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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

F	or cal	endar year 2014 or tax year beginning			, 2014,	, and ending	1		, 20
	Name	of foundation					A	Employer identific	cation number
	SIN	GER, JOHN STEPHEN FOUNDATION						51-	0203748
	Numb	er and street (or PO box number if mail is not delivered	to street	address)		Room/suite	В	Telephone numbe	r (see instructions)
		. BOX 75000					$\bot$	87	7-405-1091
	City or	town, state or province, country, and ZIP or foreign po-	ital code						
V	l 						C	If exemption applicate pending, check here	
		ROIT, MI 48275-7874	<del></del>	<del>1 </del>			_		<del></del>
٩	Che	ck all that apply: Initial return	-	Initial return	•	ublic charity	/ р	1 Foreign organization	ons, check here • • •
	ā )	Final return	<u> </u>	Amended ret				2 Foreign organization 85% test, check he	
=	<u> </u>	X Address change		Name change	-		_	computation • •	
- *	لسؤنت	ck type of organization X Section 501(					E	If private foundation :	status was terminated
		ection 4947(a)(1) nonexempt charitable trust		ther taxable pri			-	under section 507(b)	(1)(A), check here . D
	<u>س</u> ے زیس	·	_	method: X Ca	ash Acc	rual	F		a 60-month termination
3	GENO S 6P		her (sp				-	under section 507(b)	(1)(B), check here .
-	17.71	1207000	oiumn (	d) must be on ca	sn basis j				(d) Disbursements
Li	GIAN	Analysis of Revenue and Expenses (The total of amounts in columns (b), (c), and (d)		Revenue and	(b) Net inve	estment	(c)	Adjusted net	for charitable
	3	may not necessarily equal the amounts in column (a) (see instructions) )	ex	penses per books	incom	ne		ıncome	purposes (cash basis only)
-					<del></del>				(casii uasis Ulliy)
	لَلُوْ	Contributions, gifts, grants, etc., received (attach schedule).  Check if the foundation is not required to							
	32	attach Sch B							
		Interest on savings and temporary cash investments.  Dividends and interest from securities		9,801.		9,801.			
	<u>D</u>	Gross rents		2,001.	<del></del>	J,001.			
	"."	Net rental income or (loss)							
ø	1	Net gain or (loss) from sale of assets not on line 10		98,266.					
2		Gross sales price for all							
Revenue	7	Capital gain net income (from Rant IV) (1922).			9	8,266.	· · · - · ·	-	
č	8	Net short-term capital gain.							
	9	Income modifications Gross sales less returns	1						
	10a	and allowances		·					
	ь	Less Cost of goods sold.		,					
	C	Gross profit or (loss) (attack schedulet).							
	11	Other income (attach schedule)	·						
_	12	Total Add lines through 11 Co		108,067.	10	8,067.			· · · · · · · · · · · · · · · · · · ·
s	13	Compensation of officers, directors, trustees, etc		6,207.		5,586.			621
se	14	Other employee salaries and wages				NONE		NONE	
ĕ	15	Pension plans, employee benefits				NONE		NONE	
X	16a	Legal fees (attach schedule)		0.00		400			400
/e	Ь	Accounting fees (attach schedule)		960. 489.		480.			480
aţi	1.7	Other professional fees (attach schedule)		409.		489.			
str	1/	Toyon (attach pakadula) (and instructions)		778.					
Ë	10	Taxes (attach schedule) (see instructions)  Depreciation (attach schedule) and depletion.		//0.					
퉏	20	Occupancy			-				
Š	14 15 16a b c 17 18 19 20 21 22 23 24	Travel, conferences, and meetings				NONE		NONE	
and	22	Printing and publications			<del></del>	NONE		NONE	
5	23	Other expenses (attach schedule)						1,01112	
랿	24	Total operating and administrative expenses.							<del></del>
era		Add lines 13 through 23		8,434.		6,555.		NONE	1,101
o	25	Contributions, gifts, grants paid		18,699.					18,699
	26	Total expenses and disbursements Add lines 24 and 25		27,133.		6,555.		NONE	19,800
	27	Subtract line 26 from line 12							
	а	Excess of revenue over expenses and disbursements		80,934.					
	b	Net investment income (if negative, enter -0-)			10	1,512.			
_	C	Adjusted net income (if negative, enter -0-)			<del></del>				

