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EXTENSION ATTACHED EXTENDED TO AUGUST 17, 2015 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 separate instructions is at www.irs.gov/form990pf.

_		ndar year 2014 or tax year beginning		, and ending		Open to Public Inspection
		foundation		,	A Employer identification	number
	'HE	MINKIN FAMILY FOUNDATI	ON		38-3259421	<u> </u>
Nu	nber a	nd street (or P O box number if mail is not delivered to street	B Telephone number			
4	10	00 WOODWARD AVENUE, SUI	(248)540-7377			
		own, state or province, country, and ZIP or foreign p			C If exemption application is p	ending, check here
			4-5133			C=-1
G (Check	all that apply: Initial return		rmer public charity	D 1. Foreign organizations	s, check here
		Final return	Amended return		Foreign organizations me check here and attach co	eting the 85% test.
	7h!	Address change type of organization: X Section 501(c)(3) ex	Name change		1	• •
H (· · · · · · · · · · · · · · · · · · ·	Other taxable private foundation	ation	E If private foundation sta	
_ <u></u>		arket value of all assets at end of year J Accounti		Accrual	under section 507(b)(1)	
		· I	her (specify)	Accidal	F If the foundation is in a under section 507(b)(1)	
	- \$	3,069,063. (Part I, colu	mn (d) must be on cash l	pasis.)		(D), OHOLK HEIE
	art l		(a) Revenue and	(b) Net investment	(c) Adjusted net	(d) Disbursements
		(The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a).)	expenses per books	income	income	for charitable purposes (cash basis only)
	1	Contributions, gifts, grants, etc., received	0.	1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 -		
	2	Check if the foundation is not required to attach Sch. B			19	
	3	Interest on savings and temporary cash investments		-		3
	4	Dividends and interest from securities	45,691.	45,691.	<u> </u>	STATEMENT 1
	1	Gross rents .	,	r 34.25		
	1 .	Net rental income or (loss)	261 622			
ě	6a	Net gain or (loss) from sale of assets not on line 10 Gross sales price for all assets on line 8a 483,516.	261,622.		· , ,	
Revenue	,0	assets on line 6a 403, 310. Capital gain net income (from Part IV, line 2)	772 (% 32 - 1	261,622.	(<u> </u>	
æ	8	Net short-term capital gain	1 200 700	201,022.	<u> </u>	
	9	Income modifications	1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 -			
	10a	Gross sales less returns and allowances	1.08.2.4		3	
	١	Less. Cost of goods sold	1		7-22-1	
	C	Gross profit or (loss)		, - T-094		
	11	Other income				
	12	Total. Add lines 1 through 11	307,313.	307,313.		
C	13	Compensation of officers, directors, trustees, etc.	0.	0.	(e)	<u> </u>
Ξ	14	Other employee salaries and wages			JUN 08 2	115 []
ຼິສ	15	Pension plans, employee benefits			[2]	7
ens	IOB	Legal fees	\		(171
_	0	Other professional fees				
Ve Ext	17	Interest				
ati	18	Taxes STMT 2	6,712.	712.		0.
į agi	19	Depreciation and depletion				
<u> </u>	20	Occupancy				
¥	21	Travel, conferences, and meetings				
anc		Printing and publications				
ğ	23	Other expenses	9,870.	9,850.	<u> </u>	0.
Operating and Administrative	24	Total operating and administrative	16 500	10 560		
ŏ	0.5	expenses. Add lines 13 through 23	16,582. 149,957.	10,562.	7 7 87 7	140 057
_		Contributions, gifts, grants paid Total expenses and disbursements.	147,737.		 	149,957.
	20	Add lines 24 and 25	166,539.	10,562.		149,957.
_	27	Subtract line 26 from line 12:	100,333.	20,302		<u> </u>
	1	Excess of revenue over expenses and disbursements	140,774.			ţ
	1	Net investment income (if negative, enter -0-)		296,751.		
	1 .	Adjusted net income (if penatrye, enter -0-)	1		N/A	

Department of the Treasury

For	rm 99	0-PF (2014) THE MINKIN FAMILY FOUND		38-	3259421 Page 2
P	art	Balance Sheets Attached schedules and amounts in the description column should be for and-of-year amounts only	Beginning of year	End o	
<u>:</u>			(a) Book Value	(b) Book Value	(c) Fair Market Value
		Cash - non-interest-bearing	160 205	104 274	104 254
		Savings and temporary cash investments	160,285.	194,374.	194,374.
	3	Accounts receivable	·		н
	١.	Less: allowance for doubtful accounts			
	4	Pledges receivable ► Less; allowance for doubtful accounts ►	()		
		Cranta researchia			
	5	Receivables due from officers, directors, trustees, and other		·	<u> </u>
	0	des des de la constantina della constantina dell			
	,		<u> </u>		3.42
	7	Other notes and loans receivable	·		, · · · · · · · · · · · · · · · · · · ·
"	8	In and the fact and an use			
Assets		Prepaid expenses and deferred charges			
AS	100	Investments - U.S. and state government obligations			
		Investments - corporate stock STMT 5	1,450,951.	1,437,209.	2,742,564.
		Investments - corporate bonds STMT 6	83,688.	135,220.	
		Investments - land, buildings, and equipment basis	in the second	155/2201	1527125.
	\	Less accumulated depreciation	('		
	12	Investments - mortgage loans			
	13	Investments - other		····	
	14	Land, buildings, and equipment basis ►	N 1 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4	\$	· 1.3.4 安全 · 1.3.75%
	'	Less accumulated deprectation	()	•	, , , , , , , , , , , , , , , , , , , ,
	15	Other assets (describe >			
	1	Total assets (to be completed by all filers - see the			
		instructions. Also, see page 1, item I)	1,694,924.	1,766,803.	3,069,063.
	17	Accounts payable and accrued expenses			;' (4,
	18	Grants payable			
Ø	19	Deferred revenue			
Liabilities	20	Loans from officers, directors, trustees, and other disqualified persons			, , , , , , , , , , , , , , , , , , , ,
jab	21	Mortgages and other notes payable			1773
در	22	Other liabilities (describe >)			
			i _	_	The second second second
_	23	Total liabilities (add lines 17 through 22)	0.	0.	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
		Foundations that follow SFAS 117, check here			The state of the s
ø		and complete lines 24 through 26 and lines 30 and 31.	ì		
Fund Balances	24	Unrestricted			
alai	25	Temporarily restricted			
d B	26	Permanently restricted Foundations that do not follow SFAS 117, check here			
Ę	}				
ъ		and complete lines 27 through 31.	0.	0.	
ets	27	Capital stock, trust principal, or current funds	0.	0.	
Net Assets	28	Retained earnings, accumulated income, endowment, or other funds	1,694,924.	1,766,803.	1.00
et /	29 30	Total net assets or fund balances.	1,694,924.	1,766,803.	
Z.	"	Total liet 8356 to of fully variables	1,001,021.	1,700,005.	
	31	Total liabilities and net assets/fund balances	1,694,924.	1,766,803.	7 55,
				2770070000	
	art	III. Analysis of Changes III Net Assets of Fund E			·
1		net assets or fund balances at beginning of year - Part II, column (a), line			
		st agree with end-of-year figure reported on prior year's return)			1,694,924.
2	Ente	r amount from Part I, line 27a		2	140,774.
3		r increases not included in line 2 (itemize)			0.
4		lines 1, 2, and 3			1,835,698.
		eases not included in line 2 (itemize) I net assets or fund balances at end of year (line 4 minus line 5) - Part II, c		ATEMENT 4 5	68,895. 1,766,803.
<u>6</u> _	rota	i net assets of Turiu Dalatices at end of year (line 4 minus line 3) • Fatt 11, t	Oceann (u), mie su	<u> </u>	Form 990-PF (2014)

