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Form 990-PF

Return of Private Foundation

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

OMB No 1545-0052 **2014**

Open to Public Inspection

Department of the Treasury Internal Revenue Service

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

Information about Form 990-PF and its separate instructions is at www.irs.gov/form990pf.

For	calend	lar year 2014 or tax year beginning , a	ınd ending				
	me of fou				A Emplo	oyer identification number	
T-	י איז ביו	DD : TDWA UINTED EOINDATION			23.	-7065471	
		RD & IRMA HUNTER FOUNDATION I street (or P O box number if mail is not delivered to street address)	Ro	om/suite		none number (see instruction:	
		S MICHIGAN ST	1	10		4-287-5977	
		, state or province, country, and ZIP or foreign postal code				mption application is pending,	check hare
	OUT	H BEND IN 46601			C If exer	ription application is pending,	_
G	Check a	all that apply Initial return Initial retur	n of a former public ch	arity	D 1 Fo	reign organizations, check he	ere 🕨 📗
		Final return Amended	return		2 Fo	reign organizations meeting t	
		Address change Name cha	nge		85	% test, check here and attach	computation
H	Check t	type of organization Section 501(c)(3) exempt private	foundation		E If priva	ate foundation status was terr	ninated under
		n 4947(a)(1) nonexempt charitable trust X Other taxable			sectio	n 507(b)(1)(A), check here	▶ ∐
		ket value of all assets at J Accounting method	X Cash Acci	rual	F If the t	foundation is in a 60-month te	rmination
е	nd of ye	ear (from Part II, col. (c), Other (specify)	_		under	section 507(b)(1)(B), check h	ere
	ne 16) i		be on cash basis)				
P	art I	Analysis of Revenue and Expenses (The total of	(a) Revenue and	(b) Net inv	estment	(c) Adjusted net	(d) Disbursements for charitable
		amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a) (see instructions))	expenses per books	incor		income	purposes (cash basis only)
	14			, , –			(Casil Dasis Ully)
	1 2	Contributions, gifts, grants, etc., received (attach schedule) Check X if the foundation is not required to attach Sch B					
	2						
	3	Interest on savings and temporary cash investments	175,439	1	75,439		
	4	Dividends and interest from securities	173,133		, 3 , 133		
	5a	Gross rents					
ne	b	Net rental income or (loss) Net gain or (loss) from sale of assets not on line 10 STMT 1	99,025				
eu	6a	550 050	33,023				
Revenue	b				99,025		
œ		Capital gain net income (from Part IV, line 2)			39,023	0	
	8	Net short-term capital gain					
	9	Income modifications					
	10a	Gross sales less returns and allowances					
	b	Less Cost of goods sold					
)))	C A	Gross profit or (loss) (attach schedule)	···				
-	11	Other income (attach schedule) Total. Add lines 1 through 11	274,464	2	74,464	0	
	42	Compensation of officers, directors, trustees, etc	28,800		4,200		24,600
penses	14	Other employee salaries and wages			······································		
SE	15	Pension plans, employee benefits					
		Legal fees (attach schedule)					
Ä	16a	Accounting fees (attach schedule) STMT 2	4,960		3,960		1,000
Š		Other-professional fees (attach schedule) STMT 3	92,243		39,243		53,000
ati	17	here CENED			_		
st	18	Taxes (attach schedule) (see Instructions) STMT 4	3,900		3,900		
Ξ	19	Depreciation (attach schedule) and depletion					
뒫	20	Jocoupancy 2015					
Ž	21	Travel, conferences, and meetings					
P	22	Printing and publications			- <u>-</u>		
Operating and Administrative	23=	Other expenses (att. sch.) STMT 5	4,618		2,843		1,775
Ë	24	Total operating and administrative expenses.					
ā		Add lines 13 through 23	134,521		54,146	0	
) De	25	Contributions, gifts, grants paid	132,500				132,500
	26	Total expenses and disbursements. Add lines 24 and 25	267,021		54,146	O	212,875
	27	Subtract line 26 from line 12					
	а	Excess of revenue over expenses and disbursements	7,443				
	b	Net investment income (if negative, enter -0-)		2	20,318		
	c	Adjusted net income (if negative, enter -0-)				<u> </u>	

