Porm 990-PF
Department of the Treasture 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

2017

Open to Public Inspection

		3	TO MIDERACTIONS AND	1110 14100	· iiiioiiiiatioi	ii. posi	to rabite inspection
For	calend	far year 2017 or tax year beginning	, 2017, a	nd ending	9		, 20
Na	me of fo	oundation			A Employer	identification number	
_T	HE HU	JRST FOUNDATION			38-6089	9457	
Nı	ımber a	nd street (or PO box number if mail is not delivered to street address)	Ro	om/suite	B Telephone	number (see instructions	)
_1	500 H	HATCH RD			(517)74	10-0333	
Cı	ty or tow	vn, state or province, country, and ZIP or foreign postal code			C If exempts	ion application is pending	, check here
	ACKSC	ON, MI 49201				**************************************	
G	heck a	all that apply Initial return Initial return	of a former public chari	ty	D 1 Foreigi	n organizations, check he	re · · · . ▶
		Final return Amended return	urn	1	2 Foreign	n organizations meeting ti	he 85% test
		Address change Name change	e	11		here and attach computat	
H	heck t	ype of organization X Section 501(c)(3) exempt priva	ate foundation	TH	F If onvate t	foundation status was ten	minated under
	Section	on 4947(a)(1) nonexempt charitable trust Other ta	axable private foundati	oh \		07(b)(1)(A), check here	
I F	aır ma	rket value of all assets at J Accounting method	X Cash	Accrual	F If the four	ndation is in a 60-month te	ermination —
•	end of y	rear (from Part II, col. (c), Uher (specify)				ction 507(b)(1)(B), check	
_1	ne <u>16)</u>		on cash basis)				
Pa	irt 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		investment come	(c) Adjusted net	for charitable purposes
		the amounts in column (a) (see instructions) )	books		-	income	(cash basis only)
١	1	Contributions, gifts, grants, etc., received (attach schedule)	751,934				
•	2	Check ▶ ☐ If the foundation is <b>not</b> required to attach Sch B · ·					
	3	Interest on savings and temporary cash investments · · · ·	755		755		
	4	Dividends and interest from securities	136,014	<u></u>	136,014		
	5a	Gross rents · · · · · · · · · · · · · · · · · · ·					ļ
	b	Net rental income or (loss)					
<u> 0</u>	6a	Net gain or (loss) from sale of assets not on line 10 · · · · ·	724,178				<u></u>
, ଏଧୀଙ୍ଗ tevenue	b	Gross sales price for all assets on line 6a 1,331,077					
⋾⋛	7	Capital gain net income (from Part IV, line 2)			724,178	- DEAGN -	
ଏ ଫୁ	8	Net short-term capital gain				RECEIVE	D
-:	9 ,	Income modifications				8 4110 003 00	18
<u>.</u>	10a	Gross sales less returns and allowances · ·				AUG # 3 20	18 3
7	b	Less Cost of goods sold · · · · · · ·				OCOCN	<u> </u>
<u> </u>	C	Gross profit or (loss) (attach schedule)				OGDEN, L	
	11	Other income (attach schedule)					
<i>i</i> ,	12	Total. Add lines 1 through 11	1,612,881		860,947	<u> </u>	<del> </del>
Œ	13	Compensation of officers, directors, trustees, etc		ļ			
~}∕ enses	14	Other employee salaries and wages		<u> </u>			
Je.	15	Pension plans, employee benefits		<del> </del>			
X	16a	Legal fees (attach schedule) STM107	19,599	<del> </del>	19,599	ļ	<del> </del>
ē	b	Accounting fees (attach schedule)		-		<del></del>	<del></del>
ati	C	Other professional fees (attach schedule)				<del> </del>	<del> </del>
Str	17	Interest		<del> </del>	4 000	<del> </del>	<del> </del>
ij	18	Taxes (attach schedule) (see instructions) · · · · STM110	4,360	<del> </del>	4,360	<del> </del>	<del> </del>
Ε	19	Depreciation (attach schedule) and depletion		<del> </del>		<del> </del>	<del> </del>
Ă	20	Occupancy		<del> </del>		<del> </del>	<del>                                     </del>
pu	21	Travel, conferences, and meetings		<del> </del>			<del> </del>
2	22	Other expenses (attach schedule) STM103		<del>                                     </del>	1 665	<del>                                     </del>	<del>                                     </del>
ij	23 24	Total operating and administrative expenses.	1,665	<del> </del>	1,665	<del> </del> -	<del>                                     </del>
e La	24	Add lines 13 through 23 · · · · · · · · · · · · · · · · · ·	05 604		05 604		
Operating and Administrative Exp	25	Contributions, gifts, grants paid	25,624		25,624		572 422
	1	Total expenses and disbursements. Add lines 24 and 25	573,432		25 624	<del> </del>	573,432
_	26	Subtract line 26 from line 12.	599,056	<del>' </del>	25,624		573,432
	a a	Excess of revenue over expenses and disbursements	1 013 005				j
	b	Net investment income (if negative, enter -0-)	1,013,825	<del> </del>	935 222	<del></del>	<del> </del>
	"	Adjusted net income (if negative enter -0-)		<del> </del>	835,323	<del> </del>	<del> </del>

