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Form **990-PF**

Return of Private Foundation
or Section 4947(a)(1) Trust Treated as Private Foundation
not enter social security numbers on this form as it may be made or

OMB No 1545-0052 2015

2016
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) 00.7
SCANNED

		nent oxthe Treasury Revenue Service	►In	formation ab			and its separa		•		•	Open to Public Inspection
For calendar year 2015 or tax year beginning							5/05 , 2015				12/31, 20 15	
		of foundation							,		A Employer ide	ntification number
THE WING SHADOW FOUNDATION										47-3957	199	
_	Numb	er and street (or P O b	ox nun	nber if mail is no	t delivered	to street a	address)		Room/sur	te	B Telephone nu	mber (see instructions)
	660	ADA DR. SE,	STE	E 301						ļ	(616)	957 -5823
_	City of	r town, state or provinc	e, cour	ntry, and ZIP or f	oreign po	stal code			·		·	
											C If exemption ap	plication is
	ADA	, MI 49301									pending, check	nere
G	Che	eck all that apply	Х	Initial retui	rn		Initial return	of a former p	oublic cha	arity	D 1 Foreign orga	nizations, check here >
				Final retur	n		Amended re	-				nizations meeting the
				Address c	hange		Name chang	je			85% test, che	eck here and attach
Н	Che	eck type of organiz	ation	. X Secti	on 501	(c)(3) ex	empt private	foundation	-			
	s	Section 4947(a)(1) n	onexe	empt charitable	e trust	Ot	her taxable p	rivate founda	tion			ation status was terminated 07(b)(1)(A), check here
I	Fair	market value of	all	assets at	J Acco		nethod X C		crual			in is in a 60-month termination
	end	of year (from Par	t II, co	ol (c), line		ther (sp	ecify)	_				07(b)(1)(B), check here
_	16)	▶ \$ 5,:	137,	868.	(Part I, d	column (d) must be on ca	sh basis)				
	art	Analysis of Rev	enue	and Expens	ses (The	(a) R	evenue and					(d) Disbursements
		total of amounts in may not necessari					oenses per	(b) Net inve		(c) Adjusted net income	for charitable purposes
_		column (a) (see ins					books	L				(cash basis only)
	1	Contributions, gifts, grant					5,142,792					
	2	Check ▶ ☐ if the	found h Sch	lation is not requ B	uired to		<u> </u>					
	3	Interest on savings an										
	4	Dividends and Inter	est fr	om-se curities		_	110,108	. 11	0,108.	ļ		
	59-	Gross-rents-I.V	:IJ.									· · · · · · · · · · · · · · · · · · ·
	황	Net rental income or (oss) _	<u> </u>						<u> </u>		·
ne	18	Neflgain of (loss) from Gross sales price for a assets on line 6a	rsale d	of assets not on	line 10		1,400,214.	<u> </u>	`	<u> </u>		·
G	MP.									<u> </u>		
Revenue	7	Capitateain-net inc	ome ((fr 86 m Part IV, I	ıne 2) .			1,40	0,214.	<u> </u>		
ī	<u>-8</u>	Net short term cap	tal gai	in						<u> </u>		
	9 10a	Income modification								├		` '
		and allowances		-				ļ <u>-</u>	· · ·	<u> </u>		
		Less Cost of goods so								\ \ -		
	,	Gross profit or (loss				<u> </u>				<u> </u>		
	11	Other income (attac	ch sch	nedule)			653,114.	7 51	0 222	<u> </u>		` ` `
-	12	Total. Add lines 1 t					0.	1,51	0,322.			
es	13	Other employees				-		1		-		
JSe	14	Other employee sal		-		 		 	· · · · · · · · · · · · · · · · · · ·	ļ		-
De	15	Pension plans, emp								 	-	
Ä	16 a	Legal fees (attach s Accounting fees (a								 		
ķ	b											
Ħ	17	Other professional Interest	•		•	<u> </u>	·			 		-
str	18	Taxes (attach sched								 		
Ξ	19	Depreciation (attac			•							
틍	20	Occupancy		•				<u> </u>				
and Administrative Expens	21	Travel, conferences						 			 .	
ĕ	22	Printing and publica										
<u> </u>	23	Other expenses (at								\vdash		
Ħ	23 24 25	Total operating an				· · · · · · ·		 				
era		Add lines 13 through					0.					
Ô	25	Contributions, gifts										
_	26	Total expenses and disbu	_	•			0.					0
_	27	Subtract line 26 fro										
		Excess of revenue over e			ents	[ε	6,653,114.					
		Net investment inc	•					1,51	0,322.	 		
		Adjusted net incom	-							-		
=												- 000 DE

