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**2020** 

OMB No. 1545-0052

# **Return of Private Foundation**

Department of the Treasury Internal Revenue Service

Form 990-PF

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

▶ Do not enter social security numbers on this form as it may be made public.
 ▶ Go to <u>www.irs.gov/Form990PF</u> for instructions and the latest information.

Open to Public Inspection

For	caler	ndar year 2020, or tax year beginning 01-01-20	)20 . ar	nd er	nding 12-31-	2020	•
		undation	, 20 , 41			entification number	er
TH	E ANDR	REA AND LAWRENCE WOLFE DUNDATION			38-3323521		
		d street (or P.O. box number if mail is not delivered to street address) BIG BEAVER SUITE 750	Room/suite		<b>B</b> Telephone nu	mber (see instructio	ns)
۷.	OOT W E	DIG BEAVER SUITE /30	(248) 781-0200				
	or town Y, MI 4	n, state or province, country, and ZIP or foreign postal code 18084	•		<b>C</b> If exemption	application is pendin	g, check here
G Ch	neck al	ll that apply:	former public charity		<b>D 1.</b> Foreign or	ganizations, check he	ere
		Final return Amended return				ganizations meeting	
		Address change Name change			test, chec	k here and attach co	mputation 🕨 🔼
H Ch	eck ty	vpe of organization: $\mathbf{\nabla}$ Section 501(c)(3) exempt private	foundation			indation status was n 507(b)(1)(A), chec	
	Section	n 4947(a)(1) nonexempt charitable trust 🔲 Other taxable	e private foundation				
of '	year (f	xet value of all assets at end from Part II, col. (c),  ▶\$ 16,163,618  J Accounting method:  □ Other (specify) (Part I, column (d) must	☑ Cash ☐ Accru	al		ation is in a 60-mont n 507(b)(1)(B), ched	
Pa	rt I	Analysis of Revenue and Expenses (The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a) (see instructions).)	(a) Revenue and expenses per books	(b)	Net investment income	(c) Adjusted net income	(d) Disbursements for charitable purposes (cash basis only)
	1	Contributions, gifts, grants, etc., received (attach schedule)	199,911				
	2	Check ▶ ☐ if the foundation is <b>not</b> required to attach Sch. B					
	3	Interest on savings and temporary cash investments					
	4	Dividends and interest from securities	297,410		297,336		
	5a	Gross rents					
	b	Net rental income or (loss)					
Kle	6a	Net gain or (loss) from sale of assets not on line 10	439,894				
Revenue	b	Gross sales price for all assets on line 6a 4,427,651					
æ	7	Capital gain net income (from Part IV, line 2)			439,894		
	8	Net short-term capital gain					
	9	Income modifications					
	10a	Gross sales less returns and allowances					
	b	Less: Cost of goods sold					
	11	Other income (attach schedule)					
	12	Total. Add lines 1 through 11	937,215		737,230		
	13	Compensation of officers, directors, trustees, etc.	0		0		
	14	Other employee salaries and wages					
S	15	Pension plans, employee benefits					
in Se	16a	Legal fees (attach schedule)					
ă E	b	Accounting fees (attach schedule)	3,200		1,600		1,60
e E	С	Other professional fees (attach schedule)					
₹	17	Interest					
Str	18	Taxes (attach schedule) (see instructions)	<b>9</b> 694		694		'
Ξ	19	Depreciation (attach schedule) and depletion					
AG	20	Occupancy					
פַ	21	Travel, conferences, and meetings					
ਰ ਹ	22 23	Printing and publications	<b>9</b> 50,567		50,547		
<u> </u>	24	Total operating and administrative expenses.	30,507				
Operating and Administrative Expenses		Add lines 13 through 23	54,461		52,841		1,60
Ö	25	Contributions, gifts, grants paid	574,880				574,88
	26	<b>Total expenses and disbursements.</b> Add lines 24 and 25	629,341		52,841		576,48
	27	Subtract line 26 from line 12:	029,341		32,041		370,40
	а	Excess of revenue over expenses and	227.5-				
	b	disbursements  Net investment income (if negative, enter -0-)	307,874		604 200		+
	С	Adjusted net income (if negative, enter -0-)			684,389		
	ı -	- , - , - , - , - , - , - , - , - , - ,	İ	i		I	1

Beginning of year

Page 2

16,163,618

10,027,051

10,334,925

10,334,925 Form **990-PF** (2020)

307,874

1

2

3

4

5

6

End of year

10,334,925

	3	Accounts receivable •				
		Less: allowance for doubtful accounts ▶				
	4	Pledges receivable ▶				
		Less: allowance for doubtful accounts ▶				
	5	Grants receivable				
	6	Receivables due from officers, directors, trustees, and other				
		disqualified persons (attach schedule) (see instructions)				
	7	Other notes and loans receivable (attach schedule) ▶				
		Less: allowance for doubtful accounts ▶				
2	8	Inventories for sale or use				
Assets	9	Prepaid expenses and deferred charges				
As	10a	Investments—U.S. and state government obligations (attach schedule)				
	b	Investments—corporate stock (attach schedule)	8,885,402	<b>چ</b> ا	8,577,564	14,351,562
	l c	Investments—corporate bonds (attach schedule)	848,248	<b>⇔</b> ,∣	1,334,649	1.389.344

### Investments—land, buildings, and equipment: basis ▶ \_\_\_\_\_ 11 Less: accumulated depreciation (attach schedule) ▶ Investments—mortgage loans . . . . . 12 Investments—other (attach schedule) . . 13 14 Land, buildings, and equipment: basis ▶ \_ Less: accumulated depreciation (attach schedule) ▶ \_\_\_\_\_ Other assets (describe > . 15 Total assets (to be completed by all filers—see the 16 instructions. Also, see page 1, item I) 10,027,051 17 Accounts payable and accrued expenses . Grants payable 18 19 Loans from officers, directors, trustees, and other disqualified persons 20

Mortgages and other notes payable (attach schedule). . . . . .

Total liabilities(add lines 17 through 22) . . . . . . . . . . . .

Total net assets or fund balances at end of year (line 4 minus line 5)—Part II, column (b), line 29

Foundations that follow FASB ASC 958, check here

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Liabilities

21

22

23

2

3

Other liabilities (describe ▶\_

and complete lines 24, 25, 29 and 30.

of-year figure reported on prior year's return)

Decreases not included in line 2 (itemize) ▶

Other increases not included in line 2 (itemize) -

Enter amount from Part I, line 27a

#### **Fund Balances** Net assets without donor restrictions . 24 25 Net assets with donor restrictions . Foundations that do not follow FASB ASC 958, check here 🕨 🗹 and complete lines 26 through 30. Assets or Capital stock, trust principal, or current funds . . . . . . . . . 26 27 Paid-in or capital surplus, or land, bldg., and equipment fund Retained earnings, accumulated income, endowment, or other funds 10,027,051 10,334,925 28 Net Total net assets or fund balances (see instructions) . . . . . 29 10,027,051 10,334,925 30

