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Form 990-PF

Return of Private Foundation

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

Do not enter social security numbers on this form as it may be made public.

OMB No. 1545-0052

Department of the Treasury Information about Form 990-PF and its separate instructions is at www.irs.gov/form990pf. Internal Revenue Service For calendar year 2015 or tax year beginning APR 20. 2015 , and ending DEC 31, 2015 Name of foundation A Employer identification number 47-4078930 TWO FISH FOUNDATION Number and street (or P O. box number if mail is not delivered to street address) Room/suite B Telephone number 1771 GRAND RIVER DR 616-363-4808 City or town, state or province, country, and ZIP or foreign postal code C if exemption application is pending, check here 49301 ADA, MI G Check all that apply: X 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 computation X Address change Name change Section 501(c)(3) exempt private foundation H Check type of organization: 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 I Fair market value of all assets at end of year J Accounting method: X Cash Accrual If the foundation is in a 60-month termination Other (specify) (from Part II, col. (c), line 16) under section 507(b)(1)(B), check here 115,858. (Part I, column (d) must be on cash basis.) ▶\$ Part I Analysis of Revenue and Expenses (d) Disbursements for charitable purposes (cash basis only) (a) Revenue and expenses per books (b) Net investment (c) Adjusted net (The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a)) income income 196,550 Contributions, gifts, grants, etc., received Check Inf the foundation is not required to attach Sch. B. Interest on savings and temporary cash investments 2.STATEMENT Dividends and interest from securities b Net rental income or (loss) 6a Net gain or (loss) from sale of assets not on line 10 b Gross sales price for all assets on line 6a 0 Capital gain net income (from Part IV, line 2) 0 Net short-term capital gain Income modifications 10a and allowances b Less. Cost of goods sold c Gross profit or (loss) 11 Other income ... 196,552 0 12 Total. Add lines 1 through 11 28.077 0. 2. 28.075. Compensation of officers, directors, trustees, etc 14 Other employee salaries and wages 15 Pension plans, employee benefits Operating and Administrative Expenses 0 0 0. STMT 2 7,340 16a Legal fees 1,680 0. 0 STMT.3. 0. b Accounting fees c Other professional fees 17 Interest 2,152 0 2,152. Taxes STMT 4 19 Depreciation and depletion 20 Occupancy 0 25,433. 0 . 25,433 21 Travel, conferences, and meetings 22 Printing and publications 0 0 17,542. 17,576 24 Total operating and administrative 0 2 73,202. expenses. Add lines 13 through 23 _____ 82,258. 4,055. 4,055 25 Contributions, gifts, grants paid 26 Total expenses and disbursements. 0 77,257. Add lines 24 and 25 86,313 27 Subtract line 26 from line 12 110,239 a Excess of revenue over expenses and disbursements. 0 b Net investment income (if negative, enter -0-) 0. c Adjusted net income (if negative, enter -0-)

\$20 G1

LHA For Paperwork Reduction Act Notice, see instructions.

