Form 990-PF

Return of Private Foundation

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

OMB No 1545-0047

Open to Public Inspection

Department of the Treasure Internal Revenue Service

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

Go to www.irs.gov/Form990PF for instructions and the latest information. For calendar year 2019 or tax year beginning , and ending A Employer identification number Name of foundation PHILIP J & KIMBERLY A CURTIS Number and street (or PO box number if mail is not delivered to street address) Room/suite 82-6464518 B Telephone number (see instructions) 4447 Springbrook Rd City or town, state or province, country, and ZIP or foreign postal code **JACKSON** 49201 517-787-9481 Foreign country name Foreign province/state/county Foreign postal code C If exemption application is pending, check here G Check all that apply Initial return D 1. Foreign organizations, check here Initial return of a former public charity Final return Amended return 2 Foreign organizations meeting the 85% test ☐ Name change check here and attach computation ☐ Address change E If private foundation status was terminated under Check type of organization Section 501(c)(3) exempt private foundation section 507(b)(1)(A), check here Section 4947(a)(1) nonexempt charitable trust

Other taxable private foundation Fair market value of all assets at F If the foundation is in a 60-month termination end of year (from Part II, col (c), Other (specify) under section 507(b)(1)(B), check here (Part I, column (d), must be on cash basis) 79,165. line 16) ▶ \$ (d) Disbursements Part I Analysis of Revenue and Expenses (The total of (a) Revenue and (b) Net investment (c) Adjusted net for charitable amounts in columns (b), (c), and (d) may not necessarily expenses per ıncome purposes equal the amounts in column (a) (see instructions)) books (cash basis only) 15,000. Contributions, gifts, grants, etc., received (attach schedule). 2 Check ▶ ☐ if the foundation is not required to attach Sch. B Interest on savings and temporary cash investments 2,293. 4 Dividends and interest from securities 5a Gross rents b Net rental income or (loss) 6a Net gain or (loss) from sale of assets not on line 10 Gross sales price for all assets on line 6a 7 Capital gain net income (from Part IV, line 2) 8 Net short-term capital gain . Income modifications 10a Gross sales less returns and allowances Less Cost of goods sold Gross profit or (loss) (attach schedule) 11 Other income (attach schedule) 17,293 12 Total. Add lines 1 through 11 13 Compensation of officers, directors, trustees, etc 14 Other employee salaries and wages 15 Pension plans, employee benefits 16a Legal fees (attach schedule) Accounting fees (attach schedule) Other professional fees (attach schedule) 17 18 Taxes (attach schedule) (see instructions) Depreciation (attach schedule) and depletion . 19 20 Occupancy Travel, conferences, and meetings 21 164. 164 22 Printing and publications 23 Other expenses (attach schedule) 24 Total operating and administrative expenses. 164. Add lines 13 through 23 18,000 18.000. 25 Contributions, gifts, grants paid

18,164.

(871.)

For Paperwork Reduction Act Notice, see instructions.

Subtract line 26 from line 12

Total expenses and disbursements. Add lines 24 and 25.

Excess of revenue over expenses and disbursements

Net investment income (if negative, enter -0-) Adjusted net income (if negative, enter -0-)

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18,164.

