Form 990-PF

EXTENDED TO OCTOBER 15, 2020

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.

| Intern                  | al Re     | venue Service                         |             |                       | Go to www.i         |  |                | or instr           | uctions and      | the latest info | •        |   | Open to Public Insp                      | ection         |
|-------------------------|-----------|---------------------------------------|-------------|-----------------------|---------------------|--|----------------|--------------------|------------------|-----------------|----------|---|--|----------------|
| For c                   | alen      | dar year 2018 o                       | r tax yea   | r beginning           | DEC                 | 1,   | 2018           |                    | , and e          | nding           | N        | <u>OV 30, 2019</u>  |  |                |
| Nan                     | ne of     | foundation                            |             |                       |                     |  |                |                    |                  |                 | Α        | Employer identification   | number                                   |                |
|                         |           |                                       |             |                       |                     |  |                |                    |                  |                 | 1        |   |  |                |
|                         |           | EUGENE                                |             |                       |                     |  | UNDATI         | ON                 |                  |                 | Ļ        | <u> 38-2782955</u>  |  |                |
|                         |           | no street (or PO to                   |             |                       | livered to street a | ddress)  |                |                    |                  | Room/suite      | В        | Telephone number  |  |                |
| _4                      | <u>80</u> | PIERCE                                | STR         | EET                   | _                   |  |                |                    |                  | 200             | L        | <u>248-593-88</u>   | 40                                       |                |
| City                    | or t      | own, state or pro                     | ovince, co  | ountry, and Z         | IP or foreign p     | ostal cod  | de             |                    |                  |                 | C        | If exemption application is p   | ending, check here                       | <b>▶</b> □ (   |
| _ <u>B</u>              | IR        | MINGHAM                               | , MI        | <u>4800</u>           | 9                   | _  |                |                    |                  |                 | ]        |   |  |                |
| G C                     | heck      | all that apply:                       |             | ] Initial retui       | rn                  |  | Initial returi | n of a fo          | rmer public (    | charity         | D        | 1. Foreign organizations  | s, check here                            | <b>▶</b> □     |
|                         |           |                                       |             | Final returi          | n                   |  | Amended re     | eturn              |                  |                 |          | •   |  |                |
|                         |           |                                       |             | Address cl            | hange               |  | Name chan      | ge                 |                  |                 |          | <ol><li>Foreign organizations me<br/>check here and attach co</li></ol> | eting the 85% test,<br>emputation        | <b>-</b>       |
| H C                     | heck      | type of organiza                      | ation:      | X Section             | n 501(c)(3) ex      | cempt pri  | vate foundat   | ion                |                  | 1)4             | ╏╒       | If private foundation sta   | tus was terminated                       |                |
|                         | Se        | ction 4947(a)(1)                      | nonexer     |                       |                     |  | xable private  |                    | tion             |                 | ľ        | under section 507(b)(1)   |  | <b>►</b> □     |
| I Fa                    | ır ma     | arket value of all                    | assets at   | end of year           | J Accounti          | ng meth  | od: X          | Cash               | Acci             | ual             | ]<br>F   | If the foundation is in a   |  | n              |
| (fr                     | om F      | Part II, col. (c), lii                | ne 16)      | •                     | O:                  | ther (spe  | cify)          |                    |                  |                 | ľ        | under section 507(b)(1)   |  | -              |
| <b>.</b>                |           |                                       | 20          | 5,056.                | (Part I, colur      | nn (d) m   | ust be on ca   | sh basis           | s.)              |                 |          | ( ) ( )   |  |                |
| Pa                      | rt I      | Analysis of Re                        | evenue a    | nd Expenses           |                     |  | Revenue an     |                    |                  | vestment        | Τ        | (c) Adjusted net  | (d) Disbursemen                          | its            |
|                         |           | (The total of amor                    |             |                       |                     |  | enses per bo   |                    |                  | ome             |          | (c) Adjusted net<br>income  | for charitable purpo<br>(cash basis only |                |
| $\neg \gamma$           | 1         | Contributions, o                      | oifts, orar | nts. etc., rece       | ived                | 1,   | 915,8          | 00.                |                  | -               | T        | N/A   |  | $\overline{}$  |
|                         | 2         |                                       |             | ion is not required t |                     |  |                |                    |                  |                 | T        | · · · · · · · · · · · · · · · · · · ·                                   |  | <del></del> i  |
|                         | 3         | Interest on savings                   |             |                       |                     |  |                |                    |                  |                 | T        |   |  |                |
|                         | 4         | Dividends and i                       | nterest fr  | om securitie          | s                   |  |                |                    |                  |                 | T        |   | -  | <u> </u>       |
| - 1                     | 5a        | Gross rents                           |             |                       | -                   |  |                |                    |                  |                 |          |   |  | i              |
|                         |           | Net rental income                     | or (loss)   |                       |                     |  |                |                    |                  |                 | Τ        |   |  |                |
|                         |           | Net gain or (loss) fr                 | ٠, ٠,       | assets not on l       | ina 10              |  |                |                    |                  | -               | Π        |   |  | <u> </u>       |
| Revenue                 | h         | Gross sales price fassets on line 6a  |             |                       |                     |  |                |                    |                  | ***             | Г        |   |  |                |
|                         | 7         | Capital gain net inc                  |             | Part IV. line 2)      |                     |  |                |                    |                  | 0.              | T        |   |  | i              |
| S.                      | 8         | Net short-term                        | -           | •                     |                     |  |                |                    |                  |                 | T        |   | · · · · · · · · · · · · · · · · · · ·    | <u> </u>       |
|                         | 9         | Income modific                        |             | 4111                  |                     |  |                |                    |                  |                 | T        | -200.   |  | —— <u>;</u>    |
| 1                       | 10a       | Gross sales less re<br>and allowances |             | 1                     |                     | -  |                |                    |                  |                 | T        |   |  | i              |
| ļ                       |           | Less Cost of good                     | le sold     | -                     |                     | 1  |                |                    |                  |                 | T        |   |  | <del></del> i  |
| 1                       |           | Gross profit or                       |             |                       |                     | <u> </u>   |                |                    |                  |                 | t        |   | <del>  </del>                            |                |
| i                       | 11        | Other income                          | (1035)      |                       |                     |  | 57,8           | 05.                |                  | 1,105.          | t        | <del></del>   | STATEMENT                                | <u>. 1</u>     |
|                         | 12        | Total. Add lines                      | e 1 throw   | ah 11                 |                     | 1  | 973,6          |                    |                  | 1,105.          | t        | -200.   |  |                |
| $\neg$                  | 13        | Compensation of o                     |             |                       | n oto               |  | 3,3,0          | 0.                 |                  | 0.              | t        |   |  | 0.             |
|                         | 14        | Other employee                        |             |                       | , <del>u</del> c    |  |                | <del>Ĭ</del>       |                  |                 | F        | <del></del>   |  | <del></del>    |
|                         |           | Pension plans,                        |             | •                     |                     |  |                | $\dashv$           | <del>- REC</del> | EIVE            | •        |   | -  |                |
| in                      |           | Legal fees                            | employed    | e nements             |                     |  | -              | 00                 |                  |                 | -        | 10  |  |                |
| use                     |           |                                       |             |                       |                     |  |                |                    | 00               | <b>2 6</b> 2020 | ╁        | 181   |  |                |
| چ                       |           | Accounting fees<br>Other professio    |             |                       |                     | -  |                | 1=                 | <u> </u>         | 20 0 2071       | ╫╌       | 0   |  |                |
|                         | 17        | Interest                              | iiai iccs   |                       |                     | <u> </u>   |                | +                  |                  |                 | L        | 張   |  |                |
| SCORPAINED FFR 1 7 2822 | 19        | Taxes                                 |             |                       |                     | <del></del>                                      |                |                    | <del>_JGD</del>  | EN, U           | 1        | <del></del> -   | <del> </del>                             |                |
| -<br>tra                | 10        | Depreciation an                       | d danlatu   | on                    |                     | <del> </del>                                     |                |                    |                  |                 | +-       | <del></del>   |  |                |
| ₩Ē                      | 30        | Occupancy                             | a achietii  | UII                   |                     | <del> </del>                                     |                |                    |                  |                 | $\vdash$ | <del></del>   |  |                |
| μĒ                      | 20        | Travel, conferer                      | nee and     | maatinas              |                     | <del> </del>                                     | <del></del>    |                    |                  |                 | +        | <del></del>   | <del> </del>                             |                |
| пÃ                      | 21        | Printing and pul                      |             | -                     |                     | <b> </b> -                                       | <del></del>    | -+                 |                  | <del></del>     | $\vdash$ | <del></del>   |  |                |
| 든                       | 22        |                                       |             | •                     |                     |  |                | $\overline{}$      |                  |                 | H        | <del></del>   |  |                |
|                         | 23        | Other expenses Total operating        |             | niniatrati            | ,                   | <del>                                     </del> | <u>.</u>       |                    |                  | <del></del>     | t        | ·   |  |                |
| 25                      | 24        |                                       |             |                       |                     |  |                | 0.                 |                  | 0.              |          |   |  | 0.             |
| <b>30</b>               | 25        | expenses. Add                         |             |                       |                     | 1  | 845,43         |                    |                  | <u> </u>        | $\vdash$ |   | 1,845,4                                  | 36             |
| 7                       | 40        | Contributions, g                      |             | •                     |                     | <del> '</del>                                    | U=J, 4.        | 70.                |                  |                 | $\vdash$ |   | , 1,043,4                                | <del>50.</del> |
|                         | 26        | Total expenses                        |             | ursements.            |                     | 1  | 845,43         | ا ع                |                  | 0.              |          |   | 1,845,4                                  | 36             |
| -+                      | 07        | Add lines 24 and                      |             | . 10:                 |                     | <del></del> -                                    | 045,4.         | <del>, , ,  </del> |                  | <u> </u>        | ┢        |   | 1,045,4                                  | <del>30.</del> |
|                         | 27        | Subtract line 26                      |             | -                     |                     |  | 120 14         | 50                 |                  |                 | 1        | -   |  | -              |
|                         |           | Excess of revenue                     | •           |                       |                     |  | 128,1          | 77.                |                  | 1,105.          | $\vdash$ |   | <del> </del>                             |                |
| ł                       |           | Net investment                        |             |                       |                     |  |                |                    |                  | <u>τ,τυσ.</u>   | $\vdash$ | 0.  | <del> </del>                             |                |
|                         |           | Adjusted net in                       |             |                       |                     |  |                |                    | <del></del>      |                 | <u> </u> | <u> </u>  | r 000 Dr                                 | <u> </u>       |
| 82350                   | 1 12-     | .11-18 LHA F                          | or Paper    | rwork Reduct          | tion act Notice     | e, see ins                                       | Structions.    |                    |                  |                 |          |   | Form <b>990-PF</b>                       | (2018)         |

