

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

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

▶ Do not enter social security numbers on this form as it may be made public.

▶ Go to www.irs.gov/Form990PF for instructions and the latest information.

OMB No 1545-0052

2018

Open to Public Inspection

For calendar year 2018 or tax year beginning , and ending

Name of foundation THE MARTIN FAMILY FOUNDATION		A Employer identification number 38-3340278
Number and street (or P.O. box number if mail is not delivered to street address) 115 DEPOT ST	Room/suite	B Telephone number (734) 994-5050
City or town, state or province, country, and ZIP or foreign postal code ANN ARBOR, MI 48104		C If exemption application is pending, check here <input type="checkbox"/>
G Check all that apply: <input type="checkbox"/> Initial return <input type="checkbox"/> Initial return of a former public charity <input type="checkbox"/> Final return <input type="checkbox"/> Amended return <input type="checkbox"/> Address change <input type="checkbox"/> Name change		D 1. Foreign organizations, check here <input type="checkbox"/> 2. Foreign organizations meeting the 85% test, check here and attach computation <input type="checkbox"/>
H Check type of organization: <input checked="" type="checkbox"/> Section 501(c)(3) exempt private foundation <input type="checkbox"/> Section 4947(a)(1) nonexempt charitable trust <input type="checkbox"/> Other taxable private foundation		E If private foundation status was terminated under section 507(b)(1)(A), check here <input type="checkbox"/>
I Fair market value of all assets at end of year (from Part II, col. (c), line 16) \$ 10,791,812.	J Accounting method: <input checked="" type="checkbox"/> Cash <input type="checkbox"/> Accrual <input type="checkbox"/> Other (specify) _____	F If the foundation is in a 60-month termination under section 507(b)(1)(B), check here <input type="checkbox"/>

Part I Analysis of Revenue and Expenses (The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a))		(a) Revenue and expenses per books	(b) Net investment income	(c) Adjusted net income	(d) Disbursements for charitable purposes (cash basis only)
1 Contributions, gifts, grants, etc., received		1,532,845.		N/A	
2 Check <input type="checkbox"/> if the foundation is not required to attach Sch. B					
3 Interest on savings and temporary cash investments		4,220.	4,220.		STATEMENT 1
4 Dividends and interest from securities		178,877.	178,877.		STATEMENT 2
5a Gross rents					
b Net rental income or (loss)					
6a Net gain or (loss) from sale of assets not on line 10		-552,378.			
b Gross sales price for all assets on line 6a 1,487,954.					
7 Capital gain net income (from Part IV, line 2)			0.		
8 Net short-term capital gain					
9 Income modifications					
10a Gross sales less returns and allowances					
b Less: Cost of goods sold					
c Gross profit or (loss)					
11 Other income		42,646.	0.		STATEMENT 3
12 Total. Add lines 1 through 11		1,206,210.	183,097.		
13 Compensation of officers, directors, trustees, etc		0.	0.		0.
14 Other employee salaries and wages					
15 Pension plans, employee benefits					
16a Legal fees					
b Accounting fees STMT 4		11,460.	0.		11,460.
c Other professional fees					
17 Interest					
18 Taxes STMT 5		16,804.	1,392.		0.
19 Depreciation and depletion					
20 Occupancy					
21 Travel, conferences, and meetings					
22 Printing and publications					
23 Other expenses STMT 6		47,481.	34,660.		12,821.
24 Total operating and administrative expenses. Add lines 13 through 23		75,745.	36,052.		24,281.
25 Contributions, gifts, grants paid		370,500.			370,500.
26 Total expenses and disbursements. Add lines 24 and 25		446,245.	36,052.		394,781.
27 Subtract line 26 from line 12:					
a Excess of revenue over expenses and disbursements		759,965.			
b Net investment income (if negative, enter -0-)			147,045.		
c Adjusted net income (if negative, enter -0-)				N/A	

Part II Balance Sheets		Attached schedules and amounts in the description column should be for end-of-year amounts only		Beginning of year	End of year	
		(a) Book Value	(b) Book Value	(c) Fair Market Value		
Assets	1 Cash - non-interest-bearing			59,063.	60,630.	60,630.
	2 Savings and temporary cash investments			626,303.	620,181.	620,181.
	3 Accounts receivable ▶					
	Less: allowance for doubtful accounts ▶					
	4 Pledges receivable ▶					
	Less: allowance for doubtful accounts ▶					
	5 Grants receivable					
	6 Receivables due from officers, directors, trustees, and other disqualified persons					
	7 Other notes and loans receivable ▶					
	Less: allowance for doubtful accounts ▶					
	8 Inventories for sale or use					
	9 Prepaid expenses and deferred charges					
	10a Investments - U.S. and state government obligations					
	b Investments - corporate stock STMT 8			4,535,742.	3,372,743.	7,787,405.
	c Investments - corporate bonds					
	11 Investments - land, buildings, and equipment basis ▶					
Less: accumulated depreciation ▶						
12 Investments - mortgage loans						
13 Investments - other STMT 9			1,424,235.	2,561,144.	2,323,596.	
14 Land, buildings, and equipment: basis ▶						
Less: accumulated depreciation ▶						
15 Other assets (describe ▶)						
16 Total assets (to be completed by all filers - see the instructions. Also, see page 1, item I)			6,645,343.	6,614,698.	10,791,812.	
Liabilities	17 Accounts payable and accrued expenses			5,000.		
	18 Grants payable					
	19 Deferred revenue					
	20 Loans from officers, directors, trustees, and other disqualified persons					
	21 Mortgages and other notes payable					
	22 Other liabilities (describe ▶)					
	23 Total liabilities (add lines 17 through 22)			5,000.	0.	
Net Assets or Fund Balances	Foundations that follow SFAS 117, check here ▶ <input type="checkbox"/>					
	24 Unrestricted					
	25 Temporarily restricted					
	26 Permanently restricted					
	Foundations that do not follow SFAS 117, check here ▶ <input checked="" type="checkbox"/>					
	27 Capital stock, trust principal, or current funds			0.	0.	
	28 Paid-in or capital surplus, or land, bldg., and equipment fund			0.	0.	
	29 Retained earnings, accumulated income, endowment, or other funds			6,640,343.	6,614,698.	
	30 Total net assets or fund balances			6,640,343.	6,614,698.	
31 Total liabilities and net assets/fund balances			6,645,343.	6,614,698.		

