credits and payments. Add lines 6a through 6d		3,0	00.
8	Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached 8			0.
9	Tax due If the total of lines 5 and 8 is more than line 7, enter amount owed			
	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid		2,5	44.
11	Enter the amount of line 10 to be: Credited to 2018 estimated tax			0.
Pa	rt VII-A Statements Regarding Activities			
1a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in		Yes	No
	any political campaign?	1a		X
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes? See the instructions for the definition	_1b		_X_
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials published or			
	distributed by the foundation in connection with the activities.	ĺ	1	
C	Did the foundation file Form 1120-POL for this year?	1c		X
d	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year:		ĺ	ĺ
	(1) On the foundation. ▶ \$ 0 . (2) On foundation managers. ▶ \$ 0 .	ļ		
e	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation	- 1		
	managers. ▶ \$0 .			
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?	2		X
	If "Yes," attach a detailed description of the activities.])
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, or			
	bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes	3	<u> </u>	X
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	4a	ļ	X_
b	If "Yes," has it filed a tax return on Form 990-T for this year? N/A	4b		<u> </u>
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?	5_	<u> </u>	X
	If "Yes," attach the statement required by General Instruction T.			1
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either:			1
	By language in the governing instrument, or	1		ļ
	By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state law			
	remain in the governing instrument?	6	X	
7	Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col. (c), and Part XV	7	X	<u> </u>
		1		1
8a	Enter the states to which the foundation reports or with which it is registered. See instructions.	_		
	MO	_	1	
b	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate)			
	of each state as required by General Instruction G? If "No," attach explanation	8b	X	 _
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for calendar			- 5
	year 2017 or the tax year beginning in 2017? See the instructions for Part XIV. If "Yes," complete Part XIV	9	<u> </u>	$\frac{\mathbf{X}}{\mathbf{X}}$
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses	10		<u> </u>
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Pa	art VII-A Statements Regarding Activities (continued)			
			Yes	No
11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of			
	section 512(b)(13)? If "Yes," attach schedule. See instructions	11		_X_
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had advisory privileges?			
	If "Yes," attach statement. See instructions	12		X
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	X	
	Website address ► N/A			
14	The books are in care of ▶ JOHN HILLHOUSE Telephone no. ▶ 314 – 33	6-0	560	
	Located at ▶424 S WOODSMILL RD #325, CHESTERFIELD, MO ZIP+4 ▶63			
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - check here			
	and enter the amount of tax-exempt interest received or accrued during the year	N	/A	
16	At any time during calendar year 2017, did the foundation have an interest in or a signature or other authority over a bank,		Yes	No
	securities, or other financial account in a foreign country?	16		X
	See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes," enter the name of the			
	foreign country	1		
Pa	art VII-B Statements Regarding Activities for Which Form 4720 May Be Required			
	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.		Yes	No
1a	During the year, did the foundation (either directly or indirectly):		-	
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person?	ļ		
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from)			
	a disqualified person?	1		
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?	l		
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?			ļ
	(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)?	1		<u> </u>
	(6) Agree to pay money or property to a government official? (Exception. Check "No"			1
	if the foundation agreed to make a grant to or to employ the official for a period after			
	termination of government service, if terminating within 90 days.)	ĺ		1
h	of fany answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations			İ
Ī	section 53.4941(d)-3 or in a current notice regarding disaster assistance? See instructions N/A	1b		
	Organizations relying on a current notice regarding disaster assistance, check here			
,	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected	ł		}
·	before the first day of the tax year beginning in 2017?	10	ļ	X
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation			
-	defined in section 4942(j)(3) or 4942(j)(5)):	Ì	İ	
9	a At the end of tax year 2017, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning		1	
	before 2017?		İ	
	If "Yes," list the years	1		
b	Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2) (relating to incorrect	ļ	ł	ł
	valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer "No" and attach	ļ	}	
	statement - see instructions.) N/A	2b	l	L
c	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here.			
	>	ļ	ł	
38	a Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time]	}	ļ
	during the year?			
b	b If "Yes," did it have excess business holdings in 2017 as a result of (1) any purchase by the foundation or disqualified persons after	1	ĺ	1
	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	1	[1
	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,	ļ	[
	Form 4720, to determine if the foundation had excess business holdings in 2017.) N/A	3b	Ĺ	L_
4:	a Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a		X
	b Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that			
•	had not been removed from jeopardy before the first day of the tax year beginning in 2017?	4b		X
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Form **990-PF** (2017)

