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Form 990-PF
Department of the Treasury
Internal Revenue Service

Return of Private Foundation
or Section 4947(a)(1) Trust Treated as Private Foundation
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Go to www.irs.gov/Form990PF for instructions and the latest information.

OMB No. 1545-0052
2019
Open to Public Inspection

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

Name of foundation THE KORFF FOUNDATION		A Employer identification number 38-3190927	
Number and street (or P.O. box number if mail is not delivered to street address) 545 CLARK DR NW		B Telephone number (see instructions) (616) 301-1305	
City or town, state or province, country, and ZIP or foreign postal code COMSTOCK PARK, MI 49321		C If exemption application is pending, check here	
G Check all that apply: <div><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</div>		D 1. Foreign organizations, check here..... 2. Foreign organizations meeting the 85% test, check here and attach computation ...	
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	
I Fair market value of all assets at end of year (from Part II, col. (c), line 16) ▶\$ 8,105,755	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	

Part I	Analysis of Revenue and Expenses (The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a) (see instructions).)	(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)	85,394			
	2 Check <input type="checkbox"/> if the foundation is not required to attach Sch. B				
	3 Interest on savings and temporary cash investments	689	689		
	4 Dividends and interest from securities	144,980	144,980		
	5a Gross rents				
	b Net rental income or (loss)				
	6a Net gain or (loss) from sale of assets not on line 10	8,818			
	b Gross sales price for all assets on line 6a 4,913,182				
	7 Capital gain net income (from Part IV, line 2)		8,818		
	8 Net short-term capital gain				
	9 Income modifications				
	10a Gross sales less returns and allowances				
b Less: Cost of goods sold					
c Gross profit or (loss) (attach schedule)					
11 Other income (attach schedule)	17,359	12,694			
12 Total. Add lines 1 through 11	257,240	167,181			
Operating and Administrative Expenses	13 Compensation of officers, directors, trustees, etc.	25,000	18,750		6,250
	14 Other employee salaries and wages				
	15 Pension plans, employee benefits				
	16a Legal fees (attach schedule)				
	b Accounting fees (attach schedule)	11,650	11,650		0
	c Other professional fees (attach schedule)	45,351	45,351		0
	17 Interest				
	18 Taxes (attach schedule) (see instructions)	57,285	1,466		489
	19 Depreciation (attach schedule) and depletion				
	20 Occupancy				
	21 Travel, conferences, and meetings				
	22 Printing and publications				
	23 Other expenses (attach schedule)	4,882	3,676		1,206
	24 Total operating and administrative expenses. Add lines 13 through 23	144,168	80,893		7,945
	25 Contributions, gifts, grants paid	329,000			329,000
26 Total expenses and disbursements. Add lines 24 and 25	473,168	80,893		336,945	
	27 Subtract line 26 from line 12:				
	a Excess of revenue over expenses and disbursements	-215,928			
	b Net investment income (if negative, enter -0-)		86,288		
	c Adjusted net income (if negative, enter -0-)				

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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	50,398	101,555	101,555
	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 ▶ _____			
	8 Inventories for sale or use			
	9 Prepaid expenses and deferred charges			
	10a Investments—U.S. and state government obligations (attach schedule)			
	b Investments—corporate stock (attach schedule)	6,653,146	6,445,746	7,002,030
	c Investments—corporate bonds (attach schedule)			
	11 Investments—land, buildings, and equipment: basis ▶ _____ Less: accumulated depreciation (attach schedule) ▶ _____			
	12 Investments—mortgage loans			
	13 Investments—other (attach schedule)	997,611	935,809	1,002,170
	14 Land, buildings, and equipment: basis ▶ _____ Less: accumulated depreciation (attach schedule) ▶ _____			
15 Other assets (describe ▶ _____)				
16 Total assets (to be completed by all filers—see the instructions. Also, see page 1, item I)	7,701,155	7,483,110	8,105,755	
Liabilities	17 Accounts payable and accrued expenses	2,159	42	
	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 Total liabilities (add lines 17 through 22)	2,159	42	
Net Assets or Fund Balances	Foundations that follow FASB ASC 958, check here ▶ <input type="checkbox"/> and complete lines 24, 25, 29 and 30.			
	24 Net assets without donor restrictions			
	25 Net assets with donor restrictions			
	Foundations that do not follow FASB ASC 958, check here ▶ <input checked="" type="checkbox"/> and complete lines 26 through 30.			
	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	7,698,996	7,483,068	
	29 Total net assets or fund balances (see instructions)	7,698,996	7,483,068	
30 Total liabilities and net assets/fund balances (see instructions) .	7,701,155	7,483,110		

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	7,698,996
2 Enter amount from Part I, line 27a	2	-215,928
3 Other increases not included in line 2 (itemize) ▶ _____	3	0
4 Add lines 1, 2, and 3	4	7,483,068
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	7,483,068

