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DLN: 93491217007135

OMB No 1545-0052

Department of the Treasury

Internal Revenue Service

Return of Private Foundation or Section 4947(a)(1) Trust Treated as Private Foundation ▶ Do not enter social security numbers on this form as it may be made public.

► Information about Form 990-PF and its instructions is at <u>www.irs.gov/form990pf</u>.

| For | cale | ndar year 2014, or tax year beginning 01- | 01-2014 | , a | nd ending 1 | .2-31-2014 | | | | |
|-----------------|---------|---|--|-------|---|---|---|--|--|--|
| | | undation | | | A Employer id | entification numbe | er | | | |
| RA | Y & PEC | G HIRVONEN CHARITABLE FOUNDATION | | | 31-1388018 | | | | | |
| Num | her and | I street (or P O box number if mail is not delivered to street addres | s) Room/suite | | B Telephone nu | ımber (see ınstructioi | าร) | | | |
| | | WOOD LANE | Sy Room, Sake | | (906) 249-3358 | 3 | | | | |
| | | 770 | | | C If exemption application is pending, check here | | | | | |
| | | n, state or province, country, and ZIP or foreign postal code , MI 49855 | | | C II exemption | аррисацоп із репаш | g, check here 🕨 | | | |
| | | Г | | | | | | | | |
| G Cr | ieck a | Il that apply Initial return Initial return of a | a former public charit | У | | rganizations, check h | • | | | |
| | | Address change Name change | | | | rganizations meeting :k here and attach co | | | | |
| H C h | eck ty | pe of organization Section 501(c)(3) exempt priv | ate foundation | | | undation status was t n 507(b)(1)(A), chec | | | | |
| Г _s | ection | 4947(a)(1) nonexempt charitable trust Cother tax | | | diaci sectio | 11 307(B)(1)(N), ellec | . Tiere | | | |
| | | ket value of all assets at end J Accounting method | ▼ Cash | rual | | ation is in a 60-mont n 507(b)(1)(B), chec | | | | |
| | | from Part II, col. (c), | t be on cash basis.) | | under sectio | 11 307(b)(1)(b), chec | k liele - j | | | |
| | rt I | Analysis of Revenue and Expenses (The | <u> </u> | | | | (d) Disbursements | | | |
| | | total of amounts in columns (b), (c), and (d) may not necessanly equal the amounts in column (a) (see instructions)) | (a) Revenue and expenses per books | (b) N | let investment income | (c) Adjusted net income | for charitable purposes (cash basis only) | | | |
| | 1 | Contributions, gifts, grants, etc , received (attach | | | | | | | | |
| | | schedule) | | | | | | | | |
| | 2 | Check $\blacktriangleright \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ $ | | | | | | | | |
| | | Sch B | | | | | | | | |
| | 3 | Interest on savings and temporary cash investments | | | | | | | | |
| | 4 | Dividends and interest from securities | 101,666 | | 101,666 | 101,666 | | | | |
| | 5a | Gross rents | | | | | | | | |
| d) | b | Net rental income or (loss) Net gain or (loss) from sale of assets not on line 10 | 7,710 | | | | | | | |
| Revenue | 6a b | | 7,710 | | | | | | | |
| Đ Đ | " | Gross sales price for all assets on line 6a 37,500 | | | | | | | | |
| œ | 7 | Capital gain net income (from Part IV, line 2) | | | 7,710 | | | | | |
| | 8 | Net short-term capital gain | | | | | | | | |
| | 9 | Income modifications | | | | | | | | |
| | 10a | Gross sales less returns and allowances | | | | | | | | |
| | b | Less Cost of goods sold | | | | | | | | |
| | С | Gross profit or (loss) (attach schedule) | | | | | | | | |
| | 11 | Other income (attach schedule) | | | | | | | | |
| | 12 | Total. Add lines 1 through 11 | 109,376 | | 109,376 | 101,666 | | | | |
| | 13 | Compensation of officers, directors, trustees, etc | | | | | | | | |
| | 14 | Other employee salaries and wages | | | | | | | | |
| Š | 15 | Pension plans, employee benefits | | | | | | | | |
| Expenses | 16a | Legal fees (attach schedule) | | | 1,470 | | 1,470 | | | |
| | b | Accounting fees (attach schedule) | | | 1,470 | | 1,470 | | | |
| Admını strative | 17 | Interest | | | | | | | | |
| rat | 18 | Taxes (attach schedule) (see instructions) | % 835 | | 835 | | 835 | | | |
| <u>=</u> | 19 | Depreciation (attach schedule) and depletion | | | | | | | | |
| <u>Ē</u> | 20 | Occupancy | | | | | | | | |
| Ā | 21 | Travel, conferences, and meetings | | | | | | | | |
| and | 22 | Printing and publications | | | | | | | | |
| ě | 23 | Other expenses (attach schedule) | 20 | | 20 | | 20 | | | |
| Operating and | 24 | Total operating and administrative expenses. | | | _ | | | | | |
| Ē | | Add lines 13 through 23 | | | 2,325 | | 2,325 | | | |
| 0 | 25 | Contributions, gifts, grants paid | 149,521 | | | | 149,521 | | | |
| | 26 | Total expenses and disbursements. Add lines 24 and 25 | 151,846 | | 2,325 | | 151,846 | | | |
| | 27 | Subtract line 26 from line 12 | 111,110 | | , | | | | | |
| | а | Excess of revenue over expenses and disbursements | -42,470 | | | | | | | |
| | ь | Net investment income (If negative, enter -0 -) | | | 107,051 | | | | | |
| | c | Adjusted net income (if negative, enter -0 -) | | | | 101,666 | | | | |

