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As Filed Data -

DLN: 93491304004227

2016

OMB No 1545-0052

Return of Private Foundation

Department of the Treasury

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

Internal Revenue Service Do not enter social security numbers on this form as it may be made public. Open to Public ▶ Information about Form 990-PF and its instructions is at www.irs.gov/form990pf. For calendar year 2016, or tax year beginning 01-01-2016 , and ending 12-31-2016 A Employer identification number Douglas A & Margaret E DeCamp Foundation 20-8293300 % MATT NUSBAUM Number and street (or P O box number if mail is not delivered to street address) B Telephone number (see instructions) 102 Cook Road (616) 945-4700 City or town, state or province, country, and ZIP or foreign postal code Hastings, MI 49058 ${f C}$ If exemption application is pending, check here ☐ Initial return ☐ Initial return of a former public charity G Check all that apply D 1. Foreign organizations, check here Amended return ☐ Final return 2. Foreign organizations meeting the 85% test, check here and attach computation ✓ Address change ☐ Name change E If private foundation status was terminated under section 507(b)(1)(A), check here ☑ Section 501(c)(3) exempt private foundation H Check type of organization \square Section 4947(a)(1) nonexempt charitable trust \square Other taxable private foundation I Fair market value of all assets at end J Accounting method ✓ Cash ☐ Accrual If the foundation is in a 60-month termination of year (from Part II, col (c), under section 507(b)(1)(B), check here Other (specify) line 16) \$ 7,151,403 (Part I, column (d) must be on cash basis) Part I Analysis of Revenue and Expenses (The total Disbursements Revenue and (b) Net investment Adjusted net for charitable (c) of amounts in columns (b), (c), and (d) may not necessarily expenses per books purposes (cash basis only) equal the amounts in column (a) (see instructions)) Contributions, gifts, grants, etc , received (attach 1.000.000 schedule) Check ► ☐ If the foundation is **not** required to attach 2 3 Interest on savings and temporary cash investments Dividends and interest from securities 131,309 131,309 Gross rents 5a b Net rental income or (loss) 6a Net gain or (loss) from sale of assets not on line 10 Gross sales price for all assets on line 6a 21,341 7 Capital gain net income (from Part IV, line 2) Net short-term capital gain Income modifications . 10a Gross sales less returns and allowances Less Cost of goods sold Gross profit or (loss) (attach schedule) c Other income (attach schedule) <u>وچ</u> 15 15 11 Total. Add lines 1 through 11 1,152,665 152,665 13 Compensation of officers, directors, trustees, etc 14 Other employee salaries and wages 15 Pension plans, employee benefits Operating and Administrative Expenses 16a Legal fees (attach schedule) . . 3,350 1,675 Accounting fees (attach schedule) 9 Other professional fees (attach schedule) 30,379 23,379 7,000 [چە 7,147 1,647 18 Taxes (attach schedule) (see instructions) 19 Depreciation (attach schedule) and depletion 20 21 Travel, conferences, and meetings 22 Printing and publications . . 2,000 23 Other expenses (attach schedule) 2.000 24 Total operating and administrative expenses. Add lines 13 through 23 . . . 42,876 26,701 10,675 346,500 346,500 25 Contributions, gifts, grants paid 26 Total expenses and disbursements. Add lines 24 and 25 389,376 26,701 0 357,175 27 Subtract line 26 from line 12 Excess of revenue over expenses and 763,289 disbursements 125 964 Net investment income (if negative, enter -0-) Adjusted net income(If negative, enter -0-)

5,680,360

5,721,121

5,721,121

5,721,121

5,721,121

6,285,130

6,454,410

6,454,410

6,454,410

6,454,410

2

3 4

5

6

5,721,121

6,484,410

6,484,410 Form 990-PF (2016)

763,289

6,982,123

7,151,403

Investments—corporate stock (attach schedule)

Investments—corporate bonds (attach schedule)

Loans from officers, directors, trustees, and other disqualified persons

Mortgages and other notes payable (attach schedule).