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.)
1 a PUBLICLY TRADED SECURITIES			
b PARTNERSHIP CAPITAL GAINS	P		
c CAPITAL GAINS DIVIDENDS	P		
d			
e			

(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)
a 4,879,953		4,898,818	-18,865
b			-5,546
c 33,229			33,229
d			
e			

Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69

(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	(l) Gains (Col. (h) gain minus col. (k), but not less than -0-) or Losses (from col.(h))
a			-18,865
b			-5,546
c			33,229
d			
e			

2 Capital gain net income or (net capital loss)	2	8,818
3 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	3	

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	239,789	4,514,925	0.053110
2017	217,137	3,011,583	0.072101
2016	202,387	2,776,183	0.072901
2015	193,300	2,964,152	0.065213
2014	177,800	3,107,137	0.057223

2 Total of line 1, column (d)	2	0.320548
3 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	3	0.064110
4 Enter the net value of noncharitable-use assets for 2019 from Part X, line 5	4	7,735,426
5 Multiply line 4 by line 3	5	495,918
6 Enter 1% of net investment income (1% of Part I, line 27b)	6	863
7 Add lines 5 and 6	7	496,781
8 Enter qualifying distributions from Part XII, line 4	8	336,945

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)

1a	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	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	1	1,726
c	All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of Part I, line 12, col. (b)		
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	2	0
3	Add lines 1 and 2.	3	1,726
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	4	0
5	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-	5	1,726
6	Credits/Payments:		
a	2019 estimated tax payments and 2018 overpayment credited to 2019	6a	49,579
b	Exempt foreign organizations—tax withheld at source	6b	
c	Tax paid with application for extension of time to file (Form 8868)	6c	0
d	Backup withholding erroneously withheld	6d	0
7	Total credits and payments. Add lines 6a through 6d.	7	49,579
8	Enter any penalty for underpayment of estimated tax. Check here <input type="checkbox"/> if Form 2220 is attached.	8	0
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed	9	
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid	10	47,853
11	Enter the amount of line 10 to be: Credited to 2020 estimated tax 47,853 Refunded	11	0

Part VII-A Statements Regarding Activities

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

Part VII-A Statements Regarding Activities (continued)

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		No
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		No
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application? Website address ► N/A	13	Yes	
14	The books are in care of ► CARRIE SHELNER Telephone no. ► (616) 301-1305			

Located at **►** 545 CLARK DR NW COMSTOCK PARK MI ZIP+4 **►** 49321

15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 —check here ► <input type="checkbox"/>			
	and enter the amount of tax-exempt interest received or accrued during the year ► 15			
16	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?	16	Yes	No
	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.

1a	During the year did the foundation (either directly or indirectly):		Yes	No
	(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 checked="" type="checkbox"/> Yes <input 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? (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.) <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
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 <input type="checkbox"/>	1b		No
c	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? <input type="checkbox"/>	1c		No
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)):			
a	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	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.) <input type="checkbox"/>	2b		
c	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here. ► 20____, 20____, 20____, 20____			
3a	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	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.) <input type="checkbox"/>	3b		
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a		No
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		No

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

5a	During the year did the foundation pay or incur any amount to:		Yes	No
(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	If any answer is "Yes" to 5a(1)–(5), did any 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		5b	
	Organizations relying on a current notice regarding disaster assistance check here.	<input type="checkbox"/>		
c	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		
6a	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	6b	No
b	Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract? If "Yes" to 6b, file Form 8870.			
7a	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	7b	
b	If "Yes", did the foundation receive any proceeds or have any net income attributable to the transaction?			
8	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

1 List all officers, directors, trustees, foundation managers and their compensation. See instructions				
(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
MARCAE MANTING 2715 SNOW SE LOWELL, MI 49311	CEO/SECRETARY 0.00	0	0	0
CARRIE SHELNER 545 CLARK DR NW COMSTOCK PARK, MI 49321	PRESIDENT/TREASURER 20.00	25,000	0	0
KIRSTIN JOHNSON 2031 ABILENE COURT FORT COLLINS, CO 80525	DIRECTOR 0.00	0	0	0
BRIENNE GOUBEUX 901 E VAULT MINE COURT GREEN VALLEY, AZ 85614	DIRECTOR 0.00	0	0	0
2 Compensation of five highest-paid employees (other than those included on line 1—see instructions). If none, enter "NONE."				
(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				
Total number of other employees paid over \$50,000.				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		
Total number of others receiving over \$50,000 for professional services. ►		0

Part IX-A Summary of Direct Charitable Activities

List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of organizations and other beneficiaries served, conferences convened, research papers produced, etc.

