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2019

Form 990-PF

Department of the Treasury

Internal Revenue Service

Return of Private Foundation

or Section 4947(a)(1) Trust Treated as Private Foundation ▶ Do not enter social security numbers on this form as it may be made public. ▶ Go to <u>www.irs.gov/Form990PF</u> for instructions and the latest information.

Open to Public

							znopoddion
For	caler	ndar year 2019, or tax year beginning 01-01-20)19 , ar	nd er	nding 12-31-	2019	
		ndation			A Employer ıd	entification numbe	er
CA	ROL A S	STUHR FAMILY FOUNDATION			45-4054307		
		street (or P O box number if mail is not delivered to street address)	Room/suite		B Telephone nu	mber (see instructio	ns)
21	525 MU:	5KEGON ROAD			(989) 539-7910		
		, state or province, country, and ZIP or foreign postal code MI 48625			C If exemption	application is pendin	ig check here
пак	KISON,	MI 40025			C II exemption	аррисасіон із ренан	▶ □
G Cł	neck all	l that apply \square Initial return \square Initial return of a	former public charity		D 1. Foreign or	ganızatıons, check h	ere 🕨 🗆
		Final return Amended return				ganizations meeting k here and attach co	
		☐ Address change ☐ Name change				undation status was	
	,	pe of organization Section 501(c)(3) exempt private t				n 507(b)(1)(A), chec	
			e private foundation		-		
		rom Part II col (c)	☑ Cash ☐ Accru	al		ation is in a 60-mont n 507(b)(1)(B), ched	
		>\$ 2,730,658	be on cash basis)				
_				ı		Γ	_
Pa	rt I	Analysis of Revenue and Expenses (The total of amounts in columns (b), (c), and (d) may not necessarily	(a) Revenue and expenses per	(b)	Net investment	(c) Adjusted net	(d) Disbursements for charitable
		equal the amounts in column (a) (see instructions))	books		income	ıncome	purposes (cash basis only)
	1	Contributions, gifts, grants, etc , received (attach					
		schedule)	223,000				
	2	Check ► ☐ If the foundation is not required to attach Sch B					
	3	Interest on savings and temporary cash investments					
	4	Dividends and interest from securities	72,352		72,352		
	5a	Gross rents					
	ь	Net rental income or (loss)					
Revenue	6a	Net gain or (loss) from sale of assets not on line 10	25,825				
	ь	Gross sales price for all assets on line 6a 407,527					
	7	Capital gain net income (from Part IV, line 2)			25,825		
	8	Net short-term capital gain					
	9	Income modifications					
	10a	Gross sales less returns and allowances					
	b	Less Cost of goods sold					
	C	Other income (attach schedule)					
	11		321,177		98,177		
		Compensation of officers, directors, trustees, etc	321,177		90,177		
	13 14	Other employee salaries and wages					
s	15	Pension plans, employee benefits					
Expenses	16a	Legal fees (attach schedule)					
<u>B</u>	Ь	Accounting fees (attach schedule)					
Ĕ	c	Other professional fees (attach schedule)					
IIVe	17	Interest					
Administrative	18	Taxes (attach schedule) (see instructions)	724		20		
ıns	19	Depreciation (attach schedule) and depletion					
Ē	20	Occupancy					1
Ă	21	Travel, conferences, and meetings					
anc	22	Printing and publications					
biu	23	Other expenses (attach schedule)	25,918		25,918		
Operating and	24	Total operating and administrative expenses.					
<u>pe</u>		Add lines 13 through 23	26,642		25,938		(
0	25	Contributions, gifts, grants paid	200,000				200,000
	26	Total expenses and disbursements. Add lines 24 and 25	222.21-		25.25		222.53
	27	Subtract line 26 from line 12	226,642		25,938		200,000
	a a	Excess of revenue over expenses and					
		disbursements	94,535				
	Ь	Net investment income (if negative, enter -0-)			72,239		
	С	Adjusted net income (If negative, enter -0-)					

2,066,626

167,781

2,340,938

2,340,938

2,340,938

2,340,938

وه

2.145,618

2,359,692

2,359,692

2,359,692

2,359,692

1

2

3

4

5

6

2,340,938

2,435,473

2,359,692 Form **990-PF** (2019)

94,535

75,781

115,000

2.521,460

110,124

2,730,658

Receivables due from officers, directors, trustees, and other

Other notes and loans receivable (attach schedule)

Investments—land, buildings, and equipment basis ▶ Less accumulated depreciation (attach schedule)

Less accumulated depreciation (attach schedule)

Total assets (to be completed by all filers—see the

Accounts payable and accrued expenses

Foundations that follow FASB ASC 958, check here ▶

Loans from officers, directors, trustees, and other disqualified persons

Mortgages and other notes payable (attach schedule).

Total liabilities(add lines 17 through 22)

Foundations that do not follow FASB ASC 958, check here 🕨 🗀

Total net assets or fund balances (see instructions)

Total liabilities and net assets/fund balances (see instructions) .

Analysis of Changes in Net Assets or Fund Balances

Total net assets or fund balances at beginning of year—Part II, column (a), line 29 (must agree with end-

Total net assets or fund balances at end of year (line 4 minus line 5)—Part II, column (b), line 29

Paid-in or capital surplus, or land, bldg, and equipment fund Retained earnings, accumulated income, endowment, or other funds

Less allowance for doubtful accounts ▶ Inventories for sale or use Prepaid expenses and deferred charges . . .

Land, buildings, and equipment basis

instructions Also, see page 1, item I)

Deferred revenue

and complete lines 24, 25, 29 and 30.

Net assets without donor restrictions . . .

