### .... 990-PF

Department of the Treasury

Internal Revenue Service

# القائمة المالية

#### Return of Private Foundation

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

2017

Do not enter social security numbers on this form as it may be made public. Go to www.irs.gov/Form990PF for instructions and the latest information.

Open to Public Inspection

OMB No 1545-0052

For calendar year 2017 or tax year beginning and ending A Employer identification number Name of foundation DWIGHT & LUCILE ALDRICH FOUNDATION Room/suite Number and street (or P O box number if mail is not delivered to street address) 20-6406772 PO BOX 766 B Telephone number (see instructions) City or town, state or province, country, and ZIP or foreign postal code JACKSON 49204-0766 **|**517-787-9481 Foreign country name Foreign province/state/county Foreign postal code C If exemption application is pending, check here G Check all that apply: Initial return D 1. Foreign organizations, check here Initial return of a former public charity ☐ Final return Amended return 2. Foreign organizations meeting the 85% test, ☐ Address change ☐ Name change check here and attach computation E If private foundation status was terminated under section 507(b)(1)(A), check here Section 4947(a)(1) nonexempt charitable trust Other taxable private foundation J Accounting method. X Cash Accrual Fair market value of all assets at If the foundation is in a 60-month termination end of year (from Part II, col. (c), Other (specify) under section 507(b)(1)(B), check here line 16) ▶ \$ 84,774. (Part I, column (d) must be on cash basis ) (d) Disbursements Part I Analysis of Revenue and Expenses (The total of (a) Revenue and (b) Net investment (c) Adjusted net for charitable amounts in columns (b), (c), and (d) may not necessarily expenses per ıncome income purposes books equal the amounts in column (a) (see instructions)) (cash basis only) 8,000. Contributions, gifts, grants, etc., received (attach schedule) 2 Check ► if the foundation is **not** required to attach Sch. B. 3 Interest on savings and temporary cash investments 3,367. 4 Dividends and interest from securities . . Gross rents . . . . 5a Net rental income or (loss) b Net gain or (loss) from sale of assets not on line 10 6a Gross sales price for all assets on line 6a b Capital gain net income (from Part IV, line 2) . . 7 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) 11 Other income (attach schedule) . . . . 12 11,367. Total. Add lines 1 through 11 13 Compensation of officers, directors, trustees, etc. Operating and Administrative Expenses 14 Other employee salaries and wages . . . 15 Pension plans, employee benefits 3,223. 1.612. 1.611 16a Legal fees (attach schedule) . . b Accounting fees (attach schedule) 300. <u>300.</u> Other professional fees (attach schedule) . 17 1. 18 Taxes (attach schedule) (see instructions) 19 Depreciation (attach schedule) and depletion . . 20 Occupancy . . . . 21 Travel, conferences, and meetings . . . 22 Printing and publications . 23 Other expenses (attach schedule) . . . 24 Total operating and administrative expenses. 1,913. <u>1</u>,611 3,524. Add lines 13 through 23 . . . 25 16,000. 16,000. Contributions, gifts, grants paid . 1,913. 17,611. 26 Total expenses and disbursements. Add lines 24 and 25 19,524. 27 Subtract line 26 from line 12: (8,157.)Excess of revenue over expenses and disbursements . Net investment income (if negative, enter -0-) . Adjusted net income (if negative, enter -0-)

For Paperwork Reduction Act Notice, see instructions.

Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only (See instructions) End of year Beginning of year Part II (a) Book Value (b) Book Value (c) Fair Market Value 713.3,365. 3,365. 2 Savings and temporary cash investments . . . . . 3 Accounts receivable Less: allowance for doubtful accounts Pledges receivable 
..... Less allowance for doubtful accounts ▶ 5 Receivables due from officers, directors, trustees, and other disqualified persons (attach schedule) (see instructions) . . . Other notes and loans receivable (attach schedule) Less: allowance for doubtful accounts Inventories for sale or use . . . . ssets Prepaid expenses and deferred charges 10a Investments—U.S. and state government obligations (attach schedule) 27,927. 27,927. 56,110. Investments—corporate stock (attach schedule) . . . 10,000.25,029. Investments—corporate bonds (attach schedule) . 11 Investments—land, buildings, and equipment basis Less. accumulated depreciation (attach schedule) ▶ 12 Investments—mortgage loans . . . . 25,942. 13 Investments—other (attach schedule) Land, buildings, and equipment basis ▶ 14 Less. accumulated depreciation (attach schedule) Other assets (describe 

) 15 16 Total assets (to be completed by all filers—see the 64,582. 56,321. 84,774. instructions. Also, see page 1, item I) . . . . . . 17 Accounts payable and accrued expenses . . . . . . . . 18 Liabilities 19 Deferred revenue . 20 Loans from officers, directors, trustees, and other disqualified persons 21 Mortgages and other notes payable (attach schedule) . 22 Other liabilities (describe 
) Total liabilities (add lines 17 through 22) \_\_\_\_\_. 23 Foundations that follow SFAS 117, check here . . . ▶ □ Net Assets or Fund Balances and complete lines 24 through 26, and lines 30 and 31. 24 25 Temporarily restricted . . . . . 26 Permanently restricted . Foundations that do not follow SFAS 117, check here ▶ 🔯 and complete lines 27 through 31. 27 64,582. 56,321. Capital stock, trust principal, or current funds 28 Paid-in or capital surplus, or land, bldg., and equipment fund Retained earnings, accumulated income, endowment, or other funds 29 30 64,582. 56,321. Total net assets or fund balances (see instructions) . . Total liabilities and net assets/fund balances (see 64,582. 56,321. instructions). Part III **Analysis of Changes in Net Assets or Fund Balances** 1 Total net assets or fund balances at beginning of year—Part II, column (a), line 30 (must agree with end-of-year figure reported on prior year's return) 64,582. 1 2 Enter amount from Part I, line 27a . . . . 2 3 Other increases not included in line 2 (itemize) ▶ 3 56,425. 4 

