8

990-PF

Department of the Treasury

Internal Revenue Service

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.

Go to www.irs.gov/Form990PF for instructions and the latest information.

OMB No 1545-0052

For	calen	dar year 2017 or tax year beginning	, 2017	, and endin	ng		, 20
		foundation			T	r identification number	
С	ORNU	COPIA FAMILY FOUNDATION			20-808	0952	
1	_	and street (or PO box number if mail is not delivered to street address)		Room/suite		e number (see instruction	ns)
_		EST FULTON STREET			1	30-5500	
	Character and AID and an add and					ition application is pendir	no sheck here
)		RAPIDS, MI 49503			- il exemp	application is pendir	ig, circon ricie
			of a former public ch	arity	D 1 Foreign	gn organizations, check h	nere · · · ·
	,	Final return Amended re	•	•	1		•
		Address change Name change				gn organizations meeting there and attach comput	
H	Check	type of organization X Section 501(c)(3) exempt priv	<u></u>	04	7		•==
Г	1		taxable private found	ation		foundation status was te 507(b)(1)(A), check here	
1 F		arket value of all assets at J Accounting method	X Cash	Accrual	7		•
		year (from Part II, col. (c), Other (specify)		J -		indation is in a 60-month ection 507(b)(1)(B), check	
	ne 16	,	e on cash basis)			(-/(-//-//-//-	▶ □
_	irt l	Analysis of Revenue and Expenses (The total of				T	(d) Disbursements
		amounts in columns (b), (c), and (d) may not necessarily equal	(a) Revenue and expenses per		investment	(c) Adjusted net	for charitable
		the amounts in column (a) (see instructions))	books	ır	ncome	income	purposes (cash basis only)
	1	Contributions, gifts, grants, etc., received (attach schedule)	550,00	00 .		,	11:2
	2	Check If the foundation is not required to attach Sch B · ·	.,	-	+	·č }	
	3	Interest on savings and temporary cash investments · · · ·	14	13	143	† · · · · · · · · · · · · · · · · · · ·	3
	4	Dividends and interest from securities	52,95		52,950		
	5a	Gross rents			-,-,,,,,,,		· · · · · · · · · · · · · · · · · · ·
	ь	Net rental income or (loss)	:			,	,
Revenue	6a	Net gain or (loss) from sale of assets not on line 10 · · · · ·	28,49	93 /		RF(CEIVED
	ь	Gross sales price for all assets on line 6a 373,791	1 1	;	3 3 3 34 34		
	7	Capital gain net income (from Part IV, line 2)	,	7	28,493		9 2018
Re	8	Net short-term capital gain	,	,	<u> </u>	NOV	19 2018
	9	Income modifications	,	1 .	٠,		α α
	10a	Gross sales less returns and allowances		1		OGL	DEN. UT
	b	Less Cost of goods sold	"- * -	•.			, L
	c	Gross profit or (loss) (attach schedule)					1 2 - 2 - 2 - 2
	11	Other income (attach schedule) STM106	51	1	511	51	1
	12	Total. Add lines 1 through 11	632,09	7	82,097	53,60	
	13	Compensation of officers, directors, trustees, etc	•				
sesuec	14	Other employee salaries and wages					
ë	15	Pension plans, employee benefits					
	16a	Legal fees (attach schedule)					
Ш	b	Accounting fees (attach schedule) STM108	8,66	59	8,669	8,66	9 8,669
FODER HILL SAND Administrative Ex	С	Other professional fees (attach schedule) STM109	14,92		14,928		
Irai	17	Interest					
isi	18	Taxes (attach schedule) (see instructions) · · · · STM110	1,04	13			
πį	19	Depreciation (attach schedule) and depletion					7,1
φ	20	Occupancy					
<u> </u>	21	Travel, conferences, and meetings					
短	22	Printing and publications					
g	23	Other expenses (attach schedule) · · · STM103 · · · ·	49,72	:5	49,725	49,72	5 49,725
₩ <u></u>	24	Total operating and administrative expenses.	····				
ā		Add lines 13 through 23	74,36	55	73,322	73,32	2 73,322
9	25	Contributions, gifts, grants paid	607,26				607,265
	26	Total expenses and disbursements. Add lines 24 and 25	681,63	0	73,322		2 680,587
ü	27	Subtract line 26 from line 12	The state of the state of		7 7 7	The state of the s	34 7.75 31 .
CANNES	a	Excess of revenue over expenses and disbursements ·	(49,53	1 '	1 1977.	the Company of the	1/22 1/11 1
2	Ь	Net investment income (if negative, enter -0-)	18 Tel Berry W.		8,775		the day
Ç	ў c	Adjusted net income (if negative, enter -0-)	the state of the	14 33	自15 [2]		0
For	Paper	work Reduction Act Notice, see instructions.					Form 990-PF (2017)

EEA

Beginning of year End of year Part II. Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only (See instructions) (a) Book Value (b) Book Value (c) Fair Market Value Cash - non-interest-bearing 498,196 709,416 The state of the s Accounts receivable Less allowance for doubtful accounts 129,790 114,167 114,167 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) 7 Less allowance for doubtful accounts Assets 9 10a Investments - U.S. and state government obligations (attach sometide) 80,382 91,618 91,551 b Investments - corporate stock (attach schedule) STM137 482,167 507,842 645,770 c Investments - corporate bonds (attach schedule) ... STM138 217,592 234,589 261,369 Investments - land, buildings, and equipment basis THE RESERVE OF THE PARTY. Less accumulated depreciation (attach schedule) 12 Investments - other (attach schedule) 13 a transport of the second ないに、これでいるからである。 14 Land, buildings, and equipment basis Less accumulated depreciation (attach schedule) Other assets (describe STM120 15 790,419 1,055,503 783,594 16 , Total assets (to be completed by all filers - see the instructions Also, see page 1, item I) 2,480,627 2,431,054 605,867 17 Accounts payable-and accrued expenses 40 Grants payable 18 Liabilities 19 20 Loans from officers, directors, trustees, and other disqualified persons 21 Mortgages and other notes payable (attach schedule) 22 Other liabilities (describe 23 Total liabilities (add lines 17 through 22) 40 0 Foundations that follow SFAS 117, check here X Balances and complete lines 24 through 26, and lines 30 and 31. 24 2,480,587 2,431,054 25 26 or Fund Foundations that do not follow SFAS 117, check here and complete lines 27 through 31. 27 Capital stock, trust principal, or current funds Assets 28 Paid-in or capital surplus, or land, bldg, and equipment fund 29 Retained earnings, accumulated income, endowment, or other funds 30 Total net assets or fund balances (see instructions) 2,480,587 2,431,054 Net. Total liabilities and net assets/fund balances (see 2,480,627 2,431,054 Analysis of Changes in Net Assets or Fund Balances Total net assets or fund balances at beginning of year - Part II, column (a), line 30 (must agree with 1 2,480,587 2 (49,533)3 Other increases not included in line 2 (itemize) 4 2,431,054 5 Decreases not included in line 2 (itemize) 5 Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b), line 30 6 2,431,054

