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## SCANNED DEC 0 5 2013'

### Form 990-PF

Department of the Treasury Internal Revenue Service

## **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

OMB No 1545-0052

2012
Open to Public Inspection

		ndar year 2012 or tax year beginning	, 2	012, and	ending		, 20
Na	me of fo	oundation			A Employe	r identification numbe	r
		CHASSIS FOUNDATION				26-2791453	
Nu	mber an	d street (or P O box number if mail is not delivered to street address	s) Ro	om/suite	B Telephone	ns)	
		NOLDS ROAD				517-543-6400	
Cit	y or tow	n, state, and ZIP code			C If exemp	otion application is pend	ling, check here ▶ 🗌
		ITE, MI_48813			_		
G	Check		irn of a former pub	lic charity	<b>D</b> 1. Foreig	jn organizations, check	here ▶ _
		☐ Final return ☐ Amended			2. Foreig	n organizations meetin	g the 85% test,
	<u> </u>	Address change Name ch				t here and attach compo foundation status was	
H		type of organization: Section 501(c)(3) exempt				507(b)(1)(A), check here	_
ᆜ		on 4947(a)(1) nonexempt charitable trust			_		
•		narket value of all assets at f year (from Part II, col. (c),		Accruai		undation is in a 60-mont ection 507(b)(1)(B), chec	
	line 16				under se	(Citori 307 (D)(1)(D), CitoC	K II C C
	art I	0.70					(d) Disbursements
		amounts in columns (b), (c), and (d) may not necessarily equal	(a) Revenue and expenses per	(0) 146	t investment	(c) Adjusted net	for charitable
		the amounts in column (a) (see instructions) )	- books	"	ncome	income	purposes (cash basis only)
	1	Contributions, gifts, grants, etc., received (attach schedule)	116,7	78	( ) ( ) ( ) ( ) ( )	1 10 10 10 10 10 10 10 10 10 10 10 10 10	, %, ,
	2	Check ▶ ☐ If the foundation is <b>not</b> required to attach Sch. B	. \$18K	··· ;			,,
	3	Interest on savings and temporary cash investments		93	93	ATTACHMENT 1	[4 <u>3</u> .
	4	Dividends and interest from securities			_		<b>6</b> ,
	5a	Gross rents					· Saland St. 1
	ь	Net rental income or (loss)	6300 HW4.5 18	(·2 % 8%	í á	, và 1,	٠. ،
Revenue	6a	Net gain or (loss) from sale of assets not on line 10		g friend	Mir inse	STATES STATES STATES	Mind of the same
	b	Gross sales price for all assets on line 6a	August 1995	s in significan	الله يرعد ا	in the con	,, , ,, ,,
Š	7	Capital gain net income (from Part IV, line 2)	Strategic Strate			2 77 35 5	Star Care
<b>C</b>	8	Net short-term capital gain		604- 100 M	2004 15 W		1.72
	9	Income modifications	* 1	`	***		**
	10a	Gross sales less returns and allowances	The second is	<u> </u>	***	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	4 * * * * *
	b	Less: Cost of goods sold	A. Arres, .	5 3× 2500	k K		*
	c	Gross profit or (loss) (attach schedule)		# <b>3.</b>			Constraint S
	11	Other income (attach schedule)					
	12	Total. Add lines 1 through 11	116,8	71	93		
es	13 14	Compensation of officers, directors, trustees, etc					
Ž.	15	Other employee salaries and wages					
Expenses	16a	Land form (AA) about 1 1 1 1 A	ļ				
	b	Accounting fees (attach schedule)	-				
Ş	c	Other professional fees (attach so heavier D					
ati	17	Interest RECEIVED					
ist	18	Taxes (attach schedule) (seemstructions)		1			ATTACHMENT2
Ē	19	Interest  Taxes (attach schedule) (see instructions)  Depreciation (attach schedule) and depieted.					Was det ye
둳	20	Occupancy	\				
Ϋ́	21	Travel, conferences, and meetings, EN UT.	7				
anc	22	Printing and publications OGUEIN.					
ğ	23	Other expenses (attach-schedule)					
Operating and Administrative	24	Total operating and administrative expenses.					
erĉ		Add lines 13 through 23		1	va	1000 10 1000	
Ò	25	Contributions, gifts, grants paid	110,48	39			110,489
	26	Total expenses and disbursements. Add lines 24 and 25	110,49		0	0	110,489
	27	Subtract line 26 from line 12:		- T. W. C.			aju aja 🐗
	a	Excess of revenue over expenses and disbursements	6,31			, 17 4004 , 1,405 11	>
	b	Net investment income (if negative, enter -0-)			93	· · · · · · · · · · · · · · · · · · ·	A CONTRACTOR OF THE
	C	Adjusted net income (if negative, enter -0-)	The contract		, ,	I	[````

For Paperwork Reduction Act Notice, see instructions.

Cat No 11289X

Form **990-PF** (2012)