5 Decreases not included in line 2 (itemize) ► LOSS
 6 Total net assets or fund balances at end of year (line 4 minus line 5)—Part II, column (b), line 30

5

6

 $\overline{104}$ .

Part	V Capital Gains and	Losses for Tax on Investm	ent Income	<del></del>						
	a) List and describe the kin	d(s) of property sold (for example, real esta ee, or common stock, 200 shs MLC Co )		(b) How acquired P—Purchase D—Donation	(c) Date acquired (mo , day, yr )	(d) Date sold (mo , day, yr )				
1a	WELLS FARGO ADV	ISORS - BOX A	VA/RI/OUS	07/06/2017						
b	WELLS FARGO ADV	SORS - BOX D P			VA/RI/OUS	07/06/2017_				
c	WELLS FARGO ADV	ISORS - BOX E		P	<u>08/24/2009</u>	08/15/2017				
d	<u></u>									
e				<u> </u>		<u></u>				
	(e) Gross sales price	(f) Deprecation allowed (g) Cost or other basis plus expense of sale				(or allowable) plus expense of sale				n or (loss) (f) minus (g))
a	38. 3,152. 3,254.									
b						(102.)				
c	10,000.	10,000.								
<u>d</u>										
e										
	Complete only for assets sho	wing gain in column (h) and owned	by the foundation	on 12/31/69	(I) Gains (Co	l (h) gain minus				
	(i) F M V as of 12/31/69	(j) Adjusted basis as of 12/31/69	, ,	ss of col (i) (j), if any	col (k), but no	ot less than -0-) or from col (h))				
<u>a</u> b					<u> </u>	(102.)				
			<del></del>	<del></del>						
d										
e					-					
2	Capital gain net income or	(not canital loce) {	also enter in Pa enter -0- in Pa	•	2	(102.)				
3	If gain, also enter in Part I,	or (loss) as defined in sections 1 line 8, column (c). See instruction			3					
Part		er Section 4940(e) for Redu		let Investment	Income					
Was		e this part blank section 4942 tax on the distributa alify under section 4940(e). Do r			ase period?	☐ Yes ☒ No				
1		ant in each column for each year			king any entries					
<u> </u>	(a)		, see the mond		any charcs	(d)				
0-	Base period years	(b) Adjusted qualifying distributions	Net value	(c) of nonchantable-use a		stribution ratio				
<u>Ca</u>	lendar year (or tax year beginning in) 2016	2,642		82,53	[ (CO1 (D)	0.032011				
	2015	2,38		82,16	1	0.029004				
	2013	2,91		82,16		0.035479				
	2013	1,80		81,89		0.022066				
	2012	1,000		79,38		0.012598				
	Total of line 1, column (d)		·	7,57,50	. 2	0.131158				
3	• •	or the 5-year base period—divid	e the total on lu	ne 2 by 5.0. or hy		<del></del>				
•		undation has been in existence i		•	3	0.026232				
4	Enter the net value of nonc	charitable-use assets for 2017 fro	om Part X, line	5	. 4	86,090.				
5	Multiply line 4 by line 3 .				5	2,258.				
6	Enter 1% of net investmen	t income (1% of Part I, line 27b)			. 6					
7	Add lines 5 and 6				7	2,258.				
8	Enter qualifying distribution If line 8 is equal to or great Part VI instructions	ns from Part XII, line 4 er than line 7, check the box in F		and complete th		17,611.				

