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Return of Private Foundation
or Section 4947(a)(1) Trust Treated as Private Foundation
Do not enter Social Security numbers on this form as it may be made public.

OMB No 1545-0052

		evenue Service	► Information about Forn	1 990-PF					
		endar year 2013 of foundation	or tax year beginning		06/	Ul , 2013	and endin		05/31, 20 14
		ILEE FOUNDA	TT ON					1	8-3003821
			DOX number if mail is not delivere	d to street	address)		Room/suite		nber (see instructions)
					,				, , , , , , , , , , , , , , , , , , , ,
I	P.0	. BOX 75000							313-222-5067
			ce, country, and ZIP or foreign po	stal code					
								C If exemption app pending, check h	
I	DET.	ROIT, MI 48	275-3462					positing, check t	
G	Che	ck all that apply	Initial return		Initial return	of a former p	ublic charit	Y D 1 Foreign organ	izations, check here . ►
			Final return		Amended ret	urn			izations meeting the
_			Address change		Name change				
<u> </u>	\neg		zation X Section 501					E If private founda	tion status was terminated
L			nonexempt charitable trust		her taxable pr			under section 50	7(b)(1)(A), check here . >
		market value of year (from Pai		unting r ther (sp	nethod: X Ca	asn Acc	rual		is in a 60-month termination
					(d) must be oi	a cash hasis		- under section 50	7(b)(1)(B), check here . >
P			venue and Expenses (The	1		1 00317 00313.)			(d) Disbursements
		total of amounts i	in columns (b), (c), and (d)	, ,,,,	levenue and Denses per	(b) Net inve	1	(c) Adjusted net	for charitable
		may not necessar column (a) (see in	rly equal the amounts in structions))		books	incon	ie	income	purposes (cash basis only)
T	1		nts, etc., received (attach schedule) .		401,824.				
	2		e foundation is not required to ich Sch B	5					٠,
i	3		nd temporary cash investments	125	<u> </u>				
ļ	4	Dividends and inte	erest from securities	2	<u>~~~ 8,055.</u>	` ງ	8,055.		
١	5 a	Gross rents							
		Net rental income or							
3		Net gain or (loss) from Gross sales price for	m sale of assets not on line 10 all 700,000.		-27 , 775.				
Devenue	,	assets on line 6a		ļ					
5	7 8		come (from Part IV, line 2) . ital gain	-				· · · · · · · · · · · · · · · · · · ·	
	9	*	ons · · · · · · · · · · · · · · · · · · ·					· · · · · · · · · · · · · · · · · · ·	
ĺ		Gross sales less retur	ns						
	b	Less Cost of goods s							
	c	Gross profit or (los	s) (attach schedule)			1			
	11	Other income (atta	ich schedule)		12,860.	1		17	
_			through 11	ļ	394,964.	<u> </u>	<u>8,055.</u>		
			cers, directors, trustees, etc						
S	14		laries and wages				NONE.	NO	
2	15		ployee benefits	-	 		NONE	NOI	NE
cxbeuses	10a		schedule)			**			
- 1			fees (attach schedule)		2,937.		2,937.		
Administrative	17				2,,,,		2,557.		
	18		le) (see instructions)		1,638.				
	19		ch schedule) and depletion .						
3	20	Occupancy							
2	21 22		s, and meetings				NONE	NOI	VE
	22	Printing and public	cations				NONE	NOI	NE NE
- 1	23		ttach schedule)	<u> </u>	20.		20.		
5	24		nd administrative expenses.		4 505			***	
	25		igh 23		4,595.		2,957.	NOI	
- 1	25 26		s, grants paid bursements Add lines 24 and 25		2,110,050. 2,114,645.		2,957.	NOI	2,110,05
_	27	Subtract line 26 from		†	.,		4,331.	INOI	NE 2,110,05
			expenses and disbursements	_1	,719,681.				
			come (if negative, enter -0-)				5,098.		
	С	Adjusted net inco	me (if negative, enter -0-).					W	
	_	americale Design	Act Notice, see instructions						Form 990-PF (204)

Pa	rt II	Ralanco Shoote	Attached schedules and amounts in the description column should be for end-of-year	Beginning of year	End o	of year
u q		- Dalance Sheets	amounts only (See instructions)	(a) Book Value	(b) Book Value	(c) Fair Market Value
	1	Cash - non-interest-beari	ng			
			cash investments	3,285,192.	1,692,995.	1,692,995
	3	Accounts receivable				
		Less allowance for doub	otful accounts >			
	4	Pledges receivable ▶_				
		Less allowance for doub	otful accounts			
			<u>.</u>			
	6	Receivables due from	officers, directors, trustees, and other			
		disqualified persons (atta	ach schedule) (see instructions)			
-	7	Other notes and loans re	eceivable (attach schedule)			
			otful accounts >NONE			<u>L</u>
တ္ခ						
Assets			eferred charges			
۲į.			government obligations (attach schedule).			
	b	Investments - corporate	stock (attach schedule)			
	С	Investments - corporate	bonds (attach schedule) STMT 1	1,360,785.	1,233,292.	1,222,624
	1	Investments - land, building and equipment basis Less accumulated deprecia (attach schedule)	is, bation b			
-	12	Investments - mortgage	loans			
	13	Investments - other (atta	ch schedule)			
'	14	Land, buildings, and equipment basis	>			
		Less accumulated deprecia	tion			
1.	15	Other assets (describe	>			
	16		completed by all filers - see the	**		
	_	instructions Also, see pa	age 1, item l)	4,645,977.	2,926,287.	2,915,619
	17	Accounts payable and a	ccrued expenses			
	18					
တ္ကု .	19				 :	
≝ :	20		rs, trustees, and other disqualified persons			
Liabilities	21	Mortgages and other no	tes payable (attach schedule)]
: ت	22	Other liabilities (describe	• ▶) [
:	23	Total liabilities (add line	s 17 through 22)		NONE	3
		Foundations that follow	ow SFAS 117, check here . ▶]
		and complete lines 2	4 through 26 and lines 30 and 31.			
ě,	24	Unrestricted				
و اق	25					
<u>ن</u> ق	26		· · · · · · · · · · · · · · · · · · ·			
밀			not follow SFAS 117, ▶ 🗓			1
딘		check here and com	plete lines 27 through 31.			
Ō.	27		ipal, or current funds	4,645,977.	2,926,287	
Assets or Fund Balance	28		land, bldg , and equipment fund			
Ass :	29		ated income, endowment, or other funds			1
			balances (see instructions)	4,645,977.	2,926,287.	
2 ;	31		net assets/fund balances (see		-,1,-= -,1, ·	
		instructions)		4,645,977.	2,926,287	
Pa	rt III		anges in Net Assets or Fund E			· · · · · · · · · · · · · · · · · · ·
			palances at beginning of year - Part I		nust agree with	
			d on prior year's return)			4,645,977.
2	Ente	er amount from Part I,	line 27a		2	-1,719,681.
3	Othe	er increases not includ	ded in line 2 (itemize) ▶		3	
4	Add	lines 1, 2, and 3			4	2,926,296.
5	Dec	reases not included in	line 2 (itemize) DIFFERENCE BETWEEN	RECEPTS AND TAXABLE INC	OME 5	9.
			alances at end of year (line 4 minus li		 	2,926,287.
						5 000 DE (00-0)

