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Return of Private Foundation

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

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Open to Public Inspection

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. For calendar year 2015 or tax year beginning 2015, and ending A Employer identification number Name of foundation HENRY A. FOX, JR. CHARITABLE FOUNDATION & KATHLEEN O'BRIEN FOX CHARITABLE FOUNDATION 38-2732553 Number and street (or P O. box number if mail is not delivered to street address) Room/suite B Telephone number (see instructions) 4494 - 36TH STREET, S.E. (616) 949-1210 City or town, state or province, country, and ZIP or foreign postal code C If exemption application is pending, check here. KENTWOOD, MI 49512 G Check all that apply: Initial return Initial return of a former public charity D 1. Foreign organizations, check here. Final return Amended return 2. Foreign organizations meeting the 85% test, check here and attach Address change Name change H Check type of organization: | X | Section 501(c)(3) exempt private foundation E If private foundation status was terminated Section 4947(a)(1) nonexempt charitable trust Other taxable private foundation under section 507(b)(1)(A), check here . J Accounting method: X Cash Fair market value of all assets at If the foundation is in a 60-month termination end of year (from Part II, col. (c), line Other (specify) under section 507(b)(1)(B), check here . 299,076. *16)* ▶ \$ (Part I, column (d) must be on cash basis) (d) Disbursements Part I Analysis of Revenue and Expenses (The (a) Revenue and (b) Net investment (c) Adjusted net for charitable total of amounts in columns (b), (c), and (d) expenses per purposes may not necessarily equal the amounts in income income books column (a) (see instructions)) (cash basis only) 41,259 1 Contributions, gifts, grants, etc., received (attach schedule) . if the foundation is not required to 2 Check > attach Sch B. 3 Interest on savings and temporary cash investments. 11,745. 11,745. 4 Dividends and interest from securities b Net rental income or (loss) -770 Revenue Net gain or (loss) from sale of assets not on line 10 Gross sales price for all assets on line 6a 86,779. 0. 7 Capital gain net income (from Part IV, line 2) 8 Net short-term capital gain. . Income modifications 10a Gross sales less returns and allowances b Less Cost of goods sold . C Gross profit or (loss) (attach schedule) -871. -1,08211 Other income (attach schedule) ATCH 1. 10,663. 51,363. 12 Total. Add lines 1 through 11 0. 13 Compensation of officers, directors, trustees, etc penses 14 Other employee salaries and wages 15 16 a Reger (affact schedule) 800. 1,600. 800 Accounting fees (attack) chedule)ATCH.2. her professional fees (Attach schedule). Т 270. 18 schedule) (see instructions)[3]. General (attach schedule) and depletion. **D** 20 21 Travel, conferences, and meetings and 22 20. 20. Operating 23 Other expenses (attach schedule) ATCH .4. . 24 Total operating and administrative expenses. 1,890 800 820. Add lines 13 through 23. 13,705 13,705. 25 Contributions, gifts, grants paid 14,525 800. 0. 15,595. 26 Total expenses and disbursements Add lines 24 and 25 Subtract line 26 from line 12 35,768 a Excess of revenue over expenses and disbursements . 9,863. b Net investment income (if negative, enter -0-) c Adjusted net income (if negative, enter -0-). .

JSA For Paperwork Reduction Act Notice, see instructions. 5E1410 1 000

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Form 990-PF

| | art II | Balanco Shoots | Attached schedules and amounts in the description column should be for end-of-year | Beginning of year | E | nd of year |
|--------------|----------|----------------------------------------------|---------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Ш | ai (ii | Datatice Streets | amounts only (See instructions) | (a) Book Value | (b) Book Value | (c) Fair Market Value |
| | 1 | Cash - non-interest-beari | ing | | | |
| | 2 | | cash investments | 3,034. | 71 | 712 |
| | | Accounts receivable ▶ | | "我们是我们是对你们是我们 | Constitution of the second | 经企业的工作的企业 |
| | | Less: allowance for doul | btful accounts ▶ | 1 | | |
| | 4 | Pledges receivable ▶ | | | | |
| | • | | btful accounts ▶ | | | |
| | 5 | | | | | |
| | 6 | | officers, directors, trustees, and other | | | |
| | • | | tach schedule) (see instructions) | ſ | | i i |
| | 7 | | eceivable (attach schedule) | 。1994年中的公司的自由的自由的自由的自由的自由的自由的自由的自由的自由的自由的自由的自由的自由的 | ELECTION OF THE PARTY OF THE PA | HOLD TO THE THE THE |
| | | | btful accounts | | | |
| ស | 8 | | e | | | |
| Assets | 9 | | eferred charges | | | |
| As | 10a | • | e government obligations (attach schedule) | | | |
| | 1 | | stock (attach schedule) ATCH 5 | | 256,08 | 258,016 |
| | | | bonds (attach schedule) ATCH 6 | | | |
| | 11 ° | Investments - land, buildings | s, | | | |
| | } | Less: accumulated depreciation | | , or a little state of the | the same of the sa | Section of the sectio |
| | | (attach schedule) | | | | |
| | 12 13 | Investments - mortgage | floans | 19 197 | 11 65 | 28,590 |
| | 14 | Land, buildings, and | ich schedule) Arofr (| FORSALONI, ESTAMA | 1272/16/16/16/16 | THE CASE OF STATES AND ASSESSED. |
| | | equipment basis Less accumulated deprecia | tion | The state of the s | | |
| | l | (attach schedule) | <u> </u> | | | |
| | | | ATCH 8 | | | |
| | | | completed by all filers - see the age 1, item l) | | 312,08 | 299,076 |
| _ | | | | | 312,00 | Son an arangement will simply used |
| | | | ccrued expenses | | | |
| m | | | • • • • • • • • • • • • • • • • • • • • | 1 | <u> </u> | |
| Liabilities | ľ | | • • • • • • • • • • • • • • • • • • • • | | | |
| iiic | | • | rs, trustees, and other disqualified persons. | | | |
| ja | | | tes payable (attach schedule) | | | |
| _ | 22 | Other liabilities (describe | · >) | | | |
| | | | 47.11 | | | |
| _ | | | s 17 through 22) | 0. | | |
| S | | | ow SFAS 117, check here | | | |
| nces | | • | 24 through 26 and lines 30 and 31. | | | |
| an | 24 | Unrestricted | | | | |
| 3al | 25 | , , | | | | |
| or Fund Bala | 26 | ~ | | | | |
| 'n | | Foundations that do | | | | |
| Ä | | check here and comp | plete lines 27 through 31. | | | |
| S | 27 | Capital stock, trust princ | cipal, or current funds | | <u> </u> | |
| set | 28 | Paid-in or capital surplus, or | land, bldg , and equipment fund | | | |
| Si | 29 | Retained earnings, accumu | lated income, endowment, or other funds | 276,315. | 312,08 | |
| ¥/ | | | balances (see instructions) | 276,315. | 312,08 | 4 - 14 . |
| ž | | | net assets/fund balances (see | | | |
| ┙ | | | | 276,315. | 312,08 | 3. 1 4 4 4 4 4 4 |
| | | | nges in Net Assets or Fund Bala | | - : : | |
| 1 | | | alances at beginning of year - Part | | I | |
| | | | d on prior year's return) | | | <u>1</u> 276,315 |
| | | | line 27a | | · · · · · · · · · · · · · · · · · · · | 2 35,768 |
| | | | • • • • • • • • • • • • • • • • • • • • | | | 3 |
| | | | | | · · · · · · - | 312,083 |
| | | reases not included in | | | | 5 |
| 6 | Tota | net assets or fund ba | alances at end of year (line 4 minus | line 5) - Part II, column (| b), line 30 | 6 312,083 |

