2949 22 00024 8

### Return of Private Foundation

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

2017

Department of the Treasury Internal Revenue Service

▶ 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

For	calend	dar year 2017 or tax year beginning , a	and ending				
Na	me of fou	undation			A Employ	er identification number	
لى	IM ·	GILMORE JR FOUNDATION			36-	3584018	
		d street (or P O box number if mail is not delivered to street address)	Ro	om/suite		one number (see instructions)	
		E MICHIGAN AVE.			269	<u>-381-3490</u>	<u>.                                    </u>
		n, state or province, country, and ZIP or foreign postal code  MAZOO MI 49007			C if exemp	ption application is pending, o	check here
			rn of a former public ch	narity	D 1. Fore	eign organizations, check her	
	J.,, O U., (	Final return Amended	•		l		
		Address change Name cha			1	eign organizations meeting th test, check here and attach	
	Chook 6	type of organization X Section 501(c)(3) exempt private	_ <del></del>	1()			
$\Box$			e private foundation	ÐΨ	1 .	e foundation status was termi 507(b)(1)(A), check here	nated under
		rket value of all assets at J Accounting method	X Cash Acc	rual	1		
		ear (from Part II, col (c), Other (specify)	Za Casii	luai		undation is in a 60-month terr ection 507(b)(1)(B), check he	_ 1 1
	-	► \$ 13,984,738 (Part I, column (d) must	he on cach hacie \	1		· · · · · · · · · · · · · · · · · · ·	
	art I	Analysis of Revenue and Expenses (The total of	(a) Revenue and				(d) Disbursements
		amounts in columns (b), (c), and (d) may not necessarily equal	expenses per	(b) Net inv		(c) Adjusted net	for charitable purposes
<u></u>		the amounts in column (a) (see instructions) )	books				(cash basis only)
~ <u></u>	1	Contributions, gifts, grants, etc , received (attach schedule)	<del></del>				<del></del>
@. 77	2	Check ► X if the foundation is <b>not</b> required to attach Sch B			26 26=		
<b>S</b>	3	Interest on savings and temporary cash investments	26,997		26,997		
<b>S</b>	4	Dividends and interest from securities	142,667		42,667		
Z	5a	Gross rents	1,285,972	1,2	85,972		
	b	Net rental income or (loss) 157,507	705 100				
	6a	Net gain or (loss) from sale of assets not on line 10	705,129			<del></del>	
Š	b	Gross sales price for all assets on line 6a 2,989,565			0F 100	<del></del>	
جي	7	Capital gain net income (from Part IV, line 2)			05,129	0	
<u>"</u>	8	Net short-term capital gain			-	The second second	- Composite
Ž,	9	Income modifications				RECEIVE	7
SCANNER Revenue	10a b	Gross sales less returns and allowances Less Cost of goods sold					
Ø,	c	Gross profit or (loss) (attach schedule)			1	SEP 20 2016	3 3
1.	11	Other income (attach schedule) STMT 1	119,925	1	00,185		
	12	Total. Add lines 1 through 11	2,280,690		60,950	OGDEN, U	<del></del>
	13	Compensation of officers, directors, trustees, etc	193,952		53,986		139,966
xpenses	14	Other employee salaries and wages	167,655	1	31,668		35,987
ë	15	Pension plans, employee benefits	59,172		35,341		23,831
х	16a	Legal fees (attach schedule) SEE STMT 2	46,347		32,868		13,479
е) П	b	Accounting fees (attach schedule) STMT 3	2,550		1,275		1,275
.₹	С	Other professional fees (attach schedule) STMT 4	98,029		96,403		1,626
tra	17	Interest					
1is	18	Taxes (attach schedule) (see instructions) STMT 5	202,722	1	98,095		4,627
į	19	Depreciation (attach schedule) and depletion					
₽ Q	20	Occupancy	19,961		11,977		7,984
ò	21	Travel, conferences, and meetings	3,996		3,996		
ā	22	Printing and publications	007 543		06 340		
Operating and Administrative E	23	Other expenses (att sch) STMT 6	907,543	8	86,348	<del></del>	7,573
ati	24	Total operating and administrative expenses.	1 701 007	1 4	E1 0E7		226 240
er.	25	Add lines 13 through 23	1,701,927 551,465	1,4	51,957	0	236,348 539,531
ō	25 26	Contributions, gifts, grants paid  Total expenses and disbursements. Add lines 24 and 25	2,253,392	1 4	51,957		775,879
	27	Subtract line 26 from line 12	2,23,332		, 331	<del></del>	113,019
	a	Excess of revenue over expenses and disbursements	27,298			ļ	
	b	Net investment income (if negative, enter -0-)		8	08,993	<del></del>	
	C	Adjusted net income (if negative, enter -0-)				0	
	<u>, , , , , , , , , , , , , , , , , , , </u>						

