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

OMB No 1545-0052

Department of the Treasury Internal Revenue Service

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

Open to Public Inspection

		lendar year 2014 or tax year beginning		, 2014,						
	Name	of foundation					Employer identif	fication number		
_	0'D	ONOVAN FAMILY FOUNDATION					38-370444	3		
	Numb	er and street (or P.O box number if mail is not delivered	to street address)		Room/suite	E	Telephone numb	er (see instructions)		
							(61	l6) 361-1448		
	424	5 NORTH OAK POINTE COURT, NE								
	City o	r town, state or province, country, and ZIP or foreign po	stal code							
						0	If exemption applic pending, check here	ation is		
	GRA	ND RAPIDS, MI 49525					pending, check here	,		
G	Che	eck all that apply Initial return	Initial return	of a former p	ublic charit	уÌг) 1 Foreign organiza	thons check here		
		Final return	Amended re	turn			2. Foreign organiza			
		Address change	Name chang	е			85% test, check computation			
H	Che	eck type of organization: X Section 501(c)(3) exempt private f	oundation		٦.	·			
Γ	s	Section 4947(a)(1) nonexempt charitable trust	Other taxable pr	ivate foundat	ion			on status was terminated		
ī	Fair	market value of all assets at J Acco	unting method X C	ash Acc	rual	٦,		in a 60-month termination		
	end	, re-	thar (anaarti)			'		a)(1)(B), check here		
			olumn (d) must be on cas			-		. ,		
E	art	Analysis of Revenue and Expenses (The	(a) Revenue and					(d) Disbursements		
_		total of amounts in columns (b), (c), and (d)	expenses per	(b) Net inve		(c)	Adjusted net income	for charitable purposes		
		may not necessarily equal the amounts in column (a) (see instructions))	books	incom			(cash basis only)			
	1	Contributions, gifts, grants, etc., received (attach schedule) .	315,240.							
	2	Check if the foundation is not required to attach Sch B								
	3	Interest on savings and temporary cash investments.	21.		21.					
	4	Dividends and interest from securities	179,682.	17	6,525.			-		
	5a	Gross rents								
		Net rental income or (loss)								
Ð		Net gain or (loss) from sale of assets not on line 10	84,306.				_	 		
2	Ъ	Gross sales price for all 852.082								
Revenue	7	Capital gain net income (from Part IV, line 2) .		8	4,306.					
ď	8	Net short-term capital gain				•				
	9	Income modifications								
	10 a	Gross sales less returns and allowances		•			-			
	b	Less Cost of goods sold								
		Gross profit or (loss) (attach schedule)					.,			
	11	Other income (attach schedule)								
	12	Total. Add lines 1 through 11	579,249.	26	0,852.					
П	13	Compensation of officers, directors, trustees, etc	0							
ses	14	Other employee salaries and wages								
	15	Pension plans, employee benefits					,			
ğ	16a	Legal fees (attach schedule)								
Ú	b	Accounting fees (attach schedule)ATCH 1	2,440.		1,220.			1,220.		
Ĭ.	c	Other professional fees (attach schedule)								
rat	17	Interest	·							
ist	18	Taxes (attach schedule) (see instructions)[2].	20,374.		3,569.					
틥	19	Depreciation (attach schedule) and depletion.								
힏	20	Occupancy								
ď	21	Travel, conferences, and meetings . 40.00.								
an	22	Printing and publications								
힏	23	Other expenses (attach schedule) ATCHT.3.	20.					20.		
atil	15 16a b c 17 18 19 20 21 22 23 24	Total operating and administrative expenses.								
ĕ		Add lines 13 through 23	22,834.		4,789.			1,240.		
ŏ	25	Contributions, gifts, grants paid	357,320.					357,320.		
	26	Total expenses and disbursements Add lines 24 and 25	380,154.		4,789.			358,560.		
	27	Subtract line 26 from line 12								
	а	Excess of revenue over expenses and disbursements	199,095.							
Ì	b	Net investment income (if negative, enter -0-)		25	6,063.					
	С	Adjusted net income (if negative enter -0-).	-							

JSA For Paperwork Reduction Act Notice, see instructions. 4E1410 1 000 8415BR L073 5/7/2015 3:39:

SCANNED JUN 0 4 2015

Fo	rm 990	-PF (2014) O'DONOVAN FAMILY FOUN	NDATION	38	3-3704443 Page 2
_		Attached schedules and amounts in the	Beginning of year	End o	of year
ئا	art II	Balance Sheets 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	152,924.	202,870.	202,870.
	2	Savings and temporary cash investments			
	3	Accounts receivable ▶			
		Less: allowance for doubtful accounts ▶			_
	4	Pledges receivable ▶			
		Less allowance for doubtful accounts ▶			İ
	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 ▶			
S	8	Inventories for sale or use			
Assets	9	Prepaid expenses and deferred charges			
As	_	Investments - U S and state government obligations (attach schedule)		·	
	1	Investments - corporate stock (attach schedule)	4,300,216.	4,366,172.	6,502,316.
		Investments - corporate bonds (attach schedule)	.,,		
	11	Investments - land, buildings,			
		and equipment basis Less accumulated depreciation			
	4.0	Less accumulated depreciation (attach schedule)			
	12 13	Investments - mortgage loans			
	14	Land huildings and			
		equipment basis Less accumulated depreciation			
	4.5	(attach schedule)			
	15 16	Other assets (describe) Total assets (to be completed by all filers - see the			
	16	instructions Also, see page 1, item I)	4,453,140.	4,569,042.	6,705,186.
_	4=	- · · · · · · · · · · · · · · · · ·	4,455,140.	4,309,042.	0,703,100.
	17	Accounts payable and accrued expenses			
	18	Grants payable			
ties	19	Deferred revenue			
藚	20	Loans from officers, directors, trustees, and other disqualified persons			
Liabilities	21	Mortgages and other notes payable (attach schedule)			
	22	Other liabilities (describe			
		Total link Waise (add lines 47 Absessed 22)			
_		Total liabilities (add lines 17 through 22)	0		
		Foundations that follow SFAS 117, check here.			
es		and complete lines 24 through 26 and lines 30 and 31.			
anc	24	Unrestricted			
껿	25	Temporarily restricted			
힏	26	Permanently restricted			
Ē	24 25 26 27 28 29 30	Foundations that do not follow SFAS 117, $\triangleright X $			
6		check here and complete lines 27 through 31.			
ts	27	Capital stock, trust principal, or current funds			
Se	28	Paid-in or capital surplus, or land, bldg , and equipment fund			
ĕ	29	Retained earnings, accumulated income, endowment, or other funds	4,453,140.	4,569,042.	
é	30	Total net assets or fund balances (see instructions)	4,453,140.	4,569,042.	
_	31	Total liabilities and net assets/fund balances (see			
		instructions)	4,453,140.	4,569,042.	
		Analysis of Changes in Net Assets or Fund Balan			
1		al net assets or fund balances at beginning of year - Part II			
	end-	-of-year figure reported on prior year's return)			4,453,140.
2	Ente	er amount from Part I, line 27a		2	<u>199,</u> 095.
3	Oth	er increases not included in line 2 (itemize) ▶		3	
4	Add	lines 1, 2, and 3		4	4,652,235.
					83,193.
_6	Tota	al net assets or fund balances at end of year (line 4 minus l	ine 5) - Part II, column (b),	line 30 6	4,569,042.
					5 000 DE (004)

