

For calendar year 2019, or tax year beginning 01-01-2019, and ending 12-31-2019

Name of foundation THE SAMUEL AND JEAN FRANKEL HEALTH AND RESEARCH FOUNDATION		A Employer identification number 30-0095044	
Number and street (or P.O. box number if mail is not delivered to street address) 273 LAKEWOOD DR		Room/suite	B Telephone number (see instructions)  (248) 645-1307
City or town, state or province, country, and ZIP or foreign postal code BLOOMFIELD HILLS, MI 48304		C If exemption application is pending, check here ▶ <input type="checkbox"/>	
G Check all that apply: <input type="checkbox"/> Initial return <input type="checkbox"/> Initial return of a former public charity <input type="checkbox"/> Final return <input type="checkbox"/> Amended return <input type="checkbox"/> Address change <input type="checkbox"/> Name change		D 1. Foreign organizations, check here..... ▶ <input type="checkbox"/> 2. Foreign organizations meeting the 85% test, check here and attach computation ... ▶ <input type="checkbox"/>	
H Check type of organization: <input checked="" type="checkbox"/> Section 501(c)(3) exempt private foundation <input type="checkbox"/> Section 4947(a)(1) nonexempt charitable trust <input type="checkbox"/> Other taxable private foundation		E If private foundation status was terminated under section 507(b)(1)(A), check here ..... ▶ <input type="checkbox"/>	
I Fair market value of all assets at end of year (from Part II, col. (c), line 16) ▶ \$ 22,472,114	J Accounting method: <input checked="" type="checkbox"/> Cash <input type="checkbox"/> Accrual <input type="checkbox"/> Other (specify) _____ (Part I, column (d) must be on cash basis.)		
		F If the foundation is in a 60-month termination under section 507(b)(1)(B), check here ..... ▶ <input type="checkbox"/>	

Part I Analysis of Revenue and Expenses <small>(The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a) (see instructions).)</small>		(a) Revenue and expenses per books	(b) Net investment income	(c) Adjusted net income	(d) Disbursements for charitable purposes (cash basis only)
Revenue	1 Contributions, gifts, grants, etc., received (attach schedule)	2,037			
	2 Check <input checked="" type="checkbox"/> if the foundation is <b>not</b> required to attach Sch. B . . . . .				
	3 Interest on savings and temporary cash investments . . . . .	255,121	255,121		
	4 Dividends and interest from securities . . . . .	582,586	556,833		
	5a Gross rents . . . . .				
	b Net rental income or (loss) _____				
	6a Net gain or (loss) from sale of assets not on line 10	151,143			
	b Gross sales price for all assets on line 6a _____ 2,503,051				
	7 Capital gain net income (from Part IV, line 2) . . . . .		151,143		
	8 Net short-term capital gain . . . . .				
	9 Income modifications . . . . .				
	10a Gross sales less returns and allowances _____				
Operating and Administrative Expenses	b Less: Cost of goods sold . . . . .				
	c Gross profit or (loss) (attach schedule) . . . . .				
	11 Other income (attach schedule) . . . . .	387	387		
	12 <b>Total.</b> Add lines 1 through 11 . . . . .	991,274	963,484		
	13 Compensation of officers, directors, trustees, etc.	0	0		0
	14 Other employee salaries and wages . . . . .				
	15 Pension plans, employee benefits . . . . .				
	16a Legal fees (attach schedule) . . . . .				
	b Accounting fees (attach schedule) . . . . .	2,750	0		0
	c Other professional fees (attach schedule) . . . . .	69,221	0		0
	17 Interest . . . . .				
	18 Taxes (attach schedule) (see instructions) . . . . .	31,989	0		0
	19 Depreciation (attach schedule) and depletion . . . . .				
	20 Occupancy . . . . .				
	21 Travel, conferences, and meetings . . . . .				
	22 Printing and publications . . . . .				
	23 Other expenses (attach schedule) . . . . .	4,206	0		0
	24 <b>Total operating and administrative expenses.</b> Add lines 13 through 23 . . . . .	108,166	0		0
	25 Contributions, gifts, grants paid . . . . .	1,023,000			1,023,000
	26 <b>Total expenses and disbursements.</b> Add lines 24 and 25	1,131,166	0		1,023,000
	27 Subtract line 26 from line 12:				
	a <b>Excess of revenue over expenses and disbursements</b>	-139,892			
	b <b>Net investment income</b> (if negative, enter -0-)		963,484		
c <b>Adjusted net income</b> (if negative, enter -0-)					

Part II Balance Sheets		Attached schedules and amounts in the description column should be for end-of-year amounts only. (See instructions.)		
		Beginning of year	End of year	
		(a) Book Value	(b) Book Value	(c) Fair Market Value
Assets	1 Cash—non-interest-bearing . . . . .			
	2 Savings and temporary cash investments . . . . .	1,105,263	848,536	848,536
	3 Accounts receivable ▶ <u>5,449</u>			
	Less: allowance for doubtful accounts ▶ _____	842	5,449	5,449
	4 Pledges receivable ▶ _____			
	Less: allowance for doubtful accounts ▶ _____			
	5 Grants receivable . . . . .			
	6 Receivables due from officers, directors, trustees, and other disqualified persons (attach schedule) (see instructions) . . . . .			
	7 Other notes and loans receivable (attach schedule) ▶ _____			
	Less: allowance for doubtful accounts ▶ _____			
	8 Inventories for sale or use . . . . .			
	9 Prepaid expenses and deferred charges . . . . .			
	10a Investments—U.S. and state government obligations (attach schedule)	4,068,266	3,178,865	3,454,549
	b Investments—corporate stock (attach schedule) . . . . .	2,044,857	1,944,854	3,154,847
	c Investments—corporate bonds (attach schedule) . . . . .	3,889,013	4,459,888	4,805,623
	11 Investments—land, buildings, and equipment: basis ▶ _____			
Less: accumulated depreciation (attach schedule) ▶ _____				
12 Investments—mortgage loans . . . . .				
13 Investments—other (attach schedule) . . . . .	9,606,149	10,042,927	10,203,110	
14 Land, buildings, and equipment: basis ▶ _____				
Less: accumulated depreciation (attach schedule) ▶ _____				
15 Other assets (describe ▶ _____)	-136,919	-42,940	0	
16 <b>Total assets</b> (to be completed by all filers—see the instructions. Also, see page 1, item I)	20,577,471	20,437,579	22,472,114	
Liabilities	17 Accounts payable and accrued expenses . . . . .			
	18 Grants payable . . . . .			
	19 Deferred revenue . . . . .			
	20 Loans from officers, directors, trustees, and other disqualified persons			
	21 Mortgages and other notes payable (attach schedule). . . . .			
	22 Other liabilities (describe ▶ _____)			
	23 <b>Total liabilities</b> (add lines 17 through 22) . . . . .	0	0	
Net Assets or Fund Balances	<b>Foundations that follow FASB ASC 958, check here</b> ▶ <input type="checkbox"/> <b>and complete lines 24, 25, 29 and 30.</b>			
	24 Net assets without donor restrictions . . . . .			
	25 Net assets with donor restrictions . . . . .			
	<b>Foundations that do not follow FASB ASC 958, check here</b> ▶ <input checked="" type="checkbox"/> <b>and complete lines 26 through 30.</b>			
	26 Capital stock, trust principal, or current funds . . . . .	0	0	
	27 Paid-in or capital surplus, or land, bldg., and equipment fund	0	0	
	28 Retained earnings, accumulated income, endowment, or other funds	20,577,471	20,437,579	
	29 <b>Total net assets or fund balances</b> (see instructions) . . . . .	20,577,471	20,437,579	
	30 <b>Total liabilities and net assets/fund balances</b> (see instructions) .	20,577,471	20,437,579	

