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#### ATTORNEY GENERAL

Form 990-PF

Return of Private Foundation

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

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

OMB No 1545-0052

Department of the Treasury

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

DEC 12, 2016 DEC 31, 2016 For calendar year 2016 or tax year beginning , and ending A Employer identification number Name of foundation 81-4690954 Dage Family Foundation (Number and street (or P O box number if mail is not delivered to street address) Room/suite B Telephone number (248)752 - 7342ය21262 Telegraph Rd ℃City or town, state or province, country, and ZIP or foreign postal code f C if exemption application is pending, check here ≥Southfield, MI 48033 X Initial return Initial return of a former public charity G ≥ Check all that apply: D 1 Foreign organizations, check here Final return Amended return Foreign organizations meeting the 85% test, check here and attach computation Address change Name change Check type of organization Section 501(c)(3) exempt private foundation E If private foundation status was terminated Section 4947(a)(1) nonexempt charitable trust \_\_\_\_ Other taxable private foundation under section 507(b)(1)(A), check here X Cash Fair market value of all assets at end of year | J Accounting method Accrual F If the foundation is in a 60-month termination Other (specify) (from Part II, col (c), line 16) under section 507(b)(1)(B), check here 14,972. (Part I, column (d) must be on cash basis) ▶\$ Part I Analysis of Revenue and Expenses (d) Disbursements for charitable purposes (cash basis only) (a) Revenue and (b) Net investment (c) Adjusted net (The total of amounts in columns (b) (c), and (d) may not necessarily equal the amounts in column (a) ) expenses per books income income N/A 15,000. 1 Contributions, gifts, grants, etc., received 2 Check if the foundation is not required to attach Sch. B Interest on savings and temporary cash investments 4 Dividends and interest from securities 5a Gross rents b Net rental income or (loss) 6a Net gain or (loss) from sale of assets not on line 10 b Gross sales price for all assets on line 6a 0. 7 Capital gain net income (from Part IV, line 2) 8 Net short-term capital gain 9 Income modifications 10a Gross sales less returns and allowances b Less Cost of goods sold c Gross profit or (loss) 11 Other income 15,000 12 Total Add lines 1 through 11 0. 13 Compensation of officers, directors, trustees, etc JGDF 14 Other employee salaries and wages 15 Pension plans, employee benefits 16a Legal fees **b** Accounting fees c Other professional fees 17 Interest 18 Taxes 19 Depreciation and depletion 20 Occupancy 21 Travel, conferences, and meetings 22 Printing and publications 0. 28 0 . Stmt 1 23 Other expenses 24 Total operating and administrative 28 Ο. expenses Add lines 13 through 23 0 25 Contributions, gifts, grants paid 26 Total expenses and disbursements. 28 0. 0. Add lines 24 and 25 27 Subtract line 26 from line 12 14,972 a Excess of revenue over expenses and disbursements 0. b Net investment income (if negative, enter -0-) N/A c Adjusted net income (if negative, enter -0-)

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

	3 3		1) dams (cor (n) gam nimbe
(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	còl. (k), but not less than -0-) or Losses (from col. (h))
a			
b			
C			
d			
e			
2 Capital gain net income or (net ca	pital loss) { If gain, also enter-	er in Part I, line 7 0- in Part I, line 7	2

If gain, also enter in Part I, line 8, column (c)

If (loss), enter -0- in Part I, line 8

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.)

N/A

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 the instructions before making any entries.

(a) (b) (c)

(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			
2014			·
2013			
2012			
2011			

- 2 Total of line 1, column (d)
- 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
- 4 Enter the net value of noncharitable-use assets for 2016 from Part X, line 5

3 Net short-term capital gain or (loss) as defined in sections 1222(5) and (6).

- 5 Multiply line 4 by line 3
- 6 Enter 1% of net investment income (1% of Part I, line 27b)
- 7 Add lines 5 and 6
- 8 Enter qualifying distributions from Part XII, line 4

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.