Total liabilities and net assets/fund balances (see instructions) . 10,027,051 10,334,925 Part III Analysis of Changes in Net Assets or Fund Balances Total net assets or fund balances at beginning of year-Part II, column (a), line 29 (must agree with end-

	pe the kind(s) of property sold (e.g., arehouse; or common stock, 200 sh		(b) How acquired P—Purchase D—Donation	(c) Date acquired (mo., day, yr.)	(d) Date sold (mo., day, yr.)
1aSee Additional Data Tab	e				
b					
С					
d					
е					
(e) Gross sales price	(f) Depreciation allowed (or allowable)	Cost or	(g) other basis ense of sale	Gain o	h <b>)</b> r (loss) ) minus (g)
a See Additional Data Tab	e				
b					
С					
d					
e					
Complete only for asset	s showing gain in column (h) and ow	<u> </u>			<b>I)</b>
(i) F.M.V. as of 12/31/69	(j) Adjusted basis as of 12/31/69	Excess	<b>(k)</b> of col. (i) . (j), if any	col. (k), but not	h) gain minus less than -0-) <b>or</b> om col.(h))
a See Additional Data Tab	e				
b					
c					
d					
е					
•	gain or (loss) as defined in sections art I, line 8, column (c) (see instructi	ions). If (loss), enter -0	Part I, line 7	3	439,894
Part V Qualification	Under Section 4940(e) for Re	educed Tax on Net	Investment In	ncome	
SECTION 4940(e) REPEA	ALED ON DECEMBER 20, 2019	- DO NOT COMPL	ETE		
1 Reserved					
<b>(a)</b> Reserved	(b) Reserved	(c) Reserved		<b>(d)</b> Reserved	_
<b>2</b> Reserved			2		
<b>3</b> Reserved					
<b>4</b> Reserved			<u> </u>	1	
			<u></u>	1	
			<u></u>	1	
			<u> </u>	_L	
				<u> </u>	
8 Keserved ,			8		

							<u>'</u>	age v
Par		ling Activities for Which	Form 4720 May Be	Required (continued	1)			
ia	During the year did the foundation						Yes	No
	(1) Carry on propaganda, or otherv	vise attempt to influence legisl	ation (section 4945(e))?	Yes	✓ No	,		
	(2) Influence the outcome of any s	pecific public election (see sec	tion 4955); or to carry					
	on, directly or indirectly, any vo	ter registration drive?		· · · Yes	✓ No	,		
	(3) Provide a grant to an individual	for travel, study, or other sim	ilar purposes?		✓ No			
	(4) Provide a grant to an organizati	ion other than a charitable, etc	c., organization described					
	in section 4945(d)(4)(A)? See i	nstructions		· · 🗌 Yes	✓ No	,		
	(5) Provide for any purpose other t	han religious, charitable, scien	tific, literary, or					
	educational purposes, or for the	prevention of cruelty to child	ren or animals?	· ·	✓ N			
b	If any answer is "Yes" to $5a(1)-(5)$ ,	did <b>any</b> of the transactions fa	ail to qualify under the ex	ceptions described in		<b>´</b>		
	Regulations section 53.4945 or in a	current notice regarding disas	ter assistance? See instr	ructions		5b		
	Organizations relying on a current r	otice regarding disaster assist	ance check here					
C	If the answer is "Yes" to question 5	a(4), does the foundation clair	n exemption from the					
	tax because it maintained expenditu	ure responsibility for the grant	?	· · 🔲 Yes	□ No			
	If "Yes," attach the statement requi	red by Regulations section 53.	4945-5(d).	□ 1es		'		
a	Did the foundation, during the year,	, receive any funds, directly or	indirectly, to pay premi	ums on				
b	Did the foundation, during the year,	, pay premiums, directly or inc	lirectly, on a personal be		. <b>✓</b> No	6b		No
	If "Yes" to 6b, file Form 8870.	, , ,	,, 1					
'a	At any time during the tax year, wa	s the foundation a party to a r	prohibited tax shelter tra	nsaction?				
	If "Yes", did the foundation receive			∟ res	✓ No	7b		
	Is the foundation subject to the sec				•	1.5		
	excess parachute payment during the	, , , ,						
		<u> </u>			✓ No		<u> </u>	<u> </u>
Par	and Contractors	Officers, Directors, Trust	tees, Foundation Ma	anagers, Hignly Paid	I Emp	ioyees,		
1	List all officers, directors, truste							
	(a) Name and address	(b) Title, and average hours per week	(c) Compensation (If not paid, enter	(d) Contributions to employee benefit plans		<b>e)</b> Expen		
	. ,	devoted to position	· -0-)	deferred compensatio		other al	llowand	ces
ee A	Additional Data Table							
		]						
		1						
		1						
		1						
2	Compensation of five highest-pa	id employees (other than t	hose included on line :	1—see instructions). If	none,	enter "	NONE	."
				(d) Contributions to				
a) [	Name and address of each employee	paid (b) Title, and average hours per week	(c) Compensation	employee benefit		) Expens		
	more than \$50,000	devoted to position	(c) compensation	plans and deferred compensation		other all	owanc	es
ONE	=			Compensation				
ONE	=							
ota	I number of other employees paid ov	er \$50,000 <b></b>	<del></del>					- (
						orm <b>99</b> 0	N-DE	(2020

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Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid and Contractors (continued)	Employees,
3 Five highest-paid independent contractors for professional services (see instructions). If none, enter "NO	ONE".
(a) Name and address of each person paid more than \$50,000 (b) Type of service	(c) Compensation
NONE	
Total number of others receiving over \$50,000 for professional services	0
Part IX-A Summary of Direct Charitable Activities	
List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of organizations and other beneficiaries served, conferences convened, research papers produced, etc.	Expenses
1	
2	
3	
4	
Part IX-B Summary of Program-Related Investments (see instructions)	
Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2.	Amount
1	
2	
<b>-</b>	
All other program-related investments. See instructions.	
3	4
	$\dashv$
Total. Add lines 1 through 3	0
	5 000 PE (2020)

7

1a

1b

2

За 3h

4

5

659.675

576,480

576,480

576,480

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Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1. . .

Expenses, contributions, gifts, etc.—total from Part I, column (d), line 26. . . . . . . . . . . .

Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4

income. Enter 1% of Part I, line 27b. See instructions.

Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation qualifies for

Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:

Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc.,

Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment

Qualifying Distributions (see instructions)

Amounts set aside for specific charitable projects that satisfy the:

the section 4940(e) reduction of tax in those years.

Part XII

1

2

3

4

5

b

496,780

162,895

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Form

Pa

990-PF (2	02
t XIII	

90-PF (20	020)	
t XIII	Undistributed Income	(see instructions)

a Enter amount for 2019 only. . . . . . Excess distributions carryover, if any, to 2020:

1 Distributable amount for 2020 from Part XI, line 7

2 Undistributed income, if any, as of the end of 2020:

(a)

Corpus

0

(b)

Years prior to 2019

(c)

2019

79,700

79,700

- a From 2015. . . . .
- **b** From 2016. . . . .
- c From 2017. . . .
- d From 2018. . . . . e From 2019. . . . . f Total of lines 3a through e. . . . . . . 4 Qualifying distributions for 2020 from Part
- XII, line 4: ▶ \$ a Applied to 2019, but not more than line 2a
- **b** Applied to undistributed income of prior years
- (Election required—see instructions). . . . . c Treated as distributions out of corpus (Election required—see instructions). . . . . . . . . .

same amount must be shown in column (a).)

**d** Applied to 2020 distributable amount. . . . e Remaining amount distributed out of corpus

**5** Excess distributions carryover applied to 2020. (If an amount appears in column (d), the

a Corpus. Add lines 3f, 4c, and 4e. Subtract line 5 **b** Prior years' undistributed income. Subtract c Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed. . . . . . **d** Subtract line 6c from line 6b. Taxable amount —see instructions . . . . . . . . . . . . . . . . e Undistributed income for 2019. Subtract line 4a from line 2a. Taxable amount—see instructions . . . . . . . . f Undistributed income for 2021. Subtract lines 4d and 5 from line 1. This amount must be distributed in 2020 . . . . . .

6 Enter the net total of each column as

7 Amounts treated as distributions out of corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3) (Election may be required - see instructions) . . . . . . . . . 8 Excess distributions carryover from 2015 not applied on line 5 or line 7 (see instructions) . . .

