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Form

990-PF

Department of the Treasury  
Internal Revenue Service

Return of Private Foundation

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

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Information about Form 990-PF and its instructions is at [www.irs.gov/form990pf](http://www.irs.gov/form990pf).






OMB No 1545-0052

2015

Open to Public Inspection

For calendar year 2015, or tax year beginning 01-01-2015, and ending 12-31-2015

Name of foundation LES & ANN BIEDERMAN FOUNDATION INC		A Employer identification number  38-2449838	
Number and street (or P O box number if mail is not delivered to street address) PO BOX 564		B Telephone number (see instructions)  (231) 947-7675	
City or town, state or province, country, and ZIP or foreign postal code TRAVERSE CITY, MI 49685		C If exemption application is pending, check here <input type="checkbox"/>	
G Check all that apply <input type="checkbox"/> Initial return <input type="checkbox"/> Final return <input type="checkbox"/> Address change		Initial return of a former public charity <input type="checkbox"/> Amended return <input type="checkbox"/> Name change	
H Check type of organization <input checked="" type="checkbox"/> Section 501(c)(3) exempt private foundation <input type="checkbox"/> Section 4947(a)(1) nonexempt charitable trust <input type="checkbox"/> Other taxable private foundation		D 1. Foreign organizations, check here <input type="checkbox"/> 2. Foreign organizations meeting the 85% test, check here and attach computation <input type="checkbox"/> E If private foundation status was terminated under section 507(b)(1)(A), check here <input type="checkbox"/> F If the foundation is in a 60-month termination under section 507(b)(1)(B), check here <input type="checkbox"/>	
I Fair market value of all assets at end of year (from Part II, col. (c), line 16) \$ 7,032,232		J Accounting method <input checked="" type="checkbox"/> Cash <input type="checkbox"/> Accrual <input type="checkbox"/> Other (specify) _____ (Part I, column (d) must be on cash basis.)	

Part I Analysis of Revenue and Expenses <i>(The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a) (see instructions) )</i>		Revenue and expenses per books (a)	Net investment income (b)	Adjusted net income (c)	Disbursements for charitable purposes (d) (cash basis only)
Revenue	1 Contributions, gifts, grants, etc , received (attach schedule) . . . . .	9,446			
	2 Check <input type="checkbox"/> if the foundation is <b>not</b> required to attach Sch B . . . . .				
	3 Interest on savings and temporary cash investments				
	4 Dividends and interest from securities . . . . .	163,855	163,855	163,855	
	5a Gross rents . . . . .				
	b Net rental income or (loss) _____				
	6a Net gain or (loss) from sale of assets not on line 10 	449,506			
	b Gross sales price for all assets on line 6a 1,886,880				
	7 Capital gain net income (from Part IV, line 2) . . .		94,218		
	8 Net short-term capital gain . . . . .				
	9 Income modifications . . . . .				
	10a Gross sales less returns and allowances				
Operating and Administrative Expenses	b Less Cost of goods sold . . . . .				
	c Gross profit or (loss) (attach schedule) . . . . .				
	11 Other income (attach schedule) . . . . .				
	12 <b>Total.</b> Add lines 1 through 11 . . . . .	622,807	258,073	163,855	
	13 Compensation of officers, directors, trustees, etc				
	14 Other employee salaries and wages . . . . .				
	15 Pension plans, employee benefits . . . . .				
	16a Legal fees (attach schedule). . . . .				
	b Accounting fees (attach schedule). . . . . 	5,370	2,500		
	c Other professional fees (attach schedule) . . . . . 	21,115	21,115		
	17 Interest . . . . .				
	18 Taxes (attach schedule) (see instructions) . . . 	4,052	2,777		
	19 Depreciation (attach schedule) and depletion . .				
	20 Occupancy . . . . .				
	21 Travel, conferences, and meetings. . . . .				
	22 Printing and publications . . . . .				
	23 Other expenses (attach schedule). . . . . 	2,112	92		
	24 <b>Total operating and administrative expenses.</b>				
	Add lines 13 through 23 . . . . .	32,649	26,484		0
	25 Contributions, gifts, grants paid . . . . .	377,000			377,000
	26 <b>Total expenses and disbursements.</b> Add lines 24 and 25	409,649	26,484		377,000
	27 Subtract line 26 from line 12				
	a <b>Excess of revenue over expenses and disbursements</b>	213,158			
	b <b>Net investment income</b> (if negative, enter -0-)		231,589		
	c <b>Adjusted net income</b> (if negative, enter -0-) . . .			163,855	