2		 
	}	
,		
	-	 
	l	

5

6

8

	rt VI Excise Tax Based on Investment Income (Section 494	0(2)	40	10/b) 4040/a) az		4690		lot c	age 4
					1240	- See 1	าวเกเ	CHO	15)
12	Exempt operating foundations described in section 4940(d)(2), check here  and e			<b>I</b>					
	Date of ruling or determination letter: (attach copy of letter if net				١.				•
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check here	<b>-</b>	and	denter 1%	1_1_	<u> </u>			_0.
	of Part I, line 27b					ļ			
	All other domestic foundations enter 2% of line 27b Exempt foreign organizations enter 4%					ļ			•
	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. O	thers e	nter	-0-)	2	ļ			0.
	Add lines 1 and 2				3				0.
	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. C	)thers e	nter	-0-)	4				0.
	Tax based on investment income Subtract line 4 from line 3 If zero or less, enter -0-				5	ļ			0.
	Credits/Payments	1	1			(			
	2016 estimated tax payments and 2015 overpayment credited to 2016	6a	4-		4	ł			
	Exempt foreign organizations - tax withheld at source	6b	↓_		-	ł			
C	Tax paid with application for extension of time to file (Form 8868)	6c	1_			ł			
d	Backup withholding erroneously withheld	6d	Т.		]	)			
7	Total credits and payments Add lines 6a through 6d				7_				0.
8	Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is atta	iched			8				
9	Tax due If the total of lines 5 and 8 is more than line 7, enter amount owed			<b>&gt;</b>	9_				0.
10	Overpayment If line 7 is more than the total of lines 5 and 8, enter the amount overpaid			<b>▶</b>	10				
	Enter the amount of line 10 to be: Credited to 2017 estimated tax			Refunded -	11	<u> </u>			
Pa	rt VII-A Statements Regarding Activities								
1 a	During the tax year, did the foundation attempt to influence any national, state, or local legis	slation o	or di	d it participate or interveni	n s			Yes	No
	any political campaign?						_1a		X
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purpo	ses (se	e ins	structions for the definition	1),5		1b		X
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities a	ind co	oies	of any materials publis	hed or		}		1
	distributed by the foundation in connection with the activities						}		
C	Did the foundation file Form 1120-POL for this year?						_1c_		_X
d	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the	e year:							
	(1) On the foundation. $\blacktriangleright$ \$ 0 . (2) On foundation managers	s <b>▶</b> \$	;	0.	_		ĺ		
е	Enter the reimbursement (if any) paid by the foundation during the year for political expend	iture ta:	x im	posed on foundation			Ì		
	managers. ▶ \$0 .								
2	Has the foundation engaged in any activities that have not previously been reported to the l	RS?					2	<u> </u>	X_
	If "Yes," attach a detailed description of the activities							_	
3	Has the foundation made any changes, not previously reported to the IRS, in its governing	ınstrum	nent,	articles of incorporation,	or			ļ	
	bylaws, or other similar instruments? If "Yes," attach a conformed copy of the change	es					3		_X_
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year	ar?					4a		X
b	If "Yes," has it filed a tax return on Form 990-T for this year?				N	I/A	4b		
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year'	7					5		X
	If "Yes," attach the statement required by General Instruction T.							i	
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied e	ither:						Ì	
	By language in the governing instrument, or						Ì	1	
	• By state legislation that effectively amends the governing instrument so that no mandator	ry direc	tions	s that conflict with the stat	e law		}		
	remain in the governing instrument?						6		X
7	Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," con	mplete	Par	rt II, col (c), and Part X	V		7_	X	
	· · · · · · · · · · · · · · · · · · ·							,	
8a	Enter the states to which the foundation reports or with which it is registered (see instruction	ons) 🕨	·				}	}	
	MI								
b	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the A	Attorney	y Gei	neral (or designate)			1	-	}
_	of each state as required by General Instruction G? If "No," attach explanation	•					8b	_X_	
9	Is the foundation claiming status as a private operating foundation within the meaning of si	ection 4	1942	(j)(3) or 4942(j)(5) for cal	endar				
	year 2016 or the taxable year beginning in 2016 (see instructions for Part XIV)? If "Yes," of						9		_X_
10	Old any persons become substantial contributors during the tay year?				Stmt	. 2	10	X	

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,

b Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that

Form 4720, to determine if the foundation had excess business holdings in 2016)

had not been removed from jeopardy before the first day of the tax year beginning in 2016?

4a Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?

