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

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

OMB No 1545-0052

Department of the Treasury Internal Revenue Service

▶ Information about Form 990-PF and its separate instructions is at www.irs gov/form990of.

Ē	or ca	alendar year 2014 or tax year beginning			, 2014	, and end	ing		, 20
	Name	e of foundation		<del></del>				A Employer identif	ication number
_		GLAS A. & MARGARET E. DECAMP						20-829330	0
	Numi	per and street (or P O box number if mail is not delivere	d to street	address)		Room/su	te	B Telephone numb	per (see instructions)
								(61	l6) 945-4700
_		5 WEST M-179 HIGHWAY							
	City	or town, state or province, country, and ZIP or foreign po	stal code						
								C If exemption applic pending, check here	
-		TINGS, MI 49058		,··					
(	i Che	eck all that apply Initial return		Initial return	•	oublic cha	rity	D 1 Foreign organiza	itions, check here ▶
		Final return	<u> </u>	Amended re				2 Foreign organiza 85% test, check	
-	. Ch	Address change	(-)(2)	Name chang			$\dashv$		
		eck type of organization X Section 501						E If private foundation	n status was terminated
_		Section 4947(a)(1) nonexempt charitable trust market value of all assets at JAcco		her taxable pr				under section 507(t	o)(1)(A), check here . D
'			_	nethod XC		crual			in a 60-month termination
2015				ecify) ) must be on cas				under section 507(b	o)(1)(B), check here .
2		Analysis of Revenue and Expenses (The		·	on basis )				(d) Disbursements
~>		total of amounts in columns (b), (c), and (d)	ייניםן	evenue and benses per	(b) Net inve		(6	c) Adjusted net	for charitable
Z.		may not necessarily equal the amounts in column (a) (see instructions))	~~	books	іпсоп	ne		ıncome	purposes (cash basis only)
<u> </u>	1	Contributions, gifts, grants, etc., received (attach schedule)	<u> </u>	1,953,575.			-		(Sacri sacis only)
	2	Check if the foundation is not required to							
ב	3	attach Sch B		4.		4.			ATCH 1
	4	Dividends and interest from securities		104,452.	10	4,452.			ATCH 2
<u>,                                    </u>	5a	Gross rents							
	Ь	Net rental income or (loss)							
<u>.</u>	6a	Net gain or (loss) from sale of assets not on line 10		37,847.					
- 5	Ь	Gross sales price for all assets on line 6a 1,447,606.				·			
Revenue	7	Capital gain net income (from Part IV, line 2) .			3	7,847.			
œ	8	Net short-term capital gain							
	9	Income modifications							
	liva	Gross sales less returns and allowances							
	1	Less Cost of goods sold .							
	1	Gross profit or (loss) (attach schedule)						<del></del>	
	11	Other income (attach schedule)  Total Add lines 1 through 11	2	,095,878.	1 /	2,303.		<del></del>	
-	13			0	14	2,303.			
U.		Compensation of officers, directors, trustees, etc.  Other employee salaries and wages		<del></del> -					
nses	145	Penislonyplans enigloyee benefits							
Expe	183	Legal fees (attach schedule) oc		-					
ũ	П,			3,575.		1,788.			1,787
<u>.</u>	c	Accounting fees (attachrschedule) ATCH . 3 . Other professional fees (attachrschedule) . [.4.]		21,253.	1	9,753.			1,500
rat	17	Interest							
ist	18	Taxes (attach schedule) (see instructions)[5].		968.		968.			
ä	19	Depreciation (attach schedule) and depletion.							
Administrative	20	Occupancy							
7	21 22	Travel, conferences, and meetings		4,225.					4,225
ä	22	Printing and publications							
ū	23 24 25	Other expenses (attach schedule) ATCH .6 .		1,600.					1,600
rat	24	Total operating and administrative expenses.		21 621	_	, , , ,			
Ω	1	Add lines 13 through 23		31,621.	2.	2,509.			9,112.
0		Contributions, gifts, grants paid		933,300.		2 500			933,300.
	26	Total expenses and disbursements. Add lines 24 and 25		964,921.	2.	2,509.		C	942,412.
	27	Subtract line 26 from line 12	1	130 057		İ			
		Excess of revenue over expenses and disbursements	1	,130,957.	11	9,794.			
		Net investment income (if negative, enter -0-) Adjusted net income (if negative, enter -0-).		-		J, 194.			
		, a see not moonie (ii negative, citel -U-)		1					I

24	Unrestricted		
25	Temporarily restricted		
26	Permanently restricted		
	Foundations that do not follow SFAS 117, ▶ X check here and complete lines 27 through 31.		
27	Capital stock, trust principal, or current funds	4,203,934.	5,334,891.
28	Paid-in or capital surplus, or land, bldg , and equipment fund		
29	Retained earnings, accumulated income, endowment, or other funds		
30	Total net assets or fund balances (see instructions)	4,203,934.	5,334,891.

rt III Analysis of Changes in Net Assets or Fund Balances

Total liabilities and net assets/fund balances (see 

Foundations that follow SFAS 117, check here. and complete lines 24 through 26 and lines 30 and 31.

	Analysis of Changes III Net Assets of Fund Balances		
1	Total net assets or fund balances at beginning of year - Part II, column (a), line 30 (must agree with		
	end-of-year figure reported on prior year's return)	1_	4,203,934.
2	Enter amount from Part I, line 27a	2	1,130,957.
3	Other increases not included in line 2 (itemize) ▶	3	
4	Add lines 1, 2, and 3	4	5,334,891.
	Decreases not included in line 2 (itemize) ▶	5	
6	Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b), line 30	6	5,334,891.

4,203,934.