Total number of other employees paid over \$50,000

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Part VIII	Information About Officers, Directors, Trustees, Foundated Paid Employees, and Contractors (continued)	tion Managers, Highly	
3 Five highe	est-paid independent contractors for professional services. If none, enter	r "NONE."	
	(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
N	IONE		
			
_		_	
		_	
			
		\dashv	
Total number	of others receiving over \$50,000 for professional services		▶ 0
Part IX-A	Summary of Direct Charitable Activities		
List the found	ation's four largest direct charitable activities during the tax year. Include relevant statis	tical information such as the	Expenses
number of org	anizations and other beneficiaries served, conferences convened, research papers pro	duced, etc.	Expenses
1N	I/A		_
			_
2			-
			-
3			
·		- Am-	
4			
Part IX-B	Summary of Program-Related Investments		
	wo largest program-related investments made by the foundation during the tax year on	lines 1 and 2.	Amount
1 <u>N</u>	I/A		-
			-
2			1
· · ·			1
All other prog	ram-related investments. See instructions.		
3			
			1
		<u> </u>	-
			4
		<u> </u>	-
Total. Add lin	nes 1 through 3	<u>, </u>	0.

P	art X Minimum Investment Return (All domestic foundations must complete this part. Foreign four	ndation	s, see instructions)
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes:		
a		1a	1,481,090.
b		1b	
C		1c	
d	Total (add lines 1a, b, and c)	1d	1,481,090.
	Reduction claimed for blockage or other factors reported on lines 1a and		
	1c (attach detailed explanation) 1e 0.		
2	Acquisition indebtedness applicable to line 1 assets	2	0.
3	Subtract line 2 from line 1d	3	1,481,090.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions)	4	22,216.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	1,458,874.
6	Minimum investment return Enter 5% of line 5	6	72,944.
P	art XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations are foreign organizations, check here and do not complete this part.)	d certaii	n
1	Minimum investment return from Part X, line 6	1	72,944.
2a			
b	Income tax for 2017. (This does not include the tax from Part VI.)		
C	Add lines 2a and 2b	2c	<u>456.</u>
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	72,488.
4	Recoveries of amounts treated as qualifying distributions	4	0.
5	Add lines 3 and 4	5	72,488.
6	Deduction from distributable amount (see instructions)	6	0.
7_	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1	7	72,488.
F	Part XII Qualifying Distributions (see instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:	4.	156,500.
a		1a	130,300.
b	· · · · · · · · · · · · · · · · · · ·	1b 2	
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes		
3	Amounts set aside for specific charitable projects that satisfy the:		
	Suitability test (prior IRS approval required)	3a 3b	
b		4	156,500.
4	Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8; and Part XIII, line 4	├- *	130,300.
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment	5	0.
_	Income. Enter 1% of Part I, line 27b	6	156,500.
6	Adjusted qualifying distributions. Subtract line 5 from line 4 Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation of	<u>_</u>	
	4940(e) reduction of tax in those years.	quumos	TOT THE SOCIOTI

Part XIII Undistributed Income (see instructions)