Pa	art II	Balance Sheets description column should be for end-of-year	Beginning of year	End	or year
		amounts only (See instructions)	(a) Book Value	(b) Book Value	(c) Fair Market Value
	1	Cash - non-interest-bearing		1,510,323.	1,510,323
	2、	Savings and temporary cash investments			
ļ	3	Accounts receivable ▶			
		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 (attach schedule) (see instructions)			
	7	Other notes and loans receivable (attach schedule)	. %		
-		Less allowance for doubtful accounts ▶			
इ	8	Inventories for sale or use			
Assets	9	Prepaid expenses and deferred charges			
₹ .	10a	Investments - U S and state government obligations (attach schedule)			
		Investments - corporate stock (attach schedule)			
		Investments - corporate bonds (attach schedule)			
	11	Investments - land, buildings, and equipment basis	\$ 43.	24:	,
		Less accumulated depreciation	 		· · · · · · · · · · · · · · · · · · ·
- [.	12	(attach schedule)			
		Investments - other (attach schedule)			
	14	Land, buildings, and equipment basis			********* :1.s
		Less accumulated depreciation	and a second second		
].	15	(attach schedule) Other assets (describe ► ATCH 1)		3,428,999.	3,627,545
- 1		Total assets (to be completed by all filers - see the			3,027,313
		instructions Also, see page 1, item I)		4,939,322.	5,137,868
1				1,7557,522.	\$, 5,157,000
		Accounts payable and accrued expenses			
- 1		Grants payable			· , , , , ,
-=1		Deferred revenue			· * * * * *
園 :		Loans from officers, directors, trustees, and other disqualified persons.			- i i i i i i i i i i i i i i i i i i i
<u>.</u>		Mortgages and other notes payable (attach schedule)			* * * * * * * * * * * * * * * * * * * *
_ '	2.2	Other liabilities (describe ▶)			-
	23	Total liabilities (add lines 17 through 22)	0.	0.	
+			- 0.		
S		Foundations that follow SFAS 117, check here ▶			
Balances					
<u>ē</u> l :		Unrestricted			
8		Temporarily restricted			
힘'	20	Permanently restricted		-	
Net Assets or Fund		· conductions that do not follow of Ao 117,			7 % 4
히.		check here and complete lines 27 through 31.			4 %
\$ 2	27	Capital stock, trust principal, or current funds			, ', '
8 4	28	Paid-in or capital surplus, or land, bldg, and equipment fund		4 020 222	
8 .	29	Retained earnings, accumulated income, endowment, or other funds	0.	4,939,322.	
<u>=</u>	14	Total liabilities and and accept (found below.		4,939,322.	
2		Total liabilities and net assets/fund balances (see	0.1	4 020 222	,
		Analysis of Changes in Net Assets as Ford Sul		4,939,322.	
		Analysis of Changes in Net Assets or Fund Bala			
		I net assets or fund balances at beginning of year - Part			
_	ena-	of-year figure reported on prior year's return)		1	0
2	⊏nte	r amount from Part I, line 27a		2	6,653,114
3	Othe	er increases not included in line 2 (itemize)	·		
4	Add	lines 1, 2, and 3		<u>4</u>	6,653,114
		reases not included in line 2 (itemize)		5	1,713,792
6	<u> Fota</u>	net assets or fund balances at end of year (line 4 minus	line 5) - Part II, column (t	o), line 30 6	4,939,322
					Form 990-PF (2015)