For	m 99	0-PF (2015) TWO FISH FOUNDATION		47-4078930		
P	art	Balance Sheets Attached schedules and amounts in the description	Beginning of year	End of		
<u>-</u>	art.	column should be for end-of-year amounts only	(a) Book Value	(b) Book Value	(c) Fair Market Value	
	1	Cash - non-interest-bearing		70,831.		
		Savings and temporary cash investments		45,002.	45,002.	
	3	Accounts receivable ►		1		
		Less: allowance for doubtful accounts ▶				
	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	j	j		
		Less: allowance for doubtful accounts				
ţ	8	Inventories for sale or use				
Assets	9	Prepaid expenses and deferred charges				
4	10a	Investments - U.S. and state government obligations				
	Ь	Investments - corporate stock				
	6	Investments - corporate bonds				
	11	Investments - land, buildings, and equipment basis	Ì	ł		
		Less accumulated depreciation				
	12	Investments - mortgage loans				
	13	Investments - other				
	14	Land, buildings, and equipment: basis ▶				
	l	Less accumulated depreciation				
	15	Other assets (describe STATEMENT 6)	0.	25.	<u>25.</u>	
	16	Total assets (to be completed by all filers - see the				
		instructions. Also, see page 1, item I)	0.	115,858.	115,858.	
	17	Accounts payable and accrued expenses				
	18	Grants payable				
S	19	Deferred revenue				
Liabilities	20	Loans from officers, directors, trustees, and other disqualified persons				
jap	21	Mortgages and other notes payable				
_	22	Other liabilities (describe STATEMENT 7)	0.	5,619.		
			1			
	23	Total liabilities (add lines 17 through 22)	0.	5,619.		
]	Foundations that follow SFAS 117, check here	,			
en.		and complete lines 24 through 26 and lines 30 and 31.				
Fund Balances	24	Unrestricted				
ılan	25	Temporarily restricted		<u> </u>		
8	26	Permanently restricted				
Ę	}	Foundations that do not follow SFAS 117, check here 📗 🛣 📗	ļ			
o. F	1	and complete lines 27 through 31.	-			
ध	27	Capital stock, trust principal, or current funds	0.	0.		
Se	28	Paid-in or capital surplus, or land, bldg., and equipment fund	0.	0.		
Net Assets	29	Retained earnings, accumulated income, endowment, or other funds	0.	110,239.		
Š	30	Total net assets or fund balances	0.	110,239.		
	Ì			}		
_	31	Total liabilities and net assets/fund balances	0.1	115,858.		
P	art	III Analysis of Changes in Net Assets or Fund Ba	alances			
_						
1		net assets or fund balances at beginning of year - Part II, column (a), line	30	()	•	
		st agree with end-of-year figure reported on prior year's return)			0.	
		r amount from Part I, line 27a		. 2	110,239.	
3		r increases not included in line 2 (itemize)		3	0.	
4		lines 1, 2, and 3			110,239.	
		eases not included in line 2 (itemize)			0.	
<u>6</u>	Tota	I net assets or fund balances at end of year (line 4 minus line 5) - Part II, co	lumn (b), line 30		110,239.	
			•		Form 990-PF (2015)	

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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7

8

7 Add lines 5 and 6

Enter qualifying distributions from Part XII, line 4

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Pa	rt VI `Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or	1948	- see	nstru	ctior	1S)
1a	Exempt operating foundations described in section 4940(d)(2), check here and enter "N/A" on line 1.	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 and enter 1%	1	Ĺ			0.
	of Part I, line 27b	}	ļ			
C	All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of Part I, line 12, col. (b).	1	ļ			
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	2	 			0.
3	Add lines 1 and 2	3	} _			0.
	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	4	 			0.
	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-	5_	ļ			0.
	Credits/Payments;	1				
	2015 estimated tax payments and 2014 overpayment credited to 2015 6a	-{				
	Exempt foreign organizations - tax withheld at source	-{	}			
	Tax paid with application for extension of time to file (Form 8868) 6c	-	Ì			
	Backup withholding erroneously withheld	┨	}			^
	Total credits and payments. Add lines 6a through 6d	7	├			0.
	Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached	8	 -			0.
	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed	9	\vdash			<u> </u>
		10	 			
	Enter the amount of line 10 to be; Credited to 2016 estimated tax rt VII-A Statements Regarding Activities	1 11	Ь			
	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or interveni	n in		T-7	Yes	No
	any political campaign?	5 III		1a		X
	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see instructions for the definition		•	10		X
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials publish			"		
	distributed by the foundation in connection with the activities.			1 1		
	Did the foundation file Form 1120-POL for this year?			l tc		X
	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year:		• • • • • • • • • • • • • • • • • • • •			
	(1) On the foundation. \blacktriangleright \$ 0. (2) On foundation managers. \blacktriangleright \$0	•		1		
	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation	_				
	managers. ► \$O.			}		
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?			2		<u>X</u> _
	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> _
	Old the foundation have unrelated business gross income of \$1,000 or more during the year?			4a		<u>X</u>
	If "Yes," has it filed a tax return on Form 990-T for this year?	1.	1/¥	4b_		
	Was there a liquidation, termination, dissolution, or substantial contraction during the year?			5		<u>X</u>
	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 Provided to include the accordance to the control of the cont			}		
	• By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the statement of the power in the powe	e iaw			v	
	remain in the governing instrument?		•• • •	7	X	
′	bid the foundation have at least φ5,000 in assets at any time during the year? If thes, complete Fart II, coi. (c), and Fart Λ	V		 '	^	
Q۵	Enter the states to which the foundation reports or with which it is registered (see instructions)			1		
υd	MI				}	
h	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	x	
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for ca		• •• •		-==-	
-	year 2015 or the taxable year beginning in 2015 (see instructions for Part XIV)? If "Yes," complete Part XIV			9	X	
10		STMT	r. 8	10	X	
				orm 990		(2015)

