Return of Private Foundation

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

Depa	ertment	t of the Treasury venue Service				social security numbers on rs.gov/Form990PF for instri				Open to Public Inspection
		dar year 2019 o	r tax year b				, and e			Open to Fabric Inspection
Na	me of	foundation				<u></u>	-		A Employer identificatio	n number
T	וגסוי	NTV CONTACT TOTAL	I TNICE	TD A NICE	EOIDT	D A TO T O N			82-4383153)
		NKENMUTI nd street (or P O bo						Room/suite	B Telephone number)
		UTUAL AV				,		1100555	989-652-61	L 21
		own, state or pro		try, and ZIP	or foreign p	ostal code			C If exemption application is	
		NKENMUTI		4878						y ,
G (Check	all that apply:		nıtıal return		Initial return of a fo	ormer public	charity	D 1 Foreign organization	ıs, check here
			=	inal return		Amended return			2 Foreign organizations m	eeting the 85% test.
	26			Address cha		Name change			2 Foreign organizations m check here and attach c	omputation
H (_	type of organiza ction 4947(a)(1)				cempt private foundation Other taxable private founda	tion	04	E If private foundation st	. [
L F:		arket value of all				ng method: X Cash	Acci	nal	under section 507(b)(1	
		Part II, col. (c), lu		,		ther (specify)		ou.	F If the foundation is in a under section 507(b)(1	
	\$		1,422,	,321.	Part I, colur	nn (d), must be on cash bası	s.)		(.)	
Pa	art I	Analysis of Re	venue and	Expenses	d) may not	(a) Revenue and		vestment	(c) Adjusted net	(d) Disbursements for charitable purposes
_	,	necessarily equal	the amounts	ın column (a))		expenses per books	inc	ome	income at / 2	(cash basis only)
	l	Contributions, g				400,000.			N/A	<u> </u>
	3	Interest on savings		s not required to a ry	(MCU SCU R			•	 	
	4	Dividends and I	nterest from	securities		92,015.		2,015.		STATEMENT 1
	1	Gross rents								_
	b	Net rental income	or (loss)							
đ	6a	Net gain or (loss) fr				36,649.			•	
Revenue	b	Gross sales price f assets on line 6a			<u>153.</u>			C C 10	REC	EIVED
Še	7	Capital gain net inc		rt IV, ime 2)			3	6,649.		
	°	Net short-term	. •	QA						7 2020
	-	Gross sales less re and allowances		0/(8 30	2020
		Less Cost of good	s sold					· ·	OGT	NEN LIT
	С	Gross profit or (loss)						001	
	11	Other income								
_		Total. Add lines				528,664.	12	<u>8,664.</u>		
		Other employee			tc	0.		0.		0.
	į.	Other employee Pension plans, 6								
S	1	Legal fees	inployee be	Jiidiilis		·				
ense	ı	Accounting fees								
ă Xi	С	Other profession	nal fees	STI	MT 2	18,578.	1	5,793.		2,785.
ive I	17	Interest			· · ·	4 054		0 01 1	ļ	ļ
ZUZU ministrative	18	Taxes	الماميدانية	STI	MT 3	4,064.		2,314.		0.
20 20 ninistra	19	Depreciation and	a depletion							
r ē		Occupancy Travel, conferen	ces, and me	eetinas						
INUV I		Printing and put	-	- Jgo						
ة <		Other expenses	_	STI	MT 4	17,722.	1	7,722.		0.
atin	23 24	Total operating	and admini	istrative						
֓֞֞֞֟֞֟֞֟֞֟֝֟֟֝֟֝֟֟֟֝֟֟֟֝֟֟֟		expenses. Add		-		40,364.	3	<u>5,829.</u>		2,785. 242,115.
ž	25	Contributions, g				242,115.	<u> </u>			242,115.
Z	I	Total expenses		sements.		282,479.	2	5,829.		244,900.
SCANNEU opera		Add lines 24 and Subtract line 26		2.		404,417.	3	2,043.		244,300.
U)	1	Excess of revenue			ments	246,185.				
		Net investment					9	2,835.		

LHA For Paperwork Reduction Act Notice, see instructions.

Form **990-PF** (2019)

N/A

b Net investment income (if negative, enter -0-)

c Adjusted net income (if negative, enter -0-)

