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2018

OMB No 1545-0052

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.

Open to Public Inspection

▶ Go to www.irs.gov/Form990PF for instructions and the latest information. For calendar year 2018, or tax year beginning 01-01-2018 , and ending 12-31-2018 A Employer identification number GARY SISTERS FOUNDATION 38-3109660 Number and street (or P O box number if mail is not delivered to street address) 4415 DUKE STREET SUITE 1E B Telephone number (see instructions) (269) 344-6143 City or town, state or province, country, and ZIP or foreign postal code KALAMAZOO, MI 490083224 ${f C}$ If exemption application is pending, check here ☐ Initial return ☐ Initial return of a former public charity G Check all that apply D 1. Foreign organizations, check here Amended return ☐ Final return 2 Foreign organizations meeting the 85% test, check here and attach computation Address change ☐ Name change E If private foundation status was terminated ☑ Section 501(c)(3) exempt private foundation H Check type of organization under section 507(b)(1)(A), check here \square Section 4947(a)(1) nonexempt charitable trust \square Other taxable private foundation I Fair market value of all assets at end J Accounting method ✓ Cash ☐ Accrual If the foundation is in a 60-month termination of year (from Part II, col (c), under section 507(b)(1)(B), check here Other (specify) line 16) ▶\$ 1,437,658 (Part I, column (d) must be on cash basis) Part I Analysis of Revenue and Expenses (The total (d) Disbursements Revenue and (b) Net investment (c) Adjusted net for charitable of amounts in columns (b), (c), and (d) may not necessarily expenses per books purposes equal the amounts in column (a) (see instructions)) (cash basis only) Contributions, gifts, grants, etc , received (attach schedule) Check ► ✓ If the foundation is **not** required to attach 2 1.544 1.544 3 Interest on savings and temporary cash investments Dividends and interest from securities 14,839 14,839 Gross rents 5a b Net rental income or (loss) 6a Net gain or (loss) from sale of assets not on line 10 Gross sales price for all assets on line 6a 7 Capital gain net income (from Part IV, line 2) Net short-term capital gain Income modifications . 10a Gross sales less returns and allowances Less Cost of goods sold Gross profit or (loss) (attach schedule) c Other income (attach schedule) 11 Total. Add lines 1 through 11 16,383 16,383 13 Compensation of officers, directors, trustees, etc 14 Other employee salaries and wages 15 Pension plans, employee benefits Operating and Administrative Expenses 16a Legal fees (attach schedule) . . . 5,750 2,875 2,875 Accounting fees (attach schedule) Other professional fees (attach schedule) ارجه 18 Taxes (attach schedule) (see instructions) Depreciation (attach schedule) and depletion 19 20 21 Travel, conferences, and meetings 22 Printing and publications . . . 23 Other expenses (attach schedule) 20 20 Total operating and administrative expenses. 24 Add lines 13 through 23 6,729 2,895 2,875 62,500 62,500 25 Contributions, gifts, grants paid 26 Total expenses and disbursements. Add lines 24 and 25 69,229 2,895 65,375 27 Subtract line 26 from line 12 Excess of revenue over expenses and -52,846 disbursements Net investment income (if negative, enter -0-) 13,488 Adjusted net income (if negative, enter -0-) . . .

473,000

42,499

473,000

40,686

1,171,208

19,300

813,682

-52,846

760,836

760,836 Form 990-PF (2018)

2

3

4

5

6

disqualified persons (attach schedule) (see instructions) Other notes and loans receivable (attach schedule)

Investments—U S and state government obligations (attach schedule)

Less allowance for doubtful accounts ▶

Inventories for sale or use

Prepaid expenses and deferred charges

Investments—land, buildings, and equipment basis ▶ _

Investments—other (attach schedule)

Less accumulated depreciation (attach schedule) ▶

Less accumulated depreciation (attach schedule) ▶

Land, buildings, and equipment basis ▶ _

of-year figure reported on prior year's return)

