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EXTENDED TO AUGUST 15, 201
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 separate instructions is at www.irs.gov/form990pf.

Department of the Treasury Internal Revenue Service Do not enter social security numbers on this form as it may be made public. Information about Form 990-PF and its separate instructions is at www.irs.gov/form990pf.								
_		endar year 2015 or tax year beginning	and its separate in	, and ending	s.govnormaaopt.	Open to Public Inspection		
		of foundation		, und onding	A Employer identification number			
						, named		
		LDPAUSCH FOUNDATION			38-3417534	4		
		and street (or P O box number if mail is not delivered to street	et address)	Room/suite	B Telephone number			
		34 WELLINGTON PLACE		 	269-968-95			
		town, state or province, country, and ZIP or foreign CTLE CREEK, MI 49017	postal code		C If exemption application is	pending, check here		
		k all that apply: Initial return	Initial return of a form	oor public shows				
•	0.,00	Final return	Amended return	public charity	D 1. Foreign organization	s, check here		
		Address change	Name change		Foreign organizations m check here and attach c	eeting the 85% test,		
Н	Chec	k type of organization: X Section 501(c)(3) e	xempt private foundation		E If private foundation sta			
		ection 4947(a)(1) nonexempt charitable trust	Other taxable private foundation	on	under section 507(b)(1)(A), check here		
		1 —	ing method: X Cash	Accrual	F If the foundation is in a			
			ther (specify)		under section 507(b)(1			
	<u>►\$</u> art l	2,613,822. (Part I, cold	 	+ 7				
	ai t	(The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a)	(a) Revenue and expenses per books	(b) Net investment income	(c) Adjusted net income	(d) Disbursements for charitable purposes (cash basis only)		
	1	Contributions, gifts, grants, etc., received	2,000.		N/A			
	2	Check If the foundation is not required to attach Sch. B						
	4	Interest on savings and temporary cash investments	62 174	60 454				
	1 .	Dividends and interest from securities Gross rents	63,174.	63,174.	 	STATEMENT 1		
		Net rental income or (loss)						
đ)	62	Net gain or (loss) from sale of assets not on line 10	55,244.					
ž	b	Gross sales price for all			,	· · · · · · · · · · · · · · · · · · ·		
Revenue	7	Capital gain net income (from Part IV, line 2)		55,244.				
ш	8	Net short-term capital gain						
	9	Income modifications Gross sales less returns						
	10a	and allowances						
	ı	Less Cost of goods sold Gross profit or (loss)		 				
	11	Other income		 				
	12	Total. Add lines 1 through 11	120,418.	118,418.				
	13	Compensation of officers, directors, trustees, etc	19,000.	9,500.		9,500.		
	14	Other employee salaries and wages						
ģ	1	Pension plans, employee benefits						
Suse		Legal fees	2 240	1 500				
Expenses	ם מ	Other professional ESCENSTMT 2	3,240. 32,541.	1,620.		1,620.		
é	17	Interest Q UI A 9 2016	34,341.	32,541.		0.		
rati	18	Taxes S JUL 0 8 25 FMT	1,277.	1,277.		0.		
nist	19	Deprecia ion and depletion						
Ē	20	Occupancy OGDEN, UT						
\$	21	Travel, conferences, and meetings						
₹	22	Printing and publications	6 427	1 157		F 000		
匝	23	Other expenses STMT 5 Total operating and administrative	6,437.	1,157.		5,280.		
) ef	24	expenses. Add lines 13 through 23	62,495.	46,095.		16,400.		
Operating W. Popularist ative	25	Contributions, gifts, grants paid	125,500.	10,000		125,500.		
,		Total expenses and disbursements.						
		Add lines 24 and 25	187,995.	46,095.		141,900.		
	27	Subtract line 26 from line 12:			,			
2016		Excess of revenue over expenses and disbursements	<u> <67,577.></u>	70 202				
		Net investment income (if negative, enter -0-) Adjusted net income (if negative, enter -0-)		72,323.	N/A			
52350 11-24)1 -15	LHA For Paperwork Reduction Act Notice, see i	nstructions		N/ A	Form 990-PF (2015)		