Form 990-PF (2014)					Page 3
	s and Losses for Tax on Inv	 	1 /6\11-		
· (a) List ar	(b) How acquired P - Purchase	(c) Date	(d) Date sold		
	brick warehouse, or common stock, 200	sns MLC Co)	D - Donation	(mo, day, yr)	(mo., day, yr)
1a SEE PART IV SCHE	DULE		-		
_ <u>b</u>				_	
<u>C</u>					
_d					
<u>e</u>	T	(=) Cook == other have	<u>.</u>		L
(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale		(h) Gain or (lo (e) plus (f) mini	
	(e. anomasia)	processor of the control of the cont		(0) pido (1) 11	
<u>a</u>			<u> </u>		
<u>b</u>					
<u>c</u>				-	
е					
	s showing gain in column (h) and owner	ed by the foundation on 12/31/69	<i>(</i>)	Cara (Cal. (b) a	
	(j) Adjusted basis	(k) Excess of col (i)		Gains (Col (h) g (k), but not less t	
(i) F M V as of 12/31/69	as of 12/31/69	over col (j), if any		Losses (from co	
a	· · · · · · · · · · · · · · · · · · ·			-	
b					
c					
d					
e					
2 Capital gain net income		gain, also enter in Part I, line 7			
	, , , , , , , , , , , , , , , , , , ,	(loss), enter -0- in Part I, line 7	2		84,306.
	ain or (loss) as defined in sections				
	art I, line 8, column (c) (see ins				
			3		0
	· · · · · · · · · · · · · · · · · · ·	duced Tax on Net Investment In e section 4940(a) tax on net investi			
	the section 4942 tax on the distrib	outable amount of any year in the b	ase perioc	12	Yes X No
	not qualify under section 4940(e)				
1 Enter the appropriate an	l	ir, see the instructions before makin	g any enti I	ries (d)	
Base period years	(b) Adjusted qualifying distributions	(c) Net value of nonchantable-use assets		Distribution ra	
Calendar year (or tax year beginning in) 2013	254,840.	5,922,872.		(col (b) divided by	0.043026
2012	226,805.	4,310,368.			0.052618
2011	275,413.	3,531,034.			0.077998
2010	123,609.	2,764,741.			0.044709
2009	101,314.	1,914,118.			0.052930
			""		
2 Total of line 1, column (c	d)		2		0.271281
	o for the 5-year base period - divid				
	ndation has been in existence if les	• •	3		0.054256
·		•			
4 Enter the net value of no	oncharitable-use assets for 2014 fr	om Part X, line 5	4	6,	653,009.
					
5 Multiply line 4 by line 3			5		360,966.
6 Enter 1% of net investm	ent income (1% of Part I, line 27b)		6		2,561.
	,				
7 Add lines 5 and 6			7		363,527
	ions from Part XII, line 4 reater than line 7, check the box	ın Part VI, line 1b, and complete t	8 that part		358,560. x rate See the

Pa	rt VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 - see	instru	ction	ıs)
1a	Exempt operating foundations described in section 4940(d)(2), check here and enter "N/A" on line 1)			
	Date of ruling or determination letter (attach copy of letter if necessary - see instructions)			
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check		5,3	121.
	here ▶ ☐ and enter 1% of Part I, line 27b		_	
С	All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of			
	Part I, line 12, col (b)			
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-) 2			
3	Add lines 1 and 2		5,	121.
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)			0
5	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0		5, :	121.
6	Credits/Payments:			
а	2014 estimated tax payments and 2013 overpayment credited to 2014 6a			
b	Exempt foreign organizations - tax withheld at source			
c	Tax paid with application for extension of time to file (Form 8868) 6c 5,235.			
d	Backup withholding erroneously withheld			
7	Total credits and payments. Add lines 6a through 6d			235.
8	Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached 8			114.
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			
11	Enter the amount of line 10 to be: Credited to 2015 estimated tax ▶ Refunded ▶ 11			
	rt VII-A Statements Regarding Activities			г
1a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it		Yes	No
	participate or intervene in any political campaign?	1a		X
Ь	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see			v
	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 distributed by the foundation in connection with the activities.	.		х
	Did the foundation file Form 1120-POL for this year?	1c		
a	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year. (1) On the foundation \$\Bigsim \bigsim \			
_	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on			l
e	foundation managers. • \$		l	l
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?	2		x
-	If "Yes," attach a detailed description of the activities	- -	-	
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of	1 1		
•	incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes	3		х
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	4a		Х
b	If "Yes," has it filed a tax return on Form 990-T for this year?	4b		
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?	5		Х
	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		j	Į
	By language in the governing instrument, or		j	
	• By state legislation that effectively amends the governing instrument so that no mandatory directions that			
	conflict with the state law remain in the governing instrument?	6	Х	
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	Х	
8a	Enter the states to which the foundation reports or with which it is registered (see instructions)			
	MI,			
b	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General		}	
	(or designate) of each state as required by General Instruction G? If "No," attach explanation	8b	Х	
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or		ļ	
	4942(j)(5) for calendar year 2014 or the taxable year beginning in 2014 (see instructions for Part XIV)? If "Yes,"		ļ	
	complete Part XIV	9	\dashv	_ <u>_x</u> _
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their	.		v
	names and addresses	10 m 990		<u> </u>
	FA	m 44(I	/	201A\

Pa	rt VII-A Statements Regarding Activities (continued)	113		-90 +
			_	_
1 1	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the			,
40	meaning of section 512(b)(13)? If "Yes," attach schedule (see instructions).	_11		X
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified			١.,
	person had advisory privileges? If "Yes," attach statement (see instructions)	12		<u> </u>
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	_X	<u> </u>
	Website address ▶ N/A			
14	The books are in care of ► TIMOTHY J. O'DONOVAN Telephone no ► 616-361-	<u> 144</u>	8	
	Located at ▶4245 NORTH OAK POINTE COURT, NE GRAND RAPIDS, MI ZIP+4 ▶ 49525			
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		Yes	No
	over a bank, securities, or other financial account in a foreign country?	16		X
	See the instructions for exceptions and filing requirements for FinCEN Form 114, (formerly TD F 90-221) If			
	"Yes," enter the name of the foreign country			
Pai	rt 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
1 a	During the year did the foundation (either directly or indirectly)			
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person? Yes X No			
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a	-		
	disqualified person? Yes X No			
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? Yes X No			1
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? Yes X 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)			
	· · · · · · · · · · · · · · · · · · ·]		
L.	olf any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations	4.		
	section 53 4941(d)-3 or in a current notice regarding disaster assistance (see instructions)?	1b		
	Organizations relying on a current notice regarding disaster assistance check here			
С	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that	.		v
	were not corrected before the first day of the tax year beginning in 2014?	1c		<u> </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))			
а	At the end of tax year 2014, did the foundation have any undistributed income (lines 6d and			
	6e, Part XIII) for tax year(s) beginning before 2014?			
	If "Yes," list the years	1		
ь	Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2)	1		
	(relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to	İ		
	all years listed, answer "No" and attach statement - see instructions)	2b	_	
С	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here	l		
				
3 a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise			
	at any time during the year?	ľ		
b	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]	
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a		Х
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		Х
)-DE	(2044)

