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OMB No 1545-0052

Return of Private Foundation
or Section 4947(a)(1) Nonexempt Charitable Trust
Treated as a Private Foundation
Note. The foundation may be able to use a copy of this return to satisfy state reporting requirements. Department of the Treasury Internal Revenue Service

For	calendar year 2011 or tax year beginning 💢 👤		, and ending		
Na	ne of foundation			A Employer identification	n number
L	AURA LUDINGTON HOLLENBECK	FOUNDATION		38-3323698	B
	nber and street (or P.O box number if mail is not delivered to street	address)	Room/suite	B Telephone number	
-	320 WEST NELSON			(989)631-2	
	or town, state, and ZIP code IDLAND, MI 48640			C If exemption application is p	oending, check here .
G (check all that apply: Initial return	Initial return of a fo	ormer public charity	D 1. Foreign organization	s, check here 🔒 🕨
	Final return	Amended return		Foreign omenizations m	eeting the 85% tost
	Address change	Name change		Foreign organizations made 2. check here and attach or	omputation
H_C	theck type of organization X Section 501(c)(3) ex			E If private foundation sta	
<u></u>		Other taxable private founda		under section 507(b)(1	
	ir market value of all assets at end of year J Accounting	ng method: [A] Cash her (specify)	Accrual	F If the foundation is in a	
	om Part II, col. (c), line 16) Util. \$ 539, 957. (Part I, colui		hasis.)	under section 507(b)(1)(B), Check here PL
	Analysis of Revenue and Expenses	(a) Revenue and	(b) Net Investment	(c) Adjusted net	(d) Disbursements
. 1 2	(The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a)	expenses per books	income	income	for charitable purposes (cash basis only)
	1 Contributions, gifts, grants, etc., received	12,957.	77	N/A	1 2 2 2
	2 Check If the foundation is not required to attach Sch. B	1 60 172	, ,	144	
	3 Interest on savings and temporary cash investments	. 1.	1.		STATEMENT 1
	4 Dividends and interest from securities	14,885.	14,885		STATEMENT 2
	5a Gross rents				
	D Net rental Income or (loss)		1	,	<u> </u>
Φ	6a Net gain or (loss) from sale of assets not on line 10	536.			
eun	b Gross sales price for all 536.			· · · · · · · · · · · · · · · · · · ·	,
Revenue	7 Capital gain net income (from Part IV, line 2)	1.0	536	•	
_	8 Net short-term capital gain		, , , , , , , , , , , , , , , , , , , 		<u> </u>
	9 Income modifications				
	10a and allowances				
	b Less Cost of goods sold			HEUEIVE	¥
	c Gross profit or (loss)			120	
	12 Total. Add lines 1 through 11	28,379.	15,422	MAY 2 1 20	
	13 Compensation of officers, directors, trustees, etc.	0.	0.	Ш	<u>1</u> 0
	14 Other employee salanes and wages			OCDEN	IT
	15 Pension plans, employee benefits			OUDLIV,	7
Ses	16a Legal fees				
pen	b Accounting fees STMT 3	2,070.	1,035	•	1,035
Щ	c Other professional fees	4,128.	4,128.	·	0
tive	17 Interest	40	0.	 	
Administrative Expense		48.	<u> </u>		0
inis	19 Depreciation and depletion				
\d _{II}	20 Occupancy			 	·
and A	on Thisting and publications			 	
	23 Other expenses STMT 6	32.	0.	,	32
¥in.	24 Total operating and administrative		 		
Operating	expenses. Add lines 13 through 23	6,278.	5,163.	,	1,067
ō	25 Contributions, gifts, grants paid	26,250.			1,067 25,950
	26 Total expenses and disbursements.				
	Add lines 24 and 25	32,528.	5,163.	1	27,017
	27 Subtract line 26 from line 12:				
	Excess of revenue over expenses and disbursements	-4,149.	10 250		
	b Net investment income (if negative, enter -0-)		10,259.	λτ / λ	
	c Adjusted net income (If negative, enter -0-)	1. 112 11 1	<i>, '''</i> ' '	N/A	1900 10

LHA For Paperwork Reduction Act Notice, see instructions.