Total liabilities(add lines 17 through 22)

Foundations that do not follow SFAS 117, check here 🕨 🗹

Paid-in or capital surplus, or land, bldg, and equipment fund

Retained earnings, accumulated income, endowment, or other funds

Total net assets or fund balances (see instructions)

Total liabilities and net assets/fund balances (see instructions) .

Total net assets or fund balances at beginning of year-Part II, column (a), line 30 (must agree with end-

Total net assets or fund balances at end of year (line 4 minus line 5)—Part II, column (b), line 30

Analysis of Changes in Net Assets or Fund Balances

Investments—land, buildings, and equipment basis ▶ _

Less accumulated depreciation (attach schedule)

Less accumulated depreciation (attach schedule)

Total assets (to be completed by all filers—see the

Foundations that follow SFAS 117, check here ▶

and complete lines 24 through 26 and lines 30 and 31.

Land, buildings, and equipment basis

instructions Also, see page 1, item I)

Other assets (describe > _

Other liabilities (describe -_

Unrestricted

Permanently restricted

and complete lines 27 through 31.

of-year figure reported on prior year's return)

Decreases not included in line 2 (itemize) ▶

Other increases not included in line 2 (itemize) ▶ _____

Temporarily restricted

h С

11

12

13

14

15

16

17

18

19

20

21

22

23

24

25

28

29

31 Part III

Liabilities

Balances

Fund 26

ŏ

Assets 27

Net 30

2

(b)

List and describe to 2-story brick ware	(b) How acquired P—Purchase D—Donation	(c) Date acquired (mo , day, yr)	(d) Date sold (mo , day, yr)		
1 a CAPITAL GAIN DIVIDEND)S		P		
b					
с					
d					
e					
(-)	(f)	(0	g)	(1	h)
(e) Gross sales price	Depreciation allowed	Cost or of	ther basis		or (loss)
	(or allowable)	plus exper	nse of sale	(e) plus (f) minus (g)
a					21,34:
b					
С					
d					
e					
Complete only for assets	showing gain in column (h) and ow	ned by the foundation o	n 12/31/69		(I)
(i) F M V as of 12/31/69	(j) Adjusted basis as of 12/31/69	Excess	k) of col(ı) (j), ıf any	col (k), but not	h) gain minus less than -0-) or om col (h))
а					
b					
c					
d					
e					
·	or (net capital loss) { gain or (loss) as defined in sections rt I, line 8, column (c) (see instructi		, , , , , , , , , , , , , , , , , , ,	2	21,341
	Jnder Section 4940(e) for Re	educed Tax on Net 1	· · · · í		
	rivate foundations subject to the sec				
	•			- ,	
f section 4940(d)(2) applies, le	eave this part blank				
Vas the foundation liable for th	e section 4942 tax on the distributa	ble amount of any year i	n the base period?	·	es 🗹 No
f "Yes," the foundation does no	t qualify under section 4940(e) Do	not complete this part	·		
 Enter the appropriate am 	ount in each column for each year,	see instructions before r	making any entrie:	5	
(a) Base period years Calendar year (or tax year beginning in)	(b) Adjusted qualifying distributions	(c) Net value of noncharitable	e-use assets	(d) Distribution rati (col (b) divided by c	
2015	556,237		5,973,095		0 093124
2014	942,412		5,022,080		0 187654
2013	718,950		3,571,164		0 201321
2012	197,425		1,976,501		0 099886
2011	170,000		41,817		4 065332
2 Total of line 1, column (d	d)		2		4 647317
	for the 5-year base period—divide				
	dation has been in existence if less		3	 	0 929463
	ncharitable-use assets for 2016 fron	•	4	 	6,327,900
5 Multiply line 4 by line 3			5	-	5,881,549
	ent income (1% of Part I, line 27b)		6	 	1,260
			7		5,882,809
	ons from Part XII, line 4 ,				357,175
If line 8 is equal to or gre instructions	eater than line 7, check the box in Pa	art VI, line 1b, and comp	piete that part usin		e the Part VI orm 990-PF (2016
				FC	лш ээо-РГ (2016