9 Excess distributions carryover to 2021. Subtract lines 7 and 8 from line 6a . . . .

10 Analysis of line 9: a Excess from 2016. . . **b** Excess from 2017. . c Excess from 2018. . . . d Excess from 2019. . . e Excess from 2020. . .

indicated below:

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F	Part XIV Private Operating Found	<b>ations</b> (see instr	uctions and Part \	VII-A, question 9)		
1a	If the foundation has received a ruling or de foundation, and the ruling is effective for 20					
b	Check box to indicate whether the organization	ion is a private oper	ating foundation des	scribed in section $ {\sf L} $	☐ 4942(j)(3) or ☐	] 4942(j)(5)
2a	Enter the lesser of the adjusted net	Tax year		Prior 3 years		(e) Total
	income from Part I or the minimum investment return from Part X for each year listed	(a) 2020	<b>(b)</b> 2019	(c) 2018	(d) 2017	(e) Total
b	85% of line 2a					
С	Qualifying distributions from Part XII, line 4 for each year listed					
d	Amounts included in line 2c not used directly for active conduct of exempt activities					
е	Qualifying distributions made directly for active conduct of exempt activities. Subtract line 2d from line 2c					
3	Complete 3a, b, or c for the alternative test relied upon:					
а	"Assets" alternative test—enter:					
	<ul><li>(1) Value of all assets</li><li>(2) Value of assets qualifying under section 4942(j)(3)(B)(i)</li></ul>					
b	"Endowment" alternative test— enter 2/3 of minimum investment return shown in Part X, line 6 for each year listed					
С						
	(1) Total support other than gross investment income (interest, dividends, rents, payments on securities loans (section					
	512(a)(5)), or royalties)					
	(2) Support from general public and 5 or more exempt organizations as provided in section 4942(j)(3)(B)(iii)					
	(3) Largest amount of support from an exempt organization					
	(4) Gross investment income					
	Supplementary Information			foundation had	\$5,000 or more	in
	assets at any time during th		ructions.)			
1 a	<b>Information Regarding Foundation Man</b> List any managers of the foundation who hav before the close of any tax year (but only if	e contributed more	than 2% of the tota ed more than \$5,00	al contributions recei 10). (See section 507	ved by the foundatio 7(d)(2).)	n
_	See Additional Data Table					
b	List any managers of the foundation who ow ownership of a partnership or other entity)	n 10% or more of th of which the foundat	ie stock of a corpora ion has a 10% or g	ation (or an equally l reater interest.	arge portion of the	
2	Information Regarding Contribution, Gr		• • • • • • • • • • • • • • • • • • • •	-		
	Check here ► ☑ if the foundation only mak unsolicited requests for funds. If the founda other conditions, complete items 2a, b, c, a	tion makes gifts, gra	ants, etc. to individu	le organizations and uals or organizations	does not accept under	
a	The name, address, and telephone number of	or email address of t	the person to whom	applications should	be addressed:	
b	The form in which applications should be sul	omitted and informa	tion and materials t	hey should include:		
С	Any submission deadlines:					
d	Any restrictions or limitations on awards, su factors:	ch as by geographic	al areas, charitable	fields, kinds of instit	utions, or other	

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Part XV Supplementary Informa	ation (continued)			
3 Grants and Contributions Paid	d During the Year or Appro	oved for Futur	e Payment	
Recipient	If recipient is an individual, show any relationship to	Foundation status of	Purpose of grant or	Amount
Name and address (home or business)	any foundation manager or substantial contributor	recipient	contribution	Amount
<b>a</b> <i>Paid during the year</i> See Additional Data Table				
Total		<del></del>	▶ 3a	574,880
<b>b</b> Approved for future payment				
		+		
		1		
		1		
	1	1		
		1		
		1		
Total			▶ 3b	0

