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Return of Private Foundation

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

OMB No 1545-0052

Department of the Treasury Internal Revenue Service

▶ Do not enter social security numbers on this form as it may be made public.

2014

| For | calen | dar year 2014 or tax year beginning | | | , and | | | , 20 |
|------------------------------|------------|---|---------------------|--------|---------|-------------------|--|---------------------------------|
| | | undation | | | | | r identification numbe | |
| Has | stings ! | Mutual Insurance Company Charitable Foundation | | | | | 20-2031029 | |
| | | d street (or P O box number if mail is not delivered to street address) | | Room | /suite | B Telephon | e number (see ınstructi | ons) |
| 404 | East \ | Noodlawn Avenue | | | | | 269-945-3405 | |
| City | or tow | n, state or province, country, and ZIP or foreign postal code | | | | C If exempt | ion application is pend | |
| <u></u> Has | stings, | MI 49058 | | | | · | | |
| G | Check | all that apply: Initial return Initial return | of a former p | oublic | charity | D 1. Foreign | organizations, check | here ▶[|
| | | ☐ Final return ☐ Amended r | return | | | 2 Foreign | n organizations meeting | the 85% test |
| | | Address change Name char | | | | | here and attach compu | |
| | | type of organization: Section 501(c)(3) exempt p | | | | | foundation status was 07(b)(1)(A), check here | _ |
| | | n 4947(a)(1) nonexempt charitable trust 🔲 Other tax | | | | Section S | J/(D)(T)(A), Check here | ▶∟ |
| | | arket value of all assets at J Accounting method | : 🗌 Cash [| ✓ Ac | crual | F If the four | ndation is in a 60-mont | h termination |
| | | year (from Part II, col. (c), | | | | under sec | tion 507(b)(1)(B), checl | k here |
| _ | |) ► \$ 2,573,153 (Part I, column (d) must be | on cash basis | :.) | | | | |
| Pa | art I | Analysis of Revenue and Expenses (The total of | (a) Revenue | | (h) Net | investment | (c) Adjusted net | (d) Disbursements for chantable |
| | | amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a) (see instructions).) | expenses p books | er | | come | income | purposes |
| _ | | | | | | | | (cash basis only) |
| | 1 | Contributions, gifts, grants, etc., received (attach schedule) | 12: | 2,563 | | | | |
| | 2 | Check ► ☐ if the foundation is not required to attach Sch. B | | | | | · | |
| | 3 | Interest on savings and temporary cash investments | | 0 | | 0 | 0 | |
| | 4 | Dividends and interest from securities | 3: | 3,708 | | 33,708 | 0 | |
| | 5a | Gross rents | | 0 | | 0 | 0 | |
| _ | b | Net rental income or (loss) 0 | | | | | | |
| ĭŭ | 6a | Net gain or (loss) from sale of assets not on line 10 | | 이 | | | | |
| ទ្ | b | Gross sales price for all assets on line 6a 478,967 | | - | | | | |
| Kevenue | 7 | Capital gain net income (from Part IV, line 2) | - | | | 0 | | |
| - | 8 9 | Net short-term capital gain | | | | | 0 | |
| | 10a | Gross sales less returns and allowances 0 | | | | | 0 | |
| | b | Less: Cost of goods sold 0 | | | | | | |
| | C | Gross profit or (loss) (attach schedule) | | 0 | | | | |
| | 11 | Other income (attach schedule) | | 0 | | 0 | 0 | |
| | 12 | Total. Add lines 1 through 11 | 15/ | 6,271 | | 33,708 | 0 | |
| _ | 13 | Compensation of officers, directors, trustees, etc. | | 0,2,7 | | 33,708 | 0 | 0 |
| šes | 14 | Other employee salaries and wages | | 0 | | 0 | 0 | 0 |
| Ĕ | 15 | Pension plans, employee benefits | | 0 | | 0 | 0 | 0 |
| Expenses | 16a | Legal fees (attach schedule) | | 0 | | 0 | 0 | 0 |
| _ | b | Accounting fees (attach schedule) | | 0 | | 0 | 0 | 0 |
| ĕ ∣ | С | Other professional fees (attach schedule) | | 0 | | · 0 | 0 | 0 |
| <u>a</u> | 17 | Interest | | 0 |) | 0 | } 0 | 0 |
| 12 | 18 | Taxes (attach schedule) (see instructions) | | 1,209 | | (O | 0 | 0 |
| | 19 | Depreciation (attach schedule) and depletion | | 0 | | Ald | T & SAIN O | |
| ğ | 20/ | Occupancy | | 0 | | 0 | . 0 | 0 |
| פל | 21 | Travel, conferences, and meetings | | 0 | | 0 | 0 | 0 |
| a | 22 | Printing and publications | | 0 | | ò | 0 | 0 وسيا |
| ရွာ | 23 | Other expenses (attach schedule) | ļ <u>.</u> | 4,412 | | 3,257 | 0 | 0 |
| 탏 | 24 | Total operating and administrative expenses. | | 1 | | | | |
| Operating and Administrative | | Add lines 13 through 23 | | 5,621 | | 3,257 | 0 | |
| 8 | 25 | Contributions, gifts, grants paid | | 6,576 | | | | 156 576 |
| 7 | 26 | Total expenses and disbursements. Add lines 24 and 25 | 16: | 2,197 | | 3,257 | 0 | 156,576 |
| , l | 27 | Subtract line 26 from line 12: | | | | | ! | |
| • | | Excess of revenue over expenses and disbursements | | 5,927 | | | | |
| | b | Net investment income (if negative, enter -0-) . | | | | 30,450 | | |
| | <u>C</u> _ | Adjusted net income (if negative, enter -0-) | | | | | 0 | 000 05 |
| or | rapen | Adjusted net income (if negative, enter -0-) | (| Cat No | 11289X | | Fo | m 990-PF (2014) \ |
| | | | | | | | 0.11 | · |
| | | | | | | | 724 | |
| | | | | | | | , \ | |

| Da | rt II | Attached schedules and amounts in the description column | Beginning of year | End | or year | |
|-------------|--------|--|--------------------------|--------------------|-------------------|------------------|
| Га | 7 (11 | Balance Sheets should be for end-of-year amounts only. (See instructions) | (a) Book Value | (b) Book Value | (c) Fair Market | t Value |
| | 1 | Cash-non-interest-bearing | 58,040 | 5,60 | 9 | 5,609 |
| | 2 | Savings and temporary cash investments | 315,244 | 139,73 | o l | 139,730 |
| | 3 | Accounts receivable 3,766 | | | 1 | |
| | | Less: allowance for doubtful accounts ▶ 0 | 2,693 | 3,76 | 6 | 3,766 |
| | 4 | Pledges receivable ▶0 | | | | |
| | | Less: allowance for doubtful accounts ▶ 0 | 0 | | 0 | n |
| | 5 | Grants receivable | 0 | | 0 | |
| - ! | 6 | Receivables due from officers, directors, trustees, and other | 1 | | | <u>_</u> |
| | • | disqualified persons (attach schedule) (see instructions) | ٥ | | o | 0 |
| | 7 | Other notes and loans receivable (attach schedule) ▶ 0 | <u> </u> | | <u> </u> | |
| | • | Less: allowance for doubtful accounts 0 | 0 | | | - ^ |
| ဖ | 8 | Inventories for sale or use | 0 | | 0 | 0 |
| Assets | 9 | Prepaid expenses and deferred charges | | | 1 | 0 |
| 55 | | The state of the s | 0 | | 0 | 0 |
| ٩ | 10a | Investments—U.S. and state government obligations (attach schedule) | 1,259,245 | 1,562,80 | 1 | 562,806 |
| | b | Investments—corporate stock (attach schedule) | 762,770 | 848,88 | | 848,880 |
| | C | Investments—corporate bonds (attach schedule) | 89,116 | 12,01 | 4 | 12,014 |
| | 11 | Investments—land, buildings, and equipment: basis ▶ 0 | | | | |
| | | Less: accumulated depreciation (attach schedule) ▶0 | 0 | **** | 0 | 0 |
| ı | 12 | Investments—mortgage loans | 0 | | 0 | 0 |
| | 13 | Investments—other (attach schedule) | 0 | | 0 | 0 |
| | 14 | Land, buildings, and equipment: basis ▶0 | | | | - |
| | | Less: accumulated depreciation (attach schedule) ▶0 | 0 | | 0 | 0 |
| | 15 | Other assets (describe ► Tax Recoverable) | 652 | 34 | 7 | 347 |
| | 16 | Total assets (to be completed by all filers-see the | | | | |
| | | instructions. Also, see page 1, item l) | 2,487,760 | 2,573,15 | 3 2, | <u>573,153</u> |
| | 17 | Accounts payable and accrued expenses | 698 | 1,60 | 2 | |
| ģ | 18 | Grants payable | 0 | | 이 | |
| Liabilities | 19 | Deferred revenue | 0 | | <u>o</u> | |
| Ē | 20 | Loans from officers, directors, trustees, and other disqualified persons | 0 | | 의 | |
| ä | 21 | Mortgages and other notes payable (attach schedule) | 0 | | <u>o</u> | |
| _ | 22 | Other liabilities (describe ► None) | 0 | | <u>o</u> | |
| | 23 | Total liabilities (add lines 17 through 22) | 698 | 1,60 | 2 | |
| Balances | | Foundations that follow SFAS 117, check here ▶ ✓ and complete lines 24 through 26 and lines 30 and 31. | | | | |
| ğ | 24 | Unrestricted | 2,487,062 | 2,571,55 | 1 | |
| 3al | 25 | Temporarily restricted | 0 | | <u>o</u> | |
| D E | 26 | Permanently restricted | 0 | | <u>o</u> | |
| Fun | | Foundations that do not follow SFAS 117, check here ▶ □ and complete lines 27 through 31. | | | | |
| 0 | 27 | Capital stock, trust principal, or current funds | 0 | | 0 | |
| Net Assets | 28 | Paid-in or capital surplus, or land, bldg., and equipment fund | 0 | | <u>o</u> | |
| SS(| 29 | Retained earnings, accumulated income, endowment, or other funds | 0 | | 0 | |
| Į, | 30 | Total net assets or fund balances (see instructions) | 2,487,062 | 2,487,06 | 2 | |
| Ž | 31 | Total liabilities and net assets/fund balances (see | | | | |
| | | instructions) | 2,487,760 | 2,573,15 | 3 | |
| | rt III | Analysis of Changes in Net Assets or Fund Balances | <u> </u> | | | |
| 1 | | al net assets or fund balances at beginning of year-Part II, colu | | | | |
| | end- | -of-year figure reported on prior year's return) | · · · · · · · · | · · · · <u> 1</u> | 2, | ,487,062 |
| 2 | | er amount from Part I, line 27a | | | | -5,927 |
| 3 | | er increases not included in line 2 (itemize) Unrealized Gains on | | | | 90,416 |
| 4 | Add | lines 1, 2, and 3 | | | 2, | ,571,551 |
| 5 | Dec | reases not included in line 2 (itemize) ► None | | 5 | | 0 |
| 6 | Tota | reases not included in line 2 (itemize) None If net assets or fund balances at end of year (line 4 minus line 5)— | Part II, column (b), lin | e 30 6 | | ,571,5 <u>51</u> |
| | | | | | Form 990-F | F (2014) |

