Filing Instructions

HARRY A. AND MARGARET D. TOWSLEY FOUNDATION

Exempt Organization / Private Foundation Tax Return(s)

Taxable Year Ended December 31, 2023

Federal Filing Instructions

Your Form 990-PF for the tax year ended 12/31/23 shows a total overpayment of \$5,676, all of which is to be credited to your estimated tax liability for the coming year. Do not mail a copy of this return.

Your return is being filed electronically with the IRS and is not required to be mailed. If you mail a paper copy of your return to the IRS it will delay the processing of your return. Your electronically filed return is not complete without your signature. You are using a Personal Identification Number (PIN) for signing your return electronically. Form 8879-TE, IRS *e-file* Signature Authorization for an Exempt Organization should be signed and dated by an authorized officer of the organization and returned as soon as possible to:

MARY IVERS, CPA 920 E ANN STREET ANN ARBOR, MI 48104

Important: Your return will not be filed with the IRS until the signed Form 8879-TE has been received by this office.

Form **8879-TE**

IRS E-file Signature Authorization for a Tax Exempt Entity

2023

For calendar year 2023, or fiscal year beginning, 2023, and ending, 20

Do not send to the IRS. Keep for your records.

Department of the Treasury Internal Revenue Service Name of filer

Go to www.irs.gov/Form8879TE for the latest information.

HARRY A. AND MARGARET D. TOWSLEY

EIN or SSN

	FOU	NDATION		38	8-6091798
Name and title of officer or person subject to tax B	REND	A SHELLENBER	GER		
T	REAS	URER			
Part I Type of Return and	Retu	rn Information			
Check the box for the return for which you	u are us	ing this Form 8879-TE ar	nd enter the applicable amo	ount, if any, from the r	return. Form
8038-CP and Form 5330 filers may enter		-		-	
3a, 4a, 5a, 6a, 7a, 8a, 9a, or 10a below, a					
3b, 4b, 5b, 6b, 7b, 8b, 9b, or 10b, which	ever is a	applicable, blank (do not e	enter -0-). But, if you entered	d -0- on the return, th	nen enter -0- on the
applicable line below. Do not complete m					
1a Form 990 check here	b	Total revenue, if any (F	Form 990, Part VIII, column	(A), line 12)	1b
2a Form 990-EZ check here	<u></u> ь		Form 990-EZ, line 9)		
3a Form 1120-POL check here	b	Total tax (Form 1120-P	OL, line 22)		3b
4a Form 990-PF check here	X b	Tax based on investm	ent income (Form 990-PF,	, Part V, line 5)	4b 46,324
5a Form 8868 check here	□ b		68, line 3c)		
6a Form 990-T check here	□ b	Total tax (Form 990-T,	Part III, line 4)		6b
7a Form 4720 check here	□ b				7b
8a Form 5227 check here	<u></u> Ь	FMV of assets at end of	of tax year (Form 5227, Ite	em D)	8b
9a Form 5330 check here	∐ ь		art II, line 19)		
10a Form 8038-CP check here	∐ b		nent requested (Form 8038		•
	natur		Officer or Person Su		
Under penalties of perjury, I declare that	X	I am an officer of the abo	ove entity or I am a	person subject to tax	x with respect to (name
of entity)			, (EIN)		e examined a copy of the
2023 electronic return and accompanying	schedu	les and statements, and,	to the best of my knowledge	ge and belief, they are	e true, correct, and
complete. I further declare that the amour					
intermediate service provider, transmitter,		• ,	•		• •
acknowledgement of receipt or reason fo	•	•		. •	
the date of any refund. If applicable, I aut		· ·			
(direct debit) entry to the financial institution					
return, and the financial institution to debi 1-888-353-4537 no later than 2 business					-
processing of the electronic payment of to			,		
the payment. I have selected a personal			·		
electronic funds withdrawal.	acrimic	ation number (i iiv) as my	signature for the electronic	Totalii alia, ii appilot	able, the consent to
PIN: check one box only					
TÝTTO C D	TCKF	LMANN, CPAS	PLLC	DIN 91'	798 my signatura
X I authorize IVERS & R		ERO firm name	to e	enter my Pin L	ive numbers, but
					enter all zeros
on the tax year 2023 electronicall	v filed r	eturn. If I have indicated v	vithin this return that a copy	of the return is being	g filed with a state
agency(ies) regulating charities as					
return's disclosure consent scree					•
As an officer or person subject to	tax with	respect to the entity. I w	vill enter my PIN as my sign	nature on the tax vear	2023 electronically
filed return. If I have indicated wit					
of the IRS Fed/State program, I v	vill ente	my PIN on the return's of	disclosure consent screen.		
Signature of officer or person subject to tax				Date	
Part III Certification and A					
ERO's EFIN/PIN. Enter your six-digit ele		•		*******	++
number (EFIN) followed by your five-digit	seit-sei	ected PIN.			
Loortify that the above pursuits artists to	W DINI	which is not signature	the 2022 electronically fired	Do not enter all zer	
I certify that the above numeric entry is mam submitting this return in accordance v					
Providers for Business Returns	nui uie	requirements of Fub. 410	, wouchized e-File (MEF)	,	
Mary Ivers,	CPA			4/29,	/2024

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

ERO's signature

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

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service

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.