	and Losses for Tax on In				36-345	9421 Page 3
(a) List and describe the kind(s) of property sold (e.g., re 2-story brick warehouse; or common stock, 200 shs. M		, real estate,			(c) Date acquired (mo., day, yr.)	(d) Date sold (mo., day, yr.)
1 <u>a</u>						
b SEE ATTACHED	STATEMENTS					
_C				 		
_d			· _			
<u>e </u>			<u> </u>	<u> </u>		<u> </u>
(e) Gross sales price	(f) Depreciation allowed (or allowable)		or other basis pense of sale		(h) Gain or (loss (e) plus (f) minus	
a						
b						
<u>c</u>						
d					- <u>-</u>	
e 483,516.	<u> </u>		221,89			261,622.
Complete only for assets showing	ng gain in column (h) and owned by t) Gains (Col. (h) gair . (k), but not less tha	
(i) F.M.V. as of 12/31/69	(j) Adjusted basis as of 12/31/69		ess of col. (1)	COI	Losses (from col.	
a						
b		<u>.</u>				
_c						
_d						
_e						261,622.
2 Capital gain net income or (net ca	apıtal loss) $ \begin{cases} \text{ If gain, also enter} \\ \text{ If (loss), enter -0-} \end{cases} $	in Part I, line 7 in Part I, line 7	, 7	} 2		261,622.
3 Net short-term capital gain or (los If gain, also enter in Part I, line 8,	ss) as defined in sections 1222(5) an column (c).	d (6):				
If (loss), enter -0- in Part I, line 8				<u> </u>	N/A	
Part V Qualification U	Inder Section 4940(e) for	Reduced	Tax on Net	Investment Inc	ome	
If "Yes," the foundation does not qua	his part blank. tion 4942 tax on the distributable am lify under section 4940(e). Do not co each column for each year; see the in	mplete this par	<u>t. </u>		· · · · · · · · · · · · · · · · · · ·	Yes X No
(a)	(b)		or manning unit o	(c)		(d) bution ratio
Base periód years Calendar year (or tax year beginni	Andreas Annable in the	ributions	Net value of no	ncharitable-use assets	Distri	bùtión ratio vided by col. (c))
2013		4,170.		2,301,526		.045261
2012		0,922.		1,904,874		.047731
2011		8,119.		1,844,724		.047768
2010	9	9,808.		1,740,914		.057331
2009		4,570.		1,474,442		.037011
2 Total of line 1, column (d)					2	.235102
	5-year base period - divide the total of					
the foundation has been in existe	nce if less than 5 years				3	.047020
4 Enter the net value of noncharitat	ble-use assets for 2014 from Part X, I	line 5 .			4	2,850,291.
5 Multiply line 4 by line 3					. 5	134,021.
6 Enter 1% of net investment incor	ne (1% of Part I, line 27b)			• • • • • • • • • • • • • • • • • • • •	6	2,968.
7 Add lines 5 and 6					. 7	136,989.
	n Part XII, line 4				8	149,957.
If line 8 is equal to or greater that See the Part VI instructions.	n line 7, check the box in Part VI, line	1b, and compl	ete that part usir	ng a 1% tax rate.		
						Form QQD_DE /2014

orm	n 990-PF (2014) THE MINKIN FAMILY FOUNDATION 3	<u>8 –</u>	32594	21	Page 4
Pa	art VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 494	18 -	· see in	structi	ons)
1a	Exempt operating foundations described in section 4940(d)(2), check here and enter "N/A" on line 1.	,	E 13	Ţ., -	
	Date of ruling or determination letter: (attach copy of letter if necessary-see instructions)	, : <u>",</u>	1 4 - 1 - 2	, 3	
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check here 🕨 🔀 and enter 1%	<u>1</u>		2,	968.
	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). 🔾 🛒	7.5			` ` ` `
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	2			<u> </u>
3		3	<u> </u>	2,	968.
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	4			<u> </u>
		5	27 F 76 3	<u>2,</u>	<u>968.</u>
	Credits/Payments:				•
	2014 estimated tax payments and 2013 overpayment credited to 2014 <u>6a</u> <u>3,780.</u>			98.355 38.352 + -	
	Exempt foreign organizations - tax withheld at source	\$10.53 \$10.53			£
	Tax paid with application for extension of time to file (Form 8868) 6c 4 , 000 .			語文が 気がずい	, , ,
	Backup withholding erroneously withheld	3			_ , -
	Total credits and payments. Add lines 6a through 6d	7_		<u> </u>	<u>780.</u>
		8_			
	· · · · · · · · · · · · · · · · · · ·	9_	 		
	· · · · · · · · · · · · · · · · · · ·	10		<u>4,</u>	<u>812.</u>
		11	L		<u> </u>
	art VII-A Statements Regarding Activities			(manageria)	
1a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in		<u> </u>		s No
	any political campaign?	•	· -	1a	X
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see instructions for the definition)?			1b	X
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials published	or	25. F		1
	distributed by the foundation in connection with the activities.		E	操机 - :	
	Did the foundation file Form 1120-POL for this year?		3	10	<u> </u>
đ	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year:		98	2	
	(1) On the foundation. ► \$ 0. (2) On foundation managers. ► \$ 0.		32		
е	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation		7.33		
	managers. > \$ 0 . Has the foundation engaged in any activities that have not previously been reported to the IRS?		&	STATE OF	3.7
2	•		-	2	+ X
2	If "Yes," attach a detailed description of the activities. Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, or		1		
3	bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes		152	\$ 1.00 AV.	- \ -\
40	a Did the foundation have unrelated business gross income of \$1,000 or more during the year?	•	· -	3 4a	$\frac{\mathbf{x}}{\mathbf{x}}$
	of "Yes," has it filed a tax return on Form 990-T for this year?	N	/A .		 ^
	And the state of t	74	′ ີ · ├	4b	+
•	If "Yes," attach the statement required by General Instruction T.	•		#JS 7"	
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either:		Š.		7
Ŭ	By language in the governing instrument, or		13	25 A 2 5 - 1	· /
	 By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state la 	w	(2)		- S
	remain in the governing instrument?	••	ľ	6 X	. -
7	Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col. (c), and Part XV		· · · -	7 X	
•	blo the realisation have at made topolog in about at any time during the year. In 1700, complete 7 art 11, con. (b), and 7 art 170	•	-		
Яa	■ Enter the states to which the foundation reports or with which it is registered (see instructions)		1200	EXE 17	'
Ju	MI		— [?	35.40	:] : : ·
h	of the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate)		—— [<u>'</u>	[3,4]] 	.
9	of each state as required by General Instruction G? If "No," attach explanation		ļ,÷	8b X	
9		ar .	· · ·		
-	year 2014 or the taxable year beginning in 2014 (see instructions for Part XIV)? If "Yes," complete Part XIV		4	9	X
10	Did any persons become substantial contributors during the tax year? It Tyes, attach a schedule listing their names and addresses		···· }	10	+ x
<u></u>	according to the manual and addresses		Eorm	990-DI	E (2014)

orm	1990-PF (2014) THE MINKIN FAMILY FOUNDATION 3	8-3259	421		Page 5
Pε	art VII-A Statements Regarding Activities (continued)				
11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of				
	section 512(b)(13)? If "Yes," attach schedule (see instructions)		11		Х
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had advisory private formula of the foundation of the founda	ileges?			
	If "Yes," attach statement (see instructions)		12		X
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?		13	X	
	Website address ► N/A				
14	The books are in care of ► MICHAEL TOOTALIAN, CPA Telephone no. ►	(248)	540	-73	77
	Located at ▶ 41000 WOODWARD AVENUE, SUITE 120 EAST, BLOOMFIELD Z	IP+4 ▶48	304		
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - Check here			•	$\overline{\Box}$
	and enter the amount of tax-exempt interest received or accrued during the year	15	N	/A	
16	At any time during calendar year 2014, did the foundation have an interest in or a signature or other authority over a bank,			Yes	No
	securities, or other financial account in a foreign country?		16	ļ i	X
	See the instructions for exceptions and filing requirements for FinCEN Form 114, (formerly TD F 90-22.1). If "Yes," enter the name of	f the		,	٠,
	foreign country		L	, .	(4
Pε	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.		1.	Yes	No
1a	During the year did the foundation (either directly or indirectly):			-	
		X No	•		
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from)				-
		X No			
		X No	`,'	-	
		X No	•		
	(5) Transfer any income or assets to a disqualified person (or make any of either available		-		
	· · · · · · · · · · · · · · · · · · ·	X No			
	(6) Agree to pay money or property to a government official? (Exception. Check "No"		- ,		
	If the foundation agreed to make a grant to or to employ the official for a period after		- 1		
		X No	- 1	1	
b	o 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)?	N/A	<u>1</u> b		
	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			1	
	before the first day of the tax year beginning in 2014?		1c		<u>X</u>
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation		, ,		
	defined in section 4942(j)(3) or 4942(j)(5)): At the end of tax year 2014, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning				
2	and the control of th	X No	-4		
	before 2014?	ا ۱۸۵ لکا	´ -		
	Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2) (relating to incorrect			, , <u> </u>	
•	valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer "No" and attach		.,.	_	
	statement - see instructions.)	N/A	2b		-
c	of the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here.	21, 22			
Ī	>			,	
3a	a Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time				
-		X No			
b	of "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 disp	ose		e ba	
	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,		·	•	
		Ņ/Ą	3b		
4a	a Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?		4a		X
	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose ti		, .		,
	had not been removed from jeopardy before the first day of the tax year beginning in 2014?		4 <u>b</u>		X
		For	n 990	PF	(2014)