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Pa	art II	Balance Sheets Attached schedules and amounts in the description column	Beginning of year		End of year		
		should be for end-of-year amounts only (See instructions)	(a) Book Value	(b) Book Val		(c) Fair Market Value	
	1	Cash—non-interest-bearing .			26.	126.	
	2	Savings and temporary cash investments	12,744.	5,89	10.	5,890.	
	3	Accounts receivable •					
		Less allowance for doubtful accounts				·	
	4	Pledges receivable ▶	I I	-			
		Less allowance for doubtful accounts				- 	
	5	Grants receivable					
	6	Receivables due from officers, directors, trustees, and other					
		disqualified persons (attach schedule) (see instructions)	i				
	7	Other notes and loans receivable (attach schedule)					
		Less allowance for doubtful accounts	-	.			
ţ	8	Inventories for sale or use					
set	9	Prepaid expenses and deferred charges					
Assets	10a	Investments—U S. and state government obligations (attach schedule)					
'	ь	Investments—corporate stock (attach schedule)	75,065.	72,63	7.	73,149.	
	C	Investments—corporate bonds (attach schedule)		,			
	11	Investments—land, buildings, and equipment basis					
	' '	Less. accumulated depreciation (attach schedule)					
	12	Investments—mortgage loans					
	13	Investments—other (attach schedule)					
	14	Land, buildings, and equipment basis					
	' -	Less: accumulated depreciation (attach schedule)					
	15	Other assets (describe)					
	16	Total assets (to be completed by all filers—see the					
	'	instructions Also, see page 1, item l)	87,809.	78,65	.3.	79,165.	
	17	Accounts payable and accrued expenses	, , , , , , , ,	,		, , , , , ,	
	18	Grants payable					
Liabilities	19	Deferred revenue					
III	20	Loans from officers, directors, trustees, and other disqualified persons					
ab	21	Mortgages and other notes payable (attach schedule)			-		
	22	Other liabilities (describe)					
	23	Total liabilities (add lines 17 through 22)		 -			
S		Foundations that follow FASB ASC 958, check here					
Balances		and complete lines 24, 25, 29, and 30.					
lau	24	Net assets without donor restrictions					
Ba	25	Net assets with donor restrictions					
ַק		Foundations that do not follow FASB ASC 958, check here ►X					
וַהַ		and complete lines 26 through 30.					
៑	26	Capital stock, trust principal, or current funds .	87,809.	78,65	<u>3.</u>		
S	27	Paid-in or capital surplus, or land, bldg, and equipment fund					
set	28	Retained earnings, accumulated income, endowment, or other funds					
Š	29	Total net assets or fund balances (see instructions)	87,809.	78 , 65	·3.		
Net Assets or Fund	30	Total liabilities and net assets/fund balances (see				<u> </u>	
ž		instructions) .	87,809.	78 , 65	·3.		
	rt III	Analysis of Changes in Net Assets or Fund Balances					
1		net assets or fund balances at beginning of year-Part II, column (a	a), line 29 (must agree	e with		_	
	end-c	of-year figure reported on prior year's return)			1	87,809.	
		amount from Part I, line 27a		•	2	(871.)	
		r increases not included in line 2 (itemize)			3_		
		ines 1, 2, and 3			4	86,938.	
5	Decre	eases not included in line 2 (itemize) LOSS			5	8,285.	
6	Total	net assets or fund balances at end of year (line 4 minus line 5)—Pa	art II. column (b), line.	29	6	78,653.	

Part	IV Capital Gains and	Losses for Tax on Investm	nent Income						
		nd(s) of property sold (for example, real est se, or common stock, 200 shs MLC Co)	ate,	(b) How acquired P—Purchase D—Donation	(c) Date acq (mo , day,)		(d) Date sold (mo , day, yr)		
1a	660 SH_PROSHARE	S MSCI EAFE		P	08/31/2	017	10/04/2019		
<u>b</u>									
				<u> </u>					
<u>d</u>		_			 				
	(e) Gross sales price	((6	(h) Gain or (loss) ((e) plus (f) minus (g))						
a	23,935.								
<u>b</u>							·		
<u>c</u>									
d									
<u>е</u>	Complete only for assets sho	owing gain in column (h) and owned	by the foundation	on 12/31/69					
	(i) FM V as of 12/31/69	(j) Adjusted basis	(k) Exces	s of col (i)	col (k)	, but no	(h) gain minus t less than -0-) or		
	''	as of 12/31/69	over col	(j), if any		osses (ii	rom col (h))		
<u>a</u> b							(1,065.)		
<u>C</u>				 					
d									
е									
2	Capital gain net income or		also enter in Pa , enter -0- in Pa		2		(1,065.)		
3	If gain, also enter in Part I,	or (loss) as defined in sections line 8, column (c) See instructi	1222(5) and (6)	•			(1)		
Part	Part I, line 8	er Section 4940(e) for Redu	and Tay on N	ot Investment	lneome				
Was		e this part blank section 4942 tax on the distributionality under section 4940(e) Do			ase period?		☐ Yes ☒ No		
1	· · ·	unt in each column for each yea	•	·	kıng anv entr	ies			
Cal	(a) Base period years endar year (or tax year beginning in)	(b)		(c) of noncharitable-use a	coeto	Dis	(d) tribution ratio divided by col (c))		
	2018	39,85	0.	80,45		COI (D) !	0.495320		
	2017	86,00	0.	73,28	7.		1.00000		
	2016								
	2015								
	2014		<u></u>		- -				
2	Total of line 1, column (d)				2		1.495320		
3		 or the 5-year base period—divid		ue 2 bv 5 0 or bv			1.475520		
	=	undation has been in existence			3		0.747660		
4	Enter the net value of nonc	charitable-use assets for 2019 fr	om Part X, line !	5	. 4		73,353.		
5	Multiply line 4 by line 3				5		54,843.		
6	Enter 1% of net investmen	t income (1% of Part I, line 27b)			6		· · · · · · · · · · · · · · · · · · ·		
7	Add lines 5 and 6				. 7		54,843.		
8	Enter qualifying distribution		•		8		18,164.		
	If line 8 is equal to or great Part VI instructions	er than line 7, check the box in l	Part VI, line 1b,	and complete tha	at part using	a 1% 1	tax rate See the		