Open to Public Inspection

		<u> </u>	and ending				
		foundation			A Empl	oyer identification num	ber
		Y A. AND MARGARET D. TOWSLEY					
		DATION				-6091798	
		nd street (or P.O. box number if mail is not delivered to street add	dress) Ro	oom/suite		hone number (see instru	ctions)
		N MAIN ST, STE 1 vn, state or province, country, and ZIP or foreign postal code			/34	1-660-2170	
	•	ARBOR MI 48104			C If exe	emption application is pen	ding, check here
			rn of a former public cl	harity	D 1 Fo	reign organizations, chec	k here
•	OHOUR 6	Final return Amended	•	idity			
		Address change Name cha				reign organizations meet % test, check here and a	
	211- (<u> </u>			-		· Ш
		type of organization: X Section 501(c)(3) exempt private				rate foundation status wa on 507(b)(1)(A), check he	
			e private foundation		1	() () (
		ket value of all assets at J Accounting method:	X Cash Acc	ruai		foundation is in a 60-mo section 507(b)(1)(B), ch	
	-	ear (from Part II, col. (c), Under (specify) Other (specify) (Part I, column (d), must	ha an agab bagia \		u	000 00. (5)(1)(2), 0	SSIX 11.515
	ne 16) art I						(d) Disbursements
	aiti	Analysis of Revenue and Expenses (The total of amounts in columns (b), (c), and (d) may not necessarily equal	(a) Revenue and expenses per	(b) Net invincor		(c) Adjusted net income	for charitable purposes
		the amounts in column (a) (see instructions).)	books	IIICOI	iie	income	(cash basis only)
	1	Contributions, gifts, grants, etc., received (attach schedule)					
	2	Check X if the foundation is not required to attach Sch. B					
	3	Interest on savings and temporary cash investments	213,781		13,781		
	4	Dividends and interest from securities	1,567,728	1,5	67,728		
	5a	Gross rents					
<u>a</u>	b	Net rental income or (loss)					
Š	6a	Net gain or (loss) from sale of assets not on line 10	1,638,865				
Revenue	b	Gross sales price for all assets on line 6a 12,052,330					
8	7	Capital gain net income (from Part IV, line 2)		1,6	38,865		
	8	Net short-term capital gain				0	
	9	Income modifications SEE STMT 1				500,000	
	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)	2 400 254	2.4	00 274	500 000	
	12	Total. Add lines 1 through 11	3,420,374		20,374	500,000	22 500
es	13	Compensation of officers, directors, trustees, etc.	30,000 21,000		7,500		22,500
benses	14	Other employee salaries and wages	21,000				21,000
	15	Pension plans, employee benefits					
Ж	16a	Legal fees (attach schedule) Accounting fees (attach schedule) STMT 2	2,650				2,650
é	b	Accounting fees (attach schedule) STMT 2 Other professional fees (attach schedule) STMT 3	85,798		79,798		6,000
ati	17	Internal	03,730		15,150		0,000
and Administrative	17 18	Taxes (attach schedule) (see instructions) STMT 4	16,186		396		2,300
Ξ.	19	Depreciation (attach schedule) and depletion	10/100		330		2,500
튵	20	0	12,511				12,511
ď	21	Travel, conferences, and meetings	6,395				6,395
Б	22	Printing and publications	3,020				
	23	Printing and publications Other expenses (att. sch.) STMT 5	36,253				36,253
ing	24	Total operating and administrative expenses.					
rat	1	Add lines 13 through 23	210,793		87,694	0	109,609
Operating	25	Contributions, gifts, grants paid	3,056,024				3,056,024
0	26	Total expenses and disbursements. Add lines 24 and 25	3,266,817		87,694	0	3,165,633
	27	Subtract line 26 from line 12:	-				
	а	Excess of revenue over expenses and disbursements	153,557				
	b	Net investment income (if negative, enter -0-)		3,3	32,680		
	С	Adjusted net income (if negative, enter -0-)				500,000	

	31111 330	711 (2023) IMMETER THE THEORET ST. TOTALLET			r agc z
	Part I		Beginning of year	End o	f year
	•	should be for end-of-year amounts only. (See instructions.)	(a) Book Value	(b) Book Value	(c) Fair Market Value
	1	Cash — non-interest-bearing	117,953	330,016	
	2	Savings and temporary cash investments	5,670,394	7,359,114	7,359,114
	3	Accounts receivable			
		Less: allowance for doubtful accounts			
	4	Pledges receivable			
		Less: allowance for doubtful accounts			
	5	Grants receivable			
	6	Receivables due from officers, directors, trustees, and other			
		disqualified persons (attach schedule) (see			
		instructions)			
	7	Other notes and loans receivable (att. schedule)			
	-	Less: allowance for doubtful accounts 0			
"	8	laviantarias fau asla su vas			
Assets	9	Duranid suprance and defermed shares			
ASS	10a	Investments — U.S. and state government obligations (attach schedule) STMT 6	3,909,696	4,504,586	4,557,957
_	b	Investments — corporate stock (attach schedule) SEE STMT 7	35,162,846	33,319,424	61,440,412
	C	Investments — corporate stock (attach schedule) Investments — corporate bonds (attach schedule)	3371017010	33/313/121	01/110/112
	11	Investments — land, buildings, and equipment: basis			
	40	Less: accumulated depreciation (attach sch.)			
	12	Investments — mortgage loans			
	13	Investments — other (attach schedule)			
	14	Land, buildings, and equipment: basis			
	4-	Less: accumulated depreciation (attach sch.) Other assets (describe SEE STATEMENT 8)	4 026	E 242	F 242
	15		4,036	5,342	5,342
	16	Total assets (to be completed by all filers — see the	44 064 005	45 510 400	E2 C00 041
_		instructions. Also, see page 1, item I)	44,864,925	45,518,482	73,692,841
	17	Accounts payable and accrued expenses			
"	18	Grants payable			
Liabilities	19	Deferred revenue			
Ē	20	Loans from officers, directors, trustees, and other disqualified persons			
<u>'a</u>	21	Mortgages and other notes payable (attach schedule)			
_	22	Other liabilities (describe)			
_	23	Total liabilities (add lines 17 through 22)	0	0	
		Foundations that follow FASB ASC 958, check here			
es		and complete lines 24, 25, 29, and 30.			
ang	24	Net assets without donor restrictions			
Net Assets or Fund Balanc	25	Net assets with donor restrictions			
<u>_</u>		Foundations that do not follow FASB ASC 958, check here			
ڐۣ		and complete lines 26 through 30.			
ř	26	Capital stock, trust principal, or current funds	27,880,429	27,880,429	
S	27	Paid-in or capital surplus, or land, bldg., and equipment fund			
set	28	Retained earnings, accumulated income, endowment, or other funds	16,984,496	17,638,053	
As	29	Total net assets or fund balances (see instructions)	44,864,925	45,518,482	
e	30	Total liabilities and net assets/fund balances (see			
Ž		instructions)	44,864,925	45,518,482	
	Part I	II Analysis of Changes in Net Assets or Fund Balances			
1	Total	net assets or fund balances at beginning of year — Part II, column (a), line 29 (mu	ust agree with		
	end-c	of-year figure reported on prior year's return)		1	44,864,925
2		. (D . I I' 07			153,557
3	3 Othe	r increases not included in line 2 (itemize) SEE STATEMENT 9		3	500,000
		ines 1, 2, and 3			45,518,482
		eases not included in line 2 (itemize)			
6	Total	net assets or fund balances at end of year (line 4 minus line 5) — Part II. column ((b). line 29	6	45,518,482