| Fo   | rm 99 | 0-PF (2018) THE EUGENE APPLEBAUM FAN  |                   | 38-            | 2782955 Page 2            |  |
|--|-------|---|-------------------|----------------|---------------------------|--|
| Ï  | art   | Balance Sheets Attached schedules and amounts in the description                          | Beginning of year |                | of year                   |  |
| <u> </u>   | art   | column should be for end-of-year amounts only   | (a) Book Value    | (b) Book Value | (c) Fair Market Value     |  |
|  | 1     | Cash - non-interest-bearing   | 51,687.           | 202,206.       | 202,206.                  |  |
|  | 2     | Savings and temporary cash investments  |                   |                | <u> </u>                  |  |
|  | 3     | Accounts receivable ► 2,850.  |                   |                |                           |  |
|  |       | Less: allowance for doubtful accounts   |                   | 2,850.         | 2,850.                    |  |
|  | 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  |                   |                | قــــــا                  |  |
|  |       | Less: allowance for doubtful accounts   |                   | <u> </u>       |                           |  |
| ş  | 8     | Inventories for sale or use   |                   | <del></del>    |                           |  |
| ssets  | 9     | Prepaid expenses and deferred charges   |                   |                |                           |  |
| ⋖  | 10a   | Investments - U.S. and state government obligations                                       |                   | <u> </u>       |                           |  |
|  | b     | Investments - corporate stock   |                   |                |                           |  |
|  | C     | Investments - corporate bonds   |                   |                | <del> </del>              |  |
|  | 11    | Investments - land buildings, and equipment basis   |                   | <del></del>    |                           |  |
|  |       | Less accumulated depreciation   |                   | · <del></del>  | <u> </u>                  |  |
|  | 12    | Investments - mortgage loans  |                   |                |                           |  |
|  | 13    | Investments - other   |                   |                | <u> </u>                  |  |
|  | 14    | Land, buildings, and equipment basis  |                   |                |                           |  |
|  |       | Less accumulated depreciation   |                   |                |                           |  |
|  |       | Other assets (describe  |                   |                |                           |  |
|  | 16    | Total assets (to be completed by all filers - see the                                     | 51 607            | 205 256        | 005 056                   |  |
| _  |       | instructions. Also, see page 1, item I)   | 51,687.           | 205,056.       | 205,056.                  |  |
|  | l     | Accounts payable and accrued expenses   |                   | 25 000         |                           |  |
|  | 18    | Grants payable  |                   | 25,000.        |                           |  |
| es   | 19    | Deferred revenue  |                   |                |                           |  |
| iabilities   | l     | Loans from officers, directors, trustees, and other disqualified persons                  |                   | <del></del>    |                           |  |
| .e   | 21    | Mortgages and other notes payable   |                   | <del> </del>   |                           |  |
|  | 22    | Other liabilities (describe   |                   |                |                           |  |
|  |       | Total link Water (add lines 17 through 99)  | 0.                | 25,000.        |                           |  |
| _  | 23    | Total liabilities (add lines 17 through 22)  Foundations that follow SFAS 117, check here |                   | 23,000.        |                           |  |
|  |       | ·   |                   |                |                           |  |
| s,   | 24    | and complete lines 24 through 26, and lines 30 and 31. Unrestricted                       |                   |                |                           |  |
| ညိ   | 25    | Temporarily restricted  |                   |                |                           |  |
| ala  |       | Permanently restricted  |                   |                |                           |  |
| d B  | 20    | Foundations that do not follow SFAS 117, check here                                       |                   |                |                           |  |
| ş  |       | and complete lines 27 through 31.   |                   |                | 1                         |  |
| Net Assets or Fund Balanc  | 27    | Capital stock, trust principal, or current funds  | 0.                | 0.             |                           |  |
| ets  | 28    | Paid-in or capital surplus, or land, bldg., and equipment fund                            | 0.                | 0.             |                           |  |
| SS   | 29    | Retained earnings, accumulated income, endowment, or other funds                          | 51,687.           | 180,056.       |                           |  |
| e /  | 30    | Total net assets or fund balances   | 51,687.           | 180,056.       |                           |  |
| 2  | ľ     | Total not assets of faile buildings   |                   |                |                           |  |
| )  | 31    | Total liabilities and net assets/fund balances  | 51,687.           | 205,056.       |                           |  |
|  | τ_    |   |                   |                |                           |  |
| <u> </u>   | art   | Alialysis of Changes in Net Assets of Fullu ba  | ialices           |                |                           |  |
| 1  | Total | net assets or fund balances at beginning of year - Part II, column (a), line 3            | 30                |                |                           |  |
|  |       | t agree with end-of-year figure reported on prior year's return)                          |                   | 1              | 51,687.                   |  |
| 2 Enter amount from Part I, line 27a 2 128, 169  |       |   |                   |                |                           |  |
| 3 Other increases not included in line 2 (itemize) ► RETURNED GRANT FROM A PRIOR YEAR 3 200. |       |   |                   |                |                           |  |
| 4  | Add I | ines 1, 2, and 3  |                   | 4              | 180,056.                  |  |
| 5  | Decre | ases not included in line 2 (itemize)   |                   | 5              | 0.                        |  |
| 6  | Total | net assets or fund balances at end of year (line 4 minus line 5) - Part II, co.           | lumn (b), line 30 | 6              | 180,056.                  |  |
|  |       |   |                   |                | Form <b>990-PF</b> (2018) |  |

1,845,436.

8 Enter qualifying distributions from Part XII, line 4

See the Part VI instructions.

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.



| Form 990-PF (2018) THE EUGENE APPLEBAUM Part VI   Excise Tax Based on Investment Incom   | FAMILY FOUNDATION<br>ne (Section 4940(a), 4940(b), 4940(e), or 49   |         | 82955<br>e instruc | Pa         | age 4  |
|--|---|---------|--------------------|------------|--|
|  |   | 10 - 30 | - IIISti ut        | , tions,   | <u> </u>                                     |
| 1a Exempt operating foundations described in section 4940(d)(2), check   |   |         |                    |            |  |
| Date of ruling or determination letter: (atta  |   |         |                    | - 1        | لب   |
| <b>b</b> Domestic foundations that meet the section 4940(e) requirements in  | Part V, check here  A and enter 1%  | 1       |                    | <u>_</u> _ | 1.   |
| of Part I, line 27b  |   |         | •                  |            |  |
| c All other domestic foundations enter 2% of line 27b. Exempt foreign  |   |         |                    |            | <u>,                                    </u> |
| 2 Tax under section 511 (domestic section 4947(a)(1) trusts and taxab  | le foundations only; others, enter -0-)   | 2       |                    |            | 0.   |
| 3 Add lines 1 and 2  |   | 3       |                    |            | 1.   |
| 4 Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxal  |   | 4       |                    |            | 0.   |
| 5 Tax based on investment income. Subtract line 4 from line 3. If zero   | o or less, enter -0-  | 5       |                    |            | 1.   |
| 6 Credits/Payments:  | l   5 000   |         |                    |            |  |
| a 2018 estimated tax payments and 2017 overpayment credited to 201   |   |         |                    |            |  |
| <b>b</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 . O.   |         |                    |            | لب   |
| 7 Total credits and payments. Add lines 6a through 6d  | _   | 7       |                    | 5,00       |  |
| 8 Enter any penalty for underpayment of estimated tax. Check here  | if Form 2220 is attached  | 8       |                    |            | 0.   |
| 9 Tax due. If the total of lines 5 and 8 is more than line 7, enter amoun  | nt owed -   | 9       |                    | 2          |  |
| 10 Overpayment. If line 7 is more than the total of lines 5 and 8, enter t   |   | 10      |                    | 4,98       |  |
| 11 Enter the amount of line 10 to be: Credited to 2019 estimated tax   | ▶ 4,989. Refunded ▶   | 11      |                    |            | <u>0.</u>                                    |
| Part VII-A Statements Regarding Activities   |   |         |                    |            |  |
| 1a During the tax year, did the foundation attempt to influence any natio  | nal, state, or local legislation or did it participate or intervene   | ın      |                    | Yes        |  |
| any political campaign?  |   |         | 1a                 | -          | <u>X</u>                                     |
| <b>b</b> Did it spend more than \$100 during the year (either directly or indire   | ctly) for political purposes? See the instructions for the defin  | ition   | 1b                 | igspace    | <u>X</u>                                     |
| If the answer is "Yes" to 1a or 1b, attach a detailed description of the   | e activities and copies of any materials published or   |         |                    |            | 1  |
| distributed by the foundation in connection with the activities.   |   |         |                    |            |  |
| c Did the foundation file Form 1120-POL for this year?   |   |         | 10                 |            | X  |
| d Enter the amount (if any) of tax on political expenditures (section 495  |   |         |                    |            |  |
| (1) On the foundation. ► \$ (2) 0  | n foundation managers. ▶ \$0 .  |         |                    |            |  |
| e Enter the reimbursement (if any) paid by the foundation during the ye  |   |         |                    | ,          |  |
| managers. ► \$   |   |         | <u> </u>           |            |  |
| 2 Has the foundation engaged in any activities that have not previously  | been reported to the IRS?   |         | 2                  |            | <u>X</u>                                     |
| If "Yes," attach a detailed description of the activities.   |   |         |                    |            |  |
| 3 Has the foundation made any changes, not previously reported to the  | e IRS, in its governing instrument, articles of incorporation, or   | r       |                    |            |  |
| bylaws, or other similar instruments? If "Yes," attach a conformed co  | py of the changes   |         | 3                  |            | X  |
| 4a Did the foundation have unrelated business gross income of \$1,000  | or more during the year?  |         | 48                 |            | X  |
| b If "Yes," has it filed a tax return on Form 990-T for this year?   | •   | N/A     | 4 <u>b</u>         |            |  |
| 5 Was there a liquidation, termination, dissolution, or substantial contr  | action during the year?   |         | 5                  |            | X  |
| If "Yes," attach the statement required by General Instruction T   |   |         |                    |            |  |
| 6 Are the requirements of section 508(e) (relating to sections 4941 three  | ough 4945) satisfied either:  |         |                    |            |  |
| By language in the governing instrument, or  |   |         |                    |            |  |
| By state legislation that effectively amends the governing instrume  | nt so that no mandatory directions that conflict with the state   | law     | <u> </u>           |            |  |
| remain in the governing instrument?  | -   |         | 6                  | Х          |  |
| 7 Did the foundation have at least \$5,000 in assets at any time during t  | he year? If "Yes," complete Part II, col. (c), and Part XV  |         | 7                  | Х          |  |
|  |   |         |                    |            | 1  |
|  | gistered. See instructions.   |         |                    |            |  |
| 8a Enter the states to which the foundation reports or with which it is re   | <del></del>   |         | [                  |            |  |
| 8a Enter the states to which the foundation reports or with which it is re MI  |   |         |                    |            |  |
| MI   | f Form 990-PF to the Attorney General (or designate)  |         | _                  |            | ]  |
| MI b If the answer is "Yes" to line 7, has the foundation furnished a copy o   |   |         |                    | <u>x</u>   |  |
| MI  b If the answer is "Yes" to line 7, has the foundation furnished a copy of each state as required by General Instruction G? If "No," attach  | explanation   | ndar    |                    | X          | _]   |
| MI  b If the answer is "Yes" to line 7, has the foundation furnished a copy of each state as required by General Instruction G? If "No," attach  Is the foundation claiming status as a private operating foundation w | explanation<br>ithin the meaning of section 4942(j)(3) or 4942(j)(5) for calei  | ndar    | 8b                 |            |  |
| MI  b If the answer is "Yes" to line 7, has the foundation furnished a copy of each state as required by General Instruction G? If "No," attach  | explanation<br>ithin the meaning of section 4942(j)(3) or 4942(j)(5) for calei<br>· Part XIV. If "Yes," complete Part XIV | ndar    |                    |            | $\frac{1}{\frac{x}{x}}$                      |

