Department of the Treasury Internal Revenue Service

Return of Private Foundation

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 www.lrs.gov/Form990PF for instructions and the latest information.

OMB No. 1545-0052

Fo	cale	ndar year 2018 or tax year beginning		8, and	ending		, 20
		undation		-,		r identification numb	
IJРI	PER PI	EN. WORKFORCE & RURAL DEV INC dba SCHOOLCRAFT	TOURISM & COMM	MERCE		61-1720656	
Nun	ber and	street (or P.O. box number if mail is not delivered to street address)		n/surte	B Telephor	e number (see instruc	
100	0 W LA	AKESHORE DR				906-286-1922	,
		, state or province, country, and ZIP or foreign postal code			C If evenn	tion application is pend	
MA	NISTIC	QUE MI 49854			O ii exemp	non application is pent	ing, check here?
			n of a former public	charity	D 1 Foreig	n organizations chack	here . ▶□
		☐ Final return ☐ Amended					_
		☐ Address change ☐ Name cha				n organizations meetin here and attach comp	
H	Checl	k type of organization: Section 501(c)(3) exempt p		OH	E If private	foundation status was	terminated under
		on 4947(a)(1) nonexempt charitable trust			section 5	07(b)(1)(A), check here	▶□
ī		narket value of all assets at J Accounting method			F If the four	ndata la la a 00 a a a	
	end o	f year (from Part II, col. (c), Other (specify)				ndation is in a 60-mon ction 507(b)(1)(B), chec	
		6) > \$ 33774 (Part I, column (d) must be	on cash basis.)				_
P	art I		(a) Revenue and				(d) Disbursements
		amounts in columns (b), (c), and (d) may not necessarily equal	expenses per		Investment come	(c) Adjusted net income	for charitable purposes
		the amounts in column (a) (see instructions).)	books	"	100,110	income.	(cash basis only)
	1	Contributions, gifts, grants, etc., received (attach schedule)					i
	2	Check ▶ ☐ if the foundation is not required to attach Sch. B				\	
	3	Interest on savings and temporary cash investments					
	4	Dividends and interest from securities					
	5a	Gross rents					
	ь	Net rental income or (loss)					
ā	6a	Net gain or (loss) from sale of assets not on line 10					
Ĭ	b	Gross sales price for all assets on line 6a					
Revenue	7	Capital gain net income (from Part IV, line 2)					
Œ	8	Net short-term capital gain					
	9	Income modifications					
	10a	Gross sales less returns and allowances					
	b	Less: Cost of goods sold					
	С	Gross profit or (loss) (attach schedule)					
	11	Other income (attach schedule)	87309				
	12	Total. Add lines 1 through 11	87309				
ø	13	Compensation of officers, directors trustees, etc.					0
36	14	Other employee salaries and wages					0
ĕ	15	Pension plans, employee benefits					0
Expenses	16a	Legal fees attach schedule 2019					0
•	þ	Accounting fees (attach schedule)					0
Ę	C	Other professional fees lattach schedule	15870	<u> </u>			15870
Operating and Administrative	17	Illiaiest					0
nis	18	Taxes (attach schedule) (see instructions)					9
Ē	19	Depreciation (attach schedule) and depletion					
Ad	20	Occupancy					0
þ	21 22	Travel, conferences, and meetings				<u></u>	0
ā	23	Printing and publications	2879				2879
ing	23 24	Other expenses (attach schedule)	39934				39934
rat	24	Add lines 13 through 23	58683				E0000
e l	25	Contributions, gifts, grants paid	20083				58683
Ō	26 26	Total expenses and disbursements. Add lines 24 and 25	58683	-			<u>0</u>
	27	Subtract line 26 from line 12:	30003				58683
	21 a	Excess of revenue over expenses and disbursements	28626				
	b	Net investment income (if negative, enter -0-)	20020			· · · · · · · · · · · · · · · · · ·	
		Adjusted net income (if negative, enter -0-)					
For		work Reduction Act Notice, see instructions.		11000		F-	m 990-PF (2018)
			Cat. N	lo. 11289)	`	ro	333-11 (2018)