Pá	(a) List and	and Losses for Tax on Invelopment describe the kind(s) of property sold (lick warehouse; or common stock, 200	e g., real estate,	(b) How acquired P - Purchase	(c) Date	(d) Date sold (mo , day, yr)
1.	PUBLICLY TRADED		SIIS WILC CO.,	D - Donation	(mo , day, yr.)	(mo , day, y,)
<u>1a</u>	PUBLICUI IKADED	SECURITIES .				
<u>b</u>				-		
d						
e e	·					
	(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale		(h) Gain or (lo (e) plus (f) mini	
	700 000	(or anovasio)	·		(c) pids (i) iiiiii	
<u>a</u>	700,000.		727,775.	 		<u>-27,775.</u>
<u>b</u>					·	
<u></u>						
_ <u>d</u>				-		
e	Complete only for accets s	howing gain in column (h) and owned	by the foundation on 12/21/60	 		
_		(j) Adjusted basis	(k) Excess of col (i)		Gains (Col. (h) ga (k), but not less	
	(i) FMV as of 12/31/69	as of 12/31/69	over col (j), if any		Losses (from co	
— а		· · · · · · · · · · · · · · · · · · ·		 		-27,775.
_ <u>~</u>						21,113.
		No. of the last of		 		
ď						,
e				1		
			gain, also enter in Part I, line 7			·
2	Capital gain net income or		(loss), enter -0- in Part I, line 7	2		-27,775.
3	Net short-term capital gain	or (loss) as defined in sections 12	,		-	
	lf gain, also enter in Par	t I, line 8, column (c) (see inst	ructions). If (loss), enter -0- in			
		· · · · · · · · · · · · · · · · · · ·	4	3		
			uced Tax on Net Investment I	ncome	· · ·	
Wa		·	outable amount of any year in the b Do not complete this part	ase perio	d?	Yes X No
			see the instructions before making	any entri	ies	
	(a)	(b)	(c)	dily cita	(d)	
С	Base period years alendar year (or tax year beginning in)	Adjusted qualifying distributions	Net value of noncharitable-use assets		Distribution ra (col (b) divided by	atio
	2012	1,570,961.	4,746,761.		(00) (0, 00)	0.330954
_	2011	2,014,627.	5,258,622.		****	0.383109
	2010	1,976,758.				0.335880
_	2009	2,410,622.	6,628,856.	1	. 1 2 12	0.363656
	2008	4,081,473.	9,217,181.		<u>. </u>	0.442811
		· · · · · · · · · · · · · · · · · · ·				
2	Total of line 1, column (d)			2		1.856410
3	Average distribution ratio	for the 5-year base period - divide	the total on line 2 by 5, or by the			
	number of years the found	dation has been in existence if less	than 5 years	3		0.371282
4	Enter the net value of non	charitable-use assets for 2013 fro	m Part X, line 5	4	_ 3	,771,529.
					·	<u> </u>
5	Multiply line 4 by line 3			5	1	,400,301.
						· · · · · · · · · · · · · · · · · ·
6	Enter 1% of net investmen	it income (1% of Part I, line 27b)		6		51.
7	Add lines 5 and 6			7	1	,400,352.
8	Enter qualifying distribution If line 8 is equal to or great Part VI instructions	ons from Part XII, line 4 eater than line 7, check the box		8 that part	using a 1% ta	, 110 , 050 . x rate See the

Part	VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 - see i	nstru	ctions	;)
1a	Exempt operating foundations described in section 4940(d)(2), check here and enter "N/A" on line 1			
	Date of ruling or determination letter (attach copy of letter if necessary - see instructions)			
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check			<u>51.</u>
	here X 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-) 2			
3	Add lines 1 and 2			51.
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-) 4			ONE
5	Tax based on investment income. Subtract line 4 from line 3 If zero or less, enter -0			<u>51.</u>
6	Credits/Payments			
а	2013 estimated tax payments and 2012 overpayment credited to 2013 6a 865 .			
b	Exempt foreign organizations - tax withheld at source			
C	Tax paid with application for extension of time to file (Form 8868) 6c NONE			
d	Backup withholding erroneously withheld		0	6 F
7	Total credits and payments Add lines 6a through 6d		8	<u>65.</u>
8	Enter any penalty 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		0	1 /
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid Enter the amount of line 10 to be Credited to 2014 estimated tax ▶ 52. Refunded ▶ 11			<u>14.</u>
11 Por	Enter the amount of line 10 to be Credited to 2014 estimated tax ► 52. Refunded ► 11 VII-A Statements Regarding Activities		/	<u>62.</u>
	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate	Г	Vac	No
ıa		1a	Yes	No X
	or intervene in any political campaign?	l a		
Ь		1ь		Х
	definition)?	10		
	distributed by the foundation in connection with the activities			
_	Did the foundation file Form 1120-POL for this year?	1 c		Х
	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year			
	(1) On the foundation > \$(2) On foundation managers > \$			
e	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on			
_	foundation managers. ►\$			
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?	2		Х
	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		Χ
4 a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	4a		Х
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		X
	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			
	By language in the governing instrument, or			
	By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict	1		
	with the state law remain in the governing instrument?	6		X
7	Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col (c), and Part XV	_7_	X	
8a	Enter the states to which the foundation reports or with which it is registered (see instructions)			
	MI			
ь	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 ² If "No," attach explanation	8b	X	
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or			
	4942(j)(5) for calendar year 2013 or the taxable year beginning in 2013 (see instructions for Part XIV)? If "Yes," complete			v
	Part XIV	9_		<u> </u>
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and			Х
	addresses	10	DO DE	

_	990-PF (2013) 38-3003821			Р
Part	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			١
	person had advisory privileges? If "Yes," attach statement (see instructions)			1
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	X	1
	Website address N/A	==		_
14	The books are in care of ► JAMES E. CHRISTENSON Telephone no ► \614/654	- <u>375</u>	5	_
	Located at ► 855 E MAIN STREET, ZEELAND, MI ZIP+4 ► 49464-(1302		_
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - Check here		🕨	•
	and enter the amount of tax-exempt interest received or accrued during the year			_
16	At any time during calendar year 2013, did the foundation have an interest in or a signature or other authority	ı	Yes	Į
	over a bank, securities, or other financial account in a foreign country?	16		4
	See the instructions for exceptions and filing requirements for Form TD F 90-22.1 If "Yes," enter the name of			
	the foreign country			J
Par	VII-B Statements Regarding Activities for Which Form 4720 May Be Required			_
	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.		Yes	4
1a	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 X No			l
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a			
	disqualified person?			
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? Yes X No			
	(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			
	the benefit or use of a disqualified person)?			Ì
	(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			١
	termination of government service, if terminating within 90 days) Yes X No			Ì
b	If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations			1
	section 53 4941(d)-3 or in a current notice regarding disaster assistance (see instructions)?	1b		_
	Organizations relying on a current notice regarding disaster assistance check here	}		Ī
c	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 2013?	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			i
	6e, Part XIII) for tax year(s) beginning before 2013?			
	If "Yes," list the years ▶			
b	Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2)	i		
	(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	L	_
C	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here			
	>	ĺ		
3 a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise			
	at any time during the year?			
b	olf "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)	3b		_
4 a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a		
• • •			1	- 1
	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its	ì	1	Ì