Decreases not included in line 2 (itemize) ▶

Enter amount from Part I, line 27a

Other increases not included in line 2 (itemize) ▶ ____

	5
	6
	7
2	8
Assets	9
As	10a
	b
	С
	11

b

12

13

14

Liabilities

2

Other assets (describe > _ 15 16 Total assets (to be completed by all filers—see the instructions Also, see page 1, item I) 813,682 760,836 1,437,658 17 18 Grants payable 19 Loans from officers, directors, trustees, and other disqualified persons 20 21 Mortgages and other notes payable (attach schedule). Other liabilities (describe ▶_ 22 23 Total liabilities(add lines 17 through 22) Foundations that follow SFAS 117, check here ▶ Balances and complete lines 24 through 26 and lines 30 and 31. 24 Unrestricted 25 Temporarily restricted Fund 26 Permanently restricted . . . Foundations that do not follow SFAS 117, check here 🕨 🗹 ō and complete lines 27 through 31. Assets 27 1.209,459 1.209,459 28 Paid-in or capital surplus, or land, bldg, and equipment fund -395,777 29 Retained earnings, accumulated income, endowment, or other funds -448,623 Net 30 Total net assets or fund balances (see instructions) 813,682 760,836 813,682 760,836 31 Total liabilities and net assets/fund balances (see instructions) . Part III Analysis of Changes in Net Assets or Fund Balances

Total net assets or fund balances at beginning of year—Part II, column (a), line 30 (must agree with end-

Total net assets or fund balances at end of year (line 4 minus line 5)—Part II, column (b), line 30

Gain or (loss) (e) plus (f) minus (g) Gains (Col (h) gain minus col (k), but not less than -0-) or Losses (from col (h)) c d е If gain, also enter in Part I, line 7 If (loss), enter -0- in Part I, line 7 Capital gain net income or (net capital loss)

If gain, also enter in Part I, line 8, column (c) (see instructions) If (loss), enter -0in Part I, line 8 Part V Qualification Under Section 4940(e) for Reduced Tax on Net Investment Income

(a)

Base period years Calendar

year (or tax year beginning in)

2017

2016

2015

2014

2013

2 Total of line 1, column (d)

5 Multiply line 4 by line 3

instructions

(For optional use by domestic private foundations subject to the section 4940(a) tax on net investment income)

63,265

59,747

58,669

59,441

52,672

3

If "Yes," the foundation does not qualify under section 4940(e) Do not complete this part

number of years the foundation has been in existence if less than 5 years

4 Enter the net value of noncharitable-use assets for 2018 from Part X, line 5

6 Enter 1% of net investment income (1% of Part I, line 27b) .

8 Enter qualifying distributions from Part XII, line 4

Net short-term capital gain or (loss) as defined in sections 1222(5) and (6)

If section 4940(d)(2) applies, leave this part blank

Adjusted qualifying distributions

3 Average distribution ratio for the 5-year base period—divide the total on line 2 by 5 0, or by the

.

Enter the appropriate amount in each column for each year, see instructions before making any entries

Was the foundation liable for the section 4942 tax on the distributable amount of any year in the base period?

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

Net value of noncharitable-use assets

1,378,163

1,187,878

1,199,168

1,250,444

1,164,001

2

4

5

6 7

2

(d) Distribution ratio

(col (b) divided by col (c))

Page 3

(d)