Part II		Balance Sheets	Attached schedules and amounts in the description column should be for end-of-year amounts only (See instructions )	Beginning of year	End of year	
				(a) Book Value	(b) Book Value	(c) Fair Market Value
Assets	1	Cash—non-interest-bearing . . . . .		1,636	37,100	37,100
	2	Savings and temporary cash investments . . . . .				
	3	Accounts receivable ▶ _____ Less allowance for doubtful accounts ▶ _____				
	4	Pledges receivable ▶ _____ Less allowance for doubtful accounts ▶ _____				
	5	Grants receivable . . . . .				
	6	Receivables due from officers, directors, trustees, and other disqualified persons (attach schedule) (see instructions). . . . .				
	7	Other notes and loans receivable (attach schedule) ▶ _____ Less allowance for doubtful accounts ▶ _____				
	8	Inventories for sale or use . . . . .				
	9	Prepaid expenses and deferred charges . . . . .				
	10a	Investments—U S and state government obligations (attach schedule)				
	b	Investments—corporate stock (attach schedule) . . . . .				
	c	Investments—corporate bonds (attach schedule) . . . . .				
	11	Investments—land, buildings, and equipment basis ▶ _____ Less accumulated depreciation (attach schedule) ▶ _____				
	12	Investments—mortgage loans. . . . .				
	13	Investments—other (attach schedule) . . . . .	5,831,440	6,009,134	6,995,132	
	14	Land, buildings, and equipment basis ▶ _____ Less accumulated depreciation (attach schedule) ▶ _____				
15	Other assets (describe ▶ _____)					
16	Total assets(to be completed by all filers—see the instructions Also, see page 1, item I)	5,833,076	6,046,234	7,032,232		
Liabilities	17	Accounts payable and accrued expenses . . . . .				
	18	Grants payable . . . . .				
	19	Deferred revenue . . . . .				
	20	Loans from officers, directors, trustees, and other disqualified persons				
	21	Mortgages and other notes payable (attach schedule). . . . .				
	22	Other liabilities (describe ▶ _____)				
	23	Total liabilities(add lines 17 through 22) . . . . .		0		
Net Assets or Fund Balances	Foundations that follow SFAS 117, check here ▶ <input type="checkbox"/> and complete lines 24 through 26 and lines 30 and 31.					
	24	Unrestricted . . . . .				
	25	Temporarily restricted . . . . .				
	26	Permanently restricted . . . . .				
	Foundations that do not follow SFAS 117, check here ▶ <input checked="" type="checkbox"/> and complete lines 27 through 31.					
	27	Capital stock, trust principal, or current funds . . . . .	2,646,183	2,646,183		
	28	Paid-in or capital surplus, or land, bldg , and equipment fund				
	29	Retained earnings, accumulated income, endowment, or other funds	3,186,893	3,400,051		
30	Total net assets or fund balances(see instructions) . . . . .	5,833,076	6,046,234			
31	Total liabilities and net assets/fund balances(see instructions) . . . . .	5,833,076	6,046,234			

Part III				Analysis of Changes in Net Assets or Fund Balances	
1	Total net assets or fund balances at beginning of year—Part II, column (a), line 30 (must agree with end-of-year figure reported on prior year’s return) . . . . .	1		5,833,076	
2	Enter amount from Part I, line 27a . . . . .	2		213,158	
3	Other increases not included in line 2 (itemize) ▶ _____	3			
4	Add lines 1, 2, and 3 . . . . .	4		6,046,234	
5	Decreases not included in line 2 (itemize) ▶ _____	5			
6	Total net assets or fund balances at end of year (line 4 minus line 5)—Part II, column (b), line 30 . . . . .	6		6,046,234	

Part IV

Capital Gains and Losses for Tax on Investment Income

List and describe the kind(s) of property sold (e g , real estate, (a) 2-story brick warehouse, or common stock, 200 shs MLC Co )		How acquired P—Purchase (b) D—Donation	Date acquired (c) (mo , day, yr )	Date sold (d) (mo , day, yr )
1a				
b				
c				
d				
e				

(e) Gross sales price	Depreciation allowed (f) (or allowable)	Cost or other basis (g) plus expense of sale	Gain or (loss) (h) (e) plus (f) minus (g)
a			
b			
c			
d			
e			

Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69			Gains (Col (h) gain minus col (k), but not less than -0-) or (l) Losses (from col (h))
(i) F M V as of 12/31/69	Adjusted basis (j) as of 12/31/69	Excess of col (i) (k) over col (j), if any	
a			
b			
c			
d			
e			

2	Capital gain net income or (net capital loss)	{ If gain, also enter in Part I, line 7 If (loss), enter -0- in Part I, line 7 }	2	94,218
3	Net short-term capital gain or (loss) as defined in sections 1222(5) and (6)  If gain, also enter in Part I, line 8, column (c) (see instructions) If (loss), enter -0- in Part I, line 8 . . . . . }		3	

Part V

Qualification Under Section 4940(e) for Reduced Tax on Net Investment Income

(For optional use by domestic private foundations subject to the section 4940(a) tax on net investment income )  
If section 4940(d)(2) applies, leave this part blank

Was the foundation liable for the section 4942 tax on the distributable amount of any year in the base period? ☐ Yes ☒ No  
If "Yes," the foundation does not qualify under section 4940(e) Do not complete this part

1 Enter the appropriate amount in each column for each year, see instructions before making any entries

(a) Base period years Calendar year (or tax year beginning in)	(b) Adjusted qualifying distributions	(c) Net value of noncharitable-use assets	(d) Distribution ratio (col (b) divided by col (c))
2014	387,225	7,283,625	0 053164
2013	345,700	6,876,938	0 050269
2012	324,575	6,292,423	0 051582
2011	296,694	5,381,381	0 055133
2010	230,120	4,569,755	0 050357

2	Total of line 1, column (d). . . . .	2	0 260505
3	Average distribution ratio for the 5-year base period—divide the total on line 2 by 5, or by the number of years the foundation has been in existence if less than 5 years	3	0 052101
4	Enter the net value of noncharitable-use assets for 2015 from Part X, line 5. . . . .	4	7,133,009
5	Multiply line 4 by line 3. . . . .	5	371,637
6	Enter 1% of net investment income (1% of Part I, line 27b). . . . .	6	2,316
7	Add lines 5 and 6. . . . .	7	373,953
8	Enter qualifying distributions from Part XII, line 4. . . . .	8	377,000

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

Part VI

Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948—see page 18 of the instructions)

1a		Exempt operating foundations described in section 4940(d)(2), check here <input type="checkbox"/>			
		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 here <input checked="" type="checkbox"/> and enter 1% of Part I, line 27b . . . . .		1	2,316
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	
3		Add lines 1 and 2. . . . .		3	2,316
4		Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)		4	
5		Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0- . . . . .		5	2,316
6		Credits/Payments			
a	2015 estimated tax payments and 2014 overpayment credited to 2015		6a	2,800	
b	Exempt foreign organizations—tax withheld at source. . . . .		6b		
c	Tax paid with application for extension of time to file (Form 8868). . . . .		6c		
d	Backup withholding erroneously withheld. . . . .		6d		
7		Total credits and payments. Add lines 6a through 6d. . . . .		7	2,800
8		Enter any penalty for underpayment of estimated tax. Check here <input checked="" type="checkbox"/> if Form 2220 is attached.		8	2
9		Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed. . . . .		9	
10		Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid. . . . .		10	482
11		Enter the amount of line 10 to be Credited to 2015 estimated tax 482 Refunded		11	

