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2016

OMB No 1545-0052

Return of Private Foundation

Department of the Treasury

Internal Revenue Service

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.

▶ Information about Form 990-PF and its instructions is at www.irs.gov/form990pf.

Open to Public

For calendar year 2016, or tax year beginning 01-01-2016 , and ending 12-31-2016 A Employer identification number DRYDEN FAMILY FOUNDATION 38-3527211 Number and street (or P O box number if mail is not delivered to street address) 2560 DEASE LAKE ROAD B Telephone number (see instructions) (989) 257-5453 City or town, state or province, country, and ZIP or foreign postal code HALE, MI 48739 ${f C}$ 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 ☐ Name change Address change E If private foundation status was terminated ☑ Section 501(c)(3) exempt private foundation H Check type of organization under section 507(b)(1)(A), check here \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) \$ 2,276,552 (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 equal the amounts in column (a) (see instructions)) (cash basis only) Contributions, gifts, grants, etc , received (attach 35.000 schedule) Check ▶ ☐ If the foundation is **not** required to attach 2 3 Interest on savings and temporary cash investments Dividends and interest from securities 64,319 64,319 Gross rents b Net rental income or (loss) [چە 6a Net gain or (loss) from sale of assets not on line 10 Gross sales price for all assets on line 6a 10.944 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) 11 **Total.** Add lines 1 through 11 109,087 75,263 13 Compensation of officers, directors, trustees, etc 900 900 14 Other employee salaries and wages 15 Pension plans, employee benefits Operating and Administrative Expenses 88 16a Legal fees (attach schedule) . . . اروه 88 3,490 3,490 Accounting fees (attach schedule) 9 Other professional fees (attach schedule) 11,401 11,401 [چە 1,873 18 Taxes (attach schedule) (see instructions) Depreciation (attach schedule) and depletion 19 20 21 1,766 1,766 Travel, conferences, and meetings 22 Printing and publications . . 23 Other expenses (attach schedule) 874 874 24 Total operating and administrative expenses. Add lines 13 through 23 20,392 11,780 7,138 105,711 105,711 25 Contributions, gifts, grants paid 26 Total expenses and disbursements. Add lines 24 and 25 126,103 11,780 112,849 27 Subtract line 26 from line 12 Excess of revenue over expenses and -17,016 disbursements 63 483 Net investment income (If negative, enter -0-) **Adjusted net income**(If negative, enter -0-) For Paperwork Reduction Act Notice, see instructions. Cat No 11289X Form **990-PF** (2016)

1,007,431

1,821,621

1,821,621

1,821,621 1,821,621

2

3

4

5

1,838,637

1,821,621

1,821,621 Form **990-PF** (2016)

-17,016

1.112.262

2,276,552

	7	Other notes and loans receivable (attach schedule) ▶		
		Less allowance for doubtful accounts ▶		
S	8	Inventories for sale or use		
Assets	9	Prepaid expenses and deferred charges		
As	10a	Investments—U S and state government obligations (attach schedule)		
	ь	Investments—corporate stock (attach schedule)	770,014	*
	С	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)	1,025,509	₩
	14	Land, buildings, and equipment basis ▶		
		Less accumulated depreciation (attach schedule) ▶		
	15	Other assets (describe >)		
	16	Total assets (to be completed by all filers—see the		
		instructions Also, see page 1, item I)	1,838,637	
	17	Accounts payable and accrued expenses		
	18	Grants payable		
es	19	Deferred revenue		
II	20	Loans from officers, directors, trustees, and other disqualified persons		
Liabilities	21	Mortgages and other notes payable (attach schedule)		
_	22	Other liabilities (describe)		
	23	Total liabilities(add lines 17 through 22)		
		Foundations that follow SFAS 117, check here ▶ ✓		
sə:		and complete lines 24 through 26 and lines 30 and 31.		
anc	24	Unrestricted	1,838,637	
3a la	25	Temporarily restricted		
g pi	26	Permanently restricted		
un <u>-</u>		Foundations that do not follow SFAS 117, check here ▶ □		
or •		and complete lines 27 through 31.		
ts (27	Capital stock, trust principal, or current funds		
Assets or Fund Balances	28	Paid-in or capital surplus, or land, bldg , and equipment fund		
AS	29	Retained earnings, accumulated income, endowment, or other funds		
Net	30	Total net assets or fund balances (see instructions)	1,838,637	
_	31	Total liabilities and net assets/fund balances (see instructions) .	1,838,637	
Pa	rt III			
1		l net assets or fund balances at beginning of year—Part II, column (a), line	30 (must agree with	end-
		ear figure reported on prior year's return)		
2	Ente	r amount from Part I, line 27a		. [
3		er increases not included in line 2 (itemize)		-
4		lines 1, 2, and 3		.
5 6		eases not included in line 2 (itemize) ► I net assets or fund balances at end of year (line 4 minus line 5)—Part II, c	olumn (h) line 30	}
_	iota	The assets of fund balances at end of year (line 4 fillinus line 5)—Part II, c	olumni (b), ime 30	•

Page 3

Gains (Col (h) gain minus col (k), but not less than -0-) or Losses (from col (h)) Part V

