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Form **990-PF** 

Department of the Treasury Internal Revenue Service

## **Return of Private Foundation**

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

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

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

OMB No 1545-0052

2014

Open to Public Inspection

For	cale	ndar year 2014 or tax year beginning		, 2	014, and en	ding		, 20	)	
Name of foundation						A Employ	er identifica	ation number		
R	OBE	BIE CURTIS CHARITABLE	FOUNDATION			30-	020116	56		
		and street (or P O box number if mail is not del		T	Room/suite	I		(see instruction	ns)	
		30X 766				517	-787-9	9481		
		own, state or province, country, and ZIP or foreign	on postal code			C If exemp	tion application			
	•	(SON MI 49204-0766	gri postal code		<del></del>	check here				
G	Chec	k all that apply Initial return	Initial return of a fo	ormer public (	charity			ns, check here	. ▶	
		Final return	Amended return			test,	gn organization check here and	ns meeting the 8 d attach compute	ation ►	
		Address change	Name change				foundation sta ed under section			
Н	Chec	k type of organization $X$ Section 501	(c)(3) exempt private fou	ndation			)(A), check her		. ▶□	
$\Box$	Secti	on 4947(a)(1) nonexempt charitable trust	Other taxable priva	ate foundatio	n					
L F	air ma	arket value of all assets at end of	Accounting method X	Cash	Accrual		indation is in a on under section			
		from Part II, col (c), line 16)	Other (specify)				)(B), check her		. ▶□	
▶ \$	•	223,127.	(Part I, column (d) must	be on cash b	asis)	}				
Pa	П	Analysis of Revenue and Expenses	(a) Revenue and	(b) Net in	vootmont	(a) Aduu	atad not		ursements	
	_	(The total of amounts in columns (b), (c), and (d) may not necessarily equal the	expenses per	1 ' '	l l	(c) Adjus		for charitable		
		and (d) may not necessarily equal the amounts in column (a) (see instructions) ;	· · · · · ·	inco	me	inco	me		poses asıs only)	
	1	Contributions, gifts, grants, etc., received	13,160.					\ <del>\</del>		
	2	(attach schedule)  Check   If the foundation is not required to attach Schedule R			<del></del>	<u></u>		<del>                                     </del>		
	3	Interest on savings and temporary cash investments		·	<del></del>			<del>                                     </del>		
	4	Dividends and interest from securities	3,893.					1	<u> </u>	
	1	_	3,033.					***		
, Revenue	5a	Gross rents . (Net rental income						+		
	b	or (loss)				<del></del>		<del> </del>	. , ,	
	6a	Net gain/(loss) from sale of assets not on line 10 Gross sales price for	1					4	<del></del>	
ē	_b	all assets on line 6a		1	,151.					
<u>چ</u> ۔	7	Capital gain net income (from Part IV, line 2)		т,	, 101.	<del></del>		-		
I.	8	Net short-term capital gain								
	9  10a	Income modifications .  Gross sales less re-			-					
		turns and allowances			-		RFCI	<b>HVED</b>	<del></del>	
	b	Less Cost of goods sold		-		<del>    -</del>	TILOI	-17	70	
	С	Gross profit or (loss) (attach schedule)			- '	107	1441/ 1	E COAF	OSO	
	11	Other income (attach schedule)	17 053	7	1 -1		MAY 1	5 2015		
	12	Total. Add lines 1 through 11 .	17,053.	Ι.	,151.			<u> </u>	82	
ç	13	Compensation of officers, directors, trustees, etc				7	<del>JCDF</del>	N IIT	-	
enses	14	Other employee salaries and wages					<u> </u>	<u>.IV. UI</u>		
ē	15	Pension plans, employee benefits .		*******						
×		Legal fees (attach schedule) .								
eE		Accounting fees (attach schedule)	ļ					<del>                                      </del>		
Ę		Other professional fees (attach schedule)						<u> </u>		
tra	17	Interest	3.5.4		1			<u> </u>		
is(	18	Taxes (attach schedule) (see instructions)	154.		154.			<u> </u>		
Operating and Administrative Ex	19	Depreciation (attach schedule) and depletion						ļ	<u> </u>	
ρ	20	Occupancy .						1		
Ø F	21	Travel, conferences, and meetings								
Ĭ	22	Printing and publications	464.						464.	
, D	23	Other expenses (attach schedule)	190.		190.					
ţi	24	Total operating and administrative							_	
Ž		expenses Add lines 13 through 23	808.		344.			<u> </u>	464.	
þe	25	Contributions, gifts, grants paid	7,000.				-		7,000.	
O	26	Total expenses and disbursements Add lines 24 and 25	7,808.		344.				7,464.	
	27	Subtract line 26 from line 12			,				1	
	а	Excess of revenue over expenses and disbursements	9,245.	_	ا ا					
	b	Net investment income (if negative, enter -0-)			807.			,		
		Adjusted net income (if negative, enter -0-)								

For Paperwork Reduction Act Notice, see instructions.