Part VII-A

Statements Regarding Activities

1a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any political campaign? . . . . .	1a		No
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see Instructions for definition)? . . . . .	1b		No
If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials published or distributed by the foundation in connection with the activities.				
c	Did the foundation file Form 1120-POL for this year? . . . . .	1c		No
d	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year (1) On the foundation \$ (2) On foundation managers \$			
e	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers \$			
2	Has the foundation engaged in any activities that have not previously been reported to the IRS? . . . . .	2		No
If "Yes," attach a detailed description of the activities.				
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes . . . . .	3		No
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year? . . . . .	4a		No
b	If "Yes," has it filed a tax return on Form 990-T for this year? . . . . .	4b		
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year? . . . . .	5		No
If "Yes," attach the statement required by General Instruction T.				
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either			
• By language in the governing instrument, or				
• 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	Yes	
7	Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col. (c), and Part XV. . . . .	7	Yes	
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	Yes	
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for calendar year 2015 or the taxable year beginning in 2015 (see instructions for Part XIV)? If "Yes," complete Part XIV . . . . .	9		No
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses. . . . .	10		No

Part 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		No
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had advisory privileges? If "Yes," attach statement (see instructions)	12		No
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application? Website address ▶N/A	13	Yes	
14	The books are in care of ▶ROSS A BIEDERMAN Telephone no ▶(231) 947-7675 Located at ▶PO BOX 564 TRAVERSE CITY MI ZIP+4 ▶49685			
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of <b>Form 1041</b> —Check here . . . . . ▶ <input type="checkbox"/> and enter the amount of tax-exempt interest received or accrued during the year . . . . . ▶	15		
16	At any time during calendar year 2015, did the foundation have an interest in or a signature or other authority over a bank, securities, or other financial account in a foreign country? See instructions for exceptions and filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR) If "Yes", enter the name of the foreign country ▶	16	Yes	No

Part VII-B

Statements Regarding Activities for Which Form 4720 May Be Required

File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.			Yes	No
1a	During the year did the foundation (either directly or indirectly)			
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person? . . . . . <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> 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)? . . . . . <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
	(6) Agree to pay money or property to a government official? ( <b>Exception.</b> 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 ). . . . . <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
b	If any answer is "Yes" to 1a(1)–(6), did <b>any</b> 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)? . . . . . <input type="checkbox"/> Organizations relying on a current notice regarding disaster assistance check here. . . . . ▶ <input type="checkbox"/>	1b		
c	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected before the first day of the tax year beginning in 2015? . . . . . <input type="checkbox"/>	1c		
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))			
a	At the end of tax year 2015, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning before 2015? . . . . . <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If "Yes," list the years ▶ 20____, 20____, 20____, 20____			
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 <b>all</b> years listed, answer "No" and attach statement—see instructions ). . . . . <input type="checkbox"/>	2b		
c	If the provisions of section 4942(a)(2) are being applied to <b>any</b> of the years listed in 2a, list the years here ▶ 20____, 20____, 20____, 20____			
3a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year? . . . . . <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
b	If "Yes," did it have excess business holdings in 2015 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? ( <i>Use Schedule C, Form 4720, to determine if the foundation had excess business holdings in 2015.</i> ) . . . . . <input type="checkbox"/>	3b		
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a		No
b	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2015?	4b		No

Part VII-B

Statements Regarding Activities for Which Form 4720 May Be Required (Continued)

5a

During the year did the foundation pay or incur any amount to

(1) Carry on propaganda, or otherwise attempt to influence legislation (section 4945(e))?

☐ Yes

☒ No

(2) Influence the outcome of any specific public election (see section 4955), or to carry on, directly or indirectly, any voter registration drive?

☐ Yes

☒ No

(3) Provide a grant to an individual for travel, study, or other similar purposes?

☐ Yes

☒ No

(4) Provide a grant to an organization other than a charitable, etc , organization described in section 4945(d)(4)(A )? (see instructions).

☐ Yes

☒ No

(5) Provide for any purpose other than religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals?

☐ Yes

☒ No

b

If any answer is "Yes" to 5a(1)–(5), did **any** of the transactions fail to qualify under the exceptions described in Regulations section 53.4945 or in a current notice regarding disaster assistance (see instructions)?

5b

Organizations relying on a current notice regarding disaster assistance check here.

☐

c

If the answer is "Yes" to question 5a(4), does the foundation claim exemption from the tax because it maintained expenditure responsibility for the grant?

☐ Yes

☐ No

If "Yes," attach the statement required by Regulations section 53.4945–5(d).

6a

Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?

☐ Yes

☒ No

b

Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract?

6b

No

If "Yes" to 6b, file Form 8870.

7a

At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction?

☐ Yes

☒ No

b

If yes, did the foundation receive any proceeds or have any net income attributable to the transaction?

7b

Part VIII

Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors

1

List all officers, directors, trustees, foundation managers and their compensation (see instructions).

(a) Name and address	Title, and average hours per week (b) devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	Expense account, (e) other allowances
See Additional Data Table				

2

Compensation of five highest-paid employees (other than those included on line 1—see instructions). If none, enter "NONE."

(a) Name and address of each employee paid more than \$50,000	Title, and average hours per week (b) devoted to position	(c) Compensation	Contributions to employee benefit plans and deferred compensation (d)	Expense account, (e) other allowances
NONE				

Total

number of other employees paid over \$50,000.

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**Part VIII** Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors *(continued)*

<b>3</b> Five highest-paid independent contractors for professional services (see instructions). 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. . . . . 

