EXTENDED TO NOVEMBER 15, 2018
Return of Private Foundation

Form 990-PF or s	Return of Private Section 4947(a)(1) Trust Treat	ed as Private Foundation	do mublic	2017
	r social security numbers on v.irs.gov/Form990PF for instr			Open to Public Inspection
Fór calendar year 2017 or tax year beginning		, and ending	····	
Name of foundation			A Employer identification	number
A.A. VAN ELSLANDER FOUNDAT	rt (N		81-3973354	
Number and street for P O box number if mail is not delivered to street		Room/suite	B Telephone number	
34977 WOODWARD AVE	,	530	(248) 590-	2700
City or town, state or province, country, and ZIP or foreign	postal code	<u> </u>	C If exemption application is p	
BIRMINGHAM, MI 48009				
G Check all that apply: Initial return	Initial return of a fo	ormer public charity	D 1. Foreign organizations	s, check here
Final return	Amended return		2. Foreign organizations me	eting the 85% test.
Address change	Name change	011	Foreign organizations me check here and attach co	mputation
	exempt private foundation	09	E If private foundation sta	
Section 4947(a)(1) nonexempt charitable trust Fair market value of all assets at end of year J Account	Other taxable private foundanting method: X Cash	Accrual	under section 507(b)(1)	
, 1	Other (specify)	Accidal	F If the foundation is in a under section 507(b)(1)	
\$ 39,205,785. (Part I, col		s.)	under soonen oor (b)(1)	(L), chock hore
Dart I Analysis of Revenue and Expenses	(a) Revenue and	(b) Net investment	(c) Adjusted net	(d) Disbursements
(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	40,233,049.		N/A	
2 Check Interest on savings and temporary	10.440	10 110		CONTRACTOR (
3 Interest on savings and temporary cash investments	10,442.	10,442. 38,816.		STATEMENT 2
4 Dividends and interest from securities	38,810.	38,810.	5	STATEMENT A
5a Gross rents b Net rental income or (loss)			RE	CIEVED
6a Net gain or (loss) from sale of assets not on line 10	27,894.			FICAED
0	27,0521		8 NOV	21 200
b assets on line 6a 583,992. 7 Capital gain net income (from Part IV, line 2)		27,894.		1018 101
8 Net short-term capital gain				18
9 Income modifications			_ OG!	PEN UT
Gross sales less returns and allowances				
b Less Cost of goods sold	ļ			
c Gross profit or (loss)	<i>C</i> 100	-6.198.		CONTRACTOR 1
11 Other income	$\frac{-6,198}{40,304,003}$	70,954.		STATEMENT 3
12 Total Add lines 1 through 11 13 Compensation of officers, directors, trustees, etc	0.	70,334.		0
14 Other employee salaries and wages	·	•		
15 Pension plans, employee benefits				
16a Legal fees STMT 4	4,171.	0.		4,171
b Accounting fees STMT 5	4,800.	3,600.		1,200
b Accounting fees STMT 5 c Other professional fees STMT 6	31,798.	13,048.		18,750
9 17 Interest				
.E1	7.	7.		
19 Depreciation and depletion				
20 Occupancy 21 Travel, conferences, and meetings				
22 Printing and publications	5,718.	0.		5,718
23 Other expenses STMT 8	3,270.	0.		3,269
24 Total operating and administrative				
expenses. Add lines 13 through 23	49,764.	16,655.		33,108
25 Contributions, gifts, grants paid	1,076,167.			1,076,167
26 Total expenses and disbursements	1 405 554	4.5.5		1 400 05-
Add lines 24 and 25	1,125,931.	16,655.		1,109,275
27 Subtract line 26 from line 12:	20 170 070			
2 Excess of revenue over expenses and disbursements	39,178,072.	54,299.		
b Net investment income (if negative, enter -0-)		JZ, 433.	N/A	
c Adjusted net income (if negative, enter -0-)			14/4	<u> </u>

