Form 990-PF

Department of the Treasury

Return of Private Foundation

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

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

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

OMB No 1545-0052

For coloradar year 2019 or tax year hadinaire 20								
_		ilendar year 2018 or tax year beginning				and endin		, 20
Name of foundation JANUSZ A. SUBCZYNSKI, M.D., F.A.C.S. NEUROSCIENCE FOUNDATION							A Employer identif	
NEUROSCIENCE FOUNDATION Number and street (or P O box number if mail is not delivered to street address) Room/suite					38-3517725 B Telephone number (see instructions)			
Number and street (or P O box number if mail is not delivered to street address) Room/suite				B relephone numb	er (see instructions)			
	100	10 Magic attracts				1	(222)	1 2112
_		18 MACK AVENUE	1 00 4 5				(313) 88	31 - 2110
Ü	y or t	own, state or province, country, and ZIP or foreign posta	ıı code				C If exemption applica	ation is
	CD^	OCE DOTNINE MOODO NE 4000					pending, check here	
_		SSE POINTE WOODS, MI 48236	- 1	Implication 1	at a face	و د الم مراطن	. 	
G	Che	eck all that apply Initial return	<u> </u>	Initial return	•	oublic charit	D 1 Toroign organiza	
		Final return	\vdash	Amended re			2 Foreign organiza 85% test, check l	
_	Chi	Address change	a)/2) =	Name chang				
		eck type of organization Section 501(mon 00	E If private foundation	n status was terminated
_		section 4947(a)(1) nonexempt charitable trust		ther taxable pr		1011	under section 507(t	(1)(A), check here . P
ı		market value of all assets at J Acco			asn Acc	rual		in a 60-month termination
			ther (sp		ah hasis \		- under section 507(b	((1)(B), check here . >
	_	(,)	column (d) must be on ca	ish basis)			(d) Disbursements
ئا	art	Analysis of Revenue and Expenses (The total of amounts in columns (b), (c), and (d)		Revenue and	(b) Net inve	stment	(c) Adjusted net	for charitable
		may not necessarily equal the amounts in	ext	penses per books	incom		income	purposes (cash basis only)
\neg		column (a) (see instructions))						(Cash Dasis Offly)
	1	Contributions, gifts, grants, etc., received (attach schedule). Check X if the foundation is not required to				. ,		
	2	attach Sch B		59.		59.		<u>.</u>
	3	Interest on savings and temporary cash investments.						
	4	Dividends and interest from securities				_		<u> </u>
	5a	Gross rents						
		Net rental income or (loss)						
Revenue	6a b	Net gain or (loss) from sale of assets not on line 10 Gross sales price for all assets on line 6a						1
Š	7	Capital gain net income (from Part IV, line 2) .						
띡	8	Net short-term capital gain						
	9	Income modifications						
	10 a	Gross sales less returns and allowances					 .	
	b	Less Cost of goods sold .						<u> </u>
	С	Gross profit or (loss) (attach schedule)						
-	11	Other income (attach schedule)						
4	12_	Total. Add lines 1 through 11		59.		59.		
S	13	Compensation of officers, directors, trustees, etc	_	2,400.		100.		2,300.
Ses	14	Other employee salaries and wages						
~	15	Pension plans, employee benefits						
×	16a	Legal fees (attach schedule)						
삥	b	Accounting fees (attach schedule)ATCH.1.		10,319.				10,319.
[≩.	c	Other professional fees (attach schedule)				RECE	IVED	
Ī	17	Interest				DEAL		
<u>iş</u>	18	Taxes (attach schedule) (see instructions)			2		80	
ੋਂ	19	Depreciation (attach schedule) and depletion.			-64	NOV 1	9 2019	
회	20	Occupancy			E2	1,10,1		
and Administrative Exper	21	Travel conferences, and meetings						
a	22	Printing and publications				UGUL	N. UI	
Operating	23	Other expenses (attach schedule)			TV restaur.			
a	24	Total operating and administrative expenses.						
ĕ		Add lines 13 through 23		12,719.		100.		12,619.
ŏ	25	Contributions, gifts, grants paid		9,541.			· · · · · · · · · · · · · · · · · · ·	9,541.
	26	Total expenses and disbursements Add lines 24 and 25		22,260.		100.	0.	22,160.
1	27	Subtract line 26 from line 12						
	а	Excess revenue over expenses and disbursements		-22,201.				<u> </u>
		Net investment income (if negative, enter -0-)				0.		
	С	Adjusted net income (if negative, enter -0-)						