Form	1 990-PF (2023) HARRY A	. AND MARGARET D. 1	COWSLEY	38-6091798			Page 3
Pa	art IV Capital Gains a	nd Losses for Tax on Investm	nent Income				
	(a) List and describe the 2-story brick ware	e kind(s) of property sold (for example, real house; or common stock, 200 shs. MLC Co	estate, .)	(b) How acquired P — Purchase D — Donation		te acquired , day, yr.)	(d) Date sold (mo., day, yr.)
1a	CHARLES SCHWAB	SECURITIES		P			
b	VANGUARD MUTUAL	FUNDS		P			
С							
d							
e							
	(e) Gross sales price	(f) Depreciation allowed (or allowable)		r other basis ense of sale		(h) Gain ((e) plus (f)	'
a	7,868,496			7,696,211			172,285
b	4,183,834			2,717,254			1,466,580
C	_,,						
d							
<u>e</u>	Complete only for assets showing	g gain in column (h) and owned by the	foundation on 12/21/	(60			
<u> </u>	Complete offig for assets showing						(h) gain minus less than -0-) or
	(i) FMV as of 12/31/69	(j) Adjusted basis as of 12/31/69	1 ''	ss of col. (i) l. (j), if any	"	Losses (fro	
		as of 12/31/03	Over cor	. (j), ii aiiy			
<u>a</u>							172,285
<u>b</u>							1,466,580
<u>C</u>							
<u>d</u>							
_е							
2	Capital gain net income or (ne	t canital loce) 4 -	r in Part I, line 7				
-	Capital gain flot income of the	If (loss), enter -0-	· in Part I, line 7		2		1,638,865
3	Net short-term capital gain or (loss) as defined in sections 1222(5) and	d (6):				
	If gain, also enter in Part I, line	e 8, column (c). See instructions. If (loss	s), enter -0- in				
					3		1,638,865
Pa	art V Excise Tax Bas	ed on Investment Income (Se	ection 4940(a), 4	940(b), or 4948-	-see ir	nstruction	ıs)
1a	Exempt operating foundations	described in section 4940(d)(2), check	here and en	ter "N/A" on line 1.			
	Date of ruling or determination	letter: (attach co	py of letter if neces	sary — see instruct	ions)	1	46,324
b		enter 1.39% (0.0139) of line 27b. Exer					
		. (b)					
2		tic section 4947(a)(1) trusts and taxable				2	0
3	Add lines 1 and 2	(// /	•	, , , , , , , , , , , , , , , , , , , ,		3	46,324
4		stic section 4947(a)(1) trusts and taxable	e foundations only: o	others, enter -0-)		4	
5		come. Subtract line 4 from line 3. If zero		• • • • • • • • • • • • • • • • • • • •		5	46,324
6	Credits/Payments:	200000000000000000000000000000000000000					
а	•	and 2022 overpayment credited to 2023	ء ا	a 52	,000		
a b	Exempt foreign organizations -	toy withhold of course			,		
C		tension of time to file (Form 8868)					
_			_	d l			
d 7	Backup withholding erroneousl	dd lines 6a through 6d				7	52,000
7	Total credits and payments. At	ument of estimated to Obselv bere];; Form 2000 :			7	52,000
8		yment of estimated tax. Check here		icnea		8	
9		and 8 is more than line 7, enter amoun				9	E 676
10		e than the total of lines 5 and 8, enter th	-			10	5,676
<u>11 </u>	Enter the amount of line 10 to	be: Credited to 2024 estimated tax	5 , 67	6 Refunded	l	11	

Form **990-PF** (2023)

Pa	rt VI-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		X
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes? See the			
	instructions for the definition	1b		X
	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.			
С	Did the foundation file Form 1120-POL for this year?	1c		X
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. \$			
е	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?	2		X
	If "Yes," attach a detailed description of the activities.			
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		X
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	4a		X
b	If "Yes," has it filed a tax return on Form 990-T for this year?	4b		
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?	5		X
	If "Yes," attach the statement required by General Instruction T.			
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?	6	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 XIV	7	X	
8a	Enter the states to which the foundation reports or with which it is registered. See instructions. MT			
L				
b	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General	8b	х	
9	(or designate) of each state as required by <i>General Instruction G?</i> If "No," attach explanation Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or	OD	Λ	
9	4942(j)(5) for calendar year 2023 or the tax year beginning in 2023? See instructions for Part XIII. If "Yes,"			
	complete Part VIII	9		х
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their	-		
	names and addresses	10		х
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		х
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified			
	person had advisory privileges? If "Yes," attach statement. See instructions	12		х
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	Х	
	Website address TOWSLEYFOUNDATION.ORG			
14	The books are in care of BRENDA SHELLENBERGER Telephone no. 734-6	60-	217	0
	924 N MAIN ST STE 1			
	Located at ANN ARBOR MI ZIP+4 48104	Ŀ		
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			
16	At any time during calendar year 2023, did the foundation have an interest in or a signature or other authority		Yes	No
	over a bank, securities, or other financial account in a foreign country?	16		Х
	See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes," enter the name of			
	the foreign country			

Pa	art VI-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?	1a(1)		X
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified			
	person?	1a(2)		X
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?	1a(3)		X
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?	1a(4)	Х	
	(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)?	1a(5)		X
	(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.)	1a(6)		X
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	1b		X
С	Organizations relying on a current notice regarding disaster assistance, check here			
d	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 2023?	1d		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)):			
а	At the end of tax year 2023, did the foundation have any undistributed income (Part XIII, lines 6d and 6e) for			
	tax year(s) beginning before 2023? If "Yes," list the years	2a		X
	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)(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	2b		
С	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here.			
	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?	3a		Х
b	If "Yes," did it have excess business holdings in 2023 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 Form 4720, Schedule C, to determine if the			
	foundation had excess business holdings in 2023.) N/A	3b		
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable			
	purposes?	4a		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 2023?	4b		X

Form **990-PF** (2023)

Pa	art VI-B Statements Regarding Activities for Which Form	4720 May Be F	Required (con	tinued)			
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))?			5a(1)		X
	(2) Influence the outcome of any specific public election (see section 4955); o						
	indirectly, any voter registration drive?				5a(2)		Х
	(3) Provide a grant to an individual for travel, study, or other similar purposes)			5a(3)		Х
	(4) Provide a grant to an organization other than a charitable, etc., organization						
	(4)(A)? See instructions				5a(4)		Х
	(5) Provide for any purpose other than religious, charitable, scientific, literary,						
	the prevention of cruelty to children or animals?				5a(5)		Х
b	If any answer is "Yes" to 5a(1)–(5), did any of the transactions fail to qualify un	der the exceptions of	described				
	in Regulations section 53.4945 or in a current notice regarding disaster assista			N/A	5b		
С	Organizations relying on a current notice regarding disaster assistance, check						
d	If the answer is "Yes" to question 5a(4), does the foundation claim exemption			-			
	maintained expenditure responsibility for the grant?			N/A	5d		
	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?				6a		Х
b	Did the foundation, during the year, pay premiums, directly or indirectly, on a	personal benefit cont	ract?		6b		X
	If "Yes" to 6b, file Form 8870.						
7a	At any time during the tax year, was the foundation a party to a prohibited tax	shelter transaction?			7a		X
b	If "Yes," did the foundation receive any proceeds or have any net income attril				7b		
8	Is the foundation subject to the section 4960 tax on payment(s) of more than S	31,000,000 in remune	eration or				
	excess parachute payment(s) during the year?				8		X
Pa	art VII Information About Officers, Directors, Trustees, F	oundation Mana	agers, Highly	Paid Employ	ees,	and	
	Contractors						
1	List all officers, directors, trustees, and foundation managers and their co	mpensation. See in	structions.	T	_		
	(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		opense a er allowa	
SI	GE STATEMENT 10						
2	Compensation of five highest-paid employees (other than those included "NONE."	on line 1 — see in	structions). If no	ne, enter			
	<u>- </u>	(1) T''		(d) Contributions to			
	(a) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week devoted to position	(c) Compensation	employee benefit plans and deferred compensation		pense a er allowa	
. NO	ONE						
Tota	Il number of other employees paid over \$50,000		l .	l .	+		0
. 5.0					1		