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Pa	rt VII-A Statements Regarding Activities (continued)			
		1 3	Yes	No
11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of	} ;		
	section 512(b)(13)? If "Yes," attach schedule (see instructions)	11		X
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had advisory privileges?	\ <u> </u>		
12	If "Yes," attach statement (see instructions)	12		_X
40		13	X	<u> </u>
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	1 10		
	Website address ► THETWOFISHFOUNDATION.ORG	62 4	000	
14	The books are in care of ► JONATHAN D. RUDOLPH Telephone no. ► 616-3		808	
	Located at ► 1771 GRAND RIVER DR, ADA, MI ZIP+4 ►4	9301		
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - Check here		▶	\Box
	and enter the amount of tax-exempt interest received or accrued during the year	N	/A	
16	At any time during calendar year 2015, did the foundation have an interest in or a signature or other authority over a bank,		Yes	No
	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 the			
	foreign country	}		
Pa	rt VII-B Statements Regarding Activities for Which Form 4720 May Be Required			
			Yes	No
	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.		res	INU
1a	During the year did the foundation (either directly or indirectly):	1	{	
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person? Yes X No	i	1	
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from)	1		
	a disqualified person? Yes X No	ì		
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?	1		
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?	1	{	
	(5) Transfer any income or assets to a disqualified person (or make any of either available	1	{	
	for the benefit or use of a disqualified person)?		j .	
	, , , ,)]	1
	(6) Agree to pay money or property to a government official? (Exception. Check "No"		ļ	
	if the foundation agreed to make a grant to or to employ the official for a period after			
	termination of government service, if terminating within 90 days.) Yes X No)	
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	<u> </u>	<u> </u>
	Organizations relying on a current notice regarding disaster assistance check here		}	{
C	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected	1	l	
	before the first day of the tax year beginning in 2015?	10	<u></u>	X
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation		-	
	defined in section 4942(j)(3) or 4942(j)(5)):	1	{	l
я	At the end of tax year 2015, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning	1	(ĺ
_		1	(1
		1	1	}
	If 'Yes,' list the years \(\) Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2) (relating to incorrect		1	}
D		}	ļ	ļ
	valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer "No" and attach	١	}	l
	statement - see instructions.)	<u>2b</u>	 	
C	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here.	}	ŀ	ł
)	1	ł	ł
3a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time	}	Ì	}
	during the year?	Ì	ł	
b	If "Yes," did it have excess business holdings in 2015 as a result of (1) any purchase by the foundation or disqualified persons after	1		
	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	1		(
	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,		į	1
	Form 4720, to determine if the foundation had excess business holdings in 2015.)	3b	1	[
An	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a	1	X
	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that	74	 	 ^
U		1	1	₩.
	had not been removed from jeopardy before the first day of the tax year beginning in 2015?	4b	O DE	(2045)
	F	orm 99	U-PF	(2015)

