Form **990-PF**

Return of Private Foundation

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

OMB No. 1545-0052

Department of the Treasury Internal Revenue Service

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

Open to Public Inspection

For	calend	dar year 2016 or tax year beginning	and ending				
Na	me of fo	pundation			A Empl	oyer identification number	
		ZLER FOUNDATION, INC			55	-0783635	
		d street (or P.O. box number if mail is not delivered to street address)	Ro	om/suite	B Telepi	nane number (see instructions)
		BELLA VISTA DR.			30	<u>4-345-5667</u>	
	IEN.	n, state or province, country, and ZIP or foreign postal code			C If exe	mption application is pending,	check here

(G (Jneck :	F-1 F-1	n of a former public cha	arity	D 1. Fo	reign organizations, check her	е 🛚
		Final return Amended	return			preign organizations meeting th	
		Address change Name cha	-		85	% test, check here and attach	computation []
H	Check	type of organization: X Section 501(c)(3) exempt private	foundation		E If priva	ate foundation status was term	inated under
	Section	n 4947(a)(1) nonexempt charitable trust Other taxable	e private foundation		section	n 507(b)(1)(A), check here	0
J F	air mar	rket value of all assets at J Accounting method:	X Cash Accr	ual	F If the	foundation is in a 60-month ter	mination
e	nd of y	rear (from Part II, col. (c), Other (specify)				section 507(b)(1)(B), check he	
lir	ie 16)	▶ \$ 1,434,853 (Part I, column (d) must I	be on cash basis.)				
P	art I	Analysis of Revenue and Expenses (The total of	(a) Revenue and				(d) Disbursements
		amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a) (see instructions).)	expenses per books	(b) Net inv incon		(c) Adjusted net income	for charitable purposes
	Τ.	***************************************		14.1 4			(cash basis only)
	1	Contributions, gifts, grants, etc., received (attach schedule)	20,656	75.0 %			
	2	Check ▶ ☐ if the foundation is not required to attach Sch. B				2000	
	3	Interest on savings and temporary cash investments	417		417		
	4	Dividends and interest from securities	30,667		30,667		
	5a	Gross rents					
<u>ە</u>	b	Net rental income or (loss)					
Revenue	6a	Net gain or (loss) from sale of assets not on line 10	35,271				
Š	b	Gross sales price for all assets on line 6a 158,492					
ď	7	Capital gain net income (from Part IV, line 2)			35,271		
	8	Net short-term capital gain				0	
	9	Income modifications			·		:
	10a	Gross sales less returns and allowances					N. 5
	b	Less: Cost of goods sold					
	¢	Gross profit or (loss) (attach schedule)					
	11	Other income (attach schedule) STMT 1	-1,566				
	12	Total. Add lines 1 through 11	85,445		66,355	0	
(0	13	Compensation of officers, directors, trustees, etc.	0				
Expenses	14	Other employee salaries and wages					·······
Ë	15	Pension plans, employee benefits					
욧	16a	Legal fees (attach schedule)					
	b	Accounting fees (attach schedule) STMT 2	2,060	***************************************			***
trative	С	Other professional fees (attach schedule)					
₹	17	Interest		····			
	18	Taxes (attach schedule) (see instructions) STMT 3	326		301		
Ē	19	Depreciation (attach schedule) and depletion					141/141/14161.3si
ᇦ	20	Occupancy					
⋖	21	Travel, conferences, and meetings					
and Adminis	22	Printing and publications					
	23	Other expenses (att. sch.) STMT 4	1,299		150		
Ę,	24	Total operating and administrative expenses.		· · · · · · · · · · · · · · · · · · ·			
rat	- '	And Fare 40 House ob 60	3,685		451	0	0
Operating	25	Add lines 13 through 23 Contributions, gifts, grants paid	50,450				50,450
0	26	Total expenses and disbursements. Add lines 24 and 25	54,135		451	0	50,450
	27	Subtract line 26 from line 12:	24, 433		x	- V	30,430
	a	Excess of revenue over expenses and disbursements	31,310		ļ		
	b	Net investment income (if negative, enter -0-)	34,310		55,904		
	c	Adjusted net income (if negative, enter -0-)			73,904	0	TOUR AND AND ADDRESS
	, ,	- riojected net mechie in negative, cinci -c-1,	. 1		1	ı UI	化二十二烷 化乙烷 电电子设置电路 电复电路 医电路 医电路电路 电二