Part III Analysis of Changes in Net Assets or Fund Balances

1 Total net assets or fund balances at beginning of year - Part II, column (a), line 30 (must agree with end-of-year figure reported on prior year's return)	1	6,640,343.
2 Enter amount from Part I, line 27a	2	759,965.
3 Other increases not included in line 2 (itemize) ▶	3	0.
4 Add lines 1, 2, and 3	4	7,400,308.
5 Decreases not included in line 2 (itemize) ▶ SEE STATEMENT 7	5	785,610.
6 Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b), line 30	6	6,614,698.

Part IV Capital Gains and Losses for Tax on Investment Income**SEE ATTACHED STATEMENT**

(a) List and describe the kind(s) of property sold (for example, real estate, 2-story brick warehouse; or common stock, 200 shs. MLC Co.)	(b) How acquired P - Purchase D - Donation	(c) Date acquired (mo., day, yr.)	(d) Date sold (mo., day, yr.)
1a			
b			
c			
d			
e			

(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale	(h) Gain or (loss) ((e) plus (f) minus (g))
a			
b			
c			
d			
e	1,487,954.	2,040,332.	-552,378.

Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69.

(i) FMV as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col. (i) over col. (j), if any	(l) Gains (Col. (h) gain minus col. (k), but not less than -0-) or Losses (from col. (h))
a			
b			
c			
d			
e			-552,378.

2 Capital gain net income or (net capital loss)	{ If gain, also enter in Part I, line 7 If (loss), enter -0- in Part I, line 7 }	2	-552,378.
3 Net short-term capital gain or (loss) as defined in sections 1222(5) and (6): If gain, also enter in Part I, line 8, column (c). If (loss), enter -0- in Part I, line 8	{ }	3	N/A

Part V Qualification Under Section 4940(e) for Reduced Tax on Net Investment Income

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

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

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

☐ Yes ☒ No

If "Yes," the foundation doesn't qualify under section 4940(e). Do not complete this part.

1 Enter the appropriate amount in each column for each year; see the instructions before making any entries.

(a) Base period years Calendar year (or tax year beginning in)	(b) Adjusted qualifying distributions	(c) Net value of noncharitable-use assets	(d) Distribution ratio (col. (b) divided by col. (c))
2017	194,921.	7,962,334.	.024480
2016	341,356.	6,285,183.	.054311
2015	235,482.	5,404,973.	.043568
2014	141,070.	3,760,230.	.037516
2013	115,973.	2,947,098.	.039352

2 Total of line 1, column (d)	2	.199227
3 Average distribution ratio for the 5-year base period - divide the total on line 2 by 5.0, or by the number of years the foundation has been in existence if less than 5 years	3	.039845
4 Enter the net value of noncharitable-use assets for 2018 from Part X, line 5	4	10,528,404.
5 Multiply line 4 by line 3	5	419,504.
6 Enter 1% of net investment income (1% of Part I, line 27b)	6	1,470.
7 Add lines 5 and 6	7	420,974.
8 Enter qualifying distributions from Part XII, line 4	8	394,781.

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.

THE MARTIN FAMILY FOUNDATION

Part IV Capital Gains and Losses for Tax on Investment Income

(a) List and describe the kind(s) of property sold, e.g., real estate, 2-story brick warehouse; or common stock, 200 shs. MLC Co.		(b) How acquired P - Purchase D - Donation	(c) Date acquired (mo., day, yr.)	(d) Date sold (mo., day, yr.)
1a	PUBLICLY TRADED SECURITIES	P		
b	PUBLICLY TRADED SECURITIES	P		
c	SALE OF CLAROS INVESTMENT	P		
d	FROM K-1 MINOT HI INVESTORS	P		
e	SALE OF MINOT HI INVESTORS INVESTMENT	P		
f	FROM K-1 MINOT HI INVESTORS	P		
g	CAPITAL GAINS DIVIDENDS			
h				
i				
j				
k				
l				
m				
n				
o				

(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale	(h) Gain or (loss) (e) plus (f) minus (g)
a	685,574.	715,274.	-29,700.
b	731,796.	730,894.	902.
c		62,543.	-62,543.
d		484,525.	-484,525.
e		8,569.	-8,569.
f		38,527.	-38,527.
g	70,584.		70,584.
h			
i			
j			
k			
l			
m			
n			
o			

Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69

(i) F.M.V. as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col. (i) over col. (j), if any	(l) Losses (from col. (h)) Gains (excess of col. (h) gain over col. (k), but not less than "-0-")
a			-29,700.
b			902.
c			-62,543.
d			-484,525.
e			-8,569.
f			-38,527.
g			70,584.
h			
i			
j			
k			
l			
m			
n			
o			

2 Capital gain net income or (net capital loss)	{ If gain, also enter in Part I, line 7 If (loss), enter "-0-" in Part I, line 7 }	2	-552,378.
3 Net short-term capital gain or (loss) as defined in sections 1222(5) and (6): If gain, also enter in Part I, line 8, column (c). If (loss), enter "-0-" in Part I, line 8	}	3	N/A

Part VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 - see instructions)

