Return of Private Foundation

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

OMB No 1545-0047

Department of the Treasury Internal Revenue Service

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

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

			dar year 2019 or tax year beginning	, 201	19, and end			, 20
	Nam	ne of for	undation			A Employer	identification number	r
	DAI	<u>U</u> EL	J & ARDITH KOSTER FOUNDATION			38-30676	00	
	Num	nber an	d street (or P O box number if mail is not delivered to street address)		Room/suit	te B Telephone	number (see instructio	ns)
			VANREST AVE SW			(616)878	-5554	
	City	or towr	n, state or province, country, and ZIP or foreign postal code			C If exemp	tion application is pendii	na. check here
	BYI	RON C	CENTER, MI 49315				арризаном по роман	ng, amaan mara
	G	Check	all that apply	of a former pul	olic charity	D 1. Foreig	n organizations, check	here ▶ 🗌
			Final return Amended re	etum		2 Foreign	n organizations meeting	the 85% test
			Address change Name change	ge	~ ^ ^		here and attach compu	
	н	Check	type of organization Section 501(c)(3) exempt private	foundation	()4	E If private	foundation status was t	orminated under
		Sectio	n 4947(a)(1) nonexempt charitable trust		idation		07(b)(1)(A), check here	
	ı f	aır ma	arket value of all assets at J Accounting method	X Cash	Accrual	F If the fou	ndation is in a 60-month	- termination
	6	end of	year (from Part II, col (c),			1	ction 507(b)(1)(B), chec	
	1	ine 16)) ▶ \$ 47,849 (Part I, column (d) must be	on cash basis)			
	Pa	art I	Analysis of Revenue and Expenses(The total of	(a) Barrage				(d) Disbursements
			amounts in columns (b), (c), and (d) may not necessarily equal	(a) Revenue expenses p		Net investment	(c) Adjusted net	for charitable purposes
4			the amounts in column (a) (see instructions))	books		income	income	(cash basis only)
5,		1	Contributions, gifts, grants, etc., received (attach schedule)					
/		2	Check ► X if the foundation is not required to attach Sch B					
X		3	Interest on savings and temporary cash investments					
1		4	Dividends and interest from securities					
		5a	Gross rents					
		b	Net rental income or (loss)			-		-
	a)	6a	Net gain or (loss) from sale of assets not on line 10					
	Revenue	ь	Gross sales price for all assets on line 6a					P
	Š	7	Capital gain net income (from Part IV, line 2)	***				•
	æ	8	Net short-term capital gain					
		9	Income modifications					
		10a	Gross sales less returns and allowances					
		b	Less Cost of goods sold				<u> </u>	
		c	Gross profit or (loss) (attach schedule)	<u> </u>				
		11	Other income (attach schedule)		_			
		12	Total. Add lines 1 through 11		0	0		
		13	Compensation of officers, directors, trustees, etc	<u> </u>	- 			
	w	14	Other employee salaries and wages					
	ses	15	Pension plans, employee benefits	-			RECEIVED	
~	둢	16a	Legal fees (attach schedule)				1204	
2022	Exp	b	Accounting fees (attach schedule) STM108		450		1204	
7	ē	C	Other professional fees (attach schedule)		30		MAY 21 202	n
17	Administrat.ve	17	Interest					
	stra	18	Taxes (attach schedule) (see instructions)				TERNAL REVENUES	RVICE
JAN	Ë	19	Depreciation (attach schedule) and depletion				KANSAS CITY, M	o.
~	퉏	20	Occupancy		-			
	Ă	21	Travel, conferences, and meetings					
Ш	and	22	Printing and publications					
SCANNED	D O	23	Other expenses (attach schedule) STM103		20			
A	Operating	24	Total operating and administrative expenses.	 				
\tilde{S}	era	24	•		470	•		^
ر ن	do	25	Add lines 13 through 23		470	. 0		0
	_	25	Contributions, gifts, grants paid		0			0
	_	26	Total expenses and disbursements. Add lines 24 and 25		470	0	······································	0
		27	Subtract line 26 from line 12	_			,	
		a	Excess of revenue over expenses and disbursements	ļ <u>(</u>	470)			
	Ì	b	Net investment income (if negative, enter -0-)			0		
		С	Adjusted net income (if negative, enter -0-)	L			0	

For Paperwork Reduction Act Notice, see instructions.