Date sold

0 045905

0 050297

0 048925

0 047536

0 045251

0 237914

0 047583

1,571,222

74,763

74,898 65,375

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135

Yes 🗸 No

Pai	rt VII-B	Statements Regard	ding	Activities for Which	Form 4720 May Be	Required (c	ontinue	ed)				
5a	During th	e year did the foundation	рау с	r incur any amount to							Yes	No
	(1) Carry	on propaganda, or otherv	vise a	ttempt to influence legisl	ation (section 4945(e))?	Γ	Yes	✓	No			
	(2) Influ	ence the outcome of any s	pecıfı	c public election (see sec	tion 4955), or to carry	_						
	on, d	rectly or indirectly, any vo	ter r	egistration drive?		• • [Yes	✓	No			
	(3) Provi	de a grant to an individual	for t	ravel, study, or other sım	ılar purposes?		Yes	✓	No			
		de a grant to an organizat			·	i						
		tion 4945(d)(4)(A)? See i				• • [Yes	✓	No			
		de for any purpose other t				_	_					
L		ational purposes, or for the	•	,		L	Yes	✓	No			
D	•	swer is "Yes" to 5a(1)–(5), ns section 53 4945 or in a		•	' '		bea in			5b		No
	-	ions relying on a current r						. —	-	30		NO
_	-	wer is "Yes" to question 5		-				Ш				
٠		ise it maintained expenditi			•		_					
		attach the statement requi		•		L	⊔ Yes		No			
6a		oundation, during the year		-		ims on						
		al benefit contract?		•			٦	. 🚁				
b	Did the fo	oundation, during the year	, pay	premiums, directly or inc	lirectly, on a personal be	nefit contract? .	⊢ Yes		No	6b		No
	If "Yes" to	o 6b, file Form 8870										
7a	At any tir	ne during the tax year, wa	s the	foundation a party to a p	prohibited tax shelter trai	nsaction?	7 ٧00	✓	No			
b	If yes, did	d the foundation receive ar	ny pro	oceeds or have any net in	come attributable to the	transaction?.			"	7 b		
8		indation subject to the sec					n or					
	excess pa	rachute payment during t	he ye	ar?		[Yes	✓	No L			
Pai	rt VIII	Information About	Offic	ers, Directors, Trust	tees, Foundation Ma	inagers, Higi	hly Pai	id En	nploy	ees,		
		and Contractors										
1	List all o	fficers, directors, truste		bundation managers ar b) Title, and average	(c) Compensation	(d) Contrib		to.				
	(a) N	ame and address	'	hours per week	not paid, enter	employee bene					se acc Iowano	
				devoted to position	-0-)	deferred cor	npensat			ilei ai	IOWallo	
	GE T SCHUM DUKE STREE		0 50	PRESIDENT	0			0				0
	MAZOO, MI											
RAN	CES A LITTLE			ETARY	0			0				0
	DUKE STREE		0 50									
	MAZOO, MI HIA P ORTEG		DRES	IDENT	0			0				0
	DUKE STREE		0 50	IDEM	ľ			U				U
(ALA)	MAZOO, MI	49008										
	HELL WILSO		TRE#	SURER	0			0				0
	DUKE STREE MAZOO, MI		0 30									
2		ation of five highest-pa	id er	nployees (other than t	hose included on line :	L—see instruct	ions).	If nor	ne, en	ter "	NONE.	"
				(b) Title, and average		(d) Contril			,			
(a)		address of each employee ore than \$50,000	paid	hours per week	(c) Compensation	employee plans and					se acco	
				devoted to position		compen		-				
ЮИ												
						1						
						+						
ota	I number o	of other employees paid ov	er \$5	0,000			▶					
		1 - /		· · · · · · ·			-		Forr	n 99 (D-PF (

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Part VIII Information About Officers, Directors, Trustees, F and Contractors (continued)	Foundation Managers, Highly Pa	id Employees,
3 Five highest-paid independent contractors for professional service	es (see instructions). If none, enter	"NONE".
(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 relevorganizations and other beneficiaries served, conferences convened, research papers produc		of Expenses
1		
2		
3		
4		
Part IX-B Summary of Program-Related Investments (see in	nstructions)	_
Describe the two largest program-related investments made by the foundation during the	e tax year on lines 1 and 2	Amount
1		
2		
All other program-related investments See instructions		
3		
Total. Add lines 1 through 3	· · · · · · · · · · · · · · · · · · ·	• 0
		Form 990-PF (2018)

3a 3h

4

5

65.375

65,375

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2 2 Amounts set aside for specific charitable projects that satisfy the 3

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

Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4

Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment

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

4

5

b Total for prior years

a From 2013. **b** From 2014. c From 2015. . . d From 2016. e From 2017.