5,334,891

Page 3

Pa	rt IV Capital Gains	and Losses for Tax on Inv	estment Income			
		nd describe the kind(s) of property sold ( prick warehouse, or common stock, 200		(b) How acquired	(c) Date acquired	(d) Date sold
		P - Purchase D - Donation	(mo , day, yr )	(mo , day, yr )		
<u>1a</u>	SEE PART IV SCHE	DULE				
<u>b</u>				<u> </u>		
_ <u>c</u>	<del></del>					
d		· · · · · · · · · · · · · · · · · · ·				·
<u>e</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) minu	
<u>a</u>						
<u>b</u>						
<u>_</u> c	<del> </del>			_	<del></del>	
<u>d</u>						
<u>e</u>	<del></del>					
	Complete only for assets	showing gain in column (h) and owne	d by the foundation on 12/31/69	(1)	Gains (Col (h) ga	ain minus
	(i) F M V as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col (i) over col (j), if any	col	(k), but not less t Losses (from co	
a						
b						
_c	·			_		
d						
<u>e</u>						
2	Capital gain net income		gain, also enter in Part I, line 7 (loss), enter -0- in Part I, line 7	2		27 047
3	Net short-term capital as	ıı ) aın or (loss) as defined ın sections :	•	2		37,847.
3	_	art I, line 8, column (c) (see inst				
		· · · · · · · · · · · · · · · · · · ·				0
P۵			duced Tax on Net Investment I	3		
Wa		·	outable amount of any year in the ba	ase penoc	17	Yes X No
<u>''</u>						
<del>'</del> -	(a)		r, see the instructions before makin	g any enti	les (d)	
Cal	Base penod years lendar year (or tax year beginning in)	(b) Adjusted qualifying distributions	(c)  Net value of noncharitable-use assets		Distribution ra (col (b) divided by	tio
	2013	718,950.	3,571,164.			0.201321
	2012	197,425.	1,976,501.			0.099886
	2011	170,000.	41,817.			4.065332
	2010	0.	0.			0.
	2009	0.	0.			0.
	Total of line 1 column (d	1)		2	٠. " .	4.366539
3	Average distribution ratio	l)	e the total on line 2 by 5 or by the			
•		ndation has been in existence if les		3		0.873308
4	Enter the net value of no	ncharitable-use assets for 2014 fro	om Part X, line 5	4	5,	022,080.
5	Multiply line 4 by line 3.			5	4,	385,823.
6	Enter 1% of net investme	ent income (1% of Part I, line 27b).		6		1,198.
7	Add lines 5 and 6			7	4,	387,021.
8		ons from Part XII, line 4 reater than line 7, check the box	in Part VI, line 1b, and complete t	8 hat part i		942,412. rate See the

Pai	rt VII-A	Statements Regarding Activities (continued)			
11	At any	time during the year, did the foundation, directly or indirectly, own a controlled entity within the			
	meaning	of section 512(b)(13)? If "Yes," attach schedule (see instructions).	11		X
12		foundation make a distribution to a donor advised fund over which the foundation or a disqualified			
	person h	ad advisory privileges? If "Yes," attach statement (see instructions)	12		X
13		foundation comply with the public inspection requirements for its annual returns and exemption application?	13	Х	<u> </u>
		address ► N/A			
14	The boo	ks are in care of ▶ MATT NUSBAUM 269-945	-470	0	
	Located	at ▶102 COOK ROAD HASTINGS, MI ZIP+4 ▶ 49058		- <b>-</b> -	
15		4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - Check here		▶	
	and ente	er 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	4	Yes	No
	over a ba	ank, securities, or other financial account in a foreign country?	16		<u>X</u>
	See the	e instructions for exceptions and filing requirements for FinCEN Form 114, (formerly TD F 90-22.1) If	1		
		ter the name of the foreign country ▶ N/A			
Pai		Statements Regarding Activities for Which Form 4720 May Be Required	1		
	File Fo	rm 4720 if any item is checked in the "Yes" column, unless an exception applies.		Yes	No
1 a		he year did the foundation (either directly or indirectly)			
		age in the sale or exchange, or leasing of property with a disqualified person? Yes X No			
		ow money from, lend money to, or otherwise extend credit to (or accept it from) a			
		ualified person?			
		iner geode, earliese, ar identities to (or deept them norm) a disqualities person			
	• •	sfer any income or assets to a disqualified person (or make any of either available for penefit or use of a disqualified person)?  Yes X No			
		penefit or use of a disqualified person)?			
		dation agreed to make a grant to or to employ the official for a period after			
		ination of government service, if terminating within 90 days)			
		inswer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations			
_		53 4941(d)-3 or in a current notice regarding disaster assistance (see instructions)?	1b		Х
		ations relying on a current notice regarding disaster assistance check here			
c		foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that			
		corrected before the first day of the tax year beginning in 2014?	1c		Х
2		in failure to distribute income (section 4942) (does not apply for years the foundation was a private			
	operatin	g foundation defined in section 4942(j)(3) or 4942(j)(5))			
а	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?			
	If "Yes,"	list the years $\blacktriangleright \_\_\_N/A$	İ	ŀ	
b	Are the	re 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 )	<u>2b</u>	N,	<u>A</u>
C	-	ovisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here			
		N/A_,N			
3 a		foundation hold more than a 2% direct or indirect interest in any business enterprise			
		me during the year?			
ь		did it have excess business holdings in 2014 as a result of (1) any purchase by the foundation or			
	-	ied persons after May 26, 1969, (2) the lapse of the 5-year period (or longer period approved by the			
		sioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest, or (3) the lapse of			
		, 15-, or 20-year first phase holding period? (Use Schedule C, Form 4720, to determine if the	21	NT.	7
4-		on had excess business holdings in 2014)	3b	N/	X
		foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its	_4a		
L		e purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2014?	4b		Х
	SHAFILADI			n-PE	(2014)

Form				ECAMP FOUNDAT			293300	Page 6
Pai	rt VII-B Statements Regarding Ac	tivities	for Which Form	4720 May Be Red	quired (cont	inued)		
5a	During the year did the foundation pay or incu	r any amo	ount to					
	(1) Carry on propaganda, or otherwise attempt	ot to influ	ence legislation (section	on 4945(e))?	. Yes	X No		
	(2) Influence the outcome of any specific p						İ	
	directly or indirectly, any voter registration	dnve?			. Yes	X No		
	(3) Provide a grant to an individual for travel, s					X No		
	(4) Provide a grant to an organization other				· · · · · · · · · · · · · · · · · · ·			
	section 4945(d)(4)(A)? (see instructions)					X No		
	(5) Provide for any purpose other than reli							
	purposes, or for the prevention of cruelty to	o children	or animals?		Yes	X No		
b	If any answer is "Yes" to 5a(1)-(5), did an	y of the	transactions fail to	qualify under the	exceptions des	cribed in		
	Regulations section 53 4945 or in a current no						5b	N/A
	Organizations relying on a current notice regain						7	
С	If the answer is "Yes" to question 5a(4), of	-						
_	because it maintained expenditure responsibili			•	1 1	No		
	If "Yes," attach the statement required by Regul	•	-					
6a	Did the foundation, during the year, receive			rectly to hav premiii	me			
	on a personal benefit contract?	-	•			X No		
b	Did the foundation, during the year, pay premi						6ь	Х
_	If "Yes" to 6b, file Form 8870	omo, um	only of mandony, on t	personal benefit contro			100	
7a	At any time during the tax year, was the found	lation a n	arty to a prohibited ta	v shelter transaction?	Yes	X No		
b	If "Yes," did the foundation receive any process						7b	N/A
	Information About Officers,							
	and Contractors			•		•		
	List all officers, directors, trustees, foun	idation r	(b) Title, and average	(c) Compensation	(d) Contribut		(a) Fire and	
	(a) Name and address		hours per week devoted to position	(if not paid, enter -0-)	employee bene and deferred con	fit plans	(e) Expens other all	
		•						
ATC				d		d		0
		-						
					ļ			
	·							
						İ		
2	Compensation of five highest-paid emp	ployees	(other than thos	se included on lin	e 1 - see i	nstruction	s). If no	one, enter
	"NONE."	<u>-</u>	`			_		<u> </u>
(0)	Nome and address of each ampleuse and man than the	. E.O. OOO	(b) Title, and average	(2) (2	(d) Contribut employee b		(e) Expens	e account.
(a)	Name and address of each employee paid more than \$	30,000	hours per week devoted to position	(c) Compensation	plans and de compensa	ferred	other all	
					Compense	alon .		
	NONE							
		<b>-</b>						
						-		
		<del>-</del>						
<del></del>					L	I		
	number of other employees paid over \$50	000				_ L		