	Part I	Balance Sheets Attached schedules and amounts in the description column should be for end-of-war amounts only. (See instructions.)	Beginning of year	End o	year
_		Stocks be to this by year amounts only. (obb managements.)	(a) Book Value	(b) Book Value	(c) Fair Market Value
	1	Cash - non-interest-bearing	369	360	360
	2	Savings and temporary cash investments	23,846	93,831	93,831
	3	Accounts receivable ▶			:
		Less: allowance for doubtful accounts ▶			
	4	Pledges receivable ▶			
		Less: allowance for doubtful accounts ▶			
	5	Grants receivable			
	6	Receivables due from officers, directors, trustees, and other			
		disqualified persons (attach schedule) (see			
		instructions)			
	7	Other notes and loans receivable (att. schedule)	1000		
1		Less: allowance for doubtful accounts ▶ 0			
S	8	Inventories for sale or use			
Assets	9	Prepaid expenses and deferred charges			
Αs	10a	Investments – U.S. and state government obligations (attach schedule)			
ı	b	Investments - corporate stock (attach schedule) SEE STMT 5	127,082	115,377	202,511
ı	С	Investments - corporate bonds (attach schedule) SEE STMT 6	75,000	75,000	23,700
	11	Investments – land, buildings, and equipment: basis			
		Less: accumulated depreciation (attach sch.) ▶			
	12	Investments - mortgage loans			
	13	Investments - other (attach schedule) SEE STATEMENT 7	1,030,588	988,458	1,114,451
	14	Land, buildings, and equipment: basis ▶		1975.27	
Į		Less: accumulated depreciation (attach sch.) ▶			
	15	Other assets (describe ▶)			
	16	Total assets (to be completed by all filers – see the			
		instructions. Also, see page 1, item I)	1,256,885	1,273,026	1,434,853
٦	17	Accounts payable and accrued expenses			3 40 43 434 44
	18	Oranda in a circle la			
S	19	Poferred reserves			
iabilities	20	Loans from officers, directors, trustees, and other disqualified persons			
ab.	21	Mortgages and other notes payable (attach schedule)			
ات	22	Control of the Contro			
	23	Other liabilities (describe ►) Total liabilities (add lines 17 through 22)	0	0	
		Foundations that follow SFAS 117, check here			
ı,n		and complete lines 24 through 26 and lines 30 and 31.			
ë	24				
Fund Balances	25				
Ba	26	Temporarily restricted Permanently restricted			
ē	20	Foundations that do not follow SFAS 117, check here			
Ī		and complete lines 27 through 31.			
ō	27				
Assets or					
SSE	28	Paid-in or capital surplus, or land, bldg., and equipment fund	1,256,885	1,273,026	
Ä	29	Retained earnings, accumulated income, endowment, or other funds	1,256,885		
Net	30	Total net assets or fund balances (see instructions)	1,230,663	1,273,026	
_	31	Total liabilities and net assets/fund balances (see	1,256,885	1,273,026	
_	Dowt 1	instructions)	1,230,003	1,2/3,020	anne a come a come a come de deces de come
	Part II		aroo with		*
1		net assets or fund balances at beginning of year - Part II, column (a), line 30 (must a			1 356 005
_		f-year figure reported on prior year's return)		1 - 1	1,256,885
		amount from Part I, line 27a			31,310
		increases not included in line 2 (itemize) ▶			1 200 105
		nes 1, 2, and 3 eases not included in line 2 (itemize) ► SEE STATEMENT 8		4	1,288,195
5		pases not included in line 2 (itemize) ► SEE STATEMENT 8 Iner assets or fund balances at end of year (line 4 minus line 5) – Part II. column (b).	lino 20	5	15,169
0	i iotal	DELASSES DE LUID GALADORS AL RIO DE VRAE BIDR 4 HUBLIS BRO 51 - MAIT IL COLUMN (D)	DESC! OU	i h l	J. Z. J. J. UZ D

Part IV Capital Gains a	nd Losses for Tax on Investme	nt Income				
	cribe the kind(s) of property sold (e.g., real estate, arehouse; or common stock, 200 shs_MLC Co.)		(b) How acquired P - Purchase D - Donation	(c) Date (mo., d	acquired day, yr.)	(d) Date sold (mo., day, yr.)
1a PUBLICLY TRADED	SECURITES		P			
b PARTNERS GROUP	PRIVATE EQUITY, LLC		P	05/1	1/12	05/06/16
c PARTNERS GROUP						
d ML ACCOUNT #668	3-04A79				***************************************	
е						
(e) Gross sales price	(f) Depreciation allowed (or allowable)		r other basis ense of sale			or (loss)) minus (g)
a 51,119			51,487	***************************************		-368
b 71,623			71,734			-111
c 15,779						15,779
d 19,971						19,971
е						
Complete only for assets showing	gain in column (h) and owned by the four	dation on 12/31/69			(I) Gaine (Col	(h) gain minus
(i) F.M.V. as of 12/31/69	(j) Adjusted basis as of 12/31/69		ss of col. (i) I. (j), if any		oi. (k), but not	less than -0-) or om col. (h))
a						-368
b						-111
C						15,779
d						19,971
е						
2 Capital gain net income or (net ca	If gain, also enter in F If (loss), enter -0- in F			2		35,271
3 Net short-term capital gain or (los)	s) as defined in sections 1222(5) and (6):					
,	column (c) (see instructions). If (loss), enti-	er =0 in				
Part I, line 8	column (c) (occ managione). If (local), cita	31 0 111		3		
**************************************	ider Section 4940(e) for Reduce	d Tay on Net	Investment Incor			· · · · · · · · · · · · · · · · · · ·
	s part blank. on 4942 tax on the distributable amount of fy under section 4940(e). Do not complete		se period?			Yes X No
1 Enter the appropriate amount in e	ach column for each year, see the instruc	ions before making	any entries.			
(a) Base period years Calendar year (or tax year beginning in)	(b) Adjusted qualifying distributions	Net valu	(c) ue of noncharitable-use asset	5		(d) ribution ratio divided by col. (c))
2015	73	,201	1,368,3	355		0.053496
2014	62	,850	1,414,3	358		0.044437
2013	77	,607	1,307,	228		0.059368
2012	64	,870	1,229,	501		0.052757
2011	71	,972	1,218,	385		0.059072
2 Total of line 1, column (d)				2		0.269130
5	-year base period – divide the total on line as been in existence if less than 5 years			3		0.053826
4 Enter the net value of noncharitab	le-use assets for 2016 from Part X, line 5			4		1,336,853
5 Multiply line 4 by line 3				5		71,957
6 Enter 1% of net investment incom	e (1% of Part I, line 27b)			6		659
7 Add lines 5 and 6				7		72,616
8 Enter qualifying distributions from If line 8 is equal to or greater than	Part XII, line 4 line 7, check the box in Part VI, line 1b, a			See the		50,450
Part VI instructions.		,	_	····		
						Form 990-PF (2016)