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X

3b

4a

N/A

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Part VII-B   Statements Regarding Activities for Which F	orm 4720 May Be R	lequired (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	1 4945(e))?	☐ Ye	s X No		
(2) Influence the outcome of any specific public election (see section 4955); o	r to carry on, directly or indire	ctly,			1
any voter registration drive?		☐ Ye	s X No		
(3) Provide a grant to an individual for travel, study, or other similar purposes'	7	Ye	s X No		
(4) Provide a grant to an organization other than a charitable, etc., organization					
4945(d)(4)(A)? (see instructions)		Ye	s X No		
(5) Provide for any purpose other than religious, charitable, scientific, literary,	or educational purposes, or fo	or			
the prevention of cruelty to children or animals?			s X No		
b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify und	der the exceptions described in	n Regulations			
section 53 4945 or in a current notice regarding disaster assistance (see instru		-	N/A	5b	
Organizations relying on a current notice regarding disaster assistance check h					
c If the answer is "Yes" to question 5a(4), does the foundation claim exemption fr		ned			
expenditure responsibility for the grant?		/A Ye	s No		
If "Yes," attach the statement required by Regulations section 53 494					
<b>6a</b> Did the foundation, during the year, receive any funds, directly or indirectly, to					
a personal benefit contract?		Ye	s X No		
<b>b</b> Did the foundation, during the year, pay premiums, directly or indirectly, on a p	ersonal benefit contract?			6b	x
If "Yes" to 6b, file Form 8870					
7a At any time during the tax year, was the foundation a party to a prohibited tax s	helter transaction?	☐ Ye	s X No		
b. If "Yes," did the foundation receive any proceeds or have any net income attribu				7b	
Part VIII Information About Officers, Directors, Trust		nagers, Highly			
Paid Employees, and Contractors	·				
List all officers, directors, trustees, foundation managers and their					
( ) None and address	(b) Title, and average hours per week devoted	(c) Compensation	(d) Contributions to employee benefit plans and deferred	(e)	Expense unt, other
(a) Name and address	to position	(If not paid, enter -0-)	compensation	allo	wances
Robert Vermeulen	Vice-Presiden	t			
1769 Woodgrove Lane					
Bloomfield Hills, MI 48302	0.00	0.	0.		<u>0.</u>
Jue Wang Vermeulen	President/Tre	asurer/Se	cretary		
L769 Woodgrove Lane			_		
Bloomfield Hills, MI 48302	0.00	0.	0.		0.
	Director				
2001 Sailfish Point Blvd.			_		_
Stuart, FL 34996	0.00	0.	0.		0.
		!			
	-				
2 Compensation of five highest-paid employees (other than those inc	aluded on line 1) If need	enter "NONE "	<u></u>	<u> </u>	
2 Compensation of five highest-paid employees (other than those inc	(b) Title, and average	enter NONE.	(d) Contributions to	(0)	Expense
(a) Name and address of each employee paid more than \$50,000	hours per week	(c) Compensation	employee benefit plans and deferred	acco	unt, other
	devoted to position		compensation	allo	owances
NONE	+				
					·
	-				
			-	<del> </del>	
	1				
		-	<del></del>		
	†				
	†				
Total number of other employees hald over \$50,000	1	1	<u> </u>	<del></del>	0

Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly	1-4090	<u> 954 P</u>	age 7
Paid Employees, and Contractors (continued)  3 Five highest-paid independent contractors for professional services. If none, enter "NONE."	<del></del>	<del></del>	
(a) Name and address of each person paid more than \$50,000 (b) Type of service	<u>-</u>	(c) Compen	sation
NONE			
		<del> </del>	
Total number of others receiving over \$50,000 for professional services			0
Part IX-A Summary of Direct Charitable Activities	<del></del>		
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	
There were no direct charitable activities made by the		<del>-</del>	
foundation in the year ended December 31, 2016.	$\dashv$		0.
	_		
3			
	$\Box$		
Part IX-B Summary of Program-Related Investments			
Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2.		Amount	
N/A			
All other program-related investments. See instructions.			
3			
Total. Add lines 1 through 3	<b>▶</b>	rm <b>990-PF</b>	0.
	Γ0	フラリートド	(2010)