Part III Analysis of Changes in Net Assets or Fund Balances		
1 Total net assets or fund balances at beginning of year—Part II, column (a), line 29 (must agree with end-of-year figure reported on prior year's return)	1	20,577,471
2 Enter amount from Part I, line 27a . . . . .	2	-139,892
3 Other increases not included in line 2 (itemize) ▶ _____	3	0
4 Add lines 1, 2, and 3 . . . . .	4	20,437,579
5 Decreases 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, column (b), line 29 .	6	20,437,579

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

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

  

(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale	(h) Gain or (loss) (e) plus (f) minus (g)
<b>a</b> See Additional Data Table			
<b>b</b>			
<b>c</b>			
<b>d</b>			
<b>e</b>			

  

Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69			(l) Gains (Col. (h) gain minus col. (k), but not less than -0-) or Losses (from col.(h))
(i) F.M.V. as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col. (i) over col. (j), if any	
<b>a</b> See Additional Data Table			
<b>b</b>			
<b>c</b>			
<b>d</b>			
<b>e</b>			

  

<b>2</b> Capital gain net income or (net capital loss) <span style="float: right;">{ If gain, also enter in Part I, line 7 If (loss), enter -0- in Part I, line 7 }</span>	<b>2</b>	151,143
<b>3</b> Net short-term capital gain or (loss) as defined in sections 1222(5) and (6): If gain, also enter in Part I, line 8, column (c) (see instructions). If (loss), enter -0- in Part I, line 8 <span style="float: right;">}</span>	<b>3</b>	

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

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

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

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



Yes



No

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

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

(a) Base period years Calendar year (or tax year beginning in)	(b) Adjusted qualifying distributions	(c) Net value of noncharitable-use assets	(d) Distribution ratio (col. (b) divided by col. (c))
2018	690,000	20,029,735	0.034449
2017	755,000	19,684,851	0.038354
2016	1,857,488	19,944,466	0.093133
2015	1,510,316	20,859,582	0.072404
2014	1,088,740	20,920,382	0.052042

  

<b>2</b> Total of line 1, column (d) . . . . .	<b>2</b>	0.290382
<b>3</b> Average distribution ratio for the 5-year base period—divide the total on line 2 by 5.0, or by the number of years the foundation has been in existence if less than 5 years . . . . .	<b>3</b>	0.058076
<b>4</b> Enter the net value of noncharitable-use assets for 2019 from Part X, line 5 . . . . .	<b>4</b>	22,702,650
<b>5</b> Multiply line 4 by line 3 . . . . .	<b>5</b>	1,318,479
<b>6</b> Enter 1% of net investment income (1% of Part I, line 27b) . . . . .	<b>6</b>	9,635
<b>7</b> Add lines 5 and 6 . . . . .	<b>7</b>	1,328,114
<b>8</b> Enter qualifying distributions from Part XII, line 4 , . . . . .	<b>8</b>	1,023,000

If line 8 is equal to or greater than line 7, check the box in Part VI, line 1b, and complete that part using a 1% tax rate. See the Part VI instructions.

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

<b>1a</b>	Exempt operating foundations described in section 4940(d)(2), check here <input type="checkbox"/> and enter "N/A" on line 1. Date of ruling or determination letter: _____ (attach copy of letter if necessary—see instructions)		
<b>b</b>	Domestic foundations that meet the section 4940(e) requirements in Part V, check here <input type="checkbox"/> and enter 1% of Part I, line 27b . . . . .	<b>1</b>	19,270
<b>c</b>	All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of Part I, line 12, col. (b)		
<b>2</b>	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	<b>2</b>	0
<b>3</b>	Add lines 1 and 2. . . . .	<b>3</b>	19,270
<b>4</b>	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	<b>4</b>	0
<b>5</b>	<b>Tax based on investment income.</b> Subtract line 4 from line 3. If zero or less, enter -0- . . . . .	<b>5</b>	19,270
<b>6</b>	Credits/Payments:		
<b>a</b>	2019 estimated tax payments and 2018 overpayment credited to 2019	<b>6a</b>	25,699
<b>b</b>	Exempt foreign organizations—tax withheld at source . . . . .	<b>6b</b>	
<b>c</b>	Tax paid with application for extension of time to file (Form 8868) . . . . .	<b>6c</b>	14,000
<b>d</b>	Backup withholding erroneously withheld . . . . .	<b>6d</b>	0
<b>7</b>	Total credits and payments. Add lines 6a through 6d. . . . .	<b>7</b>	39,699
<b>8</b>	Enter any <b>penalty</b> for underpayment of estimated tax. Check here <input type="checkbox"/> if Form 2220 is attached.	<b>8</b>	194
<b>9</b>	<b>Tax due.</b> If the total of lines 5 and 8 is more than line 7, enter <b>amount owed</b> . . . . . <b>▶</b>	<b>9</b>	
<b>10</b>	<b>Overpayment.</b> If line 7 is more than the total of lines 5 and 8, enter the <b>amount overpaid</b> . . . . . <b>▶</b>	<b>10</b>	20,235
<b>11</b>	Enter the amount of line 10 to be: <b>Credited to 2020 estimated tax</b> <b>▶</b> 20,235 <b>Refunded</b> <b>▶</b>	<b>11</b>	0