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	VII-B Statements Regarding Activities for	Which Form 47	20 May Be Requ	ired (continued)		
5a	During the year did the foundation pay or incur any amount	nt to				
	(1) Carry on propaganda, or otherwise attempt to influence	ce legislation (section	4945(e))?	. Yes X No	•	
	(2) Influence the outcome of any specific public elec-	ction (see section 4	1955), or to carry o	n,		
	directly or indirectly, any voter registration drive?			Yes X No	,	- [
	(3) Provide a grant to an individual for travel, study, or oth				,	ŀ
	(4) Provide a grant to an organization other than a			• —		
					.	- [
	section 509(a)(1), (2), or (3), or section 4940(d)(2)? (s				'	
	(5) Provide for any purpose other than religious, ch	·	• • • • • • • • • • • • • • • • • • • •			- 1
_	purposes, or for the prevention of cruelty to children of					
þ	If any answer is "Yes" to 5a(1)-(5), did any of the			·		
	Regulations section 53 4945 or in a current notice regard	ing disaster assistanc	e (see instructions)?		5b	_
	Organizations relying on a current notice regarding disaste	er assistance check h	ere			į
C	If the answer is "Yes" to question 5a(4), does the	foundation claim ex	emption from the ta	ıx		Ì
	because it maintained expenditure responsibility for the gi	rant ⁷		. Yes No	,	
	If "Yes," attach the statement required by Regulations secti	ion 53 4945-5(d).				
6a	Did the foundation, during the year, receive any fund		ctly, to pay premiun	าร		
	on a personal benefit contract?				.	
ь	Did the foundation, during the year, pay premiums, directl				6ь	
_	If "Yes" to 6b, file Form 8870	y or manochy, on a p	croonar beneme comma			+
72	At any time during the tax year, was the foundation a part	hy to a prohibited tax	aboltor transpostion?	Yes X No		
	If "Yes," did the foundation receive any proceeds or have a					
	List all officers, directors, trustees, foundation ma	(b) Title, and average hours per week devoted to position	(c) Compensation (see (lf not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense acc other allowar	
SEE	STATEMENT 2					
2	Compensation of five highest-paid employees "NONE."	(other than thos	e included on lin		ons). If none,	, 6
(a)) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans and deferred	(e) Expense acc other allowar	cou nce
		1		compensation		
						_
NIONI			NONE	NONE	37037	H:
NON	E		NONE	NONE	NON]	=_
NON	IE		NONE	NONE	NON	=_
NON	IE		NONE	NONE	NON	- _
NON	IE		NONE	NONE	NON	- -
NON	IE		NONE	NONE	NON	- -
NON	IE		NONE	NONE	NON	
NON	IE		NONE	NONE	NON	
NON	IE		NONE	NONE	NON	
NON	IE		NONE	NONE	NON	

	Information About Officers, Directors, Trustees, Foundation Managers, H and Contractors (continued)	ighly Paid Employ	ees,
3 Five hig	hest-paid independent contractors for professional services (see instructions). If	none, enter "NONE	"
		Type of service	(c) Compensation
NONE			NONE
	•		
			
			· · · · · · · · · · · · · · · · · · ·
Total number	of others receiving over \$50,000 for professional services		NONE
Part IX-A	Summary of Direct Charitable Activities		······································
Tare IX-X	Outsities		
	ition's four largest direct charitable activities during the tax year. Include relevant statistical information s nd other beneficiaries served, conferences convened, research papers produced, etc	uch as the number of	Expenses
1NONE			
2			7
3			
4			
Part IX-B	Summary of Program-Related Investments (see instructions)		
	o largest program-related investments made by the foundation during the tax year on lines 1 and 2		Amount
1NONE			
2			
All other progra	am-related investments. See instructions		
3 NONE			
Total. Add lin	es 1 through 3		

Part	Minimum Investment Return (All domestic foundations must complete this part. Foreig see instructions.)	ın founda	itions,
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc.,		
	purposes		
а	Average monthly fair market value of securities	1a	1,283,783.
b	Average of monthly cash balances	1b	2,545,180.
C	Fair market value of all other assets (see instructions)	1c	NONE
d	lotal (add lines 1a, b, and c)	1d	3,828,963.
е	Reduction claimed for blockage or other factors reported on lines 1a and		
	1c (attach detailed explanation)		
2	Acquisition indebtedness applicable to line 1 assets	2	NONE
3	Subtract line 2 from line 1d Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see	3	3,828,963.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see		
	instructions)	4	57,434.
5	instructions) Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	3,771,529.
6	Minimum investment return. Enter 5% of line 5	6	188,576.
Part	XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating found	lations	
	and certain foreign organizations check here ▶ and do not complete this part.))
1	Minimum investment return from Part X, line 6	1	188,576.
2 a	Tax on investment income for 2013 from Part VI, line 5 2a 51.		
b	Income tax for 2013 (This does not include the tax from Part VI.)		
C	Add lines 2a and 2b	2c	51.
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	188,525.
4	Recoveries of amounts treated as qualifying distributions	4	12,860.
5	Add lines 3 and 4	5	201,385.
6	Deduction from distributable amount (see instructions)	6	NONE
7	Distributable amount as adjusted Subtract line 6 from line 5. Enter here and on Part XIII,		
	line 1	7	201,385.
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	2,110,050.
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 charitable, etc.,		
_	purposes	2	NONE
3	Amounts set aside for specific charitable projects that satisfy the		
a	Suitability test (prior IRS approval required)	3a	NONE
b	Cash distribution test (attach the required schedule)	3b	NONE
4	Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4	4	2,110,050.
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	<u>51.</u>
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	2,109,999.
	Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when ca qualifies for the section 4940(e) reduction of tax in those years.	lculating	whether the foundation

Form **990-PF** (2013)

Form 990-PF (2013)

Undistributed Income (see instructional limits) Distributable amount for 2013 from Part XI,	(a)	(h)	4.1	
histributable amount for 2013 from Part XI		(b)	(c)	(d)
· · · · · · · · · · · · · · · · · · ·	Corpus	Years prior to 2012	2012	2013
ne 7				201,385.
Indistributed income, if any, as of the end of 2013	-		NONE	
inter amount for 2012 only		NONE	NONE	
otal for prior years 20 <u>11</u> ,20,20	· · · · · · · · · · · · · · · · · · ·	NONE		
rom 2008				
rom 2009 2,0/9,506.				
7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7				
1				
n e e e e e e e e e e e e e e e e e e e	10,449,636.			
1				
ne 4· ▶ \$ 2,110,050.			ŀ	
Applied to 2012, but not more than line 2a 🚬 . 💄			NONE	
Applied to undistributed income of prior years				
Election required - see instructions)		NONE		
reated as distributions out of corpus (Election				
equired - see instructions)	NONE			
Applied to 2013 distributable amount				201,385.
	1,908,665.			
excess distributions carryover applied to 2013	NONB			NONE
If an amount appears in column (d), the same				
	12,358,301			
· ·				
rior years undistributed income Subtract		NONE		
Enter the amount of prior years' undistributed		1,0145		
ncome for which a notice of deficiency has				1
		NONE		
, , ,		NOTE		
		NONE		
		NONE		
4a from line 2a Taxable amount - see		1	MONTE	
nstructions			NONE	
Undistributed income for 2013 Subtract lines				
1d and 5 from line 1. This amount must be				MOME
				NONE
_				
(0,0)	NONR		·····	
Excess distributions carryover from 2008 not	2 602 64-			
i i	3,623,647.			
· · · · · · · · · · · · · · · · · · ·	0 704 55			
· · ·	8,/34,654.			·
Analysis of line 9.				
Excess from 2013 1,908,665.				
	access distributions carryover, if any, to 2013 and 2008	ixcess distributions carryover, if any, to 2013 and 2008	Access distributions carryover, if any, to 2013 and 2008 3,623,647. To 2008 3,623,647. To 2009 2,079,506. To 2010 1,682,691. To 2011 1,751,804. To 2011 1,751,804. To 2012 1,311,988. To 2012 1,311,988. To 2012 1,311,988. To 2013 for 2012 1,311,988. To 2013 for	10,449,636 10