1 Cash—non-interest-bearing (9) Book Value (9) Book Value (9) Fair Market Value (9) Fair Ma	Pa	irt II	Balance Sheets Attached schedules and amounts in the description column	Beginning of year	End o	f year 🛫,
2 Savings and temporary cash investments 3 Accounts receivable ▶ Less: allowance for doubtful accounts ▶ Less: allowance for doubtful accounts ▶ Corarts receivable			should be for end-of-year amounts only. (See instructions.)	(a) Book Value	(b) Book Value	(c) Fair Market Value
Accounts receivable ▶ Less: allowance for doubtful accounts ▶ Pelodges receivable ≥ Less: allowance for doubtful accounts ▶ Grants receivable 6 Receivables due from officers, directors, trustees, and other disqualfied persons (attach schedule) (see instructions) 7 Other notes and loans receivable (attach schedule) ▶ Less: allowance for doubtful accounts ▶ 8 Propale expenses and deferred charges 9 Propale expenses and deferred charges 9 Propale expenses and deferred charges 10a Investments—U.S. and state government obligations (attach schedule) 1 Investments—Corporate bonds (attach schedule) 1 Investments—Corporate bonds (attach schedule) 1 Investments—Corporate bonds (attach schedule) 1 Investments—mortgage loans 1 Investments—mortgage loans 1 Investments—mortgage loans 1 Investments—mortgage loans 1 Investments—other (attach schedule) ▶ 1 Investments—mortgage loans 1 Investments—other (attach schedule) ▶ 1 Investments—other (attach schedule) ↑ 1 Inve		1	Cash-non-interest-bearing	6745	33774	33774
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13 Investments—other (attach schedule) 14 Land, bulldings, and equipment: basis ▶ Less: accumulated depreciation (attach schedule) ▶ 15 Other assets (describe ▶		12	Investments—mortgage loans			
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Less: accumulated depreciation (attach schedule) ▶ 15		14	Land, buildings, and equipment: basis ▶			
15 Other assets (toe be completed by all filers—see the instructions. Also, see page 1, item 1)			Less: accumulated depreciation (attach schedule) ▶			
18 Total assets (to be completed by all filers—see the Instructions. Also, see page 1, item I)		15	^			
Instructions. Also, see page 1, item 1) 6745 33774 33774 33774 17 Accounts payable and accrued expenses 1597 0 1 1597 0 1 1597 0 1 1597 1 1 1597 1 1 1597 1 1 1597 1 1 1 1 1 1 1 1 1		16	Total assets (to be completed by all filers-see the			
17 Accounts payable and accrued expenses 1597 0 18 Grants payable			instructions. Also, see page 1, item I)	6745	33774	33774
19 Deferred revenue		17		1597	0	
Total liabilities (add lines 17 through 22)	"	18	Grants payable			
Total liabilities (add lines 17 through 22)	ij	19	Deferred revenue]
Total liabilities (add lines 17 through 22)	Ĭ	20	Loans from officers, directors, trustees, and other disqualified persons			
Total liabilities (add lines 17 through 22)	lat	21	Mortgages and other notes payable (attach schedule)			
Foundations that follow SFAS 117, check here and complete lines 24 through 26, and lines 30 and 31. Unrestricted		22	Other liabilities (describe ▶)			
Foundations that follow SFAS 117, check here and complete lines 24 through 26, and lines 30 and 31. 24 Unrestricted		23	Total liabilities (add lines 17 through 22)	1597	0	
Foundations that do not follow SFAS 117, check here and complete lines 27 through 31. Capital stock, trust principal, or current funds . Retained earnings, accumulated income, endowment, or other funds Total net assets or fund balances (see instructions) . Total llabilities and net assets/fund balances (see instructions) . Total net assets or fund balances at beginning of year—Part II, column (a), line 30 (must agree with end-of-year figure reported on prior year's return) . Enter amount from Part I, line 27a . Other Increases not included in line 2 (itemize) Total net assets or fund balances at end of year (line 4 minus line 5)—Part II, column (b), line 30 . 6 28626	10					
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27 Capital stock, trust principal, or current funds	Ĕ		Foundations that do not follow SFAS 117, check here ▶ □			
Part III Analysis of Changes in Net Assets or Fund Balances 1 Total net assets or fund balances at beginning of year—Part II, column (a), line 30 (must agree with end-of-year figure reported on prior year's return) 2 Enter amount from Part I, line 27a 3 Other increases not included in line 2 (itemize) ▶ 4 Add lines 1, 2, and 3	Ē		and complete lines 27 through 31.			ļ
Part III Analysis of Changes in Net Assets or Fund Balances 1 Total net assets or fund balances at beginning of year—Part II, column (a), line 30 (must agree with end-of-year figure reported on prior year's return) 2 Enter amount from Part I, line 27a 3 Other increases not included in line 2 (itemize) ▶ 4 Add lines 1, 2, and 3	<u>ō</u>	27	Capital stock, trust principal, or current funds			
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Part III Analysis of Changes in Net Assets or Fund Balances 1 Total net assets or fund balances at beginning of year—Part II, column (a), line 30 (must agree with end-of-year figure reported on prior year's return) 2 Enter amount from Part I, line 27a 3 Other increases not included in line 2 (itemize) ▶ 4 Add lines 1, 2, and 3	SS	29	Retained earnings, accumulated income, endowment, or other funds			
Part III Analysis of Changes in Net Assets or Fund Balances 1 Total net assets or fund balances at beginning of year—Part II, column (a), line 30 (must agree with end-of-year figure reported on prior year's return) 2 Enter amount from Part I, line 27a 3 Other increases not included in line 2 (itemize) ▶ 4 Add lines 1, 2, and 3	Z	30	Total net assets or fund balances (see instructions)		33774	
Part III Analysis of Changes in Net Assets or Fund Balances 1 Total net assets or fund balances at beginning of year—Part II, column (a), line 30 (must agree with end-of-year figure reported on prior year's return) 2 Enter amount from Part I, line 27a 3 Other increases not included in line 2 (itemize) ▶ 4 Add lines 1, 2, and 3	Š	31				
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end-of-year figure reported on prior year's return)	Pa	rt III	Analysis of Changes in Net Assets or Fund Balances			
2 28626 3 Other increases not included in line 2 (itemize) ▶ 4 Add lines 1, 2, and 3	1					
3 Other increases not included in line 2 (itemize) ► 4 Add lines 1, 2, and 3			• • • • • • •			5148
4 Add lines 1, 2, and 3	2	Ente	r amount from Part I, line 27a			28626
4 Add lines 1, 2, and 3	3	Othe	er increases not included in line 2 (itemize) ▶		3	
6 Total net assets or fund balances at end of year (line 4 minus line 5)—Part II, column (b), line 30 6 28626	4	Add	lines 1, 2, and 3		<u> 4 </u>	28626
6 Total net assets or fund balances at end of year (line 4 minus line 5) — Part II, column (b), line 30 6 28626						
	6	Tota	I net assets or fund balances at end of year (line 4 minus line 5) - F	Part II, column (b), lir	ne 30 6	

Part	V Capital Gains and	Losses for Tax on Investn	nent Income			
		ed(s) of property sold (for example, real e se; or common stock, 200 shs MLC Co.)		(b) How acquired P—Purchase D—Donation	(c) Date acquired (mo., day, yr.)	(d) Date sold (mo , day, yr.)
1a						
<u> </u>	· · · · · · · ·					
<u>C</u>						
<u>d</u>	 	· · · · · · · · · · · · · · · · · · ·			<u> </u>	-
<u>е</u>			110		7. 0-1	
	(e) Gross sales price	(f) Depreciation allowed (or allowable)		other basis nse of sale		n or (loss) (f) minus (g))
<u>a</u>						
<u> </u>						-
<u>c</u>						
<u></u>		-				-
	Complete only for assets show	wing gain in column (h) and owned	by the foundation	on 12/31/69.	M Gains (Co	I (h) coin minus
	(i) FMV as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Exces	s of col. (i) (j), if any	col. (k), but no	l. (h) gain minus t less than -0-) or from col. (h))
a						
<u> </u>						
<u>c</u>						
<u>d</u>					-	
ее	<u>-</u> i	/ If gain	alaa antar in Ba	rt Lino 7		
2	Capital gain net income or		also enter in Pa , enter -0- in Pai		2	
3	If gain, also enter in Part	n or (loss) as defined in sections I, line 8, column (c). See instru	ictions. If (loss)	, enter -0- in }	3	
Part	V Qualification Under	er Section 4940(e) for Redu	iced Tay on N	et Investment		· · · · · · · · · · · · · · · · · · ·
		vate foundations subject to the				· · · · · · · · · · · · · · · · · · ·
•	•	·	36011011 4340(a)	LEEX OTT HET HIVEST	anon moome.	
If sect	tion 4940(d)(2) applies, leave	e this part blank.				
		section 4942 tax on the distribuualify under section 4940(e). Do			base period?	☐ Yes ☐ No
1	Enter the appropriate amo	unt in each column for each ye	ar; see the instru	uctions before m	aking any entries.	
Cale	(a) Base period years endar year (or tax year beginning in)	(b) Adjusted qualifying distribution	s Net value of	(c) f noncharitable-use a		(d) tribution ratio divided by col. (c))
	2017					
	2016					
	2015					
	2014					
	2013					
	· · · · · · · · · · · · · · · · · · ·					
2	Total of line 1, column (d)				. 2	
3		for the 5-year base period—divoundation has been in existence				
4	Enter the net value of nonc	charitable-use assets for 2018 f	rom Part X, line	5	. 4	- .
5	Multiply line 4 by line 3 .				. 5	
6	Enter 1% of net investmen	nt income (1% of Part I, line 27b)		. 6	 .
7	Add lines 5 and 6				. 7	
8		ns from Part XII, line 4			. 8	0
	If line 8 is equal to or grea Part VI instructions.	ter than line 7, check the box in	n ran vi, iine 10	, and complete	ulat part using a 1	70 IAX IAIB. SEE INS