Par	Balance Sheets Attached schedules and amounts in the description	Beginning of year	End of year			
<u>rar</u>	column should be for end-of-year amounts only	(a) Book Value	(b) Book Value	(c) Fair Market Value		
1	Cash - non-interest-bearing		20,884,432.	20,884,432.		
2	Savings and temporary cash investments					
3	Accounts receivable					
`	Less: allowance for doubtful accounts ▶					
	Pledges receivable		•			
	Less; allowance for doubtful accounts					
_						
5	Receivables due from officers, directors, trustees, and other					
"	disqualified persons					
١.						
'	Other notes and loans receivable					
١.	Less: allowance for doubtful accounts					
st 8						
Assets	Prepaid expenses and deferred charges					
▼ 10	a Investments - U.S. and state government obligations		0 500 155	11 520 111		
İ	b Investments - corporate stock STMT 10	0.	8,708,175.	11,538,111.		
l	c Investments - corporate bonds					
11	Investments - land, buildings, and equipment basis					
	Less accumulated depreciation					
12	Investments - mortgage loans					
13	Investments - other STMT 11	0.	6,743,490.	6,766,456.		
14	Land, buildings, and equipment; basis					
	Less accumulated depreciation					
15	Other assets (describe	0.	16,786.	16,786.		
16	Total assets (to be completed by all filers - see the					
	instructions. Also, see page 1, item I)	0.	36,352,883.	39,205,785.		
17						
18	_ ` `.`					
10		,	····			
abilities 20						
E 21						
	· · · · · · · · · · · · · · · · · · ·		, , 	1		
22	Other liabilities (describe)			1		
	Tatal liabilities (add lines 17 through 99)	0.	0.			
- 23	Total liabilities (add lines 17 through 22)			t		
	Foundations that follow SFAS 117, check here					
ـ اي	and complete lines 24 through 26, and lines 30 and 31					
ğ 24	Unrestricted			1		
E 25				-		
<u>E</u> 26	·			1		
립	Foundations that do not follow SFAS 117, check here					
or Fund Balanc	and complete lines 27 through 31.	_	-			
	Capital stock, trust principal, or current funds	0.	0.			
Assets	Paid-in or capital surplus, or land, bldg., and equipment fund	0.	0.			
	Retained earnings, accumulated income, endowment, or other funds	0.	36,352,883.			
₹ 30		0.	36,352,883.			
				,		
31	Total liabilities and net assets/fund balances	0.	36,352,883.			
		lances				
Par	TIII Analysis of Changes III Net Assets of Fulld Da	iaiices				
1 Tot	al net assets or fund balances at beginning of year - Part II, column (a), line 3	30				
	ust agree with end-of-year figure reported on prior year's return)		1	0.		
•	er amount from Part I, line 27a		2	39,178,072.		
	ner increases not included in line 2 (itemize)		3	0.		
	d lines 1, 2, and 3		4	39,178,072.		
	creases not included in line 2 (itemize)	ርፑፑ ርጥ	ATEMENT 9 5	2,825,189.		
			ATEMENT 5 6	36,352,883.		
o 10	al net assets or fund balances at end of year (line 4 minus line 5) - Part II, co	iumii (u), iilie 30	10	Form 990-PF (2017		

(b) How acquired P - Purchase D - Donation

(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.)

1a PUBLICLY TRADED SECURITIES- 2961

b CAPITAL GAINS DIVIDENDS

Capital Gains and Losses for Tax on Investment Income

C d

(e) Gross sales price	(f) Depreciation allowed (or allowable)		st or other basis expense of sale	(n or (loss) f) minus (g))	
a 548,475.	<u></u>	· · · · ·	556,098.			
b 35,517.						-7,623. 35,517.
C _				_		
d						
<u>e</u>						
Complete only for assets showing	g gain in column (h) and owned by t	he foundation	on 12/31/69.			. (h) gain minus
(i) FMV as of 12/31/69	(j) Adjusted basis as of 12/31/69		cess of col. (1)	COI. (I	(), but no _osses (fr 	t less than -0-) or rom col. (h))
a						-7,623. 35,517.
b						35,51 <u>7.</u>
С						
<u>d</u>						
<u>e</u>				 		
2 Capital gain net income or (net cap	oital loss) $ \begin{cases} \text{If gain, also enter} \\ \text{If (loss), enter -0-} \end{cases} $	n Part I, line in Part I, line	7 }	2		27,894.
3 Net short-term capital gain or (loss		d (6):	٦			
If gain, also enter in Part I, line 8, on the state of th	column (c).		}	2		N/A
Part V Qualification Ur	nder Section 4940(e) for	Reduced	Tax on Net Inv	estment Incon	ne	
(For optional use by domestic private						
		010(0) 10/10/1	THE THE STATE OF T	··· <i>)</i>		
If section 4940(d)(2) applies, leave thi	s part blank.					
Was the foundation liable for the secti	on 4942 tax on the distributable am	ount of any ye	ar in the base period?			Yes X No
If "Yes," the foundation doesn't qualify			·			
1 Enter the appropriate amount in ea	ach column for each year; see the in	structions bef	ore making any entries	S		
(a) Base period years Calendar year (or tax year beginnin	(b) Adjusted qualifying dist	tributions	(c Net value of noncha		(c	(d) Distribution ratio ol. (b) divided by col. (c))
2016		0.		0.		.000000
2015						
2014						
2013						
2012						
2 Total of line 1, column (d)					2	.000000
3 Average distribution ratio for the 5		on line 2 by 5.0), or by the number of	years		00000
the foundation has been in existen	ce if less than 5 years				3	.000000
4. February and realize of a contractable		C				5,435,552.
4 Enter the net value of noncharitable	e-use assets for 2017 from Part X, I	ine 5			4	3,433,332.
F. Multiply line 4 by line 2					_	0.
5 Multiply line 4 by line 3					5	
6 Enter 1% of net investment income	o (19/, of Part I, line 27h)				6	543.
6 Enter 1% of het investment income	3 (176 UI Part I, IIIIe 270)					<u> </u>
7 Add lines 5 and 6					7	543.
7 Add liftes 5 and 0					- 	343.
8 Enter qualifying distributions from	Part XII, line 4				8	1,109,275.
	line 7, check the box in Part VI, line	1b, and comp	lete that part using a	% tax rate.		
See the Part VI instructions.						F- 000 DE (60 17)
723521 01-03-18		4				Form 990-PF (2017)
		4				