P	art X Minimum Investment Return (All domestic foundations must complete this part. Foreign four	ndations, s	ee instructions )
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes:		
· a	Average monthly fair market value of securities	1a	0.
b	Average of monthly cash balances	1b	15,000.
C	Fair market value of all other assets	1c	
d	Total (add lines 1a, b, and c)	1d	15,000.
	Reduction claimed for blockage or other factors reported on lines 1a and		
_	1c (attach detailed explanation) 1e 0.		
2	Acquisition indebtedness applicable to line 1 assets	2	0.
3	Subtract line 2 from line 1d	3	15,000.
4	Cash deemed held for charitable activities Enter 1 1/2% of line 3 (for greater amount, see instructions)	4	225.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	14,775.
6	Minimum investment return Enter 5% of line 5 Adjusted for Short Tax Period	6	40.
P	art XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations an	d certain	
	foreign organizations check here   and do not complete this part.)		
1	Minimum investment return from Part X, line 6	1	40.
2a	Tax on investment income for 2016 from Part VI, line 5		
b	Income tax for 2016 (This does not include the tax from Part VI )		
C	Add lines 2a and 2b	2c	0.
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	40.
4	Recoveries of amounts treated as qualifying distributions	4	0.
5	Add lines 3 and 4	5	40.
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	40.
P	art 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	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:		
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	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 4940(e) reduction of tax in those years.	qualifies for	the section

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Part XIII Undistributed Income (see instructions)

		(a) Corpus	(b) Years prior to 2015	(c) 2015	(d) 2016
1 Distr	ibutable amount for 2016 from Part XI,				
line 7					40.
2 Undis	tributed income, if any, as of the end of 2016				
	amount for 2015 only			0.	
	for prior years:				<u> </u>
-	, , , , , , , , , , , , , , , , , , , ,		0.		
3 Exce	ss distributions carryover, if any, to 2016	<del>- ·</del>			
<b>a</b> From					
<b>b</b> From					
c From					
d From					
e From					
		_			
	of lines 3a through e	0.		<del></del>	
	fying distributions for 2016 from				
	XII, line 4 <sup>-</sup> ► \$0.			•	
	ed to 2015, but not more than line 2a			0 <b>.</b>	
	ed to undistributed income of prior				
	s (Election required - see instructions)	,	0.		<del></del>
	ed as distributions out of corpus				
	tion required - see instructions)	0.			
<b>d</b> Appl	ied to 2016 distributable amount				0.
e Rem	aining amount distributed out of corpus	0.			
(If an a	is distributions carryover applied to 2016 amount appears in column (d), the same amount be shown in column (a) )	0.			0.
	r the net total of each column as ated below:				
<b>a</b> Corpu	us Add lines 3f, 4c, and 4e Subtract line 5	0.			
	years' undistributed income Subtract			,, · · · · · · · · · · · · · · · · · ·	
	to from line 2b		0.		
_	the amount of prior years'			· · · · · · · · · · · · · · · · · · ·	
undi: defic the s	stributed income for which a notice of lency has been issued, or on which ection 4942(a) tax has been previously		0		
asse			0.		
	ract line 6c from line 6b. Taxable		^		
	unt - see instructions		0.		
	stributed income for 2015. Subtract line			•	
	om line 2a Taxable amount - see instr			0.	
	stributed income for 2016 Subtract				
	4d and 5 from line 1. This amount must				4.0
	stributed in 2017		<del></del>	· · · · · · · · · · · · · · · · · · ·	40.
	unts treated as distributions out of				
	us to satisfy requirements imposed by				
	on 170(b)(1)(F) or 4942(g)(3) (Election				
-	be required - see instructions)	0.			
	ss distributions carryover from 2011				
	opplied on line 5 or line 7	0.			
	ss distributions carryover to 2017	_			
	ract lines 7 and 8 from line 6a	0.			
	ysis of line 9.				
<b>a</b> Exce	ss from 2012		!		
<b>b</b> Exce	ss from 2013				
c Exce	ss from 2014				
d Exce	ss from 2015	1			