| Pa | art 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                     | Ì        | 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   | 12                     |          | х             |
| 13 | Did the foundation comply with the public inspection requirements for its annual returns and exemption application?                          | 13                     | x        |               |
|    | Website address ► N/A  |                        |          |               |
| 14 | The books are in care of ▶ PAMELA A. APPLEBAUM  Telephone no.▶248-   | 593-8                  | 840      |               |
| •  | Located at ▶480 PIERCE STREET, SUITE 200, BIRMINGHAM, MI ZIP+4 ▶   |                        |          |               |
| 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  | N                      | I/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,                 |                        | Yes      | No            |
|    | 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 the                             |                        |          |               |
|    | foreign country  |                        | İ        |               |
| Pa | art 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            |
| 1: | 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?   |                        |          |               |
|    | (2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from)  |                        |          | ŀ             |
|    | a disqualified person?   | - 1                    |          |               |
|    | (3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?   |                        |          |               |
|    | (4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?   |                        |          |               |
|    | (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.)   |                        |          |               |
| ı  | 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 N/A  | 1b                     |          |               |
|    | Organizations relying on a current notice regarding disaster assistance, check here  | ]                      | ł        | 1             |
| (  | Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected              |                        | <u> </u> |               |
|    | 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 operating foundation             |                        |          |               |
|    | defined in section 4942(j)(3) or 4942(j)(5)):  |                        |          |               |
| 8  | 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 ▶,,,  |                        |          |               |
| ١  | 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 all years listed, answer "No" and attach         |                        |          |               |
|    | statement - see instructions.) N/A   | <u>2b</u>              |          | <b></b>       |
| (  | If the provisions of section 4942(a)(2) are being applied to <b>any</b> of the years listed in 2a, list the years here.                      |                        |          |               |
|    | <b>&gt;</b>  |                        |          |               |
| 38 | Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time                                    |                        |          |               |
|    | during the year?   |                        |          |               |
| ł  | of If "Yes," did it have excess business holdings in 2018 as a result of (1) any purchase by the foundation or disqualified persons after    | - 1                    |          |               |
|    | 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,           | <del></del>            |          | —             |
|    | Form 4720, to determine if the foundation had excess business holdings in 2018.)  N/A  | 3b                     | $\vdash$ | v             |
|    | 1 Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?                            | 4a                     |          | X             |
| ı  | Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that       | 4                      |          | $\frac{1}{x}$ |
| _  | had not been removed from jeopardy before the first day of the tax year beginning in 2018?   | 4b<br>Form <b>99</b> 0 | D-PF     |               |
|    |  | COLUI 231              | 0-1. I   | (2010)        |

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|---|---|-----------------------------|--|-------------------|--|
| Part VII-B   Statements Regarding Activities for Which F  | orm 4720 May Be Re  | equired (continu            | ued)   |                   |  |
| 5a During the year, did the foundation pay or incur any amount to:                                    |   |                             | <b>_</b>   | Yes               | No   |
| (1) Carry on propaganda, or otherwise attempt to influence legislation (section                       | 1 4945(e))?   | Ye                          | s X No   |                   |  |
| (2) Influence the outcome of any specific public election (see section 4955); o                       | r to carry on, directly or indire                               | ctly,                       |  | İ                 |  |
| any voter registration drive?   |   |                             | s X No   |                   |  |
| (3) Provide a grant to an individual for travel, study, or other similar purposes                     | ?   | Ye                          | s X No   |                   |  |
| (4) Provide a grant to an organization other than a charitable, etc., organizatio                     | n described in section  |                             |  |                   |  |
| 4945(d)(4)(A)? See instructions   |   | Ye                          | s X No   |                   |  |
| (5) Provide for any purpose other than religious, charitable, scientific, literary,                   | or educational purposes, or fo                                  |                             |  |                   |  |
| the prevention of cruelty to children or animals?   |   | Ye                          | s X No   |                   | 1 1  |
| <b>b</b> If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify un          | · ·   | n Regulations               | /-  -  | —  <u>:</u> —     | اــــا   |
| section 53.4945 or in a current notice regarding disaster assistance? See instri                      |   |                             | N/A  | <u>ib</u>         | <del> </del>                                     |
| Organizations relying on a current notice regarding disaster assistance, check l                      |   |                             |  |                   |  |
| c If the answer is "Yes" to question 5a(4), does the foundation claim exemption for                   |   |                             |  |                   |  |
| expenditure responsibility for the grant?   | N   | ∵/A                         | es No  |                   |  |
| If "Yes," attach the statement required by Regulations section 53.4945-5(d).                          |   | t                           |  | -                 |  |
| <b>6a</b> Did the foundation, during the year, receive any funds, directly or indirectly, to          | pay premiums on   | <del></del>                 | <b>□</b>   | ł                 |  |
| a personal benefit contract?  |   | Ye                          | s X No   | <del>  </del>     |  |
| <b>b</b> Did the foundation, during the year, pay premiums, directly or indirectly, on a p            | ersonal benefit contract?                                       |                             | <u> </u>   | <u> </u>          | ├ <del>^</del>                                   |
| If "Yes" to 6b, file Form 8870.   |   |                             | s X No   |                   |  |
| 7a At any time during the tax year, was the foundation a party to a prohibited tax s                  |   | Ye                          |  | ,                 | ├─-'   |
| b If "Yes," did the foundation receive any proceeds or have any net income attribu                    |   |                             | N/A  | 'b                | <del>                                     </del> |
| 8 Is the foundation subject to the section 4960 tax on payment(s) of more than \$                     | 1,000,000 in remuneration or                                    |                             | s X No   |                   |  |
| excess parachute payment(s) during the year?  Part VIII Information About Officers, Directors, Truste | es Foundation Man   |                             | S A NO   |                   | <u> </u>   |
| Paid Employees, and Contractors   | es, i oundation mai   | agers, riigiliy             |  |                   |  |
| 1 List all officers, directors, trustees, and foundation managers and t                               | neir compensation.  |                             |  |                   |  |
|   | (b) Title, and average  | (c) Compensation            | (d) Contributions to                                   | (e) Exp           | ense   |
| (a) Name and address  | hours per week devoted to position                              | (If not paid,<br>enter -0-) | employee benefit plans<br>and deferred<br>compensation | ačcount<br>allowa |  |
| MARCIA APPLEBAUM  | SECRETARY & T   |                             |  |                   |  |
| 480 PIERCE STREET, SUITE 200  | 1   |                             |  |                   |  |
| BIRMINGHAM, MI 48009  | 5.00  | 0.                          | 0.   |                   | 0.   |
| LISA S. APPLEBAUM   | VICE PRESIDEN   | Ţ.                          |  |                   |  |
| 480 PIERCE STREET, SUITE 200  | ]   |                             |  |                   |  |
| BIRMINGHAM, MI 48009  | 5.00  | 0.                          | 0.   |                   | 0.   |
| PAMELA A. APPLEBAUM   | PRESIDENT   |                             |  |                   |  |
| 480 PIERCE STREET, SUITE 200  |   |                             |  |                   |  |
| BIRMINGHAM, MI 48009  | 15.00   | 0.                          | 0.   |                   | 0.   |
|   |   |                             |  |                   |  |
|   |   |                             |  |                   |  |
|   |   |                             |  |                   |  |
| 2 Compensation of five highest-paid employees (other than those inc                                   |   | enter "NONE."               | (d) Contributions to                                   | (e) Exp           | nenee  |
| (a) Name and address of each employee paid more than \$50,000   | (b) Title, and average<br>hours per week<br>devoted to position | (c) Compensation            | employee benefit plans<br>and deferred<br>compensation | account           | , other  |
| NONE  |   |                             | •  |                   |  |
|   | 1   |                             |  |                   |  |
|   |   |                             |  |                   |  |
|   | <u> </u>  |                             |  |                   |  |
|   |   |                             |  |                   |  |
|   | ]   |                             |  |                   |  |
|   |   |                             |  |                   |  |
|   | _   |                             |  |                   |  |
|   |   |                             |  |                   |  |
|   |   |                             |  |                   |  |
|   |   |                             |  |                   |  |

