

Form **8879-EO**

IRS e-file Signature Authorization for an Exempt Organization

OMB No. 1545-1878

For calendar year 2017, or fiscal year beginning _____, 2017, and ending _____, 20____

2017

Department of the Treasury
Internal Revenue Service

▶ **Do not send to the IRS. Keep for your records.**
▶ **Go to www.irs.gov/Form8879EO for the latest information.**

Name of exempt organization

**HARRY A. AND MARGARET D. TOWSLEY
FOUNDATION**

Employer identification number

**** - ***1798**

Name and title of officer

**MARY IVERS
TREASURER**

Part I Type of Return and Return Information (Whole Dollars Only)

Check the box for the return for which you are using this Form 8879-EO and enter the applicable amount, if any, from the return. If you check the box on line **1a, 2a, 3a, 4a, or 5a**, below, and the amount on that line for the return being filed with this form was blank, then leave line **1b, 2b, 3b, 4b, or 5b**, whichever is applicable, blank (do not enter -0-). But, if you entered -0- on the return, then enter -0- on the applicable line below. **Do not** complete more than 1 line in Part I.

1a Form 990 check here ▶ <input type="checkbox"/>	b Total revenue , if any (Form 990, Part VIII, column (A), line 12)	1b _____
2a Form 990-EZ check here ▶ <input type="checkbox"/>	b Total revenue , if any (Form 990-EZ, line 9)	2b _____
3a Form 1120-POL check here ▶ <input type="checkbox"/>	b Total tax (Form 1120-POL, line 22)	3b _____
4a Form 990-PF check here ▶ <input checked="" type="checkbox"/>	b Tax based on investment income (Form 990-PF, Part VI, line 5)	4b <u>75,163.</u>
5a Form 8868 check here ▶ <input type="checkbox"/>	b Balance Due (Form 8868, line 3c)	5b _____

Part II Declaration and Signature Authorization of Officer

Under penalties of perjury, I declare that I am an officer of the above organization and that I have examined a copy of the organization's 2017 electronic return and accompanying schedules and statements and to the best of my knowledge and belief, they are true, correct, and complete. I further declare that the amount in Part I above is the amount shown on the copy of the organization's electronic return. I consent to allow my intermediate service provider, transmitter, or electronic return originator (ERO) to send the organization's return to the IRS and to receive from the IRS (a) an acknowledgement of receipt or reason for rejection of the transmission, (b) the reason for any delay in processing the return or refund, and (c) the date of any refund. If applicable, I authorize the U.S. Treasury and its designated Financial Agent to initiate an electronic funds withdrawal (direct debit) entry to the financial institution account indicated in the tax preparation software for payment of the organization's federal taxes owed on this return, and the financial institution to debit the entry to this account. To revoke a payment, I must contact the U.S. Treasury Financial Agent at 1-888-353-4537 no later than 2 business days prior to the payment (settlement) date. I also authorize the financial institutions involved in the processing of the electronic payment of taxes to receive confidential information necessary to answer inquiries and resolve issues related to the payment. I have selected a personal identification number (PIN) as my signature for the organization's electronic return and, if applicable, the organization's consent to electronic funds withdrawal.

Officer's PIN: check one box only

I authorize _____ to enter my PIN **Enter five numbers, but do not enter all zeros**

ERO firm name

as my signature on the organization's tax year 2017 electronically filed return. If I have indicated within this return that a copy of the return is being filed with a state agency(ies) regulating charities as part of the IRS Fed/State program, I also authorize the aforementioned ERO to enter my PIN on the return's disclosure consent screen.

As an officer of the organization, I will enter my PIN as my signature on the organization's tax year 2017 electronically filed return. If I have indicated within this return that a copy of the return is being filed with a state agency(ies) regulating charities as part of the IRS Fed/State program, I will enter my PIN on the return's disclosure consent screen.

Officer's signature ▶ _____ Date ▶ _____

Part III Certification and Authentication

ERO's EFIN/PIN. Enter your six-digit electronic filing identification number (EFIN) followed by your five-digit self-selected PIN.

4***198**
Do not enter all zeros

I certify that the above numeric entry is my PIN, which is my signature on the 2017 electronically filed return for the organization indicated above. I confirm that I am submitting this return in accordance with the requirements of **Pub. 4163**, Modernized e-File (MeF) Information for Authorized IRS e-file Providers for Business Returns.

ERO's signature ▶ _____ Date ▶ _____

ERO Must Retain This Form - See Instructions
Do Not Submit This Form to the IRS Unless Requested To Do So

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.irs.gov/Form990PF for instructions and the latest information.

2017

Open to Public Inspection

Form **990-PF**

Department of the Treasury
Internal Revenue Service

For calendar year 2017 or tax year beginning _____, and ending _____

Name of foundation HARRY A. AND MARGARET D. TOWSLEY FOUNDATION		A Employer identification number ** - ***1798
Number and street (or P.O. box number if mail is not delivered to street address) 240 WEST MAIN	Room/suite 2300	B Telephone number (989) 837-1100
City or town, state or province, country, and ZIP or foreign postal code MIDLAND, MI 48640		C If exemption application is pending, check here <input type="checkbox"/>
G Check all that apply: <input type="checkbox"/> Initial return <input type="checkbox"/> Initial return of a former public charity <input type="checkbox"/> Final return <input type="checkbox"/> Amended return <input type="checkbox"/> Address change <input type="checkbox"/> Name change		D 1. Foreign organizations, check here <input type="checkbox"/> 2. Foreign organizations meeting the 85% test, check here and attach computation <input type="checkbox"/>
H Check type of organization: <input checked="" type="checkbox"/> Section 501(c)(3) exempt private foundation <input type="checkbox"/> Section 4947(a)(1) nonexempt charitable trust <input type="checkbox"/> Other taxable private foundation		E If private foundation status was terminated under section 507(b)(1)(A), check here <input type="checkbox"/>
I Fair market value of all assets at end of year (from Part II, col. (c), line 16) \$ 74,352,925.	J Accounting method: <input checked="" type="checkbox"/> Cash <input type="checkbox"/> Accrual <input type="checkbox"/> Other (specify) _____	F If the foundation is in a 60-month termination under section 507(b)(1)(B), check here <input type="checkbox"/>