Part VIII-B Summary of Program-Related Investments (see instructions)	
Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2.	Amount
1 N/A	
,	
2	
-	
,	
All of an analysis of Secretary to One Section Sec	
All other program-related investments. See instructions.	
3	
,	
Total. Add lines 1 through 3	

Minimum Investment Return (All domestic foundations must complete this part. Foreign foundations, see instructions.) Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes: Average monthly fair market value of securities 64,470,734 1a а 7,089,703 Average of monthly cash balances 1b С Fair market value of all other assets (see instructions) 1c 71,560,437 1d Total (add lines 1a, b, and c) Reduction claimed for blockage or other factors reported on lines 1a and 1c (attach detailed explanation) Acquisition indebtedness applicable to line 1 assets 2 2 71,560,437 Subtract line 2 from line 1d 3 Cash deemed held for charitable activities. Enter 1.5% (0.015) of line 3 (for greater amount, see 1,073,407 70,487,030 5 5 Net value of noncharitable-use assets. Subtract line 4 from line 3 3,524,352 Minimum investment return. Enter 5% (0.05) of line 5. Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations Part X and certain foreign organizations, check here | and do not complete this part.) 3,524,352 Minimum investment return from Part IX, line 6 46,324 2a Tax on investment income for 2022 from Part V, line 5 Add lines 2a and 2b 2c 46,324 С Distributable amount before adjustments. Subtract line 2c from line 1 3,478,028 3 3 Recoveries of amounts treated as qualifying distributions 500,000 4 4 3,978,028 5 Add lines 3 and 4 5 Deduction from distributable amount (see instructions) 6 6 3,978,028 7 Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XII, line 1 Part XI Qualifying Distributions (see instructions) 1 Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes: Expenses, contributions, gifts, etc. — total from Part I, column (d), line 26 1a 3,165,633 Program-related investments — total from Part VIII-B b 1b Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., 2 2 Amounts set aside for specific charitable projects that satisfy the: Suitability test (prior IRS approval required) 3a Cash distribution test (attach the required schedule) 3b 3,165,633 Qualifying distributions. Add lines 1a through 3b. Enter here and on Part XII, line 4

Form **990-PF** (2023)

Part XII **Undistributed Income** (see instructions) (a) (b) (c) (d) Corpus Years prior to 2022 2022 2023 3,978,028 Distributable amount for 2023 from Part X, line 7 Undistributed income, if any, as of the end of 2023: a Enter amount for 2022 only 2,498,392 **b** Total for prior years: 20 ____ , 20 ____ , 20 ____ Excess distributions carryover, if any, to 2023: **a** From 2018 **b** From 2019 **c** From 2020 **d** From 2021 **e** From 2022 f Total of lines 3a through e Qualifying distributions for 2023 from Part XI, line 4: \$ 3,165,633 2,498,392 a Applied to 2022, 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 2023 distributable amount 667,241 e Remaining amount distributed out of corpus Excess distributions carryover applied to 2023 (If an amount appears in column (d), the same amount must be shown in column (a).) Enter the net total of each column as indicated below: a Corpus. Add lines 3f, 4c, and 4e. Subtract line 5 **b** Prior years' undistributed income. Subtract line 4b from line 2b c Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed d Subtract line 6c from line 6b. Taxable amount — see instructions e Undistributed income for 2022. Subtract line 4a from line 2a. Taxable amount - see instructions f Undistributed income for 2023. Subtract lines 4d and 5 from line 1. This amount must be distributed in 2024 3,310,787 Amounts treated as distributions out of corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3) (Election may be required — see instructions) 8 Excess distributions carryover from 2018 not applied on line 5 or line 7 (see instructions) 9 Excess distributions carryover to 2024. Subtract lines 7 and 8 from line 6a 10 Analysis of line 9: Excess from 2019 Excess from 2020 Excess from 2021 Excess from 2022 Excess from 2023

Pa	rt XIII Private Operating Fo	undations (see in	structions and Par	t VI-A, question 9)	
1a	If the foundation has received a ruling or	determination letter th	at it is a private opera	ting		
	foundation, and the ruling is effective for	2023, enter the date o	of the ruling			
b	Check box to indicate whether the found				942(j)(3) or 494:	2(j)(5)
2a	Enter the lesser of the adjusted net	Tax year		Prior 3 years		(a) Total
	income from Part I or the minimum	(a) 2023	(b) 2022	(c) 2021	(d) 2020	(e) Total
	investment return from Part IX for					
	each year listed					
b	85% (0.85) of line 2a					
С	Qualifying distributions from Part XI,					
	line 4, for each year listed					
d	Amounts included in line 2c not used directly					
	for active conduct of exempt activities					
е	Qualifying distributions made directly					
	for active conduct of exempt activities.					
	Subtract line 2d from line 2c					
3	Complete 3a, b, or c for the					
	alternative test relied upon:					
а	"Assets" alternative test — enter:					
	(1) Value of all assets					
	(2) Value of assets qualifying under					
	section 4942(j)(3)(B)(i)					
b	"Endowment" alternative test — enter 2/3	3				
	of minimum investment return shown in					
	Part IX, line 6, for each year listed					
С	"Support" alternative test — enter:					
	(1) Total support other than gross					
	investment income (interest,					
	dividends, rents, payments on					
	securities loans (section					
	512(a)(5)), or royalties)					
	(2) Support from general public and 5 or more exempt					
	organizations as provided in					
	section 4942(j)(3)(B)(iii)					
	(3) Largest amount of support from					
	an exempt organization					
	(4) Gross investment income					
Pa	rt XIV Supplementary Inforn	nation (Complete	this part only if t	the foundation ha	d \$5,000 or more	in assets at
	any time during the y	ear — see instru	ctions.)			
1	Information Regarding Foundation Ma	anagers:				
а	List any managers of the foundation who	have contributed more	e than 2% of the total	contributions received	by the foundation	
	before the close of any tax year (but only	y if they have contribut	ed more than \$5,000).	(See section 507(d)(2)).)	
	N/A					
b	List any managers of the foundation			. ,	equally large portion	of the
	ownership of a partnership or other entity) of which the foundati	ion has a 10% or grea	iter interest.		
	N/A	Swamt Cift Laan Sah	alarahin ata Dragr			
2	Information Regarding Contribution, C				and not accept	
				ole organizations and d		
	unsolicited requests for funds. If the four		ants, etc., to individual	s or organizations und	er other conditions,	
	complete items 2a, b, c, and d. See inst		f the person to whom	applications should be	addragad:	
а	The name, address, and telephone number ANNE COOPER 734-660		i tile person to whom	applications should be	auuresseu.	
	924 N MAIN ST., SUIT		BOR MT 4810	4		
h	The form in which applications should be					
b	SEE STATEMENT 11	, submitted and initofffi	ialion and maltildis th	by Silibula IIIbilade.		
С	Any submission deadlines:					
-	SEE STATEMENT 12					
d	Any restrictions or limitations on awards,	such as by geographi	ical areas, charitable fi	elds, kinds of institution	ns, or other	
	factors:					
	SEE STATEMENT 13					

