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990-PF

Department of the Treasury Internal Revenue Service

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. ▶ Information about Form 990-PF and its separate instructions is at www.irs.gov/form990pf. OMB No 1545-0052

Open to Public Inspection

For calendar year 2013 or tax year beginning 09-30 , 2013, and ending 09-28 Name of foundation A Employer identification number MERITOR, INC. TRUST (FKA ARVINMERITOR, INC. TRUST) 52-2089611 Number and street (or P O box number if mail is not delivered to street address) Room/suite Telephone number (see instructions) 2135 W. MAPLE ROAD 248-435-1000 City or town, state or province, country, and ZIP or foreign postal code If exemption application is pending, check here • • TROY, MI 48084 G Check all that apply Initial return Initial return of a former public charity D 1. Foreign organizations, check here Final return Amended return 2 Foreign organizations meeting the 85% test, check here and attach Address change Name change computation H Check type of organization: Section 501(c)(3) exempt private foundation If private foundation status was terminated Section 4947(a)(1) nonexempt charitable trust Other taxable private foundation under section 507(b)(1)(A), check here . J Accounting method | X | Cash | Accrual I Fair market value of all assets at If the foundation is in a 60-month termination end of year (from Part II, col. (c), line Other (specify) under section 507(b)(1)(B), check here . > (Part I, column (d) must be on cash basis) *16)* ▶ \$ 262,591.00 (d) Disbursements Part I. Analysis of Revenue and Expenses (The (a) Revenue and (b) Net investment (c) Adjusted net for charitable total of amounts in columns (b), (c), and (d) expenses per income may not necessarily equal the amounts in ıncome purposes books column (a) (see instructions)) (cash basis only) 981,649.00 Charles I if the foundation is **not** required to 3 Interest on savings and temporary cash investments Dividends and interest from securities 15.15 15.15 15.15 4 5a Gross rents **b** Net rental income or (loss) Net gain or (loss) from sale of assets not on line 10 Gross sales price for all assets on line 6a Capital gain net income (from Part IV, line 2). Net short-term capital gain Income modifications · · · Gross sales less returns and allowances · · · · b Less Cost of goods sold . c Gross profit or (loss) (attach schedule) Other income (attach schedule) 11 981,664.15 15.15 15.15 Total. Add lines 1 through 11. Compensation of officers, directors, trustees, etc 14 Other employee salaries and wages Expenses 15 Pension plans, employee benefits 16a Legal fees (attach schedule) b Accounting fees (attach schedule) **Administrative** c Other professional fees (attach schedule). . 0 17 18 Taxes (attach schedule) (see instructions) 19 Depreciation (attach schedule) and depletion! 20 21 Travel, conferences, and meetings 22 23 Other expenses (attach schedule) 24 Total operating and administrative expenses. Add lines 13 through 23 Contributions, gifts, grants paid 981,649.00 981,649.00 981,649.00 26 981,649.00 Total expenses and disbursements Add lines 24 and 25 Subtract line 26 from line 12 <u>15.</u>15 a Excess of revenue over expenses and disbursements . . . 15.15 b Net investment income (if negative, enter -0-) 15.15 c Adjusted net income (if negative, enter -0-). .

JSA For Paperwork Reduction Act Notice, see instructions. 3E1410 1 000

Б	art II	Polonee Sheets	Attached schedules and amounts in the	Beginning of year	End o	of year
	art II	Balance Sheets	description column should be for end-of-year amounts only (See instructions)	(a) Book Value	(b) Book Value	(c) Fair Market Value
7	` 1	Cash - non-interest-bean	ing	262,575.00	262,591.00	262,591.00
ŀ			cash investments			
		-				
		Less allowance for dou	btful accounts ▶			
	•	Less allowance for dou	btful accounts ▶			
-				· · · · ·	<u>-</u> .	
			officers, directors, trustees, and other			
			tach schedule) (see instructions)			
			receivable (attach schedule)			
			btful accounts			
S						
ssets			se	- ·	· · · · · · · · · · · · · · · · · · ·	
Asi			_			
			te government obligations (attach schedule)			
			e stock (attach schedule)		 	
	11 C	Investments - land, building	e bonds (attach schedule)			
		and equipment basis Less accumulated deprecia				
		(attach schedule)	·			
	12	Investments - mortgage	loans			
	13 14	Land, buildings, and	ach schedule)			
	•	equipment basis Less accumulated deprecia	ation b			
	:	(attach schedule)				
			-)			
	16		completed by all filers - see the	0.50 5.75 0.0		
_			page 1, item I)	262,575.00	262,591.00	262,591.00
	17		accrued expenses			
	18					
ies	19					
ij	20		ors, trustees, and other disqualified persons			
Liabilities	21		otes payable (attach schedule)	··· -		
_	22	Other liabilities (describe	e ▶)			
_	23		es 17 through 22)			
			low SFAS 117, check here . ▶			
es		and complete lines	24 through 26 and lines 30 and 31.			
ñ	24	Unrestricted				
ख्र	25	Temporarily restricted				
δE	24 25 26 27 28 29 30	-	· · · · · · · · · · · · · · · · · · ·			
들			not follow SFAS 117, ▶ 📖			
눔			plete lines 27 through 31.			
ts (27	Capital stock, trust prin	cipal, or current funds	262,575.00	262,591.00	
Se	28	Paid-in or capital surplus, o	r land, bldg, and equipment fund			
Ř	29		ulated income, endowment, or other funds			
Ę	30		d balances (see instructions)	262,575.00	262,591.00	
_	31		net assets/fund balances (see			
		instructions)	<u> </u>	262,575.00	<u>262,591.00</u>	
			anges in Net Assets or Fund			
1			balances at beginning of year - Part	, ,		
			ed on prior year's return)			262,575.00
2		er amount from Part I				15.15
3	Oth	er increases not inclu	ded in line 2 (itemize) ▶		3_	
4	Add	lines 1, 2, and 3 $_{\dots}$			<u>4</u>	262,590.15
5		reases not included ii			5	
6	Tota	al net assets or fund b	palances at end of year (line 4 minus	line 5) - Part II, column (b), line 30 6	262,590.15
						Form QQ0-DE (2012)