Part I Analysis of Revenue and Expenses <small>(The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a).)</small>		(a) Revenue and expenses per books	(b) Net investment income	(c) Adjusted net income	(d) Disbursements for charitable purposes (cash basis only)
Revenue	1 Contributions, gifts, grants, etc., received			N/A	
	2 Check <input checked="" type="checkbox"/> if the foundation is not required to attach Sch. B				
	3 Interest on savings and temporary cash investments				
	4 Dividends and interest from securities	1,658,967.	1,658,967.		STATEMENT 2
	5a Gross rents				
	b Net rental income or (loss)				
	6a Net gain or (loss) from sale of assets not on line 10	5,931,398.			STATEMENT 1
	b Gross sales price for all assets on line 6a 10,238,815.				
	7 Capital gain net income (from Part IV, line 2)		5,898,607.		
	8 Net short-term capital gain				
	9 Income modifications				
	10a Gross sales less returns and allowances				
b Less: Cost of goods sold					
c Gross profit or (loss)					
11 Other income					
12 Total. Add lines 1 through 11	7,590,365.	7,557,574.			
Operating and Administrative Expenses	13 Compensation of officers, directors, trustees, etc.	0.	0.		0.
	14 Other employee salaries and wages	12,571.	0.		12,571.
	15 Pension plans, employee benefits				
	16a Legal fees				
	b Accounting fees STMT 3	5,428.	0.		5,428.
	c Other professional fees STMT 4	55,609.	41,268.		14,341.
	17 Interest				
	18 Taxes STMT 5	76,491.	0.		3,491.
	19 Depreciation and depletion				
	20 Occupancy	13,800.	0.		13,800.
	21 Travel, conferences, and meetings	6,883.	0.		6,883.
	22 Printing and publications	775.	0.		775.
	23 Other expenses STMT 6	21,371.	0.		21,371.
	24 Total operating and administrative expenses. Add lines 13 through 23	192,928.	41,268.		78,660.
	25 Contributions, gifts, grants paid	3,383,871.			3,383,871.
26 Total expenses and disbursements. Add lines 24 and 25	3,576,799.	41,268.		3,462,531.	
27 Subtract line 26 from line 12:					
a Excess of revenue over expenses and disbursements	4,013,566.				
b Net investment income (if negative, enter -0-)		7,516,306.			
c Adjusted net income (if negative, enter -0-)			N/A		

HARRY A. AND MARGARET D. TOWSLEY
FOUNDATION

Form 990-PF (2017)

** - ***1798

Page 2

Part II Balance Sheets		Attached schedules and amounts in the description column should be for end-of-year amounts only.		Beginning of year	End of year	
		(a) Book Value	(b) Book Value	(c) Fair Market Value		
Assets	1	Cash - non-interest-bearing		207,945.	189,017.	189,017.
	2	Savings and temporary cash investments		5,085,496.	7,132,773.	7,132,773.
	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				
	7	Other notes and loans receivable				
		Less: allowance for doubtful accounts				
	8	Inventories for sale or use				
	9	Prepaid expenses and deferred charges				
	10a	Investments - U.S. and state government obligations				
	b	Investments - corporate stock	STMT 7	26,392,946.	28,363,878.	67,028,433.
	c	Investments - corporate bonds				
	11	Investments - land, buildings, and equipment: basis				
	Less: accumulated depreciation					
12	Investments - mortgage loans					
13	Investments - other					
14	Land, buildings, and equipment: basis					
	Less: accumulated depreciation					
15	Other assets (describe)	STATEMENT 8	0.	2,702.	2,702.	
16	Total assets (to be completed by all filers - see the instructions. Also, see page 1, item I)		31,686,387.	35,688,370.	74,352,925.	
Liabilities	17	Accounts payable and accrued expenses				
	18	Grants payable				
	19	Deferred revenue				
	20	Loans from officers, directors, trustees, and other disqualified persons				
	21	Mortgages and other notes payable				
	22	Other liabilities (describe)	STATEMENT 9	13,115.	0.	
23	Total liabilities (add lines 17 through 22)		13,115.	0.		
Net Assets or Fund Balances	Foundations that follow SFAS 117, check here <input type="checkbox"/>					
	and complete lines 24 through 26, and lines 30 and 31.					
	24	Unrestricted				
	25	Temporarily restricted				
	26	Permanently restricted				
	Foundations that do not follow SFAS 117, check here <input checked="" type="checkbox"/>					
	and complete lines 27 through 31.					
27	Capital stock, trust principal, or current funds		27,880,429.	27,880,429.		
28	Paid-in or capital surplus, or land, bldg., and equipment fund		0.	0.		
29	Retained earnings, accumulated income, endowment, or other funds		3,792,843.	7,807,941.		
30	Total net assets or fund balances		31,673,272.	35,688,370.		
31	Total liabilities and net assets/fund balances		31,686,387.	35,688,370.		

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)	1	31,673,272.
2	Enter amount from Part I, line 27a	2	4,013,566.
3	Other increases not included in line 2 (itemize) BEGINNING DIVIDENDS IN TRANSIT	3	1,532.
4	Add lines 1, 2, and 3	4	35,688,370.
5	Decreases not included in line 2 (itemize)	5	0.
6	Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b), line 30	6	35,688,370.

Form 990-PF (2017)

HARRY A. AND MARGARET D. TOWSLEY
FOUNDATION

Form 990-PF (2017)

** - ***1798 Page 3

Part IV Capital Gains and Losses for Tax on Investment Income

(a) List and describe the kind(s) of property sold (for example, real estate, 2-story brick warehouse; 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 SCHWAB PUBLICLY TRADED SECURITIES	P		
b DOW PUBLICLY TRADED CALL OPTIONS EXPIRED	P		
c VANGUARD PUBLICLY TRADED MUTUAL FUNDS	P		
d DOW CHEM 75,300 SHS	P		
e DOW CALL OPTIONS OPENED AND CLOSED	P		

(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale	(h) Gain or (loss) ((e) plus (f) minus (g))
a 1,908,475.		1,790,195.	118,280.
b 166,690.			166,690.
c 3,762,855.		2,309,806.	1,453,049.
d 4,388,384.		207,416.	4,180,968.
e 12,411.			12,411.

(i) FMV as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col. (i) over col. (j), if any	(l) Gains (Col. (h) gain minus col. (k), but not less than -0-) or Losses (from col. (h))
			118,280.
			166,690.
			1,453,049.
d 240,207.	207,416.	32,791.	4,148,177.
e			12,411.

2 Capital gain net income or (net capital loss)	{ If gain, also enter in Part I, line 7 If (loss), enter -0- in Part I, line 7 }	2	5,898,607.
3 Net short-term capital gain or (loss) as defined in sections 1222(5) and (6): If gain, also enter in Part I, line 8, column (c). If (loss), enter -0- in Part I, line 8		3	N/A

Part V Qualification Under Section 4940(e) for Reduced Tax on Net Investment Income

(For optional use by domestic private foundations subject to the section 4940(a) tax on net investment income.)

If section 4940(d)(2) applies, leave this part blank.

Was the foundation liable for the section 4942 tax on the distributable amount of any year in the base period? Yes No
If "Yes," the foundation doesn't qualify under section 4940(e). Do not complete this part.

1 Enter the appropriate amount in each column for each year; see the instructions before making any entries.

(a) Base period years Calendar year (or tax year beginning in)	(b) Adjusted qualifying distributions	(c) Net value of noncharitable-use assets	(d) Distribution ratio (col. (b) divided by col. (c))
2016	3,071,190.	60,733,431.	.050568
2015	2,931,305.	60,863,265.	.048162
2014	2,412,092.	61,930,338.	.038948
2013	1,519,580.	50,354,768.	.030177
2012	1,758,032.	44,348,213.	.039642

2 Total of line 1, column (d)	2	.207497
3 Average distribution ratio for the 5-year base period - divide the total on line 2 by 5.0, or by the number of years the foundation has been in existence if less than 5 years	3	.041499
4 Enter the net value of noncharitable-use assets for 2017 from Part X, line 5	4	69,427,624.
5 Multiply line 4 by line 3	5	2,881,177.
6 Enter 1% of net investment income (1% of Part I, line 27b)	6	75,163.
7 Add lines 5 and 6	7	2,956,340.
8 Enter qualifying distributions from Part XII, line 4	8	3,462,531.

