Form 990-PF

Return of Private Foundation

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

OMB No 1545-0047
2019

Department of the Treasury Internal Revenue Service

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

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

Open to Public Inspection

	For	calen	dar year 2019 or tax year beginning	, and ending				
- 1 -		ne of fou					r identification number	
٧.	Par	pas F	oundation, Inc			•		
			street (or P O box number if mail is not delivered to street address)	Roor	n/surte		38-3386198	
	303	01 No	rthwestern Hwy		200	B Telephone	e number (see instructio	ns)
	City	or town	, state or province, country, and ZIP or foreign postal code					
	Far	mingto	on Hills MI	48334			(248) 539-829)2/
	Fore	eign cou	ntry name Foreign province/state/county	Foreign post	al code	C If exempt	ion application is pendin	g, check here 🕨 🗌 🔵
	G	Check		of a former public o	charity	D 1. Foreig	n organizations, check h	iere ► 📗
			Final return Amended ret				n organizations meeting	
			☐ Address change ☐ Name chang		-	4	here and attach comput	_
	_		type of organization 🛛 🗶 Section 501(c)(3) exempt pri	\	\mathcal{H}		foundation status was te 07(b)(1)(A), check here	minated under
į		Sectio	n 4947(a)(1) nonexempt charitable trust U Other taxa					
	İ	Fair m	narket value of all assets at J Accounting method	X Cash A	Accrual	F If the four	ndation is in a 60-month	termination
		end of	f year (from Part II, col. (c), Other (specify)				tion 507(b)(1)(B), check	
			6) \$ 3,539,446 (Part I, column (d), must b	e on cash basis)				
	Pa	art l	· · · · · · · · · · · · · · · · · · ·	(a) Revenue and	(b) No.		(a) Advisated and	(d) Disbursements
			amounts in columns (b), (c), and (d) may not necessarily	expenses per		t investment ncome	(c) Adjusted net income	for charitable purposes
			equal the amounts in column (a) (see instructions))	books				(cash basis only)
/.	H	1	Contributions, gifts, grants, etc , received (attach schedule)	372,240	ļ			
έX		2	Check ▶☐ if the foundation is not required to attach Sch. B					
η,		3	Interest on savings and temporary cash investments	6,154		6,154		
V		4	Dividends and interest from securities	39,071		39,071		<u> </u>
		5a	Gross rents .					
	_	b	Net rental income or (loss)	40.404				
	ğ۱	6a	Net gain or (loss) from sale of assets not on line 10	40,404				
	Revenue	b	Gross sales price for all assets on line 6a 639,787		 	40.404		
	ا چ	7 8	Capital gain net income (from Part IV, line 2) Net short-term capital gain			40,404		
	_	9	Income modifications		 			
		10a	Gross sales less returns and allowances					4
		b	Less Cost of goods sold					i
		c	Gross profit or (loss) (attach schedule) .					
		11	Other income (attach schedule)	14,701		14,701		
		12	Total. Add lines 1 through 11	472,570		100,330	0	
•	ģ	13	Compensation of officers, directors, trustees, etc					
	Expenses	14	Other employee salaries and wages					
	호	15	Pension plans, employee benefits .				DE	
02	X	16a	Legal fees (attach schedule) .					<u> </u>
\sim	— 1	b	Accounting fees (attach schedule)		ļ		181	SS SS
G	Administrative	С	Other professional fees (attach schedule)				5 70	V 2 2 2020 SO
0	를	17	Interest .		-			<u> </u>
NO.V	을	18	Taxes (attach schedule) (see instructions)	533			 	
Ž	盲	19	Depreciation (attach schedule) and depletion		-			Elela Coll
(}	֓֡֓֓֓֓֓֓֡֓֓֓֡֓֡֓֓֓֡֡֡֡֡	20	Occupancy		-			-
لذا		21	Travel, conferences, and meetings					
SCANNED	and	22 23	Printing and publications Other expenses (attach schedule)	28	 			
8	힏	23 24	Total operating and administrative expenses.				 .	
ن	듩	24	Add lines 13 through 23	561		0	0	0
S	Operating	25	Contributions, gifts, grants paid	268,783		U		268,783
	러	26	Total expenses and disbursements. Add lines 24 and 25	269,344		0	0	268,783
	_	27	Subtract line 26 from line 12	209,344	 . 		<u> </u>	200,703
			Excess of revenue over expenses and disbursements	203,226				
		a b	Net investment income (if negative, enter -0-)	200,220		100,330		
	l	C	Adjusted net income (if negative, enter -0-)			,	0	i
		<u> </u>	The state of the s	l				<u></u>

For Paperwork Reduction Act Notice, see instructions.

Form **990-PF** (2019)

Pá	art II	Balance Sheets	Attached schedules and amounts in the description column	Beginning of year	End of	f year
			should be for end-of-year amounts only (See instructions)	(a) Book Value	(b) Book Value	(c) Fair Market Value
	1	Cash—non-interest	-bearing	181,834	12,740	12,740
	2	Savings and tempo	rary cash investments	1,257,503	400,424	400,424
	3	Accounts receivable				
		Less allowance for	doubtful accounts			
	4					
		Less allowance for	doubtful accounts	1		
	5	Grants receivable				
	6		om officers, directors, trustees, and other			
	`		s (attach schedule) (see instructions)			
	7		receivable (attach schedule)			
	'	Less allowance for do				
Ś	8	Inventories for sale				
set	9		and deferred charges			
Assets	10a	•	state government obligations (attach schedule)			
	b		orate stock (attach schedule)	1,826,542	3,055,941	3,126,282
				1,020,342	3,035,941	3,120,262
	C	· ·	orate bonds (attach schedule)			
	11		Idings, and equipment basis			
	4.		reciation (attach schedule)	 		
	12	Investments—mort	- -	-		
	13	Investments—other		<u> </u>		·
	14	Land, buildings, and eq		-		
			reciation (attach schedule)	 		
	15		nbe	<u> </u>		
	16	·	completed by all filers—see the			
		instructions. Also, s		3,265,879	3,469,105	3,539,446
	17		and accrued expenses .			
S	18		•			
Liabilities	19	Deferred revenue				
豆	20		directors, trustees, and other disqualified persons			
<u>.e</u>	21		er notes payable (attach schedule)			
_	22	Other liabilities (des				:
_	23	Total liabilities (ad	d lines 17 through 22)	0	0	
es			follow FASB ASC 958, check here ▶□		ł	
2			s 24, 25, 29, and 30.			
Balances	24	Net assets without	donor restrictions			
ä	25	Net assets with dor	nor restrictions .			
Б		Foundations that de	o not follow FASB ASC 958, check here			ı
Z		and complete lines	26 through 30.		}	
Net Assets or Fu	26	Capital stock, trust	principal, or current funds			
S	27	Paid-in or capital su	urplus, or land, bldg , and equipment fund			
Se	28	Retained earnings, a	ccumulated income, endowment, or other funds	3,265,879	3,469,105	
Ş	29	Total net assets o	r fund balances (see instructions).	3,265,879	3,469,105	
7	30	Total liabilities and	d net assets/fund balances (see			1
ž		instructions)		3,265,879	3,469,105	
Pa	irt III	Analysis of Ch	nanges in Net Assets or Fund Balances			
			alances at beginning of year—Part II, column (a)), line 29 (must agree v	vith	
			d on prior year's return)	-	1	3,265,879
2		r amount from Part I,			2	203,226
3			ded in line 2 (itemize)		3	
4		lines 1, 2, and 3			4	3,469,105
5		eases not included in	line 2 (itemize)		5	
6			alances at end of year (line 4 minus line 5)—Par	t II, column (b), line 29	6	3,469,105
						000 DF