Part \	Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948—see instruct	ions)				
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)					
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check		_			
	here ▶ ☐ and enter 1% of Part I, line 27b					
С						
•	Part I, line 12, col (b)		^			
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only, others, enter -0-)		0			
3	Add lines 1 and 2 Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only, others, enter -0-)		0			
4 5	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only, others, enter -0-) Tax based on investment income. Subtract line 4 from line 3 If zero or less, enter -0-		0			
6	Credits/Payments					
а	2019 estimated tax payments and 2018 overpayment credited to 2019 6a			ł		
b	Exempt foreign organizations—tax withheld at source . 6b					
c	Tax paid with application for extension of time to file (Form 8868) 6c					
d	Backup withholding erroneously withheld . 6d					
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 8					
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed					
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid . ▶ 10					
11	Enter the amount of line 10 to be Credited to 2020 estimated tax ► Refunded ► 11					
	VII-A Statements Regarding Activities		T.,			
1a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it	-	Yes	No		
L	participate or intervene in any political campaign?	1a	+	X		
D	b Did it spend more than \$100 during the year (either directly or indirectly) for political purposes? See the					
	Instructions for the definition	1b		X		
	published or distributed by the foundation in connection with the activities			1		
c	Did the foundation file Form 1120-POL for this year?	1c	 —	X		
d						
-	(1) On the foundation ▶\$ (2) On foundation managers ▶\$					
е	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed			1		
	on foundation managers ▶\$					
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?	2		X		
	If "Yes," attach a detailed description of the activities	İ				
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		X		
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	4a	}	X		
ь 5	If "Yes," has it filed a tax return on Form 990-T for this year?	4b 5		X		
3	Was there a liquidation, termination, dissolution, or substantial contraction during the year? If "Yes," attach the statement required by General Instruction T	3		<u> </u>		
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either:					
•	By language in the governing instrument, or					
	By state legislation that effectively amends the governing instrument so that no mandatory directions that					
	conflict with the state law remain in the governing instrument?	6	X			
7	Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col. (c), and Part XV	7	Х			
8a	Enter the states to which the foundation reports or with which it is registered. See instructions					
	MI					
b	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General					
	(or designate) of each state as required by General Instruction G? If "No," attach explanation .	8b	X			
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			,, \cap		
40	"Yes," complete Part XIV	9	-	<u> </u>		
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their	10		v		
	names and addresses	1 10		<u>X</u>		