1a Exempt operating foundations described in section 4940(d)(2), check here <input type="checkbox"/> and enter "N/A" on line 1. Date of ruling or determination letter: _____ (attach copy of letter if necessary-see instructions)			
b Domestic foundations that meet the section 4940(e) requirements in Part V, check here <input type="checkbox"/> and enter 1% of Part I, line 27b		1	2,941.
c All other domestic foundations enter 2% of line 27b. Exempt foreign organizations, enter 4% of Part I, line 12, col. (b).			
2 Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only; others, enter -0-)		2	0.
3 Add lines 1 and 2		3	2,941.
4 Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only; others, enter -0-)		4	0.
5 Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-		5	2,941.
6 Credits/Payments:			
a 2018 estimated tax payments and 2017 overpayment credited to 2018	6a	9,120.	
b Exempt foreign organizations - tax withheld at source	6b	0.	
c Tax paid with application for extension of time to file (Form 8868)	6c	0.	
d Backup withholding erroneously withheld	6d	0.	
7 Total credits and payments. Add lines 6a through 6d	7	9,120.	
8 Enter any penalty for underpayment of estimated tax. Check here <input checked="" type="checkbox"/> if Form 2220 is attached	8	0.	
9 Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed	9		
10 Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid	10	6,179.	
11 Enter the amount of line 10 to be: Credited to 2019 estimated tax <input type="checkbox"/> 6,179. Refunded <input type="checkbox"/>	11	0.	

Part VII-A Statements Regarding Activities

	Yes	No
1a During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any political campaign?		X
b Did it spend more than \$100 during the year (either directly or indirectly) for political purposes? See the instructions for the definition. If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials published or distributed by the foundation in connection with the activities		X
c Did the foundation file Form 1120-POL for this year?		X
d Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year: (1) On the foundation. <input type="checkbox"/> \$ 0. (2) On foundation managers. <input type="checkbox"/> \$ 0.		
e Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers. <input type="checkbox"/> \$ 0.		
2 Has the foundation engaged in any activities that have not previously been reported to the IRS? If "Yes," attach a detailed description of the activities.		X
3 Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes		X
4a Did the foundation have unrelated business gross income of \$1,000 or more during the year?	X	
b If "Yes," has it filed a tax return on Form 990-T for this year?	X	
5 Was there a liquidation, termination, dissolution, or substantial contraction during the year? If "Yes," attach the statement required by General Instruction T		X
6 Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either: • By language in the governing instrument, or • By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state law remain in the governing instrument?	X	
7 Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col. (c), and Part XV	X	
8a Enter the states to which the foundation reports or with which it is registered. See instructions. <input type="checkbox"/> MI		
b If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate) of each state as required by General Instruction G? If "No," attach explanation	X	
9 Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for calendar year 2018 or the tax year beginning in 2018? See the instructions for Part XIV. If "Yes," complete Part XIV		X
10 Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses		X

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Part VII-A Statements Regarding Activities (continued)

	Yes	No
11 At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of section 512(b)(13)? If "Yes," attach schedule. See instructions		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		X
13 Did the foundation comply with the public inspection requirements for its annual returns and exemption application? Website address ► N/A	X	
14 The books are in care of ► KELLY FRITZSCH Telephone no. ► (734) 994-5050 Located at ► 115 DEPOT STREET, ANN ARBOR, MI ZIP+4 ► 48104		
15 Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - check here and enter the amount of tax-exempt interest received or accrued during the year ► 15 N/A		
16 At any time during calendar year 2018, did the foundation have an interest in or a signature or other authority over a bank, securities, or other financial account in a foreign country? See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes," enter the name of the foreign country ►		X

Part VII-B Statements Regarding Activities for Which Form 4720 May Be Required

File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.

	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?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
(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)?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
(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.)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
b If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations section 53.4941(d)-3 or in a current notice regarding disaster assistance? See instructions Organizations relying on a current notice regarding disaster assistance, check here ► <input type="checkbox"/>		X
c Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected before the first day of the tax year beginning in 2018?		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 2018, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning before 2018? If "Yes," list the years ► , , ,	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
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 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	
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?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
b If "Yes," did it have excess business holdings in 2018 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, Form 4720, to determine if the foundation had excess business holdings in 2018.)		X
4a Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?		X
b Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2018?		X

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Part VII-B Statements Regarding Activities for Which Form 4720 May Be Required (continued)

		Yes	No
5a During the year, did the foundation pay or incur any amount to:			
(1) Carry on propaganda, or otherwise attempt to influence legislation (section 4945(e))?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
(2) Influence the outcome of any specific public election (see section 4955); or to carry on, directly or indirectly, any voter registration drive?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
(3) Provide a grant to an individual for travel, study, or other similar purposes?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
(4) Provide a grant to an organization other than a charitable, etc., organization described in section 4945(d)(4)(A)? See instructions	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
(5) Provide for any purpose other than religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify under the exceptions described in Regulations section 53.4945 or in a current notice regarding disaster assistance? See instructions	N/A	5b	
Organizations relying on a current notice regarding disaster assistance, check here	<input checked="" type="checkbox"/>		
c If the answer is "Yes" to question 5a(4), does the foundation claim exemption from the tax because it maintained expenditure responsibility for the grant?	N/A		
If "Yes," attach the statement required by Regulations section 53.4945-5(d).	<input type="checkbox"/> Yes <input type="checkbox"/> No		
6a Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
b Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract?		6b	X
If "Yes" to 6b, file Form 8870.			
7a At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
b If "Yes," did the foundation receive any proceeds or have any net income attributable to the transaction?	N/A	7b	
8 Is the foundation subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or excess parachute payment(s) during the year?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		

Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors**1 List all officers, directors, trustees, and foundation managers and their compensation.**

(a) Name and address	(b) Title, and average hours per week devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
SALLY A. MARTIN	PRESIDENT			
115 DEPOT STREET				
ANN ARBOR, MI 48104	1.00	0.	0.	0.
WILLIAM C. MARTIN	V.P./SEC./TREASURER			
115 DEPOT STREET				
ANN ARBOR, MI 48104	1.00	0.	0.	0.
MICHAEL C. MARTIN	DIRECTOR			
115 DEPOT STREET				
ANN ARBOR, MI 48104	1.00	0.	0.	0.

