**Return of Private Foundation** 

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

Department of the Treasury

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

OMB No. 1545-0052

Internal Revenue Service ▶ Go to www.irs.gov/Form990PF for Instructions and the latest information.

Open to Public Inspection . 2018, and ending

		dar year 2018 or tax year beginning Octobe	r 1 , 201	B, and	ending	September 30	, 20	19_
	of four					r Identification numbe	r	
		Harvey and Aileen Kleiman Family Foundation				38-3320168		
Num	ber and	street (or P O box number if mall is not delivered to street address)	Room	1/surte	<b>B</b> Telephon	e number (see instructi	ons)	
		24201 Bingham Court	Ĭ			248-647-6888		
City	or town,	state or province, country, and ZIP or foreign postal code	<del></del>		C If exempt	ion application is pend	ing, check he	re ▶ □
		Bingham Farms, MI 48025-3420						т. Ц
G	Check		of a former public	charity	D 1. Foreign	organizations, check	here	►□
		☐ Final return ☐ Amended return	•	•				· · 🗀
		Address change Name chan	ige			n organizations meeting here and attach compu		it, · ▶□
Н	Check	type of organization:  Section 501(c)(3) exempt pr		nu	E If private	foundation status was	terminated un	nder
		n 4947(a)(1) nonexempt charitable trust   Other tax		dation	section 5	07(b)(1)(A), check here	• •	. ▶□
		arket value of all assets at   J Accounting method:			- KAL. 5			
	end of	year (from Part II, col. (c),				ndation is in a 60-mont ction 507(b)(1)(B), checl		▶□
	line 16		on cash basis.)			,		
Pa	art I	Analysis of Revenue and Expenses (The total of					(d) Disburse	ments
		amounts in columns (b), (c), and (d) may not necessarily equal	(a) Revenue and expenses per		t investment ncome	(c) Adjusted net	for charita	able
		the amounts in column (a) (see instructions).)	books	, "	ilcome	income	(cash basis	
	1	Contributions, gifts, grants, etc., received (attach schedule)	103,204			** **		
	2	Check ► ☐ if the foundation is not required to attach Sch. B	100,20			-		
	3	Interest on savings and temporary cash investments						
	4	Dividends and interest from securities	14,951		14,951	14,951		-
	5a	Gross rents			,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		·	
	b	Net rental income or (loss)						- ==-
ā	6a	Net gain or (loss) from sale of assets not on line 10	12,498				<del></del>	
Revenue	b	Gross sales price for all assets on line 6a		•				
Š	7	Capital gain net income (from Part IV, line 2)			12,498			==
æ	8	Net short-term capital gain			10,000			
	9	Income modifications					<i>-</i> -	المراجعة
	10a	Gross sales less returns and allowances				<del></del>	7.1	
	b	Less: Cost of goods sold				new Ben Charles (1975)	. =	
	С	Gross profit or (loss) (attach schedule)			3			
	11	Other income (attach schedule)			· · ·			-
	12	Total. Add lines 1 through 11	130,653	3	27,449	14,951	erreta a en	, =
<u>_</u>	13	Compensation of officers, directors, trustees, etc.						
Expenses	14	Other employee salaries and wages						
e	15	Pension plans, employee benefits				RECEIVE	b	
×	16a	Legal fees (attach schedule)				TEOLIVE		
e H	b	Accounting fees (attach schedule)			4	DEC 0 0 004	8	
Š	С	Other professional fees (attach schedule) ,			8	DEC OB ZUIS		
ΣĒ	17	Interest					95 95	
	18	Taxes (attach schedule) (see instructions)				OGDEN U	T	
2:2	19	Depreciation (attach schedule) and depletion			\	- /2-1-		
Ę	20	Occupancy		<u> </u>				
קל	21	Travel, conferences, and meetings		<u> </u>				
ᆲ	22	Printing and publications		<u> </u>			ļ	
- වූ	23	Other expenses (attach schedule) Sundry.	4:	8		ļ		48
ati:	24	Total operating and administrative expenses.	110			ļ	l	Na
Operating and Administrative		Add lines 13 through 23	48			<u> </u>		48
<b>6</b>	25	Contributions, gifts, grants paid	52,65			· · · · · · · · · · · · · · · · · · ·	<b>.</b>	<u>52,650</u>
_	26	Total expenses and disbursements. Add lines 24 and 25	52,69	8			<u> </u>	52,698
;	27	Subtract line 26 from line 12:						
	а	Excess of revenue over expenses and disbursements	<u>7</u> 7,95	5				و د د
	b	Net investment income (if negative, enter -0-)		L	27,449		Value of Line	المرسوبات
_	c	Adjusted net income (if negative, enter -0-)				14,95	1 000 B	