Part	V Capital Gains and	<u>d Losses for Tax on Investr</u>	<u>nent Inc</u>	ome					
		nd(s) of property sold (for example, real est use, or common stock, 200 shs MLC Co)	ate,		(b) How acquired P—Purchase D—Donation		ate acquired o , day, yr)	(d) Date sold (mo , day, yr)	
1a Beyound Meat					Р		9/21/2018	6/6/2019	
b	b Meta Financial Group CASH						5/24/2019	5/24/2019	
С	Maturity of 250,000sh US	TBill			Р		8/1/2019	10/1/2019	
d	Integrated Device Tech				D		1/10/2019	4/1/2019	
e								·	
	(e) Gross sales price (f) Depreciation allowed (or allowable) (g) Cost or other basis plus expense of sale					or (loss) minus (g))			
a	67,267				25,000		4		
b	273,520				276,900			-3,380	
С	250,000				249,183			817	
d	49,000				48,300			700	
е	*****								
	Complete only for assets st	nowing gain in column (h) and owned	by the fou	ndation	on 12/31/69		(I) Gains (Col		
	(I) F M V as of 12/31/69	(j) Adjusted basis as of 12/31/69		k) Excess over col	s of col (ı) (ı), ıf any		col (k), but not I Losses (fro		
а								42,267	
b								-3,380	
C								817	
d								700	
ее									
2	Capital gain net income or	'Inet canital inee! 1	also enter , enter -0-		7 1	2		40,404	
3	Net short-term capital gair	n or (loss) as defined in sections 1	222(5) an	d (6)					
	If gain, also enter in Part I	, line 8, column (c) See instruction	ns If (loss	s), enter	r-0- in }				
	Part I, line 8				.]	3		40,404	
Part	V Qualification Und	der Section 4940(e) for Redu	uced Tax	<u>con N</u>	<u>et Investment</u>	Incor	ne		
Was t		re this part blank. section 4942 tax on the distributal ualify under section 4940(e) Do n				e perio	d?	☐ Yes ☒ No	
1	Enter the appropriate amo	unt in each column for each year,	, see the ii	nstructi	ons before makin	g any	entries		
Cal	(a) Base period years endar year (or tax year beginning in	(b)			(c) f noncharitable-use as	(d)		bution ratio	
	2018	— — — …	7,750		3,251	1,935	, , , , ,	0 073110	
	2017		3,500		3,189	9,451		0 063804	
	2016	190	6,804		2,926	5,266		0 067254	
-	2015	198	8,173		2,833			0 069930	
	2014	209	9,535		2,618	3,818		0 080011	
2	Total of line 1, column (d)						2	0 354109	
3		for the 5-year base period—divide	the total	on line	2 by 5.0 or by	r		0 00 1100	
•		oundation has been in existence if				-	3	0 070822	
4	Enter the net value of non	charitable-use assets for 2019 fro	m Part X,	line 5		-	4	3,481,499	
5	Multiply line 4 by line 3					-	5	246,567	
6	Enter 1% of net investmen	nt income (1% of Part I, line 27b)				-	6	1,003	
7	Add lines 5 and 6					.	7	247,570	
8	Enter qualifying distributio					L	8	268,783	
	If line 8 is equal to or great Part VI instructions	ter than line 7, check the box in P	art VI, line	e 1b, an	d complete that p	oart us	ıng a 1% tax ı	rate See the	

am	aan.	DE	(2010)	

Pappas Foundation, Inc.

38	-33	86	19	3,5

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Part '	VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948—see instructions)			<u> </u>	•
1a	Exempt operating foundations described in section 4940(d)(2), check here and enter "N/A" on line 1 Date of ruling or determination letter (attach copy of letter if necessary—see instructions)				
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check		-	,003	ı
	here \blacktriangleright X and enter 1% of Part I, line 27b			,000	i
С	All other domestic foundations enter 2% of line 27b Exempt foreign organizations, enter 4% of				1
ŭ	Part I, line 12, col. (b)				ı
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only, others, enter -0-)			0	
3	Add lines 1 and 2		1	,003	•
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only, others, enter -0-)			,	•
5	Tax based on investment income. Subtract line 4 from line 3 If zero or less, enter -0-		1	,003	•
6	Credits/Payments				Ì
а	2019 estimated tax payments and 2018 overpayment credited to 2019 6a 6				
b	Exempt foreign organizations—tax withheld at source 6b				
С	Tax paid with application for extension of time to file (Form 8868)				
d	Backup withholding erroneously withheld . 6d				ł
7	Total credits and payments Add lines 6a through 6d			0	
8	Enter any penalty for underpayment of estimated tax. Check here. If Form 2220 is attached.				
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed .		1	,003	
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid			0	-
11	Enter the amount of line 10 to be Credited to 2020 estimated tax Refunded 11			0	
	VII-A Statements Regarding Activities		1		
1a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it	<u> </u>	Yes	No	
	participate or intervene in any political campaign?	1a	-		
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes? See the				
	Instructions for the definition	1b	\vdash		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				ĺ
	Did the foundation file Form 1120-POL for this year?	1c	<u> </u>		i
c d	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year	10			i
•	(1) On the foundation \$\infty\$ \$				ĺ
е	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed				ĺ
	on foundation managers • \$				
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?	2			1
	If "Yes," attach a detailed description of the activities				ĺ
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles		[İ
	of incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes	3		X	
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	4a		Х	_
b	If "Yes," has it filed a tax return on Form 990-T for this year?	4b	N/A		
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?	5			:
	If "Yes," attach the statement required by General Instruction T				İ
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either	1			İ
	By language in the governing instrument, or				ĺ
	By state legislation that effectively amends the governing instrument so that no mandatory directions that				İ
_	conflict with the state law remain in the governing instrument?	6	,,	Х	
7	Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col (c), and Part XV	7	X		i
8a	Enter the states to which the foundation reports or with which it is registered. See instructions				1
	MI	1			l
þ	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General				Í
^	(or designate) of each state as required by General Instruction G? If "No," attach explanation	8b	-		/
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for calendar year 2019 or the tax year beginning in 2019? See the instructions for Part XIV. If		 		(
	"Yes," complete Part XIV	9		¥	0
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their	3	\vdash	^	•
	names and addresses	10		Х	