Þ	art II	Rajanca Sheets	Attached schedules and amounts in the description column should be for end-of-year	Beginning of year	End o	f year
	311.5		amounts only (See instructions )	(a) Book Value	(b) Book Value	(c) Fair Market Value
	1 `	Cash - non-interest-beari	ng			
	2	Savings and temporary of	cash investments	20,891.	13,661.	13,661
	3	Accounts receivable				
			otful accounts 🕨			
		Less allowance for doub	otful accounts ►			
			officers, directors, trustees, and other			
			ach schedule) (see instructions)			
	7		eceivable (attach schedule)			
			otful accounts  NONE			
s			ie			
Assets						
As			government obligations (attach schedule).			
			stock (attach schedule)			
			bonds (attach schedule)			<del> </del>
	11	Investments - land, building				
	12	(attach schedule)	loans			
	13 14	Investments - other (atta	ch schedule)	335,112.	422,224.	410,197
ł		Less accumulated deprecia	tion			
	15	(attach schedule) Other assets (describe	<b>&gt;</b>			
			completed by all filers - see the			
		·	age 1, item I)	356 003	435 885	423,858
					455,005.	125,050
S						
Liabilities			rs, trustees, and other disqualified persons			
Εij			tes payable (attach schedule)			
Ë			e >)			
	22	Other habilities (describe	' ~/  -			
	23	Total liabilities (add line	s 17 through 22)		NONE	
_			ow SFAS 117, check here . ▶		NONE	
ces		and complete lines 2	4 through 26 and lines 30 and 31.			
듧	24					
Net Assets or Fund Balan	25					
핗	26					
ᆁ		Foundations that do	not follow SFAS 117, ▶ X			
5		-	plete lines 27 through 31.	256 002	425 005	
2	27		ipal, or current funds	356,003.	435,885.	
SS	28		land, bldg, and equipment fund			
۲	29	• •	ated income, endowment, or other funds	256 002	425 005	
2	30		balances (see instructions)	356,003.	435,885.	
	31		net assets/fund balances (see	25.5		
				356,003.	435,885.	
			ges in Net Assets or Fund Balan			
1			palances at beginning of year - Part II		- 1	0=4 -4-
_			on prior year's return)			356,003.
2	Ente	r amount from Part I,	line 27a		2	80,934.
3	Othe	r increases not includ	led in line 2 (itemize)		3	***
4	Add	lines 1, 2, and 3	line 2 (itemize) ► SEE STAT	<u></u> . <u>.</u>		436,937.
5	Decr	eases not included in	line 2 (itemize) ► SEE STAT	EMENT 2	5	1,052.
6	Tota	I net assets or fund ba	llances at end of year (line 4 minus lin	e 5) - Part II, column (b)	, line 30   <b>6</b>	435,885.

Pa		and Losses for Tax on Invedodes and Losses for Invedodes for Invedodes and Losses for Invedodes and Losses for Invedodes for Inv		(b) How	(c) Date	(d) Date sold
	2-story b	acquired P - Purchase D - Donation	acquired	(mo , day, yr )		
1a	PUBLICLY TRADED	SECURITIES				
b	<del></del>		· · · · · · · · · · · · · · · · · · ·			
<u>с</u> d				-		
<u>а</u> е	•			<del> </del>		
	(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	
a	665,144.		566,878.			98,266.
<u>b</u>	;					
<u> </u>						
<u>d</u>			·	<del></del>		
_е	Complete only for assets s	l showing gain in column (h) and owned	by the foundation on 12/31/69		C (C-1 (h)	
	(i) F M V as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col (i) over col (j), if any		Gains (Col. (h) ga (k), but not less to Losses (from co	than -0-) <b>or</b>
а						98,266.
b						
C				<u></u>		
<u>d</u>				ļ		
<u>е</u> 2	Capital gain net income o		gain, also enter in Part I, line 7	2		00 266
_		l ii	(loss), enter -0- in Part I, line 7	2		98,266.
3		in or (loss) as defined in sections 1	structions). If (loss), enter -0- in $oldsymbol{1}$			
				2		
Pa			luced Tax on Net Investment I	ncome		
Wa		the section 4942 tax on the distril	butable amount of any year in the b	ase perio	d?	Yes X No
		not qualify under section 4940(e).	r; see the instructions before makin	a any ent	rige	
<u>'</u>	(a)	(b)	(c)	g any ent	(d)	
Ca	Base period years lendar year (or tax year beginning in)	A da ad aa l. 6 a d. a a b a	Net value of noncharitable-use assets		Distribution ra (col (b) divided by	
	2013	19,952.	416,392.		· · · · · · · ·	0.047916
	2012					
	2011					
	2010			-		
	2009					
2	Total of line 1 column (c	4)		2		0.047916
3			e the total on line 2 by 5, or by the			0.047510
J	_		s than 5 years	3		0.047916
4	Enter the net value of no	ncharitable-use assets for 2014 fro	om Part X, line 5	4		420,101.
5	Multiply line 4 by line 3			5		20,130.
6	Enter 1% of net investme	ent income (1% of Part I, line 27b)		6		1,015.
7	Add lines 5 and 6			7		21,145.
8			in Part VI, line 1b, and complete	8 that part	using a 1% ta	19,800. x rate See the