100

Par	t II	Balance Sheets Attached schedules and amounts in the description column	Beginning of year	End o	f year
		should be for end-of-year amounts only. (See instructions.)	(a) Book Value	(b) Book Value	(c) Fair Market Value
	1	Cash—non-interest-bearing	7,924	10,238	10,238
1	2	Savings and temporary cash investments			
	3	Accounts receivable ▶			
		Less: allowance for doubtful accounts ▶			
-	4	Pledges receivable ▶			
1		Pledges receivable ►  Less: allowance for doubtful accounts ►			
i	5	Grants receivable			
	6	Receivables due from officers, directors, trustees, and other disqualified persons (attach schedule) (see instructions)			
ŀ	7	Other notes and loans receivable (attach schedule) ▶		,	
- 1		Less: allowance for doubtful accounts ▶			
2	8	Inventories for sale or use			
Assets	9	Prepaid expenses and deferred charges			-
&	10a	Investments—U.S. and state government obligations (attach schedule)			
l	b	Investments—corporate stock (attach schedule)	338,141	412,888	431,137
	С	Investments—corporate bonds (attach schedule)			
	11	Investments—land, buildings, and equipment: basis ▶		t value and the second of	
		Less: accumulated depreciation (attach schedule) ▶			
1	12	Investments—mortgage loans			
	13	Investments—other (attach schedule)	33,000	33,000	33,000
	14	Land, buildings, and equipment: basis	00,000	00/000	0.0/0.0
	•	Less: accumulated depreciation (attach schedule) ▶			
- 1	15	Other assets (describe ▶ )			
	16	Total assets (to be completed by all filers—see the			
		instructions. Also, see page 1, item l)	379.065	456,126	474,375
_	17	Accounts payable and accrued expenses	373,003	430,120	474,57
	18	Grants payable			and Seen Seen
es.	19	Deferred revenue			
Ξ.	20	Loans from officers, directors, trustees, and other disqualified persons			- مىيو ت
Liabilities	21	Mortgages and other notes payable (attach schedule)		<del></del>	
۱	22		<del></del>		-
	23	Other liabilities (describe ►)  Total liabilities (add lines 17 through 22)			
		Foundations that follow SFAS 117, check here	ļ		
Balances		and complete lines 24 through 26, and lines 30 and 31.			
2	24	Unrestricted			
윤	25	Temporarily restricted			15 · · · · · · · · · · · · · · · · · · ·
	26	Permanently restricted	-		1 P
2		Foundations that do not follow SFAS 117, check here ▶ □			
Net Assets or Fun		and complete lines 27 through 31.			
5	27	Capital stock, trust principal, or current funds			
B	28	Paid-in or capital surplus, or land, bldg., and equipment fund			* * * * * * * * * * * * * * * * * * *
Se	29	Retained earnings, accumulated income, endowment, or other funds	379,065	456,126	
B	- (	Total net assets or fund balances (see instructions)			70 <del></del>
t	310	Total liabilities and net assets/fund balances (see	379,065	430,120	
Z	3'3		379,065	456.126	
Pa	rt III	Analysis of Changes in Net Assets or Fund Balances		400/120	
1	Tota	al net assets or fund balances at beginning of year-Part II, colu	ımn (a), line 30 (mus	st agree with	
		-of-year figure reported on prior year's return)			379,06
2	Ente	er amount from Part I, line 27a		2	77,95
3	Oth	er increases not included in line 2 (itemize) ▶		3	
4		I lines 1, 2, and 3		4_	457,02
5	Dec	reases not included in line 2 (itemize) Federal Exci	se Tax	5	89
6	Tota	al net assets or fund balances at end of year (line 4 minus line 5)-	-Part II, column (b), li	ne 30 <b>6</b>	456,12
					Form <b>990-PF</b> (2018

Part	Capital Gains and	a Losses for lax on investing	nent In	come				
		nd(s) of property sold (for example, real e use, or common stock, 200 shs MLC Co			(b) How acquired P-Purchase D-Donation		ate acquired o, day, yr)	(d) Date sold (mo , day, yr)
1a	200 Shares - Sur	Communities			D	1.	2-31-10	12-2018
b	1000 Shares - Cen	tury Link Inc			Р	0	8-2012	12-2018
C	200 Shares - Cin	cinnati Financial			Р	0	3-2012	06-2019
d	200 Shares - Col	gate	-		D	1	1-2013	06-2019
е								
	(e) Gross sales price	(f) Depreciation allowed (or allowable)			other basis nse of sale			or (loss) ) minus (g))
a	20,772				6,740			14,032
_ <u>b</u> _	18,841				35,901			-17,060
C	21,027				7,022			14,005
<u>d</u>	14,773			<del></del>	13,252		· · · · · · · · · · · · · · · · · · ·	1,521
е	<u> </u>							<del></del>
	Complete only for assets sh	owing gain in column (h) and owned	by the fo	oundation	on 12/31/69.			(h) gain minus
	(i) FMV as of 12/31/69	(j) Adjusted basis as of 12/31/69			s of col. (i) . (j), if any			less than -0-) or om col (h))
а								
b								
С								
ď			<u> </u>					
е						<u> </u>		
2	Capital gain net income of				rt I, line 7 }	2		12,498
3	If gain, also enter in Par	tin or (loss) as defined in sections t I, line 8, column (c). See instru	uctions.	If (loss)				
Part		der Section 4940(e) for Red				3		
f "Yes	s," the foundation doesn't	e section 4942 tax on the distribition and section 4940(e). D	o not co	mplete t	his part.			☐ Yes ☐ No
1		nount in each column for each ye	ear; see	the instri	uctions before m	aking	any entries.	(-1)
Cale	(a) Base penod years endar year (or tax year beginning i	n) Adjusted qualifying distribution	ns I	Net value o	(c) of nonchantable-use a	ssets	(col (b) (	(d) tribution ratio divided by col. (c))
	2017		54,817		31	88,257	<del></del>	.141187
	2016		57,727		3:	75,036		.153924
	2015		55,840		3	<u>41,158</u>		.163677
	2014		51,017		3:	21,912		.158481
	2013	<u>,                                    </u>	49,900		3	03,580		.164371
2	Total of line 1, column (c	1)					2	.781640
3	Average distribution ratio	o for the 5-year base period-d			•	-		
	the number of years the	foundation has been in existenc	e if less	than 5 y	ears	•	3	.156328
4	Enter the net value of no	ncharitable-use assets for 2018	from Pa	art X, line	5		4	430,696
5	Multiply line 4 by line 3						5	67,330
6	Enter 1% of net investm	ent income (1% of Part I, line 27	'b) .				6	274
7	Add lines 5 and 6						7	67,604
8	Enter qualifying distribut	tions from Part XII, line 4					8	52,698
		eater than line 7, check the box				that p	part using a	1% tax rate. See the

