Filing Instructions

Prepared for: Prepared by: HARRY A. AND MARGARET D. TOWSLEY IVERS, RICKELMANN & PETERSEN CPA'S FOUNDATION 2929 PLYMOUTH RD, SUITE 350 924 N MAIN ST NO. 1 ANN ARBOR, MI 48104 ANN ARBOR, MI 48105 2019 FORM 990-PF THIS RETURN HAS BEEN PREPARED FOR ELECTRONIC FILING. IF YOU WISH TO HAVE IT TRANSMITTED ELECTRONICALLY TO THE IRS, PLEASE SIGN, DATE, AND RETURN FORM 8879-EO TO OUR OFFICE. WE WILL THEN SUBMIT THE ELECTRONIC RETURN TO THE IRS. DO NOT MAIL A PAPER COPY OF THE RETURN TO THE IRS. FORM 990-PF HAS AN OVERPAYMENT OF \$29,729. THE ENTIRE OVERPAYMENT HAS BEEN APPLIED TO THE ESTIMATED TAX PAYMENTS.

Form 8879-EC

IRS e-file Signature Authorization for an Exempt Organization

	O	MB No.	1545-1878	
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For calendar year 2019, or fiscal year beginning

iscal year beginning _______, 2019, and ending _______

Do not send to the IRS. Keep for your records.

2019

Department of the Treasury Internal Revenue Service

Name of exempt organization

► Go to www.irs.gov/Form8879EO for the latest information.

Employer identification number

HARRY A. AND MARGARET D. TOWSLEY FOUNDATION

38-6091798

Name and title of officer

MARY IVERS TREASURER

Part I Type of Return and Return Information (Whole Dollars Only)

Check the box for the return for which you are using this Form 8879-EO and enter the applicable amount, if any, from the return. If you check the box on line **1a**, **2a**, **3a**, **4a**, or **5a**, below, and the amount on that line for the return being filed with this form was blank, then leave line **1b**, **2b**, **3b**, **4b**, or **5b**, whichever is applicable, blank (do not enter -0-). But, if you entered -0- on the return, then enter -0- on the applicable line below. **Do not** complete more than one line in Part I.

1a	Form 990 check here b Total revenue, if any (Form 990, Part VIII, column (A), line 12)	1b	
2a	Form 990-EZ check here b Total revenue, if any (Form 990-EZ, line 9)	2b	
За	Form 1120-POL check here b Total tax (Form 1120-POL, line 22)	3b	
4a	Form 990-PF check here X b Tax based on investment income (Form 990-PF, Part VI, line 5)	4b	27,000.
5a	Form 8868 check here b Balance Due (Form 8868, line 3c)	5b	

Part II Declaration and Signature Authorization of Officer

Under penalties of perjury, I declare that I am an officer of the above organization and that I have examined a copy of the organization's 2019 electronic return and accompanying schedules and statements and to the best of my knowledge and belief, they are true, correct, and complete. I further declare that the amount in Part I above is the amount shown on the copy of the organization's electronic return. I consent to allow my intermediate service provider, transmitter, or electronic return originator (ERO) to send the organization's return to the IRS and to receive from the IRS (a) an acknowledgement of receipt or reason for rejection of the transmission, (b) the reason for any delay in processing the return or refund, and (c) the date of any refund. If applicable, I authorize the U.S. Treasury and its designated Financial Agent to initiate an electronic funds withdrawal (direct debit) entry to the financial institution account indicated in the tax preparation software for payment of the organization's federal taxes owed on this return, and the financial institution to debit the entry to this account. To revoke a payment, I must contact the U.S. Treasury Financial Agent at 1-888-353-4537 no later than 2 business days prior to the payment (settlement) date. I also authorize the financial institutions involved in the processing of the electronic payment of taxes to receive confidential information necessary to answer inquiries and resolve issues related to the payment. I have selected a personal identification number (PIN) as my signature for the organization's electronic return and, if applicable, the organization's consent to electronic funds withdrawal.

Officer's PIN: check one box only

I authorize		to enter my PIN	
	ERO firm name		Enter five numbers, but do not enter all zeros

as my signature on the organization's tax year 2019 electronically filed return. If I have indicated within this return that a copy of the return is being filed with a state agency(ies) regulating charities as part of the IRS Fed/State program, I also authorize the aforementioned ERO to enter my PIN on the return's disclosure consent screen.

X As an officer of the organization, I will enter my PIN as my signature on the organization's tax year 2019 electronically filed return. If I have indicated within this return that a copy of the return is being filed with a state agency(ies) regulating charities as part of the IRS Fed/State program, I will enter my PIN on the return's disclosure consent screen.

Officer's signature ▶ Date ▶

Part III Certification and Authentication

ERO's EFIN/PIN. Enter your six-digit electronic filing identification number (EFIN) followed by your five-digit self-selected PIN.

40465030198

Do not enter all zeros

Date >

I certify that the above numeric entry is my PIN, which is my signature on the 2019 electronically filed return for the organization indicated above. I confirm that I am submitting this return in accordance with the requirements of **Pub. 4163**, Modernized e-File (MeF) Information for Authorized IRS e-file Providers for Business Returns.

ERO Must Retain This Form - See Instructions

ERO Must Retain This Form - See Instructions

Do Not Submit This Form to the IRS Unless Requested To Do So

ERO's signature

Form **990-PF**

EXTENDED TO NOVEMBER 16, 2020 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.

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service and ending For calendar year 2019 or tax year beginning Name of foundation A Employer identification number HARRY A. AND MARGARET D. TOWSLEY FOUNDATION 38-6091798 Number and street (or P.O. box number if mail is not delivered to street address) Room/suite **B** Telephone number 924 N MAIN ST 734-660-2170 City or town, state or province, country, and ZIP or foreign postal code C If exemption application is pending, check here ANN ARBOR, MI 48104 G Check all that apply: Initial return Initial return of a former public charity **D** 1. Foreign organizations, check here Final return Amended return 2. Foreign organizations meeting the 85% test, check here and attach computation X Address change Name change X Section 501(c)(3) exempt private foundation **H** Check type of organization: E If private foundation status was terminated Section 4947(a)(1) nonexempt charitable trust Other taxable private foundation under section 507(b)(1)(A), check here I Fair market value of all assets at end of year | J Accounting method: X Cash Accrual If the foundation is in a 60-month termination (from Part II, col. (c), line 16) Other (specify) under section 507(b)(1)(B), check here 68,954,438. (Part I, column (d), must be on cash basis.) ▶\$ Part I Analysis of Revenue and Expenses (c) Adjusted net (d) Disbursements for charitable purposes (a) Revenue and (b) Net investment (The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a).) expenses per books income income (cash basis only) Contributions, gifts, grants, etc., received N/A2 Check X if the foundation is not required to attach Sch. B Interest on savings and temporary cash investments 1,600,100. 1,600,100. STATEMENT 4 Dividends and interest from securities 5a Gross rents **b** Net rental income or (loss) 1,165,301. 6a Net gain or (loss) from sale of assets not on line 10 b Gross sales price for all assets on line 6a 6,633,752. 1,165,301. 7 Capital gain net income (from Part IV, line 2) 8 Net short-term capital gain 650,000. Income modifications Gross sales less returns 10a and allowances b Less: Cost of goods sold c Gross profit or (loss) 11 Other income 2,765,401. 650,000 2,765,401. 12 Total. Add lines 1 through 11 Ō. 0. 0. 13 Compensation of officers, directors, trustees, etc. 14 Other employee salaries and wages 13,441. 13.441. 0. 15 Pension plans, employee benefits 16a Legal fees Administrative Expenses b Accounting fees STMT 2 4,720. 4,720. c Other professional fees STMT 3 63,251. 60.641. 2,610. 17 Interest Taxes STMT 4 23,273. 3,273. 18 Depreciation and depletion 19 13,800. 0. 13,800. 20 Occupancy 21 Travel, conferences, and meetings 2,575. 0. 2,575. 22 Printing and publications 23 Other expenses STMT 5 31,205. 31,208. 0. 24 Total operating and administrative <u>66,</u>907. 152,265. 65,361. expenses. Add lines 13 through 23 3,099,658. 3,099,658. 25 Contributions, gifts, grants paid 26 Total expenses and disbursements. 65,361. 3,251,923 3,166,565. Add lines 24 and 25 27 Subtract line 26 from line 12: -486,522. **a** Excess of revenue over expenses and disbursements 2,700,040. b Net investment income (if negative, enter -0-) 650,000. c Adjusted net income (if negative, enter -0-)