Form 990-PF (2015)	THE WING SHADOW FOR	UNDATION		47-39571	_
	and Losses for Tax on Inv	estment Income			Page 3
	d describe the kind(s) of property sold ((b) How acquired	(c) Date acquired	(d) Date sold
<u>_</u>	prick warehouse, or common stock, 200	shs MLC Co)	P - Purchase D - Donation	(mo , day, yr)	(mo , day, yr)
1a SEE PART IV SCHE	DOTE				
b c			-		_
d					-
_e					
(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale		(h) Gain or (lo (e) plus (f) mini	
_ <u>b</u>					
_c 					
			,		
	showing gain in column (h) and owner	ed 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 as of 12/31/69	(k) Excess of col (ı) over col (j), ıf any		(k), but not less t Losses (from co	han -0-) or
a					
<u>b</u>					
_ <u>c</u> 					
e			1		
2 Capital gain net income		gain, also enter in Part I, line 7 (loss), enter -0- in Part I, line 7	2	1.	400,214.
3 Net short-term capital ga	") ain or (loss) as defined in sections	,			100,211.
	art I, line 8, column (c) (see ins				
Part I, line 8	<u> </u>	<u>,</u>	3		0.
		duced Tax on Net Investment I			
(For optional use by domesti	c private foundations subject to th	e section 4940(a) tax on net invest	ment incoi	me)	
If section 4940(d)(2) applies,	leave this part blank NOT	F AVAILABLE FOR INITIAL	YEAR RI	ETURNS	
555	leave this part blank			2101	
		outable amount of any year in the b	ase period	12	Yes No
	not qualify under section 4940(e)				
(-)	nount in each column for each yea	ar; see the instructions before makir	ng any ent		
(a) Base penod years Calendar year (or tax year beginning in)	(b) Adjusted qualifying distributions	(c) Net value of noncharitable-use assets		(d) Distribution ra (col (b) divided by	
2014 2013					
2013			-		
2011		-			
2010					
2 Total of line 1, column (c	d)		2		
3 Average distribution ratio	o for the 5-year base period - divid	de the total on line 2 by 5, or by the			
number of years the four	ndation has been in existence if les	ss than 5 years	3		
4 Enter the net value of no	oncharitable-use assets for 2015 fr	rom Part X, line 5	4		
5 Multiply line 4 by line 3			5		
6 Enter 1% of net investme	ent income (1% of Part I, line 27b)		6		
7 Add lines 5 and 6			7		
8 Enter qualifying distribut	ions from Part XII, line 4		8 that part	Heina o 40/ A-	v roto. Co- 41-
Part VI instructions	react than line 1, theth the DOX	in rait vi, line 15, and complete	шаг рап	using a 1% ta	x rate see the

Part VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 - see in	struc	tions	<u>s)</u>			
1a Exempt₄operating 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 Qomestic foundations that meet the section 4940(e) requirements in Part V, check						
here ▶ and enter 1% of Part I, line 27b						
c All other domestic foundations enter 2% of line 27b Exempt foreign organizations enter 4% of						
Part I, line 12, col (b)						
2 Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-) 2						
3 Add lines 1 and 2	3	30,2				
4 Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-) 4			0.			
5 Tax based on investment income. Subtract line 4 from line 3 If zero or less, enter -0	3	30,2	06.			
6 Credits/Payments						
a 2015 estimated tax payments and 2014 overpayment credited to 2015 6a						
b Exempt foreign organizations - tax withheld at source						
c Tax paid with application for extension of time to file (Form 8868) 6c 40,000.						
d Backup withholding erroneously withheld						
7 Total credits and payments Add lines 6a through 6d	4	10,0	00.			
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						
10 Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid		9,7	94.			
11 Enter the amount of line 10 to be Credited to 2016 estimated tax ▶ 9,794. Refunded ▶ 11						
Part VII-A Statements Regarding Activities	т	—-т				
1a During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it		Yes	No			
participate or intervene in any political campaign?	1a		X			
b Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see						
	1b		X			
If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials						
published or distributed by the foundation in connection with the activities			Х			
c Did the foundation file Form 1120-POL for this year?						
d Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year						
(1) On the foundation ▶\$ (2) On foundation managers ▶\$						
e Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on						
foundation managers \$						
2 Has the foundation engaged in any activities that have not previously been reported to the IRS?	2		<u> </u>			
If "Yes," attach a detailed description of the activities		į				
3 Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of						
incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes						
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		<u>x</u>			
5 Was there a liquidation, termination, dissolution, or substantial contraction during the year?	5					
If "Yes," attach the statement required by General Instruction T						
Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either						
By language in the governing instrument, or						
By state legislation that effectively amends the governing instrument so that no mandatory directions that	6	x				
conflict with the state law remain in the governing instrument?	7	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	' 					
8a Enter the states to which the foundation reports or with which it is registered (see instructions) ► MI,						
b If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General						
(or designate) of each state as required by General Instruction G? If "No," attach explanation	8b	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,"		Į				
complete Part XIV	9	ļ	Х			
i i			-			
10 Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses ATCH 2	10	х				
Ean	n 990	DE /	2015)			