Par	t VII-A Statements Regarding Activities (continued)			
		Γ	Yes	No
11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the			
	meaning of section 512(b)(13)? If "Yes," attach schedule See instructions	11		Χ
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		X
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13		X
	Website address The state of		0.40	
14	The books are in care of ▶ PHILIP J CURTIS Telephone no ▶ 517-7		948	<u>+</u>
45	Located at ▶ 120 W MICHIGAN AVE JACKSON MI ZIP+4 ▶ 49201			
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041—check here and enter the amount of tax-exempt interest received or accrued during the year 15			▶ ∟
16	At any time during calendar year 2019, did the foundation have an interest in or a signature or other authority		Yes	No
	over a bank, securities, or other financial account in a foreign country?	16		X
	See the instructions for exceptions and filing requirements for FinCEN Form 114 If "Yes," enter the			
	name of the foreign country			
Par	t 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.	<u> </u>	Yes	No
1a	During the year, did the foundation (either directly or indirectly)			
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person? . Yes X No			!
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a			
	disqualified person?			
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?			
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? Yes X No			
	(5) Transfer any income or assets to a disqualified person (or make any of either available for the benefit or use of a disqualified person)? Yes X No			
	(6) Agree to pay money or property to a government official? (Exception. Check "No" if the			
	foundation agreed to make a grant to or to employ the official for a period after			
	termination of government service, if terminating within 90 days) .			
b	If any answer is "Yes" to 1a(1)–(6), did any of the acts fail to qualify under the exceptions described in			
	Regulations section 53 4941(d)-3 or in a current notice regarding disaster assistance? See instructions	1b		
	Organizations relying on a current notice regarding disaster assistance, check here			
С	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that	_		
	were not corrected before the first day of the tax year beginning in 2019?	1c		X
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private			
	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? Yes X No			
	If "Yes," list the years 20 , 20 , 20 , 20			
b	Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2)	}		
	(relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to			
	all years listed, answer "No" and attach statement—see instructions) .	2b		
С	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here			
	▶ 20, 20, 20			
3a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise			
	at any time during the year?			
b	If "Yes," did it have excess business holdings in 2019 as a result of (1) any purchase by the foundation or			
	disqualified persons after May 26, 1969, (2) the lapse of the 5-year period (or longer period approved by the			
	Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest, or (3) the lapse			
	of the 10-, 15-, or 20-year first phase holding period? (Use Form 4720, Schedule C, to determine if the	3b		
4a	foundation had excess business holdings in 2019) Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a		Х
ъ b	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its	a		1
_	charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2019?	4h		Y

Par	t VII-B	Statements Regarding Activities f	or Wh	ich Form 47	7 <u>20 Ma</u>	y Be Requ	<u>uired (</u>	<u>'contınue</u>	ed)			
5a (the year, did the foundation pay or incur a ry on propaganda, or otherwise attempt to			(sectio	on 4945(e))	?	Yes	_ ⊠ No		Yes	No
	(2) Influ	uence the outcome of any specific public e	lection	-	•			_				
		ctly or indirectly, any voter registration driv					٠	∐ Yes	X No			
		vide a grant to an individual for travel, stud	-		-			∐ Yes	MO WO	'		
	sec	vide a grant to an organization other than a tion 4945(d)(4)(A)? See instructions					•	Yes	⊠ No			
		vide for any purpose other than religious, oposes, or for the prevention of cruelty to ch			literary	, or educati	onal	Yes	X No			
b	•	inswer is "Yes" to 5a(1)-(5), did any of the					-		bed in			
	_	tions section 53 4945 or in a current notice	•	•			nstruct	ions		5b		
С	Organizations relying on a current notice regarding disaster assistance, check here If the answer is "Yes" to question 5a(4), does the foundation claim exemption from the tax because it maintained expenditure responsibility for the grant? Yes No											
6a	If "Yes," attach the statement required by Regulations section 53 4945–5(d)											
b	•	foundation, during the year, pay premium	s direc	tly or indirect	lv on a	personal b	enefit d	_		6b		X
		to 6b, file Form 8870	o, anoc	ny or maneor	.y, o u	personarb	0110111	Jonn Got		100		
7a							·					
b		did the foundation receive any proceeds		•				nsaction?	•	7b		
8		oundation subject to the section 4960 tax or eration or excess parachute payment(s) du			re than	\$1,000,000 •	U IN	Yes	X No			
Par	t VIII	Information About Officers, Directo		-	undati	on Manag	jers, F	lighly Pa			es,	٠
		and Contractors										
1	List all	officers, directors, trustees, and found								•		
		(a) Name and address	hou	e, and average urs per week ted to position	i (If i	mpensation not paid, nter -0-)	empl	Contribution byee benefit ferred compe	plans	(e) Expe other	ense ac allowan	
		CURTIS	TRUS	STEE								
444		INGBROOK RD	mp ric	1	<u> </u>							
		A CURTIS INGBROOK RD	TRUS	1								
444	/ SER	INGBROOK RD		<u> </u>								
					<u> </u>					-		
2	Compe "NONE	ensation of five highest-paid employees : ''	(other	than those	include	ed on line '	ı—see	instructi	ons). II	none,	entei	•
	HOHE		_	(h) Title and a				(d) Contrib	utions to			
	(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) Comper	nsation	employee plans and compen	deferred	(e) Expe	ense ac allowan	
иои	E						-			-		
					-							
				_							-	
Total	number	of other employees paid over \$50,000	•						•			