Page 2

Pa	ırt II	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	613,243	381,382	381,382
	2	Savings and temporary cash investments			
	3	Accounts receivable ▶			
	İ	Less allowance for doubtful accounts			
	4	Pledges receivable			
		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 (attach schedule)			
	′	Less allowance for doubtful accounts			
S	。			-	
Assets	8	Inventories for sale or use			
ŝ	9	Prepaid expenses and deferred charges			
	I	Investments - U S and state government obligations (attach schedule)	_		<del></del>
	b	investments - corporate stock (attach schedule) · · · · STM137	8,520,464	9,327,294	11,953,943
	C	Investments - corporate bonds (attach schedule)			
	11	Investments - land, buildings, and equipment basis ▶		İ	
		Less accumulated depreciation (attach schedule)			
	12	Investments - mortgage loans			
	13	Investments - other (attach schedule)			
	14	Land, buildings, and equipment basis			
		Less accumulated depreciation (attach schedule)			
	15	Other assets (describe STM120 )		428,434	456,510
	16	Total assets (to be completed by all filers - see the		•	
		instructions Also, see page 1, item I)	9,133,707	10,137,110	12,791,835
_	17	Accounts payable and accrued expenses			
	18	Grants payable			
es	19	Deferred revenue			
Liabilities	20	Loans from officers, directors, trustees, and other disqualified persons			
폋	21	Mortgages and other notes payable (attach schedule)			
Ë	22	Other liabilities (describe			
	23	Total liabilities (add lines 17 through 22)	0	0	
		Foundations that follow SFAS 117, check here			
Ś		and complete lines 24 through 26, and lines 30 and 31.			
alances	24	Unrestricted			
<u>a</u>	25	Temporarily restricted			
		Permanently restricted			
or Fund B	20	Foundations that do not follow SFAS 117, check here			
Ē	1	<u> </u>			
ř	-	and complete lines 27 through 31.			
Ñ	27	Capital stock, trust principal, or current funds			
Net Assets	28	Paid-in or capital surplus, or land, bldg, and equipment fund			
Š	29	Retained earnings, accumulated income, endowment, or other funds	9,133,707	10,137,110	
t,	30	Total net assets or fund balances (see instructions)	9,133,707	10,137,110	
ž	31	Total liabilities and net assets/fund balances (see			
_		instructions) · · · · · · · · · · · · · · · · · · ·	9,133,707	10,137,110	
	art I			<del></del>	
1		net assets or fund balances at beginning of year - Part II, column (a), line 3	- ·		
		of-year figure reported on prior year's return)			9,133,707
2		r amount from Part I, line 27a · · · · · · · · · · · · · · · · · · ·		2	1,013,825
3		er increases not included in line 2 (itemize)		3	
4		lines 1, 2, and 3			10,147,532
5		reases not included in line 2 (itemize) STM116	<del> </del>	5	10,422
6	Tota	net assets or fund balances at end of year (line 4 minus line 5) - Part II, col	lumn (b), line 30 · · · ·	6	10,137,110
					E

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Part IV Capital Gains and Losses for Tax on Investment Income 38-6089457

(a) List and describe the kind(s) of property sold (for example, real estate,			(b) How acquired P-Purchase D-Donation	(c) Date acqui (mo , day, y	
1a SALE OF STOCK				VARIOUS	12-31-2017
b					
С					
d					
е					
(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or of plus expens			(h) Gain or (loss) e) plus (f) minus (g))
a 1,331,077			606,899		724,178
b		-			
С					
<u>d</u>	<del></del>				
e			2/24/60		
Complete only for assets snow	wing gain in column (h) and owned by			(I) Ga	ins (Col. (h) gain minus but not less than -0-) <b>or</b>
(i) FMV as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess over col (j)			sses (from col (h))
a					724,178
b					
С					
d					
е					
2 Capital gain net income or (ne	et canital loss)	so enter in Part I, line enter -0- in Part I, line	7	2	724,178
3 Net short-term capital gain or	(loss) as defined in sections 1222(5)	and (6)			
• ,	e 8, column (c) See instructions If (lo	• •	.::}	3	
	Inder Section 4940(e) for R		Net Investme	_	
(For optional use by domestic priv	rate foundations subject to the section	n 4940(a) tax on net i	nvestment incom	e )	
If section 4940(d)(2) applies, leave	e this part blank				
		_			
	section 4942 tax on the distributable a		the base period?		☐ Yes X No
	alify under section 4940(e) Do not co in each column for each year, see th		making any onto		
(a)		e instructions before		<u> </u>	(d)
Base period years Calendar year (or tax year beginnii	(b)  Adjusted qualifying distribution	ns Net value of r	(c) noncharitable-use a	ssets (	Distribution ratio col (b) divided by col (c))
2016	508,	619	10,066,		0.050527
2015	548,	395	10,619,0	037	0.051643
2014	508,	529	10,835,	115	0.046933
2013	471,	550	10,105,0	094	0.046665
2012	458,	381	9,356,	508	0.048991
				2	0.244758
•	the 5-year base period - divide the tot				
the number of years the found	dation has been in existence if less th	an 5 years · · · ·		3	0.048952
4 5 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4		V lane F			
4 Enter the net value of noncha	iritable-use assets for 2017 from Part	X, line 5 · · · ·		4	11,443,759
5 Multiply line 4 by line 3				5	560,195
3 Manply line 4 by line 3				·   -	560,195
6 Enter 1% of net investment in	ncome (1% of Part I, line 27b)			6	8,353
	, ,				
7 Add lines 5 and 6				7	568,548
8 Enter qualifying distributions to	from Part XII, line 4			8	573,432
If line 8 is equal to or greater	than line 7, check the box in Part VI,	line 1b, and complete	that part using a	1% tax rate S	ee the
Part VI instructions					

10

Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their

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	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the	<del></del>	Van	T No
	meaning of section 512(b)(13)? If "Yes," attach schedule See instructions	11	Yes	No X
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified	· · · ·  - <u>'</u> '	<del>'-+</del>	┝┷
12	person had advisory privileges? If "Yes," attach statement See instructions		,	l v
13		<u> </u>		X
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application? • Website address • • • • • • • • • • • • • • • • • •	· · · · <u> </u>	3 X	Ь
14	Website address N/A  The books are in case of N ANTIVONIA D UNDON			
14		517-740-	-0333	
45		49201		
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	)	1.,	T
16	At any time during calendar year 2017, did the foundation have an interest in or a signature or other authority	<u> </u>	Yes	No
	over a bank, securities, or other financial account in a foreign country?	10	6	X
	See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes," enter the name of			
Day	the foreign country   this B   Statements Boggarding Activities for Miss Form 4720 May Be Bogging			Ь
Pai	rt VII-B   Statements Regarding Activities for Which Form 4720 May Be Required	<del></del>		<del></del>
	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.		Yes	No
1a	During the year, did the foundation (either directly or indirectly)	1	1	1
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person? Yes	No		1
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a	,	-	1
	disqualified person?	4 !		
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? Yes	1 1	į	
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? $\cdots$ Yes $X$	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)? $\cdots \cdots	No	1	1
	(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	,	l l	
	termination of government service, if terminating within 90 days )	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			
	section 53 4941(d)-3 or in a current notice regarding disaster assistance? See instructions	1	b	<u> </u>
	Organizations relying on a current notice regarding disaster assistance, check here	]		
С	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that		1	
	were not corrected before the first day of the tax year beginning in 2017?	10	c	X
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private			
	operating foundation defined in section 4942(j)(3) or 4942(j)(5))			
а	At the end of tax year 2017, did the foundation have any undistributed income (lines 6d and	_		
	6e, Part XIII) for tax year(s) beginning before 2017?	No	Ì	
	If "Yes," list the years			
b	Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2)		1	1
	(relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to			
	all years listed, answer "No" and attach statement - see instructions )	21	ь	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
3a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise			
		No		
h	If "Yes," did it have excess business holdings in 2017 as a result of (1) any purchase by the foundation or	<b>,</b>	-	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			
	- maximum and an article of the contract of th			

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

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

charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2017? . . . .