| Part I | | Ralanco Shoots Attached schedules and amounts in the description column | Beginning of year | End o | of year |
|--------------|-------|---|--------------------------|------------------|-----------------------|
| I C | | Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only (See instructions) | (a) Book Value | (b) Book Value | (c) Fair Market Value |
| | 1 | Cash—non-interest-bearing | | | |
| | 2 | Savings and temporary cash investments | 184,456 | 171,939 | 171,939 |
| | 3 | Accounts receivable - | | | |
| | | Less allowance for doubtful accounts - | | | |
| | 4 | Pledges receivable 🟲 | | | |
| | | Less allowance for doubtful accounts 🕨 | | | |
| | 5 | Grants receivable | | | |
| | 6 | Receivables due from officers, directors, trustees, and other | | | |
| | | disqualified persons (attach schedule) (see instructions) | | | |
| | 7 | Other notes and loans receivable (attach schedule) 🟲 | | | |
| | | Less allowance for doubtful accounts 🟲 | | | |
| ا ع | 8 | Inventories for sale or use | | | |
| sets | 9 | Prepaid expenses and deferred charges | | | |
| ЙЗ | 10a | Investments—U S and state government obligations (attach schedule) | | | |
| | b | Investments—corporate stock (attach schedule) | 1,254,244 | 1,224,291 | 2,750,562 |
| | С | Investments—corporate bonds (attach schedule) | | | |
| | 11 | Investments—land, buildings, and equipment basis | | | |
| | | Less accumulated depreciation (attach schedule) | | | |
| | 12 | Investments—mortgage loans | | | |
| | 13 | Investments—other (attach schedule) | | | |
| | 14 | Land, buildings, and equipment basis 🟲 | | | |
| | | Less accumulated depreciation (attach schedule) | | | |
| | 15 | Other assets (describe | | | |
| | 16 | Total assets (to be completed by all filers—see the | | | - |
| | 10 | Instructions Also, see page 1, item I) | 1,438,700 | 1,396,230 | 2,922,501 |
| | 17 | Accounts payable and accrued expenses | 1,130,100 | 1,330,230 | 2,322,301 |
| | | Grants payable | | | + |
| | 18 | · ' | | | - |
| abilities | 19 | Deferred revenue | | | - |
| ā | 20 | Loans from officers, directors, trustees, and other disqualified persons Mortgages and other notes payable (attach schedule) | | | _ |
| Ï | 21 | · · · · · · · · · · · · · · · · · | | | |
| | 22 | Other liabilities (describe •) | | | |
| | 23 | Total liabilities (add lines 17 through 22) | | | - |
| ķ | | Foundations that follow SFAS 117, check here | | | |
| Fund Balance | | and complete lines 24 through 26 and lines 30 and 31. | | | |
| ılar | 24 | Unrestricted | | | |
| B | 25 | Temporarily restricted | | | |
| пd | 26 | Permanently restricted | | | |
| E | | Foundations that do not follow SFAS 117, check here 🕨 🔽 | | | |
| ō | | and complete lines 27 through 31. | | | |
| St. | 27 | Capital stock, trust principal, or current funds | | | |
| Assets | 28 | Paid-in or capital surplus, or land, bldg, and equipment fund | | | |
| | 29 | Retained earnings, accumulated income, endowment, or other funds | 1,438,700 | 1,396,230 |) |
| Net | 30 | Total net assets or fund balances (see instructions) | 1,438,700 | 1,396,230 |) |
| | 31 | Total liabilities and net assets/fund balances (see instructions) | 1,438,700 | 1,396,230 | |
| Pa | rt II | Analysis of Changes in Net Assets or Fund Balances | | | |
| 1 | | Total net assets or fund balances at beginning of year—Part II, column | (a), line 30 (must ag | ree | |
| | | with end-of-year figure reported on prior year's return) | | 1 | 1,438,700 |
| 2 | | Enter amount from Part I, line 27a | | 2 | -42,470 |
| 3 | | Other increases not included in line 2 (itemize) | | 3 | |
| 4 | | Add lines 1, 2, and 3 | | 4 | 1,396,230 |
| 5 | | Decreases not included in line 2 (itemize) 🟲 | | _ 5 | |
| 6 | | Total net assets or fund balances at end of year (line 4 minus line 5)—F | Part II, column (b), lii | ne 30 . 6 | 1,396,230 |

the Part VI instructions

| Part : | V Capital Gains | and Loss | es for Tax on Inve | stm | ent Income | | | | | |
|--------------|---|-----------------|--|-------------|--------------------------------------|--|---|----------------------------------|--|--|
| | (a) List and describe | the kınd(s) | of property sold (e g , r mmon stock, 200 shs I | eal e | state, | (b) How acquired P—Purchase D—Donation | (c) Date acquired (mo , day, yr) | (d) Date sold (mo , day, yr) | | |
| 1a | | | | | | | | | | |
| | | | | | | | | | | |
| | | | | | | | | | | |
| | | | | | | | | | | |
| | | | (f) Depreciation allowe | ı d | (a) Cost | or other basis | (h) Gau | n or (loss) | | |
| (€ | e) Gross sales price | | (or allowable) | | 1 | pense of sale | (e) plus (f) minus (g) | | | |
| а | | | | | | | | | | |
| b | | | | | | | | | | |
| С | | | | | | | | | | |
| d | | | | | | | | | | |
| е | | | | | | | | | | |
| Со | mplete only for assets | showing gair | n ın column (h) and own | ed by | the foundation | on 12/31/69 | (I) Gains (Co | l (h) gaın mınus | | |
| (i) | FM V as of 12/31/69 | | (j) Adjusted basis | | | ess of col (ı) | | less than -0-) or | | |
| | | | as of 12/31/69 | | over c | ol (j), ıf any | Losses (from col (h)) | | | |
| a | | | | | <u> </u> | | | | | |
| b | | | | | | | | | | |
| <u> </u> | | | | | | | | | | |
| d | | | | | | | | | | |
| е | | | , | | 1 | | | | | |
| 2 | Capital gain net inco | me or (net c | apıtal loss) | | aın, also enter i oss), enter -0- | in Part I, line 7 | 2 | 7,710 | | |
| 3 | Net short-term capit | al gaın or (lo | ss) as defined in section | ns 1 | 222(5) and (6) | | | | | |
| | If gaın, also enter ın ın Part I, lıne 8 . | Part I , line 8 | 3, column (c) (see instri | uctioi • | ns) If(loss), er | nter - 0 - | 3 | | | |
| Part | V Oualification | Under Sec | ction 4940(e) for I | Redu | uced Tax on | Net Investme | nt Income | | | |
| | cional use by domestic | | | | | | | | | |
| (i oi opi | tional use by domestic | private lourit | adions subject to the s | ectio | 111 4 5 4 0 (a) tax | on net mvestment | ilicollie) | | | |
| Ifsecti | on 4940(d)(2) applies, | leave this p | art blank | | | | | | | |
| | e foundation liable for th | | | | | | eriod? | ┌ Yes No | | |
| If "Yes, | " the foundation does n | ot qualify un | ider section 4940(e) D | o not | t complete this | part | | | | |
| 1 E n | ter the appropriate amo | unt in each | column for each year, s | ee in | structions befo | re makıng any ent | ries | | | |
| | (a) period years Calendar or tax year beginning in) | Adjusted | (b) qualifying distributions | Ne | (c) et value of nonchar | ıtable-use assets | (d Distributio (col (b) divide | on ratio | | |
| year (| 2013 | | 146,650 | + | | 2,659,263 | (cor (b) divide | 0 05515 | | |
| | 2012 | | 94,876 | | | 2,396,838 | | 0 03958 | | |
| | 2011 | | 119,684 | | | 2,168,666 | | 0 05519 | | |
| | 2010 | | 104,032 | | | 2,001,383 | | 0 05198 | | |
| | 2009 | | 93,796 | | | 1,701,531 | | 0 05512 | | |
| 2 | • | • • | | | | <u> </u> | 2 | 0 25702 | | |
| 3 | the number of years | the foundation | 5-year base period—di on has been in existenc | e ıf le | ess than 5 year | s | 3 | 0 05141 | | |
| 4 | Enter the net value o | f noncharita | ble-use assets for 201 | 4 fro | m Part X, line 5 | | 4 | 2,810,008 | | |
| 5 | | | | | | | 5 | 144,448 | | |
| 6 | | | me (1% of Part I, line 2 | | | | 6 | 1,071 | | |
| 7 | Add lines 5 and 6. | | | | | | 7 | 145,519 | | |
| 8 | Enter qualifying distr | ibutions from | n Part XII, line 4 | | | | 8 | 151,846 | | |