nter gross	amounts unless otherwise indicated.	Unrelated b	usiness income	Excluded by section	1 512, 513, or 514	(e) Related or exempt
<b>1</b> Progran	n service revenue:	(a) Business code	<b>(b)</b> Amount	(c) Exclusion code	<b>(d)</b> Amount	function income (See instructions.)
a						
b						
_	and contracts from government agencies rship dues and assessments					
3 Interes	t on savings and temporary cash					
investn						
	nds and interest from securities			14	297,410	
	ntal income or (loss) from real estate:					
	financed property ebt-financed property					
	ebt-financed property					
	nvestment income					
	(loss) from sales of assets other than					
invento				18	439,894	
9 Net inc	ome or (loss) from special events:					
	profit or (loss) from sales of inventory					
	revenue: <b>a</b>					
е						
e 2 Subtot	al. Add columns (b), (d), and (e).		0		737,304	
e 2 Subtot 3 Total. (See w	al. Add columns (b), (d), and (e).  Add line 12, columns (b), (d), and (e).  orksheet in line 13 instructions to verify calcu	lations.)		1	737,304 <b>3</b>	
e 2 Subtot 3 Total. (See w	al. Add columns (b), (d), and (e)  Add line 12, columns (b), (d), and (e)  orksheet in line 13 instructions to verify calcu  Belationship of Activities to th	lations.) ne Accomplisi	nment of Exem	pt Purposes	3	737,304
e 2 Subtot 3 Total. (See wo	al. Add columns (b), (d), and (e).  Add line 12, columns (b), (d), and (e).  orksheet in line 13 instructions to verify calcu	lations.)  IE Accomplish  income is report	nment of Exem	pt Purposes  F Part XVI-A contribu	3	737,304
e 2 Subtot 3 Total. (See with part XV) Line No.	al. Add columns (b), (d), and (e)  Add line 12, columns (b), (d), and (e)  orksheet in line 13 instructions to verify calcu  Explain below how each activity for which the accomplishment of the foundation's ex	lations.)  IE Accomplish  income is report	nment of Exem	pt Purposes  F Part XVI-A contribu	3	737,304
e 2 Subtot 3 Total. (See with part XV) Line No.	al. Add columns (b), (d), and (e)  Add line 12, columns (b), (d), and (e)  orksheet in line 13 instructions to verify calcu  FB Relationship of Activities to th  Explain below how each activity for which the accomplishment of the foundation's exinstructions.)	lations.)  IE Accomplish  income is report	nment of Exem	pt Purposes  F Part XVI-A contribu	3	737,304
e 2 Subtot 3 Total. (See with part XV) Line No.	al. Add columns (b), (d), and (e)  Add line 12, columns (b), (d), and (e)  orksheet in line 13 instructions to verify calcu  FB Relationship of Activities to th  Explain below how each activity for which the accomplishment of the foundation's exinstructions.)	lations.)  IE Accomplish  income is report	nment of Exem	pt Purposes  F Part XVI-A contribu	3	737,304
e 2 Subtot 3 Total. (See with part XV) Line No.	al. Add columns (b), (d), and (e)  Add line 12, columns (b), (d), and (e)  orksheet in line 13 instructions to verify calcu  FB Relationship of Activities to th  Explain below how each activity for which the accomplishment of the foundation's exinstructions.)	lations.)  IE Accomplish  income is report	nment of Exem	pt Purposes  F Part XVI-A contribu	3	737,304
e 2 Subtot 3 Total. (See with part XV) Line No.	al. Add columns (b), (d), and (e)  Add line 12, columns (b), (d), and (e)  orksheet in line 13 instructions to verify calcu  FB Relationship of Activities to th  Explain below how each activity for which the accomplishment of the foundation's exinstructions.)	lations.)  IE Accomplish  income is report	nment of Exem	pt Purposes  F Part XVI-A contribu	3	737,304
e 2 Subtot 3 Total. (See w Part XV Line No.	al. Add columns (b), (d), and (e)  Add line 12, columns (b), (d), and (e)  orksheet in line 13 instructions to verify calcu  FB Relationship of Activities to th  Explain below how each activity for which the accomplishment of the foundation's exinstructions.)	lations.)  IE Accomplish  income is report	nment of Exem	pt Purposes  F Part XVI-A contribu	3	737,304
e 2 Subtot 3 Total. (See w Part XV Line No.	al. Add columns (b), (d), and (e)  Add line 12, columns (b), (d), and (e)  orksheet in line 13 instructions to verify calcu  FB Relationship of Activities to th  Explain below how each activity for which the accomplishment of the foundation's exinstructions.)	lations.)  IE Accomplish  income is report	nment of Exem	pt Purposes  F Part XVI-A contribu	3	737,304
e 2 Subtot 3 Total. (See w Part XV Line No.	al. Add columns (b), (d), and (e)  Add line 12, columns (b), (d), and (e)  orksheet in line 13 instructions to verify calcu  FB Relationship of Activities to th  Explain below how each activity for which the accomplishment of the foundation's exinstructions.)	lations.)  IE Accomplish  income is report	nment of Exem	pt Purposes  F Part XVI-A contribu	3	737,304
e 2 Subtot 3 Total. (See w Part XV Line No.	al. Add columns (b), (d), and (e)  Add line 12, columns (b), (d), and (e)  orksheet in line 13 instructions to verify calcu  FB Relationship of Activities to th  Explain below how each activity for which the accomplishment of the foundation's exinstructions.)	lations.)  IE Accomplish  income is report	nment of Exem	pt Purposes  F Part XVI-A contribu	3	737,304
e 2 Subtot 3 Total. (See with part XV) Line No.	al. Add columns (b), (d), and (e)  Add line 12, columns (b), (d), and (e)  orksheet in line 13 instructions to verify calcu  FB Relationship of Activities to th  Explain below how each activity for which the accomplishment of the foundation's exinstructions.)	lations.)  IE Accomplish  income is report	nment of Exem	pt Purposes  F Part XVI-A contribu	3	737,304
e 2 Subtot 3 Total. (See with part XV) Line No.	al. Add columns (b), (d), and (e)  Add line 12, columns (b), (d), and (e)  orksheet in line 13 instructions to verify calcu  FB Relationship of Activities to th  Explain below how each activity for which the accomplishment of the foundation's exinstructions.)	lations.)  IE Accomplish  income is report	nment of Exem	pt Purposes  F Part XVI-A contribu	3	737,304
e 2 Subtot 3 Total. (See with part XV) Line No.	al. Add columns (b), (d), and (e)  Add line 12, columns (b), (d), and (e)  orksheet in line 13 instructions to verify calcu  FB Relationship of Activities to th  Explain below how each activity for which the accomplishment of the foundation's exinstructions.)	lations.)  IE Accomplish  income is report	nment of Exem	pt Purposes  F Part XVI-A contribu	3	737,304
e 2 Subtot 3 Total. (See with part XV) Line No.	al. Add columns (b), (d), and (e)  Add line 12, columns (b), (d), and (e)  orksheet in line 13 instructions to verify calcu  FB Relationship of Activities to th  Explain below how each activity for which the accomplishment of the foundation's exinstructions.)	lations.)  IE Accomplish  income is report	nment of Exem	pt Purposes  F Part XVI-A contribu	3	737,304
e 2 Subtot 3 Total. (See with part XV) Line No.	al. Add columns (b), (d), and (e)  Add line 12, columns (b), (d), and (e)  orksheet in line 13 instructions to verify calcu  FB Relationship of Activities to th  Explain below how each activity for which the accomplishment of the foundation's exinstructions.)	lations.)  IE Accomplish  income is report	nment of Exem	pt Purposes  F Part XVI-A contribu	3	737,304
e 2 Subtot 3 Total. (See with part XV) Line No.	al. Add columns (b), (d), and (e)  Add line 12, columns (b), (d), and (e)  orksheet in line 13 instructions to verify calcu  FB Relationship of Activities to th  Explain below how each activity for which the accomplishment of the foundation's exinstructions.)	lations.)  IE Accomplish  income is report	nment of Exem	pt Purposes  F Part XVI-A contribu	3	737,304
e	al. Add columns (b), (d), and (e)  Add line 12, columns (b), (d), and (e)  orksheet in line 13 instructions to verify calcu  FB Relationship of Activities to th  Explain below how each activity for which the accomplishment of the foundation's exinstructions.)	lations.)  IE Accomplish  income is report	nment of Exem	pt Purposes  F Part XVI-A contribu	3	737,304
e 2 Subtot 3 Total. (See with part XV) Line No.	al. Add columns (b), (d), and (e)  Add line 12, columns (b), (d), and (e)  orksheet in line 13 instructions to verify calcu  FB Relationship of Activities to th  Explain below how each activity for which the accomplishment of the foundation's exinstructions.)	lations.)  IE Accomplish  income is report	nment of Exem	pt Purposes  F Part XVI-A contribu	3	737,304
e 2 Subtot 3 Total. (See with part XV) Line No.	al. Add columns (b), (d), and (e)  Add line 12, columns (b), (d), and (e)  orksheet in line 13 instructions to verify calcu  FB Relationship of Activities to th  Explain below how each activity for which the accomplishment of the foundation's exinstructions.)	lations.)  IE Accomplish  income is report	nment of Exem	pt Purposes  F Part XVI-A contribu	3	737,304
e 2 Subtot 3 Total. (See with part XV) Line No.	al. Add columns (b), (d), and (e)  Add line 12, columns (b), (d), and (e)  orksheet in line 13 instructions to verify calcu  FB Relationship of Activities to th  Explain below how each activity for which the accomplishment of the foundation's exinstructions.)	lations.)  IE Accomplish  income is report	nment of Exem	pt Purposes  F Part XVI-A contribu	3	737,304
e 2 Subtot 3 Total. (See with part XV) Line No.	al. Add columns (b), (d), and (e)  Add line 12, columns (b), (d), and (e)  orksheet in line 13 instructions to verify calcu  FB Relationship of Activities to th  Explain below how each activity for which the accomplishment of the foundation's exinstructions.)	lations.)  IE Accomplish  income is report	nment of Exem	pt Purposes  F Part XVI-A contribu	3	737,304
e 2 Subtot 3 Total. (See with part XV) Line No.	al. Add columns (b), (d), and (e)  Add line 12, columns (b), (d), and (e)  orksheet in line 13 instructions to verify calcu  FB Relationship of Activities to th  Explain below how each activity for which the accomplishment of the foundation's exinstructions.)	lations.)  IE Accomplish  income is report	nment of Exem	pt Purposes  F Part XVI-A contribu	3	737,304
e 2 Subtot 3 Total. (See with part XV) Line No.	al. Add columns (b), (d), and (e)  Add line 12, columns (b), (d), and (e)  orksheet in line 13 instructions to verify calcu  FB Relationship of Activities to th  Explain below how each activity for which the accomplishment of the foundation's exinstructions.)	lations.)  IE Accomplish  income is report	nment of Exem	pt Purposes  F Part XVI-A contribu	3	737,304
e 2 Subtot 3 Total. (See with part XV) Line No.	al. Add columns (b), (d), and (e)  Add line 12, columns (b), (d), and (e)  orksheet in line 13 instructions to verify calcu  FB Relationship of Activities to th  Explain below how each activity for which the accomplishment of the foundation's exinstructions.)	lations.)  IE Accomplish  income is report	nment of Exem	pt Purposes  F Part XVI-A contribu	3	737,304