Part I	Balance Sheets Attached schedules and amounts in the description column	Beginning of year	End of	year
	should be for end-of-year amounts only (See instructions )	(a) Book Value	(b) Book Value	(c) Fair Market Value
1	Cash – non-interest-bearing			<u> </u>
2	Savings and temporary cash investments	81,782	277,761	277,761
3	Accounts receivable ► 8,600			
l	Less allowance for doubtful accounts ▶	5,815	8,600	8,600
4	Pledges receivable ▶	1		
	Less allowance for doubtful accounts ▶			
5	Grants receivable			
6	Receivables due from officers, directors, trustees, and other			
	disqualified persons (attach schedule) (see			
	instructions)			
7	Other notes and loans receivable (att schedule) SEE WRK 700,000			
	Less allowance for doubtful accounts ▶ 0	<u></u>	700,000	700,000
रि 8	Inventories for sale or use			
Assets 9 10a	Prepaid expenses and deferred charges	156,532	166,067	166,063
<b>₹</b> 10a	Investments – U S and state government obligations (attach schedule)			
b	Investments – corporate stock (attach schedule)			
С	Investments – corporate bonds (attach schedule)			
11	Investments – land, buildings, and equipment basis   6,487,483			
İ	Less accumulated depreciation (attach sch ) ► STMT 7 1,177,446	5,712,775	5,310,037	5,942,861
12	Investments – mortgage loans			
13	Investments – other (attach schedule) SEE STATEMENT 8	6,273,605	6,889,453	6,889,453
14	Land, buildings, and equipment basis ▶			
	Less accumulated depreciation (attach sch.)			
15	Other assets (describe ▶ )	ļ		
16	Total assets (to be completed by all filers – see the	1	İ	
	instructions. Also, see page 1, item I)	12,230,509	13,351,918	13,984,738
17	Accounts payable and accrued expenses	201,686	151,161	
18	Grants payable			
. <u>š</u> 19	Deferred revenue SEE STATEMENT 9		492,580	
<u>≨</u> 20	Loans from officers, directors, trustees, and other disqualified persons			
Liabilities 02 19 20 21 20 21 20 20 20 20 20 20 20 20 20 20 20 20 20	Mortgages and other notes payable (attach schedule)			
22	Other liabilities (describe ▶ )			
23	Total liabilities (add lines 17 through 22)	201,686	643,741	
	Foundations that follow SFAS 117, check here			
24	and complete lines 24 through 26 and lines 30 and 31.			
24	Unrestricted	ļ		
Net Assets or Fund Balar 25 26 27 27 30 31	Temporarily restricted			
26	Permanently restricted			
ᆁ	Foundations that do not follow SFAS 117, check here			
<u></u>	and complete lines 27 through 31.			
g 27	Capital stock, trust principal, or current funds	<del></del>		
28	Paid-in or capital surplus, or land, bldg, and equipment fund	10 000 000		
S 29	Retained earnings, accumulated income, endowment, or other funds	12,028,823	12,708,177	
<b>필</b> 30	Total net assets or fund balances (see instructions)	12,028,823	12,708,177	
<b>2</b> 31	Total liabilities and net assets/fund balances (see	10 000 500	12 251 252	
<u> </u>	instructions)	12,230,509	13,351,918	
Part I		· · · · · · · · · · · · · · · · · · ·	<del> </del>	
	net assets or fund balances at beginning of year - Part II, column (a), line 30 (mu	ist agree with	1.1	12 020 022
	of-year figure reported on prior year's return)	•	1	12,028,823
	amount from Part I, line 27a		2	27,298
	r increases not included in line 2 (itemize) SEE STATEMENT 10	•	3	652,056
	ines 1, 2, and 3	• •	4	12,708,177
	eases not included in line 2 (itemize)	h) has 20	5	12 700 127
6 Iotal	net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (	D), IINE 3U		12,708,177

Part IV Capital Gains a	nd Losses for Tax on Investme	nt Income	<u> </u>			r age <b>c</b>	
	the kind(s) of property sold (for example, real estate, arehouse, or common stock, 200 shs MLC Co )		(b) How acquired P - Purchase D - Donation	(c) Date a (mo , da		(d) Date sold (mo , day, yr )	
1a GREENLEAF TRUST	INVESTMENT SALES L	<u> </u>	P				
b GREENLEAF TRUST	INVESTMENT SALES ST	C	P				
c FORM 6252 INSTA	ALLMENT SALE GAIN		D	01/01	L/12	04/07/17	
d			ļ		<u>.</u>		
_e			<u> </u>			<u> </u>	
(e) Gross sales price	(f) Depreciation allowed (or allowable)		or other basis ense of sale		(h) Gain ((e) plus (f	or (loss) ) minus (g))	
a 1,773,044			1,593,262		_	179,782	
ь 723,941			691,174			32,767	
_c 492,580						492,580	
_d							
_e			<u> </u>				
Complete only for assets snowin	g gain in column (h) and owned by the fo					(h) gain minus	
(i) FMV as of 12/31/69	(j) Adjusted basis as of 12/31/69		ss of col (i)	COI		less than -0-) or om col (h))	
	23.57 1275 1135		, dy, ii dity			179,782	
_a b				<del> </del>	<del></del>	32,767	
C	<del></del>					492,580	
d			*-			132/300	
e		<u>-</u>					
2 Capital gain net income or (net c	apital loss) If gain, also enter in If (loss), enter -0- in If			2		705,129	
3. Not short form capital gain or /lo	ss) as defined in sections 1222(5) and (6	_	}	2		703,123	
, - ,	s, column (c) See instructions If (loss), e						
Part I, line 8	, column (c) Gee matructions in (loss), e.			3		32,767	
	nder Section 4940(e) for Reduc	ed Tax on Net	Investment Inco			<u> </u>	
If section 4940(d)(2) applies, leave the	e foundations subject to the section 4940 his part blank ction 4942 tax on the distributable amount					Yes X No	
If "Yes," the foundation does not qua	alify under section 4940(e) Do not complete each column for each year, see the instru	te this part					
(a)		ctions before mak				(d)	
Base period years Calendar year (or tax year beginning in	(b) Adjusted qualifying distributions	Net valu	(c) ie of noncharitable-use assets	5		ribution ratio divided by col (c))	
2016		486	12,177,5	588	(00) (0)	0.059658	
		028	12,711,7			0.052395	
		832	13,387,5			0.054366	
2013		539	12,030,4			0.047342	
2012	217,	, 395	10,461,9			0.020780	
<u> </u>		-					
2 Total of line 1, column (d)				2		0.234541	
3 Average distribution ratio for the	5-year base period – divide the total on li	ne 2 by 5 0, or by t	:he		]		
number of years the foundation I	has been in existence if less than 5 years			3		0.046908	
4 Enter the net value of noncharita	ible-use assets for 2017 from Part X, line	5		4 12,862,15		12,862,158	
5 Multiply line 4 by line 3				_5_	5 603,338		
6 Enter 1% of net investment incom	me (1% of Part I, line 27b)			. 6		8,090	
7 Add lines 5 and 6				7		611,428	
8 Enter qualifying distributions from	n Part XII, line 4			8		775,879	
If line 8 is equal to or greater that		and complete that	nart using a 1% tax r	ate. See the	е		
			part asing a 170 tax it		•		
Part VI instructions						Form 990-PF (2017)	