10,944 Yes V No (a) (d) Distribution ratio Base period years Calendar Adjusted qualifying distributions Net value of noncharitable-use assets year (or tax year beginning in) (col (b) divided by col (c)) 0 047047 2015 104,637 2,224,093 2014 109,400 2,160,048 0 050647 2013 2,019,036 0 051468 103,915 2012 86,661 1,797,368 0 048216 2011 87,283 1,692,337 0 051575 2 Total of line 1, column (d) 2 0 248953 3 Average distribution ratio for the 5-year base period—divide the total on line 2 by 5, or by the 3 0 049791 number of years the foundation has been in existence if less than 5 years

4 2,180,459 4 Enter the net value of noncharitable-use assets for 2016 from Part X, line 5 5 108,567 5 Multiply line 4 by line 3 6 Enter 1% of net investment income (1% of Part I, line 27b) . 6 635

7 109,202 8 Enter qualifying distributions from Part XII, line 4 8 112,849 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 Form 990-PF (2016)

5a	During the year did the foundation p	ay o	r incur any amount to							
	(1) Carry on propaganda, or otherwise attempt to influence legislation (section 4945(e))?							lo l		
	(2) Influence the outcome of any specific public election (see section 4955), or to carry							•		
	on, directly or indirectly, any voter registration drive?							ما		
	(3) Provide a grant to an individual for travel, study, or other similar purposes? Yes V No									
	(4) Provide a grant to an organization	on ot	her than a charitable, etc	, organization described	1	1es	<u> </u>	•		
	ın section 4945(d)(4)(A)? (see ii	nstru	ctions)			Yes	✓ N	10		
	(5) Provide for any purpose other th	nan r	eligious, charitable, scien	tific, literary, or		res	<u> </u>	•		
	educational purposes, or for the	prev	ention of cruelty to childi	ren or anımals?		☐ Yes	✓ N	ما		
b	If any answer is "Yes" to $5a(1)-(5)$,	dıd a	any of the transactions fa	al to qualify under the ex	ceptions des	cribed in	<u> </u>	•		
	Regulations section 53 4945 or in a	curre	ent notice regarding disas	ter assistance (see instru	uctions)?			51	o	
	Organizations relying on a current n	otice	regarding disaster assist	ance check here		▶	П			
С	If the answer is "Yes" to question 5a	a(4),	does the foundation clain	n exemption from the						
	tax because it maintained expenditu	ire re	sponsibility for the grant	[?]		☐ Yes		lo		
	If "Yes," attach the statement requir	red b	y Regulations section 53	4945-5(d)		res	ш '	•		
6 a	Did the foundation, during the year,	rece	ive any funds, directly or	indirectly, to pay premit	ıms on					
	a personal benefit contract?					□ v ₌₌	✓ ,			
b	Did the foundation, during the year,	pay	premiums, directly or inc	lirectly, on a personal be	nefit contract	:? tes		6	,	No
	If "Yes" to 6b, file Form 8870									
7a	At any time during the tax year, was	s the	foundation a party to a p	prohibited tax shelter trai	nsaction?	□ vas	✓ ,	lo l		
b	If yes, did the foundation receive an	y pro	ceeds or have any net in	come attributable to the	transaction?		, <u>L</u>	7	,	
	Information About C	offic	ers, Directors, Trust	tees, Foundation Ma	nagers, H	ighly Pai	d Em	ployee	s,	
Pal	t VIII and Contractors									
1	List all officers, directors, trustee	es, fo	oundation managers ar	nd their compensation	(see instru	ctions).				
			Title, and average	(c) Compensation (If		(d)				
	(a) Name and address		hours per week	not paid, enter	Contribution				ense ac	•
		(1	b) devoted to position	-0-)	benefit plar comp	ensation	irred	(e) ou	er allow	ances
See /	Addıtıonal Data Table				'					
		1								
2	Compensation of five highest-pai	id en	nplovees (other than t	l hose included on line 1	∟ L−see instrı	ıctions). I	If none	e, ente	· "NONE	."
						tributions t		•		
N.a	(a) me and address of each employee pa	ud	Title, and average hours per week	(c) Compensation		loyee bene			ense acc	
	more than \$50,000		(b) devoted to position	, , ,		and deferi npensatior		(e) oth	er allowa	inces
NON					(4) (6)	препзастог	<u>'</u>			
IVOIVI	-									
					+					
					+					
					+					
Tete	I number of other confessor and as	or 45	0.000							
TOTA	number of other employees paid over	=i þɔ	0,000			. •		- 0	00 05	(2016)

Page **6**

Form 990-PF (2016) Information About Officers, Directors, Trustees,	Foundation Managers, Highly	Page 7 Paid Employees.
and Contractors (continued)	. canadas i i anagere, ingini,	Tara Emproyecs,
3 Five highest-paid independent contractors for professional service	es (see instructions). If none, en	ter "NONE".
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE		
Tatal number of others recover average from the forest and comments		>
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 rele	evant statistical information such as the nun	nher of
organizations and other beneficiaries served, conferences convened, research papers produc		Expenses
1		
2		
3		
4		
Part IX-B Summary of Program-Related Investments (see	nstructions)	
Describe the two largest program-related investments made by the foundation during th		Amount
1 N/A	le tax year off filles I and 2	Amount
2		
All other program-related investments See instructions		
3		
Total. Add lines 1 through 3		. ▶
		Form 990-PF (2016

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

1a

1b

2

За 3b

4

5

112,849

112.849

112,214

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635

Expenses, contributions, gifts, etc —total from Part I, column (d), line 26.