orm 990-PF (2014) THE MINKIN FAMILY FOUNDA			<u> 38-32594</u>	21 Page 6
Part VII-B Statements Regarding Activities for Which I	Form 4720 May Be F	Required (contin	ued)	
5a During the year did the foundation pay or incur any amount to:				
(1) Carry on propaganda, or otherwise attempt to influence legislation (section	1 4945(e))?	☐ Ye	s X No	1
(2) Influence the outcome of any specific public election (see section 4955); o		***		
_			es X No	
any voter registration drive?	· · · · · · · · · · · · · · · · · · ·	·· · · ===		
(3) Provide a grant to an individual for travel, study, or other similar purposes		Y€	es LX No	
(4) Provide a grant to an organization other than a charitable, etc., organization	n described in section		_	1 1 1 2
4945(d)(4)(A)? (see instructions)		Ye	es X No	1 "
(5) Provide for any purpose other than religious, charitable, scientific, literary,				\\\.\\\.\\\.\\\.\\\.\\\\\\\\\\\\\\\\\\
			es X No	
		· •	טאובבו א:	
b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify und	· · · · · · · · · · · · · · · · · · ·	n Regulations		
section 53.4945 or in a current notice regarding disaster assistance (see instru	ictions)?		N/A L	ib
Organizations relying on a current notice regarding disaster assistance check h	ere			. <i>•</i> •, ₁
c If the answer is "Yes" to question 5a(4), does the foundation claim exemption fi	rom the tax because it maintai	ined		
expenditure responsibility for the grant?			es 🔲 No 📗	' -'
			ין טאייים אי	
If "Yes," attach the statement required by Regulations section 53.494	· -		}	
6a Did the foundation, during the year, receive any funds, directly or indirectly, to	pay premiums on			
a personal benefit contract?		L Ye	s X No	
b Did the foundation, during the year, pay premiums, directly or indirectly, on a p	ersonal benefit contract?		1 6	ib X
If "Yes" to 6b, file Form 8870.				· / ·
7a At any time during the tax year, was the foundation a party to a prohibited tax s	chalter transaction?	□ v.	es X No	
	• •		_	
b If "Yes," did the foundation receive any proceeds or have any net income attribu				<u>'b </u>
Part VIII Information About Officers, Directors, Trust	ees, Foundation Ma	nagers, Highly	y	
Paid Employees, and Contractors				
List all officers, directors, trustees, foundation managers and their	compensation.			
	(b) Title, and average	(c) Compensation	(d) Contributions to employee benefit plans	(e) Expense account, other
(a) Name and address	hours per week devoted to position	(If not paid, enter -0-)	and deferred compensation	account, other allowances
EDNA MINKIN	PRES., TREAS.		compensation	unowanices
	FRES., IREAS.	, SECK.		
1823 WEST WICKFORD				_
BLOOMFIELD HILLS, MI 48302	0.00	0.	0.	0.
R. RICHARD A. MINKIN	ASS'T. SECR.	1		
20 ARDMOOR DR.	j			
BLOOMFIELD HILLS, MI 48301	0.00	0.	0.1	0.
	ASS'T. SECR.			
630 KIFTSGATE BEND		ļ	1	
	0 00	1		0
	0.00	0.	0.	0.
	ASS'T. SECR.	į	l l	
211 WEST FORT STREET, 15TH FLOOR]		Ì	
DETROIT, MI 48226	0.00	0.	0.	0.
Compensation of five highest-paid employees (other than those inc	cluded on line 1). If none,	enter "NONE."		
A Nilson and address of the boundary of the same of th	(b) Title, and average hours per week devoted to position		(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other
(a) Name and address of each employee paid more than \$50,000	hours per week	(c) Compensation	and deferred	account, other allowances
NONE	devoted to position	 	compensation	allowalices
NONE	ł			
		ļ		
]		
			<u> </u>	
	1	1		
		 	 	
	1	}	}	
		 	ļ — — ļ	
		1	[
	1	<u> </u>	ll	
otal number of other employees paid over \$50,000	<u> </u>	<u> </u>		0
			Enra	990-PE (2014)

Form 990-PF (2014) THE MINKIN FAMILY FOUNDATION	38-3	3259421 Page 7
Part VIII Information About Officers, Directors, Trustees, Foundation Paid Employees, and Contractors (continued)	Managers, Highly	
3 Five highest-paid independent contractors for professional services. If none, enter "NO	DNE."	
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE		
000000		
Total number of others receiving over \$50,000 for professional services Part IX-A Summary of Direct Charitable Activities		0
	-6	
List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical in number of organizations and other beneficiaries served, conferences convened, research papers produced	ntormation such as the	Expenses
1 N/A	, 0.0	
I M/A		
2		
		
3		
4		
Part IX-B Summary of Program-Related Investments		
Describe the two largest program-related investments made by the foundation during the tax year on lines	1 ano 2.	Amount
1 <u>N/A</u>		
<u> </u>		
2		
All other program-related investments. See instructions.		
3		
Total. Add lines 1 through 3	.	0.
- 	· — — — — — — — — — — — — — — — — — — —	Form 990-PF (2014)

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., purposes: 1a <u>2,625,329.</u> Average of monthly cash balances 268,367. 1b 1c 2,893,696. Total (add lines 1a, b, and c) 1đ Reduction claimed for blockage or other factors reported on lines 1a and 1c (attach detailed explanation) 0. Acquisition indebtedness applicable to line 1 assets Subtract line 2 from line 1d 3 2,893,696. Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions) 4 43,405. Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4 5 2,850,291. Minimum investment return. Enter 5% of line 5 142,515. Part XI: Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations and certain foreign organizations check here
and do not complete this part.) Minimum investment return from Part X, line 6 142,515. Tax on investment income for 2014 from Part VI, line 5 2,968 Income tax for 2014. (This does not include the tax from Part VI.) 2b Add lines 2a and 2b 20 2,968. Distributable amount before adjustments. Subtract line 2c from line 1 3 Recoveries of amounts treated as qualifying distributions ... 4 Add lines 3 and 4 5 Deduction from distributable amount (see instructions) ... 6 Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1 Qualifying Distributions (see instructions) Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes: Expenses, contributions, gifts, etc. - total from Part I, column (d), line 26 1a Program-related investments - total from Part IX-B 1b Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes 2 2 Amounts set aside for specific charitable projects that satisfy the: Suitability test (prior IRS approval required) За Cash distribution test (attach the required schedule) 3ь 149,957. Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4 4 Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment 2,968. income. Enter 1% of Part I, line 27b Adjusted qualifying distributions. Subtract line 5 from line 4 6 146,989. 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

Form 990-PF (2014)

4940(e) reduction of tax in those years.