Part \		nstructi	ons)
1a	Exempt operating foundations described in section 4940(d)(2), check here ▶ ☐ and enter "N/A" on line 1.		
	Date of ruling or determination letter: (attach copy of letter if necessary—see instructions)		
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check	- · · · · · · · · · · · · · · · · · · ·	
_	here Dand enter 1% of Part I, line 27b		
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-)	5/	49
	Add lines 1 and 2	54	49
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	54	49
6	Credits/Payments: 2018 estimated tax payments and 2017 overpayment credited to 2018   6a		
a b	2018 estimated tax payments and 2017 overpayment credited to 2018   6a   Exempt foreign organizations—tax withheld at source   6b		4
C	Tax paid with application for extension of time to file (Form 8868) . 6c		
d	Backup withholding erroneously withheld 6d		
7	Total credits and payments. Add lines 6a through 6d		
8	Enter any <b>penalty</b> for underpayment of estimated tax. Check here  if Form 2220 is attached 8		<del></del>
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed ▶ 9	5	49
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid > 10		
11	Enter the amount of line 10 to be: Credited to 2019 estimated tax ▶ Refunded ▶ 11		
Part '		10-22-m	
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?	1a	s No
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes? See the instructions for the definition	1b	1
	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.		
C	Did the foundation file Form 1120-POL for this year?	1c	7
d	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year:		
	(1) On the foundation. ▶ \$ (2) On foundation managers. ▶ \$		
е	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed		
	on foundation managers. ▶ \$		
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.	2	1
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.	3	1
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	4a	1
b	If "Yes," has it filed a tax return on Form 990-T for this year?	4b	
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?	5	
_	If "Yes," attach the statement required by General Instruction T.		
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?	6	/
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		/
8a	Enter the states to which the foundation reports or with which it is registered. See instructions.		
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	8b •	/
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.	9	1
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses	10	/
	F	orm <b>990</b> -	PF (2018)

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	11		1
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified	1,,		,
13	person had advisory privileges? If "Yes," attach statement. See instructions	12	<del>  </del>	\ <u>'</u>
13	Website address ▶	13	<u>                                     </u>	Ь
14		18-647-	6888	
		8025-3	3420	
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041—check here			<b>▶</b> □
40	and enter the amount of tax-exempt interest received or accrued during the year		T Van	No
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?.	16	Yes	No /
	See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes," enter the name of		270 77	
	the foreign country ▶	•	, ,,	, j
Part	VII-B Statements Regarding Activities for Which Form 4720 May Be Required	V		
4	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.	;* <u> </u>	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   No			
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a			· .
	disqualified person?			
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?			
	<ul><li>(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? ☐ Yes ✓ No</li><li>(5) Transfer any income or assets to a disqualified person (or make any of either available for</li></ul>	: 2		
	the benefit or use of a disqualified person)?	4		
	(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			٠
	termination of government service, if terminating within 90 days.)			
D	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		
	Organizations relying on a current notice regarding disaster assistance, check here		17 1 14 4 1	
C	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that			1
	were not corrected before the first day of the tax year beginning in 2018?	1c		✓
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)):			i)
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?			1
ь	Are there any years listed in 2a for which the foundation is <b>not</b> 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			j
	all years listed, answer "No" and attach statement—see instructions.)	2b		
C	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here.	:		
За	▶ 20 , 20 , 20 , 20 Did the foundation hold more than a 2% direct or indirect interest in any business enterprise			
-	at any time during the year?	ā.		
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		
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a	<del></del>	1
b	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its		- <del>-</del>	4
	charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2018?	4b		1