Part XIV Supplementary Information (continued)

Part XIV Supplementary Information (c					
3 Grants and Contributions Paid During	the Year or Approved fo	r Futu	ure Payment		
Recipient	If recipient is an individual, show any relationship to any foundation manager		Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	or substantial contributor		recipient		
a Paid during the year ALS OF MICHIGAN 24359 NW HWY SOUTHFIELD MI 48075	NONE	PC	PROGRAM	I SUPPORT	10,000
AMERICAN BIRD CONSERVANCY PO BOX 249 THE PLAINS VA 20198	NONE	PC	PROGRAM	I SUPPORT	117,000
AMERICAN CANCER SOCIETY PO BOX 6704 HAGERSTOWN MD 21741	NONE	PC	PROGRAM	I SUPPORT	2,500
ANN ARBOR ART CENTER 117 W LIBERTY ANN ARBOR MI 48104	NONE	PC	PROGRAM	I SUPPORT	7,500
ARBOR HOSPICE FOUNDATION 2366 OAK VALLEY DR ANN ARBOR MI 48103	NONE	PC	PROGRAM	I SUPPORT	30,000
ARCHANGEL ANCIENT TREE ARC 16880 FRONT ST COPEMISH MI 49625	HIVE NONE	PC	PROGRAM	I SUPPORT	10,000
ARTRAIN 1100 N MAIN ST ANN ARBOR MI 48104	NONE	PC	PROGRAM	I SUPPORT	5,000
AVALON HOUSING 1327 JONES DR ANN ARBOR MI 48105	NONE	PC	PROGRAM	1 SUPPORT	25,000
BALLET CHELSEA 1050 S MAIN ST CHELSEA MI 48118	NONE	PC	PROGRAM	I SUPPORT	3,000
BATTLE CREEK SYMPHONY ORCH 450 NORTH AVE BATTLE CREEK MI 49017	ESTRA NONE	PC	PROGRAM	I SUPPORT	5,000 3,056,024
b Approved for future payment WOMEN'S RESOURCE CENTER NO. 423 PORTER ST PETOSKEY MI 49770	RTHERN MI NONE	PC	PROGRAM	i support	25,000
Total				0.	2E 000
Total				3b	25,000

F	Part XV-A	Analy	sis of	Income-F	Producing Act	ivities				
Ent	ter gross amo					I	ed business income	Excluded	d by section 512, 513, or 514	
						(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	(e) Related or exempt function income (See instructions.)
1	Program ser							+		,
	a							1		
	'				-			1		
	d							1		
	е							-		
	f							-		
					ncies					
2	Membership	dues and as	sessmer	nts				-		
					tments			14	213,781	
								14	1,567,728	
5	Net rental ind									
	a Debt-fina	inced proper	ty							
	b Not debt	t-financed pro	perty							
	Net rental ind	come or (loss	s) from p	ersonal prop	erty					
7	Other investr	ment income								
8	Gain or (loss	s) from sales	of assets	s other than	inventory			18	1,638,865	
9	Net income of	or (loss) from	special	events						
10	Gross profit	or (loss) from	sales of	f inventory .						
11	Other revenu	ле: а								
	с									
	d									
	е									
	Subtotal Add	d columns (b)). (d). an	d (e)			C		3,420,374	0
12	Oubtotal. Aut		,, (~), ~							
12 13	Total. Add li	ne 12, colum	ns (b), (c	d), and (e)					13	3,420,374
13	Total. Add linee worksheet i	ne 12, colum	ns (b), (c	d), and (e)					13	3,420,374
13 (S∈	Total. Add li	ne 12, colum in line 13 ins	ns (b), (c tructions	l), and (e) to verify cal	culations.)		ent of Exempt P			3,420,374
13 (Se	Total. Add li	ne 12, colum in line 13 ins Relati	ns (b), (c tructions onship	to verify cal	culations.)	complishm	ent of Exempt P	urpose		
13 (Se	Total. Add live worksheet in Part XV-B	ne 12, colum in line 13 ins Relati Explain belo	ns (b), (constitutions on the constitutions on the constitutions on the constitution of the constitution on the constitution of the constitution o	d), and (e) to verify cal of Active each activity	culations.) ities to the Action of the forwhich income	complishm	ent of Exempt P	Purpose -A contrib	es outed importantly to the	
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-01111 99t					MGAKEI D						<u>e 13</u>
Part 2			_	arding Tra	insfers To an	d Transactio	ns and Relationships	With Noncharitat	le Ex	empt	
1 Dic		Organiza		rectly engag	e in any of the fol	lowing with any	other organization described			Yes	No
			-		organizations) or i	-				103	140
	anization		triair occite	11 001(0)(0)	organizations) or r	11 3000011 027, 10	nating to political				
-			rting found	ation to a no	oncharitable exemp	ot organization o	f·				
	Cash		-			_			1a(1)		x
									1a(2)		<u></u>
	ner trans								ru(z)		
			noncharit	able exempt	organization				1b(1)		x
									1b(2)		<u> </u>
(3)	Rental o	of facilities	equinment	or other ass	ents				1b(3)		<u>x</u>
(4)	Reimbu	sement arr	angements						1b(4)		X
(5)	Loans o	r loan guara							1b(5)		X
				embership o	r fundraising solici	4-4:			1b(6)		X
					ther assets, or pai				1c		X
	•		•	•			mn (b) should always show th				
		-					the foundation received less t				
		-		_		-	the goods, other assets, or se				
(a) Li		(b) Amoun			e of noncharitable exem			s, transactions, and sharing a	arrangeme	nts	
N/A		, ,		.,							
22 lc t	ho found	ation directly	, or indirec	tly affiliated y	with or related to	one or more to	r-exempt organizations				
			•	•	501(c)(3)) or in se		r-exempt organizations		□ v _i	s X	No
		nplete the fo			301(0)(3)) 01 111 30	CHOIT 527 :			⊔ ''	,5 [21	140
D II		n) Name of orga		ileuule.	(b) Type of o	organization	(c) De	scription of relationship			
N/2		y Hame or orge	anzanon		(b) Type of C	ngamzation	(0) 50	on phone of relationship			
14/2	-										
Т	Under per	alties of perjury	/, I declare that	at I have examin	ned this return, including	accompanying sche	I edules and statements, and to the best	of my knowledge and belie	i, it is true) ,	
							which preparer has any knowledge.	May the IRS dis			
Sign								with the prepare			_
_								See instructions	. X	Yes	No
Here						I	TREASURI	 PD		_	
	Signaturo	of officer or trus	too			 Date	Title	SK.		_	
	T					I	**	1_		r	
	Print/Typ	oe preparer's na	ame			Preparer's signatu		Date	124	Check	if
Paid	MADY	TVEDC	CDA			Mary IV	vers, CPA	4/29	/24	⊹lf-emp I	oloyed
Preparer		IVERS,		c DTC	יוע ביד ארא איאי	CPAS PL	T C		***	***	
Jse Only			IVERS	& RIC X 189	CKELMANN,	CFAD PL	ЦС	PTIN	-363		
	Firm's a	address			19120			72/	1-90		
	1		PEXIL	R, MI	48130			Phone no. /34	ェータリ	±-0-	レフム