If line 8 is equal to or greater than line 7, check the box in Part VI, line 1b, and complete that part using a 1% tax rate. See

| Form | 990-PF (2014) | | Р | age 4 | | | | | | |
|----------------|--|--|------|--------------|--|--|--|--|--|--|
| Pai | Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948—see page 18 of the inst | ructio | ns) | | | | | | | |
| 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 | | | | | | | | | |
| b | Domestic foundations that meet the section 4940(e) requirements in Part V, check | | | 1,071 | | | | | | |
| _ | here F and enter 1% of Part I, line 27b | | | | | | | | | |
| c | 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-) | | | | | | | | | |
| 3 | Add lines 1 and 2 | | | 1,071 | | | | | | |
| 4 | Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only Others | | | | | | | | | |
| • | enter -0-) | | | | | | | | | |
| 5 | <u> </u> | | | | | | | | | |
| 6 | Credits/Payments | | | | | | | | | |
| а | 2014 estimated tax payments and 2013 overpayment credited to 2014 6a 1,240 | | | | | | | | | |
| b | Exempt foreign organizations—tax withheld at source 6b | | | | | | | | | |
| C | Tax paid with application for extension of time to file (Form 8868) 6c | | | | | | | | | |
| d | Backup withholding erroneously withheld 6d | | | | | | | | | |
| 7 | Total credits and payments Add lines 6a through 6d | | | 1,240 | | | | | | |
| 8 | Enter any penalty for underpayment of estimated tax. Check here 🔽 If Form 2220 is attached. 🔞 🔒 | | | 2 | | | | | | |
| 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 \(\begin{array}{c} \begin{array}{c} arr | | | 167 | | | | | | |
| 11 | Enter the amount of line 10 to be Credited to 2015 estimated tax 167 Refunded 11 | | | | | | | | | |
| Par | t VII-A Statements Regarding Activities | | | | | | | | | |
| 1a | During the tax year, did the foundation attempt to influence any national, state, or local legislation or did | | Yes | No | | | | | | |
| | ıt partıcıpate or ıntervene ın any political campaign? | 1a | | No | | | | | | |
| b | Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see Instructions | | | | | | | | | |
| | for definition)? | 1b | | No | | | | | | |
| | If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials | | | | | | | | | |
| | published or distributed by the foundation in connection with the activities. | | | | | | | | | |
| С | Did the foundation file Form 1120-POL for this year? | 1c | | No | | | | | | |
| 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 | | No | | | | | | |
| | 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 | | No | | | | | | |
| 4a | Did the foundation have unrelated business gross income of \$1,000 or more during the year? | 4a | | No | | | | | | |
| b _ | If "Yes," has it filed a tax return on Form 990-T for this year? | 4b | | No | | | | | | |
| 5 | Was there a liquidation, termination, dissolution, or substantial contraction during the year? | 5 | | No | | | | | | |
| | 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 | ļ | | 1 | | | | | | |
| | By language in the governing instrument, or By state legislation that effectively amends the governing instrument so that no mandatory directions | | | | | | | | | |
| | | |] | N. | | | | | | |
| 7 | that conflict with the state law remain in the governing instrument? | 6 | | No | | | | | | |
| 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 | Yes | | | | | | | |
| Q ₂ | Enter the states to which the foundation reports or with which it is registered (see instructions) | | 163 | | | | | | | |
| оа | 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 | Yes | | | | | | | |
| 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," complete Part XIV | 9 | | No | | | | | | |
| 10 | Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names | | | | | | | | | |
| | and addresses. | 10 | | No | | | | | | |
| | | | | | | | | | | |