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

b

2

3

4

5

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

From 2011. . . . **b** From 2012. . . . c From 2013. . **d** From 2014. . . . e From 2015.

XII, line 4 🕨 \$

indicated below:

Page 9

108.388

108.388

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,	,	
Part XIII	Undistributed Income (see instruc	tions)

f Total of lines 3a through e. 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).

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

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

9 Excess distributions carryover to 2017.

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. .

Subtract lines 7 and 8 from line 6a

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

same amount must be shown in column (a))

1	Distributable amount for 2016 from Part XI, line 7				
2	Undistributed income, if any, as of the end of 2016				
а	Enter amount for 2015 only				
b	Total for prior years 20, 20, 20				
3	Excess distributions carryover, if any, to 2016				

(a)

Corpus

(b)

Years prior to 2015

(c)

2015

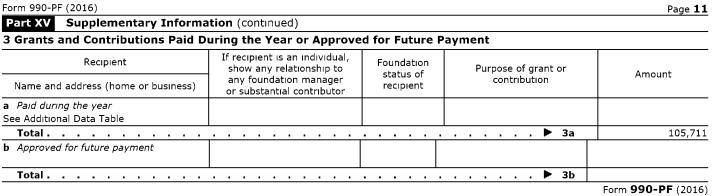
3,765

3,765

696

696

696



er gross	amounts unless otherwise indicated	Unrelated bu	siness income	Excluded by section	512, 513, or 514	(e) Related or exemp
Program	service revenue	(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	function income (See instructions
						
_	and contracts from government agencies					
Interes	st on savings and temporary cash					
	ments			14	64.240	
	ds and interest from securities			14	64,319	
	inanced property.					
b Not de	ebt-financed property					
Net re	ntal income or (loss) from personal property					
	vestment income.					
	r (loss) from sales of assets other than			18	9,768	
	ome or (loss) from special events					
	rofit or (loss) from sales of inventory					
	evenue a					
C						
d	_					
d e Subtota Total. / worksh	Add line 12, columns (b), (d), and (e)	ns)			74,087	
d e Subtota Total. / e worksh	Add columns (b), (d), and (e). Add line 12, columns (b), (d), and (e). Beet in line 13 instructions to verify calculations. Belationship of Activities to the Explain below how each activity for which is the accomplishment of the foundation's ex	ns) e Accomplish ncome is reporte	ment of Exem	pt Purposes of Part XVI-A contribut	ed importantly to	
d e Subtota Total. / e worksh rt XVI	Add columns (b), (d), and (e). Add line 12, columns (b), (d), and (e). Leet in line 13 instructions to verify calculations. Belationship of Activities to the Explain below how each activity for which its contents.	ns) e Accomplish ncome is reporte	ment of Exem	pt Purposes of Part XVI-A contribut	ed importantly to	
d e Subtota Total. / e worksh rt XVI	Add columns (b), (d), and (e). Add line 12, columns (b), (d), and (e). Beet in line 13 instructions to verify calculations. Belationship of Activities to the Explain below how each activity for which is the accomplishment of the foundation's ex	ns) e Accomplish ncome is reporte	ment of Exem	pt Purposes of Part XVI-A contribut	ed importantly to	
d e Subtota Total. / e worksh rt XVI	Add columns (b), (d), and (e). Add line 12, columns (b), (d), and (e). Beet in line 13 instructions to verify calculations. Belationship of Activities to the Explain below how each activity for which is the accomplishment of the foundation's ex	ns) e Accomplish ncome is reporte	ment of Exem	pt Purposes of Part XVI-A contribut	ed importantly to	
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Subtota Total. / worksh rt XVI	Add columns (b), (d), and (e). Add line 12, columns (b), (d), and (e). Beet in line 13 instructions to verify calculations. Belationship of Activities to the Explain below how each activity for which is the accomplishment of the foundation's ex	ns) e Accomplish ncome is reporte	ment of Exem	pt Purposes of Part XVI-A contribut	ed importantly to	
d Subtota Total. / worksh rt XVI	Add columns (b), (d), and (e). Add line 12, columns (b), (d), and (e). Beet in line 13 instructions to verify calculations. Belationship of Activities to the Explain below how each activity for which is the accomplishment of the foundation's ex	ns) e Accomplish ncome is reporte	ment of Exem	pt Purposes of Part XVI-A contribut	ed importantly to	
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Subtota Total. / worksh rt XVI	Add columns (b), (d), and (e). Add line 12, columns (b), (d), and (e). Beet in line 13 instructions to verify calculations. Belationship of Activities to the Explain below how each activity for which is the accomplishment of the foundation's ex	ns) e Accomplish ncome is reporte	ment of Exem	pt Purposes of Part XVI-A contribut	ed importantly to	
d Subtota Total. / worksh rt XVI	Add columns (b), (d), and (e). Add line 12, columns (b), (d), and (e). Beet in line 13 instructions to verify calculations. Belationship of Activities to the Explain below how each activity for which is the accomplishment of the foundation's ex	ns) e Accomplish ncome is reporte	ment of Exem	pt Purposes of Part XVI-A contribut	ed importantly to	
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d e Subtota Total. / e worksh rt XVI	Add columns (b), (d), and (e). Add line 12, columns (b), (d), and (e). Beet in line 13 instructions to verify calculations. Belationship of Activities to the Explain below how each activity for which is the accomplishment of the foundation's ex	ns) e Accomplish ncome is reporte	ment of Exem	pt Purposes of Part XVI-A contribut	ed importantly to	
de Subtota Total. / e worksh art XVI ne No.	Add columns (b), (d), and (e). Add line 12, columns (b), (d), and (e). Beet in line 13 instructions to verify calculations. Belationship of Activities to the Explain below how each activity for which is the accomplishment of the foundation's ex	ns) e Accomplish ncome is reporte	ment of Exem	pt Purposes of Part XVI-A contribut	ed importantly to	74,08
de Subtota Total. / e worksh	Add columns (b), (d), and (e). Add line 12, columns (b), (d), and (e). Beet in line 13 instructions to verify calculations. Belationship of Activities to the Explain below how each activity for which is the accomplishment of the foundation's ex	ns) e Accomplish income is reporte	ment of Exem	pt Purposes of Part XVI-A contribut	ed importantly to	