2,940

75,351

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Form 990-PF (2018) Part XIII

Undistributed Income (see instructions)

Distributable amount for 2018 from Part XI, line 7 2 Undistributed income, if any, as of the end of 2018 a Enter amount for 2017 only.

(If an amount appears in column (d), the

a Corpus Add lines 3f, 4c, and 4e Subtract line 5 b Prior years' undistributed income Subtract line 4b from line 2b 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. d Subtract line 6c from line 6b Taxable amount e Undistributed income for 2017 Subtract line 4a from line 2a Taxable amount—see f Undistributed income for 2018 Subtract lines 4d and 5 from line 1. This amount must

6 Enter the net total of each column as

be distributed in 2019 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) 8 Excess distributions carryover from 2013 not

9 Excess distributions carryover to 2019.

10 Analysis of line 9

a Excess from 2014. . . **b** Excess from 2015. . c Excess from 2016. . . . d Excess from 2017. . . e Excess from 2018. . .

applied on line 5 or line 7 (see instructions) . . .

Subtract lines 7 and 8 from line 6a

indicated below:

same amount must be shown in column (a))

Excess distributions carryover, if any, to 2018

f Total of lines 3a through e.

4 Qualifying distributions for 2018 from Part

XII, line 4 🕨 \$ a Applied to 2017, but not more than line 2a **b** Applied to undistributed income of prior years (Election required—see instructions). c Treated as distributions out of corpus (Election

required—see instructions). **d** Applied to 2018 distributable amount. . . .

e Remaining amount distributed out of corpus

5 Excess distributions carryover applied to 2018

(a)

Corpus

0

0

(b)

Years prior to 2017

(c)

2017

62,435

62,435



Enter gross	s amounts unless otherwise indicated		usiness income	Excluded by section		(e) Related or exempt
-	n service revenue	(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	function income (See instructions)
g Fees	and contracts from government agencies					
	ership dues and assessments					
3 Interes	st on savings and temporary cash nents			14	1,544	
	nds and interest from securities			14	14,839	
	ntal income or (loss) from real estate					
	financed property					
	lebt-financed property					
	ntal income or (loss) from personal property nvestment income.					
	r (loss) from sales of assets other than					
invento	` '					
	come or (loss) from special events					
	profit or (loss) from sales of inventory					
	revenue a					
с						
d						
d						
d e			0		16,383	
d e 2 Subtot 3 Total.	al Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e)		0	13	16,383 3	
de2 Subtot3 Total.(See w	al Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) orksheet in line 13 instructions to verify calcu	lations)		13	<u> </u>	
d e 2 Subtot 3 Total. (See w Part XV	al Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) orksheet in line 13 instructions to verify calcu	lations) ne Accomplisi income is report	nment of Exempled in column (e) of	pt Purposes F Part XVI-A contribu	ted importantly to	
d e 2 Subtot 3 Total. (See w Part XV	al Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) orksheet in line 13 instructions to verify calcu FB Relationship of Activities to the Explain below how each activity for which the accomplishment of the foundation's expressions.	lations) ne Accomplisi income is report	nment of Exempled in column (e) of	pt Purposes F Part XVI-A contribu	ted importantly to	
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. (==	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
	Information Regarding Transfers To and Transactions and Relationships With Noncharitable
	Exempt Organizations