Pan	VII-B Statements Regarding Activities	tor w	nich Form	4720 F	way Be R	equire	d (contii	nued)		
5a	During the year, did the foundation pay or incur a	iny amo	ount to:						Yes No	<del>,</del>
	(1) Carry on propaganda, or otherwise attempt to						☐ Yes	✓ No	***************************************	
	(2) Influence the outcome of any specific public		on (see secti	on 495	5); or to ca	urry on,				
	directly or indirectly, any voter registration dri	ve? .					☐ Yes	✓ No		
	(3) Provide a grant to an individual for travel, stud						☐ Yes	✓ No	}	
	(4) Provide a grant to an organization other than			-		ıbed ın				e.
	section 4945(d)(4)(A)? See instructions						☐ Yes	✓ No		
	(5) Provide for any purpose other than religious,									A
_	purposes, or for the prevention of cruelty to c						Yes	✓ No		
b	If any answer is "Yes" to 5a(1)—(5), did any of the							scribed		
	in Regulations section 53.4945 or in a current no	_	_			e instri	uctions		5b	<del>-</del>
_	Organizations relying on a current notice regarding the answer is "Yes" to question 5a(4), does to							▶∟		
·	because it maintained expenditure responsibility									
	If "Yes," attach the statement required by Regula					• •	∐ Yes	☐ No		
6a	Did the foundation, during the year, receive any					miume			*	
-							☐ Yes	✓ No		
b	Did the foundation, during the year, pay premium					henefit	_		6b	-
_	If "Yes" to 6b, file Form 8870.	,	Jan, GG., G.	, J., J.,	a porcoriar	DOMONI	. 00/11/401	••		-T.
7a	At any time during the tax year, was the foundation a	a party t	o a prohibited	l tax she	elter transac	tion?	☐ Yes	√ No	, # *-	
ь	If "Yes," did the foundation receive any proceeds						_	n? .	7b	
8	Is the foundation subject to the section 4960 tax	k on pa	yment(s) of	nore ti	han \$1,000	,000 in			THE PERSON NAME OF THE PERSON NA	Ť
	remuneration or excess parachute payment(s) du							<b>☑</b> No		
Par	VIII Information About Officers, Direct	tors, T	rustees, F	ounda	tion Mana	agers,	Highly I	Paid E	mployees,	_
	and Contractors									_
1	List all officers, directors, trustees, and found									_
	(a) Name and address	hour	, and average is per week	(If n	mpensation iot paid,	emplo	Contribution byee benefit	plans	(e) Expense account other allowances	
		devote	ed to position	en	ter -0-)	and defe	erred comp	ensation	other anowarioes	_
	Hamay Vlaiman	D	4/4 b		_			_		_
	Harvey Kleiman	Preside	ent 1/4 hour		<u>U</u>	l		U		_0
	Aileen Kleiman	Secreta	ry 1/10 hour		0			0		^
	Ancer Remai		esident 1/10			<del>                                     </del>				
	Mark, Gary and Robert Kleiman - all at	hour	esident 1/10		0			O		0
2420	1 Bingham Court, Bingham Farms, MI 48025-3420									<u> </u>
						]				
2	Compensation of five highest-paid employed "NONE."	es (oth	er than tho	se incl	uded on li	ne 1—	see insti	ruction	s). If none, en	er
			(b) Title, and a	averace			(d) Contrib			_
	(a) Name and address of each employee paid more than \$50,00	00	hours per v	veek -	(c) Compe	nsation	employee	benefit deferred	(e) Expense accou	ηt,
			devoted to p	osmon			compen			
										_
	None	_								
					,				1	
					<b></b>					
							-			
			]		}					
					<del> </del>		<del> </del>		<del> </del>	
			1							
Total	number of other employees paid over \$50,000 .		<del></del>					. •	<del> </del>	—
	The state of the s		· · ·	· · · ·	<u> </u>				Form <b>990-PF</b> (20	11.8

Part VIII	Information About Officers, Directors, Trustees, Foundation Mana and Contractors (continued)	gers, Highly Paid Em	ployees,
3 Five	highest-paid independent contractors for professional services. See instruction	ns. If none, enter "NON!	_ n
		b) Type of service	(c) Compensation
	None		
			<u> </u>
<del></del>		<del></del>	
otal numb	er of others receiving over \$50,000 for professional services		
Part IX-A			
	ndation's four largest direct charitable activities during the tax year. Include relevant statistical inform	nation such as the number of	Expenses
organization	ns and other beneficianes served, conferences convened, research papers produced, etc.		
1	***************************************		
	NA		
		<del></del>	<del>                                     </del>
2			
3			
4			
			<u> </u>
Part IX-B	<del></del>		7
	te two largest program-related investments made by the foundation during the tax year on lines 1 and 2	· · · · · · · · · · · · · · · · · · ·	Amount
1	AI/A		
	N/A		
2		<del></del>	<del></del>
		,	
All other pr	ogram-related investments. See instructions.		
3			}
		•••••	
		w	<del></del>
Total. Add	lines 1 through 3	<u> ▶</u>	L
			Form <b>990-PF</b> (20