Part IV Capital Gains	and Losses for Tax on Inve	estment Income			
• •	d describe the kind(s) of property sold (crick warehouse, or common stock, 200	•	(b) How acquired P - Purchase	(c) Date acquired	(d) Date sold (mo , day, yr)
· · · · · · · · · · · · · · · · · · ·	TOR WATEHOUSE, OF COMMON SLOCK, 200	SHS WILC CU /	D - Donation	(mo , day, yr)	(mo, day, yr)
<u>1a</u>				 	ļ
_b				 	
<u>c</u>				 	
_d					
<u>e</u>				<u> </u>	<u> </u>
(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	
_a					
<u>c</u>					
d					
<u>e</u>					
Complete only for assets	showing gain in column (h) and owner	d by the foundation on 12/31/69	(I)	Gains (Col (h) g	ain minus
(i) F M.V as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col (ı) over col (ֈ), ıf any		(k), but not less to Losses (from co	than -0-) or
a					
b					
c					
d					
e	_		 		
6	ø If	gaın, also enter ın Part I, line 7			
2 Capital gain net income or		(loss), enter -0- in Part I, line 7	2		
2. Not short term conital gain	•	• •	-		
	or (loss) as defined in sections 12				
	t I, line 8, column (c) (see insti				
	 		3		
		duced Tax on Net Investment I			
(For optional use by domestic	c private foundations subject to the	e section 4940(a) tax on net invest	ment inco	me)	
If section 4940(d)(2) applies,		outable amount of any year in the b	ase nerio	42 <u> </u>	Yes X No
	not qualify under section 4940(e).		ase peno	u,	_ res No
1 Enter the appropriate amo	ount in each column for each year	; see the instructions before making	any entr	ies.	<u>. – </u>
(a)	(b)	(c)		(d)	
Base period years Calendar year (or tax year beginning in)	Adjusted qualifying distributions	Net value of nonchantable-use assets		Distribution ration (col. (b) divided by	
2012	348,720.00	261,043.76		(== (= / = / = = = = - /	1.3359
2011	336,601.00				1.3256
2010	289,229.00				1.1702
2009	298,360.00				1.2040
2008	320,888.00			-	1.3472
	320,000.00	230,137.00			1.51/2
2 Total of line 1 column (d)			2		6 2000
2 Average distribution ratio	for the Course base marged about	Abo total on long O by E. on by the	 		6.3829
	for the 5-year base period - divide		_		
number of years the found	dation has been in existence if less	s tnan 5 years	3		1.2766
4 Enter the net value of non	charitable-use assets for 2013 fro	m Part X, line 5	4	2	55,637.05
5 Multiply line 4 by line 3			5	3	26,346.26
_					
6 Enter 1% of net investmen	nt income (1% of Part I, line 27b)		_6_		0.15
7 Add lines 5 and 6			7	3	26,346.41
					
8 Enter qualifying distribution	ons from Part XII. line 4		8	a	81.649 00
If line 8 is equal to or gre	eater than line 7. check the box	n Part VI, line 1b, and complete t	hat part	using a 1% ta	x rate See the
Part VI instructions.		2.1.1., 12, 2.1.d 2011pioto 1	puit	g & 170 ta	
JSA 351430 1 000				For	m 990-PF (2013)

Par	Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 - see i	nstru	ctions	<u>s)</u>
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		1.	00
	here and enter 1% of Part I, line 27b			
	All other domestic foundations enter 2% of line 27b Exempt foreign organizations enter 4% of J 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			
	Add lines 1 and 2		1.	00
	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-)			
5	Tax based on investment income. Subtract line 4 from line 3 If zero or less, enter -0		1.	00
6	Credits/Payments			
а	2013 estimated tax payments and 2012 overpayment credited to 2013 6a 3.00			
b	Exempt foreign organizations - tax withheld at source			
C	Tax paid with application for extension of time to file (Form 8868) 6c			
d	Backup withholding erroneously withheld			
7	Total credits and payments Add lines 6a through 6d		3.	.00
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 ▶ 9			
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid		2.	.00
11	Enter the amount of line 10 to be Credited to 2014 estimated tax ▶ 2.00 Refunded ▶ 11			
	t VII-A Statements Regarding Activities		1	
1a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate	\vdash	Yes	No
_	or intervene in any political campaign?	1a		<u> </u>
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see Instructions for the	۱ ا		v
	definition)?	1b		<u> </u>
	distributed by the foundation in connection with the activities.		ŀ	
_	Did the foundation file Form 1120-POL for this year?	1 _c	1	Х
	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year			
_	(1) On the foundation \triangleright \$			
е	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on	1		
	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	-	X
	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	4a_		X
b	If "Yes," has it filed a tax return on Form 990-T for this year?	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 language in the governing instrument, or			
	• By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state law 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)	1		
Ja	Enter the states to which the foundation reports of with which it is registered (see instructions)			
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? If "No," attach explanation.	8ь		х
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		Х
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and			
	addresses	10	Х	

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

4a Did the foundation invest during the year any amount in a manner that would jeopardize its chantable purposes?

b Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its

charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2013? | 4b | X

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4a

Х

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

3 Five highest-paid independent contractors for professional services (see inst	ructions). If none, enter "NONE	."
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE		

otal number of others receiving over \$50,000 for professional services	· · · · · · · · · · · · · · · · · · ·	
Part IX-A Summary of Direct Charitable Activities		
· · · · · · · · · · · · · · · · · · ·		
List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical organizations and other beneficianes served, conferences convened, research papers produced, etc	I information such as the number of	Expenses
1 DONATE AND APPLY ITS FUNDS EXCLUSIVELY FOR CHARITABLE	RELIGIOUS	
SCIENTIFIC, LITERACY, AND EDUCATIONAL PURPOSES.		
2		
	<u></u>	
3		
4		
Part IX-B Summary of Program-Related Investments (see instructions)		
Describe the two largest program-related investments made by the foundation during the tax year on lines 1 a	and 2	Amount
1 <u>N/A</u>		
2		
All other program-related investments See instructions		
3		
Total Add lines 1 through 3		ı — — — — — — — — — — — — — — — — — — —

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Part	 Minimum Investment Return (All domestic foundations must complete this part. Foreignsee instructions.) 	gn foundat	ions,
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	259,530.00
b	Average of monthly cash balances	1b	
С	Fair market value of all other assets (see instructions)	1c	
d	Total (add lines 1a, b, and c)	1d	259,530.00
е	Reduction claimed for blockage or other factors reported on lines 1a and		
	1c (attach detailed explanation) 1e		
2	Acquisition indebtedness applicable to line 1 assets	2	
3	Subtract line 2 from line 1d	3	259,530.00
4	Subtract line 2 from line 1d Cash deemed held for charitable activities. Enter 1 1/2 % of line 3 (for greater amount, see		
		4	3,892.95
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	255,637.05
6	Minimum investment return. Enter 5% of line 5	6	12,781.85
Part	XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foun and certain foreign organizations check here ▶ and do not complete this part.)	dations	
1	Minimum investment return from Part X, line 6	1	12,781.85
2 a	Tax on investment income for 2013 from Part VI, line 5 2a 1.00		
b	Income tax for 2013. (This does not include the tax from Part VI) 2b		
С	Add lines 2a and 2b	2c	1.00
3	Distributable amount before adjustments Subtract line 2c from line 1	3	12,780.85
4	Recoveries of amounts treated as qualifying distributions	4	<u> </u>
5	Add lines 3 and 4	5	12,780.85
6	Add lines 3 and 4 Deduction from distributable amount (see instructions)	6	<u> </u>
7	Distributable amount as adjusted Subtract line 6 from line 5 Enter here and on Part XIII,		
	line 1	7	12,780.85
Part	XII Qualifying Distributions (see instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes		
а	Expenses, contributions, gifts, etc - total from Part I, column (d), line 26	1a	981,649.00
b	Program-related investments - total from Part IX-B	1b	
2	Program-related investments - total from Part IX-B Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc.,		
		2	
3	Amounts set aside for specific charitable projects that satisfy the		
а	Suitability test (prior IRS approval required)	3a	
b	Cash distribution test (attach the required schedule)	3b	
4	Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4	4	981,649.00
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income	- 	3027013.00
-	Enter 1% of Part I, line 27b (see instructions)	5	
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	981,649.00
•	Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when co		
	qualifies for the section 4940(e) reduction of tax in those years	a.Jaidinig (oor the realitation