Part	XVII	Exempt Orga		ransfers to	and Transacti	ons and i	Relatio	nsnips with Non	cnaritable		
			indirectly enga					n described in sectio s?	n 501	Yes	No
a Trai	nsfers f	rom the reporting fo	undation to a r	noncharitable ex	empt organizatio	n of					
(1)	Cash.								. 1a(1)		No
(2) Other assets								. 1a(2)		No	
		sactions									
		of assets to a nonch		_					. 1b(1)		No
		ases of assets from							. 1b(2)		No
		of facilities, equipm							. 1b(3)		No
		oursement arrangem or loan guarantees.							. 1b(4) . 1b(5)		No No
		nance of services or							. 1b(5)		No
٠,			•	-							No
d If th	ne answ	er to any of the abo	ve is "Yes," coi	mplete the follow	wing schedule Co	olumn (b) s	should al	ways show the fair m	arket value		
								d less than fair mark ts, or services receiv			
	,					9,		,			
(a) Line	No	(b) Amount involved	(c) Name of	noncharitable exe	empt organization	(d) Desc	cription of	transfers, transactions,	and sharing arra	ngemen	ts
2a Is t	ne foun	dation directly or inc	l directly affiliate	d with, or relate	ed to, one or more	e tax-exem	pt organ	zations			
des	cribed i	n section 501(c) (ot	her than sectio	n 501(c)(3)) or	ın section 527? .			🗆 Ye	s 🔽 No		
b If "\	es," co	mplete the following	j schedule								
		(a) Name of organiz	ation	(b) Type of organiza	tion		(c) Description	of relationship		
	of m		ief, it is true, c					ng schedules and sta than taxpayer) is ba			
Sign Here	*	****	mowicage		2019-02-21	*	****		May the IRS di		
	 ▶ −	ignature of officer o	r trustee		Date	— ▶-	itle		with the prepa below (see instr)?	_	
		Print/Type prepare	er's name	Preparer's Sign	nature	Date		Charles and	TIN		
		KAYLA A LAURII	N CPA			2019-	02-21	Check if self- employed ▶ □	P00243	488	
Paid Prep		Firm's name ▶ Pl	ANTE & MORA	N PLLC					ırm's EIN ▶38	.12570	151
Use (Only								≥ EIN ► 38	135/9	, J I
		Firm's address ▶	750 TRADE CE PORTAGE, MI	NTRE WAY STE 49002	300			P	hone no (269) 567-4	4500

Recipient If recipient is an individual, Purpose of grant or Foundation Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business)

or substantial contributor

	or substantial contributor			
a Paid during the year				
DISABILITY NETWORK	N/A	PC	GENERAL SUPPORT FOR	1,000

KALAMAZOO, MI 49001				İ
GIRL SCOUTS HEART OF MICHIGAN 601 W MAPLE ST KALAMAZOO MI 49008	N/A	PC	GENERAL SUPPORT FOR PROGRAMS AND OUTREACH	2

GIRL SCOUTS HEART OF MICHIGAN 601 W MAPLE ST KALAMAZOO, MI 49008	N/A	PC	GENERAL SUPPORT FOR PROGRAMS AND OUTREACH	2,500
HOUSING RESOURCES	N/A	PC	SUPPORT FOR GENERAL	3,500

KALAMAZOO, MI 49008			PROGRAMS AND OUTREACH	
HOUSING RESOURCES 420 E ALCOTT ST 200 KALAMAZOO, MI 49001	N/A	PC	SUPPORT FOR GENERAL OPERATIONS	3,500

KALAMA200, MI 49008				
HOUSING RESOURCES 420 E ALCOTT ST 200 KALAMAZOO, MI 49001	N/A	PC	SUPPORT FOR GENERAL OPERATIONS	3,500
Total			▶ 3a	62,500

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment Recipient Purpose of grant or If recipient is an individual, Foundation Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business) or substantial contributor a Paid during the year N/A PC 3,500 INTERACT610 S BURDICK ST GENERAL SUPPORT FOR PROCEAMO KALAMAZOO MT 4000Z