123511

Part IV Capital Gains ar	nd Losses for Tax on In	vestment	Income						
(a) List and describ 2-story brick ware	e the kind(s) of property sold (e.g. house; or common stock, 200 shs	, real estate, MLC Co)		1 P-	ow acc Purch Donat	ase	(c) Date : (mo., d	acquired ay, yr.)	(d) Date sold (mo., day, yr)
a CAPITAL GAINS D	IVIDENDS			ļ	_				
b				ļ					
<u>C</u>					_		-	-	
<u>d</u>				 					
е	(f) Depreciation allowed	(n) Cos	t or other basis	' 			(h) G:	ain or (loss)	
(e) Gross sales price	(or allowable)	107	xpense of sale	-				(f) minus (
a 536.									536
b									
G									
d	 								
	assa in column (b) and award by	ha foundation	on 19/21/60				Caina /C	al /b) asia	
Complete only for assets showing			cess of col. (i)			(i) col	(k), but r	ol (h) gain iot less thar	1111105 1 -0-) or
(i) F.M.V. as of 12/31/69	(j) Adjusted basis as of 12/31/69		col (j), if any				Losses	(from col (h))
<u>a</u>									536
b									
ď			· · · · · · · · · · · · · · · · · · ·	- +					
0						_		 ,	· · · · · · · · · · · · · · · · · · ·
	tal loss) { If gain, also enter	in Part I, line	7	}	2				536
2 Capital gain net income or (net capit	•		<i>/</i>	ノ <u>ト</u>					
3 Net short-term capital gain or (loss) If gain, also enter in Part I, line 8, co		0 (6):		٦l					
If (loss), enter -0- in Part I, line 8				<u>.] </u>	3			N/A	
Part V Qualification Un	der Section 4940(e) for	Reduced	Tax on Net	Inve	stm	ent Inc	ome		
For optional use by domestic private fo	oundations subject to the section 4	1940(a) tax on	net investment in	come.)				
f section 4940(d)(2) applies, leave this	part blank.					•			
, ,, , , ,									Yes X No
Was the foundation liable for the section f "Yes," the foundation does not qualify				nou r					L TUS LALINO
1 Enter the appropriate amount in each	ch column for each year, see instru	ictions before	making any entre	es					
(a)	(b)	·		(c)				Dietrib	(d) ution ratio
Base period years Calendar year (or tax year beginning	فمرام مشابكها مريم فيموم بالاستفاد	tributions	Net value of no						ided by col. (c))
2010		2,650.				1,187			.040871
2009		6,432.				,434			.056306
2008		1,871.	 			681			.059496
2007		7,025. 4,320.				1,914 1,931			.043825
2006		4,320.			333	1,731	+ -		1043023
2 Total of line 1, column (d)							2		.244663
3 Average distribution ratio for the 5-y						• ••			
the foundation has been in existence							3		.048933
				-					
4 Enter the net value of noncharitable-	-use assets for 2011 from Part X, I	ine 5					4		556,075.
									22 210
5 Multiply line 4 by line 3							5		27,210.
	(40) (D 11) 07()								102
6 Enter 1% of net investment income	(1% of Part I, line 27b)				••		6		103.
7 Add lines 5 and 6							7		27,313.
, was iiiies a gild o								<u></u>	
8 Enter qualifying distributions from F							8		27,017.
If line 8 is equal to or greater than li	ne 7, check the box in Part VI, line	1b, and comp	lete that part usin	g a 1%	tax ra	ite.			
See the Part VI instructions	· · · · · · · · · · · · · · · · · · ·								

			3323			Page 4
	rt VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4	948	- see	instru	ictio	ns)
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)	•	7 2 2		· ,	٥.
	Domestic foundations that meet the section 4940(e) requirements in Part V, check here and enter 1%	1	ļ			05.
	of Part I, line 27b			1 "	//	. ′
	All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of Part I, line 12, col (b)		,	, É.,		130
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	2_	— —			<u> </u>
	Add lines 1 and 2	3	ļ			05.
	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	4	ļ			0.
	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-	5		***************************************	2	05.
6	Credits/Payments.		Ì			. 3
a	2011 estimated tax payments and 2010 overpayment credited to 2011		5.7	20	10	7 1
þ	Exempt foreign organizations - tax withheld at source	1	1.00	20	13.	
C	Tax paid with application for extension of time to file (Form 8868)	0	1		,	
d	Backup withholding erroneously withheld	1	1. 7		, .,_	11
7	Total credits and payments. Add lines 6a through 6d	7			3	<u>20.</u>
8	Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached	8				
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed	9				
10	Overpayment If line 7 is more than the total of lines 5 and 8, enter the amount overpaid	10			1	15.
11	Enter the amount of line 10 to be Credited to 2012 estimated tax ▶ 115 - Refunded ▶	11				0.
Рa	rt VII-A Statements Regarding Activities					
1a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene	in			Yes	No
	any political campaign?			1a	<u> </u>	X
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see instructions for definition)?			1b		Χ,
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials published	d or				
	distributed by the foundation in connection with the activities					
C	Did the foundation file Form 1120-POL for this year?			10		_X_
đ	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year.					`
	(1) On the foundation ► \$ (2) On foundation managers. ► \$:		
	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation					,
	managers. ► \$ 0 .			['	-	
	Has the foundation engaged in any activities that have not previously been reported to the IRS?			2		X
	If "Yes," attach a detailed description of the activities.					
	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, o	r				
	bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes			3	.,	X
	Did the foundation have unrelated business gross income of \$1,000 or more during the year?			4a		X
b	If "Yes," has it filed a tax return on Form 990-T for this year?	N	/A .	4b		
	Was there a liquidation, termination, dissolution, or substantial contraction during the year?			5		X
	If "Yes," attach the statement required by General Instruction T.				```	
	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either			.		: ;
	By language in the governing instrument, or					
	By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state	law		<u> </u>		
	remain in the governing instrument?			6	X	
7	Did the foundation have at least \$5,000 in assets at any time during the year?			7	X	
	If "Yes," complete Part II, col. (c), and Part XV.					
	Enter the states to which the foundation reports or with which it is registered (see instructions)				١,,	:
	MI			•	١,	,
h	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate)				` `	
	A LAND STATE OF THE STATE OF TH			86	X	
	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for caler			1	7.7	, ;
	year 2011 or the taxable year beginning in 2011 (see instructions for Part XIV)? If "Yes," complete Part XIV			g	,	X
	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses			10		X