Part	VII-A Statements Regarding Activities (continued)							
			Yes	No				
11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the							
	meaning of section 512(b)(13)? If "Yes," attach schedule See instructions	11		X				
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified							
	person had advisory privileges? If "Yes," attach statement See instructions							
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	_	X				
	Website address ► N/A							
14	The books are in care of ► Norman A Pappas Telephone no ► (248) 53	9-829	2					
	Located at ► 30301 Northwestern Hwy , Suite 200 Farmingtom Hills MI ZIP+4 ► 48334		- 					
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 15			▶∟				
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		X				
	See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes," enter the	<u> </u>						
	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? Yes X No							
	(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?			ŀ				
	(5) Transfer any income or assets to a disqualified person (or make any of either available for							
	the benefit or use of a disqualified person)?							
	(6) Agree to pay money or property to a government official? (Exception. Check "No" if the							
	foundation agreed to make a grant to or to employ the official for a period after							
	termination of government service, if terminating within 90 days)							
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 Organizations relying on a current notice regarding disaster assistance, check here	1b	N/A					
_	5 5							
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	—	X				
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private	10		_^_				
-	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							
	6d and 6e) for tax year(s) beginning before 2019?							
	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)	2b	N/A					
С	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							
3a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year? Yes X 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 Form 4720, Schedule C, to determine if the							
	foundation had excess business holdings in 2019)		N/A					
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a	13//	X				
ча 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		X				

Part	VII-B Statements Regarding Activities	tor W	hich Form	4720 N	nay Be Re	<u>equire</u>	d (contin	uea)			
5a	During the year, did the foundation pay or incur any						_	_	<u> </u>	Yes	No
	(1) Carry on propaganda, or otherwise attempt to in	nfluenc	e legislation (section	4945(e))?	•		X No	·		
,	(2) Influence the outcome of any specific public ele directly or indirectly, any voter registration drive	· · · · · · · · · · · · · · · · · · ·					Yes	X No	,	:	
	(3) Provide a grant to an individual for travel, study	Provide a grant to an individual for travel, study, or other similar purposes?				•	Yes Yes	X No	,		
	(4) Provide a grant to an organization other than a section 4945(d)(4)(A)? See instructions	charıta	ble, etc , orga	anızatıo	n described	ın	☐ Yes	X No	, ,		
	(5) Provide for any purpose other than religious, che purposes, or for the prevention of cruelty to child			terary, o	or education	nal	Yes	X No	,	:	
b	If any answer is "Yes" to 5a(1)-(5), did any of the tr	ransact	tions fail to qu	alify un	der the exc	eptions	described	d in			
	Regulations section 53 4945 or in a current notice r			•		-			5b	N/A	
С	Organizations relying on a current notice regarding If the answer is "Yes" to question 5a(4), does the followard to maintained expenditure responsibility for	oundati	on claım exer			•	. Yes	► □			
	If "Yes," attach the statement required by Regulation	-		-5(d)				Z 110		,	
6a	Did the foundation, during the year, receive any fur on a personal benefit contract?				pay premiui	ms	Yes	X No			
b	Did the foundation, during the year, pay premiums, If "Yes" to 6b, file Form 8870	directl	y or indirectly	, on a p	ersonal ber	nefit cor	ntract?		6b		_
7a	At any time during the tax year, was the foundation a pa	rty to a	prohibited tax	shelter t	ransaction?	_	Yes	П №			
b	If "Yes," did the foundation receive any proceeds or	-	*			e trans	_		7b		
8	Is the foundation subject to the section 4960 tax on			than \$	1,000,000 ı	n	_	_			1
	remuneration or excess parachute payment(s) durin		<u>- </u>				Yes				
Part	VIII Information About Officers, Directo	ors, Ti	rustees, Fo	undati	ion Mana	gers, l	Highly Pa	aid En	nploye	es,	
	and Contractors	!				- C	:				
1	List all officers, directors, trustees, and foundat		e, and average		mpensation		Contribution:	_			
	(a) Name and address	hou	rs per week ed to position	i (lf r	not paid, iter -0-)	empl	oyee benefit erred compe	plans	(e) Expe	nse acc	
	n A Pappas	Directo	or					İ			
	N Hwy , Ste 200 Farmington Hills, MI 48334	D 1			0			-			
	L Pappas	Directo	or		•						
	N Hwy., Ste 200 Farmington Hills, MI 48334	Dissert			0						
	Pappas N Hwy , Ste 200 Farmington Hills, MI 48334	Directo	זכ		0						
3030	14 Hwy , Ste 200 Familigion Filis, Wi 48334										
2	Compensation of five highest-paid employees (c	other t	han those in	cluded	on line 1—	see ins	structions). If no	ne, ent	er	
	(a) Name and address of each employee paid more than \$50,000		(b) Title, and a hours per w devoted to po	reek 🐪	(c) Comper	isation	(d) Contribution (d) Contribution (d) Contribution (d) Contribution (d) Contribution (d) Contribution (d) Contribution (d) Contribution (d) Contribution (d) Contribution (d) Contribution (d) Contribution (d) Contribution (d) Contribution (d) Contribution (d) Contribution (d) Contribution (d) Contribution (d) Contribution (d) Contribution (d) Contribution (d) Contribution (d) Contribution (d) Contribution (d) Contribution (d) Contribution (d) Contribution (d) Contribution (d) Contribution (d) Contribution (d) Contribution (d) Contribution (d) Contribution (d) Contribution (d) Contribution (d) Contribution (d) Contribution (d) Contribution (d) Contribution (d) Contribution (d) Contribution (d) Contribution (d) Contribution (d) Contribution (d) Contribution (d) Contribution (d) Contribution (d) Contribution (d) Contribution (d) Contribution (d) Contribution (d) Contribution (d) Contribution (d) Contribution (d) Contribution (d) Contribution (d) Contribution (d) Contribution (d) Contribution (d) Contribution (d) Contribution (d) Contribution (d) Contribution (d) Contribution (d) Contribution (d) Contribution (d) Contribution (d) Contribution (d) Contribution (d) Contribution (d) Contribution (d) Contribution (d) Contribution (d) Contribution (d) Contribution (d) Contribution (d) Contribution (d) Contribution (d) Contribution (d) Contribution (d) Contribution (d) Contribution (d) Contribution (d) Contribution (d) Contribution (d) Contribution (d) Contribution (d) Contribution (d) Contribution (d) Contribution (d) Contribution (d) Contribution (d) Contribution (d) Contribution (d) Contribution (d) Contribution (d) Contribution (d) Contribution (d) Contribution (d) Contribution (d) Contribution (d) Contribution (d) Contribution (d) Contribution (d) Contribution (d) Contribution (d) Contribution (d) Contribution (d) Contribution (d) Contribution (d) Contribution (d) Contribution (d) Contribution (d) Contribution (d) Contribution (d) Contribution (d) Contribution (d) Contribution (d) Contribution (d) Contribution (d) Co	benefit leferred	(e) Expe	nse acc	
NONE											
									_		
Total	number of other employees paid over \$50,000						<u> </u>	•			
										\ DE	

Pa	rt VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Emand Contractors (continued)	nployees,
3	Five highest-paid independent contractors for professional services. See instructions. If none, enter "NONE	E. "
	(a) Name and address of each person paid more than \$50,000 (b) Type of service	(c) Compensation
NON	NE .	
	· · · · · · · · · · · · · · · · · · ·	
Tota	I number of others receiving over \$50,000 for professional services .	
Pa	rt IX-A Summary of Direct Charitable Activities	
	the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of anizations and other beneficiaries served, conferences convened, research papers produced, etc.	Expenses
1	N/A	
2		
3		
4		
D -	A IX D. Common of Dramon Deleted Investments (see not waters)	
	Int IX-B Summary of Program-Related Investments (see instructions) secribe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2	Amount
		Amount
•	N/A	
2		
Ali	other program-related investments. See instructions	
3		
Tota	A Add lines 1 through 3	0