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

(a) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances

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

0

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Part X Minimum Investment Return (All domestic foundations must complete this part. Foreign foundations, 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	10,038,993.
b	Average of monthly cash balances	1b	649,742.
c	Fair market value of all other assets	1c	
d	Total (add lines 1a, b, and c)	1d	10,688,735.
e	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	10,688,735.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions)	4	160,331.
5	Net value of noncharitable-use assets Subtract line 4 from line 3. Enter here and on Part V, line 4	5	10,528,404.
6	Minimum investment return Enter 5% of line 5	6	526,420.

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	526,420.
2a	Tax on investment income for 2018 from Part VI, line 5	2a	2,941.
b	Income tax for 2018. (This does not include the tax from Part VI.)	2b	
c	Add lines 2a and 2b	2c	2,941.
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	523,479.
4	Recoveries of amounts treated as qualifying distributions	4	0.
5	Add lines 3 and 4	5	523,479.
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	523,479.

Part XII Qualifying Distributions (see instructions)

1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:		
a	Expenses, contributions, gifts, etc. - total from Part I, column (d), line 26	1a	394,781.
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	394,781.
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	0.
6	Adjusted qualifying distributions Subtract line 5 from line 4	6	394,781.

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 4940(e) reduction of tax in those years.

Form 990-PF (2018)

Part XIII Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2017	(c) 2017	(d) 2018
1 Distributable amount for 2018 from Part XI, line 7				523,479.
2 Undistributed income, if any, as of the end of 2018				
a Enter amount for 2017 only			375,531.	
b Total for prior years:		0.		
3 Excess distributions carryover, if any, to 2018:				
a From 2013				
b From 2014				
c From 2015				
d From 2016				
e From 2017				
f Total of lines 3a through e	0.			
4 Qualifying distributions for 2018 from Part XII, line 4: ▶ \$ 394,781.				
a Applied to 2017, but not more than line 2a			375,531.	
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 2018 distributable amount				19,250.
e Remaining amount distributed out of corpus	0.			
5 Excess distributions carryover applied to 2018 (If an amount appears in column (d), the same amount must be shown in column (a))	0.			0.
6 Enter the net total of each column as indicated below:				
a Corpus. Add lines 3f, 4c, and 4e. Subtract line 5	0.			
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 2017. Subtract line 4a from line 2a. Taxable amount - see instr.			0.	
f Undistributed income for 2018. Subtract lines 4d and 5 from line 1. This amount must be distributed in 2019				504,229.
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 2013 not applied on line 5 or line 7	0.			
9 Excess distributions carryover to 2019. Subtract lines 7 and 8 from line 6a	0.			
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				

Part XV Supplementary Information (continued)**3 Grants and Contributions Paid During the Year or Approved for Future Payment**

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
a Paid during the year				
A SISTER'S HOPE 6257 N. MCCORMICK BLVD #104 CHICAGO, IL 60659		501(C)(3)	HUMANITARIAN	5,000.
AMERICAN RED CROSS P.O. BOX 4002018 DES MOINES, IA 50340		501(C)(3)	HUMANITARIAN	3,000.
ANN ARBOR AREA COMMUNITY FOUNDATION 201 S. MAIN ST., SUITE 501 ANN ARBOR, MI 48104		501(C)(3)	HUMANITARIAN	2,000.
ANN ARBOR ART CENTER 117 W. LIBERTY ANN ARBOR, MI 48104		501(C)(3)	EDUCATIONAL	3,000.
ANN ARBOR SUMMER FESTIVAL 310 DEPOT ST., SUITE 3 ANN ARBOR, MI 48104		501(C)(3)	EDUCATIONAL	1,500.
Total SEE CONTINUATION SHEET(S) ▶ 3a				370,500.
b Approved for future payment				
NONE				
Total ▶ 3b				0.

Part XV Supplementary Information**3 Grants and Contributions Paid During the Year (Continuation)**

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
ANN ARBOR SYMPHONY ORCHESTRA 220 E. HURON, SUITE 470 ANN ARBOR, MI 48104		501(C)(3)	MUSICAL	2,500.
ARBOR HOSPICE FOUNDATION 2366 OAK VALLEY DRIVE ANN ARBOR, MI 48103		501(C)(3)	HUMANITARIAN	2,500.
AVE MARIA FOUNDATION 24 FRANK LLOYD WRIGHT DRIVE ANN ARBOR, MI 48105		501(C)(3)	HUMANITARIAN	10,000.
BAY CLIFF HEALTH CAMP 214 W. MICHIGAN ST. MARQUETTE, MI 49855		501(C)(3)	HUMANITARIAN	10,000.
BIG BROTHERS BIG SISTERS 2890 CARPENTER RD, SUITE 600 ANN ARBOR, MI 48108		501(C)(3)	HUMANITARIAN	5,000.
BOYSCOUTS OF AMERICA 137 S. MARKETPLACE BLVD LANSING, MI 48917		501(C)(3)	HUMANITARIAN	2,500.
BURNS PARK FOREIGN LANGUAGE INITIATIVE PO BOX 1616 ANN ARBOR, MI 48106		501(C)(3)	EDUCATIONAL	2,500.
BURNS PARK PLAYERS 2309 BROCKMAN BLVD ANN ARBOR, MI 48104		501(C)(3)	HUMANITARIAN	1,000.
BURNS PARK PTO 1414 WELLS ST ANN ARBOR, MI 48104		501(C)(3)	EDUCATIONAL	3,500.
CAMPAIGN FOR THE ARK 316 S MAIN ST ANN ARBOR, MI 48105		501(C)(3)	MUSICAL	5,000.
Total from continuation sheets				356,000.