				
	(a) Corpus	(b) Years prior to 2016	(c) 2016	(d)
1 Distributable amount for 2017 from Part XI,	Обіраз	rears prior to 2010	2010	2017
line 7				72,488.
2 Undistributed income, if any, as of the end of 2017				72, 400.
a Enter amount for 2016 only			0.	
b Total for prior years:		-		
		0.		
3 Excess distributions carryover, if any, to 2017:				
a From 2012 86,587.				
b From 2013 81 ,677.				_
c From 2014 98,379.				
d From 2015 67,933.				
e From 2016 75,780.				
f Total of lines 3a through e	410,356.	- <u></u>		
4 Qualifying distributions for 2017 from				
Part XII, line 4: ► \$ 156,500.				
a Applied to 2016, but not more than line 2a			0.	
b Applied to undistributed income of prior		0		
years (Election required - see instructions)		0.		
c Treated as distributions out of corpus	0.			
(Election required - see instructions) d Applied to 2017 distributable amount	0.			72,488.
	84,012.			12,400.
e Remaining amount distributed out of corpus	0.			0.
5 Excess distributions carryover applied to 2017 (If an amount appears in column (d), the same amount				<u></u>
must be shown in column (a)) 6 Enter the net total of each column as				
indicated below:	101 260			
& Corpus Add lines 3f, 4c, and 4e Subtract line 5	494,368.			
b Prior years' undistributed income. Subtract line 4b from line 2b		0.		
c Enter the amount of prior years'		- 0.		
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 2016. Subtract line				
4a from line 2a. Taxable amount - see instr.			0.	
f Undistributed income for 2017. Subtract				**************************************
lines 4d and 5 from line 1. This amount must				
be distributed in 2018				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 2012				
not applied on line 5 or line 7	86,587.			
9 Excess distributions carryover to 2018.				
Subtract lines 7 and 8 from line 6a	407,781.			
0 Analysis of line 9:				
a Excess from 2013 81,677.				
b Excess from 2014 98,379.				
c Excess from 2015 67,933.				
d Excess from 2016 75,780. e Excess from 2017 84,012.				
e Excess from 2017 84,012.				

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	F FAMILY FO				74122 Page 10
Part XIV Private Operating Fo			II-A, question 9)	N/A	
1 a If the foundation has received a ruling or					Ų
foundation, and the ruling is effective for	•	<u>-</u>	. ▶ ∟_	7 40 40 () (0)	
b Check box to indicate whether the found		ng foundation described	· · · · · · · · · · · · · · · · · · ·	4942(j)(3) or4	942(j)(5)
2 a Enter the lesser of the adjusted net	Tax year (a) 2017	(b) 2016	Prior 3 years (c) 2015	(d) 2014	/o) Total
income from Part I or the minimum	(a) 2017	(0) 2010	(6) 2013	(0) 2014	(e)-Total
investment return from Part X for		!			
each year listed			+		/
b 85% of line 2a			-		
c Qualifying distributions from Part XII,					
line 4 for each year listed		-		 	
d Amounts included in line 2c not					
used directly for active conduct of			1		
exempt activities				 /	
e Qualifying distributions made directly			1 ,	/	
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	wasties (Casasia	to this next entr	if the foundation	n had \$5 000 ar m	ore in eccets
Part XV Supplementary Info			ii the foundatio	n nad \$5,000 or m	ore in assets
 Information Regarding Foundation List any managers of the foundation who 		than 20% of the total cor	tributions received by th	ne foundation hefore the cl	oce of any tay
year (but only if they have contributed m			a ibutions received by ti	ie toutidation before the ch	ose of any tax
SEE STATEMENT 7	· · · · · · · · · · · · · · · · · · ·				
b List any managers of the foundation who	o own 10% or more of th	e stock of a corporation	(or an equally large por	tion of the ownership of a	partnership or
other entity) of which the foundation has			(or all oqually large po-	acir of the owner only of a p	a thoromp of
NONE					
2 Information Regarding Contributi	on. Grant. Gift. Loan.	Scholarship, etc., P	rograms:		
Check here ► X if the foundation o the foundation makes gifts, grants, etc.,	nly makes contributions	to preselected charitable	organizations and does		uests for funds. If
a The name, address, and telephone number					
a the name, address, and telephone num	on on cinan address of the	io person to whom appi	outons should be addit		
b The form in which applications should b	e submitted and informa	tion and materials they s	should include:		
c Any submission deadlines:					
d Any restrictions or limitations on awards	, such as by geographic	al areas, charitable fields	, kınds of ınstitutions. o	r other factors:	
,	, -, -, -, -, -, -, -, -, -, -, -, -, -,	,			
723601 01-03-18					Form 990-PF (2017)

Supplementary Information (continued) 3 Grants and Contributions Paid During the Year or Approved for Future Payment Recipient If recipient is an individual, Purpose of grant or contribution show any relationship to Foundation **Amount** status of any foundation manager Name and address (home or business) or substantial contributor recipient a Paid during the year 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 2,000. ST LOUIS MO 63106 JENSEN SCHMIDT TENNIS DOWN SYNDROME NONE PUBLIC CHARITY GENERAL PURPOSES 2822 WINTERGREEN DRIVE 3,000. FLORISSANT, MO 63033 NONE PUBLIC CHARITY GENERAL PURPOSES SHELDON CONCERT HALL 3648 WASHGINTON BLVD 3,000. ST LOUIS, MO 63108 ST PATRICKS CENTER PUBLIC CHARITY GENERAL PURPOSES NONE 800 NORTH TUCKER BLVD 5.000. ST LOUIS MO 63101-1000 SEE CONTINUATION SHEET(S) ▶ 3a 156 500 Total b Approved for future payment NONE Total **▶** 3b