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Part VIII	Information About Officers, Directors, Trustees, Foundation Ma and Contractors (continued)	nagers, Highly Paid Emplo	yees,
3 Five	highest-paid independent contractors for professional services (see inst	tructions). If none, enter "NONE	."
	(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE			
	~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~		
			<del></del>
		<del></del>	
Total numi	per of others receiving over \$50,000 for professional services		<del></del>
	_		
Part IX-A	Summary of Direct Charitable Activities		
	undation's four largest direct charitable activities during the tax year. Include relevant statistica ons and other beneficianes served, conferences convened, research papers produced, etc.	I information such as the number of	Expenses
1 NONE			
2			
	~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~	<b>-</b>	
3			
<b>3</b>			
<b>*</b>			
Part IX-B	Summary of Program-Related Investments (see instructions)	<del> , </del>	
	he two largest program-related investments made by the foundation during the tax year on lines 1	and 2	Amount
1 NONE			
2			<del></del>
	***************************************		
All other p	rogram-related investments See instructions		
3 NONE			
Total Add	lines 1 through 3		

Pari	Minimum Investment Return (All domestic foundations must complete this part. Foreign see instructions)	gn founda	tions,
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc.,		
	purposes		
	Average monthly fair market value of securities	1a	5,017,963.
b	Average of monthly cash balances	1b	80,595.
С	Fair market value of all other assets (see instructions)	1c	
d	Total (add lines 1a, b, and c)	1d	5,098,558.
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	
3	Subtract line 2 from line 1d  Cash deemed held for charitable activities Enter 1 1/2% of line 3 (for greater amount, see	3	5,098,558.
4			
	instructions)	4	76,478.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3 Enter here and on Part V, line 4	5	5,022,080.
6	Minimum investment return. Enter 5% of line 5	6	251,104.
Pari	Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating four and certain foreign organizations check here ▶ and do not complete this part)	dations	
1	Minimum investment return from Part X, line 6	1	251,104.
2a	Tax on investment income for 2014 from Part VI, line 5		
b	Income tax for 2014 (This does not include the tax from Part VI).	1	
С	Add lines 2a and 2b	2c	2,396.
3	Distributable amount before adjustments Subtract line 2c from line 1	3	248,708.
4	Recoveries of amounts treated as qualifying distributions	4	
5	Add lines 3 and 4	5	248,708.
6	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,		<del></del>
	line 1	7	248,708.
Dari	XII Qualifying Distributions (see instructions)	<del>                                     </del>	
ı aıı	All Qualitying 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	942,412.
þ	Program-related investments - total from Part IX-B	1b	_
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc.,		<u> </u>
	purposes	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	942,412.
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	0
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	942,412.
	Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when co	alculating v	
	qualifies for the section 4940(e) reduction of tax in those years		

Form 990-PF (2014) Page 9 Part XIII Undistributed Income (see instructions) (d) (a) (b) (c) 2Ò13 Corpus Years prior to 2013 2014 Distributable amount for 2014 from Part XI. 248,708. Undistributed income, if any, as of the end of 2014 a Enter amount for 2013 only . . . . . . . b Total for pnor years 20 12 ,20 11 ,20 10 Excess distributions carryover, if any, to 2014 a From 2009 ..... **b** From 2010 . . . . . . c From 2011 . . . . . . 170,000. **d** From 2012 . . . . . . 99,644. e From 2013 . . . . . . [ 541,586. 811,230. Qualifying distributions for 2014 from Part XII, line 4 ▶ \$ 942,412. a Applied to 2013, but not more than line 2a . . . b Applied to undistributed income of prior years (Election required - see instructions)..... c Treated as distributions out of corpus (Election d Applied to 2014 distributable amount .... 248,708. 693,704. e Remaining amount distributed out of corpus . . . Excess distributions carryover applied to 2014 (If an amount appears in column (d), the same amount must be shown in column (a) ) Enter the net total of each column as indicated below: 1,504,934. a Corpus Add lines 3f, 4c, and 4e Subtract line 5 b Prior years' undistributed income Subtract 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
Undistributed income for 2013 Subtract line
4a from line 2a Taxable amount - see
instructions f Undistributed income for 2014 Subtract lines 4d and 5 from line 1. This amount must be distributed in 2015 ......... 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) . . . . . . . . . . . . Excess distributions carryover from 2009 not applied on line 5 or line 7 (see instructions) Excess distributions carryover to 2015. 1,504,934. Subtract lines 7 and 8 from line 6a . . . . . . . 10 Analysis of line 9 a Excess from 2010 . . . 170,000. b Excess from 2011 . . . 99,644. c Excess from 2012 . . .

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d Excess from 2013 . . .

e Excess from 2014 . . .

541,586.

693,704.

