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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

For	cale	ndar year 2012 or tax year beginning		, ;	2012, and end		, 20
N	ame (	of foundation				A Employer ident	
		JENKINS FOUNDATIO	N	_		27-04677	
N	umbe	er and street (or P O box number if mail is		ddress)	Room/suite	1	per (see instructions)
		1765 CYPRESS POIN	TE COURT			734-663-	
С	ity or	town, state, and ZIP code				C If exemption application check here	on is pending,
		ANN ARBOR MI 4810	8				_
G	Chec	k all that apply Initial return	Initial return of a fo	ormer public	charity	D 1 Foreign organizat	
		Final return	Amended return			test, check here a	ions meeting the 85% nd attach computation
		Address change	Name change			E If private foundation s terminated under sec	
Н	Chec	k type of organization X Section 501	(c)(3) exempt private fou	ındatıon		507(b)(1)(A), check h	
П	Secti	on 4947(a)(1) nonexempt chantable-trust-	Other taxable priva	ate foundation	on		
LE	air ma	arket value of all assets at end of	Accounting method. X	Cash	Accrual	F If the foundation is in termination under sec	
		rom Part II, col (c), line 16)	Other (specify)			507(b)(1)(B), check h	
▶ \$	;	40,912.	(Part.I, column (d) must	be on cash t	pasis)		
Pa	rt I	Analysis of Revenue and Expenses	(a) Revenue and	(6.) \$1		(a) A durate d a at	(d) Disbursements
		(The total of amounts in columns (b), (c), and (d) may not necessarily equal	expenses per		vestment ome	(c) Adjusted net income	for charitable purposes
		the amounts in column (a) (see instr ) )	books	11100	Jille	income	(cash basis only)
	1	Contributions, gifts, grants, etc., received- (attach schedule)	140,527.				
	2	Check ► ☐ If the foundation is <b>not</b>					
	3	Interest on savings and temp cash investments					
	4	Dividends and interest from securities					
	5a	Gross rents	*				
	b	(Net rental income or (loss)	-				
Ð	6a	Net gain/(loss) from sale of assets not on line 10					
nue	b	Gross sales price for all assets on line 6a					
Revenue	7	Capital gain net income (from Part IV, line 2)					
Œ	8	Net short-term capital gain					
	9	Income modifications .					
	10a	Gross sales less rtns & allowances					
	b	Less Cost of goods sold					
	С	Gross profit or (loss) (attach schedule)					
	11	Other income (attach schedule)				<u></u>	
	12	Total. Add lines 1 through 11	140,527.				
	13	Compensation of officers, directors, trustees, etc			<u></u>		
	14	Other employee salaries and wages					
ses	15	Pension plans, employee benefits	<u> </u>		_		
	16a	Legal fees (attach schedule)					
ĔŽ	1	Accounting fees (attach schedule)					
ě.	C	Other professional fees (attach schedule)					
rati	17	Interest .					
nist	18	Taxes (attach schedule) (see instructions)					
Operating and Administrative Exper	19	Depreciation (attach sch.) and depletion					
Ad	20	Occupancy					
and	21	Travel, conferences, and meetings .					ļ
Jg (	22	Printing and publications					
atir	23	Other expenses (attach schedule)					
per	24	Total operating and administrative					
0		expenses Add lines 13 through 23					100 000
	25	Contributions, gifts, grants paid .	100,000.				100,000.
_	26	Total exp & disbursements Add lines 24 and 25	100,000.				100,000.
	27 a	Subtract line 26 from line 12.					
	"	Excess of revenue over expenses and disbursements	40,527.				
	b	Net investment income (if neg , enter -0-)					
	С	Adjusted net income (if neg , enter -0-)		İ			İ

For Paperwork Reduction Act Notice, see instructions.