| _ | Conital Cains | and Lacas for Tay on Inc | action and Impaging | | | Page J | |
|------------|--------------------------------------------------------------|-------------------------------------------------------------------------------|--------------------------------------------|-----------------------------------------------------|---------------------|------------------|--|
| | | s and Losses for Tax on Invited describe the kind(s) of property sold (| | (b) How | (c) Date | | |
| | | P - Purchase | acquired (mo., day, yr.) | (d) Date sold (mo., day, yr) | | | |
| 4- | SEE PART IV SCHE | prick warehouse; or common stock, 200 | 313. 1123 337 | D - Donation | (IIIO., day, yr.) | (, , , , , , , | |
| <u>1a</u> | DEG PART IV SCHE | DODE | | | | | |
| _ <u>b</u> | | | | | | | |
| _ <u>c</u> | | | | | | | |
| e e | | | | | | | |
| <u>ٽ</u> | | | (h) Gain or (lo | (SS) | | | |
| | (e) Gross sales price | (g) Cost or other basis plus expense of sale | | (e) plus (f) minu | | | |
| _a | | | | | | | |
| b | | | | | | | |
| C | | | | | | | |
| d | | | | | | | |
| е | | | | | | | |
| | Complete only for assets | showing gain in column (h) and owne | d by the foundation on 12/31/69 | (1) | Gains (Col. (h) g | ain minus | |
| | (i) F.M V. as of 12/31/69 | (j) Adjusted basis | (k) Excess of col. (i) | col | (k), but not less t | | |
| | | as of 12/31/69 | over col. (j), if any | | Losses (from co | i. (n)) | |
| _a | | | | | | | |
| _ <u>b</u> | · | | | <u> </u> | | | |
| _ <u>C</u> | | | | | | | |
| <u>d</u> | | | | | | | |
| <u>e</u> | | L | <u> </u> | | | | |
| 2 | Capital gain net income | or (not canital loce) | gain, also enter in Part I, line 7 | | | 770 | |
| - | | , i i i i i i i i i i i i i i i i i i i | (loss), enter -0- in Part I, line 7 | 2 | | -770. | |
| 3 | • - | ain or (loss) as defined in sections a art 1, line 8, column (c) (see inst | | | | | |
| | _ | | 1 | | | 0. | |
| | rt V Qualification l | Under Costion 4040(a) for Da | duced Tax on Net Investment In | 3 | | | |
| Wa | | the section 4942 tax on the distrib | outable amount of any year in the b | ase period | 1? | Yes X No | |
| | | not qualify under section 4940(e). | | | | | |
| 1 | | nount in each column for each yea | r; see the instructions before makin | g any entr | | | |
| Ca | (a) Base period years lendar 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 | 11,798. | 309,228. | | | 0.038153 | |
| | 2013 | 8,475. | 229,790. | | | 0.036882 | |
| | 2012 | 6,750. | 176,249. | | | 0.038298 | |
| | 2011 | 6,081. | 140,991. | | | 0.043130 | |
| | 2010 | 5,051. | 123,809. | | | 0.040797 | |
| | | | | | | | |
| 2 | Total of line 1, column (d | 1) | | 2 | | 0.197260 | |
| 3 | | for the 5-year base period - divid | | | | | |
| | • | ndation has been in existence if les | | 3 | | 0.039452 | |
| | • | | - | | | | |
| 4 | Enter the net value of no | ncharitable-use assets for 2015 fro | om Part X, line 5 | 4 | | 315,164. | |
| | | | | | | • | |
| 5 | Multiply line 4 by line 3. | | | 5 | | 12,434. | |
| | | | | | | | |
| 6 | Enter 1% of net investme | ent income (1% of Part I, line 27b) | | 6 | | 99. | |
| | | ŕ | | | | | |
| 7 | Add lines 5 and 6 | | | 7 | | 12,533. | |
| | | | | | | | |
| 8 | Enter qualifying distribution | ons from Part XII, line 4 | | 8 | | 14,525. | |
| | If line 8 is equal to or grant VI instructions. | reater than line 7, check the box | in Part VI, line 1b, and complete t | hat part | using a 1% tax | rate. See the | |

| | Sector (2016) Market A. 10A, OK. CHARLET COMPATION & SCALE | 12333 | | raye • |
|----------|----------------------------------------------------------------------------------------------------------------------------------|----------|----------|--------------------------------------------------|
| _ | t VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 - see | ınstrı | iction | <u>(s)</u> |
| 1a | Exempt operating foundations described in section 4940(d)(2), check here And enter "N/A" on line 1 | | | |
| | Date of ruling or determination letter (attach copy of letter if necessary - see instructions) | | | |
| b | Domestic foundations that meet the section 4940(e) requirements in Part V, check | | | 99 |
| | here ► X and enter 1% of Part I, line 27b | | | |
| С | All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of \mathcal{J} . | • | , | * * * |
| 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 | | | 99 |
| 4 | Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-) | | | 0 |
| 5 | Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0 | | | 99. |
| 6 | Credits/Payments. | | | |
| а | 2015 estimated tax payments and 2014 overpayment credited to 2015 6a | | | |
| | Exempt foreign organizations - tax withheld at source | | | |
| C | | | | |
| | Backup withholding erroneously withheld | | | , |
| 7 | Total credits and payments. Add lines 6a through 6d | | | 0. |
| 8 | Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached 8 | | | |
| 9 | Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed | | | 99. |
| 10 | Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid. | | | |
| 11 | Enter the amount of line 10 to be: Credited to 2016 estimated tax | | | |
| | t VII-A Statements Regarding Activities | | | |
| | During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it | | Yes | No |
| ıa | participate or intervene in any political campaign? | 1a | 100_ | X |
| h | Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see | <u> </u> | | |
| b | 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 | | | |
| | | | | 1 |
| _ | published or distributed by the foundation in connection with the activities | 1c | •- | X |
| | Did the foundation file Form 1120-POL for this year? | 10 | | ^ |
| a | Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year: | | , | |
| | (1) On the foundation ►\$(2) On foundation managers ►\$ | | | |
| 6 | Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on | ĺ | | ĺ |
| _ | foundation managers > \$ | 2 | | X |
| 2 | Has the foundation engaged in any activities that have not previously been reported to the IRS? | | | _^ |
| | 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 | | | v |
| | incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes | 3 | | X |
| | Did the foundation have unrelated business gross income of \$1,000 or more during the year? | 4a | | X |
| | If "Yes," has it filed a tax return on Form 990-T for this year? | 4b | | X |
| 5 | Was there a liquidation, termination, dissolution, or substantial contraction during the year? | 5 | | _ ^ |
| | 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 | | v | |
| | conflict with the state law remain in the governing instrument? | 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 XV | 7 | Х | |
| | 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 | <u>X</u> | - |
| 9 | Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or | | | 1 |
| | 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 | | X |
| 0 | Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their | | | 1 |