Page 2

P	art	Balance Sheets Attached schedules and amounts in the description	Beginning of year	End of	
	ui t	column should be for end-of-year amounts only.	(a) Book Value	(b) Book Value	(c) Fair Market Value
	1	Cash - non-interest-bearing	227,902.	309,619.	309,619.
	2	Savings and temporary cash investments	6,572,486.	7,374,665.	7,374,665.
		Accounts receivable ▶			
		Less: allowance for doubtful accounts			
	4	Pledges receivable ▶			
		Less: allowance for doubtful accounts			
	5	Grants receivable			
		Receivables due from officers, directors, trustees, and other			
		disqualified persons			
	7	Other notes and loans receivable			
		Less: allowance for doubtful accounts ▶			
S	8	Inventories for sale or use			
Assets	9	Prepaid expenses and deferred charges			
As	10a	Investments - U.S. and state government obligations Investments - corporate stock STMT 6			
	b	Investments - corporate stock STMT 6	29,757,119.	29,037,038.	61,266,935.
		Investments - corporate bonds			
	11	Investments - land, buildings, and equipment: basis			
		Less: accumulated depreciation			
	12	Investments - mortgage loans			
	13	Investments - other			
	14	Land, buildings, and equipment: basis ▶			
		Less: accumulated depreciation			
	15	Other assets (describe ► VANGUARD DIVIDEND I)	3,556.	3,219.	3,219.
	16	Total assets (to be completed by all filers - see the			
		instructions. Also, see page 1, item I)	36,561,063.	36,724,541.	68,954,438.
	17	Accounts payable and accrued expenses			
	18	Grants payable			
Se	19	Deferred revenue			
iliti	20	Loans from officers, directors, trustees, and other disqualified persons			
Liabilities	21	Mortgages and other notes payable			
_	22	Other liabilities (describe)			
			•		
	23	Total liabilities (add lines 17 through 22)	0.	0.	
		Foundations that follow FASB ASC 958, check here			
es		and complete lines 24, 25, 29, and 30.			
anc		Net assets without donor restrictions			
Bala	25	Net assets with donor restrictions			
nd		Foundations that do not follow FASB ASC 958, check here			
Fu		and complete lines 26 through 30.	27 000 420	27 000 420	
s or	26	Capital stock, trust principal, or current funds	27,880,429.	27,880,429.	
set	27	Paid-in or capital surplus, or land, bldg., and equipment fund	8,680,634.	8,844,112.	
As	28	Retained earnings, accumulated income, endowment, or other funds	36,561,063.	36,724,541.	
Net Assets or Fund Balances	29	Total net assets or fund balances	30,301,003.	30,724,341.	
_	30	Total liabilities and net assets/fund balances	36,561,063.	36,724,541.	
D	art		•	30,724,341.	
		net assets or fund balances at beginning of year - Part II, column (a), line			26 561 062
		at agree with end-of-year figure reported on prior year's return)		1	36,561,063.
		amount from Part I, line 27a		1 1	-486,522.
		r increases not included in line 2 (itemize) PRIOR GRANT		3	650,000. 36,724,541.
		ines 1, 2, and 3		1 1	
		eases not included in line 2 (itemize)	dumn (h) lina 00	5	36,724,541.
0	rutal	net assets or fund balances at end of year (line 4 minus line 5) - Part II, co	numm (b), nne 29		JU,/44,J41.

FOUNDATION

Page 3 Capital Gains and Losses for Tax on Investment Income Part IV (b) How acquired P - Purchase D - Donation (a) List and describe the kind(s) of property sold (for example, real estate, (c) Date acquired (d) Date sold 2-story brick warehouse; or common stock, 200 shs. MLC Co.) (mo., day, yr.) (mo., day, yr.) 1a OPTION CLOSED b SCHWAB SALES OF SECURITIES Ρ c DOW GROUP CIL D d VANGUARD MUTUAL FUND SALES Ρ е (g) Cost or other basis (h) Gain or (loss) (f) Depreciation allowed (e) Gross sales price (or allowable) plus expense of sale ((e) plus (f) minus (g)) 19,428. 19,428. 4,131,383. 4,082,095. 49,288. b 222. 12. 210. 2,482,719. 1,096,375. 1,386,344. d е Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69. (I) Gains (Col. (h) gain minus col. (k), but not less than -0-) or (j) Adjusted basis (k) Excess of col. (i) (i) FMV as of 12/31/69 Losses (from col. (h)) as of 12/31/69 over col. (j), if any 19,428. а 49,288. b 210. C 1,096,375. d е If gain, also enter in Part I, line 7 1,165,301. 2 Capital gain net income or (net capital loss) If (loss), enter -0- in Part I, line 7 2 3 Net short-term capital gain or (loss) as defined in sections 1222(5) and (6): If gain, also enter in Part I, line 8, column (c). N/A If (loss), enter -0- in Part I, line 8 Part V | Qualification Under Section 4940(e) for Reduced Tax on Net Investment Income (For optional use by domestic private foundations subject to the section 4940(a) tax on net investment income.) If section 4940(d)(2) applies, leave this part blank. Yes X No Was the foundation liable for the section 4942 tax on the distributable amount of any year in the base period? If "Yes," the foundation doesn't qualify under section 4940(e). Do not complete this part. Enter the appropriate amount in each column for each year; see the instructions before making any entries. (d)
Distribution ratio
(col. (b) divided by col. (c)) (a) Base period years Calendar year (or tax year beginning in) (c) Adjusted qualifying distributions Net value of noncharitable-use assets 71,942,433. 3,349,684. 2018 .046561 3,387,368. 69,427,624. .048790 2017 3,071,190. 60,733,431. .050568 2016 2,931,305. 60,863,265. .048162 2015 2014 2,412,092. 61.930.338. .038948 .233029 2 Total of line 1, column (d) 3 Average distribution ratio for the 5-year base period - divide the total on line 2 by 5.0, or by the number of years .046606 the foundation has been in existence if less than 5 years 3 66,949,539. 4 Enter the net value of noncharitable-use assets for 2019 from Part X, line 5 3,120,250. Multiply line 4 by line 3 Enter 1% of net investment income (1% of Part I, line 27b) 27,000. 3,147,250. 7 Add lines 5 and 6 8 Enter qualifying distributions from Part XII, line 4 3,166,565. 8 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.

Form			6091			Page 4
Pa	irt VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 494	18 - 9	see ins	struc	tion	s)
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 X and enter 1%	1		2	7,0	00.
	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)					
	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only; others, enter -0-)	2				0.
3	Add lines 1 and 2	3		2	7,0	00.
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only; others, enter -0-)	4				0.
5	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-	5		2	7,0	00.
6	Credits/Payments:					
а	2019 estimated tax payments and 2018 overpayment credited to 2019 6a 56,729.					
	Exempt foreign organizations - tax withheld at source 6b 0.					
	Tax paid with application for extension of time to file (Form 8868) 6c 0.					
	Backup withholding erroneously withheld 6d 0.					
	Total credits and payments. Add lines 6a through 6d	7		5	6,7	29.
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	9				
10		10		2.	9,7	29.
	Enter the amount of line 10 to be: Credited to 2020 estimated tax	11			- , .	0.
Pa	art VII-A Statements Regarding Activities	<u> </u>				
	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?		1	1a		х
h	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes? See the instructions for the definiti		·····	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.		- 1			
r	Did the foundation file Form 1120-POL for this year?		- 1	1c		Х
	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year:		·····	10		
u	(1) On the foundation. \blacktriangleright \$ (2) On foundation managers. \blacktriangleright \$		- 1			
	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation		- 1			
6	managers. > \$ 0.		- 1			
9	Has the foundation engaged in any activities that have not previously been reported to the IRS?		- 1	2		х
	If "Yes," attach a detailed description of the activities.		·····			1
9	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, or		- 1			
J			- 1	3		х
40	bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes Did the foundation have unrelated business gross income of \$1,000 or more during the year?			4a		X
	If "Yes," has it filed a tax return on Form 990-T for this year?			4b		122
	Was there a liquidation, termination, dissolution, or substantial contraction during the year?			5		х
J			·····	J		22
	If "Yes," attach the statement required by <i>General Instruction T</i> .		- 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 Product localities that effect in the constant and the constant instrument as that are recorded as a fine to the constant in		- 1			
	By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state laws in the conflict with the conflict		- 1	•	Х	
_	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		·····			
•	False the state to thick the Constitution and the solid like the State of Contraction of Contraction		- 1			
ва	Enter the states to which the foundation reports or with which it is registered. See instructions.		— I			
	MI		—			
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)				v	
_	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 calend					77
	year 2019 or the tax year beginning in 2019? See the instructions for Part XIV. If "Yes," complete Part XIV			9		X
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses			10		Х

Form **990-PF** (2019)