roim	990-PF (2014) O DONOVAIN FAIT.				3/04443	Page C
Pa	rt VII-B Statements Regarding Activities	for Which Form	4720 May Be Red	quired (continued)		
5a	During the year did the foundation pay or incur any amo	ount to				
	(1) Carry on propaganda, or otherwise attempt to influ	ence legislation (section	on 4945(e))?	Yes X No	>	
	(2) Influence the outcome of any specific public ele	ection (see section	4955), or to carry o	n,	l j	
	directly or indirectly, any voter registration drive?				1 1	
	(3) Provide a grant to an individual for travel, study, or o	other similar purposes	?	. Yes X No	,	
	(4) Provide a grant to an organization other than a					
	section 4945(d)(4)(A)? (see instructions)			1	,	
	(5) Provide for any purpose other than religious, cl					
	purposes, or for the prevention of cruelty to children			1 7 [; j)	,	
b	If any answer is "Yes" to 5a(1)-(5), did any of the	transactions fail to	qualify under the	exceptions described in	,	İ
	Regulations section 53 4945 or in a current notice regar	rding disaster assistar	nce (see instructions)?		. 5b	
	Organizations relying on a current notice regarding disa	ster assistance check	here			
С	If the answer is "Yes" to question 5a(4), does the	foundation claim e	exemption from the	tax		
	because it maintained expenditure responsibility for the		•		,	
	If "Yes," attach the statement required by Regulations se	~]
6a	Did the foundation, during the year, receive any fur	nds, directly or indir	ectly, to pay premiu	ms	1 1	
	on a personal benefit contract?	· ·			,	
ь	Did the foundation, during the year, pay premiums, dire	ectly or indirectly, on a	personal benefit contr	act?	. 6b	Х
	If "Yes" to 6b, file Form 8870					
7a	At any time during the tax year, was the foundation a p	arty to a prohibited ta	x shelter transaction?.	. Yes X No	,	- 1
<u> </u>	If "Yes," did the foundation receive any proceeds or ha					
Pa	rt VIII Information About Officers, Directo	rs, Trustees, Fou	ındation Manager	s, Highly Paid Emp	oloyees,	
1	and Contractors List all officers, directors, trustees, foundation r	managers and thei	r compensation (see	e instructions).	_	
	(a) Name and address	(b) Title, and average	(c) Compensation	(d) Contributions to	(e) Expense	account.
	(a) Name and address	hours per week devoted to position	(If not paid, enter -0-)	employee benefit plans and deferred compensation	other allow	vances
			•			
ATC	н 5		() q		C
				<u> </u>		
2	Compensation of five highest-paid employees "NONE."	(other than thos	se included on lin	e 1 - see instruction	ons). If nor	ne, ente
	NONE.	(b) Title, and average		(d) Contributions to		
(a)	Name and address of each employee paid more than \$50,000	hours per week devoted to position	(c) Compensation	employee benefit plans and deferred	(e) Expense other allow	
		devoted to position		compensation		
	NOVE					
	NONE	ļ -				
				-		
		[
		ļ			 .	
		1	<u> </u>	<u></u>		
Tota	I number of other employees paid over \$50,000		<u> </u>			

Form 990-PF (2014)		Page 7
Part VIII Information About Officers, Directors, Trustees, Foundation Manand Contractors (continued)	nagers, Highly Paid Emplo	yees,
3 Five highest-paid independent contractors for professional services (see inst	ructions). If none, enter "NONE	"
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE		
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 relevant statistical organizations and other beneficianes served, conferences convened, research papers produced, etc.	I information such as the number of	Expenses
1 N/A		
2		
3		
4		
Device N. D. Commonwell December Deleted Investments (constitution)		
Part IX-B Summary of Program-Related Investments (see instructions)	and 2	Amount
Describe the two largest program-related investments made by the foundation during the tax year on lines 1 a 1 NONE	arid 2	Amount
2		
All other program-related investments See instructions		
3 NONE		
Total. Add lines 1 through 3		

O'DONOVAN FAMILY FOUNDATION 38-3704443 Form 990-PF (2014) Page 8 Minimum Investment Return (All domestic foundations must complete this part. Foreign foundations, Part X see instructions.) Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., 1a 6,665,376. 1b 88,948. 1c c Fair market value of all other assets (see instructions) 6,754,324. Reduction claimed for blockage or other factors reported on lines 1a and 1c (attach detailed explanation) _______1e Acquisition indebtedness applicable to line 1 assets Subtract line 2 from line 1d 6,754,324. 3 Cash deemed held for charitable activities Enter 1 1/2% of line 3 (for greater amount, see instructions) 101,315. Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V. line 4. 6,653,009. 332,650. Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations Part XI and certain foreign organizations check here
and do not complete this part) 332,650. 1 2a Tax on investment income for 2014 from Part VI, line 5 2a Income tax for 2014. (This does not include the tax from Part VI). . 2b 20 5,121. 327,529. Distributable amount before adjustments Subtract line 2c from line 1 3 327,529. 6 Distributable amount as adjusted Subtract line 6 from line 5 Enter here and on Part XIII, 327,529. Part XII Qualifying Distributions (see instructions) Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes a Expenses, contributions, gifts, etc - total from Part I, column (d), line 26 1a 358,560. 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., Amounts set aside for specific charitable projects that satisfy the a Suitability test (prior IRS approval required) 3a

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

Form **990-PF** (2014)

358,560.

Cash distribution test (attach the required schedule)

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

Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4

Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income Enter 1% of Part I, line 27b (see instructions)

Adjusted qualifying distributions. Subtract line 5 from line 4

3b

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Page 9

	rt XIII Undistributed Income (see instruct	(a)	(b)	(c)	(d)
1	Distributable amount for 2014 from Part XI, line 7	Corpus	Years prior to 2013	2013	2014 327,529
2	Undistributed income, if any, as of the end of 2014			 	0217029
	Enter amount for 2013 only				
	Total for pnor years 20 12 ,20 11 ,20 10				
3	Excess distributions carryover, if any, to 2014				
а	From 2009 13,383.				
b	From 2010				
C	From 2011 101,575.				
d	From 2012				
0	From 2013				
f	Total of lines 3a through e	130,164.			
1	Qualifying distributions for 2014 from Part XII,				
	line 4 ▶ \$ 358,560.				
а	Applied to 2013, but not more than line 2a				
b	Applied to undistributed income of prior years				
	(Election required - see instructions)				
С	Treated as distributions out of corpus (Election required - see instructions)				
d	Applied to 2014 distributable amount				327,529
e	Remaining amount distributed out of corpus	31,031.			
;	Excess distributions carryover applied to 2014				
\$	(If an amount appears in column (d), the same amount must be shown in column (a)) Enter the net total of each column as indicated below:				
а	Corpus Add lines 3f, 4c, and 4e Subtract line 5	161,195.			
b	Prior years' undistributed income Subtract				
С	Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed				
d	Subtract line 6c from line 6b Taxable amount - see instructions				
е	Undistributed income for 2013 Subtract line 4a from line 2a Taxable amount - see instructions			· · · · · · · · · · · · · · · · · · ·	
f	Undistributed income for 2014 Subtract lines 4d and 5 from line 1 This amount must be distributed in 2015				
•	Amounts treated as distributions out of corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3) (Election may be required - see instructions)				
3	Excess distributions carryover from 2009 not applied on line 5 or line 7 (see instructions)	13,383.			
9	Excess distributions carryover to 2015.	147 010			
	Subtract lines 7 and 8 from line 6a	147,812.			
0	Analysis of line 9				
a	Excess from 2010				
þ	15 000				
	Excess from 2012 15, 206.				
	Excess from 2013				
е	Excess from 2014				Form 990-PF (201

