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Form **990-PF**

Return of Private Foundation

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

OMB No 1545-0047

Department of the Treasury Internal Revenue Service

For Paperwork Reduction Act Notice, see instructions.

► 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 Inspect

		P do to WWW.iii3.gov/ii oliii030/11 to	or motivations and t	ine late:	ot innormati	011.	
		ndar year 2019 or tax year beginning	, 2019	9, and (, 20
Nam	ne of fou	ndation			A Employe	er identification number	er
Fide	elity St	ewards Fund				47-4575584	
		street (or P O box number if mail is not delivered to street address)	Room	ı/suite	B Telephor	ne number (see instruct	ions)
903	1 Shav	ver Rd				269-327-6917	
		, state or province, country, and ZIP or foreign postal code			C If exemp	tion application is pend	
Por	tage M	II 49024			- II OXOMP	tion application to pond	g, 01.00k 110.07
			n of a former public	charity	D 1 Foroig	n organizations, check	here ▶ [
_	000.	Final return Amended	· ·	Oriarity	D I. Follely	in organizations, check	ileie P
		☐ Address change ☐ Name char				n organizations meeting here and attach compu	
н	Check	type of organization: Section 501(c)(3) exempt p	<u> </u>	O. 1		foundation status was	_
		on 4947(a)(1) nonexempt charitable trust				607(b)(1)(A), check here	terrimated under ►
		narket value of all assets at J Accounting method					_
		f year (from Part II, col. (c),	. W Casii L A	cciuai	F If the fou	ndation is in a 60-mont ction 507(b)(1)(B), chec	h termination
		5) ► \$ 5,678,975 (Part I, column (d), must be	o on each back \		dilaci sc	C. C. T. C. T. (C)(T)(D), CHEC.	KIICIC PL
	art⁼l≝	·	i Jasis j				(d) Outhween and
. 44	alli	Analysis of Revenue and Expenses (The total of amounts in columns (b), (c), and (d) may not necessarily equal	(a) Revenue and expenses per		investment	(c) Adjusted net	(d) Disbursements for charitable
4		the amounts in column (a) (see instructions).)	books	l in	come	income	purposes (cash basis only)
	-						(322 230.0 0)/
	1	Contributions, gitts, grants, etc., received (attach schedule)	1,417,509				
	2	Check it the foundation is not required to attach Sch. B			_		
	3	Interest on savings and temporary cash investments			0	†	
	4	Dividends and interest from securities			117,686		
	5a	Gross rents					
	þ	Net rental income or (loss)					
Š	6a	Net gain or (loss) from sale of assets not on line 10					
ē	_b	Gross sales price for all assets on line 6a					
Revenue	7	Capital gain net income (from Part IV, line 2)			0		
<u>—</u>	8	Net short-term capital gain				0	
	9	Income modifications					
	10a	Gross sales less returns and allowances					
	b	Less: Cost of goods sold					
	С	Gross profit or (loss) (attach schedule)					
	11	Other income (attach schedule)					
	12	Total. Add lines 1 through 11	1,417,509		117,686	0	
Ś	13	Compensation of officers, directors, trustees, etc.	0				
ISe	14	Other employee salaries and wages	0				
ē	15	Pension plans, employee benefits					
Expenses	16a	Legal fees (attach schedule)					
-	b	Accounting fees (attach schedule)					
and Administrative	_ C	Other professional fees (attach schedule)					
tra	17	Interest					
is	18	Taxes (attach schedule) (see instructions)	870				870
j	19	Depreciation (attach schedule) and depletion					
Ž Ž	20	Occupancy					
Z D	21	Travel, conferences, and meetings			│ R	ECEIVED	
ΞĒ	22	Printing and publications			<u> </u>		8
کے ق	23	Other expenses (attach schedule)			120	1AY 0 8 2020	9
₽₽	24	Total operating and administrative expenses.			8 1	100 0000	8
8 7 847 USING 8	1	Add lines 13 through 23	870			ODEN UT	870
% چ	25	Contributions, gifts, grants paid	264,992			GDEN, UT	264,992
<u>ح</u>	26	Total expenses and disbursements. Add lines 24 and 25	265,862				265,862
2	27	Subtract line 26 from line 12:					
26,21	ā	Excess of revenue over expenses and disbursements	1,151,647				
_	b	Net investment income (if negative, enter -0-)			117,686		
	C	Adjusted net income (if negative, enter -0-)			<u></u>	0	