Part	Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948—see instruction	s)		
1a	Exempt operating foundations described in section 4940(d)(2), check here   and enter "N/A" on line 1			
	Date of ruling or determination letter (attach copy of letter if necessary—see instructions)			
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check			
	here ▶ 🖸 and enter 1% of Part I, line 27b		- 1	
С	All other domestic foundations enter 2% of line 27b. Exempt foreign organizations, enter 4% of Part I, line 12, col. (b)			
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only, others, enter -0-)	0		
3	Add lines 1 and 2			
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only, others, enter -0-)	0		
5	Tax based on investment income. Subtract line 4 from line 3 If zero or less, enter -0	0		
6	Credits/Payments:			
а	2017 estimated tax payments and 2016 overpayment credited to 2017 6a 6		ļ	
b	Exempt foreign organizations—tax withheld at source		- 1	ļ
С	Tax paid with application for extension of time to file (Form 8868) 6c 6c		Į	,
d	Backup withholding erroneously withheld 6d		ĺ	
7	Total credits and payments. Add lines 6a through 6d			
8	Enter any penalty for underpayment of estimated tax. Check here. If Form 2220 is attached.			
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed			
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid   10			
11	Enter the amount of line 10 to be. Credited to 2018 estimated tax ► Refunded ► 11			
Part	VII-A Statements Regarding Activities			
1a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it		Yes	
	participate or intervene in any political campaign?	1a		Χ
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes? See the			
	instructions for the definition	1b		Χ
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials			
	published or distributed by the foundation in connection with the activities			L
С	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 year:			
	(1) On the foundation. ▶\$ (2) On foundation managers. ▶\$			į
е	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed	1 1		l
	on foundation managers ►\$			<b></b>
2	Has the foundation engaged in any activities that have not previously been reported to the IRS? If "Yes," attach a detailed description of the activities	2		X
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles			}
•	of incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes	3		X
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	4a		Х
b	If "Yes," has it filed a tax return on Form 990-T for this year?	4b		
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?	5		X
	If "Yes," attach the statement required by General Instruction T			
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either:	) !		
	By language in the governing instrument, or	1	Ì .	i
	By state legislation that effectively amends the governing instrument so that no mandatory directions that	1	]	
	conflict with the state 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," complete Part II, col (c), and Part XV	7	Х	
8a	Enter the states to which the foundation reports or with which it is registered. See instructions.  MI			
b	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General		1	l
	(or designate) of each state as required by General Instruction G? If "No," attach explanation	8b	Х	<u> </u>
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3)	100	<del> </del>	<del>                                     </del>
•	or 4942(j)(5) for calendar year 2017 or the tax year beginning in 2017? See the instructions for Part XIV If		<u> </u>	<b>†</b>
	"Yes," complete Part XIV	9	ł	X
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their	<b> </b>	<del>                                     </del>	T-
	names and addresses	10	l x	1

Part	VII-A Statements Regarding Activities (continued)			
11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the		Yes	No
	the meaning of section 512(b)(13)? If "Yes," attach schedule See instructions	11		<u>X</u>
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified		l	
	person had advisory privileges? If "Yes," attach statement. See instructions	12		<u>X</u>
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13		X
	Website address		=-:=-	
14	The books are in care of ▶ PHILIP J CURTIS Telephone no. ▶ 517-7	<u>87-</u>	948	1
	Located at ▶ 120 W MICHIGAN AVE JACKSON MI ZIP+4 ▶ 49201		<b></b> -	
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041—check here		. 1	<b>▶</b> □
	and enter the amount of tax-exempt interest received or accrued during the year			
16	At any time during calendar year 2017, did the foundation have an interest in or a signature or other authority		Yes	No
	over a bank, securities, or other financial account in a foreign country?	16		X
	See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes," enter the		<b>1</b>	
	name of the foreign country			
Part	VII-B Statements Regarding Activities for Which Form 4720 May Be Required			
	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.		Yes	No
1a	During the year, did the foundation (either directly or indirectly)			
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person?			1
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a			
	disqualified person?			
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?			i ļ
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?			
	(5) Transfer any income or assets to a disqualified person (or make any of either available for the benefit or use of a disqualified person)?			
	(6) Agree to pay money or property to a government official? (Exception. Check "No" if the			
	foundation agreed to make a grant to or to employ the official for a period after	[		[ [
	termination of government service, if terminating within 90 days.)			
b	If any answer is "Yes" to 1a(1)–(6), did any of the acts fail to qualify under the exceptions described in			
	Regulations section 53.4941(d)-3 or in a current notice regarding disaster assistance? See instructions .	1b		
	Organizations relying on a current notice regarding disaster assistance, check here	1		
C	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that	ļ		لــيــا
	were not corrected before the first day of the tax year beginning in 2017?	1c		X
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation defined in section 4942(j)(3) or 4942(j)(5))			
а	At the end of tax year 2017, did the foundation have any undistributed income (lines 6d and	1		
	6e, Part XIII) for tax year(s) beginning before 2017?	}		}
	If "Yes," list the years  20, , 20,			
b	Are there any years listed in 2a for which the foundation is <b>not</b> applying the provisions of section 4942(a)(2)		1	
	(relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to			
	all years listed, answer "No" and attach statement—see instructions)	_2b	<u> </u>	ļ
С	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here	1		
	<b>▶</b> 20, , 20, , 20, , 20,		1	ł
3a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise			1
_	at any time during the year?			
b	If "Yes," did it have excess business holdings in 2017 as a result of (1) any purchase by the foundation or		1	İ
	disqualified persons after May 26, 1969; (2) the lapse of the 5-year period (or longer period approved by the		1	
	Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest; or (3) the lapse	ł		}
	of the 10-, 15-, or 20-year first phase holding period? (Use Schedule C, Form 4720, to determine if the		<b></b>	<del> </del>
4-	foundation had excess business holdings in 2017)	3b	<del> </del> -	X
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	<u>4a</u>	<del> </del> -	+^-
b	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2017?	4b	<del> </del>	Х
		,	1	1 **