Form 990-PF (2019)

Рa	<u>rt II</u>	Balance Sheets Attached schedules and amounts in the description column	Beginning of year	<u>_</u>	<u>าต o</u>	t year
		should be for end-of-year amounts only (See instructions)	(a) Book Value	(b) Book Value		(c) Fair Market Value
	1	Cash - non-interest-bearing	75,709	47,8	49	47,849
	2	Savings and temporary cash investments				
	3	Accounts receivable ▶				
		Less allowance for doubtful accounts ▶				
	4	Pledges receivable ▶			[
		Less allowance for doubtful accounts				
	5	Grants receivable				
	6	Receivables due from officers, directors, trustees, and other				
		disqualified persons (attach schedule) (see instructions)				
	7	Other notes and loans receivable (attach schedule) ▶				
		Less allowance for doubtful accounts				
ţ	8	Inventories for sale or use	<u>-</u>			
Assets	9	Prepaid expenses and deferred charges				
ğ	10a	Investments - U S and state government obligations (attach schedule)				
	i	Investments - corporate stock (attach schedule)			$\neg \uparrow$	
		Investments - corporate bonds (attach schedule)				
		Investments - land, buildings, and equipment basis ►		• • • • • • • • • • • • • • • • • • • •		
	• •	Less accumulated depreciation (attach schedule)				
	12	Investments - mortgage loans				
	13	Investments - other (attach schedule)				
		Land, buildings, and equipment basis				
		Less accumulated depreciation (attach schedule)		·		
	15	Other assets (describe)			\dashv	
		Total assets (to be completed by all filers - see the			\dashv	
		Instructions Also, see page 1, item I)	75,709	47,8	49	47,849
	17	Accounts payable and accrued expenses	10,100			
	18	Grants payable			T	ا مايلانات
es	19	Deferred revenue			T	
Ξ	20	Loans from officers, directors, trustees, and other disqualified persons				
Liabilities	21	Mortgages and other notes payable (attach schedule)				•
\Box	22	Other liabilities (describe)			\neg	•
	23	Total liabilities (add lines 17 through 22)	0		0	
		Foundations that follow FASB ASC 958, check here · · · · · ▶ □		-		
es		and complete lines 24, 25, 29, and 30.				. }
alances	24	Net assets without donor restrictions				i
ala	25	Net assets with donor restrictions				
		Foundations that do not follow FASB ASC 958, check here ▶ 🏻				,
E I		and complete lines 26 through 30.			I	• '
۲.	26	Capital stock, trust principal, or current funds				
S	27	Paid-in or capital surplus, or land, bldg, and equipment fund				1
şet	28	Retained earnings, accumulated income, endowment, or other funds	75,709	47,8	49	•
Net Assets or Fund	29	Total net assets or fund balances (see instructions)	75,709	47,8	\neg	• 1
e	30	Total liabilities and net assets/fund balances (see				
z		instructions)	75,709	47,8	49	1
Pa	rt III					
1	Tota	al net assets or fund balances at beginning of year - Part II, column (a), line 29	9 (must agree with			
		-of-year figure reported on prior year's return)			1	75,709
2		er amount from Part I, line 27a			2	` (470)
3		er increases not included in line 2 (itemize)			3	
4		lines 1, 2, and 3			4	75,239
5	Dec	reases not included in line 2 (itemize)			5	
6	Tota	al net assets or fund balances at end of year (line 4 minus line 5) - Part II, colu	ımn (b), line 29		6	75,239