Pa	ırt II	Balance Sheets Attached schedules and amounts in the description column	Beginning of year		of year
		Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only (See instructions)	(a) Book Value	(b) Book Value	(c) Fair Market Value
	1	Cash—non-interest-bearing	61,397	67,778	67,778
	2	Savings and temporary cash investments			
	3	Accounts receivable ►	Kath.		1.00
		Less: allowance for doubtful accounts ▶			
	4	Pledges receivable ▶	,		ì, <sup>(</sup> X
		Less. allowance for doubtful accounts ▶			
	5	Grants receivable			
	6	Receivables due from officers, directors, trustees, and other			
		disqualified persons (attach schedule) (see instructions)			
	7	Other notes and loans receivable (attach schedule) ▶	- Continuing in the continuing of the continuing		1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
		Less. allowance for doubtful accounts ▶			
ş	8	Inventories for sale or use			
Assets	9	Prepaid expenses and deferred charges			
¥ ∣	10a	Investments—U.S. and state government obligations (attach schedule)			
	b	Investments—corporate stock (attach schedule)			
	С	Investments—corporate bonds (attach schedule)			
	11	Investments—land, buildings, and equipment: basis ▶		338666	, ,
		Less accumulated depreciation (attach schedule) ▶			
	12	Investments—mortgage loans			
	13	Investments—other (attach schedule)			
	14	Land, buildings, and equipment: basis ▶	Townships in 3	A Company of the Comp	****** *** ***
l		Less: accumulated depreciation (attach schedule) ▶	***************************************		I.Y.
ľ	15	Other assets (describe ► )			
	16	Total assets (to be completed by all filers—see the			
- [		instructions. Also, see page 1, item I)	61,397	67,778	67,778
_	17	Accounts payable and accrued expenses	01,397	07,778	****
	18	Grants payable			
Liabilities	19	Deferred revenue			, .
∄∣	20	Loans from officers, directors, trustees, and other disqualified persons			3',
چ ا	21	Mortgages and other notes payable (attach schedule)			
Ĕ	22				
ŀ	23	Other liabilities (describe ► )  Total liabilities (add lines 17 through 22)			<b>%</b> 。
$\dashv$	23		0	0	'
တ္ထ		Foundations that follow SFAS 117, check here ▶ □ and complete lines 24 through 26 and lines 30 and 31.			
alances		•			
ā	24	Unrestricted			
Ba	25	Temporarily restricted			
ַ פַ	26	Permanently restricted	· ·		
ָבַּ		Foundations that do not follow SFAS 117, check here ▶ □			, , , , ,
ב ו		and complete lines 27 through 31.			23.
ွှ	27	Capital stock, trust principal, or current funds			
ë	28	Paid-ın or capıtal surplus, or land, bldg., and equipment fund			
SSI	29	Retained earnings, accumulated income, endowment, or other funds	61,397	67,778	*****
Net Assets or Fund	30	Total net assets or fund balances (see instructions)	61,397	67,778	
2	31	Total liabilities and net assets/fund balances (see			(West - 1979)
		instructions)	61,397	67,778	3, C. A. S. L.
	rt III	Analysis of Changes in Net Assets or Fund Balances		<u> </u>	
1		I net assets or fund balances at beginning of year-Part II, colu		st agree with	
	end-	of-year figure reported on prior year's return)		1	61,397
2	Ente	r amount from Part I, line 27a		<del></del>	6,381
3	Othe	er increases not included in line 2 (itemize) ▶		3	
4	Add	lines 1, 2, and 3			67,778
5	Decr	reases not included in line 2 (itemize)		5	
6	Tota	reases not included in line 2 (itemize)   I net assets or fund balances at end of year (line 4 minus line 5)—I	Part II, column (b), li	ne 30 <b>6</b>	67,778
					000 DE

Part	(a) List and describe the	Losses for Tax on Investment of the kind(s) of property sold (e.g., real estate se, or common stock, 200 shs MLC Co)	·,	(b) How acquired P-Purchase D-Donation		ate acquired	(d) Date sold (mo , day, yr )
1a							
<u> </u>							
<u>c</u>						<del></del>	
<u>d</u>							
<u>          e                          </u>	(e) Gross sales price	(f) Depreciation allowed (or allowable)		r other basis ense of sale			n or (loss) f) minus (g)
a							
b							
c			·····				
<u>d</u>						····	
<u>е</u>	0			10/01/00			
	Complete only for assets sno	wing gain in column (h) and owned I					l (h) gain minus t less than -0-) <b>or</b>
	(i) F M V as of 12/31/69	(j) Adjusted basis as of 12/31/69		ss of col (i)			rom col (h))
a				· · ·			
ь							
<u>c</u>						<u>-</u>	
<u>u</u>						<del></del>	
2	Capital gain net income or		also enter in Pa enter -0- in Pa		2	_	
3	If gain, also enter in Part	n or (loss) as defined in sections I, line 8, column (c) (see instruc	1222(5) and (6) tions). If (loss)	):	_		
				J	3		
Part		er Section 4940(e) for Reduvate foundations subject to the s					
Was t	s," the foundation does not	section 4942 tax on the distribut qualify under section 4940(e) D	o not complete	this part.			☐ Yes 🗸 No
1		ount in each column for each yea	ir; see the instri	uctions before m	aking a	any entries.	(d)
Cale	(a) Base penod years endar year (or tax year beginning in)	(b) Adjusted qualifying distributions	Net value o	(c) of noncharitable-use a	ssets		tribution ratio divided by col (c))
	2011		1,162		8,578		2.417779
	2010		5,510		9,233		1.752726
	2009	130	),354		1,567		2.117271
	2008		0	1	3,591	<u></u>	0.000000
2 3	Total of line 1, column (d) Average distribution ratio	for the 5-year base period—dividual dation has been in existence if le	de the total on		the	2	6.287776 1.571944
4	Enter the net value of none	charitable-use assets for 2012 fr	om Part X, line	5		4	90,224
5	Multiply line 4 by line 3					5	141,827
6	Enter 1% of net investmer	nt income (1% of Part I, line 27b)				6	<u> </u>
7	Add lines 5 and 6				.	7	141,828
8		ns from Part XII, line 4 ater than line 7, check the box in			. L	8 art using a 1	% tax rate. See the

Part		nstrı	<u>ıctio</u>	ns)			
1a							
	Date of ruling or determination letter (attach copy of letter if necessary—see instructions)						
b	b Domestic foundations that meet the section 4940(e) requirements in Part V, check						
_	There and enter 176 of Part I, line 270						
G	All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of part I, line 12, col. (b).						
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)						
3	Add lines 1 and 2						
4	The state of the s		0				
5 6	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0- Credits/Payments.		<u>1</u>				
а	2012 estimated tax payments and 2011 overpayment credited to 2012   6a	ξ.	Š				
b	Exempt foreign organizations—tax withheld at source 6b 0		referen.	123/46/43			
c	Tax paid with application for extension of time to file (Form 8868) . 6c 0	1 ,	` .				
d	Backup withholding erroneously withheld 6d	ě.	: 22				
7	Total credits and payments. Add lines 6a through 6d		0				
8	Enter any <b>penalty</b> for underpayment of estimated tax. Check here    If Form 2220 is attached						
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed ▶ 9		1				
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid • 10			<u> </u>			
11	Enter the amount of line 10 to be: Credited to 2013 estimated tax ► Refunded ► 11			<u> </u>			
	VII-A Statements Regarding Activities	т —	Yes	No			
1a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any political campaign?	1a	163	<b>140</b> ✓			
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see	la.		\ <u> </u>			
-	Instructions for the definition)?	1b		<b>✓</b>			
	If the answer is "Yes" to <b>1a</b> or <b>1b</b> , attach a detailed description of the activities and copies of any materials published or distributed by the foundation in connection with the activities.	N.	100 - 34 100 - 34 100 - 34	,			
С	Data de la companya d						
d	a management of the state of th						
е	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers. ▶ \$	,	di Servi				
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?	2		<b>7</b>			
	If "Yes," attach a detailed description of the activities.		.,				
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes	<u>.</u>					
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	4a		1			
b	If "Yes," has it filed a tax return on Form 990-T for this year?	4b					
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?	5		✓			
	If "Yes," attach the statement required by General Instruction T.		146				
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either:	ł	1				
	<ul> <li>By language in the governing instrument, or</li> <li>By state legislation that effectively amends the governing instrument so that no mandatory directions that</li> </ul>			2 1			
	conflict with the state law remain in the governing instrument?	6	<b>√</b>				
7	Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col (c), and Part XV	7	1				
8a	Enter the states to which the foundation reports or with which it is registered (see instructions) ▶	2000 W ( E	,,,,, %2	· fina			
	MI		13, 1845)				
b	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General		<u></u>				
_	(or designate) of each state as required by General Instruction G? If "No," attach explanation	8b	<b>✓</b>	/%` /4			
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or		<u>-</u> -				
	4942(j)(5) for calendar year 2012 or the taxable year beginning in 2012 (see instructions for Part XIV)? If "Yes," complete Part XIV	9	[	/			
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their	-	$\vdash$	Ť			
. •	names and addresses	10	1				