Net assets with donor restrictions . . .

and complete lines 26 through 30.

of-year figure reported on prior year's return)

Decreases not included in line 2 (itemize) ▶

Other increases not included in line 2 (itemize) -

Enter amount from Part I, line 27a

Other assets (describe > _

Other liabilities (describe >_

Grants payable

disqualified persons (attach schedule) (see instructions)

Investments—U S and state government obligations (attach schedule) Investments—corporate bonds (attach schedule)

	4
	5
	6
	7
S	8
Assets	9
As	10:
	ı
	11

12

13 14

15

16

17

18

19 20

21

22 23

24

25

26

28

30

Part III

2

3

Liabilities

Balances

Fund

ŏ

Assets 27

Net 29

	arehouse, or common stock, 200 shs		P—Purchase D—Donation	Date acquired (mo , day, yr)	Date sold (mo , day, yr)
1 a NEW FRONTIER - 7063			Р		
b NEW FRONTIER - 6217			Р		
c					
d					
e					
(e) Gross sales price	(f) Depreciation allowed	Cost or	(g) other basis	Gain o	h) r (loss)
· ·	(or allowable)	plus exp	ense of sale) mınus (g)
	58,595		266,314	.	2,281
b 13	31,752		115,388		16,364
С					
d					
е					
Complete only for assets	s showing gain in column (h) and ow	ned by the foundation	on 12/31/69	(I)
(i) F M V as of 12/31/69	(j) Adjusted basis as of 12/31/69	Excess	(k) of col (ı) l (j), ıf any	Gains (Col (l col (k), but not	h) gain minus less than -0-) or om col (h))
a					2,281
b					16,364
c					
d					
e					
•	gain or (loss) as defined in sections		Part I, line 7	2	25,825
If gain, also enter in Pa in Part I, line 8	ırt I, line 8, column (c) (see instructi	ons) If (loss), enter -0	}	3	18,645
Part V Qualification	Under Section 4940(e) for Re	educed Tax on Net	Investment In	come	
	private foundations subject to the sec				
If section 4940(d)(2) applies, l	eave this part blank				
	ne section 4942 tax on the distributant of qualify under section 4940(e) Do			? \ \ \ \ \ \ \ \ \ \ \ \	es 🗹 No
	nount in each column for each year,			 S	
(a) Base period years Calendar	(b) Adjusted qualifying distributions	(c) Net value of noncharitab	ole-use assets	(d) Distribution ration	
year (or tax year beginning in) 2018	279,304		2,404,877	(col (b) divided by c	0 116141
2017	199,342		2,191,950		0 090943
2016	154,720		1,892,987		0 081733
2015	94,582		1,793,715		0 052730
2014	71,768		1,398,553		0 052730
2 Total of line 1, column (,		2		0 392863
3 Average distribution ratio	o for the 5-year base period—dividendation has been in existence if less	the total on line 2 by 5			0 078573
	incharitable-use assets for 2019 from		4		2,626,230
5 Multiply line 4 by line 3			5		206,351
6 Enter 1% of net investm	ent income (1% of Part I, line 27b)		6		722
			7		207,073
	ions from Part XII, line 4 ,				200,000
	eater than line 7, check the box in Pa			ng a 1% tax rate Se	
				Fo	rm 990-PF (2019)

Page **6**

5a	During the year did the foundation	pay c	r incur any amount to							Yes	No
	(1) Carry on propaganda, or otherw					Yes	✓	No			
	(2) Influence the outcome of any s		•	• • • • • • • • • • • • • • • • • • • •							
	on, directly or indirectly, any vo		-			Yes	✓	No			
	(3) Provide a grant to an individual		• • • • • • • • • • • • • • • • • • • •		. \square	Yes	✓	No			
	(4) Provide a grant to an organizat					_	_				
	in section 4945(d)(4)(A)? See i (5) Provide for any purpose other t	han r	eligious, charitable, scien	tific, literary, or		Yes	✓	No			
	educational purposes, or for the	•	· ·			Yes	✓	No			
Ь	If any answer is "Yes" to 5a(1)-(5),		=			ed in			-1		
	Regulations section 53 4945 or in a								5b		
С	Organizations relying on a current r If the answer is "Yes" to question 5		-								
·	tax because it maintained expenditi			·		1	$\overline{}$				
	If "Yes," attach the statement requi		· · · · · · · · · · · · · · · · · · ·			」Yes	Ш	No			
6a	Did the foundation, during the year		· -		ıms on						
•	a personal benefit contract?				. –	1					
ь	Did the foundation, during the year				L nefit contract? .	Yes		No	6b		No
	If "Yes" to 6b, file Form 8870		. ,								
7a	At any time during the tax year, wa	s the	foundation a party to a p	orohibited tax shelter tran	nsaction?	Yes	7	No			
b	If "Yes", did the foundation receive	any p	proceeds or have any net	income attributable to th	ne transaction? .			140	7b		
8	Is the foundation subject to the sec	tion 4	1960 tax on payment(s) o	of more than \$1,000,000	ın remuneratıon	or					
	excess parachute payment during t	he ye	ar [?]		• • □	Yes	✓	No			
Da	Information About	Offic	ers, Directors, Trust	ees, Foundation Ma	nagers, High				yees,		
Га	and Contractors										
1	List all officers, directors, truste	es, f	oundation managers an	d their compensation.	See instructio	ns					
	(a) Name and address	((b) Title, and average	(c) Compensation (If	(d) Contribi			(e)	Expen	se acc	ount,
	(a) Name and address		hours per week devoted to position	not paid, enter -0-)	employee benef deferred com			0	ther al	lowand	es
CARO	L A STUHR		SIDENT	0			0				0
	MUSKEGON ROAD	0 50									
	ISON, MI 48625 HER STUHR	VP		0			0				
	HARRISON AVE	0 50									·
	ISON, MI 48625										
	DRIE LARGEN	SECF 0 50	RETARY	0			0	1			0
	LAKESHORE DR E, ID 83860										
	Compensation of five highest-pa	id er	nployees (other than th	hose included on line 1	L—see instructi	ons). I	[f no	ne, ei	nter "	NONE.	71
(a)	Name and address of each employee more than \$50,000	paid	(b) Title, and average hours per week	(c) Compensation	(d) Contribe employee plans and o	benefit	:			se acco	
			devoted to position		compens		-				
NON	E										-
			_								
T	Lucinalism of atheres are desired		10.000				+				
Iota	I number of other employees paid ov	er \$5	0,000			<u> </u>			004) P	(2010)
								For	ın yyl	D-PF	2019