Part XV Supplementary Information**3 Grants and Contributions Paid During the Year (Continuation)**

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
CANCER SUPPORT COMMUNITY 2010 HOGBACK RD., SUITE 3 ANN ARBOR, MI 48105		501(C)(3)	HUMANITARIAN	2,500.
CHADTOUGH FOUNDATION PO BOX 907 SALINE, MI 48176		501(C)(3)	HUMANITARIAN	1,000.
CHICAGO BOTANICAL GARDEN 1000 LAKE COOK ROAD GLENCOE, IL 60022		501(C)(3)	HUMANITARIAN	500.
CHILDREN'S LITERACY NETWORK 1100 N. MAIN ST ANN ARBOR, MI 48104		501(C)(3)	EDUCATIONAL	1,000.
COMMUNITY ACTION NETWORK 809 TAYLOR ANN ARBOR, MI 48105		501(C)(3)	HUMANITARIAN	1,000.
COUNCIL OF MICHIGAN FOUNDATIONS ONE SOUTH HARBOR AVE., STE. 3 GRAND HAVEN, MI 49417		501(C)(3)	HUMANITARIAN	3,000.
ECOLOGY CENTER 339 E. LIBERTY ANN ARBOR, MI 48104		501(C)(3)	HUMANITARIAN	1,000.
ELE'S PLACE 3526 W. LIBERTY, SUITE 200 ANN ARBOR, MI 48103		501(C)(3)	HUMANITARIAN	1,000.
EMERSON SCHOOL 5425 SCIO CHURCH ROAD ANN ARBOR, MI 48103		501(C)(3)	EDUCATIONAL	5,000.
FINLANDIA UNIVERSITY 601 QUINCY ST HANCOCK, MI 49930		501(C)(3)	EDUCATIONAL	2,500.
Total from continuation sheets				

Part XV Supplementary Information**3 Grants and Contributions Paid During the Year (Continuation)**

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
FIRST CONGREGATIONAL CHURCH 608 E. WILLIAM ST ANN ARBOR, MI 48104		501(C)(3)	HUMANITARIAN	100,000.
FIRST TEE OF GREATER CHICAGO 2901 W LAKE AVE GLENVIEW, IL 60026		501(C)(3)	HUMANITARIAN	500.
FOOD GATHERERS EILEEN SPRING PO BOX 131037 ANN ARBOR, MI 48103		501(C)(3)	HUMANITARIAN	1,000.
GERALD R. FORD PRESIDENTIAL FOUNDATION 303 PEARL STREET, NW GRAND RAPIDS, MI 49504		501(C)(3)	HUMANITARIAN	6,000.
GIRL SCOUTS 444 JAMES L. PARKWAY YPSILANTI, MI 48197		501(C)(3)	HUMANITARIAN	1,000.
GIRLS GROUP 2531 JACKSON AVE. #188 ANN ARBOR, MI 48103		501(C)(3)	HUMANITARIAN	5,000.
HABITAT FOR HUMANITY OF HURON VALLEY 170 APRILL DR., SUITE A ANN ARBOR, MI 48103		501(C)(3)	HUMANITARIAN	2,500.
HAVEN YOUTH CENTER 825 GREEN BAY RD WILMETTE, IL 60093		501(C)(3)	EDUCATIONAL	2,500.
HOPE CLINIC 518 HARRISON YPSILANTI, MI 48197		501(C)(3)	HUMANITARIAN	10,000.
HOUGHTON COUNTY HISTORICAL SOCIETY PO BOX 127 LAKE LINDEN, MI 49945		501(C)(3)	EDUCATIONAL	1,000.
Total from continuation sheets				

Part XV Supplementary Information**3 Grants and Contributions Paid During the Year (Continuation)**

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
HUMANE SOCIETY OF HURON VALLEY 3100 CHERRY HILL RD ANN ARBOR, MI 48105		501(C)(3)	HUMANITARIAN	2,500.
INTENTIONAL COMMUNITIES OF WASHTENAW COUNTY PO BOX 1525 ANN ARBOR, MI 48106		501(C)(3)	HUMANITARIAN	1,000.
INTERFAITH HOSPITALITY NETWORK/ALPHA HOUSE 4200 JACKSON RD ANN ARBOR, MI 48103		501(C)(3)	HUMANITARIAN	1,000.
JASA 11 RIVERSIDE DR, SUITE 3 AW NEW YORK, NY 10023		501(C)(3)	HUMANITARIAN	5,000.
KEEN CHICAGO PO BOX 06255 CHICAGO, IL 60606		501(C)(3)	HUMANITARIAN	2,000.
KENYON COLLEGE 209 CHASE AVE GAMBIER, OH 43022		501(C)(3)	EDUCATIONAL	7,000.
KEWEENAW COMMUNITY FOUNDATION 236 QUINCY ST. HANCOCK, MI 49930		501(C)(3)	HUMANITARIAN	15,000.
LEGACY LAND CONSERVANCY 1100 N. MAIN ST., #203 ANN ARBOR, MI 48104		501(C)(3)	HUMANITARIAN	1,000.
LESLIE SCIENCE & NATURE CENTER 1831 TRAVER RD. ANN ARBOR, MI 48105		501(C)(3)	EDUCATIONAL	1,000.
LIGHTUP 5400 HOLLOW DRIVE BLOOMFIELD, MI 48302		501(C)(3)	HUMINTARIAN	1,000.
Total from continuation sheets				

Part XV Supplementary Information**3 Grants and Contributions Paid During the Year (Continuation)**