Part	·	gn founda	ations,
	see instructions.)		
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes:		
а	Average monthly fair market value of securities	1a	428,174
b	Average of monthly cash balances	1b	9,081
C	Fair market value of all other assets (see instructions)	1c	
d	<b>Total</b> (add lines 1a, b, and c)	1d	437,255
е	Reduction claimed for blockage or other factors reported on lines 1a and		
	1c (attach detailed explanation)		
2	Acquisition indebtedness applicable to line 1 assets	2	
3	Subtract line 2 from line 1d	3	437,255
4	Cash deemed held for charitable activities. Enter $1^{1}/_{2}\%$ of line 3 (for greater amount, see		
	instructions)	4	6,559
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	430,696
6	Minimum investment return. Enter 5% of line 5	6	21,535
Part	Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating f and certain foreign organizations, check here ► and do not complete this part.)	oundation	าธ
1	Mınımum investment return from Part X, line 6	1	21,535
2a	Tax on investment income for 2018 from Part VI, line 5		
b	Income tax for 2018. (This does not include the tax from Part VI.) 2b		
C	Add lines 2a and 2b	2c	549
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	20,986
4	Recoveries of amounts treated as qualifying distributions	4	
5	Add lines 3 and 4	5	20,986
6	Deduction from distributable amount (see instructions)	6	
7	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII,		
	line 1	7	20,986
	XII Qualifying Distributions (see instructions)	A CONTRACTOR OF THE PARTY OF TH	
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:		
<b>a</b>	Expenses, contributions, gifts, etc.—total from Part I, column (d), line 26	1a	52,698
p	Program-related investments—total from Part IX-B	1b	
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:		
а	Suitability test (prior IRS approval required)	3a	
b	Cash distribution test (attach the required schedule)	3b	
4 5	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.	4	52,698
J	Enter 1% of Part I, line 27b. See instructions	5	
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	52,698
U	Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating qualifies for the section 4940(e) reduction of tax in those years.		
	qualities for the section for teaching that in those years.		000 BE

	Am Ondistributed income (See instruction	7/13/		<del></del>	
•		(a) Corpus	(b) Years prior to 2017	(c) 2017	(d) 2018
1٠	Distributable amount for 2018 from Part XI, line 7				-
. 2	Undistributed income, if any, as of the end of 2018:				20,986
``a	Enter amount for 2017 only				
' b	Total for prior years: 20 , 20 , 20		•-		
3	Excess distributions carryover, if any, to 2018:				
"- a	From 2013				
· b	From 2014				
· `c	From 2015 39,514				
d	From 2016				
е	From 2017				
f	Total of lines 3a through e	185,600	74-10-10 CA		
4	Qualifying distributions for 2018 from Part XII,	EAST TO SERVE		*	
٠	line 4: ▶ \$ 52,698			•	
, а	Applied to 2017, but not more than line 2a			•	
þ	,, ,		* 1	Section 1	
	(Election required—see instructions)		*		
С	Treated as distributions out of corpus (Election	` . l			
	required—see instructions)	A. The second second			
· d	Applied to 2018 distributable amount			4 4 4 4 4 4	*,
e	Remaining amount distributed out of corpus	31,712	Carles Andres		
5	Excess distributions carryover applied to 2018				1
r	(If an amount appears in column (d), the same amount must be shown in column (a).)				÷
<u>`</u>	Enter the net total of each column as	<del>-</del>			
0	indicated below:				
а	Corpus. Add lines 3f, 4c, and 4e. Subtract line 5	217.312			
b	Prior years' undistributed income. Subtract			7/8/10/20/20/20/20	
_	line 4b from line 2b				
	Enter the amount of prior years' undistributed				
Ŭ	income for which a notice of deficiency has		• '		
٠,	been issued, or on which the section 4942(a)		4. T.		
	tax has been previously assessed,				
į d	Subtract line 6c from line 6b. Taxable				
	amount—see instructions				
e	Undistributed_income-for-2017;Subtract-line-				
	,4a from line 2a. Taxable amount—see				
_	instructions				
, f	Undistributed income for 2018. Subtract lines				
	4d and 5 from line 1. This amount must be distributed in 2019				20986
-		A SECTION AND PROPERTY OF THE			
. 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				
-	applied on line 5 or line 7 (see instructions) .	35,245			
9	Excess distributions carryover to 2019.				
	Subtract lines 7 and 8 from line 6a	182,067			
10	* Analysis of line 9:				
a	Excess from 2014				
, b	Excess from 2015				
C					
d					
е	Excess from 2018'				

art	XIV Private Operating Foundat	ions (see instru	ctions and Par	t VII-A, question 9	)	Page
1a	If the foundation has received a ruling					
	foundation, and the ruling is effective for	2018, enter the da	ate of the ruling .			
b	Check box to indicate whether the found	dation is a private	operating found	ation described in se	ction	(3) or 4942(j
2a	Enter the lesser of the adjusted net	Taxyear		Prior 3 years		(e) Total
	income from Part I or the minimum investment return from Part X for each year listed	(a) 2018	<b>(b)</b> 2017	(c) 2016	(d) 2015	(e) Total
b	85% of line 2a		L			
C	Qualifying distributions from Part XII, line 4 for each year listed					
d	Amounts included in line 2c not used directly for active conduct of exempt activities					
е	Qualifying distributions made directly for active conduct of exempt activities. Subtract line 2d from line 2c					
3	Complete 3a, b, or c for the alternative test relied upon:					
а	"Assets" alternative test-enter:		1			ļ
	(1) Value of all assets					
	(2) Value of assets qualifying under					
	section 4942(j)(3)(B)(i)					L
b	"Endowment" alternative test—enter 2/3 of minimum investment return shown in Part X, line 6 for each year listed					
C	"Support" alternative test-enter:			4		
	(1) Total support other than gross investment income (interest, dividends, rents, payments on securities loans (section 512(a)(5)), or royalties)					
	(2) Support from general public and 5 or more exempt organizations as provided in section 4942(j)(3)(B)(lii)					
	(3) Largest amount of support from an exempt organization					
	(4) Gross investment income					
ar	Supplementary Information any time during the year—	•	•	the foundation h	ad \$5,000 or m	ore in assets
1	Information Regarding Foundation I	Managers:			· · · · · · · · · · · · · · · · · · ·	
а	List any managers of the foundation v before the close of any tax year (but o					by the founda
b	List any managers of the foundation	who own 10% o	or more of the st	ock of a corporatio	n (or an equally la	arge portion of