Ρ	ad	e	4

Part	Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948—see i	nstrı	ction	ns)		
1a	Exempt operating foundations described in section 4940(d)(2), check here ▶ □ and enter "N/A" on line 1.			,		
	Date of ruling or determination letter: (attach copy of letter if necessary—see instructions)					
b						
	here ▶ □ and enter 1% of Part I, line 27b					
C	All other domestic foundations enter 2% of line 27b. Exempt foreign organizations, enter 4% of]		
	Part I, line 12, col. (b).		-			
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only; others, enter -0-)		1			
3	Add lines 1 and 2					
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only; others, enter -0-)					
5	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0 5		0			
6	Credits/Payments:					
а	2018 estimated tax payments and 2017 overpayment credited to 2018 6a		1			
b	Exempt foreign organizations—tax withheld at source 6b					
C	Tax paid with application for extension of time to file (Form 8868) . 6c					
d	Backup withholding erroneously withheld 6d					
7	Total credits and payments. Add lines 6a through 6d					
8	Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached 8					
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed		0			
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid > 10		0			
11	Enter the amount of line 10 to be: Credited to 2019 estimated tax ▶ Refunded ▶ 11		0			
Part	VII-A Statements Regarding Activities					
1a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it		Yes	No		
	participate or intervene in any political campaign?	1a		✓		
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes? See the					
	instructions for the definition	1b		✓		
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials			Ī		
	published or distributed by the foundation in connection with the activities.		i			
C	Did the foundation file Form 1120-POL for this year?	1c		√		
d	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year:					
	(1) On the foundation. ▶ \$ (2) On foundation managers. ▶ \$					
•	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed					
	on foundation managers. ▶ \$					
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?					
	If "Yes," attach a detailed description of the activities.			1		
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles					
	of incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes .	3		✓_		
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	4a		✓		
b	If "Yes," has it filed a tax return on Form 990-T for this year?	4b		<u> </u>		
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?	5		✓		
	If "Yes," attach the statement required by General Instruction T.			- 1		
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either:					
	By language in the governing instrument, or	•				
	• By state legislation that effectively amends the governing instrument so that no mandatory directions that					
	conflict with the state law remain in the governing instrument?					
7	Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col. (c), and Part XV	7	'			
8a	Enter the states to which the foundation reports or with which it is registered. See instructions. ▶					
ь	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General					
	(or designate) of each state as required by General Instruction G? If "No," attach explanation	8b	1			
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or					
	4942(j)(5) for calendar year 2018 or the tax year beginning in 2018? See the instructions for Part XIV. If "Yes,"			•		
	complete Part XIV	9		✓		
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their					
	names and addresses	10		✓		

Part	VII-A Statements Regarding Activities (continued)			
•			Yes	No
11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of section 512(b)(13)? If "Yes," attach schedule. See instructions	11		/
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had advisory privileges? If "Yes," attach statement. See instructions	d 12		1
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application Website address ▶	? 13	1	
14		906-286	1022	
14	The books are in care of ► CEO Located at ► 1000 W LAKESHORE DR, MANISTIQUE MI ZIP+4 ►	498		
15	Section 4947(a)(1) nonexempt charitable trusts filling Form 990-PF in lieu of Form 1041—check here			▶ 🔽
13	and enter the amount of tax-exempt interest received or accrued during the year ▶ 15			
16	At any time during calendar year 2018, did the foundation have an interest in or a signature or other authori		Yes	+
	over a bank, securities, or other financial account in a foreign country?	16	├	
	See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes," enter the name the foreign country ▶	of		
Part	VII-B Statements Regarding Activities for Which Form 4720 May Be Required			
	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.		Yes	No
1a	During the year, did the foundation (either directly or indirectly):			
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person?			
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? Yes			
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? Yes	I		
	(5) Transfer any income or assets to a disqualified person (or make any of either available for the benefit or use of a disqualified person)?	1		
	(6) Agree to pay money or property to a government official? (Exception. Check "No" if the	Ì		
	foundation agreed to make a grant to or to employ the official for a period after termination of government service, if terminating within 90 days.)	10		
b	If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described	in	1	
	Regulations section 53.4941(d)-3 or in a current notice regarding disaster assistance? See instructions Organizations relying on a current notice regarding disaster assistance, check here	1b		
С	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, th	- 1		
	were not corrected before the first day of the tax year beginning in 2018?	1c		7
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a priva operating foundation defined in section 4942(j)(3) or 4942(j)(5)):	e		
а	At the end of tax year 2018, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning before 2018?	lo		
	If "Yes," list the years ▶ 20, 20, 20, 20			
b	Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(1	
	(relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2)			.
	all years listed, answer "No" and attach statement—see instructions.)	2b	<u> </u>	\
С	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here. > 20 , 20 , 20 , 20			
3a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year?			
b	If "Yes," did it have excess business holdings in 2018 as a result of (1) any purchase by the foundation	- 1		
U	disqualified persons after May 26, 1969; (2) the lapse of the 5-year period (or longer period approved by the			
	Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest; or (3) the lapse		1	
	the 10-, 15-, or 20-year first phase holding period? (Use Schedule C, Form 4720, to determine if the		1	
	foundation had excess business holdings in 2018.)	3b		
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes			√
b	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize it			لـــــــــــــــــــــــــــــــــــــ
	charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2018	? 4b		