If line 8 is equal to or greater than line 7, check the box in Part VI, line 1b, and complete that part using a 1% tax rate. See the Part VI instructions.

HARRY A. AND MARGARET D. TOWSLEY
FOUNDATION

Part VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 - see instructions)

1a Exempt operating foundations described in section 4940(d)(2), check here <input type="checkbox"/> and enter "N/A" on line 1. Date of ruling or determination letter: _____ (attach copy of letter if necessary-see instructions)			
b Domestic foundations that meet the section 4940(e) requirements in Part V, check here <input checked="" type="checkbox"/> and enter 1% of Part I, line 27b		1	75,163.
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-)		2	0.
3 Add lines 1 and 2		3	75,163.
4 Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only; others, enter -0-)		4	0.
5 Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-		5	75,163.
6 Credits/Payments:			
a 2017 estimated tax payments and 2016 overpayment credited to 2017	6a	173,071.	
b Exempt foreign organizations - tax withheld at source	6b	0.	
c Tax paid with application for extension of time to file (Form 8868)	6c	0.	
d Backup withholding erroneously withheld	6d	0.	
7 Total credits and payments. Add lines 6a through 6d	7	173,071.	
8 Enter any penalty for underpayment of estimated tax. Check here <input type="checkbox"/> if Form 2220 is attached	8	0.	
9 Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed	9		
10 Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid	10	97,908.	
11 Enter the amount of line 10 to be: Credited to 2018 estimated tax <input checked="" type="checkbox"/> 97,908. Refunded <input type="checkbox"/>	11	0.	

Part VII-A Statements Regarding Activities

	Yes	No
1a During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any political campaign?		X
b Did it spend more than \$100 during the year (either directly or indirectly) for political purposes? See the instructions for the definition If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials published or distributed by the foundation in connection with the activities.		X
c Did the foundation file Form 1120-POL for this year?		X
d Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year: (1) On the foundation. <input checked="" type="checkbox"/> \$ 0. (2) On foundation managers. <input checked="" type="checkbox"/> \$ 0.		
e Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers. <input checked="" type="checkbox"/> \$ 0.		
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.		X
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		X
4a Did the foundation have unrelated business gross income of \$1,000 or more during the year?		X
b If "Yes," has it filed a tax return on Form 990-T for this year? N/A		
5 Was there a liquidation, termination, dissolution, or substantial contraction during the year? If "Yes," attach the statement required by <i>General Instruction T</i> .		X
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?	X	
7 Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col. (c), and Part XV	X	
8a Enter the states to which the foundation reports or with which it is registered. See instructions. <input checked="" type="checkbox"/> MI		
b If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate) of each state as required by <i>General Instruction G</i> ? If "No," attach explanation	X	
9 Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for calendar year 2017 or the tax year beginning in 2017? See the instructions for Part XIV. If "Yes," complete Part XIV		X
10 Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses		X

HARRY A. AND MARGARET D. TOWSLEY
FOUNDATION

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		X
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		X
13 Did the foundation comply with the public inspection requirements for its annual returns and exemption application? Website address TOWSLEYFOUNDATION.ORG	X	
14 The books are in care of MARY IVERS, CPA Telephone no. 734-994-7500 Located at 2929 PLYMOUTH ROAD, STE 350, ANN ARBOR, MI ZIP+4 48105		
15 Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - check here and enter the amount of tax-exempt interest received or accrued during the year		N/A
16 At any time during calendar year 2017, did the foundation have an interest in or a signature or other authority over a bank, securities, or other financial account in a foreign country? See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes," enter the name of the foreign country		X

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?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
(5) Transfer any income or assets to a disqualified person (or make any of either available for the benefit or use of a disqualified person)?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
(6) Agree to pay money or property to a government official? (Exception. Check "No" if the foundation agreed to make a grant to or to employ the official for a period after termination of government service, if terminating within 90 days.)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
b If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations section 53.4941(d)-3 or in a current notice regarding disaster assistance? See instructions		X
Organizations relying on a current notice regarding disaster assistance, check here		
c Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected before the first day of the tax year beginning in 2017?		X
2 Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation defined in section 4942(j)(3) or 4942(j)(5)):		
a At the end of tax year 2017, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning before 2017? If "Yes," list the years	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
b Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2) (relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer "No" and attach statement - see instructions.)		N/A
c If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here.		
3a Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
b If "Yes," did it have excess business holdings in 2017 as a result of (1) any purchase by the foundation or disqualified persons after May 26, 1969; (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest; or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Schedule C, Form 4720, to determine if the foundation had excess business holdings in 2017.)		N/A
4a Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?		X
b Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2017?		X

Part VII-B Statements Regarding Activities for Which Form 4720 May Be Required (continued)

5a During the year, did the foundation pay or incur any amount to:			Yes	No
(1)	Carry on propaganda, or otherwise attempt to influence legislation (section 4945(e))? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
(2)	Influence the outcome of any specific public election (see section 4955); or to carry on, directly or indirectly, any voter registration drive? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
(3)	Provide a grant to an individual for travel, study, or other similar purposes? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
(4)	Provide a grant to an organization other than a charitable, etc., organization described in section 4945(d)(4)(A)? See instructions <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
(5)	Provide for any purpose other than religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
b	If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify under the exceptions described in Regulations section 53.4945 or in a current notice regarding disaster assistance? See instructions <input type="checkbox"/> N/A <input type="checkbox"/>	5b		
c	If the answer is "Yes" to question 5a(4), does the foundation claim exemption from the tax because it maintained expenditure responsibility for the grant? <input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A If "Yes," attach the statement required by Regulations section 53.4945-5(d).			
6a	Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
b	Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If "Yes" to 6b, file Form 8870.	6b		X
7a	At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
b	If "Yes," did the foundation receive any proceeds or have any net income attributable to the transaction? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A	7b		

Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors

1 List all officers, directors, trustees, and foundation managers and their compensation.

(a) Name and address	(b) Title, and average hours per week devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
SEE STATEMENT 10		0.	0.	0.

2 Compensation of five highest-paid employees (other than those included on line 1). If none, enter "NONE."

(a) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
NONE				

Total number of other employees paid over \$50,000 0

HARRY A. AND MARGARET D. TOWSLEY
FOUNDATION

Form 990-PF (2017)

** - ***1798 Page 7

Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors *(continued)*

3 Five highest-paid independent contractors for professional services. If none, enter "NONE."

(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 N/A	
2	
3	
4	

Part IX-B Summary of Program-Related Investments

Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2.	Amount
1 N/A	
2	
3 All other program-related investments. See instructions.	