Cat No 11289X

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Pa	art II	Balance Sheets Attached schedules and amounts in the description column	Beginning of year	End o	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	19,103	39,529	39,529
	2	Savings and temporary cash investments	0	730,629	730,629
	3	Accounts receivable ▶			
		Less: allowance for doubtful accounts ▶			
	4	Pledges receivable ►			
		Less: allowance for doubtful accounts ▶			
	5	Grants receivable			
	6	Receivables due from officers, directors, trustees, and other			
		disqualified persons (attach schedule) (see instructions)			
	7	Other notes and loans receivable (attach schedule) ▶			
		Less: allowance for doubtful accounts ▶		·	
ts	8	Inventories for sale or use			
Assets	9	Prepaid expenses and deferred charges			
As	10a	Investments – U.S. and state government obligations (attach schedule)			
	Ь	Investments—corporate stock (attach schedule)	2,573,367	3,669,617	3,669,617
	C	Investments—corporate bonds (attach schedule)	1,128,188	1,239,200	1,239,200
	11	Investments—land, buildings, and equipment: basis ▶		3	
		Less accumulated depreciation (attach schedule) ▶			
	12	Investments—mortgage loans			
	13	Investments—other (attach schedule)			
	14	Land, buildings, and equipment: basis ▶			
		Less: accumulated depreciation (attach schedule) ▶			
	15	Other assets (describe ▶)			
	16	Total assets (to be completed by all filers—see the			
		ınstructions. Also, see page 1, item l)	3,720,658	5,678,975	5,678,975
	17	Accounts payable and accrued expenses			
S	18	Grants payable			
ţį	19	Deferred revenue			1
Liabilities	20	Loans from officers, directors, trustees, and other disqualified persons			
<u>.</u>	21	Mortgages and other notes payable (attach schedule)			
_	22	Other liabilities (describe ▶)			
	23	Total liabilities (add lines 17 through 22)	0	0	
es	ł	Foundations that follow FASB ASC 958, check here]
Balances		and complete lines 24, 25, 29, and 30.			
<u>a</u>	24	Net assets without donor restrictions			
	25	Net assets with donor restrictions	_		
Б		Foundations that do not follow FASB ASC 958, check here ▶ □			
Ē		and complete lines 26 through 30.			
ō	26	Capital stock, trust principal, or current funds	3,720,658	5,678,975	
ţ	27	Paid-in or capital surplus, or land, bldg., and equipment fund		<u></u>	
Se	28	Retained earnings, accumulated income, endowment, or other funds			
As	29	Total net assets or fund balances (see instructions)	3,720,658	5,678,975	
Net Assets	30	Total liabilities and net assets/fund balances (see			
		instructions)	3,720,658	5,678,975	ļ
_	ırt III	Analysis of Changes in Net Assets or Fund Balances			
1		Il net assets or fund balances at beginning of year—Part II, colu			
_		of-year figure reported on prior year's return)			3,720,658
2		er amount from Part I, line 27a			1,151,647
3		er increases not included in line 2 (itemize) increased market val		4	806,670
4		lines 1, 2, and 3			5,678,975
5		reases not included in line 2 (itemize) ► decreased market value if net assets or fund balances at end of year (line 4 minus line 5)—	Part II column (b) lis		5 672 975
6	10(8	il net assets of fund balances at end of year (line 4 minus line 5)—	raitii, coluitiii (b), lii	15 2 3 · · 0	5,678,975