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

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<u>Part</u>		found	ations,
	see instructions)	·	
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc.,		
	purposes:		
а	Average monthly fair market value of securities	1a	70,690.
b	Average of monthly cash balances .	1b	3,780.
С	Fair market value of all other assets (see instructions)	1c	
d	Total (add lines 1a, b, and c)	1d	74,470.
е	Reduction claimed for blockage or other factors reported on lines 1a and		
	1c (attach detailed explanation) . 1e		
2	Acquisition indebtedness applicable to line 1 assets	2	
3	Subtract line 2 from line 1d	3	74,470.
4	Cash deemed held for charitable activities Enter 1½ % of line 3 (for greater amount, see		
	instructions)	4	1,117.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3 Enter here and on Part V, line 4	5	73,353.
6	Minimum investment return. Enter 5% of line 5	6	3,668.
Part		ons	
	and certain foreign organizations, check here and do not complete this part)		
1	Minimum investment return from Part X, line 6	1	3,668.
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)		
С	Add lines 2a and 2b	2c	2 660
3	Distributable amount before adjustments Subtract line 2c from line 1	3	3,668.
4	Recoveries of amounts treated as qualifying distributions	4	2 (()
5	Add lines 3 and 4	5	3,668.
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,		2 660
D . 4	line 1	7_	3,668.
	XII Qualifying Distributions (see instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:		10 164
a	Expenses, contributions, gifts, etc —total from Part I, column (d), line 26	1a	18,164.
b	Program-related investments—total from Part IX-B	1b	
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc.,		
	purposes	2	
3	Amounts set aside for specific charitable projects that satisfy the		
а	Suitability test (prior IRS approval required)	3a	
b	Cash distribution test (attach the required schedule)	3b	10 164
4	Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4	4	18,164.
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	10 164
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	18,164.
	Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating wh qualifies for the section 4940(e) reduction of tax in those years	etner tr	ie roundation
	qualities for the section 4540(e) reduction of tax in those years		