<u>Form</u>	990-PF (2017) JIM GILMORE JR FOUNDATION 2 36-3584018				Pi	age <b>4</b>
_ <u>Pa</u>	rt VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 – see instructions)					
1a	Exempt operating foundations described in section 4940(d)(2), check here   and enter "N/A" on line 1	ĺ				
	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	1			8,0	<u> </u>
	here ▶ X and enter 1% of Part I, line 27b	1				
C	All other domestic foundations enter 2% of line 27b Exempt foreign organizations, enter 4% of					
	Part I, line 12, col (b)	- 1				
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only, others, enter -0-)	2				0
3	Add lines 1 and 2	3			8,0	90
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only, others, enter -0-)	4				0
5	Tax based on investment income. Subtract line 4 from line 3 If zero or less, enter -0-	5			8,0	<u> </u>
6	Credits/Payments					
а	2017 estimated tax payments and 2016 overpayment credited to 2017 6a 11,084					
b	Exempt foreign organizations – tax withheld at source 6b	Ì				
С	Tax paid with application for extension of time to file (Form 8868)  6c  8,000	ł				
d	Backup withholding erroneously withheld 6d 6d					
7	Total credits and payments Add lines 6a through 6d	7			19,0	)8 <u>4</u>
8	Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached	8				
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed	9				
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid	10			10,9	94
<u>1</u> 1	Enter the amount of line 10 to be Credited to 2018 estimated tax   10,994 Refunded	11				
_Pa	rt 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	No
	participate or intervene in any political campaign?		L	1a		<u> </u>
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes? See the					
	Instructions for the definition		L	1b		_X_
	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			J		
С	Did the foundation file Form 1120-POL for this year?					_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 ▶ \$	_				
е	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed		1	1	j	
	on foundation managers > \$		ĺ			
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?		-	2		<u> </u>
	If "Yes," attach a detailed description of the activities					
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of				ļ	
	incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes		L	3		_X_
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?		.	4a		<u>X</u>
b	If "Yes," has it filed a tax return on Form 990-T for this year?	N,	/A	4b		
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?		L	5		<u> </u>
	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		Ì	ľ	1	
	By language in the governing instrument, or					
	By state legislation that effectively amends the governing instrument so that no mandatory directions that			j	}	
	conflict with the state law remain in the governing instrument?		L	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	t XV	_	7	X	
8a	Enter the states to which the foundation reports or with which it is registered. See instructions   MI		İ		1	
b	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 General Instruction G? If "No," attach explanation			86	x	
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or		Γ			
	4942(j)(5) for calendar year 2017 or the taxable year beginning in 2017? See instructions for Part XIV If "Yes,"					7
	complete Part XIV			9		<u>_x</u> ″
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their		ſ			
	names and addresses	<u></u>		10	l	X
	-		Fo	m 99	0-PF	(2017)

_Pa	art VII-A Statements Regarding Activities (continued)			
			Yes	No
11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the	1	Į.,	
	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		Ì	
	person had advisory privileges? If "Yes," attach statement. See instructions	12		X
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	_13	X	
	Website address ► WWW.JGFDN.ORG			
14	The books are in care of ▶ CHRIS SHOOK Telephone no ▶ 269 -	381-	349	0
	162 E. MICHIGAN AVE.			
	Located at ► KALAMAZOO MI ZIP+4 ► 4900	· <b>7</b>		
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 – check here			▶
	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	- {		
	the foreign country ▶			Щ.
_ <u>Pa</u>	art VII-B Statements Regarding Activities for Which Form 4720 May Be Required	<del></del> _		
	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.	<u> </u>	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?			
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a	1	1	
	disqualified person?			1
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?	ļ		
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?  X Yes No			
	(5) Transfer any income or assets to a disqualified person (or make any of either available for			1
	the benefit or use of a disqualified person)?  Yes X No			İ
	(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 )  Yes X No			
b	If any answer is "Yes" to 1a(1)–(6), did any of the acts fail to qualify under the exceptions described in Regulations	45		x
	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	J	]	
С	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected before the first day of the tax year beginning in 2017?  N/A	1c		
2	were not corrected before the first day of the tax year beginning in 2017?  Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private	<u>  'C</u>		
2	operating foundation defined in section 4942(j)(3) or 4942(j)(5))		ĺ	ĺ
а	At the end of tax year 2017, did the foundation have any undistributed income (lines 6d and			
u	6e, Part XIII) for tax year(s) beginning before 2017?  Yes X No	1	1	l
	If "Yes," list the years ▶ 20 , 20 , 20 , 20			
ь	Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2)	ļ	)	
	(relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to			ĺ
	all years listed, answer "No" and attach statement – see instructions)	. 2b		
С	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here			
	<b>▶</b> 20 , 20 , 20 , 20	ł	ļ	
3a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise	1		
	at any time during the year?	ļ		
b	If "Yes," did it have excess business holdings in 2017 as a result of (1) any purchase by the foundation or	1		1
	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	j	j	
	the 10-, 15-, or 20-year first phase holding period? (Use Schedule C, Form 4720, to determine if the			1
	foundation had excess business holdings in 2017)  N/A	. 3b		
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a		X
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	<u></u> _	<u> </u>
		Form 9	90-PF	<sup>2</sup> (2017)