Part	Minimum Investment Return (All domestic foundations must complete this part. Foreig	n foundation	S,
	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	3,171,533
b	Average of monthly cash balances	1b	362,984
C	Fair market value of all other assets (see instructions)	1c	
d	Total (add lines 1a, b, and c)	1d	3,534,517
е	Reduction claimed for blockage or other factors reported on lines 1a and		
	1c (attach detailed explanation) . 1e		
2	Acquisition indebtedness applicable to line 1 assets	2	
3	Subtract line 2 from line 1d	3	3,534,517
4	Cash deemed held for charitable activities. Enter 1½ % of line 3 (for greater amount, see		
	instructions)	4	53,018
5	Net value of noncharitable-use assets. Subtract line 4 from line 3 Enter here and on Part V, line 4	5	3,481,499
6	Minimum investment return. Enter 5% of line 5	6	174,075
Part)		ons	
	and certain foreign organizations, check here and do not complete this part)		
1	Minimum investment return from Part X, line 6	1	174,075
2a	Tax on investment income for 2019 from Part VI, line 5 2a 1,003		
b	Income tax for 2019 (This does not include the tax from Part VI) . 2b		
C	Add lines 2a and 2b	2c	1,003
3	Distributable amount before adjustments Subtract line 2c from line 1	3	173,072
4	Recoveries of amounts treated as qualifying distributions	4	
5	Add lines 3 and 4	5	173,072
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	173,072
Part 2	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	268,783
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	268,783
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	1,003
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	267,780
	Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating when	ther the founda	ation
	qualifies for the section 4940(e) reduction of tax in those years		

Part	XIII Undistributed Income	(see instructions	3)			
			(a) Corpus	(b) Years prior to 2018	(c) 2018	(d) 2019
1	Distributable amount for 2019 from line 7	n Part XI,				173,072
2	Undistributed income, if any, as of the	end of 2019				170,012
а	Enter amount for 2018 only				0	
b	•	20, 20				
3	Excess distributions carryover, if a					
а	From 2014 .	79,228				
b	From 2015	57,182				
С	From 2016	51,203				,
d	From 2017	44,691				
е	From 2018	76,193				
f	Total of lines 3a through e		308,497			
4	Qualifying distributions for 2019 from	om Part XII,				
	line 4 ▶ \$ 268,783					
	Applied to 2018, but not more than					
b	Applied to undistributed income of					İ
	(Election required—see instruction	·				
С	Treated as distributions out of corp	ous (Election				
	required—see instructions) .					470.070
	Applied to 2019 distributable amount Remaining amount distributed out		95,711			173,072
е 5	Excess distributions carryover app		95,711			
3	(If an amount appears in column (c					
	amount must be shown in column	•				
6	Enter the net total of each colum					
•	indicated below:					
а	Corpus Add lines 3f, 4c, and 4e S	Subtract line 5	404,208			į
b	Prior years' undistributed income	Subtract				
	line 4b from line 2b	ļ		0		
С	Enter the amount of prior years' un	distributed				
	income for which a notice of deficie	-				
	been issued, or on which the section	on 4942(a)				
	tax has been previously assessed					
d	Subtract line 6c from line 6b Taxa	ble				
_	amount—see instructions	. 4 4 1				<u> </u>
е	Undistributed income for 2018 Sul 4a from line 2a Taxable amount—					•
	instructions	see			o	
f	Undistributed income for 2019 Sul	htract lines			0	7
•	4d and 5 from line 1 This amount					
	distributed in 2020					0
7	Amounts treated as distributions of	ut of corpus				
	to satisfy requirements imposed by	section				
	170(b)(1)(F) or 4942(g)(3) (Election	n may be				
	required—see instructions)					
8	Excess distributions carryover from	n 2014 not]
	applied on line 5 or line 7 (see inst		79,228	*		
9	Excess distributions carryover to	o 2020.				
	Subtract lines 7 and 8 from line 6a	ļ	324,980			
10	Analysis of line 9		İ			
a	Excess from 2015	57,182				
b	Excess from 2016 .	51,203				
q	Excess from 2017 Excess from 2018	44,691				
d A	Excess from 2019	76,193 95,711				
-		30,111				

factors

Page **11**

Part XV Supplementary Information (continued)

3 Grants and Contributions Paid During		ed for Fu	ture Payment	
Recipient	If recipient is an individual, show any relationship to any foundation manager	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	or substantial contributor	recipient		
a Paid during the year Ahavas Olam Torah Center	None		Charitable	10,000
25428 Woodvilla	140110	İ	- Crianable	10,000
Southfield, MI 48075				
Aish HaTorah	None		Charitable	36,000
555 South Old Woodward Ste 23L				,
Birmingham, MI 48009				
American Friends of Livnot U'Lehibanot	None		Charitable	5,000
PO Box 880054				
Boca Raton, FI 33488				
Anshe Shalom Synagogue	None		Charitable	180
540 W. Melrose St		ļ		
Chicago, IL 60657		1	1	
Antfarm	None	•	Charitable	800
39140 Proctor Blvd.				
Sandy, OR 97055				
Anti-Defamation League	None		Charitable	1,000
6735 Telegraph Rd Suite 300				
West Bloomfield, MI 48301	None		Charitable	2,118
Bar-Ilan University 8170 McCormick Blvd	None		Chantable	2,110
Skokie, IL 60076				
Brilliant Detroit	None		Charitable	1,000
5675 Larkins Street	146116		- Shamable	1,000
Detroit, MI 48210				
Camp HASC	None		Charitable	500
25428 Woodvilla				
Southfield, MI 48075				
Chabad of Greater Downtown Detroit	None		Charitable	1,000
278 Mack Avenue				
Detroit, MI 48201				ļ
Champions of Wayne	None		Charitable	300
3001 Forth Street				
Wayne, MI 48184	l			200
Total See Attached Statement b Approved for future payment		I	<u>▶ 3a</u>	268,783
b Approved for future payment]			
	1			
				1
				[
	[1
		ļ		
	1			1
				<u> </u>
Total .				0