| FOITI | HENRY A. FOX, JR. CHARITABLE FOUNDATION & 38-2/32 | <u> 2333</u> | | age J |
|-------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------|-----------------------------------------|---------------|
| Pa | rt 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 | ł | Yes | No |
| | 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 | | | |
| | perşon had advisory privileges? If "Yes," attach statement (see instructions) | 12 | | Х |
| 13 | Did the foundation comply with the public inspection requirements for its annual returns and exemption application? | 13 | Х | |
| | Website address ► N/A | | | |
| 14 | | <u>-121</u> | 0 | |
| | Located at ► 4494 - 36TH ST. KENTWOOD, MI ZIP+4 ► 49512 | | | |
| 15 | Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - Check here | • • • | 🕨 | · |
| | and enter the amount of tax-exempt interest received or accrued during the year | | \ <u>\</u> | NI. |
| 16 | At any time during calendar year 2015, did the foundation have an interest in or a signature or other authority | 1 | Yes | |
| | over a bank, securities, or other financial account in a foreign country? | 16 | | X |
| | See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes," enter the name of | 1. S. C. | | |
| | the foreign country | 80 P. J. P. | 11.434 | 23.54 |
| Pa | rt VII-B Statements Regarding Activities for Which Form 4720 May Be Required | LEAF-M | Yes | No |
| | File Form 4720 if any item is checked in the "Yes" column, unless an exception applies. | 11 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 | inces 3 | No |
| Та | 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? | | | |
| | (1) and age in the area of a containing at property that a containing a property that are a containing at the containing | 1 1 2 2 2 2 | | |
| | (2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a | | 學學 | |
| | disqualified person? | | | |
| | (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)? | | 作品が | Q H |
| | (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 | | | A Park |
| | termination of government service, if terminating within 90 days.) | | | |
| h | If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations | 10 (5 T) | | |
| - | section 53.4941(d)-3 or in a current notice regarding disaster assistance (see instructions)? | 1b | | |
| | Organizations relying on a current notice regarding disaster assistance check here | 1.377 | 1 1 1 | 403 |
| c | Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that | 177 (1) 173 114 (1) | 100 | 3.44 |
| | were not corrected before the first day of the tax year beginning in 2015? | 1c | | X |
| 2 | Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private | | 7.77 | |
| | operating foundation defined in section 4942(j)(3) or 4942(j)(5)) | 1 | 7.7 X | 37.0 |
| а | At the end of tax year 2015, did the foundation have any undistributed income (lines 6d and | | 13.75 | (3)# * |
| | 6e, Part XIII) for tax year(s) beginning before 2015? Yes X No | 1 2 5 | 1 4 7 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 | K |
| | if "Yes," list the years | (m) fa | 772 E 4 | |
| b | Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2) | 10 miles | | |
| | (relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to | () () () () | تتنت | أنسنا |
| | all years listed, answer "No" and attach statement - see instructions) | 2b | T 20 1 7 7 7 7 | |
| C | If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here | 176 36 | 598 , n | |
| |) | | | |
| 3a | Did the foundation hold more than a 2% direct or indirect interest in any business enterprise | 4.4 | | |
| | at any time during the year? | [3] | | 193 |
| b | If "Yes," did it have excess business holdings in 2015 as a result of (1) any purchase by the foundation or | 1300 | 7 | |
| | disqualified persons after May 26, 1969; (2) the lapse of the 5-year period (or longer period approved by the | 12.1 | 1,1,1,1 | _ |
| | Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest; or (3) the lapse of | 10,5 | 12 | 7. |
| | the 10-, 15-, or 20-year first phase holding period? (Use Schedule C, Form 4720, to determine if the | استثند | | أحنب |
| _ | foundation had excess business holdings in 2015) | 3b | | |
| | Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes? | 4a | | 7 |
| b | Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its | 4b | ند.نشد | X |
| | charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2015? | 1 70 | | 12 |

| Porm | 990-PF (2015) RENKI A. FOA, | OK. CHARLIAD | LE FOUNDATION | a 30- | 2132333 | Page U |
|------|------------------------------------------------------------------------------------------------|---------------------------------------|-----------------------------------|---------------------------------------------|--------------|---------------|
| Pa | rt VII-B Statements Regarding Activities | for Which Form | 4720 May Be Rec | uired (continued) | | |
| 5a | During the year did the foundation pay or incur any amo | ount to | | | | } |
| | (1) Carry on propaganda, or otherwise attempt to influe | ence legislation (section | on 4945(e))? | Yes X No | . | |
| | (2) Influence the outcome of any specific public ele | ection (see section | 4955); or to carry or | ı, | | ` ; |
| | directly or indirectly, any voter registration drive? | • | · · · · · · | | .]] | |
| | (3) Provide a grant to an individual for travel, study, or o | | | | | |
| | (4) Provide a grant to an organization other than a | | | • — — — | | , |
| | | | | | . ' | |
| | section 4945(d)(4)(A)? (see instructions) (5) Provide for any purpose other than religious, cl | | | . — — | ' | |
| | | | | | _ | ; |
| | purposes, or for the prevention of cruelty to children | | | . — | i i | , |
| þ | If any answer is "Yes" to 5a(1)-(5), did any of the | | • | | 1 1 | \ |
| | Regulations section 53.4945 or in a current notice regar | | | | · 5b | |
| | Organizations relying on a current notice regarding disa | | | | <u> </u> | 1 |
| С | If the answer is "Yes" to question 5a(4), does the | | | | | |
| | because it maintained expenditure responsibility for the | | • • • • • • • • • • | Yes No | P | |
| | If "Yes," attach the statement required by Regulations se | | | | | . |
| 6a | Did the foundation, during the year, receive any fur | | | | | ; |
| | on a personal benefit contract? | | | | • . | , |
| b | Did the foundation, during the year, pay premiums, dire | ectly or indirectly, on a | personal benefit contra | act? | . 6b | X |
| | If "Yes" to 6b, file Form 8870. | | | | | |
| 7a | At any time during the tax year, was the foundation a p | arty to a prohibited ta | x shelter transaction?. | . Yes X No |) | |
| b | If "Yes," did the foundation receive any proceeds or have | | | | | |
| Pa | Information About Officers, Directors | rs, Trustees, Fou | Indation Managers | s, Highly Paid Emp | oloyees, | |
| 1 | List all officers, directors, trustees, foundation n | nanagers and their | r compensation (see | instructions). | | |
| | (a) Name and address | (b) Title, and average hours per week | (c) Compensation (if not paid, | (d) Contributions to employee benefit plans | (e) Expense | account, |
| | (a) Name and address | devoted to position | enter -0-) | and deferred compensation | other allo | wances |
| | | | | | | |
| ATC. | н 9 | | 0. | 0. | | 0. |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| 2 | Compensation of five highest-paid employees "NONE." | (other than thos | e included on line | e 1 - see instructi | ons). If no | ne, enter |
| | Name and address of such and | (b) Title, and average | (2) (2 | (d) Contributions to employee benefit | (e) Expense | e account. |
| (a) | Name and address of each employee paid more than \$50,000 | hours per week devoted to position | (c) Compensation | plans and deferred compensation | other allo | |
| | | | | Compensation | | |
| | NONE | | | | | |
| | 140141 | | | | | |
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| | | | | L | | |
| otal | number of other employees paid over \$50,000 | <i> <u></u> .</i> | <u> </u> | <u> ▶</u> | | |