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

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Part VIII Information About Officers, Directors, Trust and Contractors (continued)	ees, Foundation Managers, Highly F	Paid Employees,
3 Five highest-paid independent contractors for professional s	services (see instructions). If none, ente	r "NONE".
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE		
	-	
	1	
Total number of others receiving over \$50,000 for professional services.		<u> </u>
Part IX-A Summary of Direct Charitable Activities	de velevent statistical information such as the number	
List the foundation's four largest direct charitable activities during the tax year Inclu organizations and other beneficiaries served, conferences convened, research papers	s produced, etc	Expenses
1		
2		
3		
4		
Part IX-B Summary of Program-Related Investments	•	A
Describe the two largest program-related investments made by the foundation do 1 N/A	uring the tax year on lines 1 and 2	Amount
2		
All other program-related investments See instructions		
3		
Total. Add lines 1 through 3		•
		Form 990-PF (2019)

Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation qualifies for

Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4

Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment

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

Adjusted qualifying distributions. Subtract line 5 from line 4.

4

5

4

5

200,000

200.000

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b Total for prior years

a From 2014. **b** From 2015. . . . c From 2016. . .

d From 2017.

e From 2018.

indicated below:

Excess distributions carryover, if any, to 2019

f Total of lines 3a through e.

d Applied to 2019 distributable amount. e Remaining amount distributed out of corpus

same amount must be shown in column (a))

5 Excess distributions carryover applied to 2019 (If an amount appears in column (d), the

line 4b from line 2b

income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed. d Subtract line 6c from line 6b Taxable amount e Undistributed income for 2018 Subtract line 4a from line 2a Taxable amount—see instructions f Undistributed income for 2019 Subtract lines 4d and 5 from line 1. This amount must be distributed in 2020 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) 8 Excess distributions carryover from 2014 not applied on line 5 or line 7 (see instructions) . . .

9 Excess distributions carryover to 2020.

10 Analysis of line 9

a Excess from 2015. . .

d Excess from 2018. . .

e Excess from 2019. . .

c Excess from 2017. . . .

b Excess from 2016. .

Subtract lines 7 and 8 from line 6a

4 Qualifying distributions for 2019 from Part XII, line 4 🕨 \$ a Applied to 2018, but not more than line 2a **b** Applied to undistributed income of prior years (Election required—see instructions). c Treated as distributions out of corpus (Election required—see instructions). Page 9

129,867

129,867

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Part XIII Undistributed Income (see instructions) (a) Years prior to 2018 Corpus Distributable amount for 2019 from Part XI, line 7 2 Undistributed income, if any, as of the end of 2019 a Enter amount for 2018 only.

9 000

91.060 160,452

9,000

91.060

160.452

70.133

260.512

70.133

330,645

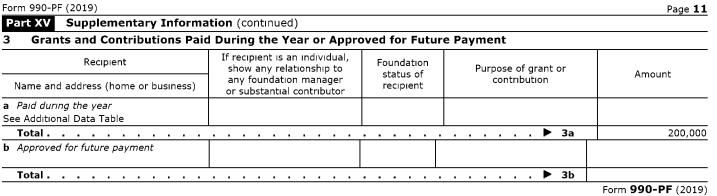
330,645

(b)

(c)

2018

6 Enter the net total of each column as a Corpus Add lines 3f, 4c, and 4e Subtract line 5 b Prior years' undistributed income Subtract c Enter the amount of prior years' undistributed



inter gross	amounts unless otherwise indicated	Unrelated bu	ısıness ıncome	Excluded by section	512, 513, or 514	(e) Related or exempt
-	service revenue	(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	function income (See instructions)
	and contracts from government agencies					
2 Member	rship dues and assessments					
3 Interest investm	t on savings and temporary cash nents					
	ds and interest from securities			14	72,352	
	tal income or (loss) from real estate					
	financed property					
	ebt-financed property					
	tal income or (loss) from personal property	1				
	(loss) from sales of assets other than					
invento	` ,			18	25,825	
9 Net inco	ome or (loss) from special events			10	20,020	
0 Gross p	profit or (loss) from sales of inventory					
1 Other r	evenue a					
b						
	al Add columns (b), (d), and (e)				98,177	
O T-4-1	A del les - 43 de ser - 765 - 745 475				_	00 47
	Add line 12, columns (b), (d), and (e) orksheet in line 13 instructions to verify calcu			13	3	98,177
	orksheet in line 13 instructions to verify calcu	lations)			3	98,177
(See wo Part XVI	Relationship of Activities to the Explain below how each activity for which the accomplishment of the foundation's explain below how explain below how each activity for which the accomplishment of the foundation's explain below how explain the foundation of the fo	lations) ie Accomplish income is reporti	ment of Exemed in column (e) c	pt Purposes of Part XVI-A contribu	ted importantly to	,
(See wo Part XVI Line No.	Prksheet in line 13 instructions to verify calcular Relationship of Activities to the Explain below how each activity for which	lations) ie Accomplish income is reporti	ment of Exemed in column (e) c	pt Purposes of Part XVI-A contribu	ted importantly to	,
(See wo Part XVI Line No.	Relationship of Activities to the Explain below how each activity for which the accomplishment of the foundation's explain below how explain below how each activity for which the accomplishment of the foundation's explain below how explain the foundation of the fo	lations) ie Accomplish income is reporti	ment of Exemed in column (e) c	pt Purposes of Part XVI-A contribu	ted importantly to	,
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(See wo Part XVI Line No.	Relationship of Activities to the Explain below how each activity for which the accomplishment of the foundation's explain below how explain below how each activity for which the accomplishment of the foundation's explain below how explain the foundation of the fo	lations) ie Accomplish income is reporti	ment of Exemed in column (e) c	pt Purposes of Part XVI-A contribu	ted importantly to	,
(See wo Part XVI Line No.	Relationship of Activities to the Explain below how each activity for which the accomplishment of the foundation's explain below how explain below how each activity for which the accomplishment of the foundation's explain below how explain the foundation of the fo	lations) ie Accomplish income is reporti	ment of Exemed in column (e) c	pt Purposes of Part XVI-A contribu	ted importantly to	98,177