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Page 2

Part II Balance Sheets Attached schedul		Attached schedules and amounts in the Balance Sheets description column should be for	Beginning of year	En	l of year		
<u>—</u>		end-of-year amounts only (See instructions )	(a) Book Value	(b) Book Value	(c) Fair Market Value		
`	1	Cash - non-interest-bearing	26.	27.			
	2	Savings and temporary cash investments [	8,613.	3,556.	3,556.		
	3	Accounts receivable ▶					
		Less allowance for doubtful accts ▶					
	4	Pledges receivable ▶					
		Less allowance for doubtful accts ▶					
	5	Grants receivable		10,300.	10,300.		
				<del></del>			
	6	Receivables due from officers, directors, trustees, and other					
	"	disqualified persons (attach schedule) (see instructions)					
	7	Other notes and loans re-		·	<del>-</del>		
		ceivable (attach schedule) Less allowance for			<u> </u>		
S		doubtful accounts			-		
set	8	Inventories for sale or use					
Assets	9	Prepaid expenses and deferred charges					
	1	Investments - U S and state govt obligations (attach schedule)	100 000	104 006	200 244		
	1	Investments - corporate stock (attach schedule)	120,932.	124,206.	209,244.		
		Investments - corporate bonds (attach schedule)					
	11	Investments - land, buildings, and equipment basis					
	1	Less accumulated depreciation (attach schedule)					
	12	Investments - mortgage loans					
	13	Investments - other (attach schedule)					
	14	Land, buildings, and equipment basis .	<u> </u>				
		(attach schedule)					
	15	Other assets (describe ►CASH ADJUSTMENT. )	(2,000.)				
	16	Total assets (to be completed by all filers - see the					
	'	instructions Also, see page 1, item I)	127,571.	138,089.	223,127.		
	17	Accounts payable and accrued expenses	•	···········			
	18	Grants payable			<b>-</b>		
Ś	19	Deferred revenue			· ·		
Liabilities	20	Loans from officers, directors, trustees, and other			· · · · · ·		
Ħ	21	disqualified persons  Mortgages and other notes payable (attach schedule)			<u> </u>		
<u>ia</u>	22	Other liabilities (describe >			· · ·		
_	22	Other habilities (describe)			- '		
	22	Total liabilities (add ince 17 through 22)					
	23	Total liabilities (add lines 17 through 22)  Foundations that follow SFAS 117, check here ▶			· -		
۰,		and complete lines 24 through 26 and lines 30 and 31.			, , (		
ĕ	24	Unrestricted					
ă	1	Temporarily restricted					
ğ	25	' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' '			- :		
<b>H</b>	26	Permanently restricted			<b>⊣</b> . ′ i		
or Fund Balances		Foundations that do not follow SFAS 117, ck. here ► X					
Ē		and complete lines 27 through 31.	129,571.	120 000	,		
ō	27	Capital stock, trust principal, or current funds	129,371.	138,089.			
ţ	28	Paid-in or capital surplus, or land, bldg, and equipment fund					
Se	29	Retained earnings, accumulated income, endowment, or other funds		<u>.</u>			
Net Assets			100 571	400 000			
et	30	Total net assets or fund balances (see instructions)	129,571.	138,089.			
Z	31	Total liabilities and net assets/fund balances (see					
		instructions)	129,571.	138,089.			
	art III						
1		net assets or fund balances at beginning of year - Part II, column (	a), line 30 (must agree w	rith	100		
	end-o	f-year figure reported on prior year's return)		<u>  1</u>	<del></del>		
2	Enter	amount from Part I, line 27a		2	9,245.		
3	Other	increases not included in line 2 (itemize)					
		nes 1, 2, and 3		4			
		eases not included in line 2 (itemize) LOSS		5			
		net assets or fund balances at end of year (line 4 minus line 5) - Pa	art II, column (b), line 30	6	138,089.		
					Form <b>990-PF</b> (2014)		