Part	IV Capital Gains and	Losses for Tax on Investm	nent Income	<u> </u>			
		nd(s) of property sold (for example, real esse, or common stock, 200 shs MLC Co		(b) How acquired P—Purchase D—Donation		ate acquired o, day, yr)	(d) Date sold (mo , day, yr)
1a							
<u>b</u>					ļ		
с					<u> </u>		
<u>d</u>		<u> </u>			<u> </u>		
<u> </u>	· · · · · · · · · · · · · · · · · · ·				<u> </u>		
	(e) Gross sales price	(f) Depreciation allowed (or allowable)		or other basis pense of sale			n or (loss) (f) minus (g))
<u>a</u> b							
d	·						
e							
	Complete only for assets sho	wing gain in column (h) and owned	by the foundation	on on 12/31/69		(I) Gains (Co	l (h) gain minus
	(i) FMV as of 12/31/69	(j) Adjusted basis as of 12/31/69		cess of col (i) col (j), if any		col (k), but no	t less than -0-) or rom col (h))
a							
<u>b</u>							
<u>c</u>							
d					ļ <u>.</u>		
e				_	ļ.,		
2	Capital gain net income of		also enter in f , enter -0- in F		2		Q
3	If gain, also enter in Part	n or (loss) as defined in sections I, line 8, column (c). See ınstru	ctions. If (los	s), enter -0- in			
					3		0
Part		er Section 4940(e) for Reduvate foundations subject to the					
Was t	s," the foundation doesn't q	section 4942 tax on the distribu	not complete	this part.			☐ Yes ☑ No
1_		ount in each column for each yea	ar, see the ins	tructions before m	akıng a	any entries.	
Cale	(a) Base penod years endar year (or tax year beginning in)	(b) Adjusted qualifying distributions	s Net value	(c) e of noncharitable-use a	assets		(d) Inbution ratio divided by col (c))
	2018	19	2,628	3,53	33,687		5.45%
	2017	12	4,897	2,2	58,727		5.53%
	2016	8	4,715	1,60	00,985		5.29%
	2015	3	2,500	6.	17,527		5.26%
	2014	<u> </u>					
2	Total of line 1, column (d)				. [2	21.53%
3	_	for the 5-year base period—divoundation has been in existence		•	- 1	3	5.38%
4	Enter the net value of non-	chantable-use assets for 2019 fi	rom Part X, lin	ne 5	.	4	4,629,320
5	Multiply line 4 by line 3				_	5	249,058
6	Enter 1% of net investmen	nt income (1% of Part I, line 27b)		.	6	1,177
7	Add lines 5 and 6				.	7	250,234
8		ns from Part XII, line 4			. [8	265,862
	If line 8 is equal to or great Part VI instructions.	ter than line 7, check the box in	Part VI, line	1b, and complete	that pa	art using a 1	% tax rate. See the

4

Part	Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948—see	instr	<u> ICTIOI</u>	ns)
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			1177
	here ►			
С	All other domestic foundations enter 2% of line 27b. Exempt foreign organizations, enter 4% of Part I, line 12, col. (b)			
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only; others, enter -0-)			
3	Add lines 1 and 2			<u>1177</u>
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			1177
6	Credits/Payments:			
a	2019 estimated tax payments and 2018 overpayment credited to 2019 6a			
b	Exempt foreign organizations—tax withheld at source			
d d	Tax paid with application for extension of time to file (Form 8868) 6c Backup withholding erroneously withheld			
7	Total credits and payments. Add lines 6a through 6d			
, 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:			1177
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid > 10			. 11,7,7
11	Enter the amount of line 10 to be: Credited to 2020 estimated tax ▶ Refunded ▶ 11			
Part	/II-A Statements Regarding Activities			
1a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it		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		<u>/</u>
	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.			
C	Did the foundation file Form 1120-POL for this year?	1c	↓	✓ ,
d	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year:			
_	(1) On the foundation. ► \$ (2) On foundation managers. ► \$ Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed			
е				
2	on foundation managers. ► \$	2	·	-
	If "Yes," attach a detailed description of the activities.			
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes .	3		7
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	4a	 	<u> </u>
_	If "Yes," has it filed a tax return on Form 990-T for this year?	4b	├	<u> </u>
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?	5		-
6	If "Yes," attach the statement required by <i>General Instruction T</i> .			
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either: • By language in the governing instrument, or	1		
	 By state legislation that effectively amends the governing instrument so that no mandatory directions that 			
	conflict with the state law remain in the governing instrument?	6	-	
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	—	1	<u> </u>
8a	Enter the states to which the foundation reports or with which it is registered. See instructions. ▶			1
	Michigan			
b	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General			
	(or designate) of each state as required by General Instruction G? If "No," attach explanation	8b	1	
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		✓
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their			
	names and addresses	10		_ ✓