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(a) List and describe	e the kind(s) of property sold (for example, rearehouse, or common stock, 200 shs MLC	eal estate,	(b) How acquired P-Purchase D-Donation	(c) Date acquired (mo , day, yr)	(d) Date sold (mo , day, yr)
1a					
b					
С			<u> </u>		_
d			-		
<u>e</u>		1			l
(e) Gross sales price	(f) Depreciation allowed (or allowable)		or other basis pense of sale		iin or (loss) s (f) minus (g))
a					
b					
<u>C</u>					
d					
e Constitution of the control	(-)		10/01/00		
Complete only for assets si	howing gain in column (h) and owned b	by the foundation o	on 12/31/69	(I) Gains (Co	ol (h) gain minus
(ı) FMV as of 12/31/69	(j) Adjusted basis as of 12/31/69		ss of col (i) (j), if any	col (k), but no Losses (f	t less than -0-) or rom col (h))
a					
b					
c					
d					
е					
2 Capital gain net income or (n	iet capital loss)	gaın, also enter ın (loss), enter -0- ın	7	2	
3 Net short-term capital gain o	r (loss) as defined in sections 1222(5) :		- 4.1.1, 11.10	<u>-</u>	<u> </u>
· · · · · ·	ne 8, column (c) See instructions If (los	· •	,		
•		• •	}	3	
Part V Qualification Un	der Section 4940(e) for Redu	iced Tax on N	let Investment I		49.4
f "Yes," the foundation doesn't qua	ection 4942 tax on the distributable amo	olete this part	·		☐ Yes ☒ No
Enter the appropriate amoun (a)	t in each column for each year, see the	instructions before	e making any entries		(d)
Base period years Calendar year (or tax year beginnir	ng in) Adjusted qualifying distribution	s Net value	(c) of noncharitable-use as		stribution ratio divided by col (c))
2018					
2017					
2016					
2015					
2014					
				. 2 (0.0
=	the 5-year base period - divide the total	-	-		
the number of years the found	dation has been in existence if less than	n 5 years		. 3 (0.0
4 Enter the net value of noncha	aritable-use assets for 2019 from Part X	, line 5		. 4	
5 Multiply line 4 by line 3				. 5	
6 Enter 1% of net investment in	ncome (1% of Part I, line 27b)			. 6	
7 Add lines 5 and 6				. 7	
8 Enter qualifying distributions f					
If line 8 is equal to or greater Part VI instructions	than line 7, check the box in Part VI, lin	e 1b, and complet	e that part using a 1%	tax rate See the	

(or designate) of each state as required by General Instruction G^2 if "No," attach explanation

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 tax year beginning in 2019? See instructions for Part XIV)? If "Yes,"

Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their

х

8b

10

9

Part	VII-A Statements Regarding Activities (continued)			
		<u> </u>	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	ļ	х
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified			
	person had advisory privileges? If "Yes," attach statement. See instructions	12		х
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13		х
	Website address ► N/A			
14	The books are in care of ▶ GREG KOSTER Telephone no ▶ 616-878-	<u>5554</u>		
	Located at ► 7035 IVANREST, BYRON CENTER, MI ZIP+4 ► 49315			
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			
16	At any time during calendar year 2019, did the foundation have an interest in or a signature or other authority		Yes	No
	over a bank, securities, or other financial account in a foreign country?	16		х
	See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes," enter the name of			
	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.		Yes	No
1a	During the year, did the foundation (either directly or indirectly)			
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person?			
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a			
	disqualified person?			
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?			
	(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)?	1		
	(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)	٠.	-6%	
b	If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in			_
	Regulations section 53 4941(d)-3 or in a current notice regarding disaster assistance? See instructions	1b		
	Organizations relying on a current notice regarding disaster assistance, check here			
С	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that			
	were not corrected before the first day of the tax year beginning in 2019?	1c		
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private			
	operating foundation defined in section 4942(j)(3) or 4942(j)(5))			
а	At the end of tax year 2019, did the foundation have any undistributed income (Part XIII, lines	ļ		
	6d and 6el) for tax year(s) beginning before 2019? Yes No			
	If "Yes," list the years ,,,,			
b	Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2)			
	(relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to	_ - -		
	all years listed, answer "No" and attach statement - see instructions)	2b		<u></u>
C	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here			
	·,,,,,,,,,,,,,,,,,,			•
3a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise			
	at any time during the year?			
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 Form 4720, Schedule C, to determine if the			-
	foundation had excess business holdings in 2019)	3b	_	
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a		
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?	4b		