Part IV Capital Gains at	nd Losses for Tax on Inve	estment income	<del>}</del>			
	kind(s) of property sold (e.g., real e, or common stock, 200 shs MLG		(b) How acquired P - Purchase D - Donation	(c) Date acc		(d) Date sold (mo , day, yr )
1a 50 SH CITRIX S	YSTEMS		P	VA/RI/O		08/29/2014
b 75 SH EXPEDITO			P	VA/RI/O		06/09/2014
c 50 SH MCDONALD		_	P	VA/RI/O		08/29/2014
d 75 SH TARGET	<del></del>	<del></del>	P	VA/RI/O		02/26/2014
е			_	7 - 5 / 1 - 1 - 1		
(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or o		,	•	n or (loss) f) minus (g)
a 3,492.			3,498.			(6.)
b 3,417.	*****		2,924.			493.
c 4,653.			4,234.	İ		419.
d 4,503.			4,258.			245.
е			· · · · · · · · · · · · · · · · · · ·			
Complete only for assets show	ing gain in column (h) and owned	by the foundation or	n 12/31/69	(I) Ga	ins (Co	I (h) gain minus
(i) F M V as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess over col (		col (k), l	but not!	less than -0-) <b>or</b> from col (h))
а						(6.)
b						493.
С						419.
d						245.
е						
2 Capital gain net income or (net	capital loss) If gain, a	lso enter in Part I, lir enter -0- in Part I, lir	ne 7	2		1,151.
3 Net short-term capital gain or (i	oss) as defined in sections 1222(5	5) and (6)	_			
If gain, also enter in Part I, line	8, column (c) (see instructions)		¬.			
If (loss), enter -0- in Part I, line	8 .			3		
Part V Qualification Ur	nder Section 4940(e) for R	educed Tax on	Net Investm	ent Incom	e	
If section 4940(d)(2) applies, leave Was the foundation liable for the se If "Yes," the foundation does not qu	ection 4942 tax on the distributable railify under section 4940(e). Do no	ot complete this part	•			Yes X No
1 Enter the appropriate amount is	n each column for each year, see	the instructions befo	re making any er	ntries		
(a) Base period years Calendar year (or tax year beg		ons nonchar	(c) let value of itable-use assets		ol (b) di	(d) ribution ratio ivided by col (c))
2013	6,54		174,00			.037624
2012	6,70		133,72			.050154
2011	3,80		112,60			.033799
2010	4,03		95,55			.042236
2009	2,02	0.	79,20	5.	0	.025503
2 Total of line 1, column (d)				2	0	.189316
•	e 5-year base period - divide the to en in existence if less than 5 years	<del>-</del>	r by the number	3	0	.037863
4 Enter the net value of nonchard	table-use assets for 2014 from Pa	rt X, line 5		4	<del></del>	209,402.
5 Multiply line 4 by line 3				5		7,929.
6 Enter 1% of net investment inco	ome (1% of Part I, line 27b)			6		8.
7 Add lines 5 and 6				7		7,937.
B Enter qualifying distributions fro	om Part XII. line 4			8		7,464.
	an line 7, check the box in Part VI	, line 1b, and compl	ete that part usin		te See	

	m 990-PF (2014) ROBBIE CURTIS CHARITABLE FOUNDATION	_			116	6 Ра	age <b>4</b>
	art VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 - s	ee	inst	ructio	ons)	_	
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 instr.)					_	_
þ	Domestic foundations that meet the section 4940(e) requirements in Part V, check here ▶ ☐	٠	1				6.
	and enter 1% of Part I, line 27b	1					
С	All other domestic foundations enter 2% of line 27b Exempt foreign organizations enter		1				
	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-)	ŀ	2			0	
3	Add lines 1 and 2	-	3			0 1	6.
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-)	F	4			-	6.
5	Tax based on investment income. Subtract line 4 from line 3 If zero or less, enter -0-	}	5				. 0 .
6	Credits/Payments						
a	2014 estimated tax payments and 2013 overpayment credited to 2014  6a	$\dashv$					
b	Exempt foreign organizations - tax withheld at source 6b	$\dashv$					
	Tax paid with application for extension of time to file (Form 8868)  6c	$\dashv$					
_d	Backup withholding erroneously withheld 6d	$\dashv$	_			-	
7	Total credits and payments Add lines 6a through 6d	}	7		_		
8	Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached	-	8			1	6.
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed	·  -	9				. 0 .
		-	10 11				
_	Enter the difficult of time to to be distanced to I also definition to the second seco	1					
	art VII-A Statements Regarding Activities		- or			Yes	No
та	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it particular intervene in any political campaign?	ipai	ie oi		1a	163	X
_	,,	For	•	•			
D	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see Instructions f the definition)?	UI			1b		X
	the definition)?  If the answer is "Yes" to <b>1a</b> or <b>1b</b> , attach a detailed description of the activities and copies of any materials pub.	hlie	 had		10		<b>  ^ `</b>
	or distributed by the foundation in connection with the activities	اداار	160		ĺ	1	1
_	Did the foundation file Form 1120-POL for this year?				1c	,	X
	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year		• •				<del> </del>
•	(1) On the foundation  \$ (2) On foundation managers  \$						
۵	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed				[		
٠	on foundation managers   \$					,	1
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?				2		Х
_	If "Yes," attach a detailed description of the activities		·				
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles o	f					
•	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
	If "Yes," has it filed a tax return on Form 990-T for this year?		-		4b		
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?				5		X
	If "Yes," attach the statement required by General Instruction T				,		
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either				,		1
	By language in the governing instrument, or				.		
	By state legislation that effectively amends the governing instrument so that no mandatory directions						1
	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),	an	d Pan	t XV	7	X	
8a	Enter the states to which the foundation reports or with which it is registered (see instructions)▶						,
	MI			_	ı		
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	<u></u>
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,"					- '	ļ.
	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	Χ	1