Page 2

Part IV Capital Gains	and Losses for Tax on Inves	stment income	9		
(a) List and descri 2-story brick ware	be the kind(s) of property sold (for example ehouse, or common stock, 200 shs MLC C	, real estate, o)	(b) How acquired P-Purchase D-Donation	(c) Date acquired (mo , day, yr)	(d) Date sold (mo , day, yr)
1a See STM134					
b					
С					_
d					<u> </u>
е					
(e) Gross sales price (f) Depreciation allowed (g) Cost or other basis plus expense of sale				Gain or (loss) us (f) minus (g))	
a 373,791			345,298		28,493
b					
С					••
d					
_e					
Complete only for assets show	ving gain in column (h) and owned by	the foundation on 1	2/31/69		Col (h) gain minus
(I) FMV as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess over col (j			not less than -0-) or (from col (h))
a					28,493
b					
С					
d					<u>-</u>
е					
2 Capital gain net income or (ne	t canital loss)	o enter in Part I, line nter -0- in Part I, line	?	2	28,493
3 Net short-term capital gain or	(loss) as defined in sections 1222(5) a	ind (6)			
If gain, also enter in Part I, line	e 8, column (c) See instructions If (los	ss), enter -0- in	٠.٠		
Part I, line 8 · · · · · · · ·			f	3	(4,447)
Part V. Qualification U	nder Section 4940(e) for Re	duced Tax on	Net Investme	nt Income	
(For optional use by domestic priva	ate foundations subject to the section	4940(a) tax on net i	nvestment income	e)	
If section 4940(d)(2) applies, leave	this part black				
ii section 4340(u)(z) applies, leave	this part blank				
Was the foundation liable for the s	ection 4942 tax on the distributable am	nount of any year in	the base period?		Yes X No
If "Yes," the foundation doesn't qua	alify under section 4940(e) Do not con	nplete this part			
	in each column for each year, see the	instructions before	making any entrie	s	
(a) Base period years	(b)		(c)	. 🕟	(d) stribution ratio
Calendar year (or tax year beginnin			ioncharitable-use as	(60) (1	o) divided by col (c))
2016	429,10		2,398,4		0.178936
2015	297,3		2,522,5		0.117864
2014	174,8		2,432,6		0.071862
2013	503,5		2,632,7		0.191275
2012	150,0	75	2,399,2	19 (0.062552
0 7 4 1 261 2 4 2 2 2 2 2 4 1					
• • • • • • • • • • • • • • • • • • • •				2 (0.622488
	ne 5-year base period - divide the total	=	=		
the number of years the found	ation has been in existence if less than	n 5 years · · · ·		3 0	0.124498
4 5 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4	dable as assets for 2017 from Dark V	less C			0 650 460
4 Enter the net value of nonchar	itable-use assets for 2017 from Part X	, line 5		. 4	2,653,460
E. Multiplicting 4 buckeys 2				_	222 252
5 Multiply line 4 by line 3 · · ·				. 5	330,350
E Enter 19/ of not investment in	name (19), of Bort I line 27h)				0.0
• Enter 1% of net investment inc	come (1% of Part I, line 27b) · · · ·			. 6	88_
7 Add lines 5 and 6				. 7	330 430
i muu iii lea 3 diilu 0 · · · · · ·				· '	330,438
8 Enter qualifying distributions from	om Part XII. line 4			. 8	600 F03
• • •	nan line 7, check the box in Part VI, line				680,587_
Part VI instructions	To the state of the sea and th	- 15, and complete	part comy a	tax rate See (III	-
					

σ				
m 990-PF (2017) CORNUCOPIA FAMILY FOUNDATION 20-	-80809	52	Р	age 4
art VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 - se				<u>ugu 4</u>
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)		• '	-	
Domestic foundations that meet the section 4940(e) requirements in Part V, check				88
here 🔣 and enter 1% of Part I, line 27b · · · · · · · · · · · · · · · · · · ·	1 -			1
All other domestic foundations enter 2% of line 27b Exempt foreign organizations, enter 4% of				•
Part I, line 12, col (b)				
Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only, others, enter -0-)				0
Add lines 1 and 2				88
Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only, others, enter -0-)				0
Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-			-	<u>. 88</u>
Credits/Payments				
2017 estimated tax payments and 2016 overpayment credited to 2017	•	•		
Exempt foreign organizations - tax withheld at source 6b				٠.
Tax paid with application for extension of time to file (Form 8868) 6c 1,000				
Backup withholding erroneously withheld 6d	•			
Total desire and payments y tas most set an agent a	_			, 383
Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached	_			
Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid			1	,295
Enter the amount of line 10 to be Credited to 2018 estimated tax 1,295 Refunded 11	+			, 295
art VII-A Statements Regarding Activities	' 1			
During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it			Yes	No
participate or intervene in any political campaign?		1a		X
Did it spend more than \$100 during the year (either directly or indirectly) for political purposes? See the	Ì			
Instructions for the definition		1b		Х
If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials	Ī			•
published or distributed by the foundation in connection with the activities	•			
Did the foundation file Form 1120-POL for this year?		1c		Х
Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year	Ī			
(1) On the foundation \$ (2) On foundation managers \$	ļ			
Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed			;	
on foundation managers \$				2.7
Has the foundation engaged in any activities that have not previously been reported to the IRS?		2		Χ
If "Yes," attach a detailed description of the activities	j		1	· .
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		Х
Did the foundation have unrelated business gross income of \$1,000 or more during the year?		4a		X
If "Yes," has it filed a tax return on Form 990-T for this year?	• • •	4b		
Was there a liquidation, termination, dissolution, or substantial contraction during the year?	• • • •	5		Х
If "Yes," attach the statement required by General Instruction T		l		
Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either		į		
By language in the governing instrument, or	l			,
By state legislation that effectively amends the governing instrument so that no mandatory directions that			Ų.	~
conflict with the state law remain in the governing instrument?	: ;;	7	X	
Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col. (c), and Par	''^v'		,	+
Enter the states to which the foundation reports or with which it is registered. See instructions		٠. ا	` '	
MI If the answer is "Vee" to line 7, has the foundation furnished a copy of Form 900 PE to the Attorney General		.		
If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate) of each state as required by <i>General Instruction G?</i> If "No," attach explanation		8b	Х	İ
Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or	ŀ	OD.		
4942(j)(5) for calendar year 2017 or the tax year beginning in 2017? See instructions for Part XIV)? If "Yes,"		·		İ
complete Part XIV		9	Х	İ
Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their	}	3	^	
Did any persons become substantial continutions during the tax year in lies, lattach a schedule listing titell		1		
names and addresses	m41 1 4	10	Х	

Pai	rt.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	.15	Yes	No
	meaning of section 512(b)(13)? If "Yes," attach schedule See instructions	11		X
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified			
	person had advisory privileges? If "Yes," attach statement. See instructions	12		Х
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	Χ	
	Website address N/A			-
14	The books are in care of <u>JEN MCNEILLY</u> Telephone no <u>616-5</u>	30-5	500	
	Located at 231 WEST FULTON STREET, GRAND RAPIDS, MI ZIP+4 49503			
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041-check here			L
	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 name of	ار مع م أ	,	V.
	the foreign country		45	
Rai	rt.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.	1 78.2	Yes	No
1a	During the year, did the foundation (either directly or indirectly)	F11 74		激制
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person? Yes X No	13.13		26.3
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a		36	
	disqualified person?	1	11/1/2	
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? Yes X No	1		[基]
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? Yes X No	11.1	$\tilde{\zeta}_{ij}$	in the second
	(5) Transfer any income or assets to a disqualified person (or make any of either available for	4	1.4	35.3
	the benefit or use of a disqualified person)?	. 1	**	
	(6) Agree to pay money or property to a government official? (Exception. Check "No" if the		44.	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
	foundation agreed to make a grant to or to employ the official for a period after	1,12		\tilde{z}^{j}
	termination of government service, if terminating within 90 days) Yes X No.	333	14.	300
b	If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations		1	-
	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
С	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that	1225	المَّالِثُ	21
	were not corrected before the first day of the tax year beginning in 2017?	1c	Table	X
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private	44.7	3334	75)
	operating foundation defined in section 4942(j)(3) or 4942(j)(5))	7.7	1	*
а	At the end of tax year 2017, did the foundation have any undistributed income (lines 6d and	20	8	~ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \
	6e, Part XIII) for tax year(s) beginning before 2017?	1,323		
	If "Yes," list the years	123	Ç'.	Mary
b	Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2)	3	7	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
	(relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to	المرادة	2.77	14.6%
	all years listed, answer "No" and attach statement - see instructions)	2b	رايميلي ليو	X
С	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here	1.7		\$3.00 \$3.00 \$4.00 \$6.00 \$4.00 \$6.00 \$4.00 \$6.00 \$4.00 \$4.00 \$4.00 \$4.00 \$4.00 \$4.00 \$4.00 \$4.00 \$4.00 \$4.00
٠.	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise			
3a		1883		12
_		1		
D	If "Yes," did it have excess business holdings in 2017 as a result of (1) any purchase by the foundation or	1		100
	disqualified persons after May 26, 1969, (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest, or (3) the lapse of	$ \hat{x}_{i}^{p}(t) $	1	1
	the 10-, 15-, or 20-year first phase holding period? (Use Schedule C, Form 4720, to determine if the		- Table 24	
	foundation had excess business holdings in 2017)	3b	(,2 n	.عظمة ا
42	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a		Х
4a h	Did the foundation invest during the year any amount in a mariner that would jeopardize its charitable purposes?	, *+;,	22.54	7.
b	charitable purpose that had not been removed from jeonardy before the first day of the tay year beginning in 20172	،"	14.75	Y Y