Page 5

Par	t VII-A Statements Regarding Activities (continued)			
11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the		Yes	No
	meaning of section 512(b)(13)? If "Yes," attach schedule (see instructions)	11		<u> X</u>
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified			
	person had advisory privileges? If "Yes," attach statement (see instructions)	12		<u>X</u>
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	X	
	Website address ► N/A The Posionies of	502	2	
14	The books are in care of \blacktriangleright JIM ROSLONIEC Telephone no \blacktriangleright 616-957- Located at \blacktriangleright 660 ADA DRIVE, SUITE 301 ADA, MI ZIP+4 \blacktriangleright 49301	-362	<u> </u>	
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - Check here			ТТ
15	and enter the amount of tax-exempt interest received or accrued during the year	• • •		Ш
16	At any time during calendar year 2015, did the foundation have an interest in or a signature or other authority		Yes	No
. •	over a bank, securities, or other financial account in a foreign country?	16		X
	See the instructions for exceptions and filing requirements for FinCEN Form 114 If "Yes," enter the name of		: 11	7.10
	the foreign country	×××		
Par	t VII-B Statements Regarding Activities for Which Form 4720 May Be Required			
	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.	, 30	Yes	No
1a	During the year did the foundation (either directly or indirectly)		, 48I	
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person? Yes X No	Ú\$1	5	
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a		kai i.	
	disqualified person?	Ì		
	(c) i annual goods of incompact to (c) association from) a analysminos polosini	21.5		
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?		i.	
	the benefit or use of a disqualified person)?	, ,		
	(6) Agree to pay money or property to a government official? (Exception. Check "No" if the		ĺ	
	foundation agreed to make a grant to or to employ the official for a period after		*	,
	termination of government service, if terminating within 90 days).	* *		
b	If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations			
	section 53 4941(d)-3 or in a current notice regarding disaster assistance (see instructions)?	1b		
	Organizations relying on a current notice regarding disaster assistance check here	¥		
С	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that		" }	
_	were not corrected before the first day of the tax year beginning in 2015?	1c	*0	X
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private	5 1 33		·
•	operating foundation defined in section 4942(j)(3) or 4942(j)(5)) At the end of tax year 2015, did the foundation have any undistributed income (lines 6d and	j	111	
а	6e, Part XIII) for tax year(s) beginning before 2015?	1	*	1,444
	If "Yes," list the years		28	*
b	Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2)	* . 3		_
	(relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to		1	liizi
	all years listed, answer "No" and attach statement - see instructions)	2b		
С	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here	14	****	7 %
	•		33.	
3a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise			
	at any time during the year?			,
b	If "Yes," did it have excess business holdings in 2015 as a result of (1) any purchase by the foundation or			1
	disqualified persons after May 26, 1969, (2) the lapse of the 5-year period (or longer period approved by the			
	Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest, or (3) the lapse of			;
	the 10-, 15-, or 20-year first phase holding period? (Use Schedule C, Form 4720, to determine if the foundation had excess business holdings in 2015)	3b		** ******
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a		X
	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its		` <u>\$</u>	
	charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2015?	4b		X
			<u> </u>	/201E)

THE WING SHADOW FOUNDATION

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

Form 990-PF (2015) 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 1a 18,879. 1b 45,344. c Fair market value of all other assets (see instructions) 1c 64,223. 1d Reduction claimed for blockage or other factors reported on lines 1a and 1c (attach detailed explanation) 1e 2 Subtract line 2 from line 1d 64,223. 3 Cash deemed held for charitable activities Enter 1 1/2% of line 3 (for greater amount, see instructions) 963. Net value of noncharitable-use assets. Subtract line 4 from line 3 Enter here and on Part V, line 4 63,260. 2,088. Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations Part XI and certain foreign organizations check here ▶ | and do not complete this part) 2,088. 2a Tax on investment income for 2015 from Part VI, line 5 2a Income tax for 2015 (This does not include the tax from Part VI). . 2b 30,206. -28,118.3 -28,118.Add lines 3 and 4 6 Distributable amount as adjusted Subtract line 6 from line 5 Enter here and on Part XIII, Part XII Qualifying Distributions (see instructions) Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes a Expenses, contributions, gifts, etc - total from Part I, column (d), line 26 1a b 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., 2 Amounts set aside for specific charitable projects that satisfy the a Suitability test (prior IRS approval required) b Cash distribution test (attach the required schedule) 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 income