| | | e kind(s) of property sold (e g , real estate se, or common stock, 200 shs MLC Co) | | | (b) How acquired P—Purchase D—Donation | | ate acquired o , day, yr) | (d) Date sold (mo , day, yr) |
|--|--|--|---|--|---|--|--------------------------------------|---|
| 1a | See Attachment 4 | | | | | | /arious | Various |
| b | | | | | | | | |
| <u> </u> | | | | | | <u> </u> | | |
| <u>d</u> | | | | | | | | |
| <u>e</u> | (e) Gross sales price | (f) Depreciation allowed (or allowable) | | (g) Cost or plus expen | other basis nse of sale | | | n or (loss) f) minus (g) |
| а | 478,967 | | | | 478,968 | | | |
| b | | | | | | | | |
| С | | | | | | | | |
| <u>d</u> | | | | | | | | |
| <u>e</u> | Complete only for accets abo | www.ac.up.up.column.dp) and award | hu tha f | | 10/21/60 | | | |
| | Complete only for assets sho | owing gain in column (h) and owned l | by the it | · | | 1 | | (h) gain minus less than -0-) or |
| | (i) F M V as of 12/31/69 | (j) Adjusted basis as of 12/31/69 | | | s of col (i) (j), if any | | | rom col (h)) |
| a | | | | | | | | |
| _ <u></u> | | | | | | | | · · · · · · · · · · · · · · · · · · · |
| c | | | | | | | | |
| d | | | | | | | | |
| е | | | | | | | | |
| 2 | Capital gain net income o | rinet canital incel (| | nter in Pa -0- in Par | rt I, line 7 } | 2 | | |
| 3 | If gain, also enter in Part | n or (loss) as defined in sections I, line 8, column (c) (see instructions or column in the column i | ctions). | If (loss) | , enter -0- in) | | | |
| | raiti, iiieo | | | | | | | |
| or o | ptional use by domestic pri | ler Section 4940(e) for Reduvate foundations subject to the | iced T | ax on N | et Investment | | | |
| or o sect | ptional use by domestic pri tion 4940(d)(2) applies, leav he foundation liable for the | ler Section 4940(e) for Reduvate foundations subject to the | section | ax on N 4940(a) mount of | et Investment tax on net invest any year in the I | t Inco | income.) | ☐ Yes ☑ No |
| or o sect | ptional use by domestic priction 4940(d)(2) applies, leav the foundation liable for the s," the foundation does not | ler Section 4940(e) for Reduler to the section and the section 4942 tax on the distribution. | section table a | ax on N 4940(a) mount of complete | et Investment tax on net invest any year in the I this part. | t Inco | income.) period? | ☐ Yes ☑ No |
| sect Vas t "Ye: | ptional use by domestic priction 4940(d)(2) applies, leave the foundation liable for the s," the foundation does not the Enter the appropriate ame (a) Base period years | ler Section 4940(e) for Redule vate foundations subject to the set this part blank. section 4942 tax on the distribution qualify under section 4940(e). Dount in each column for each year (b) | table a to not car; see | ax on N 4940(a) mount of complete the instru | et Investment tax on net invest any year in the I this part. | t Inco | income.) period? any entries. Dis | (d) |
| sect Vas t "Ye: | ptional use by domestic priction 4940(d)(2) applies, leave the foundation liable for the s," the foundation does not Enter the appropriate amongle | ler Section 4940(e) for Redule vate foundations subject to the set this part blank. section 4942 tax on the distribution qualify under section 4940(e). Dount in each column for each year (b) Adjusted qualifying distributions | table a to not car; see | ax on N 4940(a) mount of complete the instru | et Investment tax on net invest any year in the I this part. Ictions before m (c) f nonchantable-use a | t Inco | income.) period? any entries. Dis | (d) inbution ratio divided by col (c)) |
| sect Vas t "Ye: | ptional use by domestic priction 4940(d)(2) applies, leave the foundation liable for the s," the foundation does not Enter the appropriate among the same that are the appropriate among the same that are the appropriate among the same that are the appropriate among the same are that are the appropriate among the same are that are the same are | ler Section 4940(e) for Redule vate foundations subject to the set this part blank. section 4942 tax on the distribution qualify under section 4940(e). Dount in each column for each year (b) Adjusted qualifying distributions 122 | table a to not car; see | ax on N 4940(a) mount of complete the instru | et Investment tax on net invest any year in the I this part. Ictions before m (c) f nonchantable-use a | t Inco | income.) period? any entries. Dis | ☐ Yes ☑ No |
| sect Vas t "Ye: | ptional use by domestic priction 4940(d)(2) applies, leave the foundation liable for the s," the foundation does not Enter the appropriate among (a) Base period years endar year (or tax year beginning in 2013 | ler Section 4940(e) for Redule vate foundations subject to the set this part blank. section 4942 tax on the distribution qualify under section 4940(e). Dount in each column for each year (b) Adjusted qualifying distributions 12: | table a to not car; see | ax on N 4940(a) mount of complete the instru | any year in the lathis part. (c) f nonchantable-use a 2,42 | t Inco | income.) period? any entries. Dis | (d) Inbutton ratio divided by col (c)) 0.0506 |
| sect Vas t "Ye: | ptional use by domestic priction 4940(d)(2) applies, leave the foundation liable for the s," the foundation does not Enter the appropriate among the grant of the grant period years and ar year (or tax year beginning in 2013 | ler Section 4940(e) for Redule vate foundations subject to the section 4942 tax on the distribution qualify under section 4940(e). Dount in each column for each year (b) Adjusted qualifying distributions 12: | table a lo not car; see | ax on N 4940(a) mount of complete the instru | any year in the lathis part. (c) f nonchantable-use a 2,42 2,46 2,55 | t Inco | income.) period? any entries. Dis | (d) Inbutton ratio divided by col (c)) 0.0506 0.0544 |
| sect Vas t "Ye: | ptional use by domestic priction 4940(d)(2) applies, leave the foundation liable for the s," the foundation does not Enter the appropriate amount (a) Base period years endar year (or tax year beginning in 2013 2012 2011 | ler Section 4940(e) for Redulivate foundations subject to the set this part blank. section 4942 tax on the distribution qualify under section 4940(e). Dount in each column for each year (b) Adjusted qualifying distributions 12: 13: 14: 9: | table a lo not car; see | ax on N 4940(a) mount of complete the instru | any year in the lithis part. (c) in nonchantable-use a 2,42 2,46 2,55 2,57 | t Inco tment base p aking assets 3,204 9,516 1,321 | income.) period? any entries. Dis | (d) inbutton ratio divided by col (c)) 0.0506 0.0544 0.0552 |
| sect Vas t "Ye: | ptional use by domestic priction 4940(d)(2) applies, leave the foundation liable for the s," the foundation does not the enter the appropriate amount (a) Base period years endar year (or tax year beginning in 2013 2012 2011 2010 | ler Section 4940(e) for Reductivate foundations subject to the section 4942 tax on the distribution qualify under section 4940(e). Dount in each column for each year (b) Adjusted qualifying distributions 12: 13: 14: 9: 11: | table a a to not car; see | mount of complete the instru | any year in the lathis part. (c) in nonchantable-use a 2,42 2,46 2,55 2,57 2,53 | t Inco tment base p aking assets 3,204 9,516 1,321 2,078 | income.) period? any entries. Dis | (d) Inbution ratio divided by col (c)) 0.0506 0.0544 0.0552 0.0362 0.0439 |
| Vas t | ptional use by domestic priction 4940(d)(2) applies, leave the foundation liable for the s," the foundation does not enter the appropriate amount (a) Base pend years endar year (or tax year beginning in 2013 2012 2011 2010 2009 Total of line 1, column (d) Average distribution ratio | ler Section 4940(e) for Reductivate foundations subject to the section 4942 tax on the distribution qualify under section 4940(e). Dount in each column for each year (b) Adjusted qualifying distributions 12: 13: 14: 9: 11: | table a a to not car; see s 2,733 4,425 0,946 3,134 1,516 | mount of complete the instru | any year in the lathis part. (c) I nonchantable-use a 2,42 2,46 2,55 2,57 2,53 | aking ssets 3,204 9,516 11,321 2,078 7,984 | period? any entries. Cool (b) | (d) Inbutton ratio divided by col. (c)) 0.0506 0.0544 0.0552 0.0362 0.0439 |
| Vas ti "Yes" 1 Cale | ptional use by domestic priction 4940(d)(2) applies, leave the foundation liable for the s," the foundation does not appropriate among the foundation does not appropriate among the foundation does not appropriate among the foundation of the found | ler Section 4940(e) for Redule to the section 4942 tax on the distribution qualify under section 4940(e). Dount in each column for each year (b) Adjusted qualifying distributions 12: 13: 14: 9: 11: for the 5-year base period—divi | table a to not car; see s 2,733 4,425 0,946 3,134 1,516 de the ess than | mount of complete the instru Net value of total on in 5 years | any year in the lathis part. Ictions before m (c) I nonchantable-use a 2,42 2,46 2,55 2,57 2,53 | aking assets 3,204 9,516 1,321 2,078 7,984 | period? any entries. (col (b) | (d) Inbutton ratio divided by col. (c)) 0.0506 0.0544 0.0552 0.0362 0.0439 .240 |
| Section of sections of section | ptional use by domestic priction 4940(d)(2) applies, leave the foundation liable for the s," the foundation does not appropriate among the foundation does not appropriate among the foundation does not appropriate among the foundation of the found | ler Section 4940(e) for Redule vate foundations subject to the section 4942 tax on the distribute qualify under section 4940(e). Dount in each column for each year (b) Adjusted qualifying distributions 12: 13: 14: 9: 11: for the 5-year base period—dividation has been in existence if legical and the section 4940(e). | table a 100 not coar; see s 2,733 4,425 0,946 3,134 1,516 cess than arom Pa | mount of complete the instru Net value of total on In 5 years | any year in the lathis part. uctions before m (c) f nonchantable-use a 2,42 2,46 2,55 2,57 2,53 une 2 by 5, or by | aking assets 3,204 9,516 1,321 2,078 7,984 | period? any entries. (col (b) | (d) inbutton ratio divided by col. (c)) 0.0506 0.0544 0.0552 0.0362 0.0439 .240 |
| For o | ptional use by domestic prison 4940(d)(2) applies, leave the foundation liable for the s," the foundation does not Enter the appropriate among the sendar year (or tax year beginning in 2013 2012 2011 2010 2009 Total of line 1, column (d) Average distribution ratio number of years the foundation of the sendar year the net value of nor Multiply line 4 by line 3 | ler Section 4940(e) for Redultivate foundations subject to the set this part blank. section 4942 tax on the distribution qualify under section 4940(e). Dount in each column for each year (b) Adjusted qualifying distributions 12: 13: 14: 9: 11: for the 5-year base period—dividation has been in existence if less that the column has been | table a loo not coar; see s 2,733 4,425 0,946 3,134 1,516 cess than rom Pa | mount of complete the instruction of the instruction of the the instruction of the theta in the instruction of the theta in the instruction of the instruction of the theta in the instruction of the instr | any year in the lathis part. Ictions before m (c) I nonchantable-use a 2,42 2,46 2,55 2,57 2,53 | aking assets 3,204 9,516 1,321 2,078 7,984 | period? any entries. Cool (b) | (d) inbutton ratio divided by col. (c)) 0.0506 0.0544 0.0552 0.0362 0.0439 .240 .0480951 2,433,32 |
| f sections of sect | ptional use by domestic pricion 4940(d)(2) applies, leave the foundation liable for the s," the foundation does not Enter the appropriate among the sendar year (or tax year beginning in 2013 2012 2011 2010 2009 Total of line 1, column (d) Average distribution ratio number of years the foundation of the sendar year (or tax year beginning in 2013 2012 2011 2010 2009 2009 2009 2009 2009 | ler Section 4940(e) for Redule to the section 4942 tax on the distribution qualify under section 4940(e). Dount in each column for each year (b) Adjusted qualifying distributions 12: 13: 14: 9: 11: for the 5-year base period—dividation has been in existence if less that the section 4940(e). The section 4940(e) is considered as a section 4940(e) is considered as a section 4940(e). The section 4940(e) is considered as a section 4940(e). The section 4940(e) is considered as a section 4940(e) is considered as a section 4940(e). The section 4940(e) is considered as a section 4940(e) is considered as a section 4940(e) is considered as a section 4940(e). The section 4940(e) is considered as a section 4940(e) is considered | table a so not car; see s s s s s s s s s s s s s s s s s | mount of complete the instru | any year in the lathis part. (c) Inonchantable-use a 2,42 2,46 2,55 2,57 2,53 | aking assets 3,204 9,516 1,321 2,078 7,984 | period? any entries. Dis (col (b) 4 | (d) Inbutton ratio divided by col. (c)) 0.0506 0.0544 0.0552 0.0362 |

