Department of the Treasury Internal Revenue Service

Return of Organization Exempt From Income Tax Under section 501(c). 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

Do not enter social security numbers on this form as it may be made public.
 Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No 1545-0047
2020
Open to Rublic
Inspection >> ...

B Check if applicable Acdress change  C Name change	38-3 € Telephor	
Name change    Name change   Doung business as     Number and street (or PO box if mall is not delivered to street address)   Roon-Sunk   Intrial return   2929 WALKER NW     Final return     Seminated     Seminat	€ Telephor	no minut
Name change Number and street (or PO box if mall is not delivered to street address) Room/sunk 2929 WALKER NW City or lown, state or province, country and ZIP or foreign postel code	€ Telephor	re number
Initial return   2929 WALKER NW -		
Final return! City or fown, state or province, country, and ZIP or foleign postal code	1	481-0582
ferminated		204 <u>700</u> 2
GRAND RAPIDS MI 49544		cepts 31,299,04
[X] Amended return   GRAND RAPIDS   MI 49544   F Name and address of principal officer	G Gross red	2003 DI,299,04
Application penting MICHAEL R. JULIEN	ro <sup>1</sup> mullan cucag n en	submirales Yes X N
THE CHARLE IV. OVELEN	all supord nates inc	cluded? Yes N
	If "No 1 attach a list	. , , ,
GRAND RAPIDS MI 49544	n to produce to some	GEO INGLIGATION S
1 Tex-exempt status X 501,∪(3) 501(c) ( ) ◀ (insettinc ) 4947(e)(1) or 527		
	up exempt on num?	· · · · · · · · · · · · · · · · · · ·
	lon 1992	M State of legal damique M
Part I d Summary -		
1 Briefly describe the organization's mission or most significant activities		, <u>,</u> , ,
SEE SCHEDULE O		
SEE SCHEDULE O  2 Check this box if the organization discontinued its operations or discontinued 25% or		
2 Check this box if the organization discontinued its operations or discussion Entymber 25% of its	s net assets	
3 Number of voting members of the governing body (Part VI, line 1a) 4 Number of independent voting members of the governing body (Part VI, line 1b) 5 Total number of individuals employed in calendar year 2020 (Part VI, line 1b) 6 Total number of volunteers (estimate if necessary)	. 3	13
4 Number of independent voting members of the governing body (Part VI, line 1b)	4	13
5 Total number of individuals employed in calendar year 2020 (Parks) line EEB 2 5 2022	5	0
6 Total number of volunteers (estimate if necessary)	6	18
	7a	-5,51
7a Total unrelated business revenue from Part VIII, column (C), line 12  b Net unrelated business taxable income from Form 990-T, Part I, I ne 11  OGDEN, UT	7b	
P	ior Year	Current Year
B Contributions and grants (Part VIII, line 1h)	899,954	2,866,14
9 Program service revenue (Part VIII, line 2g)		
	887,923	10,882,85
11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	2,764	
12 Total revenue - add lines 8 through 11 (must egual Part VIII, column (A), line 12)	790,641	
	135,174	
	100,114	<u> </u>
14 Benefits paid to or for members (Part IX, column (A), line 4)		
15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5–10) 16aProfessional fundraising fees (Part IX, column (A) line 11e) b Total fundraising expenses (Part IX, column (D), line 25)  17. Other expenses (Part IX, column (A), lines 11e, 11d, 11f, 24e)		
16aProfessional fundraising fees (Part IX, column (A) line 11e)		<u> </u>
b Total fundraising expenses (Part IX, column (D), line 25) ▶ 11,635	400 054	3 000 500
(* Other Capenses (Fait IA. Column (A) intes 11st 11d, 11tt-24s)	488,354	
	623,528	
19 Revenue less expenses Subtract line 18 from line 12	167,113	
	of Current Year	End of Year
20 Total assets (Part X, line 16)	789,460	
21 Total liabilities (Part X, line 26)	320,427	1,183,75
	469,033	156,558,57
Part II Signature Block		
Under panalties of poquey, I declare that I have examined this return, including accompanying schedules and statements, is		f my knowledge and polici
tive, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has an	ty knowledge.	
Elfert Replie		
Sign Signature of these	Dale	
	SURER	1/26/2021
Type or print name and title		·/
	alc Check	, i II Prin
ProstType preparer's name Preparar's signature D	, , , , , , , , , , , , , , , , , , , ,	_1"
Daile 1	71.12	
Paid ERIC A. RYAN	<del></del>	rplayed P01388772
Paid ERIC A. RYAN  Preparer Firm's name > ANDREWS HOOPER PAVLIK PLC	ZU/22 sell-er Firm's EIN ▶	
Paid ERIC A. RYAN  Preparer   Firm's name   ANDREWS HOOPER PAVLIK PLC  Use Only   2311 EAST BELTLINE AVE SE STE 200		38-3133790
Paid Preparer Use Only  Preparer  Use Only  Firm's address   GRAND RAPIDS, MI 49546		38-3133790 616-942-644
Paid Preparer Use Only  Preparer	Firm's EIN	38-3133790

		GARDENS & SCULPTURES8-3	31185/9	Page 2
	Statement of Program Se	-	us Bort III	X
	cribe the organization's mission	ins a response or note to any line in th	iis Pait III	
	HEDULE O			
		ant program services during the year which were	e not listed on the	
•	990 or 990-EZ?			Yes X No
	escribe these new services on So			
_	janization cease conducting, or n	nake significant changes in how it conducts, any	program	□ v. <b>5</b> 7
services?	scaribo thoso obangos on Sabodi	ulo O		Yes X No
	escribe these changes on Sched	e accomplishments for each of its three largest p	orogram services, as measured by	
		organizations are required to report the amount	= -	
	penses, and revenue, if any, for		or granto and anocations to emerci,	
the total ex	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	outh program out too reported		
4a (Code	) (Expenses \$ 5,5	03,171 including grants of\$ 5,3	51,552 ) (Revenue \$	)
CONTRIE	BUTION TO WEST M	ICHIGAN HORTICULTURAL S	CIETY, D/B/A FREI	DERIK MEIJER
GARDENS	S & SCULPTURE PA	RK (SOLE PURPOSE OF FREI	DERIK MEIJER GARDI	ens &
SCULPTU	JRE FOUNDATION).			
4b (Code	) (Expenses \$	including grants of\$	) (Revenue \$	
N/A	) ( <u></u>	moraling grants or \$	, (Northing o	,
·				
4c (Code	) (Expenses \$	including grants of\$	) (Revenue \$	
N/A	) (Expenses ¢	more and grants of	) (Nevende o	,
44 04		4.15-0.)		
	ram services (Describe on Sche		Payanua <sup>©</sup>	`
(Expenses	ram service expenses >	bluding grants of \$ (I	Revenue \$	
-e rotarprogr	am service expenses	J,JUJ,111		

### Part IV Checklist of Required Schedules

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			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A	1	x	
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	2	X	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to		21	
-	candidates for public office? If "Yes," complete Schedule C, Part I	3		X
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h)	Ť		
	election in effect during the tax year? If "Yes," complete Schedule C, Part II	4		X
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues,			
	assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5		X
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors			_
	have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If			
	"Yes," complete Schedule D, Part I	6		X
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes,"			
	complete Schedule D, Part III	8		X
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a			
	custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or			
	debt negotiation services? If "Yes," complete Schedule D, Part IV	9		X
10	Did the organization, directly or through a related organization, hold assets in donor-restricted endowments			
11	or in quasi endowments? If "Yes," complete Schedule D, Part V	10	X	
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI,			
_	VII, VIII, IX, or X as applicable			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI	44-		v
h	Did the organization report an amount for investments—other securities in Part X, line 12, that is 5% or more	11a	$\dashv$	X
~	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		x
С	Did the organization report an amount for investments—program related in Part X, line 13, that is 5% or more	110	$\overline{}$	
	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		x
d	Did the organization report an amount for other assets in Part X, line 15, that is 5% or more of its total assets			
	reported in Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		X
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	X	
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses			
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f	Х	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			
	Schedule D, Parts XI and XII	12a	X	
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If		- 1	
	"Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		<u> </u>
	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		X
	Did the organization maintain an office, employees, or agents outside of the United States?	14a		X
D	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking,			
	fundraising, business, investment, and program service activities outside the United States, or aggregate	ا ا	<b>.</b>	
15	foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV  Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or	14b	X	
	for any foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		X
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other	13	<del>-  </del>	
	assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		X
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on	_ <del>.</del> `	-	
	Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I See instructions	17		X
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on			
	Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18	i	X
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a?			
	If "Yes," complete Schedule G, Part III	19		X
	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		X
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b	[	
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or			
	domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	<u> </u>	

Form 990 (2020) FREDERIK MEIJER GARDENS & SCULPTURE38-3118579 Page 4 Checklist of Required Schedules (continued) Yes No 22 Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on X Part IX, column (A), line 27 If "Yes," complete Schedule I, Parts I and III 22 Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated X employees? If "Yes," complete Schedule J 23 24a Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b X through 24d and complete Schedule K If "No," go to line 25a 24a b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? 24b c Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds? 24c d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? 24d 25a Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit X transaction with a disqualified person during the year? If "Yes," complete Schedule L. Part I 25a b Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? X If "Yes," complete Schedule L, Part I 25b 26 Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% X controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part II 26 27 Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity (including an employee thereof) or family member of any of these X 27 persons? If "Yes," complete Schedule L, Part III 28 Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions, for applicable filing thresholds, conditions, and exceptions) A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If "Yes," complete Schedule L, Part IV 28a X b A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV 28b A 35% controlled entity of one or more individuals and/or organizations described in lines 28a or 28b? If 28c "Yes," complete Schedule L, Part IV X 29 Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M 29 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M 30 Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I 31 31 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N. Part II 32 X 33 Did the organization own 100% of an entity disregarded as separate from the organization under Regulations X sections 301 7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part I 33 34 Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1 34 X 35a Did the organization have a controlled entity within the meaning of section 512(b)(13)? 35a b If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2 35b 36 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable X related organization? If "Yes," complete Schedule R, Part V, line 2 36 37 Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI 37 38 Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and ¥ 19? Note: All Form 990 filers are required to complete Schedule O

	10 Itale: Till Tollin boo more are required to complete contedant o								
Pa	art V Statements Regarding Other IRS Filings and Tax Compliance Check if Schedule O contains a response or note to any line in this	Statements Regarding Other IRS Filings and Tax Compliance Check if Schedule O contains a response or note to any line in this Part V							
					Yes	No			
1a	Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable	_1a	0						
b	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable	1b	0						
С	Did the organization comply with backup withholding rules for reportable payments to vendors	and	<del></del> -						
	reportable gaming (gambling) winnings to prize winners?			1c					
AA				For	m 990	(2020)			

	nt V Statements Pagarding Other IPS Elling and Tay Compliance (as				age,
<u> </u>	art V Statements Regarding Other IRS Filings and Tax Compliance (co	ntinuea)		Yes	TNA
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax	1 1		res	
	Statements, filed for the calendar year ending with or within the year covered by this return	2a 0	1 1a	٠ د	1
b	If at least one is reported on line 2a, did the organization file all required federal employment tax		2b	'	
	Note: If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instru		1.	_ ;	
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	,	3a		X
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on School	edule O	3b		1
4a	At any time during the calendar year, did the organization have an interest in, or a signature or c		1		1
	a financial account in a foreign country (such as a bank account, securities account, or other fina	-	4a		x
b	If "Yes," enter the name of the foreign country ▶	,			<del>                                     </del>
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Finan	cial Accounts (FBAR)			"
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax ye		5a		X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter tra		5b		X
С	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?		5c		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and	did the			
	organization solicit any contributions that were not tax deductible as charitable contributions?		6a		x
b	If "Yes," did the organization include with every solicitation an express statement that such contr	ibutions or			
	gifts were not tax deductible?		6b		
7	Organizations that may receive deductible contributions under section 170(c)				
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly	for goods		*	i
	and services provided to the payor?		7a		X
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?		7b		
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which	ıt was			
	required to file Form 8282?		7c		x
d	If "Yes," indicate the number of Forms 8282 filed during the year	7d		Ι,	
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal ben	efit contract?	7e		X
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit		7f		X
g	If the organization received a contribution of qualified intellectual property, did the organization fi		7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the org	anization file a Form 1098-C?	7h		<u> </u>
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund mair	tained by the	ļ		١.,
	sponsoring organization have excess business holdings at any time during the year?		8		X
9	Sponsoring organizations maintaining donor advised funds.			٤	
а	Did the sponsoring organization make any taxable distributions under section 4966?		9a		X
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person	7	9b		X
10	Section 501(c)(7) organizations. Enter	1 1			
а	Initiation fees and capital contributions included on Part VIII, line 12	10a			1
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b	<u> </u>		
11	Section 501(c)(12) organizations. Enter	1 1			1
а	Gross income from members or shareholders	11a	٠ ، ٠	4.	
b	Gross income from other sources (Do not net amounts due or paid to other sources				
40-	against amounts due or received from them )	[11b]	-		
	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of	1 1	12a		<u> </u>
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	12b	-		·
13	Section 501(c)(29) qualified nonprofit health insurance issuers.		<u> </u>		<u> </u>
а	Is the organization licensed to issue qualified health plans in more than one state?		13a		<b>.</b>
	Note: See the instructions for additional information the organization must report on Schedule O				٠.
b	Enter the amount of reserves the organization is required to maintain by the states in which	1406			١,
_	the organization is licensed to issue qualified health plans	13b	- ,	٠,	;
C 1/12	Enter the amount of reserves on hand	13c			<u> </u>
14a	Did the organization receive any payments for indoor tanning services during the tax year?  If "Yes," has it filed a Form 720 to report these payments? If "No." provide an auxiliaration as Set	andula O	14a		X
15	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Sch		14b		<b>—</b>
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in ren	iuneration or	,		7.7
	excess parachute payment(s) during the year?  If "Ves " see instructions and file Form 4720. Schodule N		15		X
16	If "Yes," see instructions and file Form 4720, Schedule N		ا' ؞ ؞ ` ا	-1	-
	Is the organization an educational institution subject to the section 4968 excise tax on net investigation	nent income /	16		X