Œ	art	Balance Sheets Attached schedules and amounts in the		Beginning of year	End o	f year
느		column should be for end-of-year amou	unts only	(a) Book Value	(b) Book Value	(c) Fair Market Value
	1	Cash - non-interest-bearing	Į	597,174.	366,886.	366,886.
	2	Savings and temporary cash investments				
	3	Accounts receivable >				
		Less: allowance for doubtful accounts				
	4	Pledges receivable				
		Less: allowance for doubtful accounts				
	5	Grants receivable				
	6	Receivables due from officers, directors, trustees, and other	her			
		disqualified persons				
	7	Other notes and loans receivable				,
		Less: allowance for doubtful accounts				
ş	8	Inventories for sale or use				
Assets	9	Prepaid expenses and deferred charges	_			
⋖	10a	Investments - U.S. and state government obligations	STMT 5	661,072.	709,431.	741,925.
	b		STMT 6	1,050,807.	1,111,180.	1,351,127.
	C	Investments - corporate bonds	STMT 7	371,654.	419,049.	444,355.
	11	Investments - land, buildings, and equipment, basis				
		Less accumulated depreciation				
		Investments - mortgage loans				
	13		TMT 8	1,022,903.	1,345,897.	1,516,631.
	14	Land, buildings, and equipment: basis				
	l	Less accumulated depreciation	70177	4 045	1 205	
	15	Other assets (describe MUNI AND CORP	BOND)	4,045.	1,397.	1,397.
	16	Total assets (to be completed by all filers - see the		2 707 655	2 052 040	4 400 201
	-	instructions. Also, see page 1, item I)		3,707,655.	3,953,840.	4,422,321.
	l	Accounts payable and accrued expenses	-			
	18	Grants payable Deferred revenue	-			
Liabilities	19 20		-			
Ē	21	Loans from officers, directors, trustees, and other disqualified person Mortgages and other notes payable	ns [
Ë		Other liabilities (describe	、	···		····
		Other habilities (describe	' -	-		
	23	Total liabilities (add lines 17 through 22)		0.	0.	
		Foundations that follow FASB ASC 958, check here	▶ □			
s		and complete lines 24, 25, 29, and 30.				
Ce	24	Net assets without donor restrictions				
alaı	25	Net assets with donor restrictions				
d B		Foundations that do not follow FASB ASC 958, check he	re 🕨 🗓			
٦		and complete lines 26 through 30				
Net Assets or Fund Balances	26	Capital stock, trust principal, or current funds		0.	0.	
ets	27	Paid-in or capital surplus, or land, bldg., and equipment fu	und	0.	0.	
1SS	28	Retained earnings, accumulated income, endowment, or o	other funds	3,707,655.	3,953,840.	
t e	29	Total net assets or fund balances	<u> </u>	3,707,655.	3,953,840.	
- 1						
	30	Total liabilities and net assets/fund balances		3,707,655.	3,953,840.	
P	art	Analysis of Changes in Net Assets	or Fund Bal	lances		
1	Total	net assets or fund balances at beginning of year - Part II, o	nolumn (a) line 0		· T T	
				3		3 707 655
		t agree with end-of-year figure reported on prior year's retu amount from Part I, line 27a	urii)		1	3,707,655.
		increases not included in line 2 (itemize)			2	246,185.
		nes 1, 2, and 3			3	3,953,840.
		ases not included in line 2 (itemize)			4	3,953,840.
		net assets or fund balances at end of year (line 4 minus lin	ne 5) - Part II, coli	umn (h) line 29	5	3,953,840.
_		S. Torre Salarioso at one or your time T millings ill		unin toly mio Eo	101	Form 990-PF (2019)

Part IV Capital Gains	and Losses for Tax on In	vestment	Income						
	the kind(s) of property sold (for examenouse; or common stock, 200 shs		ite,	(b) I	How as - Purc - Don	cquired chase ation	(c) Date ac (mo., day		(d) Date sold (mo., day, yr.)
1a PUBLICLY TRADE	SECURITITES 099	98							
b PUBLICLY TRADE	SECURITITES 099	98							
<u>c</u>	·						_		
_d				├					
<u>e</u>	/O December allowed	1 4.0-		┖┯			# \ C=		
(e) Gross sales price	(f) Depreciation allowed (or allowable)		st or other basis expense of sale					in or (loss) (f) minus ((g))
a 508,790.		<u> </u>	484,90						23,882.
b 155,363.			142,59	<u>••</u>		_ _			12,767.
C				+					
<u>d</u>									
e Complete only for assets shown	g gain in column (h) and owned by t	the foundation	on 12/31/69.) Gains (Co	d (h) gain	minus
<u> </u>	(j) Adjusted basis		xcess of col. (I)	\neg			. (k), but no	ot less thar	n -0-) or
(i) FMV as of 12/31/69	as of 12/31/69		col. (j), if any	ł			Losses (f	from col. (I	1))
a									23,882.
b									12,767.
С									0.
_d									
_e				- +					
A. Constal ages not spages or (not as	If gain, also enter			}					36,649.
2 Capital gain net income or (net ca	, (, , , , , , , , , , , , , , , , , ,		2.7	가	2	<u> </u>			30,043.
3 Net short-term capital gain or (los if gain, also enter in Part I, line 8,		d (6):		٦١					
If (loss), enter -0- in Part I, line 8	colullii (c).				3			N/A	
Part V Qualification U	nder Section 4940(e) for	Reduced	Tax on Net	nve	stm	ent Inco	me		
(For optional use by domestic private	foundations subject to the section 4	1940(a) tax on	net investment in	come.)				
If section 4940(d)(2) applies, leave th	ue nart hlank								
	•								
Was the foundation liable for the sect				od?					Yes X No
If "Yes," the foundation doesn't qualif	/ under section 4940(e). Do not com ach column for each year; see the in			trioc					-
(a)		isti uctionis Dei	ore making any er						(d)
Base periód years Calendar year (or tax year beginnir	(b) Adjusted qualifying disi	tributions	Net value of no	(c) nchari	ıtable-	use assets	,,		(d) ution ratio ided by col. (c))
2018		6,980.	••			4,012		SOL (D) GIA	.053891
2017		-			, , , _	<u> </u>	`		
2016			_						
2015									
2014									
2 Total of line 1, column (d)									.053891
3 Average distribution ratio for the 5	S-vear base period - divide the total c	nn line 2 hy 5 i	or by the number	ar of v	0210		2		.033031
the foundation has been in exister		Jii iiii	o, or by the number	or Or y	cars		3		.053891
4 Enter the net value of noncharitab	le-use assets for 2019 from Part X, I	іле 5					4	4	4,031,234.
5 Multiply line 4 by line 3							5		217,247.
							1		
6 Enter 1% of net investment incom	e (1% of Part I, line 27b)						6		928.
- Alli							_ [010 155
7 Add lines 5 and 6							7		218,175.
8 Enter qualifying distributions from	Part XII, line 4						8		244,900.
• • •	line 7, check the box in Part VI, line	1b, and comp	lete that part using	g a 1%	6 tax r	ate.			

