	00	90-PF			'(a)(1) Trust Treated a				OMB No 1545-0047
For	m J	7U-F F						_	2019
Dep	artment	of the Treasury			urity numbers on this		-		2010
Inte	rnal Rev	enue Service			77990PF for instruction		atest info	ormation. UX)	Open to Public Inspection
		-	tax year beginnin	g 02/01/19,	and ending EDAF	1/20			
N	ame of fou	ndation		စ္တ		၂႘၂	A Empl	oyer identification number	
T.	7T T T2	INSON FOUNDATION   S   JUL 2 1 2020   38-6497639							
			mber if mail is not delive		<del></del>	oom/s@rte		hone number (see instructions	3)
		5 WATERLO		100 10 30 001 200 000)	OGDEN I			4-904-1484	-1
			ntry, and ZIP or foreign	postal code	COUCIN, U				
(	CHEL	SEA		MI 48118			C If exe	mption application is pending,	check here
G	Check a	all that apply	Initial return	Initial ret	urn of a former public c	harity	D 1. Fo	oreign organizations, check he	re 🕨
			Final return	Amende	d return	,	2. Fo	reign organizations meeting t	he
			Address cha	ange 🔲 Name ch	ange			% test, check here and attach	
н	Check t	vne of organization	on X Section 5	01(c)(3) exempt private	te foundation	11/1	F If priv	ate foundation status was tem	ninated under
$\ddot{\neg}$		-	xempt charitable t		ole private foundation	UM.	-	n 507(b)(1)(A), check here	<b>▶</b>
 		ket value of all as		Accounting method		rual	F If the	foundation is in a 60-month te	rmination
		ear (from Part II, o		Other (specify)				section 507(b)(1)(B), check h	. '   '
	ne 16) <b>l</b>	•		Part I, column (d), mus	st be on cash basis )				
			venue and Exper		(a) Revenue and				(d) Disbursements
		amounts in columns	(b), (c), and (d) may not	necessarily equal	expenses per books	(b) Net inv		(c) Adjusted net income	for charitable purposes
<u> </u>	<del>-</del>		nn (a) (see instructions)		DOOKS	ut start i un -	30874 / 21	Alesto When he had year	(cash basis only)
	1		, grants, etc , receive	,	THE PERSON NAMED IN A THE REAL	The state of the s		1 2 3 4 3 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4	EM STATE OF THE
D <sub>k</sub>	2	_		required to attach Sch B		人权实现	•		Linkow 2
2	3			cash investments	154	ļ	154		CONTRACTOR
	4		nterest from securi	ties	178,310	1	78,310	178,310	
П	5a	Gross rents			. As AMERICAN ST. STATE . W. MILE ST. 18	7365 44 de-200 44	2 4 424 (84)	M.S. COLA. FR. TRUNCASSES	PARTITION OF THE PARTIT
꼌	b	Net rental incom	, ,	G1 1 4	LATER STATE OF STATE			WINE WE	War and the Miles
RéVenu€	6a	• ' '	sate of assets not on line	tle of assets not on line 10 Stmt 1		The state of		Market Transport	
ኞ	þ	Gross sales price for al							THE TOWN THE THE
<u> </u>	7		income (from Part	IV, line 2)	CONTRACTOR OF THE PROPERTY OF THE PER			ECHECOMORPHICA CO	A STATE OF THE PARTY OF THE PAR
<b>x</b>	8	Net short-term c			Control of the second s			0	7. 7.2.4.9 Hz md
20 <b>2</b>	9	Income modifica		1	ENGLISHED STREET	<b>在外外</b>		MANAGER AND THE T	MARK TENED
3	10a	Gross sales less retur			<b>一种企业的企业</b>	elm. Alon Mil			
_	þ	Less Cost of go			92 14C 34 35 7E 3E 3E 3E	H. British		This State of the Land of the State of the S	S. B. S. T. S.
	C		oss) (attach sched	iule)		C-C-13*-20 2	2 1628 - BE		
	11	Other income (a	•		385,126	3.	10,857	170 464	erecon and
—	12	Total. Add lines			385,126		<u> </u>	170,404	to store all it was stated as
es	13	•	f officers, directors	•					
S	14		salaries and wage	:5					
and Administrative Expenses	15 16a	Legal fees (attac	employee benefits						
ũ	b	-	(attach schedule)	Stmt 2	3,175		3,175		
Ve Ve			fees (attach schedule	_	30,844		30,844		
ati	17	Interest	.sss <sub>(addon sonedan</sub>	.,	20,011				
str	18		dule) (see instruction	s) Stmt 4	2,694	<u> </u>	2,694		
Ē	19	•	h schedule) and depl	•			.,		THE COURTS
투	20	Occupancy	ii concuuic) anu ucpi	Quoti					
Ă	21	• •	ces, and meetings		4,486	<b> </b>	4,486		
pu	22	Printing and pub	-	-	1,200		·		
, a		Other expenses (att so							
ĭ	24		and administrati	ve expenses					
rat	-	Add lines 13 thro			41,199		41,199	0	o
Operating	25	Contributions, gifts, gra	-	Statement 5	313.000	A STATE OF THE STA	707070	THE PLEASURE	313,000
0	26		•	Add lines 24 and 25	354,199	•	11,199	0	313,000
	27	Subtract line 26		miles ET dire EV		70 KM		TANKS BY J. AND.	
	a		e over expenses a	nd disbursements	30,927	特別		<b>斯加州</b> 第	<b>《新兴》等</b>
	b		income (if negati		THE REPORT OF THE PARTY	2	99,658	DESKIEL HOW	THE TEST
	C		come (if negative,		和海岸级"相位"。			178,464	ECIT BYELFELT
			, 320		<del></del>				