Form 990-PF (2016)		Page 7
Part VIII Information About Officers, Directors, Truste and Contractors (continued)	es, Foundation Managers, Highly Pa	id Employees,
3 Five highest-paid independent contractors for professional se	ervices (see instructions). If none, enter	"NONE".
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
Total number of others receiving over \$50,000 for professional services.	<u> </u>	•
Part IX-A Summary of Direct Charitable Activities List the foundation's four largest direct charitable activities during the tax year Include	e relevant statistical information such as the number	of
organizations and other beneficiaries served, conferences convened, research papers i	produced, etc	Expenses
1		_
		_
2		-
3		_
4		
Part IX-B Summary of Program-Related Investments (s Describe the two largest program-related investments made by the foundation dur		Amount
1 NONE	ing the tax year on lines I and 2	Amount
2		
All abban and respect to the control of the control		
All other program-related investments See instructions 3		
Total. Add lines 1 through 3		P
		Form 990-PF (2016)

1b

2

За 3b

4

5

357.175

357,175

Form 990-PF (2016)

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

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

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

Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc.,

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

Adjusted qualifying distributions. Subtract line 5 from line 4.

Amounts set aside for specific charitable projects that satisfy the

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

2

3

4

5

(c)

2015

Page 9

313.876

313,876

Form **990-PF** (2016)

Form 990-PF (20	016)
Part XIII	Undistributed Income (see instructions)

b Total for prior years

From 2011.

b From 2012. c From 2013. . .

d From 2014.

e From 2015.

XII, line 4 > \$

indicated below:

f Total of lines 3a through e.

d Applied to 2016 distributable amount. e Remaining amount distributed out of corpus

same amount must be shown in column (a))

5 Excess distributions carryover applied to 2016 (If an amount appears in column (d), the

a Corpus Add lines 3f, 4c, and 4e Subtract line 5

applied on line 5 or line 7 (see instructions) . . .

Subtract lines 7 and 8 from line 6a

9 Excess distributions carryover to 2017.

10 Analysis of line 9

a Excess from 2012. . .

c Excess from 2014. . . .

b Excess from 2013. .

d Excess from 2015. .

e Excess from 2016. . .

6 Enter the net total of each column as

b Prior years' undistributed income Subtract line 4b from line 2b c Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed. d Subtract line 6c from line 6b Taxable amount —see instructions e Undistributed income for 2015 Subtract line 4a from line 2a Taxable amount—see instructions f Undistributed income for 2016 Subtract lines 4d and 5 from line 1 This amount must be distributed in 2017 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 2011 not

4 Qualifying distributions for 2016 from Part

a Applied to 2015, 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).

1 Distributable amount for 2016 from Part XI, line 7 2 Undistributed income, if any, as of the end of 2016 a Enter amount for 2015 only.

2014, 2013, 2012 Excess distributions carryover, if any, to 2016

170,000

693,704

261,482

99.644

541,586

693.704

261.482

43.299

99,644 541.586

43.299

1.809.715

170,000

1,639,715

(a)

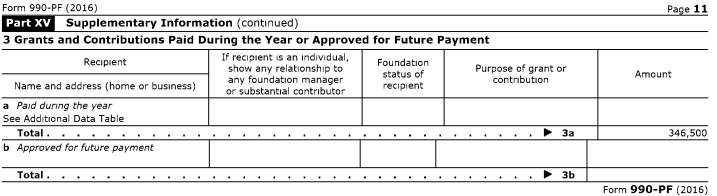
Corpus

1,766,416

(b)