Part XIII Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2013	(c) 2013	(d) 2014
1 Distributable amount for 2014 from Part XI, line 7	\$\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \			139,547.
2 Undistributed income, if any, as of the end of 2014	The Assert		1,886.	
a Enter amount for 2013 only b Total for prior years:	7		1,000.	
3 Excess distributions carryover, if any, to 2014:	7.5°	0.	and the second second	
a From 2009				The same of the sa
b From 2010				
c From 2011	12 15 5 6 m			the state of the s
d From 2012	1 - 12 No. 1			
e From 2013	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1			
f Total of lines 3a through e	0.		A COLUMN TO THE STATE OF THE ST	1993) 13 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
4 Qualifying distributions for 2014 from				1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1
Part XII, line 4: \triangleright \$ 149,957.				1、1、1975条金属在1
a Applied to 2013, but not more than line 2a	1 371		1,886.	
b Applied to undistributed income of prior	A STATE OF THE STA			
years (Election required - see instructions)		0.		
c Treated as distributions out of corpus	_	,		医一种心理解除
(Election required - see instructions)	0.			
d Applied to 2014 distributable amount	いる。はいかい		A STATE OF THE PROPERTY OF THE	139,547.
e Remaining amount distributed out of corpus	8,524.			S C. C. Seller Francisco
5 Excess distributions carryover applied to 2014 (If an amount appears in column (d), the same amount	0.		in the state of th	0.
must be shown in column (a).)				
6 Enter the net total of each column as indicated below:				
a Corpus. Add lines 3f, 4c, and 4e. Subtract line 5	8,524.			- a , , r = 2 = 2, 1/2 - 1 = 1 = 1
b Prior years' undistributed income. Subtract	Top 2 (1) 1			
line 4b from line 2b	(X 3) 25%	0.		1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 -
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		0.		
d Subtract line 6c from line 6b. Taxable	372			4.983.76.76
amount - see instructions	The transfer of the control of the c	0.		
e Undistributed income for 2013. Subtract line			21443 - 44m 3 / 23 - 1	24 N. S.
4a from line 2a. Taxable amount - see ınstr.			0.	The state of the s
f Undistributed income for 2014. Subtract	- / <u>(*)</u>		Silver to Same	
lines 4d and 5 from line 1. This amount must	7 (4)	-		
be distributed in 2015				0.
7 Amounts treated as distributions out of			A SUR THE STATE OF THE SECOND	1000000000000000000000000000000000000
corpus to satisfy requirements imposed by		, , ,	178000000000000000000000000000000000000	1 - 2 7 6 6 5 7 7 7 7 7 7 7 7 7
section 170(b)(1)(F) or 4942(g)(3) (Election				Land to the second
may be required - see instructions)	0.		2.	
8 Excess distributions carryover from 2009		,	。 (是數學的人格)。	Company of the state of the sta
not applied on line 5 or line 7	0.	·		17 (m)
9 Excess distributions carryover to 2015.		, , , , , , ,		
Subtract lines 7 and 8 from line 6a	8,524.	·	25-選集第一至安	\$P\$
10 Analysis of line 9:		}		1.13. 6.
a Excess from 2010	, ,			1 to
b Excess from 2011			. 4克.	,
c Excess from 2012	1.4 7		44.7.3.	
d Excess from 2013	, , ,		 	
e Excess from 2014 8,524.	<u> </u>	L	L	5 000 PF
423581 11-24-14				Form 990-PF (2014)

		FOUNDATION		38-32	159421 Page 10
Part XIV Private Operating	Foundations (see in	structions and Part VII	-A, question 9)	N/A	
1 a If the foundation has received a ruling	or determination letter tha	at it is a private operating	1		
foundation, and the ruling is effective t	for 2014, enter the date of	the ruling	. ▶∟_		_ _
b Check box to indicate whether the four	nd <u>ation is a private operat</u>	ing foundation described i		4942(j)(3) or 49	942(j)(5)
2 a Enter the lesser of the adjusted net	Tax year		Prior 3 years		J
income from Part I or the minimum	(a) 2014	(b) 2013	(c) 2012	(d) 2011	(e) Total
investment return from Part X for					
each year listed					
b 85% of line 2a		ļ. <u></u>			
c 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.		1			
Subtract line 2d from line 2c	Ĺ				
3 Complete 3a, b, or c for the alternative test relied upon:		į .	ļ		
a "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					<u> </u>
an exempt organization					
(4) Gross investment income				——————————————————————————————————————	
Part XV Supplementary Inf	ormation (Comple	ete this part only	if the foundati	on had \$5,000 or m	ore in assets
at any time during	the year-see inst	ructions.)			
1 Information Regarding Foundat	ion Managers:				
a List any managers of the foundation w			ributions received by	the foundation before the clo	se of any tax
year (but only if they have contributed	more than \$5,000). (See	section 507(d)(2).)			
EDNA MINKIN					
b List any managers of the foundation we other entity) of which the foundation h			(or an equally large p	ortion of the ownership of a p	partnership or
NONE					
2 Information Regarding Contribu	ition, Grant, Gift, Loar	, Scholarship, etc., Pr	ograms:		
Check here ► X if the foundation the foundation makes gifts, grants, etc.	only makes contributions	to preselected charitable	organizations and do		
a The name, address, and telephone nu					
a The hame, address, and telephone no	mber of a man address of	the person to whom apply	cations should be ad	urossou.	
b The form in which applications should	l be submitted and inform	ation and materials they sl	nould include:		
c Any submission deadlines:					
					
d Any restrictions or limitations on awar	ds, such as by geographic	cal areas, charitable fields,	kinds of institutions,	or other factors:	

Part XV Supplementary Information	(continued)			421 (age 1)
3 Grants and Contributions Paid During the Ye		Payment		
Recipient	If recipient is an individual, show any relationship to	Foundation	Purpose of grant or	Amount
Name and address (home or business)	any foundation manager or substantial contributor	status of recipient	contribution	
a Paid during the year				
20 (20 (20		501 (0) (2)		
20/20/20 420 FIFTH AVENUE, 27TH FLOOR	İ	501(C)(3)	GENERAL CHARITABLE PURPOSES	
NEW YORK, NY 10018	}		FORFOSES	300.
ADAT SHALOM SYNAGOGUE		501(C)(3)	GENERAL CHARITABLE	
29901 MIDDLEBELT ROAD			PURPOSES	
FARMINGTON HILLS, MI 48334	 			9,125,
ALS		501(C)(3)	GENERAL CHARITABLE	
1275 K STREET NW # 250			PURPOSES	222
WASHINGTON, DC 20005	 			200.
ALZHEIMER'S ASSOCIATION		501(C)(3)	GENERAL CHARITABLE	
20300 CIVIC CENTER, SUITE 100			PURPOSES	
SOUTHFIELD MI 48076	·	ļ <u>.</u>		15,000.
AMERICAN CANCER SOCIETY		501(C)(3)	GENERAL CHARITABLE	
P.O. BOX 30393			PURPOSES	
LANSING MI 48909 Total SEECON	TINUATION SHEE	ET(S)	▶ 3a	800. 149.957.
b Approved for future payment				
NONE				
	İ			
Total	· 	····	> 3b	0,

Part XVI-A Analysis of Income-Producing Activities

		ousiness income	Excluded b	by section 512, 513, or 514	(e)
	Business	(b) Amount	(C) Exclu- sion	(d) Amount	Related or exempt function income
1 Program service revenue:	code	Anount	code	Amount	Tunction income
å			+		
b			+		
C		· · · · · · · · · · · · · · · · · · ·	+		
d	 -		 		
e	 		+		
g Fees and contracts from government agencies					
2 Membership dues and assessments			 		······································
3 Interest on savings and temporary cash					
investments			1 1		
4 Dividends and interest from securities			14	45,691.	
5 Net rental income or (loss) from real estate:		<u> </u>	1.7-		
a Debt-financed property					
b Not debt-financed property		·			
6 Net rental income or (loss) from personal					
	ļ [1 1		
7 Other investment income		·	1 1		
8 Gain or (loss) from sales of assets other					
than inventory	1 1		18	261,622.	
9 Net income or (loss) from special events			 		
O Gross profit or (loss) from sales of inventory					
1 Other revenue:			· - · · ·		
a	1				
b					
			 		
			l i		
c			+		
c					
c		0		307,313.	0
c d E Subtotal. Add columns (b), (d), and (e)					0 307,313
c d e 2 Subtotal. Add columns (b), (d), and (e) 3 Total. Add line 12, columns (b), (d), and (e)					
c d e 2 Subtotal. Add columns (b), (d), and (e) 3 Total. Add line 12, columns (b), (d), and (e) See worksheet in line 13 instructions to verify calculations.)				13	
c d e 12 Subtotal. Add columns (b), (d), and (e) 13 Total. Add line 12, columns (b), (d), and (e) See worksheet in line 13 instructions to verify calculations.) Part XVI-B Relationship of Activities t	to the Accor	nplishment of E	xempt P	13 urposes	307,313
c d e 2 Subtotal. Add columns (b), (d), and (e) 3 Total. Add line 12, columns (b), (d), and (e) See worksheet in line 13 instructions to verify calculations.) Part XVI-B Relationship of Activities t Line No. Explain below how each activity for which inco	to the Accon	nplishment of E	xempt P	13 urposes	307,313
c d e 2 Subtotal. Add columns (b), (d), and (e) 3 Total. Add line 12, columns (b), (d), and (e) See worksheet in line 13 instructions to verify calculations.) Part XVI-B Relationship of Activities t	to the Accon	nplishment of E	xempt P	13 urposes	307,313
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c d e 2 Subtotal. Add columns (b), (d), and (e) 3 Total. Add line 12, columns (b), (d), and (e) See worksheet in line 13 instructions to verify calculations.) Part XVI-B Relationship of Activities t Line No. Explain below how each activity for which inco	to the Accon	nplishment of E	xempt P	13 urposes	307,313
c d e 2 Subtotal. Add columns (b), (d), and (e) 3 Total. Add line 12, columns (b), (d), and (e) See worksheet in line 13 instructions to verify calculations.) Part XVI-B Relationship of Activities t Line No. Explain below how each activity for which inco	to the Accon	nplishment of E	xempt P	13 urposes	307,313
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c d e 2 Subtotal. Add columns (b), (d), and (e) 3 Total. Add line 12, columns (b), (d), and (e) See worksheet in line 13 instructions to verify calculations.) Part XVI-B Relationship of Activities t Line No. Explain below how each activity for which inco	to the Accon	nplishment of E	xempt P	13 urposes	307,313
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c d e 2 Subtotal. Add columns (b), (d), and (e) 3 Total. Add line 12, columns (b), (d), and (e) See worksheet in line 13 instructions to verify calculations.) Part XVI-B Relationship of Activities t Line No. Explain below how each activity for which inco	to the Accon	nplishment of E	xempt P	13 urposes	307,313
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c d e 2 Subtotal. Add columns (b), (d), and (e) 3 Total. Add line 12, columns (b), (d), and (e) See worksheet in line 13 instructions to verify calculations.) Part XVI-B Relationship of Activities t Line No. Explain below how each activity for which inco	to the Accon	nplishment of E	xempt P	13 urposes	307,313
c d e 12 Subtotal. Add columns (b), (d), and (e) 13 Total. Add line 12, columns (b), (d), and (e) (See worksheet in line 13 instructions to verify calculations.) Part XVI-B Relationship of Activities t Line No. Explain below how each activity for which inco	to the Accon	nplishment of E	xempt P	13 urposes	307,313