4b X Form 990-PF (2017)

the 10-, 15-, or 20-year first phase holding period? (Use Schedule C, Form 4720, to determine if the

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Part VII-B   Statements Regarding Activities	s for V	Vhich Forn	1 4720	May Be I	Requir	ed (continued)			
5a During the year, did the foundation pay or incur any an	nount to				_	_		Yes	No
(1) Carry on propaganda, or otherwise attempt to influ	ience leg	ıslatıon (sectio	n 4945(e	:))?	[	Yes X No			
(2) Influence the outcome of any specific public election	on (see s	ection 4955), c	or to carr	y on,		<b>-</b>			ı
directly or indirectly, any voter registration drive?					• • • [	Yes X No			
(3) Provide a grant to an individual for travel, study, or	other sir	nılar purposes	?		[	Yes X No	1		
(4) Provide a grant to an organization other than a ch		. •			,				1
section 4945(d)(4)(A)? See instructions · ·					٠٠٠ [	Yes X No			
(5) Provide for any purpose other than religious, char		• •			_				
purposes, or for the prevention of cruelty to children					L	Yes X No			
b If any answer is "Yes" to 5a(1)-(5), did any of the trans									
Regulations section 53 4945 or in a current notice reg	_					_	5b		
Organizations relying on a current notice regarding dis						▶ 📋			
c If the answer is "Yes" to question 5a(4), does the foun					ſ	¬			
because it maintained expenditure responsibility for th	_				٠٠٠	Yes No			
If "Yes," attach the statement required by Regulations		٠,							
6a Did the foundation, during the year, receive any funds,	•	•			Г	ੀ v ਹਿ			
on a personal benefit contract?						Yes X No	۱ ۵.		V
b Did the foundation, during the year, pay premiums, dir	ectly or in	idirectly, on a p	personal	penetit contr	activ		6b		<u>X</u>
If "Yes" to 6b, file Form 8870  7a At any time during the tax year, was the foundation a part of the start of		menhibited for	- h - li i -		ſ	Yes X No			
b If "Yes," did the foundation receive any proceeds or ha	•	•					7b		
Part VIII Information About Officers, Dire								Vees	<u> </u>
and Contractors	, , ,	,	· oana	ation ina		,g, . a.a	p.	,,	-,
1 List all officers, directors, trustees, and foundation	manager	s and their co	mpensa	ation. See in	structio	ons.			
	(b) Title	e, and average	(c) Co	mpensation	(d)	Contributions to	(e) Exp	ense ac	count.
(a) Name and address		s per week ed to position		ot paid, ter -0-)		oyee benefit plans   ferred compensation	other	allowar	ices
ANTHONY P HURST	PRESI	DENT		<del></del>					
1600 HATCH RD, JACKSON, MI 49201		15.00		0		0			0
CAREY HURST LEFERE	TRUST	EE							
1600 HATCH RD, JACKSON, MI 49201		15.00		0		. 0			0
CHARLES T KUNTZLEMAN	TRUST	EE							
1600 HATCH RD, JACKSON, MI 49201		0.00		_ 0		0			0
							_		
	<u> </u>		<u> </u>		}				
2 Compensation of five highest-paid employees (other	r than th	ose included	on line	1 - see instr	uctions	). If none, enter			
"NONE "	<del></del>			<del></del>					
		(b) Title, and a	average			(d) Contributions to employee benefit	(e) Expe	ense ac	count
(a) Name and address of each employee paid more than \$50	,000	hours per w devoted to po		(c) Comper	nsation	plans and deferred		allowan	
		1				compensation			
NONE									
		ļ		}					
						<del> </del>			
				<del>                                     </del>					
		<del>                                     </del>		<del> </del>		<del> </del>			
				1.					
Total number of other employees paid over \$50,000 · · ·						· · · · · · •			0
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3 Five highest-paid independent contractors for professional services. See i	nstructions. If none, enter "NONE."	
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
ONE		
	-	
		<u> </u>
otal number of others receiving over \$50,000 for professional services		<del>.</del>
PartiX:A Summary of Direct Charitable Activities		
List the foundation's four largest direct charitable activities during the tax year. Include relevant		Expenses
organizations and other beneficiaries served, conferences convened, research papers produce	a, etc	
1 N/A		
2		<u>.</u> .
-		
3		
4		
Part X-B Summary of Program-Related Investments (see in	nstructions)	
Describe the two largest program-related investments made by the foundation during the tax y		Amount
1 N/A		
2		
All other program related investments. See instructions		
All other program-related investments See instructions 3		
•		
Total. Add lines 1 through 3		
CGA		Form 990-PF (20