If "Yes," complete Form 4720, Schedule O

Form 990 (2020) FREDERIK MEIJER GARDENS & SCULPTURE38-3118579 Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" Part VI response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes on Schedule O. See instructions Check if Schedule O contains a response or note to any line in this Part VI X Section A. Governing Body and Management Yes No 13 1a Enter the number of voting members of the governing body at the end of the tax year If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain on Schedule O 13 b Enter the number of voting members included on line 1a, above, who are independent 1b Did any officer, director, trustee, or key employee have a family relationship or a business relationship with X any other officer, director, trustee, or key employee? Did the organization delegate control over management duties customarily performed by or under the direct 3 X supervision of officers, directors, trustees, or key employees to a management company or other person? X 4 Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? 4 Did the organization become aware during the year of a significant diversion of the organization's assets? X 6 Did the organization have members or stockholders? 6 7a Did the organization have members, stockholders, or other persons who had the power to elect or appoint X one or more members of the governing body? 7a Are any governance decisions of the organization reserved to (or subject to approval by) members, X stockholders, or persons other than the governing body? 7b Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following a The governing body? b Each committee with authority to act on behalf of the governing body? 8b X Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses on Schedule O X Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code No Yes 10a Did the organization have local chapters, branches, or affiliates? 10a X b If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? 10b 11a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? 11a X b Describe in Schedule O the process, if any, used by the organization to review this Form 990 12a Did the organization have a written conflict of interest policy? If "No," go to line 13 12a b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? 12b X c Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done 12¢ 13 Did the organization have a written whistleblower policy? X 13 14 Did the organization have a written document retention and destruction policy? X 14 15 Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? The organization's CEO, Executive Director, or top management official 15a Other officers or key employees of the organization X 15b If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions) 16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year? 16a X b If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements? 16b Section C. Disclosure List the states with which a copy of this Form 990 is required to be filed ▶MI Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-T (Section 501(c) (3)s only) available for public inspection. Indicate how you made these available. Check all that apply X Own website Another's website X Upon request Other (explain on Schedule O) Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year

State the name, address, and telephone number of the person who possesses the organization's books and records

2929 WALKER NW

SUSANNE VEENEMAN

GRAND RAPIDS

orm 990 (20	020) FREDERIK	MEIJER	GARDENS	& SCULP	<u> TURE38-31</u>	<u>.18579                                    </u>		<u>P</u>	age 7
Part VII	Compensation o	of Officers, [	Directors, Tr	ustees, Key	Employees,	Highest C	ompensated	Employees,	and
	Independent Co.	ntractore							

Check if Schedule O contains a response or note to any line in this Part VII

ection A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.

- List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid
  - List all of the organization's current key employees, if any See instructions for definition of "key employee"
- List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations
- List all of the organization's former officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations
- List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations. See instructions for the order in which to list the persons above

X Check this box if neither the organization nor any related organization compensated any current officer, director, or trustee

(A) Name and title	hours per week (list any					than on s both a r/trustee	ne an e)	(D)  Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and
	related organizations below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	(**21103310100)	(** 271655 III.65)	related organizations
(1) JOHN G. BAAB	1 00									
DIRECTOR	1.00	x					ĺ	0	o	0
(2) TAMARA BAILEY	0.00	^	$\vdash$		_	-				
(2) 212222	1.00					1				
SECRETARY	0.00	X		x				0	o	0
(3) WILLIAM J. BOER										
DIRECTOR	1.00	x						0	o	0
(4) SARALYN COUPE	1									<del></del>
	2.00									
PRESIDENT	0.00	X		X				0	0	0
(5) RANDALL S. DAMS										
DIRECTOR	1.00	$\mathbf{x}$				1		o	o	0
(6) MICHAEL A. GAUD	TNO	┼≏				$\vdash$			<u> </u>	
(0),111011111111111111111111111111111111	1.00									
DIRECTOR	0.00	x						0	0	0
(7) DIRK C. HOFFIUS		T								
	1.00	1				H				
DIRECTOR	0.00	X	<u> </u>		<u> </u>			0	0	0
(8) MICHAEL R. JULI										
V.P /TREASURER	4.00	$ \mathbf{x} $		x				0	0	0
(9) AMY L. KEANE	0.00	┼≏	$\vdash$	^	_	$\vdash$	_	<u> </u>	<u>_</u>	
(3)AHI II. ICHAIL	1.00									
DIRECTOR	0.00	x						0	0	0
(10) NANCY KENNEDY										
	1.00					i i				
DIRECTOR	0.00	X			L.	$\sqcup$		0	0	0
(11) KATHLEEN P. MAI										
D T DE COOD	1.00	٠,							^	_
DIRECTOR	0.00	X	L		Ц_			0	<u>_</u> 0	0

Part VII Section A. Officer	s, Directors, T	rust	ees,	Key	Em	ploy	ees	, and Highest Compens	ated Employees (continu	ued)
(A) Name and title	(B) Average hours per week (list any hours for	bo: off	k, unle icer a	Pos check ess pe	rson Irecto	than o	ee)	(D)  Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and
	related organizations below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	(W21033-MISC)	(W-2/1033-MIGO)	related organizations
(12) HENDRIK G. M										
D.T.D.E.C.M.O.D.	1.00									
DIRECTOR (13) JEFF PADNOS	0.00	X						0		0
DIRECTOR	1.00	x						0	o	o
(14) SUSANNE T. V	EENEMAN									
EXECUTIVE DIRECTOR	15.00 0.00			x	Ī					
EXECUTIVE DIRECTOR	0.00							0	0	0
	-							,		
								· · · ·		
	<b></b> -									<u> </u>
			į							
1b Subtotal							•			
c Total from continuation she d Total (add lines 1b and 1c)	eets to Part VII	, Se	ction	ı A			•			
d Total (add lines 1b and 1c) Total number of individuals (i	ncluding but no	t lım	ted t	o th	ose	listed	d ab	ove) who received more t	han \$100,000 of	
reportable compensation from										
3 Did the organization list any temployee on line 1a? If "Yes	," complete Sch	edul	e J f	or si	uch i	indiv	ıdua			Yes No
4 For any individual listed on lii organization and related orga individual										ă X
5 Did any person listed on line for services rendered to the o									n or individual	
Section B. Independent Contract		703	s, CC	тр	ere .	SCHE	uuie	s a for such person	<u> </u>	5 X
1 Complete this table for your f	ive highest com	pen	sate	d ind	lepe	nder	ıt co	intractors that received me	ore than \$100,000 of	
compensation from the organ	(A) business address	com	pens	satio	n to	r the	cale			
CREWCIAL PARTNERS	business address			5	310	SI	VE	Descrip NTH AVENUE, 321	(B) tion of services	(C) Compensation
NEW YORK	NY	1	00			-		NVEST CONSUL		121,068
EAGLE CAPITAL MANAG	EMENT			4		P	RK	AVENUE, 17TH F		
NEW YORK	NY	1	<u>00</u>	22			I	NVEST MGT.		106,356
		•								
				-						
2 Total number of independent received more than \$100,000	contractors (inc	ludi on fr	ng bi	ut no	t lin	nited	to th	hose listed above) who	2	
DAA			-							Form 990 (2020)

Statement of Revenue Check if Schedule O contains a response or note to any line in this Part VIII (A) Total revenue (B) Related or exempt function revenue (C) (D) Revenue excluded Unrelated business revenue from tax under sections 512-514 1a Federated campaigns 1a Grant **b** Membership dues 1b c Fundraising events 1c d Related organizations 1d e Government grants (contributions) 1e f All other contributions, gifts, grants, and similar amounts not included above 2,866,147 1f g Noncash contributions included in lines 1a-1f 1g |\$ h Total. Add lines 1a-1f 2,866,147 Business Code Program Service Revenue b С d f All other program service revenue g Total. Add lines 2a-2f 3 Investment income (including dividends, interest, and 3,933,006 -5,515 3,938,521 other similar amounts) Income from investment of tax-exempt bond proceeds 5 Royalties (ı) Real (ii) Personal 6a Gross rents 6a 6b **b** Less rental expenses C Rental inc or (loss) 6c d Net rental income or (loss) 7a Gross amount from (i) Secunties (ii) Other sales of assets 24,489,194 other than inventory 7a Other Revenue **b** Less cost or other 17,539,343 basis and sales exps 7b c Gain or (loss) 7c 6,949,851 6,949,851 6,949,851 d Net gain or (loss) 8a Gross income from fundraising events (not including \$ of contributions reported on line 1c) See Part IV, line 18 8a 8b b Less direct expenses c Net income or (loss) from fundraising events 9a Gross income from gaming activities See Part IV, line 19 9a 9b b Less direct expenses c Net income or (loss) from gaming activities 10a Gross sales of inventory, less returns and allowances 10a b Less cost of goods sold 10b c Net income or (loss) from sales of inventory Business Carle iscellaneous Revenue 10,702 10,702 11a INCOME TAX REFUND b d All other revenue 10,702 Total. Add lines 11a-11d Total revenue. See instructions 13,759,706 6,949,851 -5,515 3,949,223 Part IX Statement of Functional Expenses

Seci	<u>ion 501(c)(3) and 501(c)(4) organizations musi</u> Check if Schedule O contains a res	<u>r complete all columns. Al</u>	other organizations mus	t complete column (A)	
<u></u>	not include amounts reported on lines 6b,		(B)	(C)	(D)
	Bb, 9b, and 10b of Part VIII.	(A) Total expenses	Program service expenses	Management and general expenses	Fundraising expenses
1			CAPCHISCS	general expenses	expenses
	and domestic governments. See Part IV, line 21	5,342,172	5,342,172		
2	Grants and other assistance to domestic	,		-	<u></u> ,
	individuals See Part IV, line 22	9,380	9,380		
3	Grants and other assistance to foreign	· ·•	•		
	organizations, foreign governments, and foreign				
	individuals See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors,				
	trustees, and key employees			**.	
6	Compensation not included above to disqualified				
	persons (as defined under section 4958(f)(1)) and				
_	persons described in section 4958(c)(3)(B)				
7	Other salaries and wages				
8	Pension plan accruals and contributions (include				
_	section 401(k) and 403(b) employer contributions)				-
9	Other employee benefits				
10	Payroll taxes				
11	Fees for services (nonemployees)  Management			1	
a b	Legal	1,927	<del></del>	1,927	***
c	Accounting	38,416		38,416	
d	Lobbying			30,410	
e	Professional fundraising services See Part IV, line 1	7			
f	Investment management fees	34,512	33,633	879	
g	Other (If line 11g amount exceeds 10% of line 25, column	- 0-7022			<u></u>
J	(A) amount, list line 11g expenses on Schedule O)	121,068	117,986	3,082	
12	Advertising and promotion			0,000	<del></del>
13	Office expenses	1,916		1,916	
14	Information technology	36,140		36,140	1 Tr Tr
15	Royalties	- "			
16	Occupancy				
17	Travel				
18	Payments of travel or entertainment expense	s			
	for any federal, state, or local public officials				4- A
19	Conferences, conventions, and meetings	275	<del>.</del>	275	
20	Interest				
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	22 521		00 501	
23 24	Insurance Other expenses Itemize expenses not covered	23,521		23,521	<del></del>
24	above (List miscellaneous expenses on line 24e If				
	line 24e amount exceeds 10% of line 25, column			·	
	(A) amount, list line 24e expenses on Schedule O)	1			•
а	ANNUAL REPORT	11,327		11,327	17 md
b	DONOR RECOGNITION	5,980			5,980
c	FUNDRAISING SUPPLIES	5,655			5,655
d	FOREIGN TAX	2,281		2,281	
е	All other expenses	2,750		2,750	
25	` <u> </u>	5,637,320	5,503,171	122,514	11,635
26	Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here    If following SOP 98-2 (ASC 958-720)			, = ==	