Part	VIFA Statements Regarding Activities (continued)			
			Yes	No
11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within meaning of section 512(b)(13)? If "Yes," attach schedule. See instructions	the . <u>11</u>		1
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualif person had advisory privileges? If "Yes," attach statement. See instructions		1	
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application		1	
	Website address ► N/A			
14	The books are in care of ► Fred de Vries Telephone no. ►	269-327		
	Located at ▶ 9031 Shaver Rd, Portage, MI ZIP+4 ▶	4902		
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041—check here and enter the amount of tax-exempt interest received or accrued during the year		•	▶∟
16	At any time during calendar year 2019, did the foundation have an interest in or a signature or other authorover a bank, securities, or other financial account in a foreign country?		Yes	No ✓
	See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes," enter the name		•	
Dart	the foreign country VII-B Statements Regarding Activities for Which Form 4720 May Be Required			
rait	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.	$\overline{}$	Yes	No
1a	During the year, did the foundation (either directly or indirectly):	<u> </u>	163	140
Id	(1) Engage in the sale or exchange, or leasing of property with a disqualified person? Yes Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a	No		
	disqualified person?	No		
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? . ☐ Yes (4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? ☐ Yes ✓	1		
	(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)?	ŀ		
	(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.)	No		
ь	If any answer is "Yes" to 1a(1)–(6), did any of the acts fail to qualify under the exceptions described			-
D	Regulations section 53.4941(d)-3 or in a current notice regarding disaster assistance? See instructions	1b		7
				.
С	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, the were not corrected before the first day of the tax year beginning in 2019?		<u> </u>	1
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a prival operating foundation defined in section 4942(j)(3) or 4942(j)(5)):	ate		
а		No		
	If "Yes," list the years ▶ 20, 20, 20, 20			
b	Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a (relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2)			
	all years listed, answer "No" and attach statement—see instructions.)			1
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 , 20			
3a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year?	No		
b	If "Yes," did it have excess business holdings in 2019 as a result of (1) any purchase by the foundation			
ט	disqualified persons after May 26, 1969; (2) the lapse of the 5-year period (or longer period approved by Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest; or (3) the lapse	the		
	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.)			1
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purpose			1
b	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 201		 	/

_	_
Jana	•

Part	VII-B Statements Regarding Activities	for W	hich Form	4720	May Be R	equire	d (contir	nued) (-·. 7	,	
5a	During the year, did the foundation pay or incur a	-								Yes	No
	(1) Carry on propaganda, or otherwise attempt to influence legislation (section 4945(e))? . ☐ Yes ☑ No ☐ Yes ☐ Yes ☑ No ☐ Yes ☐ Ye										
	directly or indirectly, any voter registration drive?										
	(3) Provide a grant to an individual for travel, study, or other similar purposes?										
	(4) Provide a grant to an organization other than a charitable, etc., organization described in section 4945(d)(4)(A)? See instructions										
	(5) Provide for any purpose other than religious, charitable, scientific, literary, or educational										
	purposes, or for the prevention of cruelty to children or animals?										
b	b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify under the exceptions described										
	in Regulations section 53.4945 or in a current notice regarding disaster assistance? See instructions										
	Organizations relying on a current notice regarding disaster assistance, check here ▶ □									1	
С								_			
	because it maintained expenditure responsibility		-				☐ Yes	∐ No			l
6a	If "Yes," attach the statement required by Regula Did the foundation, during the year, receive any					miume					
va	on a personal benefit contract?						□Yes	☑No			
ь	Did the foundation, during the year, pay premium					benefit		_	6b.		~
_	If "Yes" to 6b, file Form 8870.		,	.,		= - • •					
7a	At any time during the tax year, was the foundation										
b	If "Yes," did the foundation receive any proceeds						ransaction	1? .	7b		<u>√</u>
8	Is the foundation subject to the section 4960 tax										
Dovi	remuneration or excess parachute payment(s) du VIII Information About Officers, Direction										
Fair	Information About Officers, Direct and Contractors	tors, i	rustees, re	Junua	uon man	igers,	підіну г	alu E	прю	ees,	
1	List all officers, directors, trustees, and found	ation n	nanagers an	d their	compens	ation. S	See instru	ctions	·		
	(a) Name and address	(b) Title	e, and average	(c) Co	mpensation	(d) (Contributions	to	(e) Expe	nse acc	count.
	(a) Name and address		rs per week ed to position	en	iot paid, iter -0-)		yee benefit j erred compe		other a	allowan	ces
Fred d	e Vries	Maange	er, Secretary								
		< 1			0			0			<u> </u>
	de Vries		4								
	de Vries	Manage	er < 1		0			0			
		Manage	er <1		0			0			0
					<u>-</u>	-					
2	Compensation of five highest-paid employee "NONE."	es (oth	er than thos	se incl	uded on li	ne 1—:	see instru	uction	s). If no	one, e	enter ——
1	(a) Name and address of each employee paid more than \$50,00	0	(b) Title, and a hours per v devoted to po	veek -	(c) Compe	nsation	(d) Contributemployee lipians and discompens	benefit leferred	(e) Expe	nse acc allowan	
None							Compens	- LIVII			
NOILE								•			
	-										
_											
Total	number of other employees paid over \$50,000 ▶		0	
	· · · · · · · · · · · · · · · · · · ·								Form 99		(2019)

