Form **990-PF** Department of the Treasury Internal Revenue Service

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

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

OMB No 1545-0052

| For | calendar year 2017 or tax year beginning | | , and ending | | |
|---------------------------------|---|---------------------------------------|-------------------------------|--|--|
| | ne of foundation | | | A Employer identificatio | n number |
| | HE FRANKLIN AND JENNIFER | MOORE | | 45 552225 | 1 |
| _ | AMILY FOUNDATION Ther and street (or P O box number if mail is not delivered to street.) | addrana) | Room/suite | 47-5533251 | <u>. </u> |
| | 01 N. MAIN STREET | aduressy | 800 | B Telephone number 734-668-40 | 140 |
| | or town, state or province, country, and ZIP or foreign pr | 000 | C if exemption application is | | |
| - | NN ARBOR, MI 48104 | 03111 0000 | | o il exemption application is | pending, check hare |
| | Check all that apply: Initial return | Initial return of a fo | ormer public charity | D 1. Foreign organization | s, check here |
| | Final return | Amended return | | | |
| | Address change | Name change | | Foreign organizations m check here and attach c | eeting the 85% test, omputation |
| H C | check type of organization: X Section 501(c)(3) ex | | ation OV | E If private foundation sta | |
| <u> </u> | | Other taxable private founda | · | under section 507(b)(1 |)(A), check here |
| | air market value of all assets at end of year J Accounting | - | Accrual | F If the foundation is in a | |
| | om Part II, col. (c), line 16) -\$ 1,129,374. (Part I, colum | her (specify) | ٠, | under section 507(b)(1 |)(B), check here |
| | Analysis of Revenue and Expenses | (a) Revenue and | (b) Net investment | (c) Adjusted net | (d) Disbursements |
| L | (The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a)) | expenses per books | income | income | for charitable purposes (cash basis only) |
| | 1 Contributions, gifts, grants, etc., received | | | N/A | |
| | 2 Check X if the foundation is not required to attach Sch. B | | | | |
| | 3 Interest on savings and temporary cash investments | 26. | 26. | | STATEMENT 1 |
| | 4 Dividends and interest from securities | 27,501. | 27,501. | | STATEMENT 2 |
| | 5a Gross rents | | | | |
| | b Net rental income or (loss) | 20 400 | | | |
| <u>e</u> | 6a Net gain or (loss) from sale of assets not on line 10 B Gross sales price for all B assets on line fa 44,100. | 28,499. | | | |
| Revenue | 7 Capital gain net income (from Part IV, line 2) | | 28,499. | <u> </u> | |
| 8 | 8 Net short-term capital gain | | | | |
| | 9 Income modifications | · · · · · · · · · · · · · · · · · · · | | | |
| | Gross sales less returns and allowances | | | | |
| | b Less Cost of goods sold | | | | |
| | c Gross profit or (loss) | | | | |
| | 11 Other income 12 Total. Add lines 1 through 11 | 56,026. | 56,026. | | |
| _ | 13 Compensation of officers, directors, trustees, etc | 0. | 0. | | 0. |
| | 14 Other employee salaries and wages | | | | |
| | 15 Pension plans, employee benefits | | | | |
| benses | 16a Legal fees | | | | |
| pe | b Accounting fees STMT 3 | 1,050. | 0. | | 1,050. |
| Ä | c Other professional fees | | * ** | ļ | <u> </u> |
| ati V | 17 Interest 18 Taxes STMT 4 | 958. | 411. | | 0. |
| stra | 18 Taxes STMT 4 | 950 1 | 471. | | <u>-</u> |
| i i | 20 Occupancy | | | | |
| Ad | 21 Travel, conferences, and meetings | | | | |
| Pue | 22 Printing and publications | | | | |
| βū | 23 Other expenses | | | | |
| Operating and Administrative Ex | 24 Total operating and administrative | | 4.4.4 | | 4 2 2 2 |
| ad C | expenses. Add lines 13 through 23 | 2,008. | 411. | <u></u> | 1,050. 51,750. |
| , | 25 Contributions, gifts, grants paid | 51,750. | | <u> </u> | 51,/50. |
|) } | 26 Total expenses and disbursements. Add lines 24 and 25 | 53,758. | 411. | | 52,800. |
| _ | 27 Subtract line 26 from line 12: | 33,130. | | | 32,000. |
| | 8 Excess of revenue over expenses and disbursements | 2,268. | | İ | |
| | b Net investment income (if negative, enter -0-) | | 55,615. | | |
| | c Adjusted net income (if negative, enter -0-) | | | N/A | |

THE FRANKLIN AND JENNIFER MOORE 47-5533251 FAMILY FOUNDATION Form 990-PF (2017) Page 2 Beginning of year End of year Part II Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only (a) Book Value (b) Book Value (c) Fair Market Value Cash - non-interest-bearing 9,943. 9,943. 18,662. 2 Savings and temporary cash investments 3 Accounts receivable ▶ 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 7 Other notes and loans receivable Less: allowance for doubtful accounts 8 Inventories for sale or use 9 Prepaid expenses and deferred charges 10a Investments - U.S. and state government obligations 1,017,600. 1,006,613. 1,119,431. STMT 5 b Investments - corporate stock c Investments - corporate bonds 11 Investments - land, buildings, and equipment basis Less accumulated depreciation 12 Investments - mortgage loans 13 Investments - other 14 Land, buildings, and equipment; basis Less accumulated depreciation 15 Other assets (describe ▶ 16 Total assets (to be completed by all filers - see the 1,027,543. 1,025,275. 1,129,374. instructions. Also, see page 1, item I) 17 Accounts payable and accrued expenses 18 Grants payable 19 Deferred revenue 20 Loans from officers, directors, trustees, and other disqualified persons 21 Mortgages and other notes payable 22 Other liabilities (describe 0. 0 23 Total liabilities (add lines 17 through 22) Foundations that follow SFAS 117, check here and complete lines 24 through 26, and lines 30 and 31. **Fund Balances** 24 Unrestricted 25 Temporarily restricted 26 Permanently restricted ightharpoonsFoundations that do not follow SFAS 117, check here and complete lines 27 through 31. ō 1,025,338. 27 Capital stock, trust principal, or current funds 0. 28 Paid-in or capital surplus, or land, bldg., and equipment fund -63. 2,205 29 Retained earnings, accumulated income, endowment, or other funds 1,025,275. 1,027,543 30 Total net assets or fund balances 1,025,275. 1,027,543 31 Total liabilities and net assets/fund balances Part III **Analysis of Changes in Net Assets or Fund Balances**