**Part IX-A** Summary of Direct Charitable Activities

List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of organizations and other beneficiaries served, conferences convened, research papers produced, etc.	Expenses
<b>1</b>	
<b>2</b>	
<b>3</b>	
<b>4</b>	

**Part IX-B** Summary of Program-Related Investments (see instructions)

Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2	Amount
<b>1</b> N/A	
<b>2</b>	
All other program-related investments. See instructions.	
<b>3</b>	

**Total.** Add lines 1 through 3 . . . . . 



Part X

Minimum Investment Return

(All domestic foundations must complete this part. Foreign foundations,see instructions.)

1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc , purposes		
a	Average monthly fair market value of securities. . . . .	1a	7,222,265
b	Average of monthly cash balances. . . . .	1b	19,368
c	Fair market value of all other assets (see instructions). . . . .	1c	0
d	Total (add lines 1a, b, and c). . . . .	1d	7,241,633
e	Reduction claimed for blockage or other factors reported on lines 1a and 1c (attach detailed explanation). . . . .	1e	
2	Acquisition indebtedness applicable to line 1 assets. . . . .	2	
3	Subtract line 2 from line 1d. . . . .	3	7,241,633
4	Cash deemed held for charitable activities Enter 1 1/2% of line 3 (for greater amount, see instructions). . . . .	4	108,624
5	Net value of noncharitable-use assets.Subtract line 4 from line 3 Enter here and on Part V, line 4	5	7,133,009
6	Minimum investment return.Enter 5% of line 5. . . . .	6	356,650

Part XI

Distributable Amount

(see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations and certain foreign organizations check here ☒ and do not complete this part.)

1	Minimum investment return from Part X, line 6. . . . .	1	356,650
2a	Tax on investment income for 2015 from Part VI, line 5. . . . .	2a	2,316
b	Income tax for 2015 (This does not include the tax from Part VI ). . . . .	2b	
c	Add lines 2a and 2b. . . . .	2c	2,316
3	Distributable amount before adjustments Subtract line 2c from line 1. . . . .	3	354,334
4	Recoveries of amounts treated as qualifying distributions. . . . .	4	
5	Add lines 3 and 4. . . . .	5	354,334
6	Deduction from distributable amount (see instructions). . . . .	6	
7	Distributable amountas adjusted Subtract line 6 from line 5 Enter here and on Part XIII, line 1. . . . .	7	354,334

Part 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	377,000
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	
3	Amounts set aside for specific charitable projects that satisfy the		
a	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	377,000
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	2,316
6	Adjusted qualifying distributions.Subtract line 5 from line 4. . . . .	6	374,684

**Note:**The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation qualifies for the section 4940(e) reduction of tax in those years

Part XIII

Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2014	(c) 2014	(d) 2015
1 Distributable amount for 2015 from Part XI, line 7				354,334
2 Undistributed income, if any, as of the end of 2015				
a Enter amount for 2014 only.				
b Total for prior years 20__, 20__, 20__				
3 Excess distributions carryover, if any, to 2015				
a From 2010.	4,522			
b From 2011.	32,037			
c From 2012.	14,984			
d From 2013.	10,113			
e From 2014.	28,594			
f Total of lines 3a through e.	90,250			
4 Qualifying distributions for 2015 from Part XII, line 4 \$ 377,000				
a Applied to 2014, but not more than line 2a				
b Applied to undistributed income of prior years (Election required—see instructions).				
c Treated as distributions out of corpus (Election required—see instructions).				
d Applied to 2015 distributable amount.				354,334
e Remaining amount distributed out of corpus	22,666			
5 Excess distributions carryover applied to 2015 (If an amount appears in column (d), the same amount must be shown in column (a).)				
6 Enter the net total of each column as indicated below:				
a Corpus Add lines 3f, 4c, and 4e Subtract line 5	112,916			
b Prior years' undistributed income Subtract line 4b from line 2b.				
c Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed.				
d Subtract line 6c from line 6b Taxable amount—see instructions.				
e Undistributed income for 2014 Subtract line 4a from line 2a Taxable amount—see instructions.				
f Undistributed income for 2016 Subtract lines 4d and 5 from line 1 This amount must be distributed in 2015.				0
7 Amounts treated as distributions out of corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3) (Election may be required - see instructions).				
8 Excess distributions carryover from 2010 not applied on line 5 or line 7 (see instructions).	4,522			
9 Excess distributions carryover to 2016. Subtract lines 7 and 8 from line 6a.	108,394			
10 Analysis of line 9				
a Excess from 2011.	32,037			
b Excess from 2012.	14,984			
c Excess from 2013.	10,113			
d Excess from 2014.	28,594			
e Excess from 2015.	22,666			

Part XIV

Private Operating Foundations (see instructions and Part VII-A, question 9)

1a

If the foundation has received a ruling or determination letter that it is a private operating foundation, and the ruling is effective for 2015, enter the date of the ruling. . . . .

b

Check box to indicate whether the organization is a private operating foundation described in section 4942(j)(3) or 4942(j)(5)

☐ 4942(j)(3) or ☐ 4942(j)(5)

2a

Enter the lesser of the adjusted net income from Part I or the minimum investment return from Part X for each year listed . . . . .

b

85% of line 2a . . . . .

c

Qualifying distributions from Part XII, line 4 for each year listed . . . . .

d

Amounts included in line 2c not used directly for active conduct of exempt activities . . . . .

e

Qualifying distributions made directly for active conduct of exempt activities  
Subtract line 2d from line 2c . . . . .

3

Complete 3a, b, or c for the alternative test relied upon

a

"Assets" alternative test—enter

(1)

Value of all assets . . . . .

(2)

Value of assets qualifying under section 4942(j)(3)(B)(i)

b

"Endowment" alternative test— enter 2/3 of minimum investment return shown in Part X, line 6 for each year listed. . .

c

"Support" alternative test—enter

(1)

Total support other than gross investment income (interest, dividends, rents, payments on securities loans (section 512(a)(5)), or royalties). . . . .