3

_	n 990-PF (2019) FRANKENMUTH INSURANCE FOUNDATION 82-438 art VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 - see in the section 4940(a), 4940(b), 4940(c), or 4948 - see in the section 4940(a), 4940(b), 4940(c), or 4948 - see in the section 4940(a), 4940(b), 4940(c), or 4948 - see in the section 4940(a), 4940(b), 4940(c), or 4948 - see in the section 4940(a), 4940(b), 4940(c), or 4948 - see in the section 4940(a), 4940(b), 4940(c), or 4948 - see in the section 4940(a), 4940(b), 4940(c), or 4948 - see in the section 4940(a), 4940(b), 4940(c), or 4948 - see in the section 4940(a), 4940(b), 4940(c), or 4948 - see in the section 4940(a), 4940(b), 4940(c), or 4948 - see in the section 4940(a), 4940(b), 4940(c), or 4948 - see in the section 4940(a), 4940(b), 4940(c), or 4948 - see in the section 4940(a), 4940(b), 4940(c), or 4940(a), 4940(c), or 494			Page 4	<u>†</u>
 1a	Exempt operating foundations described in section 4940(d)(2), check here and enter "N/A" on line 1.				1
	Date of ruling or determination letter: (attach copy of letter if necessary-see instructions)		-		
h	Domestic foundations that meet the section 4940(e) requirements in Part V, check here X and enter 1%		9	28.	j
	of Part I, line 27b				7
c	All other domestic foundations enter 2% of line 27b. Exempt foreign organizations, enter 4% of Part I, line 12, col. (b)	•			
	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only; others, enter -0-)			0.	J
3	Add lines 1 and 2		9	28.	-
	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only; others, enter -0-)			0.	-
4	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-		9	28.	•
6	Credits/Payments:				1
-	2019 estimated tax payments and 2018 overpayment credited to 2019		•		
	Exempt foreign organizations - tax withheld at source 6b 0 •				
	Tax paid with application for extension of time to file (Form 8868) 6c 6c 6c				Ì
	Backup withholding erroneously withheld 6d 0 • 1	•			
	Total credits and payments. Add lines 6a through 6d		1,7	85	T
0	Enter any penalty for underpayment of estimated tax. Check here X if Form 2220 is attached		<u> </u>	0.	-
9	Tax due If the total of lines 5 and 8 is more than line 7, enter amount owed			<u> </u>	-
-	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid			57.	-
	Enter the amount of line 10 to be: Credited to 2020 estimated tax			0.	-
	rt VII-A Statements Regarding Activities			<u> </u>	-
	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in	$\overline{}$	Yes	No	-
14	any political campaign?	1a		Х	-
h	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes? See the instructions for the definition	1b	_	X	•
·	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials published or	"-	_		1
	distributed by the foundation in connection with the activities.		[ĺ	Į.
c	Did the foundation file Form 1120-POL for this year?	1c	<u> </u>	х	J
	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year:	''	 		1
·	(1) On the foundation. \$\(\bigcup \) \(\			ĺ	
۵	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation	i	İ		
٠	managers. > \$ 0.		1	}	1
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?	2	 	Х	J
-	If "Yes," attach a detailed description of the activities.		\vdash		1
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, or		ŀ		
•	bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes	3		Х	J
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	4a		Х	•
	If "Yes," has it filed a tax return on Form 990-T for this year?	4b			•
	Was there a liquidation, termination, dissolution, or substantial contraction during the year?	5		Х	•
•	If "Yes," attach the statement required by General Instruction T				}
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either:				j
•	By language in the governing instrument, or				
	By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state law				ŀ
	remain in the governing instrument?	6	X		,
	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		
•					1
82	Enter the states to which the foundation reports or with which it is registered. See instructions.		i		
	MI		,		
b	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate)], '		
_	of each state as required by General Instruction G? If "No," attach explanation	8b	Х		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		X	1
	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses	10		X	-
		rm 99 0)-PF	(2019)	•

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P	art VII-A Statements Regarding Activities (continued)		_	. ago c
<u> </u>	continuedy	Т	Yes	No
11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of	<u> </u>		1
	section 512(b)(13)? If "Yes," attach schedule. See instructions	11	!	х
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had advisory privileges?	''-		
'-	If "Yes," attach statement. See instructions	12		х
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	X	 -
	Website address ► WWW.FMINS.COM			L
14	TOWN DOCTLIED (000)	652	-61	21
•	Located at ▶1 MUTUAL AVENUE, FRANKENMUTH, MI ZIP+4 ▶4			
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	N	/A	0.
16	At any time during calendar year 2019, did the foundation have an interest in or a signature or other authority over a bank,		Yes	
-	securities, or other financial account in a foreign country?	16		Х
	See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes," enter the name of the			
	foreign country	1	.	
Pa	art 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.	T .	Yes	No
18	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?		١. ،	
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from)	· ·	١ .	
	a disqualified person?		i.	
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?	Ĭ -		٠. ا
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?	.		· 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)?	1.	•	
	(6) Agree to pay money or property to a government official? (Exception Check "No"	1 .		
	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.)	1		}
t	of 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 N/A	1b		
	Organizations relying on a current notice regarding disaster assistance, check here			
C	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected			
	before the first day of the tax year beginning in 2019?	1c		X
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation	•		
	defined in section 4942(j)(3) or 4942(j)(5)):	}		
а	At the end of tax year 2019, did the foundation have any undistributed income (Part XIII, lines	[, ,	•	
	6d and 6e) for tax year(s) beginning before 2019?			
	If "Yes," list the years,,,,,	•		
b	Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2) (relating to incorrect			١.
	valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer "No" and attach	<u>L</u>	'	-
	statement - see instructions.) N/A	2b		
C	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here.	} '		
	>	I .		-
3a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time	۶		
	during the year?	`-	٠.	
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	Ι',		
	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,	<u></u>		<u> </u>
	Schedule C, to determine if the foundation had excess business holdings in 2019.) N/A	3b		
	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a	L	X
b	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that	<u> </u>		
_	had not been removed from jeopardy before the first day of the tax year beginning in 2019?	4b		X