| Part | | nsuu | ICTIO | 15) | |
|--------|--|------|----------|----------|---|
| 1a | | | | | |
| ь | Date of ruling or determination letter: (attach copy of letter if necessary—see instructions) Domestic foundations that meet the section 4940(e) requirements in Part V, check 1 | | 205 | 00 | |
| D | here \blacktriangleright and enter 1% of Part I, line 27b | | 305 | 00 | |
| С | All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of | | | | |
| | Part I, line 12, col. (b). | | | | |
| 2 | Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-) | | 0 | 00 | |
| 3 | Add lines 1 and 2 | | 305 | 00 | |
| 4 | Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-) | | 0 | 00 | |
| 5 | Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0 | | 305 | 00 | |
| 6 | Credits/Payments: | | | | |
| a | 2014 estimated tax payments and 2013 overpayment credited to 2014 6a 653 00 | | | | |
| b | Exempt foreign organizations—tax withheld at source | | | | |
| c d | Tax paid with application for extension of time to file (Form 8868) . 6c 0 00 Backup withholding erroneously withheld 6d 0 00 | | | | |
| 7 | Total credits and payments. Add lines 6a through 6d | - | CES | 00 | |
| 8 | Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached 8 | | 653 0 | 00 | |
| 9 | Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed > 9 | | 0 | 00 | |
| 10 | Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid > 10 | | 348 | 00 | |
| 11 | Enter the amount of line 10 to be: Credited to 2015 estimated tax ▶ 348 00 Refunded ▶ 11 | | 0 | 00 | |
| Part | VII-A Statements Regarding Activities | | | | |
| 1a | During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it | | Yes | No | |
| | participate or intervene in any political campaign? | 1a | | ✓ | |
| b | Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see Instructions for the definition)? | 1b | | ✓ | |
| | If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials | | | | |
| | published or distributed by the foundation in connection with the activities. | | | | |
| С | Did the foundation file Form 1120-POL for this year? | 1c | | ✓ | |
| d | Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year: | | | | |
| _ | (1) On the foundation. ► \$ None (2) On foundation managers. ► \$ None | | | | |
| е | 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 | | ✓ | |
| _ | 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 | | 1 | |
| 4a | Did the foundation have unrelated business gross income of \$1,000 or more during the year? | 4a | | ✓ | |
| 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 | | ~ | |
| 6 | If "Yes," attach the statement required by General Instruction T. Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either: | | | | |
| o | 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 | 1 | | |
| 7 | Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col. (c), and Part XV | 7 | 1 | | |
| 8a | Enter the states to which the foundation reports or with which it is registered (see instructions) ▶ | | <u> </u> | | |
| | Michigan | | | | |
| b | If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General | ļ | | | |
| | (or designate) of each state as required by General Instruction G? If "No," attach explanation | 8b | 1 | | |
| 9 | Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or | | | | 0 |
| | 4942(j)(5) for calendar year 2014 or the taxable year beginning in 2014 (see instructions for Part XIV)? If "Yes," | | | | |
| | complete Part XIV | 9 | | 1 | |
| 10 | Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their | | | , | |
| | names and addresses | 10 | l | ✓ | |