<u>F0</u>	rm 9:	90-PF (2015) FELDPAUSCH FOUNDATION			3417534 Page 2
F	art	Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only	Beginning of year	End of	
_	T .		(a) Book Value	(b) Book Value	(c) Fair Market Value
	1	Cash'- non-interest-bearing	133,073.	82,787.	82,787.
	2	0			
	3	Accounts receivable >			
	١.	Less: allowance for doubtful accounts	ļ		
	4	Pledges receivable >	1		
		Less: allowance for doubtful accounts			
	5	Grants receivable			
	6	Receivables due from officers, directors, trustees, and other			
		disqualified persons			
	7	Other notes and loans receivable			
		Less: allowance for doubtful accounts			
ats	8	Inventories for sale or use			
Assets		Prepaid expenses and deferred charges			
1	1	Investments - U.S. and state government obligations			
	I	Investments - corporate stock STMT 6	2,579,132.	2,561,841.	2,531,035.
	C	Investments - corporate bonds			
	11	Investments - land, buildings, and equipment basis			
		Less accumulated depreciation	····		
	12	Investments - mortgage loans			
	13	Investments - other			· · · · · · · · · · · · · · · · · · ·
	14	Land, buildings, and equipment: basis			
	l	Less accumulated depreciation			
	I	Other assets (describe >)			
	16	Total assets (to be completed by all filers - see the			
_		ınstructions. Also, see page 1, item I)	2,712,205.	2,644,628.	2,613,822.
	17	Accounts payable and accrued expenses			
	18	Grants payable			
es	19	Deferred revenue			
Liabilities	20	Loans from officers, directors, trustees, and other disqualified persons			
jab	21	Mortgages and other notes payable			
_	22	Other liabilities (describe 🕨)		,	
	ļ			1	
_	23	Total liabilities (add lines 17 through 22)	0.	0.	
		Foundations that follow SFAS 117, check here			
G	Ì	and complete lines 24 through 26 and lines 30 and 31.			
Š	24	Unrestricted			
ä	25	Temporarily restricted			
Ä	26	Permanently restricted			
Ĕ		Foundations that do not follow SFAS 117, check here			
느		and complete lines 27 through 31.		ĺ	
tsc	27	Capital stock, trust principal, or current funds	0.	0.	
SSe	28	Paid-in or capital surplus, or land, bldg., and equipment fund	0.	0.	
Net Assets or Fund Balances	29	Retained earnings, accumulated income, endowment, or other funds	2,712,205.	2,644,628.	
ş	30	Total net assets or fund balances	2,712,205.	2,644,628.	
				ļ	
	31	Total liabilities and net assets/fund balances	2,712,205.	2,644,628.	
P	art	Analysis of Changes in Net Assets or Fund B	alances		
1	Total	net assets or fund balances at beginning of year - Part II, column (a), line	30		
		t agree with end-of-year figure reported on prior year's return)		<u> </u>	2,712,205.
	•	amount from Part I, line 27a		2	<67,577.>
		increases not included in line 2 (itemize)		3	0.
4	Add I	ines 1, 2, and 3		4	2,644,628.
5	Decre	eases not included in line 2 (itemize)		5	0.
6	Total	net assets or fund balances at end of year (line 4 minus line 5) - Part II, co	lumn (b), line 30	6	2,644,628.
					Form QQ0-DF (2015)

2 Total of line 1, column (d) 723. Enter 1% of net investment income (1% of Part I, line 27b) 91,673. Add lines 5 and 6 141,900. 8 Enter qualifying distributions from Part XII, line 4

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

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	n 990-PF (2015) FELDPAUSCH FOUNDATION 38-34: art VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 - se			Page 4 ns)
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 here X and enter 1%		7	23.
	of Part I, line 27b		-	
C	All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of Part I, line 12, col. (b).			
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)			0.
3	Add lines 1 and 2		7	23.
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-		7	23.
6	Credits/Payments:			
	2015 estimated tax payments and 2014 overpayment credited to 2015 6a 5,640.			
	Exempt foreign organizations - tax withheld at source			
	Tax paid with application for extension of time to file (Form 8868)			
	Backup withholding erroneously withheld			4.0
	Total credits and payments. Add lines 6a through 6d		5,6	<u>40.</u>
	Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached 8			
	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed	 		4 ==
			4,9	<u>17.</u>
	Enter the amount of line 10 to be: Credited to 2016 estimated tax ► 4,917. Refunded ► 11 Int VII-A Statements Regarding Activities			0.
			Voc	No
ıa	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?	4.	162	
h	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see instructions for the definition)?	1a 1b		X
U	If the answer is "Yes" to 1a or 1b , attach a detailed description of the activities and copies of any materials published or	10		
	distributed by the foundation in connection with the activities.]	
r	Did the foundation file Form 1120-POL for this year?	1c		х
	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year:	10	 	-21
	(1) On the foundation. \blacktriangleright \$ 0 . (2) On foundation managers. \blacktriangleright \$			
e	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation			
Ĭ	managers. > \$ 0.			
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?	2		х
	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		1	
	bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes	3		<u>x</u>
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	4a		X
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		X
	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	X	
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	X	
0	Enter the states to which the foundation reports or with which it is required (see instructions)			
σa	Enter the states to which the foundation reports or with which it is registered (see instructions)	-		
ь	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate)	-		
U	of each state as required by General Instruction G? If "No," attach explanation	8b	х	
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 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
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses	10		X
		Form 99 0	0-PF	