orm	1990-PF (2017) JIM GILMOR			584018			Page 6
<u> Pa</u>	art VII-B Statements Rega	rding Activities for Which I	Form 4720 May Be R	equired (cont	inued)		
5a	During the year did the foundation pa	y or incur any amount to					
	(1) Carry on propaganda, or otherwis	se attempt to influence legislation (s	ection 4945(e))?	\ \ \\	res 🗓 No		
	(2) Influence the outcome of any spe	ecific public election (see section 49	55), or to carry on,				
	directly or indirectly, any voter re	gistration drive?		<u> </u>	res 🔀 No	1	ļ
	(3) Provide a grant to an individual for	or travel, study, or other similar purp	oses?	\ <b>\</b> \	res 🛚 X No		
	(4) Provide a grant to an organization	n other than a charitable, etc , orgar	nization described in			1	
	section 4945(d)(4)(A)? See instru	ictions		\ \ \\	res 🛛 No		
	(5) Provide for any purpose other that	an religious, charitable, scientific, lite	erary, or educational		_ [		ſ
	purposes, or for the prevention of	f cruelty to children or animals?		\ \\ \	∕es X No		
þ	If any answer is "Yes" to 5a(1)–(5), di	d any of the transactions fail to qua	lify under the exceptions d	escribed in			
	Regulations section 53 4945 or in a c	urrent notice regarding disaster ass	istance? See instructions		N/A	5b	
	Organizations relying on a current no	tice regarding disaster assistance, o	check here		▶ []		İ
С	If the answer is "Yes" to question 5a(	4), does the foundation claim exemp	otion from the tax				}
	because it maintained expenditure re	sponsibility for the grant?		N/A 📗	res 🗌 No		Ì
	If "Yes," attach the statement require	d by Regulations section 53 4945–5	(d)				-
6a	Did the foundation, during the year, re	eceive any funds, directly or indirect	ly, to pay premiums				i i
	on a personal benefit contract?			\ \	′es 🛚 X No		
b	Did the foundation, during the year, p	ay premiums, directly or indirectly, o	on a personal benefit contr	act?		6b	X
	If "Yes" to 6b, file Form 8870						
7a	At any time during the tax year, was t	he foundation a party to a prohibited	d tax shelter transaction?	\ \\	es X No	- 1	
b	If "Yes," did the foundation receive ar				N/A	7b	
Pa	art VIII Information About	Officers, Directors, Trustee	es, Foundation Mana	agers, Highly	Paid Employe	es,	
	and Contractors						
<u>1 L</u>	ist all officers, directors, trustees, a	ind foundation managers and the	ir compensation. See ins	tructions.			
			(b) Title, and average	(c) Compensation	(d) Contributions to employee benefit	(e) Exp	ense account,
	(a) Name a	nd address	hours per week devoted to position	(If not paid, enter -0-)	plans and deferred		allowances
					compensation	<u> </u>	
SE	E STATEMENT 11						
		<del></del>				<u> </u>	
						ļ	
				·			
_					<u> </u>	L	
2	Compensation of five highest-paid "NONE."	employees (other than those inc	luded on line 1 - see insi	tructions). It non	e, enter		
	NONE.				(d) Contributions to	<del>-</del> -	<del></del>
	(a) Name and address of such association	van and man than \$50,000	(b) Title, and average hours per week	(c) Compensation	employee benefit	(e) Exp	ense account,
	(a) Name and address of each emplo	yee paid more than \$50,000	devoted to position	(c) compensation	plans and deferred compensation	other	allowances
	TO DOCUMENT DATE		COMMUNITAR		Compensation	<u> </u>	
	JE BROCKELBANK	KALAMAZOO	CONTROLLER	71 074	7 007		•
10	2 E MICHIGAN AVE	MI 49007	50.00	71,974	7,887		
					•	[	
			<del></del>				
—			<del>-  </del>				
	<del></del>						
	I number of other employees paid over	\$50,000				<del></del>	

Form 990-PF (20	17) JIM GILMORE JR FOUNDATION	<u> 36-3584</u> 018		Page <b>7</b>
Part VIII	Information About Officers, Directors, Trustees, For and Contractors (continued)	undation Managers, Highly Paid E	Employe	es,
3 Five high	est-paid independent contractors for professional services. See in	nstructions. If none, enter "NONE."		
	(a) Name and address of each person paid more than \$50,000	(b) Type of service		(c) Compensation
NONE				<u>· · · · · · · · · · · · · · · · · · · </u>
			1	
Total number of	others receiving over \$50,000 for professional services			0
Part IX-A	Summary of Direct Charitable Activities			
	s four largest direct charitable activities during the tax year. Include relevant statistical information between the produced, etc.	ation such as the number of		Expenses
1 N/A			1	
2			<del> </del>	
-				
			<del> </del>	·
3				
4				
Part IX-B	Summary of Program-Related Investments (see in:	structions)		
	rgest program-related investments made by the foundation during the tax year on lines 1 and	2		Amount
1 N/A				
2				
All other program-re	elated investments. See instructions	<del></del>	<del> </del>	
3				
Total. Add lines	1 through 3		+	

### Part XII

qualifies for the section 4940(e) reduction of tax in those years

а	Expenses, contributions, gifts, etc. – total from Part I, column (d), line 26	1a	775,879
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		
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	775,879
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	8,090
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	767,789
	Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the fo	undation	

Form 990-PF (2017)

<u>Pa</u>	rt XIII Undistributed Income	(see instructions)				
			(a)	(b)	(c)	(d)
1	Distributable amount for 2017 from Part	XI,	Corpus	Years prior to 2016	2016	2017
	line 7					635,018
2	Undistributed income, if any, as of the er	nd of 2017				
а	Enter amount for 2016 only				80,966	·
b	Total for prior years 20 , 20	, 20				
3	Excess distributions carryover, if any, to	2017				
а	From 2012					
b	From 2013					
С	From 2014					
d	From 2015					
е	From 2016					
f	Total of lines 3a through e					
4	Qualifying distributions for 2017 from Pai	rt XII,				
	line 4 ▶ \$775,879					
а	Applied to 2016, but not more than line 2	a			80,966	
b	Applied to undistributed income of prior y	rears				
	(Election required – see instructions)					
С	Treated as distributions out of corpus (El	ection				
	required – see instructions)					
d	Applied to 2017 distributable amount	Ī				635,018
	Remaining amount distributed out of corp	ous	59,895			
5	Excess distributions carryover applied to					
	(If an amount appears in column (d), the	Г				
	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 Subtrac	ct line 5	59,895			
	Prior years' undistributed income Subtra					
	line 4b from line 2b				•	
С	Enter the amount of prior years' undistrib	uted				
Ī	income for which a notice of deficiency h					
	been issued, or on which the section 494					
	tax has been previously assessed	12(4)				
d	Subtract line 6c from line 6b Taxable	ļ				·
_	amount – see instructions					
A	Undistributed income for 2016 Subtract	line				
·	4a from line 2a Taxable amount – see					
	instructions	ľ	}		1	
f	Undistributed income for 2017 Subtract	lines	-			
	4d and 5 from line 1. This amount must l	i				
	distributed in 2018					0
7	Amounts treated as distributions out of c	ornus				
	to satisfy requirements imposed by secti	•				
	170(b)(1)(F) or 4942(g)(3) (Election may	1				
	required—see instructions)	1	}			
8	Excess distributions carryover from 2012	not				<del></del>
	applied on line 5 or line 7 (see instruction					
9	Excess distributions carryover to 2018	· ·				
-	Subtract lines 7 and 8 from line 6a		59,895			
0	Analysis of line 9	ţ				·
а	Excess from 2013					
b	Excess from 2014		J		j	
6	Excess from 2015					
d	Excess from 2016					
e	Excess from 2017	59,895		Į		