Par	VII-A Statements Regarding Activities (continued)			
11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of section 512(b)(13)? If "Yes," attach schedule (see instructions)	11		1
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had advisory privileges? If "Yes," attach statement (see instructions)	12		1
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	✓	
4.4	Website address ► N/A			
14	The books are in care of ► STEVEN HAGEMAN  Telephone no. ► 51  Located at ► 1541 REYNOLDS ROAD CHARLOTTE, MI  ZIP+4 ►	7-543- 4881		·
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of <b>Form 1041</b> —Check here	4001		▶ □
	and enter the amount of tax-exempt interest received or accrued during the year	•	•	· _
16	At any time during calendar year 2012, did the foundation have an interest in or a signature or other authority		Yes	No
	over a bank, securities, or other financial account in a foreign country?	16		✓
	See the instructions for exceptions and filing requirements for Form TD F 90-22.1. If "Yes," enter the name of		,	~4948
	the foreign country ►	, 🕯		
Part	Statements Regarding Activities for Which Form 4720 May Be Required	٠.8	Yes	No
10	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.  During the year did the foundation (either directly or indirectly):		res	.:
1a	(1) Engage in the sale or exchange, or leasing of property with a disqualified person? .   Yes   No	,	1. A.	学工
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a	*		,
	disqualified person?	ta vis		87
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? .		*	
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?	a 3		
	(5) Transfer any income or assets to a disqualified person (or make any of either available for the benefit or use of a disqualified person)?	1 1 1 1	**	iśs
	(6) Agree to pay money or property to a government official? (Exception. Check "No" if the	, .		; i)
	foundation agreed to make a grant to or to employ the official for a period after	,		- "
	termination of government service, if terminating within 90 days) Yes Vo	, 1		
b	If any answer is "Yes" to 1a(1)–(6), did <b>any</b> of the acts fail to qualify under the exceptions described in Regulations section 53.4941(d)-3 or in a current notice regarding disaster assistance (see instructions)?	1b	<u>*.</u> ,	\ <u>\</u>
	Organizations relying on a current notice regarding disaster assistance check here	10		-
С	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that	,	***	of the origin
	were not corrected before the first day of the tax year beginning in 2012?	1c		1
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation defined in section 4942(j)(3) or 4942(j)(5)):	1.73		1.00
а	At the end of tax year 2012, did the foundation have any undistributed income (lines 6d and	`,		s.,
	6e, Part XIII) for tax year(s) beginning before 2012?	94	18 <del> </del> (4, 18)	٠. ، ا
	If "Yes," list the years ▶ 20 , 20 , 20 , 20	7 %		
b	Are there any years listed in 2a for which the foundation is <b>not</b> applying the provisions of section 4942(a)(2)	2,3	200	,,, ,
	(relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer "No" and attach statement—see instructions)		~~~~	<u>"                                   </u>
С	If the provisions of section 4942(a)(2) are being applied to <b>any</b> of the years listed in 2a, list the years here.	2b		<b>V</b>
C	► 20 , 20 , 20 , 20		الهمية	赤公
За	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise			
	at any time during the year?			1366
ь	If "Yes," did it have excess business holdings in 2012 as a result of (1) any purchase by the foundation or	i		7 1
_	disqualified persons after May 26, 1969, (2) the lapse of the 5-year period (or longer period approved by the	. 0%		1001
	Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest; or (3) the lapse of		华.	
	the 10-, 15-, or 20-year first phase holding period? (Use Schedule C, Form 4720, to determine if the	‡q		
	foundation had excess business holdings in 2012.)	3b		<u> </u>
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a		<b>✓</b>
b	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2012?	4b		لحقدا
	chanable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2012:	40		▼

Pac	ıe	6

Part	VII-B	Statements Regarding Activities	for W	Vhich Form	4720	May Be F	lequire	<b>d</b> (contii	nued)			
5a	During	the year did the foundation pay or incur a	ny amo	ount to:						T	ì».	
		ry on propaganda, or otherwise attempt t			on (sect	tion 4945(e	))? .	☐Yes	✓ No	1	. A.,	3.66
	(2) Influence the outcome of any specific public election (see section 4955); or to carry on,									ŀ	.3	**
	directly or indirectly, any voter registration drive?										no.	
		• • •						=	=	* / ·		- 🔊
		vide a grant to an individual for travel, stu						✓ Yes	∐ No		è	,
	(4) Provide a grant to an organization other than a charitable, etc., organization described in								·,	**		
		tion 509(a)(1), (2), or (3), or section 4940(c						☐ Yes	✓ No	1	100	***
	(5) Provide for any purpose other than religious, charitable, scientific, literary, or educational										1	à
	pur	poses, or for the prevention of cruelty to o	childrer	n or animals?				☐Yes	✓ No	٠,		3.2
b	If any a	nswer is "Yes" to 5a(1)-(5), did any of the	e transa	actions fail to	qualify	under the	exception	ons descr	ibed in	'		**
	Regulat	ions section 53.4945 or in a current notice	regardı	ng disaster as	ssistanc	ce (see instr	uctions)	?		5b		<b>→</b>
	Organiz	ations relying on a current notice regardi	ng disa	ster assistan	ce che	ck here			▶□	1/2 /4	\$\$. · ·	: ``1
С	_	nswer is "Yes" to question 5a(4), does t	-				the tax			- ['	3	
		e it maintained expenditure responsibility						☐Yes	☑ No	ľ	W	, See
		" attach the statement required by Regula		=								318gg
6a		foundation, during the year, receive any					amilime				3	i
Va		rsonal benefit contract?		-	un <del>c</del> chy		5111IUITIS			*		
	•							∐ Yes	_ ∐ No	***************************************	<u> </u>	
b		foundation, during the year, pay premiun	ns, dire	ctly or indire	ctly, on	a persona	benetit	contract	?.	6b		<b>√</b>
		to 6b, file Form 8870.					_		_	* *	, Sept. 5.	144
		me during the tax year, was the foundation						☐ Yes	_			
		did the foundation receive any proceeds								7b		
Part	VIII	Information About Officers, Direc	tors, 1	rustees, F	ounda	tion Man	agers,	Highly F	aid E	mploy	ees,	
		and Contractors										
1	List all	officers, directors, trustees, foundation	n mana	agers and th	eir con	npensatio	ı (see ir	structio	ns).			
		(a) Name and address		e, and average rs per week		mpensation not paid,		Contribution vee benefit		(e) Expe		
		(a) Name and address		ed to position		nter -0-)		rred compe		other	allowan	ces
ATTAC	HMENT	3						•				
					l	0			o			0
							l					
2	Compo	ensation of five highest-paid employee	o /oth	or than that	oo inal	udod on li	no 1 -	oo inctr	uetion	) If n	000	ontor
2	"NONE		es (our	er man mo:	se inci	uaea on n	ne i—s	see msu	uctions	s). II II	one,	enter
				1								<del></del>
	/- <b>\ \</b> \			(b) Title, and a		(c) Compe		(d) Contribution of the		(e) Expe	nse ac	count,
,	a) Name a	nd address of each employee paid more than \$50,00	U	hours per v devoted to p	osition	(c) Compe	nsation	plans and compens		other	allowan	ces
								Compens	auon			
NONE												
						}						
												_
<b></b>												
				`		1						
				1								
Total	number	of other employees paid over \$50,000 .		L		<u> </u>			•			
· Otal	iumber '	ci carioi ciripioyeco paid over 400,000 .	• •		···	• • •	• •	· · ·		orm <b>99</b>	0-DE	(2012)
												1/11//