	Expenses
1	
2	
3	
4	

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
1	
2	
All other program-related investments. See instructions.	
3	
Total. Add lines 1 through 3 ►	0

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

1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes:		
a	Average monthly fair market value of securities.	1a	6,714,081
b	Average of monthly cash balances.	1b	136,973
c	Fair market value of all other assets (see instructions).	1c	1,002,170
d	Total (add lines 1a, b, and c).	1d	7,853,224
e	Reduction claimed for blockage or other factors reported on lines 1a and 1c (attach detailed explanation).	1e	0
2	Acquisition indebtedness applicable to line 1 assets.	2	0
3	Subtract line 2 from line 1d.	3	7,853,224
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions).	4	117,798
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	7,735,426
6	Minimum investment return. Enter 5% of line 5.	6	386,771

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.)

1	Minimum investment return from Part X, line 6.	1	386,771
2a	Tax on investment income for 2019 from Part VI, line 5.	2a	1,726
b	Income tax for 2019. (This does not include the tax from Part VI.).	2b	770
c	Add lines 2a and 2b.	2c	2,496
3	Distributable amount before adjustments. Subtract line 2c from line 1.	3	384,275
4	Recoveries of amounts treated as qualifying distributions.	4	0
5	Add lines 3 and 4.	5	384,275
6	Deduction from distributable amount (see instructions).	6	0
7	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1.	7	384,275

Part XII Qualifying Distributions (see instructions)

1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:		
a	Expenses, contributions, gifts, etc.—total from Part I, column (d), line 26.	1a	336,945
b	Program-related investments—total from Part IX-B.	1b	0
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes.	2	
3	Amounts set aside for specific charitable projects that satisfy the:		
a	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	336,945
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	0
6	Adjusted qualifying distributions. Subtract line 5 from line 4.	6	336,945

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
1	Distributable amount for 2019 from Part XI, line 7				384,275
2	Undistributed income, if any, as of the end of 2019:				
a	Enter amount for 2018 only.			0	
b	Total for prior years: 20____, 20____, 20____		0		
3	Excess distributions carryover, if any, to 2019:				
a	From 2014. 27,258				
b	From 2015. 47,362				
c	From 2016. 65,456				
d	From 2017. 69,137				
e	From 2018. 20,578				
f	Total of lines 3a through e.	229,791			
4	Qualifying distributions for 2019 from Part XII, line 4: ► \$ 336,945				
a	Applied to 2018, but not more than line 2a			0	
b	Applied to undistributed income of prior years (Election required—see instructions).		0		
c	Treated as distributions out of corpus (Election required—see instructions).	0			
d	Applied to 2019 distributable amount.				336,945
e	Remaining amount distributed out of corpus	0			
5	Excess distributions carryover applied to 2019. (If an amount appears in column (d), the same amount must be shown in column (a).)	47,330			47,330
6	Enter the net total of each column as indicated below:				
a	Corpus. Add lines 3f, 4c, and 4e. Subtract line 5	182,461			
b	Prior years' undistributed income. Subtract line 4b from line 2b.		0		
c	Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed.		0		
d	Subtract line 6c from line 6b. Taxable amount—see instructions.		0		
e	Undistributed income for 2018. Subtract line 4a from line 2a. Taxable amount—see instructions.			0	
f	Undistributed income for 2019. Subtract lines 4d and 5 from line 1. This amount must be distributed in 2020.				0
7	Amounts treated as distributions out of corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3) (Election may be required - see instructions).	0			
8	Excess distributions carryover from 2014 not applied on line 5 or line 7 (see instructions).	0			
9	Excess distributions carryover to 2020. Subtract lines 7 and 8 from line 6a.	182,461			
10	Analysis of line 9:				
a	Excess from 2015. 27,290				
b	Excess from 2016. 65,456				
c	Excess from 2017. 69,137				
d	Excess from 2018. 20,578				
e	Excess from 2019.				

Part XIV Private Operating Foundations (see instructions and Part VII-A, question 9)

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(j)(3) or ☐ 4942(j)(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 85% of line 2a					
c Qualifying distributions from Part XII, line 4 for each year listed					
d Amounts included in line 2c not used directly for active conduct of exempt activities					
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:					
a "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 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 Supplementary Information (Complete this part only if the foundation had \$5,000 or more in assets at any time during the year—see instructions.)

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).)

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)				
a <i>Paid during the year</i> See Additional Data Table				
Total			▶ 3a	329,000
b <i>Approved for future payment</i> See Additional Data Table				
Total			▶ 3b	48,000

Enter gross amounts unless otherwise indicated.