| 1 | Total net assets or fund balances at beginning of year - Part II, column (a), line 30 | | |
|---|---|---|------------|
| · | (must agree with end-of-year figure reported on prior year's return) | 1 | 1,025,275. |
| 2 | Enter amount from Part I, line 27a | 2 | 2,268. |
| 3 | Other increases not included in line 2 (itemize) | 3 | 0. |
| 4 | Add lines 1, 2, and 3 | 4 | 1,027,543. |
| 5 | Decreases not included in line 2 (itemize) | 5 | 0. |
| 6 | Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b), line 30 | 6 | 1,027,543. |

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| Part IV Capital Gains | and Lo | osses for Tax on Ir | rvestmen | t Income | | | | | | |
|---|---------------------------|--|------------------|--------------------------------------|-------------|--|----------|---|----------------------------------|--|
| (a) List and describe the kind(s) of property sold (for example, real estate, 2-story brick warehouse; or common stock, 200 shs. MLC Co.) | | | | | (b) | (b) How acquired P - Purchase D - Donation | | (c) Date acquired (mo., day, yr.) | (d) Date sold (mo., day, yr.) | |
| 1a FIDELITY ADVIS | OR HIGH INCOME 1407 SHS | | | T | | P : | 2/09/15 | 10/02/17 | | |
| b FIDELITY ADVIS | OR H | IGH INCOME 1 | 89 SHS | | | I | P : | 2/09/15 | 11/13/17 | |
| c CAPITAL GAINS | c CAPITAL GAINS DIVIDENDS | | | | | | | | | |
| d | | | <u> </u> | | | | | | | |
| _e | | | | | | | | | | |
| (e) Gross sales price | (f) | Depreciation allowed (or allowable) | | st or other basis expense of sale | | | | (h) Gain or (lo ((e) plus (f) minu | | |
| a 15,000. | | | | 13,75 | 6. | | | | 1,244. | |
| b 2,000. | | | | 1,84 | 5. | | | | 155. | |
| c 27,100. | | | | | | | | | 27,100. | |
| d | | | | | | | | | · - | |
| _е | | | | | | | | | | |
| Complete only for assets showing | ig gain in | column (h) and owned by | the foundation | on 12/31/69. | | | (j) | Gains (Col. (h) ga | ın minus | |
| (i) FMV as of 12/31/69 | | (j) Adjusted basis as of 12/31/69 | | cess of col. (1) col. (j), if any | | | COI. | (k), but not less th Losses (from co | nan -0-) or . (h)) | |
| a | | | | | | | | | 1,244. | |
| b | | | | | | | | | 155. | |
| C | | | | | | | | | 27,100. | |
| d | | | | | | | | | | |
| 8 | | | | | | | | | | |
| | | ∫ If gain, also enter | r in Dart I line | 7 | 7 | T | | | | |
| 2 Capital gain net income or (net ca | ıpıtal loss | | | | • | 2 | | | 28,499. | |
| 3 Net short-term capital gain or (los | | | ıd (6): | | ٦ | | | | | |
| If gain, also enter in Part I, line 8, | column (| c). | | | | | | N/ | λ | |
| If (loss), enter -0- in Part I, line 8 Part V Qualification U | nder | Section 4940(a) for | Paducad | Tay on Net | Thy. | 3 [| ent Inco | | <u> </u> | |
| If section 4940(d)(2) applies, leave the Was the foundation liable for the sec if "Yes," the foundation doesn't qualification. | tion 4942 y under s | tax on the distributable ameection 4940(e). Do not con | nplete this par | t. | | <u>. </u> | · | | Yes X No | |
| 1 Enter the appropriate amount in | еасп сош | | nstructions be | fore making any e | _ | | | _ | -/d\ | |
| Base period years Calendar year (or tax year beginni | ng in) | (b) Adjusted qualifying dis | | Net value of no | (c) ncha | aritable-use assets (col. (b) divided by col. (c)) | | | divided by col. (c)) | |
| 2016 | | | 0,629. | | | | 9,715 | . 060090 | | |
| 2015 | | 1 | 3,302. | <u></u> | | 474 | 4,503 | • | .028034 | |
| 2014 | | | | | | | | | | |
| 2013 | | | | | | | | | | |
| 2012 | | | | | | | | | | |
| 2 Total of line 1, column (d) | | | | | | | | 2 | .088124 | |
| 3 Average distribution ratio for the the foundation has been in existe | - | | on line 2 by 5. | O, or by the numb | er of | years | | 3 | .044062 | |
| 4 Enter the net value of noncharitat | ole-use as | ssets for 2017 from Part X, | line 5 | | | | | 4 | 1,069,898. | |
| 5 Multiply line 4 by line 3 | | | | | | | | 5 | 47,142. | |
| 6 Enter 1% of net investment incom | na /1% o | f Part I. line 27h\ | | | | | | 6 | 556. | |
| | (1/0 U | . 1 att 1, 11110 270) | | | | | | | | |
| 7 Add lines 5 and 6 | | | | | | | | 7 | 47,698. | |
| 8 Enter qualifying distributions from | n Part XII | , line 4 | | | | | | 8 | 52,800. | |
| If line 8 is equal to or greater than See the Part VI instructions. | n line 7, c | heck the box in Part VI, line | th, and comp | olete that part usin | g a 1 | % tax ra | ate. | | | |
| 723521 01-03-18 | | | | | | | | | Form 990-PF (2017) | |