Pá	rt XIII Undistributed Income (see instru	uctions)			
		(a)	(b)	(c)	(d)
1	Distributable amount for 2013 from Part XI,	Corpus	Years prior to 2012	2012	2013
	line 7				12,780.85
2	Undistributed income, if any, as of the end of 2013				
	Enter amount for 2012 only				
b	Total for pnor years 20,20,20			·	· · ·
3	Excess distributions carryover, if any, to 2013				
a	From 2008				
b	From 2009				
C	From 2010				
a	From 2011				
	From 2012				
4					
•	line 4 ▶ \$ 981, 649.00				
а	Applied to 2012, but not more than line 2a				
	Applied to undistributed income of prior years				
•	(Election required - see instructions)				
С	Treated as distributions out of corpus (Election				
	required - see instructions)				
	Applied to 2013 distributable amount				
	Remaining amount distributed out of corpus				
5	Excess distributions carryover applied to 2013 (If an amount appears in column (d), the same		-		
	amount must be shown in column (a))				
6	Enter the net total of each column as indicated below:				
9	Corpus Add lines 3f, 4c, and 4e Subtract line 5				
	Prior years' undistributed income Subtract	· - ···			
D	line 4b from line 2b				
C	Enter the amount of prior years' undistributed				
	income for which a notice of deficiency has been issued, or on which the section 4942(a)				
	tax has been previously assessed				
d	Subtract line 6c from line 6b Taxable				
_	amount - see instructions				
е	Undistributed income for 2012 Subtract line 4a from line 2a Taxable amount - see				
	Instructions				
f	Undistributed income for 2013 Subtract lines				
	4d and 5 from line 1 This amount must be distributed in 2014				12,780.85
7	Amounts treated as distributions out of corpus				
•	to satisfy requirements imposed by section				
	170(b)(1)(F) or 4942(g)(3) (see instructions)				
8	Excess distributions carryover from 2008 not				
	applied on line 5 or line 7 (see instructions)				
9	Excess distributions carryover to 2014.				
	Subtract lines 7 and 8 from line 6a				
	Analysis of line 9				
	Excess from 2009				
	Excess from 2010				
	Excess from 2011 Excess from 2012				
	Excess from 2012				
					1

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Pa	rt XIV Private Ope	erating Foundations (see instructions and	Part VII-A, question	9)		
	If the foundation has r foundation, and the ruling				ng •		
	Check box to indicate who				4942(j))(3) or	4942(j)(5)
	ſ	Tax year	<u> </u>	Prior 3 years			
2 a	Enter the lesser of the ad- justed net income from Part	(a) 2013	(b) 2012	(c) 2011	(d) 2010	(6	e) Total
	I or the minimum investment	(4) 2013	(0)2012	(0) 2011	(4) 10 10		
	return from Part X for each	15 15	22 47	45.05	60.00		150 67
	year listed	15.15	22.47	45.05	68.00	 	150.67
ь	85% of line 2a	12.88	19.10	38.29	57.80	<u> </u>	128.07
C	Qualifying distributions from Part						
	XII, line 4 for each year listed .	981,649.00	348,720.00	336,601.00	289,229.00	1,95	6,199.00
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	981,649.00	348,720.00	336,601.00	289,229.00	1 95	6,199.00
3	2d from line 2c Complete 3a, b, or c for the	901,049.00	340,720.00	330,001.00	203,223.00	1, 55	0,100.00
•	alternative test relied upon						
а	"Assets" alternative test - enter				050 450 00		
	(1) Value of all assets	262,591.00	262,575.00	258,203.23	258,158.00	1,04	1,527.23
	(2) Value of assets qualifying under section						
	4942(j)(3)(B)(i)	262,591.00	262,575.00	258,203.23	258,158.00	1,04	1,527.23
b	"Endowment" alternative test-		,			1	
	enter 2/3 of minimum invest-		İ				
	ment return shown in Part X,						
	"Support" alternative test - enter			_			
·	(1) Total support other than						
	gross investment income					1	
	(interest, dividends, rents,						
	payments on securities loans (section 512(a)(5)),		i				
	or royalties)	ļ				<u> </u>	
	(2) Support from general public and 5 or more						
	exempt organizations as						
	provided in section 4942 (j)(3)(B)(iii)						
	(3) Largest amount of sup-						
	port from an exempt						
	organization						
Pa	rt XV Supplemer	ntary Information (C during the year - se		only if the foundar	tion had \$5,000	or mor	e in assets
_	Information Regarding	<u></u>				-	
	Information Regarding List any managers of			than 20% of the total	contributions roccu	vad by th	ae foundation
а	LIST any managers of any	the foundation who have tax year (but only if the	ave contributed more	uiaii 2% oi tile total ore than \$5 000) (See	section 507(d)(2))	veu by tr	ie iouiluation
	•	tan year (but only if the	, nave continuated in	οιο τιατι ψο,οοο <i>)</i> (σ εε	3333331 337 (4)(2)		
NO		the formulation of	100/	the steel of a second	nation (or an agree)	u lossa -	artion of the
ıb	List any managers of ownership of a partner	the foundation who or ship or other entity) of v				y large p	ortion of the

NONE

2 Information Regarding Contribution, Grant, Gift, Loan, Scholarship, etc., Programs:

Check here $\triangleright X$ if the foundation only makes contributions to preselected charitable organizations and does not accept unsolicited requests for funds. If the foundation makes gifts, grants, etc (see instructions) to individuals or organizations under other conditions, complete items 2a, b, c, and d

a The name, address, and telephone number or e-mail address of the person to whom applications should be addressed

KRISTA SOHM, VP, COMMUNICATIONS, 2135 W. MAPLE RD., TROY, MI 48084

b The form in which applications should be submitted and information and materials they should include

NAME OF CHARITABLE ORGANIZATION, CHARITABLE PURPOSE, AND AMOUNT REQUESTED

c Any submission deadlines:

REQUEST MUST BE SUBMITTED BEFORE AUGUST OF THE PRIOR FISCAL YEAR

d Any restrictions or limitations on awards, such as by geographical areas, charitable fields, kinds of institutions, or other factors:

