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# Form 990-PF

### **Return of Private Foundation**

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

OMB No 1545-0052

Department of the Treasury Internal Revenue Service

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

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

For	calen	dar year 2014 or tax year beginning DEC	1, 2014	, and ending	DEC 31, 2014	
Nai	ne of	foundation			A Employer identification	number
H	AR'	VEY'S FOUNDATION	47-2401287			
Nur	nbera	nd street (or PO box number if mail is not delivered to street	B Telephone number			
_1	21	4 RANDOLPH ST			231-941-12	14
City	or to	own, state or province, country, and ZIP or foreign p	ostal code		C if exemption application is pe	ending, check here
T	RA'	VERSE CITY, MI 49684				
G	heck	all that apply: X Initial return	Initial return of a fo	ormer public charity	D 1. Foreign organizations	, check here
		Final return	Amended return			
		Address change	Name change		Foreign organizations me check here and attach co	eting the 85% test,
H (	heck	type of organization: X Section 501(c)(3) ex			E If private foundation state	•
	_		Other taxable private founda	ation	under section 507(b)(1)	
I Fa	_	arket value of all assets at end of year J Accounts		Accrual	F If the foundation is in a	
		·   —	her (specify)		under section 507(b)(1)	
	\$	100,000. (Part I, colu.	mn (d) must be on cash l	basis.)		(o), chock hord . P
	_	Analysis of Revenue and Expenses	(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 chantable purposes (cash basis only)
	1	Contributions, gifts, grants, etc., received	100,000.		N/A	~
	2	Check if the foundation is not required to attach Sch B	100,000.		14/22	
	,	Interest on savings and temporary		• • • • • • • • • • • • • • • • • • • •		
	4	Dividends and interest from securities		<del></del>		
	5.	Gross rents		<del></del>		1,
		Net rental income or (loss)	1 1 1 1 1 1 1 1 1 1 1	<del></del>	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	
	_	· · · <del></del>				, -1
<u>n</u>	l ba	Net gain or (loss) from sale of assets not on line 10 Gross sales price for all				
Revenue	٦, ا	assets on line 6a	: * *	0		
Be.	7	Capital gain net income (from Part IV, line 2)			•	<u>'</u>
	8	Net short-term capital gain	-			
	9	Income modifications	,	•		
		and allowances			<del></del>	
		Less: Cost of goods sold .	<u> </u>		<del> </del>	
		Gross profit or (loss)				
	11	Other income	100,000.	0		
	12	Total. Add lines 1 through 11	0.	0		0.
	13	Compensation of officers, directors, trustees, etc	ļ	<u> </u>	•	1
	14	Other employee salaries and wages				1
S	15	Pension plans, employee benefits		<u> </u>		7
JS.		Legal fees		1 7		
Expense		Accounting fees Other professional fees		- 0	NAR SE PERS	· · · · · · · · · · · · · · · · · · ·
	1	· · · · · · · · · · · · · · · · · · ·		<u> </u>		
Administrative	17				\$ 200	•
stra	18	Taxes		<u> </u>	-	
ζį	19	Depreciation and depletion				<del> </del>
É	20	Occupancy	<u> </u>		<del></del>	<del> </del>
Z Z	21	Travel, conferences, and meetings		<del> </del>	<del>                                     </del>	
and	22	Printing and publications				
Operating	23	Other expenses	<u> </u>		<del></del>	
i ta	24	Total operating and administrative				
Z jado		expenses. Add lines 13 through 23	0.	0	•	0.
7	25	Contributions, gifts, grants paid	0.		•	0.
5	26	Total expenses and disbursements.	1	_		_
<u> </u>		Add lines 24 and 25	0.	0	•	0.
	27	Subtract line 26 from line 12:				
		Excess of revenue over expenses and disbursements	100,000.		ļ	
		Net investment income (if negative, enter -0-)		0		
	C	Adjusted net income (if negative, enter -0-)	1	1	N/A	1

