S&E 927 927

Department of the Treasury

EXTENDED TO NOVEMBER 15, 2018
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.

2017
Open to Public Inspection

	interna	II Kev		113.90471 071110001 1 107 11130	dollons and t			T Open to Fublic Inspection	
	For c	alen	dar year 2017 or tax year beginning SEF	19, 2017	, and e	nding	DEC 31, 2017	<del></del>	
	Nan	ne of	foundation				A Employer identification	number	
			E AND ELISSA LOWERY FOU		82-2999216				
			nd street (or P O box number if mail is not delivered to street	<b>'</b>		Room/suite	B Telephone number	700	
			OTTAWA AVE NW, SUITE 5	······			(616)643-4		
	_		own, state or province, country, and ZIP or foreign p. ND RAPIDS, MI 49503	Postal code			C If exemption application is pe	nding, check here	
	G C	heck	all that apply: X Initial return	Initial return of a f	ormer public (	charity	D 1. Foreign organizations	, check here	
			Final return	Amended return			Foreign organizations mee     check here and attach cor	ating the 85% test,	
			Address change	Name change		-17	check here and attach cor	nputation	
$\mathbf{O}$	H C		type of organization X Section 501(c)(3) e ection 4947(a)(1) nonexempt charitable trust	Sempt private foundation  Other taxable private foundation	ation	00	E If private foundation stat		
_	ــــــــــــــــــــــــــــــــــــ		1 1	ing method: X Cash	Accr	ual	under section 507(b)(1)		
Ø			l <del></del>	Other (specify)	^0	uai	F If the foundation is in a 6 under section 507(b)(1)		
	<b>\</b>			mn (d) must be on cash basi	ıs.)		21.00. 000.01. 007 (0)(1.7	(5), 5.115.11	
	Pa	rt I	Analysis of Revenue and Expenses (The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (e))	(a) Revenue and expenses per books		vestment ome	(c) Adjusted net	(d) Disbursements for charitable purposes (cash basis only)	
9	2	1	Contributions, gifts, grants, etc., received	10,000.	55 PAGE 1755	الكاري والتناول ال	明られ/AWA	计分类数据 智拉克	
	<b>४</b>	2	Check I if the foundation is not required to attach Sch B	张沙····································			कुप्रवास्त्राच्या सन्यक्ष्यकृत	[\$ 5. \$\$ \$P\$ = \$P\$ 3. \$P\$ 2.	
2	<b>z</b>	3	Interest on savings and temporary cash investments					三日 一日	
ŕ	SCANNED	4	Dividends and interest from securities					の必然の問題を	
C	ן כ	5a	Gross rents					2.6 10 40 10 10 10 10 10 10 10 10 10 10 10 10 10	
7	:	b	Net rental income or (loss)	2020年12日本			的表外统法的理论 其是		
JAN 3 I	9	6a	Net gain or (loss) from sale of assets not on line 10 Gross sales price for all		The last parties of			Baller and the second	
دع		_ b	assets on line 6a	RECEIV	ED	#12F44	The state of the s	STREET CONTROL OF THE	
	Reven	7	Capital gain net income (from Part IV, line 2)	O 1497 FT. 122 FT. 1470	<del></del>	0.	the Carte after const. It characters in	The state of the state of the	
2019		0	Net short-term capital gain Income modifications	8 NOV-1-9-2				本にいきには必ずりは、Ar	
6		10a	Gross sales less returns and allowances	5 5 5 5 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7	UID O	2027, 2700	The state of the state of the state of	THE STREET, THE THE	
			Less Cost of goods sold	(4)	Ľ.	(1) 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	STATE TO BE SEED TO		
			Gross profit or (loss)	OGDEN.	UTTO	23. Use Tage		(2) (本事な) からい	
		11	Other income					THE WATER TO BE	
	_	12	Total. Add lines 1 through 11	10,000.		0.		74 . miles 12 . 11 11 1	
	- 1	13	Compensation of officers, directors, trustees, etc	0.	<del> </del>	0.		0.	
		14	Other employee salaries and wages					•	
	S	15	Pension plans, employee benefits Legal fees 'STMT 1	2,184.		0.		2,184.	
	nses	_	Legal fees 'STMT'L Accounting fees	2,104.				2,104.	
	Expe		Other professional fees	<del> </del>					
	e E	17	Interest					<del>-</del>	
	Administrative	18	Taxes				·		
	istr	19	Depreciation and depletion					<b>计外部设施数据 200</b> 位	
	Ë	20	Occupancy						
		21	Travel, conferences, and meetings				•		
	and	22	Printing and publications		ļ <del>.</del> .				
		23	Other expenses		ļ		 		
	Operating	24	Total operating and administrative	0.104		^		2 104	
	) De		expenses. Add lines 13 through 23	2,184.	CATEGORIA PA	0.	ESSO ALTERNATION	2,184.	
	٦	25	Contributions, gifts, grants paid	0.	S. 1 - 100 " 2" 2"	w Come Come C	STABLE LAND AND STEEL PROPERTY.	· ·	
		26	Total expenses and disbursements.	2,184.		0.		2,184.	
	$\dashv$	27	Add lines 24 and 25 Subtract line 26 from line 12,	CLI WARELSON	F. Wards	13177.227	4444 MAY 18 18 18 18 18 18 18 18 18 18 18 18 18	当学院ですて程度では、他	
			Subtract file 20 from file 12.	7,816.	是透透				
			Net investment income (if negative, enter -0-)	CHE CARRONING		0.	Q# 21.11 , 2784, 9814 W	3 15 15 15 15 15 15 15 15 15 15 15 15 15	