Part XV Supplementary Information (continued)								
3 Grants and Contributions Paid Duri	ng the Year or Appr	oved for F	uture Payment					
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of	Purpose of grant or contribution	Amount				
Name and address (home or business)	or substantial contributor	recipient	contribution					
a Paid during the year								
SEE ATTACHED STATEMENT				981,649.00				
			į					
				•				
	•		1					
		1						
Total			▶ 3a	981,649.00				
b Approved for future payment	-							
		1						
	<u></u>							
Total			▶ 3b					

er gross	amounts unless otherwise indicated	Unrela	ated business income	Excluded by	section 512, 513, or 514	(e)
	service revenue	(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	Related or exemp function income (See instructions
-						(See instructions
				1		
c						
. —						
			,	-		
e f				+		
	and contracts from government agencies					
_	ship dues and assessments			<u> </u>	-	
				14	15.15	
	on savings and temporary cash investments ds and interest from securities			1 - 1		
	al income or (loss) from real estate			-		
	-financed property			-		
	debt-financed property			_		
				+		
	I income or (loss) from personal property			 		
	vestment income	1		1		
-	loss) from sales of assets other than inventory	`\				
	ome or (loss) from special events			+		
	rofit or (loss) from sales of inventory					· · · · · · · · · · · · · · · · · · ·
	venue a	-		 		
		-				
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d e					15 15	
d e Subtotal Total. Ad	Add columns (b), (d), and (e) dd line 12, columns (b), (d), and (e) heet in line 13 instructions to verify calc	culations)				15.
d e Subtotal Total. Ad e worksh	Add columns (b), (d), and (e) dd line 12, columns (b), (d), and (e) heet in line 13 instructions to verify calc	culations) s to the Ac	complishment of E	xempt Purp	oses e) of Part XVI-A contribu	uted importantly to
d E Subtotal Total. Ac e worksh art XVI-	Add columns (b), (d), and (e) dd line 12, columns (b), (d), and (e) heet in line 13 instructions to verify calcomplete in line 14 instructions in line 15 instructions i	culations) s to the Ac	complishment of E	xempt Purp	oses e) of Part XVI-A contribu	uted importantly to
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d e Subtotal Total. Ace workshirt XVI-	Add columns (b), (d), and (e) dd line 12, columns (b), (d), and (e) heet in line 13 instructions to verify calc. B Relationship of Activities Explain below how each activity accomplishment of the foundations.	culations) s to the Ac	complishment of E	xempt Purp	oses e) of Part XVI-A contribu	uted importantly t
d E Subtotal Total. Ac e worksh art XVI-	Add columns (b), (d), and (e) dd line 12, columns (b), (d), and (e) heet in line 13 instructions to verify calc. B Relationship of Activities Explain below how each activity accomplishment of the foundations.	culations) s to the Ac	complishment of E	xempt Purp	oses e) of Part XVI-A contribu	uted importantly t
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d e Subtotal Total. Ace workshirt XVI-	Add columns (b), (d), and (e) dd line 12, columns (b), (d), and (e) heet in line 13 instructions to verify calc. B Relationship of Activities Explain below how each activity accomplishment of the foundations.	culations) s to the Ac	complishment of E	xempt Purp	oses e) of Part XVI-A contribu	uted importantly t
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d e Subtotal Total. Ace workshirt XVI-	Add columns (b), (d), and (e) dd line 12, columns (b), (d), and (e) heet in line 13 instructions to verify calc. B Relationship of Activities Explain below how each activity accomplishment of the foundations.	culations) s to the Ac	complishment of E	xempt Purp	oses e) of Part XVI-A contribu	uted importantly to
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Part >			egarding Tran	sfers To and Transact	ions and	Relations	ships \	With Non	chari		e 9
in oı	section rganiza	on 501(c) of the Co ations?	ode (other than se	ngage in any of the following ection 501(c)(3) organization	ns) or in se	_				Yes	No
		-	_	noncharitable exempt organ							
									1a(1)	 -	X
		er assets ansactions							1a(2)		X
			ncharitable evemr	ot organization					1b(1)		x
(2	2) Pura	chases of assets fro	om a noncharitabl	e exempt organization	• • • • • •				1b(2)		X
(3	3) Ren	tal of facilities, equi	ipment, or other as	ssets					1b(3)		X
(4) Reir	nbursement arrang	ements						1b(4)		X
(5	5) Loa	ns or Ioan guarantee	es						1b(5)		Х
(€	3) Perl	formance of service	es or membership	or fundraising solicitations	 .				1b(6)		X
				, other assets, or paid employ					1c		X
				complete the following se							
				s given by the reporting fo							
(a) Line		(b) Amount involved		ment, show in column (d) techaritable exempt organization	T	ption of transfe					
(a) Line	110	(b) Amount involved	(c) Name of non	ichantable exempt organization	(d) Desci	iption of transit	ers, transa	cuons, and sna	nng ana	ngeme	nts
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d	escrib	ed in section 501(c) " complete the follo) of the Code (otherwing schedule.	ated with, or related to, on er than section 501(c)(3)) or		527?	· · · · ·			es X	No
		(a) Name of organizatio	<u>'n</u>	(b) Type of organization		(c) Descrip	otion of relation	ship		
				-		<u> </u>					
_				. = -							
								_		_	-
							-			_	
	Under	penalties of perjury, I declar	are that have examined	this return, including accompanying spayer) is based on all information of which	chedules and s	tatements, and t	o the best	of my knowled	ge and l	belief, it	is true,
Sign	correct	and complete Declaration of	preparer fother than taxo	payer) is based on all information of which	preparer has an	y knowledge					
Here		MATUR		6114/15	STATE	& LOCAL TA	X MGR		S discus repar <u>er</u>		return below
nere	Sight	ature of officer of trustee		- Date	Title			(see instruction	ns)?	Yes	No
	L,		 _	,		12 :	1				
Paid		Print/Type preparer's na	ame	Preparer's signature		Date		""	PTIN		
Prepa	arer					L		elf-employed			
Use C		Firm's name					Firm's El	N >			
USE C	July	i iiiii s audiess					D1	_			

Schedule B

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

Schedule of Contributors

edule of Contributors OMB No 1545-0047

2013

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

Department of the Treasury Internal Revenue Service
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** MERITOR, INC. TRUST (FKA ARVINMERITOR, INC. TRUST) 52-2089611 Organization type (check one): Filers of: Section: Form 990 or 990-EZ 501(c)() (enter number) organization 4947(a)(1) nonexempt charitable trust **not** treated as a private foundation ☐ 527 political organization Form 990-PF ☐ 501(c)(3) exempt private foundation 4947(a)(1) nonexempt charitable trust treated as a private foundation ☐ 501(c)(3) taxable private foundation Check if your organization is covered by the General Rule or a Special Rule. Note. Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions. **General Rule** For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II. **Special Rules** For a section 501(c)(3) organization filing Form 990 or 990-EZ that met the 331/3 % support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi) and received from any one contributor, during the year, a contribution of the greater of (1) \$5,000 or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1. Complete Parts I and II. For a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor. during the year, total contributions of more than \$1,000 for use exclusively for religious, charitable, scientific, literary,