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FELDPAUSCH FOUNDATION Part VII-B Statements Regarding Activities for Which	Form 4720 May Re	Required (control	38-34175	34 Pag	ge 6			
5a During the year did the foundation pay or incur any amount to:	1 Olin 4720 May Be	riedan ea (conun	ueu)		—			
(1) Carry on propaganda, or otherwise attempt to influence legislation (section	` ''		es X No					
(2) Influence the outcome of any specific public election (see section 4955); any voter registration drive?	or to carry on, directly or indir		es X No					
(3) Provide a grant to an individual for travel, study, or other similar purposes	2		es X No					
(4) Provide a grant to an organization other than a charitable, etc., organization			58 LAL NO					
4945(d)(4)(A)? (see instructions)								
(5) Provide for any purpose other than religious, charitable, scientific, literary	, or educational purposes, or							
the prevention of cruelty to children or animals?			s X No					
b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify un	der the exceptions described	ın Regulations						
section 53.4945 or in a current notice regarding disaster assistance (see instru	•		N/A L	5b				
Organizations relying on a current notice regarding disaster assistance check h			▶□□					
c If the answer is "Yes" to question 5a(4), does the foundation claim exemption f								
expenditure responsibility for the grant?		I/A	s L No					
If "Yes," attach the statement required by Regulations section 53.494								
6a Did the foundation, during the year, receive any funds, directly or indirectly, to a personal benefit contract?	pay premiums on		s X No					
b Did the foundation, during the year, pay premiums, directly or indirectly, on a p	vareanal hanafit contract?	Y6		6b 2	X			
If "Yes" to 6b, file Form 8870.	orsonal benefit contract.		-	00 2	<u>~</u>			
7a At any time during the tax year, was the foundation a party to a prohibited tax s	shelter transaction?	□ Ve	es X No					
b If "Yes," did the foundation receive any proceeds or have any net income attribute.				7b				
Part VIII Information About Officers, Directors, Trust		nagers, Highly		 				
Paid Employees, and Contractors								
List all officers, directors, trustees, foundation managers and their		1	(d) 0					
(a) Name and address	(b) Title, and average hours per week devoted	(c) Compensation (If not paid,	(d) Contributions to employee benefit plans and deferred	(e) Expens account, oth	her			
/	to position	`enter'-0-)'	compensation	allowance	<u>s</u>			
· · · · · · · · · · · · · · · · · · ·								
SEE STATEMENT 7		19,000.	0.	,	ο.			
JUL OTTERMENT /		19,000.			<u>,</u>			
					_			
Communication of five bisheet unid and accordance (About best by					_			
Compensation of five highest-paid employees (other than those inc	(b) Title, and average	enter "NONE."	(d) Contributions to	(a) Eynens				
(a) Name and address of each employee paid more than \$50,000	hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans and deferred	(e) Expens account, oth allowances	jer			
NONE	devoted to position		compensation	anowance	<u>-</u>			
21/03/20								
					—			
					-			
								
otal number of other employees paid over \$50,000	<u> </u>				0			
Otal manuscript of outlot employees paid over \$00,000		 	Form	990-PF (20				

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Part VIII Information About Officers, Directors, Trustees, Founda Paid Employees, and Contractors (continued)	tion Managers, Highly	
3 Five highest-paid independent contractors for professional services. If none, enter		
(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		> 0
Part IX-A Summary of Direct Charitable Activities		<u> </u>
List the foundation's four largest direct charitable activities during the tax year. Include relevant statist number of organizations and other beneficiaries served, conferences convened, research papers produced to the conference of the conferen	tical information such as the	Expenses
1 N/A	12000, 010.	
I N/A		
2		
3		
4		
	· · · · · · · · · · · · · · · · · · ·	
Part IX-B Summary of Program-Related Investments		
Describe the two largest program-related investments made by the foundation during the tax year on	lines 1 and 2.	Amount
1 N/A		
41/ 44		
2		
		<u> </u>
All other program-related investments. See instructions.		
3		
Tatal Add bass 1 through 2		0.
Total. Add lines 1 through 3		<u> </u>

