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# EXTENDED TO NOVEMBER 15, 2017 Return of Private Foundation or Section 4947(a)(1) Trust Treated as Private Foundation

Do not enter social security numbers on this form as it may be made public.
 ▶ Information about Form 990-PF and its separate instructions is at <a href="https://www.irs.gov/form990pf">www.irs.gov/form990pf</a>

For calendar year 2016 or tax year beginning DEC	12, 2016	, and ending	DEC 31, 2016	
Name of foundation	-		A Employer identification	number
			04 4660505	
NDSP FAMILY FOUNDATION  Number and street (or PO box number if mail is not delivered to street.	-14	Room/suite	81-4662737	
39533 WOODWARD AVENUE, SUI	·	Room/suite	B Telephone number 248-642-37	0.0
City or town, state or province, country, and ZIP or foreign p			_	
BLOOMFIELD HILLS, MI 4830			C If exemption application is pe	anding, check here
G Check all that apply: X Initial return		ormer public charity	D 1. Foreign organizations	. check here
Final return	Amended return			,
Address change	Name change		Foreign organizations med check here and attach cou	eting the 85% test, mputation
H Check type of organization: X Section 501(c)(3) e			E If private foundation stat	tus was terminated
Section 4947(a)(1) nonexempt charitable trust	Other taxable private founda		under section 507(b)(1)	(A), check here
·	ing method. X Cash	Accrual	F if the foundation is in a	
(from Part II, col (c), line 16) ▶\$ 4,485,473. (Part I, cold	ther (specify)	nacis l	under section 507(b)(1)	(B), check here
Part   Analysis of Revenue and Expenses			(a) Adjusted net	(d) Disbursements
(The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a))	(a) Revenue and expenses per books	(b) Net investment income	(c) Adjusted net income	for charitable purposes (cash basis only)
1 Contributions, gifts, grants, etc., received	4,491,404.			<u> </u>
2 Check if the foundation is not required to attach Sch. B				
3 Interest on savings and temporary cash investments				
4 Dividends and interest from securities	122.	122.		STATEMENT 1
5a Gross rents				
b Net rental income or (loss)				
6a Net gain or (loss) from sale of assets not on line 10 Gross sales price for all		- · · · - · · · · · · · · · · · · · · ·		<u> </u>
Gross sales price for all assets on line 6a  7 Capital gain net income (from Pert IV, line 2)		0.		
8 Net short-term capital gain				
9 Income modifications				
Gross sales less returns 10a and allowances				
Less Cost of goods sold				
c Gross profit or (loss)				<del></del>
11 Other income	4,491,526.	122.	0.	
12 Total. Add lines 1 through 11 13 Compensation of officers, directors, trustees, etc	0.	0.	0.	0.
14 Other employee salaries and wages				
15 Pension plans, employee benefits				
្ត ខ្លី 16a Legal fees				
b Accounting tees c Other professional tees VED				
c Other professional tees VED				
g 17 Interest			<u>-</u>	
18 Taxe NOV 17 2017			-	
19 Depredation and depletion				<del></del>
21 Travel contented and peedings				
22 Printing and publications				
of an other sections				
24 Total operating and administrative expenses. Add lines 13 through 23				
expenses. Add lines 13 through 23	0.	0.	0.	0.
23 Contributions, girts, grants para	0.	<u> </u>	<del> </del>	0.
26 Total expenses and disbursements.		_		_
Add lines 24 and 25	0.	0.	0.	0.
27 Subtract line 26 from line 12:	4,491,526.			1
a Excess of revenue over expenses and disbursements b Net investment income (if negative, enter -0-)		122.		
c Adjusted net income (if negative, enter -0-)			0.	

823501 11-23-18 LHA For Paperwork Reduction Act Notice, see instructions.