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

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

For a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions for use *exclusively* for religious, charitable, etc., purposes, but these contributions did not total to more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an *exclusively* religious, charitable, etc., purpose. Do not complete any of the parts unless the **General Rule** applies to this organization because it received *nonexclusively* religious, charitable, etc., contributions of \$5,000 or

Page 2

Name of o	organization		Employer identification number
	, INC. TRUST (FKA ARVINMERITOR, INC. TRUST)		52-2089611
Part I	Contributors (see instructions). Use duplicate copies	of Part I if additional space	is needed.
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	MERITOR, INC. 2135 WEST MAPLE ROAD TROY, MI 48084	\$981,64	(Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
(a)	(b)	\$	Person
No.	Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person

Name of organization

MERITOR, INC. TRUST (FKA ARVINMERITOR, INC. TRUST)

Employer identification number

52-2089611

Part II	Noncash Property (see instructions). Use duplicate cop	pies of Part II if additional space	ce is needed.
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$ \$	
a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		 \$	
a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		 \$	
a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		 \$	

Name of or	ganization			Employer identification number			
	INC. TRUST (FKA ARVINMERITOR, INC. TRU			52-2089611			
Part III	Exclusively religious, charitable, etc.						
	that total more than \$1,000 for the y						
	For organizations completing Part III, e						
	contributions of \$1,000 or less for the	-	ation once. See instruc	tions.) > \$			
(a) No.	Use duplicate copies of Part III if addit	ionai space is needed.		· · · · · · · · · · · · · · · · · · ·			
from	(b) Purpose of gift	(c) Use of gift	t (d) De	scription of how gift is held			
Part I							
		······		·			
		(e) Transfer of	gift				
	Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee						
_	Transferee's name, address, and	ZIP + 4	Relationship of tra	ansferor to transferee			
(a) No.		<u></u>					
from Part I	(b) Purpose of gift (c) Use of gift		t (d) De	escription of how gift is held			
		•••••					
	(e) Transfer of gift						
	Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee				
-	Transferee's name, address, and ZIP + 4		relationship of transferee				
(a) No. from	(b) Purpose of gift (c) Use of g		ft (d) Description of how gift is he				
Part I	(c) ose of girt						
	(e) Transfer of gift						
<u> </u>	Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee				
İ				•••••			
1							
(a) No.	(h) Down and a fairful						
from Part I	(b) Purpose of gift	(c) Use of gift	(d) De	escription of how gift is held			
_							
	(e) Transfer of gift						
	Transferee's name, address, and	I ZIP + 4	Relationship of transferor to transferee				
-	Transferoe 3 fighte, address, and			C to dalisieles			

STATEMENT ATTACHED TO AND MADE PART OF

RETURN OF PRIVATE FOUNDATION FORM 990-PF

MERITOR, INC. TRUST FEIN: 52-2089611

FOR THE TAX YEAR ENDED SEPTEMBER 28, 2014

Part I, Line 1 - Contributions, gifts, grants, etc. received

Date 1/24/2014 Various Donor Meritor, Inc.

Meritor, Inc.

Amount

117,700 863,949

981,649

STATEMENT ATTACHED TO AND MADE PART OF

RETURN OF PRIVATE FOUNDATION FORM 990-PF

MERITOR, INC. TRUST FEIN: 52-2089611

FOR THE TAX YEAR ENDED SEPTEMBER 28, 2014

Part VII-A, Line 10 - Schedule of substantial contributors during the tax year

Meritor, Inc. FEIN: 38-3354643 2135 W. Maple Road Troy, MI 48084-7186

Part VII-A, Line 8b - Copy of Form 990-PF to the Attorney General (or designate)

Meritor, Inc. Trust is not required to register in the State of Michigan as a charitable trust since the contributions come solely from the parent company, Meritor, Inc. Therefore, a copy of Form 990-PF is not required to be sent to the Attorney General.

STATEMENT ATTACHED TO AND MADE PART OF

RETURN OF PRIVATE FOUNDATION FORM 990-PF

MERITOR, INC. TRUST

FEIN: 52-2089611

FOR THE TAX YEAR ENDED SEPTEMBER 28, 2014

Part VIII, Line 1 - List all officers, directors, trustees, foundation managers and their compensation

	(b) Title, and average	(c) Compensation	(d) Contributions to	
	hours per week	(if not paid,	employee benefit plans	(e) Expense account,
(a) Name and address	devoted to position	enter -0-)	and deferred compensation	other allowances
Ivor J. "Ike" Evans	Executive Chairman/CEO/President	c	O	c
2135 W. Maple Road, Troy, MI 48084	- 5min	;	þ	þ
Jeffrey Craig	President, Chief Operating Officer	c	ď	c
2135 W. Maple Road, Troy, MI 48084	- 5min	;	þ	þ
Kevin Nowlan	Sr. VP and CFO	c	Ó	c
2135 W. Maple Road, Troy, MI 48084	- 5min	÷	-	þ
Sandra Quick	Sr. VP/Secretary/ General Counsel			
2135 W. Maple Road, Troy, MI 48084	- 5min	-0-	-	þ
Craig Frohock	VP/Aftermarket	c	•	c
2135 W. Maple Road, Troy, MI 48084	- 5min	;	þ	þ

STATEMENT ATTACHED TO AND MADE PART OF RETURN OF PRIVATE FOUNDATION FORM 990-PF

MERITOR, INC. TRUST FEIN: 52-2089611

FOR THE TAX YEAR ENDED SEPTEMBER 28, 2014

Part XV, Line 3a - Grants and Contributions Paid During the Year or Approved for Future Payment