W

723501 01-03-18 LHA For Paperwork Reduction Act Notice, see instructions.

C Adjusted net income (if negative, enter -0-)

orm s	990-PF (2017) NATE AND ELISSA LOWERY	FOUNDATION		2999216 Page 2
Par	Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only	Beginning of year		f year
	Column Should be for the or year amounts only	(a) Book Value	(b) Book Value	(c) Fair Market Value
1	Cash - non-interest-bearing		9,384.	9,384.
2	Savings and temporary cash investments			
3	Accounts receivable ►		•	
	Less: allowance for doubtful accounts			<u> </u>
4	Pledges receivable	Maria de la Caractería de Caractería de la Caractería de		· ·
- 1	Less; allowance for doubtful accounts	] ,		
5	Grants receivable			
6				
1,	disqualified persons	}		
١,	Other notes and loans receivable	.4	·	2 3
'		1`` · · · ·		
Ι.	Less: allowance for doubtful accounts	<del>                                     </del>		<del></del>
	Inventories for sale or use			<del></del>
SSI	Prepaid expenses and deferred charges		<del></del>	<del></del>
10 ا	a Investments - U.S. and state government obligations			<del> </del>
- {	b Investments - corporate stock			
	c Investments - corporate bonds			
11	Investments - land, buildings, and equipment basis	] . :	,	**
	Less accumulated depreciation			
12	Investments - mortgage loans			Ĺ
13	Investments - other			
14	Land, buildings, and equipment basis	are the second of		4
	Less accumulated depreciation	1		
115	Other assets (describe >		<del></del>	
- 1	Total assets (to be completed by all filers - see the			
-   "		0.	9,384.	9,384.
-   -	instructions. Also, see page 1, item I)	<del>                                     </del>	7,304.	3,301.
	Accounts payable and accrued expenses	<del></del>		
18	• •			
ر ا ا				
= 1	Loans from officers, directors, trustees, and other disqualified persons	<u> </u>		
윤 21	Mortgages and other notes payable			3.3
<b> 22</b>	Other liabilities (describe > MISC. PAYABLES	0.	1,568.	
23	Total liabilities (add lines 17 through 22)	0.	1,568.	
	Foundations that follow SFAS 117, check here			·
1	and complete lines 24 through 26, and lines 30 and 31.			<u>'</u>
S 24	Unrestricted			` '
E 25	Temporarily restricted			],, .
E 26				1 .
삥	Foundations that do not follow SFAS 117, check here			1- ,
<u>ا</u> ڌِ.	and complete lines 27 through 31.			
Net Assets or Fund Balar	•	0.	0.	
हैं ] हैं		0.	0.	1
es 2		0.	7,816.	_
Ž 29	, , ,			1.
울 30	Total net assets or fund balances	0.	7,816.	<sup>™</sup>
1			0 204	
3.	Total liabilities and net assets/fund balances	0.	9,384.	
Par	Analysis of Changes in Net Assets or Fund B	alances		
				<del>,</del>
To	tal net assets or fund balances at beginning of year - Part II, column (a), line	e 30	Ţ	
(m	ust agree with end-of-year figure reported on prior year's return)		1	0.
	ter amount from Part I, line 27a		2	7,816.
	ner increases not included in line 2 (itemize)		3	0.
	d lines 1, 2, and 3	····	4	7,816.
	creases not included in line 2 (itemize)		5	0.
	· · · · · · · · · · · · · · · · · · ·	polume (h) June 20		7,816.
10	tal net assets or fund balances at end of year (line 4 minus line 5) - Part II, o	column (b), line 30		Form <b>990-PF</b> (2017)
				10rm 990-PF (2017)

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7 Add lines 5 and 6

Form 990-PF (2017)

If line 8 is equal to or greater than line 7, check the box in Part VI, line 1b, and complete that part using a 1% tax rate.

See the Part VI instructions.