2 a Enter the lesser of the adjusted net income from Part I or the minimum investment return from Part X for each year listed . 8 85% of line 2a . C Outlying distributions from Part XII, line 4 for each year listed . 8 Manufacture of the adjusted in line 2a not used directly for active conduct of exempt activities 9 Outlying distributions made directly for active conduct of exempt activities 9 Outlying distributions made directly for active conduct of exempt activities 9 Outlying distributions made directly for active conduct of exempt activities 9 Outlying distributions made directly for active conduct of exempt activities 10 Outlying distributions made directly for active conduct of exempt activities 2 Outlying distributions made directly for active conduct of exempt activities 2 Outlying distributions made directly for active conduct of exempt activities 2 Outlying distributions made directly for active conduct of exempt activities 2 Outlying distributions made directly for active conduct of exempt activities 2 Outlying distributions made directly for active conduct of exempt activities 9 Tax year	Pa	rt XIV Private Op	erating Foundations	s (see instructions a	nd Part VII-A, questi	ion 9)	NOT APPLICABLE				
b Check box to indicate whether the foundation a a private operating foundation described in section 2 factor the tease of the set 2 passed restrictions of the set 2 passed restriction	1 a	If the foundation has	received a ruling or d	etermination letter tha	t it is a private oper	ating					
b Check box to indicate whether the foundation a a private operating foundation described in section 2 factor the tease of the set 2 passed restrictions of the set 2 passed restriction		foundation, and the ruling is effective for 2014, enter the date of the ruling									
28 Enter the lisease of the abs. 16 12014 (b) 2013 (c) 2012 (d) 2011 (e) Total to the huminum movament return from Part X for each year facility of the cash year facility of the year facility of the cash year facility of the year facility of the year facility of the year facility of the year facility of the year facility of the year facility of the year facility of the year facility of the year facility of the year facility of year facility of year facility of year facility of year facility of year facility of year facility of year facility of year facility of year facility of year facility of year facility of year facility of year facility of year facility of year year facility of year facility of year facility of year facility of year facility of year facility of year facility of year facility of year facility of year facility of year facility of year year year facility of year year year year year year year year	ь					section 4942()(3) or 4942(J)(5)				
justed reference from Part (a) 2014 (b) 2013 (c) 2012 (d) 2011 (d)	٠.	F-4 4b- 16 4bd	Tax year		Prior 3 years						
is the minimum investment retained the minimum investment for the SSS of the 2a	2 a		(a) 2014	(b) 2013	(c) 2012	(d) 2011	(e) Total				
year stated Couldings destrictores from fax XII, line 4 for starty seriesed Amounts included in line 2 bot in used directly for starte conduct of exempt seriotes		f or the minimum investment									
b 85% of line 2a											
Countying distributions from Par XX, line 4 for each or service and of each or service and of each or service and each of eac	.										
XII, Insert for serby year braids						-					
d Amounts included in the 2 can be considered in the 2 can be considered of warming attributes	C										
of example activities	d	•									
e Guadying distributions made directly for school conduct of seminy increase Subract lines. 22 form hims 2, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1,											
directly for active conduct of exempt actives. Solurate lines 20 fem line 2c											
20 from les 22	•										
3 Complete 3.8, b, or c for the alternative test interest internative test interest											
alternative test relied upon if "Assets" illumbure test - enter (1) Value of all assets	3		-								
(2) Yoke of asiests, and without the contribution of the contribution of the contribution of the contribution of the contributed more than 2% of the total contributions received by the foundation had \$5,000 or more in assistant of the close of any tax year (but only if they have contributed more than 2%, of the total contributions received by the foundation who have contributed more than 2%, of the total contributions received by the foundation who have contributed more than 2%, of the total contributions received by the foundation before the close of any tax year (but only if they have contributed more than 2%, of the total contributions received by the foundation before the close of any tax year (but only if they have contributed more than 2% of the total contributions received by the foundation before the close of any tax year (but only if they have contributed more than 2% of the total contributions received by the foundation before the close of any tax year (but only if they have contributed more than 35,000) (See section 507(d)(2)) TIMOTHY J. AND KAREN J. O'DONOVAN b List any managers of the foundation who own 10% or more of the stock of a corporation (or an equally large portion of ownership of a partnership or other entity) of which the foundation has a 10% or greater interest N/A Information Regarding Contribution, Grant, Gift, Loan, Scholarship, etc., Programs: Check here Xil if the foundation only makes contributions to preselected charitable organizations and does not acc unsolicited requests for funds if the foundation makes gifts, grants, etc (see instructions) to individuals or organizations un other conditions, complete items 2a, b, c, and d a The name, address, and telephone number or e-mail address of the person to whom applications should be addressed b The form in which applications should be submitted and information and materials they should include		•									
(a) Value of assets qualifying under section b Tendowners attendance test- enter 2/3 of minimum meet- most return shown in Part X ties for each year lated i, c c Tolloporal tentime test- enter (1) Total support other than gross investment income payments on securities to pass (section 5/2(s)6), or reyalities),	а										
winds section b Tendowment alternative test- enter 2/3 of minimum invest- ment return shown in Part X inne for each year lated , c "Support alternative test- enter (1) Total support districtive in cores payments on securities payments payments on securities payments pay					<u>. </u>						
b *Endowment* atternative test- inter 2/3 of minimum minist- inter 1/3 of a tomorum minist- inter 1/3 of a tomorum minist- inter 1/3 of a tomorum minist- inter 1/3 Total support afternative test - tester (1) Total support afternative test - tester (1) Total support of the than gious investment income (interest, dividends, rents. payments on sourness loans (section 5/28/16), (2) Support from periods public and 5 or more exempt organizations as provided in section 4942 (00/09/09/10,		• •									
enter 2/3 of minimum investiment return shown in Part X. Inse for each year listed	_						-				
ment return shown in Part X line 6 for each year tated, . c "Support alternative test - enter (1) Total support other than gross investment income (interest, dividends, rents, payments on securities loans (securities) and the payments on securities loans (securities) and the payments on securities loans (securities) and the payments on securities loans (securities) and the payments on securities loans (securities) and the payments on securities loans (securities) and the payments on securities loans (securities) and the payments of the	D					İ					
c "Support alternative itest - enter (1) Total support other than gross investment income (entered, underdis, crests, payments on securities loans (section 512(i)(50)), or reyalties),											
(1) Total support other than gross investment income (interest, dividends, reins, payments on securities loans (section \$1(2a)(5)), or royalizes),						,					
gross investment income (intresset, dividends, rents, payments on securities) payments on securities (loans (section 512(a)(5)). (2) Support for a securities (loans) (section 512(a)(5)). (3) Capter for section 4942 (log(8)(6)). (4) Gross in Section 4942 (log(8)(6)). (b) Gross in Section 1942 (log(8)(6)). (c) Gross in Section 1942 (log(8)(6)). (d) Gross in Section 1942 (log(8)(6)). (e) Gross in Section 1942 (log(8)(6)). (e) Gross in Section 1942 (log(8)(6)). (f) Gross in Section 1942 (log(8)(6)). (e) Gross in Section 1942 (log(8)(6)). (e) Gross in Section 1942 (log(8)(6)). (f) Gross in Section 1942 (log(8)(6)). (e) Gross in Section 1942 (log(8)(6)). (f) Gross in Section 1942 (log(8)(6)). (e) Gross in Section 1942 (log(8)(6)). (f) Gross in Section 1942 (log(8)(6)). (e) Gross in Section 1942 (log(8)(6)). (f) Gross in Section 1942 (log(8)(6)). (e) Gross in Section 1942 (log(8)(6)(6)). (f) Gross in Section 1942 (log(8)(6)(6)(6)(6)(6)(6)(6)(6)(6)(6)(6)(6)(6)	С	• •				ł					
payments on securities loans (section \$12(a)(5)). or royaltes),											
ioans (section \$15/20/50), or royaltes),											
(2) Support from general public and 5 or more exempt organizations as provided in section 4942 (0)(5)(6)(6)(6)											
public and 5 or more exempt organizations as provided in section 4942 (0)(5)(6)(6)(6)(6)(6)(6)(6)(6)(6)(6)(6)(6)(6)											
provided in section 4942 (0)(3)(9)(9)(9)(9)(9)(9)(9)(9)(9)(9)(9)(9)(9)											
(3) Largest amount of support from an exempt organization						1					
port from an exempt organization,		(j)(3)(B)(iii)									
Part XV Supplementary Information (Complete this part only if the foundation had \$5,000 or more in assistant at any time during the year - see instructions.) 1 Information Regarding Foundation Managers: a List any managers of the foundation who have contributed more than 2% of the total contributions received by the foundation before the close of any tax year (but only if they have contributed more than \$5,000) (See section 507(d)(2)) TIMOTHY J. AND KAREN J. O'DONOVAN b List any managers of the foundation who own 10% or more of the stock of a corporation (or an equally large portion of ownership of a partnership or other entity) of which the foundation has a 10% or greater interest N/A 2 Information Regarding Contribution, Grant, Gift, Loan, Scholarship, etc., Programs: Check here \(\subseteq \subseteq \subseteq \) if the foundation only makes contributions to preselected charitable organizations and does not accursolicited requests for funds if the foundation makes gifts, grants, etc (see instructions) to individuals or organizations unother conditions, complete items 2a, b, c, and d a The name, address, and telephone number or e-mail address of the person to whom applications should be addressed b The form in which applications should be submitted and information and materials they should include d Any restrictions or limitations on awards, such as by geographical areas, charitable fields, kinds of institutions, or other conditions, complete items 2a, b, c, and d Any restrictions or limitations on awards, such as by geographical areas, charitable fields, kinds of institutions, or other conditions, complete items 2a, b, c, and d Any restrictions or limitations on awards, such as by geographical areas, charitable fields, kinds of institutions, or other conditions.					•						
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c Any submission deadlines d Any restrictions or limitations on awards, such as by geographical areas, charitable fields, kinds of institutions, or oth	а	The name, address, a	nd telephone number	or e-mail address of t	he person to whom ap	plications should be ad	dressed				
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d Any restrictions or limitations on awards, such as by geographical areas, charitable fields, kinds of institutions, or oth	D	rne iona in which app	iications snould be sub	inittea ana informatio	on and materials they	snoula include					
d Any restrictions or limitations on awards, such as by geographical areas, charitable fields, kinds of institutions, or oth											
d Any restrictions or limitations on awards, such as by geographical areas, charitable fields, kinds of institutions, or oth	С	Any submission deadli	nes								
						·					
	ď		mitations on awards,	such as by geogra	phical areas, charita	ble fields, kinds of	institutions, or other				