Form **990-PF** (2018)

| Form 990-PF (2018) THE EUGENE APPLEBAUM FAMILY FOU  |                                   | 782955 Page 7    |
|---|-----------------------------------|------------------|
| Part VIII Information About Officers, Directors, Trustees, Foun-Paid Employees, and Contractors (continued) | dation Managers, Highly           |                  |
| 3 Five highest-paid independent contractors for professional services. If none, er                          | nter "NONE."                      |                  |
| (a) Name and address of each person paid more than \$50,000   | (b) Type of service               | (c) Compensation |
| NONE  |                                   |                  |
|   |                                   |                  |
|   |                                   |                  |
|   |                                   |                  |
|   |                                   |                  |
|   |                                   |                  |
|   |                                   |                  |
|   |                                   |                  |
|   |                                   |                  |
|   |                                   |                  |
| Total number of others receiving over \$50,000 for professional services                                    |                                   | ▶ 0              |
| Part IX-A Summary of Direct Charitable Activities   |                                   |                  |
| List the foundation's four largest direct charitable activities during the tax year. Include relevant st    | atistical information such as the | Expenses         |
| number of organizations and other beneficiaries served, conferences convened, research papers p             | roduced, etc.                     |                  |
| 1 <u>N/A</u>  |                                   |                  |
|   |                                   |                  |
|   |                                   |                  |
| 2   |                                   |                  |
|   |                                   |                  |
|   |                                   |                  |
| 3   |                                   |                  |
|   |                                   |                  |
|   |                                   |                  |
| 4   |                                   |                  |
|   |                                   |                  |
| Part IX-B Summary of Program-Related Investments  |                                   |                  |
| Describe the two largest program-related investments made by the foundation during the tax year             | on lines 1 and 2.                 | Amount           |
| 1 N/A   |                                   |                  |
|   |                                   |                  |
|   |                                   |                  |
| 2   |                                   |                  |
|   |                                   |                  |
|   |                                   | . <u></u>        |
| All other program-related investments. See instructions.  |                                   |                  |
| 3   |                                   |                  |
|   |                                   |                  |
|   |                                   |                  |
|   |                                   |                  |
|   |                                   |                  |
|   |                                   |                  |
| Total. Add lines 1 through 3  | <u> </u>                          | 0.               |

Form **990-PF** (2018)

| For | m 990-PF (2018) THE EUGENE APPLEBAUM FAMILY FOUNDATION   | <u> 38-278295</u>         | 5 Page <b>8</b> |
|-----|--|---------------------------|-----------------|
| P   | art X Minimum Investment Return (All domestic foundations must complete this part. Foreign foundations                       | ndations, see instruction | ns)             |
| 1   | Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes:                  |                           | <del></del>     |
| а   | Average monthly fair market value of securities  | 1a                        | 0.<br>08,639.   |
| b   | Average of monthly cash balances   | 16 1                      | 08,639.         |
| C   | Fair market value of all other assets  | 1 <u>c</u>                |                 |
| d   | Total (add lines 1a, b, and c)   | 1d 1                      | 08,639.         |
| е   | 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 1                       | 08,639.         |
| 4   | Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions)                    | 4                         | 1,630.          |
| 5   | Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4                         | 5 1                       | 07,009.         |
| 6   | Minimum investment return. Enter 5% of line 5  | 6                         | 5,350.          |
| P   | art XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations an               | d certain                 |                 |
|     | foreign organizations, check here  and do not complete this part.)   |                           |                 |
| 1   | Minimum investment return from Part X, line 6  | 1                         | 5,350.          |
| 2a  | Tax on investment income for 2018 from Part VI, line 5   |                           |                 |
| þ   | Income tax for 2018. (This does not include the tax from Part VI.)   |                           |                 |
| C   | Add lines 2a and 2b  | 20                        | 11.             |
| 3   | Distributable amount before adjustments. Subtract line 2c from line 1  | 3                         | 5,339.          |
| 4   | Recoveries of amounts treated as qualifying distributions  | 4                         | 200.            |
| 5   | Add lines 3 and 4  | 5                         | 5,539.          |
| 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                         | 5,539.          |
| P   | art XII Qualifying Distributions (see instructions)  |                           |                 |
| 1   | Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:                                   |                           |                 |
| a   |  | 1a 1,8                    | 45,436.         |
| 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:   |                           |                 |
| а   | Suitability test (prior IRS approval required)   | 3a                        |                 |
|     | 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 1,8                     | 45,436.         |
| 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                         | 11.             |
| 6   | Adjusted qualifying distributions. Subtract line 5 from line 4   | 6 1,8                     | 45,425.         |
|     | Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation q | ualifies for the section  |                 |
|     | 4940(e) reduction of tax in those years.   |                           |                 |

Part XIII Undistributed Income (see instructions)

|  | (a)<br>Corpus | (b)<br>Years prior to 2017 | (c)<br>2017 | ( <b>d)</b><br>2018 |
|--|---------------|----------------------------|-------------|---------------------|
| 1 Distributable amount for 2018 from Part XI, line 7   |               | `                          |             | 5,539.              |
| 2 Undistributed income, if any, as of the end of 2018  |               |                            |             |                     |
| a Enter amount for 2017 only   |               |                            | 0.          |                     |
| b Total for prior years:   |               |                            |             |                     |
| g town, prior yours  |               | 0.                         |             |                     |
| 3 Excess distributions carryover, if any, to 2018:   | •             |                            |             | -                   |
| a From 2013   3,094,802.   |               |                            |             |                     |
| b From 2014 3,403,589.   |               |                            |             |                     |
| c From 2015 2,643,744.   |               |                            |             |                     |
| d From 2016 2,849,703.   |               |                            |             |                     |
| e From 2017 4,029,909.   |               |                            |             |                     |
| f Total of lines 3a through e  | 16,021,747.   |                            |             |                     |
| 4 Qualifying distributions for 2018 from   |               |                            |             |                     |
| Part XII, line 4: > \$ 1,845,436.  |               |                            |             |                     |
| a Applied to 2017, but not more than line 2a   |               |                            | 0.          |                     |
| <b>b</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   |               |                            |             | 5,539.              |
| e Remaining amount distributed out of corpus   | 1,839,897.    |                            |             | - <b>,</b> :        |
| 5 Excess distributions carryover applied to 2018   | 0.            |                            |             | 0.                  |
| (If an amount appears in column (d), the same amount must be shown in column (a))  |               |                            |             |                     |
| 6 Enter the net total of each column as indicated below:   |               |                            | •           |                     |
| 2 Corpus Add lines 3f, 4c, and 4e Subtract line 5  | 17,861,644.   |                            |             |                     |
| 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   |               |                            |             | 0.                  |
| 7 Amounts treated as distributions out of  |               |                            |             | i                   |
| 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  | 3,094,802.    |                            |             |                     |
| 9 Excess distributions carryover to 2019.  |               |                            |             |                     |
| Subtract lines 7 and 8 from line 6a  | 14,766,842.   |                            |             |                     |
| 10 Analysis of line 9:   |               | l                          |             |                     |
| a Excess from 2014 3,403,589.  |               |                            |             |                     |
| b Excess from 2015 2,643,744.  |               | ļ                          |             |                     |
| c Excess from 2016 2,849,703.  |               |                            |             |                     |
| d Excess from 2017 4,029,909.  |               |                            |             |                     |
| e Excess from 2018 1,839,897.  |               |                            |             |                     |

|   | ENE APPLEBA                |                              |                             | 38-278                       | 32955 Page 10     |
|---|----------------------------|------------------------------|-----------------------------|------------------------------|-------------------|
| Part XIV Private Operating F  |                            |                              | -A, question 9)             | N/A                          |                   |
| 1 a If the foundation has received a ruling of                            |                            |                              |                             |                              |                   |
| foundation, and the ruling is effective fo                                |                            |                              | ▶ ∟                         |                              |                   |
| <b>b</b> Check box to indicate whether the found                          |                            | ng foundation described in   |                             | 4942(j)(3) or 49             | 42(j)(5)          |
| 2 a Enter the lesser of the adjusted net                                  | Tàx year                   |                              | Prior 3 years               | <u> </u>                     | <b>/</b>          |
| income from Part I or the minimum   | (a) 2018                   | <b>(b)</b> 2017              | (c) 2016                    | (d) 2015                     | (e) Total         |
| investment return from Part X for   |                            |                              | :                           |                              |                   |
| each year listed  |                            |                              |                             |                              |                   |
| <b>b</b> 85% of line 2a   |                            |                              |                             |                              |                   |
| c Qualifying distributions from Part XII,                                 |                            |                              |                             |                              |                   |
| line 4 for each year listed   |                            |                              |                             | 1                            |                   |
| d Amounts included in line 2c not   |                            |                              |                             |                              |                   |
| used directly for active conduct of                                       |                            |                              |                             |                              |                   |
| exempt activities   |                            |                              |                             |                              |                   |
| e Qualifying distributions made directly                                  |                            |                              | $\times$                    |                              |                   |
| for active conduct of exempt activities.                                  |                            | /                            |                             |                              |                   |
| Subtract line 2d from line 2c   |                            |                              |                             |                              |                   |
| 3 Complete 3a, b, or c for the  |                            | /                            |                             |                              |                   |
| alternative test relied upon.  a "Assets" alternative test - enter:       |                            |                              |                             |                              |                   |
| (1) Value of all assets   |                            |                              |                             |                              |                   |
| (2) Value of assets qualifying  | /                          |                              |                             |                              |                   |
| under section 4942(j)(3)(B)(i)  |                            |                              |                             |                              |                   |
| <b>b</b> "Endowment" alternative test - enter                             |                            |                              |                             |                              |                   |
| 2/3 of minimum investment return<br>shown in Part X, line 6 for each year |                            |                              |                             |                              |                   |
| listed  |                            |                              |                             |                              |                   |
| c "Support" alternative test - enter:                                     |                            |                              |                             | 1                            | \                 |
| (1) Total support other than gross  | 1                          |                              |                             |                              |                   |
| investment income (interest,  |                            |                              |                             |                              |                   |
| dividends, rents, payments on<br>securities loans (section                |                            |                              |                             |                              |                   |
| 512(a)(5)), or royalties)   |                            |                              |                             |                              |                   |
| (2) Support from general public   |                            |                              |                             |                              |                   |
| and 5 of more exempt<br>organizations as provided in                      |                            |                              |                             |                              |                   |
| section 4942(j)(3)(B)(iii)  |                            |                              |                             |                              |                   |
| (3) Largest amount of support from  |                            |                              |                             | -                            |                   |
| an exempt organization  |                            |                              |                             |                              |                   |
| (4) Gross investment income   |                            |                              | <u></u>                     |                              |                   |
| Part XV Supplementary Info  |                            |                              | f the foundation            | had \$5,000 or more          | e in assets       |
| at any time during t  | he year-see instri         | uctions.)                    |                             |                              |                   |
| 1 Information Regarding Foundation  |                            |                              |                             |                              |                   |
| a List any managers of the foundation wh                                  |                            |                              | ibutions received by the    | foundation before the close  | of any tax        |
| year (but only if they have contributed r                                 | nore than \$5,000). (See s | ection 507(d)(2).)           |                             |                              |                   |
| SEE STATEMENT 3   |                            |                              |                             |                              |                   |
| <b>b</b> List any managers of the foundation wh                           |                            |                              | or an equally large portion | on of the ownership of a par | tnership or       |
| other entity) of which the foundation ha                                  | s a 10% or greater interes | 5 <b>.</b>                   |                             |                              |                   |
| NONE  |                            |                              |                             |                              |                   |
| 2 Information Regarding Contributi  |                            |                              |                             |                              |                   |
| Check here <b>X</b> if the foundation of                                  |                            |                              |                             |                              | sts for funds. If |
| the foundation makes gifts, grants, etc.,                                 |                            |                              |                             |                              |                   |
| a The name, address, and telephone num                                    | per or email address of th | e person to whom applica     | ations should be address    | sed:                         |                   |
|   |                            |                              |                             |                              |                   |
|   |                            |                              |                             |                              |                   |
| <b>b</b> The form in which applications should be                         | e submitted and informat   | tion and materials they sh   | ould include:               |                              |                   |
| Any submission deadlines  |                            |                              |                             |                              |                   |
| c Any submission deadlines:   |                            |                              |                             |                              |                   |
| d Any restrictions or limitations on award                                | s, such as by geographica  | al areas, charitable fields. | kinds of institutions, or o | other factors:               | <u></u> .         |

0.