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	990-PF (2014) ROBBIE CURTIS CHARITABLE FOUNDATION 30-02013 t VII-A Statements Regarding Activities (continued)			age (
	At any time during the year, did the foundation, directly or indirectly, own a controlled entity		T	
	within the meaning of section 512(b)(13)?			ļ
	If "Yes," attach schedule (see instructions)	11		X
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified			
	person had advisory privileges? If "Yes," attach statement (see instructions)	12		X
3	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	X	
	Website address ▶		•	
4	The books are in care of ▶ PHILIP J CURTIS  Telephone no ▶ 517	7-78	7-9	48
	Located at ▶ 120 W MICHIGAN JACKSON MI ZIP+4 ▶ 4920	)1		
5	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - Check here			▶ [
	and enter the amount of tax-exempt interest received or accrued during the year . ▶ 15			
6	At any time during calendar year 2014, did the foundation have an interest in or a signature or other authority		Yes	No
	over a bank, securities, or other financial account in a foreign country?	16	1	X
	See instructions for exceptions and filing requirements for FinCEN Form 114, (formerly TD F 90-22 1) If "Yes," enter the name of the			1
	foreign country >	ļ		
ar	t VII-B Statements Regarding Activities for Which Form 4720 May Be Required			
	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.		Yes	No
a	During the year did the foundation (either directly or indirectly)			
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person? Yes X No			,
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from)		:	
	a disqualified person?	Ϊ.		
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?  Yes X No		-	
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?  Yes X No			1
	(5) Transfer any income or assets to a disqualified person (or make any of either available			
	for the benefit or use of a disqualified person)?	, -		1
	(6) Agree to pay money or property to a government official? (Exception. Check "No"			
	if the foundation agreed to make a grant to or to employ the official for a period			1
	after termination of government service, if terminating within 90 days.)			,
þ	If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in			
	Regulations section 53 4941(d)-3 or in a current notice regarding disaster assistance (see instructions)?	1b	ļ	↓
	Organizations relying on a current notice regarding disaster assistance check here .		İ	1
С	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts,			,
	that were not corrected before the first day of the tax year beginning in 2014?	1c		X
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private	,		1
	operating foundation defined in section 4942(j)(3) or 4942(j)(5))	ľ.		Ί
а	At the end of tax year 2014, did the foundation have any undistributed income (lines 6d			1
	and 6e, Part XIII) for tax year(s) beginning before 2014? Yes X No			
	If "Yes," list the years ▶ 20, 20, 20			i
b	Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2)			
	(relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2)			-
	to all years listed, answer "No" and attach statement - see the instructions )	2b	<b></b>	
С	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here			,
	▶ 20	}		¢.
3a	Did the foundation hold more than a 2% direct or indirect interest in any business			e E
	enterprise at any time during the year? Yes X No			
b	If "Yes," did it have excess business holdings in 2014 as a result of (1) any purchase by the foundation			l
	or disqualified persons after May 26, 1969, (2) the lapse of the 5-year period (or longer period approved			
	by the Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest, or (3)			-
	the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Schedule C, Form 4720, to determine			
	if the foundation had excess business holdings in 2014 )	3b		<del> </del>
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a		X
þ	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?	4b	1	X