2	Information Regarding Contribution, Grant, Gift, Loan, Scholarship, etc., Programs:
	Check here ▶ 🗹 if the foundation only makes contributions to preselected charitable organizations and does not accept
	unsolicited requests for funds. If the foundation makes gifts, grants, etc., to individuals or organizations under other conditions,
	complete items 2a b. c. and d. See instructions

a The name, address, and telephone number or email address of the person to whom applications should be addressed:

b	The form in which applications should be submitted and information and materials they should include:
_	Any submission deadlines:

d Any restrictions or limitations on awards, such as by geographical areas, charitable fields, kinds of institutions, or other factors:

Part		nued)			
3	<b>Grants and Contributions Paid During t</b>	he Year or Approve	ed for Fut	ure Payment	·
	Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of	Purpose of grant or	Amount
	Name and address (home or business)	or substantial contributor	reciplent	contribution	,
а	Paid during the year				<del> </del>
	See attached Schedule		;	All to 501(c)3 Organizations for	
			ļ	General Charitable Purposes	52,650
					•
			İ		
			1		
			l		
			İ		
		1	1		
			1		
	Total	<del> </del>	· · · ·	<b>▶ 3a</b>	52,650
b	Approved for future payment				
				Į	
			}	,	
	- <u>-</u>	<u> </u>	<u></u>	<u></u>	<u> </u>
	Total			<b>▶</b> 3h	E2 65

nte	gro	ss amounts unless otherwise indicated.	Unrelated bu	isiness income	Excluded by secti	on 512, 513, or 514	(e)
			(a) Business code	<b>(b)</b> Amount	(c) Exclusion code	(d) Amount	Related or exempt function income (See instructions.)
1		gram service revenue:				<del></del>	(Oce matructions.)
	a .		ļ	L <del></del>			
	b .		<b> </b>		<del> </del>		<del></del> -
	C d		ļ		<del> </del> -	<del></del>	<u> </u>
	e .		<del></del>		<del> </del>		
	f		<u> </u>	<b></b>	<del>                                     </del>		
	g	Fees and contracts from government agencies	<del></del>				
2	-	mbership dues and assessments	<del></del>	<del> </del>	<del> </del>		<del> </del>
3		rest on savings and temporary cash investments		<del> </del>	<del> </del>	<del></del>	<del> </del>
4		dends and interest from securities	<del></del>	<del></del>	<del> </del>	<del></del>	14 951
5		rental income or (loss) from real estate:	#C				14,951
•		Debt-financed property	7 2 3 4 <b>3</b> 4 4 6 6	e - mark mark e ar ca	للانتهام ومفاعد أراسات	<u>ئىدە مىدەللىرىلىنى ئەسىدە مەسە</u>	,
		Not debt-financed property			<del>                                     </del>		
6		rental income or (loss) from personal property			<del> </del>		<del></del>
7		er investment income			<del> </del>		<del></del>
8		n or (loss) from sales of assets other than inventory			<b>†</b>		12,498
9		income or (loss) from special events	·		†		12,430
10		ss profit or (loss) from sales of inventory			<del> </del>		<del></del>
11		er revenue: a		<del> </del>	<del> </del>		<del> </del>
	b		ļ — — —	<del> </del>	<del></del>		<u> </u>
	C		-	<del></del>	<del> </del>		<del>                                     </del>
	ď			<del></del>	<del> </del>		<del> </del>
	e			<del>                                     </del>	<del> </del>	<del></del>	<del></del>
12	Sul	ototal. Add columns (b), (d), and (e)		<u> </u>	3185		27,449
		* * * * * * * * * * * * * * * * * * * *		·		40	·
13	10	an. Add line 12, Columns (b), (d), and (e)				13	27.449
		al. Add line 12, columns (b), (d), and (e)				13	27,44
See	wor		ns.)			13	27,44
See Pa	wor	ksheet in line 13 instructions to verify calculation  VI-B Relationship of Activities to the A	ns.) <b>Accomplishn</b>	nent of Exemp	t Purposes		
See Pa Lin	wor t X e No ▼	ksheet in line 13 instructions to verify calculation  VI-B Relationship of Activities to the A  Explain below how each activity for which accomplishment of the foundation's exempt pu	ns.) Accomplishm Income is reproses (other the	nent of Exemp orted in column an by providing fui	ot Purposes  (e) of Part XVI nds for such purp	i-A contributed i oses). (See instrui	
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Form **990-PF** (2018)