(2)

Support from general public and 5 or more exempt organizations as provided in section 4942(j)(3)(B)(iii). . . . .

(3)

Largest amount of support from an exempt organization

(4)

Gross investment income

Part XV

Supplementary Information (Complete this part only if the organization had \$5,000 or more in assets 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) )

b

List any managers of the foundation who own 10% or more of the stock of a corporation (or an equally large portion of the ownership of a partnership or other entity) of which the foundation has a 10% or greater interest

2

Information Regarding Contribution, Grant, Gift, Loan, Scholarship, etc., Programs:

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.

a

The name, address, and telephone number or e-mail address of the person to whom applications should be addressed

ROSS A BIEDERMAN  
PO BOX 564  
TRAVERSE CITY, MI 49685  
(231) 947-7675

b

The form in which applications should be submitted and information and materials they should include

COMPLETE THE GRANT APPLICATION AND INCLUDE A SUMMARY OF PROJECT OR PURPOSE WITH TOTAL COST AND OTHER SOURCES OF FUNDING. OTHER INFORMATION REQUIRED INCLUDE A LINE ITEM BUDGET, COPY OF ORGANIZATIONS CURRENT OPERATING BUDGET, A COPY OF RECENT FINANCIAL STATEMENT, PRIOR YEAR FORM 990, A COPY OF TAX EXEMPT LETTER AND A LIST OF THE BOARD OF DIRECTORS. INCLUDE SEVEN COPIES OF THE ABOVE INFORMATION.

c

Any submission deadlines

SUBMISSIONS MUST BE FILED 60 DAYS PRIOR TO QUARTERLY MEETINGS

d

Any restrictions or limitations on awards, such as by geographical areas, charitable fields, kinds of institutions, or other factors

GENERALLY, APPLICATIONS WILL BE CONSIDERED ONLY FROM THE NORTHERN MICHIGAN AREA AND MUST BE FOR EDUCATION, CIVIC IMPROVEMENTS, FINE ARTS, HEALTH AND HUMAN SERVICES, AND RECREATION OR YOUTH SERVICES.

Form 990-PF (2015)

Part XV

Supplementary Information(continued)

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 contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a Paid during the year See Additional Data Table				
Total . . . . .			3a	377,000
b Approved for future payment				
Total . . . . .			3b	

Enter gross amounts unless otherwise indicated		Unrelated business income		Excluded by section 512, 513, or 514		(e) Related or exempt function income (See instructions )
		(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	
<b>1</b>	Program service revenue					
<b>a</b>	_____					
<b>b</b>	_____					
<b>c</b>	_____					
<b>d</b>	_____					
<b>e</b>	_____					
<b>f</b>	_____					
<b>g</b>	Fees and contracts from government agencies					
<b>2</b>	Membership dues and assessments. . . . .					
<b>3</b>	Interest on savings and temporary cash investments . . . . .					
<b>4</b>	Dividends and interest from securities. . . .			25	163,855	
<b>5</b>	Net rental income or (loss) from real estate					
<b>a</b>	Debt-financed property. . . . .					
<b>b</b>	Not debt-financed property. . . . .					
<b>6</b>	Net rental income or (loss) from personal property . . . . .					
<b>7</b>	Other investment income. . . . .					
<b>8</b>	Gain or (loss) from sales of assets other than inventory . . . . .			25	94,218	355,288
<b>9</b>	Net income or (loss) from special events					
<b>10</b>	Gross profit or (loss) from sales of inventory . . . . .					
<b>11</b>	Other revenue <b>a</b> _____					
<b>b</b>	_____					
<b>c</b>	_____					
<b>d</b>	_____					
<b>e</b>	_____					
<b>12</b>	Subtotal Add columns (b), (d), and (e). . .				258,073	355,288
<b>13</b>	<b>Total.</b> Add line 12, columns (b), (d), and (e). . . . .			<b>13</b>		613,361

(See worksheet in line 13 instructions to verify calculations )

[illegible]

4. Did the organization directly or indirectly engage in any of the following with any other organization described in section 501(c) of the Code (other than section 501(c)(3) organizations) or in section 527, relating to political organizations?

(1) Cash. . . . .

(2) Other assets. . . . .

**c** Sharing of facilities, equipment, mailing lists, other assets, or paid employees. . . . .

**d** If the answer to any of the above is "Yes," complete the following schedule. Column **(b)** should always show the fair market value of the goods, other assets, or services given by the reporting foundation. If the foundation received less than fair market value in any transaction or sharing arrangement, show in column **(d)** the value of the goods, other assets, or services received.

[illegible]

**2a** Is the foundation directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described in section 501(c) of the Code (other than section 501(c)(3)) or in section 527? . . . ☐ Yes ☒ No

(a) Name of organization	(b) Type of organization	(c) Description of relationship

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge.

<p>*****</p> <p>_____</p> <p>Signature of officer or trustee</p>	<p>2016-05-03</p> <p>_____</p> <p>Date</p>	<p>*****</p> <p>_____</p> <p>Title</p>
--	--	--

May the IRS discuss this return with the preparer shown below (see instr.)? ☒ Yes ☐ No

<b>Paid Preparer Use Only</b>	Print/Type preparer's name CHRISTOPHER W KINDLINGER	Preparer's Signature	Date 2016-05-03	Check if self-employed <input checked="" type="checkbox"/>	PTIN P00621191
	Firm's name <input checked="" type="checkbox"/> KINDLINGER & COMPANY PC			Firm's EIN <input checked="" type="checkbox"/> 38-3196710	
	Firm's address <input checked="" type="checkbox"/> 3118 LOGAN VALLEY RD TRAVERSE CITY, MI 496844772			Phone no (231) 947-9260	