| Part V | Information About Officers, Directors, Trustees, Foundation Management (Contractors (continued)) | nagers, Highly Paid Emplo | yees, |
|-------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------|-------------------------|
| 3 F | ve highest-paid independent contractors for professional services (see ins | tructions). If none, enter "NON | E." |
| | (a) Name and address of each person paid more than \$50,000 | (b) Type of service | (c) Compensation |
| | | | |
| NC | NE | | |
| | | | |
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| | | | |
| | | | |
| Total nu | mber of others receiving over \$50,000 for professional services | | |
| Part I | | | |
| List the | foundation's four largest direct charitable activities during the tax year. Include relevant statistical ations and other beneficiaries served, conferences convened, research papers produced, etc | Information such as the number of | Expenses |
| 1 N/ | A | | |
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| 2 | | | |
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| 3 | | | |
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| 4 | | | |
| | | | |
| Part IX | B Summary of Program-Related Investments (see instructions) | | <u> </u> |
| | e the two largest program-related investments made by the foundation during the tax year on lines 1 | and 2 | Amount |
| 1 NC | | | |
| | | | |
| | | | |
| 2 | | | |
| | | | |
| | | | |
| | r program-related investments. See instructions | | |
| 3 NO | NE | | |
| - | | | |
| Tatal ^ | id lines 1 through 3 | | |
| iotal. A | au mies i unougho, | | Form 990-PF (201 |

Page 8

| Par | Minimum Investment Return (All domestic foundations must complete this part. For see instructions.) | eign foundation | ons, |
|-----|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------|----------------------|
| 1 | Fair market value of assets not used (or held for use) directly in carrying out charitable, etc. | ., | |
| | purpoşes: | | |
| a | Average monthly fair market value of securities | 1a | 314,889. |
| | Average of monthly cash balances | | 5,074. |
| C | Fair market value of all other assets (see instructions) | 1c | |
| þ | Total (add lines 1a, b, and c) | 1d | 319,963. |
| е | | | |
| | 1c (attach detailed explanation) | | |
| 2 | Acquisition indebtedness applicable to line 1 assets | 2 | |
| 3 | Subtract line 2 from line 1d | 3 | 319,963. |
| 4 | Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see | e | |
| | instructions) | . 4 | 4,799. |
| 5 | Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4 | 1 5 | 315,164. |
| _6_ | Minimum investment return. Enter 5% of line 5 | . 6 | 15,758. |
| Par | TXI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating for and certain foreign organizations check here ▶ □ and do not complete this part.) | undations | |
| 1 | Minimum investment return from Part X, line 6 | . 1 | 15,758. |
| 2a | | 9. | |
| b | |]. [| |
| С | | 2c | 99. |
| 3 | Distributable amount before adjustments. Subtract line 2c from line 1 | . 3 | 15,659. |
| 4 | Recoveries of amounts treated as qualifying distributions | | |
| 5 | Add lines 3 and 4 | | 15,659. |
| 6 | Deduction from distributable amount (see instructions). | | |
| 7 | Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XII | | |
| | line 1 | 1 1 | 15,659. |
| Par | t XII Qualifying Distributions (see instructions) | | |
| 1 | Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes: | | |
| | Expenses, contributions, gifts, etc total from Part I, column (d), line 26 | | 14,525. |
| þ | 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 | | |
| 3 | Amounts set aside for specific charitable projects that satisfy the: | 1 1 | |
| а | Suitability test (prior IRS approval required) | . 3a | |
| b | | . 3b | |
| 4 | Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line | · · · · · · · · · · · · · · · · · · · | 14,525. |
| 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 | 99. |
| 6 | Adjusted qualifying distributions. Subtract line 5 from line 4 | . 6 | 14,426. |
| | Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when qualifies for the section 4940(e) reduction of tax in those years. | calculating wh | ether the foundation |