Part VIII Information About Officers, Direction and Contractors (continued)			
3 Five highest-paid independent contractors	or professional services. See instruc	tions. If none, enter "NON	E."
(a) Name and address of each person paid mo	ore than \$50,000	(b) Type of service	(c) Compensation
None			
Total number of others receiving over \$50,000 for p		<u> ▶</u>	<u> </u>
Part IX-A Summary of Direct Charitable	Activities		,
List the foundation's four largest direct charitable activities du organizations and other beneficiaries served, conferences conv	ring the tax year. Include relevant statistical infended, research papers produced, etc	ormation such as the number of	Expenses
1 Made grants to eight charities which support cau	ses the foundation was setup to help.		
)		
	/		255,000
2 20k Help Program: Provided direct support to six	needy famlies.		
			9,992
3			
4			

			<u> </u>
Part IX-B Summary of Program-Related			
Describe the two largest program-related investments made by	the foundation during the tax year on lines 1 an	d 2	Amount
1	***************************************		
2			
		•	
All other program-related investments. See instructions			
3			
Table Addition of the control of			
Total. Add lines 1 through 3	<u> </u>	<u> </u>	0

Form **990-PF** (2019)

Part	Minimum Investment Return (All domestic foundations must complete this part. Fore see instructions.)	ıgn fou	ńdatioris,
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	4,699,817
. p	Average of monthly cash balances	1b	50,000
c	Fair market value of all other assets (see instructions)	1c	30,000
d	Total (add lines 1a, b, and c)	1d	4,699,817
e	Reduction claimed for blockage or other factors reported on lines 1a and	 	4,033,011
•	1c (attach detailed explanation)		
2	Acquisition indebtedness applicable to line 1 assets	2	
3	Subtract line 2 from line 1d	3	4,699,817
4	Cash deemed held for charitable activities. Enter 1½% of line 3 (for greater amount, see	 	4,033,017
•	instructions)	4	70,497
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	4,629,320
6	Minimum investment return. Enter 5% of line 5	6	231,466
Part		I	
1	Minimum investment return from Part X, line 6	1.1.	231,466
2a	Tax on investment income for 2019 from Part VI, line 5		20.,.00
b	Income tax for 2019. (This does not include the tax from Part VI.) 2b	1 1	
C	Add lines 2a and 2b	2c	1,177
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	230,298
4	Recoveries of amounts treated as qualifying distributions	4	
5	Add lines 3 and 4	5	230,298
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	230,298
Part	XII Qualifying Distributions (see Instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:		
а	Expenses, contributions, gifts, etc.—total from Part I, column (d), line 26	1a	265,862
b	Program-related investments—total from Part IX-B	1b	C
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	265,862
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	1,177
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	264,685
-	Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating	a wheti	
	qualifies for the section 4940(e) reduction of tax in those years.	J	
			Form 990-PF (2019)

Part	XIII V Ungistributed Income (see instruction	ons)			
		(a) Corpus	(b) Years prior to 2018	(c) 2018	(d) 2019
1	Distributable amount for 2019 from Part XI, line 7				230,298
2	Undistributed income, if any, as of the end of 2019:				250,250
а	Enter amount for 2018 only				
b	Total for prior years: 20, 20, 20				
3	Excess distributions carryover, if any, to 2019:				
а	From 2014]
b	From 2015 1624				
С	From 2016				
d	From 2017				
e	From 2018				
f	Total of lines 3a through e	37,711			
4	Qualifying distributions for 2019 from Part XII, line 4: ► \$,
а	Applied to 2018, but not more than line 2a .			v	<u>.</u> £ -
Ь	Applied to undistributed income of prior years (Election required—see instructions)				
С	Treated as distributions out of corpus (Election required—see instructions)				
d	Applied to 2019 distributable amount				230,298
e	Remaining amount distributed out of corpus	35,564			
5	Excess distributions carryover applied to 2019 (If an amount appears in column (d), the same amount must be shown in column (a).)				
6	Enter the net total of each column as indicated below:			۳	
а	Corpus. Add lines 3f, 4c, and 4e. Subtract line 5	73,275			
b	Prior years' undistributed income. Subtract line 4b from line 2b				
С	Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed				
d	Subtract line 6c from line 6b. Taxable amount—see instructions				
е	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	⊂ في سن	u sp ⁻¹		
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 / (see instructions).				
9	Excess distributions carryover to 2020. Subtract lines 7 and 8 from line 6a	73,275			
10	Analysis of line 9'	10,210			
а	Excess from 2015 1,624				
b	Excess from 2016 5,236	l			
С	Excess from 2017 , 13,167				
d	Excess from 2018				
e	Excess from 2019 35 564				