,	 /		
XVII	Information Regarding Transfers To and Transactions and Relationships With Noncharit Exempt Organizations	able	

1 Died be organization directly or indirectly engage in any of the following with any other organization described in section 501 (2) (2) (c) cher thris section 501 (2) organizations) or insection 501 (3) (5sh.) 1 Transfers from the resorting foundation to a nonchantable exempt organization of (1) (5sh.) (2) Other assets. (3) Sales of assets to a nonchantable exempt organization. (3) Sential of facilities, equipment, or other assets. (4) Sential of facilities, equipment, or other assets. (5) Loans or loan guarantees. (6) Dear for loan guarantees. (6) Performance of services or membership or fundation in solicitations. (6) Dear for loan guarantees. (6) Performance of services or membership or fundation in solicitations. (7) Sales of assets from any of the above it "vegicities" or loan guarantees. (8) Loans or loan guarantees. (9) Performance of services or membership or fundation in solicitations. (9) Performance of services or membership or fundation in solicitations. (9) Performance of services or membership or fundation in solicitations. (10) Performance of services or membership or fundation in solicitations. (11) Sales of assets from solicity or indirectly affiliated with, or related to, one or more tax-exemptic organizations or services given by the reporting foundation if the foundation received less than fair market value of the goods, other assets, or services given by the reporting foundation if the foundation received less than fair market value of the goods, other assets, or services received (1) Individual in any transaction or or sharing arrangement, show in color (1) the solicitation of the goods, other assets, or services given by the reporting foundation if the foundation received less than fair market value of the goods, other assets, or services received (1) Individual in any transaction or sharing arrangement, show in color (1) the solicitation of preparation (1) (2) Description of transfers, transactions, and sharing arrangements. (a) Under penalties of pergury, i declare t	Part	XVII	Exempt Org		ransı	rers 10 a	and Transacti	ions	and Relation	nsnips with Noi	ncnarit	able		
(2) Other assets											on 501		Yes	No
(2) Other assets: 1a(2) No Other transactions 1a(2) No Other transactions 1a(3) No Other transactions 1a(2) No Other assets of assets from a noncharitable exempt organization. 1b(2) No Other transactions of assets from a noncharitable exempt organization. 1b(2) No Other assets of assets from a noncharitable exempt organization. 1b(3) No Other assets of assets from a noncharitable exempt organization. 1b(3) No Other assets of the load of activities of the poots, other assets, or pade meloyees. 1b(3) No Other presents of the poots, other assets, or pade meloyees. 1b(3) No Other presents of the poots, other assets, or pade meloyees of the goods, other assets, or services given by the reporting foundation if the foundation received less than far market value in any transaction or sharing arrangement, show in column (d) the value of the goods, other assets, or services received Other presents of the poots, other assets, or services received Other presents of the poots, other assets, or services received Other presents of the poots, other assets, or services received Other presents of the poots of the poots, other assets, or services received Other presents of the poots	a Tra	nsfers f	rom the reporting	foundation to a r	oncha	rıtable ex	empt organizatio	on of						
b Other transactions (1) Sales of assets to a nonchantable exempt organization. (2) Purchases of assets from a nonchantable exempt organization. (3) Rental of facilities, equipment, or other assets. (3) Rental of facilities, equipment, or other assets. (3) Performance of services or membership or fundraising solicitations. (3) Performance of services or membership or fundraising solicitations. (3) Performance of services or membership or fundraising solicitations. (3) Rental of facilities, equipment, mailing lists, other assets, or paid employees. (3) Sample of facilities, equipment, mailing lists, other assets, or paid employees. (4) Line following schools, other assets, or services give in by the reporting foundation if the foundation received lass than far market value of the gloods, other assets, or services give in by the reporting foundation if the foundation received lass than far market value of the gloods, other assets, or services give in by the reporting foundation if the foundation received lass than far market value of the gloods, other assets, or services give in by the reporting foundation if the foundation received lass than far market value of the gloods, other assets, or services sections of the services of services asset to all far market value of the gloods, other assets, or services sections of the services asset to all far market value of the gloods, other assets, or services sections of the services asset to all far market value of the gloods, other assets, or services sections of the services asset to all far market value of the gloods, other assets, or services give by the reporting foundation for the foundation received lass than far market value of the gloods of the services give by the foundation for the foundation received lass than far market value of the gloods of the services of the service	(1)	Cash.									.	1a(1)		No
(1) Sales of assets to a nonchartable exempt organization. (2) Purchase of assets from annochartable exempt organization. (3) Rental of facilities, equipment, or other assets. (4) Nembursement arrangements. (5) Losins or loan guarantees. (5) Losins or loan guarantees. (5) Losins or loan guarantees. (6) Performance of services or membership or fundrasing solicitations. (6) Performance of services or membership or fundrasing solicitations. (7) Anno different to any of the above is "Ves," complete the following schedule: Column (b) should always show the far market value in the goods, other assets, or services accessed and solicitation or sharing arrangement, show in column (d) the value of the goods, other assets, or services received (3) line No (4) Amount involved (5) Amount involved (6) Amount involved (7) Name of moscharitable exempt organization (8) Description of transfers, transactiones, and sharing arrangements adscribed in section 501(c) (other than section 501(c) (3)) or in section 501(c) (3)) or in section 501(c) (3) or in section 501(c) (4) Description of relationship 2a is the foundation directly or indirectly affiliated with, or related to, one or more tax-exempt organizations (a) Name of organization (b) Type of organization (c) Description of transfers, transactions, and sharing arrangements are all transactions or services sectived of my knowledge and selectly in the section 501(c) (3)	(2) Other assets										.	1a(2)		No
(2) Purchases of assets from a noncharitable exempt organization. 116(2) No 16(3) No 16(4) Reimbursement arrangements. 116(4) No 116(4) No 116(5)														
(3) Rental of facilities, equipment, or other assets, 116(3) № (4) Reimbursement arrangements. 116(5) № (5) Losis or losin guarantees. 116(5) № (6) Performance of services or membership or fundrasing solicitations. 116(6) № (6) 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 fundation if the frontiation in the formation in the fore					_						1			
(4) Rembursement arrangements.						-						_ ` _		-