619 147

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4,144,121

2

3

4

5

2 Enter amount from Part I, line 27a

Add lines 1, 2, and 3

3 Other increases not included in line 2 (itemize) ▶

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

5 Decreases not included in line 2 (itemize) ▶

Part IV Capital Gains a	nd Losses for Tax on Investme	ent Income	_			
	ribe the kind(s) of property sold (e.g., real estate, arehouse, or common stock, 200 shs. MLC Co.)		(b) How acquired P – Purchase D – Donation	(c) Date acc (mo , day,		(d) Date sold (mo , day, yr)
1a SEE STATEMENT F	FOR PART I, LINE 6A					
b						
С						
<u>e</u>					(h) Cara a	
(e) Gross sales price	(f) Depreciation allowed (or allowable)	,	t or other basis xpense of sale		(h) Gain o (e) plus (f) i	· · ·
<u>a</u>						
<u>b</u>						
C						
<u>d</u>				-		
Complete only for assets showin	g gain in column (h) and owned by the fo	oundation on 12/3	1/69			
Complete only for assets shown	(j) Adjusted basis		cess of col (i)			h) gain minus ess than -0-) or
(i) F M V as of 12/31/69	as of 12/31/69		col (j), if any		Losses (fror	
а						
b						
c						
d						
е						
2 Capital gain net income or (net c	capital loss) If gain, also enter in	•	,	2		99,025
3 Net short-term capital gain or (lo	ss) as defined in sections 1222(5) and (6	6)				
If gain, also enter in Part I, line 8	3, column (c) (see instructions) If (loss),	enter -0- ın				
Part I, line 8				3		
Part V Qualification U	nder Section 4940(e) for Reduc	ced Tax on No	et Investment Inco	ne		
(For optional use by domestic private if section 4940(d)(2) applies, leave the	e foundations subject to the section 4940 his part blank	O(a) tax on net inv	estment income)			
	ction 4942 tax on the distributable amour		ne base period?			Yes X No
	each column for each year, see the inst		akıng anv entries			
(a)	(b)		(c)	<u> </u>		(d)
Base period years Calendar year (or tax year beginning ii	Adjusted qualifying distributions	s Net v	value of noncharitable-use assets			bution ratio vided by col. (c))
2013		,625	4,972,1	.20		0.035121
2012		,900	4,682,5			0.036924
2011		,400	4,628,2	97		0.039410
2010	195	,400	4,584,2	82		0.042624
2009	181	,300	4,310,2	243		0.042063
2 Total of line 1, column (d)				2		0.196142
3 Average distribution ratio for the	5-year base period – divide the total on	line 2 by 5, or by	the			_
number of years the foundation	has been in existence if less than 5 year	S		3		0.039228
4 Enter the net value of noncharita	able-use assets for 2014 from Part X, line	e 5		4		5,190,302
5 Multiply line 4 by line 3				5		203,605
6 Enter 1% of net investment inco	me (1% of Part I, line 27b)			6		2,203
7 Add lines 5 and 6				7		205,808
8 Enter qualifying distributions from	m Part XII, line 4 an line 7, check the box in Part VI, line 1	b. and complete t	hat part using a 1% tax ra	8_ate See the	<u> </u>	212,875
Part VI instructions		-,				000 DE

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Pa	rt VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 – see instructions)			
1a	Exempt operating foundations described in section 4940(d)(2), check here ▶ ☐ and enter "N/A" on line 1			
	Date of ruling or determination letter (attach copy of letter if necessary—see instructions)		_	
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check		2,	<u> 203</u>
	here ▶ X and enter 1% of Part I, line 27b			
С	All other domestic foundations enter 2% of line 27b Exempt foreign organizations enter 4% of			
	Part I, line 12, col (b)			_
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-)			0
3	Add lines 1 and 2	· · · · · · · · · · · · · · · · · · ·	2,	203
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)			0
5	Tax based on investment income. Subtract line 4 from line 3 If zero or less, enter -0-	····	<u>2,</u>	203
6	Credits/Payments			
а	2014 estimated tax payments and 2013 overpayment credited to 2014 6a 5,715			
b	Exempt foreign organizations – tax withheld at source			
С	Tax paid with application for extension of time to file (Form 8868)			
d	Backup withholding erroneously withheld 6d 6d		_	
7	Total credits and payments Add lines 6a through 6d		5,	715
8	Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached 8			
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed			= -
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid		3,	<u>512</u>
11	Enter the amount of line 10 to be Credited to 2015 estimated tax ▶ 3,512 Refunded ▶ 11			
	rt VII-A Statements Regarding Activities		1	
1a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it		Yes	No
	participate or intervene in any political campaign?	<u>1a</u>	-	X
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see			l
	Instructions for the definition)?	1b	ļ	X
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials			
	published or distributed by the foundation in connection with the activities			
C	Did the foundation file Form 1120-POL for this year?	1c		X
d	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year			
	(1) On the foundation ▶ \$ (2) On foundation managers ▶ \$			
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	ļ	X
	If "Yes," attach a detailed description of the activities			
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of			
	incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes	3	-	X
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	4a		X
b	If "Yes," has it filed a tax return on Form 990-T for this year?		1	 -
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?	5		X
	If "Yes," attach the statement required by General Instruction T			
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either			
	By language in the governing instrument, or			
	 By state legislation that effectively amends the governing instrument so that no mandatory directions that 			
	conflict with the state law remain in the governing instrument?	6	X	
7	Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col (c), and Part XV	7	X	
8a	Enter the states to which the foundation reports or with which it is registered (see instructions) ▶ MI			
b	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General			
	(or designate) of each state as required by General Instruction G? If "No," attach explanation	8b	X	
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or			
•	4942(j)(5) for calendar year 2014 or the taxable year beginning in 2014 (see instructions for Part XIV)? If "Yes,"	1		
	complete Part XIV	9		X
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their			
	names and addresses	10		X
		Form 9	90-PI	(2014)

Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2014?