JSA For Paperwork Reduction Act Notice, see instructions
8E1410 1 000 0687IZ 571M 11/8/2019 2:21:48 PM V 18-7.6F

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PAGE 2

Part II	Balance Sheets Attached schedules and an description column should	Attached schedules and amounts in the description column should be for end-of-year	end-of-year		of year
	Duignoe Officets	amounts only (See instructions)	(a) Book Value	(b) Book Value	(c) Fair Market Value
1	Cash - non-interest-bear	ing	597,244.	575,043.	575,043
2	Savings and temporary	cash investments			<u> </u>
3	Accounts receivable ▶				
	Less allowance for dou	btful accounts ▶			
4				-	
1		btful accounts ▶			
5					
6		officers, directors, trustees, and other		-	
"		tach schedule) (see instructions)			
1 -				-	
7		eceivable (attach schedule)			
sol l		btful accounts ▶	· · · · · · · · · · · · · · · · · · ·		
8		e			
ASSETS	•	eferred charges			
1.04		e government obligations (attach schedule)			 -
b	Investments - corporate	stock (attach schedule)			
		bonds (attach schedule)			· -
11	Investments - land, buildings and equipment basis	· · · · · · · · · · · · · · · · · · ·			
	Less accumulated deprecia (attach schedule)	ntion >			
12		loans			
		ach schedule)			
14	Land, buildings, and equipment basis	>			
	Less accumulated deprecia	ition >			
	(attach schedule) Other assets (describe ▶	1			
	•	completed by all filers - see the		-	
_		age 1, item I)	597,244.	575,043.	575,043
					I
1		ccrued expenses			
			···		<u></u> <u>'</u>
19 20 21					
20		rs, trustees, and other disqualified persons			
≕ 1		ites payable (attach schedule) L			
- 22	Other liabilities (describe	•▶)			
1_				_	
23	Total liabilities (add line	s 17 through 22)	0.	0.	
, n		v SFAS 117, check here ▶		,	
<u> </u>	and complete lines 24	through 26, and lines 30 and 31.			j
24	Unrestricted				
	Temporarily restricted .				ا ـ ـ ـ ـ ـ ـ ـ ـ ـ ـ ـ ـ ـ ـ ـ ـ ـ ـ ـ
26	Permanently restricted .				
튀	Foundations that do no	ot follow SFAS 117, check here ▶ 🗓			
	and complete lines 27				
5 27	Capital stock trust princ	cipal, or current funds		}	Ì
2 28		land, bldg , and equipment fund	"		
20		ulated income, endowment, or other funds	597,244.	575,043.	·j
5 7 I	- ·	balances (see instructions)	597,244.	575,043.	
5 31		net assets/fund balances (see	,		1
		,	597,244.	575,043.	,
		nges in Net Assets or Fund Balar			<u></u>
			_	ust agree with	
		alances at beginning of year - Part II			597,244.
		d on prior year's return)		· ·	
		line 27a,			-22,201
		ded in line 2 (itemize) ▶			
				4	575,043
	reases not included in			5	
6 Tota	l net assets or fund b	alances at end of year (line 4 minus	ine 5) - Part II, column (b)	, line 30 6	575,043.
					Form 990-PF (2018)