	VIV Drivete Charating Founds	tions (see metri	etions and Dort	VIII A guardian C	<u>)</u>	, age 10
Part	* -				") <u>*</u>	
ıa	If the foundation has received a ruling foundation, and the ruling is effective for					
	\ -					2) 07 1 4040(3)(5)
b	Check box to indicate whether the four		operating fourtua		300001 <u>4942()</u> (3) or 4942(j)(5)
2a	Enter the lesser of the adjusted net income from Part I or the minimum	Tax year	#2 2040	Prior 3 years	(4) 2046	(e) Total
	investment return from Park X for	(a) 2019	(b) 2018	(c) 2017	(d) 2016	
	each year listed					
b	85% of line 2a				-	
С	Qualifying distributions from Part XIII					
d	Amounts included in line 2c not used directly for active conduct of exempt activities					
е	Qualifying distributions made directly for active conduct of exempt activities Subtract line 2d from line 2c					
3	Complete 3a, b, or c for the alternative test relied upon:					
а	"Assets" alternative test-enter.					
	(1) Value of all assets			'		, , , , , , , , , , , , , , , , , , ,
	(2) Value of assets qualifying under section 4942(j)(3)(B)(i)					
b	"Endowment" alternative test-enter 2/3					
	of minimum investment return shown in		\			
	Part X, line 6, for each year listed					
С	"Support" alternative test-enter.					
	(1) Total support other than gross investment income (interest, dividends, rents, payments on securities loans (section 512(a)(5)), or royalties)					
	(2) Support from general public and 5 or more exempt organizations as provided in section 4942(j)(3)(B)(III)					
	(3) Largest amount of support from an exempt organization					
	(4) Gross investment income			<u></u>	L	
Part				the foundation h	ad \$5,000 or mo	ore in assets at
	any time during the year-	-see instructio	าร.)			
1	Information Regarding Foundation	Managers:				
а	List any managers of the foundation					by the foundation
	before the close of any tax year (but o	only if they have co	ontributed more t	han \$5,000). (See s	ection 507(d)(2).)	
None						
b	List any managers of the foundation ownership of a partnership or other el					rge portion of the
None						
2	Information Regarding Contribution	n, Grant, Gift, Loa	n, Scholarship,	etc., Programs:		
	Check here ▶ ☑ if the foundation	only makes cont	ributions to prese	elected charitable	organizations and	does not accept
	unsolicited requests for funds. If the f	oundation makes	gifts, grants, etc.	, to individuals or o	rganizations under	other conditions,
	complete items 2a, b, c, and d. See in	nstructions.				
а	The name, address, and telephone nu	ımber or email ad	dress of the person	on to whom applica	ations should be ac	ldressed.
b	The form in which applications should	d be submitted an	d information and	d materials they sho	ould include:	_
С	Any submission deadlines:					
d	Any restrictions or limitations on av	vards, such as b	y geographical a	areas, charitable fi	elds, kınds of ins	titutions, or other

Part XV 🐼 Supplementary Information (continued)