Part V	III Information About Officers, Directors, Trustees, Foundation Managers, Highly and Contractors (continued)	Paid Employees,
3 F	Five highest-paid independent contractors for professional services (see instructions). If none, er	iter "NONE."
	(a) Name and address of each person paid more than \$50,000 (b) Type of service	(c) Compensation
NONE		
		<u> </u>
	···	
Total nu	umber of others receiving over \$50,000 for professional services	NONE
Part IX	K-A Summary of Direct Charitable Activities	
	Summary of Direct Chamado Actividos	
	e foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the zations and other beneficiaries served, conferences convened, research papers produced, etc.	number of Expenses
1 N/A	4	
	······································	
2		
з —		
		·
	`	
4		
Part IX		Amount
	be the two largest program-related investments made by the foundation during the tax year on lines 1 and 2	Amount
1 NO	NE	
2 —		
	er program-related investments. See instructions	
3 <u>NO</u>	NE	
Total. A	dd lines 1 through 3	. •
		Form <b>990-PF</b> (2012

Part	X Minimum Investment Return (All domestic foundations must complete this part. Fore	ign found	ations,
	see instructions.)		
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc.,	2./3	
	purposes:		
а	Average monthly fair market value of securities	1a	
b	Average of monthly cash balances	1b	91,598
С	Fair market value of all other assets (see instructions)	1c	O
d	Total (add lines 1a, b, and c)	1d	91,598
е	Reduction claimed for blockage or other factors reported on lines 1a and	13. •	
	1c (attach detailed explanation)		
2	Acquisition indebtedness applicable to line 1 assets	2	0
3	Subtract line 2 from line 1d	3	91,598
4	Cash deemed held for charitable activities. Enter 1 1/2 % of line 3 (for greater amount, see		
	instructions)	4	1,374
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	90,224
6	Minimum investment return. Enter 5% of line 5	6	4,511
Part			-
1	Minimum investment return from Part X, line 6	1	4,511
2a	Tax on investment income for 2012 from Part VI, line 5 2a 1		
b	Income tax for 2012. (This does not include the tax from Part VI.) <b>2b</b>		
С	Add lines 2a and 2b	2c	1
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	4,510
4	Recoveries of amounts treated as qualifying distributions	4	
5	Add lines 3 and 4	5	4,510
6	Deduction from distributable amount (see instructions)	6	
7	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII,		
	line 1	7	4,510
		<del></del>	
Part	Qualifying Distributions (see instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:	2,3,3	
a	Expenses, contributions, gifts, etc.—total from Part I, column (d), line 26	1a	110,489
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	0
3	Amounts set aside for specific charitable projects that satisfy the.		
а	Suitability test (prior IRS approval required)	3a	o
b	Cash distribution test (attach the required schedule)	3b	0
4	Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4	4	110,489
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income.	<del>                                      </del>	110,403
-	Enter 1% of Part I, line 27b (see instructions)	5	1
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	110,488
•	<b>Note.</b> The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating		
	qualifies for the section 4940(e) reduction of tax in those years.	9 WINGUIGI	ine loulluation