Total. Add lines 1 through 3 **0.**

HARRY A. AND MARGARET D. TOWSLEY
FOUNDATION

Part X Minimum Investment Return (All domestic foundations must complete this part. Foreign foundations, see instructions.)

1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes:		
a	Average monthly fair market value of securities	1a	63,321,242.
b	Average of monthly cash balances	1b	7,163,655.
c	Fair market value of all other assets	1c	
d	Total (add lines 1a, b, and c)	1d	70,484,897.
e	Reduction claimed for blockage or other factors reported on lines 1a and 1c (attach detailed explanation)	1e	0.
2	Acquisition indebtedness applicable to line 1 assets	2	0.
3	Subtract line 2 from line 1d	3	70,484,897.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions)	4	1,057,273.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	69,427,624.
6	Minimum investment return. Enter 5% of line 5	6	3,471,381.

Part XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations and certain foreign organizations, check here and do not complete this part.)

1	Minimum investment return from Part X, line 6	1	3,471,381.
2a	Tax on investment income for 2017 from Part VI, line 5	2a	75,163.
b	Income tax for 2017. (This does not include the tax from Part VI.)	2b	
c	Add lines 2a and 2b	2c	75,163.
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	3,396,218.
4	Recoveries of amounts treated as qualifying distributions	4	0.
5	Add lines 3 and 4	5	3,396,218.
6	Deduction from distributable amount (see instructions)	6	0.
7	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1	7	3,396,218.

Part XII Qualifying Distributions (see instructions)

1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:		
a	Expenses, contributions, gifts, etc. - total from Part I, column (d), line 26	1a	3,462,531.
b	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	
3	Amounts set aside for specific charitable projects that satisfy the:		
a	Suitability test (prior IRS approval required)	3a	
b	Cash distribution test (attach the required schedule)	3b	
4	Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8; and Part XIII, line 4	4	3,462,531.
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	5	75,163.
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	3,387,368.

Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation qualifies for the section 4940(e) reduction of tax in those years.

HARRY A. AND MARGARET D. TOWSLEY
FOUNDATION

Part XIII Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2016	(c) 2016	(d) 2017
1 Distributable amount for 2017 from Part XI, line 7				3,396,218.
2 Undistributed income, if any, as of the end of 2017:				
a Enter amount for 2016 only			2,724,264.	
b Total for prior years:		0.		
3 Excess distributions carryover, if any, to 2017:				
a From 2012				
b From 2013				
c From 2014				
d From 2015				
e From 2016				
f Total of lines 3a through e	0.			
4 Qualifying distributions for 2017 from Part XII, line 4: ▶ \$ 3,462,531.				
a Applied to 2016, but not more than line 2a			2,724,264.	
b Applied to undistributed income of prior years (Election required - see instructions)		0.		
c Treated as distributions out of corpus (Election required - see instructions)	0.			
d Applied to 2017 distributable amount				738,267.
e Remaining amount distributed out of corpus	0.			
5 Excess distributions carryover applied to 2017 (If an amount appears in column (d), the same amount must be shown in column (a).)	0.			0.
6 Enter the net total of each column as indicated below:				
a Corpus. Add lines 3f, 4c, and 4e. Subtract line 5	0.			
b Prior years' undistributed income. Subtract line 4b from line 2b		0.		
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		0.		
d Subtract line 6c from line 6b. Taxable amount - see instructions		0.		
e Undistributed income for 2016. Subtract line 4a from line 2a. Taxable amount - see instr.			0.	
f Undistributed income for 2017. Subtract lines 4d and 5 from line 1. This amount must be distributed in 2018				2,657,951.
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 2012 not applied on line 5 or line 7	0.			
9 Excess distributions carryover to 2018. Subtract lines 7 and 8 from line 6a	0.			
10 Analysis of line 9:				
a Excess from 2013				
b Excess from 2014				
c Excess from 2015				
d Excess from 2016				
e Excess from 2017				

HARRY A. AND MARGARET D. TOWSLEY
FOUNDATION

Part XIV Private Operating Foundations (see instructions and Part VII-A, question 9) **N/A**

1 a If the foundation has received a ruling or determination letter that it is a private operating foundation, and the ruling is effective for 2017, enter the date of the ruling ▶

b Check box to indicate whether the foundation is a private operating foundation described in section 4942(j)(3) or 4942(j)(5)

	Tax year				(e) Total
	(a) 2017	(b) 2016	(c) 2015	(d) 2014	
2 a Enter the lesser of the adjusted net income from Part I or the minimum investment return from Part X for 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 for active conduct of exempt activities					
e 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:					
a "Assets" alternative test - enter:					
(1) Value of all assets					
(2) Value of assets qualifying under section 4942(j)(3)(B)(i)					
b "Endowment" alternative test - enter 2/3 of minimum investment return shown in 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					

Part XV Supplementary Information (Complete this part only if the foundation had \$5,000 or more in assets at any time during the year-see instructions.)

1 Information Regarding Foundation Managers:
a List any managers of the foundation who have contributed more than 2% of the total contributions received by the foundation before the close of any tax year (but only if they have contributed more than \$5,000). (See section 507(d)(2).)

NONE

b List any managers of the foundation who own 10% or more of the stock of a corporation (or an equally large portion of the ownership of a partnership or other entity) of which the foundation has a 10% or greater interest.

NONE

2 Information Regarding Contribution, Grant, Gift, Loan, Scholarship, etc., Programs:
 Check here if the foundation only makes contributions to preselected charitable organizations and does not accept unsolicited requests for funds. If the foundation makes gifts, grants, etc., to individuals or organizations under other conditions, complete items 2a, b, c, and d.

a The name, address, and telephone number or email address of the person to whom applications should be addressed:

SEE STATEMENT 11

b The form in which applications should be submitted and information and materials they should include:

c Any submission deadlines:

d Any restrictions or limitations on awards, such as by geographical areas, charitable fields, kinds of institutions, or other factors:

HARRY A. AND MARGARET D. TOWSLEY
FOUNDATION

Part XV Supplementary Information (continued)

3 Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a Paid during the year				
1ST UNITED METHODIST CHURCH 228 E FULTON ST GRAND RAPIDS, MI 49503	NONE	PC	PROGRAM SUPPORT	25,000.
AFRICAN AMERICAN CULTURAL MUSEUM 1528 PONTIAC TRAIL ANN ARBOR, MI 48105	NONE	PC	PROGRAM SUPPORT	10,000.
AMERICAN RED CROSS 220 W MAIN ST MIDLAND, MI 48640	NONE	PC	PROGRAM SUPPORT	1,000.
ANN ARBOR ART CENTER 117 W LIBERTY ANN ARBOR, MI 48104	NONE	PC	PROGRAM SUPPORT	60,000.
ANN ARBOR TEEN CENTER NEUTRAL ZONE 310 E WASHINGTON ANN ARBOR, MI 48104	NONE	PC	PROGRAM SUPPORT	20,000.
Total	SEE CONTINUATION SHEET(S)			3,383,871.
b Approved for future payment				
NONE				
Total				0.

HARRY A. AND MARGARET D. TOWSLEY FOUNDATION

Part XVI-A Analysis of Income-Producing Activities

Enter gross amounts unless otherwise indicated.