	990-PF (2017) CORNUCOPIA FAMILY F			470	N M D -	<u> </u>		20-808		<u>F</u>	age 6
r,aı	t VII-B: Statements Regarding Activities			n 4/20	I Way Be	Requ	rea (cc	munuec		г —	т
5a	During the year, did the foundation pay or incur any ar	mount to					_		>30%	Yes	No
	(1) Carry on propaganda, or otherwise attempt to infl		•	,	• • •		Yes	X No	V	提校)	1965
	(2) Influence the outcome of any specific public elect	on (see	section 4955), (or to car	ry on,					泰次	
	directly or indirectly, any voter registration drive?						Yes	X No	186		1
	(3) Provide a grant to an individual for travel, study, o	r other s	ımılar purposes	?			Yes	X No	7.75		
	(4) Provide a grant to an organization other than a ch	antable.	etc , organizati	on desc	ribed in		_		1.0	3,45	
	· · · · · · · · · · · · · · · · · · ·	•					Yes	X No	يريد كرام وا	1, 17,5	
	(5) Provide for any purpose other than religious, char						□ .••	<u> </u>	1	7.38	
	purposes, or for the prevention of cruelty to childre						Yes	X No	基派	5	
b	If any answer is "Yes" to 5a(1)-(5), did any of the trans								1	9	
-							u III	NI	عقد م		
	Regulations section 53 4945 or in a current notice reg								5b		587456
	Organizations relying on a current notice regarding dis				• • • • • • • • · · · · · · · · · · · ·			. ▶ ┌┤		7	
С	If the answer is "Yes" to question 5a(4), does the foun		•				─	_ N	# v. 13?	13h 21	37
	because it maintained expenditure responsibility for the	-			• • • • •		Yes	∐ No	1.17	1 4	2 1 1 1 2 1 2 1 2 1 2 1 2 1 2 1 2 1 2 1
	If "Yes," attach the statement required by Regulations								4.7	1.7 0	2.13
6a	Did the foundation, during the year, receive any funds	, directly	or indirectly, to	pay pre	miums 1		_		17.0		5 - 14
	on a personal benefit contract?						Yes	X No		30 1 X	8 200
b	Did the foundation, during the year, pay premiums, dir	ectly or i	ndirectly, on a p	ersonal	benefit conti	ract?			6b		Х
	If "Yes" to 6b, file Form 8870	}						•	1	85 15 c	
7a	At any time during the tax year, was the foundation a p	party to a	prohibited tax	shelter t	ransaction?		Yes	X No		14.5	34
b	If "Yes," did the foundation receive any proceeds or ha	ive any r	net income attrib	outable t	o the transa	ction?	.		7b	,,,	
Par	t _v VIII	ctors,	Trustees, l	Found	ation Ma	nager	s, High	ly Paid	Emplo	yees	5,
	and Contractors										
1 L	ist all officers, directors, trustees, and foundation	manage	rs and their co	mpens	ation. See ir	structio	ons.				
			e, and average		mpensation		Contributi		(e) Expe	ense ac	count.
See	(a) Name and address 990 OFOV		rs per week ed to position		iot paid, iter -0-)		loyee bene ferred corr	tit plans ipensation	other	allowar	ices
	US C HEULE		TOR/OFFICE					·			
	WEST FULTON, MI 49503	[0.00	-	0			0			0
	MARY L HEULE	DIREC	TOR/OFFICE						<u> </u>		
	WEST FULTON, MI 49503		0.00	•	0			0			0
	ELLE VANDERVENNE	DIREC							1		
		DIREC	•		^			•			_
	WEST FULTON, MI 49503		0.00		0			0	-		
	INA HEULE	DIREC						_			_
	WEST FULTON, MI 49503	_ 45 45	0.00	1	0	47	. 15	. 0			
	ompensation of five highest-paid employees (othe	r than tr	iose included	on line	1 - see instr	uctions). It none	, enter			
	NONE."		1			-	1		ı		
	(a) Name and address of each employee paid more than \$50	000	(b) Title, and a		(c) Comper	t	employe	ibutions to e benefit	(e) Expe		
	ta) Name and address of each employee paid more than too	,000	devoted to po		(c) Comper	isalion		d deferred insation	other a	illowan	ces
IONE							<u> </u>				
OLVE					lj.		1				
	•]		
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Form 990-PF (2017)

	mation About Officers, Directors, Trustees, Fo Contractors (continued)	oundation Managers, Highly P	aid Employees,
	id independent contractors for professional services. See	instructions. If none, enter "NONE."	
	Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE	•	•	
			
		· · · · · · · · · · · · · · · · · · ·	
Total number of others	receiving over \$50,000 for professional services		
Part IX-A Sun	nmary of Direct Charitable Activities		
List the foundation's fou	ir largest direct charitable activities during the tax year. Include relevant	statistical information such as the number of	_
	beneficiaries served, conferences convened, research papers produce		Expenses
1 NONE			•
			<u> </u>
2			
3			
		<u> </u>	
4			
Part IX-B Sun	nmary of Program-Related Investments (see in	structions)	
	t program-related investments made by the foundation during the tax ye		Amount
1 NONE			
	•		
			0
2			
All other program-related	Investments See instructions	<u> </u>	
3			
		i	
Total. Add lines 1 throu	ıgh 3 • • • • • • • • • • • • • • • • • •		