THE FRANKLIN AND JENNIFER MOORE FAMILY FOUNDATION Form 990-PF (2017) Part 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. Date of ruling or determination letter: (attach copy of letter if necessary-see instructions) 556. b Domestic foundations that meet the section 4940(e) requirements in Part V, check here X and enter 1% of Part I, line 27b c All other domestic foundations enter 2% of line 27b. Exempt foreign organizations, enter 4% of Part I, line 12, col. (b). O. 2 Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only; others, enter -0-) 556. 3 3 Add lines 1 and 2 4 0. Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only; others, enter -0-) 556. 5 Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-6 Credits/Payments: 400. a 2017 estimated tax payments and 2016 overpayment credited to 2017 **b** Exempt foreign organizations - tax withheld at source 6b Ō. Ō. c Tax paid with application for extension of time to file (Form 8868) 6с Ō. d Backup withholding erroneously withheld 6d 400. 7 Total credits and payments. Add lines 6a through 6d 8 8 Enter any penalty for underpayment of estimated tax. Check here _____ if Form 2220 is attached 9 Tax due, if the total of lines 5 and 8 is more than line 7, enter amount owed 9 10 Overpayment, If line 7 is more than the total of lines 5 and 8, enter the amount overpaid 10 11 Enter the amount of line 10 to be: Credited to 2018 estimated tax Refunded > Part VII-A Statements Regarding Activities Yes No 1a During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in X any political campaign? 1a X b Did it spend more than \$100 during the year (either directly or indirectly) for political purposes? See the instructions for the definition 1b 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. X c Did the foundation file Form 1120-POL for this year? 1c d Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year: 0 • (2) On foundation managers. ▶ \$ (1) On the foundation. > \$ e Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers. > \$ 2 X 2 Has the foundation engaged in any activities that have not previously been reported to the IRS? If "Yes," attach a detailed description of the activities. 3 Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes 4a Did the foundation have unrelated business gross income of \$1,000 or more during the year? N/A b If "Yes," has it filed a tax return on Form 990-T for this year? 4b X 5 Was there a liquidation, termination, dissolution, or substantial contraction during the year? If "Yes," attach the statement required by General Instruction T. 6 Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either: By language in the governing instrument, or By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state law remain in the governing instrument? X 7 Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col. (c), and Part XV 8a Enter the states to which the foundation reports or with which it is registered. See instructions. MI

b If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate)

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

year 2017 or the tax year beginning in 2017? See the instructions for Part XIV. If "Yes," complete Part XIV

9 Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for calendar

of each state as required by General Instruction G? If "No," attach explanation

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THE FRANKLIN AND JENNIFER MOORE 47-5533251 Form 990-PF (2017) FAMILY FOUNDATION Page 5 Part 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 meaning of X section 512(b)(13)? If "Yes," attach schedule. See instructions 11 12 Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had advisory privileges? If "Yes," attach statement. See instructions 12 X 13 13 Did the foundation comply with the public inspection requirements for its annual returns and exemption application? Website address > WWW.FJMOOREFOUNDATION.ORG 14 The books are in care of ► FRANKLIN S. MOORE

Located at ► 101 N. MAIN STREET, SUITE 800, ANN ARBOR, MI Telephone no. $\triangleright 734-668-4040$ ZIP+4 ▶48104 15 Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - check here N/A 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 over a bank, securities, or other financial account in a foreign country?

| See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes," enter the name of the | ļ | | |
|--|------|----------|----|
| foreign country | | | |
| Part VII-B Statements Regarding Activities for Which Form 4720 May Be Required | | | |
| File Form 4720 if any item is checked in the "Yes" column, unless an exception applies. | L | Yes | No |
| 1a During the year, did the foundation (either directly or indirectly): | İ | 1 1 | |
| (1) Engage in the sale or exchange, or leasing of property with a disqualified person? | 10 | | |
| (2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) | | | |
| a disqualified person? | | } . | |
| (3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? | | | |
| (4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? | ło [| | |
| (5) Transfer any income or assets to a disqualified person (or make any of either available | | | |
| for the benefit or use of a disqualified person)? | ło | | |
| (6) Agree to pay money or property to a government official? (Exception. Check "No" | | i i | |
| if the foundation agreed to make a grant to or to employ the official for a period after | ļ |]] | |
| termination of government service, if terminating within 90 days.) | ło | | |
| 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 N/2 | A 1b | | |
| Organizations relying on a current notice regarding disaster assistance, check here |] [| | |
| c 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? | 10 | | X |
| 2 Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation | 1 | | |
| defined in section 4942(j)(3) or 4942(j)(5)): | | 1 | |
| a 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? | Vo | ł | 1 |
| If "Yes," list the years 🛌 , , , , , , , , | 1 | | ' |
| b Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2) (relating to incorrect | | 1 | |
| 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.) N/A | A 2b | | |
| c If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here. | İ | 1 1 | |
| > | | | |
| 3a Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time | | | |
| during the year? | No | ' | |
| b If "Yes," did it have excess business holdings in 2017 as a result of (1) any purchase by the foundation or 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 the 10-, 15-, or 20-year first phase holding period? (Use Schedule C, | l | ~ | |
| Form 4720, to determine if the foundation had excess business holdings in 2017.) | A 3b | L | |
| 4a Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes? | 4a | <u> </u> | Х |
| 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?