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Part VII-B Statements Regarding Activities for Which I	Form 4720 May Be F	Required (continu	ued)	
5a During the year did the foundation pay or incur any amount to:				
(1) Carry on propaganda, or otherwise attempt to influence legislation (section	1 4945(e))?	☐ Ye	s X No	1 1
(2) Influence the outcome of any specific public election (see section 4955); o	• • • • • • • • • • • • • • • • • • • •	ectly.	j	1 1
any voter registration drive?			s X No	
(3) Provide a grant to an individual for travel, study, or other similar purposes		• == •	s X No	} }
(4) Provide a grant to an organization other than a charitable, etc., organization				1 1
••	n described in section		s X No	1 1
4945(d)(4)(A)? (see instructions)		• •	ווועביפי	1 1
(5) Provide for any purpose other than religious, charitable, scientific, literary,	or educational purposes, or i		s X No	
the prevention of cruelty to children or animals?		•	ו מאובבו פּי	
b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify und	•	-	37/3	. }
section 53.4945 or in a current notice regarding disaster assistance (see instru			N/A 5	b
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 fi			[1 1
expenditure responsibility for the grant?		Ĭ/ <u>.A.</u>	s No	
If "Yes," attach the statement required by Regulations section 53.494	5-5(d).			1
6a Did the foundation, during the year, receive any funds, directly or indirectly, to	pay premiums on			1 1
a personal benefit contract?		🗀 Ye	s X No	1 1
b Did the foundation, during the year, pay premiums, directly or indirectly, on a p			6	b X
If "Yes" to 6b, file Form 8870.				
7a At any time during the tax year, was the foundation a party to a prohibited tax s	helter transaction?	Ye	s X No	1
b If "Yes," did the foundation receive any proceeds or have any net income attribu			N/A 7	b
Part VIII Information About Officers, Directors, Trust				
Paid Employees, and Contractors	,		•	
1 List all officers, directors, trustees, foundation managers and their	compensation.			
	(b) Title, and average hours per week devoted	(c) Compensation	(d) Contributions to	(e) Expense account, other
(a) Name and address	hòurs per week devoted to position	(If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	account, other allowances
KENT SNOEYINK	SECRETARY/DIR		Compensacion	4.0.14.1000
361 CUMMINGS SW	DECKETAKI/DIK	ECTOR		
GRAND RAPIDS, MI 49534	45.00	28,077.	0.	0.
	PRESIDENT/TRE			<u></u>
	LKESIDENI\IKE	RADOKEKIDI	RECTOR	
4020 YARROW DRIVE NE	10.00		1 1	0
GRAND RAPIDS, MI 49525	10.00	0.	0.	0.
	DIRECTOR	Ì		
4020 YARROW DRIVE NE	40.00			•
GRAND RAPIDS, MI 49525	10.00	0.	0.	0.
		Ì	İ	
		\		
	<u> </u>		Ll	
2 Compensation of five highest-paid employees (other than those inc		enter "NONE."	(d) Contributions to	(-) Evpapas
(a) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week	(c) Compensation	employee benefit plans and deferred	(e) Expense account, other
	devoted to position	.,,	compensation	allowances
NONE		}	}	
	<u> </u>	 		
	ļ	{	į l	
	<u> </u>	 	ļ	
		})	
		 		
	1	(1 1	
		<u> </u>	ļ	
	}		}	
	<u> </u>]	<u> </u>	
Total number of other employees paid over \$50,000		<u></u>		0
			Form	990-PF (2015)

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Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors (continued)	y 	
3 Five highest-paid independent contractors for professional services. If none, enter "NONE."		
(a) Name and address of each person paid more than \$50,000 (b) Type of serv	rice	(c) Compensation
NONE		
		
		}
		
		ļ
Total number of others receiving over \$50,000 for professional services	<u>_</u>	<u></u>
List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of organizations and other beneficiaries served, conferences convened, research papers produced, etc.		Expenses
TO GLORIFY GOD THROUGH WORD AND DEED BY MEETING THE NEEDS	OF	
WIDOWS, ORPHANS, MISSIONARIES AND THE CHURCH.		
		77,257
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
ı N/A		
······································		
All other program-related investments. See instructions.	- 	
3		
Total Add Second Abussiah O		0
Total, Add lines 1 through 3		rm 990-PF (201