Form 990-PF (2017) A.A. VAN ELSLANDER FOUNDAT		81-3973 48 - see ir		Page 4
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 le				
b Domestic foundations that meet the section 4940(e) requirements in Part V, check		1		543.
of Part I, line 27b			t	
c All other domestic foundations enter 2% of line 27b. Exempt foreign organizations	s, enter 4% of Part I, line 12, col. (b). ノ	`		
2 Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundation	ns only; others, enter -0-)	2		<u> </u>
3 Add lines 1 and 2		3		543.
4 Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundation	ns only; others, enter -0-)	4		0.
5 Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter	er -0-	5		543.
6 Credits/Payments:				
a 2017 estimated tax payments and 2016 overpayment credited to 2017	6a 0.			
b Exempt foreign organizations - tax withheld at source	6b 0.			
c Tax paid with application for extension of time to file (Form 8868)	6c 5,000.			
d Backup withholding erroneously withheld	6d 0.			
7 Total credits and payments. Add lines 6a through 6d		7		0.000
8 Enter any penalty for underpayment of estimated tax. Check here X if Form 2	220 is attached	8		<u> </u>
9 Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed		9		457.
10 Overpayment If line 7 is more than the total of lines 5 and 8, enter the amount of		10	4	0.
11 Enter the amount of line 10 to be: Credited to 2018 estimated tax Part VII-A Statements Regarding Activities	4,457. Refunded ▶			<u> </u>
	Level to relation or did it portionate or intervene	<u> </u>		Yes No
1a During the tax year, did the foundation attempt to influence any national, state, or	local legislation of the it participate of intervene	111	1a	X
any political campaign?	real auranges? Can the instructions for the defini	tion	1b	X
b Did it spend more than \$100 during the year (either directly or indirectly) for politically the appropriate the particular of the partic		tion	- " 	
If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities ar	id copies of any materials published of			
distributed by the foundation in connection with the activities.			1c	X
 c Did the foundation file Form 1120-POL for this year? d Enter the amount (if any) of tax on political expenditures (section 4955) imposed 	during the year		"	- +
(1) On the foundation. \$			1 1	
e Enter the reimbursement (if any) paid by the foundation during the year for politic				
managers. > \$ 0.	al experiencie tax imposed on roundation			
2 Has the foundation engaged in any activities that have not previously been reporte	ed to the IRS2		2	X
If "Yes," attach a detailed description of the activities.	to the mo			
3 Has the foundation made any changes, not previously reported to the IRS, in its g	overning instrument, articles of incorporation, or			
bylaws, or other similar instruments? If "Yes," attach a conformed copy of the cha			3	X
4a Did the foundation have unrelated business gross income of \$1,000 or more during			4a	X
b If "Yes," has it filed a tax return on Form 990-T for this year?		N/A	4b	
5 Was there a liquidation, termination, dissolution, or substantial contraction during	the year?	-	5	Х
If "Yes," attach the statement required by General Instruction T	, ,			
6 Are the requirements of section 508(e) (relating to sections 4941 through 4945) s	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?	, .		6	Х
7 Did the foundation have at least \$5,000 in assets at any time during the year? If "\	es," complete Part II, col. (c), and Part XV		7	Х
, , , , , , , , , , , , , , , , , , , ,	, , , , , ,			
8a Enter the states to which the foundation reports or with which it is registered. See MI	e instructions.			
b If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-F	PF to the Attorney General (or designate)			
of each state as required by General Instruction G? If "No," attach explanation	· - ·		8b	Х
9 Is the foundation claiming status as a private operating foundation within the mea	ining of section 4942(j)(3) or 4942(j)(5) for calei	ndar		3
year 2017 or the tax year beginning in 2017? See the instructions for Part XIV. If			9	X
40. Did any paragraph become substantial contributors during the tay year?		тимит 13	10	x -

723531 01-03-18

Form **990-PF** (2017)

Page 5

Pa	rt 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			
	section 512(b)(13)? If "Yes," attach schedule. See instructions	11		X
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had advisory privileges?		,	
-	If "Yes," attach statement. See instructions	12_		X
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	Х	
	Website address ► N/A			
14	The books are in care of ▶ DIANE WELLS Telephone no. ▶ (248)	590	-27	00
	Located at ▶ 34977 WOODWARD AVE #530, BIRMINGHAM, MI ZIP+4 ▶48		-	
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - check here			\Box
	and enter the amount of tax-exempt interest received or accrued during the year	N	/A	
16	At any time during calendar year 2017, did the foundation have an interest in or a signature or other authority over a bank,		Yes	No
	securities, or other financial account in a foreign country?	16		X
	See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes," enter the name of the			
	foreign country			
Pa	irt VII-B Statements Regarding Activities for Which Form 4720 May Be Required			
	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.		Yes	No
1a	During the year, did the foundation (either directly or indirectly):			
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person? X Yes No	'		
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from)			
	a disqualified person?		ŀ	
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? X Yes No			ľ
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?			
	(5) Transfer any income or assets to a disqualified person (or make any of either available			
	for the benefit or use of a disqualified person)?			
	(6) Agree to pay money or property to a government official? (Exception Check "No"			
	If the foundation agreed to make a grant to or to employ the official for a period after			
	termination of government service, if terminating within 90 days.)			
b	If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations			
_	section 53.4941(d)-3 or in a current notice regarding disaster assistance? See instructions	1b		X
	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	ł		
•	before the first day of the tax year beginning in 2017?	1c		X
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation			
	defined in section 4942(j)(3) or 4942(j)(5)):			
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			l
	before 2017?			
	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) (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	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.			
	• ,			
3a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time			
	during the year?			
b	If "Yes," did it have excess business holdings in 2017 as a result of (1) any purchase by the foundation or 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,	$oxed{oxed}$	<u> </u>	
	Form 4720, to determine if the foundation had excess business holdings in 2017.) N/A	3b		<u> </u>
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a		X
b	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that	<u></u>	L_	igsqcup
	had not been removed from jeopardy before the first day of the tax year beginning in 2017?	4b		X
	Fo	rm 99	0-PF	(2017)