Phone no.

Supplementary Information (continued) 3 Grants and Contributions Paid During the Year or Approved for Future Payment If recipient is an individual, Recipient Purpose of grant or show any relationship to status of **Amount** any foundation manager contribution recipient Name and address (home or business) or substantial contributor Paid during the year BEYOND 26 3040 IVANREST AVE SW NONE PC GRANDVILLE MI 49418 PROGRAM SUPPORT 15,000 BIG BROTHERS BIG SISTERS WASHTENAW 11 W MICHIGAN AVE NONE PC YPSILANTI MI 48197 PROGRAM SUPPORT 7,500 BISHOP'S SCHOOL PC 7607 LAJOLLA BLVD NONE LA JOLLA CA 92037 PROGRAM SUPPORT 2,500 BRASS BAND OF BATTLE CREEK PC PO BOX 556 NONE MARSHALL MI 49068 PROGRAM SUPPORT 5,000 BULLOCK CREEK SCHOOL DISTRICT 1420 S BADOUR RD NONE PC MIDLAND MI 48640 PROGRAM SUPPORT 10,000 CANCER SERVICES OF MIDLAND 400 ASHMUN ST NONE PC MIDLAND MI 48640 PROGRAM SUPPORT 1,000 CHILDRENS LITERACY NETWORK 1100 N MAIN ST NONE PC ANN ARBOR MI 48104 PROGRAM SUPPORT 1,000 CHIPPEWA NATURE CENTER 400 S BADOUR RD NONE PC MIDLAND MI 48640 PROGRAM SUPPORT 40,000 COMMUNITIES FIRST PC 415 W COURT ST NONE **FLINT MI 48503** PROGRAM SUPPORT 50,000 COMMUNITY CATALYSTS DEVELOPMENT CO 422 E GRAND RIVER NONE PC HOWELL MI 48843 SUPPORT PROGRAM 32,125 Total За **b** Approved for future payment N/A

3b

Total

Supplementary Information (continued) 3 Grants and Contributions Paid During the Year or Approved for Future Payment If recipient is an individual, Recipient Purpose of grant or show any relationship to status of **Amount** any foundation manager contribution recipient Name and address (home or business) or substantial contributor Paid during the year CONSERVATION RESOURCE ALLIANCE 10850 TRAVERSE HWY NONE PC TRAVERSE CITY MI 49684 PROGRAM SUPPORT 50,000 CORNER HEALTH CENTER 47 N HURON NONE PC YPSILANTI MI 48197 PROGRAM SUPPORT 52,500 DETROIT HORSE POWER PC 8425 MCNICHOLS NONE DETROIT MI 48221 PROGRAM SUPPORT 25,000 DIXBORO VILLAGE GREEN PC 5221 CHURCH RD NONE ANN ARBOR MI 48105 PROGRAM SUPPORT 1,000 DUNN SCHOOL 2555 W HWY CA-154 NONE PC LOS OLIVOS CA 93441 PROGRAM SUPPORT 2,000 EAGLE VILLAGE NONE 5407 170TH AVE PC HERSEY MI 49639 PROGRAM SUPPORT 50,000 ELE'S PLACE ANN ARBOR 5665 HINES DR NONE PC ANN ARBOR MI 48108 PROGRAM SUPPORT 2,500 ELEVATE COMMUNITY MINISTRIES 1550 S POSEYVILLE NONE PC MIDLAND MI 48640 PROGRAM SUPPORT 1,000 FAMILY AND CHILDRENS SERVICES OF MI PO BOX 2877 PC NONE MIDLAND MI 48641 PROGRAM SUPPORT 25,000 FIRST DAY SHOE FUND 5416 MEREDITH NONE PC PORTAGE MI 49002 PROGRAM SUPPORT 15,000 Total За **b** Approved for future payment N/A