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Pa	rt VII-B Statements Regarding Activities for Which Form	1720 May Be R	Required (cont	inued)			
5a	During the year did the foundation pay or incur any amount to						
	(1) Carry on propaganda, or otherwise attempt to influence legislation (section 4	945(e))?		res X No			
	(2) Influence the outcome of any specific public election (see section 4955), or to	o carry on,					
	directly or indirectly, any voter registration drive?			res X No			
	(3) Provide a grant to an individual for travel, study, or other similar purposes?		,	res X No			
	(4) Provide a grant to an organization other than a charitable, etc., organization	described in					
	section 4945(d)(4)(A)? (see instructions)			res X No			
	(5) Provide for any purpose other than religious, charitable, scientific, literary, or	educational					
	purposes, or for the prevention of cruelty to children or animals?			res X No			
ь	If any answer is "Yes" to 5a(1)–(5), did any of the transactions fail to qualify under	er the exceptions d					
_	Regulations section 53 4945 or in a current notice regarding disaster assistance			N/A	5b	Ī	i
	Organizations relying on a current notice regarding disaster assistance check he	-		▶ 🗂			
С	If the answer is "Yes" to question 5a(4), does the foundation claim exemption from			- []			
C	because it maintained expenditure responsibility for the grant?	iii tiic tax	N/A 🗌 🔻	res No			
	If "Yes," attach the statement required by Regulations section 53 4945–5(d)		11/11	163 [] 140			
۰-	· · · · · ·	v promiume					
6a	Did the foundation, during the year, receive any funds, directly or indirectly, to pa	ly premiums		res X No			
	on a personal benefit contract?			res X No	6 L	ł	v
b	Did the foundation, during the year, pay premiums, directly or indirectly, on a per	sonal benefit contr	act		6b		<u> </u>
	If "Yes" to 6b, file Form 8870		┌┐,	, v			
	At any time during the tax year, was the foundation a party to a prohibited tax sh			res X No			
	If "Yes," did the foundation receive any proceeds or have any net income attribut			N/A	7b		
Pa	int VIII Information About Officers, Directors, Trustees, Fo	undation Man	agers, Hignly	Paid Employ	ees,		
	and Contractors		4				
<u> </u>	ist all officers, directors, trustees, foundation managers and their compens	ation (see instruc	tions).		г —		
		(b) Title, and average	(c) Compensation	(d) Contributions to employee benefit	(e) Ex	nense ar	count
	(a) Name and address	hours per week devoted to position	(If not paid, enter -0-)	plans and deferred		(e) Expense account, other allowances	
		do rotou to poottion		compensation			
SE	E STATEMENT 9						
							
					L		
2	Compensation of five highest-paid employees (other than those included of	n line 1 – see ins	tructions). If non	e, enter			
	"NONE."						
		(b) Title, and average		(d) Contributions to	_		
	(a) Name and address of each employee paid more than \$50,000	hours per week	(c) Compensation	employee benefit plans and deferred		oense ac r allowan	
		devoted to position		compensation	00	- Cilonai	
NC	NE						
		İ					
				<u> </u>	 		
`o+~	I number of other employees paid over \$50,000	l .	l	L		Т	0
ota	i number of other employees paid over \$50,000				orm 99		
				F	om JJ	V-F F	(2014)

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Part VIII	Information About Officers, Directors, Trustees, Foundatio	n Managers, Highly Paid	Employees,	
·	and Contractors (continued)			
3 Five higher	st-paid independent contractors for professional services (see instruction	ns). If none, enter "NONE."		
	(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensa	tion
· · · · · · · · · · · · · · · · · · ·	KEENAN FINANCIAL CONSULTING SOUTH BEND			
202 S MIC	HIGAN ST, STE 910 IN 46601	INVESTMENT S	SERV 92	,243
	·			
				
			į	
Total number of o	others receiving over \$50,000 for professional services		▶ 0	
Part IX-A	Summary of Direct Charitable Activities			
	four largest direct charitable activities during the tax year. Include relevant statistical information such as her beneficiaries served, conferences convened, research papers produced, etc.	the number of	Expenses	
1 N/A				
,				
2				
3				
4				
Part IX-B	Summary of Program-Related Investments (see instruction	ns)	<u> </u>	
	gest program-related investments made by the foundation during the tax year on lines 1 and 2		Amount	
1 N/A				
2				
All other program-rel	lated investments. See instructions			
3				
Total Add lines 1	Lthrough 3	,	' I	

а	Expenses, contributions, gifts, etc. – total from Part I, column (d), line 26	la l	212,073
b	Program-related investments – total from Part IX-B	1b	
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc.,		
	purposes	2	
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	212,875
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	2,203
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	210,672
	Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the four	dation	