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Form 990-PF (2015) FELDPAUSCH FOUNDATION 38-3417534 Page 8 Part X Minimum Investment Return (All domestic foundations must complete this part. Foreign foundations, see instructions.) 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 2,663,981. 1a 88,181. Average of monthly cash balances 1b c Fair market value of all other assets 1c 2,752,162. Total (add lines 1a, b, and c) 1d Reduction claimed for blockage or other factors reported on lines 1a and 0. 1c (attach detailed explanation) 1e Acquisition indebtedness applicable to line 1 assets Subtract line 2 from line 1d 3 162. 4 282. Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions) Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4 5 710,880. Minimum investment return Enter 5% of line 5 6 135,544 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.) Minimum investment return from Part X, line 6 1 135,544. 723. Tax on investment income for 2015 from Part VI, line 5 Income tax for 2015. (This does not include the tax from Part VI.) b Add lines 2a and 2b Distributable amount before adjustments. Subtract line 2c from line 1 3 Recoveries of amounts treated as qualifying distributions 4 Add lines 3 and 4 5 Deduction from distributable amount (see instructions) 6 7 Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1 Part XII Qualifying Distributions (see instructions) Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes: 141,900. Expenses, contributions, gifts, etc. - total from Part I, column (d), line 26 1a Program-related investments - total from Part IX-B 1b Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes 2 Amounts set aside for specific charitable projects that satisfy the: Suitability test (prior IRS approval required) 3a

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

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900.

3b

4

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Cash distribution test (attach the required schedule)

4940(e) reduction of tax in those years.

Adjusted qualifying distributions. Subtract line 5 from line 4

income, Enter 1% of Part I, line 27b

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

Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment

Part XIII Undistributed Income (see instructions)

Corpus Years prior to 2014 2014 2015 1 Distributable amount for 2015 from Part XI, line 7 2 Undistributed income, if any, as of the end of 2015 a Enter amount for 2014 only b Total for prior years: 5 Excess distributions carryover, if any, to 2015: a From 2010 b From 2011 c From 2012 d From 2013 e From 2014 6 8 , 2 9 4 . 6 8 3 8 9	821.
Inne 7 2 Undistributed income, if any, as of the end of 2015 a Enter amount for 2014 only b Total for prior years: 3 Excess distributions carryover, if any, to 2015: a From 2010 b From 2011 c From 2012 d From 2013 e From 2014 68,294.	821.
2 Undistributed income, if any, as of the end of 2015 a Enter amount for 2014 only b Total for prior years:	
b Total for prior years: 3 Excess distributions carryover, if any, to 2015: a From 2010 b From 2011 c From 2012 d From 2013 e From 2014 68,294.	
b Total for prior years: 3 Excess distributions carryover, if any, to 2015: a From 2010 b From 2011 c From 2012 d From 2013 e From 2014 68,294.	
3 Excess distributions carryover, if any, to 2015: a From 2010 b From 2011 c From 2012 d From 2013 e From 2014 68,294.	
a From 2010 b From 2011 c From 2012 d From 2013 e From 2014 68,294.	·
b From 2011 c From 2012 d From 2013 e From 2014 68,294.	
c From 2012 d From 2013 e From 2014 68,294.	·
d From 2013 e From 2014 68,294.	
e From 2014 68,294.	

	•
f Total of lines 3a through e 68,389.	
4 Qualifying distributions for 2015 from Part XII, line 4: ► \$ 141,900.	
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) ** 141,900.	
d Applied to 2015 distributable amount	
e Remaining amount distributed out of corpus 0 •	0.
	389.
(If an amount appears in column (d), the same amount must be shown in column (a))	<u> </u>
6 Enter the net total of each column as indicated below:	
a Corpus Add lines 3f, 4c, and 4e Subtract line 5 141, 900.	
b Prior years' undistributed income. Subtract	
line 4b from line 2b O •	
c Enter the amount of prior years' undistributed income for which a notice of	
deficiency has been issued, or on which	
the section 4942(a) tax has been previously assessed 0 .	
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 instr.	
f Undistributed income for 2015. Subtract	
lines 4d and 5 from line 1. This amount must	
	432.
7 Amounts treated as distributions out of	
corpus to satisfy requirements imposed by	
section 170(b)(1)(F) or 4942(g)(3) (Election	
may be required - see instructions) 0.	
8 Excess distributions carryover from 2010	
not applied on line 5 or line 7	
9 Excess distributions carryover to 2016	
Subtract lines 7 and 8 from line 6a 141,900.	
0 Analysis of line 9:	
a Excess from 2011	
b Excess from 2012	
c Excess from 2013	
d Excess from 2014	
e Excess from 2015 141,900.	