Part_	VII-B	Statements Regarding Activities for	or Whi	ich Form 47	720 Ma	ay Be Rec	uired	(co	<u>ntınu</u>	ed)				
5a	Dunng	the year, did the foundation pay or incur any amo	unt to										Yes	No
	(1) Ca	rry on propaganda, or otherwise attempt to influe	nce legis	slation (section	4945(e))?			Yes		No			
	(2) Inf	luence the outcome of any specific public election	ı (see se	ction 4955), or	to carry	on,								•
	dır	ectly or indirectly, any voter registration drive?							Yes		No			
	(3) Pr	ovide a grant to an individual for travel, study, or o	ther sim	ılar purposes?					Yes		No			•
	(4) Pr	ovide a grant to an organization other than a char	table, et	c , organization	n describ	ed in								
	se	ction 4945(d)(4)(A)? See instructions							Yes		No			
		ovide for any purpose other than religious, charitat												
	pu	rposes, or for the prevention of cruelty to children	or anım	als?					Yes		No			
b	If any a	answer is "Yes" to 5a(1)-(5), did any of the transa	actions f	fail to qualify ur	nder the	exceptions of	describe	d						
	-	ulations section 53 4945 or in a current notice reg										5b		_
	Organi	zations relying on a current notice regarding disa	ster assı	stance check h	ere .					. ▶				
С		nswer is "Yes" to question 5a(4), does the founda											-	
	becaus	se it maintained expenditure responsibility for the	grant?						Yes		No			
	If "Yes	" attach the statement required by Regulations se	ection 53	3 4945-5(d)										
6a		foundation, during the year, receive any funds, d	-					_		_				
		ersonal benefit contract?							Yes		No			
b	Did the	foundation, during the year, pay premiums, direc	tly or inc	directly, on a pe	ersonal b	enefit contra	ct?					6b		
		to 6b, file Form 8870						_		_				
7a		time during the tax year, was the foundation a par												
b		" did the foundation receive any proceeds or have	•				ion? .					7b		
8		oundation subject to the section 4960 tax on payr						_						
		eration or excess parachute payment(s) during the									No	لــــــا		
Part	VIII	Information About Officers, Directo	rs, Tr	ustees, Fol	ındati	on Manag	ers, H	igh	ly Pa	iid l	Emp	loyee	es,	
		and Contractors												
1	LIST all	officers, directors, trustees, and foundation n		s and their co e, and average	T -	mpensation			ribution	s to	- T			
See S	90_OE	(a) Name and address	hou	rs per week ed to position	(If r	not paid, iter -0-)		oyee	benefit	plans	S `	e) Expe other a	nse ac Illowan	
			PRESI:	DENT										
		TREET, MI 49315		5.00		0	<u></u>			_	•			0
	KOSTE		EXEC :	DIRECTOR	İ	_								
		REST, BYRON CENTER, MI 49315		10.00		0					0			0
	L KOS		BOARD	MEMBER		_								_
		EST, BYRON CENTER, MI 49315		5.00		0					0			0
	KOSTE		BOARD	MEMBER			ļ							
		BYRON CENTER, MI 49315	Alana Ala	5.00		0		16		-4	0			0
2	"NONE	ensation of five highest-paid employees (other	trian tric	ose included C	m me i	- see msu u	ctions).	II AIC	nie, ei	ilei				
	11011	···		Ι				(4) (Contribi	utions	s to			
(a	ı) Name a	and address of each employee paid more than \$50,000		(b) Title, and a hours per w	/eek ¯	(c) Comper	sation	em	ployee is and o	bene	efit 🛙 🕻	e) Expe	nse ac	
				devoted to po	osition			C	ompens	sation	١			
NONE														
		<u>-</u>						_			_			
											1			
						1					\perp			
											+			
							4	L			_			
Γotal n	umber o	of other employees paid over \$50,000					<u> </u>			۱	▶ _			0

DANIEL J & ARDITH KOSTER FOUNDATION

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EEA

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Part VIII Information About Officers, Directors, Trustees, Foun and Contractors (continued)	dation Managers, Highly Pai	d Employees,
3 Five highest-paid independent contractors for professional services. See ins	structions. If none, enter "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	<u>.</u>	. ▶
Part IX-A Summary of Direct Charitable Activities	 	-
List the foundation's four largest direct charitable activities during the tax year. Include relevant si organizations and other beneficiaries served, conferences convened, research papers produced,		Expenses
1THE SPECIFIC PURPOSE FOR WHICH THIS FOUNDATION EXISTS		
IS TO ADVANCE ANY RELIGIOUS BASED ACTIVITY, ANY		
ORGANIZATION THAT OPERATES FOR THE RELIEF OF POVERTY		0
2RELIGIOUS BASED ACTIVITY, ANY ORGANIZATION THAT	-	
OPERATES FOR THE RELIEF OF POVERTY OR ANY EDUCATIONAL		
INSTITUTION		0
3		
4		
Part IX-B Summary of Program-Related Investments (see instru	uctions)	
Describe the two largest program-related investments made by the foundation during the tax year	r on lines 1 and 2	Amount
1		
2		
-		
All other program-related investments See instructions		
3		
Total Add lines 1 through 3	·	•

