



See a Social Security Number? Say Something!
Report Privacy Problems to <https://public.resource.org/privacy>
Or call the IRS Identity Theft Hotline at 1-800-908-4490



For calendar year 2016, or tax year beginning 01-01-2016, and ending 12-31-2016

Name of foundation GOLDSTEIN FAMILY FOUNDATION		A Employer identification number 38-3347294	
Number and street (or P O box number if mail is not delivered to street address) 28421 EASTBROOK		Room/suite	
City or town, state or province, country, and ZIP or foreign postal code FARMINGTON HILLS, MI 48334		B Telephone number (see instructions) (248) 851-4363	
G Check all that apply <div><input type="checkbox"/> Initial return</div> <div><input type="checkbox"/> Initial return of a former public charity</div> <div><input type="checkbox"/> Final return</div> <div><input type="checkbox"/> Amended return</div> <div><input type="checkbox"/> Address change</div> <div><input type="checkbox"/> Name change</div>		C If exemption application is pending, check here <input type="checkbox"/>	
H Check type of organization <input checked="" type="checkbox"/> Section 501(c)(3) exempt private foundation <input type="checkbox"/> Section 4947(a)(1) nonexempt charitable trust <input type="checkbox"/> Other taxable private foundation		D 1. Foreign organizations, check here <input type="checkbox"/> 2. Foreign organizations meeting the 85% test, check here and attach computation <input type="checkbox"/>	
I Fair market value of all assets at end of year (from Part II, col (c), line 16) \$ 1,534,034		J Accounting method <input checked="" type="checkbox"/> Cash <input type="checkbox"/> Accrual <input type="checkbox"/> Other (specify) _____ (Part I, column (d) must be on cash basis)	
		E If private foundation status was terminated under section 507(b)(1)(A), check here <input type="checkbox"/>	
		F If the foundation is in a 60-month termination under section 507(b)(1)(B), check here <input type="checkbox"/>	

Part I Analysis of Revenue and Expenses (The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a) (see instructions))		(a) Revenue and expenses per books	(b) Net investment income	(c) Adjusted net income	(d) Disbursements for charitable purposes (cash basis only)
Revenue	1 Contributions, gifts, grants, etc , received (attach schedule)	135,791			
	2 Check <input type="checkbox"/> if the foundation is not required to attach Sch B				
	3 Interest on savings and temporary cash investments				
	4 Dividends and interest from securities . . .	34,764	34,764	34,764	
	5a Gross rents				
	b Net rental income or (loss) _____				
	6a Net gain or (loss) from sale of assets not on line 10	21,141			
	b Gross sales price for all assets on line 6a _____ 21,141				
	7 Capital gain net income (from Part IV, line 2) . . .		21,141		
	8 Net short-term capital gain				
	9 Income modifications				
	10a Gross sales less returns and allowances _____				
Operating and Administrative Expenses	b Less Cost of goods sold				
	c Gross profit or (loss) (attach schedule)				
	11 Other income (attach schedule)	35	35	35	
	12 Total. Add lines 1 through 11	191,731	55,940	34,799	
	13 Compensation of officers, directors, trustees, etc	7,500	7,500	7,500	
	14 Other employee salaries and wages				
	15 Pension plans, employee benefits				
	16a Legal fees (attach schedule)				
	b Accounting fees (attach schedule)	2,025	2,025	2,025	
	c Other professional fees (attach schedule)				
	17 Interest				
	18 Taxes (attach schedule) (see instructions) . . .	935	935	935	
	19 Depreciation (attach schedule) and depletion . . .				
	20 Occupancy				
	21 Travel, conferences, and meetings				
	22 Printing and publications				
	23 Other expenses (attach schedule)	237	237	237	
	24 Total operating and administrative expenses. Add lines 13 through 23	10,697	10,697	10,697	0
	25 Contributions, gifts, grants paid	89,750			89,750
	26 Total expenses and disbursements. Add lines 24 and 25	100,447	10,697	10,697	89,750
	27 Subtract line 26 from line 12				
	a Excess of revenue over expenses and disbursements	91,284			
	b Net investment income (if negative, enter -0-)		45,243		
	c Adjusted net income (if negative, enter -0-) . . .			24,102	