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Form **990-PF** (2012)

1	i ît II	Attached schedules and amounts in the description column should be for	Beginning of year		End of	f year
		end-of-year amounts only (See inst )	(a) Book Value	(b) Book Valu	e	(c) Fair Market Value
	1	Cash - non-interest-bearing				
	2	Savings and temporary cash investments	385.	40,91	2.	40,912.
	3	Accounts receivable ▶				
		Less allowance for doubtful accts. ▶				
	4	Pledges receivable ▶				<u> </u>
		Less allowance for doubtful accts. ▶				
	5	Grants receivable				
			-			
	6	Receivables due from officers, directors, trustees, and other				
	l _	disqualified persons (attach schedule) (see the instructions)				
	7	Other notes and loans receivable (attach schedule)	-			
		Less allowance for doubtful accounts				
ţ	8	Inventories for sale or use		_		
Assets	9	Prepaid expenses and deferred charges				
ĕ	l	Investments - U S and state govt obligations (attach schedule)				
	l	Investments - corporate stock (attach schedule)				
	l	Investments - corporate bonds (attach schedule)				
		Investments - land, buildings, and equipment basis				
	' '	Less accumulated depreciation		<del></del>		<del> </del>
	12	(attach schedule) Investments - mortgage loans				
		Investments - other (attach schedule)				
		·				
	14	Land, buildings, and equipment basis Less accumulated depreciation (attach schedule)				
	15	Other assets (describe  )				
		Total assets (to be completed by all filers - see the instructions. Also, see page 1, item I)	385	40,91	2.	40,912.
	17	Accounts payable and accrued expenses .				
	18	Grants payable				
Ś		Deferred revenue				
iţi	20	Loans from officers, directors, trustees, and other disqualified persons				
Liabilities	21	Mortgages and other notes payable (attach schedule)				
		Other liabilities (describe ▶)				
	23	Total liabilities (add lines 17 through 22)	-			
		Foundations that follow SFAS 117, check here				
		and complete lines 24 through 26 and lines 30 and 31.				
ç	24	Unrestricted	385.	40,91	2.	
JCe	25	Temporarily restricted				
Net Assets or Fund Balances	1	Permanently restricted				
Ø.		Foundations that do not follow SFAS 117, ck. here ▶				1
Š		and complete lines 27 through 31.				
F	27	Capital stock, trust principal, or current funds				
ts o	28	Paid-in or capital surplus, or land, bldg , and equipment fund				
Se	29	Retained earnings, accumulated income, endowment, or other funds				
Ž		Notation of things, accomplision income, or continuity or continuity				
Ne	30	Total net assets or fund balances (see instructions)	385.	40,91	2.	
		Total liabilities and net assets/fund balances (see				
	•	instructions)	385.	40,91	2.	
Pa	rt III	Analysis of Changes in Net Assets or Fund Bala	<u> </u>			
		net assets or fund balances at beginning of year - Part II, column		with		
		of-year figure reported on pnor year's return)	(-), 35 (50, 03,00		1	385.
		amount from Part I, line 27a			2	40,527.
		rincreases not included in line 2 (itemize)		•	3	
		nes 1, 2, and 3			4	40,912.
		eases not included in line 2 (itemize)		•	5	
		net assets or fund balances at end of year (line 4 minus line 5) - F	Part II, column (b), line 30	)	6	40,912.

ВСА

P	art VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 - see instruct	ions)		
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 instr )			
b Domestic foundations that meet the section 4940(e) requirements in Part V, check here ▶ ☐ 1				
	and enter 1% of Part I, line 27b			
C	All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter			
	4% of Part I, line 12, col (b)			
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-)		0	
3	Add lines 1 and 2			
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-)		0	
5	Tax based on investment income. Subtract line 4 from line 3 If zero or less, enter -0-		0	
6	Credits/Payments*			
а	2012 estimated tax payments and 2011 overpayment credited to 2012 6a 6a			
b	Exempt foreign organizations - tax withheld at source 6b			
С	Tax paid with application for extension of time to file (Form 8868)  6c			
d	Backup withholding erroneously withheld . 6d			
7	Total credits and payments Add lines 6a through 6d			
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			
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid			
11	Enter the amount of line 10 to be Credited to 2013 estimated tax ▶ Refunded ▶ 11			
P	art VII-A Statements Regarding Activities	<del>.,</del>		
1a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or		Yes	No
	intervene in any political campaign?	1a		X
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see the instructions for		1	٠
	definition)? .	1b		X
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials published			
	or distributed by the foundation in connection with the activities	1	-	
	Did the foundation file Form 1120-POL for this year?	1c		X
d	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year			İ
	(1) On the foundation   \$ (2) On foundation managers   \$			
е	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed			
	on foundation managers   \$	1	}	- V
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?	2		X
_	If "Yes," attach a detailed description of the activities			
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of	1		х
	incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes	3		X
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	4a		<u>^</u>
_	If "Yes," has it filed a tax return on Form 990-T for this year?	4b 5	i	Х
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?			125
e	If "Yes," attach the statement required by General Instruction T			
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either:			
	<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</li> </ul>			
	that conflict with the state law remain in the governing instrument?	6	1	x
7	Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col (c), and Part XV	7	<del> </del>	X
7	Enter the states to which the foundation reports or with which it is registered (see instructions)	<del>-</del> -	<del>                                     </del>	<del> </del> -
Va	Enter the states to which the foundation reports of with which it is registered (see instructions)?			
h	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or	1		
J	designate) of each state as required by General Instruction G? If "No," attach explanation	8b		
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or	-	<b> </b>	†
3	4942(j)(5) for calendar year 2012 or the taxable year beginning in 2012 (see instructions for Part XIV)? If "Yes,"			1
	complete Part XIV	9	1	X
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their		<u> </u>	T -
. •	names and addresses	10		X
	<del></del>	m 990	DE /2	