Page 9

| Pa | rt XIII Undistributed Income (see instr | uctions) | | | |
|----|---------------------------------------------------------------------------------------|---------------|----------------------------|-------------|-----------------|
| 4 | Distributable amount for 2015 from Part XI, | (a) Corpus | (b) Years prior to 2014 | (c) 2014 | (d) 2015 |
| ٠ | • | | | | 15,659. |
| _ | line 7 | | | | 20,0031 |
| _ | Undistributed income, if any, as of the end of 2015. | | | 13,687. | 1 |
| | Enter amount for 2014 only | | | , 13,007. | |
| | Total for prior years: 20 13 ,20 12 ,20 11 | | | | |
| | Excess distributions carryover, if any, to 2015. | | e | * . | 1 |
| | From 2010 | | | | , |
| | From 2011 | | | , | |
| | From 2012 | | | | |
| | From 2013 | | | | ı |
| | From 2014 | 0. | | | |
| | Total of lines 3a through e | <u> </u> | | | ` |
| 4 | Qualifying distributions for 2015 from Part XII, | | • | | • |
| | line 4: ▶ \$14,525. | | , 1 | 12 607 | , |
| а | Applied to 2014, but not more than line 2a | | | 13,687. | |
| b | Applied to undistributed income of prior years (Election required - see instructions) | | | , | |
| _ | Treated as distributions out of corpus (Election | | , | | , |
| ٠ | required - see instructions) | | | | |
| d | Applied to 2015 distributable amount | | | - | 838. |
| | Remaining amount distributed out of corpus | | | | |
| | Excess distributions carryover applied to 2015 | | | | |
| | (If an amount appears in column (d), the same | | | | (|
| _ | amount must be shown in column (a)) Enter the net total of each column as | | • | | , , |
| ь | indicated below: | | | İ | |
| а | Corpus Add lines 3f, 4c, and 4e. Subtract line 5 | | , | | , |
| | Prior years' undistributed income. Subtract | | | | |
| D | line 4b from line 2b | | | | |
| 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 | | | | |
| | Subtract line 6c from line 6b Taxable | | | | |
| a | amount - see instructions | | | | |
| е | Undistributed income for 2014. Subtract line | | | | |
| | 4a from line 2a Taxable amount - see | | | | |
| | instructions | | | | |
| f | Undistributed income for 2015. Subtract lines | | | | |
| | 4d and 5 from line 1 This amount must be distributed in 2016 | | | | 14,821. |
| 7 | Amounts treated as distributions out of corpus | | | | |
| ′ | to satisfy requirements imposed by section | | | | 1 |
| | 170(b)(1)(F) or 4942(g)(3) (Election may be | | | | |
| | required - see instructions) | | | | |
| _ | Excess distributions carryover from 2010 not | | | | |
| 8 | applied on line 5 or line 7 (see instructions) | | | | |
| 0 | Excess distributions carryover to 2016. | | | | |
| y | Subtract lines 7 and 8 from line 6a | 0. | | | |
| 10 | Analysis of line 9 | | | | |
| | Excess from 2011 | | | | |
| | Excess from 2012 | | | | |
| | Excess from 2013 | | | | |
| | Excess from 2014 | | | | |
| | Excess from 2015 | | | | |
| | | | | ·- · · | 5 000 DE (0045) |

| Pa | rt XIV Private Op | erating Foundations | s (see instructions a | nd Part VII-A, ques | tion 9) | NOT APPLICABI |
|-----|----------------------------------------------------------------------------------------------|------------------------------------------------|-----------------------------------------------|----------------------------------------------|-------------------------------------------------|---------------------------------------------|
| 1 a | If the foundation has | | | | - 1 | |
| | foundation, and the rulin | | | | —————————————————————————————————————— | 1/01 |
| b | Check box to indicate | | is a private operating | | in section 4942(| j)(3) or 4942(j)(5) |
| 2 a | Enter the lesser of the ad- | Tax year | (h) 004 4 | Prior 3 years | 40040 | (e) Total |
| | justed net income from Part I or the minimum investment | | (b) 2014 | (c) 2013 | (d) 2012 | |
| | return from Part X for each | | | | | |
| | year listed | | | | | |
| b | 85% of line 2a | | | ļ | - | |
| С | Qualifying distributions from Part | | | | 1 | |
| | XII, line 4 for each year listed . | | | | | |
| ď | Amounts included in fine 2c not used directly for active conduct of exempt activities | | | | | |
| θ | Qualifying distributions made directly for active conduct of exempt activities Subtract line | | | | | |
| 3 | 2d from line 2c Complete 3a, b, or c for the | | | | | |
| • | alternative test relied upon | | | | | |
| а | "Assets" alternative test - enter | | | į. | | İ |
| | (1) Value of all assets | | | | - | |
| | (2) Value of assets qualifying under section | | | | | |
| h | 4942(j)(3)(B)(i) | | | | | |
| _ | enter 2/3 of minimum invest- | | | | | |
| | ment return shown in Part X, | | | | | |
| _ | line 6 for each year listed | | | | | |
| C | "Support" alternative test - enter (1) Total support other than | i | | | | |
| | gross investment income | | | | | |
| | (interest, dividends, rents, payments on securities | | | | | |
| | loans (section 512(a)(5)), | | | | | |
| | or royalties). | <u> </u> | | | - | |
| | (2) Support from general public and 5 or more | | | | | |
| | exempt organizations as provided in section 4942 | | | | | |
| | (j)(3)(B)(ui) | | | | | <u> </u> |
| | (3) Largest amount of sup- port from an exempt | | | | | İ |
| | organization | | | | | |
| Pai | | ntary Information (| Complete this part | only if the founda | ation had \$5,000 o | r more in assets a |
| | any time d | uring the year - see | instructions.) | | | |
| | Information Regarding List any managers of | - | | a than 20/ of the tai | tal contributions rocci | und by the foundation |
| а | before the close of any | tax year (but only if th | ey have contributed r | nore than \$5,000). (\$ | See section 507(d)(2).) | ved by the foundation |
| | ATTACHME | NT 10 | | | | |
| | List any managers of | | | | | y large portion of the |
| | ownership of a partner | snip or other entity) of | which the foundation | i nas a 10% or greate | er interest. | |
| | 27 / 7 | | | | | |
| 2 | N/A Information Regarding | Contribution Grant | Gift Loan Scholarsh | in etc Programs: | | |
| | | _ | | • • • | | |
| | Check here ► X if to unsolicited requests for | he foundation only i or funds. If the found | makes contributions ation makes gifts, gra | to preselected cha ants, etc. (see instru | ritable organizations octions) to individuals o | and does not accep or organizations unde |
| | other conditions, comp | olete items 2a, b, c, an | d d. | | | |
| а | The name, address, a | nd telephone number | or e-mail address of t | he person to whom a | pplications should be ad | dressed: |
| | | | | | | |
| b | The form in which app | lications should be sul | omitted and information | on and materials they | should include: | |
| | | | | | | |
| С | Any submission deadle | nes: | | | | |
| | | | | | | |
| d | Any restrictions or lu | mitations on awards. | such as by geogra | aphical areas, charit | able fields, kinds of | institutions, or othe |
| | factors: | • | , , , | , | , | , =: = |