P	art X Minimum Investment Return (All domestic foundations must complete this part. Foreign for	ndations, s	see instructions.)
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes:		
a	Average monthly fair market value of securities	1a	0.
b	Average of monthly cash balances	1b	31,865.
C		1c	
đ		1d	31,865.
е	Reduction claimed for blockage or other factors reported on lines 1a and		
	1c (attach detailed explanation) 1e 0	,}	
2	Acquisition indebtedness applicable to line 1 assets	2	0.
3	Subtract line 2 from line 1d	3	31,865.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions)	4	478.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	31,387.
6	Minimum investment return. Enter 5% of line 5 ADJUSTED FOR SHORT TAX PERIOD	6	1,101.
ĬΡ	art XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations a		
<u> </u>	foreign organizations check here \blacktriangleright \mathbf{X} and do not complete this part.)		
1	Mınimum investment return from Part X, line 6	1	
2a	Tax on investment income for 2015 from Part VI, line 5		
Ь	Income tax for 2015. (This does not include the tax from Part VI.)		
c	Add lines 2a and 2b	2c	
3	Distributable amount before adjustments, Subtract line 2c from line 1	3	
4	Recoveries of amounts treated as qualifying distributions	4	
5	Add lines 3 and 4	5	
6	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	7	
P	art XII Qualifying Distributions (see instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:	1	
а	Expenses, contributions, gifts, etc total from Part I, column (d), line 26	1a	<u>77,257.</u>
b	Program-related investments - total from Part IX-B	1b	0.
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes	2	
3	Amounts set aside for specific charitable projects that satisfy the:	{ }	
a	Suitability test (prior IRS approval required)	3a	
b	Cash distribution test (attach the required schedule)	3b	
4	Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4	4	77,257.
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	5	0.
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	77,257.
	Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation	qualifies for	the section
	4940(e) reduction of tax in those years.		

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Part XIII Undistributed Income (see	e instructions)	N/A		
	(a)	(b)	(c)	(d)
_	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:		}		
,,			 	<u> </u>
3 Excess distributions carryover, if any, to 2015:				
a From 2010		1		
b From 2011		}		
c From 2012		ļ		
d From 2013				
e From 2014				
f Total of lines 3a through e				
4 Qualifying distributions for 2015 from Part XII, line 4: ► \$				
a Applied to 2014, but not more than line 2a				<u> </u>
b Applied to undistributed income of prior				
years (Election required - see instructions)				
c Treated as distributions out of corpus				
(Election required - see instructions)				
d Applied to 2015 distributable amount				
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:				
2 Corpus Add lines 3f, 4c, and 4e Subtract line 5				1
b Prior years' undistributed income. Subtract				
line 4b from line 2b				
c Enter the amount of prior years' undistributed income for which a notice of				
deficiency has been issued, or on which the section 4942(a) tax has been previously assessed				
d Subtract line 6c from line 6b. Taxable				1
amount - see instructions		}		{
e Undistributed income for 2014. Subtract line			 	
4a from line 2a. Taxable amount - see instr.				}
f Undistributed income for 2015. Subtract	 			Ţ
lines 4d and 5 from line 1. This amount must				}
be distributed in 2016				<u> </u>
7 Amounts treated as distributions out of				
corpus to satisfy requirements imposed by				ł
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				
9 Excess distributions carryover to 2016.				
Subtract lines 7 and 8 from line 6a		 		
10 Analysis of line 9:				
a Excess from 2011				
b Excess from 2012		}		
c Excess from 2013		{		
d Excess from 2014				
e Excess from 2015				

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

c Any submission deadlines:

523801 11-24-15

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

Form 990-PF (2015)