(5) Loans or loan guarantees. (6) Performance of services or membership or fundraising solicitations. (7) Performance of services or membership or fundraising solicitations. (8) Performance of services or membership or fundraising solicitations. (9) Performance of services or membership or fundraising solicitations. (1) Performance of services or membership or fundraising solicitation of the fundraising solicitation of the fundraising solicitation of the fundration received less than fair market value of the goods, other assets, or services received in any transaction or sharing arrangement, show in column (d) the value of the goods, other assets, or services received (e) Line No. (9) Line No. (1) Amount involved (1) Amount involved (2) Line No. (3) Involved (4) Description of transfers, transactions, and sharing arrangements. 2a is the foundation directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described in section 501(c) (dither than section 501(c)(3)) or in section 527? 2a is the foundation directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described in section 501(c) (dither than section 501(c)(3)) or in section 527? 2a is the foundation directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described in section 501(c) (dither than section 501(c)(3)) or in section 527? 2a is the foundation directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described in section 501(c) (dither than section 501(c) (3)) or in section 527? 2a is the foundation directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described in section 501(c) (dither than section 501(c) (3)) or in section 527? 2a is the foundation directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described in section 501(c) (dither than section 501(c) (dither than section 501(c) (dither than section 501(c) (dither than s				· ·							1			
(6) Performance of services or membership or fundratising solicitations											1			-
c Sharing of facilities, equipment, maling lists, other assets, or paid employees											1			
d If the answer to any of the above is "res," complete the following schedule. Column (b) should always show the fair market value of the goods, other assets, or services given by the reporting formation. 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. (a) Line No. (b) Amount involved (c) Name of nonchartable exempt organization (d) Description of transfers, transactions, and sharing arrangements. 2a Is the foundation directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described in section \$50(c) (other than section \$50(c)(3)) or in section \$527^2. □ Yes No b If "Yes," complete the following schedule (a) Name of organization (b) Type of organization (c) Description of relationship 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 the preparer has any knowledge Vision of the 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 the preparer has any knowledge Print Type preparer's name Preparer's Signature Date Check if self- employed I Print Polio80174 Print Saddress ► 4468 OAK BRIDGE DR						_					1			-
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 (a) Line No (b) Amount involved (c) Name of nonchantable exempt organization (d) Description of transfers, transactions, and sharing arrangements 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?		-												
(a) Line No (b) Amount involved (c) Name of nonchantable exempt organization (d) Description of transfers, transactions, and sharing arrangements 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?	of t	he good	ls, other assets, o	r services given b	y the	reporting	foundation If th	ne fou	undation receive	d less than fair mar	ket valu			
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?	ın a	ny tran	saction or snaring	arrangement, sn	ow in	column (c	1) the value of tr	ne go	oods, other asse	ts, or services recei	vea			
described in section 501(c) (other than section 501(c)(3)) or in section 527?	(a) Line	No	(b) Amount involved	d (c) Name of	noncha	arıtable exe	mpt organization		(d) Description of	transfers, transactions,	, and shar	ıng arra	ngemen	nts
described in section 501(c) (other than section 501(c)(3)) or in section 527?														
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described in section 501(c) (other than section 501(c)(3)) or in section 527?														
described in section 501(c) (other than section 501(c)(3)) or in section 527?														
b If "Yes," complete the following schedule (a) Name of organization (b) Type of organization (c) Description of relationship 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 Vision V	2a Is t	he foun	dation directly or i	ndırectly affılıate	d with	, or relate	d to, one or mor	re tax	k-exempt organı	zations		_		
(a) Name of organization (b) Type of organization (c) Description of relationship (d) Description of relationship (e) Description of relationship (f) Description of relationship (g) Description of relationship (h) Type of organization (h) Type of organization (c) Description of relationship (d) Description of relationship (e) Description of relationship (f) Description of relationship (h) Type of organization (h) Type of organization (c) Description of relationship (c) Description of relationship (d) Description of relationship (e) Description of relationship (f) Description of relationship (h) Type of organization (c) Description of relationship (c) Description of relationship (d) Description of relationship (e) Description of relationship (c) Description of relationship (c) Description of relationship (d) Description of relationship (e) Description of relationship (f) Description of relationship (h) Type of organization (c) Description of relationship (a) Description of relationship (b) Type of organization (c) Description of relationship (a) Description of relationship (b) Type of organization (c) Description of relationship (d) Description of relationship (e)	des	cribed i	n section 501(c) (d	other than sectio	n 501(c)(3)) or	ın section 527? .			□Y	es 🛂	No		
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 ****** 2020-07-12	b If "	es," co	•	-										
Sign Here Sign Windledge 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 Sign			(a) Name of organ	iization		(1	b) Type of organiza	ation		(c) Description	of relatio	nship		
Sign Here Sign														
Sign Here Sign														
Sign Here Sign	-													
Sign Here Sign														
Here Signature of officer or trustee Date Title		of my	knowledge and b	elief, it is true, c										
Here Signature of officer or trustee Date Title Print/Type preparer's name Preparer's Signature Date Check if self-employed ▶ □ Prim's name ▶ YEO & YEO PC Firm's address ▶ 4468 OAK BRIDGE DR	Sign		****	-			2020-07-12		*****			e IRS di	scuss th	าเร
Print/Type preparer's name Preparer's Signature Date Print/Type preparer's Name Preparer's Signature Date Check if self-employed ▶ Print/Type preparer Use Only Print/Type preparer's Name Preparer's Signature Date Check if self-employed ▶ Print's name Preparer's Signature Print's Name Preparer's Signature Print's Si	Here	 					2020-07-12		_ \			ne prepa	er shov	wn
Print/Type preparer's name Preparer's Signature Date Check if self-employed ▶ ☐ PTIN REBECCA MILLSAP Prim's name ▶ YEO & YEO PC Firm's address ▶ 4468 OAK BRIDGE DR			ignature of officer	or trustee			Date		Title					
Paid Preparer Use Only REBECCA MILLSAP Po1080174 Po1080174 Po1080174 Firm's name ▶ YEO & YEO PC Firm's address ▶ 4468 OAK BRIDGE DR			ignature or officer	or trustee			Date		Title		(see ın	ıstr) 🛂	Yes	No
Paid Preparer Use Only REBECCA MILLSAP P01080174 P01080174 P01080174 Firm's name ▶ YEO & YEO PC Firm's address ▶ 4468 OAK BRIDGE DR			Print/Type prepa	rer's name	Prepa	arer's Sigi	nature	П	ate		PTIN			
Paid Preparer Use Only REBECCA MILLSAP 2020-07-12 employed ▶ □ Firm's name ▶ YEO & YEO PC Firm's address ▶ 4468 OAK BRIDGE DR										_		P01080	174	
Preparer Use Only Firm's name ► YEO & YEO PC Firm's eIN ►38-2706146 Phone po (910) 732-3000			REBECCA MILI	LSAP					2020-07-12	employed ▶ 🔲		. 01000	- / 1	
Use Only Firm's address ► 4468 OAK BRIDGE DR Phono no /(210) 733-3000									2020 07 12					
Firm's address 4468 OAK BRIDGE DR			Firm's name >	YEO & YEO PC							Firm's F	[N ▶ 3.8.	-27061	146
Phono no. (910) 732-3000	Use	Unly	Francis - dd -	4460 041 551	005.5	D.						50	_, 551	
FLINT, MI 485325422 Phone no (810) /32-3000			riim s address 🕨	4400 OAK BKI	DGE D	r.					Dhaw -	- (010		7000
				FLINT, MI 485	32542	.2					rnone no	010	, /32	5000