<ul> <li>5a During the year, did the foundation pay or incur any (1) Carry on propaganda, or otherwise attempt to ir</li> <li>(2) Influence the outcome of any specific public ele</li> </ul>		ZU Way	Be Req	uirea (	Julilline	<u>a)                                    </u>	
		(section	4945(e))′		Yes	No	
directly or indirectly, any voter registration drive			to carry o	n, 	Yes	∏ No	es Au
(3) Provide a grant to an individual for travel, study	, or other similar pu	ırposes?			Yes	No	
(4) Provide a grant to an organization other than a section 4945(d)(4)(A)? See instructions.	charıtable, etc., org		n describe	ed in 	☐ Yes	⊠ No	
(5) Provide for any purpose other than religious, ch purposes, or for the prevention of cruelty to chil			or educatı	onal	Yes	<b>⊠</b> No	
b If any answer is "Yes" to 5a(1)-(5), did any of the t	ransactions fail to o	qualify ur	nder the e	ceptio	ns descri	oed in	
Regulations section 53.4945 or in a current notice	regarding disaster	assistan	ce? See ii	nstructio	ons .		5b
Organizations relying on a current notice regarding						<b>▶</b> ∐	
c If the answer is "Yes" to question 5a(4), does the forbecause it maintained expenditure responsibility for	or the grant?		from the t		☐ Yes	☐ No	
If "Yes," attach the statement required by Regulation  6a Did the foundation, during the year, receive any fur on a personal benefit contract?			pay prem	iums	□Yes	⊠ No	
<b>b</b> Did the foundation, during the year, pay premiums, if "Yes" to 6b, file Form 8870.	, directly or indirect	ly, on a p	personal b	enefit o	_		6b X
7a At any time during the tax year, was the foundation a par	ty to a prohibited tax	shelter tra	ansaction?		Yes	<b>⊠</b> No	
b If "Yes," did the foundation receive any proceeds o							7b
Part VIII Information About Officers, Director and Contractors	rs, frustees, Fo	undatio	n Manag	jers, H	ignly Pa	ald Em	ipioyees,
List all officers, directors, trustees, and foundar	tion managers an	d their c	ompensa	tion. S	ee instru	ctions	
(a) Name and address	(b) Title, and average hours per week devoted to position	(c) Com (If no	pensation ot paid, er -0-)	(d) emplo	Contribution byee benefit erred compe	s to plans	(e) Expense account, other allowances
PO BOX 766	TRUSTEE 1		0				
PHILIP J CURTIS PO BOX 766	1		0				
		Ì					
2 Compensation of five highest-paid employees (	other than those	included	d on line	l—see	instructi	ons). I	f none, enter
(a) Name and address of each employee paid more than \$50,000	(b) Title, and a hours per videvoted to p	veek	(c) Compe	nsation	(d) Contrib employee plans and compen	benefit deferred	(e) Expense account, other allowances
NONE					j		
NONE							
NONE							
NONE							
NONE							

Part VIII	Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Emand Contractors (continued)	ployees,
3 Five hi	ghest-paid independent contractors for professional services. See instructions. If none, enter "N	ONE."
	(a) Name and address of each person paid more than \$50,000 (b) Type of service	(c) Compensation
NONE		
<del></del>	<del></del>	
Total number	of others receiving over \$50,000 for professional services	
Part IX-A	Summary of Direct Charitable Activities	
List the foundat	ion's four largest direct chantable activities during the tax year. Include relevant statistical information such as the number of	
	nd other beneficiaries served, conferences convened, research papers produced, etc	Expenses
1		
	<del></del>	
2		
3		
4		
Part IX-B	Summary of Program-Related Investments (see instructions)	L
	o largest program-related investments made by the foundation during the tax year on lines 1 and 2	Amount
1 N/A		
<u> </u>		
2		
All other progra	m-related investments. See instructions	<u> </u>
3		
		1
Total. Add lin	es 1 through 3	
		Form <b>990-PF</b> (201

Part	Minimum Investment Return (All domestic foundations must complete this part. Foreign see instructions )	n toun	dations,
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc.,		<del></del>
	purposes		
а	Average monthly fair market value of securities	1a	83,081.
b	Average of monthly cash balances	1b	83,081. 4,320.
C	Fair market value of all other assets (see instructions)	1c	
d	Total (add lines 1a, b, and c)	1d	87,401.
е	Reduction claimed for blockage or other factors reported on lines 1a and		
	1c (attach detailed explanation)		
2	Acquisition indebtedness applicable to line 1 assets	2	
3	Subtract line 2 from line 1d	3	87,401.
4	Cash deemed held for charitable activities. Enter 1½ % of line 3 (for greater amount, see		
	instructions)	4	1,311.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3 Enter here and on Part V, line 4	5	86,090.
6	Minimum investment return. Enter 5% of line 5	6	4,305.
Part 2	Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundation and certain foreign organizations, check here and do not complete this part.)	ons	
1	Minimum investment return from Part X, line 6	11	4,305.
2a	Tax on investment income for 2017 from Part VI, line 5		
b	Income tax for 2017 (This does not include the tax from Part VI.)		
С	Add lines 2a and 2b	2c	
3	Distributable amount before adjustments Subtract line 2c from line 1	3	4,305.
4	Recoveries of amounts treated as qualifying distributions	4	
5	Add lines 3 and 4	5	4,305.
6	Deduction from distributable amount (see instructions)	6	
7	Distributable amount as adjusted. Subtract line 6 from line 5 Enter here and on Part XIII,		
	line 1	7	4,305.
Part	XII Qualifying Distributions (see instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes		
а	Expenses, contributions, gifts, etc.—total from Part I, column (d), line 26	1a	17,611.
b	Program-related investments—total from Part IX-B	1b	
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes	2	
3	Amounts set aside for specific charitable projects that satisfy the		
a	Suitability test (prior IRS approval required)	3a	
b	Cash distribution test (attach the required schedule)	3b	
4	Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4	4	17,611.
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income.		
	Enter 1% of Part I, line 27b. See instructions	5	
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	17,611.
	Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating we qualifies for the section 4940(e) reduction of tax in those years		