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

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	990-PF (2014) EDWARD & IRMA HUNTER : rt XIII Undistributed Income (see instruction				
1	Distributable amount for 2014 from Part XI,	(a) Corpus	(b) Years prior to 2013	(c) 2013	(d) 2014
	line 7				257,312
2	Undistributed income, if any, as of the end of 2014				
	Enter amount for 2013 only			153,148	
þ	Total for prior years 20, 20, 20				·····
3	Excess distributions carryover, if any, to 2014				
	From 2009	_			
b	From 2010	_			
	From 2011				
	From 2012				
	From 2013	\dashv			
f	Total of lines 3a through e				
4	Qualifying distributions for 2014 from Part XII,				
	line 4 ▶ \$212,875			152 140	
	Applied to 2013, but not more than line 2a			153,148	
b	Applied to undistributed income of prior years				
	(Election required – see instructions)				
С	Treated as distributions out of corpus (Election				
	required – see instructions)				59,727
	Applied to 2014 distributable amount				39,121
	Remaining amount distributed out of corpus				
5	Excess distributions carryover applied to 2014				
	(If an amount appears in column (d), the same				
	amount must be shown in column (a))				
6	Enter the net total of each column as				
	indicated below:				
	Corpus Add lines 3f, 4c, and 4e Subtract line 5				<i></i>
b	Prior years' undistributed income Subtract				
	line 4b from line 2b				
С	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				
a	Subtract line 6c from line 6b Taxable				
_	amount – see instructions				
е	Undistributed income for 2013 Subtract line				
	4a from line 2a Taxable amount – see				
	Instructions Undistributed income for 2014 Subtract lines				
,	4d and 5 from line 1. This amount must be				
	distributed in 2015				197,585
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)				
8	Excess distributions carryover from 2009 not			-	•
Ū	applied on line 5 or line 7 (see instructions)				
9	Excess distributions carryover to 2015.				······································
•	Subtract lines 7 and 8 from line 6a				
10	Analysis of line 9				······
а	Excess from 2010				
b	Excess from 2011	-		-	
c	Excess from 2012	\dashv			
d	Excess from 2013				
-	Excess from 2014	-			

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Pa	rt XIV Private Operating For	undations (see ins	structions and Par	t VII-A, question 9)	
1a	If the foundation has received a ruling or	determination letter th	at it is a private operat	ting		
	foundation, and the ruling is effective for	2014, enter the date o	f the ruling	▶		
b	Check box to indicate whether the found	ation is a private opera	iting foundation descri	bed in section 49	942(J)(3) or 4942	2(j)(5)
2a	Enter the lesser of the adjusted net	Tax year		Prior 3 years		(a) Tatal
	income from Part I or the minimum	(a) 2014	(b) 2013	(c) 2012	(d) 2011	(e) Total
	investment return from Part X for					- 11
	each year listed					
b	85% of line 2a					
c	Qualifying distributions from Part XII,	., 's = 4'				
-	line 4 for each year listed					
d	Amounts included in line 2c not used directly					
_	for active conduct of exempt activities					
е	Qualifying distributions made directly					
•	for active conduct of exempt activities					
	Subtract line 2d from line 2c					
3	Complete 3a, b, or c for the					
•	alternative test relied upon		•			
а	"Assets" alternative test – enter					
a	(1) Value of all assets					
	(2) Value of assets qualifying under					
	section 4942(j)(3)(B)(i)					
b	"Endowment" alternative test – enter 2/3					
b	of minimum investment return shown in					
	Part X, line 6 for each year listed					
_	"Support" alternative test enter					
С	(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)	,		1		
	(3) Largest amount of support from					
	an exempt organization					
	(4) Gross investment income					
Ps	art XV Supplementary Inform	nation (Complete	this part only if	the foundation ha	ad \$5.000 or more	in assets at
	any time during the y				,.,	,
1	Information Regarding Foundation Ma					
а	List any managers of the foundation who	_	e than 2% of the total	contributions received	by the foundation	
	before the close of any tax year (but only					
	N/A	•			<u> </u>	
b	List any managers of the foundation who	own 10% or more of t	the stock of a corporat	ion (or an equally large	portion of the	
	ownership of a partnership or other entity	y) of which the foundat	ion has a 10% or grea	iter interest		
	N/A					
2	Information Regarding Contribution,	Grant, Gift, Loan, Sch	nolarship, etc., Progra	ams:		
	Check here ▶ ☐ If the foundation onl	y makes contributions	to preselected charital	ble organizations and d	loes not accept	
	unsolicited requests for funds If the four	ndation makes gifts, gr	ants, etc (see instruct	tions) to individuals or o	organizations under	
	other conditions, complete items 2a, b, c	c, and d				
a	The name, address, and telephone num		of the person to whom	applications should be	addressed	
	JAMES F KEENAN 574-			•		
	202 S MICHIGAN ST,		TH BEND IN	46601		
b	The form in which applications should be					
	SEE STATEMENT 10				 	
С	Any submission deadlines					
	NONE					
d	Any restrictions or limitations on awards	, such as by geograph	ical areas, charitable f	ields, kinds of institutio	ns, or other	
	factors					
	NONE					222
						Form 990-PF (2014

Supplementary Information (continued) 3 Grants and Contributions Paid During the Year or Approved for Future Payment If recipient is an individual, Foundation Recipient Purpose of grant or show any relationship to status of Amount any foundation manager contribution recipient Name and address (home or business) or substantial contributor a Paid during the year LAKELAND HEALTH FDN NONE HANSON HOSPICE CTR 25,000 LAKELAND HEALTH FDN NONE DA VINCI SURGICAL SYSTEM 50,000 NILES COMMUNITY SCHOOLS NONE NEW TECH 25,000 SMEGA - GNED FULL EMPLOYMENT CORP NONE GENERAL USE 25,000 NILES-BUCHANAN MEALS ON WHEELS NONE GENERAL USE 2,500 VOLUNTEER SOUTHWEST MI NONE GENERAL USE 5,000 132,500 ▶ 3a Total Approved for future payment SEE STATEMENT 11 295,000 295,000 **▶** 3b Total