Form 990-PF (2016)

P	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		Х
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		Х
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application? Website address WWW.DEITZLER.COM	13	Х	
14	The books are in care of ▶ HARRY G. DEITZLER Telephone no. ▶ 304-	345-	566	7
	149 BELLA VISTA DR	· · · · · · · · · · · · · · · · · · ·		
	Located at ▶ VIENNA	5		
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - Check here	Ť		· · ·
	and enter the amount of tax-exempt interest received or accrued during the year			
16	At any time during calendar year 2016, did the foundation have an interest in or a signature or other authority		Yes	No
	over a bank, securities, or other financial account in a foreign country?	16		X
	See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes," enter the name of	1		
	the foreign country ▶			1, 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.	1 1 1 1 1	Yes	Νo
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?			
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a			
	disqualified person? Yes X No			X.
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?			
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?			
	(5) Transfer any income or assets to a disqualified person (or make any of either available for			i i
	the benefit or use of a disqualified person)?			
	(6) Agree to pay money or property to a government official? (Exception. Check "No" if the	1		1.
	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.)		1	
b	If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations		- 1	- 1
	section 53.4941(d)-3 or in a current notice regarding disaster assistance (see instructions)?	1b		
	Organizations relying on a current notice regarding disaster assistance check here			
С	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that		1	
_	were not corrected before the first day of the tax year beginning in 2016?	1c		<u> X</u>
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private			i ()
	operating foundation defined in section 4942(j)(3) or 4942(j)(5)):			
а	At the end of tax year 2016, did the foundation have any undistributed income (lines 6d and		1	- 57A - 11A
	6e, Part XIII) for tax year(s) beginning before 2016? Yes X No			- Al
h	If "Yes," list the years ≥ 20 , 20 , 20 , 20		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 valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to			
	all years listed, answer "No" and attach statement — see instructions.) N/A	2.	- 1 - 2 - 4	
С	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here.	2b	383	63.65
•	≥ 20, 20	N.		
3a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise			
-	at any time during the year?	N.13		
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		I	4
	the 10-, 15-, or 20-year first phase holding period? (Use Schedule C, Form 4720, to determine if the			
	foundation had excess business holdings in 2016.) N/A	3b		
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a		Х
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?	4b		X
		Form 99	0-PF	

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

Total. Add lines 1 through 3

	art X Minimum Investment Return (All domestic foundations must complete this part. Foreign	found	Page i
	see instructions.)	, louisu	ations,
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc.,		
	purposes:		
а	Average monthly fair market value of securities	1a	1,285,943
b	Average of monthly cash balances	1b	71,268
С	Fair market value of all other assets (see instructions)	1c	(
d	Total (add lines 1a, b, and c)	1d	1,357,211
е	Reduction claimed for blockage or other factors reported on lines 1a and	10.1	
	1c (attach detailed explanation) 1e 0	A 4	
2	Acquisition indebtedness applicable to line 1 assets	2	C
3	Subtract line 2 from line 1d	3	1,357,211
4	Cash deemed held for charitable activities. Enter 11/2% of line 3 (for greater amount, see		
	instructions)	4	20,358
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	1,336,853
6	Minimum investment return. Enter 5% of line 5	6	66,843
Pa	art XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating f	oundati	ons
	and certain foreign organizations check here ▶ and do not complete this part.)		
1	Minimum investment return from Part X, line 6	1	66,843
2a	Tax on investment income for 2016 from Part VI, line 5 2a 1,318		
b	Income tax for 2016. (This does not include the tax from Part VI.)		
С	Add lines 2a and 2b	2c	1,318
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	65,525
4	Recoveries of amounts treated as qualifying distributions	4	
5	Add lines 3 and 4	5	65,525
6	Deduction from distributable amount (see instructions)	6	
7	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII,		
	line 1	7	65,525
D-	nrt XII Qualifying Distributions (see instructions)		
Гс	TEAN Quanying Distributions (see instructions)		
1	Amounts paid (including administrative expenses) to accomptish charitable, etc., purposes:		
а	Expenses, contributions, gifts, etc total from Part I, column (d), line 26	1a	50,450
b	Program-related investments – total from Part IX-B	1b	
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc.,		
	purposes	2	
3	Amounts set aside for specific charitable projects that satisfy the:		
а	Suitability test (prior IRS approval required)	3a	
b	Cash distribution test (attach the required schedule)	3b	
4	Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4	4	50,450
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income.		
	Enter 1% of Part I, line 27b (see instructions)	5	0
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	50,450
	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.		