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

Form **990-PF** (2017)

Total. Add lines 1 through 3

For	m 990-PF (2017) A.A. VAN ELSLANDER FOUNDATION	01-39/3334	Page 8
P	art X Minimum Investment Return (All domestic foundations must complete this part. Foreign four	ndations, see instructions)	
- 1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes:		
a	Average monthly fair market value of securities	1a 1,762	<u>,239.</u>
b	Average of monthly cash balances	<u>ы 3,756</u>	,088.
C	Fair market value of all other assets	1c	
d	Total (add lines 1a, b, and c)	1d 5,518	,327.
е	Reduction claimed for blockage or other factors reported on lines 1a and		
	1c (attach detailed explanation) 1e 0.		
2	Acquisition indebtedness applicable to line 1 assets	2	0.
3	Subtract line 2 from line 1d	3 5,518	
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions)		<u>,775.</u>
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4		<u>,552.</u>
6	Minimum investment return Enter 5% of line 5	6 271	<u>,778.</u>
LP	art XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations ar	id certain	
_	foreign organizations, check here 🕨 🔲 and do not complete this part.)		
1	Minimum investment return from Part X, line 6	1 271	,778.
2a	,		
b	Income tax for 2017. (This does not include the tax from Part VI.)	<u> </u>	E 4 3
C	Add lines 2a and 2b	2c	543.
3	Distributable amount before adjustments. Subtract line 2c from line 1		,235.
4	Recoveries of amounts treated as qualifying distributions	4	0.
5	Add lines 3 and 4		,235.
6	Deduction from distributable amount (see instructions)	6	0.
<u>7</u>	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1	7 271	,235.
P	art XII Qualifying Distributions (see instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:		
a		1a 1,109	<u>,275.</u>
b	Program-related investments - total from Part IX-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:		
a	Suitability test (prior IRS approval required)	3a	
b	Cash distribution test (attach the required schedule)	3b	
4	Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8; and Part XIII, line 4	4 1,109	,275.
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	5	543.
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6 1,108	,732.

Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation qualifies for the section

Form **990-PF** (2017)

4940(e) reduction of tax in those years.

Part XIII Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2016	(c) 2016	(d) 2017
1 Distributable amount for 2017 from Part XI,	-	Todalo prior to 20 to		
line 7				271,235.
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:				
a From 2012		:		
b From 2013				
c From 2014				
d From 2015				
e From 2016				
f Total of lines 3a through e	0.			
4 Qualifying distributions for 2017 from				
Part XII, line 4: ►\$ 1,109,275.				
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.			
d Applied to 2017 distributable amount	7			271,235.
e Remaining amount distributed out of corpus	838,040.	_		
5 Excess distributions carryover applied to 2017 (If an amount appears in column (d), the same amount	0.			0.
must be shown in column (a))				
6 Enter the net total of each column as indicated below:				
a Corpus Add lines 3f, 4c, and 4e Subtract line 5	838,040.			
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				
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				l
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	0.			
not applied on line 5 or line 7	<u> </u>			
9 Excess distributions carryover to 2018.	838,040.			
Subtract lines 7 and 8 from line 6a	030,040.		· · · · · · · · · · · · · · · · · · ·	
10 Analysis of line 9:				
a Excess from 2013	-			
b Excess from 2014 c Excess from 2015	┥			
d Excess from 2016	Ⅎ			
e Excess from 2017 838, 040	1			
0 EVOCOD II OHI CO H	1	1		

723581 01-03-18

Form **990-PF** (2017)

	N ELSLANDER				73354 Page 10
Part XIV Private Operating F	oundations (see in	structions and Part V	II-A, question 9)	N/A	·
1' a If the foundation has received a ruling of					
foundation, and the ruling is effective fo		-	▶ ∟	<u> </u>	
b Check box to indicate whether the foun		ng foundation described		4942(j)(3) or4	942(j)(5)
2 a Enter the lesser of the adjusted net	Tax year	(b) 2016	Prior 3 years (c) 2015	(d) 2014	(e) Total
income from Part I or the minimum	(a) 2017	(0) 2016	(6) 2015	(0) 2014	(e) Iolai
investment return from Part X for					
each year listed				 	
b 85% of line 2a				 	<u> </u>
c Qualifying distributions from Part XII,					
line 4 for each year listed				 	
d Amounts included in line 2c not used directly for active conduct of					
exempt activities	`		/		
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					
(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)				`	1
(2) Support from general public					
and 5 or more exempt					
organizations as provided in section 4942(j)(3)(B)(iii)					
(3) Largest amount of support from					
an exempt organization		_			
(4) Gross investment income		<u> </u>			
Part XV. Supplementary Info	ormation (Comple	ete this part only	if the foundation	had \$5,000 or mo	re in assets
at any time during	the year-see inst	ructions.)			
1 Information Regarding Foundation					
a List any managers of the foundation we year (but only if they have contributed			ntributions received by the	e foundation before the clo	se of any tax
GARY A. VAN ELSLANDE	R			<u></u>	
b List any managers of the foundation w other entity) of which the foundation has			(or an equally large porti	on of the ownership of a p	partnership or
NONE					
2 Information Regarding Contribut	tion, Grant, Gift, Loan	, Scholarship, etc., F	Programs:		
Check here ► X if the foundation	only makes contributions	to preselected charitabl	e organizations and does		uests for funds. If
the foundation makes gifts, grants, etc					
a The name, address, and telephone nun	nber or email address of t	he person to whom appl	ications should be addres	sed.	
b The form in which applications should	be submitted and informa	ation and materials they	should include:	· -	
c Any submission deadlines:					
d Any restrictions or limitations on awar	ds, such as by geographic	cal areas, charitable field	s, kinds of institutions, or	other factors:	