FOUNDATION

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Pa	rt VII-A	Statements Regarding Activities (continued)					
		100000000000000000000000000000000000000				Yes	No
11	At any time	e during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of					
	section 51	2(b)(13)? If "Yes," attach schedule. See instructions			11		X
12		indation make a distribution to a donor advised fund over which the foundation or a disqualified person had adv					
	If "Yes," att	ach statement. See instructions			12		X
13	Did the fou	indation comply with the public inspection requirements for its annual returns and exemption application?			13	Х	
	Website ac	ddress ► TOWSLEYFOUNDATION.ORG					
14	The books	are in care of MARY IVERS, CPA Telepho	ne no.▶	734-99	4-7	500	
	Located at	▶ 2929 PLYMOUTH ROAD, STE 350, ANN ARBOR, MI	Z'	IP+4 ▶ <u>48</u>	105		
15	Section 49	47(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - check here				🕨	•
	and enter t	he amount of tax-exempt interest received or accrued during the year	▶∟'	15	N	<u>/A</u>	
16	At any time	e during calendar year 2019, did the foundation have an interest in or a signature or other authority over a bank	J			Yes	_
	securities,	or other financial account in a foreign country?			16		X
	See the ins	structions for exceptions and filing requirements for FinCEN Form 114. If "Yes," enter the name of the					
_	foreign cou						
Pa		Statements Regarding Activities for Which Form 4720 May Be Required				V	.
		n 4720 if any item is checked in the "Yes" column, unless an exception applies.				Yes	No
1a	-	year, did the foundation (either directly or indirectly):	<u> </u>	\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\			
		e in the sale or exchange, or leasing of property with a disqualified person?	Yes	⊥X No			
		w money from, lend money to, or otherwise extend credit to (or accept it from)	 ,,	□			
		ualified person?		X No			
		th goods, services, or facilities to (or accept them from) a disqualified person?		X No			
	. ,	ompensation to, or pay or reimburse the expenses of, a disqualified person?	_A_ Yes	No			
		fer any income or assets to a disqualified person (or make any of either available	Yes	V			
		e benefit or use of a disqualified person)?	Yes	LA NO			
	. , .	to pay money or property to a government official? (Exception. Check "No"					
		foundation agreed to make a grant to or to employ the official for a period after nation of government service, if terminating within 90 days.)	Von	X No			
h		ver is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations	169	ZI NU			
U		.4941(d)-3 or in a current notice regarding disaster assistance? See instructions			1b		х
		ons relying on a current notice regarding disaster assistance, check here			10		
r		indation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not correc					
·		first day of the tax year beginning in 2019?			1c		х
2		ailure to distribute income (section 4942) (does not apply for years the foundation was a private operating foun			-10		
-		section 4942(j)(3) or 4942(j)(5)):	aution				
а		of tax year 2019, did the foundation have any undistributed income (Part XIII, lines					
		for tax year(s) beginning before 2019?	Yes	X No			
		t the years >					
b	•	iny years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2) (relating to in	- icorrect				
		of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer "No" an					
		- see instructions.)		N/A	2b		
C		isions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here.					
	▶	· · · · · · · · · · · · · · · · · · ·					
3a	Did the fou	ındation hold more than a 2% direct or indirect interest in any business enterprise at any time					
	during the	year?		X No			
b	If "Yes," did	d it have excess business holdings in 2019 as a result of (1) any purchase by the foundation or disqualified per	ons after				
		969; (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(ose			
		s acquired by gift or bequest; or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Form					
	Schedule (C, to determine if the foundation had excess business holdings in 2019.)		N/A	3b		
		indation invest during the year any amount in a manner that would jeopardize its charitable purposes?			4a		X
b		indation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable					
	had not be	en removed from jeopardy before the first day of the tax year beginning in 2019?			4b	1 1	X

Form **990-PF** (2019)

Form 990-PF (2019)

FOUNDATION

Part VII-B Statements Regarding Activities for which Fe	orm 4720 May Be R	equirea _{(continu}	ued)		
5a During the year, did the foundation pay or incur any amount to:				Y	'es No
(1) Carry on propaganda, or otherwise attempt to influence legislation (section			s X No		
(2) Influence the outcome of any specific public election (see section 4955); or	to carry on, directly or indire	• •			
any voter registration drive?			s X No		
(3) Provide a grant to an individual for travel, study, or other similar purposes?		Ye	s X No		
(4) Provide a grant to an organization other than a charitable, etc., organization					
4945(d)(4)(A)? See instructions			s X No		
(5) Provide for any purpose other than religious, charitable, scientific, literary,					
the prevention of cruelty to children or animals?			s X No		
b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify und			37 / 3		
section 53.4945 or in a current notice regarding disaster assistance? See instru				5b	
Organizations relying on a current notice regarding disaster assistance, check h			► └┘		
c If the answer is "Yes" to question 5a(4), does the foundation claim exemption from the company of the company			l		
expenditure responsibility for the grant?	T.	I/A Ye	s No		
If "Yes," attach the statement required by Regulations section 53.4945-5(d).					
6a Did the foundation, during the year, receive any funds, directly or indirectly, to p		□ v ₂	. V Na		
a personal benefit contract?b Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	aroonal hanafit contract?	re	S A NO	6b	Х
If "Yes" to 6b, file Form 8870.	ersonal benefit contract?		·····	OD	A
7a At any time during the tax year, was the foundation a party to a prohibited tax sl	naltar transaction?	□ v _e	e X No		
b If "Yes," did the foundation receive any proceeds or have any net income attributed the foundation of the foundation receive any proceeds or have any net income attributed the foundation of the foundation at				7b	
8 Is the foundation subject to the section 4960 tax on payment(s) of more than \$			+1/2.44	10	
			e X No		
Part VIII Information About Officers, Directors, Truste	es. Foundation Mar	nagers. Highly	3 22 140		
Paid Employees, and Contractors	,	g,g,			
1 List all officers, directors, trustees, and foundation managers and th	eir compensation.				
	(b) Title, and average	(c) Compensation	(d) Contributions to employee benefit plans	(e)) Expense
(a) Name and address	hòurs per week devoted to position	(If not paid, enter -0-)	and deferred compensation		ount, other lowances
SEE STATEMENT 8		0.	0.	\perp	0.
				↓	
				↓	
		. "1015"		<u></u>	
2 Compensation of five highest-paid employees (other than those incl		enter "NONE."	(d) Contributions to	T (2)	L Evnanca
(a) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans and deferred) Expense ount, other
MONT	devoted to position		compensation	l all	lowances
NONE					
				+-	
				+-	
				1	
				+-	
				1	
				+-	
				1	
Total number of other employees poid over \$50,000					0
Total number of other employees paid over \$50,000					U

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FOUNDATION

Part VIII	Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors (continued)		
3 Five highe	st-paid independent contractors for professional services. If none, enter "NONE."		
	(a) Name and address of each person paid more than \$50,000 (b) Type of service		(c) Compensation
N	ONE		
Total number of	f others receiving over \$50,000 for professional services	>	0
Part IX-A	Summary of Direct Charitable Activities		
	tion's four largest direct charitable activities during the tax year. Include relevant statistical information such as the nizations and other beneficiaries served, conferences convened, research papers produced, etc.		Expenses
1N	/A	-	
		1	
2		-	
		1	
3		-	
		1	
4		-	
Part IX-B	Summary of Program-Related Investments	<u>] </u>	
	o largest program-related investments made by the foundation during the tax year on lines 1 and 2.	Τ	Amount
	/A		
		1	
2		-	
		1	
All other progr	m-related investments. See instructions.		
		1	
		-	
]	
Total Add line	a 1 through 2	+	0.

Page 8

P	art X Minimum Investment Return (All domestic foundations must complete this part. Foreign four	dations,	see instructions.)
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes:		
a	Average monthly fair market value of securities	1a	59,950,186.
	Average of monthly cash balances	1b	59,950,186. 8,018,889.
	Fair market value of all other assets	1c	
d	Total (add lines 1a, b, and c)	1d	67,969,075.
е	Reduction claimed for blockage or other factors reported on lines 1a and		
	1c (attach detailed explanation) 1e 0 •		
2	Acquisition indebtedness applicable to line 1 assets	2	0.
3	Subtract line 2 from line 1d	3	67,969,075.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions)	4	1,019,536.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	66,949,539.
6	Minimum investment return. Enter 5% of line 5	6	3,347,477.
P	art XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations an foreign organizations, check here ▶ ☐ and do not complete this part.)	d certain	
1	Minimum investment return from Part X, line 6	1	3,347,477.
2a	Tax on investment income for 2019 from Part VI, line 5 27,000.		
b	Income tax for 2019. (This does not include the tax from Part VI.)		
C	Add lines 2a and 2b	2c	27,000.
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	3,320,477.
4	Recoveries of amounts treated as qualifying distributions	4	650,000.
5	Add lines 3 and 4	5	3,970,477.
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	3,970,477.
P	art XII Qualifying Distributions (see instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:		2 466 565
а	1 , , , , , , , , , , , , , , , , , , ,	1a	3,166,565.
b	•	1b	0.
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes	2	
3	Amounts set aside for specific charitable projects that satisfy the:		
	Suitability test (prior IRS approval required)	3a	
	Cash distribution test (attach the required schedule)	3b	2 166 565
4	Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8; and Part XIII, line 4	4	3,166,565.
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment		07 000
	income. Enter 1% of Part I, line 27b	5	27,000. 3,139,565.
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	
	Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation q	ualifies for	r the section

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4940(e) reduction of tax in those years.