	Check if Schedule O contains a response or not	e to any line in this Part X			
			(A) Beginning of year		(B) End of year
1	Cash—non-interest-bearing			1	
2	Savings and temporary cash investments		11,454,477	2	11,558,704
3	Pledges and grants receivable, net		9,003,547	3	5,865,645
4	Accounts receivable, net			4	
5	Loans and other receivables from any current or forme	er officer, director,			
	trustee, key employee, creator or founder, substantial	contributor, or 35%			
	controlled entity or family member of any of these pers	sons		5	
6	Loans and other receivables from other disqualified pe	ersons (as defined		í !	
	under section 4958(f)(1)), and persons described in se	ection 4958(c)(3)(B)		6	
7	Notes and loans receivable, net			7	
8	Inventories for sale or use			8	
9	Prepaid expenses and deferred charges			9	
10a	Land, buildings, and equipment cost or other				
	basis Complete Part VI of Schedule D	10a			
þ	Less accumulated depreciation	10b		10c	
11	Investments—publicly traded securities		121,331,436	11	140,317,981
12	Investments—other securities See Part IV, line 11			12	
13	Investments—program-related See Part IV, line 11			13	
14	Intangible assets			14	
				15	
16	Total assets. Add lines 1 through 15 (must equal line	33)	141,789,460	16	157,742,330
17				17	
18	• •		18		
19				19	
	•				
				21	. <u> </u>
22					•
		•	<b>.</b> .		
				_	
				24	
25					
		i) Complete Part X	1 200 407		1 100 555
20			1,320,427		1,183,757
26		<del></del>	1,320,427	26	1,183,757
		ere 🔼	•	.	A
27			14 017 010		01 046 040
					21,946,043
20		L N	126,451,123	28	134,612,530
		neck nere P	`		
20	· •		· •		
		ant fund		$\overline{}$	
	Retained earnings, endowment, accumulated income,		-	30	
	rretained earnings, endownient, accumulated income,	OF OTHER INNUS	1	37 I	
	Total net assets or fund balances		140,469,033	32	156,558,573
	2 3 4 5 6 7 8 9 10a b 11 12 13 14 15 16 17 18 19 20 21 22 22 23 24 25 25 26 27 28 28 29 20 20 20 20 20 20 20 20 20 20 20 20 20	1 Cash—non-interest-bearing 2 Savings and temporary cash investments 3 Pledges and grants receivable, net 4 Accounts receivable, net 5 Loans and other receivables from any current or formit trustee, key employee, creator or founder, substantial controlled entity or family member of any of these personal c	2 Savings and temporary cash investments 3 Pledges and grants receivable, net 4 Accounts receivable, net 5 Loans and other receivables from any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons 6 Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), and persons described in section 4958(c)(3)(B) 7 Notes and loans receivable, net 8 Inventories for sale or use 9 Prepaid expenses and deferred charges 10a Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D 1 Investments—publicly traded securities 1 Investments—publicly traded securities 1 Investments—program-related See Part IV, line 11 1 Investments—program-related See Part IV, line 11 1 Intragible assets 15 Other assets See Part IV, line 11 16 Total assets. Add lines 1 through 15 (must equal line 33) 17 Accounts payable and accrued expenses 18 Grants payable 19 Deferred revenue 20 Tax-exempt bond liabilities 21 Escrow or custodial account liability Complete Part IV of Schedule D 22 Loans and other payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons 23 Secured mortgages and notes payable to unrelated third parties 24 Unsecured notes and loans payable to unrelated third parties 25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24) Complete Part X of Schedule D 26 Total liabilities. Add lines 17 through 25  Organizations that follow FASB ASC 958, check here ★ 2 and complete lines 27, 28, 32, and 33. 27 Net assets with donor restrictions Organizations that do not follow FASB ASC 958, check here ★ 2 and complete lines 29 through 33. 29 Capital stock or trust principal, or current funds 30 Paid-in or capital surplus, or land, building, or equipment fund	1 Cash—non-interest-bearing 2 Savings and temporary cash investments 3 Pledges and grants receivable, net 4 Accounts receivable, net 5 Loans and other receivables from any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons 6 Loans and other receivables from other disqualified persons (as defined under section 4958(r)1), and persons described in section 4958(c)(3)(B) 7 Notes and loans receivable, net 8 Inventories for sale or use 9 Prepade expenses and deferred charges 10a Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D 11 Investments—publicly traded securities 12 Investments—publicly traded securities 13 Investments—publicly traded securities 14 Intangible assets 15 Other assets See Part IV, line 11 16 Total assets. Add lines 1 through 15 (must equal line 33) 141,789,460 17 Accounts payable and accrued expenses 18 Grants payable 19 Deferred revenue 18 Escrow or custodial account liability Complete Part IV of Schedule D 21 Loans and other payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons 23 Secured mortgages and notes payable to unrelated third parties 24 Unsecured notes and loans payable to unrelated third parties 25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24) Complete Part X of Schedule D 26 Total liabilities. Add lines 17 through 25  Organizations that follow FASB ASC 958, check here 1 2 and complete lines 27, 28, 32, and 33. 27 Net assets with donor restrictions 28 Net assets with donor restrictions 30 Paid-in or capital surplus, or land, building, or equipment fund	1 Cash—non-interest-bearing 1 2 Savings and temporary cash investments 1 3 Pledges and grants receivable, net 9,003,547 2 4 Accounts receivables from any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons 6 6 Loans and other receivables from other disqualified persons (as defined under section 4958(fc)1), and persons described in section 4958(c)(3)(B) 6 7 Notes and loans receivable, net 7 8 Inventiones for sale or use 8 8 9 Prepade expenses and deferred charges 9 Prepade expenses 9 Prepade expe

Form	990 (2020) FREDERIK MEIJER GARDENS & SCULPTURE38-3118579				Pag	ge <b>12</b>
	rt XI Reconciliation of Net Assets					
	Check if Schedule O contains a response or note to any line in this Part XI		_			
1	Total revenue (must equal Part VIII, column (A), line 12)	1	13	3,75	59,	706
2	Total expenses (must equal Part IX, column (A), line 25)	2		5,63	37,	320
3	Revenue less expenses Subtract line 2 from line 1	_ 3	8	3,12	22,	386
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	140	,46	59,	033
5	Net unrealized gains (losses) on investments	5	7	7,96	57,	154
6	Donated services and use of facilities	6				
7	Investment expenses	7				
8	Prior period adjustments	8				
9	Other changes in net assets or fund balances (explain on Schedule O)	9				
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line					
	32, column (B))	10	156	5,55	58,	<u>573</u>
Pa	rt XII Financial Statements and Reporting					_
	Check if Schedule O contains a response or note to any line in this Part XII					$\perp \! \! \perp$
	<u> </u>				Yes	No
1	Accounting method used to prepare the Form 990 🗌 Cash 🔀 Accrual 🔲 Other					1
	If the organization changed its method of accounting from a prior year or checked "Other," explain in		i			
	Schedule O					
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?			2a		<u> </u>
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or					
	reviewed on a separate basis, consolidated basis, or both					
	Separate basis Consolidated basis Both consolidated and separate basis					
b	Were the organization's financial statements audited by an independent accountant?			2b	X	
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a					
	separate basis, consolidated basis, or both			1		1
	Separate basis Consolidated basis Both consolidated and separate basis					
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of					
	the audit, review, or compilation of its financial statements and selection of an independent accountant?			2c	X	
	If the organization changed either its oversight process or selection process during the tax year, explain on					
	Schedule O					1
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the					ł
	Single Audit Act and OMB Circular A-133?			3a		X
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the					
	required audit or audits, explain why on Schedule O and describe any steps taken to undergo such audits			3b	L	
				For	n 990	(2020)

### SCHEDULE A (Form 990 or 990-EZ)

Public Charity Status and Public Support

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust

2020

Open to Public Inspection

Department of the Treasury Internal Revenue Service

Name of the organization ► Attach to Form 990 or Form 990-EZ.

► Go to www.irs.gov/Form990 for instructions and the latest information.

FREDERIK MEIJER GARDENS & SCULPTURE

Emp

Employer identification number 38-3118579

Schedule A (Form 990 or 990-EZ) 2020

	_		FOONDATION_				120-211	_
Pa	irt l	Reas	on for Public Charity	Status. (All organization	ons mus	st comp	lete this part ) See instru	ictions
he	orga	inization is no	t a private foundation beca	use it is (For lines 1 through 1	12, check	only one	box )	
1	Ň	A church, co	nvention of churches, or as	ssociation of churches describe	ed in sec	tion 170	b)(1)(A)(i).	
2	П			)(A)(ii). (Attach Schedule E (F				
3	H			vice organization described in				
4	Н	•	•	ed in conjunction with a hospit			· / ·	the heepital's name
-	ш			ed in conjunction with a hospit	lai uescii	DEU III SE	ction 170(b)(1)(A)(iii). Enter	ine nospitars name,
_	$\Box$	city, and stat						
5	$\Box$	_	-	t of a college or university owr	ned or op	erated by	a governmental unit describe	d in
	$\overline{}$		(b)(1)(A)(iv). (Complete Pa	•				
6	Ш			governmental unit described i				
7	Ш		tion that normally receives a section 170(b)(1)(A)(vi). (	a substantial part of its suppor Complete Part II)	t from a g	governme	ntal unit or from the general p	ublic
8		A community	trust described in section	170(b)(1)(A)(vi). (Complete F	Part II)			
9	П	An agricultur	raì research organization de	escribed in section 170(b)(1)(	A)(ix) op	erated in	conjunction with a land-grant	college
				e of agriculture (see instruction				
10		receipts from support from	n activities related to its exe gross investment income	(1) more than 33 1/3% of its sempt functions, subject to certa and unrelated business taxable 30, 1975 See section 509(a)	ain excep e income	tions, and (less sec	l (2) no more than 331/3% of i tion 511 tax) from businesses	ts
11	$\Box$		_	d exclusively to test for public		•	•	
12	$\overline{\mathbf{x}}$	_		d exclusively for the benefit of,	•		, ,, ,	urnanan
12	Δ	•		nizations described in <b>section</b>			, , ,	•
				that describes the type of sup				
	_	$\overline{}$		perated, supervised, or contro		-	·	-
	а	the supp	orted organization(s) the p	ower to regularly appoint or ele complete Part IV, Sections	ect a maj			giving
	ь	_ ``	• •	supervised or controlled in con		with ite ein	onorted organization(s) by ha	vina
		control o	r management of the supp	orting organization vested in the Part IV, Sections A and C.	ne same į			=
			• •	·		nnootion	with and functionally integrat	ad wath
	С	its suppo	runctionally integrated. A orted organization(s) (see in	supporting organization operations:  Structions) You must complete:	lete Part	IV. Section	ons A. D. and E.	ea with,
	d			ed. A supporting organization				zation(s)
	-			he organization generally mus				
				must complete Part IV, Sec	•		•	
	е			eceived a written determination		-		
	•			on-functionally integrated supp				
	f	Enter the nu	mber of supported organiza	ations				1
	g	Provide the f	following information about	the supported organization(s)				<u> </u>
(1)	Nam	e of supported	(ii) EiN	(iii) Type of organization	(iv) Is the	organization	(v) Amount of monetary	(vi) Amount of
(-)		ganization	, -	(described on lines 1-10		ur governing	support (see	other support (see
				above (see instructions))	docu	ment?	instructions)	instructions)
					Yes	No		
(A)	WE	ST MIC		TURAL SOCIETY				
			38-2394044	7	X		_5,342,172	0
(B)								
(C)		<del></del>			1	-		
(C)								
<u> </u>				-	-			<del></del>
(D)							·	
					<del>                                     </del>			
(E)								
		-		-	<del>                                     </del>	-	5 3/2 172	
-n+-	11		ł	i			5 447 1771	13

For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ.

Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)

(Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III I f the organization fails to qualify under the tests listed below, please complete Part III)

Sec	tion A. Public Support					/	
	ndar year (or fiscal year beginning in)	(a) 2016	(b) 2017	(c) 2018	(d) 2019	(e) 2020	(f) Total
1	Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants")						
2	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3	The value of services or facilities furnished by a governmental unit to the organization without charge						
4	Total. Add lines 1 through 3						
5	The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						
6	Public support. Subtract line 5 from line 4	,					<del></del>
	tion B. Total Support	<u> </u>		1			<del></del>
	ndar year (or fiscal year beginning in)	(a) 2016	<b>(b)</b> 2017	(c) 2018	(d) 2019	(e) 2020	(f) Total
7	Amounts from line 4						
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources						
9	Net income from unrelated business activities, whether or not the business is regularly carried on						
10	Other income Do not include gain or loss from the sale of capital assets (Explain in Part VI)						
11	Total support. Add lines 7 through 10	•	<u> </u>	<u></u>	<u> </u>	· , ,	
12	Gross receipts from related activities, etc	•	•			12	
13	First 5 years. If the Form 990 is for the o	_	t, second, third, fo	ourth, or fifth tax ye	ear as a section 50	01(c)(3)	. $\square$
	organization, check this box and stop he						
	tion C. Computation of Public S				<del></del>	<del></del>	
14	Public support percentage for 2020 (line	,		lumn (f))		14	
15	Public support percentage from 2019 Sc					<u> </u>	%_
16a	33 1/3% support test—2020. If the orga				4 is 33 1/3% or mo	ore, check this	
	box and stop here. The organization qualifies as a publicly supported organization  33 1/3% support test—2019. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check						
D					ine 15 is 33 1/3%	or more, check	▶□
17-	this box and stop here. The organization			•	2 160 05 165	d line 14 is	<b>P</b> []
ı/a	10% or more, and if the organization me	•					
	10% or more, and if the organization mee Part VI how the organization meets the " organization						▶ []
b	10%-facts-and-circumstances test—20 15 is 10% or more, and if the organization	•				•	
	in Part VI how the organization meets the	e "facts-and-cırcu	mstances" test T	he organization qi	ualifies as a public	ly supported	_
	organization						▶ []
18	Private foundation. If the organization of	lid not check a bo	ox on line 13, 16a	, 16b, 17a, or 17b	, check this box ar	nd see	. —
	instructions						▶ ∐

Support Schedule for Organizations Described in Section 509(a)(2)

• •		· · · · · · · · · · · · · · · · · · ·
(Complete only	of you checked the	ne box on line 10 of Part I or if the organization failed to qualify under Part II
If the organization	on fails to qualify	under the tests listed below, please complete Part II)

Sec	tion A. Public Support						
	ndar year (or fiscal year beginning in)	(a) 2016	(b) 2017	(c) 2018	(d) 2019	(e) 2020	(f) Total
1	Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants")	(4) = 0.10	(2) 20 11	(0) 2010	(4) 2010	(0) 2020	(i) Total
2	Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the						
3	organization's fax-exempt purpose  Gross receipts from activities that are not an						
	unrelated trade or business under section 513					ļ	
4	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf	<del></del>					
5	The value of services or facilities furnished by a governmental unit to the organization without charge						
6	Total. Add lines 1 through 5						
7a	Amounts included on lines 1, 2, and 3 received from disqualified persons						
b	Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
	Add lines 7a and 7b						
8	Public support. (Subtract line 7c from line 6)						
	tion B. Total Support				-		
Cale	ndar year (or fiscal year beginning in)	(a) 2016	(b) 2017	(c) 2018	(d) 2019	(e) 2020	(f) Total
9	Amounts from line 6						
10a	Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources	_	,				
b	Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
С	Add lines 10a and 10b	· · · · · ·					
11	Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12	Other income Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
13	Total support. (Add lines 9, 10c, 11, and 12.)						
14	and 12) First 5 years. If the Form 990 is for the 6	organization's firm	t cocond third f-	urth of 6th to:		1	
17	organization, check this box and stop he		i, second, inira, fo	outin, or ππη tax ye	ear as a section 5	o ((c)(3)	▶ □
Sec	tion C. Computation of Public		entage				
15	Public support percentage for 2020 (line			olumn (fl)		15	%
16	Public support percentage from 2019 Sc			,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		16	
	tion D. Computation of Investm					1 10 1	
17	Investment income percentage for 2020			e 13. column (f))		17	%
	vestment income percentage from 2019	•				18	<u>%</u>
	33 1/3% support tests—2020. If the org		•	line 14, and line 1	5 is more than 3		
	17 is not more than 33 1/3%, check this						▶ 🗌
b	33 1/3% support tests—2019. If the org						
	line 18 is not more than 33 1/3%, check	this box and <b>sto</b> p	here. The organ	ization qualifies as	s a publicly suppo	rted organization	▶ 🗌
20	Private foundation. If the organization of						▶ 🔲

Schedule A (Form 990 or 990-EZ) 2020

### Part IV Supporting Organizations

(Complete only if you checked a box in line 12 on Part I If you checked box 12a, Part I, complete Sections A and B If you checked box 12b, Part I, complete Sections A and C If you checked box 12c, Part I, complete Sections A, D, and E If you checked box 12d, Part I, complete Sections A and D, and complete Part V)

Caction	A A 11	Supporting	Organizati	
Section	M. MII	Supporting	Uluanizati	บแจ

- Are all of the organization's supported organizations listed by name in the organization's governing documents? If "No," describe in **Part VI** how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.
- 2 Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? If "Yes," explain in Part VI how the organization determined that the supported organization was described in section 509(a)(1) or (2)
- 3a Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer lines 3b and 3c below
- b Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If "Yes," describe in Part VI when and how the organization made the determination
- c Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If "Yes," explain in Part VI what controls the organization put in place to ensure such use
- 4a Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes," and if you checked 12a or 12b in Part I, answer (b) and (c) below
- b Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If "Yes," describe in Part VI how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations
- c Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in Part VI what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes
- Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer lines 5b and 5c below (if applicable). Also, provide detail in Part VI, including (i) the names and EIN numbers of the supported organizations added, substituted, or removed, (ii) the reasons for each such action, (iii) the authority under the organization's organizing document authorizing such action, and (iv) how the action was accomplished (such as by amendment to the organizing document)
- b Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the organization's organizing document?
- c Substitutions only. Was the substitution the result of an event beyond the organization's control?
- Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? If "Yes," provide detail in Part VI.
- 7 Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (as defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ)
- 8 Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ)
- 9a Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons, as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? If "Yes," provide detail in Part VI.
- b Did one or more disqualified persons (as defined in line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? If "Yes," provide detail in Part VI.
- Did a disqualified person (as defined in line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? If "Yes," provide detail in Part VI.
- Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes," answer line 10b below
- b Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)

,		Yes	No
	1	_ <b>X</b> _	
			•
	2		x
	3a		<u> </u>
	3b	•	
	30		
	3с	,	
	4a		х
	4b		
	4c		
	5a	- •	<u> </u>
	5b		
	5c		
	6		<u> </u>
	_		
	7	_	X
	8		x
			:
	9a		x
	9b		<u>x</u>
		_	
	9c		<u> </u>
		<u></u>	
	10a	_X_	
/Eo	10b	000	X

	ule A (Form 990 or 990-EZ) 2020 FREDERIK MEIJER GARDENS & SCULPTURE38-311857 rt IV Supporting Organizations (continued)	79		Page
			Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?			
а	A person who directly or indirectly controls, either alone or together with persons described in lines 11b and		ł	
	11c below, the governing body of a supported organization?	11a		X
b		11b		X
	A 35% controlled entity of a person described in line 11a or 11b above? If "Yes" to line 11a, 11b, or 11c, provide		$\overline{}$	<del> </del>
	detail in Part VI.	11c		x
Sect	ion B. Type I Supporting Organizations	10	·	1
			Yes	No
1	Did the governing body, members of the governing body, officers acting in their official capacity, or membership of one or	$\overline{}$	163	140
•	more supported organizations have the power to regularly appoint or elect at least a majority of the organization's officers,			1
	directors, or trustees at all times during the tax year? If "No," describe in Part VI how the supported organization(s)			1
				1
	effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported	7	ł	•
	organization, describe how the powers to appoint and/or remove officers, directors, or trustees were allocated among the			1 -
•	supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year	1_		
2	Did the organization operate for the benefit of any supported organization other than the supported			•
	organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in Part			
	VI how providing such benefit carried out the purposes of the supported organization(s) that operated,		1	
	supervised, or controlled the supporting organization	2		
Sect	ion C. Type II Supporting Organizations			
			Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors			
	or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control			
	or management of the supporting organization was vested in the same persons that controlled or managed			
	the supported organization(s)	1 1		
Sect	ion D. All Type III Supporting Organizations			1
			Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the			110
	organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax			
	year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the			
	organization's governing documents in effect on the date of notification, to the extent not previously provided?	1 ~ "	~ <b>x</b> ~	
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported		Λ_	
-	organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how			
	·	ا ۾ ا		<b>.</b>
•	the organization maintained a close and continuous working relationship with the supported organization(s)	2		X
3	By reason of the relationship described in line 2, above, did the organization's supported organizations have	1		-
	a significant voice in the organization's investment policies and in directing the use of the organization's			
	income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's			i
<u> </u>	supported organizations played in this regard	3	_X	
	ion E. Type III Functionally-Integrated Supporting Organizations			
1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instruction)	ions)		
а	The organization satisfied the Activities Test Complete line 2 below			
b	The organization is the parent of each of its supported organizations. Complete line 3 below			
С	The organization supported a governmental entity Describe in Part VI how you supported a governmental entity (see it	nstruc	tions)	
2	Activities Test Answer lines 2a and 2b below.		Yes	No
а	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of			-
	the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify	ĺ		
	those supported organizations and explain how these activities directly furthered their exempt purposes,			
	how the organization was responsive to those supported organizations, and how the organization determined			
	that these activities constituted substantially all of its activities	2a		-
b	Did the activities described in line 2a, above, constitute activities that, but for the organization's involvement,	La		
~	one or more of the organization's supported organization(s) would have been engaged in? If "Yes," explain in			
	Part VI the reasons for the organization's position that its supported organization(s) would have engaged in	ا ۾ ا		
	these activities but for the organization's involvement	2b		
3	Parent of Supported Organizations Answer lines 3a and 3b below.	·		•
а	Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or			
_	trustees of each of the supported organizations? If "Yes" or "No," provide details in Part VI.	3a		
b	Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each			
	of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard	3b		
DAA	Schodulo A /For	000		

Schedule A (Form 990 or 990-EZ) 2020 FREDERIK MEIJER GARDENS & SCULPTURE38-3118579 Page 6 Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations 1 | Check here if the organization satisfied the Integral Part Test as a qualifying trust on Nov 20, 1970 (explain in Part VI) See instructions. All other Type III non-functionally integrated supporting organizations must complete Sections A through E (B) Current Year Section A - Adjusted Net Income (A) Prior Year (optional) 1 Net short-term capital gain 1 29,325 94,243 2 Recoveries of prior-year distributions 2 ი 0 3,469,473 3.933,006 Other gross income (see instructions) 3 4,027,249 4 Add lines 1 through 3 3,498,798 4 5 Depreciation and depletion 5 0 0 6 Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or maintenance of property held for production of income (see instructions) 102,637 6 121,064 Other expenses (see instructions) 7 8 Adjusted Net Income (subtract lines 5, 6, and 7 from line 4) 8 3,396,161 3,906,185 (B) Current Year Section B - Minimum Asset Amount (A) Prior Year (optional) 1 Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year) 118,648,378 a Average monthly value of securities 1a 112,485,388 b Average monthly cash balances 1b 7,958,356 9,021,608 c Fair market value of other non-exempt-use assets 1c 120,443,744 d Total (add lines 1a, 1b, and 1c) 1d 127,669,986 e Discount claimed for blockage or other factors (explain in detail in Part VI) 0 2 Acquisition indebtedness applicable to non-exempt-use assets 2 0 3 Subtract line 2 from line 1d 3 120,443,744 127,669,986 Cash deemed held for exempt use Enter 0 015 of line 3 (for greater amount, see instructions) 4 1,806,656 1,915,050 5 Net value of non-exempt-use assets (subtract line 4 from line 3) 5 118,637,088 125,754,936 Multiply line 5 by 0 035 6 4,152,298 4,401,423 Recoveries of prior-year distributions 7 8 Minimum Asset Amount (add line 7 to line 6) 8 4,152,298 4,401,423 Section C - Distributable Amount **Current Year** Adjusted net income for prior year (from Section A, line 8, column A) 1 3,396,161 2 Enter 0 85 of line 1 2 2,886,737 Minimum asset amount for prior year (from Section B, line 8, column A) 4,152,298 3 Enter greater of line 2 or line 3 4,152,298 4 Income tax imposed in prior year 5 0

Check here if the current year is the organization's first as a non-functionally integrated Type III supporting organization

Distributable Amount. Subtract line 5 from line 4, unless subject to

emergency temporary reduction (see instructions)

(see instructions)

Schedule A (Form 990 or 990-EZ) 2020

4,152,298

Schedule A (Form 990 or 990-EZ) 2020 Page 7 Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations (continued) Part V Section D - Distributions **Current Year** 5,342,172 Amounts paid to supported organizations to accomplish exempt purposes Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity 0 Administrative expenses paid to accomplish exempt purposes of supported organizations 0 Amounts paid to acquire\_exempt-use assets 0 Qualified set-aside amounts (prior IRS approval required—provide details in Part VI) 0 Other distributions (describe in Part VI) See instructions 5,342,172 Total annual distributions. Add lines 1 through 6 Distributions to attentive supported organizations to which the organization is responsive 5,342,172 4,152,298 (provide details in Part VI) See instructions Distributable amount for 2020 from Section C, line 6 1.000000 Line 8 amount divided by line 9 amount (i) (ii) (111) **Underdistributions** Distributable Section E - Distribution Allocations (see instructions) **Excess Distributions** Pre-2020 Amount for 2020 4,152,298 Distributable amount for 2020 from Section C, line 6 Underdistributions, if any, for years prior to 2020 (reasonable cause required-explain in Part VI) See instructions Excess distributions carryover, if any, to 2020 0 a From 2015 0 **b** From 2016 0 c From 2017 2,343,389 d From 2018 5,125,794 e From 2019 f Total of lines 3a through 3e 7.469.183 0 g Applied to underdistributions of prior years 4,152,298 h Applied to 2020 distributable amount i Carryover from 2015 not applied (see instructions) 3,316,885 Remainder Subtract lines 3g, 3h, and 3i from line 3f Distributions for 2020 from 5,342,172 Section D, line 7 0 a Applied to underdistributions of prior years b Applied to 2020 distributable amount 5,342,172 c Remainder Subtract lines 4a and 4b from line 4 Remaining underdistributions for years prior to 2020, if any Subtract lines 3g and 4a from line 2 For result greater than zero, explain in Part VI See instructions Remaining underdistributions for 2020 Subtract lines 3h and 4b from line 1 For result greater than zero, explain in Part VI See instructions Excess distributions carryover to 2021. Add lines 3j 8,659,057 and 4c Breakdown of line 7 0 a Excess from 2016 0 b Excess from 2017 0 c Excess from 2018 3,316,885 d Excess from 2019 5,342,172 e Excess from 2020

lines 2, 5, and 6. Also complete this part for any additional information. (See instructions.)