Form	990-PF (2014) ROBBIE CURTIS (	CHARITABLE F	OUNDATION_		30-020	1166	Page 6
Par	t VII-B Statements Regarding Act	ivities for Which F	orm 4720 May Be R	equired	continue	d)	
5a	During the year did the foundation pay or incu	r any amount to					
•	(1) Carry on propaganda, or otherwise attemption	pt to influence legislation	n (section 4945(e))? .		Yes X N	o	
	(2) Influence the outcome of any specific pub	lic election (see section	4955), or to carry				
	on, directly or indirectly, any voter registra	ition drive? .			Yes X N	。	
	(3) Provide a grant to an individual for travel,	study, or other similar p	ourposes? .	. 🗍	Yes X N	。	
	(4) Provide a grant to an organization other th	nan a charitable, etc., oi	rganization described		_		
	in section 4945(d)(4)(A)? (see instructions			. 🗇	Yes X N	o	
	(5) Provide for any purpose other than religio		, literary, or				
	educational purposes, or for the prevention				Yes X N	。	
b	If any answer is "Yes" to 5a(1)-(5), did any of			ت s described	in		<u>'</u>
_	Regulations section 53 4945 or in a current no					5b	
	Organizations relying on a current notice rega				▶□		
c	If the answer is "Yes" to question 5a(4), does			, ,		ļ.	. :
·	tax because it maintained expenditure respon		or promise		Yes N	.	,
	If "Yes," attach the statement required by Reg		(5-5/d)	Ш			İ
6-	Did the foundation, during the year, receive a		• •			ľ	
Оa		ny faritas, difectly of filal	rectly, to pay		Yes X N		1
L	premiums on a personal benefit contract?		Ny anananana hanafita	· L	162 27 14	6b	X '
D	Did the foundation, during the year, pay prem	iums, directly or indirect	ny, on a personal benefit c	ontract	•	90	- \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \
_	If "Yes" to 6b, file Form 8870			-a	Yes X N	_	
	At any time during the tax year, was the found				Yes X N		1 '
	If "Yes," did the foundation receive any process				Jiahly Bair	7b	
Fel	t VIII Information About Officers	, Directors, Truste	ees, Foundation Ma	nayers, r	nymy Pak	a Emplo	yees,
	and Contractors						
<u>1 L</u>	ist all officers, directors, trustees, foundation					1	
		I(h) Title and average	(-) 0	I (d) Contr	ibiitione to		
	(a) Name and address	(b) Title, and average hours per week devoted to position	(c) Compensation (If not paid, enter -0-)	employee I	ibutions to benefit plans rred comp	1 ' '	lse account, llowances
I	PHILIP J CURTIS	hours per week devoted to position TRUSTEE	(If not paid, enter -0-)	employee I	benefit plans	1 ' '	
	PHILIP J CURTIS	hours per week devoted to position TRUSTEE	(4) Compensation	employee I	benefit plans	1 ' '	
	PHILIP J CURTIS 1447 SPRINGBROOK RD DENISE R CURTIS	hours per week devoted to position TRUSTEE 2 TRUSTEE	(If not paid, enter -0-)	employee I	benefit plans	1 ' '	
	PHILIP J CURTIS	hours per week devoted to position TRUSTEE	(If not paid, enter -0-)	employee I	benefit plans	1 ' '	ise account, llowances
	PHILIP J CURTIS 1447 SPRINGBROOK RD DENISE R CURTIS	hours per week devoted to position TRUSTEE 2 TRUSTEE	(If not paid, enter -0-)	employee I	benefit plans	1 ' '	
	PHILIP J CURTIS 1447 SPRINGBROOK RD DENISE R CURTIS 2115 LAKE WOOD DR	hours per week devoted to position TRUSTEE 2 TRUSTEE 2	(If not paid, enter -0-)	employee and defe	benefit plans rred comp	1 ' '	
	PHILIP J CURTIS 1447 SPRINGBROOK RD DENISE R CURTIS	hours per week devoted to position TRUSTEE 2 TRUSTEE 2	(If not paid, enter -0-)	employee and defe	benefit plans rred comp	1 ' '	
	PHILIP J CURTIS  1447 SPRINGBROOK RD  DENISE R CURTIS  2115 LAKE WOOD DR  Compensation of five highest-paid employee	hours per week devoted to position TRUSTEE 2 TRUSTEE 2 es (other than those in	(If not paid, enter -0-)	employee and defe	benefit plans rred comp	1 ' '	
2 (	PHILIP J CURTIS  1447 SPRINGBROOK RD  DENISE R CURTIS  2115 LAKE WOOD DR  Compensation of five highest-paid employee	hours per week devoted to position TRUSTEE 2 TRUSTEE 2	(If not paid, enter -0-)	structions)  (d) Contremployer plans and	benefit plans rred comp	(e) Exper	llowances
2 (a	PHILIP J CURTIS  4447 SPRINGBROOK RD  DENISE R CURTIS  2115 LAKE WOOD DR  Compensation of five highest-paid employee finone, enter "NONE."	hours per week devoted to position TRUSTEE 2 TRUSTEE 2 es (other than those in hours per week	(If not paid, enter -0-)  0  0  cluded on line 1 - see in	structions)  (d) Contremployer plans and	benefit plans rred comp  between the comp  between the comp  between the comp  between the comp  comp  comp  comp  comp  comp  comp  comp  comp  comp  comp  comp  comp  comp  comp  comp  comp  comp  comp  comp  comp  comp  comp  comp  comp  comp  comp  comp  comp  comp  comp  comp  comp  comp  comp  comp  comp  comp  comp  comp  comp  comp  comp  comp  comp  comp  comp  comp  comp  comp  comp  comp  comp  comp  comp  comp  comp  comp  comp  comp  comp  comp  comp  comp  comp  comp  comp  comp  comp  comp  comp  comp  comp  comp  comp  comp  comp  comp  comp  comp  comp  comp  comp  comp  comp  comp  comp  comp  comp  comp  comp  comp  comp  comp  comp  comp  comp  comp  comp  comp  comp  comp  comp  comp  comp  comp  comp  comp  comp  comp  comp  comp  comp  comp  comp  comp  comp  comp  comp  comp  comp  comp  comp  comp  comp  comp  comp  comp  comp  comp  comp  comp  comp  comp  comp  comp  comp  comp  comp  comp  comp  comp  comp  comp  comp  comp  comp  comp  comp  comp  comp  comp  comp  comp  comp  comp  comp  comp  comp  comp  comp  comp  comp  comp  comp  comp  comp  comp  comp  comp  comp  comp  comp  comp  comp  comp  comp  comp  comp  comp  comp  comp  comp  comp  comp  comp  comp  comp  comp  comp  comp  comp  comp  comp  comp  comp  comp  comp  comp  comp  comp  comp  comp  comp  comp  comp  comp  comp  comp  comp  comp  comp  comp  comp  comp  comp  comp  comp  comp  comp  comp  comp  comp  comp  comp  comp  comp  comp  comp  comp  comp  comp  comp  comp  comp  comp  comp  comp  comp  comp  comp  comp  comp  comp  comp  comp  comp  comp  comp  comp  comp  comp  comp  comp  comp  comp  comp  comp  comp  comp  comp  comp  comp  comp  comp  comp  comp  comp  comp  comp  comp  comp  comp  comp  comp  comp  comp  comp  comp  comp  comp  comp  comp  comp  comp  comp  comp  comp  comp  comp  comp  comp  comp  comp  comp  comp  comp  comp  comp  comp  comp  comp  comp  comp  comp  comp  comp  comp  comp  comp  comp  comp  comp  comp  comp  comp  comp  comp  comp  comp  comp  comp  comp  comp  comp  comp	(e) Exper	llowances
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Part IX-B Summary of Program-Related Investments (see instructions)	
Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2	Amount
1	
2	
All other program-related investments See instructions	
3	
Total. Add lines 1 through 3	