Table with 5 main columns: (a) Business code, (b) Amount, (c) Exclusion code, (d) Amount, and (e) Related or exempt function income. Rows include 1 Program service revenue, 2 Membership dues and assessments, 3 Interest on savings and temporary cash investments, 4 Dividends and interest from securities, 5 Net rental income or (loss) from real estate, 6 Net rental income or (loss) from personal property, 7 Other investment income, 8 Gain or (loss) from sales of assets other than inventory, 9 Net income or (loss) from special events, 10 Gross profit or (loss) from sales of inventory, 11 Other revenue, 12 Subtotal, and 13 Total.

(See worksheet in line 13 instructions to verify calculations.)

Part XVI-B Relationship of Activities to the Accomplishment of Exempt Purposes

Table with 2 columns: Line No. and Explain below how each activity for which income is reported in column (e) of Part XVI-A contributed importantly to the accomplishment of the foundation's exempt purposes (other than by providing funds for such purposes).

Part XVII Information Regarding Transfers to and Transactions and Relationships With Noncharitable Exempt Organizations

1 Did the organization directly or indirectly engage in any of the following with any other organization described in section 501(c) (other than section 501(c)(3) organizations) or in section 527, relating to political organizations?		Yes	No
a Transfers from the reporting foundation to a noncharitable exempt organization of:			
(1) Cash			X
(2) Other assets			X
b Other transactions:			
(1) Sales of assets to a noncharitable exempt organization			X
(2) Purchases of assets from a noncharitable exempt organization			X
(3) Rental of facilities, equipment, or other assets			X
(4) Reimbursement arrangements			X
(5) Loans or loan guarantees			X
(6) Performance of services or membership or fundraising solicitations			X
c Sharing of facilities, equipment, mailing lists, other assets, or paid employees			X
d If the answer to any of the above is "Yes," complete the following schedule. Column (b) should always show the fair market value of the goods, other assets, or services given by the reporting foundation. If the foundation received less than fair market value in any transaction or sharing arrangement, show in column (d) the value of the goods, other assets, or services received.			

(a) Line no.	(b) Amount involved	(c) Name of noncharitable exempt organization	(d) Description of transfers, transactions, and sharing arrangements
		N/A	

2a Is the foundation directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described in section 501(c) (other than section 501(c)(3)) or in section 527? Yes No

b If "Yes," complete the following schedule.

(a) Name of organization	(b) Type of organization	(c) Description of relationship
N/A		

Sign Here Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge.

Signature of officer or trustee: _____ Date: _____ Title: **TREASURER**

May the IRS discuss this return with the preparer shown below? See instr. Yes No

Paid Preparer Use Only

Print/Type preparer's name: **MARY IVERS, CPA** Preparer's signature: _____ Date: _____ Check if self-employed PTIN: **P*****1**

Firm's name: **IVERS, RICKELMANN & PETERSEN CPA'S** Firm's EIN: **** - ***0198**

Firm's address: **2929 PLYMOUTH RD, SUITE 350 ANN ARBOR, MI 48105** Phone no. **(734)994-7500**

HARRY A. AND MARGARET D. TOWSLEY
FOUNDATION

** - ***1798

Part XV Supplementary Information

3 Grants and Contributions Paid During the Year (Continuation)

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
ARBOR HOSPICE FOUNDATION 2366 OAK VALLEY DR ANN ARBOR, MI 48103	NONE	PC	PROGRAM SUPPORT	125,000.
BEE GIRL PO BOX 3257 ASHLAND, OR 97520	NONE	PC	PROGRAM SUPPORT	10,000.
BOYS SCOUTS OF AMERICA SOUTHERN SHORES COUNCIL 3914 BESTECH RD YPSILANTI, MI 48197	NONE	PC	PROGRAM SUPPORT	3,500.
CALVIN COLLEGE 3201 BURTON SE GRAND RAPIDS, MI 49546	NONE	PC	PROGRAM SUPPORT	100,000.
CHARLEVOIX AREA HOSPITAL FOUNDATION 14700 LAKE SHORE DR CHARLEVOIX, MI 49720	NONE	PC	PROGRAM SUPPORT	50,000.
CHILD CARE NETWORK 3941 RESEARCH PARK DR ANN ARBOR, MI 48108	NONE	PC	PROGRAM SUPPORT	5,000.
CHILDREN'S GRIEF CENTER OF THE GREAT LAKES BAY REGION 4702 JAMES SAVAGE ROAD MIDLAND, MI 48642	NONE	PC	PROGRAM SUPPORT	2,500.
CHILDREN'S LITERACY NETWORK 1954 S INDUSTRIAL ANN ARBOR, MI 48104	NONE	PC	PROGRAM SUPPORT	5,000.
CITY OPERA HOUSE HERITAGE ASSOCIATION 106 E FRONT ST TRAVERSE CITY, MI 49684	NONE	PC	PROGRAM SUPPORT	10,000.
CORNER HEALTH CENTER 47 N HURON YPSILANTI, MI 48197	NONE	PC	PROGRAM SUPPORT	40,000.
Total from continuation sheets				3,267,871.

HARRY A. AND MARGARET D. TOWSLEY
FOUNDATION

** - ***1798

Part XV Supplementary Information

3 Grants and Contributions Paid During the Year (Continuation)

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
COUNCIL OF MICHIGAN FOUNDATIONS 1 S HARBOR AVE GRAND HAVEN, MI 49417	NONE	PC	PROGRAM SUPPORT	8,300.
CULVER EDUCATION FOUNDATION 1300 ACADEMY RD CULVER, IN 46511	NONE	PC	PROGRAM SUPPORT	2,500.
CURE ALZHEIMERS FUND 34 WASHINGTON ST WELLESLEY, MA 02481	NONE	PC	PROGRAM SUPPORT	1,000.
DELTA COLLEGE 1961 DELTA RD UNIVERSITY CENTER, MI 48710	NONE	PC	PROGRAM SUPPORT	8,000.
DETROIT MUSICIANS FUND 20833 SOUTHFIELD RD SOUTHFIELD, MI 48075	NONE	PC	PROGRAM SUPPORT	15,000.
DIRECT RELIEF 27 S LA PATERA LANE SANTA BARBARA, CA 93117	NONE	PC	PROGRAM SUPPORT	1,500.
EHM SENIOR SOLUTIONS 34024 W 8 MILE RD FARMINGTON HILLS, MI 48336	NONE	PC	PROGRAM SUPPORT	100,000.
FAMILY LEARNING INSTITUTE 1777 HIGHLAND DR ANN ARBOR, MI 48108	NONE	PC	PROGRAM SUPPORT	20,000.
FINLANDIA UNIVERSITY 601 QUINCY ST HANCOCK, MI 49930	NONE	PC	PROGRAM SUPPORT	92,071.
FRIENDS IN DEED 1196 ECORSE RD YPSILANTI, MI 48198	NONE	PC	PROGRAM SUPPORT	15,000.
Total from continuation sheets				