Pa	rt XVII	Information Re Exempt Organ		To and Transactions an	d Relationships With Nonch	aritable	8	<u> </u>
1	Did the or	 		ollowing with any other organization	described in section 501(c) of	T	Yes	No
•		=		tion 527, relating to political organiza	• •			
a			ation to a noncharitable exer	- · · · · · · · · · · · · · · · · · · ·		}		1
	(1) Cash	·				1a(1)		X
	(2) Other	assets				1a(2)		Х
b	Other tran	sactions:						
	(1) Sales	of assets to a noncharital	ble exempt organization			1b(1)		X
	(2) Purch	nases of assets from a no	ncharitable exempt organiza	ition		1b(2)		X
	(3) Renta	il of facilities, equipment,	or other assets			1b(3)		X
	(4) Reiml	bursement arrangements				1b(4)	<u> </u>	X
	(5) Loans	s or Ioan guarantees				1b(5)		X
	,		embership or fundraising sol			1b(6)		X
			uling lists, other assets, or pa			1c		X
d					ys show the fair market value of the good: in any transaction or sharing arrangement		sets,	
			other assets, or services rec		in any transaction of sharing arrangement	, SHOW III		
(a)∟	ine no	(b) Amount involved	 	aritable exempt organization	(d) Description of transfers, transactions, a	nd sharing ar	rangeme	nts
			N	/A				
	_							
				<u>.</u>				
								
			<u>-</u> -				_	
		<u></u> .						
					 -			_
	in section		r than section 501(c)(3)) or	to, one or more tax-exempt organization section 527?	tions described	Yes	X] No
	100, 00	(a) Name of org		(b) Type of organization	(c) Description of relatio	nship		
		N/A						
	- To 1							
Sig He	gn and be	elief, it is true, correct, and con	mplete Declaration of preparer (of	ther than taxpayer) is based on all information	ASSISTANT SECRETARY	May the IRS return with the shown below Yes	e prepar	er
	Sigr	Print/Type preparer's na		Date	Title Check of PTI	NI		
Pa	id	Print/Type preparer's na	() _a	rer's signature	self- employed		705	
	eparer	JOHN P. KO		& BEAL, LLP	P	$\frac{01210}{12202}$		
	e Only	THIII S HAIRE PUR	DI, DONOVAM	C DEAU, THE	THINSEIN > 30-			
			ONFIRID BOLL		Phone no (248) 540	-73	77

Form **990-PF** (2014)

THE MINKIN FAMIL	Y FOUNDATION	38-32	59421	PAGE 1 OF 2
Part IV. Capital Gains and Los	sses for Tax on Investment Income			
(a) List and	describe the kind(s) of property sold	l, e.g., real estate,	(b) How acqu P - Purchas	(c) Date acquired (d) Date sold
	ick warehouse; or common stock, 20	10 shs. MLC Co.	D - Donatio	on (110., day, y) (110., day, y)
1a 200 SHS WALT D			P	11/30/01/02/03/14
b 200 SHS HUBBEL			P	12/16/9902/03/14
c 200 SHS ILLUMI	NA INC		P	05/03/1002/03/14
d 1100 SHS JOHNS	ON CONTROLS INC		P	11/12/12/02/03/14
	N & JOHNSON		D	03/13/0902/03/14
1 200 SHS MC COR			D	03/13/0902/03/14
	R & GAMBLE CO		<u>d</u>	10/01/8402/03/14
	ARNER INC NEW		D	11/10/08/02/03/14
_ · · · · _ · · · · · · · · · · · · · ·	NE GROUP PLC		$\frac{2}{D}$	11/10/08/02/03/14
j 50000 PAR GANN			P	04/18/12/03/14/14
k 600 SHS ABBIVE			P	05/03/10/07/14/14
600 SHS ABBOTT			P	05/03/1007/14/14
m 1000 SHS COCA				
		NG TWO GED G	P	02/22/0507/14/14
	ERY COMMUNICATION	NS INC SER C	P	10/03/0607/14/14
0 400 SHS WALT D	ISNEY CO		P	10/29/0207/14/14
(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale	•	(h) Gain or (loss) (e) plus (f) minus (g)
a 13,999.		4,042.		9,957.
b 20,371.		5,297.		15,074.
c 30,036.		8,301.		21,735.
d 48,238.		35,103.		13,135.
e 17,342.		10,104.		7,238.
12,588.		6,352.		6,236.
30 360		1,379.		28,881.
$\frac{g}{h}$ 18,438.		6,357.		12,081.
14,355.		6,746.		7,609.
$\frac{1}{1}$ 52,344.		56,750.		-4,406.
30 036		15,501.		17,435.
$\frac{k}{1}$ 24,981.		14,294.		10,687.
10 061	· · · · · · · · · · · · · · · · · · ·	20,999.		21,265.
30 500		6,169.		
~ ~ ~ ~ ~ ~ ~		6,759.		32,430.
	ng gain in column (h) and owned by t		411	27,978.
(i) F.M.V. as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col. (i) over col. (j), if any	Gains (exc) Losses (from col. (h)) ess of col. (h) gain over col. (k), out not less than "-0-")
a		<u></u>		9,957.
b				15,074.
c				21,735.
d				13,135.
				7,238.
<u>e</u>				6,236.
<u>-</u>				
<u>y</u>	<u> </u>			28,881.
<u>h</u>				12,081.
!				7,609.
!				-4,406.
k			_ -	17,435.
1				10,687.
<u>m</u>				21,265.
<u>n</u>				32,430.
0	<u></u>			27,978.
2 Capital gain net income or (net ca	apital loss) . { If gain, also enter	in Part I, line 7	2	
		_	-	
3 Net short-term capital gain or (los If gain, also enter in Part I, line 8,	ss) as defined in sections 1222(5) an	ia (o):		
If (loss), enter "-0-" in Part I line I	8	ŗ	3	
י עוווו ני זונו ט וויוויט נייטטין וו			J	

(a care a capital dallis aliu cos	Ses for 18X off lifestiffellt fileotife					
(a) List and	describe the kind(s) of property sold ick warehouse; or common stock, 20	d, e.g., real estate, 00 shs. MLC Co.		(b) How acquired P - Purchase	(c) Date acquired (mo., day, yr.)	(d) Date sold (mo., day, yr.)
1a 200 SHS 3M CO				P	03/13/09	07/14/14
	morogred copp			P	03/13/09	$\frac{07/14/14}{07/14/14}$
b 200 UNITED TECH	INOLOGIES CORP			P P	03/13/09	0//14/14
				 	 	
_d	·					
<u>e</u>						
<u>f</u>				ļ		
9						
<u>h</u>				ļ		
<u>i</u>						
<u>i</u>				<u> </u>	ļ	
<u>k</u>						
1						
_m						
n						
0				<u>L</u>		
(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale		(h) (e) p	Gain or (loss) lus (f) minus (g)	
a 29,036.		9,618.	1			19,418.
b 22,992.		8,123.				14,869.
c		0,123.	' 			11,000.
d			+			
			┼			
e f			┼			
			+	 _		
g h			┼			
			+			
			 			