| • | THE FRANKLIN AND JENNIFE | R MOORE | | | | |
|-----------------|---|---|---|--|--------------|-------------------------------|
| Form 990-PF (2 | | | | 47-55332 | 251 | Page 6 |
| Part VII-B | Statements Regarding Activities for Which | Form 4720 May Be | Required (contin | ued) | | |
| 5a During the | year, did the foundation pay or incur any amount to: | | | I | Ye | s No |
| (1) Carry | on propaganda, or otherwise attempt to influence legislation (sectio | n 4945(e))? | Y | es 🗶 No 「 | | T |
| (2) Influe | nce the outcome of any specific public election (see section 4955); o | or to carry on, directly or indi | | | | |
| any vo | oter registration drive? | | Y | es 🛣 No | | |
| (3) Provid | de a grant to an individual for travel, study, or other similar purposes | ? | Y | es X No | İ | İ |
| (4) Provid | de a grant to an organization other than a charitable, etc., organization | n described in section | | | | |
| | d)(4)(A)? See instructions | | Y | es X No | j | |
| | de for any purpose other than religious, charitable, scientific, literary | or educational purposes, or | for | | İ | |
| | evention of cruelty to children or animals? | ,,, ,, ,, , | | es X No | | ļ |
| • | wer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify un | der the exceptions described | In Regulations | | ŀ | |
| | .4945 or in a current notice regarding disaster assistance? See instr | | | N/A | 5b | |
| | ons relying on a current notice regarding disaster assistance, check | | | ▶ | | + |
| • | ver is "Yes" to question 5a(4), does the foundation claim exemption f | | ained | | | |
| | re responsibility for the grant? | _ | | es 🗀 No | | - 1 |
| • | ach the statement required by Regulations section 53.4945-5(d). | • | .,,,,, | | | |
| • | indation, during the year, receive any funds, directly or indirectly, to | nay premilime on | | | | |
| | benefit contract? | pay premiums on | □ v. | es X No | İ | |
| • | indation, during the year, pay premiums, directly or indirectly, on a p | personal henefit contract? | ٠. ـــــــ ، | - | 6b | X |
| | 6b, file Form 8870. | ocisonal ocheni condacti | | <u> </u> | - | + |
| | • | shaltar transaction? | | es X No | | |
| - | e during the tax year, was the foundation a party to a prohibited tax | | T | N/A | 7b | +- |
| Part VIII | d the foundation receive any proceeds or have any net income attribution Information About Officers, Directors, Trust | | onagoro Highl | • | 70 | |
| rait viii | Paid Employees, and Contractors | ees, roundation w | anagers, nigni | y | | |
| 1 List all offi | cers, directors, trustees, and foundation managers and | their compensation. | | | | |
| | (a) Name and address | (b) Title, and average hours per week devoted to position | (c) Compensation (If not paid, enter -0-) | (d) Contributions to employee benefit plans and deferred compensation | accour | xpense nt, other vances |
| | | | | · · · · · · · · · · · · · · · · · · · | | |
| ann ama | mineral C | 4 | | _ | | ^ |
| SEE STA | TEMENT 6 | | 0. | 0. | | 0. |
| | | 4 | Ì | | | |
| | | 4 | 1 | | | |
| | | | ļ | | <u> </u> | . |
| | <u> </u> | | | | | |
| | | 1 | | | | |
| | | | | | ├ | |
| | | 4 | | | | |
| | | 4 | | | 1 | |
| 2 Compare | ation of five highest-paid employees (other than those in | cluded on line 1) If some | enter "NONE " | L | <u> </u> | |
| Z Compensa | ation of the mignest-paid employees (other than those in | (b) Title, and average | , once NONE. | (d) Contributions to | (a) F | xpense |
| (a) Na | me and address of each employee paid more than \$50,000 | hours per week devoted to position | (c) Compensation | employee benefit plans and deferred compensation | accou | nt, other vances |

2 Compensation of five highest-paid employees (other than those included on line 1). If none, enter "NONE."

(a) Name and address of each employee paid more than \$50,000

NONE

(c) Compensation (d) Combubuous to employee benefit plans addedired compensation (employee benefit plans addedired compensation (compensation devoted to position)

Total number of other employees paid over \$50,000

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| THE FRANKLIN AND JENNIFER MOORE FAMILY FOUNDATION | 47- | 5533251 Page 7 |
|---|---------------------|------------------|
| Part VIII Information About Officers, Directors, Trustees, Foundation Paid Employees, and Contractors (continued) | n Managers, Highly | |
| 3 Five highest-paid independent contractors for professional services. If none, enter "N | IONE." | |
| (a) Name and address of each person paid more than \$50,000 | (b) Type of service | (c) Compensation |
| NONE | , | |
| | | |
| | | |
| | | |
| | | |
| | | |
| | | |
| | | |
| | | |
| Total number of others receiving over \$50,000 for professional services | | <u>▶</u>] 0 |
| Part IX-A Summary of Direct Charitable Activities | | |
| List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical number of organizations and other beneficiaries served, conferences convened, research papers produce | | Expenses |
| N/A | 7.0,000 | |
| | | |
| | | |
| | | |
| | | |
| | | |
| 3 | | |
| - | | |
| | | |
| | | |
| | | |
| Part IX-B Summary of Program-Related Investments | <u> </u> | |
| Describe the two largest program-related investments made by the foundation during the tax year on line | s 1 and 2. | Amount |
| N/A | | |
| | | |
| | | |
| • | | |
| | | |

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Total. Add lines 1 through 3

All other program-related investments. See instructions.

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| | art X Minimum Investment Return (All domestic foundations must complete this part. Foreign fou | ndotions | non instructions \ |
|----------|--|--|--|
| <u>_</u> | | | see instructions.) |
| 1 | Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes: | | 1 070 527 |
| | Average monthly fair market value of securities | 1a | 1,072,537. 13,654. |
| b | • | 1b | 13,654. |
| C | | 1c | 1 000 101 |
| d | Total (add lines 1a, b, and c) | 1d | 1,086,191. |
| е | Reduction claimed for blockage or other factors reported on lines 1a and | , k | |
| | 1c (attach detailed explanation) 1e 0 • | | • |
| 2 | Acquisition indebtedness applicable to line 1 assets | 2 | 0. |
| 3 | Subtract line 2 from line 1d | 3 | 1,086,191. |
| 4 | Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions) | 4 | 16,293. |
| 5 | Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4 | 5 | 1,069,898. |
| 6 | Minimum investment return. Enter 5% of line 5 | 6 | 53,495. |
| <u>P</u> | art XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations ar foreign organizations, check here ▶ | id certain | |
| 1 | Minimum investment return from Part X, line 6 | 1 | 53,495. |
| 2a | Tax on investment income for 2017 from Part VI, line 5 2a 556. | 識。 | · · · · · · · · · · · · · · · · · · · |
| b | Income tax for 2017. (This does not include the tax from Part VI.) | | |
| C | Add lines 2a and 2b | 2c | 556. |
| 3 | Distributable amount before adjustments. Subtract line 2c from line 1 | 3 | 52,939. |
| 4 | Recoveries of amounts treated as qualifying distributions | 4 | 0. |
| 5 | Add lines 3 and 4 | 5 | 52,939. |
| 6 | Deduction from distributable amount (see instructions) | 6 | 0. |
| 7 | Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1 | 7 | 52,939. |
| P | art XII Qualifying Distributions (see instructions) | | • • • • • • • • • • • • • • • • • • |
| _ | Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes: | | |
| | Expenses, contributions, gifts, etc total from Part I, column (d), line 26 | 1a | 52,800. |
| b | | 1b | 0. |
| 2 | Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes | 2 | |
| 3 | Amounts set aside for specific charitable projects that satisfy the: | | ······································ |
| | Suitability test (prior IRS approval required) | 3a | |
| | 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 | 52,800. |
| 5 | Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment | - | 32,000 |
| J | income. Enter 1% of Part I, line 27b | 5 | 556. |
| 6 | Adjusted qualifying distributions. Subtract line 5 from line 4 | 6 | 52,244. |
| U | Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation of | | |
| | AGAD/a) reduction of tax in those wars | 444111163 101 | i tilo scottori |