Pa	rt XIV Private Op	erating Foundations	(see instructions ar	nd Part VII-A. question	on 9)	NOT APPLICABLE
	If the foundation has					
	foundation, and the ruling				•	
ь	Check box to indicate v				section 4942(	)(3) or 4942(J)(5)
		Tax year		Prior 3 years	<u></u>	
2 a	Enter the lesser of the ad- justed net income from Part	(a) 2014	(b) 2013	(c) 2012	(d) 2011	(e) Total
	I or the minimum investment return from Part X for each		(-,	39,2572	(-/	
	year listed				<u> </u>	
	85% of line 2a					<del>                                     </del>
С	Qualifying distributions from Part XII, line 4 for each year listed					
d	Amounts included in line 2c not used directly for active conduct of exempt activities					
e	Qualifying distributions made directly for active conduct of exempt activities. Subtract line					
3	2d from line 2c Complete 3a, b, or c for the					
а	alternative test relied upon "Assets" alternative test - enter					
	<ol> <li>(1) Value of all assets</li> <li>(2) Value of assets qualifying under section</li> </ol>					
<b>.</b>	4942(j)(3)(B)(i)					
ь	"Endowment" alternative test- enter 2/3 of minimum invest-					
	ment return shown in Part X,					
	"Support" alternative test - enter					
٠	(1) Total support other than					
	gross investment income					
	(interest, dividends, rents, payments on securities					
	loans (section 512(a)(5)), or royalties)					
	(2) Support from general					
	public and 5 or more exempt organizations as					
	provided in section 4942 (j)(3)(B)(iii)					
	(3) Largest amount of support from an exempt					
	organization					
Da	(4) Gross investment income	tone Information //	Namelata Abia mant	and if the found	-4: b1 65 000	
	at any time	during the year - se	ee instructions.)	only if the found:	ation nad \$5,000	or more in assets
	Information Regarding			41 00/ -6 11 - 1-1-	1	
a	List any managers of the before the close of any	tax year (but only if the	ey have contributed more	ore than \$5,000) (Se	e section 507(d)(2))	ed by the foundation
	DOUGLAS A.		400/			
Ø	List any managers of ownership of a partner	the foundation who (	which the foundation	the stock of a corpo	oration (or an equally	y large portion of the
	Cameronip of a partitor	omportant entity of	winon the roundation	nas a 1070 or greater	increst	
	NONE					
	Information Regarding			• • •		<del></del>
	Check here ► X if the unsolicited requests for	or funds. If the founda	ition makes gifts, grai	o preselected charit nts, etc. (see instructi	able organizations a ons) to individuals o	and does not accept r organizations under
	other conditions, comp			o nomen to until a series	lookeen shalled to 1	dra a a d
_ d	The name, address, ar	iu telephone number (	or e-mail address of th	e person to wnom app	ilications should be add	aressea
b	The form in which appl	ications should be sub	mitted and information	n and materials they s	hould include:	
С	Any submission deadlir	nes.				
d	Any restrictions or lin	nitations on awards,	such as by geograp	phical areas, charitab	le fields, kınds of ı	nstitutions, or other

Part XV Supplementary Information (continued)

Page 11

3 Grants and Contributions Paid Dur	ring the Year or Appr	oved for F	uture Payment	<u> </u>
Recipient Name and address (home or business)	show any relationship to any foundation manager	Foundation status of	Purpose of grant or contribution	Amount
a Paid during the year	or substantial contributor	recipient		
ATCH 9				
		İ		
	<u> </u>			
Total	·····	<del></del>		933,300
b Approved for future payment				
<del></del>	<u> </u>			
Total	<u></u>	<u></u>	▶ 3b	

iter gross amounts unless otherwise	e indicated Unrela	ated business income	Excluded by	section 512, 513, or 514	(e)
Program service revenue	(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	Related or exempt function income (See instructions)
a					(00000 00(.01.0)
b					
c					
d					
e					
f					
g Fees and contracts from governm	nent agencies				
Membership dues and assessment	ts				
Interest on savings and temporary cash	<del></del>		14	4.	
Dividends and interest from securi			14	104,452.	
Net rental income or (loss) from re					
<ul><li>Debt-financed property</li></ul>					
b Not debt-financed property					
Net rental income or (loss) from persor					
Other investment income			1.0	25.015	
Gain or (loss) from sales of assets othe			18	37,847.	
Net income or (loss) from special e					
Gross profit or (loss) from sales of	,	<del></del>			
Other revenue a				<u>-</u>	
b					
C	1		<del></del> -		
			-		
d	1				
d	14.		+	142 202	
d e Subtotal Add columns (b), (d), and Total. Add line 12, columns (b), (d e worksheet in line 13 instructions	l), and (e)				142,30
e Subtotal Add columns (b), (d), and Total. Add line 12, columns (b), (d) e worksheet in line 13 instructions art XVI-B Relationship o ne No. Explain below how	i), and (e)	complishment of E	xempt Purp	oses  of Part XVI-A contribu	uted importantly to
d e Subtotal Add columns (b), (d), and Total. Add line 12, columns (b), (d) e worksheet in line 13 instructions Int XVI-B Relationship o ne No. Explain below how accomplishment of t	i), and (e)	complishment of E	xempt Purp	13	uted importantly to
e Subtotal Add columns (b), (d), and Total. Add line 12, columns (b), (d) e worksheet in line 13 instructions art XVI-B Relationship o ne No. Explain below how	i), and (e)	complishment of E	xempt Purp	oses  of Part XVI-A contribu	uted importantly to
d e Subtotal Add columns (b), (d), and Total. Add line 12, columns (b), (d) e worksheet in line 13 instructions Int XVI-B Relationship o ne No. Explain below how accomplishment of t	i), and (e)	complishment of E	xempt Purp	oses  of Part XVI-A contribu	uted importantly to
d e Subtotal Add columns (b), (d), and Total. Add line 12, columns (b), (d) e worksheet in line 13 instructions Int XVI-B Relationship o ne No. Explain below how accomplishment of t	i), and (e)	complishment of E	xempt Purp	oses  of Part XVI-A contribu	uted importantly to
d e Subtotal Add columns (b), (d), and Total. Add line 12, columns (b), (d) e worksheet in line 13 instructions Int XVI-B Relationship o ne No. Explain below how accomplishment of t	i), and (e)	complishment of E	xempt Purp	oses  of Part XVI-A contribu	uted importantly to
d e Subtotal Add columns (b), (d), and Total. Add line 12, columns (b), (d) e worksheet in line 13 instructions Int XVI-B Relationship o ne No. Explain below how accomplishment of t	i), and (e)	complishment of E	xempt Purp	oses  of Part XVI-A contribu	uted importantly to
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d e Subtotal Add columns (b), (d), and Total. Add line 12, columns (b), (d) e worksheet in line 13 instructions Int XVI-B Relationship o ne No. Explain below how accomplishment of t	i), and (e)	complishment of E	xempt Purp	oses  of Part XVI-A contribu	uted importantly to
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d e Subtotal Add columns (b), (d), and Total. Add line 12, columns (b), (d) e worksheet in line 13 instructions Int XVI-B Relationship o ne No. Explain below how accomplishment of t	i), and (e)	complishment of E	xempt Purp	oses  of Part XVI-A contribu	uted importantly to
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d  Bubtotal Add columns (b), (d), and Total. Add line 12, columns (b), (d e worksheet in line 13 instructions rt XVI-B Relationship one No.  Explain below how accomplishment of t	i), and (e)	complishment of E	xempt Purp	oses  of Part XVI-A contribu	uted importantly to
Subtotal Add columns (b), (d), and Total. Add line 12, columns (b), (d) e worksheet in line 13 instructions Int XVI-B Relationship o The No. Explain below how accomplishment of t	i), and (e)	complishment of E	xempt Purp	oses  of Part XVI-A contribu	uted importantly to
d  Bubtotal Add columns (b), (d), and Total. Add line 12, columns (b), (d e worksheet in line 13 instructions rt XVI-B Relationship one No.  Explain below how accomplishment of t	i), and (e)	complishment of E	xempt Purp	oses  of Part XVI-A contribu	uted importantly to
d e Subtotal Add columns (b), (d), and Total. Add line 12, columns (b), (d) e worksheet in line 13 instructions Int XVI-B Relationship o ne No. Explain below how accomplishment of t	i), and (e)	complishment of E	xempt Purp	oses  of Part XVI-A contribu	uted importantly to
d e Subtotal Add columns (b), (d), and Total. Add line 12, columns (b), (d) e worksheet in line 13 instructions Int XVI-B Relationship o ne No. Explain below how accomplishment of t	i), and (e)	complishment of E	xempt Purp	oses  of Part XVI-A contribu	uted importantly to
d e Subtotal Add columns (b), (d), and Total. Add line 12, columns (b), (d) e worksheet in line 13 instructions Int XVI-B Relationship o ne No. Explain below how accomplishment of t	i), and (e)	complishment of E	xempt Purp	oses  of Part XVI-A contribu	uted importantly to
e Subtotal Add columns (b), (d), and Total. Add line 12, columns (b), (d) e worksheet in line 13 instructions art XVI-B Relationship o ne No. Explain below how accomplishment of t	i), and (e)	complishment of E	xempt Purp	oses  of Part XVI-A contribu	uted importantly to
d e Subtotal Add columns (b), (d), and Total. Add line 12, columns (b), (d) e worksheet in line 13 instructions Int XVI-B Relationship o ne No. Explain below how accomplishment of t	i), and (e)	complishment of E	xempt Purp	oses  of Part XVI-A contribu	uted importantly to
e Subtotal Add columns (b), (d), and Total. Add line 12, columns (b), (d) e worksheet in line 13 instructions art XVI-B Relationship o ne No. Explain below how accomplishment of t	i), and (e)	complishment of E	xempt Purp	oses  of Part XVI-A contribu	uted importantly to
e Subtotal Add columns (b), (d), and Total. Add line 12, columns (b), (d) e worksheet in line 13 instructions art XVI-B Relationship o ne No. Explain below how accomplishment of t	i), and (e)	complishment of E	xempt Purp	oses  of Part XVI-A contribu	uted importantly to
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e Subtotal Add columns (b), (d), and Total. Add line 12, columns (b), (d) we worksheet in line 13 instructions art XVI-B Relationship o ne No. Explain below how accomplishment of t	i), and (e)	complishment of E	xempt Purp	oses  of Part XVI-A contribu	uted importantly to