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Part XIII Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2018	(c) 2018	(d) 2019
1 Distributable amount for 2019 from Part XI,	σοιρασ	1 cars prior to 2010	2010	2013
line 7				3,970,477.
2 Undistributed income, if any, as of the end of 2019:				
a Enter amount for 2018 only			2,819,087.	
b Total for prior years:		0.		
Excess distributions carryover, if any, to 2019:		0.		
a From 2014				
b From 2015				
c From 2016				
d From 2017				
e From 2018				
f Total of lines 3a through e	0.			
4 Qualifying distributions for 2019 from				
Part XII, line 4: \triangleright \$ 3,166,565.				
a Applied to 2018, but not more than line 2a			2,819,087.	
b Applied to undistributed income of prior				
years (Election required - see instructions)		0.		
c Treated as distributions out of corpus				
(Election required - see instructions)	0.			
d Applied to 2019 distributable amount				347,478.
e Remaining amount distributed out of corpus	0.			
Excess distributions carryover applied to 2019 (If an amount appears in column (d), the same amount must be shown in column (a).)	0.			0.
6 Enter the net total of each column as indicated below:				
a Corpus. Add lines 3f, 4c, and 4e. Subtract line 5	0.			
b Prior years' undistributed income. Subtract				
line 4b from line 2b		0.		
c Enter the amount of prior years'		-		
undistributed income for which a notice of deficiency has been issued, or on which				
the section 4942(a) tax has been previously assessed		0.		
d Subtract line 6c from line 6b. Taxable				
amount - see instructions		0.		
e Undistributed income for 2018. Subtract line			_	
4a from line 2a. Taxable amount - see instr			0.	
f Undistributed income for 2019. Subtract				
lines 4d and 5 from line 1. This amount must				
be distributed in 2020				3,622,999.
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 2014	_			
not applied on line 5 or line 7	0.			
9 Excess distributions carryover to 2020.	0.			
Subtract lines 7 and 8 from line 6a	U •			
10 Analysis of line 9:				
a Excess from 2015				
b Excess from 2016 c Excess from 2017				
d Excess from 2018				
e Excess from 2019				

m 990-PF (2019) FOUNDATI				38-60	91798 Pa
art XIV Private Operating For			A, question 9)	N/A	
a If the foundation has received a ruling or o					
foundation, and the ruling is effective for 2				7 40 40 (1) (2)	
Check box to indicate whether the foundat		g foundation described in		4942(j)(3) or49	942(j)(5) I
a Enter the lesser of the adjusted net	Tax year (a) 2019	(b) 2018	Prior 3 years (c) 2017	(d) 2016	(a) Total
income from Part I or the minimum	(a) 2013	(b) 2010	(6) 2017	(u) 2010	(e) Total
investment return from Part X for					
each year listed					
85% of line 2a					
Qualifying distributions from Part XII,					
line 4, for each year listed					
Amounts included in line 2c not					
used directly for active conduct of					
exempt activities					
for active conduct of exempt activities.					
Subtract line 2d from line 2c					
Complete 3a, b, or c for the					
alternative test relied upon:					
"Assets" alternative test - enter: (1) Value of all assets					
(2) Value of assets qualifying under section 4942(j)(3)(B)(i)					
"Endowment" alternative test - enter					
2/3 of minimum investment return					
shown in Part X, line 6, for each year listed					
"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					
rt XV Supplementary Inforr			the foundation	had \$5,000 or mor	e in assets
at any time during the	e year-see instru	uctions.)			

b List any managers of the foundation who own 10% or more of the stock of a corporation (or an equally large portion of the ownership of a partnership or other entity) of which the foundation has a 10% or greater interest.

4	information negariting Contribution, Grant, Girt, Loan, Scholarship, etc., Programs.	j
	`	

Check here 🕨 🔛 if the foundation only makes contributions to preselected charitable organizations and does not accept unsolicited requests for funds. If the foundation makes gifts, grants, etc., to individuals or organizations under other conditions, complete items 2a, b, c, and d.

a The name, address, and telephone number or email address of the person to whom applications should be addressed:

SEE STATEMENT 9

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

c Any submission deadlines:

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

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Part XV Supplementary Information (continued) Grants and Contributions Paid During the Year or Approved for Future Payment If recipient is an individual, Recipient show any relationship to Foundation Purpose of grant or Amount any foundation manager status of contribution Name and address (home or business) or substantial contributor recipient a Paid during the year 1ST UNITED METHODIST CHURCH NONE ÞС PROGRAM SUPPORT 227 FULTON ST E 5,000. GRAND RAPIDS, MI 49503 826 MICHIGAN PROGRAM SUPPORT NONE PC 115 E LIBERTY ST ANN ARBOR, MI 48104 20,000. ALBION COLLEGE NONE PC PROGRAM SUPPORT 611 E PORTER ALBION, MI 49224 100,000. ALPENA COMMUNITY COLLEGE NONE PC PROGRAM SUPPORT 665 JOHNSON ST ALPENA, MI 49707 50,000. AMERICAN BIRD CONSERVANCY NONE PROGRAM SUPPORT PC PO BOX 249 THE PLAINS, VA 20198 200,000. SEE CONTINUATION SHEET(S) \triangleright 3,099,658. Total 3a **b** Approved for future payment ARBOR HOSPICE FOUNDATION NONE PC PROGRAM SUPPORT 2366 OAK VALLEY DRIVE 150,000. ANN ARBOR, MI 48103 CHILDRENS LEUKEMIA FOUNDATION NONE PC PROGRAM SUPPORT 27240 HAGGERTY RD SUITE E15 FARMINGTON HILLS, MI 48331 10,000. DETROIT HORSE POWER NONE ÞС PROGRAM SUPPORT 34414 FIRST ST DETROIT, MI 48210 15,000. CONTINUATION SHEET (S) 2,514,500. SEE **▶** 3b Total

(a) Business code

Unrelated business income

(b) Amount

(e) Related or exempt

function income

Excluded by section 512, 513, or 514

(d) Amount

(C) Exclu-sion code

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1 Program service revenue:

Enter gross amounts unless otherwise indicated.

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

a _						
b _						
c _						
d _						
е _						
f						
g F	ees and contracts from government agencies					
	bership dues and assessments					
	est on savings and temporary cash					
	stments					
4 Divid	lends and interest from securities			14	1,600,100.	
	rental income or (loss) from real estate:					
	Pebt-financed property					
h N	lot debt-financed property					
	rental income or (loss) from personal					
	, , ,					
prop 7 Otho	erty					
	r investment income					
	or (loss) from sales of assets other			10	1 165 201	
than	inventory			18	1,165,301.	
	ncome or (loss) from special events					
	s profit or (loss) from sales of inventory					
11 Othe	r revenue:					
a _						
b _						
c _						
d						
_				1		
е _						
_	otal. Add columns (b), (d), and (e)		0.		2,765,401.	0.
12 Subt	otal. Add columns (b), (d), and (e) I. Add line 12, columns (b), (d), and (e)					0. 2,765,401.
12 Subt						
12 Subt 13 Tota (See wo	I. Add line 12, columns (b), (d), and (e)				13	
12 Subt 13 Tota (See wo	I. Add line 12, columns (b), (d), and (e)				13	
12 Subt 13 Tota (See wo	I. Add line 12, columns (b), (d), and (e)	o the Accor	mplishment of Exe	empt I	Purposes	2,765,401.
12 Subt 13 Tota (See wo	I. Add line 12, columns (b), (d), and (e)	o the Accor	mplishment of Exe	empt I	Purposes	2,765,401.
12 Subt 13 Tota (See wo	I. Add line 12, columns (b), (d), and (e)	o the Accor	mplishment of Exe	empt I	Purposes	2,765,401.
12 Subt 13 Tota (See wo Part Line N	I. Add line 12, columns (b), (d), and (e)	o the Accor	mplishment of Exe	empt I	Purposes	2,765,401.
12 Subt 13 Tota (See wo Part Line No 4	I. Add line 12, columns (b), (d), and (e)	o the Accor	mplishment of Exe	empt I	Purposes	2,765,401.
12 Subt 13 Tota (See wo Part Line No 4	I. Add line 12, columns (b), (d), and (e)	o the Accor	mplishment of Exe	empt I	Purposes	2,765,401.
12 Subt 13 Tota (See wo Part Line No 4	I. Add line 12, columns (b), (d), and (e)	o the Accor	mplishment of Exe	empt I	Purposes	2,765,401.
12 Subt 13 Tota (See wo Part Line No 4	I. Add line 12, columns (b), (d), and (e)	o the Accor	mplishment of Exe	empt I	Purposes	2,765,401.
12 Subt 13 Tota (See wo Part Line No 4	I. Add line 12, columns (b), (d), and (e)	o the Accor	mplishment of Exe	empt I	Purposes	2,765,401.
12 Subt 13 Tota (See wo Part Line No 4	I. Add line 12, columns (b), (d), and (e)	o the Accor	mplishment of Exe	empt I	Purposes	2,765,401.
12 Subt 13 Tota (See wo Part Line No 4	I. Add line 12, columns (b), (d), and (e)	o the Accor	mplishment of Exe	empt I	Purposes	2,765,401.
12 Subt 13 Tota (See wo Part Line No 4	I. Add line 12, columns (b), (d), and (e)	o the Accor	mplishment of Exe	empt I	Purposes	2,765,401.
12 Subt 13 Tota (See wo Part Line No 4	I. Add line 12, columns (b), (d), and (e)	o the Accor	mplishment of Exe	empt I	Purposes	2,765,401.
12 Subt 13 Tota (See wo Part Line No 4	I. Add line 12, columns (b), (d), and (e)	o the Accor	mplishment of Exe	empt I	Purposes	2,765,401.
12 Subt 13 Tota (See wo Part Line No 4	I. Add line 12, columns (b), (d), and (e)	o the Accor	mplishment of Exe	empt I	Purposes	2,765,401.
12 Subt 13 Tota (See wo Part Line No 4	I. Add line 12, columns (b), (d), and (e)	o the Accor	mplishment of Exe	empt I	Purposes	2,765,401.
12 Subt 13 Tota (See wo Part Line No 4	I. Add line 12, columns (b), (d), and (e)	o the Accor	mplishment of Exe	empt I	Purposes	2,765,401.
12 Subt 13 Tota (See wo Part Line No 4	I. Add line 12, columns (b), (d), and (e)	o the Accor	mplishment of Exe	empt I	Purposes	2,765,401.
12 Subt 13 Tota (See wo Part Line No 4	I. Add line 12, columns (b), (d), and (e)	o the Accor	mplishment of Exe	empt I	Purposes	2,765,401.
12 Subt 13 Tota (See wo Part Line No 4	I. Add line 12, columns (b), (d), and (e)	o the Accor	mplishment of Exe	empt I	Purposes	2,765,401.
12 Subt 13 Tota (See wo Part Line No 4	I. Add line 12, columns (b), (d), and (e)	o the Accor	mplishment of Exe	empt I	Purposes	2,765,401.
12 Subt 13 Tota (See wo Part Line No 4	I. Add line 12, columns (b), (d), and (e)	o the Accor	mplishment of Exe	empt I	Purposes	2,765,401.