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 ► Less allowance for doubtful accounts ► 6 Receivables due from officers, directors, trustees, and other disqualified persons (attach schedule) (see instructions) 7 Other notes and toans receivable (att schedule) ► Less allowance for doubtful accounts ► 8 Inventiones for sale or use 9 Prepaid expenses and deferred charges 10a Investments – US and state government obligations (attach schedule) b Investments – Corporate bonds (attach schedule) See Stmt 7 11 Investments – corporate bonds (attach schedule) See Stmt 7 12 Investments – corporate bonds (attach schedule) See Stmt 7 12 Investments – other (attach schedule) 13 Investments – other (attach schedule) 14 Land, buildings, and equipment basis ► Less accumidated depreciation (attach sch ►) ► 15 Other assets (describe ► 15 Other assets (describe ► 16 Total assets (to be completed by all filers – see the instructions Also, see page 1, item I) 17 Accounts payable and accrued expenses 18 Grants payable and accrued expenses 19 Deferred revenue 20 Loans from officers, directors, trustees, and other disqualified persons 21 Montgages and other notes payable (attach schedule) 22 Other liabilities (add lines 17 through 22) 2 Other liabilities (add lines 17 through 22) 2 Other liabilities (add lines 17 through 22) 2 Other liabilities (add lines 17 through 22) 3 Total liabilities (add lines 17 through 22) 3 Other liabilities (add lines 17 through 22) 4 Pledges receivable	2,419 6,624
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instructions Also, see page 1, item i)  Accounts payable and accrued expenses  Grants payable  Deferred revenue  Loans from officers, directors, trustees, and other disqualified persons  Mortgages and other notes payable (attach schedule)  Other liabilities (describe ▶  Total liabilities (add lines 17 through 22)  6,399,155  6,430,082  7,15  6,399,155  6,430,082  7,15	
17 Accounts payable and accrued expenses  18 Grants payable  19 Deferred revenue  20 Loans from officers, directors, trustees, and other disqualified persons  21 Mortgages and other notes payable (attach schedule)  22 Other liabilities (describe ▶  23 Total liabilities (add lines 17 through 22)  17 Accounts payable and accrued expenses  18 Grants payable  20 Loans from officers, directors, trustees, and other disqualified persons  21 Mortgages and other notes payable (attach schedule)  22 Other liabilities (describe ▶  23 Total liabilities (add lines 17 through 22)	7,456
18 Grants payable 19 Deferred revenue 20 Loans from officers, directors, trustees, and other disqualified persons 21 Mortgages and other notes payable (attach schedule) 22 Other liabilities (describe ▶ ) 23 Total liabilities (add lines 17 through 22)	
19 Deferred revenue 20 Loans from officers, directors, trustees, and other disqualified persons 21 Mortgages and other notes payable (attach schedule) 22 Other liabilities (describe ▶ ) 23 Total liabilities (add lines 17 through 22)	
23 Total liabilities (add lines 17 through 22)	
23 Total liabilities (add lines 17 through 22)	
23 Total liabilities (add lines 17 through 22)	
23 Total liabilities (add lines 17 through 22) 0 0	
	j
Foundations that follow FASB ASC 958, check here and complete lines 24, 25, 29, and 30.	
and complete lines 24, 25, 29, and 30.  24 Net assets without donor restrictions	
Net assets with donor restrictions	
Foundations that do not follow FASB ASC 958, check here	1
and complete lines 26 through 30.	
26 Capital stock, trust principal, or current funds 1,735,956 1,735,956	
27 Paid-in or capital surplus, or land, bidg, and equipment fund 267,865 267,865	
28 Retained earnings, accumulated income, endowment, or other funds 4,395,334 4,426,261	
Net assets with donor restrictions  Foundations that do not follow FASB ASC 958, check here and complete lines 26 through 30.  Capital stock, trust principal, or current funds Paid-in or capital surplus, or land, bldg, and equipment fund Retained earnings, accumulated income, endowment, or other funds Paid-in or capital surplus, or land, bldg, and equipment fund Retained earnings, accumulated income, endowment, or other funds Total net assets or fund balances (see instructions) Total liabilities and net assets/fund balances (see	
30 Total liabilities and net assets/fund balances (see	
Z instructions) 6,399,155 6,430,082	
Part III Analysis of Changes in Net Assets or Fund Balances	
1 Total net assets or fund balances at beginning of year - Part II, column (a), line 29 (must agree with	
	9,155
3 Other increases not included in line 2 (itemize) ▶ 3	9,155 0,927
5 Decreases not included in line 2 (itemize) ▶	
6 Total net assets or fund balances at end of year (line 4 minus line 5) – Part II, column (b), line 29	0,927

Part IV Capital Gains and	Losses for Tax on Investm	ent Income			<del></del>	rage
(a) List and describe the k	kind(s) of property sold (for example, real estate, buse, or common stock, 200 shs MLC Co )		(b) How acquired P – Purchase D – Donation	(c) Date a (mo , da		(d) Date sold (mo , day, yr )
1a FIDELITY		· · · · · · · · · · · · · · · · · · ·	- Sonolion			
b						
C						
_d			<u> </u>	<u> </u>		
е		<del></del>	<u> </u>	ļ. <u> </u>		
(e) Gross sales price	(f) Depreciation allowed (or allowable)		or other basis ense of sale		(h) Gain ((e) plus (f)	• •
a 162,393						162,393
b						
С						
d						
<u>e</u>				ļ		
Complete only for assets showing ga	ain in column (h) and owned by the f	oundation on 12/31.	/69			(h) gain minus
(ı) FMV as of 12/31/69	(j) Adjusted basis as of 12/31/69		ess of col (i) ol (j), if any	col	(k), but not I Losses (fro	less than -0-) or om col (h))
а						162,393
b	·					
С						
d						
e						, ,
2 Capital gain net income or (net capit	al loss) If gain, also enter in If (loss), enter -0- in			2		162,393
3 Net short-term capital gain or (loss) a lf gain, also enter in Part I, line 8, col	• • • • • • • • • • • • • • • • • • • •	· _				
Part I, line 8	- C4: 4040(-) f D			3	<del></del>	
	er Section 4940(e) for Reduc			ome		
(For optional use by domestic private fou	indations subject to the section 4940	J(a) tax on net inves	stment income )			
If section 4940(d)(2) applies, leave this p	oart blank					
Was the foundation liable for the section			base period?			Yes X No
If "Yes," the foundation doesn't qualify ur	nder section 4940(e) Do not comple	te this part				
1 Enter the appropriate amount in each	h column for each year, see the inst	ructions before mak	ing any entries			
(a) Base period years	(b)		(c)		Distr	(d) ribution ratio
Calendar year (or tax year beginning in)	Adjusted qualifying distributions		ue of noncharitable-use asse		(col (b) d	livided by col (c))
2018		,270	6,877,			0.046862
2017		,748	6,826,			0.048307
2016		,769	6,260,			0.047884
2015		, 696 130	6,464,			0.042804 0.043349
2014	211	,120	6,392,	720	Т	0.043343
2 Total of line 1, column (d)				2		0.229206
3 Average distribution ratio for the 5-ye	ear base period - divide the total on	line 2 by 5 0, or by				
the number of years the foundation h	has been in existence if less than 5 y	/ears		3	<del> </del>	0.045841
4 Enter the net value of noncharitable-	use assets for 2019 from Part X, line	e 5		4	<u> </u>	6,748,011
5 Multiply line 4 by line 3				5	<del> </del>	309,336
6 Enter 1% of net investment income (	1% of Part I, line 27b)			6	-	2,997
7 Add lines 5 and 6				7	-	312,333
8 Enter qualifying distributions from Pa						313,000
If line 8 is equal to or greater than lin Part VI instructions	e /, check the box in Part VI, line 1t	o, and complete tha	t part using a 1% tax	rate See th	<u> </u>	

Did the foundation have unrelated business gross income of \$1,000 or more during the year? 4a

b If "Yes," has it filed a tax return on Form 990-T for this year?

Was there a liquidation, termination, dissolution, or substantial contraction during the year? If "Yes," attach the statement required by General Instruction T

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?

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

8a Enter the states to which the foundation reports or with which it is registered. See instructions

None

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

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 instructions for Part XIV If "Yes," complete Part XIV

Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses

Form 990-PF (2019)

X

X

X

X

4a

4b

5

6

7

8b

9

10

X

N/A

Pa	art VII-A Statements Regarding Activities (continued)					
		•			Yes	No
11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the					
	meaning of section 512(b)(13)? If "Yes," attach schedule See instructions			11		<u> </u>
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		<u> </u>
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption applica	ation?		13	X	
	Website address ► N/A					
14	The books are in care of ▶ GUERIN S WILKINSON Telep	hone no 🕨	734-9	04-	148	4
	2170 S ZEEB ROAD					
	Located at ▶ ANN ARBOR MI	ZIP+4 ▶	48103	3		
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 ▶					
Pa	urt VII-B   Statements Regarding Activities for Which Form 4720 May Be Required					
	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.				Yes	No.
1a	During the year, did the foundation (either directly or indirectly)		_			
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person?	Yes	X No			ł
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a		C22	i l		
	disqualified person?	Yes	X No			
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?	Yes	X No			
	(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					- 1
	the benefit or use of a disqualified person)?	Yes	X No			ł
	(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)	Yes	X No			ŀ
ь	If any answer is "Yes" to 1a(1)–(6), did any of the acts fail to qualify under the exceptions described in		37/3			
	Regulations section 53 4941(d)-3 or in a current notice regarding disaster assistance? See instructions		N/A	1b		1
	Organizations relying on a current notice regarding disaster assistance, check here		▶ □			1
С	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that		N/A			
	were not corrected before the first day of the tax year beginning in 2019?		N/A	1c		<del></del> -i
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private					1
	operating foundation defined in section 4942(j)(3) or 4942(j)(5))					1
а	At the end of tax year 2019, did the foundation have any undistributed income (Part XIII, lines	□ vos	X No			
	6d and 6e) for tax year(s) beginning before 2019?  If "Yes," list the years ▶ 20 , 20 , 20 , 20	∐ Yes	MO			- 1
b	If "Yes," list the years ► 20 , 20 , 20 , 20  Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2)					ŀ
D	(relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to					1
	all years listed, answer "No" and attach statement – see instructions )		N/A	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					1
·	► 20 , 20 , 20 , 20 , 20					1
3a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise					1
-	at any time during the year?	Yes	X No			
b	If "Yes," did it have excess business holdings in 2019 as a result of (1) any purchase by the foundation or		٠٠٠ ب			- 1
-	disqualified persons after May 26, 1969, (2) the lapse of the 5-year period (or longer period approved by the					ı
	Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest, or (3) the lapse of					l
	the 10-, 15-, or 20-year first phase holding period? (Use Form 4720, Schedule C, to determine if the					]
	foundation had excess business holdings in 2019 )		N/A	3b		
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purpose	<b>د</b> 7	*	4á		X
b	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its					
	charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2			4b		<u>x</u>
			F	orm 99	0-PF	(2019)