4577 06/09/2015 9 31 AM Form 990-PF (2014) EDWARD & IRMA HUNTER FOUNDATION 23-7065471 Analysis of Income-Producing Activities Excluded by section 512, 513, or 514 Enter gross amounts unless otherwise indicated Unrelated business income (e) Related or exempt (b) Exclusion code function income Amount Business code Amount (See instructions) 1 Program service revenue g Fees and contracts from government agencies 2 Membership dues and assessments 3 Interest on savings and temporary cash investments 14 175,439 4 Dividends and interest from securities 5 Net rental income or (loss) from real estate Debt-financed property Not debt-financed property 6 Net rental income or (loss) from personal property 7 Other investment income 99,025 8 Gain or (loss) from sales of assets other than inventory 9 Net income or (loss) from special events 10 Gross profit or (loss) from sales of inventory 11 Other revenue a 274,464 12 Subtotal Add columns (b), (d), and (e) 274,464 13 Total. Add line 12, columns (b), (d), and (e) (See worksheet in line 13 instructions to verify calculations) Relationship of Activities to the Accomplishment of Exempt Purposes Part XVI-B Line No. Explain below how each activity for which income is reported in column (e) of Part XVI-A contributed importantly to the \blacksquare accomplishment of the foundation's exempt purposes (other than by providing funds for such purposes) (See instructions) N/A

DAA

Part X		nformation Regarization	_	ansfers To an	d Transactio	ns and Relationships Wi	ith Noncharitable		
1 Did				ne in any of the foll	lowing with any o	other organization described		Yes	No
						ection 527, relating to political			
_	ınızatıons								
a Trar	nsfers fro	m the reporting found	ation to a no	oncharitable exemp	ot organization o	f		.]	
٠,	Cash						1a(1	_	X
	Other as						1a(2	4	X
	er transa			_			45.44	.]	v
		assets to a noncharit		•			1b(1		X
		es of assets from a no			on		1b(2	1	X
-		f facilities, equipment,		sets			1b(3		X
		sement arrangements	i				1b(4	1	X
		loan guarantees			4-4		1b(5	_	X
		ance of services or mi					1b(6	4—	$\frac{\lambda}{X}$
	-	cilities, equipment, m				(h) chauld always show the f			<u> </u>
						mn (b) should always show the f			
						the foundation received less tha			
				e of noncharitable exemp		the goods, other assets, or serv	ransactions, and sharing arrangen		
(a) Line	a no	(b) Amount involved	(C) Name	e of Horiciantable exemp	pr organization	(a) bescription of transfers, to	and ordering arrangem	101110	
N/A									
			 						
			 						
			<u> </u>				-		
			 	 +					
			 	 					
			 						
				···		<u> </u>			
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des	cribed in 'es," com	section 501(c) of the plete the following so	Code (other	than section 501(c	c)(3)) or in section			Yes X] No
	<u>_</u>) Name of organization		(b) Type of c	organization	(c) Descri	ption of relationship		
N/F	7								
					···				
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				 					—
	11-4	all as of assume I donlars th	et I bava avami	and the setum include	a accompanying sch	ledules and statements, and to the best of	f my knowledge and helief, it is tr		
Sign Here	correct, an	alties of perjury, I declare in its decomplete. Declaration of	preparer (other	than taxpayer) is based	on all information of	which preparer has any knowledge	May the IRS discuss this with the preparer shown (see instructions)?	return	No
	Sinn	itute of officer or trustee	<u> </u>		Date		, <u>, , , , , , , , , , , , , , , , , , </u>		——
	T .				T. 1			Т	
Paid		pe breparer's name			Breparer's signatu	and tas	Date Date		if nployed
	WILL	AM D HASLETT			WILLIAM I	HASLETT	067011		
Preparer	Firm's n			GAYNOR, P			PTIN PO044		
Use Only	Firm's a			FIFTH STR	EET		Firm's EIN ▶ 20 - 24		
	<u> </u>	NILE	S, MI_	49120			Phone no 269-6		
							Form \$	90-PF	= (2014)

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Federal Statements

23-7065471 FYE: 12/31/2014

Assets
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Part I.
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Statement