		Organizatio	J113					
1	ın se			engage in any of the for 501(c)(3) organization				Yes No
а	_		orting foundation to	a noncharitable exer	npt organization o	of:		
	(1) C	ash						1a(1) 🗸
	. ,	ther assets .						1a(2) 🗸
b		transactions:						
				empt organization .				1b(1) ✓
				able exempt organizat				1b(2) ✓
				er assets				1b(3) ✓
								1b(4) /
								1b(5) ✓
С				nip or fundraising solic sts, other assets, or p				1b(6) ✓
ď				s." complete the follo				
	value	of the goods, of	ther assets, or serv	ces given by the repo	rting foundation.	if the foundat	ion received less	s than fair market
				ement, show in colum				
(a) Lin	e no (	b) Amount involved	(c) Name of nonc	hantable exempt organization	n (d) Descrip	otion of transfers,	transactions, and sh	aring arrangements
				<del></del>				
				·				
				<del></del> _				
			· · · · · · · · · · · · · · · · · · ·	<del></del>				<del></del>
							<del> </del>	
				<del></del>	<del></del>			<del></del>
	+		<b>-</b>	<del></del> _	<del></del>	<del></del>	<del></del>	<del></del>
	<del></del>			<del></del>	<del></del>			
	$\neg \uparrow$	<del></del>						<del></del>
						<del></del>	<del></del>	
2a				affiliated with, or related to the control of the c				☐ Yes ☐ No
b			e following schedule					
		(a) Name of organ	nization	(b) Type of org	anization	(c)	Description of relati	onship
				<u> </u>				
	1	<del></del>		<del></del>	<u></u>		<del></del>	<del></del>
Siar	1			ned this return, including accor han taxpayer) is based on all in			edge ———	<del></del>
Sign	"	Daniell.	Vleuman 1	17/3/14	I FRE	•	May the	IRS discuss this return preparer shown below?
Her		nature of officer or tru	isthe	Date	Title			uctions.   Yes   No
		Print/Type prepare	_ <u>/</u>	Preparer's signature		Date		PTIN
Paid		, init i year propare					Check I If self-employed	
	arer	Firm's name ▶		<u></u>	<del></del>	<del></del>	irm's EIN ▶	
use	Only	Elemia address					Phone no	

#### 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	on .	Employer identification number	
	Harvey and Aileen Kleiman Family Foundation	38-3320168	
Organization type (	:heck one):		
Filers of:	Section:		
Form 990 or 990-EZ	501(c)( ) (enter number) organization		
	4947(a)(1) nonexempt charitable trust not treated as a pri	vate 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 foundation		
	zation is covered by the <b>General Rul</b> e or a <b>Special Rule.</b> 501(c)(7), (8), or (10) organization can check boxes for both the General	al Rule and a Special Rule. See	
General Rule			
or more (in i	nization filing Form 990, 990-EZ, or 990-PF that received, during the yemoney or property) from any one contributor. Complete Parts I and II. Setotal contributions.		
Special Rules			
regulations 13, 16a, or	nization described in section 501(c)(3) filing Form 990 or 990-EZ that m under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A ( 16b, and that received from any one contributor, during the year, total of 2) 2% of the amount on (i) Form 990, Part VIII, line 1h; or (ii) Form 990-I	Form 990 or 990-EZ), Part II, line contributions of the greater of (1)	
contributor,	For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I, II, and III.		
contributor, contribution during the y General Ru	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 organiza 990-EZ, or 990-PF),	ation that isn't covered by the General Rule and/or the Special Rules do but it must answer "No" on Part IV, line 2, of its Form 990; or check the line 2, to certify that it doesn't meet the filing requirements of Schedul	oesn't file Schedule B (Form 990, e box on line H of its Form 990-EZ or on i	

Name of organization **Employer identification number** Harvey and Aileen Kleiman Family Foundation 38-3320168 Part I Contributors (see instructions). Use duplicate copies of Part I if additional space is needed. (a) (c) (d) Name, address, and ZIP + 4 **Total contributions** No. Type of contribution 1. Person "Harvey and Aileen Kleiman **Pavroll**  $\square$ Noncash 50,274 24201 Bingham Court (Complete Part II for noncash contributions.) Bingham Farms, MI 48025-3420 (a) (b) (c) (d) No. Name, address, and ZIP + 4 **Total contributions** Type of contribution 2 Person Same as Item 1 Payroll  $\Box$ **7** Noncash 52,930 (Complete Part II for noncash contributions.) (d) (a) (b) (c) Total contributions No. Name, address, and ZIP + 4 Type of contribution Person **Payroll** Noncash (Complete Part II for noncash contributions.) (d) (a) (b) (c) No. Name, address, and ZIP + 4 **Total contributions** Type of contribution Person Payroli Noncash (Complete Part II for noncash contributions.) (a) (c) (d) **Total contributions** Type of contribution Name, address, and ZIP + 4 No. Person **Payroll** Noncash (Complete Part II for noncash contributions.) (a) (c) (d) (b) **Total contributions** Type of contribution No. Name, address, and ZIP + 4 Person Payroli Noncash (Complete Part II for noncash contributions)