<u>k</u>			 			
			├			
m			├			
<u>n</u>			┼			
O Complete and for constant about	g gain in column (h) and owned by t	he foundation on 10/01/00	┼			
Complete only for assets snowin			-}	(I) Los	ses (from col. (h)) of col. (h) gain over	ool (k)
(i) F.M.V. as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col. (i) over col. (j), if any		but n	ot less than "-0-")	COI. (N),
a						19,418.
b						14,869.
С						
d						
e		:			· _	
f						
g						
h						
1						
k				-		
1			† _			
m						
n			1			
0			$\overline{}$			
_ l	- 		† 	<u> </u>		
2 Capital gain net income or (net ca	pital loss) { If gain, also enter -0	in Part I, line 7	2			261,622.
		_	-			
3 Net short-term capital gain or (los if gain, also enter in Part I, line 8,	s) as defined in sections 1222(5) an	(p):				
If (loss), enter "-0-" in Part I, line 8	}	J	3		N/A	
		<u> </u>	<u> </u>			

3 Grants and Contributions Paid During the Y	ear (Continuation)			
Recipient	If recipient is an individual, show any relationship to any foundation manager	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	or substantial contributor	recipient	CONTRIBUTION	
MERICAN DIABETIC ASSOCIATION		501(C)(3)	GENERAL CHARITABLE	
P.O. BOX 1833			PURPOSES	
ERRIFIELD, VA 22116				8
MERICAN HEART ASSOCIATION		501(C)(3)	GENERAL CHARITABLE	
1201 STONE GATE COURT			PURPOSES	
ARMINGTON HILLS, MI 48331	<u> </u>			
AMERICAN LUNG ASSOCIATION		501(C)(3)	GENERAL CHARITABLE	
5 W WACKER DRIVE SUITE 1150 HICAGO IL 60601			PURPOSES	
nicago, in dudi		 		1
MERICAN TECHNION		501(C)(3)	GENERAL CHARITABLE	
30230 ORCHARD LAKE RD			PURPOSES	
PARMINGTON HILLS MI 48334	 			
		501 (0) (2)		
BEAUMONT FOUNDATION 3601 W THIRTEEN MILE RD		501(C)(3)	GENERAL CHARITABLE PURPOSES	
ROYAL OAK, MI 48073				6,0
SIRTHRIGHT ISRAEL FOUNDATION		501(C)(3)	GENERAL CHARITABLE	
?.O. BOX 1784			PURPOSES	
EW YORK, NY 10156				6,0
SLEEDING & CLOTTING INSTITUTE/KOLLET		501(C)(3)	GENERAL CHARITABLE	
2128 N LINDERBERGH DR			PURPOSES	
EORIA, IL 61615				1
AND ON TOUR		501/63/23		
CAMP GAN ISRAEL 14000 W. 9 MILE ROAD		501(C)(3)	GENERAL CHARITABLE PURPOSES	
DAK PARK, MI 48237				5
CAPUCHIN SOUP KITCHEN		501(C)(3)	GENERAL CHARITABLE	
820 MT. ELLIOT STREET DETROIT, MI 48207		1	PURPOSES	
EIROII, EI 4020/				
HABAD OF EAST BOCA		501(C)(3)	GENERAL CHARITABLE	
20 NE 1ST AVE			PURPOSES	
OCA RATON, FL 33432	<u> </u>	L	<u> </u>	1.0
Total from continuation sheets		·	 	124 5

3 Grants and Contributions Paid During the Y		1		
Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager	Foundation status of	Purpose of grant or contribution	Amount
Name and address (nome of business)	or substantial contributor	recipient		
ONGREGATION BETH SHALOM		501(C)(3)	GENERAL CHARITABLE	
4601 LINCOLN STREET AK PARK, MI 48237			PURPOSES	7.5
AR FARR, MI 40237				7,5
ONGREGATION BNAI ISRAEL		501(C)(3)	GENERAL CHARITABLE	
085 WALNUT LAKE ROAD			PURPOSES	
EST BLOOMFIELD, MI 48323	 			8
ONGREGATION SHAAREY ZEDEK		501(C)(3)	GENERAL CHARITABLE	
7375 BELL ROAD			PURPOSES	
OUTHFIELD MI 48034	 			1
CROHNS & COLITIS FOUNDATION OF		501(C)(3)	GENERAL CHARITABLE	
MERICAN (CCFA)		ļ	PURPOSES	
P.O. BOX 1245				_
LBERT LEA, MN 56007				3!
OCTORS WITHOUT BORDERS		501(C)(3)	GENERAL CHARITABLE	
33 7TH AVENUE		501(0)(3)	PURPOSES	
IEW YORK, NY 10001		<u> </u>		2
MU FOUNDATION		501(C)(3)	GENERAL CHARITABLE	
1349 S HURON ST			PURPOSES	
PSILANTI, MI 48197				5.
PORGOTTEN HARVEST		501(C)(3)	GENERAL CHARITABLE	
1800 GREENFIELD ROAD		501(0)(3)	PURPOSES	
DAK PARK, MI 48237		<u> </u>		3,2
RIENDS OF THE ISRAEL DEFENSE FORCES		501(C)(3)	GENERAL CHARITABLE	
O. BOX 999			PURPOSES	
ALLED LAKE, MI 48390	 			9,0
RIENDSHIP CIRCLE		501(C)(3)	GENERAL CHARITABLE	
892 W MAPLE RD			PURPOSES	
JEST BLOOMFIELD, MI 48322				6
GLEANERS COMMUNITY FOOD BANK		501(C)(3)	GENERAL CHARITABLE	
2131 BEAUFAIT			PURPOSES	• •
DETROIT, MI 48207 Total from continuation sheets	<u> </u>			1,2

3 Grants and Contributions Paid During the Year				
Recipient	If recipient is an individual, show any relationship to any foundation manager	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	or substantial contributor	recipient		
MEBREW FREE LOAN ASSOCIATION		501(C)(3)	GENERAL CHARITABLE	
735 TELEGRAPH ROAD, SUITE 300			PURPOSES	
LOOMFIELD HILLS, MI 48301				4.5
HIDDEN CHILDREN OF THE HOLOCAUST		501(C)(3)	OTHERN CAN DIES	
.13 OLA AVE		BU1(C)(3)	GENERAL CHARITABLE PURPOSES	
SOYNTON BEACH, FL 33473			FURFUSES	
OTATON BEACH, TB 33473				
AILLEL - MSU		501(C)(3)	GENERAL CHARITABLE	
60 CHARLES ST			PURPOSES	
AST LANSING, MI 48823				5
OLOCAUST MEMORIAL CENTER		501(C)(3)	GENERAL CHARITABLE	
88123 ORCHARD LAKE RD			PURPOSES	
ARMINGTON HILLS, MI 48334				1_0
GANG AGREE POWEREN COME SO		E01/C\/3\		
SAAC AGREE DOWNTOWN SYNAGOGUE		501(C)(3)	GENERAL CHARITABLE PURPOSES	
DETROIT MI 48226			PURPUSES	1,2
				<u></u>
JARC		501(C)(3)	GENERAL CHARITABLE	
30301 NORTHWESTERN HIGHWAY, SUITE 100			PURPOSES	
ARMINGTON HILLS, MI 48334				1,6
TEWISH COMMUNITY CENTER		501(C)(3)	GENERAL CHARITABLE	
6600 WEST MAPLE ROAD			PURPOSES	
EST BLOOMFIELD, MI 48322		 		13,5
EWISH FAMILY SERVICE		501(C)(3)	GENERAL CHARITABLE	
555 WEST MAPLE ROAD		[PURPOSES	
ARMINGTON HILLS MI 48322				1,0
ewish federation of metro detroit		501(C)(3)	GENERAL CHARITABLE	
.O. BOX 2030			PURPOSES	
LOOMFIELD HILLS, MI 48303	}			27.6
EWISH FEDERATION OF PALM BEACH		501(C)(3)	GENERAL CHARITABLE	
601 COMMUNITY DRIVE			PURPOSES	
TOTAL FILM BEACH FL 33417 Total from continuation sheets	<u> </u>	.1		1