Form **990-PF** (2017)

Part XIII Undistributed Income (see instructions)

| | (a) Corpus | (b) Years prior to 2016 | (c) 2016 | (d) 2017 |
|---|---------------|----------------------------|-------------|---------------------------------------|
| Distributable amount for 2017 from Part XI, line 7 | | | | 52,939. |
| 2 Undistributed income, if any, as of the end of 2017 | | | | · · · · · · · · · · · · · · · · · · · |
| a Enter amount for 2016 only | | | 0. | |
| b Total for prior years; | | 0 | | |
| 3 Excess distributions carryover, if any, to 2017: | | 0. | | |
| a From 2012 | | | | |
| b From 2013 | | | | |
| ¢ From 2014 | | | | |
| dFrom 2015 11,816. | | | | |
| eFrom 2016 5,897. | | | | |
| f Total of lines 3a through e | 17,713. | | | |
| 4 Qualifying distributions for 2017 from | | | | |
| Part XII, line 4: ►\$ 52,800. | | | | |
| a Applied to 2016, but not more than line 2a | | | 0. | |
| b Applied to undistributed income of prior | | • | | |
| years (Election required - see instructions) | | 0. | | |
| c Treated as distributions out of corpus | _ | | | |
| (Election required - see instructions) | 0. | | | E2 000 |
| d Applied to 2017 distributable amount | 0. | | | 52,800. |
| e Remaining amount distributed out of corpus | 139. | ··· | | 139. |
| 5 Excess distributions carryover applied to 2017 (If an amount appears in column (d), the same amount must be shown in column (a)) | 100. | | | 139. |
| 6 Enter the net total of each column as indicated below: | | | | |
| & Corpus Add lines 3f, 4c, and 4e Subtract line 5 | 17,574. | | | |
| b Prior years' undistributed income. Subtract | | | | |
| line 4b from line 2b | | 0. | | |
| c Enter the amount of prior years' | | | | |
| undistributed income for which a notice of deficiency has been issued, or on which | | | | |
| the section 4942(a) tax has been previously | | | | |
| assessed | | 0. | | |
| d Subtract line 6c from line 6b. Taxable | | • | | |
| amount - see instructions | | 0. | | |
| e Undistributed income for 2016. Subtract line | | | ١ | |
| 4a from line 2a. Taxable amount - see instr. | | | 0. | |
| f Undistributed income for 2017. Subtract lines 4d and 5 from line 1, This amount must | | | | |
| be distributed in 2018 | | | | 0. |
| 7 Amounts treated as distributions out of | | | | |
| corpus to satisfy requirements imposed by | | | | |
| section 170(b)(1)(F) or 4942(g)(3) (Election | | | | |
| may be required - see instructions) | 0. | | | |
| 8 Excess distributions carryover from 2012 | | | | |
| not applied on line 5 or line 7 | 0. | | | |
| 9 Excess distributions carryover to 2018. | | | | |
| Subtract lines 7 and 8 from line 6a | 17,574. | | | |
| 10 Analysis of line 9: | | | | |
| a Excess from 2013 | | | | |
| b Excess from 2014 | | | | |
| c Excess from 2015 11,677. | | | | |
| d Excess from 2016 5,897. | | | | |
| e Excess from 2017 | | | l | |