Dage	6
Page	v

⊢Pa	art VII-B  Statements Regarding A	ctivities for Which Form	4720 May Be R	equired (co	ntinue	ed)			
5a	During the year did the foundation pay or incur	any amount to						Yes	No
	(1) Carry on propaganda, or otherwise attempt	to influence legislation (section	4945(e))?		Yes	X No			
	(2) Influence the outcome of any specific public	election (see section 4955), or	to carry on,			_			1
	directly or indirectly, any voter registration of	lrıve?			Yes	X No			1
	(3) Provide a grant to an individual for travel, st	udy, or other similar purposes?			Yes	X No			
	(4) Provide a grant to an organization other tha	n a charitable, etc , organizatior	described in			_			1
	section 4945(d)(4)(A)? See instructions				Yes	X No			į
	(5) Provide for any purpose other than religious	s, charitable, scientific, literary, c	r educational						
	purposes, or for the prevention of cruelty to	children or animals?			Yes	X No			- 1
b	If any answer is "Yes" to 5a(1)-(5), did any of the	ne transactions fail to qualify und	ler the exceptions d	escribed		4-			
	in Regulations section 53 4945 or in a current n			ns		N/A	5b		
	Organizations relying on a current notice regard	_				▶ ∐			1
С	If the answer is "Yes" to question 5a(4), does the		om the tax	/ <u></u>					
	because it maintained expenditure responsibility	•		N/A _	Yes	∐ No			
_	If "Yes," attach the statement required by Regu	• •							
6a	Did the foundation, during the year, receive any	funds, directly or indirectly, to p	ay premiums			₩			
	on a personal benefit contract?				Yes	X No			$\overline{\mathbf{x}}$
b	Did the foundation, during the year, pay premiu	ms, directly or indirectly, on a pe	rsonai benetit contr	act /			6b	$\vdash \vdash \vdash$	<u> </u>
7-	If "Yes" to 6b, file Form 8870  At any time during the tax year, was the founda	tion a north to a prohibited towar	helter transaction?		Yes	X No			}
/a b	If "Yes," did the foundation receive any proceed			tion?	163	N/A	7b		
8	Is the foundation subject to the section 4960 tax			don.		• • • • • • • • • • • • • • • • • • • •	- 10		1
•	remuneration or excess parachute payment(s)	, ,	,000,000 111	-	Yes	X No			
Pa	art VIII Information About Officers		oundation Mana	agers. High	lv Pai	d Employ	ees.	L	
	and Contractors	,,,		-g-:-,g.:	.,	,	<b>,</b>		
1 L	ist all officers, directors, trustees, and found	ation managers and their com	pensation. See ins	structions.					
			•						
			(b) Title and average	(c) Compensation		Contributions to	i _		
	(a) Name and address		(b) Title, and average hours per week	(c) Compensation (If not paid,	e	Contributions to mployee benefit ans and deferred		pense ad er allowar	
	(a) Name and address				e pla	mployee benefit			
DR	(a) Name and address  STEPHEN WILKINSON	MARSHALL	hours per week	(If not paid,	e pla	mployee benefit ans and deferred			
		MARSHALL NC 28753	hours per week devoted to position	(If not paid,	e pla	mployee benefit ans and deferred	othe		
92	. STEPHEN WILKINSON		hours per week devoted to position  PRESIDENT	(If not paid,	e pla	mployee benefit ans and deferred compensation	othe		
92 GU	STEPHEN WILKINSON S UPPER BRANCH CREEK	NC 28753	hours per week devoted to position  PRESIDENT 0.50  TREASURER 1.00	(If not paid,	e pla	mployee benefit ans and deferred compensation	othe		
92 GU 21	STEPHEN WILKINSON  UPPER BRANCH CREEK  ERIN S WILKINSON	NC 28753 ANN ARBOR MI 48103 BLOOMFIELD HILLS	hours per week devoted to position  PRESIDENT 0.50  TREASURER 1.00  SECRETARY	(If not paid,	e pla	mployee benefit ans and deferred compensation	othe		0 0
92 GU 21 TO	. STEPHEN WILKINSON 5 UPPER BRANCH CREEK ERIN S WILKINSON 70 S ZEEB ROAD	NC 28753 ANN ARBOR MI 48103	hours per week devoted to position  PRESIDENT 0.50  TREASURER 1.00	(If not paid,	e pla	mployee benefit ans and deferred compensation	othe		o O
92 GU 21 TO	S. STEPHEN WILKINSON  5 UPPER BRANCH CREEK  FERIN S WILKINSON  70 S ZEEB ROAD  DDD S WILKINSON	NC 28753 ANN ARBOR MI 48103 BLOOMFIELD HILLS	hours per week devoted to position  PRESIDENT 0.50  TREASURER 1.00  SECRETARY	(If not paid,	e pla	mployee benefit ans and deferred compensation	othe		0 0
92 GU 21 TO 70	S. STEPHEN WILKINSON  5 UPPER BRANCH CREEK  FERIN S WILKINSON  70 S ZEEB ROAD  DD S WILKINSON  8 PARKMAN	NC 28753 ANN ARBOR MI 48103 BLOOMFIELD HILLS MI 48304	hours per week devoted to position  PRESIDENT 0.50  TREASURER 1.00  SECRETARY 0.50	(If not paid, enter -0-)	0 0	mployee benefit ans and deferred compensation	othe		0 0
92 GU 21 TO	S. STEPHEN WILKINSON  5 UPPER BRANCH CREEK  ERIN S WILKINSON  70 S ZEEB ROAD  DDD S WILKINSON  8 PARKMAN  Compensation of five highest-paid employee	NC 28753 ANN ARBOR MI 48103 BLOOMFIELD HILLS MI 48304	hours per week devoted to position  PRESIDENT 0.50  TREASURER 1.00  SECRETARY 0.50	(If not paid, enter -0-)	0 0	mployee benefit ans and deferred compensation	othe		0 0
92 GU 21 TO 70	S. STEPHEN WILKINSON  5 UPPER BRANCH CREEK  FERIN S WILKINSON  70 S ZEEB ROAD  DD S WILKINSON  8 PARKMAN	NC 28753 ANN ARBOR MI 48103 BLOOMFIELD HILLS MI 48304	hours per week devoted to position  PRESIDENT 0.50  TREASURER 1.00  SECRETARY 0.50  on line 1 - see inst	(If not paid, enter -0-)	o o o one, er	mployee benefit ans and deferred compensation  C	othe		0 0
92 GU 21 TO 70	S. STEPHEN WILKINSON  5 UPPER BRANCH CREEK  FERIN S WILKINSON  70 S ZEEB ROAD  DDD S WILKINSON  8 PARKMAN  Compensation of five highest-paid employed  "NONE."	NC 28753 ANN ARBOR MI 48103 BLOOMFIELD HILLS MI 48304 es (other than those included	hours per week devoted to position  PRESIDENT 0.50  TREASURER 1.00  SECRETARY 0.50  on line 1 – see inst	(If not paid, enter -0-)	O O O O O O O O O O O O O O O O O O O	mployee benefit ans and deferred compensation  C  C  C  C  C  C  C  C  C  C  C  C  C	(e) Ex	er allowar	0 0 0 ccount,