Form 990-PF (2014)

Form 990-PF (2014) ROBBIE CURTIS CHARITABLE FOUNDATION 30-	-020	1166 Page <b>8</b>
Part X Minimum Investment Return (All domestic foundations must complete this part Fo	reign	foundations,
see instructions.)	<del></del>	
1 • Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes	1 1	100 050
a Average monthly fair market value of securities	1a	199,258. 13,333.
b Average of monthly cash balances	1b	13,333.
c Fair market value of all other assets (see instructions)	1c	
d Total (add lines 1a, b, and c)	1d	212,591.
e Reduction claimed for blockage or other factors reported on lines 1a and 1c	. 1	
(attach detailed explanation)	]	
2 Acquisition indebtedness applicable to line 1 assets	2	
<b>3</b> Subtract line 2 from line 1d	3	212,591.
4 Cash deemed held for charitable activities Enter 1 1/2% of line 3 (for greater amount,		
see instructions)	4	3,189.
5 Net value of noncharitable-use assets. Subtract line 4 from line 3 Enter here and on Part V, line 4	5	209,402.
6 Minimum investment return. Enter 5% of line 5 .	6	10,470.
Part XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operations	iting f	oundations and
certain foreign organizations check here ▶ ☐ and do not complete this part )	•	
1 Minimum investment return from Part X, line 6	1	10,470.
2 a 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 1	
c Add lines 2a and 2b	2c	16.
3 Distributable amount before adjustments Subtract line 2c from line 1	3	10,454.
4 Recoveries of amounts treated as qualifying distributions	4	
5 Add lines 3 and 4	5	10,454.
6 Deduction from distributable amount (see instructions)	6	
7 Distributable amount as adjusted Subtract line 6 from line 5 Enter here and on Part XIII, line 1 .	7	10,454.
	سلتسلس	
Part XII Qualifying Distributions (see instructions)		
1 Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes	T	
a Expenses, contributions, gifts, etc -total from Part I, column (d), line 26	1a	7,464.
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		
a 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	7,464.
5. Foundations that qualify under section 4940(a) for the reduced rate of tay on net investment income		<u> </u>

Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation

Enter 1% of Part I, line 27b (see instructions) . . . .

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

6 Adjusted qualifying distributions. Subtract line 5 from line 4

Form 990-PF (2014)

6

7,464.

Cite Air Citatoti Dated in Come (CCC)	Hott dottorio)			
Distributable amount for 2014 from Part XI,	(a) Corpus	(b) Years prior to 2013	(c) 2013	(d) 2014 10,454.
line 7		ļ	<del> </del>	10,454.
2 Undistributed income, if any, as of the end of 2014 a Enter amount for 2013 only				
b Total for prior years 20, 20, 20				
3 Excess distributions carryover, if any, to 2014		<u> </u>		
a From 2009				
b From 2010				
c From 2011				
d From 2012				
e From 2013 .				
f Total of lines 3a through e				
4 Qualifying distributions for 2014 from Part XII,		1		
line 4 ▶ \$ 7,464.				
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 required - see instructions)				
d Applied to 2014 distributable amount		" "		7,464.
e Remaining amount distributed out of corpus.				
5 Excess distributions carryover applied to 2014 .				'
(If an amount appears in column (d), the	<u> </u>			
same amount must be shown in column (a) )				
6 Enter the net total of each column as				
indicated below:				
a Corpus Add lines 3f, 4c, & 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 .	<del> </del>	<del> </del>		
e 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				2 000
must be distributed in 2015				2,990.
7 Amounts treated as distributions out of				1
corpus to satisfy requirements imposed by				
section 170(b)(1)(F) or 4942(g)(3) (Election	1			
may be required - see instructions)				
B Excess distributions carryover from 2009				
not applied on line 5 or line 7 (see				, }
instructions)				
Excess distributions carryover to 2015.				,
Subtract lines 7 and 8 from line 6a	<del>"</del>	_		
O Analysis of line 9				i i
a Excess from 2010				
b Excess from 2011				<u>'</u>
c Excess from 2012				
d Excess from 2013				<u>'</u> ,
e Excess from 2014 .		<u> </u>		<u> </u>