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Part XIV   Private Operating F	oundations (see in	structions and Part VI	I-A, question 9)	N/A	
1 a If the foundation has received a ruling o	r determination letter tha	t it is a private operating			-
foundation, and the ruling is effective fo	r 2016, enter the date of	the ruling	<b>&gt;</b>		
<b>b</b> Check box to indicate whether the found	dation is a private operation	ng foundation described		4942(j)(3) or 4	1942(j)(5)
2 a Enter the lesser of the adjusted net	Tax year		Prior 3 years		_[
income from Part I or the minimum	(a) 2016	<b>(b)</b> 2015	(c) 2014	(d) 2013	(e) Total
investment return from Part X for					
each year listed					
<b>b</b> 85% of line 2a					
c Qualifying distributions from Part XII,					
line 4 for each year listed					
d Amounts included in fine 2c not					
used directly for active conduct of					
exempt activities		<del> </del>			
e Qualifying distributions made directly					
for active conduct of exempt activities.					
Subtract line 2d from line 2c 3 Complete 3a, b, or c for the			<del>                                     </del>		
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			-		
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)		ļ			
(2) Support from general public and 5 or more exempt		1			
organizations as provided in					ļ
section 4942(j)(3)(B)(iii)					<del> </del>
(3) Largest amount of support from					
an exempt organization					
(4) Gross investment income	rmation (Comple	to this next eats	if the foundation	n had \$5 000 as m	lava in accepta
Part XV Supplementary Info at any time during t			ii the ioundatioi	n nad \$5,000 or m	ore in assets
		140110113.7			
1 Information Regarding Foundation wh	-	than 20/ of the total con-	tributions received by th	a foundation before the of	age of any toy
a List any managers of the foundation wh year (but only if they have contributed n			mountains received by th	e fourtoation before the ci	use of any lax
None	,,	(-)(-)			
b List any managers of the foundation wh	o own 10% or more of th	ne stock of a corporation	(or an equally large port	ion of the ownership of a	nartnership or
other entity) of which the foundation ha			(or an odeany large port	.on or the ownersing of a	January of
None_					
2 Information Regarding Contribut	on, Grant, Gift, Loan	. Scholarship, etc., P	rograms:	<del></del>	
Check here ► X if the foundation of				not accept unsolicited rec	uests for funds. If
the foundation makes gifts, grants, etc					
a The name, address, and telephone num	ber or e-mail address of	the person to whom appl	ications should be addre	essed	
<b>b</b> The form in which applications should b	e submitted and informa	ation and materials they s	hould include.		
c Any submission deadlines:	- 17-			-	
d Any restrictions or limitations on award	s, such as by geographic	al areas, charitable fields	kinds of institutions, or	other factors.	
	, -,, 6,-9,,	,	,	·- <del>-</del>	
				_	

3 Grants and Contributions Paid During the Ye	ar or Approved for Future I	Payment		
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	or substantial contributor	recipient	CONTRIDUCTION	741100111
a Paid during the year				
None				
Total	<u>.                                    </u>	<u> </u>	<b>▶</b> 3a	0.
b Approved for future payment				
None				
		}		
	-			-
Total	···		<u>▶</u> 3b	0. Form <b>990-PF</b> (2016)

#### Part XVI-A Analysis of Income-Producing Activities

Enter gross amounts unless athenues indicated	Unrelated	business income	Exclud	ded by section 512, 513, or 514	(a)
Enter gross amounts unless otherwise indicated.	(a) Business	(b) Amount	(C) Exclu- sion	(d) Amount	(e) Related or exempt function income
1 Program service revenue:	code		code	Amount	Torrettori income
a None			ļ		
b					
c					
d			ļ		
e					
f					
g Fees and contracts from government agencies			1		
2 Membership dues and assessments					
3 Interest on savings and temporary cash					
investments					
4 Dividends and interest from securities					
5 Net rental income or (loss) from real estate:					
a Debt-financed property					
b Not debt-financed property			1		
6 Net rental income or (loss) from personal				<del></del>	
property			1 1		
7 Other investment income			+		
		<del> </del>			
8 Gain or (loss) from sales of assets other					
than inventory					
9 Net income or (loss) from special events		<del></del>			
10 Gross profit or (loss) from sales of inventory			+		
11 Other revenue:					
a	I I		<del></del>		
b					
C			<b>  </b>	· · · · · · · · · · · · · · · · · · ·	
d					
e					_
12 Subtotal. Add columns (b), (d), and (e)		0.	<u> </u>	0.	
13 Total Add line 12, columns (b), (d), and (e)				13	0.
(See worksheet in line 13 instructions to verify calculations )					
Part XVI-B Relationship of Activities	to the Accor	nplishment of E	xemp	t Purposes	
Line No Explain below how each activity for which inco			A contrib	uted importantly to the accor	mplishment of
the foundation's exempt purposes (other than	by providing tund	is for such purposes).			
N/A					
				-	
	<u>-</u>				
		·			
				- · · · · · · · · · · · · · · · · · · ·	
				*	
<u> </u>					