[illegible]

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

1 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?			Yes	No
a Transfers from the reporting foundation to a noncharitable exempt organization of:				
(1) Cash.		1a(1)		No
(2) Other assets.		1a(2)		No
b Other transactions:				
(1) Sales of assets to a noncharitable exempt organization.		1b(1)		No
(2) Purchases of assets from a noncharitable exempt organization.		1b(2)		No
(3) Rental of facilities, equipment, or other assets.		1b(3)		No
(4) Reimbursement arrangements.		1b(4)		No
(5) Loans or loan guarantees.		1b(5)		No
(6) Performance of services or membership or fundraising solicitations.		1b(6)		No
c Sharing of facilities, equipment, mailing lists, other assets, or paid employees.		1c		No
d If the answer to any of the above is "Yes," complete the following schedule. Column (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 (d) 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

Sign Here	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.		
	*****	2020-11-09	*****
	_____ Signature of officer or trustee	_____ Date	_____ Title

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

Paid Preparer Use Only	Print/Type preparer's name	Preparer's Signature	Date	Check if self-employed <input type="checkbox"/>	PTIN
	JAMES B MERSMAN		2020-11-09		P00016997
	Firm's name ▶ DOLINKA VANNOORD & COMPANY PLLP				Firm's EIN ▶ 38-2426290
	Firm's address ▶ 360 EAST BELTLINE NE STE 200 GRAND RAPIDS, MI 495061208				Phone no. (616) 459-2233

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)				
a <i>Paid during the year</i>				
ACTION INSTITUTE 161 OTTAWA AVE NW STE 301 GRAND RAPIDS, MI 49503	NONE	PC	EDUCATIONAL	1,000
ALBION COLLEGE611 E PORTER ST ALBION, MI 49224	NONE	PC	EDUCATIONAL	3,000
ALLIANCE DEFENDING FREEDOM- BLACKSTONE LEGAL FELLOWSHIP 15100 N 90TH STREET SCOTTSDALE, AZ 85260	NONE	PC	RELIGIOUS	5,000
Total ▶ 3a				329,000

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)				
a Paid during the year				
ALZHEIMERS ASSOCIATION 225 N MICHIGAN AVE FL 17 CHICAGO, IL 60601	NONE	PC	CHARITABLE	1,000
AMERICAN CANCER SOCIETY PO BOX 22718 OKLAHOMA CITY, OK 73123	NONE	PC	CHARITABLE	1,000
AMERICAN FOUNDATION FOR SUICIDE PREVENTION 120 WALL STREET 29TH FLOOR NEW YORK, NY 10005	NONE	PC	CHARITABLE	1,000
Total ▶ 3a				329,000

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)				
a <i>Paid during the year</i>				
AMERICAN HEART ASSOCIATION 208 S LASALLE ST STE 1500 CHICAGO, IL 60604	NONE	PC	CHARITABLE	2,000
AMERICAN RED CROSS 1050 FULLER AVE NE GRAND RAPIDS, MI 49503	NONE	PC	CHARITABLE	5,000
AQUINAS COLLEGE1700 FULTON ST E GRAND RAPIDS, MI 49506	NONE	PC	EDUCATIONAL	20,000
Total ▶ 3a				329,000

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)				
a <i>Paid during the year</i>				
ASSOCIATION FOR THE BLIND AND VISUALLY IMPAIRED 456 CHERRY ST SE GRAND RAPIDS, MI 49503	NONE	PC	CHARITABLE	2,000
BEYOND 264340 BURLINGAME AVE SW WYOMING, MI 49509	NONE	PC	CHARITABLE	2,000
BLANDFORD NATURE CENTER 1715 HILLBURN AVE NW GRAND RAPIDS, MI 49504	NONE	PC	EDUCATIONAL	1,500
Total ▶ 3a				329,000

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)				
a Paid during the year				
BOYS AND GIRLS CLUB OF GRAND RAPIDS 235 STRAIGHT AVE NW GRAND RAPIDS, MI 49504	NONE	PC	EDUCATIONAL	2,000
BOYSTOWN14100 CRAWFORD ST BOYSTOWN, NE 68010	NONE	PC	CHARITABLE	1,000
BROKEN SHOVELS FARM 8640 DAHLIA ST HENDERSON, CO 80640	NONE	PC	EDUCATIONAL	1,500
Total ▶ 3a				329,000

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)				
a <i>Paid during the year</i>				
CAMP AO WA KIYA 48401 WEST THOMAS ST SHELBY, MI 49455	NONE	PC	EDUCATIONAL	2,000
CARS FOR A CAUSE GRAND RAPIDS LIONS CLUB CHARITIES 258 MORRIS AVE SE GRAND RAPIDS, MI 49503	NONE	PC	CHARITABLE	1,000
CATHEDRAL OF ST ANDREW 265 SHELDON SE GRAND RAPIDS, MI 49503	NONE	PC	RELIGIOUS	5,000
Total ▶ 3a				329,000

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)				
a <i>Paid during the year</i>				
CATHOLIC CHARITIES OF WEST MICHIGAN 40 JEFFERSON AVE SE GRAND RAPIDS, MI 49503	NONE	PC	RELIGIOUS	2,000
CATHOLIC INFORMATION CENTER 360 DIVISION AVE S GRAND RAPIDS, MI 49503	NONE	PC	RELIGIOUS	4,000
CHILDREN'S ADVOCACY CENTER OF KENT COUNTY 2855 MICHIGAN ST NE GRAND RAPIDS, MI 49506	NONE	PC	CHARITABLE	3,000
Total			▶ 3a	329,000