Part	XIII Undistributed Income (see instruction	ons)			
		(a)	(b)	(c)	(d)
1	Distributable amount for 2012 from Part XI,	Corpus	Years prior to 2011	2011	2012
	line 7		*		4,510
2	Undistributed income, if any, as of the end of 2012	******	Same # 18 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	1986	·
а	Enter amount for 2011 only .			\\_\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\	<b>.</b>
b	Total for prior years: 20 10 ,20 09 ,20 08	, ,		- Aŭ	**
3	Excess distributions carryover, if any, to 2012.		27		- 1
а	From 2007	*		*/k	
b	From 2008	25 May	\ • • • • • • • • • • • • • • • • • •	*	sus V
c	From 2009 126,597	The Add The			M Sir v v Sir
d	5 0040	* }	· ·	<b>\$\$</b> .	*
e	From 2010	A5.,	TYSSKELLER	. A Mile	7 X
f					
4	Qualifying distributions for 2012 from Part XII,	556,384	k	*	
7		· .	2000 A 2 3 4 4	M	*
_	110,400		<i>"</i> ,		<i>"</i>
a b	Applied to 2011, but not more than line 2a	*	*	. , , ,	
D	Applied to undistributed income of prior years (Election required—see instructions)				*** · · ·
_		3		,	<u></u>
С	Treated as distributions out of corpus (Election required—see instructions)		aint a	, ja	,
				, ' , y***, ',	,,>
d	Applied to 2012 distributable amount		***		4,510
е	Remaining amount distributed out of corpus	105,980	8000 - 20	X // //	
5	Excess distributions carryover applied to 2012		<u>ላ</u> ኞ - "	***	
	(If an amount appears in column (d), the same	** , **	9.5%		>
_	amount must be shown in column (a).)			Dereka in de	
6	Enter the net total of each column as	1.02 May 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1.	, , , ,	***************************************	<b>*</b>
	indicated below:	*	j.	78ks	
а	Corpus Add lines 3f, 4c, and 4e Subtract line 5	662,364		A	Marie Ville
b	Prior years' undistributed income. Subtract	Ta . ti		*****	*
	line 4b from line 2b	, , , , , , , , , , , , , , , , , , ,		avi .	
С	Enter the amount of prior years' undistributed			**	**
	income for which a notice of deficiency has	· · ·		₹	<i>3</i>
	been issued, or on which the section 4942(a)	38)		Markey 19	·* , K
	tax has been previously assessed				75 75
d	Subtract line 6c from line 6b Taxable			strijk, es.	
	amount—see instructions	*** ***			·
е	Undistributed income for 2011. Subtract line	15		:	к,
	4a from line 2a. Taxable amount-see	. \$			
	instructions		1.1		in the section
f	Undistributed income for 2012. Subtract lines	\$	,,	***	
	4d and 5 from line 1. This amount must be	, 174.			
	distributed in 2013			ing with the	
7	Amounts treated as distributions out of corpus		, , ,	á.	
	to satisfy requirements imposed by section			e Land	
	170(b)(1)(F) or 4942(g)(3) (see instructions) .				\$ 504
8	Excess distributions carryover from 2007 not		· > / / \$44.		
	applied on line 5 or line 7 (see instructions).				;ou <sub>n</sub>
9	Excess distributions carryover to 2013.		*	~*	
	Subtract lines 7 and 8 from line 6a	662,364	American ser su.	r-anthres.	
10	Analysis of line 9:	*	1 01%	/3	1000
а	Excess from 2008	]	,		
b	Excess from 2009 126,597		Wadanaa	1000 y.	34 44
c	Excess from 2010	75/88"		· · · · · · · · · · · · · · · · · · ·	, , , ***
d	Excess from 2011 209,735		¥		
e	Excess from 2012	A Commence of the Commence of		Marie San	
	100,000	a comment (Sec.)	( 4) 4	· · · · · · · · · · · · · · · · · · ·	, w , w

•						
	90-PF (2012)					Page 10
	XIV Private Operating Founda					
1a	If the foundation has received a ruling					
	foundation, and the ruling is effective fo		-		NOT APP	
b	Check box to indicate whether the four		e operating founda		ction 4942(J)(	3) or 4942(j)(5)
2a	Enter the lesser of the adjusted net income from Part I or the minimum	Tax year	#110044	Prior 3 years	(-1) 2000	(e) Total
	investment return from Part X for	(a) 2012	<b>(b)</b> 2011	(c) 2010	(d) 2009	·
_	each year listed					
	85% of line 2a					
С	Qualifying distributions from Part XII, line 4 for each year listed					
d	Amounts included in line 2c not used directly for active conduct of exempt activities					
е	Qualifying distributions made directly for active conduct of exempt activities. Subtract line 2d from line 2c					
3	Complete 3a, b, or c for the alternative test relied upon.					
а	"Assets" alternative test - enter:					
	(1) Value of all assets .					
	(2) Value of assets qualifying under					
	section 4942(j)(3)(B)(i)					
b	"Endowment" alternative test—enter <sup>2</sup> / <sub>3</sub> of minimum investment return shown in Part X, line 6 for each year listed					
С	"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					
art	XV Supplementary Information	n (Complete t	his part only if	the foundation ha	nd \$5,000 or mo	ore in assets at
	any time during the year-	-see instructio	ns.)			
1	Information Regarding Foundation	Managers:	•	-		
а	List any managers of the foundation					by the foundation
	before the close of any tax year (but o	only if they have o	ontributed more t	han \$5,000). (See se	ection 507(d)(2).)	
	ATTACHMENT 4					
b	List any managers of the foundation ownership of a partnership or other e			•		rge portion of the
	NONE					<u> </u>
2	Information Regarding Contribution					
	Check here ▶ ☐ If the foundation	only makes cont	tributions to pres	elected charitable o	rganizations <sub>,</sub> and	does not accept
	unsolicited requests for funds. If the tother conditions, complete items 2a,		s gifts, grants, etc	. (see instructions) to	individuals or or	ganizations under
а	The name, address, and telephone nu		f the person to wh	nom applications sho	ould be addressed	j.
	ATTACHMENT 5				=	
b	The form in which applications should	l be submitted ar	nd information and	d materials they shou	ıld ınclude.	
	LETTER, INCLUDING A COPY OF 501(C	) (3) DETERMINAT	ION LETTER			<del></del>
С	Any submission deadlines:					
	GENERAL GRANTS - NONE  Any restrictions or limitations on av	varde euch ac h	y geographical :	argae charitable fo	lde kinde of inch	atutione or other
a	Any restrictions or limitations on av	varus, such as l	by geographical a	areas, chantable lie	ius, kiilus Ul IIISI	atations, or other

factors:

ATTACHMENT 6

Part 3	XV Supplementary Information (conti Grants and Contributions Paid During t	nued)	ed for Fut	ture Payment	
	Recipient		I		T .
	·	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		
а	Paid during the year				
	ATTACHMENT 7				
	<u></u>				
					,
					-
	Total			▶ 3a	110,489
b	Approved for future payment				
	Total		L	<b>▶</b> 3b	