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

Part XV Supplementary Information (continued)

Grants and Contributions Paid During the Year or Approved for Future Payment

Recipient   If recipient is an individual show any relationship to any foundation manager or substantial contributor   Purpose of grant or contribution   Pu	3 Grants and Contributions Paid Du	ring the Year or Ap	proved for	or Future Payment	
a Pad dump the year  JACKSON SCHOOL OF ARTS 634 N MECHANIC ST N/A PUBLIC OPERATIONS 4,000 WESTERN HIGH SCHOOL DEARING RD 49269 MI PARMA N/A PUBLIC OPERATIONS 1,000 AMERICAN CANCER SOCIETY 49201 MI JACKSON N/A PUBLIC OPERATIONS 1,000 THE MISSY PROJECT 11303 DEAD OAK LANE 78759 TX AUSTIN N/A PUBLIC PRIVATE 1,000 Total Dear Approved for future payment 5 approved for future payment 5 approved for future payment 5 approved for future payment 5 approved for future payment 5 approved for future payment 5 approved for future payment 5 approved for future payment 5 approved for future payment 5 approved for future payment 5 approved for future payment 5 approved for future payment 5 approved for future payment 5 approved for future payment 5 approved for future payment 5 approved for future payment 5 approved for future payment 5 approved for future payment 5 approved for future payment 5 approved for future payment 5 approved for future payment 5 approved for future payment 5 approved for future payment 5 approved for future payment 5 approved for future payment 5 approved for future payment 5 approved for future payment 5 approved for future payment 5 approved for future payment 5 approved for future payment 5 approved for future payment 5 approved for future payment 5 approved for future payment 5 approved for future payment 5 approved for future payment 5 approved for future payment 5 approved for future payment 5 approved for future payment 5 approved for future payment 5 approved for future payment 5 approved for future payment 5 approved for future payment 5 approved for future payment 5 approved for future payment 5 approved for future payment 5 approved for future payment 5 approved for future payment 5 approved for future payment 5 approved for future payment 5 approved for future payment 5 approved for future payment 5 approved for future payment 5 approved for future payment 5 approved for future payment 5 approved for future payment 5 approved for future payment 5 approved for future payment 5 approved for	Recipient	show any relationship to any foundation manager	status of		Amount
JACKSON SCHOOL OF ARTS 634 N MECHANIC ST 49201 MI JACKSON N/A PUBLIC OPERATIONS 4,000 WESTERN HIGH SCHOOL DEARING RD 49269 MI PARMA N/A PUBLIC OPERATIONS 1,000 AMERICAN CANCER SOCIETY 49201 MI JACKSON N/A PUBLIC OPERATIONS 1,000 THE MISSY PROJECT 11303 DEAD OAK LANE 78759 TX AUSTIN N/A PUBLIC PRIVATE 1,000  Total		or substantial contributor			
49201 MI JACKSON N/A PUBLIC OPERATIONS 4,000 WESTERN HIGH SCHOOL DEARING RD 49269 MI PARMA N/A PUBLIC OPERATIONS 1,000  AMERICAN CANCER SOCIETY 49201 MI JACKSON N/A PUBLIC OPERATIONS 1,000  THE MIST PROJECT 11303 DEAD OAK LANE 78759 TX AUSTIN N/A PUBLIC PRIVATE 1,000  Total Pagarwad for future payment 7,000	a Paid during the year				
DEARING RD 49269 MI PARMA N/A PUBLIC OPERATIONS 1,000  AMERICAN CANCER SOCIETY 49201 MI JACKSON N/A PUBLIC OPERATIONS 1,000  THE MISSY PROJECT 11303 DEAD OAK LANE 78759 TX AUSTIN N/A PUBLIC PRIVATE 1,000  Total  Total  Total  Total  Total  Total  Total  Total  Total  Total  Total  Total  Total  Total  Total  Total  Total  Total  Total  Total  Total  Total  Total  Total  Total  Total  Total  Total  Total  Total  Total  Total  Total  Total  Total  Total  Total  Total  Total  Total  Total  Total  Total  Total  Total  Total  Total  Total  Total  Total  Total  Total  Total  Total  Total  Total  Total  Total  Total  Total  Total  Total  Total  Total  Total  Total  Total  Total  Total  Total  Total  Total  Total  Total  Total  Total  Total  Total  Total  Total  Total  Total  Total  Total  Total  Total  Total  Total  Total  Total  Total  Total  Total  Total  Total  Total  Total  Total  Total  Total  Total  Total  Total  Total  Total  Total  Total  Total  Total  Total  Total  Total  Total  Total  Total  Total  Total  Total  Total  Total  Total  Total  Total  Total  Total  Total  Total  Total  Total  Total  Total  Total  Total  Total  Total  Total  Total  Total  Total  Total  Total  Total  Total  Total  Total  Total  Total  Total  Total  Total  Total  Total  Total  Total  Total  Total  Total  Total  Total  Total  Total  Total  Total  Total  Total  Total  Total  Total  Total  Total  Total  Total  Total  Total  Total  Total  Total  Total  Total  Total  Total  Total  Total  Total  Total  Total  Total  Total  Total  Total  Total  Total  Total  Total  Total  Total  Total  Total  Total  Total  Total  Total  Total  Total  Total  Total  Total  Total  Total  Total  Total  Total  Total  Total  Total  Total  Total  Total  Total  Total  Total  Total  Total  Total  Total  Total  Total  Total  Total  Total  Total  Total  Total  Total  Total  Total  Total  Total  Total  Total  Total  Total  Total  Total  Total  Total  Total  Total  Total  Total  Total  Total  Total  Total  Total  Total  Total  Total  Total  Total  Total  Total  Total	634 N MECHANIC ST	N/A	PUBLIC	OPERATIONS	4,000.
## Total	DEARING RD	N/A	PUBLIC	OPERATIONS	1,000.
THE MISSY PROJECT 11303 DEAD OAK LANE 78759 TX AUSTIN  N/A  PUBLIC PRIVATE  1,000  Total  b Approved for future payment  7,000	AMERICAN CANCER SOCIETY				
11303 DEAD OAK LANE 78759 TX AUSTIN  N/A  PUBLIC PRIVATE  1,000  Total  Approved for future payment  1,000	49201 MI JACKSON	N/A	PUBLIC	OPERATIONS	1,000.
b Approved for future payment	11303 DEAD OAK LANE	N/A	PUBLIC	PRIVATE	1,000.
b Approved for future payment					7.000
				▶ 3a	7,000.
Total	b Approved for future payment				
Form 000 PE (2014)	Total			. ▶ 3b	