PART IV, SECTION D, LINE 2 - EXPLANATION OF WORKING RELATIONSHIP
THE FREDERIK MEIJER GARDENS & SCULPTURE PARK (GARDENS) MAINTAINS A CLOSE
AND CONTINUOUS WORKING RELATIONSHIP WITH THE FOUNDATION THROUGHOUT THE
YEAR. THE PRESIDENT AND CEO OF THE GARDENS ATTENDS FOUNDATION'S QUARTERLY
BOARD MEETINGS AND INVESTMENT COMMITTEE MEETINGS AND REPORTS ON THE GARDENS
FINANCIAL STATEMENTS. THE CHAIRPERSON OF THE GARDENS BOARD OF DIRECTORS
SITS ON THE FOUNDATION BOARD OF DIRECTORS AS AN EX-OFFICIO MEMBER. ALSO,
THE PRESIDENT AND CEO OF THE GARDENS MEETS WITH THE PRESIDENT AND TREASURER
OF THE FOUNDATION PERIODICALLY THROUGHOUT THE YEAR.

PART IV, SECTION D, LINE 3 - ROLE OF SUPPORTED ORGANIZATIONS
THE GARDENS HAS A SIGNIFICANT VOICE IN THE FOUNDATION'S INVESTMENT AND
GRANT DECISIONS. THE FOUNDATION BOARD DECIDES THE AMOUNT AND TIMING OF
DISTRIBUTIONS TO THE GARDENS. THE FOUNDATION INVESTMENT COMMITTEE MAKES
INVESTMENT AND DISTRIBUTION RECOMMENDATIONS TO THE BOARD, WITH INPUT FROM
THE GARDENS CONSIDERED. THE PRESIDENT AND CEO OF THE GARDENS ATTENDS EVERY
QUARTERLY INVESTMENT COMMITTEE MEETING TO GIVE INPUT AND SUGGESTIONS
REGARDING DISTRIBUTIONS. HE ALSO MEETS PERIODICALLY WITH THE CHAIR OF THE
INVESTMENT COMMITTEE TO DISCUSS LONG-RANGE INVESTMENT PLANNING.

PART V, SECTION D, LINE 8 - DISTRIBUTIONS TO SUPPORTED ORGANIZATIONS
THE FOUNDATION DISTRIBUTES 100% OF ITS GRANTS TO THE GARDENS. THE
FOUNDATION IS RESPONSIVE TO THE NEEDS AND DEMANDS OF THE GARDENS AS NOTED
IN PART IV, SECTION D, LINES 2 AND 3. THE FOUNDATION IS ALSO ATTENTIVE TO
THE OPERATIONS OF THE GARDENS, GENERALLY PROVIDING MORE THAN 10% OF THE
GARDEN'S ANNUAL SUPPORT.

### SCHEDULE D (Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

► Complete if the organization answered "Yes" on Form 990,
Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b.

► Attach to Form 990.

► Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No 1545-0047 2020

Open to Public Inspection

	e of the organization REDERIK MEIJER GARDENS & SCULPTURE	2	Employer identification number
	OUNDATION		38-3118579
	art I Organizations Maintaining Donor Advised F Complete if the organization answered "Yes" of	Funds or Other Similar Funds on Form 990, Part IV, line 6.	
4		(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year		
2	Aggregate value of contributions to (during year)		
3	Aggregate value of grants from (during year)		
4	Aggregate value at end of year		
5	Did the organization inform all donors and donor advisors in writing	that the assets held in donor advised	
	funds are the organization's property, subject to the organization's e	exclusive legal control?	☐ Yes ☐ No
6	Did the organization inform all grantees, donors, and donor advisors		
	only for charitable purposes and not for the benefit of the donor or d	lonor advisor, or for any other purpose	
	conferring impermissible private benefit?	• • •	Yes No
P	art II Conservation Easements.		
	Complete if the organization answered "Yes" of	on Form 990, Part IV, line 7.	
1	Purpose(s) of conservation easements held by the organization (che	eck all that apply)	
	Preservation of land for public use (for example, recreation or ex	ducation Preservation of a historicall	y important land area
	Protection of natural habitat	Preservation of a certified h	istoric structure
	Preservation of open space	<del></del>	
2	Complete lines 2a through 2d if the organization held a qualified cor	nservation contribution in the form of a c	onservation
	easement on the last day of the tax year		Held at the End of the Tax Year
а	Total number of conservation easements		2a
b	Total acreage restricted by conservation easements		2b
С	Number of conservation easements on a certified historic structure	included in (a)	2c
d	Number of conservation easements included in (c) acquired after 7/	25/06, and not on a	
	historic structure listed in the National Register		2d
3	Number of conservation easements modified, transferred, released,	extinguished, or terminated by the orga	inization during the
	tax year ▶		
4	Number of states where property subject to conservation easement	is located ▶	
5	Does the organization have a written policy regarding the periodic n	nonitoring, inspection, handling of	
	violations, and enforcement of the conservation easements it holds?		Yes No
6	Staff and volunteer hours devoted to monitoring, inspecting, handling	g of violations, and enforcing conservati	on easements during the year
	<b>&gt;</b>		
7	Amount of expenses incurred in monitoring, inspecting, handling of	violations, and enforcing conservation e	asements during the year
	<b>▶</b> \$		
8	Does each conservation easement reported on line 2(d) above satisfied	fy the requirements of section 170(h)(4)	)(B)(ı)
	and section 170(h)(4)(B)(ii)?		Yes No
9	In Part XIII, describe how the organization reports conservation easi		
	balance sheet, and include, if applicable, the text of the footnote to t	he organization's financial statements th	nat describes the
	organization's accounting for conservation easements		
Pa	art III Organizations Maintaining Collections of A		er Similar Assets.
	Complete if the organization answered "Yes" or		
1a	If the organization elected, as permitted under FASB ASC 958, not to		
	of art, historical treasures, or other similar assets held for public exh		ance of public
	service, provide in Part XIII the text of the footnote to its financial sta		
b	If the organization elected, as permitted under FASB ASC 958, to re		
	art, historical treasures, or other similar assets held for public exhibit	tion, education, or research in furtherand	ce of public service,
	provide the following amounts relating to these items		
	(i) Revenue included on Form 990, Part VIII, line 1		<b>▶</b> \$
	(ii) Assets included in Form 990, Part X		▶ \$
2	If the organization received or held works of art, historical treasures,	, or other similar assets for financial gain	n, provide the
	following amounts required to be reported under FASB ASC 958 rel-	ating to these items	
	Revenue included on Form 990, Part VIII, line 1		<b>▶</b> \$
b	Assets included in Form 990, Part X		<b>▶</b> \$

	edule D (Form 990) 2020 FREDERIA								<sup>2</sup> age ∠
	Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets (continued)								
3	3 Using the organization's acquisition, accession, and other records, check any of the following that make significant use of its collection items (check all that apply)								
а	a Public exhibition d Loan or exchange program								
b	Scholarly research	е 🗍	Other						
С	Preservation for future generations	_							
4	Provide a description of the organization's	s collections and expl	ain how they further t	he organizatio	n's exe	arua tam	ose in Part		
	XIII	•	,	3					
5	During the year, did the organization solid	at or receive donation	s of art, historical trea	sures, or oth	er sımıla	ır			
	assets to be sold to raise funds rather tha		· ·					Yes	No
Pa	art IV Escrow and Custodial A		<u></u>				<del></del>		
	Complete if the organizat 990, Part X, line 21	•	es" on Form 990,	Part IV, lın	e 9, or	report	ed an amo	unt on Fo	rm
4-		odion or other interes							
14	Is the organization an agent, trustee, cust	odian of other interm	ediary for contribution	is or other as:	sets not			□ <b>v</b> •• [	7 No.
	included on Form 990, Part X?	ZIII	£.11					∐ Yes [	No
Þ	If "Yes," explain the arrangement in Part	(III and complete the	following table			г	<del></del>	A 1	
						-	_	Amount	<del></del>
	Beginning balance						1c	<del></del>	
	Additions during the year					F	1d		
	Distributions during the year					L	1e		
	Ending balance					L	1f	<del></del>	
	Did the organization include an amount of		·			•		∐ Yes L	_ No
	If "Yes," explain the arrangement in Part	KIII Check here if the	explanation has bee	n provided on	Part XII	1			
Pa	art V Endowment Funds.								
	Complete if the organizat	ion answered "Ye	es" on Form 990,						
	1	(a) Current year	(b) Pnor year	(c) Two years	back	(d) Thre	e years back	(e) Four year	
1a	Beginning of year balance	126,451,123	115,484,594	117,686	683		528,050	96,563	<u>,743</u>
b	Contributions	2,866,147	4,899,954	1,118	3,764	14,	253,308	1,057	,518
C	Net investment earnings, gains, and								
	losses	7,539,725	8,083,120		446	6,	381,493	2,523	,929
d	Grants or scholarships	2,244,465	2,016,545	1,888	407	1,	476,168	1,617	,140
е	Other expenditures for facilities and								
	programs								
f	Administrative expenses		<del></del> _		,				
	End of year balance	134,612,530	126,451,123	115,484	,594	117,	686,683	98,528	,050
	Provide the estimated percentage of the	current vear end bala	nce (line 1a. column (	a)) held as					
	Board designated or quasi-endowment		, , , , , , ,	. ,,					
	Permanent endowment ▶ 88.48 %								
	Term endowment ▶ 11.52 %								
-	The percentages on lines 2a, 2b, and 2c	should equal 100%							
3a	Are there endowment funds not in the pos	•	ization that are held a	ind administer	red for t	he			
•	organization by	organi						Yes	No
	(i) Unrelated organizations							3a(i)	X
	(ii) Related organizations							3a(ii)	X
h	If "Yes" on line 3a(ii), are the related orga	nizations listed as rec	nured on Schedule R	2				3b	† <del></del>
	Describe in Part XIII the intended uses of		•	•				30	
	art VI Land, Buildings, and Eq		downlent lunus	<del>_</del>			<del></del>		
ГС			e" on Form 900	Part IV Jun	0 110	Soo E	orm 000 E	art Y line	.10
	Complete if the organizat  Description of property			_					IV.
	Description of property	(a) Cost or other t	1 ''			ccumulated	'	(d) Book value	
		(investment)	(othe	**1		preciation			
	Land	<del> </del>							
	Buildings						<del></del>		
	Leasehold improvements								
	Equipment	<u> </u>	<del></del>				<del></del>		
	Other								
Γota	I. Add lines 1a through 1e (Column (d) mu	ist equal Form 990, F	Part X, column (B), line	e 10c)			<u>▶</u>		

Schedule D (	Form 990) 2020 FREDERIK MEIJER GARI	DENS & SCULPTU	RE38-3118579	Page Page
Part VII	Investments – Other Securities.			
	Complete if the organization answered "Yes"	on Form 990, Part IV	, line 11b. See Form 9	90, Part X, line 12
	(a) Description of security or category	(b) Book value	(c) Method o	fvaluation
	(including name of security)		Cost or end-of-ye	ar market value
(1) Financial	derivatives			
(2) Closely h	eld equity interests			
(3) Other				
(A)				
(B)				<u></u> _
(C)				
(D)				
(E)				
(F)				
(G)				
(H)				
Total. (Colun	nn (b) must equal Form 990, Part X, col (B) line 12)	·		
Part VIII	Investments – Program Related.			
	Complete if the organization answered "Yes"	on Form 990, Part IV	, line 11c See Form 9	<u>90, Part X, line 13.</u>
_	(a) Description of investment	(b) Book value	(c) Method o	fvaluation
			Cost or end-of-ye	ar market value
(1)				
(2)				
(3)				
(4)				
(5)				
(6)				
<u>(7)</u>				
(8)				
(9)				
	nn (b) must equal Form 990, Part X, col (B) line 13)	<u> </u>		
Part IX	Other Assets.			
	Complete if the organization answered "Yes"	on Form 990, Part IV	<u>, line 11d. See Form 9</u>	
	(a) Description	<del></del> _		(b) Book value
(1)			<u></u>	
<u>(2)</u>				
(3)				
(4)				
<u>(5)</u>				
(6)				
(7)		<del> </del>		
(8)		- <del>.</del>		
<u>(9)</u>				
	nn (b) must equal Form 990, Part X, col (B) line 15)		<u> </u>	
Part X	Other Liabilities.			
	Complete if the organization answered "Yes"	on Form 990, Part IV	, line 11e or 11f. See F	orm 990, Part X,
	line 25			<del></del>
<u>1</u>	(a) Description of liability		<del></del>	(b) Book value
	I income taxes	<del></del>		100
<del></del>	ANNUITY LIABILITY			1,183,75
(3)				<del></del>
_(4)				
<u>(5)</u>			<del></del>	
<u>(6)</u>		<del></del>		
(7)				
(8)				

1,183,757

X

<sup>(9)</sup>Total. (Column (b) must equal Form 990, Part X, col (B) line 25)

2. Liability for uncertain tax positions. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FASB ASC 740 Check here if the text of the footnote has been provided in Part XIII

b Donated services and use of facilities 2b c Recoveries of prior year grants 2¢ d Other (Describe in Part XIII) 2d e Add lines 2a through 2d 7,967,154 2e 3 Subtract line 2e from line 1 13,604,126 3 4 Amounts included on Form 990, Part VIII, line 12, but not on line 1 155,580 a investment expenses not included on Form 990, Part VIII, line 7b b Other (Describe in Part XIII ) 4b c Add lines 4a and 4b 155,580 4c Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12) 5 13,759,706

Part XII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return. Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.