Page **11**

| Part XV Supplementary Information (| ng the Veer or Appr | avad for E | Euturo Baymont | |
|------------------------------------------------------------------------------------|----------------------------------------------------|-------------|----------------------------------|---------|
| 3 Grants and Contributions Paid Duri | If recipient is an individual, | Foundation | -uure Payment | |
| 3 Grants and Contributions Paid Duri Recipient Name and address (home or business) | show any relationship to any foundation manager | status of | Purpose of grant or contribution | Amount |
| a Paid during the year | or substantial contributor | recipient | | |
| a Tara daring the year | | | | |
| ATCH 11 | | | | |
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| Total | <u></u> | · · · · · · | | 13,705. |
| b Approved for future payment | | <u> </u> | | |
| 2 Approved for factor paymont | | | | |
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| Total | | | | |
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| | is of Income-Prod | , | | | | |
|----------------------------------|----------------------------------------|----------------------|-----------------------------------------|-----------------------|---------------------------------------|----------------------------------------|
| Enter gross amounts unless | otherwise indicated. | Unrel | ated business income | Excluded by | y section 512, 513, or 514 | (e) Related or exempt |
| Program service revenue | | (a) Business code | (b) Amount | (c) Exclusion code | (d) Amount | function income (See instructions) |
| a | | | | | | |
| b | | | | | | |
| c | | | | | | |
| d | | | | | | |
| | | | | | | |
| f | | | | | | |
| g Fees and contracts from | n government agencies | | | | | |
| 2 Membership dues and as | sessments | | | | | |
| 3 Interest on savings and temp | | | | <u> </u> | | |
| 4 Dividends and interest from | om securities | | | 14 | 11,745. | |
| 5 Net rental income or (loss | s) from real estate: | | | | | |
| a Debt-financed propert | ty | | | | | |
| b Not debt-financed pro | operty | | | ļ | | |
| 6 Net rental income or (loss) f | rom personal property | | | | | |
| 7 Other investment income | | | | 1.0 | 770 | |
| 8 Gain or (loss) from sales of a | assets other than inventory | | | 18 | - 770. | |
| 9 Net income or (loss) from | • | | | | | · |
| 10 Gross profit or (loss) from | | | | | | |
| 11 Other revenue a | ·-···································· | | 071 | | | |
| b ATCH 12 | | | -871. | | | |
| c | | | | | | |
| d | - | | | | | |
| e |) (d) and (a) | | -871. | | 10,975. | - |
| 13 Total. Add line 12, colum | | | | | | |
| (See worksheet in line 13 in: | | | | | | |
| | | | ccomplishment of Ex | empt Pur | ooses | |
| I * | · | • | • | - | e) of Part XVI-A contribution | • |
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Information Regarding Transfers To and Transactions and Relationships With Noncharitable Part XVII

| | | Exempt Orga | nizations | | | | | • | | | | |
|----------|--------------|------------------------------|--------------------------------------------------|-----------------------------------------------------------------------|-----------|--------------|----------------|--------------|-------------------|---------------------|-------------|-------------|
| | | _ | • | engage in any of the | | - | _ | | | | Yes | No |
| | | • • | ode (other than | section 501(c)(3) org | anization | s) or in se | ction 527, | relating | to political | | | |
| | | izations? | na foundation to | a noncharitable exen | ant organ | uzation of: | | | | | | |
| | | · | - | | | | | | | 1a(1) | | x ' |
| | | | | · · · · · · · · · · · · · · · · · · · | | | | | | 1a(2) | | X |
| | | transactions: | | | | | | | | 14(2) | | , |
| (| 1) Sa | les of assets to a no | oncharitable exe | mpt organization | | | | | | 1b(1) | | х |
| Ċ | 2) Pu | rchases of assets fr | om a nonchariti | able exempt organization | on | | | | | 1b(2) | | Х |
| (: | 3) Re | ental of facilities, equ | uipment, or other | assets | | | | | | 1b(3) | | Х |
| | | | | | | | | | | | | Х |
| (| 5) Lo | ans or loan guarante | es | | | | | | | 1b(5) | | X |
| | | | | hip or fundraising solici | | | | | | | | X |
| | | | | sts, other assets, or paids," complete the follows: | | | | | | | fair m | |
| | | | | ices given by the rep | | | | | | | | |
| | | | | gement, show in colu | | | | | | | | |
| (a) Line | no. | (b) Amount involved | (c) Name of | noncharitable exempt organi | zation | (d) Descr | ption of trans | fers, transa | ctions, and shar | ing arra | ingemei | nts |
| | | N/A | | | | N/A | | | | | | |
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| | | f1-1'1'1'1 | 1 | 612-1-1-211- | | | | 4 | 4! | | | |
| | | | | filiated with, or relate ther than section 501(| | | | | | \neg \checkmark | s X |] No |
| | | | | ther than section 50 f(| | in section : | 5277 | • ,• • • • | L | | :S [_^_ |] 140 |
| | 103 | (a) Name of organization | | (b) Type of orga | | 1 | | (c) Descrip | tion of relations | hip | | |
| | | | | | | | | | | <u> </u> | | |
| | | | | | | | | | | | | |
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| | - | | | | | | | | | | | |
| | T 11 - 3 | | | | | | -11- | 4- 4b- b-4 | -f (| | -14 .4 | |
| | | | | ned this return, including acco axpayer) is based on all informati | | | | to the best | | e and b | енет, п | is true, |
| Sign | . | / None / sho | 2h 1/2 | 05/15/201 | 6 | мемвен |) | | May the IRS | | | return |
| Here | Sin | nature of officer or trustee | | Date | <u> </u> | Title | ` | | (see instructions | parer s | Yes | below No |
| | J Oigi | natare organicer of audice | | Duito | | 11.10 | | | (See Instructions | 71 [23 |] 103 [_ | |
| | | Print/Type preparer's na | ame | Preparer's signature | 2016 | .05.12 | Date | | neck of P | NIT | | |
| Paid | | CHUCK FRAYER | | Carla St | 08·5 | R·07 -04' | 005/11/2 | | | 006 | 5469 | 1 |
| Prepa | | Firm's name ► CF | ROWE HORWAT | H LLP | | J.U. T | | Firm's Ell | N ▶35-09 | 2168 | 30 | |
| Use C | nly | Firm's address ► 55 | CAMPAU AV | E NW SUITE 500 | | | | | | | | |
| | | GF | RAND RAPIDS | , MI | | 4950 | 3-2642 | Phone no | | | | |
| | | | | | | | | | For | m 990 |)-PF (| 2015) |

HENRY A. FOX, JR. CHARITABLE FOUNDATION &

FORM 990-PF - PART IV
CAPITAL GAINS AND LOSSES FOR TAX ON INVESTMENT INCOME

| Kınd of | Kind of Property Description | | Kınd of Property | | erty Description | | | PoD | Date acquired | Date sold |
|----------------------------------------------|---------------------------------------|------------------------|---------------------------------------------|--------------------------------|------------------------------|--|-----------------------|-----------|---------------|-----------|
| Gross sale price less expenses of sale | Depreciation allowed/ allowable | Cost or other basis | FMV as of 12/31/69 | Adj basis as of 12/31/69 | Excess of FMV over adj basis | | Gain or (loss) | | | |
| | | PARTNERSHIP | TERM COMMON , S CORPORA' TRUST GAIN (| rion, and or | | | 272. | | | |
| i | i | TOTAL CAPIT | AL GAIN DIS | TRIBUTIONS | | | 1,259. | | | |
| 4,273. | | CSI COMPRES 7,999. | SCO LP COM | | | | 08/19/2014 -2,674. | 08/10/201 | | |
| 82,506. | | RAYMOND JAM 82,133. | ES LONG TERN | 1 | | | VAR 373. | VAR | | |
| OTAL GAIN(L | oss) | | • • • • • • • • • • • • • • • • • • • • | | | | <u>-770.</u> | | | |
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Schedule B