Total number of other employees paid over \$50,000

P	art X Minimum Investment Return (All domestic foundations must complete this part. Foreign four	dations,	see instructions)
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes:	J	
а	Average monthly fair market value of securities	1a	3,861,451.
b	Average of monthly cash balances	1b	3,861,451.
C	Fair market value of all other assets	1c	
d	Total (add lines 1a, b, and c)	1d	4,092,623.
е	Reduction claimed for blockage or other factors reported on lines 1a and		
	1c (attach detailed explanation) 1e 0.		
2	Acquisition indebtedness applicable to line 1 assets	2	0.
3	Subtract line 2 from line 1d	3	4,092,623.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions)	4	61,389.
5	Net value of noncharitable-use assets Subtract line 4 from line 3. Enter here and on Part V, line 4	5	4,031,234.
6	Minimum investment return Enter 5% of line 5	6	201,562.
Р	art XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations an	d certain	-
	foreign organizations, check here 🕨 🔃 and do not complete this part.)		
1	Minimum investment return from Part X, line 6	1	201,562.
2a	Tax on investment income for 2019 from Part VI, line 5		
b	Income tax for 2019. (This does not include the tax from Part VI.)		
C	Add lines 2a and 2b	2c	928.
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	200,634.
4	Recoveries of amounts treated as qualifying distributions	4	0.
5	Add lines 3 and 4	5	200,634.
6	Deduction from distributable amount (see instructions)	6	0.
7_	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1	7	200,634.
P	art 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	244,900.
b	Program-related investments - total from Part IX-B	1b	0.
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes	2	
3	Amounts set aside for specific charitable projects that satisfy the:		
a	Suitability test (prior IRS approval required)	3a	
b	Cash distribution test (attach the required schedule)	3b	
4	Qualifying distributions Add lines 1a through 3b. Enter here and on Part V, line 8; and Part XIII, line 4	4	244,900.
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	5	928.
6	Adjusted qualifying distributions Subtract line 5 from line 4	6	243,972.
	Note: The amount on line 6 will be used in Part V. column (b), in subsequent years when calculating whether the foundation of	ialities for	the section

4940(e) reduction of tax in those years.

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Part XIII Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2018	(c) 2018	(d) 2019
1 Distributable amount for 2019 from Part XI,				200 624
line 7				200,634.
2 Undistributed income, if any, as of the end of 2019			•	
a Enter amount for 2018 only			0.	<u> </u>
b Total for prior years:				
,,,,,		0.		
3 Excess distributions carryover, if any, to 2019:				
a From 2014				u
b From 2015				
c From 2016				
d From 2017		Ì		
e From 2018 10,272.	10 070		<u> </u>	
f Total of lines 3a through e	10,272.			
4 Qualifying distributions for 2019 from				
Part XII, line 4: ►\$ 244,900.			•	
a Applied to 2018, but not more than line 2a			0.	
b Applied to undistributed income of prior				
years (Election required - see instructions)		0.		
c Treated as distributions out of corpus				
(Election required - see instructions)	0.			000 604
d Applied to 2019 distributable amount				200,634.
e Remaining amount distributed out of corpus	44,266.			
5 Excess distributions carryover applied to 2019 (If an amount appears in column (d), the same amount must be shown in column (a))	0.			0.
6 Enter the net total of each column as indicated below:				
a Corpus Add lines 3f, 4c, and 4e Subtract line 5	54,538.	Ì		
b Prior years' undistributed income. Subtract				
line 4b from line 2b		0.		
c Enter the amount of prior years'				
undistributed income for which a notice of				
deficiency has been issued, or on which the section 4942(a) tax has been previously				
assessed		0.		
d Subtract line 6c from line 6b. Taxable				
amount - see instructions		0.		
e Undistributed income for 2018. Subtract line				
4a from line 2a. Taxable amount - see instr.			0.	
f Undistributed income for 2019. Subtract				
lines 4d and 5 from line 1. This amount must			1	
be distributed in 2020				0.
7 Amounts treated as distributions out of				
corpus to satisfy requirements imposed by				
section 170(b)(1)(F) or 4942(g)(3) (Election				
may be required - see instructions)	0.			
8 Excess distributions carryover from 2014				
not applied on line 5 or line 7	0.			
9 Excess distributions carryover to 2020				
Subtract lines 7 and 8 from line 6a	54,538.			
IO Analysis of line 9:				
a Excess from 2015				
b Excess from 2016	ļ		Į	
c Excess from 2017				
d Excess from 2018 10,272.				
e Excess from 2019 44, 266.				

923581 12-17-19

Form **990-PF** (2019)