Years prior to 2015

orr	m 990-PF (2016)					Page 10
ŀ	art XIV Private Operating Found	lations (see instr	uctions and Part \	VII-A, question 9)	1	
	If the foundation has received a ruling or de foundation, and the ruling is effective for 20	16, enter the date	of the ruling	▶∟_		
	Check box to indicate whether the organizat	ion is a private oper	ating foundation des	scribed in section L	∟ 4942(ر)(3) or ∟	4942(j)(5)
2a	Enter the lesser of the adjusted net income from Part I or the minimum	Tax year		Prior 3 years		(e) Total
	investment return from Part X for each year listed	(a) 2016	(b) 2015	(c) 2014	(d) 2013	
b	85% of line 2a					
	Qualifying distributions from Part XII, line 4 for each year listed					
d	Amounts included in line 2c not used directly for active conduct of exempt activities					
e	Qualifying distributions made directly for active conduct of exempt activities Subtract line 2d from line 2c					
	Complete 3a, b, or c for the alternative test relied upon					
а	"Assets" alternative test—enter					
	(1) Value of all assets					
b	"Endowment" alternative test— enter 2/3 of minimum investment return shown in Part X, line 6 for each year listed					
c	"Support" alternative test—enter					
•	(1) Total support other than gross investment income (interest,					
	dividends, rents, payments on securities loans (section 512(a)(5)), or royalties)					
	(2) Support from general public					
	and 5 or more exempt organizations as provided in section 4942(j)(3)(B)(iii)					
	(3) Largest amount of support from an exempt organization					
	(4) Gross investment income				1	
Pa	Supplementary Information			organization ha	d \$5,000 or more	e in
1	assets at any time during th Information Regarding Foundation Man		tructions.)			
a	List any managers of the foundation who have before the close of any tax year (but only if	e contributed more				٦
_	DOUGLAS A DECAMP	- 100/ £ H				
b	List any managers of the foundation who ow ownership of a partnership or other entity) NONE				large portion of the	
4						•
2	Information Regarding Contribution, Gr	ant, Gift, Loan, Sc	holarship, etc., Pr	ograms:		
	Check here ▶ ☑ If the foundation only mak unsolicited requests for funds If the founda other conditions, complete items 2a, b, c, a	es contributions to tion makes gifts, gr	preselected charitab	le organizations and	l does not accept Is or organizations un	der
а	The name, address, and telephone number	or email address of	the person to whom	applications should	be addressed	
Ь	The form in which applications should be sul	bmitted and informa	ation and materials t	hey should include		
С	Any submission deadlines					
d	Any restrictions or limitations on awards, su factors	ch as by geographic	cal areas, charitable	fields, kinds of instil	tutions, or other	



Form 990-PF (2016) Part XVI-A Analysis of Income-Producing	Activities				Page 1 2
Enter gross amounts unless otherwise indicated		ısıness ıncome	Excluded by section	512, 513, or 514	(e) Related or exempt
1 Program service revenue	(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	function income (See instructions)
a	Business code	Announc	Exclusion code	, another	
b					
с					
d					
e					
f 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	131,309	
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					
8 Gain or (loss) from sales of assets other than					
inventory			18	21,341	
9 Net income or (loss) from special events					
10 Gross profit or (loss) from sales of inventory					
11 Other revenue a FIFTH THIRD BANK - REFUND OF PY FEES			01	15	
b			01	13	
c					
d					
e					
12 Subtotal Add columns (b), (d), and (e).				152,665	
L3 Total. Add line 12, columns (b), (d), and (e) See worksheet in line 13 instructions to verify calculations			13	B	152,665
Part XVI-B Relationship of Activities to the	ne Accomplish	ment of Exem	pt Purposes		
Explain below how each activity for which the accomplishment of the foundation's explain the instructions (instructions)					
instructions)					

Page **13**

Information Regarding Transfers To and Transactions and Relationships With Noncharitable