By state legislation that effectively amends the governing instrument so that no mandatory directions that

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

Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for calendar year 2014 or the taxable year beginning in 2014 (see instructions for Part XIV)? If "Yes,"

Enter the states to which the foundation reports or with which it is registered (see instructions)

10 X Form 990-PF (2014)

X

X

X

X

7

8b

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FOITH	990-FF (2014) 51-0203748		,	age 🔾
Par	t VII-A Statements Regarding Activities (continued)			
11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the			
	meaning of section 512(b)(13)? If "Yes," attach schedule (see instructions)	11		Х
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified			
	person had advisory privileges? If "Yes," attach statement (see instructions)	12		X
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	X	
	Website address   N/A			
14	The books are in care of ► COMERICA BANK  Located at ► 101 NORTH MAIN STREET, ANN ARBOR, MI  ZIP+4 ► 48101	-109	1	
	Located at ► 101 NORTH MAIN STREET, ANN ARBOR, MI ZIP+4 ► 48101			
	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	<u> </u>	X
	See the instructions for exceptions and filing requirements for FinCEN Form 114, (formerly TD F 90-22 1) If			
_	"Yes," enter the name of the foreign country			
Par	t VII-B Statements Regarding Activities for Which Form 4720 May Be Required			
	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.		Yes	No
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?			
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? Yes X No			
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?			
	(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)			
Ю	If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations			
	section 53 4941(d)-3 or in a current notice regarding disaster assistance (see instructions)?	<u>1b</u>		
	Organizations relying on a current notice regarding disaster assistance check here			
٠	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that	1.		Х
2	were not corrected before the first day of the tax year beginning in 2014?	1c		
_	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 ▶,			
b	Are there any years listed in 2a for which the foundation is <b>not</b> applying the provisions of section 4942(a)(2)			
	(relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to			
	all years listed, answer "No" and attach statement - see instructions )	2b		Х
C	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here			
	<b>&gt;</b>		ľ	
3a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise			
	at any time during the year?			
ь	If "Yes," did it have excess business holdings in 2014 as a result of (1) any purchase by the foundation or			
	disqualified persons after May 26, 1969, (2) the lapse of the 5-year period (or longer period approved by the		.	
	Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest; or (3) the lapse of			
	the 10-, 15-, or 20-year first phase holding period? (Use Schedule C, Form 4720, to determine if the			
	foundation had excess business holdings in 2014.)	3b	_	
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a		X
	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its			
	charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2014?	4b	}	Х

"NONE."

(a) Name and address of each employee paid more than \$50,000

(b) Title, and average hours per week devoted to position

NONE

NONE Form **990-PF** (2014)

Part VIII	Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Emploand Contractors (continued)	yees,
3 Five h	ighest-paid independent contractors for professional services (see instructions). If none, enter "NON	E."
	(a) Name and address of each person paid more than \$50,000 (b) Type of service	(c) Compensation
NONE		NONE
Total mumb		NONE
	er of others receiving over \$50,000 for professional services	NONE
Part IX-A	Summary of Direct Charitable Activities	
	ndation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of is and other beneficiaries served, conferences convened, research papers produced, etc.	Expenses
1 NONE		<del></del>
.555577		
2		· · · · · · · · · · · · · · · · · · ·
3		
4		
		<u> </u>
Part IX-B	Summary of Program-Related Investments (see instructions)	
	e two largest program-related investments made by the foundation during the tax year on lines 1 and 2	Amount
1 NONE_		
2		
All other pro	ogram-related investments. See instructions	
3NONE		
Total Add I	ines 1 through 3	

Form **990-PF** (2014)