art	XIII Undistributed Income (se	ee instructions)				
,			(a) Corpus	(b) Years prior to 2018	(c) 2018	(d) 2019
1	Distributable amount for 2019 from I	Part XI,				
	line 7 .					3,668.
2	Undistributed income, if any, as of the er	nd of 2019				
а	Enter amount for 2018 only	. [
	Total for prior years 20, 20					_
3	Excess distributions carryover, if any	y, to 2019				
a	From 2014					
b	From 2015 .					
C	From 2016 .	82,336.				
d	From 2017	35,869.	118,205.			
e f	From 2018 Total of lines 3a through e	33,869.	110,203.			_
4	Total of lines 3a through e Qualifying distributions for 2019 from	n Part YII				
	line 4 ▶ \$ 18,164.					
	Applied to 2018, but not more than I				,= , ,	
D	Applied to undistributed income of p (Election required—see instructions	•				
	Treated as distributions out of corpu	· •				
Ç	required—see instructions)	is (Election				
d	Applied to 2019 distributable amoun	,,				3,668.
e	Remaining amount distributed out of		14,496.			3,000.
5	Excess distributions carryover applie					
	(If an amount appears in column (d)					
	amount must be shown in column (a					
6	Enter the net total of each column	า อรุ				
	indicated below:					
a	Corpus Add lines 3f, 4c, and 4e Su	ibtract line 5	132,701.		· · · · · · · · · · · · · · · · · · ·	
b	Prior years' undistributed income Si	ubtract				
	line 4b from line 2b					
С	Enter the amount of prior years' und					
	income for which a notice of deficier	•				
	been issued, or on which the section tax has been previously assessed	1 4942(a)				
d	Subtract line 6c from line 6b. Taxable	<u>.</u>				
u	amount—see instructions					
e	Undistributed income for 2018 Subt	tract line				-
•	4a from line 2a Taxable amount—se					
	instructions					
f	Undistributed income for 2019 Subt	tract lines				
	4d and 5 from line 1 This amount m	nust be				
	distributed in 2020					
7	Amounts treated as distributions out					
	to satisfy requirements imposed by s					
	170(b)(1)(F) or 4942(g)(3) (Election	may be				
_	required—see instructions)					
8	Excess distributions carryover from 2					
0	applied on line 5 or line 7 (see instru	· -				
9	Excess distributions carryover to Subtract lines 7 and 8 from line 6a	2020.	132,701.			
0	Analysis of line 9	<u></u>	102,101.		~	
a	_ '					
b	Excess from 2016					
c	Excess from 2017	82,336.				
d	Excess from 2018 .	35,869.		ļ		
e	Excess from 2019	14,496.				

art	XIV Private Operating Foundation	ons (see instruct	ions and Part V	II-A, question 9)			
1ą	If the foundation has received a ruling	or determination le	etter that it is a pri	vate operating			
	foundation, and the ruling is effective for	or 2019, enter the	date of the ruling	•			
b		Check box to indicate whether the foundation is a private operating foundation described in section 4942(j)(3) or 4942(j)(5)					
2a	Enter the lesser of the adjusted net	Tax year		Prior 3 years			
	income from Part I or the minimum investment return from Part X for	(a) 2019	(b) 2018	(c) 2017	(d) 2016	(e) Total	
	each year listed						
b	85% of line 2a						
С	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						
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			1			
_	Part X, line 6, for each year listed				$\overline{}$		
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)			1			
	(2) Support from general public			 			
	and 5 or more exempt						
	organizations as provided in section 4942(j)(3)(B)(iii)						
	(3) Largest amount of support from						
	an exempt organization						
	(4) Gross investment income						
Part		(Complete this	part only if th	e foundation had	l \$5.000 or mor	e in assets at	
	any time during the year—	•	•		• •		
1	Information Regarding Foundation N	_	•				
а	List any managers of the foundation wh	_	d more than 2% of	of the total contributi	ons received by t	he foundation	
	before the close of any tax year (but or	ly if they have cor	tributed more tha	in \$5,000) (See sec	tion 507(d)(2))		
b	List any managers of the foundation wh	no own 10% or mo	re of the stock of	a corporation (or ar	equally large por	tion of the	
	ownership of a partnership or other ent	ity) of which the fo	undation has a 1	0% or greater intere	st		
2	Information Regarding Contribution						
	Check here ▶ 🖾 If the foundation or	ily makes contribu	tions to preselect	ed charitable organi	zations and does	not accept	
	unsolicited requests for funds If the fou			ındıvıduals or orgai	nizations under ot	her	
	conditions, complete items 2a, b, c, and	d d. See instruction	ns			<u> </u>	
а	The name, address, and telephone nur	nber or email addi	ess of the person	to whom applicatio	ns should be addr	essed	
			<u></u>				
b	The form in which applications should be	e submitted and i	nformation and m	aterials they should	ınclude		
С	Any submission deadlines						
	<u> </u>						
d	Any restrictions or limitations on award	s, such as by geog	graphical areas, c	harıtable fields, kınd	s of institutions, o	r other	
	factors						