1	Total expenses and losses per audited financial statements			1	5,481,740
2	Amounts included on line 1 but not on Form 990, Part IX, line 25				
а	Donated services and use of facilities	2a			
b	Prior year adjustments	2b			
С	Other losses	2c			
d	Other (Describe in Part XIII )	2d			
е	Add lines 2a through 2d		. –	2e	
3	Subtract line 2e from line 1			3	5,481,740
4	Amounts included on Form 990, Part IX, line 25, but not on line 1				
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a	155,580		
b	Other (Describe in Part XIII )	4b			
С	Add lines 4a and 4b			4c	155,580
5	Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18)		,	5	5,637,320

Part XIII Supplemental Information.

Provide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, Part IV, lines 1b and 2b, Part V, line 4, Part X, line

2, Part XI, lines 2d and 4b, and Part XII, lines 2d and 4b. Also complete this part to provide any additional information

PART V, LINE 4 - INTENDED USES FOR ENDOWMENT FUNDS

SINGLE PURPOSE FOUNDATION WITH AN ENDOWMENT FUND TO SUPPORT THE FREDERIK MEIJER GARDENS AND SCULPTURE PARK.

### PART X - FIN 48 FOOTNOTE

THE FOUNDATION ACCOUNTS FOR TAX POSITIONS IN ACCORDANCE WITH THE PROVISIONS OF FINANCIAL ACCOUNTING STANDARDS BOARD CODIFICATION SECTION 740-10.

Page 4

### SCHEDULE F (Form 990)

### Statement of Activities Outside the United States

▶ Complete if the organization answered "Yes" on Form 990, Part IV, line 14b, 15, or 16, ▶ Attach to Form 990.

▶ Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No 1545-0047 2020

Open to Public Inspection

Department of the Treasury Internal Revenue Service Name of the organization

FREDERIK MEIJER GARDENS & SCULPTURE

Employer Identification number

FOUNDATION 38-3118579 General Information on Activities Outside the United States. Complete if the organization answered "Yes" on Part I Form 990, Part IV, line 14b For grantmakers. Does the organization maintain records to substantiate the amount of its grants and other assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to Yes X No award the grants or assistance? 2 For grantmakers. Describe in Part V the organization's procedures for monitoring the use of its grants and other assistance outside the United States Activities per Region (The following Part I, line 3 table can be duplicated if additional space is needed) (b) Number of offices in (a) Region (c) Number of (d) Activities conducted in the (e) If activity listed in (d) is (f) Total a program service, describe specific type of employees. region (by type) (such as, expenditures for agents and the region fundraising, program services, and investments independent investments, grants to recipients service(s) in the region in the region contractors in the region located in the region) CENTRAL AMERICA AND THE CARIBBEAN INVESTMENTS (1) 10,027,608 (2) (3) (4) (5) (6) (7) (8) (9) (10) (11) (12) (13)(14)(15)(16)(17)3a Subtotal 10,027,608 **b** Total from continuation sheets to Part I c Totals (add lines 3a and 3b 10,027,608 Page 2

Schedule F (Form 990) 2020 FREDERIK MELJER GARDENS & SCULPTURES8-3118579

Grants and Other Assistance to Organizations or Entities Outside the United States. Complete if the organization answered "Yes" on Form 990, Schedule F (Form 990) 2020 (i) Method of valuation (book, FMV, appraisal, other) of noncash assistance (h) Description Part IV, line 15, for any recipient who received more than \$5,000. Part II can be duplicated if additional space is needed. (g) Amount of noncash assistance (f) Manner of 2 Enter total number of recipient organizations listed above that are recognized as charities by the foreign country, recognized as a tax disbursement cash exempt 501(c)(3) organization by the IRS, or for which the grantee or counsel has provided a section 501(c)(3) equivalency letter (e) Amount of cash grant (d) Purpose of (c) Region Enter total number of other organizations or entities (b) IRS code section and EIN (if applicable) (a) Name of organization Part II **(1**) ව € 9 6) (10) (11) (12) (13) 14 (15) 2 (9) 5 (8)

Schedule F (Form 990) 2020 FREDERIK MEIJER GARDENS & SCULPTURB8 – 3118579

Part III, Grants and Other Assistance to Individuals Outside the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 16.

Page 3

Page 4

Page 3

Page 4

Page 3

Page 3

Page 3

Page 4

Page 4

Page 4

Page 4

Page 4

Page 4

Page 3

Page 4

Page 4 Schedule F (Form 990) 2020 (h) Method of valuation (book, FMV, appraisal, other) (f) Amount of noncash assistance (e) Manner of cash disbursement Ę 9 12 133 14 (15) 16 (17 (18) ව 4 9 8 8 9 E 2

Pa	nt IV Foreign Forms		
1	Was the organization a U.S. transferor of property to a foreign corporation during the tax year? If "Yes," the organization may be required to file Form 926, Return by a U.S. Transferor of Property to a Foreign Corporation (see Instructions for Form 926)	X Yes	☐ No
2	Did the organization have an interest in a foreign trust during the tax year? If "Yes," the organization may be required to separately file Form 3520, Annual Return To Report Transactions With Foreign Trusts and Receipt of Certain Foreign Gifts, and/or Form 3520-A, Annual Information Return of Foreign Trust With a U.S. Owner (see Instructions for Forms 3520 and 3520-A, don't file with Form 990)	☐ Yes	🗓 No
3	Did the organization have an ownership interest in a foreign corporation during the tax year? If "Yes," the organization may be required to file Form 5471, Information Return of U.S. Persons With Respect to Certain Foreign Corporations (see Instructions for Form 5471)	X Yes	☐ No
4	Was the organization a direct or indirect shareholder of a passive foreign investment company or a qualified electing fund during the tax year? If "Yes," the organization may be required to file Form 8621, Information Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund (see Instructions for Form 8621)	X Yes	☐ No
5	Did the organization have an ownership interest in a foreign partnership during the tax year? If "Yes," the organization may be required to file Form 8865, Return of U.S. Persons With Respect to Certain Foreign Partnerships (see Instructions for Form 8865)	X Yes	☐ No
6	Did the organization have any operations in or related to any boycotting countries during the tax year? If "Yes," the organization may be required to separately file Form 5713, International Boycott Report (see Instructions for Form 5713, don't file with Form 990)	☐ Yes	X No
		Schodule E (Forr	m 000\ 2020

### Part V Supplemental Information

Provide the information required by Part I, line 2 (monitoring of funds), Part I, line 3, column (f) (accounting method, amounts of investments vs. expenditures per region), Part II, line 1 (accounting method), Part III (accounting method), and Part III, column (c) (estimated number of recipients), as applicable. Also complete this part to provide any additional information. See instructions

PART I, LINE 3 - ACTIVITIES PER REGION

REGION EXPENDITURES INVESTMENTS

CENTRAL AMERICA AND THE CARIBBEAN \$ 0 \$ 10,027,608

**SCHEDULE 1** (Form 990)

### Governments, and Individuals in the United States Grants and Other Assistance to Organizations,

2020	Open to Public	Inspection

14.

OMB No 1545-0047

Employer identification number 38-3118579 Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22. ▶ Go to www.irs.gov/Form990 for the latest information. ▶ Attach to Form 990. FREDERIK MEIJER GARDENS & SCULPTURE General Information on Grants and Assistance FOUNDATION Department of the Treasury Internal Revenue Service Name of the organization Part

<ul> <li>Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance?</li> <li>Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States</li> </ul>	ate the amount of the sistance?	ie grants or of grant fur	assistance, the grante	ses' eligibility for the	grants or assistar	nce, and	X Yes No
Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed.	Domestic Org	anization ore than \$	is and Domestic 5,000. Part II can	Governments. be duplicated if	Complete if the additional spa	e organization ice is needed.	answered "Yes" on Form 990,
(a) Name and address of organization     or government	(p) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance
MICH HORTICULTURAL ) E. BELTLINE NE		(	6				SUPPORT OF WMHS
(2)	38-2394044	7	5,342,1/2		САЅН	NONE	
(3)							
(4)							
(5)				:			
(9)							
(2)							
(8)							
(6)							
2 Enter total number of section 501(c)(3) and government organizations 3 Enter total number of other organizations listed in the line 1 table	tions	listed in the line 1 table	ine 1 table				

Schedule I (Form 990) (2020)

For Paperwork Reduction Act Notice, see the Instructions for Form 990.

Schedule I (Form 990) (2020) FREDERIK MEIJER GARDENS & SCULPTURB8-3118579

Part III Grants and Other Assistance to Domestic Individuals. Complete if the organization answered "Yes" on Form 990, Part IV, line 22.

Part III can be duplicated if additional space is needed

•	(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of noncash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(e) Method of valuation (book, (f) Description of noncash assistance FMV, appraisal, other)
1 CHAR.	1 CHARITABLE ANNUITY PMTS.	8	086,6			
2						
က						
4						
5						
9						
7						
Part IV	Supplemental Information. Provide the infor	ovide the information	required in Part I. III	ne 2, Part III, colurr	mation required in Part I, line 2, Part III, column (b), and any other additional information.	tional information.

## SEE SCHEDULE I SUPPLEMENTAL INFORMATION WORKSHEET

### SCHEDULE O (Form 990 or 990-EZ)

### Supplemental Information to Form 990 or 990-EZ

Complete to provide information for responses to specific questions on Form 990 or 990-EZ or to provide any additional information.

► Attach to Form 990 or 990-EZ.

► Go to www.irs.gov/Form990 for the latest information.

2020

Open to Public Inspection

Department of the Treasury Internal Revenue Service Name of the organization

Name of the organization FREDERIK MEIJER GARDENS & SCULPTURE FOUNDATION

Employer identification number 38-3118579

### AMENDED RETURN EXPLANATION

THE RETURN IS BEING AMENDED DUE TO FOREIGN FILING DISCLOSURES THAT WERE INADVERTENTLY OMITTED IN THE INITIAL FILING OF THE RETURN. SCHEDULE F WAS ADDED TO THE AMENDED RETURN. SCHEDULE F, PART I INCLUDES TOTAL DIRECT FOREIGN INVESTMENTS VALUED AT \$10,027,608. THE RESPONSE TO FORM 990, PART IV, QUESTION 14B WAS UPDATED TO "YES", AND SCHEDULE F, PART IV, QUESTIONS 1, 3, 4, AND 5 WERE MARKED "YES". ADDITIONALLY, THE FORMS 8865 AND FORM 926 THAT WERE REQUIRED TO BE FILED DUE TO DIRECT AND INDIRECT OWNERSHIP IN ANY FOREIGN PARTNERSHIPS OR FOREIGN CORPORATIONS WER INCLUDED WITH THIS AMENDED RETURN.

### REASONABLE CAUSE STATEMENTS

WE ARE REQUESTING RELIEF OF PENALTY ASSESSMENT FOR FAILURE TO FILE INTERNATIONAL INFORMATION RETURNS FOR THE FOLLOWING TAX YEARS THAT WE FAILED TO TIMELY FURNISH INFORMATION IN ACCORDANCE WITH INTERNAL REVENUE CODE \$6038B REGARDING TRANSFERS TO FOREIGN CORPORATIONS AND FOREIGN PARTNERSHIPS:

TAX YEAR: 2017, 2018, 2019, AND 2020

WE ARE REQUESTING RELIEF UNDER IRC §6038B(C)(2) REASONABLE CAUSE FOR THE PENALTY ASSESSMENT TO NOT BE APPLIED FOR FAILING TO TIMELY FILE FORM 926, FORM 8865, AND FORM 8865 SCHEDULE O. WE ARE REQUESTING RELIEF AS THIS FAILURE TO FILE WAS NOT DUE TO WILLFUL NEGLECT. THE TAXPAYER IS A 501(C)(3)

ORGANIZATION WITH A HISTORY OF TIMELY COMPLYING WITH ALL OTHER REQUIRED RETURNS.