Part	Minimum Investment Return (All domestic foundations must complete this part. Foreign see instructions.)	gn foundation	ons,
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	412,802.
b	Average of monthly cash balances	1b	13,696.
C	Fair market value of all other assets (see instructions)	1c	NONE
d	Total (add lines 1a, b, and c)	1d	426,498.
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	NONE
3	Subtract line 2 from line 1d	3	426,498.
4	Cash deemed held for charitable activities Enter 1 1/2% of line 3 (for greater amount, see		
	instructions)	4	6,397.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4.	5	420,101.
6	Minimum investment return Enter 5% of line 5	6	21,005.
Part	Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating found and certain foreign organizations check here ▶ and do not complete this part)	dations	
1	Minimum investment return from Part X, line 6	1	21,005.
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.) . 2b		
C	Add lines 2a and 2b	2c	2,030.
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	18,975.
4	Recoveries of amounts treated as qualifying distributions	4	NONE
5	Add lines 3 and 4	5	18,975.
6	Deduction from distributable amount (see instructions)	6	NONE
7	Distributable amount as adjusted Subtract line 6 from line 5 Enter here and on Part XIII,		
	line 1	7	18,975.
Part	Qualifying Distributions (see instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes		
а	Expenses, contributions, gifts, etc total from Part I, column (d), line 26	1a	19,800.
b	Program-related investments - total from Part IX-B	1b	
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc.,		
	purposes	2	NONE
3	Amounts set aside for specific charitable projects that satisfy the:		
а	Suitability test (prior IRS approval required)	3a	NONE
b	Cash distribution test (attach the required schedule)	3b	NONE
4	Qualifying distributions Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4	4	19,800.
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 (see instructions)	5	N/A
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	19,800.
	Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when can qualifies for the section 4940(e) reduction of tax in those years.	alculating wh	

Form 990-PF (2014)

Form 990-PF (2014)

Page 9

Pa	rt XIII Undistributed Income (see instru	ictions)			
1	Distributable amount for 2014 from Part XI,	(a) Corpus	(b) Years prior to 2013	(c) 2013	( <b>d</b> ) 2014
	line 7				18,975.
2	Undistributed income, if any, as of the end of 2014				
а	Enter amount for 2013 only			19,700.	
	Total for prior years 20,20,20		NONE		·
3	Excess distributions carryover, if any, to 2014				
а	From 2009 NONE				
b	From 2010 NONE				
c	From 2011 NONE				
d	37037				
	From 2013	İ			
	Total of lines 3a through e	иоив			
	Qualifying distributions for 2014 from Part XII,				
	line 4 ▶ \$19,800.			10 500	
а	Applied to 2013, but not more than line 2a			19,700.	
b	Applied to undistributed income of prior years (Election required - see instructions)		NONE		
С	Treated as distributions out of corpus (Election				
	required - see instructions)	NONE			
d	Applied to 2014 distributable amount				100.
е	Remaining amount distributed out of corpus	NONB			
5	Excess distributions carryover applied to 2014	NONE			NONE
6	(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:				
	Corpus Add lines 3f, 4c, and 4e Subtract line 5	NONE			
		1101115			
	Prior years' undistributed income Subtract line 4b from line 2b		NONE		
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		NONE	-	
d	Subtract line 6c from line 6b Taxable				
	amount - see instructions		NONE		
e	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				18,875.
7	Amounts treated as distributions out of corpus				
	to satisfy requirements imposed by section		Ì		
	170(b)(1)(F) or 4942(g)(3) (Election may be				
	required - see instructions)	NONE			
8	Excess distributions carryover from 2009 not applied on line 5 or line 7 (see instructions)	NONE			
9	Excess distributions carryover to 2015.				
	Subtract lines 7 and 8 from line 6a	NONE			
10					
а	Excess from 2010 NONE				
	Excess from 2011 NONE				
	Excess from 2012 NONE				
	Excess from 2013 NONE				
	Excess from 2014 NONE				
					5 000 PE (2014)