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

(a) Name and address	Title, and average hours per week (b) devoted to position	(c) Compensation(If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	Expense account, (e) other allowances
LAWRENCE E GORDON	TRUSTEE 1 00	0	0	0
12422 E HENDRYX DRIVE SUTTONS BAY,MI 49682				
PAUL M BIEDERMAN	TRUSTEE 1 00	0	0	0
621 SUNRISE DR GOLDEN,CO 80401				
ROSS A BIEDERMAN	TRUSTEE 1 00	0	0	0
1003 PENINSULA DR TRAVERSE CITY,MI 49686				
CHRIS WARREN	SECRETARY 1 00	0	0	0
8784 HORIZON DR TRAVERSE CITY,MI 49686				
LEE RUSSELL	TRUSTEE 1 00	0	0	0
6343 FRANKLIN WOODS DR TRAVERSE CITY,MI 49686				
VOJIN BAIC	TRUSTEE 1 00	0	0	0
12055 S WOODWINDS CIR TRAVERSE CITY,MI 49684				

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

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> Paid during the year				
ALLIANCE FOR THE GREAT LAKES ALLIANCE FOR THE GREAT LAKES 605 ELLIOT ST 605 ELLIOT ST GRAND HAVEN,MI 49417			CHARITABLE ACTIVITIES	4,500
BOOTS FOR KIDS BOOTS FOR KIDS PO BOX 179 PO BOX 179 GRAWN,MI 49637			CHARITABLE ACTIVITIES	5,000
CHILD AND FAMILY SERVICES CHILD AND FAMILY SERVICES 3785 VETERANS DRIVE 3785 VETERANS DRIVE TRAVERSE CITY,MI 49684			CHARITABLE ACTIVITIES	8,000
COMMUNITY FOUNDATION COMMUNITY FOUNDATION 250 E FRONT ST STE 310 250 E FRONT ST STE 310 TRAVERSE CITY,MI 49684			CHARITABLE ACTIVITIES	15,000
DOUGHERTY HISTORIC HOME SITE DOUGHERTY HISTORIC HOME SITE 18459 MISSION RD 18459 MISSION RD TRAVERSE CITY,MI 49686			CHARITABLE ACTIVITIES	30,000
FATHER FRED FOUNDATION FATHER FRED FOUNDATION HASTINGS ST HASTINGS ST TRAVERSE CITY,MI 49684			CHARITABLE ACTIVITIES	10,000
GT BAY YMCA GT BAY YMCA 3700 SILVER LAKE RD 3700 SILVER LAKE RD TRAVERSE CITY,MI 49684			CHARITABLE ACTIVITIES	25,000
GT COUNTY SAVE THE BELL TOWER GT CUNTY SAVE THE BELL TOWER 400 BOARDMAN AVE 400 BOARD AVE TRAVERSE CITY,MI 49684			CHARTIABLE ACTIVITIES	10,000
GRAND TRAVERSE AREA CATHOLIC SCHOOL GRAND TRAVERSE AREA CATHOLIC SCHOOLS 123 E ELEVENTH ST 123 E ELEVENTH ST TRAVERSE CITY,MI 49684			CHARITABLE ACTIVITIES	3,000
HABITAT FOR HUMANITY HABITAT FOR HUMANITY 1129 WOODMERE AVE 1129 WOODMERE AVE TRAVERSE CITY,MI 49686			CHARITABLE ACTIVITIES	15,000
INLAND SEAS EDUCATION ASSOC INLAND SEAS EDUCATION ASSOC DAME ST DAME ST SUTTONS BAY,MI 49682			CHARITABLE ACTIVITIES	15,000
JUNIOR ACHIEVEMENT OF MICHIGAN JUNIOR ACHIEVEMENT OF MICHIGAN 880 PARSONS RD 880 PARSONS RD TRAVERSE CITY,MI 49686			CHARITABLE ACTIVITIES	5,000
MAYO CLINIC MAYO CLINIC 200 FIRST STREET SW 200 FIRST STREET SW ROCHESTER,MN 55905			CHARITABLE ACTIVITIES	20,000
MICHAEL'S PLACE MICHAEL'S PLACE 1144 BOON ST 1144 BOON ST TRAVERSE CITY,MI 49686			CHARITABLE ACTIVITIES	10,000
MID-MICHIGAN HONOR FLIGHT MID-MICHIGAN HONOR FLIGHT PO BOX 385 PO BOX 385 MECOSTA,MI 49332			CHARITABLE ACTIVITIES	15,000
<b>Total.</b>			<b>3a</b>	377,000