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)				
a <i>Paid during the year</i>				
CLARK RETIREMENT COMMUNITY FOUNDATION 1551 FRANKLIN ST SE GRAND RAPIDS, MI 49506	NONE	PC	CHARITABLE	15,000
COLLEGE FOR CREATIVE STUDIES 201 E KIRBY ST DETROIT, MI 48202	NONE	PC	EDUCATIONAL	3,000
COMMUNITY SPAY NEUTER INITIATIVE (CSNIP) 1675 VIEWPOND DR SE KENTWOOD, MI 49508	NONE	PC	CHARITABLE	1,000
Total ▶ 3a				329,000

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)				
a <i>Paid during the year</i>				
CONGREGATION OF ST JOSEPH 3430 ROCKY RIVER DR CLEVELAND, OH 44111	NONE	PC	RELIGIOUS	1,000
CONSERVATION RESOURCE ALLIANCE 1881 9TH ST ZEELAND, CO 80302	NONE	PC	CHARITABLE	3,000
D A BLODGETT ST JOHNS 805 LEONARD ST NE OFC GRAND RAPIDS, MI 49503	NONE	PC	CHARITABLE	30,000
Total ▶ 3a				329,000

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)				
a Paid during the year				
DAVENPORT UNIVERSITY 6191 KRAFT AVE SE GRAND RAPIDS, MI 49512	NONE	PC	EDUCATIONAL	1,000
DOMINICAN SISTERS OF GRAND RAPIDS 2025 E FULTON ST GRAND RAPIDS, MI 49503	NONE	PC	RELIGIOUS	2,000
DOOR INTERNATIONAL 135 N STATE ST SUITE 200 ZEELAND, MI 49464	NONE	PC	CHARITABLE	1,000
Total ▶ 3a				329,000

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)				
a <i>Paid during the year</i>				
DWELLING PLACE 101 SHELDON BLVD SE SUITE 2 GRAND RAPIDS, MI 49503	NONE	PC	CHARITABLE	5,000
ELE'S PLACE2000 MICHIGAN ST NE GRAND RAPIDS, MI 49503	NONE	PC	CHARITABLE	5,000
EQUINE ASSISTED DEVELOPMENT 3224 32ND ST SE GRAND RAPIDS, MI 49512	NONE	PC	CHARITABLE	2,000
Total ▶ 3a				329,000

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)				
a <i>Paid during the year</i>				
EQUINE VOICES RESCUE SANCTUARY PO BOX 1685 GREEN VALLEY, AZ 85622	NONE	PC	CHARITABLE	5,000
EVANS SCHOLARS FOUNDATION 1110 JORIE BLVD OAK BROOK, IL 60523	NONE	PC	CHARITABLE	1,000
FAITH HOSPICE 2100 RAYBROOK ST SE 300 GRAND RAPIDS, MI 49546	NONE	PC	CHARITABLE	2,000
Total ► 3a				329,000

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)				
a <i>Paid during the year</i>				
FEEDING AMERICA 864 W RIVER CENTER DR NE COMSTOCK PARK, MI 49321	NONE	PC	CHARITABLE	5,000
THE FIRST TEE3450 36TH ST SE KENTWOOD, MI 49512	NONE	PC	CHARITABLE	1,000
FOUNDATION FOR CATHOLIC SECONDARY EDUCATION 360 DIVISION AVE S GRAND RAPIDS, MI 49503	NONE	PC	EDUCATIONAL	2,000
Total ▶ 3a				329,000

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)				
a <i>Paid during the year</i>				
FRANCISCAN LIFE PROCESS CENTER 11650 DOWNES ST LOWELL, MI 49331	NONE	PC	RELIGIOUS	2,000
FREDERICK MEIJER GARDENS 1000 E BELTLINE AVE NE GRAND RAPIDS, MI 49525	NONE	PC	EDUCATIONAL	5,000
GERALD R FORD PRESIDENTIAL FOUNDATION 303 PEARL ST NW GRAND RAPIDS, MI 49504	NONE	PC	EDUCATIONAL	1,000
Total ▶ 3a				329,000

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)				
a <i>Paid during the year</i>				
GRAND RAPIDS ART MUSEUM 101 MONROE CTR NW GRAND RAPIDS, MI 49503	NONE	PC	EDUCATIONAL	1,000
GRAND RAPIDS BALLET COMPANY 341 ELLSWORTH AVE SW GRAND RAPIDS, MI 49503	NONE	PC	EDUCATIONAL	1,000
GIRLS SCOUTS OF MICHIGAN 601 W MAPLE STREET KALAMAZOO, MI 49008	NONE	PC	CHARITABLE	1,000
Total ▶ 3a				329,000