orm 990	-PF (2016)						Pa	ge 13
Part X	VIII Information Re Exempt Organi		ers To and Transact	ions and Re	lationships With Nonchari	table		
	e organization directly or in the Code (other than section				nization described in section 501 litical organizations?		Yes	No
a Transf	fers from the reporting foun	dation to a noncha	rıtable exempt organizatio	on of				
(1)	Cash					1a(1)		No
(2)	Other assets					1a(2)		No
	transactions							
	Sales of assets to a nonchar	-				1b(1)		No
` '	Purchases of assets from a r					1b(2)		No
	Rental of facilities, equipment	•				1b(3) 1b(4)		No No
	Reimbursement arrangemer .oans or loan guarantees.					1b(5)		No
	erformance of services or m					1b(6)		No
٠,	ng of facilities, equipment, r		-			1c		No
	transaction or sharing arra	ngement, show in a		ne goods, othe	eceived less than fair market valur assets, or services received tion of transfers, transactions, and sha		ngemen	ts
descri	foundation directly or indirectly or indirectly of the bed in section 501(c) of the s," complete the following s (a) Name of organization	Code (other than s	•	ection 527?.	· ,	Yes	☑ N	0
					npanying schedules and statemer other than taxpayer) is based on			

described	ndation directly or indirectly affil in section 501(c) of the Code (o	•	•	, ,		🗆 Yes 🗹 No
b If "Yes," co	omplete the following schedule (a) Name of organization		(b) Type of organiz	ration	(c) Descripti	on of relationship
Sign of m	er penalties of perjury, I declare y knowledge and belief, it is tru h preparer has any knowledge ******					based on all information of May the IRS discuss this return
- (Signature of officer or trustee		Date	Title		with the preparer shown below (see instr)? Yes No
Paid	Print/Type preparer's name GERALD D GRACIK JR CPA	Preparer's Sig	ınature	Date 2017-05-10	Check if self- employed ▶ □	PTIN P00050650
Preparer Use Only	Firm's name ► GRACIK & GR	ACIK PC		<u>'</u>		Firm's EIN ▶81-4262197
·	Firm's address ► 540 W LAK TAWAS CIT	Phone no (989) 984-5280				
						Form 990-PF (2016)

Form 990PF Part VIII Line 1 - List all officers, directors, trustees, foundation managers and their compensation (c) Compensation (If (a) Name and address Title, and average (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 RICHARD G DRYDEN PRESIDENT 0 10 00 2560 DEASE LAKE ROAD HALE, MI 48739 1ANET M DRYDEN SECRETARY 0 14 00 2560 DEASE LAKE ROAD HALE, MI 48739 DANIEL A DRYDEN DIRECTOR 150 0 3 00 6535 WALLOON HILLS DRIVE BOYNE CITY, MI 49712 JULIE B WELKER DIRECTOR 150 0 3 00

SUSAN E ROBERTS	DIRECTOR	150	0	0
3830 BEACH ROAD TROY, MI 48084	3 00			
JAY D ROGERS	DIRECTOR	150	0	0
315 SOHO CT CONWAY, SC 29526	3 00			