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Pari	VIE: Statements Regarding Activities	s tor W	mich Form	4/201	мау ве н	equire	ea (contil	nuea)			_
5a	During the year, did the foundation pay or incur	any am	ount to:							Yes	No
	(1) Carry on propaganda, or otherwise attempt			on (sect	ion 4945(e))? .	☐ Yes	✓ No			ĺ
	(2) Influence the outcome of any specific publi									l	
	directly or indirectly, any voter registration di	rive?					☐ Yes	✓ No			- 1
	(3) Provide a grant to an individual for travel, stu	ıdv. or c	other similar i	ourpose	es?		Yes	☑ No		İ	- 1
	(4) Provide a grant to an organization other tha							_			1
	section 4945(d)(4)(A)? See instructions			-			☐ Yes	√ No		ļ	[
	(5) Provide for any purpose other than religious	. charita	able, scientifi	ic. litera	ry, or educ	ational				l	l
	purposes, or for the prevention of cruelty to							√ No		Ì	j
b	If any answer is "Yes" to 5a(1)-(5), did any of the	ne trans	actions fail t	o qualif	v under the	excer	tions des	scribed		ļļ	
	in Regulations section 53.4945 or in a current no								5b		
	Organizations relying on a current notice regard	ng disa	ster assistan	ce, che	ck here .			▶□			1
C	If the answer is "Yes" to question 5a(4), does					the tax		_		l	1
	because it maintained expenditure responsibility						Yes	☐ No			
	If "Yes," attach the statement required by Regul	ations s	ection 53.49	45-5(d)	-		_	_			İ
6a	Did the foundation, during the year, receive any					miums				}	
	on a personal benefit contract?						☐ Yes	☑ No			
ь	Did the foundation, during the year, pay premiur	ns, dire	ctly or indire	ctly, on	a personal	benefit	contract	? .	6b		
	If "Yes" to 6b, file Form 8870.										
7a	At any time during the tax year, was the foundation	a party t	to a prohibited	tax she	elter transac	tion?	☐ Yes	☑ No			
b	If "Yes," did the foundation receive any proceed							n? .	7b		
8	Is the foundation subject to the section 4960 ta								1 :		- 1
	remuneration or excess parachute payment(s) d										
Par	VIII Information About Officers, Direct	tors, T	rustees, F	ounda	tion Mana	igers,	Highly F	Paid E	mploy	ees,	
	and Contractors	• ••		• • •							
1	List all officers, directors, trustees, and found	iation n	nanaders ar	ia their	compens	ation. 2	iee instri	uctions	i.		
		, 									
•	(a) Name and address	(b) Title	e, and average rs per week	(c) Cor (If n	mpensation ot paid,	(d) (emplo	Contribution	s to plans	(e) Expe		
	(a) Name and address	(b) Title	e, and average	(c) Cor (If n	npensation	(d) (emplo	Contribution	s to plans	(e) Expe	nse acc allowan	
ALAN	(a) Name and address BARR	(b) Title hour devote	e, and average rs per week ed to position	(c) Cor (If n	mpensation ot paid,	(d) (emplo	Contribution	s to plans	(e) Expe		
ALAN 1000 V	(a) Name and address BARR V LAKESHORE DR, MANISTIQUE MI 49854	(b) Title hour devote	e, and average rs per week ed to position	(c) Cor (If n	mpensation ot paid,	(d) (emplo	Contribution	s to plans	(e) Expe		
ALAN 1000 V JENNI	(a) Name and address BARR V LAKESHORE DR, MANISTIQUE MI 49854 FER WATSON	(b) Title hour devote CEO/E) DIRECT	e, and average rs per week ed to position KECUTIVE FOR 8-12	(c) Cor (If n	mpensation ot paid,	(d) (emplo	Contribution	s to plans	(e) Expe		0
ALAN 1000 V JENNI 1000 V	(a) Name and address BARR V LAKESHORE DR, MANISTIQUE MI 49854 FER WATSON V LAKESHORE DR, MANISTIQUE MI 49854	(b) Title hour devote	e, and average rs per week ed to position KECUTIVE FOR 8-12	(c) Cor (If n	mpensation ot paid,	(d) (emplo	Contribution	s to plans	(e) Expe		
ALAN 1000 V JENNI 1000 V 3OB C	(a) Name and address BARR V LAKESHORE DR, MANISTIQUE MI 49854 FER WATSON V LAKESHORE DR, MANISTIQUE MI 49854 RUMB	(b) Title hour devote CEO/E) DIRECT	e, and average rs per week ed to position KECUTIVE FOR 8-12	(c) Cor (If n	mpensation ot paid,	(d) (emplo	Contribution	s to plans	(e) Expe		0 0
ALAN 1000 V JENNI 1000 V 30B C	(a) Name and address BARR V LAKESHORE DR, MANISTIQUE MI 49854 FER WATSON V LAKESHORE DR, MANISTIQUE MI 49854 RUMB V LAKESHORE DR, MANISTIQUE MI 49854	(b) Title hour devote CEO/E) DIRECT CHAIR	e, and average rs per week ed to position KECUTIVE FOR 8-12	(c) Cor (If n	mpensation ot paid,	(d) (emplo	Contribution	s to plans	(e) Expe		0
ALAN 1000 V JENNI 1000 V 30B C 1000 V	(a) Name and address BARR V LAKESHORE DR, MANISTIQUE MI 49854 FER WATSON V LAKESHORE DR, MANISTIQUE MI 49854 RUMB V LAKESHORE DR, MANISTIQUE MI 49854 RAUN (SECRETARY) SAME ADDRESS	(b) Titte hour devote CEO/E) DIRECT CHAIR VICE-C	e, and average rs per week ed to position KECUTIVE FOR 8-12	(c) Cor (If n	mpensation ot paid,	(d) (emplo	Contribution	s to plans	(e) Expe		0 0
ALAN 1000 V JENNI 1000 V 3OB C 1000 V AMY E	(a) Name and address BARR V LAKESHORE DR, MANISTIQUE MI 49854 FER WATSON V LAKESHORE DR, MANISTIQUE MI 49854 RUMB V LAKESHORE DR, MANISTIQUE MI 49854 RAUN (SECRETARY) SAME ADDRESS N MACARTHUR (TREASURER) SAME ADDRESS	(b) Title hour devote CEO/E) DIRECT CHAIR VICE-C 0-2 0-2	e, and average rs per week ed to position KECUTIVE FOR 8-12	(c) Coi (if n en	mpensation of paid, ter -0-) 0	(d) (emplo and defe	Contribution yee benefit erred compe	s to plans ensation 0	(e) Expe other a	allowan	0 0 0
ALAN 1000 V JENNI 1000 V 30B C 1000 V	(a) Name and address BARR V LAKESHORE DR, MANISTIQUE MI 49854 FER WATSON V LAKESHORE DR, MANISTIQUE MI 49854 RUMB V LAKESHORE DR, MANISTIQUE MI 49854 RAUN (SECRETARY) SAME ADDRESS	(b) Title hour devote CEO/E) DIRECT CHAIR VICE-C 0-2 0-2	e, and average rs per week ed to position KECUTIVE FOR 8-12	(c) Coi (if n en	mpensation of paid, ter -0-) 0	(d) (emplo and defe	Contribution yee benefit erred compe	s to plans ensation 0	(e) Expe other a	allowan	0 0 0
ALAN 1000 V JENNI 1000 V 3OB C 1000 V AMY E	(a) Name and address BARR V LAKESHORE DR, MANISTIQUE MI 49854 FER WATSON V LAKESHORE DR, MANISTIQUE MI 49854 RUMB V LAKESHORE DR, MANISTIQUE MI 49854 RAUN (SECRETARY) SAME ADDRESS N MACARTHUR (TREASURER) SAME ADDRESS Compensation of five highest-paid employe	(b) Title hour devote CEO/E) DIRECT CHAIR VICE-C 0-2 0-2	e, and average rs per week ed to position KECUTIVE FOR 8-12 0-2 HAIR 0-2 er than those	(c) Cor (if r en	mpensation of paid, ter -0-) 0	(d) (emplo and defe	Contribution yee benefit erred compe	s to plans ensation 0 0 0 ruction:	(e) Expe other a	allowan	0 0 0
ALAN 1000 V JENNI 1000 V 3OB C 1000 V AMY B MAGA 2	(a) Name and address BARR V LAKESHORE DR, MANISTIQUE MI 49854 FER WATSON V LAKESHORE DR, MANISTIQUE MI 49854 RUMB V LAKESHORE DR, MANISTIQUE MI 49854 RAUN (SECRETARY) SAME ADDRESS N MACARTHUR (TREASURER) SAME ADDRESS Compensation of five highest-paid employe	(b) Title hour devote CEO/E) DIRECT CHAIR VICE-C 0-2 0-2 es (oth	e, and average rs per week ed to position KECUTIVE FOR 8-12 0-2 HAIR 0-2 (b) Title, and a hours per week.	(c) Cor (ff r en	mpensation of paid, ter -0-) 0	(d) (emploisand defe	contribution yee benefit erred compe see instr (d) Contribut employee	s to plans ensation 0 0 uction:	(e) Expe	one, e	0 0 0