Pa	rt X Minimum Investment Return (All domestic foundations must complete this part. Foreign	found	dations,
	see instructions)		
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc.,		
	purposes		
а	Average monthly fair market value of securities	1a	1,041,703
b	Average of monthly cash balances	1b	702,728
C	Fair market value of all other assets (see instructions)	1c	949,437
d	Total (add lines 1a, b, and c)	1d	2,693,868
е	Reduction claimed for blockage or other factors reported on lines 1a and	. '.	i
	1c (attach detailed explanation) · · · · · · · · · · · · · · · · · · ·		
2	Acquisition indebtedness applicable to line 1 assets	2	0
3	Subtract line 2 from line 1d · · · · · · · · · · · · · · · · · ·	3	2,693,868
4	Cash deemed held for charitable activities Enter 1 1/2% of line 3 (for greater amount, see		
	instructions)	4	40,408
5	Net value of noncharitable-use assets. Subtract line 4 from line 3 Enter here and on Part V, line 4 · ·	5	2,653,460
6	Minimum investment return. Enter 5% of line 5	6	132,673
Pa	rt XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating for	ounda	tions
	and certain foreign organizations, check here and do not complete this part)		
1	Minimum investment return from Part X, line 6	1	132,673
2a	Tax on investment income for 2017 from Part VI, line 5 · · · · · · · · 2a 88	ļ	
b	Income tax for 2017 (This does not include the tax from Part VI)	ļ	
С	Add lines 2a and 2b	2c	88
3	Distributable amount before adjustments Subtract line 2c from line 1	3	132,585
4	Recoveries of amounts treated as qualifying distributions	4	
5	Add lines 3 and 4	5	132,585
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	132,585
Pa	rt XII Qualifying Distributions (see instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes	$\overline{}$	
	Expenses, contributions, gifts, etc total from Part I, column (d), line 26 · · · · · · · · · · · · · · · · · ·	1a	600 507
a b	Program-related investments - total from Part IX-B	1b	680,587
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc.,	- 15	
-	purposes	2	
3	Amounts set aside for specific charitable projects that satisfy the		
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	680,587
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income		000,587
-	Enter 1% of Part I, line 27b See instructions	5	88
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	680,499
-	Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the		
	qualifies for the section 4940(e) reduction of tax in those years		

Pa	rt XIII Undistributed Income (see in	istructions)		·	
1	Distributable amount for 2017 from Part XI,	(a) Corpus	(b) Years prior to 2016	(c) 2016	(d) 2017
	line 7	•		*	132,585
2	Undistributed income, if any, as of the end of 2017				• • •
а	Enter amount for 2016 only	• •			
b	Total for prior years,,			,	
3	Excess distributions carryover, if any, to 2017		'		
а	From 2012				:
b	From 2013 · · · · · · · 372,	278			
С	From 2014 · · · · · · 53,	983		·	
d	From 2015	246			
е	From 2016	862		1.	
f	Total of lines 3a through e	937,805			·
4	Qualifying distributions for 2017 from Part XII,			,	
	line 4 \$ 680,587	-		·	
а	Applied to 2016, but not more than line 2a	•			
b	Applied to undistributed income of prior years			•	
	(Election required - see instructions) · · · · ·	•			
С	Treated as distributions out of corpus (Election				
	required - see instructions)	•			
d	Applied to 2017 distributable amount	•			132,585
е	Remaining amount distributed out of corpus · ·	548,002			
5	Excess distributions carryover applied to 2017				
	(If an amount appears in column (d), the same				•
	amount must be shown in column (a))			• •	* , ;
6	Enter the net total of each column as				
	indicated below:				, ,
а	Corpus Add lines 3f, 4c, and 4e Subtract line 5	1,485,807		-	
b	•			•	
	line 4b from line 2b · · · · · · · · · · · · · · ·				
C	Enter the amount of prior years' undistributed				
	income for which a notice of deficiency has				
	been issued, or on which the section 4942(a)				•
	tax has been previously assessed	•			• . •
d	Subtract line 6c from line 6b Taxable			,	
	amount - see instructions	•			
е	Undistributed income for 2016 Subtract line				
	4a from line 2a Taxable amount - see				
	instructions	•			
f	Undistributed income for 2017 Subtract lines	· · ·			
	4d and 5 from line 1. This amount must be			;	
	distributed in 2018	•			0
7	Amounts treated as distributions out of corpus			′	. 3
	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		, .		
	applied on line 5 or line 7 (see instructions)	30,436		g to May to	
9	Excess distributions carryover to 2018.				, , ,
	Subtract lines 7 and 8 from line 6a · · · · · ·	1,455,371		1	
0	Analysis of line 9		,		
а	Excess from 2013	278			
b	Excess from 2014				
C	Excess from 2015	246			•
d	Excess from 2016	862	_ ,	,	•
0	Excess from 2017 548 , (002	·		<u> </u>

Par	t-XIVa Private Operating Fou	ndations (see inst	tructions and Part	VII-A, question 9)					
1a	1a If the foundation has received a ruling or determination letter that it is a private operating								
	foundation, and the ruling is effective for		·		08-07-20	∩ 7			
ь	Check box to indicate whether the found		=	d in section		942(J)(5)			
2a	Enter the lesser of the adjusted net	Tax year	ing roundation describe		1 4342()(3) 01 1 1 4	342(J)(3)			
	income from Part I or the minimum	'		Prior 3 years		(e) Total			
	investment return from Part X for	(a) 2017	(b) 2016	(c) 2015	(d) 2014				
	each year listed	0			18,426	80,114			
b	85% of line 2a · · · · · · · · · · · ·		52,435		15,662	68,097			
С	Qualifying distributions from Part XII, line 4 for each year listed	607,265	429,167	297,315	174,815	1,508,562			
d	Amounts included in line 2c not used directly for active conduct of exempt activities •								
θ	Qualifying distributions made directly for active conduct of exempt activities Subtract line 2d from line 2c	607,265	429,167	297,315	174,815	1,508,562			
3	Complete 3a, b, or c for the alternative test relied upon								
а	"Assets" alternative test - enter (1) Value of all assets	2,605,867	2,563,984	2,511,160	2,610,726	10,291,737			
	(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	88,449	79,948	84,084	81,089	333,570			
С	"Support" alternative test - enter (1) Total support other than gross investment income (interest								
	dividends, rents, payments on securities loans (section 512(a)(5)), or royalties) (2) Support from general public	550,000	415,112	250,000	175,000	1,390,112			
	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 · · ·	82,097	78,209	72,605	77,083	309,994			
Part	XV: Supplementary Informa	•	•	e foundation had	\$5,000 or more in	n assets at			
	any time during the yea	r - see instructior	าร.)						
1	Information Regarding Foundation N								
а	List any managers of the foundation wh before the close of any tax year (but onl	o have contributed more ly if they have contribute	e than 2% of the total co d more than \$5,000) (\$	ontributions received by See section 507(d)(2))	the foundation				
	PAULUS C HEULE								
b	List any managers of the foundation who ownership of a partnership or other entited the control of the control				ortion of the				
2	Information Regarding Contribution,	Grant, Gift, Loan, Sch	olarship etc. Program	ms.					
-		y makes contributions to ndation makes gifts, gra	preselected charitable	organizations and does	s not accept other conditions,				
а	The name, address, and telephone num		the person to whom ap	plications should be ad	dressed				
	990APP								
b	The form in which applications should be	e submitted and informa	tion and materials they	should include					
С	Any submission deadlines								
d	Any restrictions or limitations on awards factors	, such as by geographic	al areas, charitable field	ds, kinds of institutions,	or other				

Page 11

Part XV: Supplementary Information (continued)