92 GU 21 TO 70	S. STEPHEN WILKINSON  5 UPPER BRANCH CREEK  ERIN S WILKINSON  70 S ZEEB ROAD  DDD S WILKINSON  8 PARKMAN  Compensation of five highest-paid employee	NC 28753 ANN ARBOR MI 48103 BLOOMFIELD HILLS MI 48304 es (other than those included	hours per week devoted to position  PRESIDENT 0.50  TREASURER 1.00  SECRETARY 0.50  on line 1 - see inst	(If not paid, enter -0-)	O O O O O O O O O O O O O O O O O O O	mployee benefit ans and deferred compensation  C  C  There  Contributions to	(e) Ex	er allowar	0 0 0 ccount,
92 GU 21 TO 70	S. STEPHEN WILKINSON  5 UPPER BRANCH CREEK  FERIN S WILKINSON  70 S ZEEB ROAD  DDD S WILKINSON  8 PARKMAN  Compensation of five highest-paid employed  "NONE."	NC 28753 ANN ARBOR MI 48103 BLOOMFIELD HILLS MI 48304 es (other than those included	hours per week devoted to position  PRESIDENT 0.50  TREASURER 1.00  SECRETARY 0.50  on line 1 – see inst	(If not paid, enter -0-)	O O O O O O O O O O O O O O O O O O O	mployee benefit ans and deferred compensation  Compensation  Compensation  Compensation  Compensation	(e) Ex	er allowar	0 0 0 ccount,
922 GU 211 TO 700	S. STEPHEN WILKINSON  5 UPPER BRANCH CREEK  FERIN S WILKINSON  70 S ZEEB ROAD  FODD S WILKINSON  8 PARKMAN  Compensation of five highest-paid employee  "NONE."	NC 28753 ANN ARBOR MI 48103 BLOOMFIELD HILLS MI 48304 es (other than those included	hours per week devoted to position  PRESIDENT 0.50  TREASURER 1.00  SECRETARY 0.50  on line 1 – see inst	(If not paid, enter -0-)	O O O O O O O O O O O O O O O O O O O	mployee benefit ans and deferred compensation  Compensation  Compensation  Compensation  Compensation	(e) Ex	er allowar	0 0 0 ccount,
92 GU 21 TO 70	S. STEPHEN WILKINSON  5 UPPER BRANCH CREEK  FERIN S WILKINSON  70 S ZEEB ROAD  FODD S WILKINSON  8 PARKMAN  Compensation of five highest-paid employee  "NONE."	NC 28753 ANN ARBOR MI 48103 BLOOMFIELD HILLS MI 48304 es (other than those included	hours per week devoted to position  PRESIDENT 0.50  TREASURER 1.00  SECRETARY 0.50  on line 1 – see inst	(If not paid, enter -0-)	O O O O O O O O O O O O O O O O O O O	mployee benefit ans and deferred compensation  Compensation  Compensation  Compensation  Compensation	(e) Ex	er allowar	0 0 0 ccount,
92 GU 21 TO 70	S. STEPHEN WILKINSON  5 UPPER BRANCH CREEK  FERIN S WILKINSON  70 S ZEEB ROAD  FODD S WILKINSON  8 PARKMAN  Compensation of five highest-paid employee  "NONE."	NC 28753 ANN ARBOR MI 48103 BLOOMFIELD HILLS MI 48304 es (other than those included	hours per week devoted to position  PRESIDENT 0.50  TREASURER 1.00  SECRETARY 0.50  on line 1 – see inst	(If not paid, enter -0-)	O O O O O O O O O O O O O O O O O O O	mployee benefit ans and deferred compensation  Compensation  Compensation  Compensation  Compensation	(e) Ex	er allowar	0 0 0 ccount,
92 GU 21 TO 70	S. STEPHEN WILKINSON  5 UPPER BRANCH CREEK  FERIN S WILKINSON  70 S ZEEB ROAD  FODD S WILKINSON  8 PARKMAN  Compensation of five highest-paid employee  "NONE."	NC 28753 ANN ARBOR MI 48103 BLOOMFIELD HILLS MI 48304 es (other than those included	hours per week devoted to position  PRESIDENT 0.50  TREASURER 1.00  SECRETARY 0.50  on line 1 – see inst	(If not paid, enter -0-)	O O O O O O O O O O O O O O O O O O O	mployee benefit ans and deferred compensation  Compensation  Compensation  Compensation  Compensation	(e) Ex	er allowar	O O count,
92 GU 21 TO 70	S. STEPHEN WILKINSON  5 UPPER BRANCH CREEK  FERIN S WILKINSON  70 S ZEEB ROAD  FODD S WILKINSON  8 PARKMAN  Compensation of five highest-paid employee  "NONE."	NC 28753 ANN ARBOR MI 48103 BLOOMFIELD HILLS MI 48304 es (other than those included	hours per week devoted to position  PRESIDENT 0.50  TREASURER 1.00  SECRETARY 0.50  on line 1 – see inst	(If not paid, enter -0-)	O O O O O O O O O O O O O O O O O O O	mployee benefit ans and deferred compensation  Compensation  Compensation  Compensation  Compensation	(e) Ex	er allowar	0 0 0 ccount,
922 GU 211 TO 700	S. STEPHEN WILKINSON  5 UPPER BRANCH CREEK  FERIN S WILKINSON  70 S ZEEB ROAD  FODD S WILKINSON  8 PARKMAN  Compensation of five highest-paid employee  "NONE."	NC 28753 ANN ARBOR MI 48103 BLOOMFIELD HILLS MI 48304 es (other than those included	hours per week devoted to position  PRESIDENT 0.50  TREASURER 1.00  SECRETARY 0.50  on line 1 – see inst	(If not paid, enter -0-)	O O O O O O O O O O O O O O O O O O O	mployee benefit ans and deferred compensation  Compensation  Compensation  Compensation  Compensation	(e) Ex	er allowar	0 0 0 ccount,
92 GU 21 TO 70	S. STEPHEN WILKINSON  5 UPPER BRANCH CREEK  FERIN S WILKINSON  70 S ZEEB ROAD  FODD S WILKINSON  8 PARKMAN  Compensation of five highest-paid employee  "NONE."	NC 28753 ANN ARBOR MI 48103 BLOOMFIELD HILLS MI 48304 es (other than those included	hours per week devoted to position  PRESIDENT 0.50  TREASURER 1.00  SECRETARY 0.50  on line 1 – see inst	(If not paid, enter -0-)	O O O O O O O O O O O O O O O O O O O	mployee benefit ans and deferred compensation  Compensation  Compensation  Compensation  Compensation	(e) Ex	er allowar	0 0 0 ccount,
92 GU 21 TO 70	S. STEPHEN WILKINSON  5 UPPER BRANCH CREEK  FERIN S WILKINSON  70 S ZEEB ROAD  FODD S WILKINSON  8 PARKMAN  Compensation of five highest-paid employee  "NONE."	NC 28753 ANN ARBOR MI 48103 BLOOMFIELD HILLS MI 48304 es (other than those included	hours per week devoted to position  PRESIDENT 0.50  TREASURER 1.00  SECRETARY 0.50  on line 1 – see inst	(If not paid, enter -0-)	O O O O O O O O O O O O O O O O O O O	mployee benefit ans and deferred compensation  Compensation  Compensation  Compensation  Compensation	(e) Ex	er allowar	O O count,
92 GU 21 TO 70	S. STEPHEN WILKINSON  5 UPPER BRANCH CREEK  FERIN S WILKINSON  70 S ZEEB ROAD  FODD S WILKINSON  8 PARKMAN  Compensation of five highest-paid employee  "NONE."	NC 28753 ANN ARBOR MI 48103 BLOOMFIELD HILLS MI 48304 es (other than those included	hours per week devoted to position  PRESIDENT 0.50  TREASURER 1.00  SECRETARY 0.50  on line 1 – see inst	(If not paid, enter -0-)	O O O O O O O O O O O O O O O O O O O	mployee benefit ans and deferred compensation  Compensation  Compensation  Compensation  Compensation	(e) Ex	er allowar	O O count,