Grants and Contributions Paid During the	Year or Approved for Future	Payment		
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	or substantial contributor	recipient	Condibation	
a Paid during the year				
KIRK AND CHRIS DEHAAN	NONE	ı	GENERAL ASSISTANCE	
1120 PETTIS AVE NE	}			
ADA, MI 49301-8827				1,50
AMY RICHEY 901 E 78TH ST	NONE	I	GENERAL ASSISTANCE	
MINNEAPOLIS, MN 55420			}	2.00
KNAPP FAMILY	NONE	I	GENERAL ASSISTANCE	
3650 BRADFORD ST NE	}		}	
GRAND RAPIDS, MI 49525-3323		ļ		5
KRISTEN VERSEN	NONE	ı	GENERAL ASSISTANCE	
3270 JOHNSON CT.				E0
GRANDVILLE, MI 49418	- 			50
Total			▶ 3a	4,05
b Approved for future payment				
NONE				
		 	-	
		-	-	
Total		<u> </u>		

Part XV	I-A Analysis of Income-Produc				·	
Enter gross a	amounts unless otherwise indicated.	(a) Business	ted business income (b)	(C) Exclu-	(d)	(e) Related or exempt
1 Program	service revenue;	code	Amount	sion	Amount	function income
a			<u></u>			
		L	<u> </u>	<u> </u>		
_			<u> </u>			
		L	<u> </u>	<u> </u>		
e		Ĺ	<u> </u>	Ĺ		<u> </u>
f					<u> </u>	
g Fees	and contracts from government agencies					
2 Members	ship dues and assessments	L	<u> </u>	<u> </u>		
3 Interest o	on savings and temporary cash					
investme	nts			14	2.	
4 Dividends	s and interest from securities					
5 Net renta	I income or (loss) from real estate;					
	financed property					
b Not de	ebt-financed property					
	l income or (loss) from personal					
property		1		}	}	
7 Other inv	restment income			1		
8 Gain or (loss) from sales of assets other			1		
	etory	}		}	}	
	ne or (loss) from special events	<u> </u>		1		
	ofit or (loss) from sales of inventory			1		
11 Other rev				1		
а					}	
				1		
_				1		
е						
	Add columns (b), (d), and (e)		0.		2.	0
	dd line 12, columns (b), (d), and (e)					2
	neet in line 13 instructions to verify calculations.)	•				
Part XV		o the Acc	complishment of E	xemp	ot Purposes	
Line No.	Explain below how each activity for which inco					antichment of
LIIIE NO.	the foundation's exempt purposes (other than			4 CORRE	puteu importantiy to the accom	ipiisiitteit oi
	and realisation of example per people (earlier analis	by promaing in	dido idi oddi parpootoji			
					 	
						
						
+						
						
}	·		 			
						
						
						
						
						
						

Form **990-PF** (2015)

523621 11-24-15

		Exempt Organ	izations							
1 [Oid the or	ganization directly or ındi	rectly engage in any of the foll	llowing	g with any other organizatio	n described in secti	on 501(c) of	İ	Yes	No
t	he Code	(other than section 501(c))(3) organizations) or in section	on 52	7. relating to political organi	izations?		i		
		•	ation to a noncharitable exem					l i		
	1) Cash		allon to a nononanable exemp	,pt o. g	junication on			1a(1)		X
•	•		•• • • • •	•		• •		f .		X
		r assets						1a(2)		
		nsactions;								
(1) Sales	s of assets to a noncharita	ble exempt organization					1b(1)		X
(2) Purc	hases of assets from a no	ncharitable exempt organization	ion				1b(2)		X
(3) Rent	al of facilities, equipment,	or other assets					1b(3)		X
(4) Reim	bursement arrangements						1b(4)		X
•	•	s or loan guarantees						1b(5)		X
•	•	•	embership or fundraising solic	citatini				1b(6)		X
							• • • • •	1c		X
	_		uling lists, other assets, or paid				 			
			"Yes," complete the following						eis,	
			oundation. If the foundation re other assets, or services recei		ed less than fair market valu	e in any transaction	or snaring arrangement, si	IOW III		
(a) Line		(b) Amount involved	(c) Name of nonchar		exempt organization	(d) Description	of transfers, transactions, and s	hanno an	angeme	ents
<u>-1</u>		1-7	 		The state of Section 1	(2) 2030 (2010)				
			N/	_A_		+	···			
						+				
										