Page 9

Pa	rt XIV Private Ope	erating Foundations	(see instructions a	nd Part VII-A, questi	on 9)	NOT APPLICABL
1 a	If the foundation has	received a ruling or d	etermination letter that	t it is a private opera	ating	
	foundation, and the ruling	is effective for 2013, en	ter the date of the ruling			
b	Check box to indicate whi				4942())(3) or 4942(j)(5).
-	Faranta la como et ales est	Tax year		Prior 3 years		
2 a	Enter the lesser of the ad- justed net income from Part	(a) 2013	(b) 2012	(c) 2011	(d) 2010	(e) Total
	I or the minimum investment		(4) 20 12	(4) 25 / 1	(4) 20 10	
	return from Part X for each year listed					
D	85% of line 2a	-				
C	Qualifying distributions from Part					
4	XII, line 4 for each year listed .	···-·				
u	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 2/3 of minimum invest-					
	ment return shown in Part X,					
c	line 6 for each year listed "Support" alternative test - enter					
·	(1) Total support other than					
	gross investment income					
	(interest, dividends, rents, payments on securities					
	loans (section 512(a)(5)),					
	or royalties) (2) Support from general					
	public and 5 or more					
	exempt organizations as provided in section 4942					
	(j)(3)(B)(m)					
	(3) Largest amount of sup- port from an exempt					
	organization					
	(4) Gross investment income.					
Pa		ntary Information (t only if the found	lation had \$5,000	or more in assets
		during the year - s				
1	Information Regarding					
a	List any managers of	the foundation who h	nave contributed mor	e than 2% of the tota	al contributions received	red by the foundation
	before the close of any	riax year (but only if th	iey nave contributed r	nore than \$5,000). (S	ee section 507(a)(2).)	
	NONE					
b	List any managers of	the foundation who	own 10% or more o	f the stock of a corp	oration (or an equall	y large portion of the
	ownership of a partner	ship or other entity) of	which the foundation	has a 10% or greater	interest.	
	NONE					
2	Information Regarding	Contribution, Grant,	Gift, Loan, Scholarshi	p, etc., Programs:		
	Check here ► X if t	he foundation only	makes contributions	to preselected char	itable organizations	and does not accept
	unsolicited requests for	or funds. If the found	ation makes gifts, gra	ants, etc. (see instruc	tions) to individuals of	or organizations under
	other conditions, comp	olete items 2a, b, c, and	d d			-
а	The name, address, an	d telephone number o	r e-mail address of the	person to whom app	lications should be ad	dressed
b	The form in which app	lications should be sub	mitted and information	on and materials they	should include:	
	• • • • • • • • • • • • • • • • • • • •					
C	Any submission deadli	nes:	····			
•	, Lastination addun					
	Any restrictions or li	mitations on awards	such as by geogra	phical areas charita	hle fields kinds of	institutions or other
-	factors:	anono on awards,	seen as by googla	pinour aroas, criditta	Die lielus, Killus UI	mantunona, or owier

3 Grants and Contributions Paid During the Veer or Approved for Future Payment Recipient Name and address (home or business) a Paid during the year SEE ATTACRED LIST NONE EXEMPT Suppose of grant or contributions requested and the payment of the payment of the payment or contributions and the payment of	Part XV Supplementary Information (c	continued)			
SEE ATTACHED LIST NONE EXEMPT SUPPORT 2,110,050.	3 Grants and Contributions Paid During	g the Year or Appro	oved for F	uture Payment	
SEE ATTACHED LIST NONE EXEMPT SUPPORT 2,110,050.	Recipient	If recipient is an individual, show any relationship to	Foundation	Purpose of grant or	Amount
SEE ATTACHED LIST NONE EXEMPT SUPPORT 2,110,050.	Name and address (home or business)	any foundation manager or substantial contributor	recipient	contribution	Aniodit
NONE EXEMPT SUPPORT 2,110,050.	a Paid during the year				
NONE EXEMPT SUPPORT 2,110,050.					
	SEE ATTACHED LIST				
		none	EXEMPT	SUPPORT	2,110,050.
				1	
	Total	L	<u> </u>	<u></u>	
b Approved for future payment		· · · · · · · · · · · · · · · ·	· · · · · ·	> 3a	2,110,050.
	b Approved for future payment				
			1		
Total	Total	<u></u>		▶ 3b	

er gross amounts unless otherwise indicated	Unreia	ted business income	Excluded by	section 512, 513, or 514	(e)
Program service revenue	(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	Related or exemp function income (See instructions)
-			 		1000 111011 40010110 /
ab			 		
			 		
c d			-		
					· · · · · · · · · · · · · · · · · · ·
			- · · · · · · · · · · · · · · · · · · 		
		· · · · · · · · · · · · · · · · · · ·			
Fees and contracts from government agencies					
Membership dues and assessments	<u> </u>				
nterest on savings and temporary cash investments			14	8,055.	
Dividends and interest from securities			14	0,055.	
Net rental income or (loss) from real estate					
Debt-financed property					
Not debt-financed property					
et rental income or (loss) from personal property .		· · · · · · · · · · · · · · · · · · ·			
other investment income					
ain or (loss) from sales of assets other than inventory			18	-27,775.	
let income or (loss) from special events					
iross profit or (loss) from sales of inventory					
ther revenue a					
OTHER REVENUE			14	12,860.	
	· · · · · · · · · · · · · · · · · · ·				
Subtotal Add columns (b), (d), and (e)				-6,860.	
Fotal. Add line 12, columns (b), (d), and (e)					-6,8
worksheet in line 13 instructions to verify calcu					_
Relationship of Activities e No. Explain below how each activity	y for whic	n income is reported	ın column (e) of Part XVI-A contribu	
▼ accomplishment of the foundation	n's exemp	t purposes (other than	n by providing	g funds for such purpose	s). (See instruction
				 	
1					
		NOT APPLICAB	LE		
		NOT APPLICAB	LE		
		NOT APPLICAB	LE		
		NOT APPLICAB	LE		
		NOT APPLICAB	LE		
		NOT APPLICAB	LE		
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		NOT APPLICAB	LE		
		NOT APPLICAB	LE		
		NOT APPLICAB	LE		
		NOT APPLICAB	LE		

JSA

	<u> </u>			30 3003021	
Part XVII	Information Regarding	Transfers To and	Transactions	and Relationships	With Noncharitable
	Exempt Organizations			-	