8 Enter qualifying distributions from Part XII, line 4

Form	990-PF (2017) NATE AND ELISSA LOWERY FOUNDAT:					<u> 2999</u>			age 4	
Pa	rt VI Excise Tax Based on Investment Income (Section 4940	(a), 4	940(b), 49	40(e), or 49	48 -	see in	struc	tions	5)	
18	Exempt operating foundations described in section 1910(d)(2), check here 🕨 🔲 and er	rter "N//	A" on line 1	)						
	Date of ruling or determination letter: (attach copy of letter if nec			ns)						
Ь	Domestic foundations that most the section 4940(s) requirements in Part V, check here			1	1				0.	
	of Part I, line 27b				. 1					
C	All other domestic foundations enter 2% of line 27b. Exempt foreign organizations, enter 4%	of Part	I, line 12, col	. (b). J	٠,		•			
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only, oth			, ,	2				0.	
3	Add lines 1 and 2	•	,		3				0.	
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only, ot	hers, er	nter -0-)		4				0.	
5	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-			'	5				0.	
6	Credits/Payments;				,					
а	2017 estimated tax payments and 2016 overpayment credited to 2017	6a		0.	30	13 2 1	`.			
	Exempt foreign organizations - tax withheld at source	6b		0.		5,27	-			
	Tax paid with application for extension of time to file (Form 8868)	6c	·	250.		184" 1 1 184"		:		
	Backup withholding erroneously withheld	60	-	0.	1, 44,	<b>^</b> •				
	Total credits and payments. Add lines 6a through 6d		· · · · · · · · · · · · · · · · · · ·		7	l' <i>'</i>	•	25	50.	
8	Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached	ched			8				0.	
-	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			2!	50.	
	Enter the amount of line 10 to be: Credited to 2018 estimated tax		250.	Refunded	11				0.	
	rt VII-A   Statements Regarding Activities									
1a	During the tax year, did the foundation attempt to influence any national, state, or local legisl	ation o	r did it particir	ate or intervene	ın			Yes	No	
	any political campaign?		, ,				1a		X	
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purpos	es? Se	e the instruction	ons for the defin	ition		1b		X	
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies o	f any m	aterials publis	shed or						
	distributed by the foundation in connection with the activities.						- <u>.</u> , ,	٦.		
C	Did the foundation file Form 1120-POL for this year?						1c		<u>X</u>	
d	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the	year:					l., l	٠ ٠	٠	
	(1) On the foundation > \$ 0 . (2) On foundation managers.	.▶\$		0.				.		
е	Enter the reimbursement (if any) paid by the foundation during the year for political expendit	ure tax	imposed on f	oundation				.		
	managers. > \$ 0 .						1 - 1	.		
2	Has the foundation engaged in any activities that have not previously been reported to the IR	S?					2		<u>X</u>	
	If "Yes," attach a detailed description of the activities.						•			
3	Has the foundation made any changes, not previously reported to the IRS, in its governing in	nstrume	ent, articles of	incorporation, o	r		` ^	.	:	
	bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes						3		<u>X</u>	
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year	?					4a		<u> </u>	
b	If "Yes," has it filed a tax return on Form 990-T for this year?				N	/A	4b			
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?						5		<u>X</u>	
	If "Yes," attach the statement required by General Instruction T						100	.;	11	
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied eit	her:					1		•	
	By language in the governing instrument, or									
	<ul> <li>By state legislation that effectively amends the governing instrument so that no mandatory</li> </ul>	/ directi	ons that confi	ict with the state	law			7.		
	remain in the governing instrument?						6	X		
7	Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," comp	lete Par	t II, col. (c), a	nd Part XV			7	X		
							1 3	٠	٠.	
8a	Enter the states to which the foundation reports or with which it is registered. See instruction	ns. 🟲							-	
	MI							'		
b	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Ai	ttorney	General (or de	esignate)			·		•	
	of each state as required by General Instruction G? If "No," attach explanation						8b	X		
9	Is the foundation claiming status as a private operating foundation within the meaning of se			942(j)(5) for cale	ndar				v	)
	year 2017 or the tax year beginning in 2017? See the instructions for Part XIV. If "Yes," com				ישנחים	n o	9	Х	_ <u>X</u> _	L
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedu	le listing	their names and	addresses	STM'		10 rm <b>99</b> 0			

N/A

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 beguest or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Schedule C,

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

Form 4720, to determine if the foundation had excess business holdings in 2017.)