Part	VIII Undistributed Income (see instruct	ons)			
1	Distributable amount for 2017 from Part XI,	(a) Corpus	(b) Years prior to 2016	( <b>c</b> ) 2016	(d) 2017
	line 7			<del></del>	4,305.
2	Undistributed income, if any, as of the end of 2017				
а	Enter amount for 2016 only				
b	Total for prior years 20 , 20 , 20				
3	Excess distributions carryover, if any, to 2017				
а	From 2012				
b	From 2013				
Č	From 2014				
A	From 2015				
u	From 2016				
e					
Ţ	Total of lines 3a through e		· · · · · · · · · · · · · · · · · · ·		
4	Qualifying distributions for 2017 from Part XII,				
	line 4 ▶ \$ 17,611.	ب			
а	Applied to 2016, but not more than line 2a	<u> </u>			·
b	Applied to undistributed income of prior years			į.	
	(Election required—see instructions)				
С	Treated as distributions out of corpus (Election				
	required—see instructions)				
ď	Applied to 2017 distributable amount			,	4,305.
е	Remaining amount distributed out of corpus	13,306			
5	Excess distributions carryover applied to 2017				
_	(If an amount appears in column (d), the same				
	amount must be shown in column (a).)			ļ;	
6	Enter the net total of each column as	i		!	
•	indicated below:		}		!
а	Corpus. Add lines 3f, 4c, and 4e Subtract line	13,306		:	
	Prior years' undistributed income Subtract	15,500	<u>.                                    </u>		<del>)</del>
D	•				!
_	line 4b from line 2b				
С	Enter the amount of prior years' undistributed				
	income for which a notice of deficiency has				
	been issued, or on which the section 4942(a)		4		
	tax has been previously assessed .				
d				:	
	amount—see instructions				'
е	Undistributed income for 2016. Subtract line	:			
	4a from line 2a Taxable amount—see				
	instructions				
f	Undistributed income for 2017 Subtract lines			<u> </u>	
	4d and 5 from line 1. This amount must be		<u> </u>		
	distributed in 2018				
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 2012 not			<del>\$5.                                    </del>	
_	applied on line 5 or line 7 (see instructions)				;! ·
9	Excess distributions carryover to 2018.			<del>(************************************</del>	·
•	Subtract lines 7 and 8 from line 6a	13,306			
10	Analysis of line 9:	13,300	·	<del>}</del>	
а	Excess from 2013				
d L	Excess from 2013				:
D				i.	
C	Excess from 2015 .			i I	1
a	Excess from 2016				
<u>е</u>	Excess from 2017 . 13, 30	0.			Form <b>990-PF</b> (2017)
					rom <b>330"FF</b> (2017)

Form	990-PF	(2017)
rom.	33U-PF	(2017)

	MIV Drivet Overeting 5				20 0	400772 Page 10
Part						
1a	If the foundation has received a ruling of		•	ate operating		/
L	foundation, and the ruling is effective fo			▶ [		(2) 05 [7] 4042(1/5)
	Check box to indicate whether the foundation		ting foundation descr		4942(j)(	(3) or 4942(j)(5)
<b>2</b> a	Enter the lesser of the adjusted net income from Part I or the minimum	Tax year		Prior 3 years		(e) Total
	investment return from Part X for	(a) 2017	(b) 2016	(c) 2015	(d) 2014	<u> </u>
	each year listed					
b	85% of line 2a					
С	Qualifying distributions from Part XII,					
	line 4 for each year listed				/	
d	Amounts included in line 2c not used directly					}
	for active conduct of exempt activities .				<u>/</u>	
е	Qualifying distributions made directly					
	for active conduct of exempt activities.		İ			
	Subtract line 2d from line 2c					
3	Complete 3a, b, or c for the			/		
	alternative test relied upon					]
а	"Assets" alternative test—enter			/		
	(1) Value of all assets				<u> </u>	
	(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 .					
С	"Support" alternative test—enter:		/			
·	(1) Total support other than gross					
	investment income (interest,					
	dividends, rents, payments on			1		
	securities loans (section 512(a)(5)), or royalties)					
	(2) Support from general public	1				
	and 5 or more exempt					Ì
	organizations as provided in section 4942(j)(3)(B)(iii)					
	(3) Largest amount of support from	/	· · · · · · · · · · · · · · · · · · ·			
	an exempt organization	-				
	(4) Gross investment income .					
Part		(Complete thi	s part only if the	foundation ha	d \$5,000 or mo	re in assets at
	any time during the year—		•			
1	Information Regarding Foundation N					
а	List any managers of the foundation wh		ed more than 2% o	f the total contribut	tions received by	the foundation
	before the close of any tax year (but or	ly if they have co	ntributed more than	n \$5,000). (See se	ction 507(d)(2).)	
b	List any managers of the foundation wh	no own 10% or mo	ore of the stock of	a corporation (or a	n equally large po	ortion of the
	ownership of a partnership or other ent			•		
				-		
2	Information Regarding Contribution	Grant, Gift, Loa	n, Scholarship, et	tc., Programs:		
	Check here ▶ ☑ if the foundation or		•	•	izations and does	s not accept
	unsolicited requests for funds. If the fou					
	conditions, complete items 2a, b, c, and	d d. See instructio	ons.			
а	The name, address, and telephone nur	mber or email add	ress of the person	to whom application	ons should be add	dressed:
	•		•	• •		
b	The form in which applications should to	e submitted and	information and ma	aterials they should	d include	
	• •			•		
						_
С	Any submission deadlines.				-	
d	Any restrictions or limitations on award	s, such as by geo	graphical areas, ch	naritable fields, kin	ds of institutions,	or other
	factors:	, 5	• ,		,	