| | | | | age c |
|-----|--|--------|-------------|-------|
| | t 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 | | | l |
| | meaning of section 512(b)(13)? If "Yes," attach schedule (see instructions) | 11 | | No |
| 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 | | No |
| 13 | Did the foundation comply with the public inspection requirements for its annual returns and exemption application? | 13 | Yes | |
| | Website address ►N/A | | | |
| 14 | The books are in care of ►RAY HIRVONEN Telephone no ►(906 |) 249- | 3358 | |
| | Located at ▶451 LAKEWOOD LANE MARQUETTE MI ZIP+4 ▶49855 | | | |
| | | | | |
| 15 | 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 | | | |
| 16 | At any time during calendar year 2014, did the foundation have an interest in or a signature or other authority over | | Yes | No |
| | a bank, securities, or other financial account in a foreign country? | 16 | | No |
| | See instructions for exceptions and filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial | | | |
| | Accounts (FBAR) If "Yes", enter the name of the foreign country 🟲 | | | |
| Pai | 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 |
| 1a | During the year did the foundation (either directly or indirectly) | | | |
| | (1) Engage in the sale or exchange, or leasing of property with a disqualified person? Yes V No | | | |
| | (2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) | | | |
| | a dısqualıfıed person? | | | |
| | (3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? Yes V No | | | |
| | (4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? Yes V No | | | |
| | (5) Transfer any income or assets to a disqualified person (or make any of either available | | | |
| | for the benefit or use of a disqualified person)? | | | |
| | (6) Agree to pay money or property to a government official? (Exception. Check "No" | | | |
| | if the foundation agreed to make a grant to or to employ the official for a period | | | |
| | after termination of government service, if terminating within 90 days) | | | |
| ь | 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 | | No |
| | Organizations relying on a current notice regarding disaster assistance check here | | | |
| c | Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, | | | |
| | that were not corrected before the first day of the tax year beginning in 2014? | 1c | | No |
| 2 | Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private | | | |
| 2 | operating foundation defined in section 4942(1)(3) or 4942(1)(5)) | | | |
| а | At the end of tax year 2014, did the foundation have any undistributed income (lines 6d | | | |
| a | and 6e, Part XIII) for tax year(s) beginning before 2014? | | | |
| | If "Yes," list the years > 20, 20, 20 | | | |
| ь | Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2) | | | |
| U | (relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) | | | |
| | | 26 | | No. |
| _ | to all years listed, answer "No" and attach statement—see instructions) | 2b | | No |
| 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 enterprise at | | | |
| _ | any time during the year? | | | |
| Ь | If "Yes," did it have excess business holdings in 2014 as a result of (1) any purchase by the foundation | | | |
| | or disqualified persons after May 26, 1969, (2) the lapse of the 5-year period (or longer period approved | | | |
| | by the Commissioner under section $4943(c)(7)$) to dispose of holdings acquired by gift or bequest, or (3) | | | |
| | the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Schedule C, Form 4720, to determine | | | |
| | if the foundation had excess business holdings in 2014.) | 3b | | No |
| 4a | Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes? | 4a | | No |
| b | Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its | | | |
| | charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2014? | 4b | | No |

| Pa | rt VII-B | Statements Rega | rdir | ng Activities for | W | nich Form 4720 | May | Be Required (cont | inue | d) | |
|---|--|--|--------|--|----------------------------|------------------------|--|--|---------|---------------|----------------------|
| 5a | During th | e year dıd the foundatıor | рау | or incur any amoun | t to | | | | | | |
| | (1) Carry | on propaganda, or other | wise | attempt to influenc | e leg | ıslatıon (section 49 | 45(e |))? | No No | | |
| | (2) Influe | nce the outcome of any | spec | ific public election (| see | section 4955), or to | car | ry | | | |
| | on, dı | rectly or indirectly, any | /ote | registration drive?. | | | | \ Yes \ | - No | | |
| | (3) Provid | de a grant to an individu | al for | travel, study, or oth | ners | ımılar purposes? | | ┌ Yes ┡ | √ No | | |
| | (4) Provid | de a grant to an organıza | tıon | other than a charita | ble, | etc , organization de | scrib | ped | | | |
| | ın sec | tion 4945(d)(4)(A)? (se | e in | structions) | | | | Yes | No No | | |
| | | de for any purpose other | | | | | | | | | |
| | educa | itional purposes, or for t | ne pr | evention of cruelty 1 | to ch | ıldren or anımals?. | | Yes 🖟 | - No | | |
| ь | If any ans | swerıs "Yes" to 5a(1)–(| 5), d | did any of the transactions fail to qualify under the exceptions described in | | | | | | | |
| | Regulatio | ns section 53 4945 or i | nac | urrent notice regard | ling d | disaster assistance | (see | instructions)? | | 5b | No |
| | Organizations relying on a current notice regarding disaster assistance check here | | | | | | | | | | |
| С | | wer is "Yes" to question | | | | | | | | | |
| tax because it maintained expenditure responsibility for the grant? TYes V No | | | | | | | | | | | |
| | | nttach the statement requi | | | | | | , , | | | |
| 6a | | undation, during the yea | | | | | prer | niums on | | | |
| | | Il benefit contract? | | | | | | | - No | | |
| ь | | | | | | | | benefit contract? | | 6b | No |
| _ | | o 6b, file Form 8870. | ., | , p | , | | | | - | | - |
| 7a | | ne during the tax year, w | as tl | ne foundation a party | v to : | a prohibited tay shel | ter ti | ransaction? TYes F | - No | | |
| | - | | | | | • | | the transaction? | | _{7b} | No |
| | 11 yes, are | | | | | | | n Managers, Highly | | | |
| Pa | rt VIII | and Contractors | . 01 | neers, birector. | , i | astees, i oanat | | i Hanagers, mgmy | ruiu | Linb | ioyees, |
| 1 | | icers, directors, trustees | , fo | ındation managers a | nd t | heir compensation (| see i | nstructions). | | | |
| | | | (b) | Title, and average | | c) Compensation | | (d) Contributions to | (e) F | ynens | e account, |
| | (a) Nai | me and address | ا ا | hours per week evoted to position | If not paid, enter -0-) | | mployee benefit plans deferred compensation | otherallowances | | | |
| <u></u> | Λ dditional | Data Table | u | evoted to position | -0-) | and | deferred compensation | | | | |
| | Addictorial | Data Fable | | | | | | | | | |
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| | | | | | | | | | | | |
| _2 | Compensat | tion of five highest-paid | emp | loyees (other than | thos | e included on line 1- | -see | instructions). If none, e | nter "N | NONE." | |
| | . NI | | | (b) Title, and aver | age | | | (d) Contributions to | (-) [| • | |
| (a | | l address of each employ nore than \$50.000 | ee | hours per week | | (c) Compensation | n | employee benefit plans and deferred | | | e account, wances |
| | para | nore than \$50,000 | | devoted to positi | on | | | compensation | | iici aii | , wantees |
| NON | IE | | | | | | | | | | |
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| | | | | | | | | | | | |
| Tota | I number of | f other employees paid o | ver | \$50,000 | | | | 🕨 | | | |