Recipient If recipient is an individual, Purpose of grant or Foundation Amount show any relationship to status of contribution any foundation manager recipient

or substantial contributor

Name and address (home or business)

Total .

a Paid during the year			
AMERICAN RED CROSSPO BOX 37839 BOONE, IA 50037	NONE	EMERGENCY ASSISTANCE	10,000
BLINDED VETERANS ASSOCIATION	NONE	HELP VETERANS OVERCOME	5,000

1101 KING ST SUITE 300 ALEXANDRIA, VA 22314	NONE	BLINDNESS	3,000
CHILDRENS ORGAN TRANSPLANT ASSOC 2501 WEST COTA DRIVE	NONE	SUPPORT FAMILIES THROUGH LIFE SAVING	20,000

1101 KING ST SUITE 300 ALEXANDRIA, VA 22314	THORE .	BLINDNESS	3,00
CHILDRENS ORGAN TRANSPLANT ASSOC 2501 WEST COTA DRIVE BLOOMINGTON, IN 47403	NONE	SUPPORT FAMILIES THROUGH LIFE SAVING	20,00

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment Recipient If recipient is an individual, Purpose of grant or Foundation Amount show any relationship to status of contribution

any foundation manager

or substantial contributor

Name and address (home or business)

MINOT, ND 58702 Total .

	or substantial contributor		
a Paid during the year			
CITY RESCUE MISSION 607 E MICHIGAN AVE LANSING, MI 48912	NONE	STATE OF EMERGENCY SHELTER	10,000
CLARE CO COMMUNITY FOUNDATION PO BOX 391	NONE	IMPROVE LIVES OF CLARE CITIZENS	3,000

recipient

607 E MICHIGAN AVE LANSING, MI 48912			·
CLARE CO COMMUNITY FOUNDATION PO BOX 391 CLARE, MI 48617	NONE	IMPROVE LIVES OF CLARE CITIZENS	3,000
DAKOTA BOYS & GIRLS RANCH PO BOX 5007	NONE	HELP AT RISK CHILDREN AND FAMILIES	5,000

Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to contribution status of any foundation manager recipient Name and address (home or business) or substantial contributor a Paid during the year

	FEED MY STARVING CHILDREN 401 93RD AVE NW COON RAPIDS, MN 55433	NONE	PROVIDE FOOD FOR THOSE IN NEED	10,000
1	INTERNATIONAL STUDENT MINISTRY	NONE	EQUID INTL STUDENTS WITH	5,000

INTERNATIONAL STUDENT MINISTRY PO BOX 22 STEVENS POINT, WI 54481	NONE	EQUIP INTL STUDENTS WITH MINISTRY	5,000
JEW FOR JECUSEO HATCHT ST	NONE	DDOVIDE JEW W/ CHRISTIAN	E 000

STEVENS POINT, WI 54481		MINISTRY	
JEW FOR JESUS60 HAIGHT ST	NONE	PROVIDE JEW W/ CHRISTIAN	5,000

31212113 1 31111 J 1 1 1 3 1 3 1 1 3			
JEW FOR JESUS60 HAIGHT ST SAN FRANCISCO, CA 94102	NONE	PROVIDE JEW W/ CHRISTIAN OPPORTUNITY	5,000

SAN FRANCISCO, CA 94102	110112	OPPORTUNITY	3,00
Total		▶ 3a	200,000

Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to status of contribution any foundation manager recipient

Name and address (home or business)

, ,	or substantial contributor		
a Paid during the year			
LEADER DOGS FOR THE BLIND 1039 S ROCHESTER RD	NONE	HELP LAY FDN FOR FUTURE TRAINING DOG	10,000

ROCHESTER HILLS, MI 48307			
LUTHERAN HERITAGE FOUNDATION 51474 ROMEO PLANK RD MACOMB, MI 48042	NONE	TRANSLATE AND PUBLISHES CHRIST BOOK	10,000

51474 ROMEO PLANK RD MACOMB, MI 48042	NONE	CHRIST BOOK	10,000
LUTHERAN INDIAN MINISTRIES 15400 W CAPITAL DR 201 BROOKFIELD, WI 53005	NONE	SPREAD GOSPEL OF JESUS CHRIST	5,000

Total		 ▶ 3a	200,000
LUTHERAN INDIAN MINISTRIES 15400 W CAPITAL DR 201 BROOKFIELD, WI 53005	NONE	SPREAD GOSPEL OF JESUS CHRIST	5,0
MACOMB, MI 48042		CHRIST BOOK	

Recipient If recipient is an individual, show any relationship to any foundation manager or substantial contributor

a Paid during the year

If recipient is an individual, show any relationship to any foundation manager or substantial contributor

Foundation status of recipient

recipient

205 S MAIN CONCORDIA, MO 64020	NONE	MEDICAL	10,000
NATIONAL MS SOCIETYPO BOX 4527	NONE	ASSIST THOSE AFFECT BY MS	5,000

NEW YORK, NY 10163	NONE	ASSIST THOSE AFFECT BY MS	5,000
ORPHAN GRAIN TRAINPO BOX 1466 NORFOLK, NE 68702	NONE	SHIPS DONATED FOOD, CLOTHING, MEDCL	20,000

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment Recipient Foundation Purpose of grant or If recipient is an individual, Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business) or substantial contributor a Paid during the year PARTNER SEEKING A CURE NONE RESEARCH TOWARDS A CURE 5.000

6900 E BELLEVIEW AVE 202 GREENWOOD VILLAGE, CO 80111			5,555
POBLO INTERNATIONAL 35555 GARFIELD RD 7	NONE	MEET THE NEEDS OF MUSLIMS FOR JESUS	7,000

35555 GARFIELD RD 7 CLINTON TWP, MI 48035	NONE	FOR JESUS	7,000
SALVATION ARMYPO BOX 5953 SAGINAW, MI 48603	NONE	ASSISTS FAMILY IN NEED WITH ITEMS TO	20,000

Total .

Recipient Purpose of grant or If recipient is an individual, Foundation Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business) or substantial contributor

a Paid during the year			
ST JUDE262 DANNY THOMAS PLACE	NONE	CHILDREN'S HOSPITAL	20,000

MEMPHIS, TN 38105			
THE LUEKEMIA & LYMPHOMA SOCIETY	NONE	PROVIDE RESEARCH FOR BLOOD	

Total .

MEMPHIS, IN 30105			
THE LUEKEMIA & LYMPHOMA SOCIETY 1471 EAST STREET BAY CITY MI 48708	NONE	PROVIDE RESEARCH FOR BLOOD CANCER	

THE LUEKEMIA & LYMPHOMA SOCIETY 1471 EAST STREET BAY CITY, MI 48708	NONE	PROVIDE RESEARCH FOR BLOOD CANCER	10,000
TIME OF CRACE101 E NORTH AVE	NONE	CHARE CODE CRACE AND THE	E 000

BAY CITY, MI 48708			
TIME OF GRACE101 E NORTH AVE	NONE	SHARE GODS GRACE AND THE	5,000

TIME OF GRACE101 E NORTH AVE MILWAUKEE, WI 53212	NONE	SHARE GODS GRACE AND THE BIBLE	5,000
			1

erne GRAPHIC Print - DO NOT PROCE	35 AS Fileu Data -	DEN: 33431216004000
TY 2019 Investments - Oth	er Schedule	
Nam	e: CAROL A STUHR FAMILY FOUR	NDATION

DIN. 03/0121600/000

2,521,460

2,145,618

ofile CRADHIC print - DO NOT PROCESS | As Filed Data -

INVESTMENTS IN ETF'S

Investments Other Schedule 2 Category/ Item Listed at Cost or FMV Book Value End of Year Fair FMV Market Value