HARRY A. AND MARGARET D. TOWSLEY
FOUNDATION

** - ***1798

Part XV Supplementary Information

3 Grants and Contributions Paid During the Year (Continuation)

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
GILDA'S CLUB METRO DETROIT 3517 S ROCHESTER RD ROYAL OAK, MI 48073	NONE	PC	PROGRAM SUPPORT	5,000.
GIRL SCOUTS HEART OF MICHIGAN 444 JAMES L HART PKWY YPSILANTI, MI 48197	NONE	PC	PROGRAM SUPPORT	15,000.
GIRLS GROUP 2531 JACKSON AVE ANN ARBOR, MI 48103	NONE	PC	PROGRAM SUPPORT	51,000.
GRAND RAPIDS SYMPHONY 300 OTTAWA AVE NW GRAND RAPIDS, MI 49503	NONE	PC	PROGRAM SUPPORT	2,500.
GRAND TRAVERSE REGIONAL LAND CONSERVANCY 3860 N LONG LAKE RD TRAVERSE CITY, MI 49684	NONE	PC	PROGRAM SUPPORT	20,000.
GRASS RIVER NATURAL AREA PO BOX 231 BELLAIRE, MI 49615	NONE	PC	PROGRAM SUPPORT	61,250.
GREENHILLS SCHOOL 850 GREENHILLS DR ANN ARBOR, MI 48105	NONE	PC	PROGRAM SUPPORT	100,000.
HOPE CLINIC PO BOX 980311 YPSILANTI, MI 48198	NONE	PC	PROGRAM SUPPORT	30,000.
HURON RIVER WATERSHED COUNCIL 1100 N MAIN ST ANN ARBOR, MI 48104	NONE	PC	PROGRAM SUPPORT	5,000.
INTERLOCHEN CENTER FOR THE ARTS PO BOX 199 INTERLOCHEN, MI 49643	NONE	PC	PROGRAM SUPPORT	250,000.
Total from continuation sheets				

HARRY A. AND MARGARET D. TOWSLEY
FOUNDATION

** - ***1798

Part XV Supplementary Information

3 Grants and Contributions Paid During the Year (Continuation)

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
KETTERING UNIVERSITY 1700 UNIVERSITY AVE FLINT, MI 48504	NONE	PC	PROGRAM SUPPORT	25,000.
LEGACY LAND CONSERVANCY 1100 N MAIN ST ANN ARBOR, MI 48104	NONE	PC	PROGRAM SUPPORT	60,000.
LIGHTUP 5400 HOLLOW DR BLOOMFIELD HILLS, MI 48302	NONE	PC	PROGRAM SUPPORT	50,000.
LOS ANGELES LGBT CENTER 1625 N SCHRADER BLVD LOS ANGELES, CA 90028	NONE	PC	PROGRAM SUPPORT	25,000.
MAJOR CHORDS FOR MINORS 403 S JEFFERSON SAGINAW, MI 48607	NONE	PC	PROGRAM SUPPORT	7,500.
MARY FREE BED 235 WEALTHY ST SE GRAND RAPIDS, MI 49503	NONE	PC	PROGRAM SUPPORT	100,000.
MASSACHUSETTS GENERAL HOSPITAL 125 NASHUA ST BOSTON, MA 02114	NONE	PC	PROGRAM SUPPORT	4,000.
MESSIAH LUTHERAN CHURCH 1550 S POSEYVILLE RD MIDLAND, MI 48640	NONE	PC	PROGRAM SUPPORT	14,500.
MICHIGAN THEATER FOUNDATION 603 E LIBERTY ANN ARBOR, MI 48104	NONE	PC	PROGRAM SUPPORT	200,000.
MID-MICHIGAN MEDICAL CENTER 4000 WELLNESS DR MIDLAND, MI 48670	NONE	PC	PROGRAM SUPPORT	100,000.
Total from continuation sheets				

HARRY A. AND MARGARET D. TOWSLEY
FOUNDATION

** - ***1798

Part XV Supplementary Information

3 Grants and Contributions Paid During the Year (Continuation)

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
MIDLAND AREA COMMUNITY FOUNDATION 76 ASHMAN CIRCLE MIDLAND, MI 48640	NONE	PC	PROGRAM SUPPORT	55,000.
NATURE CONSERVANCY MICHIGAN 101 E GRAND RIVER LANSING, MI 48906	NONE	PC	PROGRAM SUPPORT	125,000.
NEW YORK UNIVERSITY 25 W 4TH ST NEW YORK, NY 10012	NONE	PC	PROGRAM SUPPORT	2,000.
OUR HOUSE 2737 HOLYOKE LANE ANN ARBOR, MI 48103	NONE	PC	PROGRAM SUPPORT	5,000.
RIVER HOUSE INC PO BOX 661 GRAYLING, MI 49738	NONE	PC	PROGRAM SUPPORT	20,000.
RONALD MCDONALD HOUSE OF WESTERN MICHIGAN 1323 CEDAR ST NE GRAND RAPIDS, MI 49503	NONE	PC	PROGRAM SUPPORT	2,250.
SAN DIEGO COFFEE TRAINING INSTITUTE 1616 NATIONAL AVE SAN DIEGO, CA 92113	NONE	PC	PROGRAM SUPPORT	10,000.
SHELTER ASSOCIATION OF WASHTENAW COUNTY PO BOX 7370 ANN ARBOR, MI 48107	NONE	PC	PROGRAM SUPPORT	2,500.
SOS COMMUNITY SERVICES 114 N RIVER ST YPSILANTI, MI 48198	NONE	PC	PROGRAM SUPPORT	20,000.
ST LOUIS CENTER 16195 OLD US 12 CHELSEA, MI 48118	NONE	PC	PROGRAM SUPPORT	150,000.
Total from continuation sheets				

HARRY A. AND MARGARET D. TOWSLEY
FOUNDATION

** - ***1798

Part XV Supplementary Information

3 Grants and Contributions Paid During the Year (Continuation)

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
STARR COMMONWEALTH SCHOOLS 13725 STARR COMMONWEALTH RD ALBION, MI 49224	NONE	PC	PROGRAM SUPPORT	50,000.
STEWARDSHIP NETWORK 416 LONGSHORE DR ANN ARBOR, MI 48105	NONE	PC	PROGRAM SUPPORT	40,000.
STUDENT ADVOCACY CENTER OF MICHIGAN 2140 ELLSWORTH RD ANN ARBOR, MI 48104	NONE	PC	PROGRAM SUPPORT	35,000.
SYNOD COMMUNITY SERVICES 615 S MANSFIELD YPSILANTI, MI 48197	NONE	PC	PROGRAM SUPPORT	5,000.
THIRD AVE CHARITABLE ORGANIZATION 1420 THIRD AVE SAN DIEGO, CA 92101	NONE	PC	PROGRAM SUPPORT	15,000.
UM CENTER FOR EDUCATION OF WOMEN 330 E LIBERTY ANN ARBOR, MI 48104	NONE	PC	PROGRAM SUPPORT	100,000.
UM GERALD R FORD SCHOOL OF PUBLIC POLICY 735 S STATE STE 4238 ANN ARBOR, MI 48109	NONE	PC	PROGRAM SUPPORT	250,000.
UM LIBRARY 818 HATCHER GRADUATE LIBRARY ANN ARBOR, MI 48109	NONE	PC	PROGRAM SUPPORT	200,000.
UM SCHOOL OF EDUCATION 610 E UNIVERSITY ANN ARBOR, MI 48109	NONE	PC	PROGRAM SUPPORT	250,000.
UM WILLIAM L CLEMENTS LIBRARY 909 S UNIVERSITY ANN ARBOR, MI 48109	NONE	PC	PROGRAM SUPPORT	1,000.
Total from continuation sheets				