| Information About Officers, Directors, Truste | es. Foundation Managers. His | page / hlv Paid Employees. |
|--|--|-------------------------------|
| and Contractors (continued) | | |
| 3 Five highest-paid independent contractors for professional services (| see instructions). If none, enter "NON | |
| (a) Name and address of each person paid more than \$50,000 | (b) Type of service | (c) Compensation |
| NONE | | |
| | | |
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| | | |
| Total number of others receiving over \$50,000 for professional services. | | <u> </u> |
| Part IX-A Summary of Direct Charitable Activities | | |
| List the foundation's four largest direct charitable activities during the tax year. Include rele | | r of Expenses |
| organizations and other beneficiaries served, conferences convened, research papers produ | ced, etc | Lxpelises |
| 1 | | |
| 2 | | |
| 3 | | |
| Power IV D. Common of Program Polated Investments (| and instructions) | |
| Part IX-B Summary of Program-Related Investments (some part in the street of the two largest program-related investments made by the foundation during the street of the street investment of the street of the stre | | A mount |
| 1 | the tax year on lines I and E | Amount |
| - | | |
| | | |
| 2 | | |
| - | | |
| | | |
| All other program-related investments See instructions | | |
| 3 | | |
| | | |
| | | |
| Total. Add lines 1 through 3 | | • |

Part X Minimum Investment Return (All domestic foundations must complete this part. Foreign foundations. see instructions.) Fair market value of assets not used (or held for use) directly in carrying out charitable, etc. 1 purposes 1a 2.640.189 1h 212.611 1c 1d 2.852.800 Reduction claimed for blockage or other factors reported on lines 1a and 1e 2 2 3 3 Subtract line 2 from line 1d. 2.852.800 Cash deemed held for charitable activities Enter 1 1/2% of line 3 (for greater amount, see 4 42.792 Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V. line 4. 5 2.810.008 5 140.500 **Distributable Amount** (see instructions) (Section 4942(1)(3) and (1)(5) private operating foundations and Part XT certain foreign organizations check here $\blacktriangleright \Gamma$ and do not complete this part.) 140.500 1 Tax on investment income for 2014 from Part VI, line 5. 1.071 2a Income tax for 2014 (This does not include the tax from Part VI). . . 2c 1.071 3 3 139.429 4 4 5 5 139.429 Distributable amount as adjusted Subtract line 6 from line 5 Enter here and on Part XIII, line 1. . . 7 7 139.429 Part XIII Oualifying Distributions (see instructions) Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes 1 Expenses, contributions, gifts, etc —total from Part I, column (d), line 26. 1a 151.846 1b Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc. 2 2 3 Amounts set aside for specific charitable projects that satisfy the За. 3b 4 Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4 151,846 4 Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment 1,071 Adjusted qualifying distributions. Subtract line 5 from line 4. 150,775 Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation qualifies for

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

| For | m 990-PF (2014) | | | | Page 9 |
|--------|---|---------------|----------------------------|--------------------|---------------|
| Р | art XIII Undistributed Income (see ins | structions) | | | |
| | | (a) Corpus | (b) Years prior to 2013 | (c) 2013 | (d) 2014 |
| 1 | Distributable amount for 2014 from Part XI, line 7 | Corpus | rears prior to 2015 | 2010 | 139,429 |
| | Undistributed income, if any, as of the end of 2014 | | | | |
| a | Enter amount for 2013 only | | | | |
| | Total for prior years 20, 20, 20 | | | | |
| | Excess distributions carryover, if any, to 2014 | - | | | |
| , , | From 2009 10,4 | 11 | | | |
| a h | From 2010 | | | | |
| 6 | From 2011 | | | | |
| ď | From 2012 | | | | |
| u e | From 2013 16,1 | | | | |
| | Total of lines 3a through e | 44,171 | | | |
| | Qualifying distributions for 2014 from Part | ' <u>'</u> | | | |
| • | XII, line 4 > \$ 151,846 | | | | |
| а | Applied to 2013, but not more than line 2a | | | | |
| | Applied to undistributed income of prior years | | | | |
| U | (Election required—see instructions) | | | | |
| c | Treated as distributions out of corpus (Election | 0 | | | |
| _ | required—see instructions) | | | | |
| d | Applied to 2014 distributable amount | | | | 139,429 |
| е | Remaining amount distributed out of corpus | 12,417 | | | |
| 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: | | | | |
| а | Corpus Add lines 3f, 4c, and 4e Subtract line 5 | 56,588 | | | |
| 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 | | | | |
| 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 must be distributed in 2015. | | | | 0 |
| 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 | 10,411 | | | |
| | applied on line 5 or line 7 (see instructions) | 10,411 | | | |
| 9 | Excess distributions carryover to 2015. | 46,177 | | | |
| | Subtract lines 7 and 8 from line 6a | 40,177 | | | |
| | Analysis of line 9 | 20 | | | |
| | | i38 | | | |
| | Excess from 2011 12,9 | 000 | | | |
| C | Excess from 2012 | 57 | | | |
| d | | | | | |
| е | Excess from 2014 12,2 | '-' | | | 1 |