Pai	t XIV Private Ope	erating Foundations	(see instructions ar	nd Part VII-A, questio	on 9)	NOT APPLICABLE	
1 a	if the foundation has foundation, and the ruling						
b	Check box to indicate v					i)(3) or 4942(j)(5)	
		Tax year		Prior 3 years			
44	Enter the lesser of the ad- justed net income from Part I or the minimum investment return from Part X for each year listed	(a) 2014	(b) 2013	(c) 2012	(d) 2011	(e) Total	
b	year listed		".		<del></del>	-	
	Qualifying distributions from Part			,	· ·		
	XII, line 4 for each year listed .				· <del>-</del>		
d	Amounts included in line 2c not used directly for active conduct of exempt activities				25. ··		
	Qualifying distributions made directly for active conduct of exempt activities Subtract line 2d from line 2c						
3 a	Complete 3a, b, or c for the alternative test relied upon "Assets" alternative test - enter						
	(1) Value of all assets (2) Value of assets qualifying under section						
b	4942(j)(3)(B)(i)						
	line 6 for each year listed				<del></del>		
С	*Support* alternative test - enter (1) Total support other than gross investment income (interest, dividends, rents, payments on securities						
	loans (section 512(a)(5)), or royalties)						
	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.					<u> </u>	
	at any time	during the year - s	ee instructions.)	only if the founda	ation had \$5,000	or more in assets	
	Information Regarding List any managers of	_		a than 20/ of the total	Laantributiana raasii	and by the foundation	
a	before the close of any	the loundation who is tax year (but only if the	ey have contributed m	nore than \$5,000). (Se	e section 507(d)(2))	red by the loundation	
b	List any managers of ownership of a partner					y large portion of the	
	N/A Information Regarding	<del></del>					
2							
	Check here ▶ ☐ If the foundation only makes contributions to preselected charitable organizations and does not accept unsolicited requests for funds. If the foundation makes gifts, grants, etc. (see instructions) to individuals or organizations under other conditions, complete items 2a, b, c, and d						
	The name, address, and SEE STATEMENT 3	3				dressed	
	The form in which appl SEE ATTACHED ST	TATEMENT FOR LI		n and materials they s	hould include.		
	Any submission deadlin SEE ATTACHED ST	TATEMENT FOR LI					
d	Any restrictions or lii factors:			ohical areas, charitab	le fields, kınds of ı	nstitutions, or other	
JSA	SEE ATTACHED ST	TATEMENT FOR LI	NE 2	<u>.</u>		Form 990-PF (2014)	

Part XV Supplementary Information (	continued)			1090 11
3 Grants and Contributions Paid Durin Recipient Name and address (home or business)	ig the Year or Appr	oved for h	uture Payment	T
Recipient	show any relationship to	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	or substantial contributor	recipient	contribution	
a Paid during the year				
SEE STATEMENT 8				18,699.
				:
			<u> </u>	
Total	<u> </u>	<del></del>	▶ 3a	18,699.
b Approved for future payment				
				•
	İ			
		-		
Total			▶ 3b	
1900	<del></del>	<u> </u>		<u> </u>

Part XVI-A Analysis of Income-Producing Activities

Enter gross amounts unless otherwise indicated		Unrela	ited business income	Excluded by	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)	
_						1000 management	
		<del></del>	<del></del>				
		<del></del>	·			<del>.</del>	
			· <u>·</u>			<del></del>	
f			<del></del>				
	and contracts from government agencies						
	ship dues and assessments			<del></del>		<del></del>	
	n savings and temporary cash investments						
	s and interest from securities			14	9,801.	<del> </del>	
	il income or (loss) from real estate				7,002.1	<del></del>	
	financed property		· · · · · · · · · · · · · · · · · · ·				
	ebt-financed property						
	income or (loss) from personal property						
	vestment income				71		
	ess) from sales of assets other than inventory			18	98,266.	<del></del>	
	me or (loss) from special events				70,200.		
	ofit or (loss) from sales of inventory						
	/enue a		·				
	Torride u				W 1		
		10					
e			········				
	Add columns (b), (d), and (e)		· · · · · · · · · · · · · · · · · · ·		108,067.	<u></u>	
	Id line 12, columns (b), (d), and (e)					108,067.	
(See workshe	eet in line 13 instructions to verify calcu	lations)				100,007.	
Part XVI-			complishment of Exe	empt Purp	oses	<del></del>	
Line No.				<del></del>	**		
	Explain below how each activity						
▼	accomplishment of the foundation	on's exempi	purposes (other than t	y providing	tunds for such purposes	). (See instructions.)	
					<del></del>		
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	****		<del></del>				
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			NOT APPLICABLE	7			
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Form 99	0-PF (20	014)				51	-0203748			Paç	ge 13
Part 2	(VII_	Information F Exempt Orga		ansfers To and Tr	ansactio	ns and F	Relationships \	With None	hari	table	)
ır	n secti			engage in any of the section 501(c)(3) orga	-					Yes	No
	-		g foundation to	a noncharitable exem	pt organiz	ation of:					
			-		_				1a(1)		X
(2	2) Oth	er assets			. <b></b> .				1a(2)		<u>X</u>
		ransactions:									
				mpt organization							X
				ble exempt organizatio r assets							X X
											X
											X
				ip or fundraising solicit							Х
			-	sts, other assets, or paid							X
		· ·		es," complete the follo	-			•			
				rices given by the repo igement, show in colui							
(a) Line		(b) Amount involved	-	noncharitable exempt organia			ion of transfers, transa				
- (0) Ellic	, 110	(b) Amount medica	(c) realize of	nonemantable exempt organia	BUION	(a) Descript		ctions, and sna	ing unic	- Ingerne	
-				•							
				<u> </u>				<del></del>			
	-		<del> </del>		+						
			<del> </del>	<del></del>							
		•									
						<del></del>					
								<del></del>			
			ļ				·	•			
20 10	• •bo	foundation directly	or induscrity of	ffiliated with, or relate	d to one	or mara t	av avament armen	zationa			
				other than section 501(				Zations		es 🗔	No [
		complete the follo	•	the man couldn't con,	0,(0,, 0,						
		(a) Name of organization		(b) Type of orga	nization		(c) Descrip	tion of relations	hip		
							<del>-</del>				
				nined this return, including according				of my knowledg	e and b	elief, it	is true
Sign	correct	and complete Deplaration of	preparer (other that	taxpayer) is based on all informati			nowledge RESIDENT	May the IRS	discus		return below
Here	1 17	etureen officer or traste		Date		itle		(see instruction	s)?	Yes	ΧNο
	<u>JA</u>	COUELYN SPARK				<del></del>	<del></del>	<del></del>			
Paid		Print/Type preparer's na		Preparer's signature	22			""	TIN	<b>-</b>	. 1
Prepa	rer	JEFFREY E. K		Sylve	EXU	Mai !	06/11/2015  se			<u>5300</u>	<u>) 1</u>
Use C			MG LLP	RAL AVE, STE 70	n		Firm's Ell	N ▶ 15-	5565	<u> </u>	
J 30 C	7	i	OENIX, A	·	8500	)4	Phone no	855-80	7-3	423	
		<u> </u>	M	<del>-</del>		<del></del>	1 i none no	. <u> </u>		D.DE	/2014