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_		0-PF (2016) NDSP FAMILY FOUNDATION			4662/3/ Page 2
P	art	Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only	Beginning of year	End of	
_			(a) Book Value	(b) Book Value	(c) Fair Market Value
		Cash - non-interest-bearing		2 700 122	2 700 122
		Savings and temporary cash investments		2,700,122.	2,700,122.
	3	Accounts receivable	ļ		
		Less: allowance for doubtful accounts			
	4	Pledges receivable ►	ľ	Ì	
		Less: allowance for doubtful accounts			
	5	Grants receivable			
	6	Receivables due from officers, directors, trustees, and other			
		disqualified persons			
	7	Other notes and loans receivable			
		Less: allowance for doubtful accounts		<del></del>	
ts	8	Inventories for sale or use		<del></del>	
Assets		Prepaid expenses and deferred charges			
٩		Investments - U.S. and state government obligations		1 501 101	4 505 054
		Investments - corporate stock STMT 2	0.	1,791,404.	1,785,351.
	•	Investments - corporate bonds			
	11	Investments - land buildings, and equipment basis	j		
		Less accumulated depreciation			
	12	Investments - mortgage loans		-	
	13	Investments - other			
	14	Land, buildings, and equipment basis			
		Less accumulated depreciation			
	15	Other assets (describe			
	16	Total assets (to be completed by all filers - see the		4 401 506	4 405 450
	<u> </u>	instructions. Also, see page 1, item I)	0.	4,491,526.	4,485,473.
		Accounts payable and accrued expenses			
	18	Grants payable			
es	19	Deferred revenue			
Liabilities	20	Loans from officers, directors, trustees, and other disqualified persons			
iat	21	Mortgages and other notes payable			
_	22	Other liabilities (describe		<u></u>	
		Tatal Pakillation (add loan 17 through 20)	0.	0.	
_	23	Total liabilities (add lines 17 through 22)			
		Foundations that follow SFAS 117, check here and complete lines 24 through 26 and lines 30 and 31.			
ģ	24	Unrestricted			
2	25	Temporanty restricted			
ala	26	Permanently restricted		-	
g p	[20	Foundations that do not follow SFAS 117, check here		· · · · · · · · · · · · · · · · · · ·	
ä		and complete lines 27 through 31.			
5	27	Capital stock, trust principal, or current funds	0.	4,491,404.	
ets	28	Paid-in or capital surplus, or land, bldg., and equipment fund	0.1	0.	
Net Assets or Fund Balances	29	Retained earnings, accumulated income, endowment, or other funds	0.	122.	
et /	30	Total net assets or fund balances	0.	4,491,526.	
ž	30	ival liet assets vi tuliu valances		2727270201	
	31	Total liabilities and net assets/fund balances	0.	4,491,526.	
Ξ				-1 -2 1	<del></del>
<u>P</u>	<u>art</u>	Analysis of Changes in Net Assets or Fund Ba	es		
1	Tota	net assets or fund balances at beginning of year - Part II, column (a), line	30		
	•	st agree with end-of-year figure reported on prior year's return)		1	0.
2	Ente	amount from Part I, line 27a		2	4,491,526.
3	Othe	r increases not included in line 2 (itemize)		3	0.
4	Add	lines 1, 2, and 3		4	4,491,526.
5	Decr	eases not included in line 2 (itemize)		5	0.
6_	Tota	net assets or fund balances at end of year (line 4 minus line 5) - Part II, co	ołumn (b), line 30		4,491,526.

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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.