Enter gross amounts unless otherwise indicated.	Unrelated business income		Exclu	ded by section 512, 513, or 514	(e)
	(a) Business	(b) Amount	(C) Exclu- sion	(d)	Related or exempt
1 Program service revenue:	code	Aniount	code	Amount	function income
a					
b			<u> </u>		
·	ļ				
d	ļ				
e	ļ		-		
· · · · · · · · · · · · · · · · · · ·			<u> </u>		
g Fees and contracts from government agencies					
2 Membership dues and assessments		<u> </u>			
3 Interest on savings and temporary cash			1 4		
investments 4 Dividends and interest from securities			14	55. 30,821.	
5 Net rental income or (loss) from real estate:	 -		14	30,041.	
a Debt-financed property	<u> </u>		-	· · · · · · · · · · · · · · · · · · ·	<u> </u>
b Not debt-financed property	-	 			
6 Net rental income or (loss) from personal			<u> </u>		
property					
7 Other investment income	<u> </u>	 			
8 Gain or (loss) from sales of assets other		 			
than inventory			14	<4,480.	
9 Net income or (loss) from special events				\ 4 ,400.	
10 Gross profit or (loss) from sales of inventory			_		
11 Other revenue:			_		
· · · · · · · · · · · · · · · · · · ·				,	
a b					
c					
d					
e					
12 Subtotal. Add columns (b), (d), and (e)		0.		26,396.	0.
13 Total. Add line 12, columns (b), (d), and (e)				13	
(See worksheet in line 13 instructions to verify calculations.)		·			
Part XVI-B Relationship of Activities to	the Acc	omplishment of Ex	emp	t Purposes	
· · · · · · · · · · · · · · · · · · ·					
Line No. Explain below how each activity for which income			contrib	outed importantly to the accon	plishment of
the foundation's exempt purposes (other than b	by providing tu	nas for such purposes).			
					
					
····					
					
				-	
		 	-		
			-	-	
					
					
		·			
					

723621 01-03-18

7 art Avii	Exempt Organ		31612 10 9	ind Transactions a	inu nerations	aniha saini Mot	icilaritable	,	
1 Did the o			of the following	ng with any other organizati	on described in sec	ction 501/c)		Yes	No
				g to political organizations?		3011 30 1(c)	}	103	100
	from the reporting found	•		- · -			j		
(1) Cash				gapa			1a(1)	1	X
(2) Othe							1a(2)		X
b Other tra									
(1) Sale	s of assets to a noncharita	ble exempt organizat	tion				1b(1)		x
	chases of assets from a no						1b(2)		X
(3) Rent	tal of facilities, equipment,	or other assets					1b(3)		X
(4) Rein	nbursement arrangements						1b(4)		X
(5) Loar	ns or Ioan guarantees						1b(5)		X
(6) Perf	ormance of services or me	embership or fundrai	sıng solıcıtatıc	ons			1b(6)		X
c Sharing (of facilities, equipment, ma	uling lists, other asse	ts, or paid em	ployees			1c	<u> </u>	X
d If the ans	wer to any of the above is	"Yes," complete the	following sche	edule. Column (b) should al	ways show the fair	market value of the g	goods, other ass	ets,	
				ed less than fair market val	ue in any transactio	on or sharing arrange	ment, show in		
	d) the value of the goods,								
(a) Line no	(b) Amount involved	(c) Name of		e exempt organization	(d) Description	on of transfers, transaction	ons, and sharing ar	rangeme	nts
		ļ	<u> N/A</u>						
		 							
		 							
				 					
						 _			
		 						-	
		 							
		 							
		 			+				
		 							
									
				· · · · · · · · · · · · · · · · · · ·					
					 				
									
									