Month	Recipient		Takal
Month	Name and address (home or business) North Buncombe High School	Amount	Total
/24/2014 /24/2014	· · · · · · · · · · · · · · · · · · ·	1,000.00	
/24/2014 /24/2014	Erwin High School	1,000.00	
/24/2014 /24/2014	A.C. Reynolds High School	1,000.00	
/24/2014	East Henderson High School	1,000.00	
24/2014	Enka High School	1,000.00	
24/2014	Meadowview Middle School	1,000.00	
/24/2014	Access Soup Kitchen and Men's	500.00	
/24/2014	Lincoln Middle School	1,000.00	
/24/2014	United Way of Scotland County, Inc.	4,000.00	
/24/2014	Rochester Institute of Technology	2,000.00	
/24/2014	Manning Primary School	1,000.00	
/24/2014	The Henry Ford	34,000.00	
/24/2014	Friends of the Harvin Clarenden	1,000.00	
/24/2014	Michigan Armed Forces Hospitality	10,000.00	
/24/2014	Clarenden Habitat for Humanity	1,000.00	
/24/2014	Clover Blue Eagle Robotics	500.00	
/24/2014	Habitat for Humanity of York County	1,000.00	
/24/2014	Charles D. Owen High School	1,000.00	
/24/2014	Central Haywood High School	1,000.00	
/24/2014	Pisgah High School	1,000.00	
/24/2014	Chase High School	1,000.00	
/24/2014	Chase Middle School	1,000.00	
/24/2014	Campbell County High School	2,000.00	
/24/2014 /24/2014	Simon Kenton High School	2,000.00	
/24/2014 /24/2014	Walton-Verona High School		
	· · · · · · · · · · · · · · · · · · ·	2,000.00	
/24/2014	Larry A. Ryle High School	2,000.00	
/24/2014	University of Kentucky - College	2,000.00	
/24/2014	Simon House	1,000.00	
/24/2014	Covington Street School	1,600.00	
/24/2014	Scotland High School	3,000.00	
/24/2014	Kingswood School	2,000.00	
/24/2014	Westview Middle School	1,000.00	
/24/2014	East Ridge Middle School	1,000.00	
/24/2014	Newark High School	750.00	
/24/2014	Newark High School Industrial	750.00	
/24/2014	Ivy Tech Foundation	2,000.00	
/24/2014	Purdue University	2,000.00	
/24/2014	Children's Museum of Indianapolis	600.00	
/24/2014	Hendersonville High School	1,000.00	
/24/2014	Great Oaks	2,000.00	
/24/2014	Northwood University	2,000.00	
/24/2014	Gateway Community & Technical	2,000.00	
/24/2014	American Cancer Society Relay for Life	3,000.00	
/24/2014	Central Carolina Technical	4,000.00	
/24/2014	Whitesburg Elementary School	1,000.00	
/24/2014	Russellville Elementary School	1,000.00	
/24/2014	Daily Bread	1,000.00	
	West Henderson High School	1,000.00	
/24/2014 /24/2014	Food on Foot	•	
/24/2014 /24/2014		2,000.00	
/24/2014 /24/2014	North Henderson High School	1,000.00	
/24/2014	Morristown-Hamblen High School	1,000.00	
/24/2014	T. C. Roberson High School	1,000.00	
/24/2014	Morristown-Hamblen High School	1,000.00	
/24/2014	Asheville High School	1,000.00	117,700
	ABYSA	1,000.00	

STATEMENT ATTACHED TO AND MADE PART OF RETURN OF PRIVATE FOUNDATION FORM 990-PF

MERITOR, INC. TRUST FEIN: 52-2089611 FOR THE TAX YEAR ENDED SEPTEMBER 28, 2014

Part XV, Line 3a - Grants and Contributions Paid During the Year or Approved for Future Payment

Month	Recipient Name and address (home or business)	Amount Tot
	BAWAC	2,000.00
	Big Brothers/Big Sisters of Asheville-Buncombe Cty.	1,000.00
	Blue Ridge Community College	1,000.00
	Bluegrass Community Action Partnership	1,000.00
	Boys and Girtls Clubs of Henderson County	1,000.00
	Buncombe Couty Schools Foundation, Inc.	1,000.00
	Carol Strawn Center	1,000.00
	Clarendon County Chamber - Gibbons Street Park	8,800.00
	C-TECH High School	500.00
	Cultural and Heritage Commission of York County	1,000.00
	Flat Rock Playhouse	1,000.00
	Food Pantry Network of Licking County	1,500.00
	Franklin County Career and Technical Center	1,000.00
	Heath City Schools	500.00
	Heath City Schools	1,000.00
	Henderson County Chamber of Commerce	5,000.00
	Henderson County Education Foundations, Inc.	1,000.00
	Hendersonville Symphony Orchestra	1,000.00
	Hendricks County Habitat for Humanity	
	Hendricks Regional Health YMCA	2,600.00 600.00
	Interfaith Assistance Ministry	1,000.00
	Junior Achievement of the Central Carolinas, Inc.	•
	the same and the s	1,000.00
	Licking County Coalition of Care	1,000.00
	Licking County Schools	1,000.00
	Licking Valley School District	500.00
	Manna Food Bank	1,000.00
	Ministerial Association Temporary Shelter (MATS)	1,000.00
	Mission Healthcare	1,000.00
	Newark Catholic High School	500.00
	Newark Catholic High School	1,000.00
	Newark City Schools	500.00
	Noah's House	1,000.00
	On-Track Financial Education & Counseling	1,000.00
	Pardee Hospital Foundation	1,000.00
	Park Ridge Hospital	1,000.00
	Path Shelter	1,000.00
	Richmond Community College Foundation, Inc.	3,000.00
	Riley Children's Center	1,200.00
	Rutherford County Schools Preschool (Carver Center)	1,000.00
	Scotland County Literacy Council	1,000.00
	Special Olympics	1,500.00
	Special Olympics of Kentucky	2,000.00
	St. Andrews Presbyterian College	1,000.00
	St. Mark's Episcopal Church	1,000.00
	St. Vincent de Paul Housing Facility, Inc.	1,000.00
	Tennessee Technology Center	3,000.00
	The Woodlands	1,000.00
	United Way of Licking County	2,500.00
	United Way of York County	5,000.00
	University of North Carolina at Pembroke	3,000.00
	Yokefellow Service Center	1,000.00
	York Hospice and Community Center	1,000.00
	York Technical College	· ·
	York Technical College	11,000.00
	•	2,500.00
	Eastern Kentucky University	267.00

STATEMENT ATTACHED TO AND MADE PART OF RETURN OF PRIVATE FOUNDATION FORM 990-PF

MERITOR, INC. TRUST FEIN: 52-2089611 FOR THE TAX YEAR ENDED SEPTEMBER 28, 2014

Part XV, Line 3a - Grants and Contributions Paid During the Year or Approved for Future Payment

Reci	iai	e	n

Month	Name and address (home or business)	Amount	Total
	Northern Kentucky University	244.20	
	Northern Kentucky University	315.20	
	Northern Kentucky University	394.90	
	Ohio Weslayan	443.00	
	Ohio Bible College	408.00	
	Youth Emergency Services	1,000.00	
	Youth Emergency Shelter	1,000.00	
	Youth Empowerment Inc.	1,000.00	102,106.40
	American Cancer Society	30,000.00	
	Automation Alley Gala	5,000.00	
	BRAKES (Motor Sports)	10,000.00	
	Brooksie Way	7,169.00	
	Crittendon Gala	2,000.00	
	DAPCEP	1,250.00	
	Environmental Research & Education Foundation	1,700.00	
	Habitat for Humanity Car Show Build	5,405.00	
	Hammond for Hope	1,200.00	
	Kentucky State University	7,500.00	
	Kettering Development Fund	3,000.00	
	Michigan Opera Theatre	5,000.00	
	Michigan State University	10,000.00	
	Michigan Technological University	10,000.00	
	Oakland University	5,000.00	
	Ohio State University	8,000.00	
	United Way of Hamblin County	11,759.00	
	North Carolina State University	5,900.00	
	University of Cincinnati	7,500.00	
	University of Michigan	10,000.00	
	University of Michigan	1,000.00	
	University of Michigan - Ross School of Business	5,000.00	
	University of Michigan - Ross School of Business	3,000.00	
	USA Cares	5,000.00	
	Wayne State University	3,000.00	
	Wayne Wise	2,500.00	
	Western Carolina University	3,000.00	169,883.00
	Troy Community Coalition	5,000.00	
	PepsiCo Canada Foundation	2,804.92	
	Canadian Cancer Society	1,797.43	
	Environmental Research & Education Foundation	6,500.00	
	Wayne Wise	5,000.00	
	Waste Management Golf Outing (Oregon Food Bank)	5,000.00	
	AUSA/Celebrate Michigan's Military	5,000.00	
	MAN	9,000.00	
	Barenherz	13,994.77	
	Formula Truck KIDS	15,723.69	
	NHRA B.R.A K.E.S.	5,000.00	
	Rescue Remembrance Project	15,000.00	
	USA Cares	5,000.00	
	National Bar Association Institute	12,500.00	
	D. Augustus Straker Bar Foundation	1,000.00	
	Michigan Roundtable for Diversity and Inclusion	2,500.00	
	UNCF Walk for Education	5,000.00	
	FIRST Robotics	5,000.00	
		· · · · · · · · · · · · · · · · · · ·	
	FIRST Robotics	2,500.00	
	American Cancer Society	1,000.00	
	American Heart Association	10,000.00	