3 Grants and Contributions Paid During	the Year or Approv	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	Contribution	
a Paid during the year				
Mel Trotter Ministries 225 Commerce Avenue SW, Grand Rapids, MI 49503		PC	Christian Cause	20,000
Kalamazoo Gospel Mission 448 N Burdick St, Kalamazoo, MI 49007		PC	Christian Cause	10,000
Alternatives of Kalamazoo 4200 W Michigan Ave #100, Kalamazoo, MI 49006		PC	Christian Cause	15,000
C**** Melson 5**** Pleasant Drive, Mattawan, MI 49071	none	ı	Christian Cause: Financial Need	2,000
Family Talk 540 Elkton Dr #201, Colorado Springs, CO 80907		PC	Christian Cause	40,000
Lighthouse Ministries, Inc, 215 E Magnolia Street, Lakeland, FL 33801		PC	Christian Cause ·	, 20,000
Fidelity Charitable Gift Fund PO Box 5000, Cincinnati OH 45273		PC	Christian Cause	120,000
C**** Bradshaw 6**** S Westnedge Ave, Portage, MI 49002	none		Christian Cause: Financial Need	3,208
J**** Anders 3**** Gideon Street Apt. 2, Dowagiac, MI 49047	none	ı	Christian Cause: Financial Need	1,000
T**** Parish 5**** Territorial Rd , Decatur, MI 49045	none	1	Christian Cause: Financial Need	500
Focus on the Family 8605 Explorer Dr; Colorado Springs, CO 80920		PC	Christian Cause	15,000
E**** Kocsis 3**** Praire Ronde, Decatur, MI 49045	none	ı	Christian Cause: Financial Need	1,784
Stephanos Development Foundation, PO Box 478, Nobleford, AB T0L 1S0		PC	Christian Cause	15,000
P**** Green 2**** 96th Ave, Marcellus, MI 49067	none	ı	Christian Cause: Financial Need	1,500
Total			> 3a	264,992
b Approved for future payment	<u> </u>	· · · · · ·		204,992
b , pproved for fatare payment				
- ,	. 4		ب	
/···	1.5			
Total		· · ·	▶ 3b	

Pal	rt XVI-	Analysis of Income-Producing Ac	tivities			<i>(F</i>	
Ente	r gross	s amounts unless otherwise indicated.		usiness income	<u> </u>	on 512, 513, or 514	(e) Related or exempt
			(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	function income
1	Progra	am service revenue:	Dusiness code	Amount	LXCIUSION CODE	Amount	(See instructions.)
	аŬ					-	
	~ —						
	ď –				-		
	<u> </u>						
	; —			-		_	
	' =	ees and contracts from government agencies					
^	_	=					
_		pership dues and assessments					
3		st on savings and temporary cash investments					
4		ends and interest from securities					
5		ental income or (loss) from real estate:				-	
		ebt-financed property					
		ot debt-financed property					
6		ental income or (loss) from personal property					• •• •-
7		investment income				. <u>-</u>	
8		or (loss) from sales of assets other than inventory					
9	Net in	come or (loss) from special events					
10	Gross	s profit or (loss) from sales of inventory					<u> </u>
11	Other	revenue: a	_				
	b						
	c _						
	d _						
	е —						
	~ · ·	otal. Add columns (b), (d), and (e)					
12	Subto	otal. Add columns (D), (d), and (e)	1				
					· · · ·	13	
13	Total	otal. Add columns (b), (d), and (e)				13	
13 See	Total. works	. Add line 12, columns (b), (d), and (e)	s.)			13	
13 See Pa	Total	Add line 12, columns (b), (d), and (e) heet in line 13 instructions to verify calculation Relationship of Activities to the A	s.) ccomplishm	ent of Exemp	t Purposes		nportantly to the
13 See Pa Lin	Total. works	. Add line 12, columns (b), (d), and (e)	s.) ccomplishm	ent of Exemp	t Purposes		nportantly to the
13 See Pa Lin	Total. works rt XVI- e No.	Add line 12, columns (b), (d), and (e) heet in line 13 instructions to verify calculation Relationship of Activities to the A	s.) ccomplishm	ent of Exemp	t Purposes		nportantly to the
13 See Pa Lin	Total. works rt XVI- e No.	Add line 12, columns (b), (d), and (e) heet in line 13 instructions to verify calculation Relationship of Activities to the A	s.) ccomplishm	ent of Exemp	t Purposes		nportantly to the
13 See Pa Lin	Total. works rt XVI- e No.	Add line 12, columns (b), (d), and (e) heet in line 13 instructions to verify calculation Relationship of Activities to the A	s.) ccomplishm	ent of Exemp	t Purposes		nportantly to the
13 See Pa Lin	Total. works rt XVI- e No.	Add line 12, columns (b), (d), and (e) heet in line 13 instructions to verify calculation Relationship of Activities to the A	s.) ccomplishm	ent of Exemp	t Purposes		nportantly to the
13 See Pa Lin	Total. works rt XVI- e No.	Add line 12, columns (b), (d), and (e) heet in line 13 instructions to verify calculation Relationship of Activities to the A	s.) ccomplishm	ent of Exemp	t Purposes		nportantly to the tions)
13 See Pa Lin	Total. works rt XVI- e No.	Add line 12, columns (b), (d), and (e) heet in line 13 instructions to verify calculation Relationship of Activities to the A	s.) ccomplishm	ent of Exemp	t Purposes		nportantly to the
13 See Pa Lin	Total. works rt XVI- e No.	Add line 12, columns (b), (d), and (e) heet in line 13 instructions to verify calculation Relationship of Activities to the A	s.) ccomplishm	ent of Exemp	t Purposes		nportantly to the
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13 See Pa Lin	Total. works rt XVI- e No.	Add line 12, columns (b), (d), and (e) heet in line 13 instructions to verify calculation Relationship of Activities to the A	s.) ccomplishm	ent of Exemp	t Purposes		nportantly to the
13 See Pa Lin	Total. works rt XVI- e No.	Add line 12, columns (b), (d), and (e) heet in line 13 instructions to verify calculation Relationship of Activities to the A	s.) ccomplishm	ent of Exemp	t Purposes		nportantly to the
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13 See Pa Lin	Total. works rt XVI- e No.	Add line 12, columns (b), (d), and (e) heet in line 13 instructions to verify calculation Relationship of Activities to the A	s.) ccomplishm	ent of Exemp	t Purposes		nportantly to the