3b

Total

Supplementary Information (continued) 3 Grants and Contributions Paid During the Year or Approved for Future Payment If recipient is an individual, Recipient Purpose of grant or show any relationship to status of **Amount** any foundation manager contribution recipient Name and address (home or business) or substantial contributor Paid during the year FOOD BANK OF EASTERN MICHIGAN 2300 LAPEER RD NONE PC **FLINT MI 48503** PROGRAM SUPPORT 50,000 FOOD GATHERERS 1 CARROT WAY NONE PC ANN ARBOR MI 48105 PROGRAM SUPPORT 30,000 FREEDOM RIVER PC 9305 HURON RAPIDS DR NONE WHITMORE LAKE MI 48189 PROGRAM SUPPORT 100,000 GLADWIN COMMUNITY SERVICES PC 215 S ANTLER ST NONE GLADWIN MI 48624 PROGRAM SUPPORT 20,000 GLEN ARBOR ARTS CENTER 6031 S LAKE ST PC NONE GLEN ARBOR MI 49636 PROGRAM SUPPORT 5,000 GRAND TRAVERSE REGIONAL LAND CONSER PC 3860 N LONG LAKE RD NONE TRAVERSE CITY MI 49686 PROGRAM SUPPORT 50,000 GREAT LAKES BOAT BUILDING SCHOOL 485 S MERIDIAN NONE PC CEDARVILLE MI 49719 PROGRAM SUPPORT 50,000 GREAT LAKES PERFORMING ARTS ASSOC PO BOX 2721 NONE PC ANN ARBOR MI 48106 PROGRAM SUPPORT 2,500 GREAT LAKES RECOVERY CENTERS PC 97 S FOURTH ST NONE ISHPEMING MI 49849 PROGRAM SUPPORT 25,000 GROW BENZIE 5885 FRANKFORT HWY NONE PC BENZIE MI 49616 SUPPORT PROGRAM 10,000 **Total** За **b** Approved for future payment N/A 3b **Total**

Form 990-PF (2023) HARRY A. AND MARGARET D. TOWSLEY 38-6091798 Page **11** Supplementary Information (continued) 3 Grants and Contributions Paid During the Year or Approved for Future Payment If recipient is an individual, Recipient Purpose of grant or show any relationship to status of **Amount** any foundation manager contribution recipient Name and address (home or business) or substantial contributor Paid during the year HOME TO STAY 205 S SAGINAW ST NONE PC MIDLAND MI 48640 PROGRAM SUPPORT 1,000 HOPE CLINIC PO BOX 980311 NONE PC YPSILANTI MI 48198 PROGRAM SUPPORT 64,000 HURON RIVER WATERSHED COUNCIL PC 1100 N MAIN ST NONE ANN ARBOR MI 48104 PROGRAM SUPPORT 7,500 HURON WATERLOO PATHWAYS INITIATIVE PC 201 E LIBERTY NONE ANN ARBOR MI 48104 PROGRAM SUPPORT 10,000 INTERLOCHEN CENTER FOR THE ARTS PO BOX 199 PC NONE INTERLOCHEN MI 49643 PROGRAM SUPPORT 52,000 JUBILEE MINISTRIES PC 96 W 15TH ST NONE HOLLAND MI 49423 PROGRAM SUPPORT 10,000 JUNIOR ACHIEVEMENT OF SE MICHIGAN 577 E LARNED NONE PC DETROIT MI 48226 PROGRAM SUPPORT 25,000 KALAMAZOO NATURE CENTER 7000 N WESTNEDGE AVE NONE PC KALAMAZOO MI 49009 PROGRAM SUPPORT 3,400 LACASA CENTER PC 2895 W GRAND RIVER AVE NONE HOWELL MI 48843 PROGRAM SUPPORT 100,000 LOA SCHOLARSHIP FUND PO BOX 96 NONE PC TEASDALE UT 84773 PROGRAM SUPPORT 25,000 Total За **b** Approved for future payment N/A

3b

Total

Supplementary Information (continued) 3 Grants and Contributions Paid During the Year or Approved for Future Payment If recipient is an individual, Recipient Purpose of grant or show any relationship to status of **Amount** any foundation manager contribution recipient Name and address (home or business) or substantial contributor Paid during the year M.A.D.E. INSTITUTE PO BOX 310246 NONE PC FLINT MI 48531 PROGRAM SUPPORT 40,000 MANY HANDS (HOME GROWN COMM) 1032 LOUISE ST NONE PC YPSILANTI MI 48197 PROGRAM SUPPORT 50,000 MASSACHUSETTS GENERAL HOSPITAL PC 125 NASHUA NONE BOSTON MA 02114 PROGRAM SUPPORT 2,000 MICHIANA FAMILY CENTER PO BOX 398 PC NONE EDWARDSBURG MI 49112 PROGRAM SUPPORT 10,000 MICHIGAN INTERFAITH POWER & LIGHT 1950 TRUMBULL PC NONE DETROIT MI 48216 PROGRAM SUPPORT 8,000 MICHIGAN LEAGUE OF CONSERVATION VOT PC 340 BEAKES ST NONE ANN ARBOR MI 48104 PROGRAM SUPPORT 8,000 MICHIGAN THEATER FOUNDATION 603 E LIBERTY NONE PC ANN ARBOR MI 48104 PROGRAM SUPPORT 40,000 MIDLAND AREA COMMUNITY FDN 76 ASHMUN CIR NONE PC MIDLAND MI 48640 PROGRAM SUPPORT 1,500 MIDLAND CENTER FOR THE ARTS PC 1801 W ST ANDREWS NONE MIDLAND MI 48640 PROGRAM SUPPORT 127,500 MUNSON HEALTHCARE FOUNDATION PC 1150 MEDICAL CAMPUS DR NONE TRAVERSE CITY MI 49684 SUPPORT PROGRAM 50,000 Total За **b** Approved for future payment N/A 3b **Total**

Supplementary Information (continued) 3 Grants and Contributions Paid During the Year or Approved for Future Payment If recipient is an individual, Recipient Purpose of grant or show any relationship to status of **Amount** any foundation manager contribution recipient Name and address (home or business) or substantial contributor Paid during the year MUSKEGON RESCUE MISSION 2735 E APPLE AVE NONE PC MUSKEGON MI 49442 PROGRAM SUPPORT 20,000 NATIONAL MUSEUM OF TUSKEGEE AIRMEN 11499 CONNER NONE PC DETROIT MI 48213 PROGRAM SUPPORT 5,000 NATIONAL WIDLIFE FEDERATION PC 213 W LIBERTY NONE ANN ARBOR MI 48104 PROGRAM SUPPORT 1,500 NATURE CONSERVANCY MICHIGAN PC 101 E GRAND RIVER NONE LANSING MI 48906 PROGRAM SUPPORT 150,000 NORTHWESTERN MICHIGAN COLLEGE 1701 E FRONT ST NONE PC TRAVERSE CITY MI 49868 PROGRAM SUPPORT 50,000 PACKARD HEALTH PC 5200 VENTURE DR NONE ANN ARBOR MI 48108 PROGRAM SUPPORT 25,000 PEOPLE HELPING PEOPLE OF SANTA YNEZ PO BOX 1478 NONE PC SOLVANG CA 93464 PROGRAM SUPPORT 10,000 PLANNED PARENTHOOD OF MICHIGAN PO BOX 3673 NONE PC ANN ARBOR MI 48106 PROGRAM SUPPORT 20,500 POPE FRANCIS CENTER PC 438 ST ANTOINE ST NONE DETROIT MI 48226 PROGRAM SUPPORT 16,666 RAINBOW CONNECTION 621 W UNIVERSITY NONE PC ROCHESTER MI 48307 SUPPORT PROGRAM 5,000 Total За **b** Approved for future payment N/A 3b **Total**