Supplementary Information (continued) 3 Grants and Contributions Paid During the Year or Approved for Future Payment If recipient is an individual, Recipient show any relationship to Foundation Purpose of grant or Amount any foundation manager status of contribution Name and address (home or business) or substantial contributor recipient a Paid during the year 501(C)3 OPERATIONS SUPPORT SOLANUS CASEY 1780 MT. ELLIOTT STREET 525,000. DETROIT, MI 48207 SANCTUM HOUSE 501(C)3 OPERATIONS SUPPORT 200 W 2ND STREET, # 842 ROYAL OAK, MI 48068 50,000. 501(C)3 HUMANITARIAN PROVIDENCE HEALTH FOUNDATION 30055 NORTHWESTERN HWY L-10 FARMINGTON HILLS, MI 48334 501,167. 1,076,167. ▶ 3a Total b Approved for future payment NONE Total

Part XVI-A **Analysis of Income-Producing Activities**

Enter gross amounts unless otherwise indicated.	Unrelated	d business income	Exclude (C) Exclu-	ed by section 512, 513, or 514	(e)		
•	(a) Business	(b) SS Amount		(d) Amount	Related or exempt function income		
1 Program service revenue:	code	Allount	code	Amount	- Tunction income		
a	-		+				
b	-		+-+				
C	-		+	··			
d	-						
e	-						
f	_ 						
g Fees and contracts from government agencies							
2 Membership dues and assessments			+++		_ 		
3 Interest on savings and temporary cash			1 1 1	10 442			
investments			14	10,442.			
4 Dividends and interest from securities			14	38,810.			
5 Net rental income or (loss) from real estate:	· · · · · · · · · · · · · · · · · · ·						
a Debt-financed property	-		+				
b Not debt-financed property							
6 Net rental income or (loss) from personal							
property			10	6 100			
7 Other investment income			18				
8 Gain or (loss) from sales of assets other				05.004			
than inventory			18	27,894.			
9 Net income or (loss) from special events							
10 Gross profit or (loss) from sales of inventory			+				
11 Other revenue:							
a	_						
b	_			·			
C	_						
d	_						
e	_						
12 Subtotal. Add columns (b), (d), and (e)	<u> </u>	0		70,954.	0.		
13 Total. Add line 12, columns (b), (d), and (e)				13	70,954.		
(See worksheet in line 13 instructions to verify calculations.)							

Dod VVI D	Relationship of Activities to the Acc	amplichment of Evennt Durnage
Pall Avi-D	neiationship of Activities to the Act	CHIDIISHHEHL OF EXCHIDE FULDOSES

Line No. ▼	Explain below how each activity for which income is reported in column (e) of Part XVI-A contributed importantly to the accomplishment of the foundation's exempt purposes (other than by providing funds for such purposes).						
-							

Form **990-PF** (2017)

Form 99	0-PF (20		VAN ELSLA					73354	Pa	age 13
Part	XVII			sfers to a	nd Transactions a	nd Relations	nips With Noncha	ritable		
		Exempt Organ						 -	Yes	No
					ig with any other organizat		tion 501(c)		res	INO
•					to political organizations?	,				
		rom the reporting founda	ation to a noncharitat	ble exempt orq	ganization of:			4.44	 	اپ
	Cash							1a(1)		X
	Other							1a(2)	├	<u> </u>
-		actions:						41.43	\vdash	X
٠,,		of assets to a noncharital						1b(1)	1	X
		ases of assets from a no		irganization				1b(2)	1	X
٠,		of facilities, equipment,						1b(3)		X
		ursement arrangements						1b(4)	1	X
		or loan guarantees						1b(5)	1	X
		mance of services or me						1b(6)	\vdash	X
	•	facilities, equipment, ma	•			liveria abaix the form	manufact various of the speed	1c	<u> </u>	<u> </u>
					dule. Column (b) should a				5615,	
		the value of the goods,			ed less than fair market val	ue in any transactio	in or snaming arrangement	i, SHOW III		
(a) Line n	- ' '	b) Amount involved	•		e exempt organization	(d) Description	on of transfers, transactions, a	nd sharing arr	angemer	nts
(d) cine ii	" '	b) / titlount involved	(6) Hambon	N/A	o compt of gameation	(5) 5 5 5 5 5 5 5				
				M/A		<u> </u>				
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ın:	section (dation directly or indirect 501(c) (other than section mplete the following sch	n 501(c)(3)) or in se	•	or more tax-exempt organ	nizations described		Yes	X	□ No
		(a) Name of org	janization		(b) Type of organization		(c) Description of relati	onship		
		N/A								
				<u> </u>		<u> </u>				
						<u> </u>				
	1				<u> </u>	<u> </u>				
Sign Here	and bel		nplete Declaration of pre	_	accompanying schedules and taxpayer) is based on all inform	ation of which preparer	· ·	May the IRS return with the shown below X Yes	ne prepar /? See in:	er
	T, Sign	Print/Type preparer's na		Preparer's s	Date /	Date	Check If PT	'IN		
				Trichatel 9 9	ngnatur c	Date	self- employed	•		
Paid		JEFFREY M.	BROGLEY,	TPPPP	ייי זיי ∧ מים או עי	11/12/10	' '	00170	1227	
	arer	CPA DEU	MANNI BORG		Y M. BROGLE	11/13/18	Firm's EIN ► 38 -	36357	106	
-	reparer Firm's name ► REHMANN ROBSON LLC						FIRM'S EIN P 36-	- 3033/	00	