3 Five highest-paid independent contractors for professional services. See ins	tructions. If none, enter "NONE."
(a) Name and address of each person paid more than \$50,000	(b) Type of service (c) Compensati
NONE	
otal number of others receiving over \$50,000 for professional services	<b>&gt;</b>
PartIIX-A Summary of Direct Charitable Activities	
List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical informatio organizations and other beneficiaries served, conferences convened, research papers produced, etc.	on such as the number of Expenses
1 N/A	
2	
3	
4	
Partix B Summary of Program-Related Investments (see inst	ructions)
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	

Minimum Investment Return (All domestic foundations must complete this part. Foreign foundations, see instructions ) 1 Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes Average monthly fair market value of securities 1a 6,779,717 Average of monthly cash balances 1b Fair market value of all other assets (see instructions) 1c С 6,850 Total (add lines 1a, b, and c) 1d Reduction claimed for blockage or other factors reported on lines 1a and 0 1c (attach detailed explanation) 2 2 Acquisition indebtedness applicable to line 1 assets 6,850, 3 3 Subtract line 2 from line 1d Cash deemed held for charitable activities Enter 11/2% of line 3 (for greater amount, see 102,762 4 6,748,011 5 Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4. 5 Minimum investment return. Enter 5% of line 5 337,401 Part XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations and certain foreign organizations, check here ▶ | and do not complete this part) 337,401 Minimum investment return from Part X, line 6 2,997 2a Tax on investment income for 2019 from Part VI, line 5 Income tax for 2019 (This does not include the tax from Part VI) 2c Add lines 2a and 2b C 334,404 Distributable amount before adjustments. Subtract line 2c from line 1 3 Recoveries of amounts treated as qualifying distributions 4 334,404 5 Add lines 3 and 4 5 6 6 Deduction from distributable amount (see instructions) Distributable amount as adjusted Subtract line 6 from line 5 Enter here and on Part XIII, 334,404 line 1 Part XII Qualifying Distributions (see instructions) Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes 313,000 Expenses, contributions, gifts, etc - total from Part I, column (d), line 26 1a 1b Program-related investments - total from Part IX-B 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: Suitability test (prior IRS approval required) 3a b Cash distribution test (attach the required schedule) 3b 313,000 Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4 4 5 Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income 2,997 5 Enter 1% of Part I, line 27b See instructions Adjusted qualifying distributions. Subtract line 5 from line 4 6 Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation qualifies for the section 4940(e) reduction of tax in those years

Form 990-PF (2019)

₽	art-XIII Undistributed Income (see instructions)				
		(a)	(b)	(c)	(d)
1	Distributable amount for 2019 from Part XI,	Corpus	Years prior to 2018	2018	2019
	line 7				334,404
2	Undistributed income, if any, as of the end of 2019				
а	Enter amount for 2018 only				
	Total for prior years 20 , 20 , 20				
3	Excess distributions carryover, if any, to 2019	·			
а	From 2014		1		
b	From 2015				
С	From 2016				
	From 2017				
	From 2018				
	Total of lines 3a through e				
4	Qualifying distributions for 2019 from Part XII,				
	line 4 ▶ \$313,000				
а	Applied to 2018, but not more than line 2a			H	
	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			-	313,000
	Remaining amount distributed out of corpus				
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:				
а	Corpus Add lines 3f, 4c, and 4e Subtract line 5				
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				21,404
7	Amounts treated as distributions out of corpus				
	to satisfy requirements imposed by section				
	170(b)(1)(F) or 4942(g)(3) (Election may be				
	required—see instructions)				
8	Excess distributions carryover from 2014 not				
	applied on line 5 or line 7 (see instructions)				
9	Excess distributions carryover to 2020.				
	Subtract lines 7 and 8 from line 6a				
0	Analysis of line 9		1		
а	Excess from 2015		1		
b	Excess from 2016				
С	Excess from 2017		1	,	
d	Excess from 2018		1		
_	E 6040		Ī.		į l

DAA

Pa	irt XIV   Private Operating Fo	undations (see in	structions and Par	t VII-A, question 9	)	
1a	If the foundation has received a ruling o	r determination letter th	nat it is a private opera	ting		
	foundation, and the ruling is effective for	r 2019, enter the date of	of the ruling	<b>&gt;</b>		
b	Check box to indicate whether the found	dation is a private opera	ating foundation descri	bed in section 49	942(J)(3) or 4942	2(j)(5)
2a	Enter the lesser of the adjusted net	Tax year		Prior 3 years		(e) Total
	income from Part I or the minimum	(a) 2019	(b) 2018	(c) 2017	(d) 2016	(e) Iotai
	investment return from Part X for					
	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	/				
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	•				
Pa	rt XV_ Supplementary Inform	mation (Complete	this part only if	the foundation b	ad \$5 000 or more	in assets at
_ 1_ 4	any time during the y	•	•	the roundation in	uu 40,000 or more	, iii ussotis at
1	Information Regarding Foundation M					
a	List any managers of the foundation who	<del>-</del>	e than 2% of the total	contributions received	by the foundation	
_	before the close of any tax year (but only					
	N/A	y ii aloy havo conaibaa	54 more and 1 40,000)	(000 000 00. (4)(2)	, ,	
b	List any managers of the foundation who	own 10% or more of t	the stock of a cornorat	on (or an equally large	nortion of the	
-	ownership of a partnership or other entit					-
	N/A	y, or minor and rounded	.on 1120 a 70 70 0. g/oa			
2	Information Regarding Contribution,	Grant, Gift, Loan, Sch	olarship, etc., Progra	ams:		
		y makes contributions			loes not accept	
	unsolicited requests for funds If the four	•	· ·	=		
	complete items 2a, b, c, and d See inst		unto, 010 ; to mainida.	o or organizations are		
а	The name, address, and telephone num		f the person to whom :	annlications should be	addressed	· · · · · · · · · · · · · · · · · · ·
_	N/A	iber of email address o	the person to whom	applications official so	444.0004	
	,					
b	The form in which applications should be	e submitted and inform	ation and materials the	ev should include		
5	N/A	o sabriillea ana imbini	ation and materials (16	sy anouna monade		
c	Any submission deadlines			·		<del></del>
•	N/A					
d	Any restrictions or limitations on awards	. such as by geographi	cal areas, charitable fi	elds, kinds of institutio	ns, or other	
-	factors	,	and the second s	,	-, <del></del>	
	N/A					

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 dunng the year CATHEDRAL CAPITAL FUND 501C(3) COMMUNITY 14,000 CATHEDRAL SCHOOL SCHOOL 2,500 EDUCATION CATHEDRAL SCHOOL 1,000 CITY HOPE 2,000 BURKES SCHOOL FOR GIRLS 7070 CALIFORNIA 7,000 SAN FRANCISCO CA 94121 SANTA CATALINA 500 HILLSDALE COLLEGE 33 E COLLEGE ST SCHOOL EDUCATION 500 HILLSDALE MI 49242 SF BAY AREA COUNCIL BSA 1001 DAVIS ST 501C(3) COMMNITY 500 SAN LEANDRO CA 94577 THE BRANSON SCHOOL SCHOOL EDUCATION 7,000 WFMU P.O. BOX 2011 501C(3) JERSEY CITY NJ 07303 COMMUNITY 1,000 313,000 Total **b** Approved for future payment N/A ▶ 3b Total