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

4a Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?

orm 990-PF (2017) NATE AND ELISSA LOWERY FO			<u>82-29992:</u>	16 Page 6
Part VII-B   Statements Regarding Activities for Which Fe	orm 4720 May Be Re	equired (continu	ued)	T
5a During the year, did the foundation pay or incur any amount to.			<u> </u>	Yes No
(1) Carry on propaganda, or otherwise attempt to influence legislation (section	4945(e))?	Ye	s X No	· · · · · · · · · · · · · · · · · · ·
(2) Influence the outcome of any specific public election (see section 4955), or	to carry on, directly or indire		Ι.	· -  \$.(1).5
any voter registration drive?		Ye	s X No	
(3) Provide a grant to an individual for travel, study, or other similar purposes?	•	Ye	s X No .	
(4) Provide a grant to an organization other than a charitable, etc., organization	described in section		Ĭ-	
4945(d)(4)(A)? See instructions		Y6	s X No	
(5) Provide for any purpose other than religious, charitable, scientific, literary,	or educational purposes, or fo	or	,	*5   G
the prevention of cruelty to children or animals?			s X No	
b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify unc	ler the exceptions described i	<del></del>	12,	
section 53.4945 or in a current notice regarding disaster assistance? See instru				50
Organizations relying on a current notice regarding disaster assistance, check h			▶┌┐┌	1 2 1
c If the answer is "Yes" to question 5a(4), does the foundation claim exemption fr		ned		
expenditure responsibility for the grant?		ī/A □ γε	s 🔲 No 📑	
If "Yes," attach the statement required by Regulations section 53.4945-5(d).	-,	.,		1.
6a Did the foundation, during the year, receive any funds, directly or indirectly, to p	any promittime on		7	
a personal benefit contract?	ay premiums on		s X No	[] L. L. T.
	reand bands contract?	16		6b X
b Did the foundation, during the year, pay premiums, directly or indirectly, on a pi	ersonal benefit contract?		<del>[</del>	3.5
If "Yes" to 6b, file Form 8870.			s X No	<b>经</b> 付付300000
7a At any time during the tax year, was the foundation a party to a prohibited tax s		Y6		70
b If "Yes," did the foundation receive any proceeds or have any net income attributed in the state of the sta		aggue Highly	N/A	7b
Part VIII Information About Officers, Directors, Truste Paid Employees, and Contractors	es, roundation iviar	lagers, mignly		
List all officers, directors, trustees, and foundation managers and the	eir compensation			<del></del>
List all Officers, directors, busices, and foundation managers and the	(b) Title, and average	(c) Compensation	(d) Contributions to	(a) Eynense
(a) Name and address	hours per week devoted	(If not paid,	employee benefit plans and deferred	(e) Expense account, other
	to position	enter -0-)	compensation	allowances
		İ		
CDD CDD DDVDVD 3				•
SEE STATEMENT 3		0.	0.	0.
		ł		ı
		<del></del>		
		<u> </u>		
		ł		
		L		
2 Compensation of five highest-paid employees (other than those incl		enter "NONE."		<del></del>
(a) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week	(c) Compensation	(d) Contributions to employee benefit plans	(e) Expense account, other
(a) Name and address of each employee paid more than \$30,000	devoted to position	(C) Compensation	and deterred compensation	allowances
NONE				
	<del></del>			
	<del></del>	<del> </del>	<del> </del>	<del></del>
<b>—</b> 1.1	<u> </u>	<u> </u>		
Total number of other employees paid over \$50,000			<u> </u>	990-PF (2017)
			Form	33U-FF (2017)

Form 990-PF (2017) NATE AND ELISSA LOWERY FOUNDATION		2999216 Page 7
Part VIII Information About Officers, Directors, Trustees, Foundation Paid Employees, and Contractors (continued)	Managers, Highly	
3 Five highest-paid independent contractors for professional services. If none, enter "NOI	NE."	
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE		
		1
	<del></del>	
Total number of others receiving over \$50,000 for professional services		▶ 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 in number of organizations and other beneficiaries served, conferences convened, research papers produced,		Expenses
1 N/A		
2		
3		
4		
·		
Part IX-B   Summary of Program-Related Investments		
Describe the two largest program-related investments made by the foundation during the tax year on lines 1	and 2.	Amount
1 <u>N/A</u>		
2	<del></del>	<del></del>
All other program-related investments. See instructions.		
3		
	<del></del>	
Tabel Add Inco 1 through 2	<b>&gt;</b>	0.
Total. Add lines 1 through 3		