Pa Ente		oss amounts unless otherwise indicated.		isiness income	Excluded by section	on 512, 513, or 514	
	_		(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	(e) Related or exempt function income (See instructions)
1		gram service revenue:					
	a						
	b						
	c d	<del></del>					
	e		-			···	
	f						
	<u>'</u>	Face and an investigation of the control of the con					
^		Fees and contracts from government agencies					
2		mbership dues and assessments			44		
3		rest on savings and temporary cash investments idends and interest from securities			14	93	
4		rental income or (loss) from real estate:	1.15m 1 1/2	Britis Ariyani	V		** }
5		· ·	1.46	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1			
		Debt-financed property	-				
6							
_		rental income or (loss) from personal property er investment income					
7		n or (loss) from sales of assets other than inventory				<del></del>	
8		nor (loss) from sales of assets other than inventory norms or (loss) from special events					
9		ess profit or (loss) from sales of inventory					
10 11		· · · · · · · · · · · · · · · · · · ·					
.,	b						
	C						
	d			···			
	e						
	-						
12	Sut	total Add columns (b) (d) and (a)	17 96.18 4 1 7 2 2		84 (	02	
		ototal. Add columns (b), (d), and (e)				93	
13	Tot	al. Add line 12, columns (b), (d), and (e)				93 13	
<b>13</b> See	Tot wor	<b>al.</b> Add line 12, columns (b), (d), and (e) ksheet in line 13 instructions to verify calculation	 ıs.)				
13 See Par	Tot wor	al. Add line 12, columns (b), (d), and (e)	is.) Accomplishm	ent of Exemp	t Purposes	13	93
13 See Par Lin	Tot wor	al. Add line 12, columns (b), (d), and (e)	is.) Accomplishm	ent of Exemp	t Purposes	13	93
13 See Par Lin	Tot wor LX No	al. Add line 12, columns (b), (d), and (e)	is.) Accomplishm	ent of Exemp	t Purposes	13	93
13 See Par Lin	Tot wor LX No	al. Add line 12, columns (b), (d), and (e)	is.) Accomplishm	ent of Exemp	t Purposes	13	93
13 See Par Lin	Tot wor LX No	al. Add line 12, columns (b), (d), and (e)	is.) Accomplishm	ent of Exemp	t Purposes	13	93
13 See Par Lin	Tot wor LX No	al. Add line 12, columns (b), (d), and (e)	is.) Accomplishm	ent of Exemp	t Purposes	13	93
13 See Par Lin	Tot wor LX No	al. Add line 12, columns (b), (d), and (e)	is.) Accomplishm	ent of Exemp	t Purposes	13	93
13 See Par Lin	Tot wor LX No	al. Add line 12, columns (b), (d), and (e) ksheet in line 13 instructions to verify calculation  VI-B Relationship of Activities to the A  Explain below how each activity for which accomplishment of the foundation's exempt pur	is.) Accomplishm	ent of Exemp	t Purposes	13	93
13 See Par Lin	Tot wor LX No	al. Add line 12, columns (b), (d), and (e)	is.) Accomplishm	ent of Exemp	t Purposes	13	93
13 See Par Lin	Tot wor LX No	al. Add line 12, columns (b), (d), and (e) ksheet in line 13 instructions to verify calculation  VI-B Relationship of Activities to the A  Explain below how each activity for which accomplishment of the foundation's exempt pur	is.) Accomplishm	ent of Exemp	t Purposes	13	93
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13 See Par Lin	Tot wor LX No	al. Add line 12, columns (b), (d), and (e) ksheet in line 13 instructions to verify calculation  VI-B Relationship of Activities to the A  Explain below how each activity for which accomplishment of the foundation's exempt pur	is.) Accomplishm	ent of Exemp	t Purposes	13	93
13 See Par Lin	Tot wor LX No	al. Add line 12, columns (b), (d), and (e) ksheet in line 13 instructions to verify calculation  VI-B Relationship of Activities to the A  Explain below how each activity for which accomplishment of the foundation's exempt pur	is.) Accomplishm	ent of Exemp	t Purposes	13	93
13 See Par Lin	Tot wor LX No	al. Add line 12, columns (b), (d), and (e) ksheet in line 13 instructions to verify calculation  VI-B Relationship of Activities to the A  Explain below how each activity for which accomplishment of the foundation's exempt pur	is.) Accomplishm	ent of Exemp	t Purposes	13	93
13 See Par Lin	Tot wor LX No	al. Add line 12, columns (b), (d), and (e) ksheet in line 13 instructions to verify calculation  VI-B Relationship of Activities to the A  Explain below how each activity for which accomplishment of the foundation's exempt pur	is.) Accomplishm	ent of Exemp	t Purposes	13	93
13 See Par Lin	Tot wor LX No	al. Add line 12, columns (b), (d), and (e) ksheet in line 13 instructions to verify calculation  VI-B Relationship of Activities to the A  Explain below how each activity for which accomplishment of the foundation's exempt pur	is.) Accomplishm	ent of Exemp	t Purposes	13	93
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13 See Par Lin	Tot wor LX No	al. Add line 12, columns (b), (d), and (e) ksheet in line 13 instructions to verify calculation  VI-B Relationship of Activities to the A  Explain below how each activity for which accomplishment of the foundation's exempt pur	is.) Accomplishm	ent of Exemp	t Purposes	13	93

Part	XVII		n Regarding Trans ganizations	sfers To and Transa	ctions and	Relationshi	ps With	Noncha	ritabl	е	<del></del>
1	Did t			engage in any of the follo	owing with an	y other orgar	nization de	escribed	、; ·溢	Yes	No
		ection 501(c) of th nizations?	e Code (other than s	ection 501(c)(3) organiz	ations) or in s	ection 527, r	elating to	political		, N.	
а	Tran	sfers from the rep	orting foundation to	a noncharitable exemp	t organization	of:				, ,	
	(1) (		-		-				1a(1)		1
	(2)	Other assets .							1a(2)		1
b	Othe	er transactions:								* .	
	(1) S	Sales of assets to	a noncharitable exer	mpt organization					1b(1)		✓
	(2) F	Purchases of asse	ts from a noncharita	ble exempt organization	١				1b(2)		✓
(3) Rental of facilities, equipment, or other assets					1b(3)		✓				
	(4) F	Reimbursement ar	rangements						1b(4)		✓
		oans or loan guai							1b(5)		✓
	(6) F	Performance of se	rvices or membershi	p or fundraising solicita	tions	•			1b(6)		✓
С	Shar	ing of facilities, ed	quipment, maılıng lıs	ts, other assets, or paid	employees				1c		✓
d				," complete the following							
				es given by the reportine column (							
(a) Lin	e no	(b) Amount involved	(c) Name of nonch	aritable exempt organization	(d) Desc	nption of transfe	rs, transactio	ons, and sha	ng am	angeme	ents
		N/A			N/A						
			•								
					į.		-				
2a b	desc	ribed in section 5		liated with, or related to ther than section 501(c)(					] Yes		No
		(a) Name of organi	zation	(b) Type of organiza	ation		(c) Description	on of relation	ship		
	-				_						
						<u>.</u>					
		-									
							·				
		er penalties of perjury, I	declare that I have examined	this return, including accompan	ying schedules and	d statements, and	to the best o	f my knowled	ge and l	oelief, it	is true,
Sign Here		Fari Wo	rde	n taxpayer) is based on all inform	ation of which prep		wieage 	May the IR with the pi	eparer	shown	below
	Sığı	nature of officer or trus	<u> </u>	Date T <sub>1</sub>	tie	15.					
Paid Prep	arer	Print/Type preparer	's name	Preparer's signature		Date		ck ll if employed	TIN		
Use		Firm's name ▶					Firm's EIN	<u> </u>			
	Ž. 11.3	Firm's address ▶					Phone no				