Form 990-PF, (2017)

Part XV Supplementary Information (continued)

	3 Grants and Contributions Paid During the Year or Approved for Future Payment									
Recipient	If recipient is an individual, show any relationship to any foundation manager	Foundation status of	Purpose of grant or contribution	Amount						
Name and address (home or business)	or substantial contributor	recipient								
a Paid duning the year  JACKSON SCHOOL OF ARTS 634 N MECHANIC ST 49202 MI JACKSON	N/A	PUBLIC	CAPITAL CAMP	12,000.						
AWARE SHELTER 706 W MICHIGAN AVE 49201 MI JACKSON	N/A	PUBLIC	OPERATIONS	500.						
RISE ABOVE 936 FLEMING AVE 49202 MI JACKSON	N/A	PUBLIC	OPERATIONS	1,000.						
CONCORD TWP CEMETERY 112 HANOVER STREET 49237 MI CONCORD	N/A	PUBLIC	OPERATIONS	1,500.						
CONCORD YOUTH ORG	N/A	PUBLIC	OPERATIONS	1,000.						
49237 MI CONCORD										
Total	<u> </u>	<del>, ' - '</del>	<u>, </u>	3a 16,000.						
b Approved for future payment										

	Analysis of Income-Producing Ac	tivities				
Ente	er gross amounts unless otherwise indicated.	Unrelated bu	siness income	Excluded by section	on 512, 513, or 514	(e)
		(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	Related or exempt function income (See instructions)
1	Program service revenue:					(See instructions)
	a	<u> </u>				
	b	<u> </u>				<del> </del>
	<u> </u>	<del></del>	<del></del>	<del> </del>	<del></del>	<del></del>
	d	ļ		l . — —		
	e					
				<del> </del>	<del></del>	
2	g Fees and contracts from government agencies				<del></del>	
2 3	Membership dues and assessments	-	<del></del>		<del></del>	<del></del>
4	Dividends and interest from securities	<del></del>	· <del>-</del>	14	3,367.	<u> </u>
5	Net rental income or (loss) from real estate:			+ 3	3,307.	
5	a Debt-financed property		<u> </u>			
	b Not debt-financed property			<del> </del>		
6	Net rental income or (loss) from personal property	<del>                                     </del>			<del></del>	<del>                                     </del>
7	Other investment income			<del> </del>		<del></del>
8	Gain or (loss) from sales of assets other than inventory		<del></del>			<del>                                     </del>
9	Net income or (loss) from special events	<del> </del>			·	
10	Gross profit or (loss) from sales of inventory .	-	<del></del>			
11	Other revenue. a					
	b					
	С					
	d					
	e	,				
42	Subtotal Add columns (b), (d), and (e)				3,367.	
14						
13	Total. Add line 12, columns (b), (d), and (e)			•	13	3 <b>,</b> 367.
<b>13</b> (See	<b>Total.</b> Add line 12, columns (b), (d), and (e) eworksheet in line 13 instructions to verify calculation	s)			13	3,367.
13 (See Pa	Total. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculation XVI-B Relationship of Activities to the A	s) ccomplishme	ent of Exempt	Purposes		
13 (See Pa Lin	<b>Total.</b> Add line 12, columns (b), (d), and (e) eworksheet in line 13 instructions to verify calculation	s) ccomplishme	ent of Exempt	t Purposes	importantly to the	)
13 (See Pa Lin	Total. Add line 12, columns (b), (d), and (e) e worksheet in line 13 instructions to verify calculation t XVI-B Relationship of Activities to the A e No. Explain below how each activity for which incom	s) ccomplishme	ent of Exempt	t Purposes	importantly to the	)
13 (See Pa Lin	Total. Add line 12, columns (b), (d), and (e) e worksheet in line 13 instructions to verify calculation t XVI-B Relationship of Activities to the A e No. Explain below how each activity for which incom	s) ccomplishme	ent of Exempt	t Purposes	importantly to the	)
13 (See Pa Lin	Total. Add line 12, columns (b), (d), and (e) e worksheet in line 13 instructions to verify calculation t XVI-B Relationship of Activities to the A e No. Explain below how each activity for which incom	s) ccomplishme	ent of Exempt	t Purposes	importantly to the	)
13 (See Pa Lin	Total. Add line 12, columns (b), (d), and (e) e worksheet in line 13 instructions to verify calculation t XVI-B Relationship of Activities to the A e No. Explain below how each activity for which incom	s) ccomplishme	ent of Exempt	t Purposes	importantly to the	)
13 (See Pa Lin	Total. Add line 12, columns (b), (d), and (e) e worksheet in line 13 instructions to verify calculation t XVI-B Relationship of Activities to the A e No. Explain below how each activity for which incom	s) ccomplishme	ent of Exempt	t Purposes	importantly to the	)
13 (See Pa Lin	Total. Add line 12, columns (b), (d), and (e) e worksheet in line 13 instructions to verify calculation t XVI-B Relationship of Activities to the A e No. Explain below how each activity for which incom	s) ccomplishme	ent of Exempt	t Purposes	importantly to the	)