Form **990-PF** (2017)

Phone no. 248-579-1100

Firm's address ▶ 39300 W TWELVE MILE RD, STE 100

FARMINGTON HILLS, MI 48331-2989

Schedule B

(Form 990, 990-EZ, or, 990-PF)

Department of the Treasury Internal Revenue Service

Schedule of Contributors

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

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

OMB No 1545-0047

2017

Name of the organization

Employer identification number

	A.A. VAN ELSLANDER FOUNDATION	81-3973354
Organization type (chec	ck one)	
Filers of:	Section:	
Form 990 or 990-EZ	501(c)() (enter number) organization	
	4947(a)(1) nonexempt charitable trust not treated as a private foundation	n
	527 political organization	
Form 990-PF	X 501(c)(3) exempt private foundation	
	4947(a)(1) nonexempt charitable trust treated as a private foundation	
	501(c)(3) taxable private foundation	
· -	on is covered by the General Rule or a Special Rule . 1(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Spe	cial Rule See instructions
General Rule		
	ation filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions any one contributor. Complete Parts I and II. See instructions for determining a contribution.	
Special Rules		
sections 509(a)(any one contrib	ation described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% su (1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13 outor, during the year, total contributions of the greater of (1) \$5,000, or (2) 2% of the EZ, line 1 Complete Parts I and II	3, 16a, or 16b, and that received from
year, total contr	ation described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received ributions of more than \$1,000 exclusively for religious, charitable, scientific, literary, of cruelty to children or animals. Complete Parts I, II, and III	
year, contribution is checked, enter purpose Don't of the contribution of the contribu	ation described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received ons <i>exclusively</i> for religious, charitable, etc., purposes, but no such contributions to the er here the total contributions that were received during the year for an <i>exclusively</i> of complete any of the parts unless the General Rule applies to this organization becausely, etc., contributions totaling \$5,000 or more during the year	taled more than \$1,000 If this box religious, chantable, etc.,
but it must answer "No"	n that isn't covered by the General Rule and/or the Special Rules doesn't file Schedulon Part IV, line 2, of its Form 990, or check the box on line H of its Form 990-EZ or cet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).	

LHA For Paperwork Reduction Act Notice, see the instructions for Form 990, 990-EZ, or 990-PF. Schedule B (Form 990, 990-EZ, or 990-PF) (2017)

Employer identification number

A.A. VAN ELSLANDER FOUNDATION

Part I	Contributors (see instructions) Use duplicate copies of Part I if additional	space is needed	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	DEBRA VAN ELSLANDER 34977 WOODWARD AVE, SUITE 530 BIRMINGHAM, MI 48009	\$ 3,971,946.	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
2	GARY VAN ELSLANDER 34977 WOODWARD AVE, SUITE 530 BIRMINGHAM, MI 48009	\$3,972,012.	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
3	LORI WEBB 34977 WOODWARD AVE, SUITE 530 BIRMINGHAM, MI 48009	\$_3,973,486.	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
4	KIM VAN ELSLANDER 34977 WOODWARD AVE, SUITE 530 BIRMINGHAM, MI 48009	\$3,973,904.	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
5	BETH WOOD 34977 WOODWARD AVE, SUITE 530 BIRMINGHAM, MI 48009	\$ <u>3,976,699</u> .	Person X Payroll Noncash X (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
6	DAVID VAN ELSLANDER 34977 WOODWARD AVE, SUITE 530 BIRMINGHAM, MI 48009	\$ <u>3,973,635</u> .	Person X Payroll X Noncash X (Complete Part II for noncash contributions)

Employer identification number

A.A. VAN ELSLANDER FOUNDATION

Part I	Contributors (see instructions) Use duplicate copies of Part I if additional	space is needed	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
7	KAREN PAGLINO 34977 WOODWARD AVE, SUITE 530 BIRMINGHAM, MI 48009	\$_3,972,413.	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
8	KRIS SCARFONE 34977 WOODWARD AVE, SUITE 530 BIRMINGHAM, MI 48009	\$ <u>3,973,959</u> .	Person X Payroll Noncash X (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
9	KENNETH VAN ELSLANDER 34977 WOODWARD AVE, SUITE 530 BIRMINGHAM, MI 48009	\$ <u>3,970,995</u> .	Person X Payroll X Noncash X (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
10	SANDRA SEROKA 34977 WOODWARD AVE, SUITE 530 BIRMINGHAM, MI 48009	\$3,972,132.	Person X Payroll X Noncash X (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
11	ARCHIE VAN ELSLANDER 34977 WOODWARD AVE, SUITE 530 BIRMINGHAM, MI 48009	\$501,868.	Person X Payroll X Noncash X (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroli Noncash (Complete Part II for noncash contributions)