For	m 99	0-PF (2014) HARVEY'S FOUNDATION		· 47-	2401287 Page 2
Г	art	Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only	Beginning of year	End of	
			(a) Book Value	(b) Book Value	(c) Fair Market Value
		Cash - non-interest-bearing			
	2	Savings and temporary cash investments		100,000.	100,000.
	3	Accounts receivable ►			
		Less; allowance for doubtful accounts ▶			<u> </u>
	4	Pledges receivable ►			
		Less: allowance for doubtful accounts ▶			
	5	Grants receivable			
	6	Receivables due from officers, directors, trustees, and other			
		disqualified persons			
	7	Other notes and loans receivable			
		Less: allowance for doubtful accounts ▶			
ş	8	Inventories for sale or use			
Assets	9	Prepaid expenses and deferred charges			
⋖	10a	Investments - U.S. and state government obligations			
	Ь	Investments - corporate stock			
	C	Investments - corporate bonds			
	11	Investments - land, buildings, and equipment basis	, , , , , ,	,	
		Less accumulated depreciation .			
	12	Investments - mortgage loans			
	13	Investments - other			
	14	Land, buildings, and equipment: basis ▶	_	-	
		Less accumulated depreciation			
	15	Other assets (describe			
	16	Total assets (to be completed by all filers - see the			
	_	instructions. Also, see page 1, item I)	0.	100,000.	100,000.
	17	Accounts payable and accrued expenses			,
	18	Grants payable			, -
S	19	Deferred revenue			
Liabilities	20	Loans from officers, directors, trustees, and other disqualified persons			i.
iab	21	Mortgages and other notes payable			•
ب	22	Other liabilities (describe >)			,
					, .
_	23	Total liabilities (add lines 17 through 22)	0.	0.	,
		Foundations that follow SFAS 117, check here			
Ø		and complete lines 24 through 26 and lines 30 and 31.			•
ë	24	Unrestricted		<del> </del>	-
ā	25	Temporarily restricted .			
ä	26	Permanently restricted			
Fund Balance		Foundations that do not follow SFAS 117, check here			
or F		and complete lines 27 through 31.	}	_	
	27	Capital stock, trust principal, or current funds	0.	0.	<u> </u>
Assets	28	Paid-in or capital surplus, or land, bldg., and equipment fund	0.	0.	
ţ	29	Retained earnings, accumulated income, endowment, or other funds	0.	100,000.	1
Net	30	Total net assets or fund balances	0.	100,000.	
_	31	Total liabilities and net assets/fund balances .	0.	100,000.	
P	art	III Analysis of Changes in Net Assets or Fund E	Balances		
=				<del></del>	
1		l net assets or fund balances at beginning of year - Part II, column (a), line	2 30		
	•			<u>  1</u>	0.
				. 2	100,000.
3		r increases not included in line 2 (itemize)		3	0.
4		lines 1, 2, and 3		4	100,000.
5		eases not included in line 2 (itemize)		5_	0.
<u>6</u>	Tota	I net assets or fund balances at end of year (line 4 minus line 5) - Part II, o	column (b), line 30		100,000.
					Form <b>990-PF</b> (2014)

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Add lines 5 and 6

See the Part VI instructions.

Enter qualifying distributions from Part XII, line 4

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

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	t VI   Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or	<u>4948 -</u>	see	instru	ction	<u>s)</u>
1a l	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)					
ы	Domestic foundations that meet the section 4940(e) requirements in Part V, check here 🕒 🔲 and enter 1%	1		_		0.
	of Part I, line 27b	-			-	
C	All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of Part I, line 12, col. (b).					_
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	2				0.
3	Add lines 1 and 2	3_				0.
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	4				0.
5	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-	5				0.
6	Credits/Payments:			·		•
a	2014 estimated tax payments and 2013 overpayment credited to 2014	_			ı	
b	Exempt foreign organizations - tax withheld at source	_		• 1		-
C	Tax paid with application for extension of time to file (Form 8868) 6c 6c	$\dashv$				
đ	Backup withholding erroneously withheld	4		,	•	
	Total credits and payments. Add lines 6a through 6d	7				0.
8	Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached	8				
	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed	. 9				0.
	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid	10				
	Enter the amount of line 10 to be: Credited to 2015 estimated tax	11				
	rt VII-A   Statements Regarding Activities			<del></del>	V	NI.
1a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or interve	ne in			Yes	
	any political campaign?		•	1a		<u>X</u>
	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 publis	hed or		, , ,		٠. ا
	distributed by the foundation in connection with the activities.			1. 4	· _ , ]	`^{^-}
	Did the foundation file Form 1120-POL for this year?			1c		<u>X</u>
	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year:			4		
	\'/ - \' - \' - \ - \ - \ - \ - \ - \ - \ -	•				
	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation			1 2 2		;
	managers. ▶ \$0.					v
	Has the foundation engaged in any activities that have not previously been reported to the IRS?	•		2		<u> </u>
	If "Yes," attach a detailed description of the activities.			4-3	٠	~
	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation	1, 01			-	v
	bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes			3		$\frac{\mathbf{x}}{\mathbf{x}}$
	Did the foundation have unrelated business gross income of \$1,000 or more during the year?		I/A	4a		
	If "Yes," has it filed a tax return on Form 990-T for this year?	. 1	1/ 🕰	5		x
	Was there a liquidation, termination, dissolution, or substantial contraction during the year?  If "Yes," attach the statement required by General Instruction T.			-		
	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either:			ĺ		
	By language in the governing instrument, or					
	<ul> <li>By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the st</li> </ul>	tate law				
	remain in the governing instrument?	idio idii		6	X	
	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	χV		7	X	
•	big the foundation have at least \$5,000 in assets at any time during the year: " Tes, complete rat in, con. [0], and rate	~~				
Q٠	Enter the states to which the foundation reports or with which it is registered (see instructions)			1		
Ud	MI					
h	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate)					
ע	of each state as required by General Instruction G? If "No," attach explanation			86	X	
Q	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for 0	calendar	•			
•	year 2014 or the taxable year beginning in 2014 (see instructions for Part XIV)? If "Yes," complete Part XIV			9		x
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses	STM	r_1	10	х	
<del></del>				rm <b>990</b>		2014)