FOA4266C212 08/22/2018 11 03 AM

Supplementary Information (continued) 3 Grants and Contributions Paid During the Year or Approved for Future Payment If recipient is an individual, Recipient Purpose of grant or show any relationship to status of Amount contribution any foundation manager recipient Name and address (home or business) or substantial contributor Paid during the year SEE STATEMENT 14 539,531 539,531 Total **b** Approved for future payment SEE STATEMENT 15 503,668 503,668 ▶ 3b Total

Part >	(VI-A Analysis of Income-Producing Ac	tivities				
	ss amounts unless otherwise indicated					
		(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	(e) Related or exempt function income
1 Progr	am service revenue					(See instructions )
		-		<u> </u>		
	<del></del>	-				
		-				
		ľ		<b></b>		
e						
_ f	<del></del>			+		
_	ees and contracts from government agencies	<u> </u>		1		····
	bership dues and assessments			111	26 007	<del></del>
	est on savings and temporary cash investments			14	26,997	· <u>·</u>
	ends and interest from securities	-		+ + + +	142,667	<del></del>
	ental income or (loss) from real estate		<del></del>	+		
	ebt-financed property			16	157,507	<u> </u>
	lot debt-financed property			+ + 6	157,507	
	ental income or (loss) from personal property investment income			+		
	or (loss) from sales of assets other than inventory			16	705,129	
	come or (loss) from special events	· · · · · · · · · · · · · · · · · · ·	<del></del>	25	13,091	<del></del>
	s profit or (loss) from sales of inventory	-		123	13,032	/· · · · · · · · · · · · · · · · · ·
	revenue a					
	ISCELLANEOUS INCOME	-		16	100,185	
		-		<del>   </del>		
		-	<del></del>			
e						
	otal Add columns (b), (d), and (e)		(	5	1,145,576	0
	. Add line 12, columns (b), (d), and (e)				13	
	(sheet in line 13 instructions to verify calculations )	_				
Part X		ccomplishm	ent of Exempt P	urpose	s	
Line N	lo. Explain below how each activity for which income accomplishment of the foundation's exempt purp					one )
N/Z		(0.1101 1.1101	by providing famour.	oudii pu	(See monde	
/-		<del></del>				
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		Exempt Organiz	ations		a manoaotic	mo una resultationompo w		u. Itubic		
1 0	old the orga			ge in any of the fol	lowing with any	other organization described			Yes	No
		01(c) (other than sec				<u>-</u>				
0	rganizatior	ns?								
аT	ransfers fr	om the reporting foun	dation to a no	ncharitable exem	pt organization o	ıf				
(1	I) Cash							1a(1)		X
(2	2) Other a	ssets						1a(2)		X
ьс	ther transa	actions								
(*	I) Sales o	f assets to a nonchari	table exempt	organization				1b(1)		Х
(2	2) Purchas	ses of assets from a n	oncharitable	exempt organizati	on			1b(2)		X
(;	3) Rental o	of facilities, equipmen	t, or other ass	sets				1b(3)		X
(4	) Reimbu	rsement arrangement	S					1b(4)		X
		r loan guarantees						1b(5)		X
•	•	ance of services or m	•	-				1b(6)		X
	_	acilities, equipment, n	-		· ·			1c		X
						mn (b) should always show the f				
			_		-	the foundation received less tha				
	alue in any Line no			of noncharitable exemp		the goods, other assets, or serv				
$\sqrt{A}$	Line no	(b) Amount involved	(C) Name	e of noncharitable exemp	prorganization	(d) Description of transfers, to	arisactions, and	snaring arrangeme	riis	
N/A			<del> </del>						<del></del>	
	<del></del>		<del> </del>		<del></del>					
			<del>                                     </del>		<del></del>		<del>_</del>	<del>.</del>		
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								-		
2a Is	the found	ation directly or indire	ctly affiliated	with, or related to,	one or more tax	-exempt organizations			-	
d	escribed in	section 501(c) (other	than section	501(c)(3)) or in se	ection 527?			Y	es X	No
b If	"Yes," cor	nplete the following so	chedule			·				
	<del></del>	) Name of organization		(b) Type of o	rganization	(c) Descri	otion of relationsh	nip		
N/	<u>/A</u>	<del></del>		l 						
		·	<del>-</del>	<del></del>						
	Lindar oor	alties of parties. I declare the	nat I have evamin	and this return, including	a accompanyon sch	edules and statements, and to the best of	my knowledge c	and bolief it is to i		
	correct, a	nd complete Declaration of	preparer (other ti	han taxpayer) is based	on all information of	which preparer has any knowledge				
••			1//	()/1				e IRS discuss this r e preparer shown b		
See instructions Yes					_	No				
lere		7M7.1241	ー1なし	/ <del>L</del>	⊥ <i>D</i> '	9/11/8018 N PRES				
	Sugar	ature of officer or trustee	<del>\</del>		Date	Title	IDENT			
	<del></del>				<del> </del>				r	
	Print/Ty	pe preparer's name			Preparer's signatu	re		Date	Check	ıf
aid	PHOM	DA L. NEWMAN			RHONDA L.	NRWMAN		08/22/18	setf-em	ployed
repar	er		EN VALE	THOMPSON			T	00/24/18	<u> </u>	
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### FOA4266C212 Jim Gilmore Jr Foundation 36-3584018

FYE: 12/31/2017

### Federal Statements

## Statement 2 - Form 990-PF, Part I, Line 16a - Legal Fees

Charitable Purpose	\$ 13,479	\$ 13,479
Adjusted Net	v	v.
Net nvestment	4,125 22,218 615 2,385 3,525	32,868
<u>-</u>	w	w
Total	17,604 22,218 615 2,385 3,525	46,347
	w	w
Description	LEGAL FEES-FDN 155 W MICHIGAN AVE 124 S KALAMAZOO MALL 151 S ROSE ST MICHIGAN BLDG	TOTAL

# Statement 3 - Form 990-PF, Part I, Line 16b - Accounting Fees

Description		Total	<u>=</u>	Net Investment	Adjusted Net	Charitable Purpose	ole se
ACCOUNTANT FEES	₩	2,550	₩.	1,275	S	\$ 1,275	,275
TOTAL	w	2,550	w	1,275	\$	\$	, 275