	SCH FOUNDAT			38-3	417534 Page 10
Part XIV Private Operating F	oundations (see in	structions and Part V	II-A, question 9)	N/A	
1 a If the foundation has received a ruling o	r determination letter that	t it is a private operating			
foundation, and the ruling is effective fo	r 2015, enter the date of	the ruling	▶		
b Check box to indicate whether the found	dation is a private operatii	ng foundation described	in section	4942(j)(3) or 2	1942(j)(5)
2 a Enter the lesser of the adjusted net	Tax year		Prior 3 years		
income from Part I or the minimum	(a) 2015	(b) 2014	(c) 2013	(d) 2012	(e) Total
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		į			
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 Complete 3a, b, or c for the					-
alternative test relied upon:					
a "Assets" alternative test - enter:					
(1) Value of all assets				<u> </u>	<u> </u>
(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					T
and 5 or more exempt					
organizations as provided in section 4942(j)(3)(B)(iii)					
(3) Largest amount of support from					-
an exempt organization					
(4) Gross investment income			<u> </u>		·····
Part XV Supplementary Info	rmation (Comple	te this part only	if the foundation	n had \$5,000 or m	ore in assets
at any time during t				., .,	
1 Information Regarding Foundatio	n Managers:			·-· ·· · · · · · · · · · · · · · · · ·	
a List any managers of the foundation wh	-	than 2% of the total con	tributions received by th	e foundation before the cli	nce of any tay
year (but only if they have contributed m			inoditoria received by th		oo or any tax
KIMBERLY BRUBAKER	, ,				
b List any managers of the foundation who	o own 10% or more of th	e stock of a cornoration	(or an equally large port	ion of the ownership of a i	partnership or
other entity) of which the foundation has			(or an equally large per	ion or the owner only or a p	our and only or
NONE	-				
2 Information Regarding Contributi	on Grant Gift Loan	Scholarship etc. Di	rograme:		
Check here ► X If the foundation o		• • • • •	_	not accept unsolicited rea	neets for funds. If
the foundation makes gifts, grants, etc.					
a The name, address, and telephone numl	 				
a The name, address, and telephone num	Jei Oi e-man address Oi t	ne person to whom appi	וטמווטווס סווטטווט שפ מעטופ	55560.	
b The form in which applications should b	e submitted and informat	ion and materials they s	hould include:		
2 The form in which applications of ours					
c Any submission deadlines:					
d Any restrictions or limitations on awards	s, such as by geographics	il areas, charitable fields	, kınds of ınstitutıons. or	other factors:	
		,	· · · · · · · · · · · · · · · · · · ·		

Part XV Supplementary Information Grants and Contributions Paid During the		Payment		· · · · · · · · · · · · · · · · · · ·
Recipient	If recipient is an individual.	r ayment		
Name and address (home or business)	show any relationship to any foundation manager or substantial contributor	Foundation status of	Purpose of grant or contribution	Amount
a Paid during the year	or substantial contributor	recipient		
a raid daring tro your				
ALBION COMMUNITY FOUNDATION	NONE	PUBLIC CHARITY	GRANT AWARD	
203 S SUPERIOR ST ALBION, MI 49224			,	1,500
AV MEDDVA MATURE OF DAMMED OPPOV	NO.			
ALTERNATIVE OF BATTLE CREEK 1346 W COLUMBIA AVE #106	NONE	PUBLIC CHARITY	ANNUAL SUPPORT	
BATTLE CREEK, MI 49015				5,000
BARRY COUNTY COMMUNITY FOUNDATIONS	NONE	DITRITO CUNDITAL	SCHOLARSHIP FUND	
231 S BROADWAY ST	HONE	FOBLIC CHARITI	SCHOLLARSHIF FUND	
HASTINGS MI 49058				5,000
BATTLE CREEK COMMUNITY FOUNDATION -	NONE	PUBLIC CHARITY	ANNUAL SUPPORT	
THE ELEMENTARY ENRICHMENT COMM. PROJECT				
32 W MICHIGAN AVE SUITE 1				
BATTLE CREEK, MI 49017	_ 	<u> </u>		5,000
BINDA DYSLEXIA CENTER	NONE	PUBLIC CHARITY	ANNUAL SUPPORT	
450 NORTH AVE				
BATTLE CREEK, MI 49017	 ONTINUATION SHEE	am / C \	.	7,500
Total SEE CO b Approved for future payment	JNTINUATION SHE	r(S)	▶ 3a	125,500
2 Approved for factors payment				
NONE				
Tota!		····	<u>▶ 3b</u>	000-PE (001

Part XVI-A	Analy	sis of	Income-Producing	Activities
	7, 10 1000	,	mooning incaucing	MOUVILIO.

Enter gross amounts unless otherwise indicated.	Unrelate	d business income	Exclu	ided by section 512, 513, or 514	(e)
	(a) Business	(b) Amount	(C) Exclu- sion	(d) Amount	Related or exempt
1 Program service revenue:	code		code	Ainount	function income
a					
			+		
d	I				
e			-		
g Fees and contracts from government agencies			+		
2 Membership dues and assessments					
3 Interest on savings and temporary cash investments					
4 Dividends and interest from securities			14	63,174.	
5 Net rental income or (loss) from real estate:					
a Debt-financed property					
b Not debt-financed property					
6 Net rental income or (loss) from personal					
property		-			
7 Other investment income	<u> </u>				
8 Gain or (loss) from sales of assets other than inventory			18	55,244.	
9 Net income or (loss) from special events			02	·	
10 Gross profit or (loss) from sales of inventory					
11 Other revenue:	1				
a					
b					
C					· · · · · · · · · · · · · · · · · · ·
d					
e					
12 Subtotal. Add columns (b), (d), and (e)		0	•	118,418.	0.
13 Total. Add line 12, columns (b), (d), and (e)				13	118,418.
See worksheet in line 13 instructions to verify calculations.)					