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Total. Add lines 1 through 3

	art X	<del>4</del> / 4	101207 .ugov
	Minimum Investment Return (All domestic foundations must complete this part. Foreign four	ndations, se	e instructions.)
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes:		
а	Average monthly fair market value of securities	1a	0.
b	Average of monthly cash balances	1b	100,000.
C	Fair market value of all other assets	10	· · · · · · · · · · · · · · · · · · ·
d	Total (add lines 1a, b, and c)	1d	100,000.
е	Reduction claimed for blockage or other factors reported on lines 1a and		
	1c (attach detailed explanation)	]	
2	Acquisition indebtedness applicable to line 1 assets	2	0.
3	Subtract line 2 from line 1d	3	100,000.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions)	4	1,500.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	98,500.
<u>6</u> _	Minimum investment return Enter 5% of line 5 ADJUSTED FOR SHORT TAX PERIOD	6	418.
P	art XI Distributable Amount (see instructions) (Section 4942(1)(3) and (1)(5) private operating foundations ar	nd certain	
	foreign organizations check here   and do not complete this part.)		
1	Minimum investment return from Part X, line 6	1	418.
2a	Tax on investment income for 2014 from Part VI, line 5	] ' - [	
b	Income tax for 2014. (This does not include the tax from Part VI.)		
C	Add lines 2a and 2b	20	0.
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	418.
4	Recoveries of amounts treated as qualifying distributions	4	0.
5	Add lines 3 and 4	5	418.
6	Deduction from distributable amount (see instructions)	6	0.
7	Distributable amount as adjusted. Subtract line 6 from fine 5. Enter here and on Part XIII, line 1	7	418.
Þ	art XII. Qualifying Distributions (see instructions)		
_	——————————————————————————————————————		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:		
a	Expenses, contributions, gifts, etc total from Part I, column (d), line 26	1a	0.
b	Program-related investments - total from Part IX-B	1b	0.
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes	2	
3	Amounts set aside for specific charitable projects that satisfy the:		
а	Suitability test (prior IRS approval required)	3a	
b	Cash distribution test (attach the required schedule)	3b	
4	Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4	4	0.
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment		
	income. Enter 1% of Part I, line 27b	5	0.
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	0.
	Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation	qualifies for t	
	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,	Оограз	rears prior to 2013	2010	2014
line 7				0.
2 Undistributed income, if any, as of the end of 2014				٠,
a Enter amount for 2013 only			0.	<u>-</u>
b Total for prior years:		0.		,
3 Excess distributions carryover, if any, to 2014:		<u> </u>	<del></del> -	
a From 2009	•		• 1	-
b From 2010	•	-		
c From 2011	-			-
d From 2012		_		
e From 2013			-	
f Total of lines 3a through e	0.	٠.		1
4 Qualifying distributions for 2014 from	<b>.</b>			<del></del>
Part XII, line 4: ► \$ N/A				· ,
a Applied to 2013, but not more than line 2a	,		0.	1 - 54 , <u>-</u>
<b>b</b> Applied to undistributed income of prior				
years (Election required - see instructions)		0.		
c Treated as distributions out of corpus		, ,		; - £
(Election required - see instructions)	0.	3 .		
d Applied to 2014 distributable amount	3164 / 1			0.
e Remaining amount distributed out of corpus	0.			
5 Excess distributions carryover applied to 2014	0.	16.17. 2. 49	- 1	0.
(If an amount appears in column (d), the same amount must be shown in column (a).)	1944 1 7 8			
6 Enter the net total of each column as indicated below:				
8 Corpus Add lines 3f, 4c, and 4e Subtract line 5	0.		17 4	
b Prior years' undistributed income. Subtract			; ^:	
line 4b from line 2b		0.		- ,
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.	Aury,	
d Subtract line 6c from line 6b. Taxable	-			
amount - see instructions		0.		
e Undistributed income for 2013. Subtract line				
4a from line 2a. Taxable amount - see instr.	•		0.	
f Undistributed income for 2014. Subtract lines 4d and 5 from line 1. This amount must				
be distributed in 2015				0.
7 Amounts treated as distributions out of				
corpus to satisfy requirements imposed by				
section 170(b)(1)(F) or 4942(g)(3) (Election				
may be required - see instructions)	0.			
8 Excess distributions carryover from 2009				
not applied on line 5 or line 7	0.			
9 Excess distributions carryover to 2015.				
Subtract lines 7 and 8 from line 6a	0.			
10 Analysis of line 9:				
a Excess from 2010				
b Excess from 2011				
c Excess from 2012				
d Excess from 2013				
e Excess from 2014	<u> </u>	1	<u> </u>	5 000 PF (004.4)