as Transfers from the reporting foundation to a noncharitable exempt organization of: (1) Cash (2) Other assets (3) Other assets (4) Sales of assets to a noncharitable exempt organization (5) Every facilities, equipment, or other assets (6) Purchases of assets from a noncharitable exempt organization (6) Performance of services or membership or fundrassing solicitations (6) Performance of services or membership or fundrassing solicitations (7) Sales of assets to a noncharitable exempt organization (8) Lonar or lona guarantees (8) Lonar or lona guarantees (9) Lonar or lona guarantees (9) Lonar or lona guarantees (9) Lonar or lona guarantees (1) Sales of services or membership or fundrassing solicitations (1) Sales of services or membership or fundrassing solicitations (1) Sales of services or membership or fundrassing solicitations (1) Sales of services or membership or fundrassing solicitations (1) Lonar or long quarantees (1) Lonar or long quarantees (2) Performance of services or membership or fundrassing solicitations (3) Lonar of long quarantees (4) If the answer to any of the above is "Yes," complete the following schedule. Column (b) should always show the fair market value of the goods, other assets, or services received. (a) Line no (b) Amount involved (a) Name of organization or sharing arrangement, show in column (d) the value of the goods, other assets, or services received. (a) Description of transfers, transactions, and sharing arrangements (a) Name of organization or sharing arrangements are serviced to the goods, other assets, or services received. (a) Name of organization or sharing arrangements are serviced to the goods, other assets, or services received. (a) Name of organization or sharing arrangement abade on dissimilation of which proper where are a value of the goods, other assets, or services received. (a) Name of organization or higher than isother with the property of the goods, other assets, or services received. (b) Type of organization of which property which are available to the g	1	Did the	organization directl	ly or indirectly	engage in an	y of the follo	wing with an	y other organization described		Yes	No
a Transfers from the reporting foundation to a noncharitable exempt organization of: (1) Cash				de (other than	section 501(d	c)(3) organiza	tions) or in s	ection 527, relating to political			
(1) Cash (2) Other assets 1912 X X X X X X X X X		_									
(2) Other assets by the transactions: (1) Sales of assets to a noncharitable exempt organization											}
b Other transactions: (1) Sales of assets to an anotharitable exempt organization									1a(1)		
(1) Sales of assets to a noncharitable exempt organization (2) Purchases of assets from a noncharitable exempt organization (3) Rental of facilities, equipment, or other assets (4) Reimbursement arrangements (5) Loans or loan guarantess (6) Performance of services or membership or fundrasing solicitations (6) Performance of services or membership or fundrasing solicitations (6) Performance of services or membership or fundrasing solicitations (7) Sharing of facilities, equipment, mailing lists, other assets, or paid employees (8) Loans or loan guarantess (9) Loans of services or only of the above is "Yes," complete the following schedule. Column (b) should always show the fair market value of the goods, other assets, or services given by the reporting foundation. If the foundation received less than fair market value in any transaction or sharing arrangement, show in column (d) the value of the goods, other assets, or services received. (a) Line no (b) Amount involved (d) Rome of noncharitable exempt organization (d) Description of transition, transactions, and sharing arrangements described in section 501(c) of the Code (other than section 501(c)(3)) or in section 527?									1a(2)		<u>X</u>
(2) Purchases of assets from a noncharitable exempt organization											
(3) Rental of facilities, equipment, or other assets . 1943 X	1	(1) Sale	es of assets to a non	charitable exem	ipt organizatio	on					
(4) Reimbursement arrangements (15) Loans or loan guarantees (15) Loans or loans with the second of the sources or membership or fundraising solicitations (15) X (16) X (15) X (16) Represented the following schedule. Column (15) should always show the fair market value of the goods, other assets, or services given by the reporting foundation. If the foundation received less than fair market value of the goods, other assets, or services given by the reporting foundation. If the foundation received less than fair market value in any transaction or sharing arrangement, show in column (16) the value of the goods, other assets, or services received. (a) Line no (b) Amount involved (c) Name of nonchariable exempt organization (d) Description of transfers, transactions, and sharing arrangements described in section 501(c) of the Code (other than section 501(c)(3)) or in section 527? \tag{ves X} No b If "Yes," complete the following schedule. (a) Name of organization (b) Type of organization (e) Description of relationship											
(5) Loans or loan guarantees (6) Performance of services or membership or fundraising solicitations c Sharing of facilities, equipment, mailing lists, other assets, or paid employees d if the answer to any of the above is "Yes," complete the following schedule. Column (b) should always show the fair market value of the goods, other assets, or services given by the reporting foundation if the foundation received less than fair market value in any transaction or sharing arrangement, show in column (d) the value of the goods, other assets, or services received. (a) Line no (b) Amount involved (c) Name of noncharitable exempt organization (d) Description of transfers, transactions, and sharing arrangements 2a Is the foundation directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described in section 501(c) of the Code (other than section 501(c)(3)) or in section 5277											
(6) Performance of services or membership or fundraising solicitations											
c Sharing of facilities, equipment, mailing lists, other assets, or paid employees	1	(5) Loa	ns or Ioan guarantee	es							
d If the answer to any of the above is "Yes," complete the following schedule. Column (b) should always show the fair market value in any transaction or sharing arrangement, show in column (d) the value of the goods, other assets, or services given by the reporting foundation. If the foundation received less than fair market value in any transaction or sharing arrangements, show in column (d) the value of the goods, other assets, or services received. (a) Line no (b) Amount involved (d) Name of noncharteble exempt organization (d) Description of transfers, transactions, and sharing arrangements (d) Description of transfers, transactions, and sharing arrange											
value of the goods, other assets, or services given by the reporting foundation. If the foundation received less than fair market value in any transaction or sharing arrangement, show in column (d) the value of the goods, other assets, or services received. [a] Line no [b] Amount involved [c] Name of nonchantable exempt organization [d] Description of transfers, transactions, and sharing arrangements [d] Description of transfers, transactions [d] Description											
value in any transaction or sharing arrangement, show in column (d) the value of the goods, other assets, or services received. (a) Line no (b) Amount involved (e) Name of noncharitable exempt organization (d) Description of transfers, transactions, and sharing arrangements (a) Line no (b) Amount involved (e) Name of noncharitable exempt organization (d) Description of transfers, transactions, and sharing arrangements (a) Line no (b) Amount involved (e) Name of noncharitable exempt organizations of the control of the cont											
Lal Line no (b) Amount involved (c) Name of nonchantable exempt organization (d) Description of transfers, transactions, and sharing arrangements 2a is the foundation directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described in section 501(c) of the Code (other than section 501(c)(3)) or in section 5277 Yes X No b (f "Yes," complete the following schedule. (a) Name of organization (b) Type of organization (c) Description of relationship Under parallels of perjury, I declars that I have exemined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete Deglaration programs to belief with the integral performance of the correct, and complete Deglaration programs to belief in the statements and to the best of my knowledge and belief, it is true, correct, and complete Deglaration programs to belief in the correct, and complete Deglaration programs to be an any knowledge and belief, it is true, correct, and complete Deglaration programs to be a signature of office or trubple Date Tatle							-				
2a Is the foundation directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described in section 501(c) of the Code (other than section 501(c)(3)) or in section 527?				1							
described in section 501(c) of the Code (other than section 501(c)(3)) or in section 527?	(4) (1)	10 110	(b) Amount involved	(c) Name of the	Official Rable exer	iipt organization	(d) Desi	cription of transfers, transactions, and sna	ing arran	igeme	nts
described in section 501(c) of the Code (other than section 501(c)(3)) or in section 527?		-									
described in section 501(c) of the Code (other than section 501(c)(3)) or in section 527?											
described in section 501(c) of the Code (other than section 501(c)(3)) or in section 527?											
described in section 501(c) of the Code (other than section 501(c)(3)) or in section 527?			···-								
described in section 501(c) of the Code (other than section 501(c)(3)) or in section 527?			<u> </u>		••-						
described in section 501(c) of the Code (other than section 501(c)(3)) or in section 527?									-		
described in section 501(c) of the Code (other than section 501(c)(3)) or in section 527?											
described in section 501(c) of the Code (other than section 501(c)(3)) or in section 527?											
described in section 501(c) of the Code (other than section 501(c)(3)) or in section 527?											
described in section 501(c) of the Code (other than section 501(c)(3)) or in section 527?											
described in section 501(c) of the Code (other than section 501(c)(3)) or in section 527?											
described in section 501(c) of the Code (other than section 501(c)(3)) or in section 527?											
described in section 501(c) of the Code (other than section 501(c)(3)) or in section 527?											
described in section 501(c) of the Code (other than section 501(c)(3)) or in section 527?											
described in section 501(c) of the Code (other than section 501(c)(3)) or in section 527?											
Lunder penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete Declaration of Preparer (other than taxpayer) is based on all information of which preparer has any knowledge Value Valu											_
(a) Name of organization (b) Type of organization (c) Description of relationship Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete Declaration of reparer (other than taxpayer) is based on all information of which preparer has any knowledge 10/10/2014					ther than sect	tion 501(c)(3)) or in section	n 527⁷ .	Ye	s 🔼	∐ No
Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge 10/10/2014	<u> </u>	If "Yes,									
Sign Here Signature of officer or truete Print/Type preparer's name JEFREY E. KUHLIN Firm's name New Yellow Signature Print/Type Preparer's name JEFREY E. KUHLIN Firm's name New Yellow SECRETARY Title SECRETARY Title May the IRS discuss this return with the preparer shown below (see instructions)? X ves No No No Preparer's signature Date Check if PTIN Firm's name New Yellow SECRETARY Title Date Check if PTIN Firm's name New KPMG LLP Firm's address 2020 N CENTRAL AVE, STE 700 PHOENIX, AZ 85004 Phone no 855-807-3423			(a) Name of organizatio	n	(b) T	ype of organizati	on	(c) Description of relation	ship		
Sign Here Signature of officer or truete Print/Type preparer's name JEFREY E. KUHLIN Firm's name New Yellow Signature Print/Type Preparer's name JEFREY E. KUHLIN Firm's name New Yellow SECRETARY Title SECRETARY Title May the IRS discuss this return with the preparer shown below (see instructions)? X ves No No No Preparer's signature Date Check if PTIN Firm's name New Yellow SECRETARY Title Date Check if PTIN Firm's name New KPMG LLP Firm's address 2020 N CENTRAL AVE, STE 700 PHOENIX, AZ 85004 Phone no 855-807-3423		-					-				
Sign Here Signature of officer or truete Print/Type preparer's name JEFREY E. KUHLIN Firm's name New Yellow Signature Print/Type Preparer's name JEFREY E. KUHLIN Firm's name New Yellow SECRETARY Title SECRETARY Title May the IRS discuss this return with the preparer shown below (see instructions)? X ves No No No Preparer's signature Date Check if PTIN Firm's name New Yellow SECRETARY Title Date Check if PTIN Firm's name New KPMG LLP Firm's address 2020 N CENTRAL AVE, STE 700 PHOENIX, AZ 85004 Phone no 855-807-3423											
Sign Here Signature of officer or truete Print/Type preparer's name JEFREY E. KUHLIN Firm's name New Yellow Signature Print/Type Preparer's name JEFREY E. KUHLIN Firm's name New Yellow SECRETARY Title SECRETARY Title May the IRS discuss this return with the preparer shown below (see instructions)? X ves No No No Preparer's signature Date Check if PTIN Firm's name New Yellow SECRETARY Title Date Check if PTIN Firm's name New KPMG LLP Firm's address 2020 N CENTRAL AVE, STE 700 PHOENIX, AZ 85004 Phone no 855-807-3423			· ·								
Sign Here Signature of officer or truete Print/Type preparer's name JEFREY E. KUHLIN Firm's name New Yellow Signature Print/Type Preparer's name JEFREY E. KUHLIN Firm's name New Yellow SECRETARY Title SECRETARY Title May the IRS discuss this return with the preparer shown below (see instructions)? X ves No No No Preparer's signature Date Check if PTIN Firm's name New Yellow SECRETARY Title Date Check if PTIN Firm's name New KPMG LLP Firm's address 2020 N CENTRAL AVE, STE 700 PHOENIX, AZ 85004 Phone no 855-807-3423								· · · · · · · · · · · · · · · · · · ·			
Sign Here Signature of officer or truete Print/Type preparer's name JEFREY E. KUHLIN Firm's name New Yellow Signature Print/Type Preparer's name JEFREY E. KUHLIN Firm's name New Yellow SECRETARY Title SECRETARY Title May the IRS discuss this return with the preparer shown below (see instructions)? X ves No No No Preparer's signature Date Check if PTIN Firm's name New Yellow SECRETARY Title Date Check if PTIN Firm's name New KPMG LLP Firm's address 2020 N CENTRAL AVE, STE 700 PHOENIX, AZ 85004 Phone no 855-807-3423		Hede	population of powers I desire	are that I have see	and this setime	aludina assa	ing oakedulee e '	etatements and to the book of		-1:	
Here Signature of officer or truebee Date Title with the preparer shown below (see instructions)? X Yes No Paid Preparer Use Only Firm's address ▶ 2020 N CENTRAL AVE, STE 700 PHOENIX, AZ 85004 Phone no 855-807-3423		correct	t, and complete Declaration o	preparer (other than to	axpayer) is based or	n all information of v	which preparer has a	any knowledge	ge and be	ener, it	is true,
Signature of officer or true lee Date Title HEZRON TIMOTHY LOPEZ	Sign		TIKY		110/	10/2014	CECD				
HEZRON TIMOTHY LOPEZ Paid Print/Type preparer's name JEFFREY E. KUHLIN Firm's name KPMG LLP Firm's address ► 2020 N CENTRAL AVE, STE 700 PHOENIX, AZ S504 Phone no 855-807-3423	Here	Sign	ature of officer or trictee			10/2014			· (1 6	
Paid Date Check If PTIN Preparer JEFFREY E. KUHLIN 10/10/2014 self-employed P00353001 Preparer Firm's name ► KPMG LLP Firm's EIN ► 13 - 5565207 Use Only Firm's address ► 2020 N CENTRAL AVE, STE 700 Phone no 855 - 807 - 3423		"	•	I.ODE7	Date		HUC	(see instructio	ns)/ A	Yes	No
Paid JEFFREY E. KUHLIN Eller 10/10/2014 self-employed P00353001 Preparer Firm's name ► KPMG LLP Firm's EIN ► 13-5565207 Use Only Firm's address ► 2020 N CENTRAL AVE STE 700 PHOENIX, AZ 85004 Phone no 855-807-3423		•			Preparer's s	signature		Date	PTIN		
Use Only Firm's name ► KPMG LLP Firm's EIN ► 13-5565207	Paid					711-5	26.00	Clieck "		53 N (11
Use Only Firm's address ► 2020 N CENTRAL AVE, STE 700 PHOENIX, AZ 85004 Phone no 855-807-3423	Prep	arer			- O	100 C	y yuruni				<u>) T</u>
PHOENIX, AZ 85004 Phone no 855-807-3423	-				PAT. AVE	STE 700		riim sein 🕨 13-	22022	<u> </u>	
		J,	1			O11 /00	85004	Phone so 855 - 8	07-34	122	
			<u> </u>				33301				(2013)