Part XVI-B Relationship of Activities to the Accomplishment of Exempt Purposes

Line No.	the foundation's exempt purposes (other than by providing funds for such purposes).

Form **990-PF** (2015)

Part >	<u>XVII</u>	Information Re Exempt Organ		nsfers To	and Transactions	s and Relation	ships With No	ncharitable	Э	
	the or	ganization directly or indi		y of the follows	ng with any other organiz	ation described in se	ction 501(c) of		Yes	No
	-	other than section 501(c			· · · · · · · · · · · · · · · · · · ·		clion 30 I(c) or		100	110
		from the reporting found	• • • • • • • • • • • • • • • • • • • •		- ·	ganizations:				I
	Cash		ation to a nonchan	nable exempt of	gamzation of.			1a(1)		Х
		assets						1a(2)		X
		sactions:						18(2)	-	
-		of assets to a noncharita	hle exempt organiz	zation				1b(1)		Х
		nases of assets from a no						1b(2)		X
		il of facilities, equipment,	•	t or garrization				1b(3)		X
		bursement arrangements						1b(4)		X
٠,		s or loan guarantees						1b(5)		Х
		rmance of services or me	embership or fundr	aising solicitation	ons			1b(6)		X
		f facilities, equipment, ma						1c		Х
		ver to any of the above is				l always show the fail	r market value of the	goods, other ass	sets,	
		s given by the reporting fo							·	
colu	ımn (d) the value of the goods,	other assets, or ser	rvices received.						
(a) Line no)	(b) Amount involved	(c) Name	of noncharitabl	e exempt organization	(d) Descripti	on of transfers, transaction	ons, and sharing ar	rangeme	nts
				N/A						
	_ _									
										
	1									
		<u></u>								
	_									
	ļ.,		ļ <u>-</u>							
			<u> </u>		·					
		idation directly or indirect	•			anızatıons described				7
		501(c) of the Code (other	•	c)(3)) or in sec	tion 527?			Yes	LX	No
b lf "Y	es," cc	mplete the following sche			(L) Tong of supplies	_	(-) Description of m	-latin a bin		
		(a) Name of org	janization		(b) Type of organizatio	'n	(c) Description of re	elationship		
		<u> N/A</u>								
					<u> </u>	<u>_</u>				
	_			<u>. </u>						
										
	Under	penalties of perjury, I declare	that I have examined t	his return, includir	nd accompanying schedules a	and statements, and to the	ne best of my knowledge			
Sign		lief, it is true, correct, and con						May the IRS or return with the	discuss t e prepare	nis er
Here	\	KIM br. DA	Drube la	101	10/27/20	PRESI	יוועים רו	x Yes	(see inst	tr)?
	Sign	ature of officer or testee	ZVIGANI		Date	Title	DENT	_ LAJ Yes		J No ∣
	Jigi	Print/Type preparer's na		Preparer's s		Date	Check I if	PTIN		
				1.	4 - 4 -	54.5	self- employed			
Paid		SHARON L.	AT.T.EN	Mar	1000.	6-16-16		P00020	971	
Prepa	ırer	Firm's name ► VAN		G. RERC	AKKER & ASS	SOCIATES	Firm's EIN ► 3			
Use C		THE PROPERTY OF	221. 1101.	C, 2110					J ,	
		Firm's address > 41	45 EMBAS	SY DRIV	E SE		1			
			AND RAPI		49546		Phone no. 61	6957069	1	
	Form 990-PF (2015)									