Total

Form **990-PF** (2018)

823621 12-11-18

THE EUGENE APPLEBAUM FAMILY FOUNDATION

**Analysis of Income-Producing Activities** 

| Enter gross amounts unless otherwise indicated.                 | Unrelated business income |                         |  | ded by section 512, 513, or 514 | (e)                               |  |
|---|---------------------------|-------------------------|--|---------------------------------|-----------------------------------|--|
|   | (a)<br>Business           | (b)<br>Amount           | Exclu-<br>sion<br>code                           | (d)<br>Amount                   | Related or exempt function income |  |
| 1 Program service revenue:                                      | code                      |                         | COUB   |                                 |                                   |  |
| <b>a</b>  |                           |                         | -  |                                 | <del></del>                       |  |
| b   |                           |                         | -  |                                 |                                   |  |
| c   |                           |                         | ļ  |                                 |                                   |  |
| d   |                           |                         | ļ  |                                 |                                   |  |
| e   |                           |                         |  |                                 |                                   |  |
| f   |                           |                         |  |                                 |                                   |  |
| g Fees and contracts from government agencies                   |                           |                         | <u> </u>   |                                 |                                   |  |
| 2 Membership dues and assessments                               |                           |                         | <u> </u>   |                                 |                                   |  |
| 3 Interest on savings and temporary cash                        |                           |                         |  |                                 |                                   |  |
| investments   |                           |                         | 1  |                                 |                                   |  |
| 4 Dividends and interest from securities                        |                           |                         |  |                                 |                                   |  |
| 5 Net rental income or (loss) from real estate.                 |                           |                         |  |                                 |                                   |  |
|   |                           |                         | <del>                                     </del> |                                 |                                   |  |
|   | -                         |                         | -  | ,                               |                                   |  |
| b Not debt-financed property                                    |                           |                         |  |                                 |                                   |  |
| 6 Net rental income or (loss) from personal                     |                           |                         |  |                                 | ,                                 |  |
| property  |                           |                         | 4.4  | 4 405                           |                                   |  |
| 7 Other investment income                                       |                           |                         | 14   | 1,105.                          |                                   |  |
| 8 Gain or (loss) from sales of assets other                     |                           |                         |  |                                 |                                   |  |
| than inventory  |                           |                         |  |                                 |                                   |  |
| 9 Net income or (loss) from special events                      |                           |                         | <u> </u>   |                                 |                                   |  |
| 10 Gross profit or (loss) from sales of inventory               |                           |                         |  |                                 |                                   |  |
| 11 Other revenue:   |                           |                         |  |                                 |                                   |  |
| a TAX REFUND  |                           |                         | 01   | 56,700.                         |                                   |  |
| a TAX REFUND  |                           |                         |  |                                 |                                   |  |
| c   |                           |                         |  |                                 |                                   |  |
|   |                           |                         | 1  |                                 |                                   |  |
|   |                           |                         |  |                                 |                                   |  |
| 6   |                           | 0.                      | $\vdash$   | 57,805.                         | 0.                                |  |
| 12 Subtotal. Add columns (b), (d), and (e)                      |                           |                         |  |                                 | 57,805.                           |  |
| 13 Total. Add line 12, columns (b), (d), and (e)                |                           |                         |  | 13_                             | 31,003.                           |  |
| (See worksheet in line 13 instructions to verify calculations.) |                           |                         |  |                                 |                                   |  |
| Part XVI-B Relationship of Activities to                        | the Acco                  | emplishment of Exe      | mpt  | Purposes                        |                                   |  |
| Line No. Explain below how each activity for which incom        |                           |                         | contrib  | uted importantly to the accom   | plishment of                      |  |
| the foundation's exempt purposes (other than b                  | y providing tu            | nus for such purposes). |  | <del></del>                     | <b></b>                           |  |
|   |                           |                         |  |                                 |                                   |  |
|   |                           |                         |  |                                 |                                   |  |
|   |                           |                         |  |                                 |                                   |  |
|   | <u> </u>                  |                         |  |                                 |                                   |  |
|   |                           |                         |  |                                 |                                   |  |
|   |                           |                         |  |                                 |                                   |  |
|   |                           |                         |  |                                 |                                   |  |
|   | .,                        |                         |  |                                 |                                   |  |
|   |                           |                         |  |                                 |                                   |  |
|   |                           |                         |  |                                 |                                   |  |
|   |                           |                         |  |                                 |                                   |  |
|   | ·                         |                         |  |                                 |                                   |  |
|   |                           | <del></del>             |  |                                 | · <del></del>                     |  |
|   |                           |                         |  |                                 |                                   |  |
|   |                           | -                       |  |                                 |                                   |  |
|   | _                         |                         |  |                                 |                                   |  |
|   |                           |                         |  |                                 |                                   |  |
|   |                           |                         |  |                                 |                                   |  |
|   |                           |                         |  |                                 |                                   |  |
|   |                           |                         |  |                                 |                                   |  |

| Part XVII  | Information Re<br>Exempt Organ          |                           | isfers to a         | nd Transactions a                 | nd Relationsh            | ips With Noncha                  | ritable                                   |                        |        |
|--|---|---------------------------|---------------------|-----------------------------------|--------------------------|----------------------------------|---|------------------------|--------|
| 1 Did the  | organization directly or indi           |                           | of the followin     | n with any other organization     | on described in sect     | ion 501(c)                       |   | Yes                    | No     |
|  |   |                           |                     |                                   |                          | 1011 30 1(0)                     |   |                        |        |
| (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) Cas  |   | 20011 10 4 110110114111   | abio ovembr or f    | jameanon on                       |                          |                                  | 1a(1)                                     |                        | X      |
|  | er assets                               |                           |                     |                                   |                          |                                  | 1a(2)                                     | $\overline{}$          | Х      |
| b Other tra  |   |                           |                     |                                   |                          |                                  |   |                        |        |
| -  | es of assets to a noncharita            | ble exempt organiza       | ation               |                                   |                          |                                  | 1b(1)                                     |                        | X      |
|  | chases of assets from a no              |                           |                     |                                   |                          |                                  | 1b(2)                                     |                        | X      |
| , ,  | ntal of facilities, equipment,          |                           |                     |                                   |                          |                                  | 15(3)                                     |                        | Х      |
| • •  | mbursement arrangements                 |                           |                     |                                   |                          |                                  | 1b(4)                                     |                        | х      |
| • •  | ins or loan guarantees                  |                           |                     |                                   |                          |                                  | 1b(5)                                     |                        | Х      |
| • •  | formance of services or me              | embership or fundra       | ısıng solicitatio   | ns                                |                          |                                  | 1b(6)                                     |                        | Х      |
| ٠,   | of facilities, equipment, ma            | •                         | =                   |                                   |                          |                                  | 1c  |                        | Х      |
| d If the an  | swer to any of the above is             | "Yes," complete the       | following sche      | dule. Column (b) should al        | ways show the fair i     | market value of the goods        | , other ass                               | ets,                   |        |
| or service   | ces given by the reporting fo           | oundation. If the fou     | indation receive    | ed less than fair market valu     | ie in any transaction    | or sharing arrangement,          | show in                                   |                        |        |
| column   | (d) the value of the goods,             |                           |                     |                                   |                          |                                  |   |                        |        |
| (a) Line no  | (b) Amount involved                     | (c) Name o                | of noncharitable    | e exempt organization             | (d) Description          | n of transfers, transactions, an | d sharing arr                             | angemen                | ıts    |
|  |   |                           | N/A                 |                                   |                          |                                  |   |                        |        |
|  |   |                           |                     | <u> </u>                          |                          |                                  |   |                        |        |
|  |   |                           |                     |                                   |                          |                                  |   |                        |        |
|  |   |                           |                     |                                   |                          |                                  |   |                        |        |
|  |   | ļ                         |                     |                                   |                          |                                  |   |                        |        |
|  |   | ļ                         |                     |                                   |                          |                                  |   |                        |        |
|  |   | ļ                         |                     |                                   |                          |                                  |   |                        |        |
|  |   | ļ                         |                     |                                   |                          |                                  |   |                        |        |
|  |   |                           |                     |                                   | <del>_</del>             |                                  |   |                        |        |
|  |   |                           |                     |                                   |                          |                                  |   |                        |        |
|  |   |                           |                     |                                   |                          |                                  |   |                        |        |
|  |   |                           |                     |                                   |                          |                                  |   |                        |        |
|  |   |                           |                     | <u></u>                           |                          | ·· <del>···</del> ··             |   |                        |        |
|  |   |                           |                     |                                   | <del>-  </del>           | <del>,</del>                     |   |                        |        |
|  |   | <del> </del>              |                     |                                   | <del></del>              | <del> </del>                     |   | —                      |        |
|  | <del></del>                             | <u></u>                   |                     |                                   |                          |                                  |   |                        |        |
|  | undation directly or indirec            | •                         |                     | or more tax-exempt organi         | izations described       |                                  |   | Γ₩                     | No     |
|  | on 501(c) (other than sectio            |                           | ection 5277         |                                   |                          |                                  | Yes                                       |                        | 7 1/10 |
| <u><b>b</b></u> If "Yes,"  | complete the following sch              |                           | <del></del>         | (b) Type of organization          | 1                        | (c) Description of relation      | nchin                                     |                        |        |
|  | (a) Name of org                         | janization                |                     | (b) Type of organization          |                          | (c) Description of relation      | ыпр                                       |                        |        |
|  | N/A                                     |                           |                     | -                                 |                          |                                  |   |                        |        |
|  |   |                           |                     |                                   |                          |                                  |   |                        |        |
|  |   |                           |                     |                                   |                          | <del></del>                      |   |                        |        |
|  |   |                           |                     |                                   |                          |                                  |   |                        |        |
| Und  | er penalties of perjury, I declare t    | that I have examined thi  | s return, including | accompanying schedules and si     | Latements, and to the be | st of my knowledge               |   |                        |        |
| Sign Here  | belief, itserve, correct, and corr      | nplete Declaration of pro |                     | taxpayer) is based on all informa | tion of which reparer h  | as any knowledge                 | May the IRS of eturn with the shown below | e prepare<br>? See ins | er e   |
| Si   | gnature of officer or trustee           | <u> </u>                  | /_                  | / Dayte                           | Title                    | Charle To d I neve               |   |                        |        |
|  | Print/Type preparer's na                |                           | Preparer's          | ignatufe/                         | Date                     | Check if PTIN                    | 1   |                        |        |
| D=1-4  | BENEDICT P                              |                           | L KIT               | yhr-                              | 10/07:55                 | self- employed                   |   |                        |        |
| Paid   | RYBICKI, C                              |                           | BENEDI              | OT P. RYBIC                       | <u> 10/05/20 </u>        |                                  | 00360                                     |                        |        |
| Preparer   | 111111111111111111111111111111111111111 | REN MAYHE                 | SW '                | -                                 |                          | Firm's EIN ► 38-2                | 44925                                     | / U                    |        |
| Use Only   |   |                           | - n=1               |                                   |                          | <del> </del>                     |   |                        |        |
|  | Firm's address ► 30                     |                           |                     | EK KUAD                           |                          | Phone no. 248-2                  | 244 2                                     | 000                    |        |
| TROY, MI 48084Pr   |   |                           |                     |                                   |                          |                                  | <del></del> 2                             | 000                    |        |