Pai	TX Minimum Investment Return (All domestic foundations must complete this part. Foreign f	ounda	tions,
	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	10,919,632
b	Average of monthly cash balances	1b	698,397
С	Fair market value of all other assets (see instructions)	1c	00
d	Total (add lines 1a, b, and c)	1d	11,618,029
е	Reduction claimed for blockage or other factors reported on lines 1a and		
	1c (attach detailed explanation) · · · · · · · · · · · · · · · · · · ·		
2	Acquisition indebtedness applicable to line 1 assets	2	0
3	Subtract line 2 from line 1d · · · · · · · · · · · · · · · · · ·	3	11,618,029
4	Cash deemed held for charitable activities   Enter 1 1/2% of line 3 (for greater amount, see		
	instructions) · · · · · · · · · · · · · · · · · · ·	4	174,270
5	Net value of noncharitable-use assets. Subtract line 4 from line 3 Enter here and on Part V, line 4 · ·	5	11,443,759
6	Minimum investment return. Enter 5% of line 5	6	572,188
Pa	Tt-XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating for	undatio	ons
	and certain foreign organizations, check here ▶ and do not complete this part )		
1	Minimum investment return from Part X, line 6	1	572,188
2a	Tax on investment income for 2017 from Part VI, line 5 · · · · · · · · 2a 8,353		
b	Income tax for 2017 (This does not include the tax from Part VI) 2b		
С	Add lines 2a and 2b · · · · · · · · · · · · · · · · · ·	2c	8,353
3	Distributable amount before adjustments Subtract line 2c from line 1	3	563,835
4	Recoveries of amounts treated as qualifying distributions	4	
5	Add lines 3 and 4	5	<u>563,83</u> 5
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	563,835
Pa	Trt XII Qualifying Distributions (see instructions)		
_		· I	
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes		
а	Expenses, contributions, gifts, etc - total from Part I, column (d), line 26	1a	573,432
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	573,432
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	8,353
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	565,079
	Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the	founda	tion
_	qualifies for the section 4940(e) reduction of tax in those years		

b Excess from 2014 . . . . .
c Excess from 2015 . . . .
d Excess from 2016 . . . . .
e Excess from 2017 . . . .

	XIV Private Operating Found	tations (Sec ins	didelions and i al	t vii 7t, questioi t	<u>,                                      </u>	
1a	If the foundation has received a ruling or d	etermination letter th	at it is a private operat	ing		
	foundation, and the ruling is effective for 20	017, enter the date o	f the ruling · · ·		<u> </u>	
	Check box to indicate whether the foundat	ion is a private opera	iting foundation descri	bed in section	4942(J)(3) or	4942(j)(5)
!a	Enter the lesser of the adjusted net	Tax year		Prior 3 years		(e) Total
	income from Part I or the minimum investment return from Part X for	(a) 2017	(b) 2016	(c) 2015	(d) 2014	(e) lotal
	each year listed					
b	85% of line 2a	·				
_	Qualifying distributions from Bart VII					
С	Qualifying distributions from Part XII, line 4 for each year listed					
	· · · · · · · · · · · · · · · · · · ·					
đ	Amounts included in line 2c not used directly for active conduct of exempt activities					
	To do a do a do a do a do a do a do a do					-
е	Qualifying distributions made directly					
	for active conduct of exempt activities Subtract line 2d from line 2c					
	Subtract line 2d from line 2c					
}	Complete 3a, b, or c for the					
	alternative test relied upon				1	
а	"Assets" alternative test - enter					
	(1) Value of all assets					
	(2) Value of assets qualifying under		<u> </u>			
	section 4942(j)(3)(B)(i) · · · ·			<b>\</b>		
b	"Endowment" alternative test - enter 2/3 of minimum investment return shown in					
	Part X, line 6 for each year listed · · ·					
_	"Support" alternative test , enter	/				
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 512(a)(5)), or royalties 5					
	(2) Support from general public				<del>                                     </del>	+
	and 5 or more exempt					
	organizations as provided in					
	section 4942(j)(3)(B)(III) · · · ·	<del> </del>		_		ļ
	(3) Largest amount of support from					
	an exempt organization · · · ·					
_	(4) Gross investment income · · ·					
art	XV Supplementary Informat			the foundation ha	ad \$5,000 or more	ın assets at
	any time during the year	- see instructi	ons.)			
ı	Information Regarding Foundation Ma					
а	List any managers of the foundation who	have contributed me	ore than 2% of the tota	Il contributions received	by the foundation	
	before the close of any tax year (but only	if they have contribu	ited more than \$5,000	) (See section 507(d)(2	2) )	
	NA					
	List any managers of the foundation who	own 10% or more o	f the stock of a corpor	ation (or an equally larg	e portion of the	
	ownership of a partnership or other entity				- F	
	, ,	•				
_	NA Cartiful	0:	abalambia ata Des		<del> </del>	
2	Information Regarding Contribution,					
	Check here ▶ ☐ if the foundation only					
	unsolicited requests for funds. If the four	idation makes gifts, g	grants, etc , to individu	als or organizations und	der other conditions,	
	complete items 2a, b, c, and d See instr					
а	The name, address, and telephone num	ber or email address	of the person to whom	n applications should be	e addressed	
	990APP					
b	The form in which applications should be	submitted and infor	mation and materials t	hey should include		
_	=			•		
_	Any submission deadlines	<u> </u>				
С	Any submission deadlines					
	A constant of the state of the	auch on humana	dennel average to a state to	fields kinds of institute	one or other	<del></del>
d	Any restrictions or limitations on awards	, such as by geograp	micai areas, charitable	HERUS, MINUS OF INSTITUTE	one, or other	
	factors					<b>~</b> .
_						Form <b>990-PF</b> (2017

Part XV   Supplementary Information (conti			38-6089457_	rage
Grants and Contributions Paid During th	e Year or Approve	d for Future	Payment	
Recipient  Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
a Paid during the year	or substantial contributor	<del> </del>	<del> </del>	
•				
AIR ZOO		į.	CTV77717	
6151 PORTAGE RD	MONTE		GENERAL	
PORTAGE, MI 49002	NONE	NC	OPERATIONS	2,50
ANDY'S ANGELS				
2326 BROOKLYN RD			GENERAL	
JACKSON, MI 49203	NONE	NC	OPERATIONS	2,00
AWARE SHELTER				
PO BOX 156			GENERAL	
JACKSON, MI 49204	NONE	NC	OPERATIONS	8,00
		1.0	or zivili zono	0,00
BIG BROTHERS BIG SISTERS OF JACKSON				
PO BOX 1802				
JACKSON, MI 49204	NONE	NC	MENTORING PROGRAM	3,00
BUILD ON (FKA BUILDING WITH BOOKS)				
PO BOX 16741		ļ	GENERAL	
STAMFORD, CT 06905	NONE	NC	OPERATIONS	7,50
CASCADES NON-ENDOWED SPEC PROJ FD				
ONE JACKSON SQUARE STE 308		į	GENERAL	
JACKSON, MI 49201	NONE	NC	OPERATIONS	5,00
DACIMON, III 43201	110112		or End if I only	3,00
CASCADES PARK FOUNDATION-CIVIL WAR				
1992 WARREN AVE		}	CIVIL WAR MUSTER	
JACKSON, MI 49203	NONE	NC	EVENT	1,50
CENTER STAGE JACKSON				
PO BOX 822			GENERAL	
JACKSON, MI 49204	NONE	NC	OPERATIONS	1,50
Total		<u> </u>	<b>&gt;</b> 3a	
b Approved for future payment	<del></del>	T		<del></del>
		}		
		1	i i	
			]	
		1		
		1	1	
		1		