Employer identification number

A.A. VAN ELSLANDER FOUNDATION

	VAN ELSLANDER FOUNDATION		-39/3354
Part II	Noncash Property (see instructions) Use duplicate copies of P	art II if additional space is needed	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
	MARKETABLE SECURITIES		
_1			
		\$ 389,866.	12/15/17
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
_	MARKETABLE SECURITIES		
2		sss	12/15/17
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
	MARKETABLE SECURITIES		
3		\$ \$\$	12/15/17
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
	MARKETABLE SECURITIES		
4		\$\s\s\1,037,324.	12/15/17
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
	MARKETABLE SECURITIES		
5			
		\$ 1,399,219.	12/15/17
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
	MARKETABLE SECURITIES		
6			
		\$\$\$	12/15/17
453 11-01	1-17	Schedule B (Form 9	90, 990-EZ, or 990-PF) (

Employer identification number

A.A. VAN ELSLANDER FOUNDATION

art II	Noncash Property (see instructions). Use duplicate copies of P.	<u> </u>	39/3354
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
7	MARKETABLE SECURITIES		
		s613,833.	12/15/17
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
8	MARKETABLE SECURITIES		
		\$\s\s1,038,179.	12/15/17
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
9	MARKETABLE SECURITIES		
		\$\s493,115.	12/15/17
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
10	MARKETABLE SECURITIES		
		\$\$ 638,852.	12/15/17
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
11	MARKETABLE SECURITIES		
		\$501,868.	10/06/17
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	
3453 11-0	1-17	Schedule B (Form 99	0, 990-EZ, or 990-PF) (2

me of organiz	zation		Er	nployer identification number
.A. VAI	N ELSLANDER FOUNDATION			81-3973354_
art III	Exclusively religious, charitable, etc., contributhe year from any one contributor. Complete colu	mns (a) through (e) and the folio	OWING line entry. For organizations	
	completing Part III, enter the total of exclusively religious, of Use duplicate copies of Part III if additional s	naritable, etc., contributions of \$1,000 or	less for the year (Enter this info once)	> \$
n) No.			(d) December	tion of how wift to hold
art I	(b) Purpose of gift	(c) Use of gift	(a) Descrip	tion of how gift is held
-				
_ _				
_				
		(e) Transfer of gi	π	
	Transferee's name, address, and	ZIP + 4	Relationship of transf	eror to transferee
-				
) No.	· · · · · · · · · · · · · · · · · · ·			
rom art I	(b) Purpose of gift	(c) Use of gift	(d) Descrip	tion of how gift is held
			· · · · · · · · · · · · · · · · · · ·	
_				
		(e) Transfer of gi	ft	
	Transferee's name, address, and	ZIP + 4	Relationship of transf	eror to transferee
-				
) No. rom art I	(b) Purpose of gift	(c) Use of gift	(d) Descrip	tion of how gift is held
_				
_				
-				
		(e) Transfer of gi	ft	
	Transferee's name, address, and	ZIP + 4	Relationship of trans	eror to transferee
_				
-				
n) No. rom Part I	(b) Purpose of gift	(c) Use of gift	(d) Descrip	otion of how gift is held
art I		<u>.</u>		
_				
				
	·	(e) Transfer of gi	ift	
	Townstown to make the control of the	71D . 4	Dolotionahir -f turi-	iovov to transfere-
-	Transferee's name, address, and	<u> </u>	Relationship of trans	eror to transferee
_				
1				

FORM 990-PF INTERE	ST ON SAVING	S AND I	'EMPOR	ARY	CASH :	INVESTMENTS	នា	PATEMENT 1
SOURCE	,		(A) VENUE BOOKS	S		(B) INVESTMENT INCOME	N	(C) ADJUSTED ET INCOME
BLACKROCK APCO BLUESTEIN EGERTON GRANGER NEPC SHAPIRO			7,494. 2,356. 49. 96. 438. 9.		7,494. 2,356. 49. 96. 438. 9.			
TOTAL TO PART I, LI	NE 3		10,4	42.		10,442.		
FORM 990-PF	DIVIDENDS A	AND INT	EREST	FRC	M SEC	JRITIES	SI	PATEMENT 2
SOURCE	GROSS AMOUNT	CAPIT GAIN DIVIDE	IS		(A) VENUE BOOK	(B) NET INVES MENT INCO		(C) ADJUSTED NET INCOME
BLUESTEIN EGERTON GRANGER NEPC SHAPIRO	3,460. 2,577. 52,978. 14,555. 763.	-	212. 791. 509. 5.		3,248 786 19,469 14,556	78 9. 19,46 0. 14,55	6.	
TO PART I, LINE 4	74,333.	35,	517.		38,81	38,81	6.	
FORM 990-PF		OTHER	INCO	 ME			SI	PATEMENT 3
DESCRIPTION				(A) VENU BOC		(B) NET INVEST- MENT INCOME		(C) ADJUSTED NET INCOME
EGERTON BLACKROCK APCO					,504.	-7,504 1,306		
TOTAL TO FORM 990-P	F, PART I, L	INE 11		- 6	,198.	-6,198		