KALAMAZOO, MI 49007			PROGRAMS	
KALAMAZOO COUNTY READY 4S 259 E MICHIGAN AVE STE 409 KALAMAZOO, MI 49007	N/A	PC	SUPPORT FOR GENERAL OPERATIONS	3,000
KALAMAZOO DROP-IN CHILD CARE 345 WEST MICHIGAN AVE	N/A	PC	SUPPORT FOR GENERAL OPERATIONS	2,000

Total			▶ 3a	62,500
KALAMAZOO DROP-IN CHILD CARE 345 WEST MICHIGAN AVE KALAMAZOO, MI 49007	N/A	PC	SUPPORT FOR GENERAL OPERATIONS	2,000
KALAMA200, MI 49007				

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment Recipient If recipient is an individual, Purpose of grant or Foundation Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business) or substantial contributor a Paid during the year KALAMAZOO JUNIOR GIRLS N/A PC GENERAL SUPPORT FOR 2,500 ORGANIZATION **PROGRAMS** 1114 W PATERSON ST

KALAMAZOO, MI 49007				
KALAMAZOO PUBLIC LIBRARY 315 S ROSE ST KALAMAZOO, MI 49007	N/A	PC	GLOBAL READING CHALLENGE PROGRAM	3,500
KALAMAZOO VALLEY COMMUNITY COLLEGE FOUNDATION 6767 WEST O AVENUE KALAMAZOO, MI 49003	N/A	PC	PROVISION OF EDUCATIONAL OPPORTUNITIES	17,000

Total .

▶ 3a

62,500

Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business)

or substantial contributor

a Paid during the year				
OPEN DOORS KALAMAZOO PO BOX 50102 KALAMAZOO, MI 490050102	N/A	PC	APARTMENT RENOVATIONS AND REPAIRS	3,000

KALAMAZOO, MI 490050102				
PRETTY LAKE VACATION CAMP 9123 Q AVE MATTAWAN, MI 49071	N/A	PC	ITEMS FOR SUMMER CAMP	3,500
CLD LEADNING CENTED	N/A	DC.	CENERAL CURRORT FOR	2,000

PRETTY LAKE VACATION CAMP 9123 Q AVE MATTAWAN, MI 49071	N/A	PC	ITEMS FOR SUMMER CAMP	3,500
SLD LEARNING CENTER 5250 LOVERS LANE STE LL100 KALAMAZOO, MI 49002	N/A	PC	GENERAL SUPPORT FOR PROGRAMS	3,000

9123 Q AVE MATTAWAN, MI 49071				
SLD LEARNING CENTER 5250 LOVERS LANE STE LL100 KALAMAZOO, MI 49002	N/A	PC	GENERAL SUPPORT FOR PROGRAMS	3,000
Total			▶ 3a	62,500

Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business) or substantial contributor a Paid during the year

SPECIAL OLYMPICS 6624 TIMBER RIDGE DR BLOOMFIELD, MI 48301	N/A	PC	SUPPORT FOR GENERAL OPERATIONS	2,000
BARN THEATRE SCHOOL	N/A	PC	GENERAL SUPPORT FOR	1,000

DECOMMEDD, THE TOSCE				
BARN THEATRE SCHOOL 13319 M-96 PO BOX 277 AUGUSTA, MI 49012	N/A	PC	GENERAL SUPPORT FOR PROGRAMS	1,000
BOYS AND GIRLS CLUB OF GREATER KALAMAZOO 915 LAKE ST	N/A	PC	GENERAL SUPPORT FOR PROGRAMS	1,000

13319 M-96 PO BOX 277 AUGUSTA, MI 49012			PROGRAMS	
BOYS AND GIRLS CLUB OF GREATER KALAMAZOO 915 LAKE ST KALAMAZOO, MI 49001	N/A	PC	GENERAL SUPPORT FOR PROGRAMS	1,000
Total			▶ 3a	62,500

Recipient If recipient is an individual, show any relationship to any foundation manager or substantial contributor

a Paid during the year

If recipient is an individual, show any relationship to any foundation manager or substantial contributor