13 (See Pa Lin	Total. Add line 12, columns (b), (d), and (e) e worksheet in line 13 instructions to verify calculation t XVI-B Relationship of Activities to the A e No. Explain below how each activity for which incom	s) ccomplishme	ent of Exempt	t Purposes	importantly to the	)
13 (See Pa Lin	Total. Add line 12, columns (b), (d), and (e) e worksheet in line 13 instructions to verify calculation t XVI-B Relationship of Activities to the A e No. Explain below how each activity for which incom	s) ccomplishme	ent of Exempt	t Purposes	importantly to the	)
13 (See Pa Lin	Total. Add line 12, columns (b), (d), and (e) e worksheet in line 13 instructions to verify calculation t XVI-B Relationship of Activities to the A e No. Explain below how each activity for which incom	s) ccomplishme	ent of Exempt	t Purposes	importantly to the	)
13 (See Pa Lin	Total. Add line 12, columns (b), (d), and (e) e worksheet in line 13 instructions to verify calculation t XVI-B Relationship of Activities to the A e No. Explain below how each activity for which incom	s) ccomplishme	ent of Exempt	t Purposes	importantly to the	)
13 (See Pa Lin	Total. Add line 12, columns (b), (d), and (e) e worksheet in line 13 instructions to verify calculation t XVI-B Relationship of Activities to the A e No. Explain below how each activity for which incom	s) ccomplishme	ent of Exempt	t Purposes	importantly to the	)
13 (See Pa Lin	Total. Add line 12, columns (b), (d), and (e) e worksheet in line 13 instructions to verify calculation t XVI-B Relationship of Activities to the A e No. Explain below how each activity for which incom	s) ccomplishme	ent of Exempt	t Purposes	importantly to the	)
13 (See Pa Lin	Total. Add line 12, columns (b), (d), and (e) e worksheet in line 13 instructions to verify calculation t XVI-B Relationship of Activities to the A e No. Explain below how each activity for which incom	s) ccomplishme	ent of Exempt	t Purposes	importantly to the	)
13 (See Pa Lin	Total. Add line 12, columns (b), (d), and (e) e worksheet in line 13 instructions to verify calculation t XVI-B Relationship of Activities to the A e No. Explain below how each activity for which incom	s) ccomplishme	ent of Exempt	t Purposes	importantly to the	)
13 (See Pa Lin	Total. Add line 12, columns (b), (d), and (e) e worksheet in line 13 instructions to verify calculation t XVI-B Relationship of Activities to the A e No. Explain below how each activity for which incom	s) ccomplishme	ent of Exempt	t Purposes	importantly to the	)
13 (See Pa Lin	Total. Add line 12, columns (b), (d), and (e) e worksheet in line 13 instructions to verify calculation t XVI-B Relationship of Activities to the A e No. Explain below how each activity for which incom	s) ccomplishme	ent of Exempt	t Purposes	importantly to the	)
13 (See Pa Lin	Total. Add line 12, columns (b), (d), and (e) e worksheet in line 13 instructions to verify calculation t XVI-B Relationship of Activities to the A e No. Explain below how each activity for which incom	s) ccomplishme	ent of Exempt	t Purposes	importantly to the	)
13 (See Pa Lin	Total. Add line 12, columns (b), (d), and (e) e worksheet in line 13 instructions to verify calculation t XVI-B Relationship of Activities to the A e No. Explain below how each activity for which incom	s) ccomplishme	ent of Exempt	t Purposes	importantly to the	)
13 (See Pa Lin	Total. Add line 12, columns (b), (d), and (e) e worksheet in line 13 instructions to verify calculation t XVI-B Relationship of Activities to the A e No. Explain below how each activity for which incom	s) ccomplishme	ent of Exempt	t Purposes	importantly to the	)
13 (See Pa Lin	Total. Add line 12, columns (b), (d), and (e) e worksheet in line 13 instructions to verify calculation t XVI-B Relationship of Activities to the A e No. Explain below how each activity for which incom	s) ccomplishme	ent of Exempt	t Purposes	importantly to the	)
13 (See Pa Lin	Total. Add line 12, columns (b), (d), and (e) e worksheet in line 13 instructions to verify calculation t XVI-B Relationship of Activities to the A e No. Explain below how each activity for which incom	s) ccomplishme	ent of Exempt	t Purposes	importantly to the	)
13 (See Pa Lin	Total. Add line 12, columns (b), (d), and (e) e worksheet in line 13 instructions to verify calculation t XVI-B Relationship of Activities to the A e No. Explain below how each activity for which incom	s) ccomplishme	ent of Exempt	t Purposes	importantly to the	)