FORM 990PF, PART II - OTHER INVESTMENTS

SINGER, JOHN STEPHEN FOUNDATION

ENDING ENDING BOOK VALUE FMV	84,160. 82,789. 20,852. 20,578. 83,350. 81,306. 22,458. 21,030. 20,849. 83,400. 21,263. 82,095. 422,224. 410,197.
COST/ FMV C OR F	C C C C C C C C
DESCRIPTION	ALLIANZGI INCOME AND GROWTH FD BLACKROCK MULTI ASSET INC FUND FRANKLIN INCOME FD ADVISOR CL GABELLI FOCUS FIVE FUND I INVESTMENT MGRS SER TR CTR CEN JPMORGAN INCOME BLDR FD SELECT JP MORGAN UNDISCOVERED MGRS PRINCIPAL GLOBAL DIVERSIFIED

FORM 990PF,	PART	III	- OTHER	DECREASES	IN	NET	WORTH	OR	FUND	BALANCES	
========	=====	====	======	========	===:	====		===	=====	======	
DESCRIPTION										TNUOMA	

MUTAL FUND TIMING DIFFERENCE
ROUNDING ADJUSTMENT

1,046.
6.
TOTAL
1,052.

RECIPIENT NAME:

JOHN STEPHEN SINGER

ADDRESS:

61 BAYBERRIE DRIVE

WESTOVER, CT 06902

RECIPIENT'S PHONE NUMBER: (336)747-838

FORM, INFORMATION AND MATERIALS:

LETTER FORM

SUBMISSION DEADLINES:

THERE ARE NO DEADLINES

RESTRICTIONS OR LIMITATIONS ON AWARDS:

THERE ARE NO RESTRICTIONS

SINGER, JOHN STEPHEN FOUNDATION 51-0203748 FORM 990PF, PART XV, LINE 3a - CONTRIBUTIONS, GIFTS, GRANTS PAID RECIPIENT NAME: GREENWICH HOSPITAL ADDRESS: 5 PERRYRIDGE RD GREENWICH, CT 06830 RELATIONSHIP: N/A PURPOSE OF GRANT: CHARITABLE FOUNDATION STATUS OF RECIPIENT: EXEMPT 500. RECIPIENT NAME: STAMFORD HOSPITAL ADDRESS: 166 W BROAD ST STE T-04 STAMFORD, CT 06904 RELATIONSHIP: N/A PURPOSE OF GRANT: CHARITABLE FOUNDATION STATUS OF RECIPIENT: EXEMPT AMOUNT OF GRANT PAID ..... 860. RECIPIENT NAME: STAMFORD MUSEUM & NATURE CENTER ADDRESS: 39 SCOFIELD RD STAMFORD, CT 06903

AMOUNT OF GRANT PAID .....