FORM 990-PF	LEGAL	FEES	S	TATEMENT 4
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
LEGAL FEES	4,171.	0.		4,171.
TO FM 990-PF, PG 1, LN 16A	4,171.	0.		4,171.
FORM 990-PF	ACCOUNTI	NG FEES	S	TATEMENT 5
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
ACCOUNTING FEES	4,800.	3,600.		1,200.
TO FORM 990-PF, PG 1, LN 16B	4,800.	3,600.		1,200.
FORM 990-PF (OTHER PROFES	SIONAL FEES	S	TATEMENT 6
	(A) EXPENSES	. (B) NET INVEST-	(C) ADJUSTED	(D) CHARITABLE
DESCRIPTION	(A) EXPENSES PER BOOKS 13,048.	(B) NET INVEST- MENT INCOME 13,048.	(C)	(D) CHARITABLE PURPOSES
DESCRIPTION INVESTMENT MANAGEMENT FEES CONSULTING FEES	(A) EXPENSES PER BOOKS 13,048. 18,750.	(B) NET INVEST- MENT INCOME 13,048. 0.	(C) ADJUSTED	(D) CHARITABLE PURPOSES 0. 18,750.
DESCRIPTION	(A) EXPENSES PER BOOKS 13,048.	(B) NET INVEST- MENT INCOME 13,048.	(C) ADJUSTED	(D) CHARITABLE PURPOSES
DESCRIPTION INVESTMENT MANAGEMENT FEES CONSULTING FEES	(A) EXPENSES PER BOOKS 13,048. 18,750.	(B) NET INVEST- MENT INCOME 13,048. 0. 13,048.	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES 0. 18,750.
DESCRIPTION INVESTMENT MANAGEMENT FEES CONSULTING FEES TO FORM 990-PF, PG 1, LN 16C	(A) EXPENSES PER BOOKS 13,048. 18,750. 31,798.	(B) NET INVEST- MENT INCOME 13,048. 0. 13,048.	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES 0. 18,750.
DESCRIPTION INVESTMENT MANAGEMENT FEES CONSULTING FEES TO FORM 990-PF, PG 1, LN 16C FORM 990-PF	(A) EXPENSES PER BOOKS 13,048. 18,750. 31,798. TAX: (A) EXPENSES	(B) NET INVEST- MENT INCOME 13,048. 0. 13,048. ES (B) NET INVEST-	(C) ADJUSTED NET INCOME S (C) ADJUSTED	(D) CHARITABLE PURPOSES 0. 18,750. 18,750. TATEMENT 7 (D) CHARITABLE
DESCRIPTION INVESTMENT MANAGEMENT FEES CONSULTING FEES TO FORM 990-PF, PG 1, LN 16C FORM 990-PF DESCRIPTION	(A) EXPENSES PER BOOKS 13,048. 18,750. 31,798. TAX: (A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME 13,048. 0. 13,048. ES (B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME S (C) ADJUSTED	(D) CHARITABLE PURPOSES 0. 18,750. 18,750. TATEMENT 7 (D) CHARITABLE PURPOSES

FORM 990-PF	OTHER E	XPENSES	STATEMENT 8		
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES	
OFFICE SUPPLIES DUES	2,470. 800.	0.		2,469.	
TO FORM 990-PF, PG 1, LN 23	3,270.	0.		3,269.	

FORM 990-PF	OTHER	DECREASES	IN NET	ASSETS	OR FUN	D BALANCES	STATEMENT 9
DESCRIPTION							AMOUNT
ADJUSTMENT FO	R THE CO	NTRIBUTION	OF AP	PRECIAT	ED SECU	RITIES	2,825,189.
TOTAL TO FORM	990-PF,	PART III	LINE	5			2,825,189.
FORM 990-PF			CORPO	RATE ST	оск		STATEMENT 10
DESCRIPTION						BOOK VALUE	FAIR MARKET VALUE
NEPC BLUESTEIN						4,894,234. 1,923,064.	7,692,524. 1,965,527.
SHAPIRO						390,985.	414,631.
GRANGER						1,499,892.	1,465,429.

FORM 990-PF C	THER INVESTMENTS		STATEMENT 11
DESCRIPTION	VALUATION METHOD	BOOK VALUE	FAIR MARKET VALUE
NEPC	FMV	36,060.	37,560
BLUESTEIN	FMV	2,890,424.	2,896,020
GRANGER	FMV	1,000,000.	1,001,245
ATHENE	FMV	2,000,000.	2,002,704
EGERTON	FMV	745,115.	759,203
BLACKROCK-APCO	FMV	71,891.	69,724
TOTAL TO FORM 990-PF, PART II, I	TNE 13	6,743,490.	6,766,456
		0,743,490.	0,700,430
FORM 990-PF	OTHER ASSETS	0,743,430.	STATEMENT 12
		END OF YEAR BOOK VALUE	
FORM 990-PF DESCRIPTION INTEREST & DIVIDEND RECEIVABLE PURCHASE INTEREST	OTHER ASSETS BEGINNING OF	END OF YEAR	STATEMENT 12 FAIR MARKET

FORM 990-PF LIST OF SU	JBSTANTIAL CONTRIBUTORS STATEMENT 13 P VII-A, LINE 10
NAME OF CONTRIBUTOR	ADDRESS
DEBRA VAN ELSLANDER	34977 WOODWARD AVE, SUITE 530 BIRMINGHAM, MI 48009
GARY VAN ELSLANDER	34977 WOODWARD AVE, SUITE 530 BIRMINGHAM, MI 48009
LORI WEBB	34977 WOODWARD AVE, SUITE 530 BIRMINGHAM, MI 48009
KIM VAN ELSLANDER	34977 WOODWARD AVE, SUITE 530 BIRMINGHAM, MI 48009
BETH WOOD	34977 WOODWARD AVE, SUITE 530 BIRMINGHAM, MI 48009
DAVID VAN ELSLANDER	34977 WOODWARD AVE, SUITE 530 BIRMINGHAM, MI 48009
KAREN PAGLINO	34977 WOODWARD AVE, SUITE 530 BIRMINGHAM, MI 48009
KRIS SCARFONE	34977 WOODWARD AVE, SUITE 530 BIRMINGHAM, MI 48009
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