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<u>Part</u>	X Minimum Investment Return (All domestic foundations must complete this part. Foreign foundations	ions,	
	see instructions)	,	
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc.,		
	purposes		
а	Average monthly fair market value of securities	1a	(
b	Average of monthly cash balances	1b	
С	Fair market value of all other assets (see instructions)	1c	
d	Total (add lines 1a, b, and c)	1d	
е	Reduction claimed for blockage or other factors reported on lines 1a and		
	1c (attach detailed explanation)		
2	Acquisition indebtedness applicable to line 1 assets	2	
3	Subtract line 2 from line 1d	3	(
4	Cash deemed held for charitable activities Enter 1 1/2% of line 3 (for greater amount, see		
	ınstructions)	4	(
5	Net value of noncharitable-use assets. Subtract line 4 from line 3 Enter here and on Part V, line.4	5	(
6	Minimum investment return. Enter 5% of line 5	6	(
Part	XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundation	ns	
	and certain foreign organizations, check here 🕨 🔲 and do not complete this part.)		
1	Minimum investment return from Part X, line 6	1	
2a	Tax on investment income for 2019 from Part VI, line 5		
b	Income tax for 2019 (This does not include the tax from Part VI)		
С	Add lines 2a and 2b	2c	
3	Distributable amount before adjustments Subtract line 2c from line 1	3	
4	Recoveries of amounts treated as qualifying distributions	4	
5	Add lines 3 and 4	5	
6	Deduction from distributable amount (see instructions)	6	
7	Distributable amount as adjusted Subtract line 6 from line 5 Enter here and on Part XIII,		
	line 1	7	(
Part	XII Qualifying Distributions (see instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes		
а	Expenses, contributions, gifts, etc - total from Part I, column (d), line 26	1a	
b	Program-related investments - total from Part IX-B	1b	
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc.,		
	purposes	2	
3	Amounts set aside for specific charitable projects that satisfy the		
а	Suitability test (prior IRS approval required)	3a	
b	Cash distribution test (attach the required schedule)	3b	
4	Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4	4	
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 See instructions	5	
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	
	Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the found	dation	