JSA 451400 1 000 Part XV Supplementary Information (continued)

Page 11

3 Grants and Contributions Paid During the Year or Approved for Future Payment Recipient If recipient is an individual, show any relationship to any foundation manager or substantial contribution Purpose of grant or contribution Amount Name and address (home or business) Amount Amount Amount Amount										
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)	or substantial contributor	recipient	contribution							
а Paid duпng the year										
ATCH 6										
Total			▶ 3a	357,320.						
b Approved for future payment										
	n									
Total			<u></u> ▶ 3b							

Page **12**

	A Analysis of Income-Produ amounts unless otherwise indicated	_	ated business income	Excluded by	y section 512, 513, or 514	(e)
1 Program	service revenue	(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	Related or exempt function income (See instructions)
-						(ecc instructions)
ь						
c						
d						
e f					+	
	and contracts from government agencies			•		
2 Members	ship dues and assessments					<u> </u>
	n savings and temporary cash investments			14	21.	
4 Dividend	is and interest from securities			14	179,682.	
	al income or (loss) from real estate					
	-financed property	ļ				
	lebt-financed property					
	I income or (loss) from personal property					
7 Other in	vestment income			_		· · · · · · · · · · · · · · · · · · ·
8 Gain or (l	oss) from sales of assets other than inventory			18	84,306.	
9 Net inco	me or (loss) from special events			<u> </u>		
O Gross pr	rofit or (loss) from sales of inventory					
1 Other rev	venue a					
b						
c						
d						
e						
2 Subtotal	Add columns (b), (d), and (e)				264,009.	
	dd line 12, columns (b), (d), and (e)				13	264,009
	neet in line 13 instructions to verify calc					
Part XVI-				· · · · ·		
Line No.	Explain below how each activit	y for which	n income is reported	ın column (e	e) of Part XVI-A contribu	ted importantly to th
▼	accomplishment of the foundation	on's exemp	t purposes (other than	by providing	funds for such purposes) (See instructions)
					_	
						
						
_						
			<u> </u>			
						
					<u> </u>	
			<u> </u>			
					· · · · · · · · · · · · · · · · · · ·	
		_				
					-	-

Form 990-PF (2014)

Part	XVII	Information R Exempt Organ		ansfers To and	Transacti	ions a	nd Relation	ships With No	nchar	itable	е
11	n sect	ion 501(c) of the Co	-	engage in any of the section 501(c)(3) of		-			l l	Yes	No
	_	zations?	6		4	4					
		-	_	o a noncharitable ex	-				4-14		x
											X
		ransactions					• • • • • • • •		. 1.0(2)	-	
			ncharitable exe	empt organization					16(1))	х
Ċ	2) Pur	chases of assets fro	om a noncharit	able exempt organiza	ition.				1b(2)		Х
				r assets							Х
											X
(5) Loa	ans or loan guarante	es						. 1b(5	<u> </u>	X
				hip or fundraising so						<u> </u>	X
				sts, other assets, or p						Ļ	X
				es," complete the fo							
				gement, show in co							
(a) Line		(b) Amount involved	1	noncharitable exempt orga	1			fers, transactions, and			
``			, ,			N/A			• •		
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			<u> </u>	<u> </u>							
				ffiliated with, or rela							٦
			or the Code (c	other than section 50	11(c)(3)) or	ın secti	on 52/7	• • • • • • • • • •	Y	es X) No
<u>b lf</u>	"Yes,	(a) Name of organization		(b) Type of o	rganization		Γ	(c) Description of relati	onship		
		(4)	··	(1,1,1,100.00	· 3 · · · · · · · · · · · · · · · · · ·			(a) 2 a a a a a a a a a a a a a a a a a a			
									-		
							_				
				imed this return, including a taxpayer) is based on all inform				to the best of my know	ledge and l	belief, it	is true
Sign		Lines Mr ()	(Duna	1 15/22	1,,-	No.	nicha t	May the	IRS discus	ss this	return
Here	Sign	DIFFIE F (A)	X /////	Date	//5	F.//	BILLIA I		preparer		below
	Sign	nature of officer or trustee		Date '		itte		(see instruc	tions)? \[\frac{\fir}{\fir}}}}}}}}{\frac{\frac{\frac{\frac{\frac{\frac{\frac{\frac{\frac{\frac{\frac{\frac{\frac{\frac{\fir\fir\f{\frac{\frac{\frac{\fir}}}}}}}{\frac{\frac{\frac{\frac{\frac{\frac{\frac{\f	Yes	No
	<u> </u>	Print/Type preparer's na	ime	Preparer's eignature	0	2014	5.05.08	Check if	PTIN		_
Paid		CHARLES FRAY		Chila	(The	2013	0.00.00	self-employed	P006	5469	1
Prepa	arer		ROWE HORWAT	'H LLP	-7	11:1	8:20 -04'0	() 	09216		
Use (Only		CAMPAU AV		E 500						
		GRAND RAPIDS, MI				4	9503-2609	Phone no 616-	774-0	774	

Schedule B

(Form 990, 990-EZ, or 990-PF)

Department of the Treasury Internal Revenue Service

Name of the organization

Schedule of Contributors

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

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

OMB No 1545-0047

2014

Employer identification number

O'DONOVAN FAMILY FOUN	NDATION	38-3704443
Organization type (check one)		
Filers of:	Section:	
Form 990 or 990-EZ	501(c)() (enter number) organization	
	4947(a)(1) nonexempt charitable trust not treated as a private fou	ndation
	527 political organization	
Form 990-PF	X 501(c)(3) exempt private foundation	
	4947(a)(1) nonexempt charitable trust treated as a private foundat	ion
	501(c)(3) taxable private foundation	
· · · · · ·	overed by the General Rule or a Special Rule. , (8), or (10) organization can check boxes for both the General Rule and a S	Special Rule See
General Rule		
_	iling Form 990, 990-EZ, or 990-PF that received, during the year, contribut r property) from any one contributor. Complete Parts I and II. See instruction ntributions	- ·
Special Rules		
regulations under see 13, 16a, or 16b, and \$5,000 or (2) 2% of	described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/ctions 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 of that received from any one contributor, during the year, total contributions the amount on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1. Condescribed in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that respectively to the year, total contributions of more than \$1,000 exclusively for religious, children in the section 501(c)(7).	or 990-EZ), Part II, line of the greater of (1) omplete Parts I and II eceived from any one
literary, or education	al purposes, or the prevention of cruelty to children or animals. Complete P	arts I, II, and III
contributor, during th contributions totaled during the year for ar General Rule applies	described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that relegione year, contributions exclusively for religious, charitable, etc., purposes, but more than \$1,000. If this box is checked, enter here the total contributions in exclusively religious, charitable, etc., purpose. Do not complete any of the sto this organization because it received nonexclusively religious, charitable ore during the year.	t no such that were received parts unless the , etc , contributions
Caution. An organization that is 990-EZ, or 990-PF), but it must	s not covered by the General Rule and/or the Special Rules does not file So t answer "No" on Part IV, line 2, of its Form 990, or check the box on line F	chedule B (Form 990, If of its Form 990-EZ or on its