TOTAL SOUTH TOTAL			0497033		rage 12
Part XVI-A Analysis of Income-Producing Act				section 512, 513, or 514	
Enter gross amounts unless otherwise indicated	Unrelated	(e)			
	(a)	(b)	(c)	(d)	Related or exempt
	Business code	Amount	Exclusion code	Amount	function income (See instructions)
1 Program service revenue		·	<b>_</b>		(See Instructions )
a	<u> </u>		$\bot$		
b			<del>                                     </del>		
c					
d					
e					
f					
g Fees and contracts from government agencies					
2 Membership dues and assessments	,				
3 Interest on savings and temporary cash investments			14	154	
4 Dividends and interest from securities		-	14	178,310	
5 Net rental income or (loss) from real estate			<del>   </del> -		
a Debt-financed property			+ +		
· · ·	<b>———</b>	<del> </del>	+ +		<del></del>
b Not debt-financed property			+ +		
6 Net rental income or (loss) from personal property			+ +		
7 Other investment income			1.0	1.00 000	
8 Gain or (loss) from sales of assets other than inventory			18	162,393	44,269
9 Net income or (loss) from special events					
10 Gross profit or (loss) from sales of inventory			<u> </u>		
11 Other revenue a			<del>                                     </del>		
b					
c					
d					
e		•			
12 Subtotal Add columns (b), (d), and (e)		(		340,857	44,269
13 Total. Add line 12, columns (b), (d), and (e)				13	385,126
(See worksheet in line 13 instructions to verify calculations)					
Part XVI-B Relationship of Activities to the Ac	complishme	ent of Exempt P	urposes		
Line No. Explain below how each activity for which income	is reported in co	lumn (e) of Part XVI	-A contribute	d importantly to the	
▼ accomplishment of the foundation's exempt purpo					ns )
N/A	•				
					'
				· · · · · · · · · · · · · · · · · · ·	
	<del></del>	<u> </u>		<del></del>	
				-	
		<del></del>			
					<del></del> -

orm 990	)-PF (201	9) WILKIN	ISON	FOUNI	OATION		38-6497639		Р	age 13
Part )			_	rding Tr	ansfers To an	n <del>d Transacti</del> o	ns and Relationships V	/ith-Noncharitab	le-Exem	pt
		<u>Organizatior</u>	าร							
1 Did	I the orga	inization directly	or indi	rectly engaç	ge in any of the fo	llowing with any	other organization described		Yes	No
ın s	section 5	01(c) (other than	sectio	n 501(c)(3)	organizations) or	ın section 527, re	elating to political			
org	anızatıor	s?							<u> </u>	
a Tra	insfers fr	om the reporting	founda	ation to a no	oncharitable exem	pt organization o	f			
	Cash	_				. •			1a(1)	X
	Other a	seete							1a(2)	X
• •	ner transa								10(2/	
		-							41.44	
		assets to a none		•	_				1b(1)	X
(2)	Purchas	es of assets fron	n a no	ncharitable	exempt organizat	ion			1b(2)	X
(3)	Rental	of facilities, equip	ment,	or other ass	ets				1b(3)	X
(4)	Reımbu	rsement arrangei	ments						1b(4)	X_
(5)	Loans o	r loan guarantee:	s						1b(5)	X
(6)	Perform	ance of services	or me	mbership o	r fundraising solic	itations			1b(6)	X
				•	ther assets, or pa				1c	X
	-			-			mn (b) should always show the	fair market	<u> </u>	
		-			•	-	the foundation received less th			
				_		_				
		(b) Amount involv					the goods, other assets, or ser			
(a) Lir	10 110	(b) Amount involv	/ea	(c) Name	e of noncharitable exen	npt organization	(d) Description of transfers,	transactions, and sharing arr	angements	
N/A										
						<del></del>				
							_			
		-								
_										
							·			
		***								
			-							
						··				
_										
2a Ist	he found	ation directly or in	ndırect	ly affiliated	with, or related to	, one or more tax	-exempt organizations	,		_
des	cribed in	section 501(c) (d	other t	han section	501(c)(3)) or in s	ection 527?			Yes	K No
b If"	res," con	plete the followi	ng sch	edule						
	(6	) Name of organization	n		(b) Type of (	organization	(c) Desc	ription of relationship		
N/2	4									
•										
								<del></del>		
1	Under nen	alties of periury. I dec	lare tha	t I have examir	ned this return, includir	no accompanyino schi	Ledules and statements, and to the best of	of my knowledge and belief.	if is frue	
							which preparer has any knowledge			
								May the IRS discu with the preparer		
Sign								See instructions	X Yes	□ No I
lere	. /		\			. ~	111 1	<u> </u>		
	$\subseteq$		7		>		14-2020 TRE	ASURER		
	Signa	ture of officer or truste	е			Date	Title			
	Print/Ty	oe preparer's name				Preparer's signatur		Date	Chos	k X n
	]					MA	6			mployed
Paid	Micha	el B. List	u11			Michael B	Lisull	07/10		
reparer	Firm's n			el B.	Lisull,	CPA	·		22725	8
Jse Only	·				Hills D		· · · · · · · · · · · · · · · · · · ·		27819	
	rımı's a								-994-:	
	L	An	11 A	rbor,	MI 4810	4		Phone no /34	<del>- , , , , , .</del>	1043

Part XV | Supplementary Information (continued) 3 Grants and Contributions Paid During the Year or Approved for Future Payment If recipient is an individual, Recipient Foundation 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 KLAMATH SISKIYOU WILDLIFE 500 CORNER HEALTH CENTER 47 N HURON 501C(3) YPSILANTI MI 48197 COMMUNITY 2,000 FOOD GATHERERS 1 CARROT WAY 501C(3) ANN ARBOR MI 48105 COMMUNITY 3,000 OZONE HOUSE 1705 WASHTENAW 501C(3) ANN ARBOR MI 48104 COMMUNITY 1,000 HURON RIVER WATERSHED COUNCIL 1000 N MAIN 501C(3) ANN ARBOR MI 48104 COMMUNITY 1,000 WDET 4600 CASS AVE 501C(3) DETROIT MI 48201 COMMUNITY 500 ELE'S PLACE 3526 W LIBERTY SUITE 200 501(C) 3 ANN ARBOR MI 48103 COMMUNITY 2,000 FAITH IN ACTION 603 S MAIN ST 501C(3) CHELSEA MI COMMNITY 1,000 CHELSEA AREA FESITVAL 222 S MAIN STE B 501C(3) CHELSEA MI 48130 COMMUNITY 1,000 BALLET CHELSEA 1050 S MAIN ST 501 C(3) 5,000 CHELSEA MI 48130 COMMUNITY Total b Approved for future payment N/A 3b 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 Paid during the year AVALON HOUSING 404 W WASHIGTON 501 (3) ANN ARBOR MI 48104 COMMNITY 5,250 THINK DETROUT PAL 111 WEST WILLIS 501C(3) DETOIT MI 48226 COMMUNITY 1,000 SISTER CITY OF CHELSEA 5200 S LAKE DR 501C(3) COMMNITY 500 CHELSEA, MI 48130 CHELSEA CHMABER PLAYERS P.O. BOX 572 501(C) 3 CHELSEA MI 48130 COMMUNITY 500 JACKSON SYPHONY ORCHESTRA 215 W MICHIGAN 501(C) 3 1,000 JACKSON MI 49201 COMMUNITY MEDICINES SANS FRONTIERS 40 RECTOR ST 16TH FLR 501C(3) NEW YORK NY 10001 COMMUNITY 6,500 PURPLE ROSE THEATRE 137 PARK ST 501 (C) 3 CHELSEA MI 48130 COMMUNITY 1,000 THE ARK MAIN ST 501C(3) ANN ARBOR MI 48104 COMMUNITY 500 DETROIT INSTITURE OF ARTS 5200 WOODWARD 501C(3) COMMU NITY 2,600 DETROIT MI 48202 FOUR CONERS EQUIUNE RESCUE 501C(3) COMMUNITY 250 ▶ 3a Total b Approved for future payment N/A ▶ 3b **Total** 