| Part VILB Statements Regarding Activities (continued) 11 1 1 1 1 1 1 1 1 | | 0-11 (2014) | | | rage 5 |
|--|------|--|--------------|----------|----------|
| meaning of section 512(b)(13) if "Ves," attach schedule (see instructions) 1 Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had advisory privileges? If "Yes," attach statement (see instructions) 1 Did the foundation comply with the public inspection requirements for its annual returns and exemption application? 1 Webstreaddress ▶ MA. 1 The books are in care of ▶ Hastings Mutual Insurance Company. Telephone no. ▶ 269-945-3405. Located at ▶ 404 East Woodiawn Avenue, Hastings, Mil. 1 The books are in care of ▶ Hastings Mutual Insurance Company. Telephone no. ▶ 269-945-3405. Located at ▶ 404 East Woodiawn Avenue, Hastings, Mil. 1 The books are in care of ▶ Hastings Mil. 1 The books are in care of ▶ Hastings Mil. 1 The books are in care of ▶ Hastings Mil. 2 Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in Ileu of Form 1041 −Check here and enter the amount of tax-exempt interest received or accrued during the year ★ 15 | | | | | |
| 12 Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had advisory privileges? If "Yes." attach statement (see instructions). 13 Did the foundation comply with the public inspection requirements for its annual returns and exemption application? Website address ▶ MA 14 The books are in care of ▶ Hastings Mutual Insurance Company. Telephone no. ▶ 269-945-3405. Located at ▶ 404 East Woodlewn Avenue, Hastings, MI. 15 Section 4947(a)(1) one-weeping 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. ▶ 15 N/2 16 At any time during calendar year 2014, did the foundation have an interest in or a signature or other authority over a bank, securities, or other financial account in a foreign country? See the instructions for exceptions and filing requirements for FinCEN Form 114, (formerly TD F 90-22.1). If 17 Yes. Inter the name of the foreign country ▶ 16 Part VILES 17 Statements Regarding Activities for Which Form 4720 May Be Required 18 File Form 4720 if any time is checked in the "Yes" column, unless an exception applies. 19 Louring the year did the foundation feither directly or indirectly; 10 Engage in the sale or exchange, or leasing of property with a disqualified person? Yes No 21 Section 494 Pay compensation to, or pay or reimburse the expenses of, a disqualified person? Yes No 22 Borrow money from, lend money to, or otherwise extend credit to for accept it from) a disqualified person? 23 Furnish goods, services, or facilities to (or accept them from) a disqualified person? 24 Fes No 25 Propers of the services of the expenses of, a disqualified person? 26 Junish goods, services, or facilities to (or accept them from) a disqualified person? 27 Fes No 28 Furnish goods, services, or facilities to (or accept them from) a disqualified person? 29 No 20 Junish goods, services, or facilities to (or accept them from) a disqualified person | 11 | | | | |
| person had advisory privileges? If "Yes," attach statement (see instructions). 12 | | | 11 | | / |
| 13 Did the foundation comply with the public inspection requirements for its annual returns and exemption application? 14 The books are in care of ▶ Hastings Mutual insurance Company. Telephone no. ▶ 269-945-3405 Located at ▶ 404 East Woodlawn Avenue, Hastings, Mi 15 Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041—Check here. ▶ □ 16 At any time during calendar year 2014, did the foundation have an interest in or a signature or other authority or and enter the amount of tax-exempt interest received or accrued during the year ▶ □ 16 At any time during calendar year 2014, did the foundation have an interest in or a signature or other authority or over a bank, securities, or other financial account in a foreign country? See the instructions for exceptions and filing requirements for FinCEN Form 114, (formerly TD F 90-22.1). If "Yes," enter the name of the foreign country ▶ Port VILBS Statements Regarding Activities for Which Form 4720 May Be Required File Form 4720 if any time is checked in the "Yes" column, unless an exception applies. □ Yes □ No (12) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person? □ Yes □ No (2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person? □ Yes □ No (3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? □ Yes □ No (4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? □ Yes □ No (5) Transfer any income or assets to a disqualified person? □ Yes □ No (6) Agree to pay money or property to a government official? (Exception. Check "No" if the foundation agreed to make a grant to or to employ the official for a period after termination of government service, if terminating within 90 days.) 15 | 12 | • | | | |
| Website address ► N/A The books are in care of ► Hestings Mutual insurance Company Located at ► 404 facst Woodlawn Avenue, Histings, MI 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 and enter the amount of tax-exempt interest received or accrued during the year At any time during calendar year 2014, did the foundation have an interest in or a signature or other authority over a bank, securities, or other financial account in a foreign country? See the instructions for exceptions and filing requirements for FinCEN Form 114, (formerly TD F 90-22.1). If Yes, No 16 See the instructions for exceptions and filing requirements for FinCEN Form 114, (formerly TD F 90-22.1). If Yes No 16 See the instructions for exceptions and filing requirements for FinCEN Form 114, (formerly TD F 90-22.1). If Yes No 16 See the instructions for exceptions and filing requirements for FinCEN Form 114, (formerly TD F 90-22.1). If Yes No 16 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? | | | | | <u> </u> |
| The books are in eare of ▶ Hastings Mutual Insurance Company Telephone no. ▶ 269-945-3405 Located at ▶ 404 East Woodlawin Avenue, Hastings, MI 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 and enter the amount of tax-exempt interest received or accrued during the year. ▶ 15 At any time during calendar year 2014, did the foundation have an interest in or a signature or other authority over a bank, securities, or other financial account in a foreign country? See the instructions for exceptions and filing requirements for FinCEN Form 114, (formerly TD F 90-22.1). If Yes No enter the name of the foreign country ▶ Part VIII-B Statements Regarding Activities for Which Form 4720 May Be Required File Form 4720 if any time is checked in the "Yee" column, unless an exception applies. 12 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? | 13 | | 13 | ✓ | L, |
| Located at A of East Woodlawn Avenue, Hastings, MI Section Ag47(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 A tary time during calendar year 2014, did the foundation have an interest in or a signature or other authority over a bank, securities, or other financial account in a foreign country? See the instructions for exceptions and filing requirements for FinCEN Form 114, (formerly TD F 90-22.1). If "Yes," enter the name of the foreign country \int \text{Yes}" column, unless an exception applies. File Form 4720 if any item is checked in the "Yes" column, unless an exception applies. Buring the year did the foundation (either directly or indirectly): (1) Engage in the sale or exchange, or leasing of property with a disqualified person? Yes No (2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person? Yes No (3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? Yes No (4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? Yes 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) Yes No (6) Agree to pay money or property to a government official? (Exception, Check "No" if the foundation agreed to make a grant to or to employ the official for a period after termination of government service, if terminating within 90 days.) b If any answer is "Yes" to la(1)-(6), did any of the acts fall to qualify under the exceptions described in Regulations section 53.4941(6)-3 or in a current notice regarding disaster assistance (see instructions)? Yes No D Id the foundation agreed to make a grant to or to employ the official for a period after termination of government service, if terminating within 90 days.) To represent the foreign of the service in | | | | | |
| 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 At any time during calendar year 2014, did the foundation have an interest in or a signature or other authority over a bank, securities, or other financial account in a foreign country? See the instructions for exceptions and filing requirements for FincEN Form 114, (formerly TD F 90-22.1). If "Yes," enter the name of the foreign country ▶ Part 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. 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? | 14 | | | | |
| and enter the amount of tax-exempt interest received or accrued during the year . 15 | | | 4905 | <u>8</u> | |
| 16 At any time during calendar year 2014, did the foundation have an interest in or a signature or other authority over a bank, securities, or other financial account in a foreign country? See the instructions for exceptions and filing requirements for FinCEN Form 114, (formerly TD F 90-22.1). If */ Yes, *enter the name of the foreign country ▶ Part VIED 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. 1a During the year did the foundation (either directly): (1) Engage in the sale or exchange, or leasing of property with a disqualified person? | 15 | | | • | |
| over a bank, secunities, or other financial account in a foreign country? See the instructions for exceptions and filling requirements for FinCEN Form 114, (formerly TD F 90-22.1). If "Yes," enter the name of the foreign country ▶ Part VII-B | 40 | Lancia La | | V | , |
| See the instructions for exceptions and filing requirements for FinCEN Form 114, (formerly TD F 90-22.1). If "Yes," enter the name of the foreign country ▶ Part VII-8 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. 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? . | 10 | · · · · · · · · · · · · · · · · · · · | | res | |
| Part 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. 1a During the year did the foundation (either directly or indirectly): 11 Engage in the sale or exchange, or leasing of property with a disqualified person? | | The state of the s | | L | - |
| File Form 4720 if any item is checked in the "Yes" column, unless an exception applies. Price File Form 4720 if any item is checked in the "Yes" column, unless an exception applies. | | | | | İ |
| File Form 4720 if any item is checked in the "Yes" column, unless an exception applies. Text Te | Part | | | | |
| During the year did the foundation (either directly or indirectly): (1) Engage in the sale or exchange, or leasing of property with a disqualified person? | | | | Yes | No |
| (1) Engage in the sale or exchange, or leasing of property with a disqualified person? | 1a | • | | 1 1 1 | |
| (2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person? | | | | | l |
| disqualified person? (3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? | | | | | |
| (4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? | | | | | Ì |
| (4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? | | (3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? . | | | |
| the benefit or use of a disqualified person)? (6) Agree to pay money or property to a government official? (Exception. Check "No" if the foundation agreed to make a grant to or to employ the official for a period after termination of government service, if terminating within 90 days.) b If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations section 53.4941(d)-3 or in a current notice regarding disaster assistance (see instructions)? 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 2014? 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(0)(3) or 4942(0)(5). a At the end of tax year 2014, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning before 2014? b Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2) to all years listed, answer "No" and attach statement—see instructions.) \(\overline{N/A} \). c If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here. > 20 | | | | | |
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| termination of government service, if terminating within 90 days.) Tyes No | | | | | |
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| 6e, Part XIII) for tax year(s) beginning before 2014? | 2 | | | | |
| If "Yes," list the years ▶ 20 , 20 , 20 , 20 | а | At the end of tax year 2014, did the foundation have any undistributed income (lines 6d and | | | 1 |
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| b Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2) (relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer "No" and attach statement—see instructions.) N/A. c If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here. ▶ 20, 20, 20 Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year? | | If "Yes," list the years ▶ 20 , 20 , 20 , 20 | | | |
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| Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year? | | · · · · · · · · · · · · · · · · · · · | 2b | | |
| Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year? | С | | | | |
| at any time during the year? | 0- | | | | |
| b If "Yes," did it have excess business holdings in 2014 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 2014.) N/A | Ja | | | | |
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| 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 2014.) N/A Did the foundation invest during the year any amount in a manner that would jeopardize its chantable purposes? Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its | | | | | [|
| foundation had excess business holdings in 2014.) N/A | | | | | ŀ |
| 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 | | | 3h | 1 | Ì |
| b Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its | 4a | · | - | | / |
| about the minimum and the thorn with a state of the state | | | " | | 广 |
| | | | 4b | | 1 |

| rell | VII-B Statements Regarding Activities | for W | hich Form | 4720 I | May Re D | equire | d (contir | ued) | | | age |
|-----------|--|-----------|---|-----------------|------------------------|----------|---|----------------------------------|----------------------|---------------------------------------|-----|
| 5a | During the year did the foundation pay or incur a | | | 7/20 | iviay be n | equire | u (COITEII) | iueu) | | $\neg \neg$ | _ |
| | (1) Carry on propaganda, or otherwise attempt t(2) Influence the outcome of any specific public | | | | | | Yes | ☑ No | | | |
| | directly or indirectly, any voter registration dr | | | | | | ☐ Yes | ✓ No | | | |
| | (3) Provide a grant to an individual for travel, stu(4) Provide a grant to an organization other than section 4945(d)(4)(A)? (see instructions) | a cha | ritable, etc., | organiz | ation desc | ribed in | | ✓ No | | | |
| | (5) Provide for any purpose other than religious purposes, or for the prevention of cruelty to o | , charita | able, scientif | ic, litera | ary, or educ | cationa | _ | ☑ No | | | |
| b | If any answer is "Yes" to 5a(1)–(5), did any of the Regulations section 53.4945 or in a current notice | transa | actions fail to | qualify | under the | excepti | on <u>s des</u> cr | _ | 5b | | |
| c | Organizations relying on a current notice regards If the answer is "Yes" to question 5a(4), does t | ng disa | ster assistan | ce che | ck here | | | ▶□ | | | |
| · | because it maintained expenditure responsibility | for the | grant? N/A | <u> </u> | · | | | □No | | | |
| 6a | If "Yes," attach the statement required by Regula Did the foundation, during the year, receive any on a personal benefit contract? | funds, | directly or in | directly | , to pay pre | emiums | ∏Yes | √No | } | | |
| b | Did the foundation, during the year, pay premiun | | | | | benefi | | _ | 6b | | _ |
| | If "Yes" to 6b, file Form 8870. | | | | -14 4 | | | | | ŀ | |
| | At any time during the tax year, was the foundation of "Yes," did the foundation receive any proceeds | | | | | | Yes ransaction | √ No 12 V /Δ | 1 75 | - | |
| Part | Information About Officers, Direct and Contractors | | ŕ | | | | | | nploy | es, | |
| | List all officers, directors, trustees, foundation | | agers and the e, and average | | npensation | | Contributions | 10 | | | |
| | (a) Name and address | hou | rs per week ed to position | i (Hir | not paid, iter -0-) | emple | oyee benefit perred compe | plans | (e) Exper other a | nse acc allowan | |
| See At | tachment 5 | | | | 0 | | | 0 | | | _ |
| | | | | | | | | | | | |
| | | | | | | [| | | | | |
| | | ļ | ···· | ļ | | | | | | | |
| | | | | | | | | | | | |
| 2 | Compensation of five highest-paid employed "NONE." | es (oth | er than tho | se incl | uded on li | ne 1— | see instr | uctions |). If no | one, e | nt |
| 2 | - · · · · · · · · · · · · · · · · · · · | | (b) Title, and a hours per videvoted to p | average week | uded on li | | (d) Contributemployee plans and compens | itions to benefit deferred | (e) Expe | · · · · · · · · · · · · · · · · · · · | ou |
| | "NONE." | | (b) Title, and a | average week | <u> </u> | | (d) Contributemployee plans and contributed | itions to benefit deferred | (e) Expe | nse acc | oui |
| 2 NONE | "NONE." | | (b) Title, and a | average week | <u> </u> | | (d) Contributemployee plans and contributed | itions to benefit deferred | (e) Expe | nse acc | oui |
| | "NONE." | | (b) Title, and a | average week | <u> </u> | | (d) Contributemployee plans and contributed | itions to benefit deferred | (e) Expe | nse acc | oui |
| | "NONE." | | (b) Title, and a | average week | <u> </u> | | (d) Contributemployee plans and contributed | itions to benefit deferred | (e) Expe | nse acc | ou |