FOUNDATION

orm 990		019) FOUND	ATION				38-609	1798	Page 13
Part 2	XVII			sfers to a	nd Transactions ar	nd Relations	nips With Nonchari	table	
		Exempt Organ	izations						
					g with any other organization	on described in sec	tion 501(c)	<u> Y</u>	es No
•			•		to political organizations?				
		from the reporting founda						4 - (4)	
								1a(1)	$\frac{X}{X}$
								1a(2)	-
		sactions:	ble exempt ergenize	tion				15/1)	х
(1)	Durch	or assers to a noncrianta	ncharitable evennt o	uulln				1b(1) 1b(2)	X
									X
(4)	Reiml	nursement arrangements	01 011101 433013					1b(4)	X
(5)	Loans	or loan quarantees						1b(5)	X
(6)	Perfo	rmance of services or me	mbership or fundrai	sina solicitatio	ns				X
					ployees			1c	Х
							market value of the goods,		 S,
		•		-	• •	-	n or sharing arrangement, s		,
col	umn (d) the value of the goods,	other assets, or serv	rices received.					
(a) Line n	0.	(b) Amount involved	(c) Name o	f noncharitable	e exempt organization	(d) Description	on of transfers, transactions, and	sharing arrang	jements
				N/A					
	_								
	_								
	-								
	+								
	+								
			1						
			-						
	+								
2a Is t	he four	idation directly or indirec	tly affiliated with, or	related to, one	or more tax-exempt organi	zations described			
		501(c) (other than sectio	,	,	1 3		[Yes	X No
		mplete the following sch		••					
		(a) Name of org			(b) Type of organization		(c) Description of relations	ship	
		N/A							
	I be stee						and of much mounts does		
Sign					accompanying schedules and st taxpayer) is based on all informa		I Ma	ay the IRS disc turn with the p	cuss this
Here					1	шр па с	sh	own below? S	ee instr.
	Sign	ature of officer or trustee	<u> </u>		Data	Title	UKEK	X Yes	∟ No
	July	Print/Type preparer's na		Preparer's s	Date innature	Date	Check if PTIN		
		τι τιπα τγρο ριοματοί ο πο	uno	1 Toparor 3 S	ignatur 0		self- employed		
Paid		MARY IVERS	. CPA					01773	71
Prepa	arer			LMANN	& PETERSEN CI	PA'S	Firm's EIN ► 45 – 3		
Use (-
		Firm's address ▶ 29	29 PLYMOU	TH RD,	SUITE 350				

ANN ARBOR, MI 48105

Phone no. (734)994-7500

Part XV Supplementary Information				
3 Grants and Contributions Paid During the Y	ear (Continuation)			
Recipient ————————————————————————————————————	If recipient is an individual, show any relationship to	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	any foundation manager or substantial contributor	recipient	Contribution	
ANN ARBOR SYMPHONY ORCHESTRA	NONE	₽C	PROGRAM SUPPORT	
35 RESEARCH DR SUITE 100				
ANN ARBOR, MI 48103				15,000.
ANN ARBOR TEEN CENTER NEUTRAL ZONE	NONE	PC	PROGRAM SUPPORT	
310 E WASHINGTON				
ANN ARBOR, MI 48104				25,000.
BALLET CHELSEA	NONE	PC	PROGRAM SUPPORT	
1050 S MAIN ST				
CHELSEA, MI 48118				5,000.
BOYS SCOUTS OF AMERICA SOUTHERN SHORES COUNCIL	NONE	PC	PROGRAM SUPPORT	
3914 BESTECH RD				
YPSILANTI, MI 48197				300.
CALLET COLLEGE	NOVE		DDOGDAM GUDDODE	
CALVIN COLLEGE 3201 BURTON SE	NONE	PC	PROGRAM SUPPORT	
GRAND RAPIDS, MI 49546				100,000.
·				,
CANCER SERVICES OF MIDLAND 400 ASHMAN ST SUITE 100	NONE	PC	PROGRAM SUPPORT	
MIDLAND, MI 48640				5,000.
CANCER SUPPORT COMMUNITY OF ANN ARBOR	NONE	PC	PROGRAM SUPPORT	
2010 HOGBACK RD SUITE 3 ANN ARBOR, MI 48105				15,000.
				20,000.
CONSERVATION RESOURCE ALLIANCE	NONE	PC	PROGRAM SUPPORT	
10850 TRAVERSE HIGHWAY				40.000
TRAVERSE CITY, MI 49684				40,000.
CORNER HEALTH CENTER	NONE	PC	PROGRAM SUPPORT	
47 N HURON				
YPSILANTI, MI 48197				40,000.
CROOKED TREE ARTS CENTER	NONE	PC	PROGRAM SUPPORT	
461 E MITCHELL				
PETOSKEY, MI 49770				30,000.
Total from continuation sheets				2,724,658.

Part XV Supplementary Informatio	n			
3 Grants and Contributions Paid During the	Year (Continuation)	_		
Recipient	If recipient is an individual, show any relationship to	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	any foundation manager or substantial contributor	recipient	Contribution	
CULTURE SOURCE	NONE	PC	PROGRAM SUPPORT	
6200 SECOND AVE SUITE 3				
DETROIT, MI 48202				2,500.
CULVER EDUCATION FOUNDATION	NONE	PC	PROGRAM SUPPORT	
1300 ACADEMY RD				F 000
CULVER, IN 46511				5,000.
DELTA COLLEGE FOUNDATION	NONE	PC	PROGRAM SUPPORT	
1961 DELTA RD				
UNIVERSITY CENTER, MI 48710				55,000.
DRIFTSEED	NONE	PC	PROGRAM SUPPORT	
2719 FORT DR	NONE	FC	PROGRAM SUPPORT	
ALEXANDRIA, VA 22303				5,000.
				, -
EDENVILLE TOWNSHIP	NONE	PC	PROGRAM SUPPORT	
P.O. BOX 24				
EDENVILLE, MI 48620		+		25,000.
EDUCATE YOUTH 501(C)(3)	NONE	PC	PROGRAM SUPPORT	
104 S HURON ST				
YPSILANTI, MI 48197				12,000.
ELE'S PLACE ANN ARBOR	NONE	PC	PROGRAM SUPPORT	
3526 W LIBERTY STE 200	NONE		I ROGIUM BOITORI	
ANN ARBOR, MI 48103				51,000.
FAMILY LEARNING INSTITUTE	NONE	PC	PROGRAM SUPPORT	
1777 HIGHLAND DR ANN ARBOR, MI 48108				20 000
ANN ARBOR, MI 40100		1		20,000.
FIDDLE ENSEMBLE INC	NONE	PC	PROGRAM SUPPORT	
525 E MICHIGAN AVE SUITE 105				
SALINE, MI 48176				5,000.
ETDOM CONCERCAMIONAL CHIRDU OF ANN	NONE	PC	DDOCDAM CIIDDODA	
FIRST CONGREGATIONAL CHURCH OF ANN ARBOR	NONE		PROGRAM SUPPORT	
608 E WILLIAM				
ANN ARBOR, MI 48104				140,000.
Total from continuation sheets				