Form 990-PF (2017) NATE AND ELISSA LOWERY FOUNDATION	82-2999216 Page 8
Part X Minimum Investment Return (All domestic foundations must complete this part Foreign for	undations, see instructions)
1 Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes:	7,77
a Average monthly fair market value of securities	1a 0.
b Average of monthly cash balances	1b 1,564.
c Fair market value of all other assets	10
d Total (add lines 1a, b, and c)	1d 1,564.
e Reduction claimed for blockage or other factors reported on lines 1a and	http://
1c (attach detailed explanation)	<u>-</u>
2 Acquisition indebtedness applicable to line 1 assets	2 0.
3 Subtract line 2 from line 1d	3 1,564.
4 Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions)	4 23.
5 Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5 1,541.
6 Minimum investment return. Enter 5% of line 5 ADJUSTED FOR SHORT TAX PERIOD	6 22.
Part XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations	and certain
foreign organizations, check here 🕨 🔲 and do not complete this part.)	
1 Minimum investment return from Part X, line 6	1 22.
2a Tax on investment income for 2017 from Part VI, line 5	47,
b Income tax for 2017. (This does not include the tax from Part VI.)	
c Add lines 2a and 2b	2c   0.
3 Distributable amount before adjustments. Subtract line 2c from line 1	3 22.
4 Recoveries of amounts treated as qualifying distributions	4 0.
5 Add lines 3 and 4	5 22.
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 22.
Part XII Qualifying Distributions (see instructions)	
1 Amounts paid (including administrative expenses) to accomplich charitable, etc., purposes:	1,4
a Expenses, contributions, gifts, etc total from Part I, column (d), line 26	1a 2,184.
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:	21학생·
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 2,184.
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	50.
6 Adjusted qualifying distributions. Subtract line 5 from line 4	6 2,184.
Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation	n qualifies for the section
4940(e) reduction of tay 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,				
line 7	•	,		22.
2 Undistributed income, if any, as of the end of 2017				
a Enter amount for 2016 only			0.	<u> </u>
b Total for prior years:				
·	, , ,	0.	•	· `.
3 Excess distributions carryover, if any, to 2017:				
a From 2012		7	41	
<b>b</b> From 2013			,,,	
c From 2014				
d From 2015				
e From 2016				
f Total of lines 3a through e	0.	Standard Commence		<u> </u>
4 Qualifying distributions for 2017 from	· .		, ,	,
Part XII, line 4 ► \$ 2,184.				
a Applied to 2016, but not more than line 2a	,		0.	
<b>b</b> Applied to undistributed income of prior	*	_	•	
years (Election required - see instructions)				·
c Treated as distributions out of corpus			· · · · · · · · · · · · · · · · · · ·	,
(Election required - see instructions)	0.			
d Applied to 2017 distributable amount				22.
e Remaining amount distributed out of corpus	2,162.			*
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	14			
indicated below:				,
a Corpus Add lines 3f, 4c, and 4e Subtract line 5	2,162.	, ,	- · · · · · · · · · · · · · · · · · · ·	
<b>b</b> Prior years' undistributed income. Subtract	· · · · · · · · · · · · · · · · · · ·	_	• .	<u> </u>
line 4b from line 2b		0.	1 d	-
c Enter the amount of prior years' undistributed income for which a notice of			- 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	
deficiency has been issued, or on which	· · · · · · · · · · · · · · · · · · ·		* *, .	,
the section 4942(a) tax has been previously		_	* * * * * * * * * * * * * * * * * * * *	
assessed	2 3 3 4 mg 2 1 mg 2 mg 2 mg 2 mg 2 mg 2 mg 2 mg	0.		
d Subtract line 6c from line 6b. Taxable		<u>,                                     </u>		
amount - see instructions		0.		
e Undistributed income for 2016. Subtract line			0.	
4a from line 2a. Taxable amount - see instr.	1	* * * * * * * * * * * * * * * * * * * *	<u></u>	<u> </u>
f Undistributed income for 2017. Subtract				
lines 4d and 5 from line 1. This amount must	* '			0.
be distributed in 2018 7 Amounts treated as distributions out of		,		,
		-	l ·	
corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3) (Election				
may be required - see instructions)	0.		1. 3	
8 Excess distributions carryover from 2012				41 - 11 7 7 7 1 1 1 1 1 1 1 1 1 1 1 1 1 1
not applied on line 5 or line 7	0.		<u> </u>	
9 Excess distributions carryover to 2018.				
Subtract lines 7 and 8 from line 6a	2,162.	ا ا رقا به چیچه در این		
10 Analysis of line 9:	3 1 1 1 1 1 1 1			
a Excess from 2013				
b Excess from 2014				,
c Excess from 2015	; ,			
d Excess from 2016	, ,	,		
e Excess from 2017 2,162.				
723581 01-03-18			<u> </u>	Form <b>990-PF</b> (2017)