### DOUGLAS A. & MARGARET E. DECAMP FOUNDATION 20-8293300 Page Information Regarding Transfers To and Transactions and Relationships With Noncharitable Exempt Organizations Part XVII

1					-	ny other organization descr		Yes	No	
			ode (other than	section 501(c)(3) organ	izations) or in s	section 527, relating to poli	itical			
_	-	izations?								
а				a noncharitable exemp					١	
	(1) Ca	asn	• • • • • • • • •	• • • • • • • • • • • • • • • • • • • •	• • • • • • • •		1a(1)	-	X	
<b>L</b>	(2) Other assets									
D	(A) Color of another and the late									
	(1) 00	rebaces of accets fr	nchantable exer	npt organization	• • • • • • • •		1b(1)		X	
	(2) Pu	antal of facilities	om a nonchanta	ible exempt organization.	• • • • • • • •		1b(2)		X	
	(3) No	sintal of facilities, equi	pinent, or other	assets	• • • • • • • •		1b(3)		X	
	(5) 10	simbursement arrang	ements	• • • • • • • • • • • • • • • • • • • •	• • • • • • • •		1b(4)		x	
	(6) Pe	offormance of service	s or memberet	un or fundraising solicitat	· · · · · · · · · · · · · · · · · · ·		10(5)		$\frac{\hat{x}}{x}$	
_	Sharin	on of facilities, equipm	s of membersh nent mailing he	te other seets or paid.	omplovoce		10(6)		$\frac{\hat{x}}{x}$	
ч	If the	answer to any of th	ne above is "Ve	s " complete the follow	employees	Column (b) should always	show the	fa.r ==		
u	value	of the goods other	assets or servi	ces given by the report	ing scriedule	If the foundation received	Silow tite i	fair m	arket	
	value	in any transaction or	sharing arranc	sement, show in column	(d) the value	of the goods, other assets	or service	s rece	eived	
(a) L	ne no	(b) Amount involved		oncharitable exempt organizati		scription of transfers, transactions, a				
<u> </u>			NOT APPLIC	<del></del>	(4,550	Total of transcript, transcript, tr	na snaing and	ingerne	1113	
				<u> </u>						
			<u> </u>	<del></del>						
		, <u></u>								
								-		
_										
				· <u> </u>						
2a	Is the	foundation directly of	or indirectly aff	iliated with, or related	to, one or mor	e tax-exempt organizations				
	descri	bed in section 501(c)	of the Code (ot	her than section 501(c)(	3)) or in section	n 527?	Ye	s X	] No	
		s," complete the follow								
		(a) Name of organization	1	(b) Type of organiz	ation	(c) Description of n	elationship			
NO.	T APP	PLICABLE		<u> </u>						
				<u> </u>						
		<del> </del>								
				<u> </u>						
	1									
	Under	r penalties of perjury, I declar ct, and complete Declaration of	re that I have examin preparer (other than ta	ed this return, including accompa expayer) is based on all information of	anying schedules and of which preparer has a	statements, and to the best of my kil	nowledge and be	elief, it	ıs true,	
Sign		0100		· · · · · · · · · · · · · · · · · · ·		· · · ·	the IRS discuss	this	retum	
lere	_ا د	2HUELan	<del>*</del>	1 2/8/15	_ Pre	7 —			below	
	Sigi	nature of officer or trustee	O	Date /	Title	(see ins	structions)?	Yes	X No	
		D-40		<del></del>			<del></del>			
Paid		Print/Type preparer's nar		Preparer's signature		05/05/15 Check	It PIIN			
	oarer		JRKIN-ZITA	Beradette	D. Bela	Jacii-cripioj			5	
			NST & YOUNG	G US LLP		Firm's EIN ▶ 3	4-656559	6		
JSE	Only		5 NORTH WAC	CKER DRIVE						
		I CH	ICAGO, IL		606	606-6301 Phone no 31	2-879-20			
							E.m. 990		20141	