FOA4266C212 Jim Gilmore Jr Foundation 36-3584018 FYE: 12/31/2017	Federal	Federal Statements		8/22/2018 11:03 AM
Statement 4	- Form 990-PF, Part	Statement 4 - Form 990-PF, Part I, Line 16c - Other Professional Fees	ofessional Fees	
Description	Total	Net Investment	Adjusted Net	Charitable Purpose
PAYROLL PROCESSING FEES INVEST MGMT FEES BDOFFECTOMY FEES	\$ 1,071	\$ 49,257	w	\$ 1,071
151 S ROSE ST MICHIGAN BLDG	43,853 3,293	43,853		ស្ត
TOTAL	\$ 98,029	\$ 96,403	w.	\$ 1,626
Sta	Statement 5 - Form 990-PF,	Part I, Line 18 -	Taxes	
Description	Total	Net Investment	Adjusted Net	Charitable
ERTY TAX	\$ 11,567	\$ 6,940	w	\$ 4,627
155 W MICHIGAN AVE 124 S KALAMAZOO MALL 151 S POSE ST	2,979	2,979		
Z E	160,804 5,224 14,538	160,804 5,224 . 14.538		
TOTAL	\$ 202,722	-l -ll	\$	\$ 4,627
Statement 6	nt 6 - Form 990-PF, Part I	, Line 23 -	Other Expenses	
Description	Total	Net Investment	Adjusted Net	Charitable
GOLF OUTING OTHER EXPENSES	\$ 6,649	w	w.	w.
155 W MICHIGAN AVE INSURANCE UTILITIES REPAIRS & MAINTENANCE	400 381 475	400 381		
	•	~		
				4-6

FOA4266C212 Jim Gilmore Jr Foundation 36-3584018 FYE: 12/31/2017	Federal S	Federal Statements		8/22/2018 11:03 AM	33 AM
Statement 6 - Form 990-Pl	rm 990-PF, Part I, I	F, Part I, Line 23 - Other Expenses (continued)	ises (continued)		
Description	Total	Net Investment	Adjusted Net	Charitable Purpose	
S KALAMAZOO MALL INSURANCE REPAIRS & MAINTENANCE INVESTMENT DEPRECIATION	\$ 685 4,700 2,245	\$ 685 4,700 2,245	<b>v</b> r	w	
S ROSE ST TELEPHONE SUPPLIES CONTRACT SERVICES ADVERTISING INSURANCE REPAIRS & MAINTENANCE UTILITIES	4,546 28,631 163,466 6,848 23,056 102,556 329,400 146,229	4,546 28,631 163,466 6,848 23,056 102,556 329,400 146,229			
2 PORTAGE RD INSURANCE REPAIRS & MAINTENANCE UTILITIES CONTRACT SERVICES INVESTMENT DEPRECIATION	1,157 1,346 7,172 1,468 2,822	1,157 1,346 7,172 1,468 2,822			
HIGAN BLDG REPAIRS & MAINTENANCE UTILITIES SUPPLIES CONTRACT SERVICES	9,567 13,575 1,028 917 6,848	9,567 13,575 1,028 917 6,848			•
INSURANCE	8,044 235 4,049 5,076 4,223	4,826 4,049 2,827 2,352 33		3,2 2,2 1,8	218 235 249 871
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### FOA4266C212 Jim Gilmore Jr Foundation 36-3584018 FYE: 12/31/2017

Federal Statements

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(continued)
ther Expenses
e 23 - O
Part I. Line
orm 990-PF, F
Statement 6 - Form

Charitable Purpose	· v	\$ 7,573
Adjusted Net	w.	w
Net Investment	\$ 8,763	\$ 886,348
Total	\$ 15,736	\$ 907,543
Description	INVESTMENT DEPRECIATION	TOTAL

# Statement 7 - Form 990-PF, Part II, Line 11 - Land, Building, and Equipment Investments

Net FMV	\$ 435,861 3,930,220 762,000 114,390 249,780 238,000 40,610 22,000	\$ 5,942,861
End Accumulated Depreciation	\$ 16,313 43,408 740,376 363,015 14,334	\$ 1,177,446
End Cost / Basis	\$ 58,300 435,861 4,527,023 677,757 110,067 88,895 300,000 211,580 39,000 39,000	\$ 6,487,483
Beginning Net Book	e	\$ 5,712,775
Description	124 S KALAMAZOO MALL-BLDG 151 S ROSE ST-IMPROVEMENTS 151 S ROSE ST-BLDG MICHIGAN AVE-BLDG 1122 PORTAGE ST-BLDG LAND-155 W MICHIGAN LAND-124 S KALAMAZOO MALL LAND-1151 S ROSE ST LAND-MICHIGAN AVE LAND-MICHIGAN AVE LAND-1122 PORTAGE ST LAND-1138 PORTAGE ST WORK IN PROCESS	IOIAL

# Statement 8 - Form 990-PF, Part II, Line 13 - Other Investments

Fair Market Value	\$ 191,201 6,698,252	\$ 6,889,453
Basis of Valuation	MARKET MARKET	
End of Year	\$ 191,201 6,698,252	\$ 6,889,453
Beginning of Year	\$ 166,290 6,107,315	\$ 6,273,605
Description	GCG PORTAGE, LLC GREENLEAF TRUST	TOTAL

FOA4266C212 Jim Gilmore Jr Foundation

36-3584018

### Federal Statements

FYE: 12/31/2017

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### Statement 9 - Form 990-PF, Part II, Line 19 - Deferred Revenue

Description	Beginning <u>of Year</u>	 End of Year
DEFERRED INSTALLMENT SALE GAIN	\$	\$ 492,580
TOTAL	\$0	\$ 492,580

### Statement 10 - Form 990-PF, Part III, Line 3 - Other Increases

Description	Amount
UNREALIZED GAINS ON INVESTMENTS	\$ 652,056
TOTAL	\$ 652,056

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### FOA4266C212 Jim Gilmore Jr Foundation 36-3584018 FYE: 12/31/2017