		WERY FOUNDAT			2999216 Page 10
Part XIV Private Operating Fo	· · · · · · · · · · · · · · · · · · ·		A, question 9)	N/A	
1 a If the foundation has received a ruling o					
foundation, and the ruling is effective fo	•	<del>-</del>	▶ └		1
<b>b</b> Check box to indicate whether the found		ig foundation described in		4942(j)(3) or	4942(1)(5)
2 a Enter the lesser of the adjusted net	Tax year	(h) 0010	Prior 3 years	(d) 2014	(e) Total
income from Part I or the minimum	(a) 2017	(b) 2016	(c) 2015	(0) 2014	(e) Iotal
investment return from Part X for				}	
each year listed				<del>                                     </del>	
<b>b</b> 85% of line 2a				<del>                                     </del>	
c Qualifying distributions from Part XII,					
line 4 for each year listed	<u></u> -			<del>  /                                   </del>	<del></del>
d Amounts included in line 2c not					
used directly for active conduct of				/	
exempt activities				<del></del>	<del></del>
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			<del>/</del>	<del></del>	
alternative test relied upon:					
a "Assets" alternative test - enter:					
(1) Value of all assets			/		<del>                                     </del>
(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:		/			ļ
(1) Total support other than gross		/			1
investment income (interest,		/			
dividends, rents, payments on securities loans (section		/			
512(a)(5)), or royalties)		/			
(2) Support from general public	,	Y			
and 5 or more exempt organizations as provided in	/				
section 4942(j)(3)(B)(III)					<del></del>
(3) Largest amount of support from					
an exempt organization			<u> </u>	<del>- </del>	
(4) Gross investment income Part XV   Supplementary Info	rmation (Cample	to this part only it	the foundation	had \$5,000 or n	nore in assets
at any time during t			tile loulidation	11au \$5,000 or 11	iore in assets
<ol> <li>Information Regarding Foundation</li> <li>a List any managers of the foundation wh</li> </ol>		than 20% of the total contr	thuttone received by the	foundation before the	riose of any tay
year (but only if they have contributed r			ibutions received by the	Touridation before the	JUSC OF ATTY LEA
SEE STATEMENT 4					
b List any managers of the foundation wh	o own 10% or more of th	e stock of a corporation (	or an equally large ports	on of the ownership of	a partnership or
other entity) of which the foundation ha			or an equally large per a	on or the ourner only or	a paranoromp or
NONE	-				
2 Information Regarding Contribut	ion Grant Gift Loan	Scholarship, etc., Pro	ngrams:		<del></del>
Check here 🕨 🗓 if the foundation of	only makes contributions	to preselected charitable	organizations and does		equests for funds. If
the foundation makes gifts, grants, etc.					<del></del>
a The name, address, and telephone num	ber or email address of th	ne person to whom applic	ations should be addres	sed.	
The first behavior about the		to a and materials their sh			
<b>b</b> The form in which applications should l	oe submitted and informa	tion and materials they sr			
c Any submission deadlines,				<u> </u>	
d Any restrictions or limitations on award	s, such as by geographic	al areas, charitable fields,	kınds of institutions, or	other factors:	
700004 04 00 40			<u>-</u> :		Form <b>990-PF</b> (2017)
723601 01-03-18					FOITH 330-F (2017)

Total

**▶** 3b

ter gross amounts unless otherwise indicated.	Unrelated	business income	Excluded it	by section 512, 513, or 514	(e)
	(a) Business	(b) Amount	Exclu- sion code	(d) Amount	Related or exempt function income
Program service revenue.	code		COGS		
b					
С					
d					
e	_		+		
f		<del></del>	<del></del>		
g Fees and contracts from government agencies  Membership dues and assessments	<del> </del>	<del></del>	<del>                                     </del>		<del> </del>
Interest on savings and temporary cash			+-+-		
investments	1		1 1		}
Dividends and interest from securities					
Net rental income or (loss) from real estate:	12 13 5 1	. 15K 电影 15 10 15 100	生 計画 代	to partie of a tild	English The same to the
a Debt-financed property		·			
b Not debt-financed property					
Net rental income or (loss) from personal	j				
property					
Other investment income					
Gain or (loss) from sales of assets other					
than inventory	<del> </del>	<del></del>	+		<del> </del>
Net income or (loss) from special events			+		<del> </del>
Gross profit or (loss) from sales of inventory Other revenue:			+		<del></del>
a b	<del>-    </del>		+	<del> </del>	
c			1-1-		
d			<del></del>		
e					
Subtotal. Add columns (b), (d), and (e)	20 m	0	. B. 500,	0.	
Total. Add line 12, columns (b), (d), and (e)				13 _	
ee worksheet in line 13 instructions to verify calculation	s.)				
art XVI-B Relationship of Activitie	s to the Accor	nplishment of E	xempt Pu	irposes	
					<del></del>
ne No. Explain below how each activity for which			-A contribute	i importantly to the accor	nplishment of
the foundation's exempt purposes (other t	nan by providing tuni	is for such purposes).		_ <del></del>	<del></del>