Form 990-PF (2011) LAURA LUDINGTON HOLLENBE	CK FOUNDATION	I	38-33236	598	Page 6
Part VII-B: Statements Regarding Activities for Which I	Form 4720 May Be I	Required (contin	ued)		
5a During the year did the foundation pay or incur any amount to:			(-	- 4	
(1) Carry on propaganda, or otherwise attempt to influence legislation (section	n 4945(e))?	Тэ	es LX No		1/2
(2) Influence the outcome of any specific public election (see section 4955); of	or to carry on, directly or indire	ectly,	٠٠٠٠.	74	
any voter registration drive?	,		S A NO	: 1	
(3) Provide a grant to an individual for travel, study, or other similar purposes		Ye	es 🔼 No 📔	,	ľ
(4) Provide a grant to an organization other than a charitable, etc., organization	n described in section		🔝		1
509(a)(1), (2), or (3), or section 4940(d)(2)?		YE	S A NO	1	111
(5) Provide for any purpose other than religious, charitable, scientific, literary,	or educational purposes, or t	or	اات	1	
the prevention of cruelty to children or animals?		YE	S LA NO	. 1	
b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify und	der the exceptions described i	in Regulations	NT/N	<u>-</u> "	* 4
section 53.4945 or in a current notice regarding disaster assistance (see instru	ictions)?		N/A	5b	77
Organizations relying on a current notice regarding disaster assistance check h			. •		1
c If the answer is "Yes" to question 5a(4), does the foundation claim exemption f	tom the tax because it mainta	inea 1 / 7	🗀 " 🧵	•	
expenditure responsibility for the grant?		1/A Y6	2S NO /	,	
If "Yes," attach the statement required by Regulations section 53.494.			k	. 🗈	
6a Did the foundation, during the year, receive any funds, directly or indirectly, to		[v.	('	1	
a personal benefit contract?			S A NO		·
b Did the foundation, during the year, pay premiums, directly or indirectly, on a p	iersonal benefit contract?		· · · }	6b	
If "Yes" to 6b, file Form 8870.	h-4hhh0		🔽 🗤		1
7a At any time during the tax year, was the foundation a party to a prohibited tax s	neiter transaction?		ַן נואר בבו אנ מ∕זמ	7b	
b If 'Yes,' did the foundation receive any proceeds or have any net income attribution. Information About Officers, Directors, Trust	cos Ecundation Ma	nogoro Highly	<u></u>	ע /	<u> </u>
Part VIII Paid Employees, and Contractors	ees, roundation Ma	magers, mgm	,		
1 List all officers, directors, trustees, foundation managers and their	compensation.				
	(b) Title, and average	(c) Compensation	(d) Contributions to	(e) Expense
(a) Name and address	hours per week devoted to position	(If not paid, enter -0-)	employee benefit plans and deferred compensation	acc	ount, other lowances
LAURA L. HOLLENBECK	PRESIDENT				
3320 W. NELSON					
MIDLAND, MI 48640-3346	1.00	0.	0.		0.
MARTYN T. HOLLENBECK	VICE PRESIDEN	Т			
3320 W. NELSON		i		ţ	
MIDLAND, MI 48640-3346	0.00	0.	0.		0.
SHEA DANIELLE HOLLENBECK	TREASURER				
3320 W. NELSON					
MIDLAND, MI 48640-3346	0.00	0.	0.	<u> </u>	0.
				<u> </u>	
2 Compensation of five highest-paid employees (other than those inc		enter "NONE."	(d) Contributions to	,	
(a) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week	(c) Compensation	employee benefit plans and deterred compensation	acc	Expense punt, other
	devoted to position		compensation	all	owances
NONE				ł	
				ļ	
				 	
				-	
				 	
	l				
T-A-I cumber of other appropriate part over \$50,000				1	0
Total number of other employees paid over \$50.000			🚩 📗		J

Form 990-PF (2011) LAURA LUDINGTON HOLLENBECK FOU	UNDATION	38-3323698 Pag	je 7
Part VIII Information About Officers, Directors, Trustees, Four Paid Employees, and Contractors (continued)		ghly	
3 Five highest-paid independent contractors for professional services. If none,			
(a) Name and address of each person paid more than \$50,000	(b) Type of	f service (c) Compensa	tion
NONE			
Total number of others receiving over \$50,000 for professional services	<u> </u>	_	0
Part IX-A Summary of Direct Charitable Activities			
List the foundation's four largest direct charitable activities during the tax year. Include relevant number of organizations and other beneficiaries served, conferences convened, research papers	statistical information such as the s produced, etc.	Expenses	
1 N/A			
	<u> </u>		
2			
	· · · · · · · · · · · · · · · · · · ·		
3	············		
4			
Doet IV D. C.			
Part IX-B Summary of Program-Related Investments Describe the two largest program-related investments made by the foundation during the tax year	ar on lines 1 and 2	Amount	
1 N/A	TOTAL CONTRACTOR OF THE CONTRA	Amount	—
		-	
2			_
All other program-related investments. See instructions.			
1			
			