AT COST

Name: CAROL A STUHR FAMILY FOUNDATION

LIFE INSURANCE POLICY

efile GRAPHIC print - DO NOT PROCESS

Other Assets Schedule

Description

As Filed Data -

EIN: 45-4054307

Beginning of Year -

Book Value

167,781

End of Year - Book

115,000

Value

End of Year - Fair Market Value

110,124

DLN: 93491216004000

efile GRAPHIC print - DO NOT PROCESS	As Filed Data -		DLN: 93491216004000
TY 2019 Other Decreases Sch	edule		
Name:	CAROL A STU	HR FAMILY FOUNDATION	
EIN:	45-4054307		
De	escription		Amount

CHANGE IN CASH SURRENDER VALUE OF LIFE INS

efile GRAPHIC print - DO NOT PROCESS	As Filed Data -		DLN	I: 93491216004000
TY 2019 Other Expenses Sche	dule			_
Name:	CAROL A STUH	R FAMILY FOUND	ATION	
EIN:	45-4054307			
Other Expenses Schedule				
Description	Revenue and Expenses per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
EXPENSES				

Description	Revenue and Expenses per Books	Net Investment Income	Adjusted Net Income	Disbursemen Charitabl Purpose
EXPENSES				

INVESTMENT FEES

25,918

efile GRAPHIC print - DO NOT PROCESS	As Filed Data -		DLN: 93491216004000		
TY 2019 Substantial Contributors Schedule					
Name: CAROL A STUHR FAMILY FOUNDATION EIN: 45-4054307					
Name			Address		
CAROL A STUHR			2625 MUSKEGON ROAD HARRISON, MI 48625		

efile GRAPHIC print - DO NOT PRO	OCESS As Filed Data	-	DLI	N: 93491216004000		
TY 2019 Taxes Schedule						
Name: CAROL A STUHR FAMILY FOUNDATION						
EIN: 45-4054307						
Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes		
ANNUAL REPORT	20	20				
TAXES - PAID	704	'				

efile GRAPHIC print - E	O NOT PROCESS	As Filed Data -				DLN: 93491216004000	
Schedule B		Schedu	le of Contributo	rs		OMB No 1545-0047	
(Form 990, 990-EZ, or 990-PF) Department of the Treasury Internal Revenue Service			Form 990, 990-EZ, or 990 <u>v/Form990</u> for the latest i			2019	
Name of the organization CAROL A STUHR FAMILY	FOUNDATION				Employer id	entification number	
					45-4054307		
Organization type (che	ck one)						
Filers of:	Section:						
Form 990 or 990-EZ	☐ 501(c)() (enter number) or	ganization				
	☐ 4947(a)(1) nonexempt char	table trust not treated a	s a private foundat	ion		
	☐ 527 polit	☐ 527 political organization					
Form 990-PF	✓ 501(c)(3)	exempt private fou	ındatıon				
	☐ 4947(a)(4947(a)(1) nonexempt charitable trust treated as a private foundation					
	501(c)(3)	501(c)(3) taxable private foundation					
			F that received, during to Simplete Parts I and II S				
Special Rules							
under sections 5 received from ar	09(a)(1) and 170(b)	(1)(A)(vı), that chec uring the year, tota	Form 990 or 990-EZ th ked Schedule A (Form I contributions of the gre lete Parts I and II	990 or 990-EZ), Pa	art II, line 13,	16a, or 16b, and that	
during the year,	total contributions o	f more than \$1,000	or (10) filing Form 990 o <i>exclusively</i> for religious animals Complete Parts	, charitable, scient			
during the year, If this box is che purpose Don't c	contributions <i>exclus</i> cked, enter here the omplete any of the i	ervely for religious, contributions outside to the contributions outs unless the Ge	or (10) filing Form 990 control of the standard of the standar	s, but no such cont ng the year for an e is organization bed	ributions tota exclusively rel cause it receiv	led more than \$1,000 igious, charitable, etc, ved nonexclusively	
Caution: An organization 990-EZ, or 990-PF), but or on its Form 990PF, P 990-EZ, or 990-PF)	ıt must answer "No	on Part IV, line 2,	of its Form 990, or ched	ck the box on line I	of its Form 9	n 990, 990-EZ	
For Paperwork Reduction A for Form 990, 990-EZ, or 99		ructions	Cat No 30613X	Schedu	le B (Form 990,	990-EZ, or 990-PF) (2019)	

Employer identification number 45-4054307

Part I Contributors	Contributors (see instructions) Use duplicate copies of Part I if add	ditional space is needed	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	CAROL STUHR 2625 MUSKEGON ROAD HARRISON, MI 48625	\$ 223,000	Person Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
			Person Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
-			Person Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$ Schedule B (F	Person Payroll Noncash (Complete Part II for noncash contributions) prim 990, 990-EZ, or 990-PF) (2019)
		Schedule B (FC	### 330, 330-EZ, Of 330-PF) (2019)

Schedule	B (Form 990, 990-EZ, or 990-PF) (2019)			Page 4	
	rganization STUHR FAMILY FOUNDATION			Employer identification number 45-4054307	
Part III	than \$1,000 for the year from any one con	tributor. Complete e total of exclusive e instructions.) ►	ızations described columns (a) throug ly religious, charita	in section 501(c)(7), (8), or (10) that total more	
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift		(d) Description of how gift is held	
	(e) Transfer of Transferee's name, address, and ZIP 4		•	gift 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 Relations			ionship 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 Transferee's name, address, and ZIP 4			ft 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	
	Transferee's name, address, and		ansfer of gift Relati	nonship of transferor to transferee	
			90	hedule B (Form 990, 990-EZ, or 990-PF) (2019)	