### Schedule B

(Form 990, 990-EZ, or 990-PF) Department of the Treasury Internal Revenue Service

Name of the organization

### **Schedule of Contributors**

OMB No 1545-0047

2014

Employer identification number

990-PF)

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

Information about Schedule R (Form 990, 990, EZ, or 990, BE) and its instructions is a

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

DOUGLAS A. & MARGARET E. DECAMP FOUNDATION 20-8293300 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, 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 33 1/3 % 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 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

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)

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

Schedule B (Form 990, 990-EZ, or 990-PF) (2014)

Name of organization DOUGLAS A. & MARGARET E. DECAMP FOUNDATION Employer identification number 20-8293300

Part I	Contributors (see instructions) Use duplicate copies of Pa	rt I if additional space is nee	eded.
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1_	DOUGLAS & MARGARET DECAMP  3485 WEST M-179 HIGHWAY  HASTINGS, MI 49058	\$1,450,000.	Person X Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
2_	FLEXFAB HORIZONS INTERNATIONAL, INC.  102 COOK ROAD  HASTINGS, MI 49058	\$ <u>503,575.</u>	Person X Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
<b>-</b>		\$	Person Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
<b>-</b>		\$	Person Payroli Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions)

Schedule B (Form 990, 990-EZ, or 990-PF) (2014)

Name of organization DOUGLAS A. & MARGARET E. DECAMP FOUNDATION

Employer identification number

20-8293300

Part II	Noncash Property (see instructions). Use duplicate copies of Pa	art II if additional space is nee	eded.
(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
<b>-</b>		\$	
(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 organization DOUGLAS A. & MARGARET E. DECAMP FOUNDATION Employer identification number 20-8293300 Part III Exclusively religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8), or (10) that total more than \$1,000 for the year from any one contributor. Complete columns (a) through (e) and the following line entry For organizations completing Part III, enter the total of exclusively religious, charitable, etc., contributions of \$1,000 or less for the year (Enter this information once. See instructions ) ▶ \$\_\_\_\_\_ Use duplicate copies of Part III if additional space is needed. (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, 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 (e) Transfer of gift Transferee's name, address, 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 (e) Transfer of gift Transferee's name, address, 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 (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee

### **SCHEDULE D** (Form 1041)

**Capital Gains and Losses** 

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

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

Employer Identification number

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

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

2014

OMB No 1545-0092

	OOUGLAS A. & MARGARET E. DECAMP FOUNDA	TION		20-82933	300	
	: Form 5227 filers need to complete only Parts I and II					
Par	Short-Term Capital Gains and Losses - Ass	ets Held One Yea	r or Less			
the I This	instructions for how to figure the amounts to enter on nes below. form may be easier to complete if you round off cents note dollars	(d) Proceeds (sales pnce)	(e) Cost (or other basis)	(g) Adjustment to gain or loss Form(s) 8949, I line 2, column	from Part I,	(h) Gain or (loss) Subtract column (e) from column (d) and combine the result with column (g)
	Totals for all short-term transactions reported on Form 1099-B for which basis was reported to the IRS and for which you have no adjustments (see instructions) However, if you choose to report all these transactions on Form 8949, leave this line blank and go to line 1b.					
	Totals for all transactions reported on Form(s) 8949 with Box A checked	384,746.	381,174.			3,572.
2	Totals for all transactions reported on Form(s) 8949 with Box B checked					
3	Totals for all transactions reported on Form(s) 8949 with Box C checked					
4	Short-term capital gain or (loss) from Forms 4684, 62	252, 6781, and 8824			4	
5 6	Net short-term gain or (loss) from partnerships, S con Short-term capital loss carryover Enter the amount Carryover Worksheet	nt, if any, from line	e 9 of the 2013		<u>5</u> 6	( )
7	Net short-term capital gain or (loss). Combine line line 17, column (3) on the back	es 1a through 6 in	column (h) Enter	here and on	7	3,572.
Par	Long-Term Capital Gains and Losses - Ass	ets Held More Tha	n One Year			•
the li	nstructions for how to figure the amounts to enter on nes below	(d) Proceeds	(e) Cost	(g) Adjustment to gain or loss	from	(h) Gain or (loss) Subtract column (e) from column (d) and
	form may be easier to complete if you round off cents note dollars	(sales pnce)	(or other basis)	Form(s) 8949, F line 2, column		combine the result with column (g)
	Totals for all long-term transactions reported on Form 1099-B for which basis was reported to the IRS and for which you have no adjustments (see instructions) However, if you choose to report all these transactions on Form 8949, leave this line blank and go to line 8b.			<u> </u>		
8b	Totals for all transactions reported on Form(s) 8949 with Box D checked	1,045,402.	1,028,585.	_		16,817.
9	Totals for all transactions reported on Form(s) 8949 with Box E checked	-				
	Totals for all transactions reported on Form(s) 8949 with Box F checked					
11	Long-term capital gain or (loss) from Forms 2439, 46	84, 6252, 6781, and	8824		11	
12	Net long-term gain or (loss) from partnerships, S corp	orations, and other e	states or trusts		12	
13	Capital gain distributions				13	17,458.
14 15	Gain from Form 4797, Part I	t, if any, from line	14 of the 2013	Capital Loss	14	
16	Net long-term capital gain or (loss). Combine lines line 18a, column (3) on the back	8a through 15 in	column (h) Enter	here and on	15	
		. <b></b> .		🗩	16	34,275.

For Paperwork Reduction Act Notice, see the Instructions for Form 1041.