Pa	rt XVI	-A Analysis of Income-Producing Ac					
Ente	r gros	s amounts unless otherwise indicated	Unrelated bus	siness income	Excluded by section	n 512, 513, or 514	(2)
	D		(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	(e) Related or exempt function income (See instructions)
1		ram service revenue	522000	272 240			
		Contribution	523000	372,240			=
	b –						
	°. –						
	d _		ļ				
	ė –		 				
	' -				+		
_		ees and contracts from government agencies	-	<u>.</u>			·
2		bership dues and assessments					
3		est on savings and temporary cash investments		6,154			
4		ends and interest from securities		39,071			
5		ental income or (loss) from real estate					
		Debt-financed property .					
		lot debt-financed property .					
6		ental income or (loss) from personal property					
7	Othe	r investment income		14,701			
8	Gaın	or (loss) from sales of assets other than inventory		40,404			
9	Net II	ncome or (loss) from special events					
10		s profit or (loss) from sales of inventory					
11	Othe	r revenue a					
	b _						<u> </u>
	c _		 				
	_						
	d _ e _						
12	d _ e _			472,570		. 0	0
	d _ e _ Subte			472,570		. 0	0 472,570
13 (See	d e Subte Total	otal. Add columns (b), (d), and (e) I. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculations	s)				
13 Sec Pa	d e Subte Total works	otal. Add columns (b), (d), and (e) I. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculations	s)				
13 Sec Pa Lin	d e Subte Total	otal. Add columns (b), (d), and (e) I. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculations	s) Accomplishme ne is reported in co	ent of Exempt	Purposes VI-A contributed	13	472,570
13 Sec Pa Lin	d e Subte Total e works	otal. Add columns (b), (d), and (e) I. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculations Relationship of Activities to the A Explain below how each activity for which incom	s) Accomplishme ne is reported in co	ent of Exempt	Purposes VI-A contributed	13	472,570
13 Sec Pa Lin	d e Subte Total e works	otal. Add columns (b), (d), and (e) I. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculations Relationship of Activities to the A Explain below how each activity for which incom	s) Accomplishme ne is reported in co	ent of Exempt	Purposes VI-A contributed	13	472,570
13 Sec Pa Lin	d e Subte Total e works	otal. Add columns (b), (d), and (e) I. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculations Relationship of Activities to the A Explain below how each activity for which incom	s) Accomplishme ne is reported in co	ent of Exempt	Purposes VI-A contributed	13	472,570
13 Sec Pa Lin	d e Subte Total e works	otal. Add columns (b), (d), and (e) I. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculations Relationship of Activities to the A Explain below how each activity for which incom	s) Accomplishme ne is reported in co	ent of Exempt	Purposes VI-A contributed	13	472,570
13 Sec Pa Lin	d e Subte Total e works	otal. Add columns (b), (d), and (e) I. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculations Relationship of Activities to the A Explain below how each activity for which incom	s) Accomplishme ne is reported in co	ent of Exempt	Purposes VI-A contributed	13	472,570
13 Sec Pa Lin	d e Subte Total e works	otal. Add columns (b), (d), and (e) I. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculations Relationship of Activities to the A Explain below how each activity for which incom	s) Accomplishme ne is reported in co	ent of Exempt	Purposes VI-A contributed	13	472,570
13 Sec Pa Lin	d e Subte Total e works	otal. Add columns (b), (d), and (e) I. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculations Relationship of Activities to the A Explain below how each activity for which incom	s) Accomplishme ne is reported in co	ent of Exempt	Purposes VI-A contributed	13	472,570
13 Sec Pa Lin	d e Subte Total e works	otal. Add columns (b), (d), and (e) I. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculations Relationship of Activities to the A Explain below how each activity for which incom	s) Accomplishme ne is reported in co	ent of Exempt	Purposes VI-A contributed	13	472,570
13 Sec Pa Lin	d e Subte Total e works	otal. Add columns (b), (d), and (e) I. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculations Relationship of Activities to the A Explain below how each activity for which incom	s) Accomplishme ne is reported in co	ent of Exempt	Purposes VI-A contributed	13	472,570
13 Sec Pa Lin	d e Subte Total e works	otal. Add columns (b), (d), and (e) I. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculations Relationship of Activities to the A Explain below how each activity for which incom	s) Accomplishme ne is reported in co	ent of Exempt	Purposes VI-A contributed	13	472,570
13 Sec Pa Lin	d e Subte Total e works	otal. Add columns (b), (d), and (e) I. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculations Relationship of Activities to the A Explain below how each activity for which incom	s) Accomplishme ne is reported in co	ent of Exempt	Purposes VI-A contributed	13	472,570
13 Sec Pa Lin	d e Subte Total e works	otal. Add columns (b), (d), and (e) I. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculations Relationship of Activities to the A Explain below how each activity for which incom	s) Accomplishme ne is reported in co	ent of Exempt	Purposes VI-A contributed	13	472,570
13 Sec Pa Lin	d e Subte Total e works	otal. Add columns (b), (d), and (e) I. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculations Relationship of Activities to the A Explain below how each activity for which incom	s) Accomplishme ne is reported in co	ent of Exempt	Purposes VI-A contributed	13	472,570
13 Sec Pa Lin	d e Subte Total e works	otal. Add columns (b), (d), and (e) I. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculations Relationship of Activities to the A Explain below how each activity for which incom	s) Accomplishme ne is reported in co	ent of Exempt	Purposes VI-A contributed	13	472,570
13 Sec Pa Lin	d e Subte Total e works	otal. Add columns (b), (d), and (e) I. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculations Relationship of Activities to the A Explain below how each activity for which incom	s) Accomplishme ne is reported in co	ent of Exempt	Purposes VI-A contributed	13	472,570
13 Sec Pa Lin	d e Subte Total e works	otal. Add columns (b), (d), and (e) I. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculations Relationship of Activities to the A Explain below how each activity for which incom	s) Accomplishme ne is reported in co	ent of Exempt	Purposes VI-A contributed	13	472,570
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13 Sec Pa Lin	d e Subte Total e works	otal. Add columns (b), (d), and (e) I. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculations Relationship of Activities to the A Explain below how each activity for which incom	s) Accomplishme ne is reported in co	ent of Exempt	Purposes VI-A contributed	13	472,570
13 Sec Pa Lin	d e Subte Total e works	otal. Add columns (b), (d), and (e) I. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculations Relationship of Activities to the A Explain below how each activity for which incom	s) Accomplishme ne is reported in co	ent of Exempt	Purposes VI-A contributed	13	472,570
13 Sec Pa Lin	d e Subte Total e works	otal. Add columns (b), (d), and (e) I. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculations Relationship of Activities to the A Explain below how each activity for which incom	s) Accomplishme ne is reported in co	ent of Exempt	Purposes VI-A contributed	13	472,570
13 Sec Pa Lin	d e Subte Total e works	otal. Add columns (b), (d), and (e) I. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculations Relationship of Activities to the A Explain below how each activity for which incom	s) Accomplishme ne is reported in co	ent of Exempt	Purposes VI-A contributed	13	472,570
13 Sec Pa Lin	d e Subte Total e works	otal. Add columns (b), (d), and (e) I. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculations Relationship of Activities to the A Explain below how each activity for which incom	s) Accomplishme ne is reported in co	ent of Exempt	Purposes VI-A contributed	13	472,570
13 Sec Pa Lin	d e Subte Total e works	otal. Add columns (b), (d), and (e) I. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculations Relationship of Activities to the A Explain below how each activity for which incom	s) Accomplishme ne is reported in co	ent of Exempt	Purposes VI-A contributed	13	472,570