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
MAGIC OF CHRISTMAS FOUNDATION 6850 MULBERRY CT SALINE, MI 48176		501(C)(3)	HUMANITARIAN	1,000.
MICHIGAN ENVIRONMENTAL COUNCIL 602 W. IONIA ST LANSING, MI 48933		501(C)(3)	HUMANITARIAN	1,000.
MICHIGAN FITNESS FOUNDATION 14800 E. OLD US 12 CHELSEA, MI 48118		501(C)(3)	EDUCATIONAL	3,500.
MICHIGAN RADIO- UM 535 W WILLIAM SUITE 110 ANN ARBOR, MI 48103		501(C)(3)	EDUCATIONAL	1,000.
NEUTRAL ZONE 310 E. WASHINGTON ANN ARBOR, MI 48104		501(C)(3)	HUMANITARIAN	10,000.
NOBLE NETWORK OF CHARTER SCHOOLS 1 NORTH STATE ST FLOOR 7 LL CHICAGO, IL 60602		501(C)(3)	MUSICAL	1,500.
NORTH STAR REACH 1050 HIGHLAND ANN ARBOR, MI 48108		501(C)(3)	EDUCATIONAL	1,000.
OCEAN REEF MEDICAL FOUNDATION 50 BARRACUDA LANE KEY LARGO, FL 33037		501(C)(3)	EDUCATIONAL	1,000.
OUILMETTE FOUNDATION 1200 WILMETTE AVE WILMETTE, IL 60091		501(C)(3)	HUMANITARIAN	4,000.
OZONE HOUSE 1705 WASHTENAW ANN ARBOR, MI 48104		501(C)(3)	HUMANITARIAN	1,000.
Total from continuation sheets				

Part XV Supplementary Information**3 Grants and Contributions Paid During the Year (Continuation)**

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
PLANNED PARENTHOOD PO BOX 3673 ANN ARBOR, MI 48106		501(C)(3)	HUMANITARIAN	11,000.
PORTAGE HEALTH FOUNDATION 400 QUINCY ST HANCOCK, MI 49930		501(C)(3)	HUMANITARIAN	3,000.
RONALD MCDONALD HOUSE 1600 WASHINGTON HEIGHTS ANN ARBOR, MI 48104		501(C)(3)	HUMANITARIAN	1,000.
SAFE HOUSE 4100 CLARK RD ANN ARBOR, MI 48105		501(C)(3)	HUMANITARIAN	1,000.
SALVATION ARMY - HANCOCK 408 RAVINE ST. HANCOCK, MI 49930		501(C)(3)	HUMANITARIAN	3,000.
SHELTER ASSOCIATION OF WASHTENAW COUNTY 312 W HURON ST ANN ARBOR, MI 48103		501(C)(3)	HUMANITARIAN	1,500.
SOS COMMUNITY SERVICES 101 S. HURON ST YPSILANTI, MI 48197		501(C)(3)	HUMANITARIAN	2,500.
U OF M - ALUMNI ASSOCIATION 200 FLETCHER ST ANN ARBOR, MI 48109		501(C)(3)	EDUCATIONAL	1,000.
U OF M - BOHNSACK RESEARCH 1000 WALL ST ANN ARBOR, MI 48105		501(C)(3)	EDUCATIONAL	1,000.
U OF M - BUDDY TO BUDDY PROGRAM 2025 TRAVERWOOD DR., SUITE C ANN ARBOR, MI 48105		501(C)(3)	EDUCATIONAL	500.
Total from continuation sheets				

Part XV Supplementary Information**3 Grants and Contributions Paid During the Year (Continuation)**

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
U OF M - EVENT OF MAIN 500 S. STATE STREET ANN ARBOR, MI 48109		501(C)(3)	EDUCATIONAL	5,000.
U OF M - FORD SCHOOL DEAN'S STRATEGIC FUND 735 SOUTH STATE ST ANN ARBOR, MI 48109		501(C)(3)	EDUCATIONAL	5,000.
U OF M - HOUSING FOR SENIORS 2401 PLYMOUTH ANN ARBOR, MI 48105		501(C)(3)	HUMANITARIAN	1,000.
U OF M - MAD MICHIGAN ALZHEIMER DISEASE CENTER 2101 COMMONWEALTH BLVD SUITE D ANN ARBOR, MI 48105		501(C)(3)	HUMANITARIAN	1,000.
U OF M - MEALS ON WHEELS 2025 TRAVERWOOD DR., SUITE A2 ANN ARBOR, MI 48105		501(C)(3)	HUMANITARIAN	2,000.
U OF M - NATURAL HISTORY MUSEUM 3003 S. STATE ST., STE. 8000 ANN ARBOR, MI 48104		501(C)(3)	EDUCATIONAL	1,000.
U OF M - OBSTETRICS AND GYNOCLOGY 3003 S. STATE ST., STE. 8000 ANN ARBOR, MI 48104		501(C)(3)	HUMANITARIAN	10,000.
U OF M - PERCY BATES ENDOWED SCHOLARSHIP 3003 S. STATE ST., STE. 8000 ANN ARBOR, MI 48109		501(C)(3)	EDUCATIONAL	5,000.
UNIFIED HIV HEALTH AND BEYOND 3011 W. GRAND BLVD., STE 230 DETROIT, MI 48202		501(C)(3)	HUMANITARIAN	1,000.
UNIV OF MICH - CENTER FOR EDUCATION WOMEN 330 E. LIBERTY, 2ND FLOOR ANN ARBOR, MI 48104		501(C)(3)	EDUCATIONAL	1,000.
Total from continuation sheets				

Part XV Supplementary Information**3 Grants and Contributions Paid During the Year (Continuation)**