Page **13** 

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·	Did the	e orgai	nization directly or		age in any of	f the follo	owing with a	ny othe	er organization de	escribed in sec	tion		Yes	No
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			ursement arrange			•		•	•	•	•	1b(4)		X
			or loan guarantee			•				•		1b(5)		X
	٠,		mance of services		•	-		•	•			1b(6)		X
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	_	(a)	Name of organiza	tion	(1	b) Type	of organiza	tion		(c) Description	on of rela	tionship		
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JACKSON MI 49204-0766

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

Department of the Treasury Internal Revenue Service

## **Schedule of Contributors**

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

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

OMB No 1545-0047

2014

Name of the organization		T ON	Employer identification number				
ROBBIE CURTIS C  Organization type (check one)	ARITABLE FOUNDAT	TON	30-0201166				
Organization type (check one)							
Filers of:	Section:						
Form 990 or 990-EZ	501(c)( ) (enter numb	er) organization					
	4947(a)(1) nonexempt chara	table trust not treated as a private foundation					
	527 political organization						
Form 990-PF X 501(c)(3) exempt private foundation							
	4947(a)(1) nonexempt char	table trust treated as a private foundation					
	501(c)(3) taxable private fou	undation					
, ,	red by the General Rule or a Sp	ecial Rule. boxes for both the General Rule and a Special R	Rule See instructions				
General Rule	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	·					
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	rty) from any one contributor. Cor	received, during the year, contributions totaling \$5 mplete Parts I and II. See instructions for determine					
Special Rules							
regulations under sections 13, 16a, or 16b, and that r	For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 331/3 % support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of (1) \$5,000 or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1 Complete Parts I and II						
		0) filing Form 990 or 990-EZ that received from ar \$1,000 <i>exclusively</i> for religious, charitable, scienti					
literary, or educational pur	oses, or for the prevention of crue	elty to children or animals. Complete Parts I, II, ar	nd III				
contributor, during the year	contributions exclusively for relig	D) filing Form 990 or 990-EZ that received from ar gious, charitable, etc., purposes, but no such d, enter here the total contributions that were rece					
- ·	·	purpose Do not complete any of the parts unless					
• •	s organization because it receiveing the year	ed nonexclusively religious, charitable, etc., contrib • • •					
totaling \$5,000 of filole do	my me year						
		and/or the Special Rules does not file Schedule E					

Form 990-PF, Part I, line 2, to certify that it does not meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF)

Name of organization
ROBBIE CURTIS CHARITABLE FOUNDATION

Employer identification number 30-0201166

Part I	Contributors (see instructions). Use duplicate copies of Part I if additional space is needed		
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
_1	PHILIP J CURTIS  4447 SPRINGBROOK RD  JACKSON MI 49201-	\$ 11,800.	Person X Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		-   \$ 	Person Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		_ _ \$	Person Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		s	Person Payroll Complete Part II for noncash contributions )