**Part VII-A Statements Regarding Activities**

	Yes	No
<b>1a</b> During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any political campaign? . . . . .	<b>1a</b>	No
<b>b</b> Did it spend more than \$100 during the year (either directly or indirectly) for political purposes? (see Instructions for definition). . . . . <i>If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials published or distributed by the foundation in connection with the activities.</i>	<b>1b</b>	No
<b>c</b> Did the foundation file <b>Form 1120-POL</b> for this year? . . . . .	<b>1c</b>	No
<b>d</b> Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year: <b>(1)</b> On the foundation. <b>▶</b> \$ 0 <b>(2)</b> On foundation managers. <b>▶</b> \$ 0		
<b>e</b> Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers. <b>▶</b> \$ 0		
<b>2</b> Has the foundation engaged in any activities that have not previously been reported to the IRS? . . . . . <i>If "Yes," attach a detailed description of the activities.</i>	<b>2</b>	No
<b>3</b> Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, or bylaws, or other similar instruments? <i>If "Yes," attach a conformed copy of the changes</i> . . . . .	<b>3</b>	No
<b>4a</b> Did the foundation have unrelated business gross income of \$1,000 or more during the year? . . . . .	<b>4a</b>	No
<b>b</b> If "Yes," has it filed a tax return on <b>Form 990-T</b> for this year? . . . . .	<b>4b</b>	
<b>5</b> Was there a liquidation, termination, dissolution, or substantial contraction during the year? . . . . . <i>If "Yes," attach the statement required by General Instruction T.</i>	<b>5</b>	No
<b>6</b> Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either: • By language in the governing instrument, or • By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state law remain in the governing instrument? . . . . .	<b>6</b>	Yes
<b>7</b> Did the foundation have at least \$5,000 in assets at any time during the year? <i>If "Yes," complete Part II, col. (c), and Part XV.</i> . . . . .	<b>7</b>	Yes
<b>8a</b> Enter the states to which the foundation reports or with which it is registered (see instructions) <b>▶</b> MI		
<b>b</b> If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate) of each state as required by General Instruction G? <i>If "No," attach explanation .</i>	<b>8b</b>	Yes
<b>9</b> Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for calendar year 2019 or the taxable year beginning in 2019? See the instructions for Part XIV. <i>If "Yes," complete Part XIV</i> . . . . .	<b>9</b>	No
<b>10</b> Did any persons become substantial contributors during the tax year? <i>If "Yes," attach a schedule listing their names and addresses.</i> . . . . .	<b>10</b>	No

**Part VII-A Statements Regarding Activities** (continued)

<b>11</b>	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. . . . .	<b>11</b>		<b>No</b>
<b>12</b>	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 . . . . .	<b>12</b>		<b>No</b>
<b>13</b>	Did the foundation comply with the public inspection requirements for its annual returns and exemption application? Website address ▶ <u>N/A</u>	<b>13</b>	<b>Yes</b>	
<b>14</b>	The books are in care of ▶ <u>JO ELYN NYMAN</u> Telephone no. ▶ <u>(248) 645-1307</u>			

Located at ▶ 273 LAKEWOOD BLOOMFIELD HILLS MI ZIP+4 ▶ 48304

<b>15</b>	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of <b>Form 1041</b> —check here . . . . . ▶ <input type="checkbox"/>			
	and enter the amount of tax-exempt interest received or accrued during the year . . . . . ▶ <b>15</b>			
<b>16</b>	At any time during calendar year 2019, did the foundation have an interest in or a signature or other authority over a bank, securities, or other financial account in a foreign country? . . . . .	<b>16</b>	<b>Yes</b>	<b>No</b>
	See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes", enter the name of the foreign country ▶			

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

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

		<b>Yes</b>	<b>No</b>
<b>1a</b>	During the year did the foundation (either directly or indirectly):		
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person? . . . . . <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
	(5) Transfer any income or assets to a disqualified person (or make any of either available for the benefit or use of a disqualified person)? . . . . . <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
	(6) Agree to pay money or property to a government official? ( <b>Exception.</b> Check "No" if the foundation agreed to make a grant to or to employ the official for a period after termination of government service, if terminating within 90 days.) . . . . . <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
<b>b</b>	If any answer is "Yes" to 1a(1)–(6), did <b>any</b> 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 . . . . . <input type="checkbox"/>	<b>1b</b>	
<b>c</b>	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected before the first day of the tax year beginning in 2019? . . . . .	<b>1c</b>	<b>No</b>
<b>2</b>	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)):		
<b>a</b>	At the end of tax year 2019, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning before 2019? . . . . . <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If "Yes," list the years ▶ 20____, 20____, 20____, 20____		
<b>b</b>	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 <b>all</b> years listed, answer "No" and attach statement—see instructions.) . . . . .	<b>2b</b>	
<b>c</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. ▶ 20____, 20____, 20____, 20____		
<b>3a</b>	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year? . . . . . <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
<b>b</b>	If "Yes," did it have excess business holdings in 2019 as a result of (1) any purchase by the foundation or disqualified persons after May 26, 1969; (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest; or (3) the lapse of the 10-, 15-, or 20-year first phase holding period?(Use Schedule C, Form 4720, to determine if the foundation had excess business holdings in 2019.) . . . . .	<b>3b</b>	
<b>4a</b>	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	<b>4a</b>	<b>No</b>
<b>b</b>	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2019?	<b>4b</b>	<b>No</b>

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

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

**Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors**

<b>1 List all officers, directors, trustees, foundation managers and their compensation. See instructions</b>				
(a) Name and address	(b) Title, and average hours per week devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
BRUCE FRANKEL 700 ARDMOOR DRIVE BLOOMFIELD, MI 48301	PRESIDENT AND TRUSTEE 2.00	0	0	0
JO ELYN NYMAN 273 LAKEWOOD BLOOMFIELD HILLS, MI 48304	VICE PRESIDENT, TREASURER, 4.00	0	0	0
GEORGE NYMAN 273 LAKEWOOD BLOOMFIELD HILLS, MI 48304	SECRETARY AND TRUSTEE 2.00	0	0	0
<b>2 Compensation of five highest-paid employees (other than those included on line 1—see instructions). If none, enter "NONE."</b>				
(a) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
NONE				
<b>Total number of other employees paid over \$50,000.</b> . . . . .				0

**Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors (continued)**
**3 Five highest-paid independent contractors for professional services (see instructions). If none, enter "NONE".**

(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE		
<b>Total</b> 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 statistical information such as the number of organizations and other beneficiaries served, conferences convened, research papers produced, etc.

	Expenses
<b>1</b>	
<b>2</b>	
<b>3</b>	
<b>4</b>	

**Part IX-B Summary of Program-Related Investments (see instructions)**

Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2.	Amount
<b>1</b>	
<b>2</b>	
All other program-related investments. See instructions.	
<b>3</b>	
<b>Total.</b> Add lines 1 through 3 . . . . . ►	0

**Part X Minimum Investment Return** (All domestic foundations must complete this part. Foreign foundations, see instructions.)