THE FRANKLIN AND JENNIFER MOORE

| | FOUNDATION | | | <u>47-553</u> | 3251 Page 10 |
|--|-------------------------------|------------------------------|---------------------------|---|-------------------|
| Part XIV Private Operating | Foundations (see in: | structions and Part VII | A, question 9) | N/A | |
| 1 a If the foundation has received a ruling | or determination letter that | it is a private operating | | | |
| foundation, and the ruling is effective f | or 2017, enter the date of t | the ruling | • | | |
| b Check box to indicate whether the four | ndation is a private operatir | ng foundation described i | n section | 4942(j)(3) or494 | 2(j)(5) |
| 2 a Enter the lesser of the adjusted net | Tax year | ĺ | Prior 3 years | / | |
| income from Part I or the minimum | (a) 2017 | (b) 2016 | (c) 2015 | (d) 2014 | (e) Total |
| investment return from Part X for | | | | / | |
| each year listed | | | | | |
| b 85% of line 2a | | | | / | |
| c Qualifying distributions from Part XII. | | | | / | |
| line 4 for each year listed | | | ļ | | |
| d Amounts included in line 2c not | | | , | / | |
| used directly for active conduct of | | | | 1 | |
| exempt activities | | | | | |
| e Qualifying distributions made directly | | | | | |
| for active conduct of exempt activities. | | | | | |
| Subtract line 2d from line 2c | '] | | | | |
| 3 Complete 3a, b, or c for the | | | | + | |
| alternative test relied upon: | | | | | |
| a "Assets" alternative test - enter: | | | ' | | |
| (1) Value of all assets | | / | <u> </u> | | |
| (2) Value of assets qualifying | | | | | |
| under section 4942(j)(3)(B)(i) | | | | | |
| b "Endowment" alternative test - enter 2/3 of minimum investment return | | | | | |
| shown in Part X, line 6 for each year | | / | | | |
| listed | | / | | | |
| c "Support" alternative test - enter: | | / | | | |
| (1) Total support other than gross investment income (interest, | | / | | | |
| dividends, rents, payments on | | / | | | |
| securities loans (section | / | | • | | |
| 512(a)(5)), or royalties) | | | | <u> </u> | |
| (2) Support from general public and 5 or more exempt | | | | | |
| organizations as provided in | | | | | |
| section 4942(j)(3)(B)(iii) | / | | | <u> </u> | |
| (3) Largest amount of support from | 1 / | | | | |
| an exempt organization | , | | | ļ | |
| (4) Gross investment income | | | | | |
| | | | if the foundation | n had \$5,000 or mo | re in assets |
| at any time during | the year-see insti | ructions.) | | | |
| 1 Information Regarding Foundat | | | | | |
| a List any managers of the foundation w | ho have contributed more | than 2% of the total cont | ributions received by the | e foundation before the close | of any tax |
| year (but only if they have contributed | more than \$5,000). (See s | section 507(d)(2).) | | | |
| SEE STATEMENT 7 | | | | | |
| b List any managers of the foundation v | | | (or an equally large port | ion of the ownership of a par | tnership or |
| other entity) of which the foundation h | ias a 10% or greater intere | st. | | | |
| NONE | | | | | |
| 2 Information Regarding Contribu | ition, Grant, Gift, Loan | , Scholarship, etc., Pi | rograms: | | |
| Check here 🕨 🔲 if the foundation | only makes contributions | to preselected charitable | organizations and does | not accept unsolicited reque | sts for funds. If |
| the foundation makes gifts, grants, etc | :., to individuals or organiz | ations under other condit | ions, complete items 2a | , b, c, and d. | |
| a The name, address, and telephone nu | mber or email address of the | he person to whom applic | cations should be addres | ssed: | |
| FRANKLIN & JENNIFER | MOORE, 734- | ·668-4040, F | RANK@FJMOO | REFOUNDATION. | ORG |
| 101 N. MAIN ST., SU | ITE 800, ANN | ARBOR, MI | 48104 | | |
| b The form in which applications should | | | | | |
| WRITTEN OR ELECTRON | | | | | |
| c Any submission deadlines: | | | | | |
| NONE | | | | | |
| d Any restrictions or limitations on awai | rds, such as by geographic | al areas, charitable fields. | kinds of institutions. or | other factors: | |
| NONE | .,, ggp | , | | | |
| ·- - | | | | | |

THE FRANKLIN AND JENNIFER MOORE

Form 990-PF (2017) FAMILY FOUNDATION

Part'XV Supplementary Information (continued)

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| A Company mornate | | | | |
|---|--|----------------------|----------------------------------|-------------|
| 3 Grants and Contributions Paid During the | Year or Approved for Future | Payment | - 1 | |
| 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 | Purpose of grant or contribution | Amount |
| | or substantial contributor | recipient | | |
| a Paid during the year | | | | |
| | | | | |
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| SEE ATTACHED STATEMENT | NONE | ₽C | SUPPORT THE PROGRAMS | |
| | | | OF THE RESPECTIVE | |
| | | | ENTITY. | 51,750 |
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| | | 1_ | | 51 550 |
| Total | | | ▶ 3a | 51,750 |
| b Approved for future payment | | | | |
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| NONE | | | | |
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| Total | 1 | <u> </u> | ▶ 3b | 0 |
| 17(8) | | | F 30 | |