7407 VOERNER

CENTERLINE, MI 48015

JILL M IHRKE DIRECTOR 150 0

3 00 3491 SANDY CREEK DRIVE

SHELBY TOWNSHIP, MI 48316

JESSICA L DEMARA DIRECTOR 150 0

3 00

52294 BASE STREET

NEW BALTIMORE, MI 48047

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 AICR PO BOX 97167 NONE CHARITABLE 500 WASHINGTON, DC 20090 500 ALZHEIMER'S ASSN-GREATER MI NONE CHARITABLE PO BOX 96011 WASHINGTON, DC 200906011 ALZHEIMERS ASSOC PO BOX 96011 NONE CHARITABLE 1,000 WASHINGTON, DC 200906011 AMERICAN INS FOR CANCER RESEARCH NONE CHARITABLE 1,500 PO BOX 97167 WASHINGTON, DC 200907167 AMERICAN RED CROSS OF MI NONE CHARITABLE 500 100 MACK AVE DETROIT, MI 482012416 ARBOR DAY FOUNDATION NONE 500 CHARITABLE 211 N 12TH ST LINCOLN, NE 685081497 AUTISM ALLIANCE OF MI NONE CHARITABLE 500 26500 AMERICAN DR SOUTHFIELD, MI 48034 NONE BARBARA ANN KARMANOS CHARITABLE 1,500 4100 JOHN R DETROIT, MI 48201 NONE BEAUMONT FOUNDATION PO BOX 5802 CHARITABLE 500 TROY, MI 480075802 BIG PAWS CANINE FOUNDATION NONE CHARITABLE 1,500 1379 HORRY RD SUITE 215 AYNOR, SC 29511 BOYS TOWN PO BOX 5000 NONE CHARITABLE 100 BOYS TOWN, NE 680109999 BROTHER DAN'S FOOD PANTRY NONE 500 CHARITABLE 415 STATE STREET PETOSKEY, MI 49770 CARE HOUSE-OAKLAND NONE CHARITABLE 1,000 44765 WOODWARD AVE PONTIAC, MI 48341 CHARLEVOIS HUMANE SOCIETY NONE CHARITABLE 1,000 614 BEARDSLEY ST BOYNE CITY, MI 49712 COASTAL ANIMAL RESCUE NONE CHARITABLE 1,500 PO BOX 2981 MURRELLS INLET, SC 29576

105,711

Total . . .

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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 COMMONUNITY 2511 SW 15TH ST NONE CHARITABLE 3,100 DEERFIELD BEACH, FL 33442 COMM FOUNDATION OF NE MI NONE CHARITABLE 2,750 PO BOX 495 ALPENA, MI 49707 COMPASSION INTERNATIONAL NONE CHARITABLE 706 12290 VOYAGER PKWY COLORADO SPRINGS, CO 809213668 NONE COVENANT HOUSE PO BOX 731 CHARITABLE 1,650 NEW YORK, NY 101080900 DETROIT RESCUE MISSION NONE CHARITABLE 2.800 PO BOX 312087 DETROIT, MI 48201 DETROIT ZOOLOGICAL SOCIETY NONE **CHARITABLE** 750 8540 W 10 MILE RD ROYAL OAK, MI 48067 DIRECT RELIEF 27 S LA PATERA LANE NONE CHARITABLE 1,900 GOLETA, CA 93117 DOCTORS WO BORDERS PO BOX 5030 NONE **CHARITABLE** 1,500 HAGERSTOWN, MD 217415030 ELKS NATIONAL FOUNDATION NONE CHARITABLE 500 2750 N LAKEVIEW AVE CHICAGO, IL 616242256 EXPONENT PHILANTHROPY NONE CHARITABLE 1,000 PO BOX 65607 WASHINGTON, DC 200355607 FISH HALE PO BOX 286 NONE CHARITABLE 1,000 HALE, MI 48739 FATE 5384 E HEATHWOOD DR SE NONE CHARITABLE 500 KENTWOOD, MI 49512 FEEDING AMERICA PO BOX 96749 NONE CHARITABLE 1.000 WASHINGTON, DC 200777746 FIRST PRESBYTERIAN CHURCH NONE CHARITABLE 1,000 513 CHARLES BRINK RD GAYLORD, MI 49735 FIRST UNITED METHODIST CH NONE CHARITABLE 3,000 PO BOX 46 HALE, MI 48739 105,711 Total . .

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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	Foundation status of	Purpose of grant or contribution	Amount		
Name and address (home or business)	any foundation manager or substantial contributor	recipient		1		
a Paid during the year		<u> </u>		'		
FOOD BANK OF EASTERN MI 2312 LAPEER ROAD FLINT, MI 48503	NONE		CHARITABLE	2,000		
FOOD FOR THE POOR 6401 LYONS RD COCONUT CREEK, FL 33073	NONE		CHARITABLE	3,400		
FORGOTTEN HARVEST 21800 GREENFIELD ROAD OAK PARK, MI 48237	NONE		CHARITABLE	500		
GLOBAL HEALTH MINISTRY 3805 W CHESTER PIKE 100 NEWTOWN SQUARE, PA 19073	NONE		CHARITABLE	1,000		
GUITARS FOR VETS 11933 W BURLEIGH STE 100 MILWAUKEE, WI 53222	NONE		CHARITABLE	1,000		
HOPE 4 KIDS INTL PO BOX 74010 PHOENIX, AZ 85087	NONE		CHARITABLE	500		
HOPE SOUTH FLORIDA PO BOX 14156 FORT LAUDERDALE, FL 33302	NONE		CHARITABLE	2,000		
HOSPICE OF HELPING HANDS 335 E HOUGHTON AVE WEST BRANCH, MI 48661	NONE		CHARITABLE	1,000		
HOWE MILITARY ACADEMY PO BOX 240 HOWE, IN 467460240	NONE		CHARITABLE	1,000		
IOSCO CO COMM FOUNDATION PO BOX 495 ALPENA, MI 49707	NONE		CHARITABLE	2,000		
K-9 STRAY RESCUE 2120 METAMORA RD OXFORD, MI 48371	NONE		CHARITABLE	1,000		
KIDS WISH NETWORK PO BOX 809 WARREN, MI 48090	NONE		CHARITABLE	10		
LEADER DOGS FOR THE BLIND PO BOX 5000 ROCHESTER, MI 483073115	NONE		CHARITABLE	2,000		
LIFE CHOICES RESOURCE CENTER PO BOX 513 WEST BRANCH, MI 48661	NONE		CHARITABLE	200		
LOVE INC OF OSCODA COUNTY PO BOX 96 FAIRVIEW, MI 486210096	NONE		CHARITABLE	750		
Total			>	105,711		