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

Schedule of Contributors

OMB No 1545-0047

Department of the Treasury Internal Revenue Service Name of the organization ➤ Attach to Form 990, Form 990-EZ, or Form 990-PF.

▶ Information about Schedule B (Form 990, 990-EZ, or 990-PF) and its instructions is at www irs gov/form990

Name of the organization		Employer identification number						
THE TOTAL TO THE		20 2002021						
JUBILEE FOUNDATION Organization type (check one)		38-3003821						
organization type (ondon only)								
Filers of:	Section:							
Form 990 or 990-EZ	501(c)() (enter number) organization							
	4947(a)(1) nonexempt charitable trust not treated as a private four	ndation						
	527 political organization							
Form 990-PF X 501(c)(3) exempt private foundation								
4947(a)(1) nonexempt charitable trust treated as a private foundation								
	501(c)(3) taxable private foundation							
Note. Only a section 501(c)(7), (instructions. General Rule	8), or (10) organization can check boxes for both the General Rule and a S	Special Rule. See						
X For an organization fili	ng Form 990, 990-EZ, or 990-PF that received, during the year, \$5,000 o e contributor. Complete Parts I and II	r more (ın money or						
Special Rules								
under sections 509(a)	organization filing Form 990 or 990-EZ that met the 33 1/3 % support to (1) and 170(b)(1)(A)(vi) and received from any one contributor, during the 00 or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h, or (ii) Form	year, a contribution of						
during the year, total o), (8), or (10) organization filing Form 990 or 990-EZ that received from an contributions of more than \$1,000 for use <i>exclusively</i> for religious, charital es, or the prevention of cruelty to children or animals. Complete Parts I, II,	ole, scientific, literary,						
during the year, contri not total to more than year for an <i>exclusively</i> applies to this organiza), (8), or (10) organization filing Form 990 or 990-EZ that received from all butions for use <i>exclusively</i> for religious, charitable, etc., purposes, but thes \$1,000. If this box is checked, enter here the total contributions that were religious, charitable, etc., purpose. Do not complete any of the parts unless ation because it received <i>nonexclusively</i> religious, charitable, etc., contributions.	se contributions did e received during the ss the General Rule itions of \$5,000 or						
990-EZ, or 990-PF), but it must	not covered by the General Rule and/or the Special Rules does not file Sc answer "No" on Part IV, line 2, of its Form 990; or check the box on line H rtify that it does not meet the filing requirements of Schedule B (Form 990	of its Form 990-EZ or on its						