Part II Balance Sheets		Attached schedules and amounts in the description column should be for end-of-year amounts only (See instructions)			Beginning of year	End of year	
		(a) Book Value	(b) Book Value	(c) Fair Market Value			
Assets	1	Cash—non-interest-bearing	52,907	51,319	51,319		
	2	Savings and temporary cash investments					
	3	Accounts receivable ▶ _____ Less allowance for doubtful accounts ▶ _____					
	4	Pledges receivable ▶ _____ 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 ▶ _____					
	8	Inventories for sale or use					
	9	Prepaid expenses and deferred charges					
	10a	Investments—U S and state government obligations (attach schedule)					
	b	Investments—corporate stock (attach schedule)	690,291	760,495	1,150,099		
	c	Investments—corporate bonds (attach schedule)					
	11	Investments—land, buildings, and equipment basis ▶ _____ Less accumulated depreciation (attach schedule) ▶ _____					
	12	Investments—mortgage loans					
	13	Investments—other (attach schedule)					
	14	Land, buildings, and equipment basis ▶ _____ Less accumulated depreciation (attach schedule) ▶ _____					
15	Other assets (describe ▶ _____)	250,458	273,415	332,616			
16	Total assets (to be completed by all filers—see the instructions Also, see page 1, item I)	993,656	1,085,229	1,534,034			
Liabilities	17	Accounts payable and accrued expenses					
	18	Grants payable					
	19	Deferred revenue					
	20	Loans from officers, directors, trustees, and other disqualified persons					
	21	Mortgages and other notes payable (attach schedule)					
	22	Other liabilities (describe ▶ _____)	8,825	9,114			
	23	Total liabilities (add lines 17 through 22)	8,825	9,114			
Net Assets or Fund Balances	Foundations that follow SFAS 117, check here ▶ <input type="checkbox"/> and complete lines 24 through 26 and lines 30 and 31.						
	24	Unrestricted					
	25	Temporarily restricted					
	26	Permanently restricted					
	Foundations that do not follow SFAS 117, check here ▶ <input checked="" type="checkbox"/> and complete lines 27 through 31.						
	27	Capital stock, trust principal, or current funds					
	28	Paid-in or capital surplus, or land, bldg , and equipment fund					
	29	Retained earnings, accumulated income, endowment, or other funds	984,831	1,076,115			
30	Total net assets or fund balances (see instructions)	984,831	1,076,115				
31	Total liabilities and net assets/fund balances (see instructions) .	993,656	1,085,229				

Part III Analysis of Changes in Net Assets or Fund Balances			
1	Total net assets or fund balances at beginning of year—Part II, column (a), line 30 (must agree with end-of-year figure reported on prior year's return)	1	984,831
2	Enter amount from Part I, line 27a	2	91,284
3	Other increases not included in line 2 (itemize) ▶ _____	3	
4	Add lines 1, 2, and 3	4	1,076,115
5	Decreases not included in line 2 (itemize) ▶ _____	5	
6	Total net assets or fund balances at end of year (line 4 minus line 5)—Part II, column (b), line 30 .	6	1,076,115

Part IV Capital Gains and Losses for Tax on Investment Income

(a) List and describe the kind(s) of property sold (e g , real estate, 2-story brick warehouse, or common stock, 200 shs MLC Co)	(b) How acquired P—Purchase D—Donation	(c) Date acquired (mo , day, yr)	(d) Date sold (mo , day, yr)
1a			

(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale	(h) Gain or (loss) (e) plus (f) minus (g)
a			
b			
c			
d			
e			

(i) F M V as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col (i) over col (j), if any	(l) Gains (Col (h) gain minus col (k), but not less than -0-) or Losses (from col (h))
a			
b			
c			
d			
e			

2 Capital gain net income or (net capital loss) { If gain, also enter in Part I, line 7 If (loss), enter -0- in Part I, line 7 }	2	21,141
3 Net short-term capital gain or (loss) as defined in sections 1222(5) and (6) If gain, also enter in Part I, line 8, column (c) (see instructions) If (loss), enter -0- in Part I, line 8 { }	3	

Part V Qualification Under Section 4940(e) for Reduced Tax on Net Investment Income

(For optional use by domestic private foundations subject to the section 4940(a) tax on net investment income)

If section 4940(d)(2) applies, leave this part blank

Was the foundation liable for the section 4942 tax on the distributable amount of any year in the base period? ☐ Yes ☒ No

If "Yes," the foundation does not qualify under section 4940(e) Do not complete this part

1 Enter the appropriate amount in each column for each year, see instructions before making any entries

(a) Base period years Calendar year (or tax year beginning in)	(b) Adjusted qualifying distributions	(c) Net value of noncharitable-use assets	(d) Distribution ratio (col (b) divided by col (c))		
2015	67,317	1,171,299	0 057472		
2014	55,058	1,054,510	0 052212		
2013	44,900	928,165	0 048375		
2012	40,365	797,006	0 050646		
2011	41,776	784,021	0 053284		
2 Total of line 1, column (d)			0 261989	2	
3 Average distribution ratio for the 5-year base period—divide the total on line 2 by 5, or by the number of years the foundation has been in existence if less than 5 years			0 052398	3	
4 Enter the net value of noncharitable-use assets for 2016 from Part X, line 5			1,383,744	4	
5 Multiply line 4 by line 3			72,505	5	
6 Enter 1% of net investment income (1% of Part I, line 27b)			452	6	
7 Add lines 5 and 6			72,957	7	
8 Enter qualifying distributions from Part XII, line 4			89,750	8	

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

Part VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948—see instructions)

1a	Exempt operating foundations described in section 4940(d)(2), check here <input type="checkbox"/> and enter "N/A" on line 1 Date of ruling or determination letter _____ (attach copy of letter if necessary—see instructions)		
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check here <input checked="" type="checkbox"/> and enter 1% of Part I, line 27b	1	452
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	452
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	4	
5	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-	5	452
6	Credits/Payments		
a	2016 estimated tax payments and 2015 overpayment credited to 2016	6a	470
b	Exempt foreign organizations—tax withheld at source	6b	
c	Tax paid with application for extension of time to file (Form 8868)	6c	
d	Backup withholding erroneously withheld	6d	
7	Total credits and payments. Add lines 6a through 6d.	7	470
8	Enter any penalty for underpayment of estimated tax. Check here <input type="checkbox"/> 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 ▶	9	
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid . . . ▶	10	18
11	Enter the amount of line 10 to be Credited to 2017 estimated tax ▶ 18 Refunded ▶	11	