De	_ Description		How Received					•
Whom Sold	Date Acquired	Date Sold	Sale Price	Cost	Expense	Depreciation	Net Gain / Loss	. SS
400.000 DEERE & CO	0/30/13	0 /10/1	PURCHASE	30 1240 &		U	۲	α Ο α α Ο α
1300.000 ENSCO PLC CLASS	LASS A) -		
4/25/14	25/14	12/01/14 TD	43,086 procuser	66,832			-23,746	746
SUU.UUU SIAKWOOD WAI	2/03/14	2/21/14	14,002	14,420			1	-418
2000.000 ANNALY CAPIT 7.625% PFDPFD 9/14/12 7/01	T 7.625% PJ 9/14/12	FDPFD 7/01/14	PURCHASE 49,381	51,107			-1,	-1,726
100.000 BLACKROCK INC	;	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	PURCHASE	, , ,			7	001
VAKIOUS 200.000.COLGATE-PALMOLIVE CO	VAKIOUS OLIVE CO	// U1/ 14	32,299 PURCHASE	111,81			14,	14,188
	8/12/04	4/01/14	12,821	188			12,	12,633
900.000 CONOCOPHILLIPS	PS 7/30/12	1/26/1/	PURCHASE	887 67			17	17 422
1400.000 EXELON CORPORATION	//30/12 ORATION	FT /C7/F	PURCHASE	,			, , ,	7 7 F
	VARIOUS	4/01/14	46,633	53,950			-7,	-7,317
300.000 EXXON MOBIL CORP	CORP		PURCHASE					
1/8	8/12/04 VARIOUS	VARIOUS	29,636 pitechase	1,338			28,	28,298
	12/04	VARIOUS	30,081	2,661			27,	27,420
100.000 LOCKHEED MARTIN	TIN CORP		PURCHASE					
	10/31/12 10/01/14	10/01/14	17,776	9,342			8	8,434
3138.732 LOOMIS SAYL	SAYLES BOND FUND CL 4/25/08 7/01	ND CL 7/01/14	PURCHASE 49,980	45,072			4,	4,908
12827.750 PIMCO ALL ASSET ALL		. !	PURCHASE				,	!
2/24 2/24	/12	VARIOUS	129,960 129,960	140,514			-10,554	554
I/00:000 SISCO CORFO	US	10/01/14	62,900	50,737			12,	12,163
3000.000 TEMPLETN EMRG MKTS INCM	RG MKTS IN	. WO	PURCHASE					
4/03/13	4/03/13	5/12/14	43,149 PIRCHASE	49,414			-6,	6,265
	2/12/13	5/12/14	53,723	46,026			7,	7,697
800.000 WACHOVIA PRF 7.25%	7.25% CALLED	LED 1 /00 /1 /	PURCHASE	L G				L
	8/12/11	1/02/14	70,000	20,105			•	- 105

4577 EDWARD & IRMA HUNTER FOUNDATION 23-7065471

Federal Statements

FYE: 12/31/2014

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Assets (
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F. Part I.
990-PF. Part I.
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•	SSC	14,185	99,025	
	Net Gain / Loss	14	66	
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	Depreciation		0	
		بى	&.	
	Expense			
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	Cost		651,845	
eq	į	म् इ	N	
How Received	Sale Price	PURCHASE 14,185 \$	750,870	
	1	ω	·ν-	
	Date Sold	2/31/14		
Description	Date Acquired	12/01/13 12/31/14		
ď	Whom Sold	CAPITAL GAIN DIV	TOTAL	

Statement 2 - Form 990-PF, Part I, Line 16b - Accounting Fees

Charitable Purpose	\$ 1,000	\$ 1,000
Adjusted Net	φ.	0
Net nvestment	3,960	3,960
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Total	4,960	4,960
	ᡐ	w
Description	HASLETT & GAYNOR CPA'S	TOTAL

Statement 3 - Form 990-PF, Part I, Line 16c - Other Professional Fees

Charitable Purpose	\$ 53,000	\$ 53,000
Adjusted Net	w	۵ 0
Net Investment	\$ 39,243	\$ 39,243
Total	92,243	92,243
Description	WALTER & KEENAN FINANCIAL CONSUL	TOTAL

Statement 4 - Form 990-PF, Part I, Line 18 - Taxes

Total	\$ 3,900 \$ 3,900 \$	\$ 3,900 \$ 3,900 \$ 0
Description	FEDERAL EXCISE TAX	TOTAL

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Federal Statements

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Charitable Purpose	₩	700 1,075 \$
Adjusted Net	❖	° w
Net Investment	₩	300 1,075 868 \$ 2,843
Total	₩.	1,600 2,150 868 \$ 4,618
Description		EXPENSES MICHIGAN COUNCIL OF FOUNDATIO LIABILITY INSURANCE OTHER EXPENSES TOTAL

ock Investments
te St
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Line,
Part II
990-PF,
- Form
Statement 6

Fair Market Value	4,2	34,11	4,32	3,82	2,16	0,04	0,88	3,90	71,512	, 99	7,28	172,975			66,832		, 67	,81	4	, 98	9	
Basis of Valuation	COST	COST	COST	COST	COST	COST	COST	COST	COST	COST	COST	COST	COST	COST	COST	COST	COST	COST	COST	COST	COST	COST
End of Year	63,034	44,52	Ó	9	α	ω	,71	4	4,	σ	96′	2,354			46,924		, 68	6,37	, 63	90'6	13,304	9,93
ning ear	63,034 \$	4,52	7,86	50,364	2,48	1,584	7,	47,841	52,518		96′	, 54	,48	, 54	46,925	, 95	8,027	16,370		90'6	15,965	9,93
Beginning of Year	\$ \$		10		4			7	α,		(*)		7	(-)	7	Δ,				.,		7.
Description	CALAMOS COVERTIBLE OPP FUND	SPDR S&P EMERGING MARKETS	WISDOMTREE EMERGING MARKETS	WISDOMTREE SMALL CAP DIVIDEND	3M COMPANY	ABBOTT LABS	ABBVIE INC	ALTRIA GROUP INC	BLACKROCK INC	BOEING CO	CISCO SYSTEMS INC	COLGATE PALMOLIVE	CONOCOPHILLIPS	DEERE & CO	DUKE ENERGY CORP	EXELON CORP	EXXON MOBIL	GE	GLAXOSMITHKLINE PLC	INTEL CORP	JOHNSON & JOHNSON	KINDER MORGAN INC