| P | art XIV Private Operating Four | <u>ndations (</u> see in | <u>istructions</u> and P | art VII-A, questic | on 9) | |
|----------|--|--------------------------|---|---|--|-----------------|
| .a | If the foundation has received a ruling or d | etermination letter | that it is a private | operating | | |
| | foundation, and the ruling is effective for 20 | • | _ | | _ | |
| | Check box to indicate whether the organiza | | perating foundation | | n 4942(j)(3) c | or 4942(j)(5) |
| 2a | Enter the lesser of the adjusted net income from Part I or the minimum | Tax year | (1) | Prior 3 years | | (e) Total |
| | investment return from Part X for each | (a) 2014 | (b) 2013 | (c) 2012 | (d) 2011 | |
| L | year listed | | | | | |
| | 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 2d from line 2c | | | | | |
| | Complete 3a, b, or c for the alternative test relied upon | | | | | |
| а | "Assets" alternative test—enter | | | | | |
| | (1) Value of all assets(2) Value of assets qualifying | | | | | |
| | under section 4942(j)(3)(B)(i) | | | | | |
| b | "Endowment" alternative test— enter 2/3 of minimum investment return shown in Part X, line 6 for each year listed | | | | | |
| c | "Support" alternative test—enter | | | | | |
| | (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 | | | | | |
| | (4) Gross investment income | | | | | |
| Pa | rt XV Supplementary Information assets at any time during | | | the organization | on had \$5,000 | or more in |
| | Information Regarding Foundation Manage | | msa acaons.) | | | |
| а | List any managers of the foundation who habefore the close of any tax year (but only if | | | | • | dation |
| _ | | | | | | |
| b | List any managers of the foundation who ov ownership of a partnership or other entity) | | | | ly large portion of t | he |
| | omeising of a parenersing of other entity, | or which the lounds | 110111111111111111111111111111111111111 | greater meerest | | |
| | Information Regarding Contribution, Grant | , Gift, Loan, Schola | arship, etc., Progra | ms: | | |
| | Check here If the foundation only make unsolicited requests for funds. If the found other conditions, complete items 2a, b, c, a | atıon makes gıfts, g | o preselected char grants, etc (see in | itable organizations structions) to indivi | and does not acce duals or organization | pt ons under |
| | | | 6.1 | | | |
| а | The name, address, and telephone number MARK HIRVONEN | or e-mail address | or the person to w | nom applications sh | ouid be addressed | |
| | MARK HIRVONEN 451 LAKEWOOD LANE MARQUETTE, MI 49855 (906) 249-1578 | | | | | |
| b | The form in which applications should be s | | | • | de | |
| c | Any submission deadlines | O JL, DLADLINE, A | -ND CONTACT PI | - 1/30 N | | |
| | NONE Any restrictions or limitations on awards, | cuch ac by goog | nhical arose cha | able fields lands of | inctitutions or oth | or. |
| a | factors | | | · | • | C1 |
| | DISTRIBUTIONS ONLY TO QUALIFIED | 501(C)(3) EXEMP | T ORGANIZATIO | NS OR EXEMPT MU | NICIPALITIES | |

| Part XV Supplementary Inform | nation (continued) | | | Page 1 |
|--|--|-------------------------|----------------------------------|---------------|
| 3 Grants and Contributions Paid | | proved for F | uture Payment | |
| Recipient | If recipient is an individual, show any relationship to any foundation manager | Foundation status of | Purpose of grant or contribution | A mount |
| Name and address (home or business) | or substantial contributor | recipient | | |
| a Paid during the year See Additional Data Table | or substantial contributor | recipient | | |
| Total | | | ▶ 3a | 149,52 |
| b Approved for future payment | | | | 1 |
| | | | | |
| | | | line ou | |

| Form 990-F | | | | | | Page 12 |
|--|--|-------------------|--------------------|---------------------|--------------------|--|
| | -A Analysis of Income-Produci | | | Fushidad by asstra | - F12 F12 F14 | (a) |
| _ | s amounts unless otherwise indicated | (a) Business code | (b) A mount | (c) Exclusion code | (d) A mount | (e) Related or exempt function income (See instructions) |
| b | | | | | | , |
| e f g Fees a | and contracts from government agencies | | | | | |
| | st on savings and temporary cash ments | | | | | |
| 5 Net ren | 4 Dividends and interest from securities5 Net rental income or (loss) from real estate | | | 14 | 101,666 | |
| b Not do 6 Net ren | financed property ebt-financed property | | | | | |
| 8 Gain or | nvestment income | | | | | 7,710 |
| 10 Gross p 11 Other r | Net income or (loss) from special events Gross profit or (loss) from sales of inventory. Other revenue a | | | | | |
| c | | | | | | |
| 12 Subtota 13 Total. A | Add columns (b), (d), and (e). Add line 12, columns (b), (d), and (e). Orksheet in line 13 instructions to verify co | | | 1 | 101,666 L3 | · · · · · · · · · · · · · · · · · · · |
| Part XVI | Explain below how each activities to the accomplishment of the foundation's instructions) | h income is re | ported ın column (| (e) of Part XVI-A c | ontributed importa | |
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| Form 990-PF | F (2014) | | | | | | | | | | Pa | ge 13 |
|--------------------|---|-------------------------|-------------------|--------------------------|-------------------|----------------------|--------------------------|------------------------------|--------------------------|-----------------------|--------|--------------|
| Part XVI | Information R Noncharitable | | | | | action | ns and I | Relationships | With | | | |
| | rganization directly or 601(c) of the Code (oth | ndirectly (| engage | ın any of | the following wit | | | | | | Yes | No |
| organızat - | | | | | | | | | | | | |
| | s from the reporting fou | | | | | | | | | | | . |
| | h | | | | | | | | | 1a(1) | | No |
| | erassets | | | | | | | | | 1a(2) | | No |
| b Other tra | | | | | | | | | | 41.743 | | |
| | s of assets to a noncha | | | | | | | | | | | No |
| | hases of assets from a | | | | | | | | | | | No |
| | tal of facilities, equipme | | | | | | | | | | | No |
| | nbursement arrangeme | | | | | | | | | 1b(4) | | No |
| | ns or loan guarantees. | | | | | | | | | 1b(5) | | No |
| | rmance of services or r | | | | | | | | | 1b(6) | | No |
| | of facilities, equipment, swer to any of the above | | | | | | | | | | | No |
| of the go | ods, other assets, or seansaction or sharing arm (b) Amount involved | ervices giv angement | en by t , show | the reporti ın column | ng foundation I | f the fou the god | undation r ods, other | eceived less than | fair marke es receive | et value ed | 1 | nts |
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| describe | undation directly or ind d in section 501(c) of t complete the following (a) Name of organizatio | he Code (d schedule | | nan sectio | • | ın sectı | - | | tion of relati | .厂Y∈ | es F | - No |
| | (, | | | | , , , , , | | | (-) | | | | |
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| the | der penalties of perjury best of my knowledge ormation of which prepa | and belief, | ıt ıs tr | ue, correc | | | | | n taxpaye | | sed on | all |
| Here | **** | | | | 2015-07-29 | L. | ***** | | return | | | |
| | Signature of officer or t | rustee | | | Date | <u> </u> | Tıtle | | below | preparer tr)? 🔽 Y | | |
| | Print/Type preparer's MICHAEL R HILL | name | Prepa | arer's Sıgn | nature | Date | | Check if self- employed ▶ | PTIN P(| 000352 | 299 | |
| Paid Preparer | Firm's name F Kroncich Hill & Assoc | ates | l | | | ı | | Firm's EIN ► | 1 | | | |
| Use | Firm's address 🕨 | | | | | | | | | | | |
| Only | 843 West Washington | n Street M | 1arque | tte, MI 49 | 9855 | | | Phone no (906 |) 228-795 | 50 | | |
| | 1 | | | | | | | | | | | |