EPart: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 AMERICAN RED CROSS P.O. BOX 44110 501C(3) DETROIT MI 48244 COMMUNITY 500 REQUEST UP ASPCA 501C(3) ` COMMUNITY 250 CAPUCHIN SOUP KITCHEN 1760 MT ELLIOTT 501C(3) DETROIT MI 48207 500 COMMUNITY BEST FRIENDS 5001 ANGEL CANYON RD 501C(3) **KANAB UT 84741** COMMUNITY 500 OXFAM AMERICA 1101 17TH ST NW 501C(3) WASHINGTON DC 20036 COMMUNITY 1,000 MICHIGAN HUMANE SOCIETY 7401 CHRYSLER 501C(3) DETROIT MI 48211 COMMUNITY 1,000 **AMERICARES** 88 HAMILTON 501C(3) STAMFORD CT 06902 COMMUNITY 1,000 NEIGHBORHOOD CLUB 17150 WATERLOO 501C(3) GROSSE POINT MI 48230 COMMUNITY 500 GOOD FELLOWS 490 SHELLBOURNE RD 501C(3) GROSSE POINTE FARMS MI 48 COMMUNITY 250 DETROIT PUBLIC TV 48393 501C(3) 1 CLOVER COURT WIXOM MI COMMUNITY 2,500 Total ▶ 3a b Approved for future payment N/A ▶ 3b Total

Part-XV-1 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 Paid during the year BELLE ISLE CONVERSANCY 501C(3) DETROIT MI COMMUNITY 300 SALVATION ARMY 501C(3) 16030 NORTHLAND DR COMMUNITY 1,000 SOUTHFIELD MI 48075 DETROIT ZOO 8450W TEN MILE RD 501C(3) ROYAL OAK MI 48067 COMMUNITY 2,000 HABITAT FOR HUMMANITY 500 WASHINGTON ST 501C(3) COMMUNITY 500 SAN FRANCISCO CA 94111 COMPASSION & CHOICES P.O. BOX 485 501C(3) 500 COMMUNITY **ETNA NH 03750** LEADER DOGS FOR THE BLIND 1039 S ROCHESTER 501C(3) 6,000 COMMUNITY ROCHESTER MI 48307 HUMANE SOCIETY OF AMERICA 7401 CHRYSLER 501C(3) 250 DETROIT MI 48211 COMMUNITY HEIFER INTERNATIONAL 1 WORLD AVE 501C(3) LITTLE ROCK AR 72202 COMMUNITY 1,000 WORLD WILDLIFE FUND 125024TH ST 501C(3) COMMUNITY 1,000 WASHINGTON DC 20037 MERCY CORPS 45 SW ANKENY 501C(3) COMMUNITY 1,000 PORTLAND OR 97204 ▶ 3a Total **b** Approved for future payment N/A **▶** 3b Total

3 Grants and Contributions Paid During the Year or Approved for Future Payment If recipient is an individual, Recipient Foundation 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 Paid during the year LIONS LAKE BEAR CLUB 3409 5 LAKES RD 501C(3) LAPEER MI 48446 COMMUNITY 4,000 CASS CLINIC 3745 CASS AVE 501C(3) DETROIT MI 48201 9,000 COMMUNITY HUMANE SOCIETY OF MACOMB 11350 22 MILE RD 501C(3) **UTICA MI 48317** COMMUNITY 3,000 DETROIT ZOO 8450 W TEN MILE RD 501C(3) ROYAL OAK MI 48067 COMMUNITY 500 SALAVATION ARMY 16030 Northland Dr 501C(3) Southfield MI 48075 COMMUNITY 1,500 COTS 26 PETERBORO 501C(3) DETROIT MI 48201 COMMUNITY 6,000 GP CRISIS CLUB 18640 MACK AVE 501 C(3) GROSSE POINT FARMS MI 482 COMMUNITY 6,000 HOLLIS CENTER LIBRARY 501C(3) COMMUNITY 5,000 SACO RIVER THEATRE 29 SALMON FALLS 501C(3) BUXTON ME 04093 COMMUNITY 9,000 MAINE CHILDREN'S CANCER FOUND 501C(3) COMMUNITY 1,000 Total ▶ 3a b Approved for future payment N/A Total  $\blacktriangleright$ 3b

!Part-XV<del>·↓\_\_Supplementary-Information</del>-(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 Paid during the year MAINE PUBLIC RADIO 65 TEXAS AVE 501C(3) BANGOR ME 04401 COMUNITY 2,000 UPPER VALLEY LAND TRUST 19 BUCK RD 501C(3) HANOVER NH 03755 2,000 COMMUNITY GOOD SHEPHERD FOOD BANK 3121 HOTEL RD 501C(3) AUBURN ME 04210 COMMUNITY 5,000 THE LOCKER PROJECT 73 FEDERAL ST 501C(3) PORTLAND ME 04101 COMMUNITY 1,000 BEAR HILL CHURCH CHURCH COMMUNITY 10,000 **MOTHERS** OUT FRONT 45 WEAT 36TH ST 501C(3) NEW YORK NY 10018 14,000 COMMUNITY AMERICAN FRIENDS OF THE BAJIO 3510 ANDREWS LANE 501C(3) RALEIGH NC 27607 COMMUNITY 2,000 BATS 217 N OAK AVE 501C(3) MINERAL WELLS TX 76067 COMMUNITY 3,000 NC ARBORETEUM 501C3) COMMUNTY 5,000 GRANGER COUNTY HUMANE SOCIETY P.O. BOX 229 501C(3) RUTLEDGE TN 37861 COMMUNITY 2,000 Total За b Approved for future payment N/A ▶ 3b Total

-Part-XV-1-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 Paid dunng the year FRIENDS OF MADISON COUNTY ANIMALS 107 S MAIN ST 51C(3) MARSHALL NC 28753 COMMUNITY 250 BROTHER WOLF ANIMAL SHELTER 31 GLENDALE AVE 501C(3) ASHVILLE NC 28804 COMMUNITY 1,000 SEED SAVERS EXCHANGE 3094 NORTH WINN RD 501C(3) DECORAH IA 52101 COMMUNITY 2,000 MADISON COUNTY ANIMAL SHELTER 501C(3) COMMUNITY 10,000 MADISON COUNTY ARTS FESTIVAL 501C(30 COMMUNITY 2,000 AMERICAN CHESTNUT FOUNDATION 20 N MERRIMAM 501C(3) ASHVILLE NC 28804 COMMUNITY 1,000 APPALACHIAN HIGHLAND CONS SOUTHERN 34 WALL ST 501C(3) ASHVILLE NC 28801 COMMUNITY 1,000 HOUSING CORPORATION OF ARLINGTON 252 MASSACHUSETTS 501C(30 ARLINGTON MA 02474 COMMUNITY 2,000 NEGEF 52 STATE ST 501C(3) 5,000 MONTPELIER VT 05602 COMMUNITY MARGARET FULLER HOUSE 71 CHERRY ST 501C(3) CAMBRIDGE MA 02139 COMMUNITY 1,000 Total **>** 3a b Approved for future payment N/A  $\triangleright$ 3b **Total** 