Total. Add lines 1 through 3

For	m 990-PF (2011) LAURA LUDINGTON HOLLENBECK FOUNDATION	38-3	3323698 Page 8
P	art X Minimum Investment Return (All domestic foundations must complete this part Foreign fou	ndations, s	ee instructions.)
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes		
а	Average monthly fair market value of securities	1a	511,517. 53,026.
b	Average of monthly cash balances	1b	53,026.
C	Fair market value of all other assets	1c	
ď	Total (add lines 1a, b, and c)	1d	564,543.
e	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	564,543.
4	Cash deemed held for charitable activities Enter 1 1/2% of line 3 (for greater amount, see instructions)	4	8,468.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	556,075.
6_	Minimum Investment return. Enter 5% of line 5	6	27,804.
P	Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations are foreign organizations check here and do not complete this part.)	nd certain	
1	Minimum investment return from Part X, line 6	1	27,804.
2a	Tax on investment income for 2011 from Part VI, line 5		
b	Income tax for 2011. (This does not include the tax from Part VI) 2b		
C	Add lines 2a and 2b	2c	205.
3	Distributable amount before adjustments Subtract line 2c from line 1	3	27,599.
4	Recoveries of amounts treated as qualifying distributions	4	0.
5	Add lines 3 and 4	5	27,599.
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	27,599.
P	art XII Qualifying Distributions (see instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:		
-	Expenses, contributions, gifts, etc - total from Part I, column (d), line 26	1a	27,017.
b	Program-related investments - total from Part IX-B	1b	0.
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes	2	
3	Amounts set aside for specific charitable projects that satisfy the		- · · · · · · · · · · · · · · · · · · ·
a		3a	
	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	27,017.
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment		
•	income. Enter 1% of Part I, line 27b	5	0.
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	27,017.
•	Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation of		
	4940/e) reduction of tax in those years	,	

Page 9

Part XIII Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2010	(c) 2010	(d) 2011
1 Distributable amount for 2011 from Part XI,				27,599.
2 Undistributed income, if any, as of the end of 2011	180 - 195		26,200.	1 1/2 h = 2 1
a Enter amount for 2010 only	<u>antiquination in the control of the</u>	0.	20,200	
3 Excess distributions carryover, if any, to 2011.	, and annument to the particular	, , , , , , , , , , , , , , , , , , ,		
b From 2007				
d From 2009				
f Total of lines 3a through e	0.	· ,, · · · ·	14 11	31 31
4 Qualifying distributions for 2011 from		1. 1	. 1 2 (1 1 1);	
Part XII, line 4. ► \$ 27,017.	(3) ("		26,200.	
a Applied to 2010, but not more than line 2a		<u> </u>	20,200.	
 b Applied to undistributed income of prior years (Election required - see instructions) 		0.		
c Treated as distributions out of corpus		· · · · · · · · · · · · · · · · · · ·	n in in	•
(Election required - see instructions)	0.	\$ 2 ×2 1		,
d Applied to 2011 distributable amount	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	:	, , , , , , , , , , , , , , , , , , , ,	817.
e Remaining amount distributed out of corpus	0.	, ,		
5 Excess distributions carryover applied to 2011 (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:	**			
2 Corpus Add lines 3f, 4c, and 4e. Subtract line 5	0.			,
b Prior years' undistributed income Subtract		0	,	
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 2010. Subtract line 4a from line 2a. Taxable amount - see instr	1		0.	• .
f Undistributed income for 2011, Subtract lines 4d and 5 from line 1, This amount must				
be distributed in 2012		· · · · · · · · · · · · · · · · · · ·	mame in a Section of	26,782.
7 Amounts treated as distributions out of corpus to satisfy requirements imposed by	0.			`
section 170(b)(1)(F) or 4942(g)(3) 8 Excess distributions carryover from 2006	0.			
8 Excess distributions carryover from 2006 not applied on line 5 or line 7	0.			
9 Excess distributions carryover to 2012.		\.\.\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\		· · · · · · · · · · · · · · · · · · ·
Subtract lines 7 and 8 from line 6a	0.	, ,		Same of the second
10 Analysis of line 9:	V 30 30 50 50	Section of the second section of the		M. 1
a Excess from 2007				
b Excess from 2008			4 2 3 30	
c Excess from 2009			1 4 1 1 1 1 1 1	
d Excess from 2010				
e Excess from 2011	", '",		1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	, , , , , , , , , , , ,