Part VII-A Statements Regarding Activities

	Yes	No
1a During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any political campaign?	1a	No
b Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see Instructions for definition)? <i>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</i>	1b	No
c Did the foundation file Form 1120-POL for this year?	1c	No
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? <i>If "Yes," attach a detailed description of the activities</i>	2	No
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? <i>If "Yes," attach a conformed copy of the changes</i>	3	No
4a Did the foundation have unrelated business gross income of \$1,000 or more during the year?	4a	No
b If "Yes," has it filed a tax return on Form 990-T for this year?	4b	
5 Was there a liquidation, termination, dissolution, or substantial contraction during the year? <i>If "Yes," attach the statement required by General Instruction T</i>	5	No
6 Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either • By language in the governing instrument, or • By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state law remain in the governing instrument?	6	
7 Did the foundation have at least \$5,000 in assets at any time during the year? <i>If "Yes," complete Part II, col (c), and Part XV</i>	7	Yes
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? <i>If "No," attach explanation</i> .	8b	Yes
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 2016 or the taxable year beginning in 2016 (see instructions for Part XIV)? <i>If "Yes," complete Part XIV</i>	9	Yes
10 Did any persons become substantial contributors during the tax year? <i>If "Yes," attach a schedule listing their names and addresses</i>	10	Yes

Part 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 meaning of section 512(b)(13)? If "Yes," attach schedule (see instructions).	11		No
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		No
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application? Website address ► <u>N/A</u>	13	Yes	
14	The books are in care of ► <u>LISA GOLDSTEIN-PROG</u> Telephone no ► <u>(248) 851-4363</u>			

Located at ► 28241 EASTBROOK 28241 EASTBROOK FARMINGTON HILLS MI ZIP+4 ► 48334

15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 —Check here	<input type="checkbox"/>		
	and enter the amount of tax-exempt interest received or accrued during the year	► 15		
16	At any time during calendar year 2016, did the foundation have an interest in or a signature or other authority over a bank, securities, or other financial account in a foreign country?	16	Yes	No
	See instructions for exceptions and filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR) If "Yes," enter the name of the foreign country ►			

Part 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.

1a	During the year did the foundation (either directly or indirectly)		Yes	No
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
	(5) Transfer any income or assets to a disqualified person (or make any of either available for the benefit or use of a disqualified person)? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
	(6) Agree to pay money or property to a government official? (Exception. Check "No" if the foundation agreed to make a grant to or to employ the official for a period after termination of government service, if terminating within 90 days). <input type="checkbox"/> Yes <input checked="" type="checkbox"/> 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		
	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 before the first day of the tax year beginning in 2016?	1c		
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))			
a	At the end of tax year 2016, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning before 2016?		<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
	If "Yes," list the years ► 20____, 20____, 20____, 20____			
b	Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2) (relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer "No" and attach statement—see instructions)	2b		
c	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here ► 20____, 20____, 20____, 20____			
3a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year?		<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
b	If "Yes," did it have excess business holdings in 2016 as a result of (1) any purchase by the foundation or 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 2016).	3b		
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a		No
b	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2016?	4b		No

Part VII-B Statements Regarding Activities for Which Form 4720 May Be Required (Continued)

5a During the year did the foundation pay or incur any amount to (1) Carry on propaganda, or otherwise attempt to influence legislation (section 4945(e))? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No (2) Influence the outcome of any specific public election (see section 4955), or to carry on, directly or indirectly, any voter registration drive? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No (3) Provide a grant to an individual for travel, study, or other similar purposes? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No (4) Provide a grant to an organization other than a charitable, etc., organization described in section 4945(d)(4)(A)? (see instructions). <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No (5) Provide for any purpose other than religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No b If any answer is "Yes" to 5a(1)–(5), did any of the transactions fail to qualify under the exceptions described in Regulations section 53.4945 or in a current notice regarding disaster assistance (see instructions)? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Organizations relying on a current notice regarding disaster assistance check here. ▶ <input type="checkbox"/> c If the answer is "Yes" to question 5a(4), does the foundation claim exemption from the tax because it maintained expenditure responsibility for the grant? <input type="checkbox"/> Yes <input type="checkbox"/> No If "Yes," attach the statement required by Regulations section 53.4945–5(d)	5b		
6a Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No b Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If "Yes" to 6b, file Form 8870	6b		No
7a At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No b If yes, did the foundation receive any proceeds or have any net income attributable to the transaction? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	7b		

Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors

1 List all officers, directors, trustees, foundation managers and their compensation (see instructions).				
(a) Name and address	Title, and average hours per week (b) devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	Expense account, (e) other allowances
LEO GOLDSTEIN 28421 EASTBROOK FARMINGTON HILLS, MI 48334	PRESIDENT 000 00	0	0	0
LISA GOLDSTEIN-PROG 28421 EASTBROOK FARMINGTON HILLS, MI 48334	SEC-TREAS 2 00	7,500	0	0
2 Compensation of five highest-paid employees (other than those included on line 1—see instructions). If none, enter "NONE."				
(a) Name and address of each employee paid more than \$50,000	Title, and average hours per week (b) devoted to position	(c) Compensation	(d) Contributions to employee benefit plans and deferred compensation	Expense account, (e) other allowances
NONE				
Total number of other employees paid over \$50,000.				▶

Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors (continued)

3 Five highest-paid independent contractors for professional services (see instructions). If none, enter "NONE".

(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE		
Total number of others receiving over \$50,000 for professional services. ▶		

Part IX-A Summary of Direct Charitable Activities

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
1 FRIENDSHIP CIRCLE	10,300
2 JEWISH FEDERATION OF DETROIT	10,000
3 JEWISH NATIONAL FUND	6,000
4 GLEANERS FOOD BANK	4,000

Part IX-B Summary of Program-Related Investments (see instructions)

Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2	Amount
1 N/A	
2	
All other program-related investments. See instructions.	
3	
Total. Add lines 1 through 3 ▶	

Part X Minimum Investment Return (All domestic foundations must complete this part. Foreign foundations, 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	1,357,480
b	Average of monthly cash balances.	1b	47,336
c	Fair market value of all other assets (see instructions).	1c	0
d	Total (add lines 1a, b, and c).	1d	1,404,816
e	Reduction claimed for blockage or other factors reported on lines 1a and 1c (attach detailed explanation).	1e	
2	Acquisition indebtedness applicable to line 1 assets.	2	
3	Subtract line 2 from line 1d.	3	1,404,816
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions).	4	21,072
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4.	5	1,383,744
6	Minimum investment return. Enter 5% of line 5.	6	69,187

Part XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations and certain foreign organizations check here ☒ and do not complete this part.)

1	Minimum investment return from Part X, line 6.	1	
2a	Tax on investment income for 2016 from Part VI, line 5.	2a	
b	Income tax for 2016 (This does not include the tax from Part VI).	2b	
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	

Part XII Qualifying Distributions (see instructions)

1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes		
a	Expenses, contributions, gifts, etc.—total from Part I, column (d), line 26.	1a	89,750
b	Program-related investments—total from Part IX-B.	1b	
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes.	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	89,750
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income. Enter 1% of Part I, line 27b (see instructions).	5	452
6	Adjusted qualifying distributions. Subtract line 5 from line 4.	6	89,298

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.

Part XIII Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2015	(c) 2015	(d) 2016
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.				
b Total for prior years 20____, 20____, 20____				
3 Excess distributions carryover, if any, to 2016				
a From 2011.				
b From 2012.				
c From 2013.				
d From 2014.				
e From 2015.				
f Total of lines 3a through e.				
4 Qualifying distributions for 2016 from Part XII, line 4 ▶ \$ <u>89,750</u>				
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).				
d Applied to 2016 distributable amount.				
e Remaining amount distributed out of corpus	89,750			
5 Excess distributions carryover applied to 2016 (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:	89,750			
a Corpus Add lines 3f, 4c, and 4e Subtract line 5				
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 applied on line 5 or line 7 (see instructions). . . .				
9 Excess distributions carryover to 2017. Subtract lines 7 and 8 from line 6a				
10 Analysis of line 9				
a Excess from 2012.				
b Excess from 2013.				
c Excess from 2014.				
d Excess from 2015.				
e Excess from 2016.				

Part XIV Private Operating Foundations (see instructions and Part VII-A, question 9)

1a If the foundation has received a ruling or determination letter that it is a private operating foundation, and the ruling is effective for 2016, enter the date of the ruling. **1997-06-12**

b Check box to indicate whether the organization is a private operating foundation described in section ☐ 4942(j)(3) or ☒ 4942(j)(5)

	Tax year	Prior 3 years			(e) Total
	(a) 2016	(b) 2015	(c) 2014	(d) 2013	
2a Enter the lesser of the adjusted net income from Part I or the minimum investment return from Part X for each year listed	0				0
b 85% of line 2a					
c Qualifying distributions from Part XII, line 4 for each year listed	89,750	67,782	55,555	44,900	257,987
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	89,750	67,782	55,555	44,900	257,987
3 Complete 3a, b, or c for the alternative test relied upon					
a "Assets" alternative test—enter					
(1) Value of all assets					
(2) Value of assets qualifying under section 4942(j)(3)(B)(i)					
b "Endowment" alternative test— enter 2/3 of minimum investment return shown in Part X, line 6 for each year listed.	46,125	39,043	35,151	30,939	151,258
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					

Part XV Supplementary Information (Complete this part only if the organization had \$5,000 or more in assets at any time during the year—see instructions.)

1 Information Regarding Foundation Managers:

a List any managers of the foundation who have contributed more than 2% of the total contributions received by the foundation before the close of any tax year (but only if they have contributed more than \$5,000) (See section 507(d)(2))
LISA GOLDSTEIN-PROG

b List any managers of the foundation who own 10% or more of the stock of a corporation (or an equally large portion of the ownership of a partnership or other entity) of which the foundation has a 10% or greater interest

2 Information Regarding Contribution, Grant, Gift, Loan, Scholarship, etc., Programs:

Check here ☒ if the foundation only makes contributions to preselected charitable organizations and does not accept unsolicited requests for funds. If the foundation makes gifts, grants, etc. (see instructions) to individuals or organizations under other conditions, complete items 2a, b, c, and d

a The name, address, and telephone number or email address of the person to whom applications should be addressed

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

c Any submission deadlines

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

Part XV **Supplementary Information** (continued)**3 Grants and Contributions Paid During the Year or Approved for Future Payment**