<b>1</b>	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes:		
<b>a</b>	Average monthly fair market value of securities. . . . .	<b>1a</b>	22,071,476
<b>b</b>	Average of monthly cash balances. . . . .	<b>1b</b>	976,900
<b>c</b>	Fair market value of all other assets (see instructions). . . . .	<b>1c</b>	0
<b>d</b>	<b>Total</b> (add lines 1a, b, and c). . . . .	<b>1d</b>	23,048,376
<b>e</b>	Reduction claimed for blockage or other factors reported on lines 1a and 1c (attach detailed explanation). . . . .	<b>1e</b>	0
<b>2</b>	Acquisition indebtedness applicable to line 1 assets. . . . .	<b>2</b>	0
<b>3</b>	Subtract line 2 from line 1d. . . . .	<b>3</b>	23,048,376
<b>4</b>	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions). . . . .	<b>4</b>	345,726
<b>5</b>	<b>Net value of noncharitable-use assets.</b> Subtract line 4 from line 3. Enter here and on Part V, line 4	<b>5</b>	22,702,650
<b>6</b>	<b>Minimum investment return.</b> Enter 5% of line 5. . . . .	<b>6</b>	1,135,133

**Part XI Distributable Amount** (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations and certain foreign organizations check here ☐ and do not complete this part.)

<b>1</b>	Minimum investment return from Part X, line 6. . . . .	<b>1</b>	1,135,133
<b>2a</b>	Tax on investment income for 2019 from Part VI, line 5. . . . .	<b>2a</b>	19,270
<b>b</b>	Income tax for 2019. (This does not include the tax from Part VI.). . . . .	<b>2b</b>	
<b>c</b>	Add lines 2a and 2b. . . . .	<b>2c</b>	19,270
<b>3</b>	Distributable amount before adjustments. Subtract line 2c from line 1. . . . .	<b>3</b>	1,115,863
<b>4</b>	Recoveries of amounts treated as qualifying distributions. . . . .	<b>4</b>	0
<b>5</b>	Add lines 3 and 4. . . . .	<b>5</b>	1,115,863
<b>6</b>	Deduction from distributable amount (see instructions). . . . .	<b>6</b>	0
<b>7</b>	<b>Distributable amount</b> as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1. . . . .	<b>7</b>	1,115,863

**Part XII Qualifying Distributions** (see instructions)

<b>1</b>	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:		
<b>a</b>	Expenses, contributions, gifts, etc.—total from Part I, column (d), line 26. . . . .	<b>1a</b>	1,023,000
<b>b</b>	Program-related investments—total from Part IX-B. . . . .	<b>1b</b>	0
<b>2</b>	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes. . . . .	<b>2</b>	
<b>3</b>	Amounts set aside for specific charitable projects that satisfy the:		
<b>a</b>	Suitability test (prior IRS approval required). . . . .	<b>3a</b>	
<b>b</b>	Cash distribution test (attach the required schedule). . . . .	<b>3b</b>	
<b>4</b>	<b>Qualifying distributions.</b> Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4	<b>4</b>	1,023,000
<b>5</b>	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income. Enter 1% of Part I, line 27b. See instructions. . . . .	<b>5</b>	0
<b>6</b>	<b>Adjusted qualifying distributions.</b> Subtract line 5 from line 4. . . . .	<b>6</b>	1,023,000

**Note:** The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation qualifies for the section 4940(e) reduction of tax in those years.



**Part XIII Undistributed Income** (see instructions)

	(a) Corpus	(b) Years prior to 2018	(c) 2018	(d) 2019
<b>1</b> Distributable amount for 2019 from Part XI, line 7				1,115,863
<b>2</b> Undistributed income, if any, as of the end of 2019:				
<b>a</b> Enter amount for 2018 only. . . . .			0	
<b>b</b> Total for prior years: 20____, 20____, 20____		0		
<b>3</b> Excess distributions carryover, if any, to 2019:				
<b>a</b> From 2014. . . . .				
<b>b</b> From 2015. . . . .				
<b>c</b> From 2016. . . . . 2,399				
<b>d</b> From 2017. . . . .				
<b>e</b> From 2018. . . . .				
<b>f</b> <b>Total</b> of lines 3a through e. . . . .	2,399			
<b>4</b> Qualifying distributions for 2019 from Part XII, line 4: ► \$ 1,023,000				
<b>a</b> Applied to 2018, but not more than line 2a			0	
<b>b</b> Applied to undistributed income of prior years (Election required—see instructions). . . . .		0		
<b>c</b> Treated as distributions out of corpus (Election required—see instructions). . . . .	0			
<b>d</b> Applied to 2019 distributable amount. . . . .				1,023,000
<b>e</b> Remaining amount distributed out of corpus	0			
<b>5</b> Excess distributions carryover applied to 2019. (If an amount appears in column (d), the same amount must be shown in column (a).)	2,399			2,399
<b>6</b> <b>Enter the net total of each column as indicated below:</b>				
<b>a</b> Corpus. Add lines 3f, 4c, and 4e. Subtract line 5	0			
<b>b</b> Prior years' undistributed income. Subtract line 4b from line 2b. . . . .		0		
<b>c</b> 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		
<b>d</b> Subtract line 6c from line 6b. Taxable amount—see instructions. . . . .		0		
<b>e</b> Undistributed income for 2018. Subtract line 4a from line 2a. Taxable amount—see instructions. . . . .			0	
<b>f</b> Undistributed income for 2019. Subtract lines 4d and 5 from line 1. This amount must be distributed in 2020. . . . .				90,464
<b>7</b> Amounts treated as distributions out of corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3) (Election may be required - see instructions). . . . .	0			
<b>8</b> Excess distributions carryover from 2014 not applied on line 5 or line 7 (see instructions). . . . .	0			
<b>9</b> <b>Excess distributions carryover to 2020.</b> Subtract lines 7 and 8 from line 6a. . . . .	0			
<b>10</b> Analysis of line 9:				
<b>a</b> Excess from 2015. . . . .				
<b>b</b> Excess from 2016. . . . .				
<b>c</b> Excess from 2017. . . . .				
<b>d</b> Excess from 2018. . . . .				
<b>e</b> Excess from 2019. . . . .				

## Part XIV

**1a** If the foundation has received a ruling or determination letter that it is a private operating foundation, and the ruling is effective for 2019, enter the date of the ruling. . . . .