2a Is the fou	indation directly or indirec	tly affiliated with, or r	elated to, one	or more tax-exempt organ	zations described				
	501(c) (other than section						Yes	\mathbf{x}] No
	omplete the following sch								
	(a) Name of org	janization		(b) Type of organization		(c) Description of re	lationship		
	N/A								
					<u> </u>				
				ig accompanying schedules and n taxpayer) is based on all inform			May the IRS	liscuss t	nis
Sign Here	(/-//	110	-p		· A	()	return with the shown below	? See ins	er str
 	Lauras	$\mathcal{A}/$		1//3//8	1 Kale	raf/	_ X Yes		JNo
Sig	nature of officer or trustee		1 -	Date /	Title	——————————————————————————————————————	87.11		
	Print/Type preparer(s.r/a	ime	Preparer's s	ignature (Date	ا تعما	PTIN		
Paid	70		D. MA	himaline	4/10/18	self- employed			
Preparer	JOHN M. HI		INCHW III	DA TIG	פיוטווו		P00389		
Use Only	Firm's name ► JOH	и и нтгг	MORE C	PA LLC		Firm's EIN > 2	u-U3432	49	
Joe Only	L	A C MOODC	MITT	D CIITME 20F		+			
		4 S WOODS ESTERFIEL		D SUITE 325		Dhana -a 21	1 226 0	E C O	
	LCH	<u> POLEKLIEP</u>	ען ,ע	02011		Phone no. 31	4-336-0 Form 99 0		
							101111334	\	1 / /

Part XV Supplementary Information				
3 Grants and Contributions Paid During the				
Recipient	If recipient is an individual, show any relationship to any foundation manager	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	or substantial contributor	recipient	CONTRIBUTION	
TRINITY LUTHERAN CHURCH	NONE	PUBLIC CHARITY	GENERALPURPOSES	
812 SOULARD ST				
ST LOUIS, MO 63104		 		5,000.
ALZHEIMERS ASSOCIATION OF ST LOUIS	NONE	PUBLIC CHARITY	GENERAL PURPOSES	
9370 OLIVE BLVD				2 000
ST LOUIS, MO 63132-3214		 		3,000.
				}
BACKSTOPPERS PO BOX 66927	NONE	PUBLIC CHARITY	GENERAL PURPOSES	
ST LOUIS, MO 63166				10,000.
HOWARD PARK CENTER	NONE	DIDITO CHARITY	GENERAL PURPOSES	
15834 CLAYTON RD	, TONE	FORDIC CHARTIT	SERENAL FUNFOULS	
ELLISVILLE, MO 63011				2,000.
			Į.	
USO OF MISSOURI	NONE	PUBLIC CHARITY	GENERAL PURPOSES	
PO BOX 10367				
ST LOUIS, MO 63145		 		3,000.
KIRKWOOD BAND BOOSTERS	NONE	PUBLIC CHARITY	GENERAL PURPOSES	
801 ESSEX				4 000
KIRKWOOD MO 63122				4,000.
	1			
MISSOURI BOTANICAL GARDENS PO BOX 299	NONE	PUBLIC CHARITY	GENERAL PURPOSES	
ST LOUIS, MO 63166				3,000.
RANKEN JORDAN HOME	NONE	PUBLIC CHARTTY	GENERAL PURPOSES	
11365 DORSETT RD	NONE	CHARTIT	SEMERAL FOR OSES	
MARYLAND HGTS, MO 63043		ļ		8,000.
SOUTHEAST MISSOURI UNIVERSITY	NONE	PUBLIC CHARITY	GENERAL PURPOSES	
ONE UNIVERSITY PLAZA MS 7300				
CAPE GIRARDEAU, MO 63701				3,000,
UNITED WAY OF GREATER ST LOUIS	NONE	PUBLIC CHARITY	GENERAL PURPOSES	
PO BOX 500280 ST LOUIS, MO 63150-0280				20.000
Total from continuation sheets				20,000. 141,500.