8 Enter qualifying distributions from Part XII, line 4

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Part VI Excise	Tax Based on Investment Income (Section	n 4940(a), 4940(b),	4940(e), or 49	48 - see in	struc	tions	)
1a Exempt operating four	ndations described in section 4940(d)(2), check here 🕨	and enter "N/A" on line	1.				
	rmination letter: (attach copy of let						_
<b>b</b> Domestic foundations	s that meet the section 4940(e) requirements in Part V, check	here 🕨 🔙 and enter	1%	_1			<u>2.</u>
of Part I, line 27b				l [			
	undations enter 2% of line 27b. Exempt foreign organizations (		col. (b). ノ				
2 Tax under section 511	1 (domestic section 4947(a)(1) trusts and taxable foundations	only. Others enter -0-)		2			<u>0.</u>
3 Add lines 1 and 2				3			2.
	ax (domestic section 4947(a)(1) trusts and taxable foundation			4			0.
5 Tax based on investn	ment income. Subtract line 4 from line 3. If zero or less, enter	· <b>-</b> 0-		5			2.
6 Credits/Payments:		1 1					
a 2016 estimated tax pa	ayments and 2015 overpayment credited to 2016	6a					
	uzations - tax withheld at source	6b					
c Tax paid with applicat	tion for extension of time to file (Form 8868)	6c					
d Backup withholding e	rroneously withheld	6d					^
7 Total credits and payr	ments. Add lines 6a through 6d			7			0.
		20 is attached		8			
	of lines 5 and 8 is more than line 7, enter amount owed		<b>•</b>	9			2.
• •	7 is more than the total of lines 5 and 8, enter the amount over	erpaid	<b>▶</b>	10			
	ne 10 to be: Credited to 2017 estimated tax		Refunded	11			
	ements Regarding Activities		<del> </del>		ш	Yes	No
	hid the foundation attempt to influence any national, state, or le	ocal legislation or did it pai	rticipate or intervene	ın	$\rightarrow$	103	
any political campaigr					1a		X
	an \$100 during the year (either directly or indirectly) for politic				1b		
	es" to 1a or 1b, attach a detailed description of the act	tivities and copies of any	y materials publish	ed or	i i		
	foundation in connection with the activities.				ا ا		Х
	e Form 1120-POL for this year?				1c	-	
	any) of tax on political expenditures (section 4955) imposed d		0.				
	on. > \$ 0 · (2) On foundation r			_	l I		
	nent (if any) paid by the foundation during the year for politica $oldsymbol{0}$ .	i experiorure tax imposeu	OII IOUIIUAUOII				
managers. > \$	ngaged in any activities that have not previously been reported	I to the IDCO			2	l	x
		1 10 016 103					
	etailed description of the activities nade any changes, not previously reported to the IRS, in its go	verning instrument article	e of incornoration o	7			
	lar instruments? If "Yes," attach a conformed copy of the		a of moorporation, o		3	l	X
	ave unrelated business gross income of \$1,000 or more during				4a		X
	tax return on Form 990-T for this year?	g are year.		N/A	4b		
	on, termination, dissolution, or substantial contraction during	the vear?			5		X
•	statement required by General Instruction T	alo your					
	of section 508(e) (relating to sections 4941 through 4945) sa	itisfied either:					
	governing instrument, or						
	that effectively amends the governing instrument so that no r	nandatory directions that o	conflict with the state	law		ı	
remain in the governi					6	Х	
<del>_</del>	ave at least \$5,000 in assets at any time during the year? If ")	es " complete Part II c	ol (c), and Part XV	,	7	Х	
, Did allo todilidadon lia	ite at least popular and at any anno caring are your ''	co, complete rait ii, c	o. (o), and rait / (				
	hich the foundation reports or with which it is registered (see	instructions) 🕨					
MI	to line 7, has the foundation furnished a copy of Form 990-Pf	to the Attorney Congret (	or decianate)				
			or ucarginate/		8b	х	
	rred by General Instruction G? If "No," attach explanatio Iming status as a private operating foundation within the mear		nr 4942(1)(5) for cale	ndar	"		
	iming status as a private operating roundation within the mean able year beginning in 2016 (see instructions for Part XIV)? <i>II</i>			aı	9		X
	able year beginning in 2016 (see instructions for Part XIV)? If ome substantial <u>contributors during the tax year?</u> If "Yes," attac	·		STMT 3	10	X	
10 Did any persons beco	mits substantial continuous during the tax year. If Tes, attac	in a scriedule isting tier tames	a aua 65565	* 7 *2	rm <b>99</b> 0		(2016)