orm 990-PF (		Family Fo					81-	<u>4690954</u>	Pa	ge 13
Part XVII			nsfers To a	and Transact	ons ar	nd Relations	hips With No	ncharitable	•	
1 Did the o	rganization directly or indir		of the followin	ng with any other or	nanization	a described in sect	on 501(a) of		Yes	No
	(other than section 501(c)						011 50 1(0) 01		163	140
	from the reporting founda				ai oi yainz	Zanons.		Į		
(1) Cash		ation to a nonchante	abie exempt on	gamzation of.				12.43		v
(2) Othe								1a(1)		_ <u>X</u> _
<b>b</b> Other tra								1a(2)		<u>X</u>
		hla avamet areaniza	tion					1, ,,,		37
	s of assets to a noncharital							1b(1)		<u>X</u>
	hases of assets from a nor	· ·	organization					1b(2)		X
	al of facilities, equipment,	or other assets						1b(3)		<u>X</u>
	nbursement arrangements							1b(4)		X
	ns or loan guarantees							1b(5)		<u>X</u>
	ormance of services or me							1b(6)		<u>X</u>
	of facilities, equipment, mai							1c		X
	wer to any of the above is								ets,	
	es given by the reporting fo			ed less than fair ma	rket value	in any transaction	or sharing arrangei	ment, show in		
	d) the value of the goods,					T				
L) Line no	(b) Amount involved	(c) Name o		e exempt organization	n	(d) Description	of transfers, transactio	ns, and sharing an	rangeme	nts
			N/A	<del></del>						
<u> </u>										
		<del></del>								
						<u> </u>				
								<u> </u>		
	··-									
						ļ				
	indation directly or indirect				t organiza	ations described				_
ın sectior	1 501(c) of the Code (other	than section 501(c	)(3)) or in sect	ion 527?				Yes	X	] No
b If "Yes," c	omplete the following sche									
	(a) Name of org	anization		(b) Type of organ	zation		(c) Description of re	lationship		
	<u> N/A</u>									
	<del></del>							•		
							· · · · · · · · · · · · · · · · · ·			
								•		
المحمأ	r penalties of perjury, I declare to belief, it is true, correct, and com	that I have examined the	is return, includin	ng accompanying sched	lules and st	tatements, and to the	best of my knowledge	May the IRS		
oign   👢	chor, it is true, borroot, and corr	-	repair (only tha	in taxpayer) is based of	. –	<b>\</b>	,	return with th shown below	e prepare (see inst	er tr)?
Here 上					<u> </u>	Presid	lent	_ X Yes		No
Sig	hature of officer or trustee		,	Date		Title	<u></u>	L		
	Print/Type preparer's na	ime	Preparer's si	ignature		Date	Check if	PTIN		
			01	10/0	. ,	,,1 1	self- employed			
Paid	Kenneth E.		Hara	at 2. s	of !	4/22/17		P00182		
Preparer	Firm's name ▶ Jan	z & Knigh	ıť, P.L	.C., CPA	3		Firm's EIN ► 3	8-14586	67	
Jse Only										
	Firm's address ► 30	0 E Long	Lake R	d, Ste 36	0					
	Bl	oomfield	Hills,	MI 48304	1-237	77	Phone no. (2	48)646-	966	6

## Schedule B

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

Department of the Treasury Internal Revenue Service

Name of the organization

### **Schedule of Contributors**

➤ Attach to Form 990, Form 990-EZ, or Form 990-PF.