		Exempt Org	janizations					
1		•	-		•	other organization describ	ed Ye	es No
	ın sed	ction 501(c) (othe	er than section 501(c)	(3) organizations) or	r in section 527, re	elating to political		
	orgar	nizations?						:
а	Trans	sfers from the rep	porting foundation to	a noncharitable exer	npt organization o	f		
	(1) C	ash					1a(1)	X
	(2) O	ther assets .					1a(2)	X
b	Other	r transactions:						
	(1) S	ales of assets to	a noncharitable exer	npt organization .			. 1b(1)	X
	(2) P	urchases of asse	ets from a noncharita	ble exempt organiza	tion		1b(2)	X
			, equipment, or other				. 1b(3)	X
			rrangements				1b(4)	X
							. 1b(5)	X
							1b(6)	X
С								X
ď						should always show the fair r		
_						ndation received less than fa		
	value	in any transaction	or sharing arrangemer	it, show in column (d)	the value of the goo	ods, other assets, or services	s received.	
(a) Line		(b) Amount involved	, <u> </u>	antable exempt organizati		cription of transfers, transactions,		ments
<u> </u>	,	(_/_	(e) riamo errienes	and an an an an an an an an an an an an an	(, 555.			
	_							
	+				<del> </del>			
	-+			<del></del>		<del></del>	<del></del>	
	+			<del></del>		<del></del>		
							<u> </u>	
					<del></del>			
	+	_	<u></u>					
					-	·		
	-		<u> </u>			<del></del>		
	<del> -</del> -		<u></u>	<del></del>				
		<del></del>			<del></del>	<del></del>		<del></del>
		<del></del>				<del></del>		
2a						x-exempt organizations	. 🗌 Yes 🛚	No
				:110n 50 1(c)(3)) or in	section 527?		. Lites M	NO
<u>b</u>	IT Ye	<del></del>	following schedule.		<del></del>		<del></del> _	
		(a) Name of organ	nization	(b) Type of or	ganization	(c) Description (	of relationship	
						<del></del>		
				<del></del>				
٥.	Under	penalties of perjury, I dec	clare that have examined this re of preparer (other than taxpa	turn, including accompanying s	chedules and statements, a	and to the best of my knowledge and beli	et, it is true,	
Sign	Lonec	i, and complete degrala	an bispieparer (buter triair taxpa	yer) is based on air iniogration	- No.	M	lay the IRS discuss this	
Here		(MASIL	me	4/20//	TRUSTEE		ith the preparer shown ee instructions	
	Sign	nature of afficer or trus		Date	Title	<b></b> _		
Paid		Print/Type preparer		Preparer's annature		Date Check	PTIN	0000
	ror	PHILIP J	CURTIS	Up 16/2		04/20/2018 self-emp		<u> 2306</u>
Prepa			CURTIS, CURT	IS & BELLINS	SKI, P.C.		38-195601	
Use C	עוחי	Firm's address	PO BOX 766		<u> </u>	Phone no	517-787-9	348T

## 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.

► Go to www.irs.gov/Form990 for the latest information.

OMB No 1545-0047

2017

Employer identification number

DMICHL & POCITE	ALDRICH FOUNDATION	20-6406772	
Organization type (check	one)		
Filers of:	Section:		
Form 990 or 990-EZ		nization	
	4947(a)(1) nonexempt charitable tru	st not treated as a private foundation	
	527 political organization		
Form 990-PF	X 501(c)(3) exempt private foundation		
	4947(a)(1) nonexempt charitable tru	st treated as a private foundation	
	501(c)(3) taxable private foundation		
01 117			
• •	is covered by the <b>General Rul</b> e or a <b>Special F</b> )(7), (8), or (10) organization can check boxes	for both the General Rule and a Special Rule. See	
General Rule			
	or property) from any one contributor. Comple	ved, during the year, contributions totaling \$5,000 te Parts I and II. See instructions for determining a	
Special Rules			
regulations under s 13, 16a, or 16b, an	sections 509(a)(1) and 170(b)(1)(A)(vi), that ch d that received from any one contributor, durir	O or 990-EZ that met the 33 1/3 % support test of the ecked Schedule A (Form 990 or 990-EZ), Part II, line ing the year, total contributions of the greater of (1), or (ii) Form 990-EZ, line 1. Complete Parts I and II.	
contributor, during	the year, total contributions of more than \$1,00	ng Form 990 or 990-EZ that received from any one 00 exclusively for religious, charitable, scientific, o children or animals. Complete Parts I, II, and III	
contributor, during contributions totale during the year for <b>General Rule</b> app	the year, contributions exclusively for religiou and more than \$1,000. If this box is checked, ent an exclusively religious, charitable, etc., purp	ter here the total contributions that were received ose. Don't complete any of the parts unless the enexclusively religious, charitable, etc., contributions	
Caution: An organization t	hat isn't covered by the General Rule and/or th	ne 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)

Foreign State or Province

Foreign Country

Name of organization

Employer identification number

<u>DWIGHT</u>	GHT & LUCILE ALDRICH FOUNDATION 20-6406772				
Part I Contributors (see instructions). Use duplicate copies of Part I if additional space is needed.					
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution		
1	ALBERT ALDRICH TRUST PO BOX 766  JACKSON MI 49204-0766  Foreign State or Province Foreign Country.	\$ 8,000.	Person X Payroll		
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution		
	Foreign State or Province Foreign Country	\$	Person Payroll Noncash (Complete Part II for noncash contributions)		
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution		
	Foreign State or Province Foreign Country	\$	Person Payroll Noncash (Complete Part II for noncash contributions)		
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution		
	Foreign State or Province Foreign Country	\$	Person Payroll Noncash (Complete Part II for noncash contributions)		
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution		
•••••	Foreign State or Province Foreign Country	\$	Person Payroll Noncash (Complete Part II for noncash contributions)		
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution		

(Complete Part II for

noncash contributions)

Person Payroll Noncash