Part XIV Private Operating Fo	S FOUNDATIO		I-A guestion (I)		/-240128/ Page 10
1 a If the foundation has received a ruling of	· · · · · · · · · · · · · · · · · · ·		1-7, question a)	N/A	
· · · · · · · · · · · · · · · · · · ·		, , ,	. 1		
foundation, and the ruling is effective for	· ·		▶ ∟	4040/0/2) or	4942(j)(5)
b Check box to indicate whether the found	Tax year	I louituation described	Prior 3 years	4942(j)(3) or	4942()(5)
2 a Enter the lesser of the adjusted net	(a) 2014	(b) 2013	(c) 2012	(d) 2011	(e) Total
income from Part I or the minimum	(4) 2014	(8) 2010	(0) 2012	(0) 2011	(0) 10(2)
investment return from Part X for					
each year listed	<del></del>		-		
b 85% of line 2a			<del>-</del>	·····	
c Qualifying distributions from Part XII,					
line 4 for each year listed			ļ		
d Amounts included in line 2c not			}		
used directly for active conduct of		]			
exempt activities					
e Qualifying distributions made directly					
for active conduct of exempt activities.					
Subtract line 2d from line 2c					
3 Complete 3a, b, or c for the alternative test relied upon:				ļ	
a "Assets" alternative test - enter:					
(1) Value of all assets					
(2) Value of assets qualifying					
under section 4942(j)(3)(B)(i)			1		
<b>b</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			Ì		1
512(a)(5)), or royalties)		<del></del>	<del></del>		
(2) Support from general public and 5 or more exempt					
organizations as provided in					
section 4942(j)(3)(B)(iii)					
(3) Largest amount of support from					
an exempt organization			-		
(4) Gross investment income  Part XV   Supplementary Info	rmation (Comple	te this part only	if the founds	tion had \$5 000	or more in accete
at any time during t			ii ule loulida	tion nad \$5,000	or more in assets
				<u></u> .	
1 Information Regarding Foundation	•	than 20/ of the total oor	tributions resembed b	u tha faundation hafar	a the close of any toy
a List any managers of the foundation wh year (but only if they have contributed n			midulions received t	by the loundation before	e trie close of any tax
HARVEY CALCUTT		(-)(-)-			
b List any managers of the foundation wh	a own 109/ or more of th	on stock of a normarching	/or an annually large	notice of the superch	un of a northeadhan an
other entity) of which the foundation ha			(or an equally large	portion of the ownersh	ip of a partnership or
NONE _					
•	O:44 I	Cabalanabia ata E			
2 Information Regarding Contribution					ded en en et et et et et et
Check here ► X If the foundation of the foundation makes gifts, grants, etc.					
<del></del>			<del></del>		o, o, and o.
a The name, address, and telephone num	per or e-mail address of	the person to whom app	lications snovid de a	idoressed:	
					•
1 The farmer is the control of the c			<u> </u>	<del> </del>	<del></del>
<b>b</b> The form in which applications should b	e submitted and informa	ition and materials they s	inoula include:		
c Any submission deadlines:			·		
d Any restrictions or limitations on award	s such as hy geographic	ral areas charitable fields	kinds of metitution	e or other factore:	
a with resolutions of initiations on award:	o, ouch as by yeograpilic	त्वा वाच्वञ, धारवागवगाद गदिविः	, หมอง บา เมรินเชนปก	o, or other factors.	