	-		 							
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	_					 				
			<u> </u>							
			<u> </u>			<u> </u>				
			 							
	-		 			1	 			
			 							
			 			 				
<u> </u>		and a time of the control of the con	Alica officiate of south and an artist of the		ar mare to a sysmet arganiz	ations described				
		=	tly affiliated with, or related to			zations described	_	٦,,,	T-50	า
			r than section 501(c)(3)) or in	n sect	ion 52/?			_] Yes	L,A	∐No
<u> </u>	f Yes, c	omplete the following sch								
		(a) Name of org	janization		(b) Type of organization		(c) Description of relationsh	<u>ip</u>		
		N/A				<u> </u>				
			that I have examined this return, in					the IRS	discuss	this
Sig	n and b	elief, it is true, correct, and cor	mplete Declaration of preparer (oth	her thar	n taxpayer) is based on all inform	ation of which preparer	nas any knowledge retui	n with th	e prepa	rer
Her		——————————————————————————————————————	10/		11111411	PRESID		Yes]″No
	Sin	nature of officer or trustee			Date	Title	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			
		Print/Type preparer's na		er's ei	ignature	Date	Check if PTIN			
			1		•		self- employed			
July 11 /							600			
	-		MHOLDT+COMPAN	YΥ	LLP, CPAS		Firm's EIN ► 38-26	270	162	
USE	Only						 			
			40 TAHOE DRIV							
		GR	RAND RAPIDS, M	II	49546-7121		Phone no. 616.94			
							Fo	rm 9 9	0-PF	(2015)

Schedule B

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

Department of the Treasury Internal Revenue Service 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 Name of the organization 47-4078930 TWO FISH FOUNDATION 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 X 501(c)(3) exempt private foundation Form 990-PF 4947(a)(1) nonexempt charitable trust treated as a private foundation 501(c)(3) taxable private foundation Check if your organization is covered by the General Rule or a Special Rule. Note. Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions. General Rule For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributors. Special Rules For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of (1) \$5,000 or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1. Complete Parts I and II. For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I, II, and III. For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions exclusively for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., purpose. Do not complete any of the parts unless the General Rule applies to this organization because it received nonexclusively religious, charitable, etc., contributions totaling \$5,000 or more during the year _______ > \$ Caution. An organization that is not covered by the General Rule and/or the Special Rules does not file Schedule B (Form 990, 990-EZ, or 990-PF), but it must answer "No" on Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on its Form 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).

LHA 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

Employer identification number

TWO FISH FOUNDATI	ON
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TWO L	ISH FOUNDATION		-40/8930
Part I	Contributors (see instructions). Use duplicate copies of Part I if addition	nal space is needed.	<u> </u>
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	JONATHAN RUDOLPH 4020 YARROW NE GRAND RAPIDS, MI 49505	\$50,000.	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
2	NATIONAL CHRISTIAN FOUNDATION 4670 EAST FULTON STREET, SUITE 204 ADA, MI 49301	\$\$	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
3	TORAN AND BRENDA SCOTT 3100 42ND ST HAMILTON, MI 49419-8541	\$10,000.	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
4	JIM AND KRISTI WIDDIS 3705 MONARCH DR NE GRAND RAPIDS, MI 49525	\$\$10,000.	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
5	WHITE BIRCH BUILDERS 3875 SMOKEY HOLLOW CT NE GRAND RAPIDS, MI 49525	\$25,000.	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
52450 to 0		\$Schodula B /Farm	Person Payroll Noncash (Complete Part II for noncash contributions.)