Part	XVII	Exempt Organi	zations						•			
			directly enga						tion described in section	501	Yes	No
a Tra	nsfers f	from the reporting foun	dation to a n	oncha	ırıtable ex	empt organizatio	on o	of	_			
(1)	(1) Cash								1a(1)		No	
(2)	Other	assets								. 1a(2)		No
b Oth	er tran	sactions										
		of assets to a nonchar		_						. 1b(1)		No
		ases of assets from a n								. 1b(2)		No
		al of facilities, equipmer	•							. 1b(3)		No
		bursement arrangemen s or loan guarantees.								1b(4) 1b(5)		No No
٠.		mance of services or m								1b(5)		No
			•		_							No
	-								always show the fair ma			
of t	he goo	ds, other assets, or ser	vices given b	y the	reporting	foundation If th	ne fo	oundation recei	ved less than fair marke	et value		
ın a	iny trar	isaction or sharing arra	ngement, sh	ow in	column (d) the value of ti	he g	goods, other as	sets, or services receive	ed		
(a) Line	No	(b) Amount involved	(c) Name of	noncha	arıtable exe	mpt organization	l	(d) Description	of transfers, transactions, a	ind sharing arra	ngemen	its
	_											
2a Is t	he four	ndation directly or indire	ectly affiliate	d with	, or relate	ed to, one or mor	re ta	ax-exempt orga	inizations			
des	cribed	in section 501(c) of the	Code (other	than	section 50	01(c)(3)) or in se	ectic	on 527?		. 🗆 Yes	✓ N	lo
b If "	Yes," co	omplete the following so	chedule									
		(a) Name of organization	n		(b) Type of organiza	ation	ı	(c) Description o	f relationship		
	Unde	er penalties of periury.	I declare tha	t I hav	ve examır	ned this return. II	nclu	ıdına accompar	ying schedules and stat	tements, and	to the	best
	of m	y knowledge and belief	, it is true, c						er than taxpayer) is bas			
Sign		h preparer has any kno *****	wledge			1				th - IDC	#	
Here	·	*****				2017-10-30		_ *****		y the IRS discu th the preparer		
	/ 9	Signature of officer or ti	rustee			Date		Title	(se	ee ınstr)? 🗹	es 🗆 N	lo
	<u> </u>	Dunk/Time										
		Print/Type preparer's	name	Prepa	arer's Sıgı	nature		Date	Check if self-	ΓIN		
									employed ▶ □	P0039	5735	
Paid		Jennifer D Rhoderi	CK									
Prep	arer	Firm's name ► ERNS	ST & YOUNG	115 11	P							
Use		I min s name F ERNs	J. K. TOUNG	JJ LL	-1				Fil	rm's EIN ▶		
-		Firm's address ▶ 11	1 MONUMEN	IT CIR	CLE SUITE	E 4000						
		TNI	DIANAPOLIS	. IN 4	46204				Ph	none no (317) 681-7	7445
	110211011 02201											

Form 990PF Part VIII Line 1 - List all officers, directors, trustees, foundation managers and their compensation (a) Name and address Title, and average (c) Compensation (If (d) Expense account, hours per week not paid, enter Contributions to (e) other allowances (b) devoted to position -0-) employee benefit plans and deferred compensation Douglas A DeCamp President 0 0 1 102 Cook Road Hastings, MI 49058 0 Kent Vana Secretary 0 1 PO Box 352 Grand Rapids, MI 49501 0 Richard Rathburn Treasurer 0 1 PO Box 352 Grand Rapide MT 49501 Debra Vanderveen Director 0 1 102 Cook Road Hastings, MI 49058 Kenneth DeCamp Director 0 0 1 102 Cook Road Hastings, MI 49058

0

0

Grand Rapids, Mr 49301					
James DeCamp	Executive Director	0	0		
102 Cook Road Hastings, MI 49058	0 1				
Margaret DeCamp	Director	0	0		
102 Cook Road Hastings, MI 49058	0 1				