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

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

Name of organization O'DONOVAN FAMILY FOUNDATION

Employer identification number 38-3704443

Part I	Contributors (see instructions). Use duplicate copies of Pa	rt I if additional space is nee	ded.
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1 _	TIMOTHY J. AND KAREN J. O'DONOVAN 4245 NORTH OAK POINT COURT, NE GRAND RAPIDS, MI 49525	\$315,240.	Person X Payroll X Noncash X (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions)

Name of organization O'DONOVAN FAMILY FOUNDATION

Employer identification number 38-3704443

5 A II	Managah Branamir	/aaa inatrustians'	\	conice of Dart II if	additional space is needed.
Partil	Noncash Property	rsee instructions). Use dublicate	cobles of Part II if	additional space is needed.

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
1	12,000 SHRS WOLVERINE WORLD WIDE STOCK		
		\$315,240.	05/06/2014
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
- -		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
- -		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	

Employer identification number

				38-3704443
Part III	Exclusively religious, charitable, etc	., contributions to o	organizations desc	ribed in section 501(c)(7), (8), or (10)
	that total more than \$1,000 for the			
	following line entry. For organizations			
	contributions of \$1,000 or less for th			
	Use duplicate copies of Part III if addit			
(a) No.				
from Part I	(b) Purpose of gift	(c) Use	of gift	(d) Description of how gift is held
				
		(e) Transf	fer of aift	
		, (0)		
	Transferee's name, address, as	nd ZIP + 4	Relation	ship of transferor to transferee
				
(a) No. from				
from Part I	(b) Purpose of gift	(c) Use	of gift	(d) Description of how gift is held
		·		
		(e) Transf	er of gift	
	Transferee's name, address, a	nd ZIP + 4	Relation	ship of transferor to transferee
				·
(a) No. from	(b) Purpose of gift	(c) Use	of aift	(d) Description of how gift is held
Part I	(b) i diposo di giit	(6) 555	or g.i.c	
			. 	
		(e) Transf	er of gift	
			_	
	Transferee's name, address, ar	nd ZIP + 4	Relation	ship of transferor to transferee
				

(e) Transfer of gift

(c) Use of gift

Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee

(a) No. from Part I

(d) Description of how gift is held

(b) Purpose of gift

FORM 990PF, PART I - ACCOUNTING FEES

CHARITABLE PURPOSES	1,220.	1,220.
ADJUSTED NET INCOME		
NET INVESTMENT INCOME	1,220.	1,220.
REVENUE AND EXPENSES PER BOOKS	2,440.	2,440.
		TOTALS
DESCRIPTION	CROWE HORWATH FEES	

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FORM 990PF, PART I - TAXES

CHARITABLE PURPOSES		
ADJUSTED NET INCOME		
NET INVESTMENT INCOME	3,569.	3,569.
REVENUE AND EXPENSES PER BOOKS	3,569. 16,805.	20,374.
		TOTALS
DESCRIPTION	FOREIGN TAXES PAID FEDERAL TAX PAYMENT	

ATTACHMENT

PART I - OTHER EXPENSES FORM 990PF,

CHARITABLE <u>PURPOSES</u> 20.	20.
ADJUSTED NET INCOME	
NET INVESTMENT INCOME	
REVENUE AND EXPENSES PER BOOKS 20.	20.
	TOTALS
<u>DESCRIPTION</u> NONPROFIT INFO UPDATE FEE	

:

ATTACHMENT 4

FORM 990PF, PART III - OTHER DECREASES IN NET WORTH OR FUND BALANCES

DESCRIPTION AMOUNT

BUILT IN GAIN CONTRIBUTED STOCK 83,193.

TOTAL 83,193.

FORM 990PF, PART VIII - LIST OF OFFICERS,	ICERS, DIRECTORS, AND TRUSTEES		ATTACH	ATTACHMENT 5
NAME AND ADDRESS	TITLE AND AVERAGE HOURS PER WEEK DEVOTED TO POSITION	COMPENSATION	CONTRIBUTIONS TO EMPLOYEE BENEFIT PLANS	EXPENSE ACCT AND OTHER ALLOWANCES
TIMOTHY J. O'DONOVAN 4245 NORTH OAK POINTE COURT, NE GRAND RAPIDS, MI 49525	PRESIDENT/SECRETARY 1.00	0	0	0
KAREN J. O'DONOVAN 4245 NORTH OAK POINTE COURT, NE GRAND RAPIDS, MI 49525	TREASURER 1.00	0	0	0
KEVIN M. O'DONOVAN 4245 NORTH OAK POINTE COURT, NE GRAND RAPIDS, MI 49525	TRUSTEE 1.00	0	0	0
RYAN J. O'DONOVAN 4245 NORTH OAK POINTE COURT, NE GRAND RAPIDS, MI 49525	TRUSTEE 1.00	0	0	0
	GRAND TOTALS	0	0	0

:

ATTACHMENT 6

FORM 990DF, PART XV - GRANTS AND CONTRIBUTIONS PAID DURING THE YEAR

RECIPIENT NAME AND ADDRESS	RELATIONSHIP TO SUBSTANTIAL CONTRIBUTOR AND FOUNDATION STATUS OF RECIPIENT	PURPOSE OF GRANT OR CONTRIBUTION	AMOUNT
	NONE PC	ENDOWMENT & ANNUAL CAMPAIGN	25,000
	NONE P.C	MAJOR GIFTS AND PROGRAM SUPPORT	100,000
	NONE PC	PROGRAM SUPPORT	3,500.
MICHIGAN STATE UNIV, W. MI MEDICAL BUILDING FUND 300 SPARTAN WAY EAST LANSING, MI 48824-1005	NONE P.C	MEDICAL SCHOOL, COLLEGE OF EDUCATION, AND BUSINESS SCHOOL ENDOWMENTS BUSINESS SCHOOL	100,000
GRAND RAPIDS STUDENT ADVANCEMENT FOUNDATION 111 LIBRARY NE GRAND RAPIDS, MI 49503	NONE PC	PROGRAM SUPPORT	4,000
	NONE PC	2014 CAMPAIGN	35, 000.

:

ATTACHMENT 6 (CONT'D)

:

882081 300

ATTACHMENT 6 (CONT'D)

STE H

:

	RELATIONSHIP TO SUBSTANTIAL CONTRIBUTOR AND		•
RECIPIENT NAME AND ADDRESS	FOUNDATION STATUS OF RECIPIENT	PURPOSE OF GRANT OR CONTRIBUTION	AMOUNT
BOYS AND GIRLS CLUB OF GRAND RAPIDS 235 STRAIGHT AVE NW GRAND RAPIDS, MI 49504	NONE PC	PROGRAM SUPPORT	10,000.
FAMILY FUTURES 678 FRONT AVE NW STE 210	NONE P.C	PROGRAM SUPPORT	1,000
GRAND RAPIDS, MI 49504 GRAND RAPIDS ART MUSEUM 101 MONROE CENTER NW GRAND RAPIDS, MI 49503	NONE PC	PROGRAM SUPPORT	1,000

ē

TOTAL CONTRIBUTIONS PAID

352,320

3 39.02 PM

SCHEDULE D (Form 1041)

Capital Gains and Losses
► Attach to Form 1041, Form 5227, or Form 990-T.