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

EEA

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

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Part	XIV Private Operating Founda	tions (see ins	tructions and Part	VII-A, question 9)	
1a	If the foundation has received a ruling or dete	ermination letter th	nat it is a private operat	ting		
	foundation, and the ruling is effective for 2019	enter the date o	f the ruling			
b	Check box to indicate whether the foundation	n is a private opera	ating foundation descri	bed in section	4942(j)(3) or 494	42(j)(5)
2a	Enter the lesser of the adjusted net	Tax year		Prior 3 years		
	income from Part I or the minimum	(a) 2019	(b) 2018	(c) 2017	(d) 20 <u>1</u> 6	(e) Total
	investment return from Part X for each year listed					<u>-</u>
b	85% of line 2a					
С	Qualifying distributions from Part XII, line 4 for each year listed					
	•		-		-	· · · · · · · · · · · · · · · · · · ·
d	Amounts included in line 2c not used directly for active conduct of exempt activities					
	To active conduct of exempt activities		·-			···-
е	Qualifying distributions made directly for active conduct of exempt activities Subtract line 2d from line 2c					
3	Complete 3a, b, or c for the alternative test relied upon					
а	"Assets" alternative test - enter					
-	(1) Value of all assets					
	(2) Value of assets qualifying under section 4942(j)(3)(B)(i)					
b	"Endowment" alternative test - enter 2/3	<i>f</i>			 -	
~	of minimum investment return shown in					
	Part X, line 6 for each year listed					
С	"Support" alternative test - enter					
	 Total support other than gross investment income interest, 					
	dividends, rents, payments on secunties loans (section					
	securities loans (section 512(a)(5)), or royalties)					
	(2) Support from general public			+		•
	and 5 or more exempt					
	orgánizations as provided in section 4942(j)(3)(B)(III)					
	(3) Largest amount of support from an exempt organization					
	(4) Gross investment income					
Part	1	(Complete t	his part only if th	ne foundation ha	d \$5,000 or more	in assets at
	any time during the year -				- 40,000 0,	455515 41
1	Information Regarding Foundation Management				· ·	
а	List any managers of the foundation who ha	-	ore than 2% of the total	contributions received	by the foundation	
	before the close of any tax year (but only if t	hey have contribu	ited more than \$5,000)	(See section 507(d)(2))	
b	List any managers of the foundation who ow ownership of a partnership or other entity) o				e portion of the	
2	Information Regarding Contribution, Grai	nt, Gift, Loan, Sch	nolarship, etc., Progra	ams:		
	Check here ▶ ☐ If the foundation only ma			-		
	unsolicited requests for funds. If the foundat		rants, etc , to individual	ls or organizations und	er other conditions,	
	complete items 2a, b, c, and d See instruction			-		
а	The name, address, and telephone number	or email address	of the person to whom	applications should be	addressed	
9.0	OAPP					
b	The form in which applications should be su	bmitted and inform	nation and materials th	ev should include		*
_			_	,		
С	Any submission deadlines					
d	Any restrictions or limitations on awards, suc	h as by geograph	nical areas, charitable f	ields, kinds of institution	ns, or other	
	factors					

Part XV | Supplementary Information (continued) 3 Grants and Contributions Paid During the Year or Approved for Future Payment If recipient is an individual Recipient Foundation show any relationship to Purpose of grant or status of Amount any foundation manager contribution recipient Name and address (home or business) or substantial contributor a Paid during the year FRONTIER SCHOOL OF BIBLE PO BOX 217 LAGRANGE, WY 82221 NONE SUPPORT 4,989 GRACE MINISTRIES PO BOX 820 MOUNDSVILLE, WV 26041 NONE SUPPORT 3,000 INDEPENDENT BIBLE MISSION 749 LAMOREAUX DRIVE COMSTOCK PARK, MI 49321 NONE SUPPORT 4,000 SCRIPTURE MEMORY MOUTAIN MISSION 4180 CAMP NATHANAEL ROAD EMMALENA, KY 41740 NONE SUPPORT 3,000 TRUTH ALIVE MINISTRIES 1404 AUBURN PLACE PLANO, TX 75093 NONE SUPPORT 2,000 WOMEN AT RISK INTL 2790 44TH ST SW WYOMING, MI 49509 NONE SUPPORT 1,401 CALVARY BAPTIST CHURCH 220 N JEBAVY DRIVE LUDINGTON, MI 49431 NONE SUPPORT 3,700 GRANDVILLE BIBLE CHURCH 4122 44TH STREET SW GRANDVILLE, MI 49418 NONE SUPPORT 10,000 За Approved for future payment

3b

Total

Part XV Supplementary Information (continued) Grants and Contributions Paid During the Year or Approved for Future Payment If recipient is an individual. Recipient Foundation show any relationship to Purpose of grant or contribution status of Amount any foundation manager recipient Name and address (home or business) or substantial contributor a Paid during the year ROCKY MOUNTAIN BIBLE CHURCH PO BOX 148 NONE FRISCO, CO 80443 SUPPORT 1,000 KENYA HOPE 55 E ROOSEVELT AVE ZEELAND, MI 49464 NONE SUPPORT 9,000 REASONS FOR HOPE PO BOX 415 HEBRON, KY 41048 NONE SUPPORT 15,000 UNITED INDIAN MISSION INTL PO BOX 6429 GLENDALE, AZ 85312 NONE SUPPORT 2,000 **BIBLES INTERNATIONAL** 609 36TH STREET GRAND RAPIDS, MI 49548 NONE SUPPORT 1,000 LINCOLN LAKE YOUTH CAMP 15113 LINCOLN LAKE ROAD GOWEN, MI 49326 NONE SUPPORT 1,000 PREGNANCY RESOURCE CENTER 415 CHERRY ST SE GRAND RAPIDS, MI 49503 NONE SUPPORT 1,000 WARNING LIGHTS PO BOX 200 NONE BYRON CENTER, MI 49315 SUPPORT 2,000 Approved for future payment