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)				
a <i>Paid during the year</i>				
GRACE EPISCOPAL CHURCH ENDOWMENT 1815 HALL ST SE GRAND RAPIDS, MI 49506	NONE	PC	RELIGIOUS	500
GRAND RAPIDS COMMUNITY COLLEGE FOUNDATION 143 BOSTWICH AVE NE GRAND RAPIDS, MI 49503	NONE	PC	EDUCATIONAL	1,000
GRAND RAPIDS PUBLIC MUSEUM 272 PEARL ST NW GRAND RAPIDS, MI 49504	NONE	PC	EDUCATIONAL	1,000
Total ▶ 3a				329,000

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)				
a <i>Paid during the year</i>				
GRAND RAPIDS SYMPHONY 300 OTTAWA AVE NW STE 100 GRAND RAPIDS, MI 49503	NONE	PC	CHARITABLE	1,000
GUIDING LIGHT MISSION 255 S DIVISION AVE GRAND RAPIDS, MI 49503	NONE	PC	CHARITABLE	1,000
GVSU SEIDMAN COLLEGE OF BUSINESS 301 W FULTON ST GRAND RAPIDS, MI 49501	NONE	PC	EDUCATIONAL	5,000
Total ▶ 3a				329,000

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)				
a <i>Paid during the year</i>				
HABITAT FOR HUMANITY 425 PLEASANT STREET SW GRAND RAPIDS, MI 49503	NONE	PC	CHARITABLE	1,500
HELEN DEVOS CHILDREN'S HOSPITAL 100 MICHIGAN ST NE GRAND RAPIDS, MI 49503	NONE	PC	CHARITABLE	2,000
HIGHER GROUND AT LAKE LOUISE 10750 STAFFORD RD BOYNE FALLS, MI 49713	NONE	PC	CHARITABLE	5,000
Total ▶ 3a				329,000

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)				
a <i>Paid during the year</i>				
HOSPICE OF MICHIGAN 2366 OAK VALLEY DR ANN ARBOR, MI 48103	NONE	PC	CHARITABLE	3,000
HUMANE SOCIETY OF KENT CO 3077 WILSON DR NW GRAND RAPIDS, MI 49534	NONE	PC	CHARITABLE	2,000
INDIAN TRAILS CAMP O-1859 LAKE MICHIGAN DR NW GRAND RAPIDS, MI 49534	NONE	PC	EDUCATIONAL	2,000
Total ▶ 3a				329,000

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)				
a <i>Paid during the year</i>				
JOHN BALL ZOO SOCIETY 1300 FULTON ST W GRAND RAPIDS, MI 49504	NONE	PC	EDUCATIONAL	2,000
THE LAND CONSERVANCY OF WEST MICHIGAN HIGHLANDS 400 ANN ST NW GRAND RAPIDS, MI 49504	NONE	PC	CHARITABLE	5,000
LEUKEMIA AND LYMPHOMA SOCIETY 549 OTTAWA AVE SUITE 307 GRAND RAPIDS, MI 49503	NONE	PC	CHARITABLE	2,000
Total ▶ 3a				329,000

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)				
a <i>Paid during the year</i>				
LOWELL ARTS149 S HUDSON ST LOWELL, MI 49331	NONE	PC	EDUCATIONAL	2,000
LOWELL FAIRGROUND 225 S HUDSON ST LOWELL, MI 49331	NONE	PC	CHARITABLE	1,000
LOWELL FARM AND WILDLIFE CENTER 12494 VERGENNES ST SE LOWELL, MI 49331	NONE	PC	EDUCATIONAL	2,000
Total ▶ 3a				329,000

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)				
a <i>Paid during the year</i>				
MACKENZIE'S ANIMAL SANCTUARY 8935 THOMPSON RD LAKE ODESSA, MI 48849	NONE	PC	CHARITABLE	1,000
RILEY MACKENZIE FUNDPO BOX 27 PARIS, MI 49338	NONE	PC	CHARITABLE	1,000
MARY FREE BED REHABILITATION HOSPITAL 235 WEALTHY ST SE GRAND RAPIDS, MI 49503	NONE	PC	CHARITABLE	15,000
Total ▶ 3a				329,000

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)				
a <i>Paid during the year</i>				
MEL TROTTER MINISTRIES 225 COMMERCE SW GRAND RAPIDS, MI 49503	NONE	PC	CHARITABLE	1,000
METRO HEALTH HOSPITAL FOUNDATION 5900 BYRON CENTER AVE WYOMING, MI 49519	NONE	PC	CHARITABLE	5,000
NATIONAL MULTIPLE SCLEROSIS SOCIETY PO BOX 4527 NEW YORK, NY 10163	NONE	PC	CHARITABLE	1,000
Total ▶ 3a				329,000

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)				
a <i>Paid during the year</i>				
NAZARETH ASSOCIATION OF WEST MICHIGAN PO BOX 224 NAZARETH, MI 49074	NONE	PC	CHARITABLE	1,000
PARKINSON'S ASSOCIATION OF WEST MICHIGAN 260 JEFFERSON AVE SE 210 GRAND RAPIDS, MI 49503	NONE	PC	CHARITABLE	2,000
PINE REST CHRISTIAN MENTAL HEALTH PO BOX 165 GRAND RAPIDS, MI 49501	NONE	PC	CHARITABLE	1,000
Total ▶ 3a				329,000