	(			
3 Grants and Contributions Paid During the Y	ear or Approved for Future I	Payment		
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	status of recipient		
a Paid during the year				
NONE				
110112				
			,	
		1		
		1		
		ļ		
Total			<b>▶</b> 3a	0.
b Approved for future payment		1		
.,				
NONE				
	-			
	,			
	<del>-</del>	<del> </del>	<del> </del>	
	<u> </u>	L	<b>▶</b> 3b	-
Total			<b>▶</b> 3b	0

	•				
Part XVI-A	Analy	sis of	Income-	Producing	<b>Activities</b>

	(a)	(P)	(C) Exclu-	(4)	(e) Related or exempt
Program service revenue:	(a) Business code	(b) Amount	Exclu- sion code	(d) Amount	function income
a					
b					
·					
·		<del> </del>			•
Fees and contracts from government agencies					
Membership dues and assessments nterest on savings and temporary cash			<del>-   -   -   -   -   -   -   -   -   -  </del>		
nvestments			14		
Dividends and interest from securities		<del>.</del>	1-1		
Net rental income or (loss) from real estate:					· · · · · · · · · · · · · · · · · · ·
a Debt-financed property					· · · · · · · · · · · · · · · · · · ·
Not debt-financed property					
Net rental income or (loss) from personal		*		<del></del>	
property					1
Other investment income					
Gain or (loss) from sales of assets other				•	
than inventory					
Net income or (loss) from special events					
Gross profit or (loss) from sales of inventory					
Other revenue:					
·					
)					
c					
d	<u> </u>				<u></u>
e				<del> </del>	
			0.1	0.	<b>,</b>
			0.1		
Tetal Add line 10 columns (b) (d) and (e)		nplishment of	Exempt F	13 _	
Total. Add line 12, columns (b), (d), and (e) e worksheet in line 13 instructions to verify calculations.)  art XVI-B  Relationship of Activities t	o the According	nplishment of	Exempt F	13 _	
Total. Add line 12, columns (b), (d), and (e) e worksheet in line 13 instructions to verify calculations.)  art XVI-B Relationship of Activities to the No. Explain below how each activity for which inco	o the According	nplishment of	Exempt F	13 _	
Total. Add line 12, columns (b), (d), and (e) e worksheet in line 13 instructions to verify calculations.)  art XVI-B Relationship of Activities t ne No. Explain below how each activity for which inco	o the According	nplishment of	Exempt F	13 _	