Form 990-PF (2019) FRANKEN	<u>MUTH INSURA</u>	NCE FOUNDAT	ION		383153 Page 10
Part XIV Private Operating F	oundations (see in	structions and Part VII	-A, question 9)	N/A	
1 a If the foundation has received a ruling of	r determination letter tha	t it is a private operating			
foundation, and the ruling is effective fo	•	•	▶		
b Check box to indicate whether the found	dation is a private operation	ng foundation described i	n section	4942(J)(3) or4	942(j)(5)
2 a Enter the lesser of the adjusted net	Tax year	<u></u>	Prior 3 years	_ .	
income from Part I or the minimum	(a) 2019	(b) 2018	(c) 2017	(d) 2016	(e) Total
investment return from Part X for					
each year listed					
b 85% of line 2a			·		
c Qualifying distributions from Part XII,					
line 4, for each year listed					
d Amounts included in line 2c not					
used directly for active conduct of			/		
exempt activities					
e Qualifying distributions made directly					
for active conduct of exempt activities.			\ /		
Subtract line 2d from line 2c					
3 Complete 3a, b, or c for the					
alternative test relied upon.				1	1
a "Assets" alternative test - enter: (1) Value of all assets					
` '				 	
(2) Value of assets qualifying under section 4942(j)(3)(B)(i)					
b "Endowment" alternative test - enter 2/3 of minimum investment return					
shown in Part X, line 6, for each year					
listed	<u> </u>				
c "Support" alternative test - enter:					
(1) Total support other than gross					
investment income (interest,					
dividends, rents, payments on securities loans (section					
512(a)(5)), or royalties)				<u> </u>	
(2) Support from general public			ľ		
and 5 or more exempt organizations as provided in					
section 4942(j)(3)(B)(iii)					
(3) Largest amount of support from					
an exempt organization					`
(4) Gross investment income					
Part XV Supplementary Info			f the foundation	had \$5,000 or mo	re in assets
at any time during the	ne year-see instr	uctions.)			
1 Information Regarding Foundation	n Managers:				
a List any managers of the foundation who			ibutions received by the	foundation before the clos	se of any tax
year (but only if they have contributed m	iore than \$5,000). (See s	ection 507(d)(2).)			
ONE					
b List any managers of the foundation who			or an equally large portio	on of the ownership of a pa	artnership or
other entity) of which the foundation has	a 10% or greater interes	st.			
NONE	<u></u>				
2 Information Regarding Contribution	on, Grant, Gift, Loan,	Scholarship, etc., Pro	ograms:		
Check here 🕨 🔙 if the foundation o	nly makes contributions f	to preselected charitable (organizations and does n	ot accept unsolicited requ	ests for funds. If
the foundation makes gifts, grants, etc.,	to individuals or organiza	itions under other conditi	ons, complete items 2a,	b, c, and d.	
a The name, address, and telephone numb	er or email address of th	e person to whom applica	ations should be address	ed:	
SEE STATEMENT 11					
b The form in which applications should b	e submitted and informat	tion and materials they sh	ould include:		
c Any submission deadlines:		<u> </u>			,,,
					
d Any restrictions or limitations on awards	, such as by geographica	al areas, charitable fields,	kinds of institutions, or o	other factors:	

Page 11_

3 Grants and Contributions Paid During the Y		Payment		
Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
a Paid during the year	or coordinate contributor			·
AMERICAN CANCER SOCIETY SAGINAW		PC	COMMUNITY SUPPORT	
1430 N CENTER RD SAGINAW, MI 48638		_	COMMONITY SOFFORT	2,000
DELTA COLLEGE FOUNDATION 1961 DELTA RD UNIVERSITY CENTER, MI 48710		PC	SUPPORT OF EDUCATION IN THE COMMUNITY	1,500
				<u> </u>
EAST SIDE SOUP KITCHEN 940 E GENESEE AVE SAGINAW, MI 48607		PC	COMMUNITY ASSISTANCE TO THOSE IN NEED	500
,				
FAMILIES AGAINST NARCOTICS 33000 GARFIELD RD FRASER, MI 48026		PC	COMMUNITY ASSISTANCE TO THOSE IN NEED	500
FEEDING AMERICA EASTERN WISCONSIN 1700 W FOND DU LAC AVE MILWAUKEE, WI 53205		PC	COMMUNITY SUPPORT	500
	TINUATION SHEE		▶ 3a	242,115
b Approved for future payment	Tangara pilas		- 3	
NONE				
Total			. > 3b	0 m 990-PF (2019

Supplementary Information Grants and Contributions Paid During the Year (Continuation) If recipient is an individual, Recipient show any relationship to any foundation manager Foundation Purpose of grant or Amount status of contribution Name and address (home or business) or substantial contributor recipient FERRIS FOUNDATION SUPPORT OF EDUCATION 420 OAK STREET, PRK 101 IN THE COMMUNITY BIG RAPIDS MI 49307 52,000. FOOD BANK COUNCIL OF MI ÞС COMMUNITY SUPPORT 330 MARSHALL ST LANSING, MI 48912 500. GAMMA IOTA SIGMA ÞС COMMUNITY SUPPORT P.O. BOX 356 YARDLEY, PA 19067 5,000. KALAMAZOO LOAVES AND FISHES ÞС COMMUNITY SUPPORT 901 PORTAGE STREET KALAMAZOO, MI 49001 250. LANSING COMMUNITY COLLEGE SUPPORT OF EDUCATION 409 N WASHINGTON SQUARE IN THE COMMUNITY LANSING, MI 48933 500. LAPEER COUNTY MOUNTED SEARCH AND COMMUNITY SUPPORT ÞC RESCUE 3231 JOHN CONLEY DRIVE LAPEER, MI 48446 615. ٠.. MENTAL ILLNESS RESOURCE ASSOCIATION ÞС COMMUNITY ASSISTANCE 21 EAST LONG LAKE ROAD, SUITE 100 TO THOSE IN NEED BLOOMFIELD HILLS, MI 48304 2,500. MI INSURANCE HALL OF FAME ÞС COMMUNITY SUPPORT 320 S. MAIN STREET OLIVET, MI 49076 2,500. MICHIGAN COLLEGE ALLIANCE SUPPORT OF EDUCATION 26555 EVERGREEN ROAD, SUITE 1210 IN THE COMMUNITY SOUTHFIELD, MI 48076 1,500. MICHIGAN STATE FIREMEN'S ASSOCIATION PC COMMUNITY SUPPORT 9001 MILLER RD #10 SWARTZ CREEK, MI 48473 750. 237,115. Total from continuation sheets