STATEMENT 4

RELATIONSHIP:

PURPOSE OF GRANT: CHARITABLE

FOUNDATION STATUS OF RECIPIENT:

N/A

EXEMPT

500.

SINGER, JOHN STEPHEN FOUNDATION 51-0203748 FORM 990PF, PART XV, LINE 3a - CONTRIBUTIONS, GIFTS, GRANTS PAID RECIPIENT NAME: CENTRAL CONNECTICUT COAST YMCA ADDRESS: 1240 CHAPEL ST NEW HAVEN, CT 06511 RELATIONSHIP: N/A PURPOSE OF GRANT: CHARITABLE FOUNDATION STATUS OF RECIPIENT: EXEMPT AMOUNT OF GRANT PAID ...... 1,000. RECIPIENT NAME: WILDLIFE CONSERVATION SOCIETY ADDRESS: 2300 SOUTHERN BLVD BRONX, NY 10460 RELATIONSHIP: N/A PURPOSE OF GRANT: CHARITABLE FOUNDATION STATUS OF RECIPIENT: EXEMPT 189. RECIPIENT NAME: CARDINAL MCCLOSKEY SCHOOL & HOME FOR CHILDREN ADDRESS:

AMOUNT OF GRANT PAID ......

STATEMENT

115 E STEVENS AVE STE 115

FOUNDATION STATUS OF RECIPIENT:

VALHALLA, NY 10595

**RELATIONSHIP:** 

PURPOSE OF GRANT: CHARITABLE

N/A

EXEMPT

1,000.

5

RECIPIENT NAME:

BACHMANN-STRAUSS DYSTONIA

& PARKINSON FND INC

ADDRESS:

551 5TH AVE STE 520

NEW YORK, NY 10029

RELATIONSHIP:

N/A

PURPOSE OF GRANT:

CHARITABLE

FOUNDATION STATUS OF RECIPIENT:

EXEMPT

AMOUNT OF GRANT PAID ..... 1,000.

RECIPIENT NAME:

ROUNDABOUT THEATRE COMPANY, INC

ADDRESS:

231 W 39TH ST STE 1200

NEW YORK, NY 10018

**RELATIONSHIP:** 

N/A

PURPOSE OF GRANT:

CHARITABLE

FOUNDATION STATUS OF RECIPIENT:

EXEMPT

RECIPIENT NAME:

PALM BEACH COUNTRY CLUB FND INC

ADDRESS:

760 N OCEAN BLVD

PALM BEACH, FL 33480

**RELATIONSHIP:** 

N/A

PURPOSE OF GRANT:

CHARITABLE

FOUNDATION STATUS OF RECIPIENT:

RECIPIENT NAME: GRASSROOT SOCCER INC ADDRESS: PO BOX 712 NORWICH, VT 05055 RELATIONSHIP:

N/A

PURPOSE OF GRANT:

CHARITABLE

FOUNDATION STATUS OF RECIPIENT:

EXEMPT

AMOUNT OF GRANT PAID ...... 150.

RECIPIENT NAME:

TOWN OF PALM BEACH UNITED WAY

ADDRESS:

44 COCOANUT ROW STE M201

PALM BEACH, FL 33480

RELATIONSHIP:

N/A

PURPOSE OF GRANT:

CHARIATBLE

FOUNDATION STATUS OF RECIPIENT:

EXEMPT

AMOUNT OF GRANT PAID ..... 2,000.

RECIPIENT NAME:

JEWISH FEDERATION OF PALM BEACH

COUNTY

ADDRESS:

4601 COMMUNITY DR

WEST PALM BEACH, FL 33417

RELATIONSHIP:

N/A

PURPOSE OF GRANT:

CHARITABLE

FOUNDATION STATUS OF RECIPIENT:

EXEMPT

AMOUNT OF GRANT PAID ..... 6,000.