Information about Schedule B (Form 990, 990-EZ, or 990-PF) and its instructions is at www.irs.gov/form990.

OMB No 1545-0047

2016

Employer identification number

Page Family Foundation 81-4690954 Organization type (check one) Filers of: Section: \_\_\_ 501(c)( Form 990 or 990-EZ ) (enter number) organization 4947(a)(1) nonexempt charitable trust not treated as a private foundation 527 political organization Form 990-PF 501(c)(3) exempt private foundation 4947(a)(1) nonexempt charitable trust treated as a private foundation 501(c)(3) taxable private foundation Check if your organization is covered by the General Rule or a Special Rule. Note: Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule See instructions General Rule X For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions **Special Rules** For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of (1) \$5,000 or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1 Complete Parts I and II For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I, II, and III. For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions exclusively for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., purpose Don't 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 isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990, 990-EZ, or 990-PF), but it must answer "No" on Part IV, line 2, of its Form 990, or check the box on line H of its Form 990-EZ or on its Form 990-PF, Part I, line 2, to certify that it doesn't meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF)

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990, 990-EZ, or 990-PF. Schedule B (Form 990, 990-EZ, or 990-PF) (2016)

Name of organization

Employer identification number

# Page Family Foundation

81-4690954

Part I	Contributors (See instructions) Use duplicate copies of Part I if addit	cional space is needed	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	Arlene and Forrest Winston Page Foundation, Inc.  30450 Oakview Way  Bingham Farms, MI 48025	\$15,000.	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
			Person Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
			Person Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part It for noncash contributions)

Name of organization

Employer identification number

# Page Family Foundation

81-4690954

Part II	Noncash Property (See instructions) Use duplicate copies of F	Part II if additional space is needed		
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received	
		\$		
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received	
		\$		
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received	
		\$		
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received	
		     \$		
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received	
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received	
		\$		

Schedule B (Form 990, 990 EZ, or 990 PF) (201	Schedule B	(Form	990,	990-EZ,	or	990-PF)	(20	16
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Page 4

iailie oi oiga	meaton		Employer roomanoation number						
Page Fa	amily Foundation	46 1	81-4690954						
Part III	the year from any one contributor. Complete colu-	mns (a) through (e) and the following	ection 501(c)(7), (8), or (10) that total more than \$1,000 for line entry. For organizations						
	completing Part III, enter the total of exclusively religious, ch Use duplicate copies of Part III if additional s	naritable, etc., contributions of \$1,000 or less	for the year (Enterthis info once) - \$						
(a) No.	Ose duplicate copies of Part III II additional s	pace is needed	7						
from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held						
7 41 (1)		<del></del>							
} -									
<u></u>									
	(e) Transfer of gift								
į	Transfersels name address and 7ID . 4								
<u> </u>	Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee								
-									
(a) No. from	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held						
Part I									
-			-						
<del></del>   -									
\ -		<del></del>							
		(e) Transfer of gift							
	· · · · · · · ·								
-	Transferee's name, address, and	ZIP + 4	Relationship of transferor to transferee						
-									
-									
-									
(a) No. from	(h) Durana of sift	(a) I loo of suft	f gift (d) Description of how gift is held						
Part I	(b) Purpose of gift	(c) Use of gift	(a) Description of now grit is field						
	······		-						
			-						
-			_						
	(e) Transfer of gift								
ļ	(o) Herrore et gill								
	Transferee's name, address, and	ZIP + 4	Relationship of transferor to transferee						
-	<del></del>								
(a) No.									
from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held						
			_						
1.			-						
-	(e) Transfer of gift								
	(e) Transfer of gift								
1	Transferee's name, address, and	ZIP + 4	Relationship of transferor to transferee						
ł									

Form 990-PF	Other E	xpenses	Statement 1		
Description	-	(b) Net Invest- ment Income	•	(d) Charitable Purposes	
Check order	28.	0.		0.	
To Form 990-PF, Pg 1, ln 23	28.	0.		0.	
	f Substantia Part VII-A,	l Contributors Line 10	s S	tatement 2	
Name of Contributor	Addr	ess			
Arlene and Forrest Winston P. Foundation, Inc.	age 3045	O Oakview Way			
	Bina	ham Farms, MI	48025		