### 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

Name of the organization			Employer identification number			
SPARTAN CHASSIS FOUND Organization type (check			26-2791453			
Filers of:	Section:					
Form 990 or 990-EZ	☐ 501(c)( )	(enter number) organization	-			
	4947(a)(1) none	xempt charitable trust <b>not</b> treated as a private	foundation			
	☐ 527 political org	ganization				
Form 990-PF	√ 501(c)(3) exemp	ot private foundation				
	4947(a)(1) none	xempt charitable trust treated as a private four	dation			
	501(c)(3) taxable	e private foundation	-			
• •	•	eral Rule or a Special Rule. ation can check boxes for both the General Ru	e and a Special Rule. See			
General Rule						
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 33½ % support test of the regulations under sections 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% of the amount on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1. Complete Parts I and II.						
during the year, to	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 the prevention of cruelty to children or animals. Complete Parts I, II, and III.					
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 <b>General Rule</b> applies to this organization because it received nonexclusively religious, charitable, etc., contributions of \$5,000 or more during the year						
990-EZ, or 990-PF), but it r	nust answer "No" on P	ne General Rule and/or the Special Rules does Part IV, line 2 of its Form 990; or check the box oes not meet the filing requirements of Schedu	on line H of its Form 990-EZ or on			

Name of organization Employer identification number SPARTAN CHASSIS FOUNDATION 26-2791453

Part I	Contributors (see instructions). Use duplicate copie	es of Part I if additional space is	needed.
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	SPARTAN MOTORS CHASSIS, INC.  1000 REYNOLDS ROAD  CHARLOTTE, MI 48813	\$\$	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
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		s	Person
(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

## ATTACHMENT 1

## Form 990 PF, PART I - INTEREST ON TEMPORARY CASH INVESTMENTS

NET INVESTMENT INCOME	\$6\$	\$93
REVENUE AND EXPENSES PER BOOKS	\$93	\$93
		TOTAL
DESCRIPTION	INTEREST INCOME	

## SPARTAN CHASSIS FOUNDATION

Form 990 PF, PART I - TAXES

REVENUE AND EXPENSES PER BOOKS

\$1

26-2791453

ATTACHMENT 2

FEDERAL

DESCRIPTION

TOTAL

# Form 990 PF, PART VIII - LIST OF OFFICERS, DIRECTORS, AND TRUSTEES

l	TITLE AND AVERAGE HOURS PER WEEK DEVOTED TO POSITION			
NAME AND ADDRESS				
ARTHUR ICKES 1000 REYNOLDS ROAD CHARLOTTE, MI 48813	PRESIDENT 1.00	0\$	\$0	0\$
JANINE NIERENBERGER 1000 REYNOLDS ROAD CHARLOTTE, MI 48813	SECRETARY 1.00	\$0	\$0	\$0
LORI WADE 1000 REYNOLDS ROAD CHARLOTTE, MI 48813	TREASURER 1.00	\$0	\$0	\$0
JOHN SZTYKIEL 1000 REYNOLDS ROAD CHARLOTTE, MI 48813	DIRECTOR 1.00	\$0	\$0	0\$
THOMAS GORMAN 1000 REYNOLDS ROAD CHARLOTTE, MI 48813	DIRECTOR 1.00	0\$	\$0	\$0
EDWARD DOBBS 1000 REYNOLDS ROAD CHARLOTTE, MI 48813	DIRECTOR 1.00	Ö\$	\$0	\$0

## ATTACHMENT 4

# Form 990 PF, PART XV - INFORMATION REGARDING FOUNDATION MANAGERS

JOHN SZTYKIEL, IN HIS CAPACITY AS OFFICER OF SPARTAN MOTORS INC., & SUBSIDIARIES IS CONSIDERED A SUBSTANTIAL CONTRIBUTOR.
THOMAS GORMAN, IN HIS CAPACITY AS OFFICER OF SPARTAN MOTORS INC., & SUBSIDIARIES IS CONSIDERED A SUBSTANTIAL CONTRIBUTOR.

## SPARTAN CHASSIS FOUNDATION

ATTACHMENT 5

26-2791453

Form 990 PF, PART XV - NAME, ADDRESS AND PHONE FOR APPLICATIONS

STACY GUY 1000 REYNOLDS ROAD CHARLOTTE, MI 48813 517-543-6400

## Form 990 PF, PART XV - RESTRICTIONS OR LIMITATIONS ON AWARDS

GRANTS LIMITED TO ORGANIZATIONS BENEFITING CHARLOTTE, MICHIGAN AND THE SURROUNDING AREA.

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0 PF, PART XV - GRANTS AND CONTRIBUTIONS PAID DURING THE YEAR
PART XV
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	RELATIONSHIP TO SUBSTANTIAL CONTRIBUTOR AND	PURPOSE OF GRANT OR	
RECIPIENT NAME AND ADDRESS	FOUNDATION STATUS OF RECIPIENT	CONTRIBUTION	AMOUNT
CHARLOTTE PUBLIC SCHOOLS 378 STATE STREET CHARLOTTE, MI 48813	NONE PUBLIC	GENERAL	\$5,000
EATON COUNTY UNITED WAY P. O. BOX 14 350 LANSING STREET, SUITE B CHARLOTTE, MI 48813	NONE PUBLIC	MATCHING CONTRIBUTION	\$16,489
EATON COMMUNITY HOSPICE 2675 SOUTH COCHRAN ROAD CHARLOTTE, MI 48813	NONE PUBLIC	GENERAL	\$2,500
AMERICAN CANCER SOCIETY 1755 ABBEY ROAD EAST LANSING, MI 495Q3	NONE PUBLIC	GENERAL	\$2,500
SPARROW FOUNDATION P. O. BOX 30480 LANSING, MI 48909	NONE PUBLIC	GENERAL	\$500
GRAND VALLEY STATE UNIVERSITY 1 CAMPUS DRIVE ALLENDALE, MI 49401	NONE PUBLIC	GENERAL	\$2,000

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APT XV - GRANTS AND CONTRIBILIONS DAID DIBING THE VEAR	שווווטט טוא ו
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RECIPIENT NAME AND ADDRESS	RELATIONSHIP TO SUBSTANTIAL CONTRIBUTOR AND FOUNDATION STATUS OF RECIPIENT	PURPOSE OF GRANT OR CONTRIBUTION	AMOUNT
HAYES GREEN BEACH HOSPITAL 321 E. HARRIS STREET CHARLOTTE, MI 48813	NONE PUBLIC	GENERAL	\$75,000
MICHIGAN STATE UNIVERSITY 426 AUDITORIUM ROAD EAST LANSING, MI 48824	NONE PUBLIC	GENERAL	\$1,000
OLIVET COLLEGE 320 SOUTH MAIN STREET OLIVET, MI 49076	NONE PUBLIC	GENERAL	\$1,000
EATON AREA SENIOR CENTER 804 SOUTH COCHRAN ROAD CHARLOTTE, MI 48813	NONE PUBLIC	GENERAL	\$2,500
EATON COUNTY SIREN SHELTER 245 SOUTH COCHRAN ROAD CHARLOTTE, MI 48813	NONE PUBLIC	GENERAL	\$2,000