orm	990-PF	· /									Pa	ge <b>13</b>
Par	rt XVII	Information Re Exempt Organi		ansí	ers To a	nd Transacti	ons and I	Relatio	nships With Nonc	haritable		
		rganization directly or in than section 501(c)(3)								501	Yes	No
a Tr	ansfers	from the reporting foun	dation to a no	oncha	ritable exe	mpt organization	n of:					
(1	<b>L)</b> Cash									1a(1)		No
(2	2) Othe	er assets								. 1a(2)		No
<b>b</b> 0	ther trar	nsactions:										
(1	L) Sales	s of assets to a nonchar	itable exempt	orga	nization <b>.</b>					. 1b(1)		No
(2	2) Purcl	hases of assets from a r	oncharitable	exem	pt organiza	ation				. 1b(2)		No
-	-	al of facilities, equipmen	*						$\cdot \ \cdot \ \cdot \ \cdot \ \cdot \ \cdot$	. 1b(3)		No
•	-	nbursement arrangemer								1b(4)		No
-	-	s or loan guarantees.								1b(5)		No
-	•	rmance of services or m			_					1b(6)		No
	-	f facilities, equipment, r wer to any of the above								1c		No
of	the god	ods, other assets, or ser nsaction or sharing arra	vices given by	y the	reporting f	oundation. If the	e foundatio	n receive	ed less than fair marke	t value		
(a) Lii	ne No.	(b) Amount involved	(c) Name of	noncha	aritable exen	npt organization	(d) Des	cription of	transfers, transactions, a	nd sharing arra	ngemer	nts
		ndation directly or indire	•		'	•			_			
		in section 501(c) (othe		501(	c)(3)) or ii	n section 527? .			Ц Yes	<b>✓</b> No		
b If	"Yes," c	complete the following s										
		(a) Name of organization	on		(b	) Type of organizat	ion		(c) Description of	relationship		
	of n	ler penalties of perjury, ny knowledge and belief ch preparer has any kno	, it is true, co									
Sig: Her		*****				2021-09-14	ref			May the IRS di return with the prepa		
		Signature of officer or t	rustee			Date	Т	itle		below (see instr.)	_	
		Print/Type preparer's	name	Prepa	arer's Sign	ature	Date		Chack if salf	IN		
		MENDY TYATZ							Check if self- employed ▶ ☐	P01062	2301	
Paid		WENDY EVATZ					2021-	-09-14				
	parer Only		ER TILLY US I	_LP					Fir	m's EIN ▶39	-08599	910
	-		000 TOWN CE						Ph	one no. (248	 ) 372-	—– 7300
			SOUTHFIELD, MI 48075									

Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns a - d List and describe the kind(s) of property sold (e.g., real estate, (d) (b) (c) How acquired (a) 2-story brick warehouse; or common stock, 200 shs. MLC Co.) Date acquired Date sold P-Purchase (mo., day, yr.) (mo., day, yr.) D-Donation JP MORGAN #1007 JP MORGAN #4002 JP MORGAN #7005 JP MORGAN #1001 JP MORGAN #1007 JP MORGAN #4002 JP MORGAN #7005 JP MORGAN #1001 JP MORGAN #1001 JP MORGAN #4002 Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns e - h (e) Gross sales price Depreciation allowed Cost or other basis Gain or (loss) (f) (or allowable) (g) plus expense of sale (h) (e) plus (f) minus (g) 52,246 51,624 622 792,089 -93,163 885,252 612,114 623,159 -11,045 1,713 2,246 -533 109,073 105,483 3,590 352,486 318,517 33,969 1,430,242 1,572,791 142,549 763,282 529,942 233,340 171,614 41,198 130,416 94 -94 Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns i - I Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69 Gains (Col. (h) gain minus col. (k), but not less than -0-) or (i) F.M.V. as of 12/31/69 Adjusted basis Excess of col. (i) **(I)** Losses (from col.(h)) (j) as of 12/31/69 (k) over col. (j), if any 622 -93,163 -11,045 -533 3,590 33,969 142,549 233,340 130,416 -94

Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns a - d List and describe the kind(s) of property sold (e.g., real estate, (b) (c) (d) (a) 2-story brick warehouse; or common stock, 200 shs. MLC Co.) How acquired Date acquired Date sold P-Purchase (mo., day, yr.) (mo., day, yr.) D—Donation CAPITAL GAINS DIVIDENDS Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns e - h (e) Gross sales price Depreciation allowed Cost or other basis Gain or (loss) (as allaurable) (h) (a) plua (f) minua (a)

	(I) (or allowable)	(g) plus expense of sale	(n) (e) plus (i) minus (g)
243		243	
Form 990PF Part IV - Capital	Gains and Losses for Tax on	Investment Income - Colum	ns i - I
Complete only for assets show	Gains (Col. (h) gain minus		
(i) F.M.V. as of 12/31/69	Adjusted basis (j) as of 12/31/69	Excess of col. (i) (k) over col. (j), if any	col. (k), but not less than -0-) <b>or</b> (I) Losses (from col.(h))

243

Form 990PF Part VIII Line 1 - List all officers, directors, trustees, foundation managers and their compensation (a) Name and address Title, and average (c) Compensation (If (d) Expense account, hours per week not paid, enter Contributions to (e) other allowances (b) devoted to position -0-) employee benefit plans and deferred compensation

ANDREA WOLFE	TRUSTEE - PRESIDENT	0	0	0
2301 WEST BIG BEAVER ROAD 750 TROY, MI 48084	0.25			
LAWRENCE A WOLFE	TRUSTEE - SECRETARY	0	0	0
2201 WEST BIG BEAVER BOAD 750	7 0.25			

LAWRENCE A WOLFE	TRUSTEE - SECRETARY	0	l o	U
2301 WEST BIG BEAVER ROAD 750 TROY, MI 48084	0.25			
ARTHUR A WEISS	TRUSTEE	0	0	0
27777 FRANKLIN ROAD 2500 SOUTHFIELD, MI 48034	0.25			

2301 WEST BIG BEAVER ROAD 750 TROY, MI 48084	0.25			
ARTHUR A WEISS	TRUSTEE	0	0	0
27777 FRANKLIN ROAD 2500 SOUTHFIELD, MI 48034	0.25			
ERICKA THACKER	TRUSTEE	0	0	0
	□ 0.25			

ARTHUR A WEISS	TRUSTEE	0	0	0
27777 FRANKLIN ROAD 2500 SOUTHFIELD, MI 48034	0.25			
ERICKA THACKER	TRUSTEE	0	0	0
2301 WEST BIG BEAVER ROAD 750	0.25			

	11100122		•	ľ
27777 FRANKLIN ROAD 2500 SOUTHFIELD, MI 48034	0.25			
ERICKA THACKER	TRUSTEE	0	0	0
2301 WEST BIG BEAVER ROAD 750 TROY, MI 48084	0.25			

ERICKA THACKER	TRUSTEE	0	0	0
2301 WEST BIG BEAVER ROAD 750 TROY, MI 48084	0.25			
JEDEMY WOLEE	TRUCTEE	0	0	0

2301 WEST BIG BEAVER ROAD 750 TROY, MI 48084	0.25			
JEREMY WOLFE	TRUSTEE	0	0	0

JEREMY WOLFE	TRUSTEE	0	0	0
2301 WEST BIG BEAVER ROAD 750	0.25			

	Form 990PF Part XV Line 1a - List any managers of the foundation who have contributed more than 2% of the to
	contributions received by the foundation before the close of any tax year (but only if they have contributed more
1	than \$5,000).