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
UNIV OF MICH - MICHIGAN SEA GRANT 520 E. LIBERTY, SUITE 310 ANN ARBOR, MI 48104		501(C)(3)	EDUCATIONAL	1,000.
UNIV OF MICH - TELLING IT PROGRAM 701 E UNIVERSITY ANN ARBOR, MI 48109		501(C)(3)	EDUCATIONAL	2,000.
UNIV OF MICH - TURNER SENIOR RESOURCE CENTER 2401 PLYMOUTH RD ANN ARBOR, MI 48105		501(C)(3)	EDUCATIONAL	1,000.
UNIVERSITY MUSICAL SOCIETY 881 N. UNIVERSITY AVE. ANN ARBOR, MI 48109		501(C)(3)	MUSICAL	11,000.
UNIVERSITY OF WISCONSIN 702 WEST JOHNSON STREET MADISON, WI 53706		501(C)(3)	EDUCATIONAL	2,000.
VANDERBILT UNIVERSITY 2301 VANDERBILT PLACE NASHVILLE, TN 32240		501(C)(3)	EDUCATIONAL	4,000.
WASHTENAW AREA COUNCIL FOR CHILDREN 3075 W. CLARK, SUITE 110 YPSILANTI, MI 48197		501(C)(3)	HUMANITARIAN	2,000.
WASHTENAW HOUSING ALLIANCE PO BOX 7993 ANN ARBOR, MI 48107		501(C)(3)	HUMANITARIAN	5,000.
WASHTENAW LITERACY 5577 WHITTAKER RD YPSILANTI, MI 48197		501(C)(3)	EDUCATIONAL	5,000.
WILMETTE FIREFIGHTERS ASSOCIATION 1304 LAKE AVE WILMETTE, IL 60091		501(C)(3)	HUMANITARIAN	2,000.
Total from continuation sheets				

Part XV Supplementary Information**3** Grants and Contributions Paid During the Year (Continuation)

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
WILMETTE POLICE BENEVOLENT FUND 710 RIDGE RD WILMETTE, IL 60091		501(C)(3)	HUMANITARIAN	2,500.
WILMETTE PUBLIC LIBRARY 1242 WILMETTE AVE WILMETTE, IL 60091		501(C)(3)	HUMANITARIAN	1,000.
YMCA-ANN ARBOR 400 W. WASHINGTON ST ANN ARBOR, MI 48103		501(C)(3)	EDUCATIONAL	5,000.
YPSILANTI MEALS ON WHEELS 1110 W. CROSS ST. YPSILANTI, MI 48197		501(C)(3)	HUMANITARIAN	1,000.
Total from continuation sheets				

Part XVII Information Regarding Transfers to and Transactions and Relationships With Noncharitable Exempt Organizations

- | | | Yes | No |
|----------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----|----|
| 1 | Did the organization directly or indirectly engage in any of the following described in section 501(c)(3) (other than section 501(c)(3) organizations) or in section 527, relating to political organizations? | | |
| a | Transfers from the reporting foundation to a noncharitable exempt organization of: | | |
| | (1) Cash | | X |
| | (2) Other assets | | X |
| b | Other transactions: | | |
| | (1) Sales of assets to a noncharitable exempt organization | | X |
| | (2) Purchases of assets from a noncharitable exempt organization | | X |
| | (3) Rental of facilities, equipment, or other assets | | X |
| | (4) Reimbursement arrangements | | X |
| | (5) Loans or loan guarantees | | X |
| | (6) Performance of services or membership or fundraising solicitations | | X |
| c | Sharing of facilities, equipment, mailing lists, other assets, or paid employees | | X |
| d | If the answer to any of the above is "Yes," complete the following schedule. Column (b) should always show the fair market value of the goods, other assets, or services given by the reporting foundation. If the foundation received less than fair market value in any transaction or sharing arrangement, show in column (d) the value of the goods, other assets, or services received. | | |

[illegible]

- 2a** Is the foundation directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described in section 501(c) (other than section 501(c)(3)) or in section 527? ☐ Yes ☒ No
- b** If "Yes," complete the following schedule.

(a) Name of organization	(b) Type of organization	(c) Description of relationship
N/A		

**Sign
Here**

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge.

Signature of officer or trustee

11/6/19
Date

PRESIDENT
Title

May the IRS discuss this return with the preparer shown below? See instr

☒ Yes ☐ No

**Paid
Preparer
Use Only**

Print/Type preparer's name
BRIAN D. MILLER,
CPA

Preparer's signature
Bria Miller
BRIAN D. MILLER.

Date
10/25/19

Check ☐
self-employed

PTIN	P00091396
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Firm's name ► **REHMANN ROBSON LLC**

Firm's EIN ► 38-3635706

Firm's address ► 555 BRIARWOOD CIRCLE, STE 300
ANN ARBOR, MI 48108

Phone no. (734) 761-2005

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

2018

Name of the organization

Employer identification number

THE MARTIN FAMILY FOUNDATION**38-3340278**

Organization type (check 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☐ 527 political organization

Form 990-PF

☒ 501(c)(3) exempt private foundation☐ 4947(a)(1) nonexempt charitable trust treated as a private foundation☐ 501(c)(3) taxable private foundationCheck if your organization is covered by the **General Rule** or a **Special Rule**.**Note:** Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions.**General Rule**

- ☒ For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions.

Special Rules

- ☐ For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of (1) \$5,000, or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1. Complete Parts I and II.
- ☐ For an organization 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 (entering "N/A" in column (b) instead of the contributor name and address), II, and III.
- ☐ 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, contributions *exclusively* for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an *exclusively* religious, charitable, etc., purpose. Don't complete any of the parts unless the **General Rule** applies to this organization because it received *nonexclusively* religious, charitable, etc., contributions totaling \$5,000 or more during the year. ► \$ _____

Caution: An organization that isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990, 990-EZ, or 990-PF), but it **must** answer "No" on Part IV, line 2, of its Form 990, or check the box on line H of its Form 990-EZ or on its Form 990-PF, Part I, line 2, to certify that it doesn't meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

Name of organization	Employer identification number
THE MARTIN FAMILY FOUNDATION	38-3340278