(a) List and de	s and Losses for Tax on Investigation in the scribe the kind(s) of property sold (for exercise warehouse, or common stock, 200 stock).	example, real estate,	(b) How acquired P - Purchase D - Donation	(c) Date acquired (mo , day, yr)	(d) Date sold (mo , day, yr)
1 a					
<u>b</u>	<u> </u>				
C					
d					
<u>e</u>		(m) Coat or other basis		(12) Cara as (12	
(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale		(h) Gain or (lo ((e) plus (f) minu	
a					
b					
					
d			_		
Complete only for assets s	showing gain in column (h) and owned	by the foundation on 12/31/69	- 0	Carra (Cal. (b) as	
(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	col	Gains (Col. (h) ga (k), but not less t Losses (from co	han -0-) or
b			<u> </u>		_
c					
d					
e					
2 Capital gain net income	or (not conital lace)	ain, also enter in Part I, line 7	_		
. •	, if (ic	oss), enter -0- in Part I, line 7	2	_	
If gain, also enter in F	pain or (loss) as defined in sections Part I, line 8, column (c) See insi	tructions If (loss), enter -0- in $\}$	3		
	Under Section 4940(e) for Rec		ncome		
	the section 4942 tax on the distrib n't qualify under section 4940(e)		ase perio	d?	Yes X No
1 Enter the appropriate a	mount in each column for each yea	ar, see the instructions before mak	ng any er	ntries.	
(a)	(b)	(c)		(d) Distribution ra	atro
Base penod years Calendar year (or tax year beginning in)	Adjusted qualifying distributions	Net value of nonchantable-use assets		(col (b) divided by	
2017	15,670.	594,678.			0.026350
2016	33,370.	619,968.			0.053825
2015	28,926.	626,117.	-		0.046199
2014	4,615.	1,796.			2.569599
2013			 		
			,		2.695973
	(d)		2		2.033313
_	io for the 5-year base period - divid foundation has been in existence		3		0.673993
4 Enter the net value of n	oncharitable-use assets for 2018 fi	rom Part X, line 5	4		581,673.
5 Multiply line 4 by line 3			5		392,044.
6 Enter 1% of net investm	nent income (1% of Part I, line 27b)		6		
7 Add lines 5 and 6			7		392,044.
8 Enter qualifying distribu If line 8 is equal to or g Part VI instructions	tions from Part XII, line 4 greater than line 7, check the box	ın Part VI, line 1b, and complete	8 that part	using a 1% ta	22,160. x rate See the
T GIT TI HISTI DOLIONS					

Pa	Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 - se	e inst	ruc	tions	s)	
1a	Exempt operating foundations described in section 4940(d)(2), check here and enter "N/A" on line 1					ı
	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				0.	
	here and enter 1% of Part I, line 27b				ţ	
С	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-)					
3	Add lines 1 and 2				0.	
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only, others, enter -0-)					
5	Tax based on investment income. Subtract line 4 from line 3 If zero or less, enter -0				0.	
6	Credits/Payments				- 5	
а	2018 estimated tax payments and 2017 overpayment credited to 2018 6a				1	
b	Exempt foreign organizations - tax withheld at source				[
С	Tax paid with application for extension of time to file (Form 8868).				·	
d	Backup withholding erroneously withheld 6d 6d					
7	Total credits and payments Add lines 6a through 6d	_				
8	Enter any penalty for underpayment of estimated tax. Check here					
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed	-			0.	
10	Overpayment If line 7 is more than the total of lines 5 and 8, enter the amount overpaid					
11	Enter the amount of line 10 to be Credited to 2019 estimated tax ▶ Refunded ▶ 11					
Par	t VII-A Statements Regarding Activities					
1a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did i	t T	Τ,	Yes	No	
	participate or intervene in any political campaign?				Х	
ь	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes? See the			·		
	instructions for the definition	1b	,		X	
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials	ş	T		1	ĺ
	published or distributed by the foundation in connection with the activities					ĺ
С	Did the foundation file Form 1120-POL for this year?	10	;	1	X	
	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year				$\neg \neg$	ŀ
	(1) On the foundation ▶ \$ (2) On foundation managers ▶ \$				-	i
е	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed					l
	on foundation managers \$		_			į
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?	2			X	
	If "Yes," attach a detailed description of the activities				$\neg \neg$	ŀ
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles	s			j	Į.
	of incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes	3	_		X	
4 a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	4a			Х	•
	If "Yes," has it filed a tax return on Form 990-T for this year?	46	,			
	Was there a liquidation, termination, dissolution, or substantial contraction during the year?	5		T	Х	
	If "Yes," attach the statement required by General Instruction T		\top			
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either				}	į
-	By language in the governing instrument, or					ļ
	By state legislation that effectively amends the governing instrument so that no mandatory directions that	t	_ _			l
	conflict with the state law remain in the governing instrument?	6	- 1	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			х		
	Enter the states to which the foundation reports or with which it is registered. See instructions.		\top			į
Ju	MI,				į	
h	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General	_]	į
	(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	. —	+	- 1		
,	4942(j)(5) for calendar year 2018 or the tax year beginning in 2018? See the instructions for Part XIV. If "Yes,"	- 1	~			,
		- 1		.	х	1
	complete Part XIV	- 1	+		<u> </u>	•
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their				х	
	names and addresses			DE (