THE FRANKLIN AND JENNIFER MOORE • Form 990-PF (2017) FAMILY FOUNDATION

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| iter gross amounts unless otherwise indicated. | Unrelated I | ousiness income | | by section 512, 513, or 514 | (e) | |
|---|-----------------|-----------------|----------------|-----------------------------|-------------------|--|
| ter gross amounts unless otherwise indicated. | (a) Business | (b) | (C) Exclu- | (d) | Related or exempt | |
| Program service revenue: | code | Amount | sion code | Amount | function income | |
| a | | | | | | |
| b | | | | | | |
| c | _ | | | | <u></u> | |
| d | - | | | | | |
| e | _ | | | | | |
| f | | | | | | |
| g Fees and contracts from government agencies | | | + | | | |
| Membership dues and assessments | | | + | | | |
| Interest on savings and temporary cash | | | 14 | 26. | | |
| investments Dividends and interest from securities | | - | 14 | 27,501. | | |
| Net rental income or (loss) from real estate; | | | | 27,301. | | |
| a Debt-financed property | - | | + +- | | | |
| b Not debt-financed property | | | + + | | | |
| Net rental income or (loss) from personal | | | 1 | | | |
| property | | | | | | |
| Other investment income | | | | | | |
| Gain or (loss) from sales of assets other | | | 1 1 | · · · · · · | | |
| than inventory | | | 18 | 28,499. | | |
| Net income or (loss) from special events | - | | | | | |
| Gross profit or (loss) from sales of inventory | | | | | | |
| Other revenue: | | | | | | |
| a | l | | | | | |
| b | | | | | | |
| C | | | | | | |
| | | | | | | |
| d | | | | | | |
| 0 | | | | | | |
| e Subtotal. Add columns (b), (d), and (e) | | 0 | | 56,026. | | |
| Subtotal. Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) | | 0 | | 56,026. | | |
| e Subtotal. Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) se worksheet in line 13 instructions to verify calculations.) | | | | 13 | | |
| Subtotal. Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) be worksheet in line 13 instructions to verify calculations. | | | | 13 | | |
| Subtotal. Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) the worksheet in line 13 instructions to verify calculations. Total. Add line 12, columns (b), (d), and (e) the worksheet in line 13 instructions to verify calculations. The worksheet in line 13 instructions to verify calculations. The worksheet in line 12, columns (b), (d), and (e) Total. Add columns (b), (d), and (e) Total. Add columns (b), (d), and (e) | to the Accor | nplishment of E | Exempt (| 13 Purposes | 56,02 | |
| Subtotal. Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) we worksheet in line 13 instructions to verify calculations.) Total. Add line 12, columns (b), (d), and (e) we worksheet in line 13 instructions to verify calculations.) Total Relationship of Activities The No. Explain below how each activity for which in the foundation's exempt purposes (other the | to the Accor | nplishment of E | Exempt (| 13 Purposes | 56,02 | |
| Subtotal. Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) we worksheet in line 13 instructions to verify calculations. Belationship of Activities The No. Explain below how each activity for which in | to the Accor | nplishment of E | Exempt (| 13 Purposes | 56,02 | |
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| Subtotal. Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) e worksheet in line 13 instructions to verify calculations.) art XVI-B Relationship of Activities ne No. Explain below how each activity for which in the foundation's exempt purposes (other the | to the Accor | nplishment of E | Exempt (| 13 Purposes | 56,02 | |
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| Subtotal. Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) we worksheet in line 13 instructions to verify calculations.) Total. Add line 12, columns (b), (d), and (e) we worksheet in line 13 instructions to verify calculations.) Total Relationship of Activities The No. Explain below how each activity for which in the foundation's exempt purposes (other the | to the Accor | nplishment of E | Exempt (| 13 Purposes | 56,02 | |
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| Subtotal. Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) we worksheet in line 13 instructions to verify calculations. Bart XVI-B Relationship of Activities ine No. Explain below how each activity for which in the foundation's exempt purposes (other the | to the Accor | nplishment of E | Exempt (| 13 Purposes | | |
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| Form 99 | n DE / | | 'RANKLIN A Y FOUNDAT | _ | NIFER MOORE | | 47 | 5533251 | 0. | 10 |
|--------------|----------|-------------------------------------|--------------------------|--------------------|-------------------------------------|--------------------------|---------------------------|----------------------------|-------------------|--|
| Part | _ | | | | ind Transactions a | nd Palationsh | | | | age 13 |
| | | Exempt Organ | | isicis to a | ing transactions a | nu neiationsi | iips With Non | Citatilable | 7 | |
| 1 Di | d the or | | | of the followin | ng with any other organization | on described in section | on 501(c) | | Yes | No |
| | | | | | g to political organizations? | | (0) | | | |
| | | from the reporting found | • | - | | | | | | |
| |) Cash | | | | 5 | | | 1a(1) | _ | X |
| - | • | assets | | | | | | 1a(2) | <u> </u> | X |
| | • | sactions: | | | | | | 1 | \vdash | |
| | | of assets to a noncharita | ble exempt organiza | tion | | | | 1b(1) | | X |
| - | • | hases of assets from a no | | | | | | 1b(2) | | X |
| | • | al of facilities, equipment, | · | • | | | | 1b(3) | | X |
| • | • | bursement arrangements | | | | | | 1b(4) | | X |
| - | • | s or loan guarantees | | | | | | 1b(5) | | X |
| • | • | rmance of services or me | embership or fundrai | sing solicitatio | ons | | | 1b(6) | | Х |
| - | • | f facilities, equipment, ma | • | - | | | | 1c | | X |
| | | | | | edule. Column (b) should alv | ways show the fair m | arket value of the go | ods, other ass | sets, | |
| | | | | | ed less than fair market valu | | _ | | - | |
| CO | lumn (| d) the value of the goods, | other assets, or serv | rices received. | | | | | | |
| (a)Line | no | (b) Amount involved | (c) Name of | f noncharitable | e exempt organization | (d) Description | of transfers, transaction | s, and sharing ar | тапдет | ents |
| | | | | N/A | | | | | | |
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| | | · | <u> </u> | | | | | | | |
| | | • | • | • | or more tax-exempt organi | zations described | | | | -n . |
| | | 501(c) (other than section | | ection 527? | | | | L Yes | LX | No |
| b If | Yes, c | omplete the following sch | | | T 43.7 | | (-) D-2 | -1 | | |
| | | (a) Name of org | janization | | (b) Type of organization | | (c) Description of rel | ationsnip | | |
| | | N/A | | | | | | | | |
| | | | | | | | | | | |
| | | | | | | | | | | . |
| — | | | | | | | | | | |
| | Undo | nenalties of Phiny I declare | that I have everning the | le return lockedie | ng accompanying schedules and | statements and to the | hest of my knowledge | | | |
| Cian | l and h | elief, it is true, correct, and cor | mplete Declaration of pr | eparer (other tha | in taxpayer) is based on all inform | nation of which preparer | has any knowledge | May the IRS return with th | ie prepa | rer |
| Sign Here | | tou. | Si Man | | 1 Valia | PRESID | | shown below | /? Se <u>e In</u> | nstr |
| | | nature of officer or trustee | | | Date | Title | EMI | _ X Yes | <u> </u> | _J No |
| | Gig | Print/Type preparer's na | | Preparer's s | | Date | Check if | PTIN | | |
| | | F.J. RICKE | | 1 ' | -1 / | | self- employed | | | |

Phone no. (734)994-7500 Form **990-PF** (2017)