Director

Director

0 1

0 1

Beverly Osterink

102 Cook Road Hastings, MI 49058 Matthew DeCamp

102 Cook Road Hastings, MI 49058

Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to contribution status of

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

Name and address (home or business)	any foundation manager or substantial contributor	recipient		
a Paid during the year				
Barry Community Foundation 231 South Broadway	NONE	PC	Support of programs benefiting the residents of Barry County	7,00

a Paid during the year				
Barry Community Foundation 231 South Broadway Hastings, MI 49058	NONE	PC	Support of programs benefiting the residents of Barry County	7,000
Willard G Pierce and Jessie M Pierce	NONE	POF	Support of the ScienceStrong	17,500

Willard G Pierce and Jessie M Pierce Foundation AKA Pierce Cedar Creek Institute 701 W Cloverdale Road Hastings, MI 49058	NONE	POF	Support of the ScienceStrong 2016 Campaign and A Late Summer Night's Green Sponsorship	17,500
Barry Intermediate School District	NONE	GOV	Barry Career Access Network	15,000

Willard G Pierce and Jessie M Pierce Foundation AKA Pierce Cedar Creek Institute 701 W Cloverdale Road Hastings, MI 49058	NONE	POF	Support of the ScienceStrong 2016 Campaign and A Late Summer Night's Green Sponsorship	17,500
Barry Intermediate School District 535 W Woodlawn Ave Hactings MI 49058	NONE	GOV	Barry Career Access Network funding	15,000

701 W Cloverdale Road Hastings, MI 49058			Sponsorship	
Barry Intermediate School District 535 W Woodlawn Ave Hastings, MI 49058	NONE	GOV	Barry Career Access Network funding	15,000
Barry County Chamber of Commerce 221 W State Street	NONE	NC	Nashville - Route 66 Sign Project	30,000

535 W Woodlawn Ave Hastings, MI 49058			funding	25,500
Barry County Chamber of Commerce 221 W State Street Hastings, MI 49058	NONE	NC	Nashville - Route 66 Sign Project	30,000
Cherry Street Services Inc	NONE	PC	Expanding Access to health care	300.000

535 W Woodlawn Ave Hastings, MI 49058			funding	
Barry County Chamber of Commerce 221 W State Street Hastings, MI 49058	NONE	NC	Nashville - Route 66 Sign Project	30,000
Cherry Street Services Inc	NONE	PC	Expanding Access to health care	300,000

	I .			
Barry County Chamber of Commerce 221 W State Street Hastings, MI 49058	NONE	NC	Nashville - Route 66 Sign Project	30,000
Cherry Street Services Inc 100 Cherry Street SE	NONE	PC	Expanding Access to health care in Barry County	300,000

221 W State Street Hastings, MI 49058	NONE	Rodic 00 Sign Hoject	30,000
Cherry Street Services Inc 100 Cherry Street SE Grand Rapids, MI 49503	NONE	Expanding Access to health care in Barry County	300,000

Total . За

346,500

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business) or substantial contributor a Paid during the year City of Hastings 201 E State Street NONE GOV Hammond Hill Multi-Use Trail 7,000 Hastings, MI 49058 Project

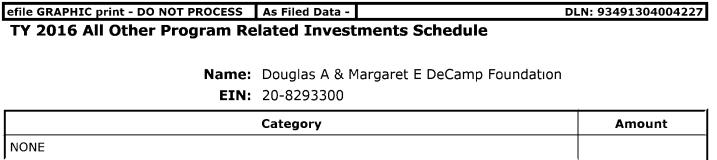
_ ′		,	
BARRY COUNTY CHAMBER OF COMMERCE - TAXABLE EXPEND 221 W STATE STREET HASTINGS, MI 49058		TAXABLE EXPENDITURE REMOVED FROM QUALIFIED DISTRIBUTIONS	-30,000

Total.