3 Grants and Contributions Paid During th	e Year or Approve	d for Future P	ayment	
Recipient	If recipient is an individual, show any relationship to any foundation manager	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)	or substantial contributor	recipient		
a Paid during the year			1	
WORLD LITERACY FOUNDATION				,
PO BOX 44			READING OUT OF	
GRANDVILLE, MI 49418	NONE	PC	POVERTY	1,500
CHAPLAIN SERVICES				•
3737 LAKE EASTBROOK BLVD SE STE 101			SUPPORT CHAPLAIN	
GRAND RAPIDS, MI 49546	NONE	PC	SERVICES	1,000
THE POTTER'S HOUSE				
810 VANRAALTE SW			SUPPORT POTTER'S	
WYOMING, MI 49509-2812	NONE	PC	HOUSE	1,000
W1011110, 111 43303 2012	1.01.2			
GEMS GIRLS CLUBS				
1333 ALGER ST SE			.	
GRAND RAPIDS, MI 49507	NONE	PC	GEMS OPEN EVENT	, 750
TURNING POINTE SCHOOL OF DANCE				
437 136TH AVENUE			CHRISTIAN	
HOLLAND, MI 49424	NONE	PC	MINISTRY SUPPORT	500
ELIM CHRISTIAN SERVICES				
13020 S CENTRAL AVENUE				
PALOS HEIGHTS, IL 60463	NONE	PC	MINISTRY SUPPORT	150
				* • • •
	,			
Total		· · · · · · · · · · · · · · · · · · ·	3a	607,265
b Approved for future payment	1			
•				
			•	
-	1			
				-
		,	<u> </u>	
				_
			<u> </u>	
Total				

Form 990-PF (2017) CORNUCOPIA FAMILY FOUNDATION
Part XV: Supplementary Information (continued)

Recipient	If recipient is an individual, show any relationship to	Foundation status of	Purpose of grant or	Amount
Name and address (home or business)	any foundation manager or substantial contributor	recipient	contribution	Amount
a Paid during the year				
GRAND RAPIDS CHRISTIAN SCHOOLS			1	
1508 ALEXANDER STREET SE			GRCS 20/20	
GRAND RAPIDS, MI 49506	NONE	PC	CAMPAIGN	100,00
CASCADE FELLOWSHIP CHURCH			GROWING WITH THE	
6655 CASCADE ROAD SE			LORD DEBT	
GRAND RAPIDS, MI 49546	NONE	PC	ELIMINATION	80,00
COMPASSION			INFRASTRUCTURE -	
12290 VOYAGER PARKWAY			PROGRAM	
COLORADO SPRINGS, CO 80921	NONE	PC	ENHANCEMENT	73,83
ADA CHRISTIAN SCHOOL				
6206 ADA DRIVE SE			CURRENT YEAR	
ADA, MI 49301	NONE	PC -	PLEDGE	50,00
GRAND RAPIDS SYMPHONY				
300 OTTAWA AVE NW SUITE 100	270277	50	ORCHESTRAL MUSIC	E0.00
GRAND RAPIDS, MI 49503	NONE	PC	AND EDUCATION	50,00
THE HUMAN TRAFFICKING INSTITUTE			GVIDDODE FOR	
8400 WESTPARK DRIVE	NONE	DC.	SUPPORT FOR	33,33
MC LEAN, VA 22102	NONE	PC	STOPPING	33,33
STEPHEN'S CHILDREN				
3755 36TH STREET SE	2027		CURRORM MINICARY	25,00
GRAND RAPIDS, MI 49512-2913	NONE	PC	SUPPORT MINISTRY	23,00
SAFE HAVEN MINISTRIES			CARTERI CAMPATON	
3501 LAKE EASTBROOK BLVD SE STE 335	NOME	, DC	CAPITAL CAMPAIGN	25,00
GRAND RAPIDS, MI 49546	NONE	PC	GIFT	25,00
Total			3a	
b Approved for future payment				
•				•
	<u> </u>	<u> </u>	3b	

Form 990-PF (2017) CORNUCOPIA FAMILY FOUNDATION

Part XV Supplementary Information (continued)

3 Grants and Contributions Paid During the		d for Future I	Payment	
Recipient	If recipient is an individual, show any relationship to any foundation manager	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)	or substantial contributor	755,000	 	
a Paid during the year		J		
THE POTTER'S HOUSE SCHOOL			GROWING HOPE -	>
810 VAN RAALTE SW	NONE	l pc	TOGETHER CAPITAL	25 000
WYOMING, MI 49509-1101	NONE	PC	CAMPAIGN	25,000
RESONATE GLOBAL MISSION				
1700 28TH STREET SE			SUPPORT GLOBAL	
GRAND RAPIDS, MI 49508-1407	NONE	PC	MISSION WORK	17,800
STARLIGHT MINISTRIES INC				
3376 CENTRAL BLVD			SUMMER OF SUPPORT	
HUDSONVILLE, MI 49426	NONE	PC	CAMPAIGN	17,500
			CLIDDODE TO	
ADULLAM OUTREACH			SUPPORT TO	
3033 N 30TH ST MILWAUKEE, WI 53210	NONE	PC	MINISTER TO LOST AND HURTING IN	15,000
MILMAONEE, WI 33210	NONE		AND HORITRG IN	15,000
CGR YOUNGLIFE			SUPPORT MISSION	
P O BOX 70065		İ	TO INTRODUCE KIDS	
PRESCOTT, AZ 86304-7065	NONE	PC	TO JESUS CHRIST	15,000
ADA CHRISTIAN SCHOOL				
6206 ADA DRIVE SE			OUTDOOR EDUCATION	
ADA, MI 49301	NONE	PC	PROJECT	12,000
VAN ANDEL INSTITUTE				
333 BOSTWICK AVE NE			ALZHEIMER'S	
GRAND RAPIDS, MI 49503	NONE	PC	RESEARCH DONATION	10,000
0			CHANGE DEPOSIT	
CALVIN THEOLOGICAL SEMINARY			CHURCH RENEWAL LAB OF CALVIN	
3233 BURTON STREET SE GRAND RAPIDS, MI 49546	NONE	PC	SEMINARY	10,000
	NONE			
Total			3a	
b Approved for future payment				
		}		
	1			
]		
	<u></u>	<u> </u>		•
Total			3b	

Form 990-PF (2017) CORNUCOPIA FAMILY FOUNDATION

| Part | XV | Supplementary Information (continued)