Total

Part XV Supplementary Information (continued) 3 Grants and Contributions Paid During the Year or Approved for Future Payment If recipient is an individual, Foundation Recipient show any relationship to Purpose of grant or status of Amount any foundation manager contribution recipient Name and address (home or business) or substantial contributor a Paid during the year ARTS&CULTURAL ALLIANCE 10,000. PO BOX 1463 49204 MI JACKSON N/A PUBLICOPERATIONS **JDRF** 5,000. 24359 NWESTEN HYW 48075 MI SOUTHFIELD M/A PUBLICOPERATIONS 3,000. LYLE TORRANT CENTER 1175 W PARNALL RD N/A PUBLICOPERATIONS 49201 MI JACKSON 3a 18,000. **Total** Approved for future payment

	er gross amounts unless otherwise indicated	Unrelated business income Excluded by section 512, 5				3. or 514		
		(a) (b) Business code Amount			(d) Amount	(e) Related or exemp function income		
1	Program service revenue	Business code		Exclusion code	Amount	(See instructions)		
	b							
	c			-				
	d			 	 			
	e							
	g Fees and contracts from government agencies							
2	Membership dues and assessments .			· -				
3	Interest on savings and temporary cash investments							
4	Dividends and interest from securities	·		14	2,293.			
5	Net rental income or (loss) from real estate							
	a Debt-financed property .	<u> </u>		<u> </u>				
_	b Not debt-financed property							
6	Net rental income or (loss) from personal property Other investment income			-				
7 8	Gain or (loss) from sales of assets other than inventory		_	 		ļ		
9	Net income or (loss) from special events			 		 		
10	Gross profit or (loss) from sales of inventory							
11	Other revenue a				·- ·-			
	b				-			
	c							
	d							
	e							
	Subtotal Add columns (b), (d), and (e)				2,293.			
	Total. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculation				13	2,293.		
	T XVI-B Relationship of Activities to the A		nt of Exempt	Purnoses				
Lin	Explain below how each activity for which incom accomplishment of the foundation's exempt purp	e is reported in col	umn (e) of Part	XVI-A contributed	importantly to the	ons)		
1	N/A							
					_			
				 -				
						·		

Part	XVIî	Information Exempt Org		sfers to and Tran	sactions	and R	elationship	s With No	ncharitable		
1	Did			engage in any of the	e followina	with any	other organ	zation desc	ribed	Yes	No
				c)(3) organizations)						100	
		anizations?		, , , ,		·	J				İ
а	Tran	sfers from the rep	orting foundation to	o a noncharitable ex	empt orga	nızatıon	of				İ
		Cash	•						1a(1)		X
	(2)	Other assets	•					•	1a(2)		X
b	Othe	er transactions									
	(1) 9	Sales of assets to	a noncharitable ex	empt organization					1b(1)		Χ
	(2) F	Purchases of asse	ets from a noncharit	able exempt organi	zation				1b(2)		X
	(3) F	Rental of facilities,	equipment, or other	er assets					. 1b(3)		Χ
	(4) F	Reimbursement ai	rrangements			٠			1b(4)		Χ
		∟oans or loan gua						•	1b(5)		Χ
				hip or fundraising so			•	•	1b(6)		X
C				sts, other assets, or					_1c_		X
d				mplete the following so							
				given by the reporting							
4-11-				ent, show in column (c							
(a) Line	e no	(b) Amount involved	(c) Name of non	charitable exempt organiz	ation	(d) Des	scription of trans	fers, transaction	s, and sharing arra	ingeme	ıts
					_		_				
					_						
									 -		
							· · · · · · · · · · · · · · · · · · ·		·		
			•								
			·	· · · · · · · · · · · · · · · · · · ·		· · · · · · · · · · · · · · · · · · ·					
								·			
	Ī						·				
								-			
2a				ated with, or related			x-exempt or	ganizations	_		
				ection 501(c)(3)) or i	n section (527?	•		Yes	X N	o
b_	If "Ye		following schedule				T-				
		(a) Name of organi	zation	(b) Type of o	organization			(c) Description	of relationship		
							 		<u> </u>		
						-		_			
	Unde	er penalties of penury. I decl	are Wat I have examined this	Eturn, including accompanying	schedules and	statements a	and to the best of m	v knowledne and h	elief it is true		
Sign	corre	ct, and complete Declarate	of prepared other than taxp	return, including accompanying ayer) is based on all informatio	on of which prepared	arer has any l	knowledge	, knowledge and be	AA- H- IDO H-		\neg
Here		What I	\mathcal{L}	16-21-2	TRI	USTEE	!		May the IRS discuss with the preparer sho		
пете	Sig	nature of officer or trus	tee	Date _	Title	-	<u> </u>		See instructions	XYes [No
Date!	<u> </u>	Print/Type preparer's		Preparer Signature	111	2	Date		PTIN		
Paid		Phiip J C		(K////	Tol.	, -	05/25/2	Check	ployed P014	5230) 6
Prepa			Curtis, Curt	is&Brelinsk	i, P.(-		Firm's EIN	38-19560	_	
Use C	nly		PO Box 766	7-7	-, ~ • \			Phone no	517-787-		1
			JACKSON MI	49204-0766		-			Form 99 (
										,	,

Schedule B

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

Department of the Treasury Internal Revenue Service

Name of the organization

PHILIP J & KIMBERLY A CURTIS

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

Employer identification number

82-6464518

Organization type (check one)					
Filers o	of:	Section:			
Form 99	90 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	90-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			
	only a section 501(c)(7),	overed by the General Rule or a Special Rule . (8), or (10) organization can check boxes for both the General Rule and a Special Rule See			
Genera	il Rule				
X	For an organization filin or more (in money or pr contributor's total contri	ng Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 roperty) from any one contributor. Complete Parts I and II. See instructions for determining a butions			
Special	Rules				
	regulations under section 13, 16a, or 16b, and the	scribed in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3 % support test of the ons 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line at received from any one contributor, during the year, total contributions of the greater of (1) amount on (i) Form 990, Part VIII, line 1h; or (ii) Form 990-EZ, line 1 Complete Parts I and II			
	For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I, II, and III				
	contributor, during the y contributions totaled mo during the year for an e	scribed in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one rear, contributions exclusively for religious, charitable, etc., purposes, but no such pre than \$1,000. If this box is checked, enter here the total contributions that were received exclusively religious, charitable, etc., purpose. Don't complete any of the parts unless the total organization because it received nonexclusively religious, charitable, etc., contributions aduring the year.			

Caution: An organization that isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990,

Form 990-PF, Part I, line 2, to certify that it doesn't meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF)

990-EZ, or 990-PF), but it must answer "No" on Part IV, line 2, of its Form 990, or check the box on line H of its Form 990-EZ or on its

Name of organization
PHILIP J & KIMBERLY A CURTIS

Employer identification number

PHILIP J & KIMBERLY A CURTIS 82-6464518 Contributors (see instructions) Use duplicate copies of Part I if additional space is needed Part I (a) (c) (d) No. Name, address, and ZIP + 4 **Total contributions** Type of contribution Philip J Curtis 14 Person 4447 Springbrook Rd Payroll JACKSON MI 49201 **\$** 15,000. Noncash Foreign State or Province (Complete Part II for Foreign Country noncash contributions) (b) (d) (a) (c) No. Name, address, and ZIP + 4 **Total contributions** Type of contribution Person **Payroll** Noncash Foreign State or Province (Complete Part II for Foreign Country noncash contributions) (a) (b) (c) (d) No. Name, address, and ZIP + 4 **Total contributions** Type of contribution Person **Payroli** Noncash Foreign State or Province (Complete Part II for Foreign Country noncash contributions) (a) (b) (d) (c) No. Name, address, and ZIP + 4 **Total contributions** Type of contribution Person **Payroll** Noncash Foreign State or Province (Complete Part II for Foreign Country noncash contributions) (a) (d) (b) (c) **Total contributions** No. Name, address, and ZIP + 4 Type of contribution Person **Payroll** Noncash Foreign State or Province (Complete Part II for Foreign Country noncash contributions) (a) (b) (c) (d) No. Name, address, and ZIP + 4 **Total contributions** Type of contribution Person **Payroll** Noncash Foreign State or Province (Complete Part II for Foreign Country noncash contributions)