346,500

За

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TY 2016 Accounting Fees Schedule									
J									
Name: Douglas A & Margaret E DeCamp Foundation EIN: 20-8293300									
Category	Amo	unt		Investment Income	Adjusted Incom		Disbursements for Charitable Purposes		
ERNST & YOUNG LLP		3,350		1,675			1,675		



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Name: Douglas A & Margaret E DeCamp Foundation EIN: 20-8293300

DLN: 93491304004227

TY 2016 Expenditure Responsibility Statement

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Name: Douglas A & Margaret E DeCamp Foundation

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EIN: 20-8293300									
Grantee's Name	Grantee's Address	Grant Date	Grant Amount	Grant Purpose	Amount Expended By Grantee	Any Diversion By Grantee?	Dates of Reports By Grantee	Date of Verification	Results of Verification
WILLARD & JESSIE PIERCE FOUNDATION	701 W CLOVERDALE ROAD HASTINGS, MI 49058	2016-08-09	2,500	PROVIDE SPONSORSHIP FOR THE LATE SUMMER'S NIGHT GREEN FUNDRAISING EVENT	2,500	NO	06/20/2017	2017-06-20	CONFIRMED FUNDS WERE EXPENDED AS PART OF THE PIERCE FOUNDATION'S ANNUAL OPERATING EXPENSES
WILLARD & JESSIE PIERCE FOUNDATION	701 W CLOVERDALE ROAD HASTINGS, MI 49058	2016-10-10	15,000	PROVIDE CHALLENGE GRANT FOR 2016 SCIENCE STRONG CAMPAIGN	15,000	NO	06/20/2017	2017-06-20	THE REPORTING FROM THE PIERCE FOUNDATION INDICATES THAT \$15,150 WAS DONATED BY OTHER MEMBERS IN 2016 FOR THE SCIENCE STRONG PROGRAM, EXCEEDING THE CHALLENGE GRANT FUNDS EXPENDED FOR THE SCIENCE STRONG PROGRAM IN 2016 TOTALED \$34,919, EXCEEDING THE AMOUNT GRANTED BY THE DECAMP FOUNDATION

TY 2016 In	vestments - Other S	chedule		

Name: Douglas A & Margaret F DeCamp Foundation

Category/ Item		Listed at Cost or FMV	Book Value
EIN:	20-8293300	1	
Hamer	a margaret E becamp i bandation		

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GRAND WEALTH MGMT (SEE ATTACH)

6,285,130

End of Year Fair Market Value

6,982,123

DLN: 93491304004227

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TY 2016 Other Expenses Schedule								
	Douglas A & Margaret E DeCamp Foundation 20-8293300							
Other Expenses Schedule	20 0233300							
Description	Revenue and Expenses per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes				
COUNCIL OF MI FDN FEES	2,000			2,000				

Name: Douglas A & Margaret E DeCamp Foundation

DLN: 93491304004227

20 020220

EIN: 20-8293300	

Other Income Schedule							
Description	Revenue And Expenses Per Books	Net Investment Income	Adjusted Net Income				
Fifth Third Bank - Refund of PY Fees	15	15					

efile GRAPHIC print - DO NOT PROCE	ESS As Filed Data	-	DLN	N: 93491304004227
TY 2016 Other Professiona	TY 2016 Other Professional Fees Schedule			
Name: Douglas A & Margaret E DeCamp Foundation				
EIN: 20-8293300				
Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes

23,379

7,000

7,000

23,379

Category	Amount

MILT ROHWER CONSULTING FEES

GWM (FIDELITY) ACCOUNT FEES

efile GRAPHIC print - DO NOT PROCESS	As Filed Data	-	DI	N: 93491304004227	
TY 2016 Taxes Schedule					
Name: Douglas A & Margaret E DeCamp Foundation					
	_	•			
EIN: 20-8293300					
Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes	
FOREIGN TAXES - GWM (FIDELITY)	1,647	1,647			
FEDERAL EXCISE TAXES	5,500				