Name and address (home or business) a Paid during the year SONGS AGAINST SLAVERY P O BOX 90882 NASHVILLE, TN 37209 BLANDFORD NATURE CENTER 1715 HILLBURN AVE NW		RESCUE AND RESTORE VICTIMS OF SEX SUPPORT NATURE	10,000
SONGS AGAINST SLAVERY P O BOX 90882 NASHVILLE, TN 37209 NONE BLANDFORD NATURE CENTER		RESTORE VICTIMS OF SEX	10,000
P O BOX 90882 NASHVILLE, TN 37209 NONE BLANDFORD NATURE CENTER		RESTORE VICTIMS OF SEX	10,000
NASHVILLE, TN 37209 NONE BLANDFORD NATURE CENTER		OF SEX	10,000
BLANDFORD NATURE CENTER			10,000
	PC	CUDDODT NATURE	
1715 HILLBURN AVE NW	PC	STIPPOPT NATURE	
	PC		10,000
GRAND RAPIDS, MI 49504 NONE	I	SOPPORT NATURE	10,000
THEOLOGICAL BOOK NETWORK		CREATION CARE:	
3529 PATTERSON AVE SE		TOOLS FOR THE	
GRAND RAPIDS, MI 49512 NONE	PC	GLOBAL CHURCH	5,000
EVANGELIZE TODAY			
PO BOX 7297		EVANGELIZATION	
FAIRFAX STATION, VA 22039 NONE	PC	SUPPORT	5,000
GRAND RAPIDS CHRISTIAN SCHOOLS			
1508 ALEXANDER ST SE		REFUGEE BOYS	
GRAND RAPIDS, MI 49506 NONE	PC	ASSISTANCE FUND	4,400
61 ISAIAH MINISTRIES			
P.O. BOX 304			
TEAGUE, TX 75860 NONE	PC	ALCS SCHOLARSHIP	4,000
WEDGWOOD CHRISTIAN SERVICES			
3300 36TH STREET SE	•	57TH ANNIVERSARY	
GRAND RAPIDS, MI 49512-2810 NONE	PC	CELEBRATION	3,000
ROOSEVELT PARK MINISTRIES		'	
1530 GRANDVILLE AVENUE SW		l	
GRAND RAPIDS, MI 49503-8046 NONE	PC	SUPPORT MINISTRY	1,500
Total		3a	
b Approved for future payment			
		,	
```\ <b>\</b>			_
Total		3b	

EEA

Enter gross	amounts unless otherwise indicated	Unrelated	business income	Excluded by se	ction 512, 513, or 514	(e)
		(a) Business	(b) Amount	(c)	(d) Amount	Related or exempt function income (See instructions)
1 Program	n service revenue	code		<del> </del>		<del>-</del>
a		ļ		ļ		
				<del> </del>		
°. —	<del></del>			<del> </del>		
d						<u> </u>
e		<b>-</b>		1		
f						
	and contracts from government agencies · · ·			ļ		
	ship dues and assessments	<b>—</b>		-	· · · · · · · · · · · · · · · · · · ·	<u> </u>
	on savings and temporary cash investments .		<u></u>			
	ds and interest from securities · · · · · · · ·	<u> </u>			<del> </del>	
	al income or (loss) from real estate	<u> </u>			<u> </u>	
	financed property			ļ		
	lebt-financed property				<del></del> .	
	al income or (loss) from personal property · · ·	<del></del>		<u> </u>		
7 Other in	vestment income				·	
8 Gain or	(loss) from sales of assets other than inventory					
9 Net inco	me or (loss) from special events					
0 Gross p	rofit or (loss) from sales of inventory					
1 Other re	venue a					
b						
c				1	<del></del>	
d						-
е						
2 Subtotal	Add columns (b), (d), and (e) · · · · ·			•		
	Add line 12, columns (b), (d), and (e)				13	
	eet in line 13 instructions to verify calculations)					
	-B   Relationship of Activities to the	Accompli	shment of Exe	mpt Purpos	es	
Line No.	Explain below how each activity for which inco accomplishment of the foundation's exempt po					
					<del>-</del>	
					_	
		·			<del></del>	
					· · · · · · · · · · · · · · · · · · ·	
					<del></del>	
			<del></del>	<del></del>		
			<del></del>			
		-				
		<del></del>	<del></del>			
				<del> </del>		
EΑ						Form 990-PF (2017

Form 990-PF (2017) CORNUCOPIA FAMILY FOUNDATION 20-8080952 Page 13 Part XVII Information Regarding Transfers to and Transactions and Relationships With Noncharitable Exempt **Organizations** Did the organization directly or indirectly engage in any of the following with any other organization described Yes No in section 501(c) (other than section 501(c)(3) organizations) or in section 527, relating to political Transfers from the reporting foundation to a nonchantable exempt organization of (1) Cash . . . . . 1a(1) 1a(2) (2) Other assets **b** Other transactions (1) Sales of assets to a noncharitable exempt organization 1b(1) (2) Purchases of assets from a noncharitable exempt organization 1b(2) (3) Rental of facilities, equipment, or other assets .... 1b(3) (4) Reimbursement arrangements . . . . . . 1b(4) 1b(5) (6) Performance of services or membership or fundraising solicitations 1b(6) c Sharing of facilities, equipment, mailing lists, other assets, or paid employees If the answer to any of the above is "Yes," complete the following schedule. Column (b) should always show the fair market value of the goods, other assets, or services given by the reporting foundation. If the foundation received less than fair market value in any transaction or sharing arrangement, show in column (d) the value of the goods, other assets, or services received (a) Line no (b) Amount involved (c) Name of noncharitable exempt organization (d) Description of transfers, transactions, and sharing arrangements Is the foundation directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described in section 501(c) (other than section 501(c)(3)) or in section 527? X No b If "Yes," complete the following schedule (a) Name of organization (b) Type of organization (c) Description of relationship declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, are tich of preparer (other than taxpayer) is based on all information of which preparer has any knowledge Sign May the IRS discuss this return DIRECTOR/OFFICER with the preparer shown below 11-08-2018 Here See instructions X Date Date Preparer's signature **Paid** ROBERT J THOMPSON 11-08-2018 P01475983

> ROBERT J THOMPSON CPA 644 ROSENGREN STREET

MUSKEGON MI 49442-3166

231-788-4991

Firm's EIN

**Preparer** 

Use Only

Firm's address

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

OMB No 1545-0047

Name of the organization		Employer identification number
CORNUCOPIA FAMILY FOU	NDATION	20-8080952
Organization type (check one)		
Filers of:	Section:	
Form 990 or 990-EZ	501(c)( ) (enter number) organization	
1 51111 550 51 550-122	So (O)( ) (Cinci names) organization	
	4947(a)(1) nonexempt charitable trust not treated as a private foundation	
	527 political organization	
	<del>-</del> '	
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	
Observation and the second and the second and the second and the second and the second and the second and the second and the second and the second and the second and the second and the second and the second and the second and the second and the second and the second and the second and the second and the second and the second and the second and the second and the second and the second and the second and the second and the second and the second and the second and the second and the second and the second and the second and the second and the second and the second and the second and the second and the second and the second and the second and the second and the second and the second and the second and the second and the second and the second and the second and the second and the second and the second and the second and the second and the second and the second and the second and the second and the second and the second and the second and the second and the second and the second and the second and the second and the second and the second and the second and the second and the second and the second and the second and the second and the second and the second and the second and the second and the second and the second and the second and the second and the second and the second and the second and the second and the second and the second and the second and the second and the second and the second and the second and the second and the second and the second and the second and the second and the second and the second and the second and the second and the second and the second and the second and the second and the second and the second and the second and the second and the second and the second and the second and the second and the second and the second and the second and the second and the second and the second and the second and the second and the second and the second and the second and the second and the second and the second and the second and the second and the second and the second and the second and the second and the s	and builting Constant Duly and Constant Duly	