**b** Check box to indicate whether the organization is a private operating foundation described in section ☐ 4942(i)(3) or ☐ 4942(i)(5)

2a	Enter the lesser of the adjusted net income from Part I or the minimum investment return from Part X for each year listed.	Tax year	Prior 3 years			(e) Total
		(a) 2019	(b) 2018	(c) 2017	(d) 2016	

<b>b</b> 85% of line 2a . . . . .					
-----------------------------------	--	--	--	--	--

c Qualifying distributions from Part XII, line 4 for each year listed . . . . .					
--	--	--	--	--	--

<b>d</b> Amounts included in line 2c not used directly for active conduct of exempt activities . . . . .					
--	--	--	--	--	--

e	Qualifying distributions made directly for active conduct of exempt activities. Subtract line 2d from line 2c . . . .				
---	---	--	--	--	--

3	Complete 3a, b, or c for the alternative test relied upon:					

[illegible]

(1) Value of all assets . . . . .					
-----------------------------------	--	--	--	--	--

(2) Value of assets qualifying under section 4942(j)(3)(B)(i)					
---	--	--	--	--	--

b "Endowment" alternative test— enter 2/3 of minimum investment return shown in Part X, line 6 for each year listed. . .							
--	--	--	--	--	--	--	--

c "Support" alternative test—enter:					
-------------------------------------	--	--	--	--	--

(1) Total support other than gross investment income (interest, dividends, rents, payments on securities loans (section 512(a)(5)), or royalties) . . . .					
---	--	--	--	--	--

(2) Support from general public and 5 or more exempt organizations as provided in section 4942(j)(3)(B)(iii). . . .					
---	--	--	--	--	--

(3) Largest amount of support from an exempt organization					
---	--	--	--	--	--

(4) Gross investment income					
-----------------------------	--	--	--	--	--

## Part XV

**1 Information Regarding Foundation Managers:**

a List any managers of the foundation who have contributed more than 2% of the total contributions received by the foundation before the close of any tax year (but only if they have contributed more than \$5,000). (See section 507(d)(2).)

BRUCE FRANKEL

**b** List any managers of the foundation who own 10% or more of the stock of a corporation (or an equally large portion of the ownership of a partnership or other entity) of which the foundation has a 10% or greater interest.

2 Information Regarding Contribution, Grant, Gift, Loan, Scholarship, etc., Programs:

Check here ☒ if the foundation only makes contributions to preselected charitable organizations and does not accept unsolicited requests for funds. If the foundation makes gifts, grants, etc. to individuals or organizations under other conditions, complete items 2a, b, c, and d. See instructions

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

**b** The form in which applications should be submitted and information and materials they should include:

**c** Any submission deadlines:

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

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

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i> See Additional Data Table				
<b>Total</b> . . . . .			<b>3a</b>	1,023,000
<b>b</b> <i>Approved for future payment</i>				
<b>Total</b> . . . . .			<b>3b</b>	0

Enter gross amounts unless otherwise indicated.

Enter gross amounts unless otherwise indicated.	Unrelated business income		Excluded by section 512, 513, or 514		(e) Related or exempt function income (See instructions.)
	(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	
<b>1</b> Program service revenue:					
<b>a</b> _____					
<b>b</b> _____					
<b>c</b> _____					
<b>d</b> _____					
<b>e</b> _____					
<b>f</b> _____					
<b>g</b> Fees and contracts from government agencies					
<b>2</b> Membership dues and assessments. . . . .					
<b>3</b> Interest on savings and temporary cash investments . . . . .			14	255,121	
<b>4</b> Dividends and interest from securities. . . . .			14	582,586	
<b>5</b> Net rental income or (loss) from real estate:					
<b>a</b> Debt-financed property. . . . .					
<b>b</b> Not debt-financed property. . . . .					
<b>6</b> Net rental income or (loss) from personal property					
<b>7</b> Other investment income. . . . .			14	387	
<b>8</b> Gain or (loss) from sales of assets other than inventory . . . . .			14	151,143	
<b>9</b> Net income or (loss) from special events:					
<b>10</b> Gross profit or (loss) from sales of inventory					
<b>11</b> Other revenue: <b>a</b> _____					
<b>b</b> _____					
<b>c</b> _____					
<b>d</b> _____					
<b>e</b> _____					
<b>12</b> Subtotal. Add columns (b), (d), and (e). . . . .		0		989,237	0
<b>13</b> <b>Total.</b> Add line 12, columns (b), (d), and (e). . . . . (See worksheet in line 13 instructions to verify calculations.)			<b>13</b>		<b>989,237</b>

## Part XVI-B Relationship of Activities to the Accomplishment of Exempt Purposes

[illegible]

**Information Regarding Transfers To and Transactions and Relationships With Noncharitable Exempt Organizations**

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

[illegible]

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

**b** If "Yes," complete the following schedule.

(a) Name of organization	(b) Type of organization	(c) Description of relationship

<b>Sign Here</b>	Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge.		
	*****	2020-10-15	*****
	_____ Signature of officer or trustee	_____ Date	_____ Title

May the IRS discuss this return with the preparer shown below  
 (see instr.) ☒ **Yes** ☐ **No**

<b>Paid Preparer Use Only</b>	Print/Type preparer's name	Preparer's Signature	Date	Check if self-employed <input type="checkbox"/>	PTIN
	JOHN W WEIPERT		2020-10-15		P00013175
	Firm's name ▶ TAMA BUDAJ & RAAB PC				Firm's EIN ▶ 38-2322726
	Firm's address ▶ 32783 MIDDLEBELT ROAD FARMINGTON HILLS, MI 483341726				Phone no. (248) 626-3800

Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns a - d

List and describe the kind(s) of property sold (e.g., real estate, (a) 2-story brick warehouse; or common stock, 200 shs. MLC Co.)	(b) How acquired P—Purchase D—Donation	(c) Date acquired (mo., day, yr.)	(d) Date sold (mo., day, yr.)
WSTWD INCM OPPOR 655 SH	P	2018-06-29	2019-04-25
WESTERN ASSET MIDDLE MKT 143 SH	P	2012-12-20	2019-07-09
WSTWD INCM OPPOR 9972 SH	P	2017-07-05	2019-04-25
NC TPK 250000 SH	P	2009-12-15	2019-01-02
TEXAS ST 75000 SH	P	2009-10-07	2019-10-01
UNIVERSITY OF CA 100000 SH	P	2010-01-05	2019-05-15
UTAH CNTY 50000 SH	P	2010-03-23	2019-12-18
FLORIDA ST BRD 250000 SH	P	2009-10-06	2019-08-14
FLORIDA ST BRD 150000 SH	P	2009-10-06	2019-08-14
CITIGROUP INC 150000 SH	P	2016-05-18	2019-04-15

Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns e - h

(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale	(h) Gain or (loss) (e) plus (f) minus (g)
10,293		9,673	620
100,578		145,100	-44,522
152,771		154,913	-2,142
250,000		256,377	-6,377
75,000		75,000	0
100,000		100,000	0
50,000		50,000	0
250,000		250,000	0
150,000		150,000	0
153,782		147,905	5,877

Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns i - l

Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69			(l) Gains (Col. (h) gain minus col. (k), but not less than -0-) or Losses (from col.(h))
(i) F.M.V. as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col. (i) over col. (j), if any	
			620
			-44,522
			-2,142
			-6,377
			0
			0
			0
			0
			5,877

Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns a - d

List and describe the kind(s) of property sold (e.g., real estate, (a) 2-story brick warehouse; or common stock, 200 shs. MLC Co.)	(b) How acquired P—Purchase D—Donation	(c) Date acquired (mo., day, yr.)	(d) Date sold (mo., day, yr.)
STATE STREET 4000 SH	P	2014-11-18	2019-12-16
BANK OF AMERICA 6000 SH	P	2014-09-02	2019-09-09
CITIGROUP INC 4000 SH	P	2014-02-05	2019-02-12
WESTERN ASSET MIDDLE MKT 82 SH	P	2014-08-26	2019-10-08
SX5E LIRN ISSUER 10000 SH	P	2014-01-30	2019-01-25
SP500 LIRN ISSUER 20000 SH	P	2016-08-25	2019-04-22
CMS 10 FLOATER 200000 SH	P	2009-12-08	2019-12-16
JPMORGAN CHASE & CO 16000 SH	P	2013-01-10	2019-10-30
WELLS FARGO & CO 49000 SH	P	2015-04-09	2019-09-16
RIVERNORTH DOUBLELINE - ABANDONMENT	P	2019-11-15	2019-12-20

Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns e - h

(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale	(h) Gain or (loss) (e) plus (f) minus (g)
100,000		100,000	0
150,000		150,000	0
100,000		100,000	0
60,339		84,460	-24,121
103,630		100,000	3,630
269,195		200,000	69,195
200,000		200,000	0
16,000		18,840	-2,840
49,000		55,128	-6,128
			0

Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns i - l

Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69			(l) Gains (Col. (h) gain minus col. (k), but not less than -0-) or Losses (from col.(h))
(i) F.M.V. as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col. (i) over col. (j), if any	
			0
			0
			0
			-24,121
			3,630
			69,195
			0
			-2,840
			-6,128
			0

**Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns a - d**

List and describe the kind(s) of property sold (e.g., real estate, <b>(a)</b> 2-story brick warehouse; or common stock, 200 shs. MLC Co.)	<b>(b)</b> How acquired P—Purchase D—Donation	<b>(c)</b> Date acquired (mo., day, yr.)	<b>(d)</b> Date sold (mo., day, yr.)
CZECH II SENIOR LOAN TRUST (K-1)	P		2019-12-31
CAPITAL GAINS DIVIDENDS	P		

**Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns e - h**

<b>(e)</b> Gross sales price	<b>(f)</b> Depreciation allowed (or allowable)	<b>(g)</b> Cost or other basis plus expense of sale	<b>(h)</b> Gain or (loss) (e) plus (f) minus (g)
		4,512	-4,512
162,463			162,463

**Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns i - l**

Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69			<b>(l)</b> Gains (Col. (h) gain minus col. (k), but not less than -0-) <b>or</b> Losses (from col.(h))
<b>(i)</b> F.M.V. as of 12/31/69	<b>(j)</b> Adjusted basis as of 12/31/69	<b>(k)</b> Excess of col. (i) over col. (j), if any	
			-4,512
			162,463



Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
AMERICAN DIABETES ASSOCIATION 1701 NORTH BEAUREGARD STREET ALEXANDRIA, VA 22311	NONE	501(C)(3)	MEDICAL RESEARCH	40,000
BEAR HUG FOUNDATION 139 W MAPLE SUITE F BIRMINGHAM, MI 48009	NONE	501(C)(3)	OUTDOOR EDUCATIONAL AND RECREATIONAL ACTIVITIES FOR FOSTER CHILDREN	35,000
CAMP MAK-A-DREAM 121 W LONG LAKE ROAD BLOOMFIELD HILLS, MI 48304	NONE	501(C)(3)	ASSISTANCE FOR CHILDREN AND YOUNG ADULTS WITH CANCER	10,000
<b>Total . . . . . ▶ 3a</b>				1,023,000

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> Paid during the year				
CARE HOUSE OF OAKLAND COUNTY 44765 WOODWARD AVENUE PONTIAC, MI 48341	NONE	501(C)(3)	ASSISTANCE FOR ABUSED AND NEGLECTED CHILDREN	100,000
CHRON'S & COLITIS FOUNDATION 25882 ORCHARD LAKE ROAD SUITE 102 FARMINGTON HILLS, MI 48336	NONE	501(C)(3)	MEDICAL RESEARCH	40,000
FAR CONSERVATORY 1669 WEST MAPLE ROAD BIRMINGHAM, MI 48009	NONE	501(C)(3)	ASSISTANCE FOR PEOPLE WITH DISABILITIES	30,000
<b>Total . . . . . ▶ 3a</b>				1,023,000

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
HOSPICE OF MICHIGAN (STATE OF MICHIGAN) 43097 WOODWARD AVE SUITE 102 BLOOMFIELD HILLS, MI 48302	NONE	501(C)(3)	END OF LIFE CARE AND SUPPORT PROGRAMS	300,000
JARC 30301 NORTHWESTERN HIGHWAY SUITE 100 FARMINGTON HILLS, MI 48334	NONE	501(C)(3)	ASSISTANCE FOR PEOPLE WITH DISABILITIES	110,000
MICHIGAN LEAGUE FOR PUBLIC POLICY 1223 TURNER STREET STE G1 LANSING, MI 48906	NONE	501(C)(3)	ECONOMIC SECURITY AND WELL-BEING FOR PEOPLE IN MICHIGAN	20,000
<b>Total . . . . . ▶ 3a</b>				1,023,000

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
PLANNED PARENTHOODPO BOX 3673 ANN ARBOR, MI 48106	NONE	501(C)(3)	SEXUAL AND REPRODUCTIVE HEALTH	100,000
ALZHEIMERS DISEASE RESEARCH 22512 GATEWAY CENTER DR CLARKSBURG, MD 20871	NONE	501(C)(3)	ALZHEIMERS RESEARCH	10,000
JEWISH SR LIFE6710 W MAPLE RD WEST BLOOMFIELD TWP, MI 48322	NONE	501(C)(3)	SENIOR HOUSING	50,000
<b>Total . . . . . ▶ 3a</b>				1,023,000

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
ST JUDES CHILDRENS RESEARCH 32121 WOODWARD AVE 350 ROYAL OAK, MI 48073	NONE	501(C)(3)	CHILDHOOD CANCER RESEARCH AND TREATMENT	1,000
JEWISH FAMILY SERVICES 6555 W MAPLE RD WEST BLOOMFIELD TWP, MI 48322	NONE	501(C)(3)	FAMILY SERVICES & SUPPORT GROUPS	20,000
ORT AMERICA6735 TELEGRAPH RD 350 BLOOMFIELD TOWNSHIP, MI 48301	NONE	501(C)(3)	EDUCATION AND TRAINING ORGANIZATION	1,000
<b>Total . . . . . ▶ 3a</b>				1,023,000