efile GRAPHIC print - DO NOT PROCESS As Filed Data - DLN: 93491304004227					
Schedule B (Form 990, 990-EZ,	Schedule of	Schedule of Contributors		OMB No 1545-0047	
or 990-PF) Department of the Treasury Internal Revenue Service	F) Attach to Form 990, 990-EZ, or 990-PF Information about Schedule B (Form 990, 990-EZ, or 990-PF) and its instructions is at			2016	
Name of the organizat Douglas A & Margaret E			Employer ide	entification number	
			20-8293300		
Organization type (ch	eck one)				
Filers of:	Section:				
Form 990 or 990-EZ	☐ 501(c)() (enter number) organiza	tion			
	4947(a)(1) nonexempt charitable tr	ust not treated as a private foundat	ion		
	☐ 527 political organization				
Form 990-PF	✓ 501(c)(3) exempt private foundation	✓ 501(c)(3) exempt private foundation			
	4947(a)(1) nonexempt charitable tr	4947(a)(1) nonexempt charitable trust treated as a private foundation			
501(c)(3) taxable private foundation					
•	ation filing Form 990, 990-EZ, or 990-PF that r r property) from any one contributor Complete		•	•	
Special Rules					
under sections : received from a	tion described in section 501(c)(3) filing Form 9 509(a)(1) and 170(b)(1)(A)(vi), that checked So by one contributor, during the year, total contrib the 1h, or (ii) Form 990-EZ, line 1 Complete Pa	thedule A (Form 990 or 990-EZ), Paper outlons of the greater of (1) \$5,000	art II, line 13, 1	16a, or 16b, and that	
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 lf 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					
990-EZ, or 990-PF), bu	on that is not covered by the General Rule and the it must answer "No" on Part IV, line 2, of its F form 990PF, Part I, line 2, to certify that it does	orm 990, or check the box on line h	d of its		
For Paperwork Reduction for Form 990, 990-EZ, or 9		Cat No 30613X Schedul	le B (Form 990,	990-EZ, or 990-PF) (2016)	

Name of organization Douglas A & Margaret E DeCamp Foundation		Employer identification 20-8293300	Employer identification number 20-8293300		
Part I	Contributors (see instructions) Use duplicate copies of Part I if ad	ditional space is needed			
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution		
1	Douglas Margaret DeCamp 3485 West M-179 Highway	\$ 750,000	Person Payroll Noncash		
	Hastings, MI 49058		(Complete Part II for noncash contributions)		
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution		
2	Flexfab Horizons International Inc 102 Cook Road Hastings, MI49058	\$ 250,000	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 Payroll Noncash (Complete Part II for noncash contributions)		
		Schedule B (F	orm 990, 990-EZ, or 990-PF) (2016)		

Schedule B (Form 99	0, 990-EZ, or 990-PF) (2016)		Page 3	
Name of organization Douglas A & Margaret E DeCamp Foundation		Employer ident	Employer identification number	
		20-82	293300	
Part II	Noncash Property			
(a) No.from Part I	(see instructions) Use duplicate copies of Part II if additional space is needed (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	
(a) No.from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received	
		Schedule B (Form	990, 990-EZ, or 990-PF) (2016)	

Schedule B (Form	990, 990-EZ, or 990-PF) (2016)		Page 4
Name of organizat Douglas A & Margare	ion et E DeCamp Foundation		Employer identification number 20-8293300
than \$1, organiz the year	000 for the year from any one contributor	r. Complete columns (a) thro of exclusively religious, chari ctions.) ▶ \$	d in section 501(c)(7), (8), or (10) that total more ugh (e) and the following line entry. For table, etc., contributions of \$1,000 or less for
(a) No.from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
	Transferee's name, address, and	(e) Transfer of gift ZIP 4 F	t Relationship of transferor to transferee
(a)			
No.from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
	Transferee's name, address, and	(e) Transfer of gift	t Relationship of transferor to transferee
(a) No.from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
	Transferee's name, address, and	(e) Transfer of gift	t Relationship of transferor to transferee
(a) No.from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
	Transferee's name, address, and	(e) Transfer of gift	t Relationship of transferor to transferee
			Schedule B (Form 990, 990-EZ, or 990-PF) (2016)