Part XV Supplementary Information				
3 Grants and Contributions Paid During the Ye	ar (Continuation)			
Recipient	If recipient is an individual, show any relationship to	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	any foundation manager or substantial contributor	recipient	Contribution	
MUSTARD SEED SHELTER		PC	COMMUNITY ASSISTANCE	
1325 CHERRY ST SAGINAW, MI 48601			TO THOSE IN NEED	1,000.
5301Ran , 111 10001				
NAMIC MUTUAL INSURANCE FOUNDATION		PC	COMMUNITY SUPPORT	
3601 VINCENNES RD			DOIMONTITI BOTTONI	
INDIANPOLIS, IN 46268		<u> </u>		5,000.
NATIONAL PANCREATIC CANCER FOUNDATION		PC	COMMUNITY SUPPORT	
P.O BOX 1848 LONGMONT, CO 80502				2,500.
201010117, 30 30372				
OLIVET COLLEGE - ALPHA ALPHA CHAPTER		PC	SUPPORT OF EDUCATION	
320 S. MAIN STREET			IN THE COMMUNITY	
OLIVET, MI 49076		<u> </u>		5,000.
SAFE HAVEN		PC	COMMUNITY ASSISTANCE	
1011 JEFFERSON AVE MIDLAND, MI 48640			TO THOSE IN NEED	250.
12010				
SAGINAW VALLEY STATE UNIVERSITY		PC	SUPPORT OF EDUCATION	
FOUNDATION 7400 BAY ROAD			IN THE COMMUNITY	
UNIVERSITY CENTER, MI 48710				60,000.
SECOND HARVEST FOOD BANK		PC	COMMUNITY ASSISTANCE	
2802 DAIRY DRIVE MADISON, WI 53718			TO THOSE IN NEED	500.
THE LEUKEMIA AND LYMPHOMA SOCIETY		PC	COMMUNITY SUPPORT	
1471 E 12 MILE RD			DOMINITE BOTTOM	
MADISON HEIGHTS, MI 48071				1,000.
TOYS FOR TOTS		PC	COMMUNITY ASSISTANCE	
1415 CENTER AVE BAY CITY, MI 48708			TO THOSE IN NEED	1,000.
UNITED WAY OF CENTRAL KENTUCKY		PC	COMMUNITY SUPPORT	
604 N MAIN ST.				
ELIZABETHTOWN, KY 42701		<u></u>	1	5,000.
Total from continuation sheets				

Part XV Supplementary Information Grants and Contributions Paid During the Year (Continuation) Recipient If recipient is an individual, show any relationship to Foundation Purpose of grant or Amount any foundation manager status of contribution Name and address (home or business) or substantial contributor recipient UNITED WAY OF DANE COUNTY COMMUNITY SUPPORT 2059 ATWOOD AVE MADISON, WI 53704 5,000. UNITED WAY OF GREATER ATLANTA ÞС COMMUNITY SUPPORT 40 COURTLAND ST NE 5,000. ATLANTA, GA 30303 UNITED WAY OF GREATER CINCINNATI ÞС COMMUNITY SUPPORT 2400 READING RD STE 103 5,000. CINCINNATI, OH 45202 UNITED WAY OF GREATER KNOXVILLE COMMUNITY SUPPORT PC 1301 HANNAH AVE KNOXVILLE, TN 37921 2,500. UNITED WAY OF HAYWOOD COUNTY COMMUNITY SUPPORT 1233 N MAIN ST 1-40 WAYNESVILLE, NC 28786 5,000. UNITED WAY OF SAGINAW COUNTY COMMUNITY SUPPORT PC 100 S JEFFERSON AVE #3 SAGINAW, MI 48607 38,000. UNITED WAY OF SOUTHWEST ALABAMA COMMUNITY SUPPORT ÞС 218 SAINT FRANCIS ST MOBILE, AL 36602 5,000. UNITED WAY OF ST. JOSEPH COUNTY ÞС COMMUNITY SUPPORT 3517 E JEFFERSON BLVD 5,000. SOUTH BEND, IN 46615 UNITED WAY OF SUMITER, CLARENDON & PC COMMUNITY SUPPORT LEE COUNTIES 215 N WASHINGTON ST SUMTER, SC 29150 5,000. UNITED WAY OF WILL COUNTY ÞС COMMUNITY SUPPORT 54 N OTTAWA ST STE 300 JOLIET, IL 60432 5,000. Total from continuation sheets

Part XV Supplementary Information Grants and Contributions Paid During the Year (Continuation) If recipient is an individual, show any relationship to any foundation manager or substantial contributor Recipient Foundation Purpose of grant or Amount status of contribution Name and address (home or business) recipient UNITED WAY OF WILSON COUNTY PC COMMUNITY SUPPORT 102 E MAIN ST. LEBANON, TN 37087 5,000. WAL-LAM INC ÞС COMMUNITY SUPPORT 217 N. SYCAMORE STREET 3,500. LANSING, MI 48933 WATER AND WOODS FIELD SERVICE ÞC COMMUNITY SUPPORT 5001 ELEVEN MILE RD AUBURN, MI 48611 750. Total from continuation sheets

Dark VVIII All Amalusia of Income Description

nter gross amounts unless otherwise indicated.	Unrelated b	usiness income		y section 512, 513, or 514	(e)
	(a) Business	(b)	(C) Exclu-	(d)	Related or exempt
Program service revenue:	code	Amount	sion code	Amount	function income
a					
b	_				
C	_	<u> </u>			
d					
e	_				
f	_				
g Fees and contracts from government agencies					
Membership dues and assessments					
Interest on savings and temporary cash investments					
Dividends and interest from securities			14	92,015.	
Net rental income or (loss) from real estate.					
a Debt-financed property		<u>.</u>			
b Not debt-financed property					
Net rental income or (loss) from personal					
property					
Other investment income					
Gain or (loss) from sales of assets other than inventory			18	36,649.	
Net income or (loss) from special events					
Gross profit or (loss) from sales of inventory					<u> </u>
Other revenue:	1 1				
a	_				
b	-				_
c					
d	_				
e				- 100 551	
Subtotal. Add columns (b), (d), and (e)			<u> </u>	128,664.	100.66
Total. Add line 12, columns (b), (d), and (e)				13	128,664
ee worksheet in line 13 instructions to verify calculations.)	-				
Part XVI-B Relationship of Activities	to the Accom _l	olishment of E	xempt Pu	poses	
ine No. Explain below how each activity for which inc	ome is reported in c	olumn (e) of Part XV	I-A contributed	importantly to the accomol	ishment of
▼ the foundation's exempt purposes (other than		• •		portanny to me accomp	
		<u></u> _			
					

ine No.	Explain below how each activity for which income is reported in column (e) of Part XVI-A contributed importantly to the accomplishment of the foundation's exempt purposes (other than by providing funds for such purposes).
	the realization of exempt perpenses (earlier than by providing turies for south purposes).
	·
	