Pal	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		X
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified			٦,
	person had advisory privileges? If "Yes," attach statement (see instructions)	12	37	Х
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	X	
	Website address ► N/A			
14	The books are in care of PHIL JENKINS  Telephone no Telep			
	Located at ▶ 6589 JACKSON ROAD MI ANN ARBOR ZIP+4 ▶ 48103			
15				<b>P</b> _
	and enter the amount of tax-exempt interest received or accrued during the year		\ <b>/</b>	
16	At any time during calendar year 2012, did the foundation have an interest in or a signature or other authority	1 46	Yes	No X
	over a bank, securities, or other financial account in a foreign country?	16	L	
	See instructions for exceptions and filing requirements for Form TD F 90-22 1 If "Yes," enter the name of the			
D	foreign country			
Par	t VII-B Statements Regarding Activities for Which Form 4720 May Be Required	1	Yes	No
4-	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.		163	140
та	During the year did the foundation (either directly or indirectly)  (1) Engage in the sale or exchange, or leasing of property with a disqualified person?  Yes No			•
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person?  Yes X No			
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? . Yes No			
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?			
	(5) Transfer any income or assets to a disqualified person (or make any of either available			
	for the benefit or use of a disqualified person)?  Yes No			
	(6) Agree to pay money or property to a government official? (Exception. Check "No"			
	If the foundation agreed to make a grant to or to employ the official for a period			
	after termination of government service, if terminating within 90 days )  Yes  No			
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 the instructions)?	1b		
	Organizations relying on a current notice regarding disaster assistance check here			
С	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts,			
	that were not corrected before the first day of the tax year beginning in 2012?	1c		X
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private			
	operating foundation defined in section 4942(j)(3) or 4942(j)(5))			
а	At the end of tax year 2012, did the foundation have any undistributed income (lines 6d			
	and 6e, Part XIII) for tax year(s) beginning before 2012?	j		i
	If "Yes," list the years ▶ 20, 20, 20			
b	Are there any years listed in 2a for which the foundation is <b>not</b> applying the provisions of section 4942(a)(2)			
	(relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2)			
	to all years listed, answer "No" and attach statement - see the instructions )	2b		
c	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here			
2-	▶ 20, 20, 20 Did the foundation hold more than a 2% direct or indirect interest in any business			
Ja	enterprise at any time during the year?  Yes No			
b	If "Yes," did it have excess business holdings in 2012 as a result of (1) any purchase by the foundation			ļ
	or disqualified persons after May 26, 1969, (2) the lapse of the 5-year period (or longer period approved			1
	by the Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest, or (3)			
	the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Schedule C, Form 4720, to determine			
	if the foundation had excess business holdings in 2012 )	3ь		
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a	<u> </u>	Х
b	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable			
_	purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2012?	4b		X
BCA		m 990	-PF (2	

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

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Form 990-PF (2012)

and Contractors (continued)		
3 Five highest-paid independent contractors for professional services (see	the instructions). If none, enter "NON	E."
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE		
Total number of others receiving over \$50,000 for professional services		<u> </u>
Part IX-A Summary of Direct Charitable Activities		
List the foundation's four largest direct charitable activities during the tax year. Inc		Expenses
as the number of organizations and other beneficiaries served, conferences conve		
1 DONATION TO FUND BRAIN TUMOR RESEARCH AT	UNIVERSITY OF MI	
	··	
		140,527
2		
3	· · · · · · · · · · · · · · · · · · ·	
4		
		<u></u>
	nstructions)	<del> </del>
Describe the two largest program-related investments made by the foundation of	during the tax year on lines 1 and 2	Amount
1		
2		
All other program-related investments See instructions		
3		
Total Add lines 1 through 3		
Total Add lines i infoudit 5		i e

Part X Minimum Investment Return (All domestic foundations must complete this part F	oreign foundations	, see instructions )
1 Fair market value of assets not used (or held for use) directly in carrying out chantable, etc., purposes		
a Average monthly fair market value of securities .	1a	
<b>b</b> Average of monthly cash balances .	1b	3,409.
c Fair market value of all other assets (see instructions)	1c	
d Total (add lines 1a, b, and c)	1d	3,409.
e Reduction claimed for blockage or other factors reported on lines 1a and 1c		
(attach detailed explanation) 1e		
2 Acquisition indebtedness applicable to line 1 assets	2	
3 Subtract line 2 from line 1d	. 3	3,409.
4 Cash deemed held for charitable activities Enter 1 1/2% of line 3 (for greater amount,		
see instructions)	4	51.
5 Net value of noncharitable-use assets. Subtract line 4 from line 3 Enter here and on Part V, line 4	5	3,358.
6 Minimum investment return. Enter 5% of line 5	6	168.
Part XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating	ig foundations	
and certain foreign organizations check here ▶ ☐ and do not complete this part )		
1 Minimum investment return from Part X, line 6	1	168.
2 a Tax on investment income for 2012 from Part VI, line 5		
b Income tax for 2012 (This does not include the tax from Part VI)	-	
c Add lines 2a and 2b	2c	
3 Distributable amount before adjustments Subtract line 2c from line 1	3	168.
4 Recoveries of amounts treated as qualifying distributions	4	
5 Add lines 3 and 4 .	5	168.
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	168.
Part XII Qualifying Distributions (see instructions)	,	
1 Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes		
a Expenses, contributions, gifts, etc -total from Part I, column (d), line 26	1a	100,000.
b Program-related investments-total from Part IX-B	1b	
2 Amounts paid to acquire assets used (or held for use) directly in carrying out chantable, etc., purposes	2	
3 Amounts set aside for specific charitable projects that satisfy the		
a Suitability test (prior IRS approval required)	3a	
b Cash distribution test (attach the required schedule)	3b	
4 Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line	4 4	100,000.
5 Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income		
Enter 1% of Part I, line 27b (see instructions)	5	
6 Adjusted qualifying distributions. Subtract line 5 from line 4	6	100,000.
Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating will	nether the foundation	on
qualifies for the section 4940(e) reduction of tax in those years		

		· · · · · · · · · · · · · · · · · · ·		<del></del> -	
	D. ( ) ( ) ( ) ( ) ( ) ( ) ( ) ( ) ( ) (	(a)	(b) Years prior to 2011	(c) 2011	<b>(d)</b> 2012
1	Distributable amount for 2012 from Part XI,	Corpus	rears prior to 2011	2011	168.
_	line 7				100.
2	Undistributed income, if any, as of the end of 2012			6,611.	
	Enter amount for 2011 only Total for prior yrs 20 1 0 , 20 , 20		1,148.	0,011.	
	<del></del>		1,140.		
3	Excess distribs. carryover, if any, to 2012.				
-	From 2008				
	From 2009				
	From 2010				
	From 2011				
-	Total of lines 3a through e .		<u> </u>		
	Qualifying distributions for 2012 from Part XII,				
•	line 4 ▶\$ 100,000.				
а	Applied to 2011, but not more than line 2a			6,611.	
	Applied to undistributed income of prior			2,7221	
~	years (Election required - see instructions)				
c	Treated as distributions out of corpus				
Ŭ	(Election required - see instructions)				
d	Applied to 2012 distributable amount			···	168.
	Remaining amt_distributed out of corpus	93,221.			
5	Excess distribs carryover applied to 2012	,			
•	(If an amount appears in column (d), the				
	same amount must be shown in col. (a) )				
6	Enter the net total of each column as				
	indicated below:				
а	Corpus Add lines 3f, 4c, & 4e Subtract line 5	93,221.			
	Pnor years' undistributed income Subtract				
	line 4b from line 2b .		1,148.		
С	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				
d	Subtract line 6c from line 6b Taxable				
	amount - see instructions .		1,148.		
е	Undistributed income for 2011. Subtract		1		
	line 4a from line 2a Taxable amount -				
	see instructions				
f	Undistributed income for 2012 Subtract				
	lines 4d and 5 from line 1 This amount				
	must be distributed in 2013 .			<del>"</del> -	
7	Amounts treated as distributions out of				
	corpus to satisfy requirements imposed by				
	section 170(b)(1)(F) or 4942(g)(3) (see				
_	instructions)	····			
8	Excess distributions carryover from 2007				
	not applied on line 5 or line 7 (see				
•	instructions)				
9	Excess distributions carryover to 2013.	02 221			
40	Subtract lines 7 and 8 from line 6a	93,221.			
	Analysis of line 9				
	Excess from 2008				
	Excess from 2009				
	Excess from 2010 Excess from 2011	1			
a	Excess from 2011				

P	art XIV Private Operating Found	lations (see instr	uctions and Part VII-	A, question 9)		
1a	If the foundation has received a ruling or d	etermination letter ti	hat it is a private ope	rating		
	foundation, and the ruling is effective for 20	012, enter the date	of the ruling			<del> </del>
b	Check box to indicate whether the foundat	ion is a private oper	ating foundation desc	cribed in section	4942(J)(	3) or 4942(J)(5)
2a	Enter the lesser of the adjusted net	Tax year		Pпоr 3 years		
	income from Part I or the minimum investment return from Part X for	(a) 2012	(b) 2011	(c) 2010	(d) 2009	(e) Total
	each year listed					
b	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					ļ
3	Complete 3a, b, or c for the alternative					
	test relied upon					
а	"Assets" alternative test - enter		ļ	ļ		
	(1) Value of all assets					]
	(2) Value of assets qualifying			<del></del>		
	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 "Support" alternative test - enter		<del> </del>		· · ·	-
·	••					
	(1) Total support other than gross investment income (interest,			ļ		
	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)	<u> </u>				
	(3) Largest amount of support			i		
	from an exempt organization					
	(4) Gross investment income					
P	art XV Supplementary Informat			the foundation	had \$5,000 or n	nore in
	assets at any time during	g the year - see	instructions.)			
1	Information Regarding Foundation Man	agers:				
а	List any managers of the foundation who h	ave contributed mo	re than 2% of the tota	al contributions recei	ved by the foundatio	n before the close
	of any tax year (but only if they have contri					
b	List any managers of the foundation who o	wn 10% or more of	the stock of a corpor	ation (or an equally I	arge portion of the o	wnership of a
	partnership or other entity) of which the fou	indation has a 10%	or greater interest			
2	Information Regarding Contribution, Gr	ant, Gift, Loan, Sc	holarship, etc., Prog	grams:	<del></del>	· <del></del>
	Check here ▶ ☐ If the foundation only				and does not accep	t unsolicited
	requests for funds. If the foundation makes					
	complete items 2a, b, c, and d					
	The name, address, and telephone numbe	r or e-mail of the pe	rson to whom applica	ations should be add	ressed	
_	the hame, address, and telephone hames	. о. оо. о. а.о ро				
Ρŀ	HIL JENKINS 6589 JACK	SON RD ANN	ARBOR MI	48103		
	The form in which applications should be s				<del></del>	
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_	Any submission deadlines					
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	Any restactions of limitations of	uch as his as it	iool oroca, aba-takii	fiolds library of the state	utions of ather facts	
u	Any restrictions or limitations on awards, si	uch as by geograph	icai areas, chantable	neius, kinas of instit	unons, or other facto	113

Page 11

Part XV Supplementary Information (continued)

Grants and Contributions Paid During the Year or Approved for Future Payment							
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					
a Paid during the year U OF M  4260 PLYMOUTH 48109 MI ANN ARBOR		501C3	MEDICAL RESEARC	100,000.			
				100 000			
Total			<b>▶</b> 3a	100,000.			
b Approved for future payment  Total .			▶ 3b				

Page 12

Part XVI-A Analysis of Income-Producing Activities Enter gross amounts unless otherwise indicated Unrelated business income Excluded by section 512, 513, or 514 (e) Related or exempt (a) (b) (c) (d) function income Excl. **Amount** Business Amount (See instructions) code code Program service revenue c g Fees and contracts from government agencies 2 Membership dues and assessments 3 Interest on savings and temporary cash investments 4 Dividends and interest from securities 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 Other investment income 8 Gain or (loss) from sales of assets other than inventory 9 Net income or (loss) from special events 10 Gross profit or (loss) from sales of inventory Other revenue a 11 b d Subtotal Add columns (b), (d), and (e) 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 Accomplishment of Exempt Purposes Explain below how each activity for which income is reported in column (e) of Part XVI-A contributed importantly to the Line No. ▼ accomplishment of the foundation's exempt purposes (other than by providing funds for such purposes) (See instructions) 13 INVESTMENT INCOME

Part X	VII			TION						age 13
	V III			ransfers To and Trar	sactions	and Relations	ships With No	ncharit	able	
		Exempt Org				<del> </del>		1		
	_	•		ge in any of the following wit	-				Yes	No
•	•	•		3) organizations) or in sectio		ig to political orga	nizations /			
		om the reporting to	oundation to a no	ncharitable exempt organiza	IUOII OI			10(1)		Х
	Cash							1a(1)		X
b Other		assets .						1a(2)		
			chantable eveni	nt organization				1b(1)		х
		of assets to a non	,	e exempt organization				1b(1)		X
• •		l of facilities, equip		. •				1b(3)		X
		oursement arrange						1b(4)		X
• •		or loan guarantee			•			1b(5)		X
• •		-		or fundraising solicitations		•		1b(6)		X
			•	ther assets, or paid employe	es			1c		X
	-		-	plete the following schedule		should always sh	ow the fair market	$\overline{}$	the	
		•		eporting foundation If the fo		•				
_				e value of the goods, other a						
		<b>J</b> ,	` ,	<b>3</b>						
(a) Line no	(b)	Amount involved	(c) Name of nor	ncharitable exempt organiza	tion (d)Des	c of transfers, tra	nsactions, and sha	ring arra	ngeme	ents
	<u> </u>			· · · · · · · · · · · · · · · · · · ·		·				
					i				•	
					•					
				<u> </u>						
		=		d with, or related to, one or		mpt organizations	described in		-	ı
		• • • •		n 501(c)(3)) or in section 52	7?			∐ Y€	es 🛚	No
b If "Y		omplete the follow		<del></del>		1		<del></del>		
_	(a)	Name of organizat	tion	(b) Type of organi	ation	(c)	Description of rela	ationship		
				<u> </u>		_				
								·		
	11-4	a nanaltina of	landore that I bears	mond the setum in-thiding and	nana ookadulaa	and statements and the	the best of mir limited - 4-	o ood		
				mined this return, including accompa if preparer (other than taxpayer) is ba				o and		
Sign	١.	<b></b> .	$\mathcal{O}_{2}$				[ <del>12-18-1</del>	DC 4	46	
Here		1/1-1	1///	7 hu/15	/2013	DIRECTO		RS discuss		
					/ 4013	Title	(see instr	reparer sho uctions)?	X Yes	
	<u> </u>	gnature of officer		Date Proofted signature	1	Date	<del>                                     </del>		≠ ¥ Yes	No
Paid		Print/Type <b>pre</b> pa SANDRA D	arers name HENNESSE	Preparer's signature	_  ^	8/15/2013	Check if	PTIN 20037	246	7
Prepare	er	Firm's name	▶PROFESS	<del></del>	<del></del>		self-employed F rm's EIN ▶ 27 - 0			<u>-</u>

Phone no. 810-225-9955

**Use Only** 

Firm's address ▶1229 S OLD US HWY 23

BRIGHTON MI 48114-

#### 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

2012

**Employer identification number** Name of the organization 27-0467778 JENKINS FOUNDATION Organization type (check one) Section: Filers of: Form 990 or 990-EZ 501(c)( ) (enter number) organization 4947(a)(1) nonexempt charitable trust not treated as a private foundation 527 political organization Form 990-PF 501(c)(3) exempt private foundation 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** 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 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. 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,

Caution. An organization that is not covered by the General Rule and/or the Special Rules do 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)

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 lf 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,

total contributions of more than \$1,000 for use exclusively for religious, charitable, scientific, literary, or educational

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

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

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

Schedule B (Form 990, 990-EZ, or 990-PF) (2012)

Name of organization
'JENKINS FOUNDATION

Employer identification number

27-0467778

Parti	Contributors (see instructions). Use duplicate copies of Pa	n i ii additional space is needed	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	JENKINS CHARITABLE LEAD TRUST		Person X Payroll
	PO BOX 75000  DETROIT MI 48275-3302	\$ 140,527.	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
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	noncash contribution ) (d) Type of contribution
			Person Payroll Noncash (Complete Part II
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	if there is a noncash contribution )  (d)  Type of contribution
		\$	Person Payroll Noncash
(a)	(b)	(c)	(Complete Part II If there is a noncash contribution) (d)
No.	Name, address, and ZIP + 4	Total contributions	Person Payroll
		\$	(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.)

### Form **8868**

(Rev January 2013)

Department of the Treasury Internal Revenue Service

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

► File a separate application for each return.

OMB No 1545-1709

IIIICIIIai IVCVCIIU	e service		. t.	L.		
<ul><li>If you ar</li></ul>	re filing for an Automatic 3-Month Extension, com	plete only	Part I and check this box			▶ X
<ul><li>If you ar</li></ul>	re filing for an Additional (Not Automatic) 3-Montl	h Extension	, complete only Part II (on page 2 of this	form)		
Do not com	nplete Part II unless you have already been grante	d an automa	itic 3-month extension on a previously file	Form 8868 t		
Electronic 1	filing (e-file). You can electronically file Form 8868	ıf you need	a 3-month automatic extension of time to	file (6 months	for a corpo	oration
required to f	file Form 990-T), or an additional (not automatic) 3-i	month exten	sion of time. You can electronically file Fo	rm 8868 to re	quest an e	xtension
of time to file	e any of the forms listed in Part I or Part II with the	exception of	Form 8870, Information Return for Transf	ers Associate	d With Cer	rtain
Personal Be	enefit Contracts, which must be sent to the IRS in pa	aper format (	(see instructions) For more details on the	electronic filir	ng of this	
form, visit w	www.irs.gov/efile.and.click.on.e-file.for.Charities & No	onprofits				
Part I	Automatic 3-Month Extension of Tim	e. Only s	submit original (no copies needed)			
A corporatio	on required to file Form 990-T and requesting an aut	tomatic 6-mo	onth extension - check this box and compl	ete Part I only	,	▶ 📗
All other cor	porations (including 1120-C filers), partnerships, RE	EMICs, and	trusts must use Form 7004 to request an e	extension of ti	me	_
to file incom	ne tax returns					
Type or	Name of exempt organization		_	Employer id	lentification	on number
print	JENKINS FOUNDATION			27-046	7778	
File by the due date for filing your	Number, street, and room or suite no If a P O to 1765 CYPRESS POINTE COU		ructions			
retum See	City, town or post office, state, and ZIP code Fo		ddress, see instructions			
instructions	ANN ARBOR MI 48108					
<del>.</del>			********		-	
Enter the Re	eturn code for the return that this application is for (	file a separa	te application for each return)			04
	,	•	,			<u></u>
Application		Return	Application			Return
ls For		Code	Is For			Code
	r Form 990-EZ	01	Form 990-T (corporation)			07
Form 990-B		02	Form 1041-A			08
Form 4720 (		03	Form 4720			09
Form 990-P	· · · · · · · · · · · · · · · · · · ·	04	Form 5227			10
Form 990-T	(sec 401(a) or 408(a) trust)	05	Form 6069			11
Form 990-T	(trust other than above)	06	Form 8870			12
<ul><li>The boo</li></ul>	oks are in the care of ▶ PHIL JENKINS					
		AX No ▶		_		
<ul> <li>If the or</li> </ul>	ganization does not have an office or place of busin	ness in the U	Inited States, check this box	_		▶ 🗍
<ul> <li>If this is</li> </ul>	for a Group Return, enter the organization's four di	git Group Ex	cemption Number (GEN)	f this is for the	whole gro	oup,
check this b	ox ▶ ☐ If it is for part of the group, check this bo	x ▶ 🗌 an	d attach a list with the names and EINs of	all members	the extens	ion is for
		_				
1 I reques	st an automatic 3-month (6 months for a corporation	required to	file Form 990-T) extension of time until			
	AUG 15 , 20 13 , to file the	exempt orga	anization return for the organization named	dabove The	extension	is for the
organiza	ation's return for					
▶ 🛛	calendar year 2012 or					
▶ 🗍 🖠	calendar year 20 <u>12</u> or tax year beginning	, 20	, and ending		, 20	)
_						
2 If the ta	x year entered in line 1 is for less than 12 months, o	check reasor	n· Initial return Final return	1		
Cha	ange in accounting period		_			
3a If this ar	pplication is for Form 990-BL, 990-PF, 990-T, 4720,	or 6069, en	ter the tentative tax, less any nonrefundal	ole		
	See instructions			3a	\$	
	pplication is for Form 990-PF or 990-T, 4720, or 606	69, enter any	refundable credits and estimated tax pay	ments		
	nclude any prior year overpayment allowed as a cre			3b	\$	
	e due. Subtract line 3b from line 3a Include your p		n this form, if required,			
	g EFTPS (Electronic Federal Tax Payment System)			3с	\$	
				1870-EO for ~	avmont in	tauctions
Caution. If '	you are going to make an electronic fund withdrawa	n with this Fo	onn occo, see fonn 6433-EO and Form c	AND BEEN IN DE	ayını <del>c</del> nı ins	41 0000115