Part XV Supplementary Information 3 Grants and Contributions Paid During the Ye	ear (Continuation)	· · ·		
Recipient	If recipient is an individual, show any relationship to	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	any foundation manager or substantial contributor	recipient	Condibution	
JEWISH HOSPICE & CHAPLAINCY NETWORK		501(C)(3)	GENERAL CHARITABLE	
6555 WEST MAPLE ROAD			PURPOSES	2.504
WEST BLOOMFIELD, MI 48322				3,500
jewish national fund		501(C)(3)	GENERAL CHARITABLE	
27600 FARMINGTON ROAD, SUITE 204			PURPOSES	
FARMINGTON HILLS, MI 48334		<u> </u>		1,000
JEWISH THEOLOGICAL SEMINARY		501(C)(3)	GENERAL CHARITABLE	
6735 TELEGRAPH ROAD, SUITE 310 BLOOMFIELD HILLS, MI 48301			PURPOSES	4.500
JUVENILE DIABETES RESEARCH FOUNDATION		501(C)(3)	GENERAL CHARITABLE	
24359 NORTHWESTERN HIGHWAY, SUITE 225			PURPOSES	
SOUTHFIELD, MI 48075		 		200
KADIMA 15999 W. 12 MILE ROAD		501(C)(3)	GENERAL CHARITABLE PURPOSES	
SOUTHPIELD, MI 48076			FURFUSES	5,150
KARMANOS CANCER INSTITUTE		501(C)(3)	GENERAL CHARITABLE	
4100 JOHN R.			PURPOSES	1 000
DETROIT, MI 48201	-			1,000
LEUKEMIA & LYMPHOMA		501(C)(3)	GENERAL CHARITABLE	
1311 MAMARONECK AVENUE SUITE 310			PURPOSES	
WHITE PLAINS, NY 10605		<u> </u>		1,050
LUBAVITCH FOUNDATION 14000 W. 9 MILE ROAD		501(C)(3)	GENERAL CHARITABLE PURPOSES	
DAK PARK, MI 48237			TOM ODDO	300
MAKE A WISH FOUNDATION		501(C)(3)	GENERAL CHARITABLE	i
4742 N 24TH ST SUITE 400 PHOENIX AZ 85016			PURPOSES	900
I HOBELTA, AB VOVEV				300
MARCH OF DIMES ASSOCIATION		501(C)(3)	GENERAL CHARITABLE	
P.O. BOX 321190			PURPOSES	
DETROIT, MI 48232		<u> </u>		400

3 Grants and Contributions Paid During the Yo				
Recipient	If recipient is an individual, show any relationship to any foundation manager	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	or substantial contributor	recipient		
MEMORY OF NATE STOVE (TEMPLE BETH EL)		501(C)(3)	GENERAL CHARITABLE	
7400 TELEGRAPH ROAD		ļ	PURPOSES	
BLOOMFIELD HILLS, MI 48301				
MICHIGAN HUMANE SOCIETY		501(C)(3)	GENERAL CHARITABLE	
30300 TELEGRAPH RD, #220		501(C)(3)	PURPOSES	
BINGHAM FARMS MI 48025			T ONE GOLD	2
MICHIGAN JEWISH SENIOR LIFE OF	ļ	501(C)(3)	GENERAL CHARITABLE	
DETROIT		501(6)(3)	PURPOSES	
5000 w 10 MILE ROAD				
DAK PARK, MI 48237	 		ļ	3.0
USCULAR DYSTROPHY ASSOCIATION (MDA)		501(C)(3)	GENERAL CHARITABLE	
P.O. BOX 78960			PURPOSES	
HOENIX, AZ 85062		 		4
ATIONAL FRAGILE X FOUNDATION		E01/C)/3)	CONTRACT CUARTMANTE	
2100 M ST NW		501(C)(3)	GENERAL CHARITABLE PURPOSES	
WASHINGTON, DC 20037			1 0A1 0525	
RUBA PHOENIC RESEARCH (TEMPLE BETH		501(C)(3)	GENERAL CHARITABLE	
EL)			PURPOSES	
7400 TELEGRAPH ROAD				
BLOOMFIELD HILLS, MI 48301				1!
SALVATION ARMY		501(C)(3)	GENERAL CHARITABLE	
6130 NORTHLAND DRIVE SOUTHFIELD MI 48075			PURPOSES	3
GOTHFIEDD, MI 40073				
HRINERS HOSPITALS FOR CHILDREN		501(C)(3)	GENERAL CHARITABLE	
1 BLOSSOM ST.			PURPOSES	
SOSTON, MA 02114				7.
SIMON WIESENTHAL CENTER		501(C)(3)	GENERAL CHARITABLE	
399 SOUTH ROXBURY DRIVE			PURPOSES	
OS ANGELES, CA 90035		 		1,0
MILE MEATN		501/01/21	CONDON. CUNDIMANTE	
MILE TRAIN P.O. BOX 96208		501(C)(3)	GENERAL CHARITABLE PURPOSES	
NASHINGTON DC 20090			[5
Total from continuation sheets				

3 Grants and Contributions Paid During the Y		,		<u> </u>
Recipient	If recipient is an individual, show any relationship to	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	any foundation manager or substantial contributor	recipient	Contribution	<u> </u>
	į			
SOLOMON SCHECTER DAY SCHOOL		501(C)(3)	GENERAL CHARITABLE	
50 STEIN CIRCLE			PURPOSES	
EWTON, MA 02459				2!
SPECIAL OLYMPICS		501(C)(3)	GENERAL CHARITABLE	
.133 19TH ST NW			PURPOSES	
ASHINGTON, DC 20036				93
ST. JOHN PROVIDENCE HEALTH SYSTEM		501(C)(3)	GENERAL CHARITABLE	
OSPICE WALK		1	PURPOSES	
88000 DEQUINDRE				
VARREN, MI 48092				1,20
et. Jude Children's research Hospital		501(C)(3)	GENERAL CHARITABLE	
262 DANNY THOMAS PLACE		501(0)(3)	PURPOSES	
EMPHIS IN 38105				50
STARFISH FAMILY SERVICES		501(C)(3)	GENERAL CHARITABLE	
30000 HIVELEY ROAD			PURPOSES	
NKSTER, IN 48141				27
J-M HILLEL MANDELL L. BERMAN CENTER		501(C)(3)	GENERAL CHARITABLE	
1429 HILL STREET		501(0)(0)	PURPOSES	
ANN ARBOR, MI 48104				1,00
JJCEEA		501(C)(3)	GENERAL CHARITABLE	
1714 16TH AVE #205		l l	PURPOSES	
BROOKLYN, NY 11204				10
JM COMPREHENSIVE CANCER CENTER		501(C)(3)	GENERAL CHARITABLE	
.500 EAST MEDICAL CENTER DRIVE, CCGC			PURPOSES	
-303 ANN ARBOR MI 48109				5(
WOUNDED WARRIOR PROJECT		501(C)(3)	GENERAL CHARITABLE	
70 7TH AVENUE, SUITE 1802			PURPOSES	
EW YORK NY 10001				50
7AD		501(0)(3)	COMPONION CONTRACTOR	
VAD EZRA 2850 West Eleven Mile Road		501(C)(3)	GENERAL CHARITABLE PURPOSES	
BERKLEY MI 48072			. ORI OSES	1,50
Total from continuation sheets	·	·	····	

Part XV Supplementary Information				
3 Grants and Contributions Paid During the	Year (Continuation)			
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	or substantial contributor	recipient		
YESHIVA BETH YEHUDAH		501(C)(3)	GENERAL CHARITABLE	
15751 WEST LINCOLN DRIVE			PURPOSES	
SOUTHFIELD MI 48037				2,50
YESHIVA DARCHEI TORAH		501(C)(3)	GENERAL CHARITABLE	
21550 W. TWELVE MILE ROAD			PURPOSES	
SOUTHFIELD, MI 48075		<u> </u>		50
	}			
	 	 		
		}		
			 	
		 		
	<u> </u>	 		
		j		
Total from continuation sheets		<u> </u>	_ 	

FORM 990-PF	DIVIDENDS	AND INTER	EST	FROM SECUR	ITIES ST	PATEMENT	1
OURCE	GROSS AMOUNT	CAPITAL GAINS DIVIDEND		(A) REVENUE PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUST NET INC	
IELLS FARGO DVISORS DIVIDENDS) IELLS FARGO	39,589.		0.	39,589.	39,589.		
DVISORS INTEREST) IELLS FARGO	8,483.		0.	8,483.	8,483.		
DVISORS ACCRUED NTEREST PAID	-2,381.		0.	-2,381.	-2,381.		
O PART I, LINE 4	45,691.		0.	45,691.	45,691.		
ORM 990-PF		TAX	ES		Si	TATEMENT	2
ESCRIPTION		(A) EXPENSES PER BOOKS		(B) T INVEST- NT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITAI PURPOSI	
OREIGN WITHHOLDING EDERAL INCOME TAX	TAXES	712. 6,000.		712.			0.
O FORM 990-PF, PG	1, LN 18 =	6,712.		712.			0.
ORM 990-PF		OTHER E	XPE	NSES	Si	CATEMENT	3
ESCRIPTION		(A) EXPENSES PER BOOKS		(B) T INVEST- NT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITAI PURPOSI	
NVESTMENT MANAGEME NVESTMENT (PRIME)		9,800.		9,800.			0.
EE ICHIGAN ANNUAL REP		50. 20.		50. 0.			0. 0.
O FORM 990-PF, PG	1, LN 23	9,870.	- —	9,850.			0.