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
JEWISH HOSPICE AND CHAPLAINCY 6555 W MAPLE RD WEST BLOOMFIELD TWP, MI 48322	NONE	501(C)(3)	END OF LIFE CARE AND SUPPORT	1,000
AFMDA20 W 36TH STREET 1100 NEW YORK, NY 10018	NONE	501(C)(3)	NATIONAL AMBULANCE, BLOOD-SERVICE AND DISASTER-RELIEF ORGANIZATION	150,000
KADIMA MENTAL HEALTH SERVICES 15999 W TWELVE MILE RD SOUTHFIELD, MI 48076	NONE	501(C)(3)	RESIDENTIAL, THERAPEUTIC AND SOCIAL SERVICES FOR PEOPLE WITH MENTAL HEALTH	5,000
<b>Total . . . . . ▶ 3a</b>				1,023,000

**TY 2019 Accounting Fees Schedule**

**Name:** THE SAMUEL AND JEAN FRANKEL  
HEALTH AND RESEARCH FOUNDATION

**EIN:** 30-0095044

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
ACCOUNTING FEES	2,750	0		0

# TY 2019 Investments Corporate Bonds Schedule

**Name:** THE SAMUEL AND JEAN FRANKEL

HEALTH AND RESEARCH FOUNDATION

**EIN:** 30-0095044

## Investments Corporate Bonds Schedule

Name of Bond	End of Year Book Value	End of Year Fair Market Value
100000 SHS AMERICAN EXPRESS	103,380	100,375
100000 SHS METLIFE INC	102,005	101,288
100000 SHS PNC FINANCIAL SRV	113,355	106,210
51000 SHS WELLS FARGO & CO	57,378	51,637
123000 SHS GENERAL ELEC CAP CORP	107,932	120,474
250000 SHS WELLS FARGO & CO	280,255	278,125
3000 SHS HSBC HLDGS PLC	60,919	80,640
4000 SHS ALABAMA POWER CO	100,000	108,320
4000 SHS ARCH CAPITAL GROUP	100,000	103,160
4000 SHS BERKLEY WR CORP	100,000	105,840
4000 SHS CAPITAL ONE FINANCIAL	100,000	103,520
4000 SHS GABELLI GLOBAL SMALL CAP	98,831	103,553
4000 SHS WELLS FARGO	100,000	106,760
5000 CHARLES SCHWAB CORP	125,000	132,500
5000 SHS ALLSTATE CORP	125,000	136,700
6000 SHS BANK OF AMERICA CORP	150,000	157,080
6000 SHS BANK OF AMERICA CORP HH	150,000	162,480
6000 SHS CHS INC	150,000	164,220
6000 SHS DOMINION RESOURCES	150,000	157,080
6000 SHS FIRST REPUBLIC BANK	150,000	160,320



**Investments Corporate Bonds Schedule**

<b>Name of Bond</b>	<b>End of Year Book Value</b>	<b>End of Year Fair Market Value</b>
6000 SHS JPMORGAN CHASE & CO	150,000	163,980
57000 SHS JPMORGAN CHASE & CO	67,117	57,513
77000 SHS GENERAL ELECTRIC	77,968	75,418
8000 SHS FANNIE MAE NEW MONEY	45,200	87,200
8000 SHS JP MORGAN CHASE	200,000	205,920
8000 SHS THE SOUTHERN COMPANY	200,000	210,960
6000 SHS FEDERAL AGRICULTURE	150,000	162,000
4000 SHS CITIZENS FINANCIAL GROUP	100,000	113,160
8000 SHS THE GABELLI MLT MEDIA	200,000	202,400
3000 SHS AIR LEASE CORP	75,000	82,620
100000 SHS TRUST FINANCIAL	0	100,300
100000 SHS BANK OF AMERICA	113,272	113,500
100000 SHS JP MORGAN	107,276	109,130
6000 SHS AMERICAN FNCL GROUP	150,000	164,520
6000 SHS SEMPRA ENERGY	150,000	159,420
4000 SHS SYNCHRONY FINANCIAL	100,000	102,200
6000 SHS SVB FINANCIAL GROUP	150,000	155,100

TY 2019 Investments Corporate Stock Schedule

Name:

THE SAMUEL AND JEAN FRANKEL  
HEALTH AND RESEARCH FOUNDATION

EIN:

30-0095044

Investments Corporation Stock Schedule

Name of Stock	End of Year Book Value	End of Year Fair Market Value
1000 SHS EMERSON ELEC CO	44,239	76,260
1000 SHS GENERAL MOTORS CO	36,325	36,600
1000 SHS SIEMENS AG	56,817	64,970
10000 SHS SX5E LIRN ISSUER BOFA	100,000	103,700
1200 SHS NESTLE S A REP	52,152	129,912
12500 SHS SX7P LIRN ISSUER	125,000	94,250
1500 SHS WASTE MANGEMENT	47,441	170,940
1500 SHS ZURICH INSURANCE GROUP	45,239	61,500
17500 SHS SPX ENHANCED STEPUP	175,000	225,068
2000 SHS COCA COLA	50,156	110,700
2000 SHS MICROSOFT CORP	51,018	315,400
2000 SHS RAYONIER INC	65,465	65,520
2000 SHS UNILEVER PLC	51,538	114,340
20000 SHS INTL BKT STEPUP	200,000	225,000
20000 SHS SX5E LIRN ISSUER WFC	200,000	227,400
3000 SHS INTEL CORP	59,310	179,550
3000 SHS WEYERHAEUSER	91,200	90,600
500 SHS UNITED PARCEL SVC	50,276	58,530
6000 SHS NISOURCE INC	39,438	167,040
700 SHS CATERPILLAR	55,916	103,376
850 SHS DIAGEO PLC SPSD	50,222	143,157
850 SHS JOHNSON AND JOHNSON	50,633	123,990
900 SHS KELLOGG CO	47,469	62,244
20000 SHS SP500 CLIRNS ISSUER BNS	200,000	204,800