ALAN 1000 V JENNI 1000 V 3OB C 1000 V AMY B MAGA 2	(a) Name and address BARR V LAKESHORE DR, MANISTIQUE MI 49854 FER WATSON V LAKESHORE DR, MANISTIQUE MI 49854 RUMB V LAKESHORE DR, MANISTIQUE MI 49854 RAUN (SECRETARY) SAME ADDRESS N MACARTHUR (TREASURER) SAME ADDRESS Compensation of five highest-paid employe "NONE."	(b) Title hour devote CEO/E) DIRECT CHAIR VICE-C 0-2 0-2 es (oth	e, and average rs per week ed to position KECUTIVE FOR 8-12 0-2 HAIR 0-2 er than thos	(c) Cor (ff r en	opensation of paid, ter -0-) 0 0 uded on li	(d) (emploisand defe	contribution yee benefit erred compe	s to plans ensation 0 0 uctions to benefit deferred	(e) Expe	one, e	0 0 0
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ALAN 1000 V JENNI 1000 V BOB C 1000 V AMY B MAGA 2	(a) Name and address BARR V LAKESHORE DR, MANISTIQUE MI 49854 FER WATSON V LAKESHORE DR, MANISTIQUE MI 49854 RUMB V LAKESHORE DR, MANISTIQUE MI 49854 RAUN (SECRETARY) SAME ADDRESS N MACARTHUR (TREASURER) SAME ADDRESS Compensation of five highest-paid employe "NONE."	(b) Title hour devote CEO/E) DIRECT CHAIR VICE-C 0-2 0-2 es (oth	e, and average rs per week ed to position KECUTIVE FOR 8-12 0-2 HAIR 0-2 (b) Title, and a hours per week.	(c) Cor (ff r en	opensation of paid, ter -0-) 0 0 uded on li	(d) (emploisand defe	see instr (d) Contribute employee plans and	s to plans ensation 0 0 uctions to benefit deferred	(e) Expe	one, e	0 0 0
ALAN 1000 V JENNI 1000 V BOB C 1000 V AMY B MAGA 2	(a) Name and address BARR V LAKESHORE DR, MANISTIQUE MI 49854 FER WATSON V LAKESHORE DR, MANISTIQUE MI 49854 RUMB V LAKESHORE DR, MANISTIQUE MI 49854 RAUN (SECRETARY) SAME ADDRESS N MACARTHUR (TREASURER) SAME ADDRESS Compensation of five highest-paid employe "NONE."	(b) Title hour devote CEO/E) DIRECT CHAIR VICE-C 0-2 0-2 es (oth	e, and average rs per week ed to position KECUTIVE FOR 8-12 0-2 HAIR 0-2 (b) Title, and a hours per week.	(c) Cor (ff r en	opensation of paid, ter -0-) 0 0 uded on li	(d) (emploisand defe	see instr (d) Contribute employee plans and	s to plans ensation 0 0 uctions to benefit deferred	(e) Expe	one, e	0 0 0
ALAN 1000 V JENNI 1000 V BOB C 1000 V AMY B MAGA 2	(a) Name and address BARR V LAKESHORE DR, MANISTIQUE MI 49854 FER WATSON V LAKESHORE DR, MANISTIQUE MI 49854 RUMB V LAKESHORE DR, MANISTIQUE MI 49854 RAUN (SECRETARY) SAME ADDRESS N MACARTHUR (TREASURER) SAME ADDRESS Compensation of five highest-paid employe "NONE."	(b) Title hour devote CEO/E) DIRECT CHAIR VICE-C 0-2 0-2 es (oth	e, and average rs per week ed to position KECUTIVE FOR 8-12 0-2 HAIR 0-2 (b) Title, and a hours per week.	(c) Cor (ff r en	opensation of paid, ter -0-) 0 0 uded on li	(d) (emploisand defe	see instr (d) Contribute employee plans and	s to plans ensation 0 0 uctions to benefit deferred	(e) Expe	one, e	0 0 0
ALAN 1000 V JENNI 1000 V BOB C 1000 V AMY B MAGA 2	(a) Name and address BARR V LAKESHORE DR, MANISTIQUE MI 49854 FER WATSON V LAKESHORE DR, MANISTIQUE MI 49854 RUMB V LAKESHORE DR, MANISTIQUE MI 49854 RAUN (SECRETARY) SAME ADDRESS N MACARTHUR (TREASURER) SAME ADDRESS Compensation of five highest-paid employe "NONE."	(b) Title hour devote CEO/E) DIRECT CHAIR VICE-C 0-2 0-2 es (oth	e, and average rs per week ed to position KECUTIVE FOR 8-12 0-2 HAIR 0-2 (b) Title, and a hours per week.	se inclusive veek	opensation of paid, ter -0-) 0 0 uded on li	(d) (emploisand defe	see instr (d) Contribute employee plans and	s to plans ensation 0 0 uctions to benefit deferred	(e) Expe	one, e	0 0 0
ALAN 1000 V JENNI 1000 V BOB C 1000 V AMY B MAGA 2	(a) Name and address BARR V LAKESHORE DR, MANISTIQUE MI 49854 FER WATSON V LAKESHORE DR, MANISTIQUE MI 49854 RUMB V LAKESHORE DR, MANISTIQUE MI 49854 RAUN (SECRETARY) SAME ADDRESS N MACARTHUR (TREASURER) SAME ADDRESS Compensation of five highest-paid employe "NONE."	(b) Title hour devote CEO/E) DIRECT CHAIR VICE-C 0-2 0-2 es (oth	e, and average rs per week ed to position KECUTIVE FOR 8-12 0-2 HAIR 0-2 (b) Title, and a hours per week.	(c) Cor (ff r en	opensation of paid, ter -0-) 0 0 uded on li	(d) (emploisand defe	see instr (d) Contribute employee plans and	s to plans ensation 0 0 uctions to benefit deferred	(e) Expe	one, e	0 0 0
ALAN 1000 V JENNI 1000 V BOB C 1000 V AMY B MAGA 2	(a) Name and address BARR V LAKESHORE DR, MANISTIQUE MI 49854 FER WATSON V LAKESHORE DR, MANISTIQUE MI 49854 RUMB V LAKESHORE DR, MANISTIQUE MI 49854 RAUN (SECRETARY) SAME ADDRESS N MACARTHUR (TREASURER) SAME ADDRESS Compensation of five highest-paid employe "NONE."	(b) Title hour devote CEO/E) DIRECT CHAIR VICE-C 0-2 0-2 es (oth	e, and average rs per week ed to position KECUTIVE FOR 8-12 0-2 HAIR 0-2 (b) Title, and a hours per week.	se inclusive veek	opensation of paid, ter -0-) 0 0 uded on li	(d) (emploisand defe	see instr (d) Contribute employee plans and	s to plans ensation 0 0 uctions to benefit deferred	(e) Expe	one, e	0 0 0
ALAN 1000 V JENNI 1000 V BOB C 1000 V AMY B MAGA 2	(a) Name and address BARR V LAKESHORE DR, MANISTIQUE MI 49854 FER WATSON V LAKESHORE DR, MANISTIQUE MI 49854 RUMB V LAKESHORE DR, MANISTIQUE MI 49854 RAUN (SECRETARY) SAME ADDRESS N MACARTHUR (TREASURER) SAME ADDRESS Compensation of five highest-paid employe "NONE."	(b) Title hour devote CEO/E) DIRECT CHAIR VICE-C 0-2 0-2 es (oth	e, and average rs per week ed to position KECUTIVE FOR 8-12 0-2 HAIR 0-2 (b) Title, and a hours per week.	se inclusive veek	opensation of paid, ter -0-) 0 0 uded on li	(d) (emploisand defe	see instr (d) Contribute employee plans and	s to plans ensation 0 0 uctions to benefit deferred	(e) Expe	one, e	0 0 0
ALAN 1000 V JENNI 1000 V BOB C 1000 V AMY B MAGA 2	(a) Name and address BARR V LAKESHORE DR, MANISTIQUE MI 49854 FER WATSON V LAKESHORE DR, MANISTIQUE MI 49854 RUMB V LAKESHORE DR, MANISTIQUE MI 49854 RAUN (SECRETARY) SAME ADDRESS N MACARTHUR (TREASURER) SAME ADDRESS Compensation of five highest-paid employe "NONE."	(b) Title hour devote CEO/E) DIRECT CHAIR VICE-C 0-2 0-2 es (oth	e, and average rs per week ed to position KECUTIVE FOR 8-12 0-2 HAIR 0-2 (b) Title, and a hours per week.	se inclusive veek	opensation of paid, ter -0-) 0 0 uded on li	(d) (emploisand defe	see instr (d) Contribute employee plans and	s to plans ensation 0 0 uctions to benefit deferred	(e) Expe	one, e	0 0 0
ALAN 1000 V JENNI 1000 V BOB C 1000 V AMY E WAGA 2	(a) Name and address BARR V LAKESHORE DR, MANISTIQUE MI 49854 FER WATSON V LAKESHORE DR, MANISTIQUE MI 49854 RUMB V LAKESHORE DR, MANISTIQUE MI 49854 RAUN (SECRETARY) SAME ADDRESS N MACARTHUR (TREASURER) SAME ADDRESS Compensation of five highest-paid employe "NONE."	(b) Title hour devote CEO/E) DIRECT CHAIR VICE-C 0-2 0-2 es (oth	e, and average rs per week ed to position KECUTIVE FOR 8-12 0-2 HAIR 0-2 (b) Title, and a hours per week.	se inclusive veek	opensation of paid, ter -0-) 0 0 uded on li	(d) (emploisand defe	see instr (d) Contribute employee plans and	s to plans ensation 0 0 uctions to benefit deferred	(e) Expe	one, e	0 0 0