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

Name of the organization

Schedule of Contributors

OMB No 1545-0047

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

Department of the Treasury
Internal Revenue Service

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

Employer identification number

| HENRY A. FOX, JR. CHAR | | 00 000000 | | |
|--------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------|--|--|
| KATHLEEN O'BRIEN FOX CHARITABLE FOUNDATION 38-2732553 | | | | |
| 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 four | ndation | | |
| | 527 political organization | | | |
| Form 990-PF | X 501(c)(3) exempt private foundation | | | |
| | 4947(a)(1) nonexempt charitable trust treated as a private foundate | ion | | |
| | 501(c)(3) taxable private foundation | | | |
| | ered by the General Rule or a Special Rule. 8), or (10) organization can check boxes for both the General Rule and a S | pecial Rule. See | | |
| General Rule | | | | |
| | ng Form 990, 990-EZ, or 990-PF that received, during the year, contributoroperty) from any one contributor. Complete Parts I and II. See instruction ributions. | | | |
| Special Rules | | | | |
| regulations under secti 13, 16a, or 16b, and th | scribed in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/cons 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 contributor, during the year, total contributions amount on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1. Co | or 990-EZ), Part II, line of the greater of (1) | | |
| contributor, during the | scribed in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that re year, total contributions of more than \$1,000 exclusively for religious, cha purposes, or for the prevention of cruelty to children or animals. Complete | aritable, scientific, | | |
| contributor, during the contributions totaled m during the year for an e | scribed in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that reger, contributions exclusively for religious, charitable, etc., purposes, but ore than \$1,000. If this box is checked, enter here the total contributions exclusively religious, charitable, etc., purpose. Do not complete any of the or this organization because it received nonexclusively religious, charitable, eduring the year | t no such that were received parts unless the , etc., contributions | | |
| Caution. An organization that is r | not covered by the General Rule and/or the Special Rules does not file So Inswer "No" on Part IV, line 2, of its Form 990; or check the box on line H | chedule B (Form 990, | | |

Form 990-PF, Part I, line 2, to certify that it does not meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

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) (2015)

Name of organization HENRY A. FOX, JR. CHARITABLE FOUNDATION & KATHLEEN O'BRIEN FOX CHARITABLE FOUNDATION

Employer identification number 38-2732553

| Part I | Contributors (see instructions). Use duplicate cop | ies of Part I if additional space is no | eeded. |
|------------|---------------------------------------------------------------------|-----------------------------------------|-----------------------------------------------------------------------------|
| (a) No. | (b) Name, address, and ZIP + 4 | (c) Total contributions | (d) Type of contribution |
| 1 | HENRY A. FOX JR. 19573 NORTH SHORE DRIVE SPRING LAKE, MI 49456 | \$\$ 37,152. | Person X Payroll X Noncash X (Complete Part II for noncash contributions.) |
| (a) No. | (b) Name, address, and ZIP + 4 | (c) Total contributions | (d) Type of contribution |
| 2 | HENRY A. FOX SALES COMPANY 4494-36TH STREET SE KENTWOOD, MI 49512 | \$\$ | 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 Noncash (Complete Part II for noncash contributions) |
| (a) No. | (b) Name, address, and ZIP + 4 | (c) Total contributions | (d) Type of contribution |
| | | \$ | Person Payroll Noncash (Complete Part II for noncash contributions) |
| (a) No. | (b) Name, address, and ZIP + 4 | (c) Total contributions | (d) Type of contribution |
| | | \$ | Person Payroll Noncash (Complete Part II for noncash contributions.) |

Name of organization HENRY A. FOX, JR. CHARITABLE FOUNDATION & KATHLEEN O'BRIEN FOX CHARITABLE FOUNDATION

Employer identification number 38-2732553

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

| (a) No. from Part I | (b) Description of noncash property given | (c) FMV (or estimate) (see instructions) | (d) Date received |
|---------------------------|----------------------------------------------|------------------------------------------|----------------------|
| 1 | 800 SHS FORD MOTOR COMPANY | | |
| | | \$\$. | 10/21/2015 |
| a) No. from Part I | (b) Description of noncash property given | (c) FMV (or estimate) (see instructions) | (d) Date received |
| 2 | 400 SHS JP MORGAN | | |
| | | \$\$ | 10/21/2015 |
| 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 |
| <u> </u> | | | |
| _ | | \$ | |

Employer Identification number

Name of organization HENRY A. FOX, JR. CHARITABLE FOUNDATION &

| | KATHLEEN O'BRIEN FOX (| | | 38-2732553 | | | |
|-----------------|------------------------------------------|-------------------------|-----------------------|-------------------------------------------------|--|--|--|
| Part III | Exclusively religious, charitable, etc | | | | | | |
| | (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 organizat | tions completing Par | t III, enter the tota | I of exclusively religious, charitable, etc., | | | |
| • | contributions of \$1,000 or less for th | ne year. (Enter this in | formation once. | See instructions.) ► \$ | | | |
| | Use duplicate copies of Part III if addi | tional space is need | ed. | • | | | |
| (a) No. from | | | | | | | |
| from Part I | (b) Purpose of gift | (c) Use | of gift | (d) Description of how gift is held | | | |
| , 41, 1 | | | | | | | |
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| | | | | | | | |
| | | (e) Transf | or of aift | | | | |
| | | (6) 1141131 | ci oi giit | | | | |
| | Transferee's name, address, a | nd 7ID + A | Pelati | onship of transferor to transferee | | | |
| | Transfere s manie, address, a | IIU ZIF + 4 | Neiau | onship of transferor to transferee | | | |
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| | | | - | | | | |
| | | | | | | | |
| (a) No. | | | | T | | | |
| from | (b) Purpose of gift | (c) Use | of gift | (d) Description of how gift is held | | | |
| Part I | | | | <u> </u> | | | |
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| | | <u></u> | | | | | |
| | | (e) Transf | er of gift | | | | |
| | | | | | | | |
| | Transferee's name, address, a | nd ZIP + 4 | Relation | elationship of transferor to transferee | | | |
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| | | | | | | | |
| (a) No. from | (b) Purpose of gift | (c) Use | of gift | (d) Description of how gift is held | | | |
| Part I | (-, | (-, | | | | | |
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| | | (e) Transf | er of gift | | | | |
| | | | | | | | |
| | Transferee's name, address, a | nd ZIP + 4 | Relation | onship of transferor to transferee | | | |
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| | | | | | | | |
| | | | | | | | |
| (a) No. from | (b) Purpose of gift | (c) Use | of aift | (d) Description of how gift is held | | | |
| Part I | (b) i dipose oi giit | (0) 000 | | (a) Description of new gire is field | | | |
| | | | | | | | |
| | | | | | | | |
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| | | (e) Transf | er of gift | | | | |
| | | | | | | | |
| | Transferee's name, address, a | nd ZIP + 4 | Relation | onship of transferor to transferee | | | |
| | | | | | | | |
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| | | | | | | | |
| | | | | Schedule B (Form 990, 990-EZ, or 990-PF) (2015) | | | |