| orm 990-PF*(| 2014) |
|--------------|-------|
|--------------|-------|

Page 7

| Paf | t VIII | Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Emand Contractors (continued) | ployees, |
|------|--------------|--|------------------|
| 3 | Five hi | ghest-paid independent contractors for professional services (see instructions). If none, enter "NON | E." |
| | | (a) Name and address of each person paid more than \$50,000 (b) Type of service | (c) Compensation |
| NON | E | | |
| | | | |
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| | | | |
| | | | |
| ota | I number | of others receiving over \$50,000 for professional services | 0 |
| Do | + IV A | Summon, of Direct Charitable Activities | |
| Fel | rt IX-A | Summary of Direct Charitable Activities | |
| | | lation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of | Expenses |
| or | ganizations | and other beneficianes served, conferences convened, research papers produced, etc | Екропосо |
| 1 | NONE | | |
| | | | |
| | | | |
| 2 | NONE | | |
| | | | |
| | | | |
| 3 | NONE | | |
| | | | |
| | | | |
| 4 | NONE | | |
| | | | |
| | | | <u> </u> |
| | rt IX-B | Summary of Program-Related Investments (see instructions) | |
| D | | two largest program-related investments made by the foundation during the tax year on lines 1 and 2 | Amount |
| 1 | NONE | | |
| | | | |
| _ | | | |
| 2 | NONE | | |
| | | | |
| A 1 | l ather area | was related a partment. Can make et ann | |
| _ | | ram-related investments. See instructions | |
| 3 | NONE | | |
| | | | |
| Tota | 1 Add 5- | on 1 through 2 | |
| יטנפ | ii. Add iin | es 1 through 3 | i |

| Part | X Minimum Investment Return (All domestic foundations must complete this part. Forei | gn found | ations, |
|------|--|-----------|--------------|
| | see instructions.) | | |
| 1 | Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., | li | |
| | purposes: | | |
| а | Average monthly fair market value of securities | 1a | 2,456,916 |
| b | Average of monthly cash balances | 1b | 13,463 |
| C | Fair market value of all other assets (see instructions) | 1c | 0 |
| d | Total (add lines 1a, b, and c) | 1d | 2,470,379 |
| 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 | 0 |
| 3 | Subtract line 2 from line 1d | 3 | 2,470,379 |
| 4 | Cash deemed held for charitable activities. Enter 1 1/2 % of line 3 (for greater amount, see | | |
| | ınstructions) | 4 | 37,056 |
| 5 | Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4 | 5 | 2,433,323 |
| 6 | Minimum investment return. Enter 5% of line 5 | 6 | 121,666 |
| Part | XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating f and certain foreign organizations check here ► □ and do not complete this part.) | oundatio | าร |
| 1 | Minimum investment return from Part X, line 6 | 1 | 121,666 |
| 2a | Tax on investment income for 2014 from Part VI, line 5 | | 12.,000 |
| b | Income tax for 2014. (This does not include the tax from Part VI.) 2b 0 | 1 1 | |
| C | Add lines 2a and 2b | 2c | 305 |
| 3 | Distributable amount before adjustments. Subtract line 2c from line 1 | 3 | 121,362 |
| 4 | Recoveries of amounts treated as qualifying distributions | 4 | 0 |
| 5 | Add lines 3 and 4 | 5 | 121,362 |
| 6 | Deduction from distributable amount (see instructions) | 6 | 0 |
| 7 | Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, | | |
| | line 1 | 7 | 121,362 |
| | | | |
| Part | 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 | 156,576 |
| b | Program-related investments—total from Part IX-B | 1b | 0 |
| 2 | Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., | | |
| | purposes | 2 | O |
| 3 | Amounts set aside for specific charitable projects that satisfy the: | | |
| а | Suitability test (prior IRS approval required) | 3a | 0 |
| b | Cash distribution test (attach the required schedule) | 3b | C |
| 4 | Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4 | 4 | 156,576 |
| 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 | 305 |
| 6 | Adjusted qualifying distributions. Subtract line 5 from line 4 | 6 | 156,271 |
| | Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating qualifies for the section 4940(e) reduction of tax in those years. | g whether | • |

| art | Ondistributed income (see instruction | (a) | (b) | (c) | (d) |
|-----|--|--------|---------------------|--------------|---------|
| 1 | Distributable amount for 2014 from Part XI, line 7 | Corpus | Years prior to 2013 | 2013 | 2014 |
| 2 | Undistributed income, if any, as of the end of 2014: | | - | | 121,002 |
| а | Enter amount for 2013 only | | | 80,076 | |
| b | Total for prior years 20 ,20 ,20 | | 0 | · | |
| 3 | Excess distributions carryover, if any, to 2014: | | | | |
| а | From 2009 0 | 1 | | | |
| b | From 2010 | i | | | |
| С | From 2011 0 | | | | |
| d | From 2012 0 | | | | |
| е | From 2013 0 | | | | |
| f | Total of lines 3a through e | 0 | | | · |
| 4 | Qualifying distributions for 2014 from Part XII, | | | | |
| | line 4: ▶ \$156,576 | | | 1 | |
| а | Applied to 2013, but not more than line 2a . | | | 80,076 | |
| þ | Applied to undistributed income of prior years | | | | |
| | (Election required – see instructions) | | 0 | | |
| С | Treated as distributions out of corpus (Election | | | | |
| | required—see instructions) | 0 | | | |
| d | Applied to 2014 distributable amount | | | | 76,500 |
| e | Remaining amount distributed out of corpus | 0 | | | |
| 5 | Excess distributions carryover applied to 2014 (If an amount appears in column (d), the same | 0 | | | 0 |
| | amount must be shown in column (a).) | | | | |
| 6 | Enter the net total of each column as indicated below: | | | | |
| а | Corpus. Add lines 3f, 4c, and 4e. Subtract line 5 | | | | |
| b | Prior years' undistributed income. Subtract | | | | |
| | line 4b from line 2b | | 0 | | |
| 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) | | | i | |
| | tax has been previously assessed Subtract line 6c from line 6b. Taxable | | 0 | | |
| a | amount—see instructions | | |] | |
| _ | Undistributed income for 2013 Subtract line | | 0 | | |
| е | 4a from line 2a. Taxable amount—see | | | | |
| | instructions | | | اه | |
| f | Undistributed income for 2014. Subtract lines | | | - | •• |
| • | 4d and 5 from line 1. This amount must be | | | İ | |
| | distributed in 2015 | | | | 44,861 |
| 7 | Amounts treated as distributions out of corpus | | | | , |
| | to satisfy requirements imposed by section | | | | |
| | 170(b)(1)(F) or 4942(g)(3) (Election may be | | | | |
| | required—see instructions) | 0 | | | |
| 8 | Excess distributions carryover from 2009 not | | | | |
| | applied on line 5 or line 7 (see instructions). | 0 | | | |
| 9 | Excess distributions carryover to 2015. | | | İ | |
| | Subtract lines 7 and 8 from line 6a | 0 | | | |
| 10 | Analysis of line 9: | | | | |
| а | Excess from 20100 | | |] | |
| b | Excess from 2011 0 | | | } | |
| С | Excess from 2012 | | | 1 | |
| d | Excess from 2013 0 | | | | |
| e | Excess from 2014 0 | | j [| i | |

Limited to states of Illinois, Indiana, Iowa, Michigan, Ohio, and Wisconsin.

March 31, June 30, September 30, December 31

factors:

Form 990-PF (2014)

The primary purpose is to assist in providing essential needs of living, including food, clothing, and medical services to at-risk youth and financially challenged or catastrophic needs.

Any restrictions or limitations on awards, such as by geographical areas, chantable fields, kinds of institutions, or other

| 3 | Grants and Contributions Paid During t | he Year or Approve | ed for Fut | ture 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 | |
| а | Paid during the year | | | | |
| | | | | | |
| See A | ttachment 6 | | | | 156,576 |
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| | Total | | | ▶ 3a | 156,576 |
| b | Approved for future payment | | | | 100,070 |
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| NONE | | | | | |
| NONE | | | į | | |
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| | Total | | | <u> </u> | |