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
a <i>Paid during the year</i> See Additional Data Table				
Total			▶ 3a	89,750
b <i>Approved for future payment</i>				
Total			▶ 3b	

Enter gross amounts unless otherwise indicated

(See worksheet in line 13 instructions to verify calculations)

Line No. ▼	Explain below how each activity for which income is reported in column (e) of Part XVI-A contributed importantly to the accomplishment of the foundation's exempt purposes (other than by providing funds for such purposes) (See instructions.)
----------------------	--

Form **990-PF** (2016)

Part XVII

- | | Yes | No |
|-------|-----|----|
| 1a(1) | | No |
| 1a(2) | | No |
| 1b(1) | | No |
| 1b(2) | | No |
| 1b(3) | | No |
| 1b(4) | | No |
| 1b(5) | | No |
| 1b(6) | | No |
| 1c | | No |

[illegible]

- 2a** Is the foundation directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described in section 501(c) of the Code (other than section 501(c)(3)) or in section 527? ☐ Yes ☒ No

- b** If "Yes," complete the following schedule

(a) Name of organization	(b) Type of organization	(c) Description of relationship

**Sign
Here**

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge.

May the IRS discuss this return with the preparer shown below (see instr)? ☒ Yes ☐ No

**Paid
Preparer
Use Only**

Print/Type preparer's name MICHAEL A HUSBY	Preparer's Signature	Date 2017-04-24	Check if self-employed <input checked="checked" type="checkbox"/>	PTIN P01210058
Firm's name ► MICHAEL A HUSBY EA				Firm's EIN ► 81-1229773
Firm's address ► 39111 6 MILE RD STE 106 LIVONIA, MI 481523926				Phone no (734) 779-1892

Form 990PF Part XV Line 3 - 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 recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a Paid during the year				
JEWISH FEDERATION OF METRO DETROIT PO BOX 2030 PO BOX 2030 BLOOMFIELD HILLS, MI 48303	NONE		UNRESTRICTED DONATION	10,000
HOLOCAUST MEMORIAL CENTER HOLOCAUST MEMORIAL CENTER 28123 ORCHARD LAKE RD 28123 ORCHARD LAKE RD FARMINGTON HILLS, MI 48334	NONE		UNRESTRICTED DONATION	1,500
THE SALVATION ARMY THE SALVATION ARMY PO BOX 44530 PO BOX 44530 DETROIT, MI 48244	NONE		UNRESTRICTED DONATION	500
JEWISH COMMUNITY CENTER JEWISH COMMUNITY CENTER 6600 W MAPLE RD 6600 W MAPLE RD WEST BLOOMFIELD, MI 48322	NONE		UNRESTRICTED DONATION	1,000
GLEANERS FOOD BANK GLEANERS FOOD BANK PO BOX 33321 PO BOX 33321 DETROIT, MI 48232	NONE		UNRESTRICTED DONATION	4,000
ADL ADL 605 3RD AVE 605 3RD AVE NEW YORK, NY 10258	NONE		UNRESTRICTED DONATION	1,800
ACLU FOUNDATION ACLU FOUNDATION 125 BROAD ST 18TH FL 125 BROAD ST 18TH FL NEW YORK, NY 10004	NONE		UNRESTRICTED DONATION	2,000
AFMDA AFMDA PO BOX 96402 PO BOX 96402 WASHINGTON, DC 20090	NONE		UNRESTRICTED DONATION	1,000
UNITED WAY OF SE MICHIGAN UNITED WAY OF SE MICHIGAN 660 WOODWARD AVE STE 300 660 WOODWARD AVE STE 300 DETROIT, MI 48226	NONE		UNRESTRICTED DONATION	1,000
AMERICAN RED CROSS AMERICAN RED CROSS 100 MACK AVE 100 MACK AVE DETROIT, MI 48244	NONE		UNRESTRICTED DONATION	750
AM FRIENDS OF HEBREW UNIVERSITY AM FRIENDS OF HEBREW UNIVERSITY PO BOX 2035 PO BOX 2035 NEW YORK, NY 10021	NONE		UNRESTRICTED DONATION	500
JEWISH NATIONAL FUND JEWISH NATIONAL FUND PO BOX 5609 PO BOX 5609 HICKSVILLE, NY 11802	NONE		UNRESTRICTED DONATION	6,000
KARMANOS CANCER INSTITUTE KARMANOS CANCER INSTITUTE 4100 JOHN R 4100 JOHN R DETROIT, MI 48201	NONE		UNRESTRICTED DONATION	500
YAD EZRA YAD EZRA 2850 W 11 MILE RD 2850 W 11 MILE RD BERKLEY, MI 48072	NONE		UNRESTRICTED DONATION	2,500
DETROIT PUBLIC TELEVISION DETROIT PUBLIC TELEVISION 1 CLOVER ST 1 CLOVER ST WIXOM, MI 48393	NONE		UNRESTRICTED DONATION	1,500
Total ► 3a				89,750