13210616 759240 FE665

38-3417534 FELDPAUSCH FOUNDATION

3 Grants and Contributions Paid During the	Year (Continuation)			
` Recipient	If recipient is an individual, show any relationship to	Foundation	Purpose of grant or	
Name and address (home or business)	any foundation manager or substantial contributor	status of recipient	contribution	Amount
BOY SCOUTS OF AMERICA	NONE	PUBLIC CHARITY	ANNUAL SUPPORT	
3213 WALKER AVE NW				
GRAND RAPIDS, MI 49544				2,00
BRONSON BATTLE CREEK CANCER CARE CENTER 300 NORTH AVE	NONE	PUBLIC CHARITY	CANCER RESEARCH	
BATTLE CREEK, MI 49017				5,00
BRONSON HEALTH FOUNDATION	NONE	PUBLIC CHARITY	ANNUAL SUPPORT	
601 JOHN ST				
KALAMAZOO, MI 49007				12,500
CENTER POINT CHURCH	NONE	PUBLIC CHARITY	ANNUAL SUPPORT	
2345 N 10TH ST KALAMAZOO. MI 49009				3,000
GLAMA200, MI 49009				3,00
TOLOGONITAL VIDLENIA OLDER GOUDINGSTONG	170177			
COMMUNITY HEALTH CARE CONNECTIONS 62 MICHIGAN AVE E	NONE	PUBLIC CHARITY	ANNUAL SUPPORT	
BATTLE CREEK, MI 49017				1,500
DELTON ACT	NONE	PUBLIC CHARITY	ANNUAL SUPPORT	
PO BOX 583				
DELTON, MI 49046		-		5,000
FRIENDS OF THE BOHM THEATRE	NONE	PUBLIC CHARITY	ANNUAL SUPPORT	
201 S SUPERIOR ST ALBION, MI 49224				5,000
GREEN GABLE HAVEN	NONE	PUBLIC CHARITY	ANNITAT CITODODT	
PO BOX 388	3,027.2	CILITITE CILITITE	INNOVID BOTTON	
HASTINGS, MI 49058				2,500
HOLY REDEEMER CHURCH - HAND 2 HAND	NONE	PUBLIC CHARITY	ANNUAL SUPPORT	
JENISON, MI 49428				2,500
JIMAND COCTEMY OF COUNTY OFFICE	NONE	DIIDI TO OUNDIMU	ANNITAL CUDDOD	
HUMANE SOCIETY OF SOUTH CENTRAL SICHIGAN	NONE	PUBLIC CHARITY	WINDAL SOLLOKI.	
2500 WATKINS RD				
SATTLE CREEK, MI 49015 Total from continuation sheets		L		500 101,500

Part XV Supplementary Informatio				
3 Grants and Contributions Paid During the		T	T	
Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager	Foundation status of	Purpose of grant or contribution	Amount
	or substantial contributor	recipient		
JUNIOR ACHIEVEMENT OF SOUTHWEST	NONE	DIDITO CUADIMY	AMARIAT GUDDODE	
MICHIGAN	NONE	PUBLIC CHARITY	ANNUAL SUPPORT	
2775 WEST DICKMAN ROAD SUITE H-3				
BATTLE CREEK, MI 49037				5,000
KALAMAZOO CHRISTIAN SCHOOL	NONE	PUBLIC CHARITY	ANNIIAI, SUPPORT	
2121 STADIUM DR			20110112	
KALAMAZOO, MI 49008				7,000
KIDS FOOD BASKET	NONE	PUBLIC CHARITY	AND TATE CITED OF THE	İ
2055 OAK INDUSTRIAL DR NE STE C	NONE	FUBLIC CHARITI	ANNOAL SUPPORT	
GRAND RAPIDS, MI 49505				5,000
MARION BURCH ADULT DAY CARE & REHAB	NONE	PUBLIC CHARITY	ANNUAL SUPPORT	
1150 MICHIGAN AVE E				
BATTLE CREEK MI 49014				10,000
				20,000
MUSIC CENTER OF SOUTH CENTRAL	NONE	PUBLIC CHARITY	ANNUAL SUPPORT	
MICHIGAN				
450 NORTH AVE BATTLE CREEK, MI 49017				E 000
MITTE CAUDA, MI 45017				5,000
NORTH AVENUE CHURCH OF GOD	NONE	PUBLIC CHARITY	ANNUAL SUPPORT	
1079 NORTH AVE BATTLE CREEK, MI 49017				E 000
SATIBLE CREEK, MI 49017				5,000
SAFE PLACE	NONE	PUBLIC CHARITY	ANNUAL SUPPORT	
PO BOX 199 BATTLE CREEK, MI 49016				2 500
SATILE CREEK, MI 49010				2,500
SPROUT URBAN FARMS	NONE	PUBLIC CHARITY	GRANT AWARD	
245 KENDALL ST N				10.000
BATTLE CREEK, MI 49014				10,000
				•
ST AMBROSE CATHOLIC CHURCH	NONE	PUBLIC CHARITY	ANNUAL SUPPORT	
11149 FLORIA RD				
DELTON, MI 49046				2,500
T ROSE SCHOOL	NONE	PUBLIC CHARITY	ANNUAL SUPPORT	
07 S JEFFERSON ST ASTINGS MI 49058				3 500
Total from continuation sheets		<u>!</u>		2,500

FELDPAUSCH FOUNDATION 38-3417534 Part XV **Supplementary Information** Grants and Contributions Paid During the Year (Continuation) Recipient If recipient is an individual, Purpose of grant or contribution Foundation show any relationship to Amount status of any foundation manager Name and address (home or business) recipient or substantial contributor UNITED WAY OF BATTLE CREEK & NONE PUBLIC CHARITY ANNUAL SUPPORT KALAMAZOO REGION 34 JACKSON ST W BATTLE CREEK, MI 49017 WHAT A DO THEATRE NONE PUBLIC CHARITY GRANT AWARD