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

Form 990-PF (2015)

Enter 1% of Part I, line 27b (see instructions)

qualifies for the section 4940(e) reduction of tax in those years

Adjusted qualifying distributions. Subtract line 5 from line 4

ı	Pan	e	9

Pa	rt XIII Undistributed Income (see instr	uctions)			
	•	(a)	(b)	(c)	(d)
1	Distributable amount for 2015 from Part XI,	Corpus	Years prior to 2014	2014	2015
	line 7				0.
	Undistributed income, if any, as of the end of 2015				
а	Enter amount for 2014 only.				
	7 Total for pnor years 20 13 ,20 12 ,20 11				
	Excess distributions carryover, if any, to 2015				
	From 2010				
	From 2011				
	From 2012				
	From 2013				
-	Total of lines 3a through e				
	Qualifying distributions for 2015 from Part XII,				
•	line 4 > \$				
а	Applied to 2014, but not more than line 2a			·	
	Applied to undistributed income of prior years	`			
•	(Election required - see instructions)				
c	Treated as distributions out of corpus (Election				, , , , , , , , , , , , , , , , , , , ,
	required - see instructions)				
c	Applied to 2015 distributable amount				
e	Remaining amount distributed out of corpus				
5	Excess distributions carryover applied to 2015.				
	(If an amount appears in column (d), the same amount must be shown in column (a))				
6	Enter the net total of each column as				`
	indicated below:				
а	Corpus Add lines 3f, 4c, and 4e Subtract line 5				
b	Prior years' undistributed income Subtract				
	line 4b from line 2b,				
	income for which a notice of deficiency has				
	been issued, or on which the section 4942(a)				
	tax has been previously assessed				
C	Subtract line 6c from line 6b Taxable amount - see instructions				
е	Undistributed income for 2014 Subtract line	<u> </u>			
	4a from line 2a Taxable amount - see instructions				
_					
Ť	Undistributed income for 2015 Subtract lines 4d and 5 from line 1. This amount must be				
	distributed in 2016				
7	Amounts treated as distributions out of corpus				
	to satisfy requirements imposed by section				
	170(b)(1)(F) or 4942(g)(3) (Election may be				
	required - see instructions)				
8	Excess distributions carryover from 2010 not				
	applied on line 5 or line 7 (see instructions)				
9	Excess distributions carryover to 2016.	0.			
	Subtract lines 7 and 8 from line 6a	· · ·	·		
	Analysis of line 9 Excess from 2011				
	Excess from 2011				
	Excess from 2012				
	Excess from 2013				
	Excess from 2015				
			I	1	