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

OMB No 1545-0092

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

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

Employer identification number

	O'DONOVAN FAMILY FOUNDATION			38-37044	43	
Note	: Form 5227 filers need to complete only Parts I and II					
Par	Short-Term Capital Gains and Losses - Ass	ets Held One Yea	r or Less			
See the li This	instructions for how to figure the amounts to enter on nes below. form may be easier to complete if you round off cents note dollars.	(d) Proceeds (sales price)	(e) Cost (or other basis)	(g) Adjustments to gain or loss f Form(s) 8949, P line 2, column	rom art I,	(h) Gain or (loss) Subtract column (e) from column (d) and combine the result with column (g)
	Totals for all short-term transactions reported on Form 1099-B for which basis was reported to the IRS and for which you have no adjustments (see instructions) However, if you choose to report all these transactions on Form 8949, leave this line blank and go to line 1b.					
	Totals for all transactions reported on Form(s) 8949 with Box A checked					
2	Totals for all transactions reported on Form(s) 8949 with Box B checked					
3	Totals for all transactions reported on Form(s) 8949 with Box C checked	762,241.	687,110.			75,131.
4	Short-term capital gain or (loss) from Forms 4684, 62	252, 6781, and 8824			4	
5 6	Net short-term gain or (loss) from partnerships, S corr Short-term capital loss carryover Enter the amount Carryover Worksheet	nt, if any, from line	e 9 of the 2013	Capital Loss	<u>5</u> 6	()
7	Net short-term capital gain or (loss). Combine line line 17, column (3) on the back				7	75,131.
Par		ets Held More Tha	n One Year			
the li	nstructions for how to figure the amounts to enter on nes below form may be easier to complete if you round off cents	(d) Proceeds (sales price)	(e) Cost (or other basis)	(g) Adjustments to gain or loss fi Form(s) 8949, Pa	rom	(h) Gain or (loss) Subtract column (e) from column (d) and combine the result with
	nole dollars	(sales price)	(or other basis)	line 2, column		column (g)
	Totals for all long-term transactions reported on Form 1099-B for which basis was reported to the IRS and for which you have no adjustments (see instructions). However, if you choose to report all these transactions on Form 8949, leave this line blank and go to line 8b.					
	Totals for all transactions reported on Form(s) 8949 with Box D checked					
	Totals for all transactions reported on Form(s) 8949 with Box E checked					
	Totals for all transactions reported on Form(s) 8949 with Box F checked	89,841.	80,666.	· · · · · · · · · · · · · · · · · · ·		9,175.
11	Long-term capital gain or (loss) from Forms 2439, 46	84, 6252, 6781, and	1 8824		11	
12	Net long-term gain or (loss) from partnerships, S corp	orations, and other e	states or trusts		12	
13	Capital gain distributions		• • • • • • • • • • • • •		13	
14 15	Gain from Form 4797, Part I	t, if any, from line	14 of the 2013	Capital Loss	14 15	()
16	Net long-term capital gain or (loss). Combine lines				40	0 175

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

Schedule D (Form 1041) 2014

Schedule D (Form 1041) 2014 Page 2 Part III Summary of Parts I and II (1) Beneficiaries' (2) Estate's (3) Total Caution: Read the instructions before completing this part. (see instr) or trust's 75,131. 17 Net short-term gain or (loss) Net long-term gain or (loss): 9,175. 18a b Unrecaptured section 1250 gain (see line 18 of the wrksht).... 18b 18c 84,306. 19 Total net gain or (loss). Combine lines 17 and 18a. ▶ 19 Note: If line 19, column (3), is a net gain, enter the gain on Form 1041, line 4 (or Form 990-T, Part I, line 4a) If lines 18a and 19, column (2), are net gains, go to Part V, and do not complete Part IV If line 19, column (3), is a net loss, complete Part IV and the Capital Loss Carryover Worksheet, as Part IV **Capital Loss Limitation** Enter here and enter as a (loss) on Form 1041, line 4 (or Form 990-T, Part I, line 4c, if a trust), the smaller of. Tax Computation Using Maximum Capital Gains Rates Part V Form 1041 filers. Complete this part only if both lines 18a and 19 in column (2) are gains, or an amount is entered in Part I or Part II and there is an entry on Form 1041, line 2b(2), and Form 1041, line 22, is more than zero Caution: Skip this part and complete the Schedule D Tax Worksheet in the instructions if • Either line 18b, col (2) or line 18c, col (2) is more than zero, or • Both Form 1041, line 2b(1), and Form 4952, line 4g are more than zero Form 990-T trusts. Complete this part only if both lines 18a and 19 are gains, or qualified dividends are included in income in Part I of Form 990-T, and Form 990-T, line 34, is more than zero. Skip this part and complete the Schedule D Tax Worksheet in the instructions if either line 18b, col (2) or line 18c, col (2) is more than zero Enter taxable income from Form 1041, line 22 (or Form 990-T, line 34) 22 Enter the smaller of line 18a or 19 in column (2) but not less than zero........ 22 Enter the estate's or trust's qualified dividends from Form 1041, line 2b(2) (or enter the qualified dividends included in income in Part I of Form 990-T). 23 Add lines 22 and 23 24 24 If the estate or trust is filing Form 4952, enter the 25 amount from line 4g, otherwise, enter -0-... Subtract line 25 from line 24 If zero or less, enter -0- 26 26 27 Subtract line 26 from line 21. If zero or less, enter -0-27 Enter the smaller of the amount on line 21 or \$2,500 28 28 29 Enter the smaller of the amount on line 27 or line 28 29 30 Subtract line 29 from line 28 If zero or less, enter -0- This amount is taxed at 0%. 30 31 32 32 Enter the smaller of line 21 or \$12,150.......... 33 33 34 34 Subtract line 34 from line 33 If zero or less, enter -0-35 35 36 36 37 37 38 38 39 39 Subtract line 39 from line 38 If zero or less, enter -0- 40 40 41 41 42 Figure the tax on the amount on line 27. Use the 2014 Tax Rate Schedule for Estates and Trusts (see the Schedule G instructions in the instructions for Form 1041) 42

Schedule D (Form 1041) 2014

43

Figure the tax on the amount on line 21 Use the 2014 Tax Rate Schedule for Estates and Trusts (see the Schedule G instructions in the instructions for Form 1041)....

G, line 1a (or Form 990-T, line 36)

Tax on all taxable income. Enter the smaller of line 43 or line 44 here and on Form 1041, Schedule

43

Form 8949

Sales and Other Dispositions of Capital Assets

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

2014

OMB No 1545-0074

Attachment Sequence No 12

Department of the Treasury Internal Revenue Service Name(s) shown on return

O'DONOVAN FAMILY FOUNDATION

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

Social security number or taxpayer identification number 38-3704443

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

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

You must check Box A, B, or C below. Check only one box. If more than one box applies for your short-term transactions,

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

complete a separate Form 8949, page 1, for each applicable box. If you have more short-term transactions than will fit on this page

(a) Description of property	(b) Date acquired	(c)	(d) Proceeds	(e) Cost or other basis See the	Adjustment, if a If you enter an a enter a cod See the separ	(h) Gain or (loss)	
(Example 100 sh XYZ Co)	(Mo , day, yr)	disposed (Mo , day, yr)	(sales price) (see instructions)	Note below and see Column (e) in the separate instructions	(f) Code(s) from instructions	(g) Amount of adjustment	Subtract column (e) from column (d) and combine the result with column (g)
AGRIUM INC	06/02/2014	10/29/2014	95,530.	90,168.			5,362
CONAGRA FOODS INC	09/12/2013	08/22/2014	96,208.	95,398.			810
DIGITAL RLTY		04/02/2014	156,535.	181,672.			-25,137
GLAXOSMITHKLINE ADR	04/28/2014	06/02/2014	107,182.	111,999.			-4,817
PIMCO INCOME		02/18/2014	147,512.	134,092.			13,420
STONE HBR EMERG		08/22/2014	77,523.	73,781.			3,742
DISTRIBUTION			81,751.				81,751
	-						
	-						