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

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
MUNSON MEDICAL CENTER MUNSON MEDICAL CENTER 1105 SIXTH STREET 1105 SIXTH STREET TRAVERSE CITY, MI 49684			CHARITABLE ACTIVITIES	50,000
NMC MARITIME ACADEMY NMC MARITIME ACADEMY 715 E FRONT ST 715 E FRONT ST TRAVERSE CITY, MI 49686			CHARITABLE ACTIVITIES	25,000
NMC-SCHOLARSHIPS NMC-SCHOLARSHIPS FRONT ST FRONT ST TRAVERSE CITY, MI 49684			CHARITABLE ACTIVITIES	25,000
OLD TOWN PLAYHOUSE OLD TOWN PLAYHOUSE 148 E EIGHTH ST 148 E EIGHTH ST TRAVERSE CITY, MI 49684			CHARITABLE ACTIVITIES	25,000
PEACE RANCH PEACE RANCH 2566 HOOSIER VALLEY ROAD 2566 HOOSIER VALLEY ROAD TRAVERSE CITY, MI 49685			CHARITABLE ACTIVITIES	5,000
SALVATION ARMY SALVATION ARMY BARLOW ST BARLOW ST TRAVERSE CITY, MI 49684			CHARITABLE ACTIVITIES	6,000
SCENIC TRAILS COUNCIL - BOY SCOUTS SCENIC TRAILS COUNCIL - BOY SCOUTS SCOUT CAMP SCOUT CAMP TRAVERSE CITY, MI 49684			CHARITABLE ACTIVITIES	6,000
SEEDS SEEDS 934 E EIGHTH ST 934 E EIGHTH ST TRAVERSE CITY, MI 49686			CHARITABLE ACTIVITIES	10,000
ST MARYS SCHOOL ST MARYS SCHOOL 307 S ST MARYS STREET 307 S ST MARYS STREET LAKE LEELANAU, MI 49653			CHARITABLE ACTIVITIES	4,000
TRAVERSE AREA COMMUNITY SAILING TRAVERSE AREA COMMUNITY SAILING 605 HANNAH AVE 605 HANNAH AVE TRAVERSE CITY, MI 49686			CHARITABLE ACTIVITIES	5,000
TRAVERSE AREA DISTRICT LIBRARY TRAVERSE AREA DISTRICT LIBRARY 610 WOODMERE AVE 610 WOODMERE AVE TRAVERSE CITY, MI 49686			CHARITABLE ACTIVITIES	1,500
TRAVERSE CITY PUBLIC SCHOOLS TRAVERSE CITY PUBLIC SCHOOLS WEBSTER ST WEBSTER ST TRAVERSE CITY, MI 49684			CHARITABLE ACTIVITIES	12,000
TRAVERSE HEALTH CLINIC TRAVERSE HEALTH CLINIC 3147 LOGAN VALLEY ROAD 3147 LOGAN VALLEY ROAD TRAVERSE CITY, MI 49684			CHARITABLE ACTIVITIES	5,000
US COAST GUARD US COAST GUARD 1175 AIRPORT ACCESS RD 1175 AIRPORT ACCESS RD TRAVERSE CITY, MI 49686			CHARITABLE ACTIVITIES	2,500
VFW POST 2780 VFW POST 2780 3400 VETERANS DR 3400 VETERANS DR TRAVERSE CITY, MI 49684			CHARITABLE ACTIVITIES	500
<b>Total . . . . .</b>			<b>3a</b>	377,000

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

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
YUBA HISTORIC SOCIETY YUBA HISTORIC SOCIETY 301 TRAVERSE 301 TRAVERSE ELK RAPIDS,MI 49629			CHARITABLE ACTIVITIES	4,000
<b>Total . . . . . ▶ 3a</b>				377,000

**TY 2015 Accounting Fees Schedule****Name:** LES & ANN BIEDERMAN FOUNDATION INC**EIN:** 38-2449838

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
KINDLINGER & COMPANY,PC	2,370			
CHRIS WARREN	3,000	2,500		

**Note: To capture the full content of this document, please select landscape mode (11" x 8.5") when printing.**

**TY 2015 Gain/Loss from Sale of Other Assets Schedule**

**Name:** LES & ANN BIEDERMAN FOUNDATION INC  
**EIN:** 38-2449838

Name	Date Acquired	How Acquired	Date Sold	Purchaser Name	Gross Sales Price	Basis	Basis Method	Sales Expenses	Total (net)	Accumulated Depreciation
VANGUARD EXPLORER FUND ADMIRAL	2014-08	PURCHASE	2015-05		56,512	38,959			17,553	
VANGUARD INTERMEDIATE TERM INV GRADE	2014-08	PURCHASE	2015-05		267,620	267,044			576	
VANGUARD SHORT TERM INV	2014-08	PURCHASE	2015-05		172,818	173,310			-492	
VANGUARD STRATEGIC EQUITY FUND	2014-08	PURCHASE	2015-05		61,764	28,009			33,755	
VANGUARD TOTAL BOND MKT	2014-08	PURCHASE	2015-01		5,347	5,108			239	
VANGUARD TOTAL BOND MKT	2014-08	PURCHASE	2015-05		452,034	440,761			11,273	
VANGUARD TOTAL BOND MKT	2014-08	PURCHASE	2015-07		5,267	5,184			83	
VANGUARD TOTAL INTERNATIONAL BOND	2015-05	PURCHASE	2015-10		29,000	29,067			-67	
VANGUARD TOTAL STOCK MKT	2014-08	PURCHASE	2015-01		15,000	8,203			6,797	
VANGUARD TOTAL STOCK MKT	2014-08	PURCHASE	2015-04		5,419	2,828			2,591	
VANGUARD TOTAL STOCK MKT	2014-08	PURCHASE	2015-05		362,760	189,594			173,166	
VANGUARD US GROWTH FUND	2014-08	PURCHASE	2015-01		15,000	9,229			5,771	
VANGUARD US GROWTH FUND	2014-08	PURCHASE	2015-05		154,825	87,575			67,250	
VANGUARD WINDSOR II FUND	2014-08	PURCHASE	2015-05		113,939	77,642			36,297	
VANGUARD INTERMEDIATE TERM INV GRADE	2014-08	PURCHASE	2015-10		25,000	25,096			-96	
VANGUARD SHORT TERM INV	2014-08	PURCHASE	2015-10		12,000	12,078			-78	
VANGUARD SHORT TERM INV	2014-08	PURCHASE	2015-10		5,082	5,115			-33	
VANGUARD TOTAL BOND MKT	2014-08	PURCHASE	2015-10		33,275	32,572			703	

**TY 2015 Investments - Other Schedule****Name:** LES & ANN BIEDERMAN FOUNDATION INC**EIN:** 38-2449838

<b>Category / Item</b>	<b>Listed at Cost or FMV</b>	<b>Book Value</b>	<b>End of Year Fair Market Value</b>
INTER TERM INVEST-GR	FMV	613,808	600,369
TOTAL BOND MKT IDX ADM	FMV	995,404	1,000,823
TOTAL INTL STOCK IDX ADM	FMV	1,491,005	1,566,746
SHORT TERM INVEST- GR	FMV	406,443	399,667
STRATEGIC EQUITY FUND	FMV	110,569	185,281
EXPLORER FUND ADMIRAL	FMV	155,071	179,679
TOTAL STOCK MKT IDX ADM	FMV	712,778	1,285,771
US GROWTH FUND ADMIRAL	FMV	301,913	472,284
WINDSOR II FUND ADM	FMV	349,987	437,650
TOTAL INTL BOND IDX ADM	FMV	872,156	866,862