3 Grants and Contributions Paid During the Y	ear (Continuation)	_		
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	
FOR LOVE OF WATER	NONE	PC	PROGRAM SUPPORT	
153-1/2 E FRONT ST				
TRAVERSE CITY, MI 49684				30,000.
FRIENDS IN DEED	NONE	PC	PROGRAM SUPPORT	
1196 ECORSE RD				
YPSILANTI, MI 48198				20,000.
FRIENDS OF THE MASTER	NONE	₽C	PROGRAM SUPPORT	
616 WASHTENAW AVE				
YPSILANTI, MI 48197				50,000.
CDAND DADIDG CUMDUONY	NONE	PC	PROGRAM SUPPORT	
GRAND RAPIDS SYMPHONY 300 OTTAWA AVE NW	NONE	FC	PROGRAM SUPPORT	
GRAND RAPIDS, MI 49503				50,000.
GRASS LAKE SANCTUARY	NONE	PC	PROGRAM SUPPORT	
P.O. BOX 130842 ANN ARBOR, MI 48113				50,000.
MIN MEDOK, MI 40113				30,000.
GROWING HOPE	NONE	PC	PROGRAM SUPPORT	
922 W MICHIGAN AVE				25 000
YPSILANTI, MI 48197				25,000.
HISPANIC POLICE OFFICERS ASSOCIATION	NONE	PC	PROGRAM SUPPORT	
OF MICHIGAN				
9315 W FORT ST				10.000
DETROIT, MI 48210				10,000.
HOPE CLINIC	NONE	PC	PROGRAM SUPPORT	
PO BOX 980311				
YPSILANTI, MI 48198				30,000.
INTERFAITH HOSPITALITY NETWORK OF	NONE	PC	PROGRAM SUPPORT	
WASHTENAW COUNTY				
4290 JACKSON RD				
ANN ARBOR, MI 48103	1	1		16,000.
JUNIOR ACHIEVEMENT OF CENTRAL	NONE	PC	PROGRAM SUPPORT	
MICHIGAN	1.01111		LACOREM DOFFORT	
309 E INDIAN				
MIDLAND, MI 48640				15,000.
Total from continuation sheets				

Part XV Supplementary Information				_
3 Grants and Contributions Paid During the Y	ear (Continuation)	_		
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	5511112411511	
LA JOLLA COUNTRY DAY SCHOOL	NONE	PC	PROGRAM SUPPORT	
9490 GENESEE AVE				
LA JOLLA, CA 92037				500.
I AVE GUDEDTOD GMAME INTUEDGTMV	NONE	PC	DDOGDAN GUDDODE	
LAKE SUPERIOR STATE UNIVERSITY FOUNDATION	NONE	FC	PROGRAM SUPPORT	
650 W EASTERDAY AVE				
SAULT STE MARIE, MI 49783				50,000.
LEGACY CENTER FOR COMMUNITY SERVICES 3200 JAMES SAVAGE RD	NONE	PC	PROGRAM SUPPORT	
MIDLAND, MI 48642				5,000.
				, , , , , ,
MARY FREE BED	NONE	PC	PROGRAM SUPPORT	
235 WEALTHY ST SE GRAND RAPIDS, MI 49503				100 000
GRAND RAFIDS, MI 49303				100,000.
MASSACHUSETTS GENERAL HOSPITAL	NONE	PC	PROGRAM SUPPORT	
125 NASHUA ST				
BOSTON, MA 02114				5,000.
MICHIGAN ABILITY PARTNERS	NONE	PC	PROGRAM SUPPORT	
3810 PACKARD SUITE 260				
ANN ARBOR, MI 48108				25,000.
MICHIGAN FOSTER CARE CLOSET	NONE	PC	PROGRAM SUPPORT	
7507 N TERRITORIAL RD				
PLYMOUTH, MI 48170				20,000.
MICHIGAN THEATER FOUNDATION	NONE	PC	PROGRAM SUPPORT	
603 E LIBERTY	103.2			
ANN ARBOR, MI 48104				200,000.
MIDIAND ADEA COMMINITAL BOUNDARTON	MONE	D.C.	DDOGDAM GUDDODE	
MIDLAND AREA COMMUNITY FOUNDATION 76 ASHMAN CIRCLE	NONE	PC	PROGRAM SUPPORT	
MIDLAND, MI 48640				5,000.
				,
MIDLAND COUNTY COUNCIL ON AGING	NONE	PC	PROGRAM SUPPORT	
2008 BELAIRE ST MIDLAND, MI 48642				50,000.
Total from continuation sheets				30,000.

3 Grants and Contributions Paid During the				
Recipient	If recipient is an individual.			
Name and address (home or business)	show any relationship to any foundation manager	Foundation status of recipient	Purpose of grant or contribution	Amount
· · · · · · · · · · · · · · · · · · ·	or substantial contributor	recipient		
MOUNT PLEASANT DISCOVERY MUSEUM	NONE	PC	PROGRAM SUPPORT	
5093 E REMUS RD				25 222
MT. PLEASANT, MI 48858				25,000.
MUSTARD SEED SHELTER	NONE	PC	PROGRAM SUPPORT	
1325 CHERRY ST				
SAGINAW, MI 48601				5,000.
NATIONAL WILDLIFE FEDERATION	NONE	₽C	PROGRAM SUPPORT	
213 W LIBERTY ST				
ANN ARBOR, MI 48104				50,000.
NORTHWESTERN MICHIGAN COLLEGE	NONE	PC	PROGRAM SUPPORT	
FOUNDATION				
1701 E FRONT ST				
TRAVERSE CITY, MI 49686				50,000.
OUD HOUSE	MONE	D.G.	DDOGDAN GUDDODE	
OUR HOUSE 2737 HOLYOKE	NONE	PC	PROGRAM SUPPORT	
ANN ARBOR, MI 48103				2,500.
,				,
OZONE HOUSE	NONE	PC	PROGRAM SUPPORT	
1705 WASHTENAW ANN ARBOR, MI 48104				100,000.
IMW IMBON, MI 40104				100,000.
PIVOT POINT	NONE	PC	PROGRAM SUPPORT	
308 E LYON RD				12.600
MIDLAND, MI 48640				13,608.
PLANNED PARENTHOOD OF MICHIGAN	NONE	PC	PROGRAM SUPPORT	
950 VICTORS WAY STE 100				
ANN ARBOR, MI 48108				100,000.
REACHING OUR COMMUNITY KIDS	NONE	PC	PROGRAM SUPPORT	
2205 S JEFFERSON AVE				
MIDLAND, MI 48640				15,000.
RONALD MCDONALD HOUSE OF WESTERN	NONE	PC	PROGRAM SUPPORT	
MICHIGAN	TAOME.		INOGIAM DOFFORT	
1323 CEDAR STREET NE				
GRAND RAPIDS, MI 49503				2,750.
Total from continuation sheets				

Part XV Supplementary Information				_
3 Grants and Contributions Paid During the	Year (Continuation)	,		
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	
S D HASENFELD CHILDRENS CENTER	NONE	PC	PROGRAM SUPPORT	
1 PARK AVE, 5TH FLOOR	1012		I ROGIUM BOTTORI	
NEW YORK, NY 10016				2,500.
SHELTERHOUSE: COUNCIL ON DOMESTIC	NONE	PC	PROGRAM SUPPORT	
VIOLENCE				
3115 ISABELLA ST MIDLAND, MI 48640				100,000.
MIDDIND, MI 40040		1		100,000.
SOS COMMUNITY SERVICES	NONE	₽C	PROGRAM SUPPORT	
101 S HURON ST				
YPSILANTI, MI 48197				20,000.
ST JOSEPH MERCY HOSPITAL	NONE	PC	PROGRAM SUPPORT	
PO BOX 995				
ANN ARBOR, MI 48106				200,000.
CM LOUIS CENTED	NONE	D.G.	DDOGDAM GUDDODE	
ST LOUIS CENTER 16195 OLD US 12	NONE	PC	PROGRAM SUPPORT	
CHELSEA, MI 48118				151,000.
				,
STEWARDSHIP NETWORK	NONE	PC	PROGRAM SUPPORT	
416 LONGSHORE DR				40,000.
ANN ARBOR, MI 48105				40,000.
THE BRIDGE FOOD CENTER	NONE	₽C	PROGRAM SUPPORT	
1539 WASHINGTON				
MIDLAND, MI 48640		1		5,000.
THE FERRIS FOUNDATION	NONE	PC	PROGRAM SUPPORT	
420 OAK ST				
BIG RAPIDS, MI 49307				50,000.
UM LIBRARY	NONE	PC	PROGRAM SUPPORT	
818 HATCHER GRADUATE LIBRARY	[332 2344	
ANN ARBOR, MI 48109		<u> </u>		200,000.
UM LIFE SCIENCES INSTITUTE	NONE	PC	PROGRAM SUPPORT	
3003 S STATE ST, STE 9000 ANN ARBOR, MI 48109				20,000.
Total from continuation sheets	1	1	1	20,000.