	UDINGTON HO			38-332	23698 Page 10
Part XIV Private Operating F			II-A, question 9)	N/A	
1 a if the foundation has received a ruling o					
foundation, and the ruling is effective fo				1	
b Check box to indicate whether the found		ng foundation described		4942(j)(3) or 494	12(j)(5)
2 a Enter the lesser of the adjusted net	Tax year	(5) 0010	Prior 3 years	(4) 2009	(a) Total
income from Part I or the minimum	(a) 2011	(b) 2010	(c) 2009	(d) 2008	(e) Total
investment return from Part X for					
each year listed				-	
b 85% of line 2a					
c Qualifying distributions from Part XII,					
line 4 for each year listed					
d Amounts included in line 2c not				·	
used directly for active conduct of					
exempt activities					
e Qualifying distributions made directly					
for active conduct of exempt activities					
Subtract line 2d from line 2c					
3 Complete 3a, b, or c for the					
alternative test relied upon a "Assets" alternative test - enter			İ	i l	
(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		i			
organizations as provided in section 4942(j)(3)(B)(III)					
(3) Largest amount of support from	,				
an exempt organization					
(4) Gross investment income					
Part XV Supplementary Info	rmation (Comple	te this part only	if the foundation	had \$5.000 or mo	re in assets
at any time during t					
1 Information Regarding Foundatio	n Managers:				
a List any managers of the foundation wh	_	than 2% of the total con	tributions received by the	foundation before the close	e of any tax
year (but only if they have contributed in					,
NONE					
b List any managers of the foundation who	o own 10% or more of th	e stock of a corporation	(or an equally large porti	on of the ownership of a par	tnership or
other entity) of which the foundation has				, .	·
NONE					
2 Information Regarding Contributi	on, Grant, Gift, Loan,	Scholarship, etc., P	rograms:	 ,	
Check here ▶ ☐ if the foundation o				not accept unsolicited reques	sts for funds. If
the foundation makes gifts, grants, etc.					
a The name, address, and telephone num	per of the person to whor	n applications should be	addressed.		
LAURA L. HOLLENBECK,					
3320 WEST NELSON, MI					
b The form in which applications should b			hong ruchide.		
LETTER FORM	o sabilities and internal	son and materials they s			
c Any submission deadlines:		·			
NONE					
d Any restrictions or limitations on awards	, such as by geographica	il areas, charitable fields,	kinds of institutions, or i	other factors	
NONE					
	····				om 990-PF (2011)
123601 12-02-11				le d	99HePP/7/1111

Form 990-PF (2011)

Total

Page 12

Form 990-PF (2011)

LAURA LUDINGTON HOLLENBECK FOUNDATION **Analysis of Income-Producing Activities**

Enter gross amounts unless otherwise indicated	Unrelate	ed business income	Exclu	ded by section 512, 513, or 514	(e)
-	(a) Business	(b) Amount	Exclu- slon code	(d) Amount	Related or exempt function income
1 Program service revenue.	code		code		
a			 		
b		<u> </u>			
C			ļ 		
d					
e					
f					
g Fees and contracts from government agencies					
2 Membership dues and assessments					
3 Interest on savings and temporary cash					
investments			14	1.	
4 Dividends and interest from securities			14	14,885.	
5 Net rental income or (loss) from real estate:	**************************************	,		······································	
a Debt-financed property			 		
b Not debt-financed property					
			 		
6 Net rental income or (loss) from personal					
property					
7 Other investment income					
8 Gain or (loss) from sales of assets other			٠.,	F 2.6	
than inventory			14	536.	
9 Net income or (loss) from special events					
10 Gross profit or (loss) from sales of inventory					
11 Other revenue.					
a		-			
b					
C					
d				-	
12 Subtotal Add columns (b), (d), and (e)		0.		15,422.	0.
13 Total. Add line 12, columns (b), (d), and (e)					
(See worksheet in line 13 instructions to verify calculations)			••••		
Part XVI-B Relationship of Activities to	the Acc	omplishment of Ex	omn	t Durnoses	
Relationship of Activities to	THE ACC				
Line No. Explain below how each activity for which incom	ne is reported	ın column (e) of Part XVI-A	contril	outed importantly to the accord	nplishment of
the foundation's exempt purposes (other than b	y providing fu	inds for such purposes).			
		-			
	- · · · ·			<u> </u>	
					
		<u></u>			
					
				 -	
	<u> </u>		_		
123621 12-02-11					Form 990-PF (2011)