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Part VII-B   Statements Regarding Activities for Which F	orm 4720 May Be Re	equired (continu	ied)	
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))?	Ye	s X No	
(2) Influence the outcome of any specific public election (see section 4955); or				1 1
any voter registration drive?	to sairy on, an oddy or mane		s X No	
· -			s X No	1 1
(3) Provide a grant to an individual for travel, study, or other similar purposes?		. "	8 <u>22</u> NU	1 1
(4) Provide a grant to an organization other than a charitable, etc., organization	i described in section		s X No	
4945(d)(4)(A)? (see instructions)			S LAL NO	
(5) Provide for any purpose other than religious, charitable, scientific, literary,	or educational purposes, or fo			
the prevention of cruelty to children or animals?		·	s X No	1 1
b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify und	fer the exceptions described i	n Regulations		
section 53.4945 or in a current notice regarding disaster assistance (see instru	ctions)?		N/A	b
Organizations relying on a current notice regarding disaster assistance check hi				1 1
c if the answer is "Yes" to question 5a(4), does the foundation claim exemption fr		ned	1	
expenditure responsibility for the grant?		/A Ye	s No	
		., ==		
If "Yes," attach the statement required by Regulations section 53.4945.				
6a Did the foundation, during the year, receive any funds, directly or indirectly, to j	ay premiunis un		s X No	
a personal benefit contract?		Y6		😛
<b>b</b> Did the foundation, during the year, pay premiums, directly or indirectly, on a p	ersonal benefit contract?		<u> </u>	Sb X
If "Yes" to 6b, file Form 8870				
7a At any time during the tax year, was the foundation a party to a prohibited tax s		Ye	es 🗶 No 📙	
b If "Yes," did the foundation receive any proceeds or have any net income attribu	table to the transaction?		N/A	<u>'b                                    </u>
Part VIII Information About Officers, Directors, Truste	es, Foundation Mar	nagers, Highly		
Paid Employees, and Contractors				
1 List all officers, directors, trustees, foundation managers and their of	compensation.			
	(b) Title, and average	(c) Compensation	(d) Contributions to employee benefit plans	(e) Expense account, other
(a) Name and address	hours per week devoted to position	(If not paid, enter -0-)	and deterred compensation	account, other allowances
ERNEST L. NICOLAY III	PRESIDENT, DI		REASURER	
39533 WOODWARD AVE., SUITE 200		1.202011, 23		
	1.00	0.	0.	0.
	DIRECTOR, VIC			
DANA C. NICOLAY	DIRECTOR, VIC	E-FKESIDE	וֹל וֹ	
39533 WOODWARD AVE., SUITE 200	1 00		ا م	0
BLOOMFIELD HILLS, MI 48304	1.00	0.	0.	0.
SARAH E. KAGAN	DIRECTOR			
39533 WOODWARD AVE., SUITE 200				
BLOOMFIELD HILLS, MI 48304	1.00	0.	0.	0.
PETER NICOLAY	DIRECTOR			
39533 WOODWARD AVE., SUITE 200	]			
BLOOMFIELD HILLS, MI 48304	1.00	0.	0.	0.
2 Compensation of five highest-paid employees (other than those inc		enter "NONE."	<u> </u>	
	(b) Title, and average		(d) Contributions to	(e) Expense
(a) Name and address of each employee paid more than \$50,000	hours per week devoted to position	(c) Compensation	employee benefit plans and deterred compensation	account, other allowances
MONTE	devoted to position		Compensation	anowances
NONE				
				<del></del>
		ļ	<b></b>	
		1	1	
	]	1		
	· · · · · · · · · · · · · · · · · · ·			<u> </u>
	1			
The same of other amplement and over 000 000	I			0
Total number of other employees paid over \$50,000		<del></del>		990-PF (2016)
			rorm	990-FF (2016)

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Part VIII Information About Officers, Directors, Trustees, Foundation Mana Paid Employees, and Contractors (continued)	agers, Highly	
3 Five highest-paid independent contractors for professional services. If none, enter "NONE."		
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE		
	<del></del>	
		]
Total number of others receiving over \$50,000 for professional services	<del></del>	▶ 0
Part IX-A Summary of Direct Charitable Activities		
	en such as the	
List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical informat number of organizations and other beneficiaries served, conferences convened, research papers produced, etc.	ion such as the	Expenses
57.75		
1 N/A		
		<del></del>
2		
3		
4		
Part IX-B Summary of Program-Related Investments		
Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2	T	Amount
1 N/A	·	731104111
N/ A		
	-	
2		
All other was an extend in restment of Contractions		<del></del>
All other program-related investments. See instructions.		
3		
The state of the s		0.
Total, Add lines 1 through 3	<b>&gt;</b>	Form <b>990-PF</b> (2016)
		ruilli 990-Li (5019)

	art X Minimum Investment Return (All domestic foundations must complete this part. Foreign foundations	dations	, see instructions.)
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes:		
·	Average monthly fair market value of securities	1a	1,785,351.
b	Average of monthly cash balances	1b	2,700,000.
c	Fair market value of all other assets	1c	
ď	Total (add lines 1a, b, and c)	1d	4,485,351.
e			
-	1c (attach detailed explanation)		
2	Acquisition indebtedness applicable to line 1 assets	2	0.
3	Subtract line 2 from line 1d	3	4,485,351.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions)	4	67,280.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	4,418,071.
6	Minimum investment return. Enter 5% of line 5 ADJUSTED FOR SHORT TAX PERIOD	6	12,106.
ĬΡ	art XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations an		
_	foreign organizations check here and do not complete this part.)		
<del>-</del>	Minimum investment return from Part X, line 6	1	12,106.
2a			
ь	Income tax for 2016. (This does not include the tax from Part VI.)	1	
C	Add lines 2a and 2b	2c	2.
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	12,104.
4	Recoveries of amounts treated as qualifying distributions	4	0.
5	Add lines 3 and 4	5	12,104.
6	Deduction from distributable amount (see instructions)	6	0.
7	Distributable amount as adjusted, Subtract line 6 from line 5. Enter here and on Part XIII, line 1	7	12,104.
	art XII Qualifying Distributions (see instructions)		
느	CHEAN CACHINATE DISTIBUTION (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	0.
b	Program-related investments - total from Part IX-B	1b	0.
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes	2	
3	Amounts set aside for specific charitable projects that satisfy the:	1 1	
а	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	0.
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment		
	income. Enter 1% of Part I, line 27b	5	0.
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	0.
	Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation of 4940(e) reduction of tax in those years.	jualifies f	or the section