OTHER INCOME

PART I

FORM 990PF,

| ERPRISE PRODUCTS PARTNERS | IANCE RESOURCE PARTNERS LP | ORIAL PRODUCTION PARTNERS LP | COMPRESSCO LP | RUS INVESTMENT CLUB | S - PRIOR YEAR SUSPENDED |
|---------------------------|------------------------------|------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------|
| ENTERPE | ALLIANC | MEMORIA | CSI COM | TAURUS | PALS - |
| | ENTERPRISE PRODUCTS PARTNERS | DESCRIFITON ENTERPRISE PRODUCTS PARTNERS ALLIANCE RESOURCE PARTNERS LP | DESCRIPTION ENTERPRISE PRODUCTS PARTNERS ALLIANCE RESOURCE PARTNERS LP MEMORIAL PRODUCTION PARTNERS LP | ENTERPRISE PRODUCTS PARTNERS ALLIANCE RESOURCE PARTNERS LP MEMORIAL PRODUCTION PARTNERS LP CSI COMPRESSCO LP | ENTERPRISE PRODUCTS PARTNERS ALLIANCE RESOURCE PARTNERS LP MEMORIAL PRODUCTION PARTNERS LP CSI COMPRESSCO LP TAURUS INVESTMENT CLUB |

TOTALS

| NET INVESTMENT TNCOME | 424. | -924. | 155. | -409. | -88- | -240. |
|-----------------------------------------|--------|-------|------|-------|------|-------|
| REVENUE AND EXPENSES PFR ROOKS | CALOUT | -950. | 155. | -412. | .881 | |

| FEES | |
|------------|---|
| ACCOUNTING | |
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| \vdash | |
| PART | |
| 990PF, | |
| ORM | l |

| CHARITABLE PURPOSES | 800. | 800. |
|-----------------------------------------|----------------------|--------|
| ADJUSTED NET INCOME | | |
| NET INVESTMENT INCOME_ | 800. | 800. |
| REVENUE AND EXPENSES PER BOOKS | 1,600. | 1,600. |
| | | TOTALS |
| DESCRIPTION | TAX PREPARATION FEES | |

FORM 990PF, PART I - TAXES

REVENUE AND EXPENSES

DESCRIPTION

PER BOOKS

990-PF EXCISE TAX

270.

TOTALS

270.

HENRY A. FOX, JR. CHARITABLE FOUNDATION &

- OTHER EXPENSES

PART I

FORM 990PF,

REVENUE AND EXPENSES PER BOOKS

CHARLIAN PURPOSES 20. CHARITABLE

20.

ATTACHMENT 4 PAGE 22

TOTALS DESCRIPTION MI ANNUAL REPORT FEE

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> PART II - CORPORATE STOCK FORM 990PF,

DESCRIPTION

RAYMOND JAMES EQUITIES

BOOK VALUE ENDING

ENDING FMV

256,081.

258,016.

TOTALS

256,081.

258,016.

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- CORPORATE BONDS PART II FORM 990PF,

HENRY A. FOX, JR. CHARITABLE FOUNDATION &

DESCRIPTION

RAYMOND JAMES CORPORATE BONDS

BOOK VALUE ENDING

ENDING FMV

10,636.

11,758.

TOTALS

10,636.

11,758.

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OTHER INVESTMENTS ı PART II FORM 990PF,

RAYMOND JAMES PTPS TAURUS INVESTMENT CLUB DESCRIPTION

BOOK VALUE ENDING

ENDING FMV

29,367. 15,287.

19,163. 9,427.

44,654.

28,590.

TOTALS

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> OTHER ASSETS PART II FORM 990PF,

DESCRIPTION

FMV > BASIS JP MORGAN FMV > DONOR'S ADJ BASIS OTHER

TOTALS

BOOK VALUE ENDING

ENDING

NONE.

NONE.

ATTACHMENT 8 PAGE 26

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ATTACHMENT

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FORM 990PF, PART VIII - LIST OF OFFICERS, DIRECTORS, AND TRUSTEES

HENRY A. FOX, JR. CHARITABLE FOUNDATION &

NAME AND ADDRESS

TITLE AND AVERAGE HOURS PER WEEK DEVOTED TO POSITION

HENRY A FOX JR

PRESIDENT/DIRECTOR/TREASURER

4494 36TH STREET KENTWOOD, MI 49512

ELIZABETH ANNE FOX LATCHFORD

VP/DIRECTOR/SECRETARY

KENTWOOD, MI 49512

4494 36TH ST SE

GRAND RAPIDS, MI 49572 WILLIAM O'BRIEN FOX 4494 36TH ST SE

DIRECTOR

FORM 990PF, PART XV - INFORMATION REGARDING FOUNDATION MANAGERS

HENRY A. FOX, JR. KATHLEEN O'BRIEN FOX

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

V 15-4.5F

PAGE 29 ATTACHMENT 11

.009 .009 13, 705 10,000. 2,500. AMOUNT TOTAL CONTRIBUTIONS PAID GENERAL SUPPORT FOR CHARITABLE OPERATIONS PURPOSE OF GRANT OR CONTRIBUTION CHARITABLE CONTRIBUTION PROGRAM SUPPORT PROGRAM SUPPORT PROGRAM SUPPORT RELATIONSHIP TO SUBSTANTIAL CONTRIBUTOR FOUNDATION STATUS OF RECIPIENT NONE NONE NONE NONE NONE E E PC FROM PASSTHROUGH - ALLIANCE RESOURCE PARTNERS SPRING JUNIOR SAILING ASSOCIATION RECIPIENT NAME AND ADDRESS O-1859 LAKE MICHIGAN DR NW FORGOTTEN MAN MINISTRIES 3940 FRUIT RIDGE AVE NW GRAND RAPIDS, MI 49544 GRAND RAPIDS, MI 49534 SPRING LAKE, MI 49456 4646 DIVISION AVE S INDIAN TRAILS CAMP PAWS WITH A CAUSE WAYLAND, MI 49348 TULSA, OK 74121 P.O. BOX 22027 P.O. BOX 444

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| REVENUE |
| OTHER |
| OF |
| ANALYSIS OF OT |
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| RT XVI-A |
| PART |
| 990-PF, |
| FORM |

| DESCRIPTION | BUSINESS CODE | AMOUNT | CODE | AMOUNT | RELATED OR EXEMPT FUNCTION INCOME |
|-------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------|--------------------------------|------|--------|-----------------------------------|
| ENTERPRISE PRODUCTS PARTNERS ALLIANCE RESOURCE PARTNERS LP MEMORIAL PRODUCTION PARTNERS LP CSI COMPRESSCO LP TAURUS INVESTMENT CLUB | 660006 660006 660006 660006 | 424. -950. 155. -412. | | | |
| TOTALS | 1 11 | -871. | | | |