| Pa | αx | VI-A Analysis of Income-Producing Ac | tivities | | | | |
|-------------------|----------------------------|--|--------------------|--------------|----------------|----------------------------|---------------------------------------|
| Ente | r gro | ss amounts unless otherwise indicated. | (a) | (b) | (c) | on 512, 513, or 514 (d) | (e) Related or exempt function income |
| 4 | Pro | gram service revenue: | Business code | Amount | Exclusion code | Amount | (See instructions.) |
| ٠ | a | gram service revenue. | ļ | - | | | |
| | b | | - | | | | |
| | С | | | | | | |
| | d | | | | | | - |
| | е | | | | | | |
| | f | ** | | | | | |
| | g | Fees and contracts from government agencies | | | | | |
| 2 | Ме | mbership dues and assessments | | | | | • |
| 3 | Inte | rest on savings and temporary cash investments | | | | | |
| 4 | Div | idends and interest from securities | | | 14 | 33,708 | |
| 5 | Net | rental income or (loss) from real estate: | | | | | |
| | а | Debt-financed property | | | <u> </u> | | |
| | | Not debt-financed property | | ·-·· | | | |
| 6 | | rental income or (loss) from personal property | | | | | |
| 7 | - | er investment income | | | | | |
| 8 | | n or (loss) from sales of assets other than inventory | | | | | |
| 9 | | income or (loss) from special events | | | ļ | | |
| 10 | | ess profit or (loss) from sales of inventory | | | 1 | | |
| 11 | | er revenue: a | | | | | |
| | b | | <u> </u> | | - | | |
| | c d | | | | <u> </u> | | |
| | e | | | | | | |
| | - | | | | | | |
| 12 | Suk | MATAL AND COLUMNS IN IOL AND IOL | | | | | |
| | | ototal. Add columns (b), (d), and (e) | <u> </u> | | | 33,708 13 | |
| 13 | Tot | ototal. Add columns (b), (d), and (e) | s.) | | | 13 | 33,708 |
| 13 (See | Tot wor | ial. Add columns (b), (d), and (e) ial. Add line 12, columns (b), (d), and (e) ksheet in line 13 instructions to verify calculation VI-B Relationship of Activities to the A | s.) | | | 13 | |
| 13 (See Pa | Tot wor | ksheet in line 13 instructions to verify calculation VI-B Relationship of Activities to the A | s.) .ccomplishm | ent of Exemp | t Purposes | | 33,708 |
| 13 (See Pa | Tot wor at X e No | ksheet in line 13 instructions to verify calculation VI-B Relationship of Activities to the A | s.) .ccomplishm | ent of Exemp | t Purposes | | 33,708 |
| 13 (See Pa | Tot wor at X e No | VI-B Relationship of Activities to the A Explain below how each activity for which accomplishment of the foundation's exempt pur | s.) .ccomplishm | ent of Exemp | t Purposes | | 33,708 |
| 13 (See Pa | Tot wor at X e No | VI-B Relationship of Activities to the A Explain below how each activity for which accomplishment of the foundation's exempt pur | s.) .ccomplishm | ent of Exemp | t Purposes | | 33,708 |
| 13 (See Pa | Tot wor at X e No | VI-B Relationship of Activities to the A Explain below how each activity for which accomplishment of the foundation's exempt pur | s.) .ccomplishm | ent of Exemp | t Purposes | | 33,708 |
| 13 (See Pa | Tot wor at X e No | VI-B Relationship of Activities to the A Explain below how each activity for which accomplishment of the foundation's exempt pur | s.) .ccomplishm | ent of Exemp | t Purposes | | 33,708 |
| 13 (See Pa | Tot wor at X e No | VI-B Relationship of Activities to the A Explain below how each activity for which accomplishment of the foundation's exempt pur | s.) .ccomplishm | ent of Exemp | t Purposes | | 33,708 |
| 13 (See Pa | Tot wor at X e No | VI-B Relationship of Activities to the A Explain below how each activity for which accomplishment of the foundation's exempt pur | s.) .ccomplishm | ent of Exemp | t Purposes | | 33,708 |
| 13 (See Pa | Tot wor at X e No | VI-B Relationship of Activities to the A Explain below how each activity for which accomplishment of the foundation's exempt pur | s.) .ccomplishm | ent of Exemp | t Purposes | | 33,708 |
| 13 (See Pa | Tot wor at X e No | VI-B Relationship of Activities to the A Explain below how each activity for which accomplishment of the foundation's exempt pur | s.) .ccomplishm | ent of Exemp | t Purposes | | 33,708 |
| 13 (See Pa | Tot wor at X e No | VI-B Relationship of Activities to the A Explain below how each activity for which accomplishment of the foundation's exempt pur | s.) .ccomplishm | ent of Exemp | t Purposes | | 33,708 |
| 13 (See Pa | Tot wor at X e No | VI-B Relationship of Activities to the A Explain below how each activity for which accomplishment of the foundation's exempt pur | s.) .ccomplishm | ent of Exemp | t Purposes | | 33,708 |
| 13 (See Pa | Tot wor at X e No | VI-B Relationship of Activities to the A Explain below how each activity for which accomplishment of the foundation's exempt pur | s.) .ccomplishm | ent of Exemp | t Purposes | | 33,708 |
| 13 (See Pa | Tot wor at X e No | VI-B Relationship of Activities to the A Explain below how each activity for which accomplishment of the foundation's exempt pur | s.) .ccomplishm | ent of Exemp | t Purposes | | 33,708 |
| 13 (See Pa | Tot wor at X e No | VI-B Relationship of Activities to the A Explain below how each activity for which accomplishment of the foundation's exempt pur | s.) .ccomplishm | ent of Exemp | t Purposes | | 33,708 |
| 13 (See Pa | Tot wor at X e No | VI-B Relationship of Activities to the A Explain below how each activity for which accomplishment of the foundation's exempt pur | s.) .ccomplishm | ent of Exemp | t Purposes | | 33,708 |
| 13 (See Pa | Tot wor at X e No | VI-B Relationship of Activities to the A Explain below how each activity for which accomplishment of the foundation's exempt pur | s.) .ccomplishm | ent of Exemp | t Purposes | | 33,708 |
| 13 (See Pa | Tot wor at X e No | VI-B Relationship of Activities to the A Explain below how each activity for which accomplishment of the foundation's exempt pur | s.) .ccomplishm | ent of Exemp | t Purposes | | 33,708 |
| 13 (See Pa | Tot wor at X e No | VI-B Relationship of Activities to the A Explain below how each activity for which accomplishment of the foundation's exempt pur | s.) .ccomplishm | ent of Exemp | t Purposes | | 33,708 |
| 13 (See Pa | Tot wor at X e No | VI-B Relationship of Activities to the A Explain below how each activity for which accomplishment of the foundation's exempt pur | s.) .ccomplishm | ent of Exemp | t Purposes | | 33,708 |
| 13 (See Pa | Tot wor at X e No | VI-B Relationship of Activities to the A Explain below how each activity for which accomplishment of the foundation's exempt pur | s.) .ccomplishm | ent of Exemp | t Purposes | | 33,708 |
| 13 (See Pa | Tot wor at X e No | VI-B Relationship of Activities to the A Explain below how each activity for which accomplishment of the foundation's exempt pur | s.) .ccomplishm | ent of Exemp | t Purposes | | 33,708 |

| Part | XVII | | n Regarding | Tran | sfers T | o and Tra | nsactio | ns and | Relationsh | ips W | /ith N | loncha | ritabl | e | |
|----------|-------|---|----------------------|-------------|---------------|-------------------|-------------|--|-------------------|----------|-----------|---------------|-----------|-----------|--|
| | | | ganizations | | | | | | | | | | | - | r |
| 1 | ın se | the organization of the ction 501(c) of the chizations? | | | | | | | | | | | | Yes | No |
| _ | - | sfers from the rep | norting founds | tion to | a nonch | acritable av | omnt or | -anization | of | | | | | | |
| а | | Sash | - | | | | | - | | | | | 1a(1) | | |
| | | Other assets . | | | | • • • | | | | | | | 1a(2) | - | ✓ |
| b | | er transactions: | | | | | | | | | | | 10(2) | | Ť |
| | | Sales of assets to | a noncharitat | le eve | mnt oras | anization | | | ł | | | | 1b(1) | | 1 |
| | | Purchases of asset | | | | | | | | | • • | | 1b(2) | | |
| | | Rental of facilities | | | | | | | | • • | | • • | 1b(3) | | 7 |
| | | Reimbursement a | | | | | | | | • | • • | | 1b(4) | | <u> </u> |
| | | oans or loan qua | | | | | | | | | | | 1b(5) | | 7 |
| | | Performance of se | | | | | | | | | | | 1b(6) | | 1 |
| С | | ing of facilities, e | | | | | | | | | | | 1c | | 1 |
| | | answer to any | | | | | | | | | | | | fair m | narket |
| | | e of the goods, o | | | | | | | | | | | | | |
| | | e in any transaction | | | | | | | | | | | | | |
| (a) Line | no | (b) Amount involved | (c) Name | of nonch | nantable ex | empt organiza | tion | (d) Desc | nption of transfe | rs, tran | saction | s, and sha | ring arra | angem | ents |
| N// | 1 | | | | | | - | | | | | | | | |
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| | la th | o formulation dire | | | Cilinata al | | - 4 | | | | | A! | | | |
| 2a | desc | e foundation dire cribed in section 5 | 501(c) of the C | ode (c | illialeu w | nun, or relat | 180 10, 0 | or in secti | ore tax-exemi | pt org | janiza | llions | 7 | | N |
| b | | es," complete the | | | | 1 30011011 00 | , (0)(0)) (| or 111 3ecti | 011 327 ? . | • • | | · · ∟ | _ Yes | (| NO |
| | " " | (a) Name of organ | | ieddie, | • | (b) Type of or | manization | | | (c) Des | crintion | n of relation | nehin | | |
| N/A | | (a) Hamb of organi | | | | (b) 1)po 01 01 | gamzation | | | (0) 000 | cription | TOTTERATION | GIIIP | | |
| IN/PA | | | | | | | | | | | | | | | |
| | | | | | | | | - | | | | | | | |
| | | <u> </u> | - | | . | • | | - | | | | <u> </u> | | | |
| | | ٠. | | | | ! | | | | | | | | | |
| | | er penalties of perjury, I | declare that I have | examine | d this return | n, including acco | ompanying : | schedules an | d statements, and | to the | best of r | ny knowled | lge and l | belief, r | t is true, |
| Sign | 12 | ect, and complete Decl | laration of preparer | other th | n taxpayer) | is based on all | information | of which pre | parer has any kno | wledge. | • | May the If | RS discu | ss this | return |
| Here | | Son Li | Falur | ~~ <u>~</u> | * | 18/10/15 | Pr | resident | | | | with the p | reparer | shown | below |
| | | nature of difficer or tru | stee | | | Date | Title | | | | — L | (see instru | ctions)? | ∕]Yes | ∐No |
| Paid | (| Print/Type preparer | r's name | 1 | Preparei | r's signature | | | Date | | Chack | . □ if F | TIN | | |
| Prep | arer | <u> </u> | | | | | | | | | | nployed | | | |
| Use | | | | | | | | | | Firm's | EIN ▶ | | | | |
| | | Firm's address ▶ | | | | | | | | Phone | _ | | - | | |

Schedule B

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

Name of the organization

Department of the Treasury Internal Revenue Service

Hastings Mutual Insurance Company Charitable Foundation

Schedule of Contributors

▶ 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.

OMB No 1545-0047

Employer identification number

20-2031029

| Organization type (check one): | | | | | |
|--------------------------------|---|--|--|--|--|
| Filers o | f: | Section: | | | |
| Form 99 | 90 or 990-EZ | 501(c)() (enter number) organization | | | |
| | | 4947(a)(1) nonexempt charitable trust not treated as a private foundation | | | |
| | | ☐ 527 political organization | | | |
| Form 99 | 90-PF | √ 501(c)(3) exempt private foundation | | | |
| | | 4947(a)(1) nonexempt charitable trust treated as a private foundation | | | |
| | | 501(c)(3) taxable private foundation | | | |
| <u> </u> | · | | | | |
| | nly a section 501(c)(7 | covered by the General Rule or a Special Rule. 7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See | | | |
| Genera | l Rule | | | | |
| V | For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions. | | | | |
| Special | Rules | | | | |
| | For an organization described in section 501(c)(3) 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), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions 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 an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I, II, and III. | | | | |
| | For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions exclusively for religious, charitable, etc., purposes, but no such contributions totaled 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 totaling \$5,000 or more during the year | | | | |
| Caution 990-EZ | ı. An organization tha | t is not covered by the General Rule and/or the Special Rules does not file Schedule B (Form 990, ust 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).