-+	
	
	······································
+	

923621 12-17-19

FRANKENMUTH INSURANCE FOUNDATION 82-4383153 Form 990-PF (2019) Page 13 Part XVII Information Regarding Transfers to and Transactions and Relationships With Noncharitable **Exempt Organizations** Yes No Did the organization directly or indirectly engage in any of the following with any other organization described in section 501(c) (other than section 501(c)(3) organizations) or in section 527, relating to political organizations? a Transfers from the reporting foundation to a noncharitable exempt organization of: X (1) Cash 1a(1) $\overline{\mathbf{x}}$ (2) Other assets 1a(2) **b** Other transactions: (1) Sales of assets to a noncharitable exempt organization 1b(1) (2) Purchases of assets from a noncharitable exempt organization 1b(2) (3) Rental of facilities, equipment, or other assets 1b(3) (4) Reimbursement arrangements 1b(4) (5) Loans or loan guarantees 1b(5) (6) Performance of services or membership or fundraising solicitations 1b(6) c Sharing of facilities, equipment, mailing lists, other assets, or paid employees d If the answer to any of the above is "Yes," complete the following schedule. Column (b) should always show the fair market value of the goods, other assets, or services given by the reporting foundation. If the foundation received less than fair market value in any transaction or sharing arrangement, show in column (d) the value of the goods, other assets, or services received. (b) Amount involved (c) Name of noncharitable exempt organization (a) Line no (d) Description of transfers, transactions, and sharing arrangements N/A 2a Is the foundation directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described X No Yes 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 N/A Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge mplete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge Sign return with the preparer shown below? See instr Here 6-30-2020 TREASURER X Yes Signature of officer or trustee Tıtle Print/Type preparer's name Preparer's signature Date Check [self- employed JEFFREY E. HERT, **Paid** JEFFREY E. HERT 06/22/20 P00066715 Preparer Firm's name ► REHMANN ROBSON LLC Firm's EIN > 38-3567911

Form **990-PF** (2019)

989-631-3131

Use Only

Firm's address ► 224 E LARKIN ST, STE 100 MIDLAND, MI 48640

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

2019

FRANKENMUTH INSURANCE FOUNDATION

Employer identification number

82-4383153

Organiz	ation type (check or	ne)
Filers of	f :	Section:
Form 99	0 or 990-EZ	501(c)() (enter number) organization
		4947(a)(1) nonexempt charitable trust not treated as a private foundation
		527 political organization
Form 99	0-PF	X 501(c)(3) exempt private foundation
		4947(a)(1) nonexempt charitable trust treated as a private foundation
		501(c)(3) taxable private foundation
	-	covered by the General Rule or a Special Rule . 7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule See instructions
General	Rule	
X		filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions.
Special	Rules	
	sections 509(a)(1) a any one contributor	described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under nd 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 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, line 1 Complete Parts I and II
	year, total contribut	described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the ions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educational purposes, or for the y to children or animals. Complete Parts I, II, and III
	year, contributions is checked, enter he purpose. Don't com	described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the exclusively for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box ere the total contributions that were received during the year for an exclusively religious, charitable, etc., iplete any of the parts unless the General Rule applies to this organization because it received nonexclusively, etc., contributions totaling \$5,000 or more during the year.
out it mi	ust answer "No" on	at isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990, 990-EZ, or 990-PF), 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 be filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF)

Name of organization

Employer identification number

FRANKENMUTH	TMCITDANCE	ECIMIDATION
LKUMPTMMOTU	INSURANCE	LOUNDALION

82-4383153

Part I	Contributors (see instructions) Use duplicate copies of Part I if additional	space is needed.	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	FRANKENMUTH MUTUAL INSURANCE COMPANY 1 MUTUAL AVENUE FRANKENMUTH, MI 48787	\$\$ <u>400,000</u> .	Person X 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 Oncash 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 Oncash (Complete Part II for noncash contributions)

Name of organization

Employer identification number

FRANKENMUTH INSURANCE FOUNDATION

82-4383153

Part II	Noncash Property (see instructions) Use duplicate copies of Part II i	f additional space is needed	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
		- - - - \$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		- - - - \$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
		- - - - \$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
		- - - - \$	

Schedule B (Form 990, 990-EZ, or 990-PF) (2019) Name of organization Employer identification number 82-4383153 FRANKENMUTH INSURANCE FOUNDATION Exclusively religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8), or (10) that total more than \$1,000 for the year Part III from any one contributor. Complete columns (a) through (e) and the following line entry. For organizations completing Part III, enter the total of exclusively religious, charitable, etc., contributions of \$1,000 or less for the year (Enter this info once) Use duplicate copies of Part III if additional space is needed (a) No. from (c) Use of gift (b) Purpose of gift (d) Description of how gift is held Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from (b) Purpose of gift (c) Use of gift (d) Description of how gift is held (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from (b) Purpose of gift (c) Use of gift (d) Description of how gift is held Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from (b) Purpose of gift (d) Description of how gift is held (c) Use of gift Part | (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee

		_ 	-			
FORM 990-PF	DIVIDENDS	AND INTER	EST FROM	SECURI	TIES S	TATEMENT 1
SOURCE	GROSS AMOUNT	CAPITAL GAINS DIVIDEND	REVE	NUE	(B) NET INVEST- MENT INCOME	
DIVIDENDS AND INTEREST	92,015.		0. 92	,015.	92,015.	
TO PART I, LINE 4	92,015.		0. 92	,015.	92,015.	
FORM 990-PF	ro	HER PROFES	SIONAL FE	ES	S	TATEMENT 2
DESCRIPTION		(A) EXPENSES PER BOOKS	(B) NET INVE MENT INC		(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
MANAGEMENT FEES ADVISORY FEES		18,006. 572.	•	306. 487.		2,700.
TO FORM 990-PF, PG 1,	LN 16C	18,578.	15,	793.		2,785.
FORM 990-PF		TAX	ES		S	TATEMENT 3
DESCRIPTION		(A) EXPENSES PER BOOKS	(B) NET INVE MENT INC		(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
FOREIGN TAXES PAID EXCISE TAXES		2,314. 1,750.	2,	314.		0.
TO FORM 990-PF, PG 1,	LN 18	4,064.	2,	314.		0.
FORM 990-PF		OTHER E	XPENSES		S	TATEMENT 4
					_ _	
DESCRIPTION		(A) EXPENSES PER BOOKS	(B) NET INVE: MENT INC		(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
DESCRIPTION BANK FEES		EXPENSES	MENT INCO		ADJUSTED	CHARITABLE

FORM 990-PF U.S. AND STATE/CITY GOVERN	MENT OBLIGATIONS	STATEMENT 5
	HER OV'T BOOK VALUE	FAIR MARKET VALUE
	483,616.	500,556
ATTACHED STATEMENTS	225,815.	241,369
TOTAL U.S. GOVERNMENT OBLIGATIONS	483,616.	500,556
TOTAL STATE AND MUNICIPAL GOVERNMENT OBLIGATI	ONS 225,815.	241,369
TOTAL TO FORM 990-PF, PART II, LINE 10A	709,431.	741,925
FORM 990-PF CORPORATE STO	OCK	STATEMENT 6
DESCRIPTION	BOOK VALUE	FAIR MARKET VALUE
CORPORATE STOCKS - SEE ATTACHED STATEMENTS	1,111,180.	1,351,127
TOTAL TO FORM 990-PF, PART II, LINE 10B	1,111,180.	1,351,127
FORM 990-PF CORPORATE BON	DS	STATEMENT 7
DESCRIPTION	BOOK VALUE	FAIR MARKET VALUE
CORPORATE BONDS - SEE ATTACHED STATEMENTS	419,049.	444,355
TOTAL TO FORM 990-PF, PART II, LINE 10C	419,049.	444,355
FORM 990-PF OTHER INVESTME	NTS	STATEMENT 8
VALUATI DESCRIPTION METHOD		FAIR MARKET VALUE
OTHER INVESTMENTS - SEE ATTACHED COST STATEMENTS	1,345,897.	1,516,631
TOTAL TO FORM 990-PF, PART II, LINE 13	1,345,897.	1,516,631

FORM 990-PF	OTHER ASSETS	STATEMENT 9	
DESCRIPTION	BEGINNING OF YR BOOK VALUE	END OF YEAR BOOK VALUE	FAIR MARKET VALUE
MUNI AND CORP BOND - ACCRUED INTEREST PAID	4,045.	1,397.	1,397.
TO FORM 990-PF, PART II, LINE 15	4,045.	1,397.	1,397.

	ART VIII - LIST OF OFFICERS, DIRECTORS TRUSTEES AND FOUNDATION MANAGERS			STATEMENT 10		
NAME AND ADDRESS	TITLE AND AVRG HRS/WK	COMPEN- SATION	EMPLOYEE BEN PLAN CONTRIB			
ANDREW H. KNUDSEN 1 MUTUAL AVENUE FRANKENMUTH, MI 48787	VICE PRESIDENT	, CHARITABLE 0.		0.		
BRYAN L. GILLELAND 1 MUTUAL AVENUE FRANKENMUTH, MI 48787	VICE PRESIDENT	, EDUCATIONA 0.	0.	0.		
DAVID A. PENDLETON 1 MUTUAL AVENUE FRANKENMUTH, MI 48787	DIRECTOR 0.50	0.	0.	0.		
DREW R. ZEHNDER 1 MUTUAL AVENUE FRANKENMUTH, MI 48787	DIRECTOR 0.50	0.	0.	0.		
FREDERICK A. EDMOND, JR. 1 MUTUAL AVENUE FRANKENMUTH, MI 48787	PRESIDENT 1.00	0.	0.	0.		
JOHN D. ROSILIER 1 MUTUAL AVENUE FRANKENMUTH, MI 48787	TREASURER 1.00	0.	0.	0.		
JOHN S. BENSON 1 MUTUAL AVENUE FRANKENMUTH, MI 48787	CHAIRMAN; DIREC	CTOR 0.	0.	0.		
SUSANNAH W. BISKUPSKI 1 MUTUAL AVENUE FRANKENMUTH, MI 48787	SECRETARY 1.00	0.	0.	0.		
TOTALS INCLUDED ON 990-PF, PAGE	E 6, PART VIII	0.	0.	0.		

FORM 990-PF

GRANT APPLICATION SUBMISSION INFORMATION PART XV, LINES 2A THROUGH 2D

STATEMENT 11

NAME AND ADDRESS OF PERSON TO WHOM APPLICATIONS SHOULD BE SUBMITTED

APPLICATIONS ARE ACCEPTED VIA WEBSITE, FMINS.COM/FOUNDATION-APPLICATION/
1 MUTUAL AVENUE
FRANKENMUTH, MI 48787

TELEPHONE NUMBER

(989) 652-6121

FORM AND CONTENT OF APPLICATIONS

APPLICATION FORM CAN BE FOUND ON WEBSITE.

ANY SUBMISSION DEADLINES

NONE

RESTRICTIONS AND LIMITATIONS ON AWARDS

GUIDELINES FOR AWARDS ARE LISTED ON APPLICATION FORMS TO DETERMINE ELIGIBILITY