Part	XVII	Information Exempt Org		nsfers to and Tra	nsaction	s and R	elationship	s Wit	h No	ncharit	able		
1	Did th			engage in any of the	following v	vith any o	ther organiza	tion de	escribe	ed		Yes	No
•		_		(c)(3) organizations)			-				ļ		
		nizations?		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		·	•				į		
а	-		porting foundation t	o a noncharitable ex	empt organ	ization of					į		
	(1) C				, ,						1a(1)		X
		ther assets		i							1a(2)		Х
b		r transactions											
	(1) S	ales of assets to	a noncharitable ex	empt organization							1b(1)		Х
				table exempt organiz	zation						1b(2)		Х
			, equipment, or othe								1b(3)		Х
	(4) R	eimbursement ar	rrangements								1b(4)		Х
	(5) L	oans or loan gua	rantees								1b(5)		Х
		_		hip or fundraising so	licitations						1b(6)		Х
c	Shari	ing of facilities, ed	quipment, mailing l	ists, other assets, or	paid emplo	yees					1c		Х
d	If the	answer to any of t	the above is "Yes," c	omplete the following	schedule. Co	olumn (b)	should always	show t	the fair	market			
	value value	of the goods, other	er assets, or services n or sharing arrangen	s given by the reportin nent, show in column	g foundation (d) the value	. If the fou of the god	ndation receiv ods, other ass	ed less ets, or	s than i service	fair marke es receive	et ed.		
(a) Line	no	(b) Amount involved	(c) Name of no	ncharitable exempt organi	zation	(d) De	scription of transf	ers, trar	saction	s, and shar	rıng arrai	ngemen	ts
			·							_			
					-								
				<u> </u>									
						ļ							
						ļ							
2a b	desci	ribed in section 5		liated with, or related ection 501(c)(3)) or i			exempt orgai	nizatio	ns		Yes	□ N	0
		(a) Name of organ			of organization			(c) De	scription	n of relation	iship		
												-	
	Under	r penalties of penury, I dec	clare that I have examined this	s return, including accompanyin	g schedules and	statements, and	d to the best of my k	nowledge	and belie	ef, it is true,			
Sign	correc	ct, and complete Declarati	ioh of preparer (other than tax	opayer) is based on all information	on of which prepa	irer has any kn	owledge			May the IRS			
Here		1/A W 1/1	tellar	<u> </u>		ector			I	with the pre See instruc			v? □ No
	Sigi	nature of officer of the		Date	Title				L				
Paid		Print/Type preparer	's name	Preparer's signature	e		Date		Check	. 🔲 ıf 🛚	PTIN		
Prepa	ror						<u> </u>	,	self-en	nployed			
Use (Firm's name						Fırm's	EIN 🕨				
U36 (illy	Firm's address						Phone	no				

Schedule B

(Form 990, 990-EZ, or 990-PF)

Department of the Treasury Internal Revenue Service

Name of the organization

Schedule of Contributors

Attach to Form 990, Form 990-EZ, or Form 990-PF.

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

OMB No 1545-0047

Employer identification number

Pappas Foundation, Inc. 38-3386198 Organization type (check one) Filers of: Section: Form 990 or 990-EZ 501(c)() (enter number) organization 4947(a)(1) nonexempt charitable trust not treated as a private foundation 527 political organization Form 990-PF 501(c)(3) exempt private foundation 4947(a)(1) nonexempt charitable trust treated as a private foundation 501(c)(3) taxable private foundation 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 property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions **Special Rules** For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3 % support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of (1) \$5,000, or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1 Complete Parts I and II For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals Complete Parts I, II, and III For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions exclusively for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000 If this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., purpose. Don't complete any of the parts unless the General Rule applies to this organization because it received nonexclusively religious, charitable, etc., contributions totaling \$5,000 or more during the year Caution: An organization that isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990, 990-EZ, or 990-PF), but it must answer "No" on Part IV, line 2, of its Form 990, or check the box on line H of its Form 990-EZ or on its Form 990-PF, Part I, line 2, to certify that it doesn't meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF)

Name of organization	Employer identification number
Pappas Foundation, Inc.	38-3386198

Part I	Contributors (see instructions). Use duplicate copie	es of Part I if additional space is r	needed.
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	Norman A Pappas 30301 Northwestern Hwy , Ste 200 Farmington Hills MI 48334 Foreign State or Province Foreign Country	\$ 372,240	Person Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
	Foreign State or Province Foreign Country	\$	Person Payroll Occupate Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
	Foreign State or Province Foreign Country	\$	Person Payroll Oncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
	Foreign State or Province Foreign Country	\$	Person Payroll Oncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
	Foreign State or Province Foreign Country	\$	Person Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
	Foreign State or Province Foreign Country	\$	Person Payroll Noncash (Complete Part II for noncash contributions)

Name of organization Employer identification number
Pappas Foundation, Inc 38-3386198

Noncash Property (see instructions). Use duplicate copies of Part II if additional space is needed. (a) No. (c) (d) FMV (or estimate) from Description of noncash property given Date received (See instructions) Part I Donated 1,000 shares Integrated Device Tech IDTI ___1 1/10/2019 (a) No. (c) (d) (b) FMV (or estimate) from Description of noncash property given Date received (See instructions) Part I Donated 10,000 shares Meta Financial Group ...1 (a) No. (c) (d) (b) FMV (or estimate) from Description of noncash property given Date received (See instructions) Part I Donated 2,000 shares Cypress Semiconductor CY ___1__ (c) (a) No. (b) (d) from FMV (or estimate) Date received Description of noncash property given (See instructions) Part I (c) (a) No. (d) (b) FMV (or estimate) from Date received Description of noncash property given (See instructions) Part I (c) (a) No. (b) Description of noncash property given (d) FMV (or estimate) from Date received (See instructions) Part I

Name of org				Employer identification number				
	undation, Inc			38-3386198	_			
Part III	Exclusively religious, charitable, etc., co							
	(10) that total more than \$1,000 for the y							
	the following line entry For organizations of				_			
	contributions of \$1,000 or less for the year			tructions) > \$	0			
4 5 84	Use duplicate copies of Part III if additional	space is need	ed	·	_			
(a) No. from	(b) Purpose of gift	(c)	Use of gift	(d) Description of how gift is held				
Part I	(b) i dipose oi git	(0,	osc or girt	(a) becompained for flow gire in flow				
-								
				,				
		(e) T	ransfer of gift	·				
	Transferee's name, address, and a	ZIP + 4	Relations	ship of transferor to transferee				
			**					
	For Prov Country							
(a) No.								
from Part I	(b) Purpose of gift	(c)	Use of gift	(d) Description of how gift is held				
raiti					_			
			••					
		(e) T	ransfer of gift		_			
		(0) .						
	Transferee's name, address, and a	71D ± 4	Relation	ship of transferor to transferee				
	Transferee's flame, address, and a	-II	(Velation.	sinp of transferor to transferee	_			
	For Prov Country							
(a) No.	TOI FIOV Country				_			
from	(b) Purpose of gift	(c)	Use of gift	(d) Description of how gift is held				
Part I				-	_			
			•••••					
	(e) Transfer of gift							
	(e) Hansier of gift							
	Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee							
	Transferee's name, address, and a	snip of transferor to transferee	_					
	E B							
(a) No.	For. Prov Country				-			
from	(b) Purpose of gift	(с	Use of gift	(d) Description of how gift is held				
Part I	(b) i dipose of gift				_			
					_			
		(e) T	ransfer of gift					
,								
	Transferee's name, address, and a	ZIP + 4	Relation	ship of transferor to transferee	_			
	For Prov Country							