Part-XV | Supplementary-Information-(continued) 3 Grants and Contributions Paid During the Year or Approved for Future Payment If recipient is an individual, 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 Paid during the year ALTERNATIVES FOR CMTY AND EVT 2201 WASHINGTON 501C(3) ROXBURY MA 02119 COMMUNITY 6,000 GREATER BOSTON FOOD BANK 70 BAY AVE 501C(3) BOSTON MA 02118 COMMUNITY 1,000 THE ROBBINS LIBRARY FRIEDNS OF 700 MASS AVE 501C(3) ARLINGTON MA 02476 COMMUNITY 1,000 FRIENDS OF THE ARLINGTON COUNCIL A 9 AMHERST ST 501C(3) ARLINGTON MA 02474 COMMUNITY 1,000 FOOD LINK MA 17 IRVING ST 501C(3) ARLINGTON MA 02476 COMMUNITY 2,000 ARLINGTON FOOD PANTRY 74 PLEASNT ST 501C(3) ARLINGTON MA 02476 COMMUNITY 2,000 TOXICS ACTION CENTER 294 WASHINGTON ST 501C(3) BOSTON MA 02108 COMMUNITY 2,000 WHITING LIBRARY 117 MAIN ST 501C(3) CHESTER VT 05143 COMMUNITY 1,000 ARTLAB J 111 E KIRBY ST 501C(3) DETROIT MI 48202 COMMUNITY 3,000 BEAUMONT FOUNDATION P.O. BOX 5072 501C(3) SOUTHFIELD MI 48086 COMMUNITY 8,000 Total ▶ 3a b Approved for future payment N/A ▶ 3b 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 Paid during the year COMMON GROUND 501C(3) COMMUNITY 2,000 DETROIT HISTORICAL SOCIETY 5401 WOODWARD AVE 501C(3) DETROIT MI 48202 3,000 COMMUNITY HISTORICAL SOCIETY OF MCIHIGAN 7435 WESTSHIRE 501C(3) LANSING MI 48917 COMMUNITY 3,000 MICHIGAN SCHOOL OF PSYCHOLOGY 26811 ORCHARD LAKE RD 501C(3) FARMINGTON HILLS MI 4833 EDUCATION 10,000 NORTHERN MICHIGAN UNIVERSITY 1401 PRESQUE ISLE 501C(3) MARQUETTE MI 49855 EDUCATION 3,000 SIERRA CLUB MICHIGAN CHAPTER 109 E CESAR E CHAVEZ AVE 501C(3) LANSING MI 48906 1,000 COMMUNITY CONCORD HILL SCHOOL 501C(3) EDUCATION 1,500 **HARVARD** 124 MOUNT AUBURN 501C(3) CAMBRIDGE MA 02138 EDUCATION 500 FISHTOWN PRESERVATION 501C(3) COMMUNITY 3,000 COVENANT CHRISTIAN SCHOOL 2143 NORTH BALLAS SCHOOL ST LOUIS MO 63131 EDUCATION 5,000 Total  $\triangleright$ 3a b Approved for future payment N/A ▶ 3b Total

Did VI 1 0	4: 0	30 04370		Page II
Part XV 1 Supplementary Information (co 3 Grants and Contributions Paid During t		or Future Payment		
Recipient	If recipient is an individual, show any relationship to	Foundation status of	Purpose of grant or	Amount
Name and address (home or business)	any foundation manager or substantial contributor	recipient	contribution	Amount
a Paid duning the year VISITATION ACADEMY 3020 NORTH BALLAS ST LOUIS MO 63131		SCHOOL	EDUCATION	6,000
ST LOUIS PRIORY SCHOOL 500 S MASON ST LOUIS MO 63141		SCHOOL	EDUCATION	4,000
PERC 502 SOUTH 19TH AVE BOZEMAN MT 59718		501C(30	COMMUNITY	2,000
FEE		51C(3)	COMMUNITY	4,000
HIGH POINT UNIVERSITY ONE UNIVERSITY PARKWAY HIGH POINT NC 27268		SCHOOL	EDUCATION	10,000
ST LUKES HOSPITAL		501C(3)	COMMUNITY	1,000
THE NATURE CONSERVANCY		501C(3)	COMMUNITY	1,500
DUCKS UNLIMITED		501C(3)	COMMUNITY	2,000
OXFAM AMERICA 1101 17TH ST NW WASHINGTON DC 20036		501C(3)	COMMUNITY	3,000
UNITED WAY		501C(3)	COMMUNITY	3,000
Total b Approved for future payment		Т	▶ 3a	
N/A		,		
Total			<b>▶</b> 3b	

Part-XV- Supplementary Information (continued) 3 Grants and Contributions Paid During the Year or Approved for Future Payment If recipient is an individual, Recipient Foundation 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 Paid during the year DETROIT RESCUE MISSION 501C(3) COMMUNITY 3,600 FOUR CORNERS EQUINE RESCUE 501C(3) CIOMMUINITY 1,000 USO 501C(3) COMMUNITY 2,000 NORTHEAST ANIMAL SHELTER 501C(3) 347 HIGHLAND AVE **SALEM MA 01970** COMMUNITY 1,000 Total ▶ 3a b Approved for future payment N/A ▶ 3b Total

23095F WILKINSON FOUNDATION 38-6497639 FYE: 1/31/2020	Federal S	Federal Statements		7/10/2020 9:00 AM	<u>~</u>
State	Statement 1 - Form 990-PF, P	- Form 990-PF, Part I, Line 6a - Sale of Assets	of Assets		
Description	How Received				
Date Acquired	Date Sale Sold Price	Cost	Expense Depreciation	Net ation Gain / Loss	J
FIDELITY SHORT TERM 12/31/18 12/ FIDELITY LONG TERM	Purchase \$ 1,702 Purchase	\$ 1,570 \$	<b>‹</b> ›	\$ 132	<b>~</b> 1
7/21/16 12/02/19	1,019,618 \$ 1,021,320	\$ 975,481	\$ 0	44,137	<b>716</b>
Statement 2	- Form	990-PF, Part I, Line 16b - Accounting Fees	unting Fees		1
Description	Total	Net Investment	Adjusted Net	Charitable	
	\$ 3,175	\$ 3,175			
Statement 3	- Form 990-PF, Part I	Line 16c - Other Pro	16c - Other Professional Fees	į	ı
Description	Total	Net Investment	Adjusted Net	Charitable Purpose	
	\$ 30,844	\$ 30,844	\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	\$ \$	
				1-3	

23095F WILKINSON FOUNDATION 38-6497639 FYE: 1/31/2020	OUNDATION	Federal	Federal Statements	(s		7/10/2020 9:00 A.M	∑ .
		Statement 4 - Form 990	- Form 990-PF, Part I, Line 18 - Taxes	ine 18 - Taxe	Si		,
Description	u	Total	Net Investment	t nent	Adjusted Net	Charitable Purpose	
TAXES al		\$ 2,694	w w	2,694 \$	0	\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	
	Statement 5 - Form 990-PF,		25 - Noncas	h Contributi	Part I, Line 25 - Noncash Contributions, Gifts, Grants	<u>8</u>	_
0000 0000 0000 0000 0000 0000 0000	Noncash Description	Explanation	Book Value Amount		Book Value Explanation	Date 3/16/19 3/16/19 3/16/19 12/08/19 12/08/19 12/08/19 12/20/19 12/20/19 12/20/19 12/20/19	
	Statement 6	- Form 990-PF, Part II,	Line 10b - Co	rporate Stoc	Corporate Stock Investments		
Description Total	tion	Beginning of Year \$ 3,998,662 \$ \$ 3,998,662	8 8	End of Year 3,711,247 3,711,247	Basis of Valuation Cost	Fair Market  Value  \$ 4,202,419  \$ 4,202,419	
						4-6	

Description	23095F WILKINSON FOUNDATION 38-6497639 FYE: 1/31/2020	Federal Statements	ements		7/10/2020 9:00 A.M	Μ.
Beginning of Year of Year         End of Year Year         Basis of Valuation Value           \$ 2,376,794         \$ 2,600,422         Cost \$ 2,836,624           \$ 2,376,794         \$ 2,600,422         S 2,836,624	Statement 7 - Fo	orm 990-PF, Part II, Line	10c - Corporate Bonc	l Investments		
2,376,794 \$ 2,600,422 Cost \$ 2,836,624 2,376,794 \$ 2,600,422 \$ 2,836,624 \$ 2,376,794 \$ \$ 2,600,422 \$ \$ 2,836,624	tion	Beginning of Year	End of Year	Basis of Valuation	<u> </u>	
		1		Cost		
7						
7						_
2						
2						
2						
7						
7						
					7	