### 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.

OMB No 1545-0047

Name of the organization

► Go to www.irs.gov/Form990 for the latest information.

**Employer identification number** 

38-2782955 EUGENE APPLEBAUM FAMILY FOUNDATION THE Organization type (check one) Filers of: Section: \_\_\_ 501(c)( ) (enter number) organization Form 990 or 990-EZ 4947(a)(1) nonexempt charitable trust not treated as a private foundation 527 political organization Form 990-PF X 501(c)(3) exempt private foundation 4947(a)(1) nonexempt charitable trust treated as a private foundation 501(c)(3) taxable private foundation Check 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** X 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

I HA For Paperwork Reduction Act Notice, see the instructions for Form 990, 990-EZ, or 990-PF.

certify that it doesn't meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF)

Schedule B (Form 990, 990-EZ, or 990-PF) (2018)

Name of organization

Employer identification number

## THE EUGENE APPLEBAUM FAMILY FOUNDATION

38-2782955

| Part I      | Contributors (see instructions) Use duplicate copies of Part I if       | additional space is needed. |  |
|-------------|---|-----------------------------|--|
| (a)<br>No.  | (b)<br>Name, address, and ZIP + 4                                       | (c)<br>Total contributions  | (d) Type of contribution   |
| 1           | PAMELA A. APPLEBAUM  480 PIERCE STREET, SUITE 200  BIRMINGHAM, MI 48009 | \$\$                        | Person X Payroll   |
| (a)<br>No.  | (b)<br>Name, address, and ZIP + 4                                       | (c)<br>Total contributions  | (d) Type of contribution   |
| 2           | LISA S. APPLEBAUM  480 PIERCE STREET, SUITE 200  BIRMINGHAM, MI 48009   | \$ 98,000.                  | Person X Payroll  Noncash  (Complete Part II for noncash contributions)                            |
| (a)<br>No.  | (b)<br>Name, address, and ZIP + 4                                       | (c) Total contributions     | (d) Type of contribution   |
| 3           | MARCIA APPLEBAUM  480 PIERCE STREET, SUITE 200  BIRMINGHAM, MI 48009    | \$ 1,709,800.               | Person X Payroll   |
| (a)<br>No.  | (b)<br>Name, address, and ZIP + 4                                       | (c) Total contributions     | (d)<br>Type of contribution  |
|             |   | \$                          | Person Payroll Oncash Complete Part II for noncash contributions )                                 |
| (a)<br>No.  | (b)<br>Name, address, and ZIP + 4                                       | (c) Total contributions     | (d)<br>Type of contribution  |
|             |   | \$                          | Person Payroll Noncash (Complete Part II for noncash contributions)                                |
| (a)<br>No.  | (b) Name, address, and ZIP + 4  | (c) Total contributions     | (d)<br>Type of contribution  |
| 823452 11-0 |   | \$Schedule R /Form          | Person Payroll Noncash (Complete Part II for noncash contributions) 990, 990-EZ, or 990-PF) (2018) |

Employer identification number

# THE EUGENE APPLEBAUM FAMILY FOUNDATION

38-2782955

| Part II                        | Noncash Property (see instructions). Use duplicate copies of Part II if | additional space is needed.              |                      |
|--------------------------------|---|--|----------------------|
| (a)<br>No.<br>from<br>Part I   | (b) Description of noncash property given                               | (c) FMV (or estimate) (See instructions) | (d)<br>Date received |
|                                |   | \$                                       |                      |
| (a)<br>No.<br>from<br>Part I   | (b)  Description of noncash property given                              | (c) FMV (or estimate) (See instructions) | (d)<br>Date received |
|                                |   | \$                                       |                      |
| (a)<br>No.<br>from<br>Part I   | (b)<br>Description of noncash property given                            | (c) FMV (or estimate) (See instructions) | (d)<br>Date received |
|                                |   | \$                                       |                      |
| (a)<br>No. /<br>from<br>Part I | (b)<br>Description of noncash property given                            | (c) FMV (or estimate) (See instructions) | (d)<br>Date received |
|                                |   | \$                                       |                      |
| (a)<br>No.<br>from<br>Part I   | (b)  Description of noncash property given                              | (c) FMV (or estimate) (See instructions) | (d)<br>Date received |
|                                |   | \$                                       |                      |
| (a)<br>No.<br>from<br>Part I   | (b)  Description of noncash property given                              | (c) FMV (or estimate) (See instructions) | (d)<br>Date received |
|                                |   | \$                                       |                      |

Employer identification number

| THE EU                    | IGENE APPLEBAUM FAMILY I   | FOUNDATION  |                       | 38-2782955                            |
|---------------------------|--|---|-----------------------|---------------------------------------|
| Part III                  | Exclusively religious, charitable, etc., contribution from any one contributor. Complete columns (a) completing Part III, enter the total of exclusively religious, Use duplicate copies of Part III if additional | ons to organizations described in se<br>through (e) and the following line ent<br>charitable, etc contributions of \$1,000 or | try For organizations |                                       |
| (a) No.<br>from<br>Part I | (b) Purpose of gift  | (c) Use of gift   | (d) Desc              | ription of how gift is held           |
|                           |  |   |                       |                                       |
|                           |  | (e) Transfer of gift  | t                     |                                       |
|                           | Transferee's name, address, ar   | nd ZIP + 4  | Relationship of tran  | nsferor to transferee                 |
| (a) No.<br>from<br>Part I | (b) Purpose of gift  | (c) Use of gift   | (d) Desc              | ription of how gift is held           |
|                           |  |   |                       |                                       |
|                           |  | (e) Transfer of gif   | <u> </u>              | · · · · · · · · · · · · · · · · · · · |
| :                         | Transferee's name, address, an   | nd ZIP + 4  | Relationship of tran  | nsferor to transferee                 |
| (a) No.<br>from<br>Part I | (b) Purpose of gift  | (c) Use of gift   | (d) Desc              | ription of how gift is held           |
|                           |  | (e) Transfer of gif   | 1                     |                                       |
|                           | Transferee's name, address, an   | nd ZIP + 4  | Relationship of trai  | nsferor to transferee                 |
| (a) No.<br>from<br>Part I | (b) Purpose of gift  | (c) Use of gift   | (d) Desc              | ription of how gift is held           |
|                           |  |   |                       |                                       |
|                           | Transferee's name, address, ar   | (e) Transfer of gif   |                       | nsferor to transferee                 |
|                           |  |   |                       |                                       |

| FORM 990-PF OTHER                     | INCOME                      |                                   | STATEMENT 1                   |
|---------------------------------------|-----------------------------|-----------------------------------|-------------------------------|
| DESCRIPTION                           | (A)<br>REVENUE<br>PER BOOKS | (B)<br>NET INVEST-<br>MENT INCOME | (C)<br>ADJUSTED<br>NET INCOME |
| LITIGATION SETTLEMENT TAX REFUND      | 1,105.<br>56,700.           | 1,105.                            |                               |
| TOTAL TO FORM 990-PF, PART I, LINE 11 | 57,805.                     | 1,105.                            |                               |

FOOTNOTES

STATEMENT 2

PAGE 2 BALANCE SHEET COLUMN C
THIS FOUNDATION HOLDS THE REMAINDER INTEREST IN THE EUGENE
APPLEBAUM CHARITABLE REMAINDER TRUST EIN: 38-3228858