_P	art XIII Undistributed Income (s	see instructions)	· · · · · · · · · · · · · · · · · · ·			
1	Distributable amount for 2016 from Part XI,		(a) Corpus	(b) Years prior to 2015	(c) 2015	(d) 2016
	line 7		\\.		A, Chiav.	65,525
2	Undistributed income, if any, as of the end of				17	
a	Enter amount for 2015 only					
b	Total for prior years: 20, 20	, 20				
3	Excess distributions carryover, if any, to 201					
а	From 2011	7,515				
b	From 2012	4,386				
С	From 2013	13,282				
d	From 2014					
	From 2015	5,881	1.11.			
			31,064		1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	THE CARLANDERS
4	Qualifying distributions for 2016 from Part XI	ſ,				
	line 4: ▶ \$50,450				and the second	
	Applied to 2015, but not more than line 2a					
b	Applied to undistributed income of prior years	S				
	(Election required – see instructions)		1/1 - 1/2 - 1/2			
С	Treated as distributions out of corpus (Election	on		174,154,254		
				***************************************		1.3
	Applied to 2016 distributable amount					50,450
	Remaining amount distributed out of corpus					1000000
5	Excess distributions carryover applied to 201		15,075			15,075
	(If an amount appears in column (d), the san	ne				
_	amount must be shown in column (a).)			٠.	the district	
6	Enter the net total of each column as					
	indicated below:	_	15 000	, N		
	Corpus. Add lines 3f, 4c, and 4e. Subtract lin	e 5	15,989			
a	Prior years' undistributed income. Subtract					
_	line 4b from line 2b					
C	Enter the amount of prior years' undistributed]				
	income for which a notice of deficiency has					
	been issued, or on which the section 4942(a)	,				
٦,	tax has been previously assessed			****		
u	Subtract line 6c from line 6b. Taxable					
	amount – see instructions Undistributed income for 2015. Subtract line					
е	4a from line 2a, Taxable amount – see					
	instructions					
f	Undistributed income for 2016. Subtract lines					
'	4d and 5 from line 1. This amount must be	,				
	distributed in 2017				THE STATE OF THE S	0
7	Amounts treated as distributions out of corpu	1				
	to satisfy requirements imposed by section					
	170(b)(1)(F) or 4942(g)(3) (Election may be					
	required—see instructions)					
8	Excess distributions carryover from 2011 not				1 A A	1000
-	applied on line 5 or line 7 (see instructions)					
9	Excess distributions carryover to 2017.			:		
	Culatrant lines 7 and 0 from line Co		15,989		1 14 V	
0	Analysis of line 9:					ALC ARRIVAL
а	Excess from 2012					
b	Excess from 2013	10,108				
С	Excess from 2014					
ď	Excess from 2015	5,881				
е	Excess from 2016	,				

1a	If the foundation has received a ruling or				3)	
14	foundation, and the ruling is effective for 2			3		
b	Check box to indicate whether the foundation				40.40(3)(3)	
2a	Enter the lesser of the adjusted net	Tax year	ung loundation describe		4942(j)(3) or 49	42(j)(5)
20	income from Part I or the minimum	(a) 2016	(b) 2015	Prior 3 years (c) 2014	(-1) 2042	(e) Total
	investment return from Part X for	(a) 2010	(b) 2010	(0) 2014	(d) 2013	
					Ì	
h	each year listed					
b	85% of line 2a		<u> </u>			
С	Qualifying distributions from Part XII,					
	line 4 for each year listed					
d	Amounts included in line 2c not used directly					
	for active conduct of exempt activities					
е	Qualifying distributions made directly					
	for active conduct of exempt activities.					
_	Subtract line 2d from line 2c					
3	Complete 3a, b, or c for the					
	alternative test relied upon:					
а	"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					
Pa	rt XV Supplementary Inform	ation (Complete	this part only if the	ne foundation ha	d \$5,000 or more	in assets at
	any time during the ye	ear – see instruc	tions.)			
1	Information Regarding Foundation Mai	nagers:				
а	List any managers of the foundation who h	nave contributed more	than 2% of the total cou	ntributions received by	the foundation	
	before the close of any tax year (but only i	f they have contributed	d more than \$5,000). (S	ee section 507(d)(2).)		
	KATHE DEITZLER					\$20,656
b	List any managers of the foundation who o	wn 10% or more of th	e stock of a corporation	(or an equally large p	ortion of the	
	ownership of a partnership or other entity)					
	NONE		_			
2	Information Regarding Contribution, Gr	rant, Gift, Loan, Sch	olarship, etc., Progran	15:		
	Check here ▶ X if the foundation only				es not accept	
	unsolicited requests for funds. If the found					
	other conditions, complete items 2a, b, c, a			,		
а	The name, address, and telephone number	~	the person to whom an	plications should be a	ddressed:	
	N/A			F		
b	The form in which applications should be s	submitted and informat	tion and materials they	should include:		
	N/A			mode.		
С	Any submission deadlines:					
_	N/A					
d	Any restrictions or limitations on awards, s	uch as by generanbio	al areas charitable fields	kinds of institutions	or other	
••	factors:	our as by geographica	ar areas, criatitable fields	, kinds of institutions,	G. Other	
	N/A					
)AA						Form 990-PF (2016
						FURIN JJUSE 1 (2016

Part XV Supplementary Information (co	ontinued)			rage i
3 Grants and Contributions Paid During the	Year or Approved for F	uture Payment		
Recipient	If recipient is an individual, show any relationship to	Foundation	Purpose of grant or	
Name and address (home or business)	any foundation manager or substantial contributor	status of recipient	contribution	Amount
a Paid during the year SEE STATEMENT 9				
				50,45
Total			> 3a	50,450
b Approved for future payment N/A				30,130
Total			▶ 3b	