Form 990FP Part XV Line 3 - 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 recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a Paid during the year				
FIDV FIDV PO BOX 1911 PO BOX 1911 HICKSVILLE, NY 11802	NONE		UNRESTRICTED DONATION	500
AM ASSOC BEN GURION UNIVERSITY AM ASSOC BEN GURION UNIVERSITY PO BOX 17305 PO BOX 17305 MILWAUKEE, WI 53217	NONE		UNRESTRICTED DONATION	500
WAYNE STATE UNIVERSITY WAYNE STATE UNIVERSITY 5475 WOODWARD AVE 5475 WOODWARD AVE DETROIT, MI 48202	NONE		UNRESTRICTED DONATION	1,000
CHILDREN'S HOSPITAL FOUNDATION CHILDREN'S HOSPITAL FOUNDATION 3901 BEAUBIEN ST 3901 BEAUBIEN ST DETROIT, MI 48201	NONE		UNRESTRICTED DONATION	750
CENTER FOR JEWISH HISTORY CENTER FOR JEWISH HISTORY 15 WEST 16TH ST 15 WEST 16TH ST NEW YORK, NY 10011	NONE		UNRESTRICTED DONATION	1,000
FORGOTTEN HARVEST FORGOTTEN HARVEST 21800 GREENFIELD RD 21800 GREENFIELD RD OAK PARK, MI 48237	NONE		UNRESTRICTED DONATION	3,000
JEWISH SENIOR LIFE JEWISH SENIOR LIFE 6720 W MAPLE RD 6720 W MAPLE RD WEST BLOOMFIELD, MI 48322	NONE		UNRESTRICTED DONATIONS	1,300
PLANNED PARENTHOOD PLANNED PARENTHOOD 123 WILLIAM ST 10TH FL 123 WILLIAM ST 10TH FL NEW YORK, NY 10038	NONE		UNRESTRICTED DONATION	1,000
WORLD JEWISH CONGRESS WORLD JEWISH CONGRESS PO BOX 96693 PO BOX 96693 WASHINGTON, DC 20090	NONE		UNRESTRICTED DONATION	500
SOUTHERN POVERTY LAW CENTER SOUTHERN POVERTY LAW CENTER 400 WASHINGTON AVE 400 WASHINGTON AVE MONTGOMERY, AL 36104	NONE		UNRESTRICTED DONATION	600
U OF M HILLEL U OF M HILLEL 1429 HILL ST 1429 HILL ST ANN ARBOR, MI 48104	NONE		UNRESTRICTED DONATION	500
US HOLOCAUST MEMORIAL MUSEUM US HOLOCAUST MEMORIAL MUSEUM PO BOX 7023 PO BOX 7023 ALBERT LEA, MN 56007	NONE		UNRESTRICTED DONATION	500
ALZHEIMERS ASSOCIATION ALZHEIMERS ASSOCIATION 20300 CIVIC CTR DR STE 10 20300 CIVIC CTR DR STE 10 SOUTHFIELD, MI 48076	NONE		UNRESTRICTED DONATION	2,000
FARMINGTON FRIENDS OF THE LIBRARY FARMINGTON FRIENDS OF THE LIBRARY 32737 WEST 12 MILE RD 32737 WEST 12 MILE RD FARMINGTON HILLS, MI 48334	NONE		UNRESTRICTED DONATION	500
FARMINGTON GOODFELLOWS FARMINGTON GOODFELLOWS 31455 W 11 MILE RD 31455 W 11 MILE RD FARMINGTON HILLS, MI 48334	NONE		UNRESTRICTED DONATION	250
Total ► 3a				89,750

Form 990PF Part XV Line 3 - 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 recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a Paid during the year				
FRIENDSHIP CIRCLE FRIENDSHIP CIRCLE 6892 W MAPLE RD 6892 W MAPLE RD WEST BLOOMFIELD, MI 48322	NONE		UNRESTRICTED DONATION	10,300
SHAAREY ZEDEK SENIORS SHAAREY ZEDEK SENIORS 27375 BELL RD 27375 BELL RD SOUTHFIELD, MI 48034	NONE		UNRESTRICTED DONATION	300
PENNY SEATS PENNY SEATS 2720 WHIE OK DR 2720 WHIE OK DR ANN ARBOR, MI 48103	NONE		UNRESTRICTED DONATION	500
AMERICAN KIDNEY FUND AMERICAN KIDNEY FUND PO BOX 1837 PO BOX 1837 MERRIFIELD, VA 221168037	NONE		UNRESTRICTED DONATION	300
ACWIS ACWIS CHURCH ST STATION PO BOX CHURCH ST STATION PO BOX NEW YORK, NY 10277	NONE		UNRESTRICTED DONATION	500
CROHN'S & COLITIS FA CROHN'S & COLITIS FA 25882 ORCHARD LAKE RD 25882 ORCHARD LAKE RD FARMINGTON HILLS, MI 48336	NONE		UNRESTRICTED DONATION	300
DETROIT SYMPHONY ORCHESTRA DETROIT SYMPHONY ORCHESTRA 3663 WOODWARD AVE 3663 WOODWARD AVE DETROIT, MI 48201	NONE		UNRESTRICTED DONATION	1,200
DOCTORS WITHOUT BORDERS DOCTORS WITHOUT BORDERS 333 SEVENTH AVE 2ND FL 333 SEVENTH AVE 2ND FL NEW YORK, NY 10001	NONE		UNRESTRICTED DONATION	1,000
COALITION ON TEMPORARY SHELTER COALITION ON TEMPORARY SHELTER 26 PETERBORO 26 PETERBORO DETROIT, MI 48201	NONE		UNRESTRICTED DONATION	750
DETROIT INSTITUTE OF ARTS DETROIT INSTITUTE OF ARTS 5200 WOODWARD 5200 WOODWARD DETROIT, MI 48202	NONE		UNRESTRICTED DONATION	1,250
DETROIT ZOOLOGICAL SOCIETY DETROIT ZOOLOGICAL SOCIETY 8450 W 10 MILE RD 8450 W/ 10 MILE RD ROYAL OAK, MI 48067	NONE		UNRESTRICTED DONATION	500
NATURE CONSERVANCY NATURE CONSERVANCY 101 EAST GRAND RIVER 101 EAST GRAND RIVER LANSING, MI 48906	NONE		UNRESTRICTED DONATION	5,000
NATIONAL PARKS CONSERVATION ASSN NATIONAL PARKS CONSERVATION ASSN PO BOX 7011 PO BOX 7011 ALBERT LEA, MN 56007	NONE		UNRESTRICTED DONATION	1,000
INTERNATIONAL RESOURCE COMMITTEE INTERNATIONAL RESOURCE COMMITTEE 122 EAST 42ND ST 122 EAST 42ND ST NEW YORK, NY 10168	NONE		UNRESTRICTED DONATION	750
INNOCENCE PROJECT INNOCENCE PROJECT 40 WORTH ST STE 701 40 WORTH ST STE 701 NEW YORK, NY 10013	NONE		UNRESTRICTED DONATION	1,500
Total ► 3a				89,750