	red by the General Rule or a Special Rule.	1. 0.
Note: Only a section 501(c)(7), (8 instructions	), or (10) organization can check boxes for both the General Rule and a Special R	ule See
General Rule		
X For an organization filing	Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling	\$5,000
<del>_</del> -	perty) from any one contributor. Complete Parts I and II. See instructions for determined to the contributor of the contributor.	
contributor's total contribu		
Special Rules		
Special Rules		
_	ibed in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support t	
	s 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), I	
	received from any one contributor, during the year, total contributions of the greate	
\$5,000 or <b>(2)</b> 2% of the ar	mount on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1 Complete Part	is I and II
Cor on assessment door	ibed in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from	any one
	ar, total contributions of more than \$1,000 exclusively for religious, charitable, scie	=
	poses, or for the prevention of cruelty to children or animals. Complete Parts I, II,	
merary, or educational put	poses, or for the prevention of diseasy to dimercial of alimitate complete. Arts 1, 11,	
For an organization descr	ibed in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from	any one
	ar, 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 re-	ceived
during the year for an exc	lusively religious, charitable, etc., purpose. Don't complete any of the parts unless	the
General Rule applies to t	his organization because it received <i>nonexclusively</i> religious, charitable, etc., conti	ributions
totaling \$5,000 or more du	uring the year	· · · • \$
		000
	t covered by the General Rule and/or the Special Rules doesn't file Schedule B (Fo	
•	nswer "No" on Part IV, line 2, of its Form 990, or check the box on line H of its Form	
Form 990-PF, Part I, line 2, to cert	ify that it doesn't meet the filing requirements of Schedule B (Form 990, 990-EZ, o	1 330-1-F)

Schedule B (Form 990, 990-EZ, or 990-PF) (2017) Page 2 Employer identification number Name of organization CORNUCOPIA FAMILY FOUNDATION 20-8080952 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 Person _1__ PAULUS C HEULE Payroll

,	231 WEST FULTON	\$250,000	Noncash 📙
			(Complete Part II for
	GRAND RAPIDS, MI 49503		noncash contributions )
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
_2_	CORNUCOPIA FAMILY PARTNERSHIP LP PO BOX 743	\$	Person 🗵 Payroll 📋 Noncash 📋
	ADA, MI 49301		(Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
,—			Person
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person
(a) <u>No.</u>	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
			Person
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
<del></del> ,			Person
EEA	l	Schedule	3 (Form 990, 990-EZ, or 990-PF) (2017)

Federal Supporting Statements	2017 PG01
Name(s) as shown on return	FEIN
CORNUCOPIA FAMILY FOUNDATION	20-8080952
FORM 990PF - PART VII-A - LINE 10	STATEMENT #114

SUBSTANTIAL CONTRIBUTORS SCHEDULE

NAME

PAULUS C HEULE

ADDRESS

231 WEST FULTON

GRAND RAPIDS, MI 49503

NAME

CORNUCOPIA FAMILY PARTNERSHIP LP

ADDRESS

РО ВОХ 743

ADA, MI 49301

PG01

STATEMENT #120

FORM 990PF - PART II - LINE 15 OTHER ASSETS SCHEDULE

DESCRIPTION	BOY BOOK	EOY BOOK	FMV
MUTUAL FUNDS	94,347	96,658	88,262
PARTNERSHIP INTEREST	961,156	693,761	693,761
ESTIMATED ACCRUED INTEREST			1,571
TOTAL	1,055,503	790,419	783,594

PG01

FORM 990PF - PART II - LINE 10(A)
INVESTMENTS: U.S. GOVERNMENT OBLIGATION SCHEDULE

STATEMENT #136

 CATEGORY
 BOOK VALUE (BOY)
 BOOK VALUE (EOY)
 FMV (EOY)

 TREASURY, FHLMC & FNMA
 80,382
 91,618
 91,551

 TOTALS
 80,382
 91,618
 91,551

	Federal Supporting Statem	ents	<b>2017</b> PG01
Name(s) as shown on return		F	EIN
CORNUCOPIA FA	MILY FOUNDATION		20-8080952
	FORM 990PF - PART II - LINE INVESTMENTS: CORPORATE STOCK S	• •	STATEMENT #137
CATEGORY	BOY	BOOK VALU	E EOY FMV
CORPORATE STOCKS	482,167	507,84	2645,770
TOTALS	482,167	507,84	2645,770
	FORM 990PF - PART II - LINE INVESTMENTS: CORPORATE BOND S	* *	. PG01 STATEMENT #138
CATEGORY	воу	BOOK VALU	EOY FMV
FORD	23,633	23,63	3 59,727
\mppril 1\mathred 1\cdot 0	25 126		

25,136

185,820 193,959 201,642

234,589 217,592 261,369

TOTALS

MERRILL LYNCH & CO

MISC NEW PURCHASES

Temporal Supposition   Temporal Supporting Statements   Supporting Statements   Supporting Statements   Supporting Statements   Supporting Statements   Supporting Statements   Supposition   Supposition   Supposition   Supposition   Supposition   Supposition   Supposition   Supposition   Supposition   Supposition   Supposition   Supposition   Supposition   Supposition   Supposition   Supposition   Supposition   Supposition   Supposition   Supposition   Supposition   Supposition   Supposition   Supposition   Supposition   Supposition   Supposition   Supposition   Supposition   Supposition   Supposition   Supposition   Supposition   Supposition   Supposition   Supposition   Supposition   Supposition   Supposition   Supposition   Supposition   Supposition   Supposition   Supposition   Supposition   Supposition   Supposition   Supposition   Supposition   Supposition   Supposition   Supposition   Supposition   Supposition   Supposition   Supposition   Supposition   Supposition   Supposition   Supposition   Supposition   Supposition   Supposition   Supposition   Supposition   Supposition   Supposition   Supposition   Supposition   Supposition   Supposition   Supposition   Supposition   Supposition   Supposition   Supposition   Supposition   Supposition   Supposition   Supposition   Supposition   Supposition   Supposition   Supposition   Supposition   Supposition   Supposition   Supposition   Supposition   Supposition   Supposition   Supposition   Supposition   Supposition   Supposition   Supposition   Supposition   Supposition   Supposition   Supposition   Supposition   Supposition   Supposition   Supposition   Supposition   Supposition   Supposition   Supposition   Supposition   Supposition   Supposition   Supposition   Supposition   Supposition   Supposition   Supposition   Supposition   Supposition   Supposition   Supposition   Supposition   Supposition   Supposition   Supposition   Supposition   Supposition   Supposition   Supposition   Supposition   Supposition   Supposition   Supposition   Supposition   Suppos						