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Part XIII Undistributed Income (see	e instructions)			
	(a) Corpus	(b) Years prior to 2015	(c) 2015	(d) 2016
1 Distributable amount for 2016 from Part XI,	оприз	Tours prior to 2010		12,104.
line 7				12,104.
2 Undistributed income, if any, as of the end of 2016 a Enter amount for 2015 only			0.	
b Total for prior years:		· · · · · · · · · · · · · · · · · · ·		
y rotal to prior yours.		0.		
8 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	0.			
4 Qualifying distributions for 2016 from		-		
Part XII, line 4: ► \$0.				11
a Applied to 2015, but not more than line 2a			0.	
b Applied to undistributed income of prior		_		
years (Election required - see instructions)		0.		
c Treated as distributions out of corpus	_			
(Election required - see instructions)	0.			
d Applied to 2016 distributable amount				0.
e Remaining amount distributed out of corpus	0.			
Excess distributions carryover applied to 2016 (If an amount appears in column (d), the same amount must be shown in column (a))	0.			0.
6 Enter the net total of each column as indicated below:				
a Corpus Add lines 3f, 4c, and 4e Subtract line 5	0.			<u> </u>
b Prior years' undistributed income. Subtract				
line 4b from line 2b		0.		
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		0.		
d Subtract line 6c from line 6b. Taxable				
amount - see instructions		0.		
e Undistributed income for 2015. Subtract line			0	
4a from line 2a. Taxable amount - see instr.			0.	
f Undistributed income for 2016. Subtract				
lines 4d and 5 from line 1. This amount must				12 104
be distributed in 2017				12,104.
7 Amounts treated as distributions out of	,			
corpus to satisfy requirements imposed by	Ì			
section 170(b)(1)(F) or 4942(g)(3) (Election	0.			
may be required - see instructions)  8 Excess distributions carryover from 2011				<del></del>
8 Excess distributions carryover from 2011 not applied on line 5 or line 7	0.			
9 Excess distributions carryover to 2017.		-		
Subtract lines 7 and 8 from line 6a	0.			
10 Analysis of line 9.				
a Excess from 2012				
b Excess from 2013	ļ	}		
c Excess from 2014				
d Excess from 2015				
e Excess from 2016				<u> </u>
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		^		