ANDREA WOLFE

LAWRENCE A WOLFE

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to contribution status of any foundation manager recipient Name and address (home or business) or substantial contributor a Paid during the year

ADAT SHALOM SYNAGOGUE 29901 MIDDLEBELT RD FARMINGTON HILLS, MI 48334	NONE	PC	COMMUNITY	7,000
ALZHEIMER'S ASSOCIATION 20300 CIVIC CENTER DRIVE SUITE 100 SOUTHFIELD, MI 48076	NONE	PC	TO SUPPORT ALZHEIMER'S RESEARCH AND PROGRAM SERVICES	10,000
AMERICAN ISPAEL EDUCATION	NONE	DC.	TO SUPPORT CHARITARIE	85,000

20300 CIVIC CENTER DRIVE SUITE 100 SOUTHFIELD, MI 48076	NONE	PC	RESEARCH AND PROGRAM SERVICES	10,000
AMERICAN ISRAEL EDUCATION FOUNDATION 251 H STREET NW WASHINGTON, DC 20001	NONE	PC	TO SUPPORT CHARITABLE PURPOSE	85,000

574,880

SOUTHFIELD, MI 48076			SERVICES	
AMERICAN ISRAEL EDUCATION FOUNDATION 251 H STREET NW WASHINGTON, DC 20001	NONE	PC	TO SUPPORT CHARITABLE PURPOSE	85,000

SOUTHFIELD, MI 48076			SERVICES	
AMERICAN ISRAEL EDUCATION FOUNDATION 251 H STREET NW WASHINGTON, DC 20001	NONE	PC	TO SUPPORT CHARITABLE PURPOSE	85,00

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business) or substantial contributor a Paid during the year AMERICAN TECHNION SOCIETY NONE PC TO SUPPORT CHARITABLE 50,000

20220 ODCHARD LAKE DD

FARMINGTON HILLS, MI 48334			PORPOSE	
BERNARD ZELL ANSHE EMET DAY SCHOOL 3751 N BROADWAY ST CHICAGO, IL 60613	NONE	PC	TO SUPPORT CHARITABLE PURPOSE	5,800

DUDDOCE

SCHOOL 3751 N BROADWAY ST CHICAGO, IL 60613			PURPOSE	
CABARET (313) 41000 WOODWARD AVENUE BLOOMFIELD HILLS, MI 48304	NONE	PC	TO SUPPORT CHARITABLE PURPOSE	500
Total	574,880			

Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business)

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

or substantial contributor

a Paid during the year				
CHILD SAFE MICHIGAN 30680 MONTPELIER MADISON HEIGHTS MI 48071	NONE	PC	TO SUPPORT SAFE FOSTER CARE SERVICES TO NEGLECTED AND ABUSED CHILDREN	10,000

DETROIT CHESED PROJECT 30555 SOUTHFIELD ROAD SOUTHFIELD, MI 48076	NONE	PC	TO SUPPORT CHARITABLE PURPOSE	10,000
MADISON HEIGHTS, MI 48071			ABUSED CHILDREN	

30555 SOUTHFIELD ROAD SOUTHFIELD, MI 48076	NONE	PC	PURPOSE	10,000
DETROIT ZOOLOGICAL SOCIETY 8450 W 10 MILE RD ROYAL OAK, MI 48067	NONE	PC	TO SUPPORT CHARITABLE PURPOSE	20,000

Total			▶ 3a	574,880
DETROIT ZOOLOGICAL SOCIETY 8450 W 10 MILE RD ROYAL OAK, MI 48067	NONE	PC	TO SUPPORT CHARITABLE PURPOSE	20,000
SOUTHFIELD ROAD SOUTHFIELD, MI 48076			PURPOSE	

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to contribution status of any foundation manager recipient Name and address (home or business) or substantial contributor a Paid during the year

FRANKEL JEWISH ACADEMY 6600 W MAPLE RD WEST BLOOMFIELD, MI 48322	NONE	PC	TO SUPPORT CHARITABLE PURPOSE	5,000
FRIENDS OF IR DAVID 575 LEXINGTON AVE FL 4 NEW YORK, NY 10022	NONE	PC	TO SUPPORT CHARITABLE PURPOSE	5,000

575 LEXINGTON AVE FL 4 NEW YORK, NY 10022	NONE	PC	PURPOSE	5,000
FRIENDS OF THE ISRAEL DEFENSE FORCES 1430 BROADWAY NEW YORK NY 10018	NONE	PC	TO SUPPORT CHARITABLE PURPOSE	8,000

574,880

NEW YORK, NY 10022				
FRIENDS OF THE ISRAEL DEFENSE FORCES 1430 BROADWAY NEW YORK, NY 10018	NONE	PC	TO SUPPORT CHARITABLE PURPOSE	8,0

Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to contribution status of any foundation manager recipient

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

Name and address (nome or business)	or substantial contributor			
a Paid during the year				
FRIENDS OF UNITED HATZALAH	NONE	PC	TO SUPPORT CHARITABLE	18,000

208 E 51ST STREET SUITE 303 NEW YORK, NY 10022			PURPOSE	
GARY BURNSTEIN COMMUNITY HEALTH CLINIC 2700 STEWART PARKWAY	NONE	PC	TO SUPPORT MEDICAL CARE TO LOW INCOME COMMUNITIES	1,000

GARY BURNSTEIN COMMUNITY HEALTH CLINIC 2700 STEWART PARKWAY ROSEBURG, OR 97471	NONE	PC	TO SUPPORT MEDICAL CARE TO LOW INCOME COMMUNITIES	1,000
HADASSAH5030 ORCHARD LAKE ROAD	NONE	PC	TO SUPPORT THE COMMUNITY	2,300

2700 STEWART PARKWAY ROSEBURG, OR 97471			LOW INCOME COMMUNITIES	
HADASSAH5030 ORCHARD LAKE ROAD WEST BLOOMFIELD, MI 48323	NONE	PC	TO SUPPORT THE COMMUNITY	2,300

HADASSAH5030 ORCHARD LAKE ROAD WEST BLOOMFIELD, MI 48323	NONE	PC	TO SUPPORT THE COMMUNITY	2,300

WEST BLOOMFIELD, MI 48323		
Total	 ▶ 3a	574,880

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to contribution status of any foundation manager recipient Name and address (home or business) or substantial contributor a Paid during the year

HEBREW FREE LOAN ASSOCIATION 6735 TELEGRAPH RD SUITE 140 BLOOMFIELD HILLS, MI 48301	NONE	PC	TO SUPPORT THE COMMUNITY	25,000
HIGHER HOPES8898 COMMERCE 5C	NONE	PC	TO SUPPORT CHARITABLE	2,500

DEGGINITEED TILES, INT. 40301				
HIGHER HOPES8898 COMMERCE 5C COMMERCE, MI 48382	NONE	PC	TO SUPPORT CHARITABLE PURPOSE	2,500
HILLEL DAY SCHOOL 32200 MIDDLEBELT ROAD FARMINGTON HILLS MI 48334	NONE	PC	TO SUPPORT CHARITABLE PURPOSE	3,600

COMMERCE, MI 48382			PURPOSE	
HILLEL DAY SCHOOL 32200 MIDDLEBELT ROAD FARMINGTON HILLS, MI 48334	NONE	PC	TO SUPPORT CHARITABLE PURPOSE	3,600
Total			▶ 3a	574,880

Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to contribution status of any foundation manager recipient Name and address (home or business)

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

or substantial contributor

	or substantial continuator			
a Paid during the year				
HILLEL OF METRO DETROIT 5221 GULLEN MALL DETROIT, MI 48202	NONE	PC	TO SUPPORT THE JEWISH COLLEGE STUDENT COMMUNITY	15,000

TENTON CONTINUES ( CENTER	NONE			20.000
HOLOCAUST MEMORIAL CENTER 28123 ORCHARD LAKE RD FARMINGTON HILLS, MI 48334	NONE	PC	TO SUPPORT THE HOLOCAUST MUSEUM	31,000
DETROIT, MI 40202				

28123 ORCHARD LAKE RD FARMINGTON HILLS, MI 48334	NONE		MUSEUM	31,000
JEWISH COMMUNITY CENTER 15110 W TEN MILE RD OAK PARK, MI 48237	NONE	PC	TO SUPPORT CHARITABLE PURPOSE	20,000