**HARRY A. AND MARGARET D. TOWSLEY
FOUNDATION**

-*1798

Part XV Supplementary Information

3 Grants and Contributions Paid During the Year (Continuation)

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
WASHTENAW COMMUNITY COLLEGE FOUNDATION 4800 E HURON RIVER DR ANN ARBOR, MI 48105	NONE	PC	PROGRAM SUPPORT	100,000.
WEST MIDLAND FAMILY CENTER 4011 W ISABELLA RD SHEPHERD, MI 48883	NONE	PC	PROGRAM SUPPORT	50,000.
YPSILANTI MEALS ON WHEELS 1110 W CROSS ST YPSILANTI, MI 48197	NONE	PC	PROGRAM SUPPORT	40,000.
Total from continuation sheets				

 FORM 990-PF GAIN OR (LOSS) FROM SALE OF ASSETS STATEMENT 1

(A) DESCRIPTION OF PROPERTY			MANNER ACQUIRED	DATE ACQUIRED	DATE SOLD
SCHWAB PUBLICLY TRADED SECURITIES					
			PURCHASED		
(B) GROSS SALES PRICE	(C) VALUE AT TIME OF ACQ.	(D) EXPENSE OF SALE	(E) DEPREC.	(F) GAIN OR LOSS	
1,908,475.	1,790,195.	0.	0.	118,280.	

(A) DESCRIPTION OF PROPERTY			MANNER ACQUIRED	DATE ACQUIRED	DATE SOLD
DOW PUBLICLY TRADED CALL OPTIONS EXPIRED					
			PURCHASED		
(B) GROSS SALES PRICE	(C) COST OR OTHER BASIS	(D) EXPENSE OF SALE	(E) DEPREC.	(F) GAIN OR LOSS	
166,690.	0.	0.	0.	166,690.	

(A) DESCRIPTION OF PROPERTY			MANNER ACQUIRED	DATE ACQUIRED	DATE SOLD
VANGUARD PUBLICLY TRADED MUTUAL FUNDS					
			PURCHASED		
(B) GROSS SALES PRICE	(C) VALUE AT TIME OF ACQ.	(D) EXPENSE OF SALE	(E) DEPREC.	(F) GAIN OR LOSS	
3,762,855.	2,309,806.	0.	0.	1,453,049.	

(A) DESCRIPTION OF PROPERTY	MANNER ACQUIRED		DATE ACQUIRED		DATE SOLD
DOW CHEM 75,300 SHS	PURCHASED				
(B) GROSS SALES PRICE	(C) VALUE AT TIME OF ACQ.	(D) EXPENSE OF SALE	(E) DEPREC.	(F) GAIN OR LOSS	
4,388,384.	207,416.	0.	0.	4,180,968.	

(A) DESCRIPTION OF PROPERTY	MANNER ACQUIRED		DATE ACQUIRED		DATE SOLD
DOW CALL OPTIONS OPENED AND CLOSED	PURCHASED				
(B) GROSS SALES PRICE	(C) COST OR OTHER BASIS	(D) EXPENSE OF SALE	(E) DEPREC.	(F) GAIN OR LOSS	
12,411.	0.	0.	0.	12,411.	

CAPITAL GAINS DIVIDENDS FROM PART IV	0.
TOTAL TO FORM 990-PF, PART I, LINE 6A	5,931,398.

FORM 990-PF DIVIDENDS AND INTEREST FROM SECURITIES STATEMENT 2

SOURCE	GROSS AMOUNT	CAPITAL GAINS DIVIDENDS	(A) REVENUE PER BOOKS	(B) NET INVESTMENT INCOME	(C) ADJUSTED NET INCOME
CHARLES SCHWAB	266,931.	0.	266,931.	266,931.	
CHEMICAL BANK	701,690.	0.	701,690.	701,690.	
VANGUARD FUNDS	690,346.	0.	690,346.	690,346.	
TO PART I, LINE 4	1,658,967.	0.	1,658,967.	1,658,967.	

FORM 990-PF	ACCOUNTING FEES			STATEMENT 3
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
IVERS RICKELMANN PETERSEN TAX PREP FEE	5,428.	0.		5,428.
TO FORM 990-PF, PG 1, LN 16B	5,428.	0.		5,428.

FORM 990-PF	OTHER PROFESSIONAL FEES			STATEMENT 4
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
REHMANN AUDIT FEE	200.	0.		200.
HRNI ADMINISTRATIVE FEES	2,641.	0.		2,641.
CHEMICAL BANK AGENCY FEES	11,799.	11,799.		0.
COLUMBIA ASSET INVESTMENT MGMT FEES	29,469.	29,469.		0.
BENNETT AUDIT FEE	11,500.	0.		11,500.
TO FORM 990-PF, PG 1, LN 16C	55,609.	41,268.		14,341.

FORM 990-PF	TAXES			STATEMENT 5
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
PAYROLL TAXES	3,491.	0.		3,491.
FEDERAL EXCISE TAX	73,000.	0.		0.
TO FORM 990-PF, PG 1, LN 18	76,491.	0.		3,491.

FORM 990-PF	OTHER EXPENSES			STATEMENT 6
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
INSURANCE EXPENSE	8,330.	0.		8,330.
COMPUTER EXPENSE	8,975.	0.		8,975.
OFFICE EXPENSE	4,066.	0.		4,066.
TO FORM 990-PF, PG 1, LN 23	21,371.	0.		21,371.

FORM 990-PF	CORPORATE STOCK		STATEMENT 7
DESCRIPTION	BOOK VALUE	FAIR MARKET VALUE	
CORPORATE STOCKS	28,363,878.	67,028,433.	
TOTAL TO FORM 990-PF, PART II, LINE 10B	28,363,878.	67,028,433.	

FORM 990-PF	OTHER ASSETS			STATEMENT 8
DESCRIPTION	BEGINNING OF YR BOOK VALUE	END OF YEAR BOOK VALUE	FAIR MARKET VALUE	
VANGUARD DIVIDEND IN TRANSIT	0.	2,702.	2,702.	
TO FORM 990-PF, PART II, LINE 15	0.	2,702.	2,702.	

FORM 990-PF	OTHER LIABILITIES		STATEMENT 9
DESCRIPTION	BOY AMOUNT	EOY AMOUNT	
ERRONEOUS DEPOSIT REVERSED IN 2017	13,115.	0.	
TOTAL TO FORM 990-PF, PART II, LINE 22	13,115.	0.	