Schedule D (Form 1041) 2014

Sched	dule D (Form 1041) 2014				Page 2
Par	t III Summary of Parts I and II		(1) Beneficiaries'	(2) Estate's	
	Caution: Read the instructions before completing this particle	art	(see instr.)	or trust's	(3) Total
17	Net short-term gain or (loss)	17			3,572.
18	Net long-term gain or (loss):				
а	Total for year	18a			34,275.
b	Unrecaptured section 1250 gain (see line 18 of the wrksht)	18b			
	28% rate gain	18c			
	Total net gain or (loss). Combine lines 17 and 18a ▶	19			37,847.
Note gains neces	e: If line 19, column (3), is a net gain, enter the gain on Form 1041, line 4 , go to Part V, and <b>do not</b> complete Part IV If line 19, column (3), is a n ssary	or Fo et loss	rm 990-T, Part I, line , complete Part IV ai	4a) If lines 18a and nd the <b>Capital Loss</b>	1 19, column (2), are ne Carryover Worksheet, a
Par	t IV Capital Loss Limitation				
20	Enter here and enter as a (loss) on Form 1041, line 4 (or Form 990-T, F	Part I, I	ne 4c, if a trust), the s	maller of	
a	The loss on line 19, column (3) or b \$3,000			20	(
Loss	If the loss on line 19, column (3), is more than \$3,000, or if Form 1041, Carryover Worksheet in the instructions to figure your capital loss carryover	page	1, line 22 (or Form 99	90-1, line 34), is a lo	ss, complete the Capita
Par		es			
	1041 filers. Complete this part only if both lines 18a and 19 in col		2) are gains, or an	amount is entered	In Part I or Part II and
there	e is an entry on Form 1041, line 2b(2), and Form 1041, line 22, is mor	re that	n zero		
	ion: Skip this part and complete the Schedule D Tax Worksheet in the	ınstrud	ctions if		
	ther line 18b, col (2) or line 18c, col (2) is more than zero, or				
	oth Form 1041, line 2b(1), and Form 4952, line 4g are more than zero				
Form	n 990-T trusts. Complete this part only if both lines 18a and 19 a	ire ga	ins, or qualified div	idends are include	ed in income in Part
of PC	orm 990-T, and Form 990-T, line 34, is more than zero. Skip this part ner line 18b, col. (2) or line 18c, col. (2) is more than zero.	and c	omplete the Sched	ule D Tax Worksi	neet in the instruction:
			<del></del>	<del></del>	
21	Enter taxable income from Form 1041, line 22 (or Form 990-T, line 3	34)	. 21		
22	Enter the smaller of line 18a or 19 in column (2)				
	but not less than zero				
23	Enter the estate's or trust's qualified dividends				
	from Form 1041, line 2b(2) (or enter the qualified				
	dividends included in income in Part I of Form 990-T) 23		<b>-</b>		
24	Add lines 22 and 23				
25	If the estate or trust is filing Form 4952, enter the				
	amount from line 4g, otherwise, enter -0 ▶ 25		<b></b>		
26	Subtract line 25 from line 24 If zero or less, enter -0		. 26		
27	Subtract line 26 from line 21 If zero or less, enter -0				
28	Enter the smaller of the amount on line 21 or \$2,500		. 28		
29	Enter the smaller of the amount on line 27 or line 28				
30	Subtract line 29 from line 28 If zero or less, enter -0- This amount is			▶ 30	
31	Enter the smaller of line 21 or line 26				
32	Subtract line 30 from line 26				
	Enter the smaller of line 21 or \$12,150				
34	Add lines 27 and 30				
35	Subtract line 34 from line 33 If zero or less, enter -0				
	Enter the smaller of line 32 or line 35				
37	Multiply line 36 by 15%			▶ 37	
38	Enter the amount from line 31				
	Add lines 30 and 36				
	Subtract line 39 from line 38 If zero or less, enter -0				
	Multiply line 40 by 20%			▶ 41	
42	Figure the tax on the amount on line 27 $$ Use the 2014 Tax Rate Schedule for I	Estates			
	and Trusts (see the Schedule G instructions in the instructions for Form 1041)				
	Add lines 37, 41, and 42				
44	Figure the tax on the amount on line 21. Use the 2014 Tax Rate Schedule for I	Estates			
	and Trusts (see the Schedule G instructions in the instructions for Form 1041)		44		
45	Tax on all taxable income. Enter the smaller of line 43 or line 44 h	here a	nd on Form 1041,	Schedule	

### Form 8949

### Sales and Other Dispositions of Capital Assets

▶ Information about Form 8949 and its separate instructions is at www.irs.gov/form8949.

OMB No 1545-0074

Department of the Treasury Internal Revenue Service

File with your Schedule D to list your transactions for lines 1b, 2, 3, 8b, 9, and 10 of Schedule D.

Name(s) shown on return

DOUGLAS A. & MARGARET E. DECAMP FOUNDATION

Social security number or taxpayer identification number 20-8293300

Before you check Box A, B, or C below, see whether you received any Form(s) 1099-B or substitute statement(s) from your broker. A substitute statement will have the same information as Form 1099-B. Either may show your basis (usually your cost) even if your broker did not report it to the IRS Brokers must report basis to the IRS for most stock you bought in 2011 or later (and for certain debt instruments your bought in 2014 or later)

Short-Term. Transactions involving capital assets you held 1 year or less are short-term. For long-term transactions, see page 2

Note. You may aggregate all short-term transactions reported on Form(s) 1099-B showing basis was reported to the IRS and for which no adjustments or codes are required. Enter the total directly on Schedule D, line 1a, you are not required to report these transactions on Form 8949 (see instructions)

You must check Box A, B, or C below. Check only one box. If more than one box applies for your short-term transactions, complete a separate Form 8949, page 1, for each applicable box. If you have more short-term transactions than will fit on this page for one or more of the boxes, complete as many forms with the same box checked as you need

(B) Short-term transactions rep (C) Short-term transactions no				. oportou to the ir			
1 (a) Description of property	(b) Date acquired	(c) Date sold or	(d) Proceeds	(e) Cost or other basis See the	Adjustment, if any, to gain or loss if you enter an amount in column (g), enter a code in column (f) See the separate instructions		(h) Gain or (loss).
(Example 100 sh XYZ Co)	(Mo , day, yr )	disposed (Mo , day, yr )	(sales price) (see instructions)	Note below and see Column (e) in the separate instructions	(f) Code(s) from instructions	(g) Amount of adjustment	Subtract column (e) from column (d) and combine the result with column (g)
VANGUARD ST FED ADM	VARIOUS	09/08/2014	120,179.	121,107.			-928.
VANGUARD TOTAL BOND							
MARKET INDEX	VARIOUS	09/08/2014	155,903.	157,684.	1		-1,781.
DFA WORLD EX US GOVT		1					
FIXED	VARIOUS	10/15/2014	108,664.	102,383.			6,281.
							-
							·
							•
							<del></del>
2 Totals. Add the amounts in column act negative amounts) Enter each your Schedule D, line 1b (if Box A Box B above is checked) or line 3.	n total here and above is check	d include on ed), line 2 (if	394 746	391 174			2 572

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

Before you check Box D, E, or F below, see whether you received any Form(s) 1099-B or substitute statement(s) from your broker. A substitute statement will have the same information as Form 1099-B. Either may show your basis (usually your cost) even if your broker did not report it to the IRS Brokers must report basis to the IRS for most stock you bought in 2011 or later (and for certain debt instruments you bought in 2014 or later)

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

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

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

	(D) Long-term transactions reported on Form(s) 1099-B showing basis was reported to the IRS (see Note above)
	(E) Long-term transactions reported on Form(s) 1099-B showing basis was not reported to the IRS
Г	 (E) 1 1 1 1 1 1 1 1