Part VIII	Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid I and Contractors (continued)	Employees,
3 Five	highest-paid independent contractors for professional services. See instructions. If none, enter "NC	NE."
	(a) Name and address of each person paid more than \$50,000 (b) Type of service	(c) Compensation
<u> </u>		
	er of others receiving over \$50,000 for professional services	
Part IX-A	Summary of Direct Charitable Activities	
List the four organization	ndation's four largest direct chantable activities during the tax year. Includo relevant statistical information such as the number on and other beneficiaries served, conferences convened, research papers produced, etc.	Expenses
1		
2		
3		
4		
DLIV D	Common of Drawam Deleted Investments (see instructions)	
Part IX-B	Summary of Program-Related Investments (see instructions) e two largest program-related investments made by the foundation during the tax year on lines 1 and 2.	Amount
1	e two largest program-related investments made by the foundation during the tax year on lines 1 and 2.	7 0110 0111
-		
All other pr	ogram-related investments. See instructions	
3		
		-
Total. Add	ines 1 through 3	>
		Form 990-PF (2018

Part	Minimum Investment Return (All domestic foundations must complete this part. Fore see instructions.)	ign four	idations,
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes:		
а	Average monthly fair market value of securities	1a	,
Ь	Average of monthly cash balances	1b	31190
c	Fair market value of all other assets (see instructions)	1c	
ď	Total (add lines 1a, b, and c)	1d	31190
e	Reduction claimed for blockage or other factors reported on lines 1a and	 	
	1c (attach detailed explanation)	1	
2	Acquisition indebtedness applicable to line 1 assets	2	C
3	Subtract line 2 from line 1d	3	31190
4	Cash deemed held for charitable activities. Enter 11/2% of line 3 (for greater amount, see		
	instructions)	4	468
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	30772
6	Minimum investment return. Enter 5% of line 5	6	1536
Part	XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating f and certain foreign organizations, check here ► and do not complete this part.)	oundati	ons
1	Minimum investment return from Part X, line 6	1	1536
2a	Tax on investment income for 2018 from Part VI, line 5 2a		
b	Income tax for 2018. (This does not include the tax from Part VI.) 2b	i	
C	Add lines 2a and 2b	2c	C
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	1536
4	Recoveries of amounts treated as qualifying distributions	4	C
5	Add lines 3 and 4	5	1536
6	Deduction from distributable amount (see instructions)	6	
7	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII,		
	line 1	7	1536
Part	XII Qualifying Distributions (see instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:		
а	Expenses, contributions, gifts, etc.—total from Part I, column (d), line 26	1a	58683
	Program-related investments—total from Part IX-B	1b	0
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc.,		
_	purposes	2	0
3	Amounts set aside for specific charitable projects that satisfy the:		
a	Suitability test (prior IRS approval required)	3a	0
ь	Cash distribution test (attach the required schedule)	3b	0
4	Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8; and Part XIII, line 4	4	58683
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income.	_	
_	Enter 1% of Part I, line 27b. See instructions	5	0
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	58683
	Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating qualifies for the section 4940(a) reduction of tax in those years	g whethe	er the foundation