3b

Total

Form 990-PF (2017) THE HURST FOUNDATION

Part:XV Supplementary Information (continued)

3 Grants and Contributions Paid During the	Year or Approve	d for Future P	ayment	
Recipient	if recipient is an individual show any relationship to any foundation manager	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	or substantial contributor	recipient		
a Paid during the year			<u> </u>	
COLLEGE & CAREER ACCESS CENTER/CCAC				
1082 JACKSON CROSSING MALL			GENERAL	
JACKSON, MI 49202	NONE	NC	OPERATIONS	3,000
CITY OF JACKSON PUBLIC ARTS COMMISS				
161 W MICHIGAN AVE	}	}	GENERAL	
JACKSON, MI 49201	NONE	NC	OPERATIONS	5,000
CRAZY HORSE MEMORIAL FUND				
AVENUE OF CHIEFS			CONSTRUCTION OF	
CUSTER, SD 57730-9506	NONE	NC	NATIONAL MONUMENT	4,500
DAHLEM CONSERVANCY				
7117 S JACKSON RD			GENERAL	
JACKSON, MI 49201	NONE	NC	OPERATIONS	15,000
DISABILITY CONNECTIONS				
409 LINDEN AVE			GENERAL	
JACKSON, MI 49203	NONE	NC	OPERATIONS	3,500
ELLA SHARP MUSEUM - ART & HISTORY				
3225 FOURTH ST			GENERAL	
JACKSON, MI 49203	NONE	NC	OPERATIONS	46,500
HOT AIR JUBILEE				
225 N JACKSON ST		}	GENERAL	
JACKSON, MI 49204	NONE	NC	OPERATIONS	2,500
JACKSON CHORALE				
PO BOX 431			GENERAL	
JACKSON, MI 49204	NONE	NC	OPERATIONS	2,000
Total		<del> </del>		
b Approved for future payment		-		
		,		
Total	<u> </u>		<b>&gt;</b> 3b	C

Form 990-PF (2017)

THE HURST FOUNDATION

Part XV | Supplementary Information (continued)

3 Grants and Contributions Paid During the Year or Approved for Future Payment

Recipient	If recipient is an individual show any relationship to	Foundation	Purpose of grant or	
Name and address (home or business)	any foundation manager or substantial contributor	status of recipient	contribution	Amount
a Paid during the year				
JACKSON COLLEGE FOUNDATION				
3000 BLAKE RD			GENERAL	
JACKSON, MI 49201	NONE	NC	OPERATIONS	2 00
DAGROOM, MI 45201	NONE	NC	OPERATIONS	2,00
JACKSON COLLEGE FBO POTTER CENTER				
2111 EMMONS RD				
JACKSON, MI 49201	NONE	NC	RENOVATIONS	50,000
JACKSON COUNTY PARKS				
1992 WARREN AVE		1	GENERAL	
JACKSON, MI 49203	NONE	NC	OPERATIONS	17,93:
,				1,,55
JACKSON DAFFODIL SOCIETY				
2360 SPENCER DR				
JACKSON, MI 49202	NONE	NC	GENERAL PURPOSE	1,50
JACKSON FRIENDLY HOME				
435 WEST NORTH ST			GENERAL	
JACKSON, MI 49202	NONE	NC	OPERATIONS	10,000
JACKSON HABITAT FOR HUMANITY				
1207 PRINGLE ST			CENEDAL	
JACKSON, MI 49203	NONE	NC	GENERAL OPERATIONS	2 00
JACKSON, MI 49203	NONE	NC	OPERATIONS	2,000
JACKSON INTER-FAITH SHELTER				
414 S BLACKSTONE ST			GENERAL	
JACKSON, MI 49203	NONE	NC	OPERATIONS	3,000
JACKSON NON-PROFIT SUPPORT CENTER				
536 N JACKSON ST			GENERAL	
JACKSON, MI 49201	NONE	NC	OPERATIONS	5,000
JACKSON, MI 49201	NONE	NC	OPERATIONS	3,000
Total			▶ 3a	
b Approved for future payment				
				•
				!
Total		<del></del>	<b>&gt;</b> 3b	<u> </u>

Part XV Supplementary Information (continued)

Recipient	If recipient is an individual, show any relationship to any foundation manager	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	or substantial contributor	recipient	Contribution	
Paid dunng the year				
JACKSON PUBLIC SCHOOLS				
544 WILDWOOD		1	JACKSON HIGH	
JACKSON, MI 49202	NONE	NC	SCHOOL	1,50
JACKSON SCHOOL OF THE ARTS				
634 N MECHANIC ST			GENERAL	
JACKSON, MI 49203	NONE	NC	OPERATIONS	50,00
JACKSON SYMPHONY ORCHESTRA				
215 W MICHIGAN AVE			GENERAL	
JACKSON, MI 49201	NONE	NC	OPERATIONS	5,00
JACKSON YOUTH SYMPHONY ORCHESTRA				
215 W MICHIGAN AVE			GENERAL	
JACKSON, MI 49201	NONE	NC	OPERATIONS	1,50
JOHN GEORGE HOME				
1501 E GANSON ST			GENERAL	
JACKSON, MI 49201	NONE	NC	OPERATIONS	6,50
JUNIOR ACHIEVEMENT OF MICHIGAN EDGE				
209 E WASHINGTON AVE	,		GENERAL	
JACKSON, MI 49201	NONE	NC	OPERATIONS - CEO	50,00
LILY MISSIONARY BAPTIST CHURCH				
1117 W G WADE DR			LILLY MISSIONARY	
JACKSON, MI 49204	NONE	NC	CTR ENDOW FUND	75,00
MARRIAGE MATTERS - JACKSON			EMPOWER PEOPLE	
536 N JACKSON ST			W/SKILLS -	
JACKSON, MI 49201	NONE	NC	MARRIAGES	2,00
Total				
b Approved for future payment				