WE HAVE IDENTIFIED THE REQUIRED DELINQUENT INTERNATIONAL INFORMATION RETURNS AND HAVE PREPARED THESE FORMS TO BE FILED AS AN ATTACHMENT TO AMENDED FORM 990 RETURNS FOR THE APPLICABLE TAX YEARS. WE ARE CURRENTLY NOT UNDER AN IRS CIVIL EXAMINATION OR CRIMINAL INVESTIGATION, AND WE HAVE NOT ALREADY BEEN CONTACTED BY THE IRS ABOUT THE DELINQUENT RETURNS. WE ARE FILING THESE RETURNS VOLUNTARILY TO BECOME COMPLIANT IN OUR REPORTING REQUIREMENTS UNDER IRC §6038B.

WE HAVE PREPARED AND ARE FILING ALL KNOWN REQUIRED FORM 926, FORM 8865, AND FORM 8865 SCHEDULE O FOR PAST YEARS AS ATTACHMENTS TO THE APPLICABLE AMENDED TAX RETURNS, AS WELL AS WE WILL BE FILING THE CURRENT YEAR FORMS AS REQUIRED.

WE RESPECTFULLY REQUEST YOU REVIEW THE FACTS AND CIRCUMSTANCES REGARDING THE FAILURE TO FILE THE DELINQUENT INTERNATIONAL RETURNS.

FREDERIK MEIJER GARDENS & SCULPTURE FOUNDATION IS A SINGLE-PURPOSE 501(C)

(3) NON-PROFIT FOUNDATION WITH AN ENDOWMENT FUND TO SUPPORT THE FREDERICK

MEIJER GARDENS & SCULPTURE PARK. OVER THE YEARS THE FOUNDATION HAS GROWN

AND EXPANDED ITS INVESTMENT ACTIVITIES TO HELP FUND THE FREDERICK MEIJER

GARDENS & SCULPTURE PARK. THROUGH THIS GROWTH THE INVESTMENT ACTIVITY HAS

BECOME MORE COMPLEX. THE FOUNDATION WORKED WITH ITS INVESTMENT ADVISORS TO

UTILIZE ALTERNATIVE INVESTMENTS, SUCH AS LIMITED PARTNERSHIPS TO DIVERSIFY

AND EXPANDS ITS INVESTMENT ACTIVITY. INITIALLY IN THE EARLY TAX YEARS OF

Employer identification number

38-3118579

### FREDERIK MEIJER GARDENS & SCULPTURE

THIS INVESTMENT STRATEGY, THE LIMITED PARTNERSHIP ACTIVITY WAS MINIMAL AND LIMITED TO DOMESTIC PARTNERSHIPS. IN 2015 AND 2016, WITH INVESTMENTS IN TEN OR LESS LIMITED PARTNERSHIPS, THE FOUNDATION CONFIRMED IN DISCUSSIONS WITH ITS INVESTMENT ADVISOR THAT IT DID NOT OWN ANY DIRECT FOREIGN INVESTMENTS OR INDIRECT FOREIGN INVESTMENTS HELD THROUGH A FOREIGN THE FOUNDATION ADDED ADDITIONAL INVESTMENTS IN 2017 THROUGH 2020, ALL OF WHICH HAD US ADDRESSES ON THE K-1s. THE FOUNDATION IS A MINORITY OWNER IN SEVERAL VERY LARGE, LIMITED PARTNERSHIPS, WITH OWNERSHIP IN EACH OF THE LIMITED PARTNERSHIPS RANGING FROM LESS THAN 1% OWNERSHIP TO LESS THAN 10% OWNERSHIP. THEREFORE, THEY HAD NO CONTROL OVER THE ACTIVITY OF THE LIMITED PARTNERSHIPS.

AS PART OF THE YEAR-END FINANCIAL REPORTING AND FORM 990 PREPARATION PROCESS THE SCHEDULE K-1S WERE RECEIVED AND REVIEWED TO BE INCLUDED IN THE INCOME OF THE FOUNDATION AND INCLUDED IN THE FORM 990 AND FORM 990T REPORTING WHEN REQUIRED. UNFORTUNATELY, AND NOT DUE TO ANY WILLFUL NEGLECT, THE DISCLOSURES WITHIN THE SCHEDULE K-1 REPORTING THE INDIRECT TRANSFERS TO FOREIGN PARTNERSHIPS AND FOREIGN CORPORATIONS OF THE 15 PLUS LIMITED PARTNERSHIP INVESTMENTS WERE INADVERTENTLY OVERLOOKED AND THEREFORE THE REQUIRED DISCLOSURE FORMS WERE NOT TIMELY FILED.

AFTER THE 2020 RETURN WAS FILED, IT WAS DETERMINED THAT THERE WERE POTENTIAL DELINQUENT FOREIGN DISCLOSURE FILINGS. IT WAS DETERMINED THAT ANDREWS HOOPER PAVLIK (AHP) WOULD REVIEW THROUGH ALL PAST YEARS SCHEDULE K-1S TO DETERMINE IMPACTED TAX YEARS AND THE POTENTIAL DELINQUENT FILINGS. THIS INITIAL REVIEW WAS COMPLETED, AND A PRELIMINARY LIST WAS PROVIDED. DUE TO THE POTENTIAL PENALTIES ASSOCIATED WITH THESE DELINQUENT FOREIGN

Employer identification number

38-3118579

### FREDERIK MEIJER GARDENS & SCULPTURE

8865, AND FORM 8865 SCHEDULE O.

FILINGS THE FOUNDATION TOOK TIME TO DISCUSS THE MATTER WITH ITS BOARD OF DIRECTORS. AFTER ALL PARTIES HAD REVIEWED THE MATTER OF THE DELINQUENT FOREIGN FILINGS IT WAS DETERMINED AHP WOULD THOROUGHLY REVIEW THE SCHEDULE K-1S FROM THE LIMITED PARTNERSHIPS IN THEIR WORKPAPERS AND AHP WOULD PREPARE AND FILE AMENDED FORM 990S TO ATTACH THE REQUIRED FORM 926, FORM

REASONABLE CARE WAS TAKEN DURING THE PREPARATION AND REVIEW PROCESS OF THE DISCLOSURE STATEMENTS WITHIN THE SCHEDULE K-1S TO ENSURE ALL REQUIRED DISCLOSURES WERE REPORTED. THIS REVIEW PROCESS INCLUDED REVIEWING HUNDREDS OF PAGES OF K-1 INFORMATION SPANNING MULTIPLE TAX YEARS. SINCE STATUTE OF LIMITATIONS DOES NOT APPLY TO THESE DELINQUENT TAX FORMS UNTIL THREE YEARS AFTER THE FORMS ARE FILED, REASONABLE PREPARATION AND REVIEW TIME WAS NECESSARY TO MAKE SURE THE DELINQUENT FORMS WERE PREPARED FOR FILING. WITHIN EACH TAX YEAR, NUMEROUS SCHEDULE K-1S WITH MULTIPLE TRANSFERS WITHIN EACH OF THE K-1S WERE REVIEWED TO DETERMINE FILING REQUIREMENTS

REPORTING IS REQUIRED IF 1) IMMEDIATELY AFTER THE TRANSFER, THE U.S. PERSON OWNS, DIRECTLY, INDIRECTLY, OR BY ATTRIBUTION, AT LEAST 10% INTEREST IN THE PARTNERSHIP (OR CORPORATION); OR 2) THE CASH TRANSFERRED TO THE PARTNERSHIP (OR CORPORATION) EXCEEDS \$100,000. FOR THE MOST PART THE FOUNDATION'S ACTIVITY IS AN INDIRECT INTEREST IN PARTNERSHIPS WITH VERY LITTLE OWNERSHIP INTEREST BY THE FOUNDATION.

FOR EACH OF THE REQUIRED DELINQUENT FORMS THE FOUNDATION WAS REQUIRED TO FILE DUE TO THE SECOND REQUIREMENT OF A CASH TRANSFER OF \$100,000 OR MORE.

THE TAXPAYER IS A NON-PROFIT ENTITY WHO IS USING THE INVESTMENT ACTIVITY AS

38-3118579

A FUNDING SOURCE FOR THE NON-PROFIT ACTIVITY AND AT NO POINT WAS THE FOUNDATION TRYING TO WILLFULLY NEGLECT TO FILE THE REQUIRED DISCLOSURES FORMS.

THE FOUNDATION HAS FILED ALL REQUIRED AMENDED FORM 990S WITH THE REQUIRED FORM 926, FORM 8865, AND FORM 8865 SCHEDULE O AS ATTACHMENTS. THIS REASONABLE CAUSE STATEMENT HAS BEEN INCLUDED WITH EACH AMENDED TAX RETURN FOR THE TAX YEARS IMPACTED. ALSO, THE CURRENT YEAR TRANSFERS AND REQUIRED FORMS WILL BE FILED WITH THE 2021 FORM 990 WHICH IS DUE MAY 15, 2022.

TIME AND CARE WERE TAKEN DURING THIS REVIEW AND PREPARATION PROCESS FOR THE FOUR TAX YEARS THAT WERE IMPACTED TO ALLOW FOR THE FOUNDATION TO VOLUNTARILY COMPLY WITH THE REQUIREMENTS UNDER IRC \$6038B(A) AND IRC \$6038B(B). THERE WAS NO WILLFUL NEGLECT IN NOT FILING THESE DELINQUENT INTERNATIONAL INFORMATION RETURNS. WITH ANY ORGANIZATION THAT IS GROWING AND EXPANDING TURNOVER WITHIN THE ORGANIZATION AND TURNOVER WITHIN THE ACCOUNTING FIRM PREPARING THE FORM 990 AND FORM 990T RESULTED IN THESE DISCLOSURE FORMS INADVERTENTLY BEING MISSED. AS SOON AS THE FOUNDATION WAS NOTIFIED OF THE DELINQUENT FILINGS ACTION WAS TAKEN TO VOLUNTARY FILE THE DELINQUENT FORMS AND COMPLY WITH THE REQUIREMENTS. IN ORDER TO REMAIN IN COMPLIANCE, THE FOUNDATION HAS IMPLEMENTED THE FOLLOWING BEST PRACTICES:

- REVIEW INVESTMENT PORTFOLIO FOR ANY POSSIBLY DIRECT INVESTMENTS IN FOREIGN CORPORATIONS OR FOREIGN PARTNERSHIPS.
- EDUCATE ITS STAFF (BOTH ON THE INVESTMENT SIDE AND ACCOUNTING SIDE) THE NEED TO IDENTIFY ANY POTENTIAL DIRECT HOLDINGS IN FOREIGN CORPORATION OR FOREIGN PARTNERSHIP.

- MAINTAIN A SCHEDULE OF ALL KNOWN FOREIGN CORPORATIONS OR FOREIGN
  PARTNERSHIPS, WHETHER THEY ARE OWNED DIRECTLY OR INDIRECTLY, AND MONITOR
  THESE ENTITIES FOR TRANSFERS EACH YEAR.
- REVIEW ALL SCHEDULE K-1S ATTACHMENTS AND DISCLOSURES TO DETERMINE ANY REQUIRED TRANSFERS EACH YEAR

IMPLEMENTING THESE BEST PRACTICES WILL ALLOW FOR MAINTAINING A RECORD OF REQUIRED FOREIGN DISCLOSURE TO PREVENT ANY FUTURE MISSED FILINGS. WE RESPECTFULLY REQUEST THAT AFTER REVIEWING THE FACTS AND CIRCUMSTANCE SURROUNDING THIS MATTER, YOU PROVIDE RELIEF UNDER IRC \$6038B(C)(2) FOR REASONABLE CAUSE.

UNDER PENALTIES OF PERJURY, I DECLARE THAT I HAVE EXAMINED THESE
STATEMENTS, AND TO THE BEST OF MY KNOWLEDGE AND BELIEF THAT THEY ARE TRUE,
CORRECT, AND COMPLETE.

FORM 990 - ORGANIZATION'S MISSION

THE FREDERIK MEIJER GARDENS & SCULPTURE FOUNDATION IS A SINGLE PURPOSE FOUNDATION WITH AN ENDOWMENT FUND TO SUPPORT THE FREDERIK MEIJER GARDENS & SCULPTURE PARK. THE MOST SIGNIFICANT ACTIVITIES FOR THE YEAR WERE THE INVESTMENT DECISIONS FOR THE ENDOWMENT FUND.

FORM 990 - ADDITIONAL INFORMATION

ALL LINES LEFT BLANK ARE NOT APPLICABLE TO THE ORGANIZATION.

FORM 990, PART VI, LINE 7A - ELECTION OF MEMBERS AND THEIR RIGHTS

38-3118579

### FREDERIK MEIJER GARDENS & SCULPTURE

THE MEIJER FOUNDATION HAS THE RIGHT TO APPOINT TWO ADDITIONAL DIRECTORS AT ANY TIME; HOWEVER, IT HAS NEVER EXERCISED THIS RIGHT.