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Par	t VII-A Statements Regarding Activities (continued)			
			Yes	No
11	At, any time during the year, did the foundation, directly or indirectly, own a controlled entity within the			
	meaning of section 512(b)(13)? If "Yes," attach schedule See instructions	11		Х
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified			
	person had advisory privileges? If "Yes," attach statement. See instructions	12		Х
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	Х	
	Website address N/A			
14	The books are in care of ▶ DAVID P. NEVEUX Telephone no ▶ 313-881	-211	0	
•	Located at ▶19818 MACK AVENUE GROSSE POINTE WOODS, MI ZIP+4 ▶ 48236			
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - check here		▶	. X
	and enter the amount of tax-exempt interest received or accrued during the year			
16	At any time during calendar year 2018, did the foundation have an interest in or a signature or other authorit	/	Yes	No
	over a bank, securities, or other financial account in a foreign country?	16		Х
	See the instructions for exceptions and filing requirements for FinCEN Form 114 If "Yes," enter the name of	f	U	
	the foreign country ▶			
Par	t 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? Yes X No			
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a			
	disqualified person? Yes X No			
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? Yes X No			
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?		1	
	(5) Transfer any income or assets to a disqualified person (or make any of either available for			
	the benefit or use of a disqualified person)?			
	(6) Agree to pay money or property to a government official? (Exception. Check "No" if the			
	foundation agreed to make a grant to or to employ the official for a period after			
	termination of government service, if terminating within 90 days)			·
b	If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations			
	section 53 4941(d)-3 or in a current notice regarding disaster assistance? See instructions	1b		Х
	Organizations relying on a current notice regarding disaster assistance, check here			
С	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?	1c		Х
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private			į
	operating foundation defined in section 4942(j)(3) or 4942(j)(5))			
а	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? Yes X No			
	If "Yes," list the years			
b	Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2)			
	(relating to incorrect 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)	2b	ļ	
С	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?	1		
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)	3b		<u> </u>
	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a	ļ	Х
b	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its		 	
	charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2018?	4b	<u> </u>	Х