Total

Form 990-PF (2019) DANIEL J & ARDITH KOSTER FOUNDATION 38-3067600 Page 11 Part XV | Supplementary Information (continued) 3 Grants and Contributions Paid During the Year or Approved for Future Payment If recipient is an individual, Recipient Foundation Purpose of grant or contribution show any relationship to any foundation manager or substantial contributor status of recipient Amount Name and address (home or business) Paid during the year WEST SHORE PREGANCY & FAMILY SUPPOR 759 MICHIGAN AVE BALDWIN, MI 49304 NONE SUPPORT 1,000 WORLD MISSIONS 4200 ALPINE AVE NW COMSTOCK PARK, MI 49321 NONE SUPPORT 1,000 ĭ 66,090 Total Approved for future payment

3b

Total

	r gross amounts unless otherwise indicated		usiness income	Excluded by sect	on 512, 513, or 514	(e)
1	Program service revenue	(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	Related or exempt function income (See instructions)
•	•			 		
	b		-			-
	^					
	d			<u> </u>		
	е					
	f					
	g Fees and contracts from government agencies					
2	Membership dues and assessments		_			
3	Interest on savings and temporary cash investments			14		
4	Dividends and interest from securities		-			
5	Net rental income or (loss) from real estate					
	a Debt-financed property					
	b Not debt-financed property					
6	Net rental income or (loss) from personal property					
7	Other investment income			ļ <u>.</u>		
8	Gain or (loss) from sales of assets other than inventory .	***************************************				
9	Net income or (loss) from special events					
10	Gross profit or (loss) from sales of inventory			<u> </u>		
11	Other revenue a					
	b					
	<u> </u>			-		
	d			<u> </u>		
10	eSubtotal Add columns (b), (d), and (e)	-				
	Total. Add line 12, columns (b), (d), and (e)		<u> </u>	<u></u>	12	
	worksheet in line 13 instructions to verify calculations)			• • • • • • •	. 13	
	rt XVI-B Relationship of Activities to the Ac	ccomplishme	nt of Exempt	Purposes		
Lır	ne No. Explain below how each activity for which incom	e is reported in co	olumn (e) of Part X	VI-A contributed	importantly to the	
	accomplishment of the foundation's exempt purpo	uses (other trial b	y providing funds	or such pulposes	(See instructions	· · · · · · · · · · · · · · · · · · ·

			-			
					_	
				<u>.</u>		
			-			
						
				<u> </u>	<u>.</u>	<u> </u>

Form 990-PF (2019)

DANIEL J & ARDITH KOSTER FOUNDATION

38-3067600

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

1 dit	/\ \ \ I I	Organization	e	3.0.0	io una manoa	otiono a	iia iiolai		ipo mini		ui i i i	J.O _XO			
1	Did th		ctly or indirectly en	naane ii	n any of the follo	wing with	any other	organiz	ation describ	ed				Yes	No
•			than section 501(c)											100	
		zations?		/(=/ = . 5				, ۲۰۰					1	1	
а	-		ting foundation to a	a nonch	narıtable exempt	organizati	on of								
_		•			· ·	-							1a(1)		x
	• •												1a(2)		x
b	` '	transactions											133(3)		
-			noncharitable exe	empt or	ganization								1b(1)		x
			from a nonchanta		=								1b(2)		x
			equipment, or other		=								1b(3)		х
			angements										1b(4)		x
	. ,		intees										1b(5)		х
			rices or membersh										1b(6)		х
С			pment, mailing lists		-								1c		х
d		-	he above is "Yes,"												
_			r assets, or service		_										
		_	or sharing arrange	_									ed		
(a) Lin		(b) Amount involved			ritable exempt org				otion of transfe					angeme	ents
			, ,									<u> </u>			
									••••••						
												••			