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

Schedule B (Form 990, 990-EZ, or 990-PF) (2013)

Name of	orga	anization	
TTRIIT.	EE	FOUNDATION	J

Employer identification number 38-3003821

art I	Contributors	(see instructions).	Use duplicate	copies of Par	rt I if additional	space is needed.
-------	--------------	---------------------	---------------	---------------	--------------------	------------------

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	HERMAN MILLER INC 855 EAST MAIN AVENUE ZEELAND, MI 49464	\$401,824.	Person X Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
			Person Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions)
(a) <u>No.</u>	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		 \$	Person Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions)
(a) N o.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions)
JSA		Schedule E	(Form 990, 990-EZ, or 990-PF) (2013)

STATEMENT

FORM 990PF, PART II - CORPORATE BONDS

DESCRIPTION

VARIOUS CORPORATE BONDS

ENDING BOOK VALUE

ENDING FMV

1,233,292.

1,222,624.

1,233,292.

TOTALS

FORM 990PF, PART VIII - LIST OF OFFICERS, DIRECTORS, AND TRUSTEES ______

OFFICER NAME:

MICHAEL A VOLKEMA

ADDRESS:

PO BOX 75000

DETROIT, MI 48275-3462

TITLE:

PRESIDENT

AVERAGE HOURS PER WEEK DEVOTED TO POSITION: 2

OFFICER NAME:

JAMES R KACKLEY

ADDRESS:

PO BOX 75000

DETROIT, MI 48275-3462

TITLE:

TREASURER

AVERAGE HOURS PER WEEK DEVOTED TO POSITION: 2

OFFICER NAME:

JEFFERY M STUTZ

ADDRESS:

PO BOX 75000

DETROIT, MI 48275-3462

TITLE:

ASSISTANT TREASURER

AVERAGE HOURS PER WEEK DEVOTED TO POSITION: 2

OFFICER NAME:

JAMES E CHRISTENSON

ADDRESS:

PO BOX 75000

DETROIT, MI 48275-3462

TITLE:

SECRETARY

AVERAGE HOURS PER WEEK DEVOTED TO POSITION: 2

2

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

OFFICER NAME:

ELIZABETH A NICKELS

ADDRESS:

PO BOX 75000

DETROIT, MI 48275-3462

TITLE:

ASSISTANT SECRETARY

AVERAGE HOURS PER WEEK DEVOTED TO POSITION: 2

OFFICER NAME:

MARY VERMEER ANDRINGA

ADDRESS:

PO BOX 75000

DETROIT, MI 48275-3462

TITLE:

DIRECTOR

AVERAGE HOURS PER WEEK DEVOTED TO POSITION: 2

OFFICER NAME:

DOUGLAS D FRENCH

ADDRESS:

PO BOX 75000

DETROIT, MI 48275-3462

TITLE:

DIRECTOR

AVERAGE HOURS PER WEEK DEVOTED TO POSITION: 2

OFFICER NAME:

BRIAN C WALKER

ADDRESS:

PO BOX 75000

DETROIT, MI 48275-3462

TITLE:

DIRECTOR

AVERAGE HOURS PER WEEK DEVOTED TO POSITION: 2

SCHEDULE D (Form 1041)

Department of the Treasury Internal Revenue Service Name of estate or trust

Capital Gains and Losses

► Attach to Form 1041, Form 5227, or Form 990-T

► Use Form 8949 to list your transactions for lines 1b, 2, 3, 8b, 9 and 10.

▶ Information about Schedule D and its separate instructions is at www.irs.gov/form1041

OMB No 1545-0092

2013

Employer identification number

JUBILEE FOUNDATION			38-300	382]	L
Note: Form 5227 filers need to complete only Parts I and II.					
Part I Short-Term Capital Gains and Losses - Asset	ts Held One Year	or Less			
See instructions for how to figure the amounts to enter on the lines below. This form may be easier to complete if you round off cents	(d) Proceeds (sales price)	(e) Cost (or other basis)	(g) Adjustments to gain or loss fr Form(s) 8949, Pa	om	(h) Gain or (loss) Subtract column (e) from column (d) and combine the result with
to whole dollars.	(sales price)	(or other basis)	line 2, column		column (g)
1a Totals for all short-term transactions reported on Form 1099-B for which basis was reported to the IRS and for which you have no adjustments (see instructions). However, if you choose to report all these transactions on Form 8949, leave this line blank and go to line 1b					
1b Totals for all transactions reported on Form(s) 8949 with Box A checked			-		
2 Totals for all transactions reported on Form(s) 8949 with Box B checked					
3 Totals for all transactions reported on Form(s) 8949 with Box C checked					
4 Short-term capital gain or (loss) from Forms 4684, 625	2, 6781, and 8824			4	
5 Net short-term gain or (loss) from partnerships, S corpo	rations and other e	etatos or trusts		5	
6 Short-term capital loss carryover. Enter the amoun Carryover Worksheet					· · · · · · · · · · · · · · · · · · ·
7 Net short-term capital gain or (loss). Combine lines				6	, ,
Part II Long-Term Capital Gains and Losses - Asset	s Held More Tha	n One Year	· · · · · · •	7	L - ·
See instructions for how to figure the amounts to enter on			(g)		(h) Gain or (loss)
the lines below.	(d) Proceeds	(e) Cost	Adjustments to gain or loss fi		Subtract column (e) from column (d) and
This form may be easier to complete if you round off cents to whole dollars.	(sales price)	(or other basis)	Form(s) 8949, Pa line 2, column		combine the result with column (g)
8a Totals for all long-term transactions reported on Form 1099-B for which basis was reported to the IRS and for which you have no adjustments (see instructions). However, if you choose to report all these transactions on Form 8949, leave this line blank and go to line 8b					
8b Totals for all transactions reported on Form(s) 8949 with Box D checked					
9 Totals for all transactions reported on Form(s) 8949 with Box E checked					
10 Totals for all transactions reported on Form(s) 8949 with Box F checked	700,000.	727,775.			-27,775
11 Long-term capital gain or (loss) from Forms 2439, 468	4, 6252, 6781, and	18824		11	
12 Net long-term gain or (loss) from partnerships, S corpor	rations, and other e	states or trusts		12	
13 Capital gain distributions				13	
14 Gain from Form 4797, Part I				14	
15 Long-term capital loss carryover Enter the amount Carryover Worksheet				15	()
16 Net long-term capital gain or (loss). Combine lines line 18a, column (3) on the back				16	-27,775
For Paperwork Reduction Act Notice, see the Instructions for Form					D (Form 1041) 2013