	amounts unless otherwise indicated.	Unrelated	business income	Excluded	d by section 512, 513, or 514	
1 Program	service revenue:	(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	(e) Related or exempt function income (See instructions.)
-				-		(Gee manacions.)
				-		
d				-		
е						
f			······································			
	s and contracts from government agencies	<u> </u>				
2 Members	ship dues and assessments					
3 Interest of	on covings and toppositions and investments			14	417	
4 Dividend:	s and interest from securities			14	30,667	
5 Net renta	al income or (loss) from real estate:	10.00		1	30,007	
	figurated property					
	debt-financed property					, <u>,</u>
6 Net renta	al income or (loss) from personal property					
7 Other inv	vestment income			-		
8 Gain or (loss) from sales of assets other than inventory			18	-479	35,750
	ma or (lace) from enocial events			1 3 0	- 7 7 7	33,730
	ofit or (loss) from sales of inventory			1		
11 Other rev	venue: a			1	······································	
	TNERS GROUP K-1			1	-1,566	
-				1- -	1,300	
				- 		
е				1 1		
е	Add columns (b), (d), and (e)				29.039	35 750
e	Add columns (b), (d), and (e)	L.,L.,		·	29,039	35,750 64 789
e	Add columns (b), (d), and (e)	L.,L.,		·		35,750 64,789
e	Add columns (b), (d), and (e) dd line 12, columns (b), (d), and (e) set in line 13 instructions to verify calculations.)			- 	13	
12 Subtotal. 13 Total. Ac (See workshe Part XVI Line No.	Add columns (b), (d), and (e) dd line 12, columns (b), (d), and (e) eet in line 13 instructions to verify calculations.) Relationship of Activities to the Act Explain below how each activity for which income is	complishme	nt of Exempt P	urposes contribute	13	
e	Add columns (b), (d), and (e) dd line 12, columns (b), (d), and (e) set in line 13 instructions to verify calculations.) -B Relationship of Activities to the Activities	complishme	nt of Exempt P	urposes contribute	13	
e	Add columns (b), (d), and (e) dd line 12, columns (b), (d), and (e) eet in line 13 instructions to verify calculations.) Relationship of Activities to the Act Explain below how each activity for which income is	complishme	nt of Exempt P	urposes contribute	13	
e	Add columns (b), (d), and (e) dd line 12, columns (b), (d), and (e) eet in line 13 instructions to verify calculations.) Relationship of Activities to the Act Explain below how each activity for which income is	complishme	nt of Exempt P	urposes contribute	13	
e	Add columns (b), (d), and (e) dd line 12, columns (b), (d), and (e) eet in line 13 instructions to verify calculations.) Relationship of Activities to the Act Explain below how each activity for which income is	complishme	nt of Exempt P	urposes contribute	13	
e	Add columns (b), (d), and (e) dd line 12, columns (b), (d), and (e) eet in line 13 instructions to verify calculations.) Relationship of Activities to the Act Explain below how each activity for which income is	complishme	nt of Exempt P	urposes contribute	13	
e	Add columns (b), (d), and (e) dd line 12, columns (b), (d), and (e) eet in line 13 instructions to verify calculations.) Relationship of Activities to the Act Explain below how each activity for which income is	complishme	nt of Exempt P	urposes contribute	13	
e	Add columns (b), (d), and (e) dd line 12, columns (b), (d), and (e) eet in line 13 instructions to verify calculations.) Relationship of Activities to the Act Explain below how each activity for which income is	complishme	nt of Exempt P	urposes contribute	13	
e	Add columns (b), (d), and (e) dd line 12, columns (b), (d), and (e) eet in line 13 instructions to verify calculations.) Relationship of Activities to the Act Explain below how each activity for which income is	complishme	nt of Exempt P	urposes contribute	13	
e	Add columns (b), (d), and (e) dd line 12, columns (b), (d), and (e) eet in line 13 instructions to verify calculations.) Relationship of Activities to the Act Explain below how each activity for which income is	complishme	nt of Exempt P	urposes contribute	13	
e	Add columns (b), (d), and (e) dd line 12, columns (b), (d), and (e) eet in line 13 instructions to verify calculations.) Relationship of Activities to the Act Explain below how each activity for which income is	complishme	nt of Exempt P	urposes contribute	13	
12 Subtotal. 13 Total. Ac (See workshe Part XVI. Line No.	Add columns (b), (d), and (e) dd line 12, columns (b), (d), and (e) eet in line 13 instructions to verify calculations.) Relationship of Activities to the Act Explain below how each activity for which income is	complishme	nt of Exempt P	urposes contribute	13	
e	Add columns (b), (d), and (e) dd line 12, columns (b), (d), and (e) eet in line 13 instructions to verify calculations.) Relationship of Activities to the Act Explain below how each activity for which income is	complishme	nt of Exempt P	urposes contribute	13	
e	Add columns (b), (d), and (e) dd line 12, columns (b), (d), and (e) eet in line 13 instructions to verify calculations.) Relationship of Activities to the Act Explain below how each activity for which income is	complishme	nt of Exempt P	urposes contribute	13	
e	Add columns (b), (d), and (e) dd line 12, columns (b), (d), and (e) eet in line 13 instructions to verify calculations.) Relationship of Activities to the Act Explain below how each activity for which income is	complishme	nt of Exempt P	urposes contribute	13	
e	Add columns (b), (d), and (e) dd line 12, columns (b), (d), and (e) eet in line 13 instructions to verify calculations.) Relationship of Activities to the Act Explain below how each activity for which income is	complishme	nt of Exempt P	urposes contribute	13	
e	Add columns (b), (d), and (e) dd line 12, columns (b), (d), and (e) eet in line 13 instructions to verify calculations.) Relationship of Activities to the Act Explain below how each activity for which income is	complishme	nt of Exempt P	urposes contribute	13	
e	Add columns (b), (d), and (e) dd line 12, columns (b), (d), and (e) eet in line 13 instructions to verify calculations.) Relationship of Activities to the Act Explain below how each activity for which income is	complishme	nt of Exempt P	urposes contribute	13	
e	Add columns (b), (d), and (e) dd line 12, columns (b), (d), and (e) eet in line 13 instructions to verify calculations.) Relationship of Activities to the Act Explain below how each activity for which income is	complishme	nt of Exempt P	urposes contribute	13	
e	Add columns (b), (d), and (e) dd line 12, columns (b), (d), and (e) eet in line 13 instructions to verify calculations.) Relationship of Activities to the Act Explain below how each activity for which income is	complishme	nt of Exempt P	urposes contribute	13	
e	Add columns (b), (d), and (e) dd line 12, columns (b), (d), and (e) eet in line 13 instructions to verify calculations.) Relationship of Activities to the Act Explain below how each activity for which income is	complishme	nt of Exempt P	urposes contribute	13	
e	Add columns (b), (d), and (e) dd line 12, columns (b), (d), and (e) eet in line 13 instructions to verify calculations.) Relationship of Activities to the Act Explain below how each activity for which income is	complishme	nt of Exempt P	urposes contribute	13	
e	Add columns (b), (d), and (e) dd line 12, columns (b), (d), and (e) eet in line 13 instructions to verify calculations.) Relationship of Activities to the Act Explain below how each activity for which income is	complishme	nt of Exempt P	urposes contribute	13	
12 Subtotal. 13 Total. Ac (See workshe Part XVI. Line No.	Add columns (b), (d), and (e) dd line 12, columns (b), (d), and (e) eet in line 13 instructions to verify calculations.) Relationship of Activities to the Act Explain below how each activity for which income is	complishme	nt of Exempt P	urposes contribute	13	