### Federal Statements

Statement 11 - Form 990-PF, Part VIII, Line 1 - List of Officers, Directors, Trustees, Etc.	90-PF, Part VIII, Line Etc.	le 1 - List of ic.	f Officers, Directors	, Trustees,	
Name and Address	Title	Average Hours	Compensation	Benefits	Expenses
CASE HOOGENDOORN 122 S. MICHIGAN AVENUE, SUITE 1220 CHICAGO IL 60603	SECRETARY/TR	1.00	0	0	0
ELIZABETH GILMORE BYSTRYCKI 1191 108TH AVE OTSEGO MI 49078-8701	DIRECTOR	1.00	0	0	0
RUTH GILMORE LANGS 113 NAUTILUS DRIVE ISLAMORADA FL 33036	DIRECTOR	1.00	0	0	0
CHRISTOPHER SHOOK 162 E MICHIGAN AVE KALAMAZOO MI 49007	PRESIDENT	50.00	179,952	14,062	0
GEORGE LENNON 151 S ROSE ST, STE 900 KALAMAZOO MI 49007	DIRECTOR	4.00	14,000	0	0
MARIETTE LEMIEUX 1051 DOGWOOD DR PORTAGE MI 49024	CHAIR	1.00	0	0	0

FOA4266C212 Jim Gilmore Jr Foundation

36-3584018

### **Federal Statements**

FYE: 12/31/2017

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### Statement 12 - Form 990-PF, Part XV, Line 2a - Name, Address and Email for Applications

Description

CHRIS SHOOK 269-381-3490 162 EAST MICHIGAN AVE KALAMAZOO MI 49007 CSHOOK@JGFDN.ORG

### Form 990-PF, Part XV, Line 2b - Application Format and Required Contents

Description

SEE ATTACHED

### Form 990-PF, Part XV, Line 2c - Submission Deadlines

Description

SEE ATTACHED

### Statement 13 - Form 990-PF, Part XV, Line 2d - Award Restrictions or Limitations

Description

FOR PUBLIC AND CHARITABLE CAUSES PRIMARILY WITHIN THE COMMUNITY OF KALAMAZOO, MICHIGAN, WITH PARTICULAR EMPHASIS ON THE IMPROVEMENT OF DOWNTOWN KALAMAZOO.

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## FOA4266C212 Jim Gilmore Jr Foundation 36-3584018 FYE: 12/31/2017

Federal Statements

		Amount	10,000		000'9	2,000	13,000	12,000	10,031	25,000	30,000	200	20,000	10,000	200	20,000	1,000	20,000	
Year		Purpose	PURCHASE EQUIPMENT	PSYCHIATRIC CRISIS INTERVENTION UNIT	OPERATIONS	PROGRAMS	OPERATIONS	OPERATIONS	OPERATIONS	CRITICAL HOME REPAIRS	BATES ALLEY/COMPLETE ST COALITIONS	OPERATIONS	CAPITAL CAMPAIGN JF.	PROGRAM	PROGRAMS	COMPUTER SYSTEM UPGRADES	PROGRAMS	CAPITAL CAMPAIGN	
1	Address	Relationship Status	OVE	GULL RD PUBLIC	1550 S STATE STE 107 PUBLIC 301 JOHN ST ROY C	PUBLIC PUBLIC W KTI.GORF PT		E	ט נ	MTCH	E MICH AVE SIE PUBLIC 7 OLD LEEDS RD		VEST N	PUBLIC S KALAMAZOO AV	PUBLIC PD CITTUDE	2323 GOLL KU, SOLIE A PUBLIC		PUBLIC SITTE	TIOO N MAIN, SOLIE ZIO
	Name	Address	BAPTIST HEALTH FOUNDATION TAVERNIER FL 33070 NONE	EUKGESS FOUNDAIION KALAMAZOO MI 49048 RDIGHT DEOMISE EINT FOR	CHICAGO IL 60605  CROSON HEALTH FOUNDATION		KALAMAZOO MI 49008 CENTER FOR PUBLIC JUSTICE			KALAMAZOO MI 49001 NONE DOWNTOWN KALAMAZOO INC	KALAMAZOO MI 49007 ETERNAL WORD TELEVISION NETWORK	IRONDALE AL 35210 NONE FAMILY & CHILDREN SERVICES	KALAMAZOO MI 49001 FIRST CONGREGATIONAL CHURCH	KALAMAZOO MI 49007 NONE GENEROUS HANDS	VICKSBURG MI 49097 NONE GUARDIAN FINANCE & ADVOCACY SYCS	49048	RICHLAND MI 49083 HOSPITAL HOSPITALITY HOUSE	KALAMAZOO MI 49007 HURON RIVER WATERSHED COINCIL	ANN APPOP MI A0104

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Federal Statements

FOA4266C212 Jim Gilmore Jr Foundation 36-3584018 FYE: 12/31/2017

Name		Address		
Address	Rel	Relationship Status	Is Purpose	Amount
INTERCAMBIO UNITING COMMUNITIES	က္ဆ	4735 WALNUT ST #B		
BOULDER CO 80301 JUNIOR ACHIEVEMENT OF SW MI	NONE	PUBLIC 350 E MICHIGAN AVE	OPERATIONS #105	3,000
	NONE	• 1		
		329 S PARK ST		000
KALAMAZOO MI 49007	NONE		CAPITAL CAMPAIGN	16,666
KALAMAZOO COMMUNITY FOUNDATION		402 E MICHIGAN AVE		
KALAMAZOO M1 49007 KALAMAZOO IN BLOOM	NONE	PUBLIC PO BOX 20178	BRONSON PARK 21ST CENTURY FUND	25,000
KALAMAZOO MI 49019	NONE	: :	BRONSON PARK PLANTING	Ц
		6767 W O AVE		000'6
KVCC FOINDATION	NONE		CAPITAL CAMPAIGN	33,334
•	TINOIN	A O M		
- 73	ANON THE	PO BOX 32783	PROGRAMS	15,000
DETROIT MI 48232	NONE		OPERATIONS	
LAKESIDE FOR CHILDREN		3921 OAKLAND DR		000'T
KALAMAZOO MI 49008	NONE	PUBLIC	CAPITAL CAMPAIGN	000
LIVLYME FOUNDATION		700 N COLORADO BLVD	#674	000
DENVER CO 80206	NONE	PUBLIC	PROGRAMS	003 0
MINISTRY WITH COMMUNITY		500 N EDWARDS ST		006,2
KALAMAZOO MI 49007	NONE	PUBLIC	CHEFS AGAINST HUNGER	000
OUT FRONT KALAMAZOO		340 S ROSE ST		000
KALAMAZOO MI 49007	NONE	PUBLIC	PROGRAMS	2,500
SAINI JUSEPH CATHOLIC CHURCH		936 LAKE ST		•
KALAMAZOO MI 49001 SDAN	NONE	PUBLIC	OPERATIONS	1,500
		835 NORTH ST		
20 80304	NONE		OPERATIONS	3,000
ັດ		2232 S MAIN ST #161		
ANN ARBOR MI 48103	NONE		OPERATIONS	12.500
R SCHOOL		13351 WEST M-96		
AUGUSTA MI 49012	NONE	,	OPERATIONS	3,000
ANN APPOP MT 48109	SCRL GNF	625 SIAIE SI		
N 0 1 0 1	NONE	PUBLIC	OPERATIONS	2,000