Line No.	Explain below how each activity for which income is reported in column (e) of Part XVI-A contributed importantly to the accomplishme the foundation's exempt purposes (other than by providing funds for such purposes).	nt of
	the restriction of straining persons (earlier training entire restriction)	
		<del></del> _
		<del></del>
		<del></del>
723621 01-03-	i-18 Fo	rm <b>990-PF</b> (2017)

Form 99	0-PF (2	017) <b>NATE</b>	AND ELIS	SA LOWE	RY FOUNDATIO	N	82-29	99216	P	age 13
Part	XVII	Information Re	egarding Trai	nsfers to a	nd Transactions a	nd Relationsh	nips With Noncha	ritable		
		Exempt Organ							157	
					ig with any other organizat		tion 501(c)	123	Yes	
			•		to political organizations?	)			1:"	Mile.
a Tra	ancforc	from the reporting found	lation to a noncharr	table exempt or	ganization of:			i	· · `	<u>                                     </u>
(1)	Cash							1a(1)	T	X
(2)	Other	assets						1a(2)	<del> </del>	X
		sactions:						' ' '	1 -	
		of assets to a noncharita						1b(1)	1	X
(2)	Purch	ases of assets from a no	oncharitable exempt	t organization				1b(2)	1	X
(3)		l of facilities, equipment,	•					1b(3)		X
(4)		bursement arrangements	3					15(4)		X
		or loan guarantees						1b(5)		X
		rmance of services or me	· ·	-				1b(6)	4	X
	-	facilities, equipment, ma	-		• •			16	1,	X
					dule. Column (b) should a				sets,	
					ed lose than fair market va	uo in any transactio	n or charing arrangomen	t, cnow in		
		the value of the goods,			a everant erganization	(4) 5				
(a) Line r	10	(b) Amount involved	(c) Name		e exempt organization	(II) Description	on of transfers, transactions, a	no snaring an	rangeme	nts
			<del> </del>	N/A	<del></del>	<del></del>				
	+	<del></del>	<del> </del>	<del></del>						
	-	<del></del>	<del></del>		-,,					
	+	<del></del>	<del>                                     </del>							
	+-	<del></del>	<del>  -</del>	··						
	+-		<del> </del>			<del>-  </del>				
			<del> </del>			<del></del> -				
	+		+			<del></del> -				
	+	· · · · · · · · · · · · · · · · · · ·	+		<del></del>	<del></del>				
	+		<del> </del>	<del>-</del>			<u>.                                    </u>			
		<del></del>	+	<del></del> -		<del></del>				
			<del>                                     </del>		· · · · · · · · · · · · · · · · · · ·		<del></del>			
			<del> </del>	<del></del>	<del></del>	<del></del>				
	+	· <u>···</u>	+			<del></del>				
	+-	<del></del> -	+	<del></del>		<del> </del>				
20 10	the four	adation directly or indirec	 otly offiliated with in	or related to one	or more tax exempt organ	uzationa described				
		501(c) (other than section		•	of more tax exempt organ	nzations described		Yes	. TX	No.
		mplete the following sch		SOUTH SET					, L <u>a</u>	
		(a) Name of or			(b) Type of organization		(c) Description of relati	onship		
		N/A								
					<del>                                     </del>					
	Under	penalties of perniry, I declare	that I have examined the	his sturn, including	accompanying schedules and	statements, and to the b	est of my knowledge	May the IRS	discuss	this
Sign	and be	lief, it is true, correct, and for	mplete Deglaration of	peparer (other than	taxpayer) is based on all inform	ation of which preparer	has any knowledge	return with the	he prepa	rer
Here	<b>│                                    </b>	XXIII	1/1		17.23-18	Treas	surev	X Ye		] No
	Sign	ature of officer or truster	86.0		Date	Title				
		Print/Type preparer's n	ame	Preparer's s	ignature	Date	Check If PT	IN		
				1~	0 4 4		self- employed			
Paid		TODD P. CO	OK	ىلىد	l. Cook	7-3-18	F	00540	<u> 130</u>	
Prep	arer	Firm's name ► DEI	OITTE TA	X LLP			Firm's EIN ▶ 86-	10657	$7\overline{2}$	

Phone no. (616)336-7900

Use Only

Firm's address ▶ 38 COMMERCE SW, STE 600

GRAND RAPIDS, MI 49503-4144

## Schedule B

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

Department of the Treasury Internal Revenue Service

Name of the organization

## **Schedule of Contributors**

► Attach to Form 990, Form 990-EZ, or Form 990-PF. ► Go to www.irs.gov/Form990 for the latest information. OMB No 1545-0047