	. ,				•			
Form	990-PF (2018) JANUSZ A. SU	JBCZYNSKI, M.D.	, F.A.C.S.		38-3	3517725	F	age 6
Pa	rt VII-B Statements Regarding Activiti	es for Which Form	4720 May Be Reg	uired (con	tinued)			
5a	During the year, did the foundation pay or incur any					1	Yes	No
	(1) Carry on propaganda, or otherwise attempt to in		on 4945(e))?	. Yes	X No		,	' }
	(2) Influence the outcome of any specific public directly or indirectly, any voter registration drive?	election (see section	4955), or to carry or	n,	X No			
	(3) Provide a grant to an individual for travel, study,				X No			1
	(4) Provide a grant to an organization other than section 4945(d)(4)(A)? See instructions	n a charitable, etc., org	ganization described i	n	X No			
	(5) Provide for any purpose other than religious, purposes, or for the prevention of cruelty to child	, charitable, scientific,	literary, or educations		X No			
b	If any answer is "Yes" to 5a(1)-(5), did any of			• 🗀		i i		1
	Regulations section 53 4945 or in a current notice re							
	Organizations relying on a current notice regarding of	•						
С	If the answer is "Yes" to question 5a(4), does							
•	because it maintained expenditure responsibility for t				☐ No			
	If "Yes." attach the statement required by Regulation	=			_			
6a	Did the foundation, during the year, receive any	• •	rectly, to pay premiur	ns				1
	on a personal benefit contract?			, Yes	X No	·		
b	Did the foundation, during the year, pay premiums,					6b	L	Х
	If "Yes" to 6b, file Form 8870				_			1
7a	At any time during the tax year, was the foundation	a party to a prohibited ta	x shelter transaction?.	. Yes	X No	·		نــــا
b	If "Yes," did the foundation receive any proceeds or	have any net income att	ributable to the transacti	ion ⁹		7b		Х
8	Is the foundation subject to the section 4960 tax on							1
	remuneration or excess parachute payment(s) during	the year?	<u> </u>	. Yes	X No			
Par	Information About Officers, Direct and Contractors List all officers, directors, trustees, and found					oloyees,		
		(b) Title, and average	(c) Compensation	(d) Contribu	tions to	(e) Expens	se accor	unt
	(a) Name and address	hours per week devoted to position	(If not paid, enter -0-)	employee ben and deferred co	efit plans mpensation	other al		
ATC	H 2	_	2,400.		0.			0.
		_						
		_						
		_			1			
2	Compensation of five highest-paid employe "NONE."	es (other than thos	se included on line	e 1 - see	instructi	ons). If n	one,	enter
(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) Contribute employee plans and compens	benefit eferred	(e) Expension	se accor	unt, es

	directly or indirectly, any voter registration drive?				∐ No			1			
	(3) Provide a grant to an individual for travel, study, or o	other similar purposes?		. Yes	∐ No			Ī			
	(4) Provide a grant to an organization other than a	charitable, etc., org	janization described ii	n	_						
	section 4945(d)(4)(A)? See instructions										
	(5) Provide for any purpose other than religious, charitable, scientific, literary, or educational										
	purposes, or for the prevention of cruelty to children				No			j			
b	purposes, of for the prevention of decay to similar of distances of di										
_	Regulations section 53 4945 or in a current notice regain					5b					
	Organizations relying on a current notice regarding disa	=				7					
						7		1			
С	If the answer is "Yes" to question 5a(4), does the				No			1			
	because it maintained expenditure responsibility for the	*		Yes] ио			ļ			
	If "Yes," attach the statement required by Regulations s							- 1			
6a	Did the foundation, during the year, receive any ful	· · · · · · · · · · · · · · · · · · ·			ภ			. }			
	on a personal benefit contract?			. — —	∐ No			ليب			
b	Did the foundation, during the year, pay premiums, dire	ectly or indirectly, on a	personal benefit contra	ct?		6b		<u>X</u>			
	If "Yes" to 6b, file Form 8870				_			1			
7a	At any time during the tax year, was the foundation a p	arty to a prohibited tax	x shelter transaction?	Yes?	∐ No						
b	If "Yes," did the foundation receive any proceeds or ha	ve any net income attr	butable to the transacti	on?		7b		X			
8	Is the foundation subject to the section 4960 tax on pa	yment(s) of more tha	n \$1,000,000 in		_			1			
	remuneration or excess parachute payment(s) during the	year [?]		. Yes	No		.	}			
Pa	Information About Officers, Directo	rs, Trustees, Fou	indation Managers	s, Highly Paid	Emplo	yees,					
	and Contractors										
	List all officers, directors, trustees, and foundat	(b) Title, and average	(c) Compensation	(d) Contributions to							
	(a) Name and address	hours per week devoted to position	(If not paid, enter -0-)	employee benefit pla and deferred compens	ins '	e) Expens) other all	se accou owance	int, s			
		devoted to position	enter -o-)	and defened compens	ation						
ATC	н 2		2,400.		0.			Ο.			
			2,100.		- -						
					Ì						
					-+						
	·										
2	Compensation of five highest-paid employees	(other than thos	e included on line	e 1 - see instr	uction	s). If n	one, e	enter			
	"NONE."		-	(d) Contributions	to I						
(a)	Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week	(c) Compensation	employee benefi	it	(e) Expens	e accou	ınt,			
,,,	Traine and address of each employee paid more than 450,000	devoted to position	(c) componential	plans and deferre compensation	.a	other all	owance	S			
	· · · · · · · · · · · · · · · · · · ·			····							
	NONE										
							_				
Tota	I number of other employees paid over \$50,000				—						
						Form 99 ()-PF	(2018)			