**TY 2015 Other Expenses Schedule****Name:** LES & ANN BIEDERMAN FOUNDATION INC**EIN:** 38-2449838

Description	Revenue and Expenses per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
EXPENSES				
FILING FEES - STATE OF MICHIG	20			
PO BOX FEE	92	92		
COUNCIL OF MI FOUNDATIONS	2,000			

**TY 2015 Other Professional Fees Schedule**

**Name:** LES & ANN BIEDERMAN FOUNDATION INC

**EIN:** 38-2449838

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
ADVISORY FEES	21,115	21,115		

**TY 2015 Taxes Schedule****Name:** LES & ANN BIEDERMAN FOUNDATION INC**EIN:** 38-2449838

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
990-PF ESTIMATES	1,275			
FOREIGN TAX WITHHELD ON DIVIDEND	2,777	2,777		



<div>Schedule B</div> <div>(Form 990, 990-EZ, or 990-PF)</div> <div>Department of the Treasury Internal Revenue Service</div>	<div>Schedule of Contributors</div> <div>▶ Attach to Form 990, 990-EZ, or 990-PF.</div> <div>▶ Information about Schedule B (Form 990, 990-EZ, or 990-PF) and its instructions is at <a href="http://www.irs.gov/form990">www.irs.gov/form990</a>.</div>	<div>OMB No 1545-0047</div> <div>2015</div>
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<div>Name of the organization</div> <div>LES &amp; ANN BIEDERMAN FOUNDATION INC</div>	<div>Employer identification number</div> <div>38-2449838</div>
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Organization type (check one)

<div>Filers of:</div> <div>Form 990 or 990-EZ</div> <div>Form 990-PF</div>	<div>Section:</div> <div><div><input type="checkbox"/> 501(c)( ) (enter number) organization</div><div><input type="checkbox"/> 4947(a)(1) nonexempt charitable trust <b>not</b> treated as a private foundation</div><div><input type="checkbox"/> 527 political organization</div><div><input checked="" type="checkbox"/> 501(c)(3) exempt private foundation</div><div><input type="checkbox"/> 4947(a)(1) nonexempt charitable trust treated as a private foundation</div><div><input type="checkbox"/> 501(c)(3) taxable private foundation</div></div>
--	---

Check if your organization is covered by the **General Rule** or a **Special Rule**.  
**Note.** Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule See instructions

General Rule

- ☒ For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or other property) from any one contributor Complete Parts I and II See instructions for determining a contributor's total contributions

Special Rules

- ☐ For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33<sup>1</sup>/<sub>3</sub>% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of **(1)** \$5,000 or **(2)** 2% of the amount on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1 Complete Parts I and II
- ☐ 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
- ☐ 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 . . . . . ▶ \$ \_\_\_\_\_

**Caution.** An organization that is not covered by the General Rule and/or the Special Rules does not file Schedule B (Form 990, 990-EZ, or 990-PF), but it **must** answer “No” on Part IV, line 2, of its Form 990, or check the box on line H of its Form 990-EZ or on its Form 990PF, Part I, line 2, to certify that it does not meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF)

<b>Name of organization</b> LES & ANN BIEDERMAN FOUNDATION INC	<b>Employer identification number</b> 38-2449838
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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	HELEN GETTY	\$ 9,446	Person <input checked="" type="checkbox"/>
	3950 SUMAC DR		Payroll <input type="checkbox"/>
	TRAVERSE CITY, MI49684		Noncash <input type="checkbox"/> (Complete Part II for noncash contributions )
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person <input type="checkbox"/>
			Payroll <input type="checkbox"/>
			Noncash <input type="checkbox"/> (Complete Part II for noncash contributions )
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person <input type="checkbox"/>
			Payroll <input type="checkbox"/>
			Noncash <input type="checkbox"/> (Complete Part II for noncash contributions )
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person <input type="checkbox"/>
			Payroll <input type="checkbox"/>
			Noncash <input type="checkbox"/> (Complete Part II for noncash contributions )
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person <input type="checkbox"/>
			Payroll <input type="checkbox"/>
			Noncash <input type="checkbox"/> (Complete Part II for noncash contributions )
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person <input type="checkbox"/>
			Payroll <input type="checkbox"/>
			Noncash <input type="checkbox"/> (Complete Part II for noncash contributions )
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person <input type="checkbox"/>
			Payroll <input type="checkbox"/>
			Noncash <input type="checkbox"/> (Complete Part II for noncash contributions )

<b>Employer identification number</b>
38-2449838

**Part II** **Noncash Property**  
(see instructions) Use duplicate copies of Part II if additional space is needed

[illegible]

<b>Name of organization</b> LES & ANN BIEDERMAN FOUNDATION INC	<b>Employer identification number</b> 38-2449838
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Part III

*Exclusively* religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8), or (10) that total more than \$1,000 for the year from any one contributor. Complete columns (a) through (e) and the following line entry. For organizations completing Part III, enter the total of *exclusively* religious, charitable, etc., contributions of \$1,000 or less for the year. (Enter this information once. See instructions.) ▶ \$ \_\_\_\_\_

Use duplicate copies of Part III if additional space is needed

(a) No.from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
-			
	(e) Transfer of gift		
	Transferee's name, address, and ZIP 4	Relationship of transferor to transferee	
	--		
(a) No.from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
-			
	(e) Transfer of gift		
	Transferee's name, address, and ZIP 4	Relationship of transferor to transferee	
	--		
(a) No.from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
-			
	(e) Transfer of gift		
	Transferee's name, address, and ZIP 4	Relationship of transferor to transferee	
	--		
(a) No.from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
-			
	(e) Transfer of gift		
	Transferee's name, address, and ZIP 4	Relationship of transferor to transferee	
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