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)				
a <i>Paid during the year</i>				
PORTER HILLS FOUNDATION 4450 CASCADE RD STE 200 GRAND RAPIDS, MI 49546	NONE	PC	CHARITABLE	5,000
ROOSEVELT PARK MINISTRIES 1530 GRANDVILLE AVE SW GRAND RAPIDS, MI 49503	NONE	PC	RELIGIOUS	2,500
SALVATION ARMY1215 FULTON ST E GRAND RAPIDS, MI 49503	NONE	PC	CHARITABLE	1,000
Total ▶ 3a				329,000

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)				
a <i>Paid during the year</i>				
SAN JUAN DIEGO ACADEMY 1650 GODFREY SW WYOMING, MI 49509	NONE	PC	EDUCATIONAL	2,000
SENIOR NEIGHBORS 900 N MAIN STREET ELOY, AZ 85131	NONE	PC	CHARITABLE	5,000
SPECTRUM HEALTH FOUNDATION 100 MICHIGAN ST NE GRAND RAPIDS, MI 49503	NONE	PC	CHARITABLE	9,000
Total ▶ 3a				329,000

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)				
a <i>Paid during the year</i>				
ST ANN'S PARISH AND IT'S MISSIONS 2161 LEONARD ST NW GRAND RAPIDS, MI 49504	NONE	PC	RELIGIOUS	15,000
ST MARY'S DORAN FOUNDATION 200 JEFFERSON AVE SE GRAND RAPIDS, MI 49503	NONE	PC	RELIGIOUS	10,000
ST CECILIA MUSIC CENTER 24 RANSON NE GRAND RAPIDS, MI 49503	NONE	PC	CHARITABLE	1,000
Total ▶ 3a				329,000

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)				
a <i>Paid during the year</i>				
SWEET HOUSE FOUNDATION 254 E FULTON ST SE GRAND RAPIDS, MI 49503	NONE	PC	CHARITABLE	1,000
THE POTTERS HOUSE 6777 WEST Kiest BLVD DALLAS, TX 75236	NONE	PC	CHARITABLE	6,500
TUBAC HISTORICAL SOCIETY 9 PLAZA RD TUBAC, AZ 85646	NONE	PC	EDUCATIONAL	2,000
Total ▶ 3a				329,000

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)				
a <i>Paid during the year</i>				
TUBAC CENTER FOR THE ARTS 9 PLAZA RD TUBAC, AZ 85646	NONE	PC	EDUCATIONAL	2,000
WASHINGTON UNIVERSITY IN ST LOUIS 1 BROOKINGS DR ST LOUIS, MO 63130	NONE	PC	EDUCATIONAL	25,000
WGVU BROADCASTING 301 W FULTON ST GRAND RAPIDS, MI 49504	NONE	PC	CHARITABLE	1,000
Total ▶ 3a				329,000

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)				
a <i>Paid during the year</i>				
WAHLS THERAPEUTIC LIFESTYLE RESEARCH FUND PO BOX 4550 IOWA CITY, IA 52244	NONE	PC	CHARITABLE	2,500
WILDLIFE REHAB CENTER 1504 UNION AVE NE GRAND RAPIDS, MI 49505	NONE	PC	CHARITABLE	2,000
WOLF SANCTUARYPO BOX 1544 LAPORTE, CO 80535	NONE	PC	CHARITABLE	1,500
Total ▶ 3a				329,000

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)				
a <i>Paid during the year</i>				
WOUNDED WARRIOR PROJECT 4899 BELFORT ROAD SUITE 300 JACKSONVILLE, FL 32256	NONE	PC	CHARITABLE	5,000
YMCA OF GREATER GRAND RAPIDS 475 LAKE MICHIGAN DR NW GRAND RAPIDS, MI 49504	NONE	PC	CHARITABLE	1,000
Total ▶ 3a				329,000

TY 2019 Accounting Fees Schedule**Name:** THE KORFF FOUNDATION**EIN:** 38-3190927

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
TAX PREPARATION & ACCOUNTING FEES	11,650	11,650		0

TY 2019 Investments Corporate Stock Schedule**Name:** THE KORFF FOUNDATION**EIN:** 38-3190927**Investments Corporation Stock Schedule**

Name of Stock	End of Year Book Value	End of Year Fair Market Value
BROKERAGE ACCCOUNTS	6,445,746	7,002,030

TY 2019 Investments - Other Schedule

Name: THE KORFF FOUNDATION

EIN: 38-3190927

Investments Other Schedule 2

Category/ Item	Listed at Cost or FMV	Book Value	End of Year Fair Market Value
PARTNERSHIP INTERESTS	AT COST	928,717	997,559
OIL AND GAS INTERESTS	AT COST	7,092	4,611