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

Name(s) shown on return Name and SSN or taxpayer identification no not required if shown on other side
O'DONOVAN FAMILY FOUNDATION

Social security number or taxpayer identification number
38-3704443

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

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

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

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

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

	(F) Long-term transactions i	ioi reportea i	o you on For	m 1099-B				
1	(a) Description of property	(b) Date acquired	(c) Date sold or disposed	(d) Proceeds (sales price)	(e) Cost or other basis See the	Adjustment, if If you enter an enter a co See the sepa	(h) Gain or (loss). Subtract column (e) from column (d) and	
	(Example 100 sh XYZ Co)	(Mo , day, yr)	(Mo , day, yr)	(see instructions)	Note below and see Column (e) in the separate instructions	(f) Code(s) from instructions	(g) Amount of adjustment	combine the result with column (g)
ALPS	ETF TR ALERIAN	03/04/2013	04/28/2014	89,841.	80,666.			9,175
		•						
								
								
(su inc ch	tals. Add the amounts in colubtract negative amounts) Elude on your Schedule D, linecked), line 9 (if Box E above Box F above is checked)	nter each tota e 8b (if Box D	I here and above is	89,841.	80,666.			9,175.

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

Form **8868**

(Rev January 2014)

Department of the Treasury Internal Revenue Service

Application for Extension of Time To File an Exempt Organization Return

OMB No 1545-1709

► File a separate application for each return.

► Information about Form 8868 and its instructions is at www.irs.gov/form8868.

 If you are 	filing for an Automatic 3-Month Extension, o	complete c	only Part I and check th	ıs box			▶ X
	filing for an Additional (Not Automatic) 3-Mc						
Do not comp	ilete Part li unless you have already been gra	nted an au	tomatic 3-month extens	sion on a previously filed	l Forr	n 8868	3
a corporation 8868 to req Return for instructions)	ling (e-file). You can electronically file Form on required to file Form 990-T), or an addition uest an extension of time to file any of the Transfers Associated With Certain Persona For more details on the electronic filing of the	nal (not au forms liste I Benefit nis form, vis	tomatic) 3-month exten ed in Part I or Part II w Contracts, which musi sit www irs gov/efile an	ision of time. You can e ith the exception of Fo t be sent to the IRS i d click on e-file for Chari	electrorm 8 in pa	onicall 870, I aper fo	ly file Form Information ormat (see
	tomatic 3-Month Extension of Time. On						
•	n required to file Form 990-T and requesting				•		
Part I only .					exte	 nsion c	► L
to file incom		· ,- -, · · · _ · · ·		Enter filer's identifyin			
	Name of exempt organization or other filer, see in	structions		Employer identification nu			
Type or						, ,	
print	O'DONOVAN FAMILY FOUNDATION			38-370444:	3		
File by the	Number, street, and room or suite no. If a P.O. box	x, see instruc	ctions	Social security number (SS			
due date for filing your	4245 NORTH OAK POINTE COURT,	NE		,	•		•
return See	City, town or post office, state, and ZIP code For	a foreign ad	dress, see instructions	8 8 9 1			
instructions	GRAND RAPIDS, MI 49525						
Enter the Re	turn code for the return that this application	s for (file a	a separate application fo	or each return)			0 4
Application		Return	Application				Return
Is For		Code	Is For				Code
	Form 990-EZ	01	Form 990-T (corporat	on)			07
Form 990-BL		02	Form 1041-A				08
Form 4720 (03	Form 4720 (other tha	n individual)			09
Form 990-PF	·	04	Form 5227				10
	(sec. 401(a) or 408(a) trust)	05	Form 6069	· · · · · · · · · · · · · · · · · · ·			11
	(trust other than above)	06	Form 8870				12
The books	s are in the care of ▶TIMOTHY J. O'DON	OVAN, 4	245 NORTH OAK PC	INTE_COURT, NE_G	RAN	D RA	PIDS, MI
	No. ▶ 616 361-1448		FAX No. ▶				
If the orga	anization does not have an office or place of t	business ir	the United States, chec	ck this box			▶ 🔲
 If this is for 	or a Group Return, enter the organization's for	ur digit Gro	oup Exemption Number (GEN)		. If the	IS IS
for the whole	e group, check this box \dots $lacksquare$ $lacksquare$ $lacksquare$. If	it is for pa	art of the group, check t	his box ▶ [a	and atta	ach
a list with the	names and EINs of all members the extensi	on is for.					
1 I reque	st an automatic 3-month (6 months for a cor	poration re	equired to file Form 990	I-T) extension of time			
until	08/15_, 20_15_, to file the	exempt org	ganization return for the	organization named at	oove.	The ex	xtension is
for the	organization's return for.						
	calendar year 20 14 or						
▶ ∐	tax year beginning	, 20_	, and ending		20_	·	
2 If the ta	ax year entered in line 1 is for less than 12 m	onths chec	ck reason: Initial re	eturn	n		
	hange in accounting period			rmarreturi	•		
	application is for Form 990-BL, 990-PF, 99	D-T 4720	or 6069 enter the	tentative tax less any			
	indable credits See instructions	. i, 4120	, c. 0000, cilici ilic	tomative tax, ross any	3a \$	ŧ	5 225
	application is for Form 990-PF, 990-T,	4720 or	6069 enter any re	fundable credits and	34 3	<u>, </u>	5,235.
	ted tax payments made. Include any prior yea		=		3ь \$	ŧ	^
	e due. Subtract line 3b from line 3a. Include	<u> </u>			30 3	<u> </u>	0
	onic Federal Tax Payment System) See instru			quada, ay donig Li ii o	3c \$	ŧ	5 225
	are going to make an electronic funds withdrawal		it) with this Form 8869 or	ee Form 8453-FO and Form			5,235.
instructions	, are going to make an electronic fullus withdrawal	/anect den	, una i onni occo, St	O I OITH OHOU-LO AND FORM	. 00/3	J-LO 10	- payment
	ct and Paperwork Reduction Act Notice, see instr	uctions.		_	Form	8868	(Rev 1-2014)

O'DONOVAN FAMILY FOUNDATION 38-3704443
FORM 990-PF - PART IV
CAPITAL GAINS AND LOSSES FOR TAX ON INVESTMENT INCOME

Kind of F	Property	Description				01	Date acquired	Date sold
Gross sale price less penses of sale	Depreciation allowed/ allowable	Cost or other basis	FMV as of 12/31/69	Adj basis as of 12/31/69	Excess of FMV over adj basis		Gain or (loss)	
		AGRIUM INC				P	06/02/2014	10/29/20
95,530.		PROPERTY TY 90,168.	YPE: SECURIT	PIES			5,362.	
		CONAGRA FOO				P	09/12/2013	08/22/20
96,208.		PROPERTY TY 95,398.	PE: SECURIT	'IES			810.	
		DIGITAL RLT				Р	VAR	04/02/20
156,535.		PROPERTY TY 181,672.	PE: SECURIT	'IES			-25,137.	
		GLAXOSMITHE				Р	04/28/2014	06/02/20
107,182.		PROPERTY TY 111,999.	PE: SECURIT	'IES			-4,817.	
		PIMCO INCOM				Р	VAR	02/18/20
147,512.		PROPERTY TY 134,092.	PE: SECURIT	'IES			13,420.	
		STONE HBR E				Р	VAR	08/22/20
77,523.		73,781.	PE: SECURIT	'IES			3,742.	
		ALPS ETF TF				Р	03/04/2013	04/28/20
89,841.		80,666.	(PE: SECURIT	IES			9,175.	
			NS DISTRIBU			Р		
81,751.		PROPERTY TY	PE: SECURIT	IES			81,751.	
ral Gain(L	oss)				• • • • • •		84,306.	