FORM 990, PART VI, LINE 11B - ORGANIZATION'S PROCESS TO REVIEW FORM 990 THE FORM 990 IS REVIEWED IN DETAIL BY THE TREASURER, A CPA, PRIOR TO FILING. THE FORM 990 IS MADE AVAILABLE TO ALL MEMBERS OF THE INVESTMENT COMMITTEE.

FORM 990, PART VI, LINE 12C - ENFORCEMENT OF CONFLICTS POLICY POLICY:

EACH DIRECTOR OR OFFICER OF THE FOUNDATION SHALL CONDUCT HIS OR HER ACTIVITIES TO AVOID ENTERING INTO A POSITION WHERE HE OR SHE HAS A MATERIAL PERSONAL INTEREST WITH RESPECT TO ANY ACTIVITY OR DECISION WHICH IS, OR APPEARS TO BE, IN CONFLICT WITH THE INTEREST OF THE FOUNDATION BECAUSE OF HIS OR HER KNOWLEDGE OF, INFLUENCE OVER, OR STATUS AT THE FOUNDATION. IF A DIRECTOR OR OFFICER IS AWARE OF A POSSIBLE CONFLICT OF INTEREST, THE INDIVIDUAL IS RESPONSIBLE FOR DISCLOSING THE POTENTIAL CONFLICT TO THE PRESIDENT OF THE FOUNDATION, AND RECUSING HIMSELF/HERSELF FROM ANY RELATED ACTIONS BY THE FOUNDATION. THE BOARD WILL DISCUSS THE MATTER WITHOUT THE INDIVIDUAL PRESENT, DETERMINE IF A MATERIAL CONFLICT OF INTEREST EXISTS, AND DETERMINE NEXT STEPS.

THE FOUNDATION RECOGNIZES THE VALUE AND RIGHT OF INDIVIDUALS TO BE INVOLVED IN OTHER CHARITABLE ACTIVITIES AS CITIZENS OF THE COMMUNITY. THIS POLICY DOES NOT RESTRICT INVOLVEMENT IN OTHER CHARITABLE ORGANIZATIONS; NOR DOES IT RESTRICT MONETARY OR NON MONETARY GIFTS TO OTHER CHARITABLE ORGANIZATIONS AND AS SUCH DO NOT NEED TO BE DISCLOSED.

INTERPRETATION:

38-3118579

A CONFLICT OF INTEREST IS DEFINED AS ANY SITUATION IN WHICH AN INDIVIDUAL HAS, OR COULD HAVE, CONFLICTING MOTIVATIONS OR RESPONSIBILITIES, THE RESOLUTION OF WHICH COULD BE TO THE DETRIMENT OF THE FOUNDATION OR COULD RESULT IN GAIN OR THE APPEARANCE OF MATERIAL GAIN TO THE INDIVIDUAL.

CONFLICT OF INTEREST INCLUDES, BUT IS NOT LIMITED TO:

- ANY MATERIAL DIRECT OR INDIRECT CONFLICT, NEGOTIATION OR BUSINESS DEALINGS WITH THE FOUNDATION;
- ANY DIRECT OR INDIRECT POSITION OR MATERIAL FINANCIAL INTEREST HELD IN AN OUTSIDE FOR-PROFIT CONCERN THAT DOES BUSINESS WITH THE FOUNDATION, AND THAT IS MATERIAL TO EITHER THE OUTSIDE CONCERN OR THE FOUNDATION;
- ANY MATERIAL GIFTS, MONETARY AWARDS, PAYMENTS, SERVICES OR SPECIAL PRIVILEGES THAT ARE DISPENSED TO OR ARE RECEIVED OR SOLICITED FROM ANY OUTSIDE FOR-PROFIT CONCERN THAT DOES BUSINESS WITH THE FOUNDATION, AND THAT IS MATERIAL TO EITHER THE OUTSIDE CONCERN OR THE FOUNDATION; AND
- ANY DISCLOSURE OR USE OF CONFIDENTIAL INFORMATION RELATING TO THE FOUNDATION FOR THE MATERIAL BENEFIT, ADVANTAGE OR PROFIT OF EITHER THE INDIVIDUAL OR AN OUTSIDE CONCERN PROVIDED IT IS DETRIMENTAL TO THE FOUNDATION.

### PROCESS:

THE FOUNDATION'S SECRETARY ANNUALLY SHALL SOLICIT FROM ITS DIRECTORS AND OFFICERS THEIR DISCLOSURE OF ALL KNOWN EXISTING CONFLICTS OF INTEREST INVOLVING THE FOUNDATION. IN ADDITION, EACH DIRECTOR AND OFFICER MUST DISCLOSE TO THE PRESIDENT AND THE SECRETARY THE NATURE AND EXTENT OF BUSINESS DEALINGS OF ANY ACTUAL OR POTENTIAL CONFLICT OF INTEREST IMMEDIATELY UPON IT BECOMING APPARENT, AND IMMEDIATELY RECUSE HIMSELF OR HERSELF FROM ANY RELATED FOUNDATION BUSINESS.

1. ONCE DISCLOSURE OF A CONFLICT OF INTEREST SITUATION IS MADE, THE BOARD OF

valifie of the organization

Employer identification number

38-3118579

### FREDERIK MEIJER GARDENS & SCULPTURE

DIRECTORS WILL DETERMINE IF THIS POLICY IS OR MAY BE VIOLATED AND WHAT ACTION OUGHT TO BE TAKEN TO AVOID OR ELIMINATE THE ACTUAL, POTENTIAL, OR PERCEIVED CONFLICT. THE BOARD MAY REQUEST ADDITIONAL INFORMATION FROM ANY INDIVIDUAL ASSOCIATED WITH THE FOUNDATION TO ASSIST IN MAKING A DECISION.

- 2.ONCE THE BOARD MAKES A DETERMINATION OF ACTUAL, POTENTIAL, OR PERCEIVED CONFLICT OF INTEREST, ITS DETERMINATION IS EFFECTIVE UNLESS AND UNTIL ALTERED CIRCUMSTANCES OR NEW DEVELOPMENTS LATER CAUSE THE BOARD TO ALTER ITS DETERMINATION.
- 3.AN INDIVIDUAL WHOSE ACTIVITY OR PERSONAL INTEREST IS DETERMINED TO CAUSE AN ACTUAL, POTENTIAL, OR PERCEIVED CONFLICT OF INTEREST MUST AVOID OR ELIMINATE SUCH CONFLICT TO THE BOARD'S SATISFACTION. FAILURE TO AVOID OR ELIMINATE THE CONFLICT VIOLATES THIS POLICY AND MAY RESULT IN REMOVAL FROM THE BOARD OR COMMITTEES OR OTHER APPROPRIATE ACTION.

ANNUALLY, EACH DIRECTOR AND OFFICER MUST SIGN A STATEMENT AFFIRMING THAT HE OR SHE:

- (A) RECEIVED A COPY OF THE CONFLICTS OF INTEREST POLICY,
- (B) HAS READ AND UNDERSTANDS THE POLICY, AND
- (C) AGREES TO COMPLY WITH THE POLICY.
- (D) IF BOARD MEMBERS HAVE ANY QUESTIONS REGARDING WHETHER HE OR SHE HAS A CONFLICT, THEY SHOULD CONTACT THE PRESIDENT OR SECRETARY FOR CLARIFICATION.

FORM 990, PART VI, LINE 19 - GOVERNING DOCUMENTS DISCLOSURE EXPLANATION THE ORGANIZATION MAKES ITS GOVERNING DOCUMENTS, CONFLICT OF INTEREST POLICY, AND FINANCIAL STATEMENTS AVAILABLE TO THE PUBLIC UPON REQUEST.

Open to Public Inspection Section 512(b)(13)
controlled entity? Schedule R (Form 990) 2020 OMB No 1545-0047 (f)
Direct controlling
entity 2020 Identification of Related Tax-Exempt Organizations. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, because it had one or more related tax-exempt organizations during the tax year × Employer Identification number 38-3118579 (f)
Direct controlling
entity (e) End-of-year assets NONE (e)
Public chanty status
(if section 501(c)(3)) Identification of Disregarded Entities. Complete if the organization answered "Yes" on Form 990, Part IV, line 33. ► Complete if the organization answered "Yes" on Form 990, Part IV, line 33, 34, 35b, 36, or 37. ^ (d) Total income Related Organizations and Unrelated Partnerships ▶ Go to www.irs.gov/Form990 for instructions and the latest information. (d) Exempt Code section 501C3 (c)
Legal domicile (state
or foreign country) (c)
Legal domicile (state
or foreign country) ▶ Attach to Form 990. 보 (b) Primary activity (b) Primary activity GARDENS FREDERIK MEIJER GARDENS & SCULPTURE 38-2394044 For Paperwork Reduction Act Notice, see the Instructions for Form 990. WEST MICHIGAN HORTICULTURAL SOCIETY (a)Name, address, and EIN (if applicable) of disregarded entity (a)Name, address, and EIN of related organization MI 49525 FOUNDATION 1000 E. BELTLINE NE GRAND RAPIDS Department of the Treasury Internal Revenue Service Name of the organization SCHEDULE R (Form 990) Parti Part II (1) 3 (2) (9) 4 9 8 (3) € 3

Page 2

Schedule R (Form 990) 2020 FREDERIK MEIJER GARDENS & SCULPTURE38-3118579

Schedule R (Form 990) 2020 Percentage ownership (i) Section 512(b)(13) controlled entity? Yes No Identification of Related Organizations Taxable as a Corporation or Trust. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, because it had one or more related organizations treated as a corporation or trust during the tax year. 3 Identification of Related Organizations Taxable as a Partnership. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, because it had one or more related organizations treated as a partnership during the tax year. General or 1 managing partner? Yes No Percentage ownership Ξ (i)
Code V—UBI
amount in box 20
of Schedule K-1
(Form 1065) (9)
Share of end-of-year assets (h)
Disproportionate
alloc ? Yes No (g) Share of end-of-year assets (f) Share of total income (f) Share of total income Type of entity (C corp, S corp, or trust) (a)
Predominant
income (related,
unrelated,
excluded from
tax under
sections 512-514) (d)
Direct controlling
entity (d)
Direct controlling
entity (c) Legal domicite foreign country) (state or (state or foreign country) (c) Legal domicile Primary activity (b) Primary activity Name, address, and EIN of related organization (a)
Name, address, and EIN of related organization Part III Part IV l≱ lΞ 8 |ල 3 lε 3 | ଚ 4

# Schedule R (Form 990) 2020 FREDERIK MEIJER GARDENS & SCULPTURE38-3118579

### Transactions With Related Organizations. Complete If the organization answered "Yes" on Form 990, Part IV, line 34, 35b, or 36 Part V

Note: Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule				Yes
1 During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II–IV?	related organizations	isted in Parts II-IV?		
a Receipt of (i) interest, (ii) annuities, (iii) rovalties, or (iv) rent from a controlled entity	•			1a X
b Gift, grant, or capital contribution to related organization(s)			•	×
c Gift, grant, or capital contribution from related organization(s)				1c ×
			<b>.</b>	╆
e Loans or loan guarantees by related organization(s)				
f Dividends from related organization(s)				٦ţ ×
				1g ×
_				t X
i Exchange of assets with related organization(s)				1i X
j Lease of facılıtıes, equipment, or other assets to related organization(s)			•	1; X
k Lease of facilities, equipment, or other assets from related organization(s)				<u> </u>
l Performance of services or membership or fundraising solicitations for related organization(s)				
m Performance of services or membership or fundraising solicitations by related organization(s)			1	
n Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)			•	
o Sharing of paid employees with related organization(s)				10 X
p Reimbursement paid to related organization(s) for expenses			1	1p X
q Reimbursement paid by related organization(s) for expenses				1g X
				× ;
2 Little manage or cash of property home relative or gamicanomys. 2 If the answer to any of the above is "Yes" see the instructions for information on who must complete this line including covered relationships and transaction throughout	and and and and	and socialists and tra	thought the state of	4
1	una muc, mondania cove	T and relationships and right	ı	
(a) Name of related organization	( <b>b)</b> Transacton Iype (a–s)	(c) Amount involved	(d) Method of determining amount involved	nt involved
(1) WEST MICHIGAN HORTICHTMAI, SOCIETY	μ	5 342 172	HS&C	
	)	7		
(2)				
(3)				
(4)				
(5)				
(9)				
			Schedule R (	Schedule R (Form 990) 2020
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Schedule R (Form 990) 2020 FREDERIK MEIJER GARDENS & SCULPTURE38-3118579

Unrelated Organizations Taxable as a Partnership. Complete if the organization answered "Yes" on Form 990, Part IV, line 37. Part VI

Provide the following information for each entity taxed as a partnership through which the organization conducted more than five percent of its activities (measured by total assets or gross revenue) that was not a related organization. See instructions regarding exclusion for certain investment partnerships

Schedule R (Form 990) 2020

Part VII

Supplemental Information.

Provide additional information for responses to questions on Schedule R See instructions