3 Grants and Contributions Paid During the Ye	ear (Continuation)			
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		
UM MUSEUM OF ART	NONE	₽C	PROGRAM SUPPORT	
525 S STATE ST				
ANN ARBOR, MI 48109				3,000.
UM WILLIAM L CLEMENTS LIBRARY	NONE	PC	PROGRAM SUPPORT	
909 S UNIVERSITY				
ANN ARBOR, MI 48109				3,000.
UNITED METHODIST RETIREMENT	NONE	₽C	PROGRAM SUPPORT	
COMMUNITIES FOUNDATION				
805 W MIDDLE ST				
CHELSEA, MI 48118				100,000.
UNITED WAY OF WASHTENAW COUNTY	NONE	₽C	PROGRAM SUPPORT	
2305 PLATT RD				
ANN ARBOR, MI 48104				3,000.
URBAN INSTITUTE FOR CONTEMPORARY ARTS AT KENDALL COLLEGE	NONE	₽C	PROGRAM SUPPORT	
2 FULTON ST W				
GRAND RAPIDS, MI 49503				5,000.
VOTABA BOD AUTI DDBW	NONE	D.C.	DDOGDAM GUDDODE	
VOICES FOR CHILDREN 2851 MEADOW LARK A	NONE	PC	PROGRAM SUPPORT	
SAN DIEGO, CA 92123				1,000.
WASHTENAW HOUSING ALLIANCE PO BOX 7993	NONE	₽C	PROGRAM SUPPORT	
ANN ARBOR, MI 48107				50,000.
WE THE PEOPLE OPPORTUNITY CENTER 806 HILYARD ROBINSON WAY	NONE	PC	PROGRAM SUPPORT	
YPSILANTI, MI 48917				5,000.
				,,,,,,,
WEDGEWOOD CHRISTIAN SERVICES	NONE	PC	PROGRAM SUPPORT	
3300 36TH ST SE GRAND RAPIDS, MI 49512				20,000.
				20,000.
WEST MIDLAND FAMILY CENTER	NONE	PC	PROGRAM SUPPORT	
4011 W ISABELLA RD				20.000
SHEPHERD, MI 48883			1	30,000.

3 Grants and Contributions Approved for F				
Recipient	If recipient is an individual,			
Name and address (home or business)	show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
	Of Substantial Contributor	Tooipiont		
FLOYD J MCCREE THEATRE	NONE	PC	PROGRAM SUPPORT	
2040 W CARPENTER RD				
FLINT, MI 48505				10,000.
FRIENDS IN DEED	NONE	PC	PROGRAM SUPPORT	
1196 ECORSE RD				
PSILANTI, MI 48198				40,000.
GIRL SCOUTS HEART OF MICHIGAN	NONE	PC	PROGRAM SUPPORT	
144 JAMES L HART PKWY				
PSILANTI, MI 48197				15,000.
GLADWIN COMMUNITY SERVICES	NONE	PC	PROGRAM SUPPORT	
215 S ANTLER ST				
SLADWIN, MI 48624				10,000.
REATER LANSING FOOD BANK	NONE	PC	PROGRAM SUPPORT	
P.O. BOX				
LANSING, MI 48901				10,000.
REATER MIDLAND COMMUNITY CENTER	NONE	PC	PROGRAM SUPPORT	
2205 JEFFERSON AVE				
MIDLAND, MI 48640				12,000.
HOSPITALITY HOUSE OF THE UPPER	NONE	₽C	PROGRAM SUPPORT	
ENINSULA				
414 W FAIR AVE SUITE 204				
IARQUETTE, MI 49855				50,000.
NTERFAITH HOSPITALITY NETWORK OF	NONE	PC	PROGRAM SUPPORT	
ASHTENAW COUNTY				
290 JACKSON RD				
ANN ARBOR, MI 48103				30,000.
JUNIOR ACHIEVEMENT OF CENTRAL	NONE	PC	PROGRAM SUPPORT	
MICHIGAN				
309 E INDIAN				
MIDLAND, MI 48640				30,000.
KETTERING UNIVERSITY	NONE	PC	PROGRAM SUPPORT	
1700 UNIVERSITY AVE				
FLINT, MI 48504		1		50,000.
Total from continuation sheets				2,339,500.

Part XV Supplementary Information	1			
3 Grants and Contributions Approved for Fut	ure Payment (Continuation)			
Recipient	If recipient is an individual, show any relationship to	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	any foundation manager or substantial contributor	recipient	Contribution	
KIDS FOOD BASKET	NONE	PC	PROGRAM SUPPORT	
1300 PLYMOUTH AVE NE				
GRAND RAPIDS, MI 49505				5,000.
MIGHTONN ADILITHY DADWINDS	NONE	D.G.	DDOGDAN GUDDODE	
MICHIGAN ABILITY PARTNERS 3810 PACKARD SUITE 260	NONE	PC	PROGRAM SUPPORT	
ANN ARBOR, MI 48108				25,000.
				22,7551
MICHIGAN FOSTER CARE CLOSET	NONE	PC	PROGRAM SUPPORT	
7507 N TERRITORIAL RD				
PLYMOUTH, MI 48170				30,000.
MUNSON HEALTHCARE FOUNDATION	NONE	PC	PROGRAM SUPPORT	
1150 MEDICAL CAMPUS DR				
TRAVERSE CITY, MI 49684				250,000.
NATURE CONSERVANCY	NONE	PC	PROGRAM SUPPORT	
101 E GRAND RIVER	NOINE	FC	PROGRAM SUPPORT	
LANSING, MI 48906				750,000.
·				,
PADDLE ANTRIM	NONE	PC	PROGRAM SUPPORT	
P.O. BOX 323				27 500
ELK RAPIDS, MI 49629				27,500.
REACHING OUR COMMUNITY KIDS	NONE	PC	PROGRAM SUPPORT	
2205 S JEFFERSON AVE				
MIDLAND, MI 48640				30,000.
SOS COMMUNITY SERVICES	NONE	PC	PROGRAM SUPPORT	
101 S HURON ST				
YPSILANTI, MI 48197				20,000.
SPRING ARBOR UNIVERSITY	NONE	PC	PROGRAM SUPPORT	
106 E MAIN ST	MOINE		FROGRAM SUFFORT	
SPRING ARBOR, MI 49283				150,000.
·				,
UM SCHOOL OF MUSIC, THEATRE & DANCE	NONE	PC	PROGRAM SUPPORT	
1100 BAITS DR				750 000
ANN ARBOR, MI 48109				750,000.
Total from continuation sheets				L

Part XV Supplementary Information					
3 Grants and Contributions Approved for Futu	re Payment (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	Contribution		
WEST MICHIGAN SYMPHONY ORCHESTRA	NONE	PC	PROGRAM SUPPORT		
360 W WESTERN AVE SUITE 200				15 000	
MUSKEGON, MI 49440				15,000.	
WEST MIDLAND FAMILY CENTER	NONE	PC	PROGRAM SUPPORT		
4011 W ISABELLA RD					
SHEPHERD, MI 48883				30,000.	
Total from continuation sheets		1	1		
וטנמו ווטווו כטוונווועמנוטוו אווכלנא					

			<u> </u>			
FORM 990-PF	DIVIDEND	S AND INTER	EST.	FROM SECUR	ITIES S	TATEMENT 1
SOURCE	GROSS AMOUNT	CAPITAL GAINS DIVIDEND		(A) REVENUE PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME
CHARLES SCHWAB CHARLES SCHWAB US TREAS INTEREST CHEMICAL BANK VANGUARD FUNDS	299,360 11,515 491,906 797,319	•	0. 0. 0.	299,360. 11,515. 491,906. 797,319.		
TO PART I, LINE 4	1,600,100		0. 0.		1,600,100.	
FORM 990-PF		ACCOUNTI	NG I	FEES	S	TATEMENT 2
DESCRIPTION		(A) EXPENSES PER BOOKS		(B) T INVEST- NT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
IVERS RICKELMANN PETERSEN TAX PREP FEE		4,720.		4,720.		0.
TO FORM 990-PF, PG	1, LN 16B	4,720.	·	4,720.		0.
HODW 000 DE		WIND DROFTE	GTON	IN EDEC		mamaara 2
FORM 990-PF		THER PROFES	5101	NAL FEES	ა	TATEMENT 3
DESCRIPTION		(A) EXPENSES PER BOOKS		(B) T INVEST- NT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
HRNI ADMINISTRATIVE INVESTMENT MANAGEME COLUMBIA ASSET INVE	ENT FEES	2,610. 32,641.		0. 32,641.		2,610.
MGMT FEES BENNETT AUDIT FEE		15,000. 13,000.		15,000. 13,000.		0.
TO FORM 990-PF, PG	1, LN 16C	63,251.		60,641.		2,610.
	=					

FORM 990-PF	TAX	ES	STATEMENT 4		
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES	
PAYROLL TAXES FEDERAL EXCISE TAX	3,273. 20,000.			3,273.	
TO FORM 990-PF, PG 1, LN 18	23,273.	0.		3,273.	
FORM 990-PF	OTHER E	XPENSES		TATEMENT 5	
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES	
INSURANCE EXPENSE COMPUTER EXPENSE OFFICE EXPENSE DUES	9,272. 11,175. 1,977. 8,781.	0.		9,272. 11,175. 1,980. 8,781.	
TO FORM 990-PF, PG 1, LN 23	31,205.	0.		31,208.	