FORM 990-PF PART VIII - LIST OF OFFICERS, DIRECTORS STATEMENT 10
 TRUSTEES AND FOUNDATION MANAGERS

NAME AND ADDRESS	TITLE AND AVRG HRS/WK	COMPEN- SATION	EMPLOYEE BEN PLAN CONTRIB	EXPENSE ACCOUNT
JUDITH D. RUMELHART 240 W MAIN ST STE 2300 MIDLAND, MI 48640	VPRES/TRUSTEE 1.00	0.	0.	0.
MARY IVERS 240 W MAIN ST STE 2300 MIDLAND, MI 48640	TREASURER/TRUSTEE 4.00	0.	0.	0.
JENNIFER POTEAT 240 W MAIN ST STE 2300 MIDLAND, MI 48640	TRUSTEE 1.00	0.	0.	0.
MARGARET E. THOMPSON 240 W MAIN ST STE 2300 MIDLAND, MI 48640	TRUSTEE 1.00	0.	0.	0.
STEVEN RIECKER 240 W MAIN ST STE 2300 MIDLAND, MI 48640	TRUSTEE 1.00	0.	0.	0.
DAVID WINSTON INGLISH 240 W MAIN ST STE 2300 MIDLAND, MI 48640	TRUSTEE 1.00	0.	0.	0.
DOUGLAS INGLISH 240 W MAIN ST STE 2300 MIDLAND, MI 48640	TRUSTEE 1.00	0.	0.	0.
TINA S. VAN DAM 240 W MAIN ST STE 2300 MIDLAND, MI 48640	TRUSTEE 1.00	0.	0.	0.
C. WENDELL DUNBAR 240 W MAIN ST STE 2300 MIDLAND, MI 48640	PRES/TRUSTEE 10.00	0.	0.	0.
LYNN T. WHITE 240 W MAIN ST STE 2300 MIDLAND, MI 48640	TRUSTEE 1.00	0.	0.	0.
TOTALS INCLUDED ON 990-PF, PAGE 6, PART VIII		0.	0.	0.

FORM 990-PF

GRANT APPLICATION SUBMISSION INFORMATION
PART XV, LINES 2A THROUGH 2D

STATEMENT 11

NAME AND ADDRESS OF PERSON TO WHOM APPLICATIONS SHOULD BE SUBMITTED

C. WENDELL DUNBAR, PRESIDENT
240 WEST MAIN STREET
MIDLAND, MI 48640

TELEPHONE NUMBER

(989)837-1100

FORM AND CONTENT OF APPLICATIONS

APPLICATION INFORMATION IS AVAILABLE ON THE ORGANIZATION'S WEBSITE, TOWSLEYFOUNDATION.ORG. GRANTS ARE NOT MADE TO INSTITUTIONS WHICH UNFAIRLY DISCRIMINATE IN POLICY OR PRACTICE BASED ON AGE, RACE, COLOR, CREED OR SEX. ORGANIZATIONS SEEKING AID FROM THE FOUNDATION SHOULD:

1. FORWARD A COPY OF THE TAX EXEMPT LETTER FROM THE IRS AND A COPY OF THE LETTER ESTABLISHING THAT THE APPLICANT IS NOT A PRIVATE FOUNDATION.
2. STATE THE AMOUNTS REQUESTED AND EXPLAIN THE NEED, IN THE FORMAT REQUESTED ON THE WEBSITE.
3. INCLUDE IN THE APPLICATION THE ORGANIZATION'S LATEST FINANCIAL STATEMENTS.

ANY SUBMISSION DEADLINES

DEADLINES FOR CONSIDERATION AT EACH BOARD MEETING ARE POSTED ON THE FOUNDATION WEBSITE.

RESTRICTIONS AND LIMITATIONS ON AWARDS

1. THE FOUNDATION DOES NOT MAKE DIRECT GRANTS TO INDIVIDUALS, PROVIDE LOAN FUNDS, OR MAKE GRANTS TO STUDENTS FOR SCHOLARSHIPS.
2. THE FOUNDATION DOES NOT MAKE GRANTS FOR TRAVEL AND CONFERENCES.

Application for Automatic Extension of Time To File an Exempt Organization Return

Department of the Treasury
Internal Revenue Service

▶ **File a separate application for each return.**

▶ **Information about Form 8868 and its instructions is at www.irs.gov/form8868 .**

Electronic filing (e-file). You can electronically file Form 8868 to request a 6-month automatic extension of time to file any of the forms listed below with the exception of Form 8870, Information Return for Transfers Associated With Certain Personal Benefit Contracts, for which an extension request must be sent to the IRS in paper format (see instructions). For more details on the electronic filing of this form, visit www.irs.gov/efile, click on Charities & Non-Profits, and click on e-file for Charities and Non-Profits.

Automatic 6-Month Extension of Time. Only submit original (no copies needed).

All corporations required to file an income tax return other than Form 990-T (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request an extension of time to file income tax returns.

		Enter filer's identifying number
File by the due date for filing your return. See instructions.	Name of exempt organization or other filer, see instructions. HARRY A. AND MARGARET D. TOWSLEY FOUNDATION	Employer identification number (EIN) or **-***1798
	Number, street, and room or suite no. If a P.O. box, see instructions. 240 WEST MAIN, NO. 2300	Social security number (SSN)
	City, town or post office, state, and ZIP code. For a foreign address, see instructions. MIDLAND, MI 48640	

Enter the Return Code for the return that this application is for (file a separate application for each return) 0 4

Application Is For	Return Code	Application Is For	Return Code
Form 990 or Form 990-EZ	01	Form 990-T (corporation)	07
Form 990-BL	02	Form 1041-A	08
Form 4720 (individual)	03	Form 4720 (other than individual)	09
Form 990-PF	04	Form 5227	10
Form 990-T (sec. 401(a) or 408(a) trust)	05	Form 6069	11
Form 990-T (trust other than above)	06	Form 8870	12

MARY IVERS, CPA

• The books are in the care of ▶ **2929 PLYMOUTH ROAD, STE 350 - ANN ARBOR, MI 48105**
Telephone No. ▶ **734-994-7500** Fax No. ▶ **734-994-0165**

- If the organization does not have an office or place of business in the United States, check this box
- If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) _____. If this is for the whole group, check this box . If it is for part of the group, check this box and attach a list with the names and EINs of all members the extension is for.

1 I request an automatic 6-month extension of time until **NOVEMBER 15, 2018**, to file the exempt organization return for the organization named above. The extension is for the organization's return for:

- ▶ calendar year **2017** or
- ▶ tax year beginning _____, and ending _____.

2 If the tax year entered in line 1 is for less than 12 months, check reason: Initial return Final return Change in accounting period

3a If this application is for Forms 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions.	3a	\$ 76,537.
b If this application is for Forms 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit.	3b	\$ 173,071.
c Balance due. Subtract line 3b from line 3a. Include your payment with this form, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions.	3c	\$ 0.

Caution: If you are going to make an electronic funds withdrawal (direct debit) with this Form 8868, see Form 8453-EO and Form 8879-EO for payment instructions.