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23-7065471 FYE: 12/31/2014

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Statement 6 - Form 990-P		, Line 10b - C	orpora	te Stock Invest	F, Part II, Line 10b - Corporate Stock Investments (continued	(pa)		
Description	ă ~	Beginning of Year		End of Year	Basis of Valuation	ιĽ	Fair Market Value	
CO 3 ATTEL TIE		4	l v	36 613	COST	Į V	δ σ	
TOCKUEED MADETN	}	ע ני ע ני	}-	7,0	COST	-	000	
MCDONALDS CORP		47,753		47,753	COST		51,535	
MICROSOFT CORP		90'6		90'6	COST		2,90	
NATIONAL GRID		0,95		, 95	COST		99'0	
NESTLE		3,12		3,12	COST		5,65	
NORTHERN TRUST CORP		9,29		9,29	COST		4,14	
NOVARTIS		4,48		,48	COST		4,12	
PEPSICO		, 21		, 21	COST		0,92	
PFIZER		7,73		7,73	COST		2,30	
PROCTER & GAMBLE		49,924			COST		2,87	
QUALCOMM INC				, 64	COST		,46	
SYSCO CORP		7,			COST			
THOMSON REUTERS CORP		6,02			COST			
UNILEVER		0,09		60'0	COST		8,56	
VERIZON COMMUNICATIONS		34,206		34,206	COST		-	
WALMART STORES		, 55		1,55	COST		0,11	
WASTE MANAGEMENT		, 78		, 78	COST		2,37	
AQR DIVERSIFIED ARBITRAGE				5,00	COST		,04	
DRIEHAUS ACTIVE INCOME FUND		00,		00,00	COST		2,37	
HEALTH CARE REIT		σ		, 79	COST		8,10	
MEDICAL PROPERTIES REIT		0,64		0,64	COST		8,23	
PIMCO ALL ASSET FUND		0,0		9,48	COST		4,60	
PIMCO GLOBAL MULTI ASSET FD		21,43		21,43	COST		55,18	
STARWOOD PROPERTY TRUST		57,995	ļ	, 57	COST		8,10	
TOTAL	ş	2,738,015	္မ	2,648,873		φ	3,929,957	

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nent 7 - Form 990-PF, Part II, Line 10c - Corporate Bond Investments
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Statement 7

of Fair Market	·
Basis Valuati	COST COST COST
End of Year	50,886
ı	7 5 5
eginning of Year	51,107 50,886 20,105
ă ŏ	φ
Description	2000 ANNALY CAP MGMT 7.625% 2000 KKR FINANCIAL HOLDINGS 7.375% 800 WACHOVIA 7.25% PFD

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23-7065471 FYE: 12/31/2014

Federal Statements

Statement 7 - Form 990-PF, Part II, Line 10c - Corporate Bond Investments (continued)

Fair Market Value	\$ 51,300 112,050 37,775 80,760	77,650 175,640 125,325 45,080 271,726 131,696	\$ 1,162,322
Basis of Valuation	COST COST COST COST	COST COST COST COST COST	
End of Year	\$ 48,307 122,774 43,890 97,369	91,103 179,589 121,205 49,045 264,524 127,520	\$ 1,196,212
Beginning of Year	\$ 48,307 122,774	55,536 179,589 121,205 49,045 264,524 172,592 49,413	\$ 1,185,083
Description	2000 WELLS FARGO BANK 5.85% PFD ALLIANCE BERSTEIN INCOME FUND AVENUE INCOME CREDIT STRATEGY BABSON CAPITAL GLOBAL SHORT	BLACKSTONE/GSO GOLDMAN SACHS STRATEGIC INCOME FD VANGUARD GNMA FD #36 NUVEEN FLOATING RATE INCOME OPP PIMCO FOREIGN BOND FD LOOMIS SAYLES BOND CL I TEMPLETON EMERGING MARKETS	TOTAL

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23-7065471 Federal Statements

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Statement 8 - Form 990-PF, Part II, Line 15 - Other Assets

Description	E	Beginning of Year		End of Year		Fair Market Value
TERRY CO LAND TRUST	\$	1 79,453	\$	1 68,421	\$	1 13,375
LEHMAN BROS BANKRUPTCY CLAIM TOTAL	<u></u>	79,453	,— \$	68,422	\$ \$	13,376

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Federal Statements

Statement 9 - Form 990-PF, Part VIII, Line 1 - List of Officers, Directors, Trustees, Etc.

23-7065471 FYE: 12/31/2014

	!				,
Name and Address	Title	Average Hours	Compensation	Benefits	Expenses
DONALD F WALTER 202 S MICHIGAN ST SOUTH BEND IN 46601	TRUSTEE	2.00	4,200	0	. 0
WILLIAM R RACINE 14720 MEADOW LANE LAKESIDE MI 49116	TRUSTEE	2.00	4,200	0	0
GERALD H FRIELING JR 1111 S LINCOLN AVE NILES MI 49120	TRUSTEE	2.00	4,200	0	0
DAVID L LAWRENCE 1639 CEDAR ST NILES MI 49120	TRUSTEE	2.00	3,900	0	0
JERRY FRENCH 2578 PROSPECT POINT NILES MI 49120	TRUSTEE	2.00	4,200	0	0
JAMES F KEENAN 21640 RAVENNA DR SOUTH BEND IN 46628	PRESIDENT	2.00	4,200	0	0
WILLIAM D HASLETT 1616 CEDAR ST NILES MI 49120	TRUSTEE	2.00	3,900	0	0

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23-7065471 Federal Statements

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Statement 10 - Form 990-PF, Part XV, Line 2b - Application Format and Required Contents

Description

SUBMIT A WRITTEN REQUEST. INCLUDE COMPLETE DETAILS ABOUT THE ORGANIZATION, THE PURPOSE OF THE REQUEST AND THE INTENDED USE OF THE GRANT PROCEEDS. APPLICATIONS MUST MEET IRS CHARITABLE STANDARDS.