\$110,489

TOTAL CONTRIBUTIONS PAID

## 91 7199 9991 7031 1955 4074

Form 8868

Internal Revenue Service

## Application for Extension of Time To File anified Mail **Exempt Organization Return**

(Rev January 2013) OMB No. 1545-1709 Department of the Treasury File a separate application for each return. If you are filing for an Automatic 3-Month Extension, complete only Part I and check this box If you are filing for an Additional (Not Automatic) 3-Month Extension, complete only Part II (on page 2 of this form) Do not complete Part II unless you have already been granted an automatic 3-month extension on a previously filed Form 8868 Electronic filing (e-file). You can electronically file Form 8868 if you need a 3-month automatic extension of time to file (6 months for a corporation required to file Form 990-T), or an additional (not automatic) 3-month extension of time. You can electronically file Form 8868 to request an extension of time to file any of the forms listed in Part II or Part II with the exception of Form 8870, Information Return for Transfers Associated With Certain Personal Benefit Contracts, which 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/efile and click on e-file for Charities & Nonprofits Automatic 3-Month Extension of Time. Only submit original (no copies needed). A corporation required to file Form 990-T and requesting an automatic 6-month extension - check this box and complete All other corporations (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request an extension of time to file income tax returns Enter filer's identifying number, see instructions Name of exempt organization or other filer, see instructions Employer identification number (EIN) or Type or print SPARTAN CHASSIS FOUNDATION 26-2791453 File by the Number, street, and room or suite no. If a P.O. box, see instructions. Social security number (SSN) due date for 1000 REYNOLDS ROAD filing your City, town or post office, state, and ZIP code. For a foreign address, see instructions. instructions CHARLOTTE, MI 48813 Application Return **Application** Return Code Is For Code is For Form 990-T (corporation) 07 Form 990 or Form 990-EZ 01 80 02 Form 1041-A Form 990-BL 09 Form 4720- (individual) 03 Form 4720 04 Form 5227 10 Form 990-PF Form 990-T (sec 401(a) or 408(a) trust) 05 Form 6069 11 12 Form 990-T (trust other than above) Form 8870 • The books are in the care of ▶ STEVE HAGEMAN Telephone No ▶ 517 543-6400 FAX No ▶ If the organization does not have an office or place of business in the United States, check this box . If this is If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) 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 EINs of all members the extension is for I request an automatic 3-month (6 months for a corporation required to file Form 990-T) extension of time 08/15 , 20 13 , to file the exempt organization return for the organization named above. The extension is for the organization's return for ► X calendar year 2012 or , 20 , and ending tax year beginning If the tax year entered in line 1 is for less than 12 months, check reason L\_\_\_ Initial return L\_\_\_ Final return Change in accounting period 3a If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions. 3a \$ If this application is for Form 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit 3b \$ c Balance due. Subtract line 3b from line 3a Include your payment with this form, if required, by using EFTPS (Electronic Federal Tax Payment System) See instructions Caution. If you are going to make an electronic fund withdrawal with this Form 8868, see Form 8453-EO and Form 8879-EO for payment instructions.

JSA

Form 8868 (Rev. 1-2013)

For Privacy Act and Paperwork Reduction Act Notice, see Instructions.

	38 (Rev. 1-2013)						Page 2
Note. (	are filing for an Additional (Not Automatic) 3-Mo Only complete Part II if you have already been grar are filing for an Automatic 3-Month Extension, o	nted an aut	omatic 3-month ext	ension on a previousl			
Part					ies n	eeded)	
. a	Additional (Not Adtomatic) 6-Month L.	X (G1131011	of Time. Only file	Enter filer's identifying			Instructions
F	Name of exempt organization or other filer, see in	structions.		Employer identification			
Гуре o print	Spartan Chassis Foundation			l ' '	27914		
	Number street and room or suite no. If a P.O. br	ox, see instr	uctions.	Social security number			
ile by th lue date	lor 1000 Reynolds Road						
iling you	City, town or post office, state, and ZIP code, For	r a forelgn a	ddress, see Instruction	S.			
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nter th	ructions   Charlotte, Mt 48813 ter the Return code for the return that this application is for (file a separate application for each return)					0 4	
Applic	ation	Return	Application				Return
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	990 or Form 990-EZ	01	* *				
	990-BL	02	Form 1041-A	·			08
	1720 (individual)	03	Form 4720				09
	990-PF	04 05	Form 5227				10
			Form 6069				11
Form S	990-T (trust other than above)	06	Form 8870				12
The b Telepi If the If this	ooks are in the care of ► Steve Hageman hone No. ► 517-543-6400 organization does not have an office or place of but is for a Group Return, enter the organization's four whole group, check this box ► □ . If it the names and EINs of all members the extension	FAX lusiness in the digit Ground it is for part	No. ► the United States, cl up Exemption Numb	neck this box		 If thi	. ▶ 🗆
6 I 7 S	request an additional 3-month extension of time to For calendar year 2012, or other tax year beginning the tax year entered in line 5 is for less than 12 mag. Change in accounting period State in detail why you need the extension Informativallable from third parties.	nonths, che	eck reason: 🔲 Ini	tial return ☐ Fina	l retu	rn	
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	nonrefundable credits. See instructions.	1-1, 4120, 1	or dods, enter the te	indive tax, 1000 dily	8a	s	0
-	f this application is for Form 990-PF, 990-T, 4	720. or 6	069, enter any refu	indable credits and	<del></del>	<del> </del>	
e	estimated tax payments made. Include any prior amount paid previously with Form 8868.				8b	s	0
СĒ	Balance due. Subtract line 8b from line 8a. Include yo Electronic Federal Tax Payment System). See instruct		t with this form, if requ	ired, by using EFTPS	8c		0
`				David III and		4	<u></u>
	Signature and Verificat	uon musi	t be completed to	r Part II only.			

Under penalties of perjury,	I declare that I have	e examined this form,	, including accompanying	schedules and	statements,	and to	the best	of my
knowledge and belief, it is to	ue, correct, and com	plete, and that I am aut	thorized to prepare this for	m.				

Signature > X You Wade

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Date ► \(\sigma\) \(\begin{align\*} \int \frac{12}{2} \\ \int \text{Porm 8868 (Rev. 1-2013)} \end{align\*}