FARMINGTON HILLS, MI 48334			MOSEUM	
JEWISH COMMUNITY CENTER 15110 W TEN MILE RD OAK PARK, MI 48237	NONE	PC	TO SUPPORT CHARITABLE PURPOSE	20,000
Total				574.880

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment Recipient Foundation Purpose of grant or If recipient is an individual, Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business) or substantial contributor a Paid during the year JEWISH FAMILY SERVICE OF METRO NONE PC TO SUPPORT CHARITABLE 25,000 DETROIT **PURPOSE** 

6555 W MAPLE RD BLOOMFIELD HILLS, MI 48322				
JEWISH FEDERATION 6735 TELEGRAPH ROAD BLOOMFIELD HILLS, MI 48301	NONE	PC	TO SUPPORT THE JEWISH COMMUNITY AND PHILANTHROPY	66,000
JEWISH HISTORICAL SOCIETY OF MICHIGAN 6600 W MAPLE RD	NONE	PC	TO SUPPORT CHARITABLE PURPOSE	1,000

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574,880

WEST BLOOMFIELD, MI 48322

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business) or substantial contributor a Paid during the year JEWISH HOSPICE AND CHAPLAINCY NONE PC TO SUPPORT THE JEWISH 1,000 NETWORK COMMUNITY

6555 W MAPLE RD WEST BLOOMFIELD, MI 48322			COMMONITY	
JEWISH SENIOR LIFE OF METROPOLITAN DETROIT 15000 W TEN MILE RD OAK PARK, MI 48237	NONE	PC	TO SUPPORT CHARITABLE PURPOSE	3,500

METROPOLITAN DETROIT 15000 W TEN MILE RD OAK PARK, MI 48237	NONE	PC	PURPOSE	3,
JEWISH THEOLOGICAL SEMINARY	NONE	PC	TO SUPPORT CHARITABLE	18

METROPOLITAN DETROIT 15000 W TEN MILE RD OAK PARK, MI 48237	NONE		PURPOSE	3,30
JEWISH THEOLOGICAL SEMINARY	NONE	PC	TO SUPPORT CHARITABLE	18,00

OAK PARK, MI 48237				
JEWISH THEOLOGICAL SEMINARY 3080 BROADWAY NEW YORK.NY 10027	NONE	PC	TO SUPPORT CHARITABLE PURPOSE	18,000

За

574,880

JEWISH THEOLOGICAL SEMINARY	NONL	I F C	TO SUFFURT CHARTTABLE	10,
3080 BROADWAY			PURPOSE	
NEW YORK, NY 10027				

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment Recipient Purpose of grant or If recipient is an individual, Foundation Amount show any relationship to contribution status of any foundation manager recipient Name and address (home or business) or substantial contributor a Paid during the year KADIMA15999 TWELVE MILE RD NONE PC TO SUPPORT CHARITABLE 2,500 SOUTHFIELD, MI 48075 PURPOSE

MICHIGAN LEAGUE FOR PUBLIC POLICY 1223 TURNER ST STE G1 LANSING, MI 48906	NONE	PC	TO SUPPORT CHARITABLE PURPOSE	2,000
MIDNIGHT GOLF PROGRAM 30100 TELEGRAPH SUITE 348	NONE	PC	TO SUPPORT YOUNG ADULTS IN THE LOCAL COMMUNITY	5,000

LANSING, MI 48906				
MIDNIGHT GOLF PROGRAM 30100 TELEGRAPH SUITE 348 BINGHAM FARMS, MI 48025	NONE	PC	TO SUPPORT YOUNG ADULTS IN THE LOCAL COMMUNITY	5,000
Total			▶ 3a	574,880

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business) or substantial contributor a Paid during the year MISHKAN CHICAGO NONE PC TO SUPPORT CHARITABLE 5,000

4001 N RAVENSWOOD SUITE 108 CHICAGO, IL 60613			PURPOSE	,
NATIONAL COUNCIL OF JEWISH WOMEN 26400 LAHSER 306 SOUTHFIELD, MI 48033	NONE	PC	TO SUPPORT CHARITABLE PURPOSE	2,500

WOMEN 26400 LAHSER 306 SOUTHFIELD, MI 48033	NONE		PURPOSE	2,300
OHOLEI YOSEF YITZCHAK LUBAVITCH 14100 W 9 MILE RD OAK PARK, MI 48237	NONE	PC	TO SUPPORT CHARITABLE PURPOSE	5,000

Total .

574,880

Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business) or substantial contributor

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

a Paid during the year				
ORT AMERICA 75 MAIDEN LANE 10TH FLOOR NEW YORK, NY 10038	NONE	PC	TO SUPPORT THE ADVANCEMENT OF JEWISH AND OTHER PEOPLE THROUGH TRAINING AND EDUCATION.	52,250
		1		

			TRAINING AND EDUCATION.	
PIRCHEI DETROIT26120 HARDING ST OAK PARK, MI 48237	NONE	PC	TO SUPPORT CHARITABLE PURPOSE	720
PLANNED PARENTHOOD OF MICHIGAN PO BOX 3673	NONE	PC	TO SUPPORT CHARITABLE PURPOSE	10,000

PIRCHEI DETROIT26120 HARDING ST OAK PARK, MI 48237	NONE	PC	TO SUPPORT CHARITABLE PURPOSE	720
PLANNED PARENTHOOD OF MICHIGAN PO BOX 3673 ANN ARBOR, MI 48106	NONE	PC	TO SUPPORT CHARITABLE PURPOSE	10,000

574,880

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment Recipient If recipient is an individual, Purpose of grant or Foundation Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business) or substantial contributor a Paid during the year SANCTUM HOUSE12940 VICTORIA AVE NONE PC TO SUPPORT CHARITABLE 5,000 HUNTINGTON WOODS, MI 48070 PURPOSE

STAND WITH US MICHIGAN 4166 STODDARD RD WEST BLOOMFIELD, MI 48323	NONE	PC	TO SUPPORT PRO-ISRAEL EDUCATION AND ADVOCACY ORGANIZATION	1,800
TAMARACK CAMPS 6735 TELEGRAPH RD SUITE 380	NONE	PC	TO SUPPORT YOUTH PROGRAMS	7,500

574,880

■ 3a

WEST BLOOMFIELD, MI 48323			ORGANIZATION	
TAMARACK CAMPS 6735 TELEGRAPH RD SUITE 380 BLOOMFIELD HILLS, MI 48301	NONE	PC	TO SUPPORT YOUTH PROGRAMS	7,5

Total . .

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business) or substantial contributor a Paid during the year UNIVERSITY OF MICHIGAN HEALTH NONE PC TO SUPPORT UNIVERSITY OF 10.000

SYSTEM - FOOD ALLERGY CENTER 1500 E MEDICAL CENTER DR ANN ARBOR, MI 48109			MICHIGAN FOOD ALLERGY CENTER	20,000
UNIVERSITY OF MICHIGAN HILLEL 1429 HILL ST ANN ARBOR. MI 48104	NONE	PC	TO SUPPORT CHARITABLE PURPOSE	2,000

1429 HILL ST ANN ARBOR, MI 48104		PURPOSE	
US HOLOCAUST MEMORIAL MUSEUM 100 RAOUL WALLENBERG PLACE WASHINGTON, DC 20024	NONE	 TO SUPPORT CHARITABLE PURPOSE	450

Total .

574,880

Recipient If recipient is an individual, show any relationship to status of contribution status of contribution status of contribution

recipient

PURPOSE

■ 3a

574.880

any foundation manager

Name and address (home or business)

15751 LINCOLN DR

Total.