	- 1 - 1 - 1	Exempt Organia			iiu iiaiisacti	ons and Relati	Onships wi	in Noncharitable	9		
1 Di	d the orga	anization directly or inc		e in any of the fol	lowing with any o	other organization de	escribed		T	Yes	No
		01(c) of the Code (oth								100	
	ganization										1
		om the reporting found	dation to a no	ncharitable exemp	pt organization of				188	17.5	100
) Cash								1a(1)		Х
(2) Other a	ssets							1a(2)		Х
D O	iner trans	actions:							- N	5.44	
		assets to a nonchari							1b(1)		X
(2) Purchas	es of assets from a n	ioncharitable i	exempt organizati	on				1b(2)		X
(3)) Relialit	of facilities, equipment,	, or other ass -	ets					1b(3)		X
(-1,	, ixentibu	rsement arrangement r loan guarantees	5						1b(4)		X
		ance of services or m	embership or	fundrajejna eolici	tations.				1b(5)		X
		acilities, equipment, m							1b(6)		X
		r to any of the above				an (h) should always	about the feir	montre i	1c		X
va	lue of the	goods, other assets, o	or services an	ven by the reportir	na foundation. If:	the foundation recei	s snow the tair i	ir market			
		transaction or sharing									
	ine no.	(b) Amount involved	,	me of noncharitable exe				ransactions, and sharing arr	rannamar		
N/A									angemen		
										····	
								· · · · · · · · · · · · · · · · · · ·			

							-				
2a is i	the founda	ition directly or indirec	tly affiliated w	ith, or related to,	one or more tax-	exempt organization	is	***************************************	*		
		section 501(c) of the						ſ	Ye	s X	No
		plete the following sch								تت -	
) Name of organization		(b) Type of	f organization		(c) Descrip	otion of relationship			
N/2	<u>A</u>										

	······································										••••
ļ	Under pena correct, and	atties of perjury. I declare that I complete. Declaration of p	at I have examine reparer (other tha	ed this return, including an taxpaven is based	accompanying sche	dules and statements, an	d to the best of my	knowledge and belief, it is	true,		
į		, ,				ernon property ried arry to	. iowiouge.	May the IRS discu	ss this ret	nw.	
Sign			Λ,					with the preparer s		,,,,,,,,	1
lere			/// _/_		سر.	, m, j		(see instructions)?	<u> </u>	es	No
	Signal	Van Brok	/m/		5 -	12-17	PRES	IDENT			
	Signal	ure of officer or trustee		-	Dat	е	Title				
	Print/Typ	e preparer's name	/		Preparer's signate	ire		Date	T	Check	٦,
aid					-					self-empl	oyed
reparer	KATHY	G. EDDY, CP	A		KATHY G.	EDDY, CPA		05/12			
se Only	Firm's na			EDDY, PA	RSONS &	BAYLOUS, A	A.C.	PTIN POO	7297	774	
	Firm's ac		X 184					Firm's EIN [] 55 - (0603	535	1
	1	PARKE	ERSBURG	. WV 261	102-0184			304	420	0.0	0.7

55-0783635	Federal	Statements		
State	Statement 1 - Form 990-PF, Part I, Line 11 - Other Income	Part I, Line 11 - Other	Income	
Description PARTNERS GROUP K-1 TOTAL		Revenue per Books \$ -1,566	Net Investment Income	Adjusted Net Income
Statement 2	- Form 990-PF.	Part I, Line 16b - Accounting	nting Fees	
Description ACCOUNTING FEES TOTAL	Total	Investment	Adjusted Net	Charitable Purpose
	Statement 3 - Form 990-PF	Part I, Line 18 -	Taxes	
WV SECRETARY OF STATE ANNUAL FEE FOREIGN TAX WITHHELD ON DIVIDEND TOTAL	\$ 25 301 \$ 326	Net Investment \$ 301	Adjusted Net	Charitable Purpose
Statement	4 - Form 990-PF	Part I, Line 23 - Other Expenses	xpenses	
Description	Total	Net Investment	Adjusted Net	Charitable Purpose
ADMINISTRATIVE EXPENSE WEBSITE MAINTENANCE ANNUAL INVESTMENT FEE DUES TOTAL	631 268 150 250 250	\$ 150	V _r	0 0
				4