Pant Supplementary Information (continued)

3 Grants and Contributions Paid During the	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			<del></del>
a Paid during the year		1	1	
MICHAEL J FOX FOUNDATION		1	1	
P BOX 708 CHURCH ST		ļ	PARKINSON'S	
NEW YORK, NY 10008-0780	NONE	NC	RESEARCH	1,000
MICHIGAN AEROSPACE FOUNDATION				
807 WILLOW RUN		1	GENERAL	
YPSILANTI, MI 48198	NONE	NC	OPERATIONS	100,000
READING WRITING CONNECTION		ļ		
202 NORTH WEST AVE			DYSLEXIA	
JACKSON, MI 49201	NONE	NC	INTERVENTION	5,000
RONALD MCDONALD HOUSE OF ANN ARBOR				
1600 WASHINGTON HEIGHTS			GENERAL	
ANN ARBOR, MI 48104	NONE	NC	OPERATIONS	2,500
SALVATION ARMY				
806 E PEARL ST	}		GENERAL	
JACKSON, MI 49201-1793	NONE	NC	OPERATIONS	2,000
SHOP RAT FOUNDATION				
11855 BUNKER HILL RD			GENERAL	
PLEASANT LAKE, MI 49272	NONE	NC	OPERATIONS	6,500
SPRING ARBOR COLLEGE				
106 E MAIN ST			GENERAL	
SPRING ARBOR, MI 49283	NONE	NC	OPERATIONS	32,000
ST LUKES CLINIC			}	
PO BOX 4123	ļ		HEALTH CARE FOR	
JACKSON, MI 49204	NONE	NC	NONINSURED IND	5,000
Total		<u> </u>		
b Approved for future payment				
	1			
	1			
		ĺ		
Total			▶ 3b	- <u> </u>

Part XV Supplementary Information (continued)

3 Grants and Contributions Paid During the Year

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	геарин		
a Paid during the year				l.
THE LOST RAILROAD MUSEUM				
824 BROWNS LAKE RD			GENERAL	
JACKSON, MI 49203	NONE	NC	OPERATIONS	7,500
TOGETHER WE CAN MAKE A DIFFERENCE				
224 W WILKINS ST			GENERAL	
JACKSON, MI 49203	NONE	NC	OPERATIONS	2,500
WKAR TV				
404 WILSON RD			GENERAL	
EAST LANSING, MI 48824	NONE	NC	OPERATIONS	1,500
ENTERPRISE GROUP				
ONE JACKSON SQUARE			GENERAL	
JACKSON, MI 49201	NONE	NC	OPERATIONS	2,000
GIRL SCOUTS HEART OF MICHIGAN				
444 JAMES L HART PKWY			GENERAL	}
YPSILANTI, MI 48197	NONE	NC	OPERATIONS	5,000
TEACHER OF THE YEAR				
2309 4TH ST			GENERAL	
JACKSON, MI 49203	NONE	NC	OPERATIONS	5,000
Total			▶ 3a	573,432
<b>b</b> Approved for future payment				
Total · · · · · · · · · · · · · · · · · · ·	<u></u>	<u></u>	▶ _ 3b	<u> </u>

Enter gross amounts unless otherwise indicated	Unrelated	business income	Excluded by se	ction 512, 513, or 514	(e)
Program service revenue	(a) Business	(b) Amount	(c) Exclusion code	(d) Amount	Related or exempt function income (See instructions)
a	code		<del>                                     </del>		
b			1		
C		<del></del>	<del>                                     </del>		
d					
е					
f					
g Fees and contracts from government agencies · · ·					
2 Membership dues and assessments					
3 Interest on savings and temporary cash investments -			14	755	
4 Dividends and interest from securities · · · · · · · · ·			14	136,014	
5 Net rental income or (loss) from real estate			ļ		
a Debt-financed property					·
<b>b</b> Not debt-financed property · · · · · · · · · · · · · · · · · · ·					
6 Net rental income or (loss) from personal property					
7 Other investment income					
8 Gain or (loss) from sales of assets other than inventory			18	724,178	
9 Net income or (loss) from special events					
O Gross profit or (loss) from sales of inventory					
1 Other revenue a		- <u></u>			
b					
c					
d					
e					
2 Subtotal Add columns (b), (d), and (e) · · · · · ·				860,947	
Explain below how each activity for which incomplishment of the foundation's exempt p					
					•
EA .	<u>-</u>				Form <b>990-PF</b> (201