**TY 2019 Investments Government Obligations Schedule**

**Name:** THE SAMUEL AND JEAN FRANKEL  
HEALTH AND RESEARCH FOUNDATION

**EIN:** 30-0095044

**US Government Securities - End  
of Year Book Value:**

0

**US Government Securities - End  
of Year Fair Market Value:**

0

**State & Local Government  
Securities - End of Year Book  
Value:**

3,178,865

**State & Local Government  
Securities - End of Year Fair  
Market Value:**

3,454,549

**TY 2019 Investments - Other Schedule****Name:** THE SAMUEL AND JEAN FRANKEL

HEALTH AND RESEARCH FOUNDATION

**EIN:** 30-0095044**Investments Other Schedule 2**

<b>Category/ Item</b>	<b>Listed at Cost or FMV</b>	<b>Book Value</b>	<b>End of Year Fair Market Value</b>
107 SHS WESTERN ASSET MIDDLE MARKET	AT COST	108,753	73,641
10608 VULCAN VALUE PARTNERS	AT COST	225,485	255,451
10614 SHS OAKMARK GLOBAL SELECT	AT COST	179,653	196,685
11338 SHS ASHMORE EMERGING	AT COST	89,009	87,869
12867 SHS NUVEEN TAXABLE MUNI	AT COST	198,716	234,387
14319 SHS DAVIS NEW YORK VENTURE	AT COST	396,779	355,361
11200 SHS BLACKROCK 2022 GLOBAL	AT COST	118,192	117,720
11215 SHS INVESCO HIGH INCOME	AT COST	119,067	125,360
12057 SHS PIMCO LOW DURATION FD	AT COST	102,874	103,453
11807 SHS THE MERGER FUND CL	AT COST	186,403	201,904
12867 SHS ROYCE GLOBAL VALUE	AT COST	112,625	150,415
14319 SHS NUVEEN PREFERRED	AT COST	228,508	251,444
15097 SHS COHEN & STEERS	AT COST	176,573	189,479
14267 SHS HARTFORD BALANCED INCOME	AT COST	197,146	213,153
14464 SHS NEUBERGER BERMAN LONG SHORT	AT COST	167,742	212,911
1433 SHS TOCQUEVILLE GOLD FUND	AT COST	75,000	59,730
15362 SHS ANGEL OAK	AT COST	172,577	169,439
16444 SHS COLUMBIA FLEXIBLE CAPITAL INCOME	AT COST	200,544	223,309
16722 SHS FPA CRESCENT PORT	AT COST	447,788	565,714
17230 SHS SHENKMAN SHORT DURATION	AT COST	174,691	173,160
19107 SHS BLACKROCK GLOBAL	AT COST	348,510	369,336
19121 SHS PRINCIPAL GLOBAL DIVERSIFIED INCOME	AT COST	255,338	263,302
20997 SHS TORTOISE RESEARCH MLP & ENERGY INCOME	AT COST	201,792	150,547
19704 SHS JOHN HANCOCK STRATEGIC INCOME	AT COST	215,672	211,228
20437 SHS JP MORGAN INCOME BUILDER	AT COST	214,904	222,150
20295 SHS JPMORGAN STRATEGIC INCOME	AT COST	233,573	232,781
21113 SHS LORD ABBETT FLOATING RATE FUND	AT COST	189,097	186,426
22204 SHS EATON VANCE RCHRD BRSTN	AT COST	284,605	364,821
21720 SHS PIMCO INCOME FUND	AT COST	271,011	261,509
22307 SHS IVA WORLDWIDE	AT COST	346,982	372,746

**Investments Other Schedule 2**

Category/ Item	Listed at Cost or FMV	Book Value	End of Year Fair Market Value
222 SHS CZECH II SENIOR LOAN	AT COST	226,250	7,670
23244 SHS WELLS FARGO ABSOLUTE RETURN	AT COST	240,806	261,965
18 SHS WESTERN ASSET MIDDLE MKT	AT COST	18,540	12,761
3212 SHS FIRST EAGLE GOLD FUND	AT COST	75,058	65,209
36211 SHS EATON VANCE SHT DURT STRATEGIC INCOME	AT COST	275,203	257,823
272 SHS PMF TEI FUND	AT COST	27,200	29,946
36094 SHS VIRTUS MULTI SECTOR	AT COST	172,364	170,722
3820 SHS JENSEN QUALITY GROWTH	AT COST	148,304	197,723
36431 SHS PIMCO ALL ASSET	AT COST	364,281	302,018
3637 SHS MATTHEWS ASIA DIVIDEND	AT COST	61,080	63,534
37920 SHS T ROWE PRICE SHORT TERM	AT COST	182,433	179,364
4634 SHS NUVEEN REAL ASSET INC	AT COST	111,263	114,747
4733 SHS NUVEEN PFD	AT COST	117,560	119,220
4879 SHS FIRST EAGLE FUNDS OF AMERICA	AT COST	158,183	139,941
5000 SHS RIVERNORTH/DOUBLELINE	AT COST	98,357	82,150
5427 SHS KINETICS PARADIGM FUND	AT COST	199,410	292,352
6151 SHS MATTHEWS JAPAN FUND	AT COST	120,744	132,544
6000 SHS GOLDMAN SACHS MLP INCOME	AT COST	70,360	36,420
8033 SHS FIRST EAGLE GLOBAL	AT COST	412,979	467,586
8467 AQR STYLE	AT COST	83,807	69,003
9963 SHS DOUBLELINE INCOME SOLUTION	AT COST	219,645	196,874
1500 SHS BNY MELLON ALCENTRA	AT COST	150,000	152,850
12505 SHS BERWYN INCOME FUND	AT COST	163,464	167,316
5330 SHS PIMCO ENERGY	AT COST	106,027	87,941

## TY 2019 Other Assets Schedule

**Name:** THE SAMUEL AND JEAN FRANKEL  
HEALTH AND RESEARCH FOUNDATION  
**EIN:** 30-0095044

### Other Assets Schedule

Description	Beginning of Year - Book Value	End of Year - Book Value	End of Year - Fair Market Value
BASIS ADJUSTMENTS - OTHER INVESTMENTS	-136,919	-42,940	

**TY 2019 Other Expenses Schedule**

**Name:** THE SAMUEL AND JEAN FRANKEL  
HEALTH AND RESEARCH FOUNDATION

**EIN:** 30-0095044

**Other Expenses Schedule**

Description	Revenue and Expenses per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
STATE FILING FEE	20	0		0
BOND PREMIUM AMORTIZATION	3,739	0		0
PORTFOLIO DEDUCTIONS	447	0		0

## TY 2019 Other Income Schedule

**Name:** THE SAMUEL AND JEAN FRANKEL  
HEALTH AND RESEARCH FOUNDATION  
**EIN:** 30-0095044

### Other Income Schedule

Description	Revenue And Expenses Per Books	Net Investment Income	Adjusted Net Income
CZECH II SENIOR LOAN TRUST	387	387	387



**TY 2019 Other Professional Fees Schedule**

**Name:** THE SAMUEL AND JEAN FRANKEL  
HEALTH AND RESEARCH FOUNDATION

**EIN:** 30-0095044

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
INVESTMENT AND ADVISORY FEES	69,221	0		0

**TY 2019 Taxes Schedule**

**Name:** THE SAMUEL AND JEAN FRANKEL  
HEALTH AND RESEARCH FOUNDATION

**EIN:** 30-0095044

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
FOREIGN TAX WITHHELD	3,489	0		0
FEDERAL EXCISE TAX	28,500	0		0