		Page 7
ploye	es,	-

Pa	rt VIII	Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employ and Contractors (continued)	/ees,
3	Five I	ighest-paid independent contractors for professional services. 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		
ota	al numbe	er of others receiving over \$50,000 for professional services	
	rt IX-A		
Lı	st the four	ndation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of s and other beneficianes served, conferences convened, research papers produced, etc.	Expenses
1	ST JC	HN HOSPITAL	
•			
-	_		2,385
2	NAPLE	S COMMUNITY	
_			2,385
3 _	NEURC	SURGERY RESEARCH	
-			4,771
			4,771
4 .			
-	•		
Pai	rt IX-B	Summary of Program-Related Investments (see instructions)	
		e two largest program-related investments made by the foundation during the tax year on lines 1 and 2	Amount
1	NONE		
_			
2			
	ll other or	ogram-related investments. See instructions	
	ii otnei pri	grammetated investments. See instructions	
3 _	NONE		
-	1,01,11		
Tota	al. Add	ines 1 through 3	
			5 000 DE (004

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purposes

see instructions.)

e Reduction claimed for blockage or other factors reported on lines 1a and

2a Tax on investment income for 2018 from Part VI, line 5 2a_ b Income tax for 2018 (This does not include the tax from Part VI). . 2b

Part X

2

Part XI

6

38-3517725 Page 8 Minimum Investment Return (All domestic foundations must complete this part. Foreign foundations, Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., 1a 590,531. 1b 590,531. 590,531. 3 Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see 8,858. 581,673. Net value of noncharitable-use assets. Subtract line 4 from line 3 Enter here and on Part V, line 4 29,084. 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) 29,084. 29,084. 3 Distributable amount before adjustments Subtract line 2c from line 1. 29,084. 6 Deduction from distributable amount (see instructions)............ Distributable amount as adjusted Subtract line 6 from line 5 Enter here and on Part XIII, 29,084. 22,160. 1a 1b 2

Part XII Qualifying Distributions (see instructions) Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes a Expenses, contributions, gifts, etc - total from Part I, column (d), line 26..., Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., Amounts set aside for specific charitable projects that satisfy the 3a 3b 22,160. 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 income 22,160.

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

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

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c Excess from 2016 . . . d Excess from 2017 . . . e Excess from 2018 . . .