3 Grants and Contributions Paid During the				
Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager	Foundation status of	Purpose of grant or contribution	Amount
	or substantial contributor	recipient		
T LOUIS SYMPHONY	NONE	PUBLIC CHARITY		
718 N GRAND				
T LOUIS, MO 63108				5,0
POREST PARK FOREVER	NONE		CENTER A PURPOSE	
	NONE	PUBLIC CHARITY	GENERAL PURPOSE)
595 GRAND DRIVE IN FOREST PK				
T LOUIS, MO 63112				4,0
LUTHERAN ASSOCIATION FOR SPECIAL	NONE	PUBLIC CHARITY	GENERAL PURPOSES	
EDUCATION				
3558-S. JEFFERSON-AVE				
T LOUIS, MO 63118		 		10.0
ELEVEN POINT RIVER CONSERVANCY	NONE	PUBLIC CHARITY	GENERAL PURPOSES	
RR 1, BOX 1272				
ALTON, MO 65606				4,0
COCA	NONE	DVD IG GUADITHY	GENERAL PURPOSES	1
524 TRINITY AVE	NONE	PUBLIC CHARITI	GENERAL PURPOSES	
ST LOUIS, MO 63130				2.0
71 20015, No V313V				<u>,</u>
				•
KIRK CARE	NONE	PUBLIC CHARITY	GENERAL PURPOSES	
PO BOX 220652				2.0
(IRKWOOD, MO 63122-0652				2,0
1ADCO	NONE	PUBLIC CHARITY	GENERAL PURPOSES	
ONE UNIVERSITY BLVD 243 AAB				
ST LOUIS, MO 63121	-			3,0
NEW MUSIC CIRCLE	NONE	PUBLIC CHARITY	GENERAL PURPOSES	
560 TRINITY AVE				
INIVERSITY CITY, MO 63130		 		2,0
NSTITUTE OF AMERICA ACUPUNCTE AND	NONE	PUBLIC CHARITY	GENERAL PURPOSE	
LIFE MEDICINE				
43 N NEW BALLAS RD #224				
ST, LOUIS, MO 63141		 		2.0
AZZ FOUNDATION OF AMERICA	NONE	PUBLIC CHARTTY	GENERAL PURPOSE	
322 WEST 48TH STREET, 6TH FLOOR				
NEW YORK, NY 10036	<u></u>			2.0
Total from continuation sheets		·		

3 Grants and Contributions Paid During the			1	<u> </u>
Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager	Foundation status of	Purpose of grant or contribution	Amount
,	or substantial contributor	recipient		
OLD TOWNE ARTISAN STUDIO	NOVE		ASSESSED A DIPLOCATI	
	NONE	PUBLIC CHARITY	GENERAL PURPOSE	!
51105 AVENIDA VILLA SUITE 101 LA QUINTA, CA 92253				
A COINTA, CA 92233				6,0
NAMI ST. LOUIS	NONE	PUBLIC CHARITY	GENERAL PURPOSE	
750 S. BRENTWOOD BLVD, SUITE 511				
ST, LOUIS MO 63144				5,0
ST, LOUIS ZOO	NONE	PUBLIC CHARITY	GENERAL PURPOSE	
FOREST PARK ST. LOUIS, MO 63110				3,0
				·
OWIGHT DAVIS TENNIS CENTER	NONE	PUBLIC CHARITY	GENERAL PURPOSE	
5600 GRAND DR				
ST, LOUIS, MO 63112				2,0
FOOD OUTREACH	NONE	PUBLIC CHARITY	GENERAL PURPOSE	
3117 OLIVE				
ST LOUIS, MO 63103				5.0
ST VINCENT HOME FOR CHILDREN	NONE	PUBLIC CHARITY	GENERA PURPOSE	
7401 FLORISSANT RD ST LOUIS, MO 63121-4835			GENERA FORFOSE	3_0
51 10015, MO 03121 4033				
AMERICAN RED CROSS	NONE	PUBLIC CHARITY		
90 вох 37839				
SOONE, IA 50037				5,0
ALL HAND VOLUNTEERS	NONE	PUBLIC CHARITY		
5 COUNTY RD STE 6 MATTAPOISETT, MA 02735				5,0
ESTATE CANDLE , AND VEIOU		<u> </u>		
COLDWATER CONSERVATION FOUNDATION	NONE	PUBLIC CHARITY		
2144 RIDING TRAIL DR				
CHESTERFIELD, MO 63002		<u> </u>		5,0
GATEWAY OFF ROAD CYCLISTS	NONE	PUBLIC CHARITY		
673 WRENWYCK				_
VELDON SPRING, MO 63304 Total from continuation sheets	1		<u> </u>	3,0