Form 990-PF (	2014) HARVE	Y'S FOUND	ATION		,	47-24	01287	Page 13
Part XVII	Information Re Exempt Organ		sfers To a	nd Transactions a	nd Relations	hips With Nonch	aritable	
1 Did the o	rganization directly or indir	rectly engage in any c	of the following	with any other organizatio	n described in sect	ion 501(c) of		res No
				7, relating to political organ			1 [	1
	from the reporting founda							1
(1) Cash	• •		, ,				1a(1)	x
(2) Othe			•••				1a(2)	X
	nsactions;		•				1	<del>-  </del>
	s of assets to a noncharita	hle evemnt organizati	100				16(1)	x
• •	hases of assets from a no						1b(2)	X
• •			i yanızanıyı					X
	al of facilities, equipment,					• • •	1b(3)	X
• •	bursement arrangements						1b(4)	
	is or loan guarantees						1b(5)	<u> X</u>
	ormance of services or me				•		1b(6)	<u> X</u>
-	of facilities, equipment, ma	•					1c	X
			-	dule. Column (b) should alv				ts,
or servici	es given by the reporting fo	oundation. If the four	ndation receive	d less than fair market valu	re in any transactio	n or sharing arrangemen	t, show in	
column (	d) the value of the goods,	other assets, or servi	ices received.					
(a) Line no	(b) Amount involved	(c) Name of	noncharitable	exempt organization	(d) Descriptio	n of transfers, transactions, a	nd sharing arra	ingements
			N/A					
		1				•		
						· · ·		
	·							
			<del></del>		<del>- </del>			
			<del></del>	<del> </del>				
	·				_			
				······································				
2a Is the for	indation directly or indirec	tly affiliated with, or r	related to, one	or more tax-exempt organi	zations described		-	
	501(c) of the Code (othe	-	•	, ,			Yes	X No
	complete the following sch		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		• • • • • •			
<u> </u>	(a) Name of org			(b) Type of organization	_	(c) Description of relation	nshin	
	N/A	gamzanon		(b) Typo or organization		(v) boodinphon or roland		
	N/A							
	·	· · · · <del>- ·</del>		· · · · ·	<del> </del>	<u>-</u>		
					ļ			
					<u> </u>			
	r penalties of perjury, I declare	that I have examined the	is return, încludir	ig accompanying schedules and in taxpayer) is based on all infort	i statements, and to th	e best of my knowledge	May the IRS d	
Sign	Deliar, it is tide, correct, and co	regiete Declaration of pr	eparer (other tha	n taxpayer) is based on all infor	nation of writer prepar	er has any knowledge	return with the shown below	preparer (see instr)?
Here	- 11/2 L C	alent		13/21/15	PRESI	DENT	X Yes	☐ No
Sig	nature of officer or trustee	8		Date	Trtle			
	Print/Type preparer's n	ame	Preparer's s	ignature	Date	Check If PT	IN	
	LOIS ROPER			<del>-</del>	h.	self- employed		
Paid			Lois ro	ses Formation	3/21/15		00184	768
Preparer	FORRESTER,		DUV /W	- (-1000)W	1 . –			
-	Firm's name DGN	1, PFC				Firm's EIN ► 20-	23496	/ U
Use Only								<del></del>
	Firm's address ▶ P .							
	TF	RAVERSE CI	TY, MI	49685-0947		Phone no. 231-	<u>946-1</u>	
	<u></u>						Form <b>990</b>	-PF (2014

# Schedule B

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

Department of the Treasury Internal Revenue Service

## **Schedule of Contributors**

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

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

2014

Name of the organization

**Employer identification number** 

H	HARVEY'S FOUNDATION	47-2401287				
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 found	ndation				
	527 political organization					
Form 990-PF	X 501(c)(3) exempt private foundation					
	4947(a)(1) nonexempt charitable trust treated as a private foundation	on				
	501(c)(3) taxable private foundation					
	n is covered by the <b>General Rule</b> or a <b>Special Rule.</b> (c)(7), (8), or (10) organization can check boxes for both the General Rule and	J a Special Rule. See instructions.				
General Rule						
<del>-</del>	ion filing Form 990, 990-EZ, or 990-PF that received, during the year, contribution one contributor. Complete Parts I and II. See instructions for determining					
Special Rules						
sections 509(a)(	non described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1 1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II utor, during the year, total contributions of the greater of (1) \$5,000 or (2) 2% EZ, line 1. Complete Parts I and II.	l, line 13, 16a, or 16b, and that received from				
year, total contr	For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I, II, and III.					
year, contributio is checked, ente purpose. Do not	For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions exclusively for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., purpose. Do not complete any of the parts unless the General Rule applies to this organization because it received nonexclusively religious, charitable, etc., contributions totaling \$5,000 or more during the year   \$\bigsim \frac{1}{2}   \frac{1}{2}   \frac{1}{2}					
but it must answer "No"	n that is not covered by the General Rule and/or the Special Rules does not f on Part IV, line 2, of its Form 990; or check the box on line H of its Form 990- eet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).					

LHA 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

Employer identification number

HARVE	Y'S FOUNDATION		-2401287
Part I	Contributors (see instructions). Use duplicate copies of Part I if additional	space is needed.	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	HARVEY CALCUTT  1214 RANDOLPH ST  TRAVERSE CITY, MI 49684	\$ <u>100,000</u> .	Person X Payroll  Noncash  (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
· 		\$	Person Payroll Oncash 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 If 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.)

Employer identification number

## HARVEY'S FOUNDATION

47-2401287

art II	Noncash Property (see instructions). Use duplicate copies of Pa	art 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
-			
-		\$	
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
-			
-		<b>\$</b>	
(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
_   .		\$	

1

FORM 990-PF LIST OF SUBSTANTIAL CONTRIBUTORS PART VII-A, LINE 10

STATEMENT

NAME OF CONTRIBUTOR

ADDRESS

HARVEY CALCUTT

1214 RANDOLPH ST

TRAVERSE CITY, MI 49684