Employer identification number

TWO FISH FOUNDATION

47-4078930

Part II	Noncash Property (see instructions). Use duplicate copies of Pa	rt 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	
		\$		
(a) No. from	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received	
art I				
		\$		
(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	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received	
}				
}		\ \$		
(a) No. from	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received	
Part I		(ose mes denois)	 	
1				

523454 10-26-15

Relationship of transferor to transferee

Transferee's name, address, and ZIP + 4

FORM 990-PF INTEREST ON SAVI	NGS AND TEM	PORARY	CASH IN	NVESTMENTS	STATEMENT	1
SOURCE	(A REVEI PER BO	NUE		(B) VESTMENT VCOME	(C) ADJUSTED NET INCOME	
CHASE BANK	-	2.		0.		2.
TOTAL TO PART I, LINE 3		2.		0.		2.
FORM 990-PF	LEGAL	FEES			STATEMENT	2
DESCRIPTION	(A) EXPENSES PER BOOKS	(B NET IN MENT I	VEST-	(C) ADJUSTED NET INCOM		
LEGAL FEES	7,340.		0.		0.	0.
TO FM 990-PF, PG 1, LN 16A =	7,340.		0.		0.	0.
FORM 990-PF	ACCOUNTI	NG FEES			STATEMENT	3
DESCRIPTION	(A) EXPENSES PER BOOKS	(B NET IN MENT I	VEST-	(C) ADJUSTED NET INCOM		
ACCOUNTING FEES	1,680.		0.	-	0.	0.
TO FORM 990-PF, PG 1, LN 16B	1,680.		0.		0.	0.
FORM 990-PF	TAXES			STATEMENT 4		
DESCRIPTION	(A) EXPENSES PER BOOKS	(B NET IN MENT I	VEST-	(C) ADJUSTED NET INCOM		
PAYROLL TAXES	2,152.		0.		0. 2,	152.
TO FORM 990-PF, PG 1, LN 18	2,152.		0.		0. 2,	152.
=						

FORM 990-PF	OTHER EXPENSES				STATEMENT		5
	(A) EXPENSES PER BOOKS	(B) NET INVES MENT INCO		(C) ADJUSTED NET INCOM		(D) CHARITAB PURPOSE	
OFFICE EXPENSE INSURANCE TELEPHONE FEES AND LICENSES SOFTWARE AND COMPUTER COSTS PROGRAM EXPENSES PENALTIES MEALS AND ENTERTAINMENT TO FORM 990-PF, PG 1, LN 23	2,742. 5,004. 548. 850. 1,446. 2,250. 34. 4,702.		0. 0. 0. 0. 0.		0. 0. 0. 0. 0. 0.	2,74 5,00 54 85 1,44 2,25 4,70	4. 8. 0. 6. 0.
10 FORM 990-FF, PG 1, LIN 25 =	17,576.					17,54	===
FORM 990-PF OTHER ASSETS					ST	'ATEMENT	6
DESCRIPTION		NING OF K VALUE		OF YEAR OK VALUE	FA	IR MARKET	•
MISCELLANEOUS ADVANCES		0.		25.		2	5.
TO FORM 990-PF, PART II, LINE	15	0.		25.		2	5.
FORM 990-PF	OTHER LIA	BILITIES			ST	ATEMENT	7
DESCRIPTION			ВО	AMOUNT	EC	Y AMOUNT	
PAYROLL LIABILITIES		-		0.		5,61	9.
TOTAL TO FORM 990-PF, PART II, LINE 22				0.		5,61	.9.

ORM 990-PF

LIST OF SUBSTANTIAL CONTRIBUTORS PART VII-A, LINE 10

STATEMENT

NAME OF CONTRIBUTOR

ADDRESS

JON RUDOLPH

4020 YARROW NE

GRAND RAPIDS, MI 49505

NATIONAL CHRISTIAN FOUNDATION

4670 EAST FULTON STREET, SUITE 204

ADA, MI 49301

TORAN AND BRENDA SCOTT

3100 42ND ST

HAMILTON, MI 49419-8541

JIM AND KRISTI WIDDIS

3705 MONARCH DR NE

GRAND RAPIDS, MI 49525

WHITE BIRCH BUILDERS

3875 SMOKEY HOLLOW CT NE

GRAND RAPIDS, MI 49525

FORM 990-PF

PART XV - LINE 1A LIST OF FOUNDATION MANAGERS STATEMENT

NAME OF MANAGER

JONATHAN RUDOLPH JODY RUDOLPH