Part	XIII Undistributed Income (see instruction	ons)			
,		(a) Corpus	(b) Years prior to 2017	(c) 2017	(d) 2018
1	Distributable amount for 2018 from Part XI, line 7		-		1536
2	Undistributed income, if any, as of the end of 2018:				
а	Enter amount for 2017 only			0	
Ь	Total for prior years: 20, 20, 20		0		
3	Excess distributions carryover, if any, to 2018:				
a	From 2013				
b	From 2014				
c d	From 2016				
e	From 2017				
f	Total of lines 3a through e	24081		-	
4	Qualifying distributions for 2018 from Part XII, line 4: ► \$ 58683				
а	Applied to 2017, 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)				
d	Applied to 2018 distributable amount				1536
е	Remaining amount distributed out of corpus	57147			
5	Excess distributions carryover applied to 2018 (If an amount appears in column (d), the same amount must be shown in column (a).)				
6	Enter the net total of each column as indicated below:				
a	Corpus. Add lines 3f, 4c, and 4e. Subtract line 5	81228			
b	Prior years' undistributed income. Subtract line 4b from line 2b		0		
С	Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed		0		
đ	Subtract line 6c from line 6b. Taxable amount—see instructions		0.		
е	Undistributed income for 2017. Subtract line 4a from line 2a. Taxable amount—see instructions			0	
f	Undistributed income for 2018. Subtract lines 4d and 5 from line 1. This amount must be distributed in 2019				0
7	Amounts treated as distributions out of corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3) (Election may be required—see instructions)	0			
8	Excess distributions carryover from 2013 not applied on line 5 or line 7 (see instructions).	0			
9	Excess distributions carryover to 2019. Subtract lines 7 and 8 from line 6a	81228			
10	Analysis of line 9:				
а					
b	Excess from 2015				
C	Excess from 2016 0				
d	Excess from 2017 24081				
e	Excess from 2018	 	ŀ		i i

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Page 10
•
3) or 4942(j)(5)
(e) Total

<u> </u>
re in assets at
by the foundation
ge portion of the

Part	XIV Private Operating Founda	itions (see instru	ctions and Part	VII-A, question 9)	
1a	If the foundation has received a ruling	g or determination	letter that it is a	private operating		,
	foundation, and the ruling is effective for	•				
ь	Check box to indicate whether the fou	ndation is a private	operating foundat	ion described in se	ction 4942(j)	(3) or 4942(j)(5)
2a	Enter the lesser of the adjusted net	Tax year	Ī	Prior 3 years	/	(0) 704-1
	income from Part I or the minimum investment return from Part X for	(a) 2018	(b) 2017	(c) 2016	(d) 2015	- (e) Total
	each year listed					
b	85% of line 2a					
c	Qualifying distributions from Part XII,					
	line 4 for each year listed					
d	Amounts included in line 2c not used directly				-	1
	for active conduct of exempt activities					
е	Qualifying distributions made directly					
	for active conduct of exempt activities.					
	Subtract line 2d from line 2c					
3	Complete 3a, b, or c for the					
	alternative test relied upon:	/				
а	"Assets" alternative test-enter:					
	(1) Value of all assets					
	(2) Value of assets qualifying under			-	·	
	section 4942(j)(3)(B)(j)					<u> </u>
ь	"Endowment" alternative test—enter 2/2 of minimum investment return shown in					
	Part X, line 6 for each year listed					
c	"Support" alternative test - enter:					
	(1) Total support other than gross					
	investment income (interest.					
	dividends, rents, payments on securities loans (section					
	512(a)(5)), or royalties)					
	(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				1 45 000	<u></u>
Part		•	•	ne toundation n	ad \$5,000 or m	ore in assets at
	any time during the year-	•	is.)			
1	Information Regarding Foundation		dad	/ -£ 4b - 4-4-1		h 4h - 4 4-4;
а	List any managers of the foundation before the close of any tax year (but of					by the foundation
	before the close of any tax year (but t	only if they have co	muibulea more ui	an \$5,000). (566 Si	schon 507(u)(z).)	
N/A b	List any managers of the foundation	who own 10% or	mara of the stee	k of a compration	/or on equally le	argo portion of the
	ownership of a partnership or other e					inge portion or the
N1/A	owner or a paraterior per outer of	mary, or union and	iodridation nas a	1070 of grouter line		
N/A 2	Information Regarding Contribution	Grant Gift Loa	n Scholarshin e	to Programs:		
-	Check here ▶ ☐ if the foundation				organizations and	does not accept
	unsolicited requests for funds. If the f					
	complete items 2a, b, c, and d. See in		go, g, c,		3	
a	The name, address, and telephone nu		dress of the person	n to whom applica	tions should be a	ddressed:
-	The state of the s					
b	The form in which applications should	be submitted and	d information and	materials they sho	uld include:	
_						
C	Any submission deadlines:		·-·-			
d	Any restrictions or limitations on av	vards, such as by	y geographical ar	eas, charitable fie	lds, kinds of ins	titutions, or other
	factors:					