Foundation status of contribution

Amount

Amount

		l		
KALAMAZOO EASTSIDE BOXING 1720 CHARLES AVE KALAMAZOO, MI 49048	N/A	PC	SUPPORT FOR GENERAL OPERATIONS	2,000
KALAMAZOO CIVIC THEATRE 329 S PARK ST KALAMAZOO, MI 49007	N/A	PC	CIVIC YOUTH THEATRE PROGRAM	1,000

KALAMAZOO EASTSIDE BOXING 1720 CHARLES AVE KALAMAZOO, MI 49048	N/A	PC	OPERATIONS	2,000
KALAMAZOO JUNIOR GOLF ASSOCIATION 4200 LOVERS LANE KALAMAZOO, MI 49001	N/A	PC	GENERAL SUPPORT FOR PROGRAMS	2,500
Total			▶ 3a	62,500

Recipient If recipient is an individual, show any relationship to status of recontribution Statu

any foundation manager

N/A

Name and address (home or business)

WARM KIDSPO BOX 803

PORTAGE, MI 49081

Total .

	or substantial contributor			
a Paid during the year				
MAKE A WISH MICHIGAN 7600 GRAND RIVER AVE STE 175 BRIGHTON, MI 48114	N/A	PC	SUPPORT WISHES FOR MICHIGAN CHILDREN	2,000

PC

recipient

COATS AND BOOTS

3,000

62,500

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TY 2018 Accounting Fees Schedule						
		-				
	Name: GARY SISTERS FOUNDATION					
EIN: 38-3109660						
<u> </u>				 		
Category	Amo	ount	Net Investment	Adjusted Net	Disbursements	
			Income	Income	for Charitable	
					Purposes	

5,750

ACCOUNTING FEES

effie GRAPHIC	print - DO NOT PROCESS	As Filed Data -	DLN: 9349106/005149

TY 2018 Investments Corporate Stock Schedule

Name: GARY SISTERS FOUNDATION

FTN: 38-3109660

EIN: 38-3109000						
Investments Corporation Stock Schedule						
Name of Stock	End of Year Book Value	End of Year Fair Market Value				
ALIBABA GROUP HLDG LIMITED SPONSORED ADS	83,420	137,070				
ALPHABET INC CL A	38,647	134,800				
ALPHABET INC CL C	38,419	133,594				
APPLE INC	29,481	179,035				
AT&T INCORPORATED	32,532	28,540				
CHEVRON COPORATION NEW	40,141	54,395				
FASTENAL CO	45,207	53,859				
MASTERCARD INC	52,367	226,380				
MCDONALDS CORP	47,295	87,009				
PAYPAL HLDGS INCORPORATED	18,541	80,306				
VERIZON COMMUNICATIONS INC	46,950	56,220				

As Filed Data -		D	LN: 93491067005149
Schedule			
GARY SISTERS FO	DUNDATION		
38-3109660			
	As Filed Data - Schedule GARY SISTERS FO 38-3109660	Schedule GARY SISTERS FOUNDATION	Schedule GARY SISTERS FOUNDATION

Investments Other Schedule 2						
Category/ Item	Listed at Cost or FMV	Book Value	End of Year Fair Market Value			
KAYNE ANDERSON MDSTM ENERGY FD	AT COST	40.686	19.300			

efile GRAPHIC print - DO NOT PROCESS	As Filed Data -		DLN:	93491067005149		
TY 2018 Other Expenses Schedule						
Name:	GARY SISTERS	FOUNDATION				
EIN: 38-3109660						
Other Expenses Schedule						
Description	Revenue and Expenses per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes		
ADR FEE	20	20		0		

efile GRAPHIC print - DO NOT	PROCESS	As Filed Data	-	DLI	N: 93491067005149			
TY 2018 Taxes Schedule								
Name: GARY SISTERS FOUNDATION								
EIN: 38-3109660								
Colorani			Not Torrestore	A discount of Not	Distance and a			
Category	Amount		Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes			

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EXCISE TAX