NATE AND ELISSA LOWERY FOUNDATION

Employer identification number

	NATE	AND ELISS	A LOWERY	FOUNDATION		82-2999216
Organizatio	n type (check one)					
Filers of:	Se	ection:				
Form 990 or	990-EZ	501(c)() (ent	er number) orga	nization		
		4947(a)(1) nonex	empt charitable t	trust not treated as a private	foundation	
		527 political orga	nization			
Form 990-Pf	<u> </u>	X 501(c)(3) exempt private foundation				
		4947(a)(1) nonex	empt charitable t	trust treated as a private foun	dation	
		501(c)(3) taxable	private foundation	on		
Note: Only a	a section 501(c)(7), (8	vered by the <b>Genera</b> 8), or (10) organization	·	cial Rule. xes for both the General Rule	and a Special Rule	See instructions.
General Rul	e					
	-	_		received, during the year, con See instructions for determin	-	
Special Rule	es					
sec	ctions 509(a)(1) and 1 one contributor, du	170(b)(1)(A)(vi), that c	hecked Schedul ontributions of the	n 990 or 990-EZ that met the 3 le A (Form 990 or 990-EZ), Pa he greater of (1) \$5,000, or (2	rt II, line 13, 16a, or	
yea	For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I, II, and III					
yea is c pui	ar, contributions exc checked, enter here t rpose. Don't comple	clusively for religious, the total contribution	chantable, etc, is that were recentless the Gener	o) filing Form 990 or 990-EZ the purposes, but no such contributed during the year for an exal Rule applies to this organisore during the year	butions totaled more xclusively religious, o	e than \$1,000 If this box charitable, etc ,
but it must	answer "No" on Part	t IV, line 2, of its Forr	n 990, or check	for the Special Rules doesn't to the box on line H of its Form 9 m 990, 990-FZ, or 990-PF)		

Name of organization

Employer identification number

NATE	AND ELISSA LOWERY FOUNDATION	-2999216	
Part I	Contributors (see instructions) Use duplicate copies of Part I if additional copies of Part I	tional space is needed	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	NATHAN M. AND ELISABETH D. LOWERY  126 OTTAWA AVE NW, SUITE 500  GRAND RAPIDS, MI 49503	\$10,000.	Person X Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
			Person Payroll Oncash Complete Part II for noncash contributions )
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
<del></del>			Person Payroll Oncash Complete Part II for noncash contributions )
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash Complete Part II for noncash contributions )
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
			Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions)

Name of organization

Employer identification number

## NATE AND ELISSA LOWERY FOUNDATION

82-2999216

art II	Noncash Property (see instructions). Use duplicate copies of Pa	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
——		\$	
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	
(a) No. from Part I	(b)  Description of noncash property given	FMV (or estimate) (See instructions.)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received

723454 11-01-17

Transferee's name, address, and ZIP + 4

Relationship of transferor to transferee

FORM 990-PF	LEGAL	FEES	STATEMENT 1		
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES	
LEGAL FEES	2,184.	0.	-	2,184.	
TO FM 990-PF, PG 1, LN 16A	2,184.	0.		2,184.	

FORM 990-PF	LIST OF SUBSTANTIAL CONTRIBUTORS	STATEMENT 2
	PART VII-A, LINE 10	

NAME OF CONTRIBUTOR

ADDRESS

NATHAN M. AND ELISABETH D. LOWERY 126 OTTAWA AVE. NW, SUITE 500 GRAND RAPIDS, MI 49503

	IST OF OFFICERS, D ND FOUNDATION MANA		STAT	EMENT 3
NAME AND ADDRESS	TITLE AND AVRG HRS/WK		EMPLOYEE BEN PLAN CONTRIB	EXPENSE
ELISABETH D. LOWERY 126 OTTAWA AVE. NW, SUITE 500 GRAND RAPIDS, MI 49503	PRESIDENT/TRUS	TEE 0.	0.	0.
NATHAN M. LOWERY 126 OTTAWA AVE. NW, SUITE 500 GRAND RAPIDS, MI 49503	VICE PRESIDENT	/TRUSTEE 0.	0.	0.
JERRY L. TUBERGEN 126 OTTAWA AVE. NW, SUITE 500 GRAND RAPIDS, MI 49503	EXEC. VICE PRE 0.50	SIDENT/TRUST 0.	TEE 0.	0.
ROBERT H. SCHIERBEEK 126 OTTAWA AVE. NW, SUITE 500 GRAND RAPIDS, MI 49503	COO/TREASURY/S	ECRETARY 0.	0.	0.
JEFFREY K. LAMBERT 126 OTTAWA AVE. NW, SUITE 500 GRAND RAPIDS, MI 49503	CFO/ASSISTANT 0.50	SECRETARY 0.	. 0.	0.
TOTALS INCLUDED ON 990-PF, PAGE	6, PART VIII	0.	0.	0.

FORM 990-PF	PART XV - LINE 1A	STATEMENT 4
	LIST OF FOUNDATION MANAGERS	

NAME OF MANAGER

ELISABETH D. LOWERY NATHAN M. LOWERY