STATEMENT ATTACHED TO AND MADE PART OF RETURN OF PRIVATE FOUNDATION FORM 990-PF

MERITOR, INC. TRUST FEIN: 52-2089611

FOR THE TAX YEAR ENDED SEPTEMBER 28, 2014

Part XV, Line 3a - Grants and Contributions Paid During the Year or Approved for Future Payment

Recipient

	Recipient		
Month	Name and address (home or business)	Amount	Total
	Leukemia/Lymphoma Society	7,500.00	
	Leukemia/Lymphoma Society	2,500.00	
	March of Dimes Brooksie Way	10,000.00	161 205 0
	Asheville-Buncombe Technical Community	7,065.00 1,000.00	161,385.8
	BMS College of Engineering	•	
		1,624.00	
	Brazil University (donation)	10,699.00	
	Brigham Young University Central Michigan University	10,000.00	
		5,000.00	
	Clemon University	3,000.00	
	Clemon University	6,000.00	
	Clemson University	10,000.00	
	Clemson University	3,000.00	
	Cornell University	2,000.00	
	Isothermal Community College	1,000.00	
	Kentucky State University	7,500.00	
	Kettering University	7,500.00	
	Michigan State University	10,000.00	
	Michigan State University	10,000.00	
	N. Carolina State	5,500.00	
	Oakland University	5,000.00	
	PES College of Engineering	1,624.00	
	PES College, Mandya	1,630.00	
	Purdue University	2,500.00	
	Purdue University	2,500.00	
	Purdue University	3,800.00	
	RV College of Engineering	1,624.00	
	University of Cincinnati	10,000.00	
	University of Michigan	5,000.00	
	University of Michigan	5,000.00	
	University of Michigan	2,000.00	
	University of Michigan	1,000.00	
	University of North Carolina at Asheville	3,000.00	
	University of Nuevo Leon	7,875.86	
	University of Nuevo Leon	9,844.89	
	Wayne State University	14,500.00	170,721.7
	Associação Pestalozzi de Osasco	10,500.00	
	AACD Osasco - SP	10,500.00	
	Juvenile Diabetes Research Foundation	500.00	21,500.0
	United Way of Hamblen County	14,047.00	
	United Way of Henderson County	54,111.00	
	United Way of Rutherford County	10,611.22	78,769.2
	A Beautiful Me	856.00	
	Alzheimer's Association of Greater Michigan	1,150.00	
	American Cancer Society	1,130.50	
	American Heart Association	876.50	
	American Red Cross International Response	1,208.00	
	ASPCA	1,198.06	
	Barbara Ann Karmanos Cancer Institute	1,085.00	
	Boys & Girls Club of Troy	946.50	
	Cassie Himes Shoes Cancer Foundation, Inc.	1,072.50	
	CURED NFP	1,094.50	
	Detroit Cristo Rey High School	1,175.00	
	EcoWorks	1,953.00	
	Fallen and Wounded Soldiers Fund	2,507.15	
	Forgotten Harvest	1,014.00	

STATEMENT ATTACHED TO AND MADE PART OF RETURN OF PRIVATE FOUNDATION **FORM 990-PF**

MERITOR, INC. TRUST FEIN: 52-2089611

FOR THE TAX YEAR ENDED SEPTEMBER 28, 2014

Part XV, Line 3a - Grants and Contributions Paid During the Year or Approved for Future Payment

Month	Recipient Name and address (home or business)	Amount	Total
	For the Seventh Generation	1,143.00	
	Freedom Center	1,650.00	
	Gaddes Foundation	1,114.00	
	Habitat for Humanity Oakland	829.00	
	HAVEN, Inc.	2,479.50	
	Here to Help Foundation	1,353.50	
	Junior Achievement of SE Michigan	976.50	
	Leader Dogs for the Blind	960.00	
	Leukemia Lymphoma Society - Regatta	1,117.00	
	March of Dimes	1,205.00	
	Michigan Veterans Foundation	1,687.31	
	National Kidney Foundation of Michigan	1,250.00	
	National Kidney Foundation of Michigan	1,267.50	
	St. Jude Children's Hospital	1,432.50	
	St. Jude Children's Hospital	1,095.00	
	Stefan's Hope	1,118.88	
	Teens in Need/Marine City Arts	1,050.50	
	UNCF Walk for Education	999.00	
	United Ukranian American Relief Council	1,243.00	
	University of Michigan - CS Mott	5,500.00	
	University of Michigan - CS Mott	1,150.50	
	West Bloomfield High School Robotics	1,150.00	
	Habitat for Humanity Detroit	1,204.00	
	Pancreatic Cancer Action Network	3,686.50	
	Cystic Fibrosis Foundation	1,042.00	
	Leukemia and Lymphoma Society - Light the Night	1,117.50	
	Paws for Life Rescue and Adoption	1,081.50	
	Leukemia and Lymphoma Society - Light the Night	1,190.00	
	Wish Upon A Teen	1,035.00	59,394.90
	City of Troy - Transit Center	1,000.00	
	Fraternal Order of Police Lodge #130	750.00	
	American Gear Mfgr. Assn	1,000.00	
	Hammond for Hope	1,540.00	
	Sacred Heart - Robotics	10,000.00	
	Breast Cancer Golf Outing	200.00	
	Canadian Cancer Society	5,000.00	
	National Kidney Foundation of Michigan	10,000.00	29,490.00
	Trucker Buddy	10,000.00	
	InForum Center for Leadership	20,000.00	
	InForum Center for Leadership	10,000.00	
	InForum Center for Leadership	700.00	
	Focus: HOPE	10,000.00	
	Focus: HOPE	5,000.00	
	Junior Achievement of SE Michigan	10,000.00	
	Skills USA	5,000.00	70,700.00

Total FY14 contribution payments 981,651.08

8868 Form

(Rev January 2014)

Department of the Treasury Internal Revenue Service

Application for Extension of Time To File an Exempt Organization Return

► File a separate application for each return.
► Information about Form 8868 and its instructions is at www.irs.gov/form8868.