Part	XVII		Regarding Trans		nd Transacti	ions	and Relat	ionships V	Vith No		table E			ige 13
		Organizatio												
1	Did the org	janization direc	tly or indirectly engag	ge in any of	f the following w	/th an	y other orga	nization desc	ribed				Yes	No
			nan section 501(c)(3)		_									
	organizatio	ons?												ĺ
а	Transfers t	from the report	ing foundation to a no	oncharitable	e exempt organ	ızatıor	n of							
(	(1) Cash											1a(1)		Х
(	(2) Other:	assets · · ·										1a(2)	-	Х
b	Other trans	sactions												
	(1) Sales	of assets to a r	oncharitable exempt	organizatio	on							1b(1)		Х
			from a noncharitable									1b(2)		Х
			uipment, or other ass		<del>-</del>							1b(3)		Х
			ngements · · · ·									1b(4)		Х
	( <b>5</b> ) Loans	or loan guaran	tees									1b(5)		Х
	(6) Perfor	mance of servi	ces or membership o	r fundraisir	ng solicitations							1b(6)		Х
С	Sharing of	facilities, equip	ment, mailing lists, o	ther assets	s, or paid emplo	yees						1c		Х
d	If the answ	er to any of the	e above is "Yes," com	plete the f	ollowing schedu	ile Co	olumn (b) sh	ould always s	show the	fair mai	rket			
			assets, or services g											
	value in ar	y transaction o	or sharing arrangeme	nt, show in	column (d) the	value	of the good	s, other asse	ts, or se	rvices re	eceived			
		mount involved	(c) Name of none					ription of trans				ng arra	ngeme	nts
•								<del></del> -				<del>-</del>		
,				-								_		
•														
$\overline{}$														
										_				
2a	Is the four	dation directly	or indirectly affiliated	with, or rel	ated to, one or	more	tax-exempt	organizations						
	described	in section 501	(c) (other than section	1 501(c)(3)	) or in section 5	277					[	Ye	s X	No
b	If "Yes," co	omplete the foll	owing schedule											
	(;	a) Name of organ	nization		(b) Type of organ	nızatıoı	n		(c) Des	scription	of relation	ship		
												_		
												_		
	Under pe	enalties of perjury, I	declare that I have examinary to the the	ed this return,	including accompa-	nying so	chedules and st	atements, and to	the best of	my knowl	ledge and b	oelief, it i	s true,	
Sig	n 🍒		// //	F	_		, milar propare	a industry and wi	80	_	May the IRS			um
Her	e <b>/</b>	rimi	non Dunt	,	1-25-	18	PRESIDE	ENT			with the pre	parer <u>sh</u>	own bel	<u>ow?</u>
		ature of officer or tr	ustee /		) Date		Title				See instruct	uons 🔀	Yes	∐ No
		Pnnt/Type prepa	rer's name	Prepar	rer's signature	K	11.	Date		Check	ıf P	PTIN		
Paid	a	Ronald L	Markowskı	X)/IL	W/ 1141	400	ysu	07-23-20	18	self-empl	loyed P	0053	9403	
Pre	parer	Firm's name	► Markowski	& Compa	ny CPAs				Firm's Ell	<b>√</b>				
Use	Only	Firm's address	▶ 2880 Spring	g/Arbor	Road				Phone no					
			Jackson MI	49203						<u>517</u> -	782-9	<u>351</u>		

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

Department of the Treasury Internal Revenue Service

Name of the organization

# **Schedule of Contributors**

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

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

OMB No 1545-0047

2017

Employer identification number

THE HURST FOUNDATION	38-6089457
Organization type (check one)	
Filers of:	Section:
Form 990 or 990-EZ	501(c)( ) (enter number) organization
	4947(a)(1) nonexempt charitable trust <b>not</b> treated as a private foundation
	527 political organization
Form 990-PF	501(c)(3) exempt private foundation
	4947(a)(1) nonexempt charitable trust treated as a private foundation
	501(c)(3) taxable private foundation
, ,	vered by the General Rule or a Special Rule.
Note: Only a section 501(c)(7), (instructions	(8), or (10) organization can check boxes for both the General Rule and a Special Rule See
General Rule	
X For an organization filing	g Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000
	operty) from any one contributor Complete Parts I and II See instructions for determining a
contributor's total contril	putions
Special Rules	
For an organization des	cribed in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support test of the
_	ons 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line
13, 16a, or 16b, and tha	at received from any one contributor, during the year, total contributions of the greater of (1)
\$5,000 or (2) 2% of the	amount on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1 Complete Parts I and II
☐ For an organization des	scribed in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one
	rear, total contributions of more than \$1,000 exclusively for religious, charitable, scientific,
	ourposes, or for the prevention of cruelty to children or animals. Complete Parts I, II, and III
☐ Eas on assentation doe	scribed in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one
	rear, contributions exclusively for religious, charitable, etc., purposes, but no such
	ore than \$1,000. If this box is checked, enter here the total contributions that were received
	xclusively religious, charitable, etc., purpose Don't complete any of the parts unless the
	b this organization because it received <i>nonexclusively</i> religious, charitable, etc., contributions
	during the year · · · · · · · · · · · · · · · · · · ·
A A	anti accessed by the Coneral Dule and/or the Special Dules decent file Schedule P./Form 000
	sn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990, answer "No" on Part IV, line 2, of its Form 990, or check the box on line H of its Form 990-EZ or on its
	ertify that it doesn't meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF)
1 Omi 330 1 1, 1 att 1, 1110 2, 10 0	orm, mark total remove the ming requirements of constant of the orm of the test of the order of

Name of organization

THE HURST FOUNDATION

Employer identification number 38-6089457

Contributors (see instructions) Use duplicate copies of Part I if additional space is needed Part I (a) (b) (c) (d) **Total contributions** Type of contribution Name, address, and ZIP + 4 No. Person JOHN & GLENDA KREGER Payroll Noncash 22,500 330 STEVES SCENIC DR (Complete Part II for noncash contributions) HORTON, MI 49246 (d) (c) (a) **Total contributions** Type of contribution Name, address, and ZIP + 4 No. Person PATRICK & SUSAN DU RUSSEL 2 Payroll Noncash 100,000 315 ANN ARBOR ST (Complete Part II for noncash contributions) MANCHESTER, MI 48158 (c) (d) (a) Total contributions Type of contribution Name, address, and ZIP + 4 No. Person 3 MICHAEL DU RUSSEL Pavroll Noncash 100,000 1006 E DUNCAN ST APT 3C (Complete Part II for noncash contributions) MANCHESTER, MI 48158 (c) (d) (a) **Total contributions** Type of contribution Name, address, and ZIP + 4 No. Person HOWARD & WANITA DU RUSSEL Pavroll Noncash 100,000 6771 PECKINS RD (Complete Part II for noncash contributions) MANCHESTER, MI 48158 (c) (d) (b) (a) **Total contributions** Type of contribution Name, address, and ZIP + 4 No. Person 5 ANTHONY P HURST Payroll Noncash 428,434 1600 HATCH RD (Complete Part II for noncash contributions) JACKSON, MI 49201 (d) (c) (a) Total contributions Type of contribution Name, address, and ZIP + 4 No. Person Payroll Noncash (Complete Part II for noncash contributions)