FORM 990-PF

PART XV - LINE 1A LIST OF FOUNDATION MANAGERS STATEMENT 3

NAME OF MANAGER

MARCIA APPLEBAUM LISA S. APPLEBAUM PAMELA A. APPLEBAUM

# Eugene Applebaum Family Foundation Contributions for year ending 11/30/2019

|  | Family Foundation Family Foundation Family Foundation Family Foundation Family Foundation Family Foundation Family Foundation Family Foundation Family Foundation Family Foundation | A Hole in the Roof Foundation<br>Alpert Jewish Famity Service<br>American Frends of Israel Mus | 29836 Telegraph Road<br>5841 Corporate Way. Surte 200 | Southfield<br>West Patm Beach | ≨ ⊏ | 48034 Unrel | ۲<br>د     | tion & Research       | 2000 00<br>260 00 |                 |
|--|---|--|---|-------------------------------|-----|-------------|------------|-----------------------|-------------------|-----------------|
| Anter James Registration of State Control of State Contro | Family Foundation Family Foundation Family Foundation Family Foundation Family Foundation Family Foundation Family Foundation   | Alpert Jewish Family Service<br>American Freeds of Israel Mus                                  | 5841 Corporate Way, Surle 200                         | West Patm Beach               | 4   |             |            | tion & Research       | 260 00            |                 |
| Authorist Freide of Real-Market State 1979   | Family Foundation Family Foundation Family Foundation Family Foundation Family Foundation   | American Friends of Israel Mus   |   |                               |     | 3340/ Unre  | 3          |                       |                   |                 |
| Annexed prises of pages 200 (1975) and the control of pages 200 (1 | Family Foundation Family Foundation Family Foundation Family Foundation   |  | 545 Fifth Avenue, Surte 920                           | New York                      |     | 9           | ပ          | tion & Research       | 3 800 00          | -               |
| Marche Friends   March   Mar   | Family Foundation<br>Family Foundation<br>Family Foundation   | American Friends of Magen Davi   | 20 W, 36th Street, Suite 1100                         | New York                      |     |             | ပ          | tion & Research       | 36 000 00         |                 |
| Particular   Par   | Family Foundation   | American Friends of Reuth  | 600 Columbus Avenue, 9 L                              | New York                      |     |             | S<br>C     | tion & Research       | 2,000 00          |                 |
| Strategies   Str   | To Tail Annual Control  | Amencan Fnends of Shalva   | 315 5th Ave   | New York                      |     |             | ž į        | tion & Research       | 250 00            |                 |
| Properties of the control co   | in in a companion   | Amencan Fnends of Yahaden U  | 25 West 45th Street, Surte 1405                       | New York                      |     |             | 2 8        | lion & Research       | 25,000 00         |                 |
| Common Secretary   15 years    | Family Foundation   | Beaumont Foundation  | 3/11 West 13 Mile Road                                | Royal Cak                     |     |             | 2 8        | lion & Research       | 00 000,052        |                 |
| Comprision Starts 2 2444  Comparison Starts  | Family Foundation   | Beaumont Health Foundation   | 2000 Town Center, Suite 1200                          | Southreid                     |     |             | 2 6        | tion & Research       | 00000             |                 |
| Comprised teacher thanks to comprise the control of the comprised teacher thanks to comprise the comprised teacher thanks to comprise the comprised teacher thanks to comprise the comprised teacher thanks to comprise the comprised teacher thanks to comprise the comprised teacher thanks to comprise the comprised teacher thanks to comprise the comprised teacher thanks to comprise the comprised teacher thanks the comprised | ramily roundation   | Brigham and Women's Hospital   | A PIRIOR STREET                                       | Dotar                         | •   |             | 2 8        | tion & Decearch       | 226 000           |                 |
| Continued   Cont   | Comb Constant   | Capucini Soup raicileii  | 5025 Mount Euron Sueer                                | West Bloomfold                |     |             | <u>.</u>   | tion & Geseemh        | 20000             |                 |
| December 10      | Family Foundation   | Congregation Sherrar Zodek   | 27175 Bell Bood                                       | Southfield                    |     |             | מ          | tion & Research       | 909               |                 |
| Particular   Development Companies   2015 Weekeed   | Family Foundation   | Congregation Contact Leader  | 220 Suntse Avenue Surfe 204                           | Patr Beach                    |     |             | 9          | tion & Research       | 25.000.00         |                 |
| Exercised Symptomy Contention   1111 Notestands   1111 Notestand   | Family Foundation   | Darknom Delrot   | 676 Fast Grand Blvd                                   | Detroit                       |     |             | )<br>A     | tion & Research       | 12 000 00         |                 |
| Particular   | Family Foundation   | David-Horodoker Organization   | 31305 Woodside Drive                                  | Franklin                      |     |             | 2          | lion & Research       | 576 00            |                 |
| Continued   Cont   | Family Condition  | Detroit Symphopy Orchestra   | 3711 Woodward Avenue                                  | Detroit                       |     |             | , d        | tion & Research       | 95 100 00         |                 |
| Control  | Family Foundation   | Defroit Zoological Society   | 8450 W 10 Mile Road                                   | Royal Cak                     |     |             | , C        | tion & Research       | 1 500 00          | Contract Honor  |
| Pages   Page   | Family Foundation   | Einstein Method  |   | O O                           |     | _           | <u>و</u>   | tion & Research       | 2 500 00          | でこうではきろう        |
| 1,800  | Family Foundation   | Epilepsy Foundation GLA/C&C Be   | 5777 West Century Boulevard, #820                     | Los Angeles                   |     | _           | <u>8</u>   | tion & Research       | 200 00            | 00 07 11 7 00 7 |
| Processing of Certain Make-Dream   46.8 Euclarian Annua, Sand 100   Regio Civil Mile   Feetball Certain Annua, Sand 100   Region Certain Annua, Sand 100   Region Civil Mile   Feetball Certain Annua, Sand 100   Region Certain Annua, Sand 100   Region Civil Mile   Feetball Certain Annua, Sand 100   Region Certain Annua,    | Family Foundation   | Fleece and Thank You - Beaumont Pilot Program  | 24715 Crestview Ct                                    | Farmington Hills              |     | _           | S          | tion & Research       | 3.053.00          |                 |
| Particulation   Particulatio   | Family Foundation   | Friends of Camp Mak-A-Dream  | 408 S Lafavette Avenue. Surte 100                     | Roval Oak                     |     | _           | 5          | tion & Research       | 200 00            | 00.00           |
| Provision   Prov   | Family Foundation   | Friendship Circle  | 6892 West Maple Road                                  | West Bloomfield               |     | _           | S.         | tion & Research       | 20                | 000000          |
|  | Family Foundation   | Hebrew Free Loan   | 6735 Telegraph Road #300                              | Bloomfield Hills              |     | _           | 2          |                       | 38 00             |                 |
| Processed from the counting Center   2012 Octanual Lies Road   Farmington His Mark   813 Junesland Research   110 Kill   10    | Family Foundation   | Higher Hopes   | 8898 Commerce Road 5C                                 | Commerce Township             |     | _           | ပ္         |                       | 5,000 00          | 00000           |
| Particulation   Institution African   Author     | Family Foundation   | Holocaust Memorial Center  | 28123 Orchard Lake Road                               | Farmington Hills              |     |             | S          |                       | 1,100 00          | CV 000 E        |
| Controllation   Controllation Committee   220 ft Agrid States   150 ft Agrid States      | Family Foundation   | Historical Society of Palm Beach County  | 300 N Dizae HE+WY                                     | West Palm Beach               |     |             | 5          | tion & Research       | 100 00            | 0000<br>0000    |
| 1,445    1   | Family Foundation   | Innovation Africa  | 520 8th Avenue, 15th Floor                            | New York                      |     | _           | ည          | ition & Research      | 360 06            |                 |
| Formalistic      | Family Foundation   | Jewish Distribution Committee  | 220 E 42nd Street                                     | New York                      |     | _           | 5          | ition & Research      | 9 008'9           | 1 8/K / 26 CM   |
| Federation   August Federation of Panis Baseh   4615 Community Other   4625 Ministry   4625    | Family Foundation   | Jewish Family Services   | 6555 West Maple Road                                  | West Bloomfield               |     |             | 5          | tion & Research       | 98 OC             | 3,770,7         |
|  | Family Foundation   | Jewish Federation of Metro Detroit   | 6555 West Maple Road                                  | West Bloomfield               |     | _           | ပ          | tion & Research       | 200,050 00        |                 |
| James Hospine C Abustinony Ne  | Family Foundation   | Jewish Federation of Palm Beach  | 4601 Community Drive                                  | West Palm Beach               |     | _           | -<br>5     | tion & Research       | 21 238 00         |                 |
| Name   | Family Foundation   | Jewish Hospice & Chaplaincy Ne   | 6555 W Maple Road                                     | West Bloomfield               |     | _           | <u>م</u>   | tion & Research       | 30,000 00         | 7               |
| Controllation   Controllatio   | Family Foundation   | Jewish Federations of North America  | 25 Broadway, 17th Floor                               | New York                      |     | _           | 5          | tion & Research       | 20,000 00         | >               |
| Controllation   Controllatio   | Family Foundation   | Karmanos Cancer Institute  | 4100 John R   | Detroil                       |     |             | ပ္         |                       | 200 00            |                 |
| Southerstein         Lung Timesilient Project         250 Moudanh Arenue, Suite 2111         NAY voit M.         NY 1002         Unrelated PC Education & Research National Mayor Clime           Foundation         Michagen Education Excellence         200 First Street SW         Land Timesilient Project         Michagen Education Excellence         200 First Street SW         Land Mayor Clime         Michagen Education Excellence         200 First Street SW         Land Abort         Michagen Human Society         Michagen PC Education & Research Activation of Michagen PC Education & Research Activation Michagen Brook Activated Michagen Region         Michagen Human Society         Michagen PC Education & Research Activation & Research Activation Michagen Region         Michagen PC Education & Research Activation & Research Activation Michagen Region         Michagen PC Education & Research Activation & Research Activation & Research Activation & Research Activation & Michagen Region         Michagen PC Education & Research Activation & Research Activation & Research Activation & Research Activation & Michagen PC Education & Research Activation & Michagen PC Education & Research Activation & Michagen PC Education & Research Activ   | Family Foundation   | Kravis Center for the Performi   | 701 Okeechobee Boulevard                              | West Palm Beach               |     | _           | <u>က</u>   |                       | 9,000 00          |                 |
| Mayo Cumination         Mayage Education Excellence         2001 Pelagraph Raad Suite 230         Rodobster         Assistant A  | Family Foundation   | Lung Transplant Project  | 590 Madison Avenue, Suite 2111                        | New York                      |     |             | ပ္         |                       | 100 00            |                 |
| Michael   Mich   | Family Foundation   | Mayo Clinic  | 200 First Street SW                                   | Kochester                     |     | _           | 2 6        | ition & Research      | 300,000 00        |                 |
| Foundation         Michagan Function         Michagan Function         Michagan Function         Michagan Function         Control Function         Michagan Function         Control Function         Michagan Function         Control Function<   | Family Foundation   | Michigan Education Excellence  | P O Box 10030   | Lansing                       |     |             | 2 6        | nion & Research       | 00 000'5/         |                 |