TOTTION														<u> </u>
Part	XVI	Information Organization	n Regarding Tran ons	sfers to	o and Transa	action	s and F	telationship	ps W	ith N	oncha	ritabl	e Exe	empt
1	Did	the organization of	directly or indirectly	engage i	n anv of the fo	llowing	with an	v other organ	nızatıc	on des	scribed		Yes	No
·	ın s		ther than section											
а	_		porting foundation to	a nonci	haritable exem	not orga	anization	of:						
_		•										1a(1)		-
												1a(2)		✓
b		er transactions.												
	(1)	Sales of assets to	a noncharitable exe	mpt orga	anization .							1b(1)		$\overline{}$
	(2) Purchases of assets from a noncharitable exempt organization									1b(2)		-		
			, equipment, or othe									1b(3)		-
			rrangements									1b(4)		-
			rantees									1b(5)		1
	(6)	Performance of se	ervices or membersh	np or fun	draising solici	tations						1b(6)		✓
C	Sha	rıng of facilities, e	quipment, mailing lis	sts, othe	r assets, or pa	ıd emp	loyees					1c		✓
d	If th	ne answer to any	of the above is "Yes	s," comp	olete the follow	ving sc	hedule.	Column (b)	shoule	d alwa	ays sho	w the	fair m	arket
	valu	ue of the goods, o	ther assets, or servi	ces give	n by the repor	ting for	undation	4 the found	lation	recei	ved les	s than	fair m	arket
	v al c	e in any transaction	on or snaring arrang	ement, s	how in column	n (d) the	e value c	of the goods,	othe	r asse	ts, or se	ervices	recei	ved.
(a) Line	e no	(b) Amount involved	(c) Name of nonch	narıtable ex	empt organization	<u>ا</u>	(d) Desc	nption of transfe	rs, tran	saction	s, and sh	aring arr	angem	ents
				·										
								-						
								-						
								<u> </u>						
											`			
						ŀ								
			·											
	des	cribed in section 5	ectly or indirectly at 501(c) (other than se of following schedule	ction 50					-	_		□ Y	es 🗆	No
	(a) Name of organization				(b) Type of organization				(c) Description of relationship					
					.,,,				•	•		•		
										-		-		
											_			
	Un	der penalties of perjury, I		ed this return	n, including accomp	panying so	hedules and	d statements, and	to the	best of r	my knowle	edge and	belief, it	is true.
Sign	correct, and complete Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge							May the	IDS disci	ice thie	return			
Here					S- €-2020 Secretary				May the IRS d with the prepar				shown b	elow?
	Signature of officer or trustee Date Title							See instru	uctions	∐Yes	□No			
De:-!	<u> </u>	Print/Type preparer		Prepare	r's signature			Date				PTIN		
Paid		. [t ☐ If ☐ mployed			
Prep									Firm's					
use (Only Firm's name ► Firm's EIN ► Phone no													
		, 5 dadie55 P												