PUND   PUND   PUND   PUND   PUND   PUND   PUND   PUND   PUND   PUND   PUND   PUND   PUND   PUND   PUND   PUND   PUND   PUND   PUND   PUND   PUND   PUND   PUND   PUND   PUND   PUND   PUND   PUND   PUND   PUND   PUND   PUND   PUND   PUND   PUND   PUND   PUND   PUND   PUND   PUND   PUND   PUND   PUND   PUND   PUND   PUND   PUND   PUND   PUND   PUND   PUND   PUND   PUND   PUND   PUND   PUND   PUND   PUND   PUND   PUND   PUND   PUND   PUND   PUND   PUND   PUND   PUND   PUND   PUND   PUND   PUND   PUND   PUND   PUND   PUND   PUND   PUND   PUND   PUND   PUND   PUND   PUND   PUND   PUND   PUND   PUND   PUND   PUND   PUND   PUND   PUND   PUND   PUND   PUND   PUND   PUND   PUND   PUND   PUND   PUND   PUND   PUND   PUND   PUND   PUND   PUND   PUND   PUND   PUND   PUND   PUND   PUND   PUND   PUND   PUND   PUND   PUND   PUND   PUND   PUND   PUND   PUND   PUND   PUND   PUND   PUND   PUND   PUND   PUND   PUND   PUND   PUND   PUND   PUND   PUND   PUND   PUND   PUND   PUND   PUND   PUND   PUND   PUND   PUND   PUND   PUND   PUND   PUND   PUND   PUND   PUND   PUND   PUND   PUND   PUND   PUND   PUND   PUND   PUND   PUND   PUND   PUND   PUND   PUND   PUND   PUND   PUND   PUND   PUND   PUND   PUND   PUND   PUND   PUND   PUND   PUND   PUND   PUND   PUND   PUND   PUND   PUND   PUND   PUND   PUND   PUND   PUND   PUND   PUND   PUND   PUND   PUND   PUND   PUND   PUND   PUND   PUND   PUND   PUND   PUND   PUND   PUND   PUND   PUND   PUND   PUND   PUND   PUND   PUND   PUND   PUND   PUND   PUND   PUND   PUND   PUND   PUND   PUND   PUND   PUND   PUND   PUND   PUND   PUND   PUND   PUND   PUND   PUND   PUND   PUND   PUND   PUND   PUND   PUND   PUND   PUND   PUND   PUND   PUND   PUND   PUND   PUND   PUND   PUND   PUND   PUND   PUND   PUND   PUND   PUND   PUND   PUND   PUND   PUND   PUND   PUND   PUND   PUND   PUND   PUND   PUND   PUND   PUND   PUND   PUND   PUND   PUND   PUND   PUND   PUND   PUND   PUND   PUND   PUND   PUND   PUND   PUND   PUND   PUND   PUND   PUND   PUND   PUND   PUND   PUND   PUND   PUND   PUND   PUND   PUND   PUND   PUND			Federal Su	pporting Staten	nents	
NORM 990PF - PAGT I - LINE 23 - OTHER EXPENSES SCHEDULE   AND EXPENSES	Name(s) as shown on return CORNUCOPIA FAMILY FOUNDATION					Your Social Security Number 20-8080952
NEVENUE   NET   ADJUSTED   CHARLTRAILE		FORM 990PE			нериле	STATEMENT #103~
SECONTION   3,550   3,550   3,550   811   811   811   811   811   811   811   811   811   811   811   811   811   811   811   811   811   811   811   811   811   811   811   811   811   811   811   811   811   811   811   811   811   811   811   811   811   811   811   811   811   811   811   811   811   811   811   811   811   811   811   811   811   811   811   811   811   811   811   811   811   811   811   811   811   811   811   811   811   811   811   811   811   811   811   811   811   811   811   811   811   811   811   811   811   811   811   811   811   811   811   811   811   811   811   811   811   811   811   811   811   811   811   811   811   811   811   811   811   811   811   811   811   811   811   811   811   811   811   811   811   811   811   811   811   811   811   811   811   811   811   811   811   811   811   811   811   811   811   811   811   811   811   811   811   811   811   811   811   811   811   811   811   811   811   811   811   811   811   811   811   811   811   811   811   811   811   811   811   811   811   811   811   811   811   811   811   811   811   811   811   811   811   811   811   811   811   811   811   811   811   811   811   811   811   811   811   811   811   811   811   811   811   811   811   811   811   811   811   811   811   811   811   811   811   811   811   811   811   811   811   811   811   811   811   811   811   811   811   811   811   811   811   811   811   811   811   811   811   811   811   811   811   811   811   811   811   811   811   811   811   811   811   811   811   811   811   811   811   811   811   811   811   811   811   811   811   811   811   811   811   811   811   811   811   811   811   811   811   811   811   811   811   811   811   811   811   811   811   811   811   811   811   811   811   811   811   811   811   811   811   811   811   811   811   811   811   811   811   811   811   811   811   811   811   811   811   811   811   811   811   811   811   811   811   811   811   811   811   811   811   811   811   811   811	DESCRIPTION	REVENUE AND EXPENSES	NET INVESTMENT	ADJUSTED NET INCOME	CHARITABLE PURPOSE	
FORM 990PF - PART I - LINE 11 - OTHER INCOME SCHEDULE  REVENUE NET ADJUSTED  AND EXPENSES INVESTMENT NET INCOME  \$111 511 511  \$512	NON QUALIFIED DEDUCTION FOREIGN DIV TAX OFFICE EXPENSES MISCELLANEOUS AMORTIZATION OF INVESTMENTS MISCELLANEOUS INVESTMENT FEES WASH SALE ADJUSTMENT PARTNERSHIP LOSSES	3,550 881 20 747 136 305 371 43,715	3,550 881 20 747 136 305 371 43,715	3,550 881 20 747 136 305 371 43,715	3,550 881 20 747 136 305 371 43,715	
REVENUE   NET   ADJUSTED		FORM 990PI	7	- OTHER INCOME SCH		PG01 STATEMENT #106~
115 115	DESCRIPTION OTHER INCOME	REVENUE AND EXPENSES 511	NET INVESTMENT 511	ADJUSTED NET INCOME 511		
	TOTALS		511		•	•

Name(s) as shown on return		Federal Si	Federal Supporting Statements	ments	2017 PG01	
CORNUCOPIA FAMILY FOUNDATION					20-8080952	
	FORM 990PF	- PART I - LINE 16(B)	(B) - ACCOUNTING FEES SCHEDULE	s schedule	STATEMENT #108~	
DESCRIPTION	REVENUE AND EXPENSES	NET INVESTMENT	ADJUSTED NET INCOME	CHARITABLE PURPOSE		
E & Y PROFESSIONAL FEES DELOITTE FEES	5,739 2,930	5,739	5,739	5,739 2,930		_
	699'8	8, 669	699'8	699'8		
	FORM 990PF - PART I - LINE	ART I - LINE 16(C) -	16(C) - OTHER PROFESSIONAL FEES SCHEDULE	FEES SCHEDULE	PG01 STATEMENT #109~	<u> </u>
DESCRIPTION ML CONSULTANT FEES BOARD OF DIRECTORS EXPENSES STATE REGISTRATIONS	AND EXPENSES 13,021 1,627 280	NET INVESTMENT 13,021 1,627 280	ADJUSTED NET INCOME 13,021 1,627 280	CHARITABLE PURPOSE 13,021 1,627 280		
	14,928	14,928	14,928	14,928		
						<u>.</u>
			,	,		
			:			

							-	
		Federal	Federal Supporting Statements	) Statemen	र		2017	PG01
Name(s) as shown on retum							Your Social Security Number	curity Number
CORNUCOPIA FAMILY FOUNDATION							2	20-8080952
	FORM	FORM 990PF - PART I -	LINE 18	- TAXES SCHEDULE			STA	STATEMENT #110~
	REVENUE	NET	ADJUSTED		CHARITABLE			
DESCRIPTION	AND EXPENSES	INVESTMENT	NET INCOME	OME	PURPOSE			
EXECISE TAX INVESTMENT INCOME	1,000	0	ā.	0	0			
PENALTY AND INTEREST	43	0			0			
TOTALS	1.043	0		c	c			
							)	
								PG01
	FORM 990-PF - PART IV - CAPITAL GAINS AND LOSSES INFORMATION (OVERFILOW)	T IV - CAPITAL G	AINS AND LOSSE	S INFORMATION	(OVERFIOW)		STA	STATEMENT #134~
J	P-PURCHASE					COST OR		GAINS MINIS
DESCRIPTION	D-DONATION	DATE ACQUIRED	DATE SOLD	SALES PRICE	DEPRECIATION	OTHER BASIS	GAIN OR LOSS	EXCESS OR LOSSES
ACCOUNT 676-02888 SEE ATTACHED		VARIOUS	VARIOUS	27,588		27,843	(255)	(255)
MERRILL LYNCH & CO ACC 676-04091	Q,	08-26-2011	08-28-2017	25,000		25,000		
ACCOUNT 676-04098 SEE ATTACHED	գ	VARIOUS	VARIOUS	190,404		162,505	27,899	27,899
ACCOUNT 676-04098 SUPP ATTACHED	Ω,	VARIOUS	VARIOUS	6,883		6,883		
ACCOUNT 676-04099 SEE ATTACHED	Ωι	VARIOUS	VARIOUS	82,370		83,221	(851)	(851)
ACCOUNT 676-04188 SEE ATTACHED	Ωι	VARIOUS	VARIOUS	41,546		39,846	1,700	1,700
TOTAL				373,791		345,298	28,493	28,493

## Federal Supporting Statements Name(s) as shown on return CORNUCOPIA FAMILY FOUNDATION PG01 Your Social Security Number 20-8080952

FORM 990PF - PART XV - LINE 2 APPLICATION SUBMISSION INFORMATION

GRANT PROGRAM

APPLICANT NAME

JEN MCNEILLY

**ADDRESS** 

231 WEST FULTON
GRAND RAPIDS, MI 49503

TELEPHONE

616-530-5500

EMAIL ADDRESS

FORM & CONTENT

SUBMISSION DEADLINE

NONE

RESTRICTIONS ON AWARD