Supplementary Information (continued) 3 Grants and Contributions Paid During the Year or Approved for Future Payment If recipient is an individual, Recipient Purpose of grant or show any relationship to status of **Amount** any foundation manager contribution recipient Name and address (home or business) or substantial contributor Paid during the year RIVERSIDE ARTS CENTER 76 N HURON ST NONE PC YPSILANTI MI 48197 PROGRAM SUPPORT 20,000 SAGINAW VALLEY STATE UNIVERSITY 7400 BAY RD NONE PC UNIVERSITY CENTER MI 4871 PROGRAM SUPPORT 1,000 SALINE AREA SOCIAL SERVICES PC 224 W MICHIGAN AVE NONE SALINE MI 48176 PROGRAM SUPPORT 25,000 SHELTER ASSOCIATION OF WASHTENAW PC 312 W HURON NONE ANN ARBOR MI 48103 PROGRAM SUPPORT 1,500 SHIAWASSEE ARTS CENTER 206 CURWOOD CASTLE DR PC NONE OWOSSO MI 48867 PROGRAM SUPPORT 8,333 SOLDIER STRONG NONE 1127 HIGH RIDGE RD PC STAMFORD CT 06905 PROGRAM SUPPORT 7,500 SPECTRUM HEALTH FOUNDATION 100 MICHIGAN ST NE NONE PC GRAND RAPIDS MI 49503 PROGRAM SUPPORT 25,000 SPRING ARBOR UNIVERSITY 106 E MAIN ST NONE PC SPRING ARBOR MI 49283 PROGRAM SUPPORT 30,000 STARR COMMONWEALTH SCHOOLS 13725 STARR COMMONWEALTH PC NONE ALBION MI 49224 PROGRAM SUPPORT 25,000 TORCH CONSERVATION CENTER PO BOX 1142 NONE PC BELLAIRE MI 49615 SUPPORT PROGRAM 10,000 Total За **b** Approved for future payment N/A

3b

Total

Form 990-PF (2023) HARRY A. AND MARGARET D. TOWSLEY 38-6091798 Supplementary Information (continued) 3 Grants and Contributions Paid During the Year or Approved for Future Payment If recipient is an individual, Recipient Purpose of grant or show any relationship to status of **Amount** any foundation manager contribution recipient Name and address (home or business) or substantial contributor Paid during the year TREEHOUSE PROJECT 820 N RIVER ST NONE PC PORTLAND OR 97227 PROGRAM SUPPORT 5,000 TREVOR PROJECT PO BOX 69232 NONE PC WEST HOLLYWOOD CA 90069 PROGRAM SUPPORT 15,000 UM CLEMENTS LIBRARY PC 909 S UNIVERSITY NONE ANN ARBOR MI 48109 PROGRAM SUPPORT 52,500 UM DEPT OF MUSICAL THEATRE PC 2005 BAITS DR NONE ANN ARBOR MI 48109 PROGRAM SUPPORT 1,500 UM FORD SCHOOL OF PUBLIC POLICY 3003 S STATE ST PC NONE ANN ARBOR MI 48109 PROGRAM SUPPORT 150,000 UM KELLOGG EYE CENTER 1000 WALL ST NONE PC ANN ARBOR MI 48105 PROGRAM SUPPORT 200,000 UM SCHOOL OF EDUCATION 610 E UNIVERSITY NONE PC ANN ARBOR MI 48109 PROGRAM SUPPORT 200,000 UM SCHOOL OF MUSIC 1100 BAITS DR NONE PC ANN ARBOR MI 48109 PROGRAM SUPPORT 150,000 UM SCHOOL OF NURSING PC 400 N INGALLS NONE ANN ARBOR MI 48109 PROGRAM SUPPORT 107,500 UNITED WAY OF SOUTHEASTERN **MICHIGAN** 2305 PLATT RD NONE PC ANN ARBOR MI 48104 SUPPORT PROGRAM 1,500 **Total** За **b** Approved for future payment N/A

3b

Total

Supplementary Information (continued) 3 Grants and Contributions Paid During the Year or Approved for Future Payment If recipient is an individual, Recipient Purpose of grant or show any relationship to status of **Amount** any foundation manager contribution recipient Name and address (home or business) or substantial contributor Paid during the year UNITED WAY OF WASHTENAW COUNTY 2305 PLATT RD NONE PC ANN ARBOR MI 48104 PROGRAM SUPPORT 3,000 WE SHALL READ 34695 RAMBLE HILLS DR NONE PC FARMINGTON HILLS MI 48331 PROGRAM SUPPORT 30,000 WGTE PUBLIC MEDIA PC PO BOX 30 NONE TOLEDO OH 43614 PROGRAM SUPPORT 2,500 WOMEN'S CENTER OF SE MICHIGAN PC 1100 VICTORS WAY NONE ANN ARBOR MI 48108 PROGRAM SUPPORT 10,000 WOMEN'S RESOURCE CENTER GRAND TRAVE 720 S IMWOOD NONE PC TRAVERSE CITY MI 49684 PROGRAM SUPPORT 10,000 YPSILANTI DISTRICT LIBRARY NONE PC 5577 WHITTAKER RD YPSILANTI MI 48197 PROGRAM SUPPORT 80,000 3a **Total** Approved for future payment N/A 3b Total

38-6091798 Federal Statements

FYE: 12/31/2023

Statement 1 - Form 990-PF, Part I, Line 9 - Income Modifications

Description							Amount			
ALBION	COLLEGE	PRIOR	YEAR	GRANT	RETURNED	\$	50	0,000		
T	CIATC					\$_	50	0,000		

38-6091798

Federal Statements

FYE: 12/31/2023

Description	<u></u>	Total	Net stment	 usted Net	C f	haritable ^P urpose
MARY IVERS CPA TAX PREP	\$	2,650	\$	\$	\$	2,650
TOTAL	\$	2,650	\$ 0	\$ 0	\$	2,650

Statement 3 - Form 990-PF, Part I, Line 16c - Other Professional Fees

Description	 Total	ln	Net vestment	Adjust Net		naritable Turpose
CHARLES SCHWAB INV MGMT FEES	\$ 50,520	\$	50,520	\$		\$
COLUMBIA ASSET INV MGMT FEES	15,000		15,000			
BENNETT & ASSOCIATES CPAS AUDIT	12,000		6,000			6,000
HUNTINGTON BANK INV MGMT FEES	 8,278		8,278			
TOTAL	\$ 85,798	\$	79,798	\$	0	\$ 6,000

Statement 4 - