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

OMB No 1545-0052

Department of the Treasury Internal Revenue Service

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

Open to Public Inspection

For	calend	lar year 2013 or tax year beginning , a	ind ending					
	me of fou				A Emple	oyer identification number	_	
		R PENINSULA SENIOR COMPANION		20 205250				
		RAM FOUNDATION				-2953723		
		street (or PO box number if mail is not delivered to street address)  BOX 225	om/suite	B Telephone number (see instructions) 906-786-7080				
		, state or province, country, and ZIP or foreign postal code	·					
		NABA MI 49829			C If exer	mption application is pending,	check here <b>X</b>	
G	Check a	all that apply: Initial return Initial retur	n of a former public ch	arity	D 1. Fo	reign organizations, check her	re ▶ □	
		Final return Amended	•	-	2. Fo	reign organizations meeting th	ie	
		Address change Name cha	nge			% test, check here and attach		
H	Check t	type of organization X Section 501(c)(3) exempt private	foundation		E Ifpriva	ate foundation status was term	nated under	
			e private foundation			n 507(b)(1)(A), check here	<b>▶</b> □	
		ket value of all assets at J Accounting method:		, حادیت	F If the t	foundation is in a 60-month ter	mination	
е	nd of ye	ear (from Part II, col. (c), Other (specify)			under	section 507(b)(1)(B), check he	ere 🕨 📗	
	ne 16) l		be on cash basis)					
P	art I	Analysis of Revenue and Expenses (The total of	(a) Revenue and	(b) Net inv		(a) Advented not	(d) Disbursements for charitable	
		amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a) (see instructions) )	expenses per books	incor		(c) Adjusted net income	purposes	
	14	***************************************	65				(cash basis only)	
	1 2	Contributions, gifts, grants, etc , received (attach schedule)  Check ► X if the foundation is <b>not</b> required to attach Sch B	05				······································	
	3	Interest on savings and temporary cash investments	1,643		1,643			
	4	Dividends and interest from securities	1,013		1,013		***************************************	
	5a	Gross rents		<del></del>			······································	
4	Ь	Net rental income or (loss)						
Revenue	6a	Net gain or (loss) from sale of assets not on line 10	7,660					
	Ь	Gross sales price for all assets on line 6a 8,160	.,,,,,	,				
è	7	Capital gain net income (from Part IV, line 2)			7,660			
_	8	Net short-term capital gain				0	······································	
	9	Income modifications						
	10a	Gross sales less returns and allowances						
	ь	Less: Cost of goods sold						
	С	Gross profit or (loss) (attach schedule)						
(CO	11	Other income (attach schedule) Stmt 1	1,253			1,253		
SCHISASTED	12	Total. Add lines 1 through 11	10,621		9,303	1,253		
	13	Compensation of officers, directors, trustees, etc.	0					
	14	Other employee salaries and wages					<u> </u>	
e l	15	Pension plans, employee benefits						
•	16a	Legal fees (attach schedule)  Accounting fees (attach schedule)						
Operating and Administrati∜€)É	b	Accounting fees (attach schedule) Other professional fees (attach schedule)  Stmt 2						
<b>E</b>	С	Other professional fees (attach schedule), Stmt 2 Interest   NOV   Stmt 2	1,459		1,459			
	17	Interest   NUV   I KE						
Zisi	18	Taxes (attach schedule) (see instructions)					<del></del>	
Ē	19	Depreciation (attach schedule) and depletion					<del></del>	
Ad	20	Occupancy						
ב	21	Travel, conferences, and meetings						
ā	22	Printing and publications  Other expenses (att sch ) Stmt 3	45		<u>.</u>			
ī	23 24	,	43					
rat		Total operating and administrative expenses.  Add lines 13 through 23	1,504		1,459	ol	n	
þe	25	Contributions, gifts, grants paid	1,000		<b>-</b> /33		1,000	
O	26	Total expenses and disbursements. Add lines 24 and 25	2,504		1,459	0	1,000	
	27	Subtract line 26 from line 12:	2,301		<b>-</b> /		1,000	
	a	Excess of revenue over expenses and disbursements	8,117					
	ь	Net investment income (if negative, enter -0-)	-,		7,844			
	c	Adjusted net income (if negative, enter -0-)			.,	1,253		

For Paperwork Reduction Act Notice, see instructions.

Form 990-PF (2013)

76,498

76,498

3

4

5

6

4 Add lines 1, 2, and 3

Other increases not included in line 2 (itemize)

Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b), line 30

5 Decreases not included in line 2 (itemize) ▶

Part IV Capital Gains a	nd Losses for Tax on Investme	ent Income	<u> </u>				T
	cribe the kind(s) of property sold (e.g., real estate, arehouse, or common stock, 200 shs MLC Co.)			(b) How acquired P – Purchase D – Donation		e acquired , day, yr )	(d) Date sold (mo , day, yr )
1a Public Traded S	Securities	_		P			
b							
_с							
d							<u> </u>
_е							l
(e) Gross sales price	(f) Depreciation allowed (or allowable)			other basis ase of sale			or (loss) nnus (g)
a 8,160				500			<u>7,660</u>
_b							
_с							
d							
<u> </u>			0/04/0				
Complete only for assets showin	ng gain in column (h) and owned by the fo			-			(h) gain minus
(i) F M V as of 12/31/69	(j) Adjusted basis as of 12/31/69		-	of col (i) (j), if any	'		less than -0-) or om col (h))
	25 3. 120 1103			(), ii diiy			7,660
<u>a</u>				-			7,860
<u>b</u>							
d							<u> </u>
e				· · · · · · · · · · · · · · · · · · ·			
	If gain, also enter in	Part I, line 7	٦				
2 Capital gain net income or (net o	If (loss), enter -0- in	Part I, line 7			2		7,660
3 Net short-term capital gain or (lo	ess) as defined in sections 1222(5) and (6	<b>6)</b> :					
If gain, also enter in Part I, line 8	3, column (c) (see instructions) If (loss), e	enter -0- ın	٦.				
Part I, line 8					3		7,660
Part V Qualification U	<u>nder Section 4940(e) for Reduc</u>	ed Tax on	Net I	nvestment Inco	me		
(For optional use by domestic private	e foundations subject to the section 4940	(a) tax on net	invest	ment income.)			
If section 4940(d)(2) applies, leave the	nis part blank						
Mag the foundation liable for the acc	stice 4040 to use the distantivitable account	4 = 5 = = = = = :	- 46 - 1	ann mariadO			Yes X No
	ction 4942 tax on the distributable amoun alify under section 4940(e) Do not comple		n the b	ase period?			res _A_ No
1 Enter the appropriate amount in	each column for each year, see the instr	uctions before	makir				(d)
Base period years	(b) Adjusted qualifying distributions	i,	Net value	(c) of nonchantable-use asset	ıs İ		tribution ratio
Calendar year (or tax year beginning in	i) significant quality in grant and in a	700		77,		(coi (b) (	0.009054
2012 2011		700		69,		···	0.010041
2010		600		69,			0.008669
2009				05,7			0.00000
2008							
2000		1				$\Box$	
2 Total of line 1, column (d)						2	0.027764
• • • • • • • • • • • • • • • • • • • •	5-year base period – divide the total on I	ine 2 by 5. or	by the				
	has been in existence if less than 5 years		-,			3	0.009255
, , , , , , , , , , , , , , , , , , ,	,				ļ		
4 Enter the net value of nonchanta	able-use assets for 2013 from Part X, line	5				4	80,896
					ļ —		
5 Multiply line 4 by line 3						5	749
6 Enter 1% of net investment income	me (1% of Part I, line 27b)					6	78
	(					$\neg$	
7 Add lines 5 and 6					]	7	827
8 Enter qualifying distributions from	n Part XII, line 4					8	1,000
	an line 7, check the box in Part VI, line 1b	, and complet	e that	part using a 1% tax r	ate. See	the	
Part VI instructions.				<u> </u>			

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	Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 – see instructions)	· · · · · · · · · · · · · · · · · · ·	<del></del>					
1a	Exempt operating foundations described in section 4940(d)(2), check here ▶ ☐ and enter "N/A" on line 1							
	Date of ruling or determination letter: (attach copy of letter if necessary—see instructions)				78			
b								
	here ▶ X and enter 1% of Part I, line 27b							
С	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-)	<del> </del>			0			
3	Add lines 1 and 2	<del> </del>			78			
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-	ļ			78			
6	Credits/Payments:							
а	2013 estimated tax payments and 2012 overpayment credited to 2013							
b	Exempt foreign organizations – tax withheld at source							
C	Tax paid with application for extension of time to file (Form 8868)							
d _	Backup withholding erroneously withheld  6d	1						
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 Stmt 4 8	+	-		70			
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed	+		-	78			
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 2014 estimated tax ▶ Refunded ▶ 11							
	rt VII-A Statements Regarding Activities			V	NI -			
1a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it			Yes	No X			
	participate or intervene in any political campaign?		1a					
b Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see								
	Instructions for the definition)?		1b		<u> </u>			
	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.							
c Did the foundation file Form 1120-POL for this year?								
d Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year								
•	(1) On the foundation. ▶ \$ (2) On foundation managers. ▶ \$ Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed							
е	on foundation managers. > \$							
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							
•	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		X			
b	If "Yes," has it filed a tax return on Form 990-T for this year?	N/A	4b					
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?	,	5		x			
-	If "Yes," attach the statement required by General Instruction T	l						
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either:							
	By language in the governing instrument, or	l		ļ				
	By state legislation that effectively amends the governing instrument so that no mandatory directions that							
	conflict with the state law remain in the governing instrument?		6	Х				
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	i	7	Х				
8a	Enter the states to which the foundation reports or with which it is registered (see instructions) ▶  MI							
b	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General							
	(or designate) of each state as required by General Instruction G? If "No," attach explanation	N/A	8b					
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or	•						
	4942(j)(5) for calendar year 2013 or the taxable year beginning in 2013 (see instructions for Part XIV)? If "Yes,"		[ ]					
	complete Part XIV		9		X			
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their							
	names and addresses		10		X			
		F	orm <b>99</b>	0-PF				

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<u> Pa</u>	ert 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		<u> </u>
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		X
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application	1?		13	X	
	Website address ► N/A					_
14		те по. ▶	906-7	86-	708	0
	507 1st Ave North		4000			
		ZIP+4 ▶	49829	•		. ~
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 – Check here	. 1	1			▶ ∟
	and enter the amount of tax-exempt interest received or accrued during the year	▶ ∟	15			
16	At any time during calendar year 2013, did the foundation have an interest in or a signature or other authority			ı	Yes	No
	over a bank, securities, or other financial account in a foreign country?			16		X
	See the instructions for exceptions and filing requirements for Form TD F 90-22 1 If "Yes," enter the name of					
	the foreign country			L		
PE	urt VII-B Statements Regarding Activities for Which Form 4720 May Be Required			·	1	
	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.				Yes	No
1a	During the year did the foundation (either directly or indirectly):	7	<b>₩</b>			
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person?	Yes	X No			
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a	7	V			
	disqualified person?	Yes	X No X No			
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?	Yes	==			
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?	Yes	X No			
	(5) Transfer any income or assets to a disqualified person (or make any of either available for	Yes	X No			
	the benefit or use of a disqualified person)?  (6) Agree to pay money or property to a government official? (Exception. Check "No" if the	] Tes	ZI NO			
	foundation agreed to make a grant to or to employ the official for a penod after					
	termination of government service, if terminating within 90 days.)	Yes	X No			
b	If any answer is "Yes" to 1a(1)–(6), did any of the acts fail to qualify under the exceptions described in Regulation	_	110			
-	section 53.4941(d)-3 or in a current notice regarding disaster assistance (see instructions)?		N/A	1b		
	Organizations relying on a current notice regarding disaster assistance check here		▶ [	, i		
С	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that		, П			
	were not corrected before the first day of the tax year beginning in 2013?		N/A	1c		
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 2013, did the foundation have any undistributed income (lines 6d and					
	6e, Part XIII) for tax year(s) beginning before 2013?	Yes	No			
	If "Yes," list the years ▶ 20 <b>12</b> , 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 instructions)			2b		X_
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.					
	<b>▶</b> 20 , 20 , 20 , 20					
3a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise	7				
	at any time during the year?	Yes	X No			
b	If "Yes," did it have excess business holdings in 2013 as a result of (1) any purchase by the foundation or					
	disqualified persons after May 26, 1969, (2) the lapse of the 5-year period (or longer period approved by the					
	Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest; or (3) the lapse of					
	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 2013 )		N/A	3b		
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?			4a		X
b	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its					4,-
	chantable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2013	7		4b		X

Form	990-PF (2013) UPPER PENINSULA SENIOR COMPANIO	<u>N 38-2</u>	953723			Page <b>6</b>		
P	art VII-B Statements Regarding Activities for Which Form 4	4720 May Be R	Required (cont	inued)	··			
5a	During the year did the foundation pay or incur any amount to							
	(1) Carry on propaganda, or otherwise attempt to influence legislation (section 4	1945(e))?		res 🛚 X No				
	(2) Influence the outcome of any specific public election (see section 4955), or to carry on,							
	directly or indirectly, any voter registration drive?							
	(3) Provide a grant to an individual for travel, study, or other similar purposes? Yes X No							
	(4) Provide a grant to an organization other than a chantable, etc., organization	described in	_					
	section 509(a)(1), (2), or (3), or section 4940(d)(2)? (see instructions)							
	(5) Provide for any purpose other than religious, charitable, scientific, literary, or educational							
	purposes, or for the prevention of cruelty to children or animals?			res 🛚 X No				
b	If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify under	er the exceptions d	escribed in					
	Regulations section 53 4945 or in a current notice regarding disaster assistance	(see instructions)?	<b>&gt;</b>	N/A	5b			
	Organizations relying on a current notice regarding disaster assistance check he	ere		▶ ∐				
C	If the answer is "Yes" to question 5a(4), does the foundation claim exemption fro	m the tax						
	because it maintained expenditure responsibility for the grant?		N/A 🗌	res No				
	If "Yes," attach the statement required by Regulations section 53 4945–5(d)							
6a	Did the foundation, during the year, receive any funds, directly or indirectly, to pa	y premiums	_					
	on a personal benefit contract?		□ '	res X No				
b	Did the foundation, during the year, pay premiums, directly or indirectly, on a per	rsonal benefit conti	ract?		6b	<u> </u>		
	If "Yes" to 6b, file Form 8870			(SC)				
	At any time during the tax year, was the foundation a party to a prohibited tax sh		_	res X No				
	If "Yes," did the foundation receive any proceeds or have any net income attribut			N/A	7b			
Pŧ	Information About Officers, Directors, Trustees, Fo	undation Man	agers, Highly	Paid Employ	ees,			
	and Contractors							
1 1	ist all officers, directors, trustees, foundation managers and their compens	ation (see instruc	tions).	r	r			
		(b) Title, and average	(c) Compensation	(d) Contributions to employee benefit	(e) Exp	ense account,		
	(a) Name and address	hours per week devoted to position	(If not paid, enter -0-)	plans and deferred	other allowances			
				compensation				
Se	e Statement 5							
						<del></del>		
	Companyation of five highest paid ampleyees (ather than those included a	l line d coo inc	t	a antar				
2	Compensation of five highest-paid employees (other than those included o "NONE."	on line 1 – see ins	tructions). Il non	e, enter				
	TOTAL.	1	1	(d) Contributions to				
	(a) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week	(c) Compensation	employee benefit		ense account,		
	(-,	devoted to position	(0,00,0	plans and deferred compensation	other	allowances		
NΩ	NE			F				
				·				
					_			
		<u> </u>						
		<u> </u>		<u> </u>				
Tota	number of other employees paid over \$50,000	<del></del>				0		
	The state of the s			F	orm <b>99</b> 0	0-PF (2013)		
				,		\/		

<u></u>	013) UPPER PENINSULA SENIOR COMPANION	38-2953723	Page 7
Part VIII	Information About Officers, Directors, Trustees, Foundand Contractors (continued)	ation Managers, Highly Paid E	mployees,
3 Five high	est-paid independent contractors for professional services (see instruc	ctions). If none, enter "NONE."	- <del></del> -
	(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE			
	<del>-</del>		
_			
_			
Total number of	others receiving over \$50,000 for professional services		<b>•</b>
Part IX-A	Summary of Direct Charitable Activities		
	s four largest direct charitable activities during the tax year. Include relevant statistical information subther beneficiaries served, conferences convened, research papers produced, etc	uch as the number of	Expenses
1 N/A			
2			
3			
4			
Part IX-B	Summary of Program-Related Investments (see instruc	otions)	
***********	rgest program-related investments made by the foundation during the tax year on lines 1 and 2	Stions)	Amount
1 N/A	ngest programmetated investments intade by the roundation during the tax year on lines it and 2		Amount
1 21/22			
2			
All other program-r	elated investments. See instructions		
3			
			l

Total. Add lines 1 through 3

Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation

qualifies for the section 4940(e) reduction of tax in those years.

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Pa	art XIII Undistributed Income	(see instructions)	)			
			(a)	(b)	(c)	(d)
1	Distributable amount for 2013 from Part X line 7	CI,	Corpus	Years prior to 2012	2012	3,967
2	Undistributed income, if any, as of the end	d of 2013:				
а	Enter amount for 2012 only				3,845	
b		, 20				
3	Excess distributions carryover, if any, to 2					
а	From 2008					
b	From 2009					
С	From 2010					
d	From 2011					
е	From 2012	- <u>-</u>				
f	Total of lines 3a through e					
4	Qualifying distributions for 2013 from Part	t XII,				
	line 4 <sup>.</sup> ▶ \$1,000					
а	Applied to 2012, but not more than line 2a	a			1,000	
b	Applied to undistributed income of prior ye	ears				
	(Election required – see instructions)		-			
С	Treated as distributions out of corpus (Ele	ection				
	required – see instructions)					
d	• • • • • • • • • • • • • • • • • • • •					
_ 0	Remaining amount distributed out of corp					
5	Excess distributions carryover applied to 2					
	(If an amount appears in column (d), the s	same				
6	amount must be shown in column (a).)					
U	Enter the net total of each column as indicated below:					
а	Corpus Add lines 3f, 4c, and 4e. Subtract	t line 5				
b				<u> </u>		<del></del>
-	line 4b from line 2b	Ol .				
С	<b></b>	sted				
_	income for which a notice of deficiency ha					
	been issued, or on which the section 4942					
	tax has been previously assessed	, ,				
d	Subtract line 6c from line 6b. Taxable					·····
	amount - see instructions			<u></u>		
е	Undistributed income for 2012 Subtract li	ine				
	4a from line 2a Taxable amount - see					
	instructions				2,845	
f	Undistributed income for 2013 Subtract li					
	4d and 5 from line 1. This amount must be	е				<u>.</u>
_	distributed in 2014					3,967
7	Amounts treated as distributions out of co	•				
	to satisfy requirements imposed by sectio					
	170(b)(1)(F) or 4942(g)(3) (see instruction	′				······································
8	Excess distributions carryover from 2008					
9	applied on line 5 or line 7 (see instructions	•				
J	Excess distributions carryover to 2014. Subtract lines 7 and 8 from line 6a	•				
10	Analysis of line 9:					
a	Excess from 2009					
b	Excess from 2010					
c	Excess from 2011					
d	Excess from 2012		-			
_	Excess from 2013					

Pa	ert XIV Private Operating Fou	ındations (see in:	structions and Par	t VII-A, question 9	)			
	la If the foundation has received a ruling or determination letter that it is a private operating							
	foundation, and the ruling is effective for 2013, enter the date of the ruling							
b	Check box to indicate whether the foundation		<del>-</del>	bed in section 49	942(j)(3) or 494:	2(j)(5)		
2a	Enter the lesser of the adjusted net	Tax year		Pnor 3 years				
	income from Part I or the minimum	(a) 2013	<b>(b)</b> 2012	(c) 2011	(d) 2010	(e) Total		
	investment return from Part X for							
	each year listed							
b	85% of line 2a							
C	Qualifying distributions from Part XII,							
•	line 4 for each year listed							
d	Amounts included in line 2c not used directly							
_	for active conduct of exempt activities							
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			,		-		
Ū	alternative test relied upon							
а	"Assets" alternative test – enter							
•	(1) Value of all assets							
	(2) Value of assets qualifying under							
	section 4942(j)(3)(B)(i)							
b	"Endowment" alternative test – enter 2/3							
U	of minimum investment return shown in							
	Part X, line 6 for each year listed							
	"Support" alternative test – enter							
·	(1) Total support other than gross							
	investment income (interest,		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)							
	(3) Largest amount of support from							
	an exempt organization							
-	(4) Gross investment income  at XV Supplementary Inform	nation (Complete	thic port only if	the foundation h	ad \$5 000 or more	o in accote at		
F	any time during the y	•	•	tile louridation il	au \$5,000 or more	e III assets at		
1	Information Regarding Foundation Ma		tions.j	<del> ·</del>				
	List any managers of the foundation who		e than 2% of the total	contributions received	by the foundation			
а	before the close of any tax year (but only				•			
	N/A	in they have contribut	eu more man \$5,000)	(See Section 507(d)(2	J·)			
<b>b</b>	List any managers of the foundation who	own 10% or more of	the stock of a cornerat	on (or an equally large	nortion of the			
b	ownership of a partnership or other entity		· · · · · · · · · · · · · · · · · · ·	,	s portion of the			
	N/A	) of which the louridar	lion has a 10 /6 or grea	itei iiiteiest.				
2	Information Regarding Contribution, C	Grant Gift Loan Sch	nolarship etc. Progr	ame.				
_	Check here ► X if the foundation only				tope not accent			
	unsolicited requests for funds. If the foun							
	other conditions, complete items 2a, b, c		arits, etc. (see mstruct	ions) to individuals of	organizations under			
	The name, address, and telephone numl		of the person to whom	annlications should be	addressed:			
a	N/A	Dei Oi e-iliali addiess	of the person to whom	applications should be	addressed.			
	,							
	The form in which applications should be	submitted and inform	action and materials th	ev sporija inclinae.				
b	N/A	saumineu and inform	iauon anu materiais th	ey should illicidde.				
	Any submission deadlines:					-		
U	N/A							
	<u> </u>	euch as hy access-b	ical areas, charitable f	ielde kinde of inclitutio	ne or other	<del></del>		
a	Any restrictions or limitations on awards,	such as by geograph	icai areas, charitable ti	icius, kiilas oi insulutia	nia, di dillei			
	factors <sup>.</sup> N/A							
	M/ A		<del></del>			- 000 DE		

Part XV Supplementary Information (c	continued)			
3 Grants and Contributions Paid During th		r Future Payment	<del>                                     </del>	
Recipient	If recipient is an individual, show any relationship to any foundation manager	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)	or substantial contributor	recipient	<del> </del>	
a Paid during the year HUMAN RESOURCE AUTHORITY 507 1ST AVE NORTH ESCANABA MI 49829	N/A	pub. charity		1,000
			1	
			1	
			1	
	<u> </u>		▶ 3a	1,000
Total  b Approved for future payment		т Т	<b>&gt;</b> 3a	1,000
N/A				
	<u> </u>			
Total		-	▶ 3b	

Enter gross am	Analysis of Income-Producing Acounts unless otherwise indicated.		d business income	Excluded	by section 512, 513, or 514	(e)
		(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	Related or exempt function income (See instructions)
1 Program se				<del></del>		
	RAISERS			<del></del>		1,253
		-		_{		
						_
				<del></del>		_
					-	
f		-				
=	nd contracts from government agencies			-		
	p dues and assessments		· · · ·	1		1,643
	savings and temporary cash investments	-				1,043
	and interest from securities					
	ncome or (loss) from real estate					
	nanced property				· · · · · · · · · · · · · · · · · · ·	
	ot-financed property					
	ncome or (loss) from personal property					
7 Other inves				+		7,660
•	ss) from sales of assets other than inventory			<del></del>		,,,,,
	e or (loss) from special events					
	t or (loss) from sales of inventory					
	nue: a	-				
			<del></del>			
e		_				
	dd columns (b), (d), and (e)	_		0	0	10,556
	line 12, columns (b), (d), and (e)				13	10,556
	t in line 13 instructions to verify calculations )					
Part XVI-E		Accomplishm	ent of Exempt	Purpose	S	-
Line No. ▼	Explain below how each activity for which incom accomplishment of the foundation's exempt put					ons)
N/A						
			···			
			- ye-		-	

orm 9	90-PF (201	3) UPPER PEN	IINSULA	SENIOR (	COMPANIO	N <u>38-2</u>	<u> 1953723</u>		Pa	<u>ge 13</u>
	: XVII	Information Regariza	arding Tra				onships Wit	h Noncharitable		
1 [	old the orga	nization directly or ind	rectly engag	e in any of the foll	owing with any o	ther organization	described		Yes	No
		01(c) of the Code (other								
	rganization	·		· ( ) ( )	,		•			
	_		ation to a no	nobaritable aveme	t organization of	f				
		om the reporting found	ation to a no	nchantable exemp	ot organization of	l		4		- T
-	1) Cash							1a)		X
(	2) Other as	ssets						<u>1a(</u>	2)	X
b (	Other transa	ictions:								
(	1) Sales of	assets to a noncharita	able exempt	organization				1b(	(1)	X
i	2) Purchas	es of assets from a no	nchantable	exempt organization	on			1b(	(2)	X
-	•	of facilities, equipment,						1b		X
•	-			1013				1b		X
		rsement arrangements	•							+
•	-	r loan guarantees						1b		X
(	6) Perform	ance of services or me	embership oi	r fundraising solicit	ations			<u>1b</u>	.6)	X
c S	Sharing of fa	acilities, equipment, m	aılıng lists, o	ther assets, or paid	d employees			_ 10	<u>.                                    </u>	<u> </u>
d l	f the answe	r to any of the above i	s "Yes," com	plete the following	schedule Colur	mn (b) should alw	ays show the fa	ir market		
٧	alue of the	goods, other assets, o	r services gi	ven by the reportir	ng foundation If	the foundation red	ceived less than	fair market		
V	alue in anv	transaction or sharing	arrangemer	nt. show in column	(d) the value of	the goods, other	assets, or servic	ces received.		
	Line no	(b) Amount involved		e of noncharitable exemp				nsactions, and sharing arrang	ements	
N/A		. ,	` ` `	<del></del>			<u>`</u>			
. 1 / 11										
			] 							
			<u> </u>							
		<del></del>								
			1							
2- 1	- 4b - 4		the officer of	ith as related to			tions			
		ation directly or indirec	•				uons		V <b>V</b>	No Z
		section 501(c) of the		than section 501(c	c)(3)) or in section	n 52/7			Yes X	NO
<b>b</b> _l	f "Yes," con	nplete the following sc	hedule	F		т				
		) Name of organization		(b) Type of o	rganization		(c) Descript	tion of relationship		
N	/A									
								-		
				<del>                                     </del>					-	
	Linder ner	valture of persuny I declare th	at I have evamu	ned this return, including	n accompanying sch	l edules and statements	and to the hest of r	my knowledge and belief, it is	true	-
		nd complete Declaration of								
_								May the IRS discuss to		
Sign								with the preparer show (see instructions)?	X Yes	No
lere		c// 1	100	$\gamma$				) (300 m300000m3)*	1 , 65	
		Tomotuni	4 YY	Kinte_	$\succ$	10 115/14	V to	esident		
	Signa	ature of officer or trustee	· //	/	Date	// /	Title			
	Dr. at 77.	ne prepareza sama			Brangrade support	re	-	Date	$\neg$	
	Print/ly	pe preparer's name			Rreparer's signatu	M 16.6	0000 10	L Date	Check	
aid					* Mile	111. Name	Hew, G	7		mployed
repar	er Janío	e M. Van Eff			Janice M.	Van Effen	I GPA	10/09/		
Jse O	l Fırm'sn		oja & N					PTIN P002		
. 36 U	Firm's a		North 6				Į	Firm's EIN ▶ 27 - 43		
		Escar	laba, N	II 49829	-3933			Phone no 906 - 7	<u> 189-1</u>	<u> 1872</u>

51040 UPPER PENINSULA SENIOR COMPANION

Federal Statements

FYE: 12/31/2013

38-2953723

10/9/2014 2:02 PM

## **Statement 4 - Explanation for Not Filing on Time**

### Description

The organizations with average gross receipts less than \$50,000 was not known in 2013. When the 990-EZ was being completed, the public supported test failed, resulting in the 990-PF filing requirement.

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## 51040 UPPER PENINSULA SENIOR COMPANION 38-2953723

## Federal Statements

FYE: 12/31/2013

ncome
- Other
Ξ
Line '
Part
990-PF,
Form
ᆝ
Statement

Income

# Statement 2 - Form 990-PF, Part I, Line 16c - Other Professional Fees

Charitable Purpose	₩	\$
Adjusted Net		0
	ស	₩
Net Investment	1,028	1,459
Ţ	₩	₩
Total	1,028 431	1,459
	w	Μ
Description	COMM. FOUNDADMIN FEES COMM. FOUNDINVEST FEES	Total

# Statement 3 - Form 990-PF, Part I, Line 23 - Other Expenses

Net Adjusted Control of the Control	**		20	25	45 \$ 0 \$ 0 \$
Total	ጭ		2		\$
Description		Expenses	MICHIGAN UPDATE	USPS	Total

NO	Federal Statements	
51040 UPPER PENINSULA SENIOR COMPANI	38-2953723	FYE: 12/31/2013

10/9/2014 2:02 PM

Etc.
Trustees,
Directors,
f Officers,
- List of
, Line 1
Part VIII
990-PF,
5 - Form
Statement 5

Name and Address	Title	Average Hours	Compensation	Benefits	Expenses
CONNIE MAULE P.O. BOX 225 ESCANABA MI 49829	PRESIDENT	1.00	0	0	0
CHERYL ROCHON P.O. BOX 225 ESCANABA MI 49829	VICE PRESIDE	0.05	0	0	0
SALLY BRIGGS P.O. BOX 225 ESCANABA MI 49829	SECRETARY	0.05	0	0	0
RUTH CHOUINARD P.O. BOX 225 ESCANABA MI 49829	TREASURER	0.05	0	0	0
LINDA LEWANDOWSKI P.O. BOX 225 ESCANABA MI 49829	TRUSTEE	0.05	0	0	0
AMY WILSON P.O. BOX 225 ESCANABA MI 49829	TRUSTEE	0.05	0	0	0
FRED COATES P.O. BOX 225 ESCANABA MI 49829	TRUSTEE	0.05	0	0	0
JULIE MALLARD P.O. BOX 225 ESCANABA MI 49829	TRUSTEE	0.05	0	0	0
NOREEN CORWIN P.O. BOX 225 ESCANABA MI 49829	TRUSTEE	0.05	0	0	0

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