Pa	rt XIV Private Op	erating Foundations	(see instructions a	nd Part VII-A, question	on 9)	NOT APPLICABLE
	If the foundation has					
	foundation, and the rulin	•			-	
b	Check box to indicate v					j)(3) or 4942(j)(5)
	Enter the lesser of the ad-	Nax year		Prior 3 years		<u> </u>
	justed net income from Part	(a) 2Q18	(b) 2017	(c) 2016	(d) 2015	(e) Total
	I or the minimum investment	(4)	(5) 25 11	(4) 20 10	(4) 20 10	
	return from Part X for each					
	year listed					
	85% of line 2a					
С	Qualifying distributions from Part XII, line 4 for each year listed					
d	Amounts included in line 2c not	- -		 		
_	used directly for active conduct			. ,		
	of exempt activities					
е	Qualifying distributions made directly for active conduct of					
	exempt activities Subtract line					
3	2d from line 2c			\		
•	Complete 3a, b, or c for the alternative test relied upon					
а	"Assets" alternative test - enter					
	(1) Value of all assets					
	(2) Value of assets qualifying under section					
	4942(j)(3)(B)(i)					
b	"Endowment" alternative test-			J		
	enter 2/3 of minimum invest- ment return shown in Part X,	/				
	line 6 for each year listed					
С	"Support" alternative test - enter					
	(1) Total support other than gross investment income					
	(interest, dividends, rents,			}		
	payments on secunties loans (section 512(a)(5))				`	
	or royalties)					
	(2) Support from general public and 5 or more					
	exempt organizations as]		
	provided in section 4942 (jX3)(B)(iii)					
	(3) Largest amount of sup-					
	port from an exempt organization					<u> </u>
	(4) Gross investment income.					L
Pa	rt XV Supplemen	itary Information (Complete this part	only if the founda	tion had \$5,000 o	r more in assets at
	<u></u>	uring the year - see				
	Information Regarding List any managers of			e than 2% of the tota	L contributions recei	ved by the foundation
а	before the close of any					ved by the loundation
	N/A	tax you. (but only if the	io, navo communico i	(0.0	, a 555tion 557 (4)(2)./	
	<u>_</u>	the foundation who	nun 100/ or more o	f the steel of a corn	protion (or on equal)	y large portion of the
D	List any managers of ownership of a partner					y large portion of the
	ownership of a partitor	or other entity, or	Willion the loandation	rilas a rom or greater	interest.	
	N/A					
2	Information Regarding	Contribution Grant	Gift Loan Scholarsh	in etc Programs:		
~		-		· -		
	Check here ► X if the unsolicited requests for					
	complete items 2a, b, o			into, etc., to individual	3 Of Organizations u	idei ottiei conditions,
	The name, address, ar			ne person to whom ann	lications should be add	1ressed
a	The hame, address, an	id telephone number	or email address or tr	ie person to whom app	ilications should be add	163364
_ <u>_</u>	The form in which appl	cations should be sub	omitted and information	on and materials they s	should include	
-					•	
_						
С	Any submission deadling	nes				
	Any sontrations as to	mulations of according		onbigal area abantal	blo fields liveds -f	matitutions == =#*:
	Any restrictions or lif factors	miations on awards,	such as by geogra	apriicai areas, charita	vie neius, kinas of	msulutions, or other

Page **11**

3 Grants and Contributions Paid Dur	ing the Vear or Ann	royed for	Future Payment	
5 Grants and Contributions Paid Dur	If recipient is an individual,	Foundation	ruture rayment	
3 Grants and Contributions Paid Dur Recipient Name and address (home or business)	show any relationship to any foundation manager	status of	Purpose of grant or contribution	Amount
Name and address (home or business)	or substantial contributor	recipient		
a Paid during the year				
				,
				1
				1
Takal	l			
Total	<u> </u>	<u></u>		
b Approved for future payment				
		·		
Total			▶ <u>3</u> b	

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725	
725	Page 12
(e) elated or exe unction inco See instructio	me
	1

	59.
mportantly ee instructio	
-	

Part XVI-A · Analysis of Income-Prod	ucing Act	ivities				
Enter gross amounts unless otherwise indicated	Unrelated business income		Excluded by section 512, 513, or 514		(e)	
1 Program service revenue	(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	Related or exempt function income (See instructions)	
a					(See instructions)	
			 			
С						
d			1			
e						
f						
g Fees and contracts from government agencies		*			***************************************	
2 Membership dues and assessments						
3 Interest on savings and temporary cash investments -			14	59.		
4 Dividends and interest from securities			-			
5 Net rental income or (loss) from real estate		,			1	
a Debt-financed property						
b Not debt-financed property	1	[
6 Net rental income or (loss) from personal property					***************************************	
7 Other investment income		T				
8 Gain or (loss) from sales of assets other than inventory		***************************************				
9 Net income or (loss) from special events · · ·	 					
10 Gross profit or (loss) from sales of inventory						
11 Other revenue a						
b				***************************************	•••••	
C					<u> </u>	
d						
e			 	59.		
12 Subtotal Add columns (b), (d), and (e)		l <u></u>	<u> </u>		59.	
13 Total Add line 12, columns (b), (d), and (e) (See worksheet in line 13 instructions to verify calci				13		
Part XVI-B Relationship of Activitie		complishment of E	vomnt Bur	2000		
Explain below how each activit accomplishment of the foundation	-			funds for such purposes	s) (See instructions)	
	····					