| Maintager   Main   | Family Foundation   | Michigan Humane Society  | 30300 Telegraph Road Sune 220                         | Bingnam rams                  |     |             | 2 6        | tion & Research       | 00 001            |                 |
| Misserin   | ramily roundation   | Michigan Invester Foundation   | 4030 Land Day   | Ann Appor                     |     |             | 2 6        |                       | 00 000,01         |                 |
| Name   | Family Foundation   | MorseLife Foundation   | 4920 Lonng Dave                                       | West Paim Beach               |     |             | 2 8        |                       | 00 005,           |                 |
| Majoral Majo   | Family Foundation   | Murch of Posternovice At Defent  | 4464 Monday Augus                                     | Octor                         |     |             | ָ<br>נ     |                       | 8 6 6 6           |                 |
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| Pain Beach Charter Association   139 North Country Road, #33   Pain Beach   FL   33480   Unrelated PC Education & Research PL   1358 Boadway, Sute 1509   New York   NY   10018   Unrelated PC Education & Research PL   1358 Boadway, Sute 1509   Chicago   Line 6606   Unrelated PC Education & Research PL   13480   Unrelated PC Education & Research PL   13480   Unrelated PC Education & Research Application & R   | Family Foundation   | ORT America Michigan Begins  | 6734 Telegraph Rd Sude 374                            | Rhomfeld Hills                |     |             | 2 6        | mon & Recearch        | 2,000,00          |                 |
| Pain Beach County Club Foundation         780 N Ocean BM         Pain Beach         FL         33480         Unrelated Dross Education & Research 44 Cocoand, Rew Sute M.201         Pain Beach County Club Foundation         Pain Beach County Club Processor         Pain Beach County Club Processor         Pain Beach County Club Research Club Research Club Research Club Research Ann Associated and Processor Club Research Club   | Family Foundation   | Palm Beach Core Association  | 139 North Country Road #33                            | Patm Reach                    |     |             | , C        | tion & Research       | 100 00            |                 |
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| Rambow Connection         G21 W University Dr.         Rochester         MI         43307         Unrelated         PC Education & Research Instance           Starfish Family Services         3000 Hvkeky         3000 Hvkeky         1000 Hvkeky         10   | Family Foundation   | PJ Library   | 30 S Wells Street                                     | Chicago                       |     | _           | 8          |                       | 1,000 00          |                 |
| Starfish Family Services   Starfish Services   Starfish Services   Starfish Services   Starfish Services   Starfish Services   Starfish Services   Starfish Services   Starfish Services   Starfish Services   Starfish Services   Starfish Services   Starfish Services   Starfish Services   Starfish Services   Starfish    | Family Foundation   | Rainbow Connection   | 621 W University Dr                                   | Rochester                     |     | _           | 5          |                       | 25 00             |                 |
| Tamarack Camps   G132 Telegraph Road Sulte 380   Bloomfield Hills   MI   48301   Unrelated PC Education & Research Temple Beth E.  | Family Foundation   | Starfish Family Services   | 3000 Hiveley  | Inkster                       |     | _           | 5          |                       | 2,000 00          |                 |
| Temple Beth Et   Temple Beth Et   Tatto Telegraph Road   | Family Foundation   | Tamarack Camps   | 6735 Telegraph Road Suite 380                         | Bloomfield Hills              |     | _           | 5          |                       | 536 00            |                 |
| The Fund For Park Avenue   | Family Foundation   | Temple Beth EL   | 7400 Telegraph Road                                   | Bloomfield Hills              |     |             | 2          | tion & Research       | 108 00            |                 |
| The Henry Ford   | Family Foundation   | The Fund For Park Avenue   |   | New York                      |     |             | 5          | ation & Research      | 25 00             |                 |
| The Society of the Four Aris   100 Four Aris plaza   100 Four Ar   | Family Foundation   | The Henry Ford   | 20900 Oakwood Blvd                                    | Dearbom                       | •   |             | 5          | ation & Research      | 25 00             |                 |
| United Jewash Foundation of Metro Defroid  United Jewash Foundation of Metro Defroid  United Jewash Foundation of Metro Defroid  United Jewash Foundation of Metro Defroid  United Jewash Robinson  Wayne State University  Wash State University  Wash State University  Wayne State University  Wayn | Family Foundation   | The Society of the Four Arts   | 100 Four Arts Plaza                                   | Palm Beach                    |     |             | 5          | ation & Research      | 1 000 00          |                 |
| United Way of Southeast Michigan 3003 South State Street, Suite 8000  United Way of Southeast Michigan 3003 South State Street, Suite 8000  University of Michigan 3003 South State Street, Suite 8000  University of Michigan 3003 South State Street, Suite 8000  University of Michigan 3003 South State Street, Suite 8000  University of State Street Stree | Family Foundation   | United Jewish Foundation of Metro Detroit  | 6735 Telegraph Road                                   | Bloomfield Hills              |     |             | ည          | ation & Research      | 282 00            |                 |
| University of Michigan   3003 South State Street, Suite 8000   Ann Arbor   MI   48109   Unrelated PC Education & Research  | Family Foundation   | United Way of Southeast Michigan   | 660 Woodward Ave Surte 300                            | Defroit                       |     |             | <u>۾</u>   | ation & Research      | 25,000 00         |                 |
| Wayne State Unrelated PC Education & Research Wayne State Unrelated PC Education & Research Women of Tomorrow Metro Detroit 550 West 14 Male Road, Macy's Oadland Mell Yad Ezra Yad Ezra Yad Ezra Yad Ezra Yad Ezra Yad Ezra Yad Ezra Yad Ezra Yad Ezra Yad Ezra  MI 48072 Unrelated PC Education & Research Amherst Amherst MA 01002 Unrelated PC Education & Research FC Education & Research Amherst Amherst Yozmot Alid  | Family Foundation   | University of Michigan   | 3003 South State Street, Suite 8000                   | Ann Arbor                     |     | _           | ر<br>ا     | ation & Research      | 237 075 00        |                 |
| Women of Tomograw Matro Defrori 500 Wess 14 May Exad. Macy's Caxtend Mail 170y MI 480372 Unrelated PC Education & Research Yad Exae Yadezse 1704 MA 48072 Unrelated PC Education & Research Yaddish Book Center 1021 West Street 53 Menachem Being Rd 1st floor Tel Armhers 0 6713812 Unrelated PC Education & Research Yozmot Alud  | Family Foundation   | Wayne State University   | 656 West Kirby  | Detroit                       | •   |             | <u>د</u>   | ation & Research      | 31,000 00         |                 |
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| Family Foundation Fund | Donee                                | Street                                | Crity            | State | dız   |           |                         |           |  |
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| Usa Appreparm Fund     |                                      |                                       |                  |       |       | - 1       |                         |           |  |
| Lisa Applebaum Fund    | Amencan Friends of Israel Museum     | 545 Fifth Avenue, Suite 920           | New York         | ž     | 10017 |           | PC Education & Research | 7 500 00  |  |
| Lisa Applebaum Fund    | Blacksmith Institute                 | 475 Riverside Df #860                 | New York         | ž     | 10115 | Unrelated | PC Education & Research | 200 00    |  |
| Ltsa Applebaum Fund    | Columbia Grammar & Proparatory       | 5 West 93rd Street                    | New York         | È     | 10025 | Unrelated | PC Education & Research | 2,000 00  |  |
| Lisa Applebaum Fund    | Epilepsy Foundation GLA/C&C Be       | 5777 West Century Boulevard, #820     | Los Angeles      | ð     | 90045 | Unretated | PC Education & Research | 250 00    |  |
| Lisa Applebaum Fund    | G1 Impact                            | 4510 Marlena St #40                   | Bossier City     | \$    | 71111 | Unrelated | PC Education & Research | 12,500 00 |  |
| Lisa Applebaum Fund    | ProjectArt                           | 1401 Vermont                          | Detroil          | Σ     | 48216 |           | PC Education & Research | 5,000 00  |  |
| Lisa Applebaum Fund    | The Algemener                        | . 208 East 51st Surte 185             | New York         | ž     | 10022 |           |                         | 250 00    |  |
| Lisa Applebaum Fund    | University of Michigan Museum of Art | 525 South State Street                | Ann Arbor        | Σ     | 48109 |           | PC Education & Research | 00 000 9  |  |
| Lisa Applebaum Fund    | Wayne State University               | 656 West Kirby                        | Detroit          | ₹     | 48202 | Unrelated | PC Education & Research | 1,000 00  |  |
|                        |                                      |                                       |                  |       |       |           |                         | 38,000 00 |  |
|                        |                                      |                                       |                  |       |       |           |                         |           |  |
| Pamela Applebaum Fund  |                                      |                                       |                  |       |       |           |                         |           |  |
| Pamela Applebaum Fund  | Congregation Beth Ahm                | 5075 W Maple Rd                       | West Bloomfield  | ₹     | 48322 | Unrelated | PC Education & Research | 200 00    |  |
| Pamela Applebaum Fund  | Cranbrook Educational Communit       | 520 Lone Pine Road                    | Shoomfield Hills | W     | 48303 | Unrelated | PC Education & Research | 25 00     |  |
| Pamela Applebaum Fund  | Detroit Symphony Orchestra           | 3711 Woodward Avenue                  | Detroit          | Σ     | 48201 | Unrelated | PC Education & Research | 2,919 00  |  |
| Pamela Applebaum Fund  | Friends of the IDF                   | P O Box 999                           | Walled Lake      | Σ     | 48390 | Unrelated | PC Education & Research | 36 00     |  |
| Pamela Applebaum Fund  | GLAAD                                | 104 W 29th St #4                      | New York         | ž     | 10001 | Unrelated | PC Education & Research | 90 00     |  |
| Pamela Applebaum Fund  | Hillel Day School                    | 3220 Middlebett Road                  | Farmington Hills | Ī     | 48334 | Unrelated | PC Education & Research | 200 00    |  |
| Pamela Applebaum Fund  | JARC                                 | 30301 Northwestern Highway, Suite 100 | Farmington Hills | ¥     | 48334 | Unrelated | PC Education & Research | 25 00     |  |
| Pamela Applebaum Fund  | Jewsh Community Center               | 6600 West Maple Road                  | West Bloomfield  | Z     | 48322 | Unrelated | PC Education & Research | 90 00     |  |
| Pamela Applebaum Fund  | Jewsh Family Services                | 6555 West Maple Road                  | West Bloomfield  | ₹     | 48322 | Unrelated | PC Education & Research | 36 00     |  |
| Pamela Applebaum Fund  | Jewish Federation of Metro Detroit   | 6555 West Maple Road                  | West Bloomfleld  | Ξ     | 48322 | Unrelated | PC Education & Research | 20 00     |  |
| Pamela Applebaum Fund  | Jewish Vocational Services           | 28699 Southfield Rd                   | Southfield       | ₹     | 48076 | Unrelated | PC Education & Research | 86 00     |  |
| Pamela Applebaum Fund  | Now Public Library                   | 45255 W 10 Mile Rd                    | Novi             | ¥     | 48375 | Unrelated | PC Education & Research | 36 00     |  |
| Pamela Applebaum Fund  | Tamarack Camps                       | 6735 Telegraph Road, Sunte 380        | Bloomfield Hills | Z     | 48301 | Unrelated | PC Education & Research | 1 500 00  |  |
| Pamela Applebaum Fund  | Temple Beth El                       | 7400 Telegraph Road                   | Bloomfield Hills | Σ     | 48301 | Unrelated | PC Education & Research | 20 00     |  |
| Pamela Applebaum Fund  | USC Shoah Foundation                 | 650 West 35th Street, Suite 114       | Los Angeles      | 5     | 68008 | Unrelated | PC Education & Research | 25 00     |  |
| :                      |                                      |                                       | ı                |       |       |           |                         | 5 888 00  |  |