	MILY FOUNDA				62737 Page 10
Part XIV   Private Operating F	oundations (see in	structions and Part V	I-A, question 9)	N/A	
1 a If the foundation has received a ruling of	or determination letter that	t it is a private operating			
foundation, and the ruling is effective fo	or 2016, enter the date of t	the ruling	▶	<del></del>	
b Check box to indicate whether the foun	dation is a private operatir	ng foundation described		4942(j)(3) or4	942(j)(5)
2 a Enter the lesser of the adjusted net	Tax year		Prior 3 years		<u> </u>
income from Part I or the minimum	(a) 2016	(b) 2015	(c) 2014	(d) 2013	(e) Total
investment return from Part X for		ì	1	1	
each year listed			<u> </u>		
<b>b</b> 85% of line 2a				<u> </u>	<u> </u>
c Qualifying distributions from Part XII,					
line 4 for each year listed					
d Amounts included in line 2c not			1	Į.	
used directly for active conduct of					
exempt activities					
e Qualifying distributions made directly					
for active conduct of exempt activities.			1	1	
Subtract line 2d from line 2c				<b>_</b>	
3 Complete 3a, b, or c for the alternative test relied upon:					
a "Assets" alternative test - enter					1
(1) Value of all assets			4		
(2) Value of assets qualifying under section 4942(i)(3)(B)(i)					
b "Endowment" alternative test - enter					
2/3 of minimum investment return shown in Part X, line 6 for each year listed					
c "Support" alternative test - enter:			<u> </u>		1
(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				<u> </u>	<del></del>
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 Info	rmation (Comple	te this part only	if the foundation	had \$5,000 or mo	re in assets
at any time during t	he year-see instr	uctions.)			
1 Information Regarding Foundation	on Managers;				
a List any managers of the foundation wi	*	than 2% of the total con	tributions received by the	e foundation before the clo	se of any tax
year (but only if they have contributed					
NONE					
b List any managers of the foundation wi	o own 10% or more of th	e stock of a corporation	(or an equally large port	ion of the ownership of a p	artnership or
other entity) of which the foundation ha					• •
NONE					
2 Information Regarding Contribut	ion, Grant, Gift. Loan.	Scholarship, etc., P	rograms:		
Check here ► X if the foundation				not accept unsolicited regi	uests for funds. If
the foundation makes gifts, grants, etc.					
a The name, address, and telephone num	ber or e-mail address of t	the person to whom app	ications should be addre	ssed	
•					
b The form in which applications should	be submitted and informa	tion and materials they s	hould include:		
c Any submission deadlines:					
	la anak as ku		lunds of mothers :	ather feeters	
d Any restrictions or limitations on award	is, such as by geographic	ai areas, charitable fields	, KINGS OT INSTITUTIONS, OF	omer factors:	
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Form 990-PF (2016)

**▶** 3b

Total

Fees and contracts from government agencies mbership dues and assessments erest on savings and temporary cash estments indends and interest from securities erental income or (loss) from real estate:  Debt-financed property Not debt-financed property Fental income or (foss) from personal inperty Fire investment income Fin or (loss) from sales of assets other Fin inventory Fin income or (loss) from special events Fin income or (loss) from sales of inventory	(a) Business code	(b) Amount	(c) Exchision code	(d) Amount	(e) Related or exemply function income
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t XVI-B Relationship of Activities to	the Acco	mnlishment of E	xempt Pu	rposes	<del></del>
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No. Explain below how each activity for which income the foundation's exempt purposes (other than be			contributed	importantly to the accomp	Alstinient of
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Form **990-PF** (2016)

623621 11-23-16

AUBURN HILLS, MI 48326 (248) 375-7100 Phone no. Form 990-PF (2016)

n of preparer (other than taxpayer) is based on all information of which preparer has any knowledge

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge

Preparer's signature

PAUL EDWARDS

Sign

Here

Paid

**Preparer** 

**Use Only** 

Signature of officer or trustee

Print/Type preparer's name

PAUL EDWARDS

Firm's name PLANTE & MORAN, PLLC

Firm's address ▶ 2601 CAMBRIDGE CT., STE. 500

TRUSTEE

Check [

self- employed

Title

10/30/17

Date

May the IRS discuss the return with the preparer

X Yes

P00690769

PTIN

Firm's EIN > 38-1357951

hown below (see instr )?

## Schedule B

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

Department of the Treasury Internal Revenue Service

## **Schedule of Contributors**

▶ Attach to Form 990, Form 990-EZ, or Form 990-PF.
 ▶ Information about Schedule B (Form 990, 990-EZ, or 990-PF) and its instructions is at <a href="https://www.irs.gov/form990">www.irs.gov/form990</a>.

OMB No 1545-0047

2016

Name of the organization	n	Employer identification number
N	DSP FAMILY FOUNDATION	81-4662737
Organization type (check	one).	
Filers of:	Section:	
Form 990 or 990-EZ	501(c)( ) (enter number) organization	
	4947(a)(1) nonexempt chantable trust not treated as a private foundation	
	527 political organization	
Form 990-PF	X 501(c)(3) exempt private foundation	
	4947(a)(1) nonexempt charitable trust treated as a private foundation	
	501(c)(3) taxable private foundation	
	n is covered by the <b>General Rule</b> or a <b>Special Rule.</b> (c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Ru	le See instructions.
X For an organizat	ion filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling	
property) from a	ny one contributor Complete Parts I and II. See instructions for determining a contributor	s total contributions.
Special Rules		
sections 509(a)(* any one contribu	ion described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support i) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, itor, during the year, total contributions of the greater of (1) \$5,000 or (2) 2% of the amou EZ, line 1 Complete Parts I and II.	or 16b, and that received from
year, total contri	ion described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from butions of more than \$1,000 exclusively for religious, chantable, scientific, literary, or education of cruelty to children or animals. Complete Parts I, II, and III	
year, contributio is checked, ente purpose. Don't o	non described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from ns exclusively for religious, chantable, etc., purposes, but no such contributions totaled met here the total contributions that were received during the year for an exclusively religious complete any of the parts unless the General Rule applies to this organization because it able, etc., contributions totaling \$5,000 or more during the year	nore than \$1,000. If this box is, charitable, etc.,
	that isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Fon Part IV, line 2, of its Form 990, or check the box on line H of its Form 990-EZ or on its Form 990-EZ or	