Name of organization

Hastings Mutual Insurance Company Charitable Foundation

Employer identification number

| 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 | Hastings Mutual Insurance Company 404 E Woodlawn Avenue Hastings, MI 49058 | \$120,000 | Person Payroll Noncash (Complete Part II for noncash contributions) | | |
| (a) No. | (b) Name, address, and ZIP + 4 | (c) Total contributions | (d) Type of contribution | | |
| 2 | General Re-New England Asset Management, Inc Pond View Corporate Center, 74 Batterson Park Road Farmington, CT 06032 | \$ | 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 | | |
| (a) No. | (b) Name, address, and ZIP + 4 | (c) Total contributions | (d) Type of contribution | | |
| | | \$ | Person | | |
| (a) No. | (b) Name, address, and ZIP + 4 | (c) Total contributions | (d) Type of contribution | | |
| | | . \$ | Person | | |
| (a) No. | (b) Name, address, and ZIP + 4 | (c) Total contributions | (d) Type of contribution | | |
| | | \$ | Person | | |

Employer identification number

| Part II | Noncash Property (see instructions). Use duplicate copies | of Part II if additional spa | ace 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 |
| | | \$ | |

Part III

Name of organization
Hastings Mutual Insurance Company Charitable Foundation

Employer identification number

| Part III | (10) that total more than \$1,000 fo | r the year from any itions completing Pa | one contributor. (rt III, enter the total | escribed in section 501(c)(7), (8), or Complete columns (a) through (e) and of exclusively religious, charitable, etc., ee instructions.) | | | |
|---------------------------|---|---|---|---|--|--|--|
| | Use duplicate copies of Part III if ad- | ditional space is nee | ded. | | | | |
| (a) No. from Part I | (b) Purpose of gift | (c) Use | | (d) Description of how gift is held | | | |
| | | | | | | | |
| | | (e) Trans | fer of gift | | | | |
| | | ., | | | | | |
| | Transferee's name, address, a | ind ZIP + 4 | Relation | nship of transferor to transferee | | | |
| ļ | | • | | | | | |
| | | *************************************** | | | | | |
| (a) No. from Part I | (b) Purpose of gift | (c) Use | of gift | (d) Description of how gift is held | | | |
| | | | | | | | |
| | | | | | | | |
| | | (e) Trans | fer of gift | | | | |
| - | Transferee's name, address, a | and ZIP + 4 | Relationship of transferor to transferee | | | | |
| | | | | | | | |
| | | | | | | | |
| (a) No. from | (b) Purpose of gift | (c) Use | of gift | (d) Description of how gift is held | | | |
| Part I | (b) ruipose of gitt | (0, 030 | | (a) Bessi pasi or new gire is new | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | ··· | (e) Trans | fer of gift | | | | |
| | Transferee's name, address, a | and ZIP + 4 | Relationship of transferor to transferee | | | | |
| | | *************************************** | | | | | |
| | | | | | | | |
| | | | | | | | |
| (a) No. from Part I | (b) Purpose of gift | (c) Use | of gift | (d) Description of how gift is held | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | (e) Transfer of gift | | | | | | |
| | Transferee's name, address, a | and ZIP + 4 | Relation | nship of transferor to transferee | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |

Form 990-PF Tax Year 2014 Part I, Line 18

Hastings Mutual Insurance Company Charitable Foundation EIN = 20-2031029

Taxes Detail

| Federal Income Taxes - Current | 305 |
|---------------------------------|-----|
| Federal Income Taxes - Deferred | 904 |

Total Taxes - Line 18 \$ 1,209

Form 990-PF Tax Year 2014 Part I, Line 23

Hastings Mutual Insurance Company Charitable Foundation EIN = 20-2031029

Other Expenses Detail

| Comerica Bank Charges | 205 |
|--------------------------------|-------|
| Foster Swift Legal Fees | 930 |
| GRNEAM Investment Manager Fees | 2,563 |
| Investment fees - Custodian | 694 |
| State of Michigan Filing Fee | 20 |

| Total Other Expenses - Line 23 | 4,412 |
|--------------------------------|-------|
|--------------------------------|-------|

Form 990-PF Tax Year 2014 Part II, Line 10a and 10b

Hastings Mutual Insurance Company Charitable Foundation EIN = 20-2031029

Line 10a. Detailed listing of U.S. and state government obligations held at year-end.

| Federal Natl Mtg Assn | 50,284 10 |
|-----------------------------------|-----------------|
| Federal Natl Mtg Assn | 50,061.25 |
| Federal Home Ln Mtg Corp | 49,044 45 |
| Federal National Mtg Assn Tranche | 195,262.00 |
| Federal National Mtg Assn | 249,739.75 |
| United States Treasury | 99,460.90 |
| United States Treasury | 99,562 50 |
| United States Treasury Note | 50,994.15 |
| United States Treasury Note | 25,356.45 |
| United States Treasury Note | 50,712.90 |
| United States Treasury Note | 51,472.65 |
| United States Treasury NTS | 50,130.85 |
| United States Treas NTS | 50,000.00 |
| United States Treasury NTS | 48,968 75 |
| United States Treasury | 98,078 10 |
| United States Treas NTS | 50,009.75 |
| United States Treas NTS | 48,953.10 |
| United States Treas NTS | 47,636 70 |
| United States Treas NTS | 197,078.20 |
| Total Line 10a | \$ 1,562,806 55 |

Line 10b. Detailed listing of corporate stocks held at year end.

848,880 20

Total Line 10b

\$ 848,880.20

Line 10c Detailed listing of corporate bonds held at year end

| CNH Equip Tr 2011-A | 5,488.72 |
|---------------------|----------|
| CNH Equip Tr 2012-A | 6,525.25 |

| Total Line 10c | \$ 12,013.9 | 97 |
|----------------|-------------|----|
| | | == |

Form 990-PF Tax Year 2014 Part IV, Line 1

Hastings Mutual Insurance Company Chantable Foundation EIN = 20-2031029

Capital Gains and Losses for Tax on Investment Income

| Security Description | Proceeds | Cost | Book Value | Tax Gain/Loss | Acq Date | Disp Date |
|-------------------------------|------------|------------|------------|---------------|------------|------------|
| Ally Master Owner Tr 2011-3 | 42,500 00 | 42,489 99 | 42,500 00 | - | 05/11/2011 | 05/15/2014 |
| Ally Master Owner Tr 2011-3 | 2,500 00 | 2,499 41 | 2,500 00 | | 05/11/2011 | 05/15/2014 |
| Ally Master Owner Tr 2011-3 | 5,000 00 | 4,998 82 | 5,000 00 | - | 05/11/2011 | 05/15/2014 |
| CNH Equip Tr 2011-A | 242 07 | 242 02 | 242 07 | - | 05/04/2011 | 07/15/2014 |
| CNH Equip Tr 2011-A | 272 47 | 272 41 | 272 47 | - | 05/04/2011 | 08/15/2014 |
| CNH Equip Tr 2011-A | 208 71 | 208 66 | 208 71 | - | 05/04/2011 | 09/15/2014 |
| CNH Equip Tr 2011-A | 280 16 | 280 10 | 280 16 | - | 05/04/2011 | 10/15/2014 |
| CNH Equip Tr 2011-A | 530 78 | 530 66 | 530 78 | - | 05/04/2011 | 11/15/2014 |
| CNH Equip Tr 2011-A | 741 02 | 740 85 | 741 02 | - | 05/04/2011 | 12/15/2014 |
| CNH Equip Tr 2011-A | 386 05 | 385 96 | 386 05 | - | 05/04/2011 | 03/15/2014 |
| CNH Equip Tr 2011-A | 1,155 93 | 1,155 67 | 1,155 93 | | 05/04/2011 | 04/15/2014 |
| CNH Equip Tr 2011-A | 378 19 | 378 10 | | - | 05/04/2011 | 05/15/2014 |
| CNH Equip Tr 2011-A | 325 87 | 325 80 | | - | 05/04/2011 | 06/15/2014 |
| CNH Equip Tr 2012-A | 7,297 30 | 7,296 76 | | | 03/14/2012 | 01/15/2014 |
| CNH Equip Tr 2012-A | 4,457 65 | 4,457 32 | 4,457.65 | | 03/14/2012 | 02/18/2014 |
| CNH Equip Tr 2012-A | 1,241 89 | 1,241 80 | 1,241 89 | - | 03/14/2012 | 03/15/2014 |
| CNH Equip Tr 2012-A | 1,055 77 | 1,055 69 | 1,055 77 | - | 03/14/2012 | 04/15/2014 |
| CNH Equip Tr 2012-A | 824 96 | 824 90 | 824 96 | | 03/14/2012 | 05/15/2014 |
| CNH Equip Tr 2012-A | 599 25 | 599 21 | 599 25 | - | 03/14/2012 | 06/15/2014 |
| CNH Equip Tr 2012-A | 882 60 | 882 53 | 882 60 | | 03/14/2012 | 07/15/2014 |
| CNH Equip Tr 2012-A | 590 76 | 590 72 | 590 76 | • | 03/14/2012 | 08/15/2014 |
| CNH Equip Tr 2012-A | 504 34 | 504 30 | 504 34 | | 03/14/2012 | 09/15/2014 |
| CNH Equip Tr 2012-A | 587 03 | 586 99 | 587 03 | - | 03/14/2012 | 10/15/2014 |
| CNH Equip Tr 2012-A | 1,547 00 | 1,546 89 | 1,547 00 | - | 03/14/2012 | 11/15/2014 |
| CNH Equip Tr 2012-A | 2,576 98 | 2,576 79 | 2,576 98 | - | 03/14/2012 | 12/15/2014 |
| Goldman Sacs F/S Federal Fund | 173 38 | 173 38 | 173 38 | - | 12/22/2008 | 01/29/2014 |
| Goldman Sacs F/S Federal Fund | 298,162 39 | 298,162 39 | 298,162 39 | | 12/22/2008 | 02/28/2014 |
| Goldman Sacs F/S Federal Fund | 7,125 00 | 7,125 00 | 7,125 00 | - | 12/22/2008 | 05/21/2014 |
| Goldman Sacs F/S Federal Fund | 38,300 00 | 38,300 00 | 38,300 00 | - | 12/22/2008 | 06/30/2014 |
| Goldman Sacs F/S Federal Fund | 3,174 04 | 3,174 04 | 3,174 04 | | 12/22/2008 | 07/31/2014 |
| Goldman Sacs F/S Federal Fund | 9,000 00 | 9,000 00 | | | 12/22/2008 | 08/31/2014 |
| Goldman Sacs F/S Federal Fund | 3.171 70 | 3,171 70 | | | 12/22/2008 | 09/30/2014 |
| Goldman Sacs F/S Federal Fund | 4,173 72 | 4,173 72 | | | 12/22/2008 | 10/31/2014 |
| Goldman Sacs F/S Federal Fund | 25,000 00 | 25,000 00 | | | 12/22/2008 | 11/30/2014 |
| Goldman Sacs F/S Federal Fund | 14,000 00 | 14,000 00 | | | 12/22/2008 | 12/31/2014 |
| Total | 478,967 01 | 478,952 57 | 478,967 01 | - | 12/22/2000 | 12/3//2014 |
| I Viai | 470,30701 | 710,73231 | 470,507.01 | | l | |