TY 2019 Other Expenses Schedule**Name:** THE KORFF FOUNDATION**EIN:** 38-3190927**Other Expenses Schedule**

Description	Revenue and Expenses per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
INVESTMENT FEES	60	60		0
UTILITIES	924	693		231
OFFICE SUPPLIES	151	113		38
MISCELLANEOUS EXPENSE	3,648	2,736		912
MEALS	99	74		25

TY 2019 Other Income Schedule**Name:** THE KORFF FOUNDATION**EIN:** 38-3190927**Other Income Schedule**

Description	Revenue And Expenses Per Books	Net Investment Income	Adjusted Net Income
PARTNERSHIP PASSTHROUGH	2,184	0	2,184
OIL AND GAS	2,481	0	2,481
PARTNERSHIP PASSTHROUGH	12,694	12,694	12,694

TY 2019 Other Professional Fees Schedule**Name:** THE KORFF FOUNDATION**EIN:** 38-3190927

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
MANAGEMENT FEES	45,351	45,351		0

TY 2019 Taxes Schedule**Name:** THE KORFF FOUNDATION**EIN:** 38-3190927

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
PAYROLL TAXES	1,955	1,466		489
EXCISE TAX	55,330	0		0

efile GRAPHIC print - DO NOT PROCESS		As Filed Data -		DLN: 93491321014760	
Schedule B (Form 990, 990-EZ, or 990-PF) Department of the Treasury Internal Revenue Service		Schedule of Contributors ▶ Attach to Form 990, 990-EZ, or 990-PF. ▶ Go to www.irs.gov/Form990 for the latest information.			OMB No. 1545-0047 2019
Name of the organization THE KORFF FOUNDATION				Employer identification number 38-3190927	

Organization type (check one):

Filers of:	Section:
Form 990 or 990-EZ	<input type="checkbox"/> 501(c)() (enter number) organization
	<input type="checkbox"/> 4947(a)(1) nonexempt charitable trust not treated as a private foundation
	<input type="checkbox"/> 527 political organization
Form 990-PF	<input checked="" type="checkbox"/> 501(c)(3) exempt private foundation
	<input type="checkbox"/> 4947(a)(1) nonexempt charitable trust treated as a private foundation
	<input type="checkbox"/> 501(c)(3) taxable private foundation

Check if your organization is covered by the **General Rule** or a **Special Rule**.
Note: Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions.

General Rule

- ☒ For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or other property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions.

Special Rules

- ☐ For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33¹/₃% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of (1) \$5,000 or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1. Complete Parts I and II.
- ☐ For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 *exclusively* for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I, II, and III.
- ☐ For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions *exclusively* for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an *exclusively* religious, charitable, etc., purpose. Don't complete any of the parts unless the **General Rule** applies to this organization because it received *nonexclusively* religious, charitable, etc., contributions totaling \$5,000 or more during the year ▶ \$ _____

Caution: An organization that isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990, 990-EZ, or 990-PF), but it **must** answer "No" on Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on its Form 990PF, Part I, line 2, to certify that it doesn't meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

Name of organization
THE KORFF FOUNDATIONEmployer identification number
38-3190927**Part I****Contributors** (see instructions). Use duplicate copies of Part I if additional space is needed.

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	JACK J KORFF TRUST 2715 SNOW SE LOWELL, MI 49311	\$ 85,394	<input checked="" type="checkbox"/> Person <input type="checkbox"/> Payroll <input checked="" type="checkbox"/> Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	<input type="checkbox"/> Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	<input type="checkbox"/> Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	<input type="checkbox"/> Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	<input type="checkbox"/> Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	<input type="checkbox"/> Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	<input type="checkbox"/> Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash (Complete Part II for noncash contributions.)

Name of organization THE KORFF FOUNDATION	Employer identification number 38-3190927
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Part II Noncash Property			
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
1	1,489 SHARES DART FINANCIAL CORP	\$ 44,670	2019-01-01
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
-		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
-		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
-		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
-		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
-		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
-		\$	

Name of organization THE KORFF FOUNDATION	Employer identification number 38-3190927
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Part III

Exclusively religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8), or (10) that total more than \$1,000 for the year from any one contributor. Complete columns (a) through (e) and the following line entry. For organizations completing Part III, enter the total of exclusively religious, charitable, etc., contributions of \$1,000 or less for the year. (Enter this information once. See instructions.) ▶ \$

Use duplicate copies of Part III if additional space is needed.

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
(e) Transfer of gift			
Transferee's name, address, and ZIP 4		Relationship of transferor to transferee	
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
(e) Transfer of gift			
Transferee's name, address, and ZIP 4		Relationship of transferor to transferee	
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
(e) Transfer of gift			
Transferee's name, address, and ZIP 4		Relationship of transferor to transferee	
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
(e) Transfer of gift			
Transferee's name, address, and ZIP 4		Relationship of transferor to transferee	