(F) Long-term transactions	not reported t	o you on For	m 1099-B				
1 (a) Description of property	(b) Date acquired	(c) Date sold or disposed	(d) Proceeds (sales price)	(e) Cost or other basis See the	Adjustment, if any, to gain or loss if you enter an amount in column (g), enter a code in column (f) See the separate instructions		(h) Gain or (loss) Subtract column (e) from column (d) and
(Example 100 sh XYZ Co)	(Mo, day, yτ)	(Mo, day, yr)	(see instructions)	Note below and see Column (e) in the separate instructions	(f) Code(s) from instructions	(g) Amount of adjustment	combine the result with column (g)
VANGUARD ST FEDERAL ADMIN	VARIOUS	09/08/2014	319,427.	321,895.		· · · ·	-2,468.
VANGUARD TOTAL BOND	<del></del>		313,427.	321,033.	1		2,400.
MARKET INDEX	VARIOUS	09/08/2014	327,546.	331,288.			-3,742.
DFA WORLD EX US GOVT							
FIXED INCORP	VARIOUS	10/15/2014	398,429.	375,402.			23,027.
	<del></del>			<u> </u>			
						- "	<del></del>
2 Totals. Add the amounts in co (subtract negative amounts) E include on your Schedule D, lii checked), line 9 (if Box E abov (if Box F above is checked) ▶	Enter each tota ne 8b (if Box D	l here and above is	1,045,402.	1028585.			16,817.

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

CASH INVESTMENTS	
T ON TEMPORARY CA	
PART I - INTEREST	
FORM 990PF,	

REVENUE	AND NET	PER BOOKS INCOME	4.	4.
		DESCRIPTION	GRAND WEALTH MANAGEMENT (FIDELITY)	TOTAL

ATTACHMENT 1 PAGE 20

## PART I - DIVIDENDS AND INTEREST FROM SECURITIES FORM 990PF,

NET INVESTMENT INCOME	104,452.	104,452.
REVENUE AND EXPENSES PER BOOKS	104,452.	104,452.
DESCRIPTION	GRAND WEALTH MANAGEMENT (FIDELITY)	TOTAL

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EVG	7
	Ξ
\ E E	747
-	r

# FORM 990PF, PART I - ACCOUNTING FEES

CHARITABLE <u>PURPOSES</u>	1,787.	1,787.
ADJUSTED NET INCOME		
NET INVESTMENT INCOME	1,788.	1,788.
REVENUE AND EXPENSES PER BOOKS	3,575.	3,575.
		TOTALS
DESCRIPTION	ERNST & YOUNG LLP	

## PART I - OTHER PROFESSIONAL FEES FORM 990PF,

CHARITABLE <u>PURPOSES</u>	1,500.	1,500,
NET INVESTMENT INCOME	62. 19,691.	19,753.
REVENUE AND EXPENSES PER BOOKS	1,500. 62. 19,691.	21,253.
DESCRIPTION	MILT ROHWER CONSULTING FEES FIFTH THIRD BANK FEES GWM (FIDELITY) ACCOUNT FEES	TOTALS

### PART I - TAXES FORM 990PF,

NET INVESTMENT INCOME	. 896	896
REVENUE AND EXPENSES PER BOOKS	. 896	896
DESCRIPTION	FOREIGN TAXES - GWM (FIDELITY)	TOTALS

- OTHER EXPENSES DESCRIPTION COUNCIL OF MI FDN FEES PART I FORM 990PF,

REVENUE AND EXPENSES PER BOOKS

1,600.

TOTALS

1,600. CHARITABLE PURPOSES

1,600.

- OTHER INVESTMENTS FORM 990PF, PART II

DESCRIPTION

MUTUAL FUNDS

ENDING BOOK VALUE

ENDING FMV

5,225,545.

5,850,969.

TOTALS

5,225,545.

5,850,969.

NAME AND ADDRESS	TITLE AND AVERAGE HOURS PER WEEK DEVOTED TO POSITION	COMPENSATION	CONTRIBUTIONS TO EMPLOYEE BENEFIT PLANS	EXPENSE ACCT AND OTHER ALLOWANCES
DOUGLAS A. DECAMP 3485 W. M-179 HIGHWAY HASTINGS, MI 49058	PRESIDENT .10	0	0	0
KENT VANA P.O. BOX 352 GRAND RAPIDS, MI 49501	SECRETARY .10	0	0	0
RICHARD RATHBURN P.O. BOX 352 GRAND RAPIDS, MI 49501	TREASURER .10	О	0	0
JAMES DECAMP 3485 W. M-179 HIGHWAY HASTINGS, MI 49058	EXECUTIVE DIRECTOR	0	0	0
MARGARET DECAMP 3485 W. M-179 HIGHWAY HASTINGS, MI 49058	DIRECTOR .10	0	0	0
DEBRA VANDERVEEN 3485 W. M-179 HIGHWAY HASTINGS, MI 49058	DIRECTOR .10	0	0	0

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

АТТАСНМЕМТ 9

## DOUGLAS A & MARGARET E DECAMP FOUNDATION

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THE	
PAID DURING	
PAID	
UTTONS	
AND CONTRIBUTION	
AND	
GRANIS	
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PART	
SOPE	
FORM	

933,300 TOTAL CONTRIBUTIONS PAID

ATTACHMENT 9 PAGE 29

V 14-4.6F

DOUGLAS A. & MARGARET E. DECAMP FOUNDATION 20-8293300
FORM 990-PF - PART IV
CAPITAL GAINS AND LOSSES FOR TAX ON INVESTMENT INCOME

Kınd of I					ITVĻSI	P	Date	Date sold
Gross sale	Depreciation	Description  Cost or FMV Adj basis Excess of			Ď	acquired Gain		
price less expenses of sale	allowed/ allowable	other	as of	as of	FMV over		or	
expenses of sale	allowable	basis   12/31/69   12/31/69   adi basis  TOTAL CAPITAL GAIN DISTRIBUTIONS				(loss) 17,458.		
120,179.		VANGUARD ST 121,107.	VANGUARD ST FED ADM 121,107.			Р	VARIOUS -928.	09/08/2014
155,903.		VANGUARD TOT	TAL BOND MAI	RKET INDEX		P	VARIOUS -1,781.	09/08/2014
108,664.		DFA WORLD EX 102,383.	US GOVT F	IXED		Р	VARIOUS 6,281.	10/15/2014
319,427.		VANGUARD ST FEDERAL ADMIN 321,895.			P	VARIOUS -2,468.	09/08/2014	
327,546.		VANGUARD TOT	VANGUARD TOTAL BOND MARKET INDEX 331,288.			P	VARIOUS -3,742.	09/08/2014
398,429.		DFA WORLD EX 375,402.	US GOVT F	IXED INCORP		Р	VARIOUS 23,027.	10/15/2014
TOTAL GAIN(L	OSS)						37,847.	