		Exempt Organ	izations								
1	Did the d	rganization directly or indi	rectly engage in any	of the following	ng with any other organi	zation descril	bed in section 50)1(c) of	7,7	Yes	No
	the Code	(other than section 501(c)(3) organizations) o	r in section 52	27, relating to political o	rganızations?	•			73	p(35)
a	Transfer	s from the reporting found	ation to a noncharita	ble exempt or	ganization of.) , (*)	17/21	1/4 3
	(1) Casi	h ,							1a(1)		_X
		er assets							1a(2)		X
b		nsactions:							\$	لمنسد	
	(1) Sale	s of assets to a nonchanta	ble exempt organiza	tion					16(1)		X
	(2) Puro	chases of assets from a no	nchantable exempt (organization					15(2)		X
	(3) Ren	tal of facilities, equipment,	or other assets						1b(3)		X
	(4) Rein	nbursement arrangements					· · · · · · · · · · · · · · · · · · ·		1b(4)		X
	(5) Loai	ns or loan guarantees							1b(5)		X
	(6) Perf	ormance of services or me	mbership or fundrai	sing solicitatio	ons				1b(6)		X
C	Sharing	of facilities, equipment, ma	ıling lists, other asse	ets, or paid em	ployees				16		_X_
đ	if the ans	swer to any of the above is	"Yes," complete the	following sche	edule. Column (b) shoul	d always sho	w the fair market	value of the god	ods, other ass	ets,	
,		es given by the reporting fo				value in any t	transaction or st	aring arrangeme	ent, show in		
		d) the value of the goods,									
(a) ⊔	пе по,	(b) Amount involved	(c) Name of		e exempt organization	(d)	Description of trai	sfers, transactions,	and sharing an	angemer	nts
				N/A							
					 · · · · · · · · · · · · · · · · · ·						
											
				 							
											
			<u> </u>								
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			<u></u>								
	· · · · · · · · · · · · · · · · · · ·										
	la dha fai		11				ib a d				
28		indation directly or indirect i 501(c) of the Code (other	•	-	-				Yes	X	l No
h		complete the following sch		((3)) 01 111 3601					163	LAL	1 140
u_	II fes, c	(a) Name of org			(b) Type of organization	on l	(c) De	scription of relat	ionshin		
		N/A	411246011		(D) Typo or organization	" 	(0) 50	5011ption			
		14/ 11									
						-				-	
							-			-	
											
	Unde	r penalties of perjury, I declare	that I have examined thi	s return, includin	g accompanying schedules	and statements	, and to the best of	my knowledga			_
Sig	and h	pelief, it is true, correct, and con				formation of wh	ilch preparer has ar	y knowledge.	May the IRS d return with the	prepare	r
He		the winds	ما الملك الما		15/14/12		reside		shown below	see instr	No No
	1 (#	nature of officer or trustee	to Casa		Date	Title					
		Print/Type preparer's na	me ´	Preparer's si	gnature	Date	Chec	k rf Pi	TIN		
					•	1- 1	1-12 self-	employed			
Pai	id	JENNÍFER G	ILARDI	1 Vin	1 Siland	3-11	1-19		2006530	98	
	eparer	Firm's name ▶ DEL					Firm	's EIN ► 86-			
	e Only			•							
	_	Firm's address ► 20	0 RENAISS	ANCE C	ENTER, SUIT	E 390	0				
_			TROIT, MI		•			ne no. 313	3-396-3	3000)
									Form 990-		

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

Department of the Treasury Internal Revenue Service

Schedule of Contributors

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

OMB No 1545-0047

Employer identification number

Name of the organization 38-3323698 LAURA LUDINGTON HOLLENBECK FOUNDATION Organization type (check one): Filers of: Section: 501(c)() (enter number) organization Form 990 or 990-EZ 4947(a)(1) nonexempt charitable trust not treated as a private foundation 527 political organization 501(c)(3) exempt private foundation Form 990-PF 4947(a)(1) nonexempt charitable trust treated as a private foundation 501(c)(3) taxable private foundation Check if your organization is covered by the General Rule or a Special Rule. Note. Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions. General Rule X For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II. **Special Rules** For a section 501(c)(3) organization filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections

Caution. An organization that is not covered by the General Rule and/or the Special Rules does not file Schedule B (Form 990, 990-EZ, or 990-PF), but it must answer "No" on Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on Part I, line 2 of its Form 990-PF, to certify that it does not meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990, 990-EZ, or 990-PF. Schedule B (Form 990, 990-EZ, or 990-PF) (2011)

509(a)(1) and 170(b)(1)(A)(vi) and received from any one contributor, during the year, a contribution of the greater of (1) \$5,000 or (2) 2%

For a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 for use exclusively for religious, charitable, scientific, literary, or educational purposes, or

For a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions for use exclusively for religious, charitable, etc., purposes, but these contributions did not total to more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., purpose. Do not complete any of the parts unless the General Rule applies to this organization because it received nonexclusively

religious, charitable, etc., contributions of \$5,000 or more during the year.

of the amount on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1. Complete Parts I and II.

the prevention of cruelty to children or animals. Complete Parts I, II, and III.

Name of organization

Employer identification number

LAURA LUDINGTON HOLLENBECK FOUNDATION

38-3323698

LAURA	LUDINGTON HOLLENBECK FOUNDATION		38-3323698
Part I	Contributors (see instructions). Use duplicate copies of Part I if addition	al space is needed.	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	JOHN LUDINGTON CLT C/O CHEMICAL BANK, 235 E. MAIN ST., P.O. BOX 2049 MIDLAND, MI 48640	\$ 12,957.	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZlP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution.)