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	DREAMLAND LLC 115 DEPOT STREET ANN ARBOR, MI 48104	\$ 868,954.	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input checked="" type="checkbox"/> (Complete Part II for noncash contributions)
2	WILLIAM C. MARTIN TRUST U/A/D 6/28/95 115 DEPOT STREET ANN ARBOR, MI 48104	\$ 663,891.	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input checked="" type="checkbox"/> (Complete Part II for noncash contributions)
		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions)
		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions)
		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions)
		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions)
		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions)

Name of organization	Employer identification number
THE MARTIN FAMILY FOUNDATION	38-3340278

Part II **Noncash Property** (see instructions) Use duplicate copies of Part 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
1	DONATION OF 4,869.4 SHARES OF ALTRIA GROUP, 245 SHARES OF AMAZON & 1,769.9 SHARES OF LILLY ELI	\$ 868,954.	12/12/18
2	DONATION OF 2,058.6453 SHARES OF APPLE, 700 SHARES OF BERKSHIRE HATHAWAY & 1,745 SHARES OF JP MORGAN	\$ 663,891.	12/12/18
		\$	
		\$	
		\$	
		\$	
		\$	
		\$	

Name of organization

Employer identification number

THE MARTIN FAMILY FOUNDATION**38-3340278****Part III**

Exclusively religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8), or (10) that total more than \$1,000 for the year from any one contributor. Complete columns (a) through (e) and the following line entry. For organizations completing Part III, enter the total of exclusively religious, charitable, etc., contributions of \$1,000 or less for the year (Enter this info once) ▶ \$ _____

Use duplicate copies of Part III if additional space is needed

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
	(e) Transfer of gift		
	Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee
	(e) Transfer of gift		
	Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee
	(e) Transfer of gift		
	Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee
	(e) Transfer of gift		
	Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee
	(e) Transfer of gift		
	Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee

FORM 990-PF INTEREST ON SAVINGS AND TEMPORARY CASH INVESTMENTS STATEMENT 1

SOURCE	(A) REVENUE PER BOOKS	(B) NET INVESTMENT INCOME	(C) ADJUSTED NET INCOME
INTEREST INCOME	4,220.	4,220.	
TOTAL TO PART I, LINE 3	4,220.	4,220.	

FORM 990-PF DIVIDENDS AND INTEREST FROM SECURITIES STATEMENT 2

SOURCE	GROSS AMOUNT	CAPITAL GAINS DIVIDENDS	(A) REVENUE PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME
BANK OF ANN ARBOR	249,461.	70,584.	178,877.	178,877.	
TO PART I, LINE 4	249,461.	70,584.	178,877.	178,877.	

FORM 990-PF OTHER INCOME STATEMENT 3

DESCRIPTION	(A) REVENUE PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME
MINOT HI INVESTORS LLC - UNRELATED BUSINESS INCOME/(LOSS)	41,642.	0.	
RCA VG, LLC- UNRELATED BUSINESS INCOME / (LOSS)	838.	0.	
SECURITIES LITIGATION PROCEEDS: VARIOUS	166.	0.	
TOTAL TO FORM 990-PF, PART I, LINE 11	42,646.	0.	

FORM 990-PF ACCOUNTING FEES STATEMENT 4

DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
ACCOUNTING FEES	11,460.	0.		11,460.
TO FORM 990-PF, PG 1, LN 16B	11,460.	0.		11,460.

FORM 990-PF

TAXES

STATEMENT 5

DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
FOREIGN TAX WITHHOLDINGS	1,392.	1,392.		0.
EXCISE TAXES	15,412.	0.		0.
TO FORM 990-PF, PG 1, LN 18	16,804.	1,392.		0.

FORM 990-PF

OTHER EXPENSES

STATEMENT 6

DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
DUES AND FEES	3,550.	0.		3,550.
MANAGEMENT FEES	37,754.	30,203.		7,551.
MISCELLANEOUS	358.	0.		358.
BANK FEES	248.	0.		248.
BOND FEES	5,571.	4,457.		1,114.
TO FORM 990-PF, PG 1, LN 23	47,481.	34,660.		12,821.

FORM 990-PF

OTHER DECREASES IN NET ASSETS OR FUND BALANCES

STATEMENT 7

DESCRIPTION	AMOUNT
CONTRIBUTION OF APPRECIATED SECURITIES	785,610.
TOTAL TO FORM 990-PF, PART III, LINE 5	785,610.

FORM 990-PF

CORPORATE STOCK

STATEMENT 8

DESCRIPTION	BOOK VALUE	FAIR MARKET VALUE
CORPORATE STOCK	3,372,743.	7,787,405.
TOTAL TO FORM 990-PF, PART II, LINE 10B	3,372,743.	7,787,405.

FORM 990-PF

OTHER INVESTMENTS

STATEMENT 9

DESCRIPTION	VALUATION METHOD	BOOK VALUE	FAIR MARKET VALUE
INVESTMENT IN RCA VG LLC	FMV	-242,683.	-242,683.
OTHER INVESTMENTS	FMV	2,803,827.	2,566,279.
TOTAL TO FORM 990-PF, PART II, LINE 13		2,561,144.	2,323,596.

FORM 990-PF

PART XV - LINE 1A
LIST OF FOUNDATION MANAGERS

STATEMENT 10

NAME OF MANAGER

SALLY A. MARTIN
WILLIAM C. MARTIN

FORM 990-PF

OTHER REVENUE

STATEMENT 11

DESCRIPTION	BUS CODE	UNRELATED BUSINESS INC	EXCL CODE	EXCLUDED AMOUNT	RELATED OR EXEMPT FUNC- TION INCOME
MINOT HI INVESTORS LLC - UNRELATED BUSINESS INCOME/(LOSS)	900099	41,642.			
RCA VG, LLC- UNRELATED BUSINESS INCOME / (LOSS)	900099	838.	16		
SECURITIES LITIGATION PROCEEDS: VARIOUS	900099			166.	
TOTAL TO FORM 990-PF, PG 12, LN 11		42,480.		166.	