Form 990PF Part VIII Line 1 - List all officers, directors, trustees, foundation managers and their compensation

| (a) Name and address | (b) Title, and average hours per week devoted to position | (c) Compensation (If not paid, enter -0-) | (d) Contributions to employee benefit plans and deferred compensation | (e) Expense account, other allowances |
|--|---|---|--|--|
| LINDA HIRVONEN | President | 0 | | |
| 181 LAKEWOOD LANE MARQUETTE,MI 49855 | 1 00 | | | |
| MATT HIRVONEN | Vice President | 0 | | |
| E714 NIEMI ROAD SKANDIA,MI 49885 | 1 00 | | | |
| MARK HIRVONEN | Secretary | 0 | | |
| 451 LAKEWOOD LANE MARQUETTE,MI 49855 | 1 00 | | | |
| RAY HIRVONEN | Treasurer | 0 | | |
| 4829 S E HANSON CIRCLE STUART, FL 34997 | 1 00 | | | |
| RACHEL HETICO-HIRVONEN | Director | 0 | | |
| 4829 S E HANSON CIRCLE STUART, FL 34997 | 1 00 | | | |

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

| Т | | | |
|---|--|--|---|
| If recipient is an individual, show any relationship to | Foundation status of | Purpose of grant or contribution | A mount |
| any foundation manager or substantial contributor | recipient | | |
| | | | |
| | EXEMPT | PROGRAM SUPPORT | 6,100 |
| | EXEMPT | REHAB FACILITY FOR ELDERLY/DISABLED ACCESS | 1,221 |
| | EXEMPT | UNDERWRITE WANDER GUARD SECURITY FOR DEMENTIA PROGRAM | 2,000 |
| | EXEMPT | PROGRAM SUPPORT | 2,000 |
| | EXEMPT | ONGOING SUPPORT | 1,000 |
| | EXEMPT | FUNDING FOR ART/THERAPY PROGRAM FOR DEMENTIA & ALZHEIMERS RESIDENTS | 1,000 |
| | EXEMPT | SUPPORT BLUES ART FORM & 10TH ANNIVERSARY OF BLUES FEST | 1,000 |
| | EXEMPT | UNDERWRITE SUMMER BAND PROFORMANCES | 1,000 |
| | EXEMPT | PROGRAM SUPPORT - PETUNIA PANDEMONIUM & FR MARQUETTE STATUE RESTORATION | 1,000 |
| | EXEMPT | ROGRAM SUPPORT - TOUR GUIDES, UPDATE STORM OF 1913 EXHIBIT | 10,000 |
| | EXEMPT | CAPITAL CAMPAIGN | 5,000 |
| | EXEMPT | PROGRAM SUPPORT - GENERAL OPERATIONS | 5,000 |
| | EXEMPT | UNDERWRITE HIGH SCHOOL BOWL SHOW | 7,500 |
| | EXEMPT | PROGRAM SUPPORT - SUPPLIES & EXHIBITS, FACILITY REPAIR | 1,000 |
| | EXEMPT | PROGRAM SUPPORT | 1,000 |
| | show any relationship to any foundation manager or substantial contributor | show any relationship to any foundation manager or substantial contributor EXEMPT EXEMPT | Show any relationship to any foundation manager or substantial contribution EXEMPT PROGRAM SUPPORT EXEMPT REHAB FACILITY FOR ELDERLY/DISABLED ACCESS EXEMPT UNDERWRITE WANDER GUARD SECURITY FOR DEMENTIA PROGRAM EXEMPT PROGRAM SUPPORT EXEMPT ONGOING SUPPORT EXEMPT FUNDING FOR ART/THERAPY PROGRAM FOR DEMENTIA & ALZHEIMERS RESIDENTS EXEMPT SUPPORT BLUES ART FORM & 10TH ANNIVERSARY OF BLUES FEST EXEMPT UNDERWRITE SUMMER BAND PROFORMANCES EXEMPT PROGRAM SUPPORT - PETUNIA PANDEMONIUM & FR MARQUETTE STATUE RESTORATION EXEMPT GOGRAM SUPPORT - TOUR GUIDES, UPDATE STORM OF 1913 EXHIBIT EXEMPT CAPITAL CAMPAIGN EXEMPT PROGRAM SUPPORT - GENERAL OPERATIONS EXEMPT PROGRAM SUPPORT - GENERAL OPERATIONS EXEMPT UNDERWRITE HIGH SCHOOL BOWL SHOW EXEMPT PROGRAM SUPPORT - GENERAL OPERATIONS EXEMPT PROGRAM SUPPORT - GENERAL OPERATIONS EXEMPT PROGRAM SUPPORT - GENERAL OPERATIONS EXEMPT PROGRAM SUPPORT - SUPPLIES & EXHIBITS, FACILITY REPAIR |