OMB No 1545-1709

	evenue Service						
	are filing for an Automatic 3-Month Extension,						▶ ⊔
	are filing for an Additional (Not Automatic) 3-Not complete Part II unless you have already been						9868
	onic filing (e-file). You can electronically file Form			·	•		
a corpo	pration required to file Form 990-T), or an addition	nal (not auto	omatic) 3-month ext	ension of time. You ca	unne in ele	ectronica	Ilv file Form
8868 to	request an extension of time to file any of the	forms lister	d in Part I or Part II	with the exception of	Forr	n 8870,	Information
Return	for Transfers Associated With Certain Person	al Benefit (Contracts, which mi	ust be sent to the IF	RS in	paper	format (see
ınstruc	tions). For more details on the electronic filing of	this form, vi	sit <i>www.ir</i> s. <i>gov/efil</i> e	and click on e-file for	Char	ities & N	onprofits.
Part							
	poration required to file Form 990-T and requ						omplete
Part I c	only						🕨 🔲
All other	er corporations (including 1120-C filers), partners	hips, REMIC	Cs, and trusts must i	use Form 7004 to requ	uest a	an exten	sion of time
to file i	ncome tax returns.						
				Enter filer's identifying	g num	nber, see	instructions
Turan o	Name of exempt organization or other filer, see	instructions.		Employer identification	numb	er (EIN) o	r
print	ype or				.0896		
•	Number, street, and room or suite no. If a P.O.	box, see instr	uctions	Social security number			
File by the	ie	·		'	` '	•	
filing you	City, town or post office, state, and ZIP code F	or a foreign a	ddress, see instruction	S.			
return S	ee '		,	-			
1130 0000	1104, III 40004						
Enter t	he Return code for the return that this application	is for (file a	separate application	n for each return) .			04
Appli	cation	Return	Application				Return
Is For		Code	Is For				Code
	990 or Form 990-EZ	01	Form 990-T (corpo	vration)			07
	990-BL	02	Form 1041-A	nation)			08
	4720 (individual)	03		than industrial			09
	990-PF	04	Form 4720 (other to Form 5227	man individualy			10
	990-T (sec. 401(a) or 408(a) trust)	05	Form 6069				11
	990-T (sec. 40 (a) of 400(a) trust)	06	Form 8870	<u> </u>			
FOIII	990-1 (trust other than above)	06	FOIII 0070				12
	oooks are in the care of ► Meritor, Inc. ohone No. ► 248-435-1000						
	organization does not have an office or place of	husiness in	the United States of	hook this have		-	▶□
• If this	is for a Group Return, enter the organization's for	our diait Gro	up Exemption Numb	neck this box ber (GEN)		. If th	
	whole group, check this box ▶ □. I	_	•		<u> </u>		
	ith the names and EINs of all members the exten		t of the group, once	K CHIO DOX			taon
	I request an automatic 3-month (6 months for a		required to file Form	990-T) extension of ti	me	_	
•	until May 15 , 20 15 , to file the ex					The ext	ension is
	for the organization's return for:	omproigam.	eanon rotarn for the	organization named at	JO • C.	. The ext	CHSIOTHS
	► □ calendar year 20 or						
	Calendar year 20 or						
	► ✓ tax year beginning September 30	20	13 and ending	September 28		20	14
2	If the tax year entered in line 1 is for less than 12					, 20	
-	Change in accounting period	months, cri	eck reason.		''		
3a	If this application is for Forms 990-BL, 990-PF, 9	200-T 4720	or 6069, enter the t	ontativo tax loce any		т	
Ja	nonrefundable credits. See instructions.	990-1, 4720,	or ooos, enter the t	entative tax, less ally	3a	•	
b	If this application is for Forms 990-PF, 990-T	4720 or 6	6060 onter ony ref	undable gradite and		Φ	
Ь	estimated tax payments made. Include any prior				01.	•	
_			<u> </u>		3b	\$	
С	Balance due. Subtract line 3b from line 3a. Inclu EFTPS (Electronic Federal Tax Payment System)			ıı requirea, by using	3с	\$	
				0.00 50 0.00 50			
Caution	 If you are going to make an electronic funds withdravions. 	wai (direct det	oil) with this Form 8868	s, see Form 8453-EO and	Form	1 88/9-EC	or payment

Form 886	68 (Rev 1-2014)				Page 2
• If you	are filing for an Additional (Not Automat	ic) 3-Month Exten	sion, complete onl	y Part II and check the	s box ▶ 🗌
Note.	Only complete Part II if you have already be a refiling for an Automatic 3-Month Exte	een granted an aut	omatic 3-month exte	ension on a previously	
Part I	Additional (Not Automatic) 3-M	onth Extension	of Time. Only file	the original (no copie	es needed).
				Enter filer's identifying	number, see instructions
Type o	Name of exempt organization or other fil	er, see instructions.		Employer identification	number (EIN) or
File by th	for			Social security number	(SSN)
return So instruction	ee City, town or post office, state, and zir	code. For a foreign a	ddress, see instruction	S.	
Enter ti	he Return code for the return that this appl	ication is for (file a	separate application	n for each return) .	
Applied Is For		Return Code	Application Is For		Return Code
Form	990 or Form 990-EZ	01			
Form	990-BL	02	Form 1041-A		08
Form	4720 (ındıvidual)	03	Form 4720 (other t	than individual)	09
	990-PF	04	Form 5227		10
	990-T (sec. 401(a) or 408(a) trust)	05		Form 6069	
Form	990-T (trust other than above)	06	Form 8870 12		
• If the • If this for the list with 4 5	oooks are in the care of hohone No. hohone No. hohone No. horganization does not have an office or places for a Group Return, enter the organization whole group, check this box hothen hames and EINs of all members the enterest of the names and EINs of all members the enterest of the tax year hor calendar year hor or other tax year of the tax year entered in line 5 is for less the Change in accounting period state in detail why you need the extension	ace of business in con's four digit Grown in the control of time until beginning than 12 months, che	the United States, c up Exemption Numb t of the group, chec	heck this box	If this is In and attach a
	If this application is for Forms 990-BL, 990)-PF 990-T 4720		entative tax less any	
	nonrefundable credits. See instructions.		<u> </u>	·	8a \$
b If this application is for Forms 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit and any amount paid previously with Form 8868. 8b \$					
	(Electronic Federal Tax Payment System). Se	•		uned, by using Li 11 b	8c \$
	Signature and \ Denalties of perjury, I declare that I have example and belief, it is true, correct, and complete,	mined this form, inc		schedules and statemen	nts, and to the best of my
Signature	∍ ▶	Title ►		Da	te ►
					Form 8868 (Rev. 1-2014)