55-0783635	Federal Stat	Statements		
Statement 5 - F	5 - Form 990-PF, Part II, Line 10b - Corporate Stock Investments	10b - Corporate Stock	< Investments	
Description	Beginning of Year	End of Year	Basis of Valuation	Fair Market Value
500 SHS AT&T INC	\$ 10,440	\$	COST	\$
60 SHS BIOGEN IDEC INC	6,679	6,679	COST	17,
E16 SHS EBAY INC COM	Ţ	1,456	COST	3,440
250 SHS EXXON MOBIL, CORP	17,666	17,666	COST	22,565
394 SHS FORD MOTOR CO	909'9	909'9	COST	 7
. 550 SHS JPMORGAN CHASE & CO	23,505	23,505	COST	47,460
Ö	2,146	2,146	COST	\ ∀'
118 SHS UNITEDHEALTH GROUP INC	6,046	6,046	COST	10000 TO
14 SHS AMAZON COM INC	5,548	5,548	COST	
100 SHARES PEPSICO INC	10,145	10,145	COST	ò
466 SHS FORD MOTOR CO		5,548	COST	i C
92 SHARES VISA CL A	3,853	3,858	COST	7.178
9 SHS WSTN DIGITAL CORP		TED.	COST	612
300 SHS COMCAST	15,389	15,389	COST	20,715
300 SHS COMCAST		5,486	COST	Ö
109 SHS TEXAS INSTRUMENTS	4,968	4,968	COST	7,954
39 SHS SANDISK CORP	2,751		COST	
176 SHS SEAGATE TECH PLC	9,884		COST	
TOTAL	\$ 127,082	\$ 115,377		\$ 202,511
Statement &	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	Land Character Dans	1	
[د	o - rorn 330-rr, ran II, Line 10c - Corporate Bond Investments	IUC - Corporate bond	Investments	

Fair Market Value	\$ 23,700	\$ 23,700
Basis of Valuation	COST	
End of Year	75,000	75,000
	(A)	S
Beginning of Year	75,000	75,000
Δ	ςγ)-	ss.
Description	3000 SHS FNMA PRFD SERIES	TOTAL

		; ;	 		
		Fair Market Value \$ 1,114,451			
	ments	Basis of Valuation			
ments	7 - Form 990-PF, Part II, Line 13 - Other Investments	End of Year \$ 988,458 \$			
Federal Statements	m 990-PF, Part II, L	Beginning of Year 1,030,588			
the state of the s	Statement 7 - Forn	່ ຜ່າ ຜູ້ 			
		Description AL FUNDS			
55-0783635		Descripti VARIOUS MUTUAL FUNDS TOTAL			

55-0783635	Federal Statem	ents		
Statement 8 - Form 990-PF, Part III, Line 5 - Other Decreases				
	Description	Amount		
HET ASSET ADJUSTMENT TOTAL	STOCK CONTRIBUTION	\$ 15,169 \$ 15,169		
Form 990-PF, P	art XV, Line 1a - Managers Who	Contributed Over 2% or \$5,000		
	ne of Manager	Amount		
KATHE DEITZLER TOTAL		\$ 20,656 \$ 20,656		
<u>Form 990-PF</u>	, Part XV, Line 1b - Managers V	Vho Own 10% or More Stock		
	ne of Manager	Amount		
IONE TOTAL		\$0		

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55-0783635

Statement 9 - Form 990-PF, Part XV, Line 3a - Grants and Contributions Paid During the Year