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

| | | | the real of Approved for re | |
|--|---|-------------------------|--|---------|
| Recipient | If recipient is an individual, show any relationship to | Foundation status of | Purpose of grant or contribution | A mount |
| Name and address (home or business) | any foundation manager or substantial contributor | recipient | | |
| a Paid during the year | | | | |
| WILLOW FARM THERAPEUTIC RIDING PROG 5048 US 41 SOUTH MARQUETTE,MI 49855 | | EXEMPT | PROGRAM SUPPORT & SCHOLARSHIP FUND | 5,000 |
| YMCA OF MARQUETTE COUNTY 1420 PINE ST MARQUETTE,MI 49855 | | EXEMPT | CAPITAL CAMPAIGN | 10,000 |
| ORION THE HUNTERS INSTITUTE PO BOX 24 TRUMANSBURG, NY 14886 | | EXEMPT | PROGRAM SUPPORT - HUNTER ETHICS & HERITAGE EDUCATION | 5,000 |
| INDIAN RIVER STATE COLLEGE FOUNDATI 3209 VIRGINIA AVE FT PIERCE,FL 34981 | | EXEMPT | SCHOLARSHIP ENDOWMENT FUND | 700 |
| TREASURE COAST YOUTH SYMPHONY 10 CENTRAL PARKWAY STUART,FL 34994 | | EXEMPT | PROGRAM SUPPORT | 2,000 |
| FINLANDIA UNIVERSITY 601 QUINCY HANCOCK,MI 49930 | | EXEMPT | ONGOING SUPPORT | 10,250 |
| MESSIAH LUTHERAN CHURCH 305 W MAGNETIC MARQUETTE, MI 49855 | | EXEMPT | ONGOING SUPPORT | 8,000 |
| IMMANUAL LUTHERAN CHURCH 2655 SW MANGO PALM CITY,FL 34990 | | EXEMPT | ONGOING SUPPORT | 7,000 |
| WQCS PUBLIC RADIO TREASURE COAST 3209 VIRGINIA AVE FT PIERCE,FL 34981 | | EXEMPT | PROGRAM SUPPORT | 1,000 |
| WXEL PUBLIC TV TREASURE COAST 3401 S CONGRESS BOYNTON BEACH,FL 33426 | | EXEMPT | PROGRAM SUPPORT | 5,000 |
| ELLIOTT MUSEUM 2400 SE FEDERAL HWY STUART,FL 34994 | | EXEMPT | CAPITAL CAMPAIGN | 5,000 |
| UP CHILDRENS MUSEUM 129 W BARAGA AVE MARQUETTE,MI 49855 | | EXEMPT | PGRADE/ENHANCE GIFT SHOP | 2,000 |
| MARQUETTE SYMPHONY 300 W BARAGA AVE MARQUETTE,MI 49855 | | EXEMPT | PROGRAM SUPPORT | 1,000 |
| MAPS FOUNDATION 1201 W FAIR AVE MARQUETTE, MI 49855 | | EXEMPT | COMPUTERS IN CLASSROOMS | 5,000 |
| FROENDS OF PRESQUE ISLECOMM FNDTN PO BOX 37 MARQUETTE,MI 49855 | | EXEMPT | PLAYGROUND PROJECT | 2,000 |
| Total | | | | 149,521 |

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

| Recipient | If recipient is an individual, show any relationship to | Foundation status of | Purpose of grant or contribution | A mount |
|--|---|-------------------------|------------------------------------|---------|
| Name and address (home or business) | any foundation manager or substantial contributor | recipient | | |
| a Paid during the year | | | | |
| HARBOR HOUSEMQT WOMEN'S CENTER 1301 S FRONT ST MARQUETTE,MI 49855 | | EXEMPT | PROGRAM SUPPORT | 3,000 |
| CAMP NEW DAY 201 E RIDGE ST MARQUETTE,MI 49855 | | EXEMPT | PROGRAM SUPPORT | 2,000 |
| MARQUETTE ALTERNATIVE SCHOOL 611 N FRONT ST MARQUETTE,MI 49855 | | EXEMPT | SCIENCE & MATH CAMP | 1,250 |
| SUPERIOR STRING ALLIANCE PO BOX 52 MARQUETTE,MI 49855 | | EXEMPT | SUMMER CAMP PROGRAM | 3,500 |
| SUPERIOR REHABYMCA 1420 PINE ST MARQUETTE,MI 49855 | | EXEMPT | SUMMER SPEECH & HEARING THERAPY | 2,500 |
| MOOSEWOOD NATURE CENTER PO BOX 773 MARQUETTE,MI 49855 | | EXEMPT | FURNACE REPAIR | 1,000 |
| FRIENDS OF TH ELYRIC THEATER 59 SW FLAGLER STUART,FL 34994 | | EXEMPT | CAPITAL CAMPAIGN | 5,000 |
| BIG BROTHERSBIG SISTERS MARTIN CO 5035 SE FEDERAL HIGHWAY STUART,FL 34997 | | EXEMPT | PROGRAM SUPPORT | 1,500 |
| NMU FOUNDATION 1401 PRESQUE ISLE MARQUETTE,MI 49855 | | EXEMPT | ENDOWED SCHOLARSHIP FUND | 15,000 |
| Total | | | | 149,521 |

TY 2014 Accounting Fees Schedule

Name: RAY & PEG HIRVONEN CHARITABLE FOUNDATION

EIN: 31-1388018

Software ID: 14000265

Software Version: 2014v5.0

| Category | Amount | Net Investment Income | Adjusted Net Income | Disbursements for Charitable Purposes |
|--------------------------------|--------|--------------------------|------------------------|---|
| KRONCICH, HILL & ASSOCIATES | 1,470 | 1,470 | 0 | 1,470 |

TY 2014 Other Expenses Schedule

Name: RAY & PEG HIRVONEN CHARITABLE FOUNDATION

EIN: 31-1388018

Software ID: 14000265

Software Version: 2014v5.0

| Description | Revenue and Expenses per Books | Net Investment Income | Adjusted Net Income | Disbursements for Charitable Purposes |
|------------------------|--------------------------------|--------------------------|---------------------|--|
| STATE OF MICH CORP FEE | 20 | 20 | | 20 |

TY 2014 Taxes Schedule

Name: RAY & PEG HIRVONEN CHARITABLE FOUNDATION

EIN: 31-1388018

Software ID: 14000265

Software Version: 2014v5.0

| Category | Amount | Net Investment Income | Adjusted Net Income | Disbursements for Charitable Purposes |
|--------------------------|--------|--------------------------|------------------------|---|
| 2014 EST TAX | 760 | 760 | | 760 |
| FOREIGN TAX ON DIVIDENDS | 75 | 75 | | 75 |