**Employer identification number** Name of organization Harvey and Aileen Kleiman Family Foundation 38-3320168 Part II Noncash Property (see instructions). Use duplicate copies of Part II if additional space is needed. (a) No. (c) (b) (d) from FMV (or estimate) Description of noncash property given **Date received** Part I (See instructions) 600 Shares, Paychex, Inc. 50,274 4-26-2019 (a) No. (c) (b) (d) from FMV (or estimate) Description of noncash property given **Date received** Part I (See instructions.) 500 Shares, Proctor & Gamble 52,930 4-26-2019 (a) No. (c) (b) (d) from FMV (or estimate) Description of noncash property given **Date received** Part I (See instructions.) (a) No. (c) (d) (b) from FMV (or estimate) Description of noncash property given Date received (See instructions.) Part I (a) No. (c) (d) (b) from FMV (or estimate) Description of noncash property given Date received Part I (See instructions.) (a) No. (c) (b) (d) FMV (or estimate) from Description of noncash property given **Date received** Part ! (See instructions.) \$\_\_\_\_

Schedule B (Form 990, 990-EZ, or 990-PF) (2019) **Employer identification number** Name of organization 38-3320168 Harvey and Aileen Kleiman Family Foundation Exclusively religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8), or Part III (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 information once. See instructions.) ▶ 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 Relationship of transferor to transferee Transferee's name, address, and ZIP + 4 (a) No. from (b) Purpose of gift (c) Use of gift (d) Description of how gift is held Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from Part I (b) Purpose of gift (c) Use of gift (d) Description of how gift is held (e) Transfer of gift Relationship of transferor to transferee Transferee's name, address, and ZIP + 4 (a) No. from (c) Use of gift (d) Description of how gift is held (b) Purpose of gift (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee

### Harvey and Aileen Kleiman Family Foundation - 38-3320168 Part XV - Contributions Paid October 1, 2018 through September 30, 2019

		Address of Charity
Adat Shalom Synagogue		Farmington Hills, MI
American Jewish Committee		New York, NY
Anti Defamation League	_ <del></del>	Detroit, MI
Channel 56		Southfield, MI
Children's Hospital		Detroit, MI
Congregation B'nai Israel	225	Petoskey, MI
Corner Health Center		Ann Arbor, MI
COTS		Detroit, MI
Detroit Institute of Arts	1,500	Detroit, MI
Detroit Public Library	225	Detroit, MI
Detroit River Walk	275	Detroit, MI
Detroit Symphony Orchestra	1,900	Detroit, MI
Doctors Without Borders	275	New York, NY
Forgotton Harvest		Pontiac, MI
Friends of the IDF	500	New York, NY
Friendship Circle	300	West Bloomfield, MI
Gleaners Society	220	Pontiac, MI
Hebrew Free Loan Association	1,250	Southfield, MI
Hıllel Day School	1,850	Farmington Hills, MI
Hillel of Metro Detroit	175	Detroit, MI
Holocaust Center	250	Farmington Hills, MI
JARC	8,000	Farmington Hills, MI
Jewish Historical Society		Birmingham, MI
Jewish Hospice	950	Southfield, MI
Jewish News Foundation	180	West Bloomfield, MI
Jewish Senior Life	275	West Bloomfield, MI
Jewish Vocational Services	1,250	Southfield, MI
Jewish Welfare Federation	19,250	Bloomfield Hills, MI
Kadima	1,100	Southfield, MI
Kids Kicking Cancer	250	Southfield, MI
Lubovich Cheder	350	Southfield, MI
Make a Wish Foundation	125	Southfield, MI
Michigan Opera Theatre	500	Detroit, MI
Rocky Mountain Children's Fund	200	Denver, CO
Stratford Festival	150	Stratford, Canada
Temple Israel	2,900	West Bloomfield, MI
United Foundation	1,000	Detroit, MI
University of Michigan	350	Ann Arbor, MI
Wayne State University		Detroit, MI
WDET		Detroit, MI
Weitzman Institute	325	West Bloomfield, MI
Yad Ezra	1,000	Birmingham, MI
Sundry Charities, under \$125.00 each	1,145	
	<del>                                     </del>	
Total	\$ 52,650	

# Harvey and Aileen Kleiman Family Foundation 38-3320168

### Form 990 PF - Year Ended September 30, 2019

Part I - Line 1 - Contributions Received	
Received April 26, 2019 from	
Harvey and Aileen Kleiman at Market Value	
600 Shares - Paychex, Inc	50,274
500 Shares - Proctor & Gamble	52,930
Total	103,204

# Harvey and Aileen Kleiman Family Foundation 38-3320168

### Form 990 PF - Year Ended September 30, 2019

Part II - Line 10B - Corporate Stock	Cost	Market Value
800 Shares - Weyerhauser	23,020	22,160
500 Shares - Glaxo Smith Kline	17,713	21,340
500 Shares - AT&T	14,643	18,920
200 Shares - Sun Communities	6,740	29,690
1000 Shares - Century Link	35,901	12,480
300 Shares - Cincinnati Financial	10,531	35,001
1000 Shares - International Paper	54,545	41,820
1000 Shares - Coca Cola	43,010	54,440
200 Shares - 3 M Co	34,458	32,880
344 Shares - Corteva	10,887	9,632
344 Shares - Dow Inc	20,875	16,392
344 Shares - Dupont	37,361	24,530
600 Shares - Paychex Inc	50,274	49,662
500 Shares - Proctor & Gamble	52,930	62,190
Total	412,888	431,137
Part II - Line 13 - Other Investments		
State of Israel Bonds	33,000	33,000
Total	33,000	33,000