certify that it doesn't meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

Name of organization

Employer identification number

NDSP	FAMILY FOUNDATION	81	<u>-466273</u> 7
Part I	Contributors (See instructions). Use duplicate copies of Part I if add	itional space is needed.	
(a) No	(b) Name, address, and ZiP + 4	(c) Total contributions	(d) Type of contribution
1	ERNEST L. NICOLAY III  39533 WOODWARD AVENUE, SUITE 200  BLOOMFIELD HILLS, MI 48304	s4,491,404.	Person X Payroll Noncash X (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		<b>\$</b>	Person Payroll Oncash Complete Part II for noncash contributions )
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		<b>\$</b>	Person Payroll Oncash Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		<b></b> \$	Person Payroll Occupate Part II for noncash contributions
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
<del></del>			Person Payroll Oncash (Complete Part II for noncash contributions )
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		<b></b> \$	Person Payroll Occash (Complete Part II for noncash contributions)

623452 10-18-16

Schedule B (Form 990, 990-EZ, or 990-PF) (2016)

Name of organization

Employer identification number

### NDSP FAMILY FOUNDATION

81-4662737

art II	Noncash Property (See instructions). Use duplicate copies of Par	t II if additional space is needed.	
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
1	9,836 SHARES PEPSICO 8,454 SHARES YUM CHINA HOLDINGS		
	8,454 SHARES YUM! BRAND INC.	\$ 1,791,404.	12/23/16
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
		\	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
		     \$	
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
		*	
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received

	(Form 990, 990-EZ, or 990-PF) (2016)			Page 4			
Name of orga	anization			Employer identification number			
NDSP F	AMILY FOUNDATION			81-4662737			
Part III	Exclusively religious, charitable, etc., con the year from any one contributor. Complete completing Part III, enter the total of exclusively religious.	columns (a) through (e) and the follows	ng line entry. For organization	ons			
	Use duplicate copies of Part III if addition	nal space is needed.					
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Des	(d) Description of how gift is held			
-		(e) Transfer of gift					
	Transferee's name, address, a	and ZIP + 4	Relationship of transferor to transferee				
(a) No.							
from Part I	(b) Purpose of gift	(c) Use of gift	(d) Des	cription of how gift is held			
}	(e) Transfer of gift						
	Transferee's name, address, a	Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee					
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Des	scription of how gift is held			
	(e) Transfer of gift						
-	Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee				
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Des	scription of how gift is held			
			_				
<u> </u>	(e) Transfer of gift						
	Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee				
623454 10-18-1	16	_	Schedule	B (Form 990, 990-EZ, or 990-PF) (2016)			

FORM 990-PF	DIVIDENDS	AND INTEREST	FROM SECUR	ITIES S	TATEMENT 1
SOURCE	GROSS AMOUNT	CAPITAL GAINS DIVIDENDS	(A) REVENUE PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME
DIVIDEND INCOME	122.	0.	122.	122.	122.
TO PART I, LINE 4	122.	0.	122.	122.	122.

FORM 990-PF	CORPORATE STOCK		STATEMENT 2
DESCRIPTION		BOOK VALUE	FAIR MARKET VALUE
PEPSI CO. SECURITIES YUM BRANDS INC. SECURITIES YUM CHINA HOLDINGS INC. SECURIT	PIES	1,031,305. 539,407. 220,692.	1,029,141. 535,392. 220,818.
TOTAL TO FORM 990-PF, PART II,	LINE 10B	1,791,404.	1,785,351.

FORM 990-PF	LIST OF SUBSTANTIAL CONTRIBUTORS PART VII-A, LINE 10	STATEMENT 3
NAME OF CONTRIBUTOR	ADDRESS	
ERNEST L. NICOLAY III	39533 WOODWARD AVENUE, SU	ITE 200

BLOOMFIELD HILLS, MI 48304