Form 990FP Part XV Line 3 - 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 recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a Paid during the year				
JANICE CHARACH GALLERY JANICE CHARACH GALLERY 6600 WEST MAPLE 6600 WEST MAPLE WEST BLOOMFIELD, MI 48322	NONE		UNRESTRICTED DONATION	400
LEAGUE OF WOMEN VOTERS LEAGUE OF WOMEN VOTERS 1730 M ST NW STE 1000 1730 M ST NW STE 1000 WASHINGTON, DC 20036	NONE		UNRESTRICTED DONATION	300
THE STEWARDSHIP NETWORK THE STEWARDSHIP NETWORK 416 LONGSHORE DR 416 LONGSHORE DR ANN ARBOR, MI 48105	NONE		UNRESTRICTED DONATION	5,000
UNION OF CONCERNED SCIENTISTS UNION OF CONCERNED SCIENTISTS 2 BRATTLE SQUARE STE 6 2 BRATTLE SQUARE STE 6 CAMBRIDGE, MA 021383780	NONE		UNRESTRICTED DONATION	400
USA FOR UNHCR USA FOR UNHCR 1775 K ST NW STE 580 1775 K ST NW STE 580 WASHINGTON, DC 20006	NONE		UNRESTRICTED DONATION	750
ADL MICHIGAN CHAPTER ADL MICHIGAN CHAPTER 25800 NW HWY 25800 NW HWY SOUTHFIELD, MI 48075	NONE		UNRESTRICTED DONATION	400
AMERICAN TECHNION SOCIETY AMERICAN TECHNION SOCIETY 55 E 59TH ST 55 E 59TH ST NEW YORK, NY 10126	NONE		UNRESTRICTED DONATION	500
BEAUMONT HOSPITAL FOUNDATION BEAUMONT HOSPITAL FOUNDATION PO BOX 5802 PO BOX 5802 TROY, MI 48007	NONE		UNRESTRICTED DONATION	100
FOUNDATION FOR FLINT FOUNDATION FOR FLINT 500 S SAGINAW ST STE 200 500 S SAGINAW ST STE 200 FLINT, MI 48502	NONE		UNRESTRICTED DONATION	3,000
HADASSAH HADASSAH 5030 ORCHARD LAKE RD 5030 ORCHARD LAKE RD WEST BLOOMFIELD, MI 48322	NONE		UNRESTRICTED DONATION	100
JARC JARC 30301 NW HWY STE 100 30301 NW HWY STE 100 FARMINGTON HILLS, MI 48334	NONE		UNRESTRICTED DONATION	500
PLANNED PARENTHOOD OF MI PLANNED PARENTHOOD OF MI PO BOX 3673 PO BOX 3673 ANN ARBOR, MI 48106	NONE		UNRESTRICTED DONATION	2,000
STAND WITH US STAND WITH US PO BOX 341069 PO BOX 341069 LOS ANGELES, CA 90034	NONE		UNRESTRICTED DONATION	500
TAMARACK CAMPS TAMARACK CAMPS 6735 TELEGRAPH RD 6735 TELEGRAPH RD BLOOMFIELD HILLS, MI 48301	NONE		UNRESTRICTED DONATION	1,000
US FUND FOR UNICEF US FUND FOR UNICEF PO BOX 96964 PO BOX 96964 WASHINGTON, DC 200906964	NONE		UNRESTRICTED DONATION	700
Total ► 3a				89,750

Form 990PF Part XV Line 3 - 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 recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a Paid during the year				
WORLD WILDLIFE FUND WORLD WILDLIFE FUND PO BOX 96096 PO BOX 96096 WASHINGTON, DC 200777060	NONE		UNRESTRICTED DONATION	500
Total ▶ 3a				89,750

TY 2016 Accounting Fees Schedule**Name:** GOLDSTEIN FAMILY FOUNDATION**EIN:** 38-3347294

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
ACCOUNTING FEES	2,025	2,025	2,025	