Continuation of Part XV, Lin	e 3a (990-PF) -	Gran	ts and Con	tributions Paid	During th	e Year
Recipient(s) paid during the year						
Name						
Fistula Foundation						
Street						
Suite 302		04-4-	7: 0 1 -	[F: O4		
City		State CA	Zip Code 95126	Foreign Count	ry	
San Jose Relationship	Foundation Status	I CA	195126			
None	Touridation Status					
Purpose of grant/contribution					Amount	
Charitable						1,000
Name					•	
Frankel Jewish Academy				,		
Street						
6600 West Maple Road			la: A. I.	le a		
City		State MI	Zip Code 48322	Foreign Count	ry	
West Bloomfield Relationship	Foundation Status	<u> IVII</u>	140322			
None	- Cundation Status					
Purpose of grant/contribution	1				Amount	
Charitable						1,000
					•	
Name Friends of Israel Defense Forces						
Street						
PO Box 999						
City		State	Zip Code	Foreign Count	rv	
Walled Lake		MI	48390		•	
Relationship	Foundation Status			•		
None						
Purpose of grant/contribution					Amount	
Charitable		_				4,000
Name						•
Friends of Rabin Medical Center						
Street					•	
39 Jabotinsky			_			
City		State	Zip Code	Foreign Count	ry	
Petah Tikva	1	<u> </u>	4941492			
Relationship	Foundation Status					
None	<u> </u>				14	
Purpose of grant/contribution					Amount	E 000
Charitable					1	5,000
Name						
Friendship Circle, The	· · · · · · · · · · · · · · · · · · ·					
Street						
6892 W Maple Rd		04-4-	7:- 0-4-	Familian Carret		
City		State	Zip Code	Foreign Count	ry	
West Bloomfield Relationship	Foundation Status	MI	48322			
None	Foundation Status					
Purpose of grant/contribution	<u> </u>				Amount	
Charitable						10,000
					•	
Name						
Hadassah Street						
5030 Orchard Lake Rd						
City		State	Zip Code	Foreign Count	rv	
West Bloomfield		MI	48323	3.5.g., 50ant	- ,	
Relationship	Foundation Status		<u></u>	<u> </u>		
None						
Purpose of grant/contribution					Amount	
Charitable						540

Amount

800

Purpose of grant/contribution

Charitable

MI

Foundation Status

48322

Amount

2,118

West Bloomfield

Purpose of grant/contribution

Relationship

Charitable

Continuation of Part XV, Lin	e 3a (990-PF) -	Gran	ts and Con	tributions Paid	During th	e Year
Recipient(s) paid during the year						
Name						
Jewish Family Service						
Street						
6555 W Maple Road	- , 	State	Zip Code	Foreign Count		
City West Bloomfield		State MI	48322	Foreign Count	ry	
Relationship	Foundation Status	1 1411	140022			
None						
Purpose of grant/contribution				-	Amount	
Charitable						1,000
Name						
Jewish Federation of Metro Detroit Street						
PO Box 2030						
City		State	Zip Code	Foreign Count	ry	
Bloomfield Hills		МІ	48303		-	
Relationship None	Foundation Status					
Purpose of grant/contribution					Amount	·
Charitable						121,633
Name						
Jewish Hospice & Chaplaincy Network Street						
6555 W Maple Road						
City	 _	State	Zip Code	Foreign Count	ry	
West Bloomfield		МІ	48322			
Relationship	Foundation Status					
None						
Purpose of grant/contribution					Amount	
Charitable						1,000
Name Jewish National Fund						
Street			-			
78 Randall Ave		,				
City			Zip Code	Foreign Count	ry	
Rockville Centre	I= 1.0 50.0	NY	11570			
Relationship	Foundation Status					
None Purpose of grant/contribution	<u> </u>				Amount	
Charitable					Amount	365
					<u></u>	
Name Jewish News Foundation						
Street	· ·=					
29200 Northwestern Hwy						
City		State	Zip Code	Foreign Count	ry	
Southfield		МІ	48034		-	
Relationship	Foundation Status			-		
None	<u></u>				T	
Purpose of grant/contribution Charitable					Amount	2,500
Name						
Jewish Senior Life (JSL)						
Street						
6710 West Maple Road						
City		State	1 -	Foreign Count	гу	
West Bloomfield		MI	48322			
Relationship	Foundation Status					
None			-	-		
Purpose of grant/contribution					Amount	3,334
Charitable					Ц	3,334

Continuation of Part XV, Lin	e 3a (990-PF) -	Gran	ts and Con	tributions Paid	During th	e Year
Recipient(s) paid during the year			**			
Name						
Jewish United Fund						
Street	'					
30 S Wells St						
City		State	Zip Code	Foreign Count	try	
Chicago	I= o	<u> IL</u>	60606			
Relationship	Foundation Status					
None Purpose of grant/contribution					Amount	
Charitable					Amount	1,440
					1	1,770
Name						
Judson Center			·			
Street 30301 Northwestern Hwy, Ste 100						
City	·	State	Zip Code	Foreign Count	rv	
Southfield		MI	48334		,	
Relationship	Foundation Status		<u> </u>	<u> </u>		
None						
Purpose of grant/contribution			<u>-</u> -		Amount	
Charitable					J	1,000
Name						
JVS						
Street						
29699 Southfield Rd						
City		State	Zip Code	Foreign Count	try	
Southfield		MI	48076			
Relationship	Foundation Status					
None					[A	
Purpose of grant/contribution					Amount	350
Charitable			•		<u> </u>	330
Name						
Kids Kicking Cancer	· · · · ·					
Street						
27600 Northwestern Hwy , Ste 220 City		State	Zip Code	Foreign Count	'nı	
Southfield		MI	48034	l oreign count	y	
Relationship	Foundation Status		1.000.	I		
None						
Purpose of grant/contribution					Amount	
Charitable					1	5,000
Name						
Matan B'Seter						
Street						
15699 Jeanette						
City		State	Zip Code	Foreign Count	try	
Southfield		MI	48075	<u> </u>		
Relationship	Foundation Status					
None	<u></u>				Amount	
Purpose of grant/contribution					Amount	650
Charitable					_! .	030
Name						
Mazon						
Street	,					
10850 Wilshire Blvd , Suite 400	-	State	Zip Code	Foreign Count	tm.	
City		CA	90024	Foreign Count	u y	
Los Angeles Relationship	Foundation Status		100024	I		
None	. Januarion Gratus					
Purpose of grant/contribution	<u> </u>				Amount	
Oh - washin					1	300

Amount

1,000

Purpose of grant/contribution

Charitable

Continuation of Part XV, Li Recipient(s) paid during the year	ne 3a (990-PF) -	Gran	its and Con	tributions Paid	During th	e Year
Name						
Shepherd's Gate						
Street						
2400 23 Mile Rd						
City	_	State	Zip Code	Foreign Count	trv	
Shelby Charter Twp		МІ	48315	' ' '		
Relationship	Foundation Status			·····		
None						
Purpose of grant/contribution					Amount	
Charitable						1,000
Name						
Sky Foundation						
Street						
33 Bloomfield Hills Pkwy						
City		State		Foreign Count	try	
Bloomfield Hills		MI	48304			
Relationship	Foundation Status					
None						
Purpose of grant/contribution					Amount	
Charitable						1,000
Name						
Tamarack Camp						
Street				 		
6735 Telegraph, Suite 380						
City		State	Zip Code	Foreign Count	try	
Bloomfield Hills		МІ	48301		•	
Relationship	Foundation Status		•	•		
None						
Purpose of grant/contribution					Amount	
Charitable						1,000
Name	. <u>-</u> -					
Temple Beth El Street						
7400 Telegraph Rd						
City		State	Zip Code	Foreign Count	'n/	
Bloomfield Hills		MI	48301	l oreign count	y	
Relationship	Foundation Status	1	1.000			
None						
Purpose of grant/contribution					Amount	
Charitable						1,000
<u></u> -					•	
Name						
Temple Shir Shalom						
Street						
3999 Walnut Lake Road		State	Zip Code	Foreign Count	·	
City		MI	48323	Foreign Count	ıry	
West Bloomfield Relationship	Foundation Status		140323			
None	Foundation Status					
Purpose of grant/contribution					Amount	
Charitable					Amount	500
Спапавле	**		 .			
Name						
The Bail Project						
Street						
PO Box 750	···					
City		State		Foreign Count	try	
Venice	<u> </u>	CA	90294			
Relationship	Foundation Status					
None	<u> </u>		_			
Purpose of grant/contribution					Amount	000
Charitable					I .	800