Pa	rt XIV Private Op	erating Foundations	(see instructions a	nd Part VII-A, questi	on 9)	NOT APPLICABLE	
1 a	If the foundation has	received a ruling or d	etermination letter tha	t it is a private opera	iting		
	foundation, and the ruling is effective for 2015, enter the date of the ruling ▶						
b	Check box to indicate v)(3) or 4942(j)(5)	
2-	False the leases of the ed	Tax year		Prior 3 years			
z a	Enter the lesser of the ad- justed net income from Part	(a) 2015	(b) 2014	(c) 2013	(d) 2012	(e) Total	
	I or the minimum investment		(2) 2011	(6) 20 10	(4) 2012		
	return from Part X for each						
	year listed						
D	85% of line 2a						
С	Qualifying distributions from Part]					
_	XII, line 4 for each year listed .						
u	Amounts included in line 2c not used directly for active conduct						
	of exempt activities						
е	Qualifying distributions made						
	directly for active conduct of exempt activities Subtract line						
	2d from line 2c						
3	Complete 3a, b, or c for the		1				
а	"Assets" alternative test - enter						
-	(1) Value of all assets			,			
	(2) Value of assets qualifying						
	under section						
b	4942(j)(3)(B)(i)						
-	enter 2/3 of minimum invest-						
	ment return shown in Part X,						
	line 6 for each year listed				 		
С	"Support" alternative test - enter						
	(1) Total support other than gross investment income						
	(interest, dividends, rents,						
	payments on securities						
	loans (section 512(a)(5)), or royalties)						
	(2) Support from general						
	public and 5 or more exempt organizations as						
	provided in section 4942						
	(j)(3)(B)(iii)						
	port from an exempt						
	organization					 	
Da	(4) Gross investment income	ton, Information //	Yammiata Abia mart	amba if the formulat			
Ра		uring the year - see		only if the foundar	uon nad \$5,000 o	r more in assets at	
_							
1	Information Regarding						
а	List any managers of before the close of any	the foundation who h	lave contributed more	e than 2% of the tota	Il contributions recei	ved by the foundation	
			ey have contributed h	iole than \$5,000) (Se	ee section 507 (u)(2))		
	NAN VAN AND						
b	List any managers of					y large portion of the	
	ownership of a partner	ship or other entity) of	which the foundation	has a 10% or greater	ınterest		
	NONE						
2	Information Regarding	g Contribution, Grant,	Gift, Loan, Scholarsh	ip, etc., Programs:		· · · · · · · · · · · · · · · · · · ·	
	Check here ► X if t	he foundation only r	makes contributions	to preselected char	table organizations	and does not accept	
	unsolicited requests for	or funds If the found:	ation makes difts ara	ints etc (see instruct	ions) to individuals (or organizations under	
	other conditions, comp	olete items 2a. b. c. and	d d	into, etc (see instruct	ions) to marviduals t	organizations under	
	The name, address, a			he person to whom an	alications should be ad	dropped	
a	The hame, address, a	na telephone namber	or e-mail address or t	ne person to whom app	blications should be ac	uressea	
	The form in which and	leading about the suit					
D	The form in which app	iications snould be sub	omitted and information	on and materials they	snoula include		
						<u> </u>	
C	Any submission deadli	nes					
d	Any restrictions or li	mitations on awards.	such as by geogra	aphical areas, charita	ble fields, kinds of	institutions, or other	
	factors	,	-, gg.	,,			

Page 11

Part XV . Supplementary Information (continued)								
3 Grants and Contributions Paid Durin	Grants and Contributions Paid During the Year or Approved for Future Payment							
Recipient	If recipient is an individual, show any relationship to	Foundation	Purpose of grant or contribution	Amount				
Name and address (home or business)	any foundation manager or substantial contributor	recipient	contribution					
a Paid during the year								
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Total	<u></u> .							
b Approved for future payment		1						
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	1			1				
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	l							
Total			▶ 3b					

JSA 5E1491 1 000

Page	1	2

Part XVI-	A Analysis of Income-Prod	ucing Act	ivities			
Enter gross amounts unless otherwise indicated			ated business income	Excluded by	y section 512, 513, or 514	(e)
		(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	Related or exempt function income
-	service revenue			Example: case	,	(See instructions)
_						
_						
e				-		
· -						
_	and contracts from government agencies					
2 Members	ship dues and assessments					
	n savings and temporary cash investments -			14	110,108.	
	s and interest from securities			1 1 1	110,100.	
	al income or (loss) from real estate					
	financed property					
	ebt-financed property		1			
	income or (loss) from personal property					
	vestment income	_		18	1,400,214.	
	oss) from sales of assets other than inventory			10	1,400,214.	
	me or (loss) from special events					
	ofit or (loss) from sales of inventory			<u> </u>		
	venue a					
'						
6	Add columns (b) (d) and (c)		0.		1,510,322.	
	Add columns (b), (d), and (e)		·	'		1,510,322.
(See worksh	dd line 12, columns (b), (d), and (e) leet in line 13 instructions to verify calc	ulations \			13	1,010,022.
Part XVI-			ccomplishment of Fr	remnt Pur	nneae	· · · ·
Line No.	Explain below how each activit					
▼	accomplishment of the foundation	on's exemp	t purposes (other than I	by providing	funds for such purpose	s) (See instructions)
				-		
					<u> </u>	
						
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			···			
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				•		
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					<u> </u>	