Form 8868 (I	Rev 1-2013)					Page 2
<ul> <li>If you are</li> </ul>	e filing for an Additional (Not Automatic) 3-Mont	h Extension	, complete only Part II and check this bo	x		<b>▶</b> 🛚 🖈
Note. Only c	omplete Part II if you have already been granted a	an automatic	3-month extension on a previously filed Fo	orm 8868		
<ul> <li>If you are</li> </ul>	e filing for an Automatic 3-Month Extension, con					
Part II	Additional (Not Automatic) 3-Month	Extensior	of Time. Only file the original (no c	opies neede	ed)	
			Enter filer's iden	tifying nun	ıber, see	instructions
Type or	7. I			Employer identification number		
print	JENKINS FOUNDATION			27-0467778		
File by the	Number, street, and room or suite no. If a P.O box, see instructions					
due date for filing your	1765 CYPRESS POINTE COURT					
return See						
instructions	ANN ARBOR MI 48108					
		r.	1			014
Enter the Re	turn code for the return that this application is for (	tile a separa	te application for each return)			0 4
Application		Return	Application			Return
Is For		Code	Application Is For			Code
Form 990 or Form 990-EZ		01	13101			Code
Form 990-BL		02	Form 1041-A			08
Form 4720 (Individual)		03	Form 4720			09
Form 990-PF		04	Form 5227			10
Form 990-T (sec 401(a) or 408(a) trust)		05	Form 6069			11
Form 990-T (trust other than above)		06	Form 8870			12
	ot complete Part II if you were not already gran	ted an auto	matic 3-month extension on a previous	ly filed For	m 8868.	· ·
	ks are in the care of ▶ PHIL JENKINS			<del></del>		
Telephor	ne No ▶ F/	AX No ▶		-		
<ul><li>If the org</li></ul>	anization does not have an office or place of busing	ness in the U	Inited States, check this box	_		▶ 🗍
• If this is f	for a Group Return, enter the organization's four di	igit Group Ex	cemption Number (GEN)	If this is	for the wh	ole group,
check this bo	If it is for part of the group, check this bo	ox ▶ ∏ ar	nd attach a list with the names and EINs of	all member	s the exte	nsion is for
-	an additional 3-month extension of time until		NOV 15 ,20	13	_	
, , " "					, 2	0
	year entered in line 5 is for less than 12 months, of	check reasor	n 📗 Initial return 📙 Final return			
	nge in accounting period					
	detail why you need the extension ADDITIO			)ATA		
NECI	ESSARY TO COMPLETE ACCURA	TE RET	URN			
_						
0- 15 thus are	-11	0000	AAb AA A I	<del></del> _	<del></del> _	
8a If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6			enter the tentative tax, less any nomerchoable			
-	credits See instructions  b 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 and any amount paid previously with Form 8868				L L		
made Include any prior year overpayment allowed as a credit and any amount paid previously with Form 8868 8b \$  c Balance due. Subtract line 8b from line 8a Include your payment with this form, if required,						
by using EFTPS (Electronic Federal Tax Payment System) See instructions			86	\$		
- by doing			st be completed for Part II only.		<u> </u>	
Under penalt	ies of perjury, I declare that I have examined this f			ts, and to th	e best of	mv knowledae
	is true, correct, and complete, and that I am autho			,		,
	, ,	p: <b></b>				
Signature ▶		Title	DIRECTOR	Date ▶	08/15,	/2013
BCA				Fo	rm <b>8868</b> (F	Rev 1-2013)