FORM 990-PF C	CORPORATE STOCK	STATEMENT 6	
DESCRIPTION		BOOK VALUE	FAIR MARKET VALUE
PUBLICLY TRADED SECURITIES	29,037,038.	61,266,935.	
TOTAL TO FORM 990-PF, PART II, LI	29,037,038.	61,266,935.	
FORM 990-PF	OTHER ASSETS		STATEMENT 7
DESCRIPTION	BEGINNING OF YR BOOK VALUE	END OF YEAR BOOK VALUE	FAIR MARKET VALUE
DEDCKITTION	111 20011 111202		VALUE
VANGUARD DIVIDEND IN TRANSIT	3,556.	3,219.	3,219

	- LIST OF OFFICERS, D ES AND FOUNDATION MANA		STAT	EMENT 8
NAME AND ADDRESS	TITLE AND AVRG HRS/WK	COMPEN- SATION	EMPLOYEE BEN PLAN CONTRIB	EXPENSE
JUDITH D. RUMELHART 924 N MAIN ST STE 1 ANN ARBOR, MI 48104	VPRES/TRUSTEE 1.00	0.	0.	0.
MARY IVERS 924 N MAIN ST STE 1 ANN ARBOR, MI 48104	TREASURER/TRUS	TEE 0.	0.	0.
JENNIFER POTEAT 924 N MAIN ST STE 1 ANN ARBOR, MI 48104	TRUSTEE 1.00	0.	0.	0.
MARGARET E. THOMPSON 924 N MAIN ST STE 1 ANN ARBOR, MI 48104	TRUSTEE 1.00	0.	0.	0.
STEVEN RIECKER 924 N MAIN ST STE 1 ANN ARBOR, MI 48104	TRUSTEE 1.00	0.	0.	0.
DAVID WINSTON INGLISH 924 N MAIN ST STE 1 ANN ARBOR, MI 48104	TRUSTEE 1.00	0.	0.	0.
DOUGLAS INGLISH 924 N MAIN ST STE 1 ANN ARBOR, MI 48104	TRUSTEE 1.00	0.	0.	0.
TINA S. VAN DAM 924 N MAIN ST STE 1 ANN ARBOR, MI 48104	TRUSTEE 1.00	0.	0.	0.
C. WENDELL DUNBAR 924 N MAIN ST STE 1 ANN ARBOR, MI 48104	PRES/TRUSTEE 10.00	0.	0.	0.
LYNN T. WHITE 924 N MAIN ST STE 1 ANN ARBOR, MI 48104	TRUSTEE 1.00	0.	0.	0.

TOTALS INCLUDED ON 990-PF, PAGE 6, PART VIII

0. 0. 0.

FORM 990-PF

GRANT APPLICATION SUBMISSION INFORMATION PART XV, LINES 2A THROUGH 2D

STATEMENT 9

NAME AND ADDRESS OF PERSON TO WHOM APPLICATIONS SHOULD BE SUBMITTED

C. WENDELL DUNBAR, PRESIDENT 924 N MAIN ST., SUITE 1 ANN ARBOR, MI 48104

TELEPHONE NUMBER

734-660-2170

FORM AND CONTENT OF APPLICATIONS

APPLICATION INFORMATION IS AVAILABLE ON THE ORGANIZATION'S WEBSITE, TOWSLEYFOUNDATION.ORG. GRANTS ARE NOT MADE TO INSTITUTIONS WHICH UNFAIRLY DISCRIMINATE IN POLICY OR PRACTICE BASED ON AGE, RACE, COLOR, CREED OR SEX. ORGANIZATIONS SEEKING AID FROM THE FOUNDATION SHOULD:

- 1. FORWARD A COPY OF THE TAX EXEMPT LETTER FROM THE IRS AND A COPY OF THE LETTER ESTABLISHING THAT THE APPLICANT IS NOT A PRIVATE FOUNDATION.
- 2. STATE THE AMOUNTS REQUESTED AND EXPLAIN THE NEED, IN THE FORMAT REQUESTED ON THE WEBSITE.
- 3. INCLUDE IN THE APPLICATION THE ORGANIZATION'S LATEST FINANCIAL STATEMENTS.

ANY SUBMISSION DEADLINES

DEADLINES FOR CONSIDERATION AT EACH BOARD MEETING ARE POSTED ON THE FOUNDATION WEBSITE.

RESTRICTIONS AND LIMITATIONS ON AWARDS

- 1. THE FOUNDATION DOES NOT MAKE DIRECT GRANTS TO INDIVIDUALS, PROVIDE LOAN FUNDS, OR MAKE GRANTS TO STUDENTS FOR SCHOLARSHIPS.
- 2. THE FOUNDATION DOES NOT MAKE GRANTS FOR TRAVEL AND CONFERENCES.

Form **8868**

(Rev. January 2020)

Department of the Treasury Internal Revenue Service

Application for Automatic Extension of Time To File an Exempt Organization Return

File a separate application for each return.

► Go to www.irs.gov/Form8868 for the latest information.

Electronic filing (e-file). You can electronically file Form 8868 to request a 6-month automatic extension of time to file any of the forms listed below with the exception of Form 8870, Information Return for Transfers Associated With Certain Personal Benefit

OMB No. 1545-0047

Contracts, for which an extension request must be sent to the IRS in paper format (see instructions). For more details on the electronic filing of this form, visit www.irs.gov/e-file-providers/e-file-for-charities-and-non-profits. Automatic 6-Month Extension of Time. Only submit original (no copies needed). All corporations required to file an income tax return other than Form 990-T (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request an extension of time to file income tax returns. Name of exempt organization or other filer, see instructions. Taxpayer identification number (TIN) Type or HARRY A. AND MARGARET D. TOWSLEY print 38-6091798 FOUNDATION File by the Number, street, and room or suite no. If a P.O. box, see instructions. due date for filina vour 924 N MAIN ST, NO. 1 return. See instructions City, town or post office, state, and ZIP code. For a foreign address, see instructions. 48104 ANN ARBOR, MI Enter the Return Code for the return that this application is for (file a separate application for each return) 0 4 **Application** Return Application Return Code Is For Code Is For Form 990 or Form 990-EZ 01 Form 990-T (corporation) 07 Form 990-BL 02 Form 1041-A 08 Form 4720 (individual) 03 Form 4720 (other than individual) 09 10 Form 990-PF Ω4 Form 5227 Form 990-T (sec. 401(a) or 408(a) trust) Form 6069 11 Form 990-T (trust other than above) 06 Form 8870 12 MARY IVERS, CPA The books are in the care of ▶ 2929 PLYMOUTH ROAD, STE 350 - ANN ARBOR, MI 48105 Telephone No. \triangleright 734-994-7500 Fax No. $\triangleright 734 - 994 - 0165$ If the organization does not have an office or place of business in the United States, check this box If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) . If this is for the whole group, check this box 🕨 🔲 . If it is for part of the group, check this box 🕨 📉 and attach a list with the names and TINs of all members the extension is for. I request an automatic 6-month extension of time until NOVEMBER 16, 2020 , to file the exempt organization return for the organization named above. The extension is for the organization's return for: ► X calendar year 2019 or tax year beginning , and ending If the tax year entered in line 1 is for less than 12 months, check reason: Initial return Final return Change in accounting period 3a If this application is for Forms 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less 27,000. any nonrefundable credits. See instructions. За If this application is for Forms 990-PF, 990-T, 4720, or 6069, enter any refundable credits and 56,729. estimated tax payments made. Include any prior year overpayment allowed as a credit. 3b Balance due. Subtract line 3b from line 3a. Include your payment with this form, if required, by

Caution: If you are going to make an electronic funds withdrawal (direct debit) with this Form 8868, see Form 8453-EO and Form 8879-EO for payment

LHA For Privacy Act and Paperwork Reduction Act Notice, see instructions.

using EFTPS (Electronic Federal Tax Payment System). See instructions.

Form 8868 (Rev. 1-2020)

instructions