State Zip Code

Foundation Status

Amount

Amount

Foreign Country

Purpose of grant/contribution

Purpose of grant/contribution

Name

Street

City

Relationship

Part I, Line 6 (990-PF) - Gain/Loss from Sale of Assets Other Than Inventory

Pappas Foundation, Inc.

									Totals	Gross	SS	Cost or Other Basis, Expenses,	isis, Expenses,	Net Gam	an
		Amount								Sales	es	Depreciation and Adjustments	d Adjustments	or Loss	SS
Long	Long Term CG Distributions	0						ت	Capital Gams/Losses		639,787		599,383		40,404
Short	Short Term CG Distributions	0							Other sales		0		0		0
					Check "X" if										
	-		Check "X"		Purchaser			•				Expense of Sale			
			to include		ısa	Acquisition	Date	Date	Gross Sales	Cost or	Valuation	and Cost of			Net Gain
	Description	CUSIP#	in Part IV	Purchaser	Business	Method	Acquired	Sold	Price	Other Basis	Method	Improvements	Depreciation	Adjustments	or Loss
1 Beyound Meat	Meat		×	Pappas Foundation		۵	9/21/2018	6/6/2019	67,267	25,000					42,267
2 Meta Fins	Meta Financial Group CASH		χ			۵	5/24/2019	5/24/2019	273,520	276,900					-3,380
3 Matunty c	Matunty of 250,000sh US TBill		×	Pappas Foundation		۵	8/1/2019	10/1/2019	250,000	249,183					817
4 Integrated	Integrated Device Tech		×			٥	1/10/2019	4/1/2019	49,000	48,300					700

Part I, Line 11 (990-PF) - Other Income

		14,701	14,701	0
		Revenue		
		and Expenses	Net Investment	Adjusted
	Description	per Books	Income	Net Income
1	Other Investments	14,701	14,701	

Part I, Line 18 (990-PF) - Taxes

		533	0	0	0
		Revenue			Disbursements
		and Expenses	Net Investment	Adjusted	for Charitable
l	Description	per Books	Income	Net Income	Purposes
1.	Real estate tax not included in line 20	0			
2	Tax on investment income	13			
3	Income tax	520			

Part I, Line 23 (990-PF) - Other Expenses

	28	0	0	Ö
	Revenue and			Disbursements
	Expenses	Net Investment	Adjusted Net	for Charitable
Description	per Books	Income	Income	Purposes
1 Miscellaneous Fees	28	0		

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Part II, Line 10b (990-PF) - Investments - Corporate Stock

			1,826,542	3,055,941	1,800,424	3,126,282
	Description	Num Shares/ Face Value	Book Value Beg of Year	Book Value End of Year	FMV Beg of Year	FMV Fnd of Year
1 Bank of America		2005	27.738	27 238	24 640	25 220
十		200	12,400	42,400	040,47	22,00
Z Cilicionby		000	13,400	13,400	2,003	3,930
T	9	6			134	163
T	Flagstar Boncorp Inc / FBC	100	5,800	5,800	264	383
┪	Huntington BKSH / HBAN	3,000	42,195	42,195	35,760	45,240
6 Nucor / NUE		200	16,174	16,174	25,905	28,140
7 Nokia Corp / NOK	/ NOK	800	8,777	8,777	4,656	2,968
8 NY Comm Bank / NYB	3ank / NYB	2,000	35,910	55,917	18,820	48,080
9 Pfizer Inc / PFE	PFE	1,000	25,320	25,320	43,650	39,180
10 SEI			218,496	218,627	253,133	291,864
11 Teva Pharm	Teva Pharm Onds / TEVA	2,876	122,778	122,778	44,348	28,185
12 Alpine Dividend Fund	lend Fund		245,792	249,125	245,426	248,911
13 Marco Polo Fund	Fund		250,000	250,000	304,532	304,532
14 CF Industries	Se	47	4,045	4,045	10,225	11,219
	Ultra Short					
16 Sothern Co	Sothern Copper Corp / SCCO	202	13,579	13,579	15,539	21,452
17 Teekay Tankers	ikers	000'9	27,764	33,771	5,568	35,955
18 R R Donnel	R R Donnelley & sons Co / RRD	1,000	10,514	10,514	3,960	2,624
19 lamgold Corp / IAG	rp / IAG	5,000	14,511	14,511	18,400	18,650
20 Western Union / WU	iion / WU	1,000	13,502	13,502	17,060	26,780
	Allegheny Technologies Inc / ATI	1,000	14,090	14,090	21,770	20,660
	Diamond Offshore Drilling Inc / DO	1,000	17,069	27,076	9,440	14,380
23 Ensco PLC / ESV	/ ESV	200	6,948		1,780	
	/ RIG	1,000	12,725	12,725	6,940	6,880
25 Energy Trar	Energy Transfer Equity / ETE	1,500	15,785	15,785	19,815	19,245
╛	Energy Products Partners / EPD	1,000	23,420	23,420	24,590	28,160
╗	ers.		216,367	401,511	216,367	401,511
T			350,000	295,941	350,000	295,941
29 Amazon / AMZN	MZN	1,000	74,262	74,262	75,099	92,392
30 1st Place Financial	nancial	1,224				0
\dashv	Cypress Semi Conductor Corp / CY	2,000		47,040		46,660
32 LSC Communications	unications	125				26
	Taubman Centers / TCO	1,500		52,597		46,635
34 Uber / UBER	~	200		21,782		14,870
_	UNITED STATES TREASURY 2/20/20	1		420,939		424,265
╛	UNITED STATES TREASURY 5/28/2020	_		99,206		99,373
\neg	UNITED STATES TREASURY 8/13/2020	_		417,265		420,963
38 Valaris PLC / VAL	/ VAL	125		6,948		820

Part VIII, Line 1 (990-PF) - Compensation of Officers, Directors, Trustees and Foundation Managers

5		r		1
	Expense Account	,	•	
n	Benefits			
0	Compensation	0	0	0
	Avg Hrs Per Week			
	Title	Director	Director	Director
	Foreign Country			
	Zip Code	48334	48334	48334
	State	<u>v</u>	Mi	M
	Cuţ	Farmington Hills	Farmington Hills	Farmington Hills
	Street	30301 N Hwy , Ste 200	30301 N Hwy , Ste 200	30301 N Hwy , Ste 200
	Check "X" if Business			
	Name	Norman A Pappas	Susan L Pappas	Sydell Pappas
		_	7	~