SOUTHFIELD, MI 48076

	or substantial contributor			
a Paid during the year				
YAD EZRA2850 11 MILE RD BERKLEY, MI 48072	NONE	PC	TO SUPPORT CHARITABLE PURPOSE	3,960
YESHIVA BETH YEHUDA	NONE	PC.	TO SUPPORT CHARITABLE	10.000

efile GRAPHIC print - DO NOT PRO	CESS	As Filed D	ata -		D	LN: 93491307003171
TY 2020 Accounting Fees	Sche	edule				
Name: THE ANDREA AND LAWRENCE WOLFE						
FAMILY FOUNDATION						
		IMMILL	OUNDA	ITON		
	EIN:	38-33235	521			
Category	Amo	ount		vestment come	Adjusted Net Income	Disbursements for Charitable Purposes
ACCOUNTING FEES		3,200		1,600		1,600

efile GRAPHIC print - DO NOT PROCESS	As Filed Data -	DLN: 93491307003171
TY 2020 Investments Corpora	te Bonds Schedule	
11 2020 Investments corpora	te bonds senedale	
Name:	THE ANDREA AND LAWREN	CE WOLFE
	FAMILY FOUNDATION	
ETN:	38_3333531	

<b>EIN.</b> 30 3323321		
Investments Corporate Bonds Schedule		
Name of Bond	End of Year Book Value	End of Year Fair Market Value

INVESTMENTS

1,334,649

1,389,344

efile GRAPHIC print - DO NOT PROCESS	As Filed Data -	DLN: 93491307003171
TY 2020 Investments Corpora	te Stock Sche	dule
	THE ANDREA AND FAMILY FOUNDAT	LAWRENCE WOLFE

Investments Corporation Stock Schedule

Name of Stock

End of Year Book
Value

Market Value

8,577,564

14,351,562

INVESTMENTS IN EQUITY

efile GRAPHIC print - DO NOT PROCESS	As Filed Data -		DLI	N: 93491307003171
TY 2020 Other Expenses Sche	dule			
Name:	THE ANDREA A	ND LAWRENCE W	OLFE	
	FAMILY FOUND	ATION		
EIN:	38-3323521			
Other Expenses Schedule				4
Description	Revenue and Expenses per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
MANAGEMENT FEES	0	0		0

20

50,547

50,547

STATE OF MICHIGAN FEES

PORTFOLIO EXPENSE AND ADVISORY FEES

efile GRAPHIC print - DO NOT PROCESS	As Filed Data -		DLN: 93491307003171
TY 2020 Substantial Contribut Schedule	cors		
Name:	THE ANDREA AND L		
EIN:	38-3323521		,
Name		Ade	dress
LAWRENCE AND ANDREA WOLFE		2301 WEST BIG BEAVER RO TROY, MI 48084	PAD 750
MATHEW AND ERICKA THACKER		2301 WEST BIG BEAVER RO TROY, MI 48084	AD 750

efile GRAPHIC print - DO NOT PROCESS	As Filed Data -	<u>-</u> ]	DLI	N: 93491307003171		
TY 2020 Taxes Schedule						
				•		
Name: THE ANDREA AND LAWRENCE WOLFE						
FAMILY FOUNDATION						
<b>EIN:</b> 38-3323521						
Taxes Schedule						
Category A	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes		
FOREIGN TAXES	694	694		0		

efile GRAPHIC print - DO	NOT PROCESS As Filed Data	-		DLN: 93491307003171	
Schedule B	Sche	dule of Contributors		OMB No. 1545-0047	
(Form 990, 990-EZ, or 990-PF) Department of the Treasury Internal Revenue Service	► Attach to Form 990, 990-EZ, or 990-PF. ► Go to <u>www.irs.gov/Form990</u> for the latest information.			2020	
Name of the organization THE ANDREA AND LAWREN	CE WOLFE			dentification number	
FAMILY FOUNDATION  Organization type (chec	k one):		38-3323521		
Organization type (once	K 6110).				
Filers of:	Section:				
Form 990 or 990-EZ	☐ 501(c)( ) (enter number	) organization			
	4947(a)(1) nonexempt charitable trust <b>not</b> treated as a private foundation				
	☐ 527 political organization				
Form 990-PF	✓ 501(c)(3) exempt private foundation				
	4947(a)(1) nonexempt charitable trust treated as a private foundation				
	501(c)(3) taxable private foundation				
money or other contributions.	ion filing Form 990, 990-EZ, or 990 property) from any one contributor.				
under sections 50 received from any	on described in section 501(c)(3) fil 9(a)(1) and 170(b)(1)(A)(vi), that c one contributor, during the year, t 1h, or (ii) Form 990-EZ, line 1. Co	hecked Schedule A (Form 990 otal contributions of the greater	or 990-EZ), Part II, line 13,	, 16a, or 16b, and that	
during the year, to	on described in section 501(c)(7), ( otal contributions of more than \$1,0 ne prevention of cruelty to children	000 <i>exclusively</i> for religious, ch	aritable, scientific, literary, d		
during the year, c If this box is chec purpose. Don't co	on described in section 501(c)(7), (contributions exclusively for religiouxed, enter here the total contribution mplete any of the parts unless the le, etc., contributions totaling \$5,00	s, charitable, etc., purposes, buns that were received during the General Rule applies to this o	ut no such contributions tota ne year for an <i>exclusively</i> re rganization because it rece	aled more than \$1,000. eligious, charitable, etc., ived <i>nonexclusively</i>	
990-EZ, or 990-PF), but i	that isn't covered by the General t <b>must</b> answer "No" on Part IV, line rt I, line 2, to certify that it doesn't i	e 2, of its Form 990; or check th	ne box on line H of its Form		
For Paperwork Reduction Ac	t Notice, see the Instructions	Cat. No. 30613X	Schedule B (Form 990	), 990-EZ, or 990-PF) (2020)	

for Form 990, 990-EZ, or 990-PF.

**Employer identification number** 38-3323521

AMILY FOUNDATION	)N		
Part I Contributors	Contributors (see instructions). Use duplicate copies of Part I if additi	ional space is needed.	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	ERICKA AND MATHEW THACKER 2301 W BIG BEAVER ROAD SUITE 750  TROY, MI 480843300	\$ 298,158	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
2	ERICKA AND MATHEW THACKER 2301 W BIG BEAVER ROAD SUITE 750  TROY, MI 480843300	\$ 176,408	☐ Person ☐ Payroll ☑ Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
-		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
-		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash

Schedule	B (Form 990, 990-EZ, or 990-PF) (2020)			Page <b>4</b>
THE ANDRE	rganization EA AND LAWRENCE WOLFE UNDATION			Employer identification number 38-3323521
Part III	than \$1,000 for the year from any one contrib	utor. Complete stal of exclusiv structions.) ►	e columns <mark>(a) th</mark> ro e <i>ly</i> religious, chari	d in section 501(c)(7), (8), or (10) that total more ugh <b>(e) and</b> the following line entry. For table, etc., contributions of <b>\$1,000 or less</b> for
(a) No. from Part I	(b) Purpose of gift	(c) Use of gi		(d) Description of how gift is held
-		(e) T	ransfer of gift	
-	Transferee's name, address, and ZIP 4		•	ationship of transferor to transferee
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift		(d) Description of how gift is held
	Transferee's name, address, and ZIF	ationship of transferor to transferee		
(a) No. from Part I	(b) Purpose of gift	c) Use of gift		(d) Description of how gift is held
		(a) T	ranafar of aift	
	Transferee's name, address, and ZIP 4		ransfer of gift Rela	ationship of transferor to transferee
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift		(d) Description of how gift is held
	Transferee's name, address, and ZIF		ransfer of gift Rela	ationship of transferor to transferee
				Schedule B (Form 990, 990-EZ, or 990-PF) (2020)