FE665

ENDS AND INTER	REST FROM SECUE	RITIES ST	PATEMENT 1	
GAINS	REVENUE	(B) NET INVEST- MENT INCOME		
<u> </u>				
ACCOUNTI	NG FEES	rz	PATEMENT 2	
(A) EXPENSES PER BOOKS			(D) CHARITABLE PURPOSES	
3,240.	1,620.		1,620.	
3,240.	1,620.		1,620.	
OTHER PROFES	SIONAL FEES	ST	'ATEMENT 3	
(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES	
			0.	
C 32,541.	32,541.		0.	
TAX	TAXES		STATEMENT 4	
			(D) CHARITABLE PURPOSES	
1,277.	1,277.		0.	
	CAPITAL GAINS TOUVIDENT 792. 100. 18,01 ACCOUNTI (A) EXPENSES PER BOOKS 3,240. OTHER PROFES (A) EXPENSES PER BOOKS 32,184. 357. CC 32,541. TAX (A) EXPENSES	CAPITAL (A) GAINS REVENUE PER BOOKS 792. 0. 792. 18,018. 62,382. 192. 18,018. 63,174. ACCOUNTING FEES (A) (B) EXPENSES NET INVEST- PER BOOKS MENT INCOME 3,240. 1,620. OTHER PROFESSIONAL FEES (A) (B) EXPENSES NET INVEST- PER BOOKS MENT INCOME 32,184. 32,184. 357. 357. CC 32,541. 32,541.	CAPITAL (A) (B) GAINS REVENUE NET INVEST- DIVIDENDS PER BOOKS MENT INCOME 792. 0. 792. 792. 18,018. 62,382. 62,382. 92. 18,018. 63,174. 63,174. ACCOUNTING FEES ST (A) (B) (C) EXPENSES NET INVEST- PER BOOKS MENT INCOME 3,240. 1,620. OTHER PROFESSIONAL FEES ST (A) (B) EXPENSES NET INVEST- PER BOOKS MENT INCOME 32,184. 32,184. 32,184. 357. 357. CC 32,541. 32,541. TAXES ST (A) (B) (C) EXPENSES NET INVEST- PER BOOKS MENT INCOME 32,184. 32,184. 32,184. 357. 357. CC 32,541. 32,541.	

FORM 990-PF	OTHER EXPENSES			STATEMENT 5		
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTEI NET INCOM			
ADVERTISING/OFFICE/PROMOTION L REIMBURSEMENTS FUNDRAISING EVENT EXPENSES MISC	12. 1,075. 4,736. 614.	6. 537. 0. 614.		6. 538. 4,736. 0.		
TO FORM 990-PF, PG 1, LN 23	6,437.	1,157.		5,280.		
FORM 990-PF	CORPORAT	E STOCK		STATEMENT 6		
DESCRIPTION		во	OK VALUE	FAIR MARKET VALUE		
CHEMICAL BANK MERRILL LYNCH SEE ATTACHED			23,013. 2,538,828.	27,247. 2,503,788.		
TOTAL TO FORM 990-PF, PART II	, LINE 10B		2,561,841.	2,531,035.		

FORM 990-PF	PART VIII - LIST TRUSTEES AND	OF OFFICERS, FOUNDATION MAN		STATI	ement 7
NAME AND ADDRESS		TITLE AND AVRG HRS/WK	COMPEN- SATION	EMPLOYEE BEN PLAN CONTRIB	EXPENSE ACCOUNT
KIMBERLY BRUBAKER PO BOX 339 HASTINGS, MI 49058	3	PRESIDENT/TRE	ASURER 4,000.	0.	0.
KEITH R. TOLGER PO BOX 339 HASTINGS, MI 49058	3	DIRECTOR 1.00	3,000.	0.	0.
COREY LAGRO PO BOX 339 HASTINGS, MI 49058	3	DIRECTOR 1.00	0.	0.	0.
MARK S. FELDPAUSCH PO BOX 339 HASTINGS, MI 49058		SECRETARY 1.00	3,000.	0.	0.
KRISTI TOLGER PO BOX 339 HASTINGS, MI 49058	1	DIRECTOR 1.00	3,000.	0.	0.
JAIME MERLINGTON PO BOX 339 HASTINGS, MI 49058	i.	DIRECTOR 1.00	3,000.	0.	0.
KATHERINE BUSSCHER PO BOX 339 HASTINGS, MI 49058		DIRECTOR 1.00	3,000.	0.	0.
TOTALS INCLUDED ON	990-PF, PAGE 6,	PART VIII	19,000.	0.	0.