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### FOA4266C212 Jim Gilmore Jr Foundation 36-3584018

### Federal Statements

FYE: 12/31/2017

	Amount		15.000		20.000		30,000	539,531
	Purpose		HEALTHY LIVING SKILLS		KAL COLLABORATIVE CARE PROJECT		CAPITAL CAMPAIGN	
Address	Status	CENTRE AVE	PUBLIC	ND DR	PUBLIC	MAPLE ST	PUBLIC	
<i>f</i>	Relationship	1150 W CEN	NONE	1000 OAKLAND DR	NONE	1001 W MAP	NONE	
Name	Address	TRAUMA RECOVERY ASSOCIATES	PORTAGE MI 49024	WMU MED SCHOOL	KALAMAZOO MI 49008	YMCA OF GREATER KALAMAZOO	KALAMAZOO MI 49008	TOTAL

# Statement 15 - Form 990-PF, Part XV, Line 3b - Grants and Contributions Approved for Future Pmt

	Amount		10 000	000	20.000	2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2	192,000		20 000		16,668	0000	25.000		000.06	,	30.000		10,000
	Purpose		LINCOLN PROJECT		FACILITIES UPGRADE		PROJECTS	JE	OPERATIONS		CAPITAL CAMPAIGN		BRONSON PARK 21ST CENTURY FUND	TE	BUILDING PROJECT	VE	BUILDING PROJECT		FACILITIES UPGRADE
Address	Status	KALAMAZOO MALL	PUBLIC	OAKLAND DRIVE	PUBLIC	MICH AVE STE 501	PUBLIC	345 WEST MICHIGAN AVENUE	PUBLIC	ST	PUBLIC	MICHIGAN AVE	PUBLIC	NORTH BURDICK STREET	PUBLIC	SOUTH WESTNEDGE AVE	PUBLIC	E STREET	PUBLIC
4	Relationship	359 S KALA		1541 OAKLA		141 E MICH		345 WEST M		329 S PARK ST		402 E MICH		448 NORTH		4329 SOUTH		901 PORTAGE STREET	
Name	Address	ARTS COUNCIL OF GREATER KALAMAZOO	KALAMAZOO MI 49007 NONE	BUREAU OF SVCS FOR BLIND PERSONS	KALAMAZOO MI 49008 NONE	DOWNTOWN KALAMAZOO INC.	KALAMAZOO MI 49007 NONE	FIRST CONGREGATIONAL CHURCH	KALAMAZOO MI 49007 NONE	KALAMAZOO CIVIC THEATRE	KALAMAZOO MI 49007 NONE	KALAMAZOO COMMUNITY FOUNDATION	KALAMAZOO MI 49007 NONE	KALAMAZOO GOSPEL MISSION	KALAMAZOO MI 49007 NONE	KALAMAZOO HUMANE SOCIETY	KALAMAZOO MI 49008 NONE	KALAMAZOO LOAVES & FISHES	KALAMAZOO MI 49001 NONE

FOA4266C212 Jim Gilmore Jr Foundation 36-3584018 FYE: 12/31/2017

8/22/2018 11:03 AM

Federal Statements

Statement 15 - Form 990-PF, Part XV, Line 3b - Grants and Contributions Approved for Future Pmt (continued)

	Amount		30.000		30.000		30,000	503,668
	Purpose		CAPITAL CAMPAIGN		BUILDING RESTORATION PROJECT		CAPITAL CAMPAIGN	
Address	Status	ND DR	PUBLIC	SOUTH STREET	PUBLIC	MAPLE ST	PUBLIC	
4	Relationship	3921 OAKLAND DR		219 W SOUT		1001 W MAP		
	Re		NONE		NONE		NONE	
Name	Address	LAKESIDE FOR CHILDREN	KALAMAZOO MI 49008	PARK CLUB HISTORIC FOUNDATION	KALAMAZOO MI 49007	YMCA OF GREATER KALAMAZOO	KALAMAZOO MI 49008	TOTAL

(10)

Totals

	000 55		Oth	er Notes	and L	oans Recei	vable		1 251
Form	990-PF	For	calendar year 2017, o	r tay waar bac	nning		and ending		2017
lame	<del> </del>	I FOL	Calcilual year 2017, 0	i tax year begi	ишц		, and ending	Employe	er Identification Numb
TTM	GTI WODE	TD EIC	NIDID A MIT ON					36 3	E94010
JIM	GILMORE C	JR FC	DUNDATION					<u> </u>	584018
FORM	1 990-PF,	PART	TII, LINE	7 - ADD	ITIO	NAL INFOR	MATION		
		Nai	me of borrower				Relationship to dis	squalified pe	erson
	/R - \$700,		6%, DUE 0	4/07/20	35				
2)								·	<del></del>
3) 4)							····		
5)									
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7)							<del>-</del>		
8)									
9)									
10)									
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	Original amount borrowed	t	Date of loan	Maturity date	·		Repayment terms		Interest rate
1)									
2)									
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4)							·		
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6)									
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8)					<del></del> +				
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10)									
_			dad bu bassassa				Durnage	of loop	
1)	Sec	curity prov	vided by borrower				Purpose	orioan	<del></del>
2)				<del> </del>			<del></del>		
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		******				alance due at	Balance due		Fair market value
1)	Considera	ation furn	ished by lender		- be	eginning of year	end of year		700,00
1) 2)							100,	333	700,00
3)				<u> </u>			<del>                                     </del>		
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