SINGER, JOHN STEPHEN FOUNDATION 51-0203748 FORM 990PF, PART XV, LINE 3a - CONTRIBUTIONS, GIFTS, GRANTS PAID \_\_\_\_\_, RECIPIENT NAME: AYUDA INC ADDRESS: 7144 BYRON AVE MIAMI BEACH, FL 33141 RELATIONSHIP: N/A PURPOSE OF GRANT: CHARITABLE FOUNDATION STATUS OF RECIPIENT: EXEMPT AMOUNT OF GRANT PAID ...... 300. RECIPIENT NAME: MORSELIFE FOUNDATION INC ADDRESS: 4847 FRED GLADSTONE DR WEST PALM BEACH, FL 33417 RELATIONSHIP: N/APURPOSE OF GRANT: CHARITABLE FOUNDATION STATUS OF RECIPIENT:

AMOUNT OF GRANT PAID .....

TOTAL GRANTS PAID:

EXEMPT

18,699.

2,000.

## Form 8868

(Rev January 2014)

Department of the Treasury Internal Revenue Service

## Application for Extension of Time To File an Exempt Organization Return

► File a separate application for each return.
► Information about Form 8868 and its instructions is at www irs gov/form8868.

OMB No 1545-1709

Internal Revenue	e Service Imprination about Form 88	oo and its	instructions is at www irs	gov/ form8868.				
	filing for an Automatic 3-Month Extension, of filing for an Additional (Not Automatic) 3-Mo					▶ X		
	plete Part II unless you have already been gran							
a corporation 8868 to req Return for	ling (e-file). You can electronically file Form nequired to file Form 990-T), or an addition juest 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 Il Benefit	tomatic) 3-month exter ed in Part I or Part II w Contracts, which mus	nsion of time. You can e with the exception of Foi it be sent to the IRS i	lectronicall rm 8870, l in paper fo	y file Form nformation ormat (see		
	tomatic 3-Month Extension of Time. On				TICO CE TEOTIF	-		
	n required to file Form 990-T and requesting	•	<del></del>		plete			
Part I only .  All other corp	oorations (including 1120-C filers), partnershi	 ps, REMICs		orm 7004 to request an	extension o	▶ ☐		
to file ıncom	e tax returns.			Enter filer's identifyin	g number, see	instructions		
Type or	Name of exempt organization or other filer, see in	structions		Employer identification number (EIN) or				
print								
File by the	SINGER, JOHN STEPHEN FOUNDAT			51-02				
due date for	Number, street, and room or suite no If a P O box	k, see instru	ctions.	Social security number (SS	SN)			
filing your return See	P.O. BOX 75000 City, town or post office, state, and ZIP code For	a foreign ad	dross soo instructions	<u> </u>				
instructions	DETROIT, MI 48275-7874	a loreigh au	uress, see instructions					
Enter the Re	turn code for the return that this application i	s for (file a	separate application fo	r each return)		0 4		
Application		Return	Application		<del></del>	Return		
ls For		Code	Is For			Code		
Form 990 or	Form 990-EZ	01	Form 990-T (corporat	ion)		07		
Form 990-BL		02	Form 1041-A			08		
Form 4720 (	individual)	03	Form 4720 (other tha	ın indıvıdual)		09		
Form 990-PF		04	Form 5227			10		
Form 990-T	(sec 401(a) or 408(a) trust)	05	Form 6069			11		
Form 990-T	(trust other than above)	06	Form 8870			12		
Telephone If the orga If this is fo for the whole a list with the	e No. ► _(877)405-1091 Initiation does not have an office or place of bor a Group Return, enter the organization's four group, check this box ► If the names and EINs of all members the extension	ousiness in ir digit Gro it is for pa on is for	up Exemption Number rt of the group, check t	(GEN)_ his box ▶	If thi			
1 I reques	st an automatic 3-month (6 months for a corp							
	08/17_, 20 15_, to file the e	exempt org	janization return for the	organization named abo	ove. The ex	tension is		
F	calendar year 20 <u>14</u> or							
	tax year beginning	, 20	, and ending	,2	20			
	x year entered in line 1 is for less than 12 mo	onths, chec	k reason: Initial re	eturn Final return				
		0-T 4720	or 6069 enter the	tentative tay less any				
nonrefu	3a If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions.  3a \$ 3,400.  b If this application is for Form 990-PF, 990-T, 4720, or 6069, enter any refundable credits and							
	ed tax payments made Include any prior year				зь \$			
c Balance due. Subtract line 3b from line 3a Include your payment with this form, if required, by using EFTPS						<del></del>		
	nic Federal Tax Payment System) See instruc		,	· · · ·	3c \$	3,400.		
Caution. If you	are going to make an electronic funds withdrawal	(direct deb	t) with this Form 8868, se					
nstructions								
For Privacy Ac	t and Paperwork Reduction Act Notice, see instru	uctions			Form <b>8868</b> {	Rev 1-2014)		