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	Foundation status of	Purpose of grant or contribution	Amount		
Name and address (home or business)	any foundation manager or substantial contributor	recipient				
a Paid during the year						
LUPUS FOUNDATION OF AMERICA PO BOX 96864 WASHINGTON, DC 200906864	NONE		CHARITABLE	3,000		
MACULAR DEGENERATION RESEARCH PO BOX 1952 CLARKSBURG, MD 208711952	NONE		CHARITABLE	38		
MARCH OF DIMES DONOR SERVICE CENTER TOPEKA, KS 666088972	NONE		CHARITABLE	50		
MCLAREN NORTHERN MI HOSPITAL 360 CONNABLE AVENUE 3 PETOSKEY, MI 49770	NONE		CHARITABLE	3,000		
METHODIST CHILDREN'S HOME SOCIETY 26645 W SIX MILE ROAD REDFORD, MI 48240	NONE		CHARITABLE	1,000		
MI ANIMAL RESCUE LEAGUE 790 FEATHERSTONE PONTIAC, MI 48342	NONE		CHARITABLE	500		
MID-MI TEEN CHALLENGE 818 S MICHIGAN AVENUE SAGINAW, MI 48602	NONE		CHARITABLE	1,000		
MIS CARES FOUNDATION 12626 US HWY 12 BROOKLYN, MI 49230	NONE		CHARITABLE	1,000		
MS MOLLY FOUNDATION 3948 RANCHERO DRIVE ANN ARBOR, MI 48108	NONE		CHARITABLE	1,000		
MUSCULAR DYSTROPHY ASSN 3300 E SUNRISE DR TUCSON, AZ 85718	NONE		CHARITABLE	50		
N MI CHILDREN'S ASSESSMENT CTR PO BOX 887 ROSCOMMON, MI 48653	NONE		CHARITABLE	1,500		
NATURE CONSERVANCY 4245 N FAIRFAX DR 100 ARLINGTON, VA 22203	NONE		CHARITABLE	500		
ON MY OWN OF MICHIGAN 1250 KIRTS BLVD 300 TROY, MI 48084	NONE		CHARITABLE	500		
PARALYZED VETERANS PO BOX 933 WILTON, NH 030860933	NONE		CHARITABLE	57		
PENRICKTON CTR FOR BLIND 26530 EUREKA RD TAYLOR, MI 481804999	NONE		CHARITABLE	3,000		
Total				105,711		

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 PETS FOR ELDERLY FDTN NONE CHARITABLE 500 530 E HUNT HWY S103 SAN TAN VALLEY, AZ 85143 NONE PRESBYTERIAN DISASTER ASSISTANCE CHARITABLE 1,000 100 WITHERSPOON ST LOUISVILLE, KY 402021396 NONE CHARITABLE 1,000 RAINBOW CONNECTION 621 W UNIVERSITY ROCHESTER, MI 48307 NONE 750 RONALD MCDONALD HOUSE CHARITABLE 4707 ST ANTOINE DETROIT, MI 48201 NONE CHARITABLE 3,000 SALVATION ARMY PO BOX 77000 DEPT 77248 DETROIT, MI 482772000 SALVATION ARMY-FLORIDA NONE CHARITABLE 1,000 PO BOX 230 FORT LAUDERDALE, FL 33302 SALVATION ARMY-SAGINAW NONE CHARITABLE 1,000 2030 N CAROLINA ST SAGINAW, MI 48602 SHELTER BOX 8374 MARKET ST 203 NONE CHARITABLE 1,000 LAKEWOOD RANCH, FL 34202 SPECIAL OLYMPICS PO BOX 795 NONE CHARITABLE 1,000 MOUNT PLEASANT, MI 488040795 ST JUDE'S HOSPITAL NONE **CHARITABLE** 2,500 501 ST JUDE PLACE MEMPHIS, TN 38105 ST THOMAS PRESBYTERIAN NONE CHARITABLE 1,000 55355 MOUND ROAD SHELBY TWP, MI 48315 NONE THE COMMUNITY CHURCH CHARITABLE 15,500 4433 BOUGAINVILLEA DR LAUDERDALE BY THE SEA, FL 33308 THE NATURE CONSERVANCY NONE CHARITABLE 1,000 PO BOX 6014 ALBERT LEA, MN 560076614 THE SALVATION ARMY PO BOX 230 NONE **CHARITABLE** 300 FORT LAUDERDALE, FL 33302 THE SMILE TRAIN PO BOX 96231 NONE CHARITABLE 2,500 WASHINGTON, DC 200906231 Total . . . 105,711

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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 TURNING POINT INC PO BOX 123 NONE CHARITABLE 750 MT CLEMENS, MI 48046 USO PO BOX 96860 NONE CHARITABLE 100