Employer identification number

LAURA LUDINGTON HOLLENBECK FOUNDATION

38-3323698

art∄ Non	cash Property (see instructions). Use duplicate copies of P	art II if additional space is needed.	
(a) No. from Part I	(b) Description of noncash property given	· (c) FMV (or estimate) (see instructions)	(d) Date received
(a) No. From	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
_			

Employer Identification number

LAURA	LUDINGTON HOLLENBECK F	OUNDATION		38-3323698		
Part III	Exclusively religious, charitable, etc., indiv year. Complete columns (a) through (e) and the the total of exclusively religious, charitable, etc Use duplicate copies of Part III if additions	; , contributions of \$1,000 or less t	(c)(7), (8), or (10) organization tions completing Part III, enter for the year. (Enter this information once.	ns that total more than \$1,000 for the		
(a) No. from	(b) Purpose of gift	(c) Use of gift	(d) Desc	ription of how gift is held		
Part I						
}		(e) Transfer of g	jift			
-	Transferee's name, address, ar	nd ZIP + 4	Relationship of tran	nsferor to transferee		
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Descr	ription of how gift is held		
. [(e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee					
(a) No.						
from Part I	(b) Purpose of gift	(c) Use of gift	(d) Desci	ription of how gift is held		
-		(a) Tennefor of a				
_	(e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee.			sferor to transferee		
(A) (A)						
(a) No. from Part I	(b) Purpose of gift	. (c) Use of gift	(d) Descr	ription of how gift is held		
	(e) Transfer of gift					
	Transferee's name, address, and ZIP + 4		Relationship of tran	sferor to transferee		
<u>_</u>						

3 Grants and Contributions Paid During the				
Recipient	If recipient is an individual, show any relationship to any foundation manager	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	or substantial contributor	recipient	Contribution	·- <u>-</u>
CITY RESCUE MISSION	NONE	CHARITABLE	OPERATING FUND	
BURT STREET				
GAGINAW, MI 48606				40
COVENANT HOUSE	NONE	CHARITABLE	OPERATING FUND	
P.O. BOX 731	170.12			
NEW YORK, NY 10108-0900				150
EASTER SEALS	none	CHARITABLE	OPERATING FUND	
P.O. BOX 230319 GRAND RAPIDS MI 49523-0319				150
SKAND KAPIDS, MI 49523-0319				13
HABITAT FOR HUMANITY INTERNATIONAL	NONE	CHARITABLE	OPERATING FUND	
121 HABITAT ST.				
AMERICUS, GA 31709				500
HEIFER INTERNATIONAL	NONE	CHARITABLE	OPERATING FUND	
P.O. BOX 6021				
ALBERT LEA, MN 560079827				300
HIDDEN HARVEST	NONE	CHARITABLE	OPERATING FUND	
940 e. genesee ave. Saginaw, mi 48605				1,000
LITTLE FOLKS CONSERVANCY	NONE	CHARITABLE	OPERATING FUND	
105 POST ST.				
MIDLAND, MI 48640				500
<u>-</u>		,		
TAKE-A-WISH FOUNDATION	NONE	CHARITABLE	OPERATING FUND	
3550 N. CENTRAL AVE-SUITE 300 PHOENIX, AZ 85012				200
ROBATA, AZ 03012				200
MS ATHLETIC BOOSTER CLUB	NONE	CHARITABLE	OPERATING FUND	
HAS ATHLETIC BOOSTER CLUB	MOME	LARLINDUE	OFERNITING FOND	
MIDLAND, MI 48642				2,000
•				
MICHIGAN BASEBALL FOUNDATION	none	CHARITABLE	OPERATING FUND	
825 E. MAIN STREET				
TOTAL Trom continuation sheets	<u> </u>			500 16,950

3 Grants and Contributions Paid During the	Year (Continuation)			
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
MIDLAND AREA COMMUNITY FOUNDATION	NONE	CHARITABLE	OPERATING FUND	
76 ASHMAN CIRCLE				
MIDLAND, MI 48640		1		1,40
MIDLAND AREA HOMES	NONE	CHARITABLE	OPERATING FUND	
1825 BAY CITY ROAD, P.O. BOX 2163				_
MIDLAND, MI 48641				50
MIDLAND HIGH SCHOOL	none	EDUCATIONAL	OPERATING FUND	
1301 EASTLAWN	•			
MIDLAND, MI 48642				2,00
MIDLAND PUBLIC SCHOOLS	NONE	EDUCATIONAL	OPERATING FUND	
600 E. CARPENTER ST.				
MIDLAND, MI 48640				40
SALVATION ARMY	none	CHARITABLE	OPERATING FUND	
1215 EAST FULTON STREET				
GRAND RAPIDS, MI 49503				500
SALVATION ARMY	NONE	CHARITABLE	OPERATING FUND	
P.O. BOX 24121				
LANSING, MI 489094121				500
SHELTER HOUSE	NONE	CHARITABLE	OPERATING FUND	,
P.O. BOX 2660	10.12			
MIDLAND, MI 486412660				500
OWILE MDAYN	NONE	CHARITABLE	OPERATING FUND	
SMILE TRAIN 41 MADISON AVENUE, 28 FLOOR	X-011-2	C.IMITABLE .	D. DIGITING FUND	
NEW YORK, NY 10010				250
INITORR	NONE	CHARITABLE	OPERATING FUND	
UNICEF P.O. BOX 27780	NONE	LIMIT TABLE	DI ERRITHG FUND	
NEWARK, NJ 07101-7780				1,000
	NOVE		ODEDAMINA STOR	
UNITED WAY 220 W. MAIN, SUITE 100	NONE	CHARITABLE	OPERATING FUND	
MIDLAND, MI 48640				2,50
Total from continuation sheets				