3 Grants and Contributions Paid During the	e year (Continuation)	,		
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	or substantial contributor	recipient		Ainount
REVE COUER LIONS CLUB	NONE	PUBLIC CHARITY		
2031 LACKLAND ARYLAND HGTS, MO 63043				0.5/
MILLAND NGIS, NO 03043				2,50
		1		
		1		
				i
		 		
		1		
				li
				
		1		l
	,			
		 		
Total from continuation sheets				

	POTTHOFF FAMILY FOUNDATION Supplementary Information	<u> 37-6474122</u>
Part X∀	Supplementary Information	
3a Grants a	nd Contributions Paid During the Year Continuation of Purpose of Grant or Contribution	
NAME OF	RECIPIENT - FOOD OUTREACH	
GENERAL	PURPOSE	
GENERAL	PURPOSE	
		· · · · · · · · · · · · · · · · · · ·
		<u> </u>
		······

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. ► Go to www.irs.gov/Form990 for the latest information. OMB No 1545-0047

Name of the organizatio	n	Employer identification number
F	OTTHOFF FAMILY FOUNDATION	37-6474122
Organization type (check	cone):	
Filers of:	Section:	
Form 990 or 990-EZ	501(c)() (enter number) organization	
	4947(a)(1) nonexempt charitable trust not treated as a private foundation	
	527 political organization	
Form 990-PF	X 501(c)(3) exempt private foundation	
	4947(a)(1) nonexempt charitable trust treated as a private foundation	
	501(c)(3) taxable private foundation	
Note: Only a section 501(General Rule X For an organization property) from an Special Rules	in is covered by the General Rule or a Special Rule . (c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule, on filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling one contributor. Complete Parts I and II See instructions for determining a contributor on described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support	ig \$5,000 or more (in money or r's total contributions.
any one contribu) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a itor, during the year, total contributions of the greater of (1) \$5,000; or (2) 2% of the amo Z, line 1. Complete Parts I and II.	
year, total contri	on described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from butions of more than \$1,000 <i>exclusively</i> for religious, charitable, scientific, literary, or eduly for the foundation of animals. Complete Parts I, II, and III	•
year, contributioi is checked, entei purpose. Don't c	on described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from as exclusively for religious, charitable, etc., purposes, but no such contributions totaled reper the total contributions that were received during the year for an exclusively religious omplete any of the parts unless the General Rule applies to this organization because it ble, etc., contributions totaling \$5,000 or more during the year	nore than \$1,000 If this box s, charitable, etc.,
but it must answer "No" o	that isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (on Part IV, line 2, of its Form 990, or check the box on line H of its Form 990-EZ or on its f t 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) (2017)

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) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	GERALD POTTHOFF 643 EAST MONTROE ST KIRKWOOD, MO 63122	\$ 61,620.	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
2_	GERALD_POTTHOFF 643 EAST MONTROE ST KIRKWOOD, MO 63122	\$ 30,000.	Person X Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
3		\$	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
4		\$	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Oncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Oncash Complete Part II for noncash contributions)

Employer identification number

POTTHOFF FAMILY FOINDATION

_	OFF FAMILY FOUNDATION		-6474122
Part II	Noncash Property (see instructions) Use duplicate copies of P	art 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
1	1950 SHARESS GENERAL ELECTRIC		
į		\$ 61,620.	01/03/17
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		*	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
-			