3	Grants and Contributions Paid During t	he Year or Approve	ed for Fut	ture Payment		
	Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of	Purpose of grant or contribution	Amount	
	Name and address (home or business)	or substantial contributor	recipient	contribution		
а	Paid during the year .				-	
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N/A	i			,		
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	Total		L	▶ 3a		
ь	Approved for future payment	T			* <u>* * * * * * * * * * * * * * * * * * </u>	
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N/A						
IN/A					J	
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	r gro	ss amounts unless otherwise indicated.		usiness income	Excluded by sect	ion 512, 513, or 514	(e) * ,
			(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	Related or exemp function income (See instructions.
1	-	gram service revenue:			<u> </u>		<u> </u>
	-	Manistique Merchants' Committee Revenue					1119
	b -	Car Show Revenue		<u> </u>	ļ		639
	С		ļ <u>.</u>		<u> </u>		
	d _		-				
	e .				ļ		
	1 -				ļ	-	
_	-	Fees and contracts from government agencies			ļ		
_		nbership dues and assessments			ļ		6087
3		est on savings and temporary cash investments		_	-		
4		dends and interest from securities					
5		rental income or (loss) from real estate:					
		Debt-financed property					_
_		Not debt-financed property					
		rental income or (loss) from personal property			ļ		
7		er investment income				· · · · · · · · · · · · · · · · · · ·	
8		or (loss) from sales of assets other than inventory					
9		income or (loss) from special events					
10		ss profit or (loss) from sales of inventory					
11		er revenue: a SPONSORSHIP/TICKETS					845
	_	MISC REVENUE			-		40
						·	 .".
	d _				 		
40	en P	total Add columns (b) (d) and (c)			-		
	Sub	total. Add columns (b), (d), and (e)					
	Take	of Add line 10 polymon (b) (d) and (e)				40	07200
13			,			13	87309
13 See	work	sheet in line 13 instructions to verify calculation	s.)			13	87309
13 See Pa	work t XV	sheet in line 13 instructions to verify calculation Relationship of Activities to the A	s.) ccomplishm	ent of Exemp	t Purposes		
13 See Par Lin	work	Relationship of Activities to the A Explain below how each activity for which accomplishment of the foundation's exempt pur	s.) ccomplishm income is repoposes (other than	ent of Exemp	t Purposes (e) of Part XVI ds for such purp	-A contributed in oses). (See instruc	nportantly to the
13 See Par Line	work t XV • No. ▼	sheet in line 13 instructions to verify calculation Relationship of Activities to the A Explain below how each activity for which accomplishment of the foundation's exempt pur The Merchants' Committee hosts parades and event	s.) ccomplishm income is repoposes (other than	ent of Exemp orted in column in by providing fur is and visitors to o	t Purposes (e) of Part XVI ds for such purpour downtown are	-A contributed in oses). (See instruction at the boost our local	nportantly to the
13 See Pal Lin	work t XV • No. ▼	sheet in line 13 instructions to verify calculation Relationship of Activities to the A Explain below how each activity for which accomplishment of the foundation's exempt pur The Merchants' Committee hosts parades and event We host an annual car show in downtown Manistique	ccomplishm income is repoposes (other than is that bring local to bring visitors	ent of Exemp orted in column in by providing funds and visitors to o	t Purposes (e) of Part XVI ds for such purpour downtown are coost our local ec	-A contributed in oses). (See Instruction at the boost our location on the boost our location on the boost our location on the boost our location on the boost our location on the boost our location on the boost our location on the boost our location or	nportantly to the tions.)
13 See Pal Lin	work t XV • No. ▼	Isheet in line 13 instructions to verify calculation Relationship of Activities to the A Explain below how each activity for which accomplishment of the foundation's exempt pur The Merchants' Committee hosts parades and event We host an annual car show in downtown Manistiqui Membership dues provide funds to host business att	ccomplishm income is repoposes (other than is that bring local to bring visitors	ent of Exemp orted in column in by providing funds and visitors to o	t Purposes (e) of Part XVI ds for such purpour downtown are coost our local ec	-A contributed in oses). (See Instruction at the boost our location on the boost our location on the boost our location on the boost our location on the boost our location on the boost our location on the boost our location on the boost our location or	nportantly to the tions.)
13 See Pal Lin	work t XV e No. ▼ la lb 2	Isheet in line 13 instructions to verify calculation Relationship of Activities to the A Explain below how each activity for which accomplishment of the foundation's exempt pur The Merchants' Committee hosts parades and event We host an annual car show in downtown Manistiqui Membership dues provide funds to host business att development and assistance for anyone	ccomplishm income is repoposes (other than is that bring local to bring visitors raction and reter	ent of Exemp or the din column of by providing funds and visitors to obtain to our area and to	t Purposes (e) of Part XVI ds for such purpour downtown area coost our local eco provide entrepre	-A contributed in oses). (See Instruction at the boost our location on the boost our location on the boost our location on the boost our location on the boost our location on the boost our location on the boost our location on the boost our location or	nportantly to the tions.)
13 See Par Lin	work t XV b No. V la lb 2	Explain below how each activities to the A Explain below how each activity for which accomplishment of the foundation's exempt pur The Merchants' Committee hosts parades and event We host an annual car show in downtown Manistiqui Membership dues provide funds to host business att development and assistance for anyone Sponsorship/tickets provide funds to offset the cost of	ccomplishm income is repoposes (other thanks that bring local to to bring visitors raction and reter	ent of Exemp orted in column n by providing fun is and visitors to o is to our area and in intion events and to held throughout t	t Purposes (e) of Part XVI dds for such purpour downtown area poost our local eco provide entrepre	-A contributed in oses). (See Instruction at the boost our location on omy eneurial education,	nportantly to the tions.)
13 See Par Lin	work t XV e No. ▼ la lb 2	Explain below how each activities to the A Explain below how each activity for which accomplishment of the foundation's exempt pur The Merchants' Committee hosts parades and event We host an annual car show in downtown Manistiqui Membership dues provide funds to host business att development and assistance for anyone Sponsorship/tickets provide funds to offset the cost of Misc revenue provides funds to host business attractions.	ccomplishm income is repoposes (other thanks that bring local to to bring visitors raction and reter	ent of Exemp orted in column n by providing fun is and visitors to o is to our area and in intion events and to held throughout t	t Purposes (e) of Part XVI dds for such purpour downtown area poost our local eco provide entrepre	-A contributed in oses). (See Instruction at the boost our location on omy eneurial education,	nportantly to the tions.)
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13 See Par Lin	work t XV b No. V la lb 2	Explain below how each activities to the A Explain below how each activity for which accomplishment of the foundation's exempt pur The Merchants' Committee hosts parades and event We host an annual car show in downtown Manistiqui Membership dues provide funds to host business att development and assistance for anyone Sponsorship/tickets provide funds to offset the cost of Misc revenue provides funds to host business attractions.	ccomplishm income is repoposes (other thanks that bring local to to bring visitors raction and reter	ent of Exemp orted in column n by providing fun is and visitors to o is to our area and in intion events and to held throughout t	t Purposes (e) of Part XVI dds for such purpour downtown area poost our local eco provide entrepre	-A contributed in oses). (See Instruction at the boost our location on omy eneurial education,	nportantly to the tions.)
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13 See Par Lin	work t XV b No. V la lb 2	Explain below how each activities to the A Explain below how each activity for which accomplishment of the foundation's exempt pur The Merchants' Committee hosts parades and event We host an annual car show in downtown Manistiqui Membership dues provide funds to host business att development and assistance for anyone Sponsorship/tickets provide funds to offset the cost of Misc revenue provides funds to host business attractions.	ccomplishm income is repoposes (other thanks that bring local to to bring visitors raction and reter	ent of Exemp orted in column n by providing fun is and visitors to o is to our area and in intion events and to held throughout t	t Purposes (e) of Part XVI dds for such purpour downtown area poost our local eco provide entrepre	-A contributed in oses). (See Instruction at the boost our location on omy eneurial education,	nportantly to the tions.)
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UPPER PENINSULA WORKFORCE AND RURAL DEVELOPMENT INC 990-PF ATTACHMENT - 2018

61-1720656

PART I,	#11
OTHER	INCOME:

MEMBERSHIP DUES	60,873
SPONSORSHIPS/TICKETS	8,450
MERCHANTS' COMMITTEE EVENTS	11,194
CAR SHOW	6,392
MISCELLANEOUS REVENUE	400
TOTAL	87,309
PART I, #16c:	
OTHER PROFESSIONAL FEES:	4
CONTRACTED SERVICES	15,870
PART I, #23	
OTHER EXPENSES:	
DUES AND SUBSCRIPTIONS	3,908
EQUIP RENTAL AND MAINTENANCE	1,730
EVENT EXPENSES	15,327
OUTREACH	5,063
INSURANCE	1,811
POSTAGE	1,011
TELEPHONE	2,943
UTILITIES	2,516
DONATIONS PRIZES	1,075 1,235
GENERAL SUPPLIES	-
OLINEIME SUFFEES	3,315
TOTAL	39,934