FORM 990-PF OTHER	DECREASES	IN NET	ASSETS	OR	FUND	BALANCES	STATEMENT	4
ESCRIPTION							AMOUNT	
AT FAIR MARKET (STEPP) ORIGINAL COST	ED-UP BAS	IS) - G	AIN/LOSS	S DE	TERM	INED ON	68,8	95.
OTAL TO FORM 990-PF,	PART III	, LINE	5				68,8	95.
ORM 990-PF		CORPO	RATE STO	OCK			STATEMENT	 5
ESCRIPTION					В	OOK VALUE	FAIR MARKE	r
MARKETABLE SECURITIES	-COMMON					1,437,209.	2,742,5	64.
'OTAL TO FORM 990-PF,	PART II,	LINE 1	0B			1,437,209.	2,742,5	64.
ORM 990-PF		CORPO	RATE BON	NDS			STATEMENT	6
ESCRIPTION					В	OOK VALUE	FAIR MARKE	r
ARKETABLE SECURITIES	-BONDS					135,220.	132,12	25.
OTAL TO FORM 990-PF,	PART II,	LINE 1	0C			135,220.	132,12	25.

Form **8868**

(Rev. January 2014)

Department of the Treasury Internal Revenue Service

Application for Extension of Time To File an Exempt Organization Return

File a separate application for each return.

▶ Information about Form 8868 and its instructions is at www.lrs.gov/form8868 .

OMB No. 1545-1709

Form 8868 (Rev. 1-2014)

If you are filing for an Additional (Not Automatic) 3-Month Extension, complete only Part II (on page 2 of this form). Do not complete Part II unless you have already been granted an automatic 3-month extension on a previously filed Form 8868. Electronic filing (e-file) . You can electronically file Form 8868 if you need a 3-month automatic extension of time to file (6 months for a corporar required to file Form 990-T), or an additional (not automatic) 3-month extension of time. You can electronically file Form 8868 to request an extension time to file any of the forms listed in Part I or Part II with the exception of Form 8870, Information Return for Transfers Associated With Certa Personal Benefit Contracts, which must be sent to the IRS in paper format (see instructions). For more details on the electronic filing of this form visit www.irs.gov/efile and click on e-file for Charities & Nonprofits. Part I Automatic 3-Month Extension of Time. Only submit original (no copies needed). A corporation required to file Form 990-T and requesting an automatic 6-month extension - check this box and complete Part I only All other corporations (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request an extension of time to file income tax returns. Enter filer's identifying number to file income tax returns. Enter filer's identifying number print THE MINKIN FAMILY FOUNDATION 38-3259421	nsion in
Do not complete Part II unless you have already been granted an automatic 3-month extension on a previously filed Form 8868. Electronic filing (e-file). You can electronically file Form 8868 if you need a 3-month automatic extension of time to file (6 months for a corpora required to file Form 990-T), or an additional (not automatic) 3-month extension of time. You can electronically file Form 8868 to request an extension of time to file any of the forms listed in Part I or Part II with the exception of Form 8870, Information Return for Transfers Associated With Certa Personal Benefit Contracts, which must be sent to the IRS in paper format (see instructions). For more details on the electronic filing of this form visit www.irs.gov/efile and click on e-file for Charities & Nonprofits. Part I. Automatic 3-Month Extension of Time. Only submit original (no copies needed). A corporation required to file Form 990-T and requesting an automatic 6-month extension - check this box and complete Part I only All other corporations (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request an extension of time to file income tax returns. Enter filer's identifying number to file income tax returns. Type or Name of exempt organization or other filer, see instructions. Employer identification number the MINKIN FAMILY FOUNDATION 38-3259421	nsion in
Electronic filing (e-file). You can electronically file Form 8868 if you need a 3-month automatic extension of time to file (6 months for a corporal required to file Form 990-T), or an additional (not automatic) 3-month extension of time. You can electronically file Form 8868 to request an extension of time to file any of the forms listed in Part I or Part II with the exception of Form 8870, Information Return for Transfers Associated With Certa Personal Benefit Contracts, which must be sent to the IRS in paper format (see instructions). For more details on the electronic filing of this form visit www.irs.gov/efile and click on e-file for Charities & Nonprofits. Part I Automatic 3-Month Extension of Time. Only submit original (no copies needed). A corporation required to file Form 990-T and requesting an automatic 6-month extension - check this box and complete Part I only All other corporations (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request an extension of time to file income tax returns. Enter filer's identifying number to file income tax returns. Type or Name of exempt organization or other filer, see instructions. Employer identification number print THE MINKIN FAMILY FOUNDATION 38-3259421	nsion in
required to file Form 990-T), or an additional (not automatic) 3-month extension of time. You can electronically file Form 8868 to request an extension of time to file any of the forms listed in Part I or Part II with the exception of Form 8870, Information Return for Transfers Associated With Certa Personal Benefit Contracts, which must be sent to the IRS in paper format (see instructions). For more details on the electronic filing of this form visit www.irs.gov/efile and click on e-file for Charities & Nonprofits. Part I Automatic 3-Month Extension of Time. Only submit original (no copies needed). A corporation required to file Form 990-T and requesting an automatic 6-month extension - check this box and complete Part I only All other corporations (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request an extension of time to file income tax returns. Type or Name of exempt organization or other filer, see instructions. Employer identifying number or print THE MINKIN FAMILY FOUNDATION 38-3259421	nsion in
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THE MINKIN FAMILY FOUNDATION 38-3259421	er
THE MINKIN FAMILY FOUNDATION 38-3259421	(EIN) or
File by the due date for Number, street, and room or suite no. If a P.O. box, see instructions. Social security number (SSN)	
filing your 41000 WOODWARD AVENUE. SUITE 120 EAST	
return See instructions. City, town or post office, state, and ZIP code. For a foreign address, see instructions.	
BLOOMFIELD HILLS, MI 48304-5133	
Enter the Return code for the return that this application is for (file a separate application for each return)	0 4
Application Return Application	Return
Is For Code Is For	Code
Form 990 or Form 990-EZ 01 Form 990-T (corporation)	07
Form 990-BL 02 Form 1041-A	08
Form 4720 (individual) 03 Form 4720 (other than individual)	09
Form 990-PF 04 Form 5227	10
Form 990-T (sec. 401(a) or 408(a) trust) 05 Form 6069	11
Form 990-T (trust other than above) 06 Form 8870	12
MICHAEL TOOTALIAN, CPA - 41000 WOODWARD AVENUE, SUITE	
 The books are in the care of ► 120 EAST - BLOOMFIELD HILLS, MI 48304 	
Telephone No. ► (248) 540-7377 Fax No. ►	
• If the organization does not have an office or place of business in the United States, check this box	
If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN)	
box Lifit is for part of the group, check this box Light and attach a list with the names and EINs of all members the extension is fo	<u>r</u>
1 I request an automatic 3-month (6 months for a corporation required to file Form 990-T) extension of time until	
AUGUST 15, 2015 , to file the exempt organization return for the organization named above. The extension	
is for the organization's return for:	
► X calendar year 2014 or	
tax year beginning, and ending	
2 If the tax year entered in line 1 is for less than 12 months, check reason: Initial return Final return Change in accounting period	_
3a If this application is for Forms 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any	
nonrefundable credits. See instructions. 3a \$ 7,	780.
b If this application is for Forms 990-PF, 990-T, 4720, or 6069, enter any refundable credits and	
estimated tax payments made. Include any prior year overpayment allowed as a credit. 3b \$ 3,	<u>78</u> 0.
estimated tax payments made. Include any prior year overpayment allowed as a credit. 3b \$ 3, c Balance due. Subtract line 3b from line 3a. Include your payment with this form, if required,	780.
c Balance due. Subtract line 3b from line 3a. Include your payment with this form, if required,	780. 000.

For Privacy Act and Paperwork Reduction Act Notice, see instructions.

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