WORLD WILDLIEF FLIND DO BOY 06555	NONE	CHADITABLE	1 000
WOMENS' RESOURCE CENTER 423 PORTER ST PETOSKEY, MI 49770	NONE	CHARITABLE	500
WASHINGTON, DC 200777677			

WOMENS' RESOURCE CENTER 423 PORTER ST PETOSKEY, MI 49770	NONE	CHARITABLE	50
WORLD WILDLIFE FUND PO BOX 96555	NONE	CHARITABLE	1,00

PETOSKEY, MI 49770			
WORLD WILDLIFE FUND PO BOX 96555	NONE	CHARITABLE	1,0

PETOSKET, MI 49770			
WORLD WILDLIFE FUND PO BOX 96555 WASHINGTON, DC 200777789	NONE	CHARITABLE	1,000

WORLD WILDLIFE FUND PO BOX 96555 WASHINGTON, DC 200777789	NONE	CHARITABLE	1,

WASHINGTON, DC 200777789			
Total		•	105 711

,		
Total	• • • • • • • • • • • • • • • • • • •	105,711

efile GRAPHIC print - DO NOT P	PROCESS	As Filed Data	-	DI	LN: 93491132013297
TY 2016 Accounting Fe	ees Sch	edule			
_					
		DRYDEN FA 38-352721:	MILY FOUNDATI	ON	
Category	Am	ount N	et Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes

3,490

3,490

ANNUAL ACCOUNTING AND TAX

RETURN

Note: To capture the full content of this document, please select landscape mode (11" x 8.5") when printing.

TY 2016 Gain/Loss from Sale of Other Assets Schedule

Name: DRYDEN FAMILY FOUNDATION

EIN: 38-3527211

Name	Date Acquired	How Acquired	Date Sold	Purchaser Name	Gross Sales Price	Basis	Basis Method	Sales Expenses	Total (net)	Accumulated Depreciation
3,550 SH ARMOUR RESIDENT REIT, ARR		PURCHASE	2016-01		70,327	79,155			-8,828	
13,000 SH BLACKROCK CREDIT ALL, BTZ		PURCHASE	2016-11		16,697	36,275			-19,578	
7,666 SH FIDELITY HIGH INCOME, SPHIX		PURCHASE	2016-10		67,000	67,999			-999	
88 SH LOOMIS SAYLES INV GR BD, LSIIX		PURCHASE	2016-06		998	1,024			-26	
171 SH FRANKLIN MUT GLBL DSCV, MDISX		PURCHASE	2016-06		4,949	4,694			255	
89 SH VICTORY INTEGRITY SM V, VSVIX	2016-06	PURCHASE	2016-11		3,290	2,830			460	
297 SH BRIDGE BUILDER CORE BD, BBTBX	2013-10	PURCHASE	2016-11		3,010	2,969			41	
138 SH BRIDGE BUILDER LGE GR, BBGLX	2015-05	PURCHASE	2016-11		1,425	1,386			39	
200 SH BRIDGE BUILDER LGE VAL, BBVLX	2015-05	PURCHASE	2016-11		2,097	2,032			65	
82 SH BRIDGE BUILDER SM MD GR, BBGSX	2015-05	PURCHASE	2016-11		856	828			28	
187 SH BRIDGE BUILDER SM M VA, BBVSX	2015-05	PURCHASE	2016-11		1,978	1,850			128	
32 SH DODGE & COX STOCK, DODGX		PURCHASE	2016-11		5,991	3,187			2,804	
81 SH JPMORGAN MID CAP VAL, FLMVX		PURCHASE	2016-11		3,126	1,736			1,390	
451 SH FUNDAMENTAL INVEST, FINFX		PURCHASE	2016-06		23,145	15,466			7,679	
13 SH FUNDAMENTAL INVEST FINFX		PURCHASE	2016-11		730	454			276	
143 SH JP MORGAN HIGH YIELD, OHYFX	2009-08	PURCHASE	2016-11		1,037	1,071			-34	
2,576 SH LOOMIS SAY INV GR BD, LSIIX		PURCHASE	2016-06		29,139	29,858			-719	
1,303 SH LOOMIS SAY GLOBAL BD, LSGBX		PURCHASE	2016-06		20,970	21,609			-639	
161 SH MFS VALUE, MEIIX		PURCHASE	2016-11		5,863	3,576			2,287	
42 SH METROPOLITAN WEST BD, MWTIX	2011-09	PURCHASE	2016-11		453	448			5	
1,730 SH FRANKLIN MUT GLBL DS, MDISX		PURCHASE	2016-06		50,097	47,511			2,586	
103 SH OPPENHEIMER MAIN ST, OMSIX	2013-05	PURCHASE	2016-11		4,833	4,367			466	
12 SH PIMCO RETURN IV, PTUIX	2011-09	PURCHASE	2016-11		125	125				
306 SH T ROWE PRICE BL CH GR, TBCIX		PURCHASE	2016-06		20,866	9,880			10,986	
4 SH T ROWE PRICE BL CH GR, TBCIX	2009-01	PURCHASE	2016-11		269	117			152	

TY 2016 Investments Corporate Stock Schedule	

DLN: 93491132013297

Name: DRYDEN FAMILY FOUNDATION

EIN: 38-3527211

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Name of Stock	End of Year Book Value	End of Year Fair Market Value
CORPORATE STOCKS HELD AT FIDELITY	762,062	1,112,162