Part XV **Supplementary Information** Grants and Contributions Paid During the Year (Continuation) If recipient is an individual, Recipient Purpose of grant or contribution Foundation show any relationship to Amount status of any foundation manager Name and address (home or business) recipient or substantial contributor NONE CHARITABLE OPERATING FUND WCMU PUBLIC BROADCASTING 1999 E. CAMPUS DR 700. MT PLEASANT, MI 48859 CHARITABLE OPERATING FUND WEST MIDLAND FAMILY CENTER NONE 4011 W. ISABELLA RD 500. SHEPHERD, MI 48883 WESTERN MICHIGAN UNIVERSITY EDUCATIONAL OPERATING FUND NONE 1903 W. MICHIGAN AVE KALAMAZOO, MI 49008 500. Total from continuation sheets

			*	
FORM 990-PF INTEREST ON SAVI	INGS AND TEM	PORARY CASH I	NVESTMENTS	STATEMENT 1
SOURCE				AMOUNT .
COMERICA BANK - CHECKING	1.			
TOTAL TO FORM 990-PF, PART I,	LINE 3, CO	LUMN A	_ :	1.
FORM 990-PF DIVIDENI	OS AND INTER	EST FROM SECU	RITIES	STATEMENT 2
SOURCE	GROSS		ITAL GAÎNS IVIDENDS	COLUMN (A) AMOUNT
CHEMICAL BANK - INVESTMENT COMERICA BANK - INVESTMENT		9,435. 5,986.	536.	8,899. 5,986.
TOTAL TO FM 990-PF, PART I, I	LN 4	15,421.	536.	14,885.
FORM 990-PF	ACCOUNTI	NG FEES		STATEMENT 3
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOM	
DELOITTE TAX LLP	2,070.	1,035.		1,035.
TO FORM 990-PF, PG 1, LN 16B	2,070.	1,035.		1,035.
FORM 990-PF 0	OTHER PROFES	SIONAL FEES		STATEMENT 4
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOM	
COMERICA BANK INVESTMENT MANAGEMENT FEES	1,322.	1,322.		0.
CHEMICAL BANK INVESTMENT MANAGEMENT FEES	2,806.	2,806.		0.
TO FORM 990-PF, PG 1, LN 16C	4,128.	4,128.		0.

FORM 990-PF	XAT	TAXES		
)ESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOM	
EXCISE TAXES	48.	0.		0.
ro form 990-PF, PG 1, LN 18	48.	0.		_ 0.
FORM 990-PF	OTHER E	XPENSES		STATEMENT 6
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOM	
OFFICE EXPENSE	32.	0.		32.
TO FORM 990-PF, PG 1, LN 23	32.	0.		32.
FORM 990-PF	CORPORAT	E STOCK		STATEMENT 7
DESCRIPTION	t	ВО	OK VALUE	FAIR MARKET VALUE
1500 SHS DOW CHEMICAL CO 1590 SHS CORNING INC 1,000 SHS ELI LILLY & CO 300 SHS HEWLETT PACKARD 1000 SHS 3M CO 500 SHS HEINZ H J CO 100 SHS IBM 34 SHS LABORATORY CORP OF AME 2485.09 SHS ROYCE VALUE PLUS 921.15 SHS DWS DREMAN SMALL CO 129 SHS BANK OF AMERICA CORP 75 SHS EXXON MOBIL CORPORATIO 166 SHS GILEAD SCIENCES 334 SHS ORACLE CORPORATION	FUND AP VALUE PL	US FUND	39,188. 54,860. 46,813. 23,236. 52,791. 23,616. 12,154. 5,985. 25,000. 25,000. 31,685. 5,272. 7,770. 7,740.	43,140. 20,638. 41,560. 20,608. 81,730. 32,424. 18,388. 7,221. 29,922. 30,103. 2,385. 6,357. 6,794. 8,567.
TOTAL TO FORM 990-PF, PART II	LINE 10B		361,110.	349,83

FORM 990-PF OTHER	INVESTMENTS		STATEMENT 8
DESCRIPTION	VALUATION METHOD	BOOK VALUE	FAIR MARKET VALUE
13138.654 SHS VANGUARD GNMA FUND	FMV	137,000.	145,445.
FOTAL TO FORM 990-PF, PART II, LINE	13	137,000.	145,445.