Form 990-PF Tax Year 2014 Part VIII section 1

Hastings Mutual Insurance Company Chantable Foundation EIN = 20-2031029

| (a) Name and address | (b) Title, and average hours per week devoted to position | (c) Compensation | (d) Contributions to employee benefit plans and deferred compensation | (e) Expense account, other allowances |
|---|---|------------------|---|---------------------------------------|
| Chnstopher J Fluke c/o Hastings Mutual Insurance Company 404 East Woodlawn Avenue Hastings, MI 49058 | Director Less than 5 hours per week | \$0 00 | \$0 00 | \$0 00 |
| Kellie M. Haines c/o Hastings Mutual Insurance Company 404 East Woodlawn Avenue Hastings, MI 49058 | Director Less than 5 hours per week | \$0 00 | \$0 00 | \$0 00 |
| Mark A Kolanowski c/o Hastings Mutual Insurance Company 404 East Woodlawn Avenue Hastings, MI 49058 | Director Less than 5 hours per week | \$0 00 | \$0 00 | \$0 00 |
| Bruce J Ostennk c/o Hastings Mutual Insurance Company 404 East Woodlawn Avenue Hastings, MI 49058 | Director Less than 5 hours per week | \$0 00 | \$0.00 | \$0.00 |
| James R Toburen c/o Hastings Mutual Insurance Company 404 East Woodlawn Avenue Hastings, MI 49058 | Director Less than 5 hours per week | \$0 00 | \$0 00 | \$0.00 |
| Joseph J Babiak c/o Hastings Mutual Insurance Company 404 East Woodlawn Avenue Hastings, MI 49058 | President Less than 5 hours per week | \$0 00 | \$0 00 | \$0 00 |
| Michael T Kinnary c/o Hastings Mutual Insurance Company 404 East Woodlawn Avenue Hastings, MI 49058 | Treasurer Less than 5 hours per week | \$0 00 | \$0 00 | \$0 00 |
| Michael W Puerner c/o Hastings Mutual Insurance Company 404 East Woodlawn Avenue Hastings, MI 49058 | Secretary Less than 5 hours per week | \$0 00 | \$0 00 | \$0 00 |

| Becklern | Address Line 1 | Address Line 2 | Amount | Purpose |
|---|---|--|-----------------------|--|
| AVALON MONPROFIT HOUSING CORPORATION | 1327 Jones Drive | Ann Arbor Mi 48105 | 90 009 | For the aphoneorable of the event titled "Home for Good" To provide funding to increase the ministens are returned for food being All proposed for the increase the movement or furnities exceeding |
| BARRY COUNTY UNITED WAY | 231 S Broadway Street | Hastings, MI 49058 | 2 500 00 | distributed and to cover the increasing horizon of learnings receiving flood. Chook Defree: Devolde for Medical Sandres for Students fundaments |
| BARRY INTERMEDIATE SCHOOL DISTRICT | 535 W Woodlawn Avenue | Hastings, MI 49058 | 1 141 92 | Sent Parner - Provide for Medical Services for Students fundralisers for special education and vanous other needs of students |
| BIG BROTHERS BIG SISTERS CORNERSTONE SCHOOLS ASSOCIATION | 3501 Covington Road 6861 E. Nevada | Kalamazoo Mi 49001 Detroit, Mi 48234 | 15 000 00 3 500 00 | To provide mentors to approximately 168 children in Barry County To support the school's general operating fund |
| | 302 S Technish Street | Adrian MI 49221 | 1 100 00 | To purchase food and supplies for their hot meals program in Lenawee County. Michigan |
| משורן פעריית כל בבילינורבי וויף | | | | Sent Partner - Provide for Medical Services for Students fundraisers for sectal education, safe graduation celebrations and vanous other |
| DELTON KELLOGO SCHOOLS | 327 N Grove Street | Detton, MI 49048 | 355 00 | |
| MACKS THE SHACK | 327 N. Grove Street | Detton, MJ 49048 | 1 000 00 | To provide funding to bring their new building up to code while remodeling and furnishing |
| | | | | To support 140 families who qualify for the free meals program at Waverly Schools with weekend "Survival Kits" filled with healthy food |
| DELTA WAVERLY ROTARY FOUNDATION | PO Box 60872 | Lansing, MI 48908 | 750 00 | |
| | | | | to furth those for thee programs from the New Jersey and Pentry and the Jackson Country Food Pentry allowing Friends Sharing Food to help feed a growing number of low-income families in |
| FRIENDS SHARMO FOOD, INC OREEN OABLES HAVEN | 403 Monroe Street PO Box 388 | Black River Falls, WJ 54615 Hastings MI 49058 | 3 800 00 | |
| | | | | |
| HASTINGS AREA SCHOOLS | 232 W Grand Street | Hastings MI 49058 | 3,021 19 | needs of students To anothers one hundred had him speed methods course for the |
| HOPE HOUSE RESCUE MISSION, INC | 1300 Grand Avenue | Middletown, OH 45044 | 1,300 00 | Fo puchase one fluidaed bed bull proof francess covers for all shelter |
| KYL YWYS HELDERS | 522 W Weter Street | Mondowl, WI 54755 | 2,094 00 | To fund a whoelchair lift to make outings easier and safer for a child born with Dandy Walker Variant |
| | | | | Stent Partner - Provide for Medical Services for Students, fundraisers for special education safe graduation celebrations and vanous other |
| LAKEWOOD PUBLIC SCHOOLS | 639 Jordan Lake Street | Lake Odesse MI 48849 | 516 00 | needs of students To halp provide medical advocacy for the Burmese in the Fort Wayne |
| LUTHERAN AGENCY OF MISSIONS TO BURMESE, INC | 225 E Woodland PO Box 15833 | Fort Wayne IN 46885 | 1,250 00 | N Broad |
| | | | | Stent Partner - Provide for Medical Services for Students, fundraisers for special education safe graduation celebrations and various other |
| MAPLE VALLEY SCHOOLS | 11090 Nashville Highway | Vermontville MI 49096 | 439 99 | needs of students To moments understanding of Mantal Illness and radius atloms |
| | | | | |
| MENTAL ILLNESS RESEARCH ASSOCIATION OLD NEWSBOYS OF FLINT, INC | 30200 Telegraph Road 6255 Taylor Drive | Bingham Farms MI 48025 Filmt MI 48507 | 1,900 90 1,900 90 | teachers students and parents To help support The Christmas Program |
| | | | | |
| | | | | Integregated programs designed to promote positive youth development and leadership while combating issues leading and promote the program of |
| PEACE NEIGHBORHOOD CENTER, INC | 1111 N Maple Road | Ann Arbor M3 48103 | 1,000 00 | increased drop-out alea, teen programs, rates facing the enrolled youth in the programs. |
| Control | 1730 Incluive Trail | Hacthes M 40058 | 1,000,00 | Sient Partner - Donations for Students Program Senior Class Lockin and counsaling sendices for students. |
| No. | *************************************** | COOP IN TORSION | 3 | Sent Pertner - Donations for Students Program and counseling |
| PINE REST CHRISTIAN MENTAL HEALTH SERVICES | 300 68tth Street SE | Grand Rapids MI 49501 | 65 050 00 | services for students To hair showed and neglected children, inconnection with children |
| ROYAL FAMILY KIDS | 2303 Marion Mt Gilead Road | Marion, OH 43301 | 300 00 | services build positive memories through a week long camp setting |
| SAFE HAVEN MINISTRIES, INC | 3501 Lake Eastbrook Blvd SE #335 | Grand Rapids, MI 49546 | 10 000 00 | - |
| | | 200000000000000000000000000000000000000 | 9 | To provide immunizations for low-income children from birth through |
| SUPER SHOT, INC | OR CIRY SURES, SURE SOO | ZOGON NI BUÁRAN 101 | 8 | |
| THORNAPPLE-KELLOGG AREA SCHOOLS | 10051 Green Lake Road | Middleville MI 49333 | 2 179 60 | needs of students |
| | | | | To provide camping and outdoor activities to young people who suner from Autism and Asperger's Syndrome who never get an opportunity |
| YMCA OF OREATER FLINT | 411 E Third Street | Flint, MI 48503 | 1 200 00 | to meet new friends To provide students of Star with TrueSuccess to help inspire them |
| | 2404 Chandlebook Date | Crard Decide M 40548 | 7 528 58 | |
| INCESTACESS, NC VILLAGE NORTHWEST UNLIMITED | 330 Village Circle | Sheldon (A 51201 | 2,000 00 | |
| | | | | to other employment training opportunities to students at Lighthouse Academy. Hope Academy of West Michigan and students in |
| WEDGWOOD CHRISTIAN BERVICES | 3300 36th Street SE | Grand Repids MI 49512 | 2 000 00 2 000 00 | Wedgwood a residential services To provide angoing support to Whaley Children's Center medical |
| WHALEY CHILDREN'S CENTER | 1201 N Grand Traverse Street | Flint, MI 48503 Grand Total | 7,500.00 | program which offers support to children who have expenenced severe traums because of abuse and neglect |
| | | | ļ , | |