JSA 8E1492 1 000

· ait		Exempt Organ		nsiers to and Ti	ansactiv	ons and	(Clations)	ips with	INOIIC	Hall	abic	
1 D	id the	organization direct		engage in any of the	following	with any	other organi	zation des	cribed		Yes	No
ın	sec	tion 501(c) (other	than section	501(c)(3) organiza	tions) or	in section	n 527, relat	ing to po	olitical			
	-	cations?										
		ers from the reportin	-							-	-	
	•	sh										<u>X</u>
•	•	er assets								1a(2)		
		ransactions es of assets to a no	ncharitable even	not organization						^ 15/1\		Х
		chases of assets fro								_		<u> </u>
-		ntal of facilities, equi		_					ı			X
		mbursement arrange	•									Х
(5) Loa	ins or loan guarantee	es						[1b(5)		Х
		formance of service								1b(6)		_X_
		g of facilities, equipm								1c		X
		answer to any of th										
		of the goods, other										
(a) Line		n any transaction or (b) Amount involved	T	oncharitable exempt organ		·	ption of transfers					
(a) Line	110	(b) Amount involved	N/A	menantable exempt organ	iizatioii	N/A	puon or transiers	, transactions	, and snan	ily alla		ııs
······		***************************************					*******************************	·····				
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·····						**********************						
		***************************************									·	
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·····				***************************************		:						
		foundation directly of								_		1
		ed in section 501(c)	•	tion 501(c)(3)) or in	section 52	277			· · · · L	Ye	s X	No
b If		" complete the follow		#\ T								
		(a) Name of organization	<u> </u>	(b) Type of org	anization		(c)	Description o	relations	iib		

	Under			this return, including according bayer) is based on all informa				he best of my	knowledge	and b	elief, it	is true
Sign	Some Ci	, Grid Dictaration of		payer) is based on all illionna	Million of William P	reparer rias arry	Kilowieuge	May	the IRS	decues	thie	retum
Here	X	+ faved		1 /1/15/	<u> </u>	TRUSTE	E	with				elow?
11616	Sign	ature of officer or trustee		Date /		Title		See	instructions	<u> L</u>	Yes	X No
.]	······ ₁	7					D-4-					
Paid		Print/Type preparer's nai		Preparer's signature	1200	1/	Date 11/11/20	Check L		ΠN 10123	2600	2
Prèpa		MICHAEL L. COI	O USA, LLP	- June	سر سر				13-53		3692:	۷
Use O	L			BEAVER SUITE	600		Fi	m's EIN	13-33	0133	-	
Jac U	y		OY, MI	PHANER SOILE	300	4808	4	none no 2	48-36	2-21	.00	
			,				- <u> Pi</u>	IOIIE IIU			-PF (2018)

PART I - ACCOUNTING FEES

FORM 990PF,

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CHARITABLE	10,319.	10,319.
ADJUSTED NET INCOME		
NET INVESTMENT INCOME		
REVENUE AND EXPENSES PER BOOKS	10,319.	10,319.
		TOTALS
DESCRIPTION	ACCOUNTING FEES	

.				
ATTACHMENT 2	EXPENSE ACCT AND OTHER ALLOWANCES			0.
ATTACI	CONTRIBUTIONS TO EMPLOYEE BENEFIT PLANS			0.
	COMPENSATION	2,400.	.0	2,400.
OFFICERS, DIRECTORS, AND TRUSTEES	TITLE AND AVERAGE HOURS PER WEEK DEVOTED TO POSITION	TRUSTEE 1.00	TRUSTEE . 25	GRAND TOTALS
FORM 990PF, PART VIII - LIST OF OFFICERS, DIRECTORS, AND TRUSTEES	NAME AND ADDRESS	DAVID P. NEVEUX 19818 MACK AVENUE GROSSE POINTE WOODS, MI 48236	NORMAN A. BOLZ 21534 PRESTWICK AVE HARPER WOODS, MI 48225	

ATTACHMENT 2 PAGE 16