		•													
							1								
						'									
											-				
		•••••													
										-					
2a	Is the	foundation directly	or indirectly affiliat	ted with	h, or related to, o	ne or mor	e tax-exer	npt org	anizations					********	
		=	(c) (other than sec											es X	No
b	If "Yes	s," complete the fol	lowing schedule												
		(a) Name of organ	ızatıon		(b) Type of c	rganization			(c) Descr	iption o	f relations	ship		
					·										
			_												
	Under	penalties of perjury, I de	eclare that I have examination of preparer (other th	ned this re	eturn, including accon	npanying sche	edules and sta	atements	and to the best	of my kr	nowledge	e and belief	, it is true,		
Sign	Conec	a, and complete Declara	alloit of preparer (other th	-	- '				,			May the II	RS discuss	s this reti	urn
Here		Armore	uJ. Kan	tu	5-15	-20	Presi	Les	+			with the p	reparer <u>sh</u>	own belg	<u>ow</u> ?
		gnature of officer or trus	14		Date	0	Title					See instru	ictions	Yes	X No
		Print/Type preparer's r	name		Preparer's signature	1-1		_	Date		Check	if	PTIN	· 	·
Paid		MICHAEL A T	AWNEY						05-09-20	20	self-em	ployed	P0124	4698	
Prep	arer	Firm's name	Michael A '	Tawne	ey & Compan	Y PC				Firm's	EIN Þ	·			
Use	Onlv	Firm's address	1675 Michig	gan S	St NE Ste I)				Phone	no				
			Grand Rapid	ds MI	49503					616-	<u>456-</u>	4700			
								· <u></u>	_				Earm 00	M DE	(2010)

		Federal Su	Federal Supporting Statements	nents	2019 PG01
Name(s) as shown on return DANIEL J & ARDITH KOSTER FOUNDATION					Tax ID Number 38–3067600
	FORM 990PF - PART I	- LINE 23	- OTHER EXPENSES SCHEDULE	DULE	STATEMENT #103~
DESCRIPTION	REVENUE AND EXPENSES	NET INVESTMENT	ADJUSTED NET INCOME	CHARITABLE PURPOSE	
BANK SERVICE CHARGES ADMINISTRATIVE COSTS FILING FEE	0 0	000	0 0	0 0	
TOTALS	20	0	0	0	
		•			

Tab Dames Forest 1906P - PART I - LINE 16(3) - ACCOUNTING FEES SCHEDULE STAN			Federal Su	Federal Supporting Statements	nents	2019 PG01
Form 9900P - Part 1 - Line 16181 - Accounting Press Schedule Alb Extends	Name(s) as shown on return DANIEL J & ARDITH KOSTER FOUNDATI	NOI				D Num
THE FEES STORING NET ADDRESS CONTINUES CONTINUES OF THE SHOPE STORING SHOPE SH			t	- ACCOUNTING FEES SC	СНЕБОИЪЕ	STATEMENT #108-
450 FEES TO THE FE	DESCRIPTION	REVENUE AND EXPENSES	NET	ADJUSTED NET INCOME	CHARITABLE	I
	ACCOUNTING FEES	450	0	1 1	1 1	
	TOTALS					
						,
			•			
			•			,
	٠			,		

Federal Supporting Statements

2019 PG01

Name(s) as shown on return

DANIEL J & ARDITH KOSTER FOUNDATION

Your Social Security Number

38-3067600

FORM 990PF - PART XV - LINE 2
APPLICATION SUBMISSION INFORMATION

GRANT PROGRAM

APPLICANT NAME GREG KOSTER

ADDRESS
2015 8TH AVENUE
BYRON CENTER, MI 49315

TELEPHONE 616-878-5554

EMAIL ADDRESS

FORM & CONTENT

APPLICATIONS MAY BE REQUESTED IN WRITING TO THE ABOVE ADDRESS

SUBMISSION DEADLINE NONE

RESTRICTIONS ON AWARD

GRANTS OR SCHOLARSHIPS ARE AVAILABLE TO FULL-TIME STUDENTS WHO WILL ATTEND A QUALIFIED CHRISTIAN EDUCATIONAL INSTITUTION. THE STUDENT OR HIS/HER PARENTS MUST HAVE BEEN OR CURRENTLY BE ENGAGED IN SUBSTANTIAL CHRISITIAN SERVICE. CHRISTIAN BASED 501(C)(3) ORGANIZATIONS MAY ALSO MAKE REQUESTS.