P00091391

Paid Preparer

Use Only

Firm's name > IVERS,

Firm's address ▶ 2929 PLYMOUTH RD, SUITE 350

ANN ARBOR, MI 48105

THE FRANKLIN AND JENNIFER MOORE FAMILY FOUNDATION

EIN: 47-5533251

FORM 990-PF, PART XV, GRANTS FOR 2017

| RECIPIENT | ADDRESS | AMOUNT |
|---|---|-----------|
| Wonderfool Production | P. O. Box 7616 Ann Arbor, MI 48107 | 1,000.00 |
| Ann Arbor Summer Festival | 310 Depot Street, Ste. 3 Ann Arbor MI 48104 | 1,000.00 |
| Legacy Land Conservatory | 6276 Jackson Road, Ste. G Ann Arbor MI 48103 | 10,000.00 |
| Community Foundation of St. Clair | 500 Water Street, Port Huron MI 48060 | 1,000.00 |
| Make-A-Wish Foundation of Michigan | 7600 Grand River Ave, Ste. 175 Brighton, MI 48114 | 250.00 |
| Ele's Place | 3526 W. Liberty Ste. 200 Ann Arbor MI 48103 | 1,000.00 |
| Michigan Theater | 603 East Liberty Ann Arbor, MI 48104 | 10,000.00 |
| The Michigan Fitness Foundation | 14800 East Old U.S. 12 | 15,000.00 |
| Ann Arbor Art Center | 117 West Liberty Street, Ann Arbor MI 48104 | 10,000.00 |
| Girls Group | 1100 North Main Street, Ann Arbor MI 48104 | 1,000.00 |
| University of Michigan Garrett Halpert Memorial | 1000 Oakbrook Drive, Ste. 100 Ann Arbor MI 48104 | 750.00 |
| Make-A-Wish Foundation of Michigan | 7600 Grand River Ave, Ste. 175 Brighton, MI 48114 | 250.00 |
| Debra of America | 75 Broad Street, Ste. 300, New York, NY 10004 | 200.00 |

51,750.00

| FORM 990-PF IN | TEREST ON | SAVIN | GS AN | ID TEM | POR | ARY (| CASH | IN | VESTMENTS | sī | PATEMENT | 1 |
|--|---------------------------------------|-------------|----------------------|-----------------------------------|------|-------------|----------------------|-----------|-----------------------------|--------|-------------------------------|----------------|
| SOURCE JP MORGAN MONEY MARKET RAYMOND JAMES BANK TOTAL TO PART I, LINE 3 | | | , | (A) REVENUE NET PER BOOKS 3. 23. | | | (B) NET INVES | | VESTMENT | ľ | (C) ADJUSTED NET INCOME | |
| | | | | | | | | 3. 23. | | | - 111 1 | |
| | | | _ | | | | 26. | | | _ | | |
| FORM 990-PF | DIV | IDENDS | AND | INTER | EST | FROI | M SEC | CUR | ITIES | Si | PATEMENT | |
| SOURCE | | OSS OUNT | (| APITAL SAINS VIDENDS | | RE | (A) VENUI BOOI | | (B) NET INVE MENT INC | | (C) ADJUSTE NET INCO | |
| RAYMOND JAMES | 5 | 54,601. | | 27,100 | | 27,501 | |)1. | 27,501. | | | |
| TO PART I, LINE | E 4 5 | 54,601. | | 27,100 | | 27,501. | | 27,501. | | | | |
| FORM 990-PF | · · · · · · · · · · · · · · · · · · · | ····· | ACC | COUNTI | NG : | FEES | | | | Si | PATEMENT | 3 |
| DESCRIPTION | | | () EXPEI PER I | | | |) VEST NCOM | | (C) ADJUSTE NET INCO | | (D) CHARITAI PURPOSI | |
| 990-PF PREP FEI | ES | | 1 | L,050. | | - | (|). | | | 1,05 | 50. |
| TO FORM 990-PF, PG 1, LN 16B | | | 1,050. | | | 0. | | | | 1,050. | | |
| FORM 990-PF | | | TAXES | | | | STATEMENT 4 | | | | | |
| DESCRIPTION | | | EXPE | A) NSES BOOKS | | |) VEST NCOM | | (C) ADJUSTE NET INCO | | (D) CHARITAI PURPOSI | |
| FOREIGN TAXES | | | - | 411. | _ | | 41 | 1. | | | | 0. |
| EXCISE TAX - BA 2016 EXCISE TAX - EA MICHIGAN ANNUAL | STIMATE 20 | 17 | | 127. 400. 20. | | | + | 0. 0. | | | | 0. 0. 0. |
| TO FORM 990-PF | | | | 958. | - | | 41 | | | | | 0. |
| TO FORM JOU PP | , 10 1, DE | | | ,,,,,, | | | | _ • | | | | |

| FORM 990-PF | CORPORATE STOCK | | STAT: | EMENT 5 | | |
|--|--|-------------------|---------------------------------|----------------|--|--|
| DESCRIPTION | | BOOK VALUE | | MARKET ALUE | | |
| RAYMOND JAMES - MUTUAL FUNDS | | 1,017,60 | 00. 1 | 1,119,431. | | |
| TOTAL TO FORM 990-PF, PART II, | LINE 10B | 1,017,60 | 00. 1 | 1,119,431. | | |
| | IST OF OFFICERS, D ND FOUNDATION MANA | | STAT | EMENT 6 | | |
| NAME AND ADDRESS | TITLE AND AVRG HRS/WK | COMPEN- SATION | EMPLOYEE BEN PLAN CONTRIB | | | |
| FRANKLIN S. MOORE 101 N. MAIN ST., SUITE 800 ANN ARBOR, MI 48104 | PRESIDENT/TREA | | 0. | 0. | | |
| JENNIFER MCCUTCHEON MOORE 101 N. MAIN ST., SUITE 800 ANN ARBOR, MI 48104 | SECRETARY 1.00 | 0. | 0. | 0. | | |
| KATHERINE E. MOORE 101 N. MAIN ST., SUITE 800 ANN ARBOR, MI 48104 | TRUSTEE 1.00 | 0. | 0. | 0. | | |
| FRANKLIN M. MOORE 101 N. MAIN ST., SUITE 800 ANN ARBOR, MI 48104 | TRUSTEE 1.00 | 0. | 0. | 0. | | |
| MICHELLE A. MOORE 101 N. MAIN ST., SUITE 800 ANN ARBOR, MI 48104 | TRUSTEE 1.00 | 0. | 0. | 0. | | |
| TOTALS INCLUDED ON 990-PF, PAGE | 6, PART VIII | 0. | 0. | 0. | | |

FORM 990-PF

PART XV - LINE 1A LIST OF FOUNDATION MANAGERS STATEMENT 7

NAME OF MANAGER

FRANKLIN S. MOORE JENNIFER MCCUTCHEON MOORE