**Federal Supporting Statements** 2017 PG01 Name(s) as shown on return THE HURST FOUNDATION 38-6089457 FORM 990PF - PART III - LINE 5 STATEMENT #116 OTHER DECREASES SCHEDULE DEC 10,422 10,422 TOTAL PG01 FORM 990PF - PART II - LINE 15 STATEMENT #120 OTHER ASSETS SCHEDULE BOY BOOK **DESCRIPTION** EOY BOOK LIFE INSURANCE 428,434 456,510 428,434 TOTAL 456,510

	Federal Supporting Statements	2017 PG01
Name(s) as shown on return		FEIN
THE HURST FOUNDATION	N	38-6089457

# FORM 990PF - PART II - LINE 10(B) INVESTMENTS: CORPORATE STOCK SCHEDULE

STATEMENT #137

CATEGORY	воу	BOOK VALUE	EOY FMV
ALBEMARLE CORP	2,668		
BROADVIEW FDS OPPORTUNITY FD	162,755		
CARILLON SER TR EAGLE SM CAP		164,051	211,116
DODGE & COX BALANCED FUND	293,993	319,325	349,487
EAGLE SMALL CAP GROWTH FD CL I	148,929		·
FIRST EAGLE FDS SOGEN OVERSEAS	151,455		
FIRST REP BANK SAN FRANCISCO	3,225		
FMI FDS LARGE CAP FUND	176,442	195,072	219,649
HARBOR FUND CAP APPRECIATION	157,793	184,608	258,484
HARD LOEVNER FDS EMERG HARRIS	154,121	,	,
HARD LOEVNER DS INTL EQUITY		170,000	170,000
HARDING LOEVNER FDS EMERG MKT		162,637	186,308
MKTS PORTFOLIO	161,296	·	,
MATTHEWS INTL FD PAC TIGER FD	270,108	274,380	345,424
PRINCIPAL FDS INC MIDCAP FD		271,955	339,122
OAKMARK FUNDS ADVISOR CLASS		162,180	199,025
OPPENHEIMER INTL SMALL MID CO		103,419	107,007
OPPENHEIMER DEV MKTS CL Y	139,034	140,040	177,309
OPPENHEIMER INTL GRWTH FD	122,299	224,611	266,112
PRINCIPAL FDS INC MIDCAP FD	261,097		
PRINCIPAL FDS SM MIDCAP DIV FD	211,407	226,167	267,705
REPUBLIC SVCS INC	4,108		
STEELPATH MLP FDS OPPENHEIMER	88,342	83,028	58,302
T ROWE PRICE NEW HORIZONS FD	210,875	233,861	300,927
T ROWE PRICE DIV SM CAP GRWTH		270,300	298,933
VANGUARD EQUITY INCOME-AD VEIR	177,324		
VANGUARD FDS REIT IND FD ADMIR	123,045	127,081	117,600
VANGUARD WELLESLEY INC FD ADM	127,411	132,890	138,455
VANGUARD FDS EQUITY INC FD ADM		185,396	221,313
AMCAP FUND INC CL A	103,058	104,691	121,647
AMERICAN FDS DEVELOP WLD GRTH&	313,142	319,575	322,178
AMERICAN BALANCED FD CL A	512,153		
CAPITAL INCOME BUILDERS FD CLA	603,964	620,152	688,951
EUROPACIFIC GROWTH FD	164,206	382,683	497,071
FUNDAMENTAL INVESTORS FD	845,517	708,923	1,056,935
GROWTH FD AMERICA CL A	749,426	640,291	1,063,219
NEW ECONOMY FD CL SBI CL A	778,293	778,293	1,326,307
NEW PERSPECTIVE FD A		571,374	571,374
NEW WORLD FUND INC CL A	254,915	464,949	539,452
SMALLCAP WORLD FUND CL A	806,318	863,617	1,336,631
VANGUARD ENERGY VDE	241,745	241,745	197,900
TOTALS	8,520,464	9,327,294	11,953,943

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		Federal Su	Federal Supporting Statements	nents	2017 PG01 .	 
Name(s) as shown on return THE HURST FOUNDATION					Your Social Security Nurriber 38-6089457	.
	FORM 990PF - PART I	7 - PART I - LINE 23	- OTHER EXPENSES SCHEDULE	CHEDULE	STATEMENT #103~	
DESCRIPTION	REVENUE AND EXPENSES	NET INVESTMENT	ADJUSTED NET INCOME	CHARITABLE PURPOSE		
OTHER EXPENSES	1,665	1,665	0	0		•
TOTALS	1,665	1,665	0	0		
					PG01	
	FORM 990PE	FORM 990PF - PART I - LINE 16(A) - LEGAL FEES SCHEDULE	S(A) - LEGAL FEES SC	ятролг	STATEMENT #107~	
DESCRIPTION PROFESSIONAL FEES	REVENUE AND EXPENSES 19, 599	NET INVESTMENT 19, 599	ADJUSTED NET INCOME	CHARITABLE PURPOSE 0		
TOTALS	19,599	19,599	0	0		
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		Federal Su	Federal Supporting Statements	ments	2017 PG01	
Name(s) as shown on return THE HURST FOUNDATION					Your Social Security Number 38-6089457	nber 9457 '
	FORM 990PF	- PART I	- LINE 18 - TAXES SCHEDULE	Z.E.	STATEMENT #110~	r #110~
NOTEGINACIONACI	REVENUE	NET INVESTMENT	ADJUSTED NET INCOME	CHARITABLE PURPOSE		
TAXES	4,360	4,360	0	0		
TOTALS	4,360	4,360	0	0		

Federal Supporting Statements

Name(s) as shown on return

THE HURST FOUNDATION

PG01

Your Social Security Number

38-6089457

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

## GRANT PROGRAM

1

#### APPLICANT NAME

THE HURST FOUNDATION

#### **ADDRESS**

1600 HATCH RD JACKSON, MI 49201

# TELEPHONE

517-740-0333

# EMAIL ADDRESS

## FORM & CONTENT

SEE BELOW

# SUBMISSION DEADLINE

OCTOBER 1

## RESTRICTIONS ON AWARD

LETTER DESCRIBING REASON FOR REQUESTING FUNDING AND AMOUNT. CURRENT FINANCIAL STATEMENT & BUDGET. LIST OF DIRECTORS. OTHER SOURCES YOU ARE REQUESTING FUNDING FROM FOR THIS PROJECT. COPY OF TAX EXEMPTION LETTER.