		Exempt Orgai	nizations									
1 D	id the	organization direct	ly or indirectly	engage in any of th	ne following	with any	other orga	nization	described		Yes	No
11	secti	on 501(c) of the Co	de (other than	section 501(c)(3) o	rganization	s) or in se	ction 527, i	elating to	o political			
0	rganız	ations?										
аT	ransfe	ers from the reporting	ig foundation to	a noncharitable ex	empt organ	zation of						1
(1	I) Cas	h								1a(1)		Х
		er assets								1a(2)		Х
		ransactions										
(1	I) Sal	es of assets to a no	ncharitable exe	mpt organization						1b(1)		Х
(2	2) Pur	chases of assets fro	om a noncharita	able exempt organiza	ition					1b(2)		Х
(3	3) Rer	ntal of facilities, equi	pment, or other	assets						1b(3)		Х
(4	l) Rei	mbursement arrang	ements							1b(4)		Х
(5	5) Loa	ns or loan guarantee	es							1b(5)		Х
(6	i) Per	formance of service	s or members	hip or fundraising so	licitations					1b(6)		Х
		of facilities, equipn										Х
		answer to any of th									fair m	arke
		f the goods, other										
		n any transaction or										
(a) Line		(b) Amount involved		noncharitable exempt org			ription of transf		-			
		N/A				N/A						
			· · · · · · · · · · · · · · · · · · ·									
			-									
	-			· -								
		· · · · · · · · · · · · · · · · · · ·	-									
	-		-									
												
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		.										
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		oundation directly								_	<u> </u>	٦ .
		ed in section 501(c)		ther than section 50)1(c)(3)) or	in section	527?		L	Y _f	es X	J No
<u> b lf</u>	"Yes,	" complete the follo										
_		(a) Name of organization	n .	(b) Type of o	rganization			(c) Descript	tion of relations	hip		
				 .								
							<u> </u>					
		 										
									-			
	Under	penalties of perjury, I declar, and complete Declaration of	are that I have exam foreperer (other than t	ined this return, including a axparer) is based on all inforr	ccompanying sometion of which is	hedules and s preparer has an	tatements, and to v knowledge	to the best	of my knowledg	e and b	elief, it	is true
Sign	\ /		///////////////////////////////////////	Al D		N	,			discus		retum
Here	1/	Morpho	and	2/ 10/16/11	<u></u>	PRESI	DENT			epar <u>er</u>		below
Hele	Sign	ature of officer or trustee		Date '	•	Trtle			(see instruction	s)? X	Yes	No
	<u> </u>	-										
Daid —		Print/Type preparer's na	me	Preparer's signature	Danielos	431.	Date	Che	eck if F	PTIN		
Paid		DANIEL FULLE	R		Danielo.	4	08/30/2	2016 sel	f-employed	P002	3813	5
Prepa	rer	Firm's name ► BD	O USA, LLP				_	Firm's EIN	▶13-53	38159	90	
Use C	nly	Firm's address > 20	O OTTAWA A	VE NW STE 300	_							
		GR	AND RAPIDS	, MI		495	03	Phone no	616-77	14-70	000	

Schedule B

(Form 990, 990-EZ, or 990-PF) Department of the Treasury Internal Revenue Service

Name of the organization

Schedule of Contributors

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

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

OMB No 1545-0047

2015

Employer identification number

THE WING SHADOW FOUNDA	47-3957199							
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 foundation							
	527 political organization							
Form 990-PF	X 501(c)(3) exempt private foundation							
	4947(a)(1) nonexempt charitable trust treated as a private foundation							
Note. Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule See instructions General Rule X For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II. See instructions for determining a								
contributor's total cont	indutoris							
regulations under sect 13, 16a, or 16b, and tl	escribed in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1. clons 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 chat received from any one contributor, during the year, total contributions be amount on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1 Co	or 990-EZ), Part II, line s of the greater of (1)						
For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I, II, and III								
For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions exclusively for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., purpose. Do not complete any of the parts unless the General Rule applies to this organization because it received nonexclusively religious, charitable, etc., contributions totaling \$5,000 or more during the year.								
Caution. An organization that is 990-EZ, or 990-PF), but it must a	totaling \$5,000 or more during the year							

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 THE WING SHADOW FOUNDATION

Employer identification number 47-3957199

Part I	Contributors (see instructions). Use duplicate copies of Part I if additional space is needed.							
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution					
1_	NAN E. VAN ANDEL 660 ADA DR. SUITE 301 ADA, MI 49301	\$5,142,792.	Person X Payroll X 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)					
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution					
		\$	Person Payroli Noncash (Complete Part II for noncash contributions)					