TY 2016 Investments Corporate Stock Schedule**Name:** GOLDSTEIN FAMILY FOUNDATION**EIN:** 38-3347294

Name of Stock	End of Year Book Value	End of Year Fair Market Value
BAIRD	236,586	380,397
UBS	523,909	769,702

TY 2016 Other Assets Schedule**Name:** GOLDSTEIN FAMILY FOUNDATION**EIN:** 38-3347294**Other Assets Schedule**

Description	Beginning of Year - Book Value	End of Year - Book Value	End of Year - Fair Market Value
COLUMBIA/SELIGMAN COMM MUTUAL FUND	202,553	223,694	278,966
CAPITAL INC BLDR FUND	47,905	49,721	53,650

TY 2016 Other Expenses Schedule**Name:** GOLDSTEIN FAMILY FOUNDATION**EIN:** 38-3347294**Other Expenses Schedule**

Description	Revenue and Expenses per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
EXPENSES				
MICHIGAN FILING FEES	20	20	20	
POSTAGE	67	67	67	
INVESTMENT EXPENSES	150	150	150	

TY 2016 Other Income Schedule

Name: GOLDSTEIN FAMILY FOUNDATION

EIN: 38-3347294

Other Income Schedule

Description	Revenue And Expenses Per Books	Net Investment Income	Adjusted Net Income
IRS REFUND	35	35	35

TY 2016 Other Liabilities Schedule**Name:** GOLDSTEIN FAMILY FOUNDATION**EIN:** 38-3347294

Description	Beginning of Year - Book Value	End of Year - Book Value
CONTRIBUTION CHECKS NOT CLEARED	8,825	9,114

efile GRAPHIC print - DO NOT PROCESS	As Filed Data -	DLN: 93491117005017
---	------------------------	----------------------------

TY 2016 Reduction Explanation Statement

Name: GOLDSTEIN FAMILY FOUNDATION

EIN: 38-3347294

Explanation: N/A

TY 2016 Taxes Schedule**Name:** GOLDSTEIN FAMILY FOUNDATION**EIN:** 38-3347294

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
EXCISE TAX 2015	465	465	465	
EXCISE TAX ESTIMATE 2016	470	470	470	

Schedule B (Form 990, 990-EZ, or 990-PF) Department of the Treasury Internal Revenue Service	Schedule of Contributors ▶ 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 www.irs.gov/form990	OMB No 1545-0047 2016
	Name of the organization GOLDSTEIN FAMILY FOUNDATION	Employer identification number 38-3347294

Organization type (check one)

Filers of:	Section:
Form 990 or 990-EZ	<input type="checkbox"/> 501(c)() (enter number) organization
	<input type="checkbox"/> 4947(a)(1) nonexempt charitable trust not treated as a private foundation
	<input type="checkbox"/> 527 political organization
Form 990-PF	<input checked="" type="checkbox"/> 501(c)(3) exempt private foundation
	<input type="checkbox"/> 4947(a)(1) nonexempt charitable trust treated as a private foundation
	<input type="checkbox"/> 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 other property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions.

Special Rules

- ☐ For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33¹/₃% 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 990PF, Part I, line 2, to certify that it does not meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

Name of organization GOLDSTEIN FAMILY FOUNDATION	Employer identification number 38-3347294
--	---

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	LISA GOLDSTEIN-PROG 32573 SHADY RIDGE DRIVE FARMINGTON HILLS, MI48336	\$ 135,326	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input checked="" type="checkbox"/> (Complete Part II for noncash contributions)
-		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions)
-		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions)
-		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions)
-		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions)
-		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions)
-		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions)
-		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions)

Name of organization GOLDSTEIN FAMILY FOUNDATION	Employer identification number 38-3347294
--	---

Part II Noncash Property			
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
1	1560 SHARES ABBOTT LABS	\$ 65 152	2016-09-04
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
1	450 SHARES UGI CORP	\$ 20 088	2016-03-07
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
1	745 SHARES WASTE MANAGEMENT	\$ 50 086	2016-07-18
(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 GOLDSTEIN FAMILY FOUNDATION	Employer identification number 38-3347294
--	---

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 year. (Enter this information once. See instructions.) ► \$ _____ Use duplicate copies of Part III if additional space is needed
-----------------	--

(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, and ZIP 4	Relationship of transferor to transferee	
	_____	_____	_____
	_____	_____	_____
	(e) Transfer of gift		
	Transferee's name, address, and ZIP 4	Relationship of transferor to transferee	
	_____	_____	_____
	_____	_____	_____
	(e) Transfer of gift		
	Transferee's name, address, and ZIP 4	Relationship of transferor to transferee	
	_____	_____	_____
	_____	_____	_____
	(e) Transfer of gift		
	Transferee's name, address, and ZIP 4	Relationship of transferor to transferee	
	_____	_____	_____
	_____	_____	_____
	(e) Transfer of gift		
	Transferee's name, address, and ZIP 4	Relationship of transferor to transferee	
	_____	_____	_____
	_____	_____	_____
	(e) Transfer of gift		
	Transferee's name, address, and ZIP 4	Relationship of transferor to transferee	
	_____	_____	_____
	_____	_____	_____
	(e) Transfer of gift		
	Transferee's name, address, and ZIP 4	Relationship of transferor to transferee	