ation			Employer identification number				
FAMILY FOUNDATION			37-6474122				
Exclusively religious, charitable, etc., contributhe year from any one contributor. Complete colur completing Part III, enter the total of exclusively religious, ch.	MNS (a) through (e) and the follo aritable, etc., contributions of \$1,000 o	WING line entry, For organization	or (10) that total more than \$1,000 fo				
(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is he					
	(e) Transfer of gif	ft					
Transferee's name, address, and 2	_		ansferor to transferee				
(b) Purpose of gift	(c) Use of gift	(d) Des	Description of how gift is held				
(e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee							
(b) Purpose of gift	(c) Use of gift	(d) Desc	cription of how gift is held				
Transferee's name, address, and 2	IP + 4	Helationship of tra	ansteror to transferee				
(b) Purpose of gift	(c) Use of gift	(d) Des	cription of how gift is held				
	(e) Transfer of gif	rt					
Transferee's name, address, and Z	(IP + 4	Relationship of transferor to transferee					
	Exclusively religious, charitable, etc., contributhe year from any one contributor. Complete columbination of the year from any one contributor. Complete columbination of the year from any one contributor. Complete columbination of the year from any one contributor. Complete columbination of the year from any one contributor. Complete columbination of the year of	PAMILY FOUNDATION Exclusively religious, charitable, etc., contributions to organizations describe the year from any one contributor. Complete columns (a) through (e) and the folic period of the total of exclusively religious, charitable, etc., contributions of \$1,000 or Use duplicate copies of Part III if additional space is needed (b) Purpose of gift (c) Use of gift (e) Transfer of gift (b) Purpose of gift (c) Use of gift (e) Transferee's name, address, and ZIP + 4 (b) Purpose of gift (c) Use of gift (e) Transferee's name, address, and ZIP + 4 (b) Purpose of gift (c) Use of gift (c) Use of gift (d) Use of gift (e) Transferee's name, address, and ZIP + 4 (b) Purpose of gift (c) Use of gift (d) Use of gift (e) Transferee's name, address, and ZIP + 4	Exclusively religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8), che year from any one contributor. Complete columns (a) through (e) and the following line entry. For organizations properties and the section of the year (filter this and one before the year (filter this and one bed duplicate copies of Part III if additional space is needed (b) Purpose of gift (c) Use of gift (d) Des (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transfer of gift (e) Transfer of gift (f) Purpose of gift (e) Transfer of gift (e) Transfer of gift (f) Des (h) Purpose of gift (h) Purpose of gift (c) Use of gift (d) Des (e) Transfer of gift (f) Des (h) Purpose of gift				

FORM 990-PF INTERE	ST ON SAVI	NGS A	ND TEM	PORAR	Y CASH	IN	VESTMENTS	ST.	ATEMENT	1
SOURCE			(A) REVENUE NE PER BOOKS		NET	(B) NET INVESTMENT INCOME		(C) ADJUSTED NET INCOME		3
AMERITRADE				55	•		55.			
TOTAL TO PART I, LI	NE 3			55	 · = ===		55.			
FORM 990-PF	DIVIDEND	S AND	INTER	EST F	ROM SEC	CUR	ITIES	ST	ATEMENT	2
SOURCE	GROSS AMOUNT	(APITAL GAINS VIDEND]	— (-A-)— REVENUI ER BOOR	3	NET INVES		ADJUSTI NET INC	
AMERITRADE	30,821			0.	30,82	21.	30,82	1.		
TO PART I, LINE 4	30,821			0. =	30,82	21.	30,82	1.		
FORM 990-PF		ACC	COUNTI	NG FE	ES			ST	ATEMENT	3
DESCRIPTION		EXPE	A) NSES BOOKS	NET :	(B) INVEST- INCOM		(C) ADJUSTED NET INCOM		(D) CHARITAI PURPOSI	
TAX RETURN PREPARAT	ION		1,500.		(<u> </u>				0.
TO FORM 990-PF, PG	1, LN 16B =		1,500.		(). ====================================		— : = :		0.
FORM 990-PF	0	THER I	PROFES	SIONA	FEES			ST	ATEMENT	4
DESCRIPTION		EXPE	A) NSES BOOKS	NET :	(B) INVEST- INCOME		(C) ADJUSTED NET INCOM		(D) CHARITAI PURPOSI	
INVESTMENT MGT FEES		8	3,099.		8,099	- -				0.
TO FORM 990-PF, PG	1 IN 16C		3,099.		8,099					0.

FORM 990-PF	XAT	ES		STATEMENT	5
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOM		
EXCISE TAXES	4,740.	0.			0.
TO FORM 990-PF, PG 1, LN 18	4,740.	0.			0.
FORM 990-PF	990-PF OTHER INVESTMENTS			STATEMENT	6
DESCRIPTION			VALUATION METHOD	BOOK VAL	TE.
SEE ATTACHED			OST	729,5	
TOTAL TO FORM 990-PF, PART II, LINE 13				729,5	66.
					
FORM 990-PF	PART XV - L OF FOUNDATI			STATEMENT	7

NAME OF MANAGER

GERALD A POTTHOFF JUDITH POTTHOFF