		Address			
Address	Re	Relationship Status	<u> </u>	Purpose	Amount
BOY SCOUTS OF AMERICA		1340 JULIANNA ST		Colored Transportation of the Colore	
	NONE		SUPPORT	LOCAL BOY SCOUTS	1.500
PHS STADIUM COMMITTEE, INC		2101 DUDLEY AVENUE			> > > > > > + + + + + + + + + + + + + +
PARKERSBURG WV 26101	NONE		ATHLETIC	C PROGRAM SUPPORT	1,000
ARTSBRIDGE INC		935 MARKET STREET			
PARKERSBURG WV 26101	NONE	O _P 4	SUPPORT	OF THE ARTS	2,000
TRINITY EPISCOPAL CHURCH		430 JULIANA STREET			1
()	NONE	24.	SUPPORT	CHUCH OPERATIONS	4.000
FIRST PRESBYSTERIAN CHURCH		1341 JULIANA STREET			
PARKERSBURG WV 26101	NONE	PC	SUPPORT	CHURCH OPERATIONS	7,200
_		922 QUARRIER STREET #	#400		
	NONE	PC	PROVIDE	LEGAL SERVICES	10.000
NFS MINISTRIES		1725 LATROBE STREET			
PARKERSBURG WV 26101	NONE	PC	SUPPORT	FOR EMERGENCY SHELTER	5.000
Ϊij	HNC	4421 EMERSON AVE. #203			,
	NONE	PC	SUPPORT	FOR CHLDREN OF ABUSE	3,000
ROSIS	SOCIETY	P O BOX 4527			
NEW YORK NY 10163	NONE	PC	MEDICAL	RESEARCH	1,000
CAPITAL HIGH SCHOOL		1500 GREENBRIER STREET	F.		
CHARLESTON WV 25311	NONE	PC	SUPPORT	SCHOOL OPERATIONS	1.000
VIENNA VOLUNTEER FIRE DEPT		609 28TH STREET			í
VIENNA WV 26105	NONE	PC	SUPPORT	ECOMMUNITY FIRE PREVENTION	1.000
UNITED WAY ALLIANCE OF MID-OHIO	TO	935 MARKET STREET			1
PARKERSBURG WV 26101	NONE	PC	SUPPORT	CHARITIABLE ORGANIZATIONS	10.000
PARKERSBURG AREA COMMUNITY FON	2	P O BOX 1762)) ;
PARKERSBURG WV 26102	NONE	PC	SUPPORT	CHARITIABLE ORGANZIATIONS	1,000
		1620 L ST. NW STE 630			•
WASHINGTON DC 20036	NONE	PC	SUPPORT	THE WORK OF PUBLIC JUSTICE	1,000
WOOD COUNTY SOCIETY		1411 GRAND CENTRAL AVI	AVENUE		
VIENNA WV 26105	NONE	O.	SUPPORT	FOR THOSE WITH DISABILITES	500
WESTMINISTER PRESBYTERIAN CHU	CHURCH	708 54TH STREET			
VIENNA WV 26105	NONE		SUPPORT	CHURCH OPERATIONS	700
COUMMNITY RESOURCES		1037 MARKET STREET			
PARKERSBURG WV 26101	NONE	P(SUPPORT	FOR LOW INCOME FAMILIES	500
MINERAL WELLS ELEMENTARY		1776 ELIZABETH PIKE			
MINERAL WELLS WV 26150	NONE	PC	SUPORT 2	SCHOOL OPERATIONS	250

			50,450	တ
(S	nd Contributions Paid During the		Purpose	
Federal Statements	Statement 9 - Form 990-PF, Part XV, Line 3a - Grants and Contributions Paid During the Year (continued)	Addre	Relationship Status	
55-0783635	Statement 9 - Fo	Name	TOTAL	

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

Department of the Treasury Internal Revenue Service

Name of the organization

Schedule of Contributors

Attach to Form 990, Form 990-EZ, or Form 990-PF.

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

OMB No. 1545-0047

Employer identification number

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

2016

DEITZLER FOUND	DATION, INC	55-0783635				
Organization type (check one	ganization type (check one):					
Filers of:	Section:					
Form 990 or 990-EZ	501(c)() (enter number) organization					
	4947(a)(1) nonexempt charitable trust not treated as a private foundation					
	527 political organization					
Form 990-PF	X 501(c)(3) exempt private foundation					
	4947(a)(1) nonexempt charitable trust treated as a private foundation					
501(c)(3) taxable private foundation						
	vered by the General Rule or a Special Rule. (8), or (10) organization can check boxes for both the General Rule and a Special Rule. So	ee				
General Rule						
	g Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,00 roperty) from any one contributor. Complete Parts I and II. See instructions for determining libutions.					
Special Rules						
regulations under section 13, 16a, or 16b, and the	scribed in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 ¹ / ₃ % support test of tons 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, at received from any one contributor, during the year, total contributions of the greater of (1 amount on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1. Complete Parts I and	line)				
contributor, during the y	scribed in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any or year, total contributions of more than \$1,000 exclusively for religious, charitable, scientific, purposes, or for the prevention of cruelty to children or animals. Complete Parts I, II, and III					
contributor, during the y contributions totaled mo during the year for an e General Rule applies t	scribed in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any or year, contributions exclusively for religious, charitable, etc., purposes, but no such one than \$1,000. If this box is checked, enter here the total contributions that were received exclusively religious, charitable, etc., purpose. Don't complete any of the parts unless the organization because it received nonexclusively religious, charitable, etc., contribution during the year	Ins				
990-EZ, or 990-PF), but it must	sn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 98 answer *No* on Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-ertify that it doesn't meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-	-EZ or on its				

For Paperwork Reduction Act Notice, see the Instructions for Form 990, 990-EZ, or 990-PF.

DEITZLER FOUNDATION, INC

Employer identification number 55-0783635

Part I	Contributors (See instructions). Use duplicate copies of Pa	art I if additional space is ne	eded.
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	KATHE DEITZLER 149 BELLA VISTA DRIVE VIENNA WV 26105	\$ 20,656	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZiP + 4	(c) Total contributions	(d) Type of contribution
* * * * * *		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZiP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroli Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)

Employer identification number 55-0783635

Part II	Noncash Property (See instructions). Use duplicate	copies of Part II if additional spa	ce is needed.
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
1	150 SHS COMCAST CORP	s 10,124	07/16/16
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
1	150 SHS COMCAST CORP	s 10,532	12/19/16
a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
		\$	
a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
		s	
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
		\$	

55-0783635	Federal Statements
	Taxable Interest on Investments
Description	Unrelated Exclusion Postal US
PARTNERS GROUP	Amount Business Code Code Code Obs (\$ or %) \$ 417
TOTAL	\$ 417
	Taxable Dividends from Securities
Description	Unrelated Exclusion Postal US Amount Business Code Code Code Obs (\$ or %)
ML ACCOUNT #668-04A79	Amount Business Code Code Code Obs (\$ or %) \$ 30,234
PARTNERS GROUP	433 14
TOTAL	\$30,667