TY	2016	Investments	- Other	Schedule	

Name: DRYDEN FAMILY FOUNDATION

IIIe: DRIDEN FA

EIN: 38-35.			
Category/ Item	Listed at Cost or FMV	Book Value	End of Year Fair Market Value
MUTUAL FUNDS HELD AT FIDELITY	AT COST	33,758	33,148
REITS HELD AT FIDELITY	AT COST	49,834	54,561
MUTUAL FUNDS HELD AT EDWARD JONES	AT COST	923,839	1,024,553

DLN: 93491132013297

efile GRAPHIC print - DO NOT PROC	ESS As Filed Data	-	DLI	N: 93491132013297
TY 2016 Legal Fees Schedule				
Na	me: DRYDEN FAI	MILY FOUNDATION	I	
EIN: 38-3527211				
Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
LEGAL AND CONSULTING FEES	88			88

efile GRAPHIC print - DO NOT PROCESS	As Filed Data -		DLN	: 93491132013297		
TY 2016 Other Expenses Sche	TY 2016 Other Expenses Schedule					
-						
Name:	DRYDEN FAMILY	Y FOUNDATION				
EIN:	EIN: 38-3527211					
Other Expenses Schedule						
Description	Revenue and Expenses per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes		
EXPENSES			·			
DUES	750			750		
OFFICE EXPENSE	124			124		

efile GRAPHIC print - DO NOT PROCESS	As Filed Data -		DLN	N: 93491132013297	
TY 2016 Other Professional Fees Schedule					
Name: DRYDEN FAMILY FOUNDATION EIN: 38-3527211					
Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes	

11,401

11,401

INVESTMENT MANAGEMENT FEES

efile GRAPHIC print - DO NOT PROCESS	As Filed Data	<u>-</u>	DLI	N: 93491132013297
TY 2016 Taxes Schedule				
Name:	DRYDEN FAI	MILY FOUNDATION	1	
EIN:	38-3527211			,
Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
STATE OF MICHIGAN ANNUAL FEE	20		,	20
FOREIGN TAXES PAID	379	379		
FORM 990-PF TAXES	1,474			

efile GRAPHIC print - DO NOT PROCESS As Filed Data - DLN: 93491132013297						
Schedule B (Form 990, 990-EZ,	Schedule of Contributors		OMB No 1545-0047			
or 990-PF) Department of the Treasury Internal Revenue Service	0-PF) ► Attach to Form 990, 990-EZ, or 990-PF ment of the Treasury ► Information about Schedule B (Form 990, 990-EZ, or 990-PF) and its instructions is at					
Name of the organizat DRYDEN FAMILY FOUND		Employer id	lentification number			
		38-3527211				
Organization type (ch	eck 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	on				
	☐ 527 political organization					
Form 990-PF	☑ 501(c)(3) exempt private foundation	_ _ · · · · · · · · · · · · · · · · · ·				
	4947(a)(1) nonexempt charitable trust treated as a private foundation					
141	zation filing Form 990, 990-EZ, or 990-PF that received, during the year, contribution for deep property) from any one contributor. Complete Parts I and II. See instructions for deep property.	•	•			
Special Rules						
under sections received from a	ation described in section 501(c)(3) filing Form 990 or 990-EZ that met the $33^13\%$ si $509(a)(1)$ and $170(b)(1)(A)(vi)$, that checked Schedule A (Form 990 or 990-EZ), Painy one contributor, during the year, total contributions of the greater of (1) \$5,000 one 1h, or (ii) Form 990-EZ, line 1. Complete Parts I and II	irt II, line 13,	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						
during the year If this box is che purpose Do no	ation described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that recein contributions exclusively for religious, charitable, etc., purposes, but no such contributed, enter here the total contributions that were received during the year for an extra complete any of the parts unless the General Rule applies to this organization be able, etc., contributions totaling \$5,000 or more during the year	ributions tota exclusively re ecause it rece	led more than \$1,000 ligious, charitable, etc, eived <i>nonexclusively</i>			
990-EZ, or 990-PF), bu	on that is not covered by the General Rule and/or the Special Rules does not file Sit it must answer "No" on Part IV, line 2, of its Form 990, or check the box on line Horm 990PF, Part I, line 2, to certify that it does not meet the filing requirements of	l of its				
For Paperwork Reduction for Form 990, 990-EZ, or 9		е В (Form 990	, 990-EZ, or 990-PF) (2016)			

(Complete Part II for noncash

Schedule B (Form 99	90, 990-EZ, or 990-PF) (2016)		Page 3	
Name of organization DRYDEN FAMILY FOUNDATION		Employer identification number		
	BATTON	38-35	527211	
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	
		s		
(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	
<u> </u>		Schedule B (Form 9	990, 990-EZ, or 990-PF) (2016)	

Schedule B (Form	990, 990-EZ, or 990-PF) (2016)		Page 4
Name of organizat DRYDEN FAMILY FO			Employer identification number 38-3527211
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	t Relationship of transferor to transferee
(a)	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
No.from Part I	(b) r dipose of gift	(0) 030 01 gill	(a) Besonption of now girl sincia
	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 a	(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 ZIP 4 F	t Relationship of transferor to transferee
			Schedule B (Form 990, 990-EZ, or 990-PF) (2016)