JUITO	0.000 (1.01111 10.4.1) 2.010					Page
<u>P</u> ar	Summary of Parts I and II		(1) Beneficiaries'	1 ' '		(3) Total
	Caution: Read the instructions before completing this p	$\overline{}$	(see instr)	or trus	t's	(0) 10(0)
17	Net short-term gain or (loss)	17				
18	Net long-term gain or (loss):	1				
a	Total for year	18a				-27,775
	Unrecaptured section 1250 gain (see line 18 of the wrksht.)	18b				
C	28% rate gain	18c				
	Total net gain or (loss). Combine lines 17 and 18a ▶	19				-27,775
gains	e: If line 19, column (3), is a net gain, enter the gain on Form 1041, line 4 s, go to Part V, and do not complete Part IV. If line 19, column (3), is a i	l (or Foi net loss	rm 990-T, Part I, line complete Part IV	e 4a) If lines 18 and the Capital	8a and Loss C	19, column (2), are n arryover Worksheet
nece	ssary		, complete l'alt l'	and the capital	2000 0	
Par	t IV Capital Loss Limitation					
20	Enter here and enter as a (loss) on Form 1041, line 4 (or Form 990-T, F	Part I, lır	ne 4c, if a trust), the	smaller of		
a Note	The loss on line 19, column (3) or b \$3,000				20 (3,000
Loss	Carryover Worksheet in the instructions to figure your capital loss carryover	page	i, line 22 (or Form :	990-1, line 34),	is a ios	s, complete the Capit
Par		es		 .		
Forn	1041 filers. Complete this part only if both lines 18a and 19 in co	lumn (:	2) are gains, or an	amount is en	tered II	n Part I or Part II an
	e is an entry on Form 1041, line 2b(2), and Form 1041, line 22, is mo					
	ion: Skip this part and complete the Schedule D Tax Worksheet in the	ınstruc	tions if			
	ther line 18b, col. (2) or line 18c, col. (2) is more than zero, or					
	oth Form 1041, line 2b(1), and Form 4952, line 4g are more than zero.					
of E	n 990-T trusts. Complete this part only if both lines 18a and 19 a	are gai	ns, or qualified di	vidends are in	cluded	in income in Part
if er	orm 990-T, and Form 990-T, line 34, is more than zero. Skip this part her line 18b, col. (2) or line 18c, col. (2) is more than zero.	and co	omplete the Sched	ule D lax Wo	orksnee	it in the instruction
21	Enter taxable income from Form 1041, line 22 (or Form 990-T, line 3	34)	. 21			
22	Enter the smaller of line 18a or 19 in column (2)					
	but not less than zero					
23	Enter the estate's or trust's qualified dividends		1 1			
	from Form 1041, line 2b(2) (or enter the qualified					
	dividends included in income in Part I of Form 990-T) 23					
24	Add lines 22 and 23					
25	If the estate or trust is filing Form 4952, enter the					
	amount from line 4g; otherwise, enter -0 ▶ 25					
26	Subtract line 25 from line 24. If zero or less, enter -0		. 26			
27	Subtract line 26 from line 21. If zero or less, enter -0-	•	·			
28	Enter the smaller of the amount on line 21 or \$2,450		·			
29	Enter the smaller of the amount on line 27 or line 28					
30	Subtract line 29 from line 28. If zero or less, enter -0 This amount is			▶ _	30	
31	Enter the smaller of line 21 or line 26					
32	Subtract line 30 from line 26		. 32			ı
33	Enter the smaller of line 21 or \$11,950		. 33			
34	Add lines 27 and 30		. 34			
35	Subtract line 34 from line 33. If zero or less, enter -0-					
36	Enter the smaller of line 32 or line 35					
37	Multiply line 36 by 15%			> _	37	
38	Enter the amount from line 31					
39	Add lines 30 and 36		. 39			
40	Subtract line 39 from line 38. If zero or less, enter -0					
41	Multiply line 40 by 20%		1 1	· · · · · • <u>-</u>	41	
42	Figure the tax on the amount on line 27. Use the 2013 Tax Rate Schedule for					
	and Trusts (see the Schedule G instructions in the instructions for Form 1041)					
43	Add lines 37, 41, and 42					
44	Figure the tax on the amount on line 21 Use the 2013 Tax Rate Schedule for					
	and Trusts (see the Schedule G instructions in the instructions for Form 1041)					
45	Tax on all taxable income. Enter the smaller of line 43 or line 44	here a	nd on Form 1041	, Schedule		

Name(s) shown on return (Name and SSN or taxpayer identification no not required if shown on other side.) Social security number or taxpayer identification number JUBILEE FOUNDATION 38-3003821

Most brokers issue their own substitute statement instead of using Form 1099-B. They also may provide basis information (usually your cost) to you on the statement even if it is not reported to the IRS. Before you check Box D, E, or F below, determine whether you received any statement(s) and, if so, the transactions for which basis was reported to the IRS Brokers are required to report basis to the IRS for most stock you bought in 2011 or later

Long-Term. Transactions involving capital assets you held more than one year are long term. For short-term transactions, see page 1.

Note. You may aggregate all long-term transactions reported on Form(s) 1099-B showing basis was reported to the IRS and for which no adjustments or codes are required. Enter the total directly on Schedule D, line 8a; you are not required to report these transactions on Form 8949 (see instructions).

You must check Box D, E, or F below. Check only one box. If more than one box applies for your long-term transactions, complete a separate Form 8949, page 2, for each applicable box. If you have more long-term transactions than will fit on this page for one or more of the boxes, complete as many forms with the same box checked as you need

- (D) Long-term transactions reported on Form(s) 1099-B showing basis was reported to the IRS (see Note above)
- (E) Long-term transactions reported on Form(s) 1099-B showing basis was not reported to the IRS
- (F) Long-term transactions not reported to you on Form 1099-B

(a) Description of property (Example 100 sh XYZ Co)	(b) Date acquired	(c) Date sold or disposed	(d) Proceeds (sales price)	(e) Cost or other basis See the Note below and	Adjustment, if any, to gain or loss If you enter an amount in column (g), enter a code in column (f) See the separate instructions		(h) Gain or (loss). Subtract column (e) from column (d) and
(Example 100 sil X12 co)	(Mo , day, yr)	(Mo , day, yr)	(see instructions)	see Column (e) in the separate instructions	(f) Code(s) from instructions	(g) Amount of adjustment	combine the result with column (g)
100000. DEERE JOHN CAP COR 09/09/2013	01/30/2012	09/09/2013	100,000.00	107,333.00			-7,333.00
100000. DELL INC NT 1.4% 0	01/30/2012	09/10/2013	100,000.00	101,333.00			-1,333.00
100000. HEWLETT PACKARD CO 1.25% 09/13	01/30/2012	09/13/2013	100,000.00	100,583.00			-583.00
100000 BERKSHIRE HATHAWAY 10/15/2013		10/15/2013	100,000.00	107,393.00			-7,393.00
100000. GOLDMAN SACHS GROU 10/15/2013	01/30/2012		100,000.00	_ 105,183.00			-5,183.00
100000. WELLS FARGO COMPAN 10/16/2013	01/30/2012	10/16/2013	100,000 00	105,950.00			-5,950.00
100000. CATERPILLAR FINL S TRANCHE # TR 00834 1.65	01/30/2012	04/01/2014	100,000.00	100,000.00			
2 Totals. Add the amounts in c (subtract negative amounts), include on your Schedule D, checked), line 9 (if Box E abo (if Box F above is checked)	Enter each tota line 8b (If Box Dove is checked),	here and above is	700,000	727,775.			-27,775.

Note. If you checked Box D above but the basis reported to the IRS was incorrect, enter in column (e) the basis as reported to the IRS, and enter an adjustment in column (g) to correct the basis. See Column (g) in the separate instructions for how to figure the amount of the adjustment

Form 8949 (2013)

Ε

FRESHWATER FUTURE

NO MORE SIDELINES

MARCH OF DIMES

AMERICAN RED CROSS

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CIRCLE URBAN MINISTRIES

AQUINAS COLLEGE

SALVATION ARMY

HOPE WORLDWIDE LTD

SITE LAB INC
TOTAL GRANTS

i			
i			
i			

\$1 844 00	\$1 000 00	\$5 000 00	\$5 000 00	\$2,110,049.76
Support	Support	Support	Support	
Exempt	Exempt	Exempt	Exempt	
None	None	None	None	
49546	49441	55425	49503	
Ξ	₹	Z	Σ	
GRAND RAPIDS	MUSKEGON	MINNEAPOLIS	GRAND RAPIDS	
3351 CLAYSTONE SE SUITE G20	1691 PECK STREET	1550 AMERICAN BOULEVARD EAST SUITE 155	238 MADISON SE	