Name of organization THE WING SHADOW FOUNDATION

Employer identification number 47-3957199

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	452,312,401 SHARRE OF ALPS WMC RESEARCH VALUE A		,
		\$5,142,792.	12/10/2015
(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
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	

Name of organization	THE	WING	SHADOW	FOUNDATION

Employer identification number 47-3957199

Part III	Exclusively religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8), or									
•	(10) that total more than \$1,000 for the year from any one contributor. Complete columns (a) through (e) and									
	the following line entry For organizations completing Part III, enter the total of exclusively religious, charitable, etc									
	contributions of \$1,000 or less for the	ee instructions.) ►\$								
	Use duplicate copies of Part III if addit									
(a) No. from	(b) Purpose of gift	(c) Use	of gift	(d) Description of how gift is held						
Part I										
	(e) Transfer of gift									
	Transferee's name, address, ar	nd ZIP + 4	Relatio	nship of transferor to transferee						
(a) No.				<u> </u>						
from Part I	(b) Purpose of gift	(c) Use	of gift	(d) Description of how gift is held						
										
										
	(e) Transfer of gift									
	Transferee's name, address, a	Palatio	ionship of transferor to transferee							
	Transferee's flame, address, at	IIU ZIP T 4	Relatio	rising of transferor to transferee						
		· · · · · · · · · · · · · · · · · · ·								
(a) No. from Part I	(b) Purpose of gift	(c) Use	of gift	(d) Description of how gift is held						
	(e) Transfer of gift									
	, , , , , , , , , , , , , , , , , , ,									
	Transferee's name, address, as	nd ZIP + 4	Relatio	nship of transferor to transferee						
										
(a) No. from Part I	(b) Purpose of gift	(c) Use	of gift	(d) Description of how gift is held						
	(e) Transfer of gift									
	(-, 2									
	Transferee's name, address, a	nd ZIP + 4	Relatio	Relationship of transferor to transferee						

FORM 990-PF - PART IV

CAPITAL GAINS AND LOSSES FOR TAX ON INVESTMENT INCOME

Kind of Property			Desc	cription		or l	Date acquired	Date sold
Gross sale price less	Depreciation allowed/	Cost or other	FMV as of 12/31/69	Adj basis as of 12/31/69	Excess of FMV over	11	Gain	
expenses of sale	allowable	basis			adı basıs	${\sf H}$	or (loss)	
		TOTAL CAPIT	TAL GAIN DIS	TRIBUTIONS			1,400,214.	
						$\ \cdot\ $		
OTAL GAIN(LC	1661						1,400,214.	
OTAL GAIN(LC	oss)		• • • • • • • • • • • • • • • • • • • •	• • • • • • • • • • • •		П	1,400,214.	
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ATTACHMENT 1 PAGE 19

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	TTACHMENT
	Ā

PART II - OTHER ASSETS DESCRIPTION FORM 990PE,

MUTUAL FUNDS

ENDING BOOK VALUE

ENDING

3,428,999.

3,627,545.

TOTALS

3,428,999.

3,627,545.

ATTACHMENT 2

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

NAME AND ADDRESS

NAN E. VAN ANDEL 660 ADA DR. SUITE 301 ADA, MI 49301

S, AND TRUSTEES	
AND	
LIST OF OFFICERS, DIRECTORS,	
OFFICERS,	
P.	ı
LIST	
PART VIII -	
PART	
FORM 990PF,	

ATTACHMENT 3	CONTRIBUTIONS TO EMPLOYEE SATION BENEFIT PLANS	0.	0.0	0. 0.
OFFICERS, DIRECTORS, AND TRUSTEES	TITLE AND AVERAGE HOURS PER WEEK DEVOTED TO POSITION COMPENSATION	PRESIDENT 1.00	TREASURER 1.00	GRAND TOTALS
FORM 990PF, PART VIII - LIST OF OFFICERS,	NAME AND ADDRESS	NAN VAN ANDEL 660 ADA DR. SE, STE 301 ADA, MI 49301	JAME ROSLONIEC 660 ADA DR. SE, STE 301 ADA, MI 49301	