Form 990-PF, Part XV, Line 2c - Submission Deadlines

Description

NONE

Form 990-PF, Part XV, Line 2d - Award Restrictions or Limitations

Description

NONE

4577 EDWARD & IRMA HUNTER FOUNDATION 23-7065471 FYE: 12/31/2014		Federal Statements	6/9/2015 9:31 AM
Statement 1	Statement 11 - Form 990-PF, Part XV, L	XV, Line 3b - Grants and Contributions Approved for Future Pmt	-la
Name	Address	SS	
Address	Relationship	Status Purpose	Amount
NILES COMMUNITY SCHOOLS	NONE	NEW TECH	25,000
SOUTHWEST MI COMMUNITY	NONE	AMBULANCE SERVICE	20,000
FERNWOOD AT 50	NONE	GENERAL USE	100,000
TAKE MICHIGAN COLLEGE			
TOTAL	NONE	CAMPAIGN FOR TOMORROW	150,000
ī	NONE	CAMPAIGN FOR TOMORROW	150,000
	NONE	CAMPAIGN FOR TOMORROW	150,000

4577 06/16/2015 9 42 AM

(Rev. January 2014)

Department of the Treasury

Application for Extension of Time To File an **Exempt Organization Return**

File a separate application for each return.

OMB No. 1545-1709

Information about Form 8868 and its instructions is at www.irs.gov/form8868. Internal Revenue Service **▶** |X| If you are filing for an Automatic 3-Month Extension, complete only Part I and check this box If you are filing for an Additional (Not Automatic) 3-Month Extension, complete only Part II (on page 2 of this form) Do not complete Part II unless you have already been granted an automatic 3-month extension on a previously filed Form 8868 Electronic filing (e-file). You can electronically file Form 8868 if you need a 3-month automatic extension of time to file (6 months for a corporation required to file Form 990-T), or an additional (not automatic) 3-month extension of time. You can electronically file Form 8868 to request an extension of time to file any of the forms listed in Part I or Part II with the exception of Form 8870, Information Return for Transfers Associated With Certain Personal Benefit Contracts, which must be sent to the IRS in paper format (see instructions) For more details on the electronic filing of this form, visit www irs gov/efile and click on e-file for Charities & Nonprofits Automatic 3-Month Extension of Time. Only submit original (no copies needed) A corporation required to file Form 990-T and requesting an automatic 6-month extension - check this box and complete Part I only All other corporations (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request an extension of time to file income tax returns Enter filer's identifying number, see instructions Employer identification number (EIN) or Name of exempt organization or other filer, see instructions Type or print 23-7065471 EDWARD & IRMA HUNTER FOUNDATION Social security number (SSN) Number, street, and room or suite no. If a P.O. box, see instructions 202 S MICHIGAN ST 910 File by the due date for City, town or post office, state, and ZIP code. For a foreign address, see instructions filing your return See IN 46601 SOUTH BEND instructions 04 Enter the Return code for the return that this application is for (file a separate application for each return) Return Return **Application** Application Code Is For Code Is For Form 990-T (corporation) 07 01 Form 990 or Form 990-EZ 80 Form 1041-A Form 990-BL 02 Form 4720 (other than individual) 09 Form 4720 (individual) 03 04 Form 5227 10 Form 990-PF 05 Form 6069 11 Form 990-T (sec 401(a) or 408(a) trust) Form 8870 12 Form 990-T (trust other than above) WALTER & KEENAN FINANCIAL 202 S MICHIGAN ST, STE 910 46601 IN The books are in the care of ▶ SOUTH BEND Telephone No ▶ 574-287-5977 FAX No ▶ If the organization does not have an office or place of business in the United States, check this box If this is If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) If it is for part of the group, check this box and attach for the whole group, check this box a list with the names and EINs of all members the extension is for I request an automatic 3-month (6 months for a corporation required to file Form 990-T) extension of time until 08/15/15 , to file the exempt organization return for the organization named above. The extension is for the organization's return for ► X calendar year 2014 or tax year beginning , and ending If the tax year entered in line 1 is for less than 12 months, check reason Initial return Final return Change in accounting period If this application is for Forms 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any 2,203 3a nonrefundable credits. See instructions If this application is for Forms 990-PF, 990-T, 4720, or 6069, enter any refundable credits and 5,715 3b estimated tax payments made. Include any prior year overpayment allowed as a credit Balance due. Subtract line 3b from line 3a Include your payment with this form, if required, by using

EFTPS (Electronic Federal Tax Payment System) See instructions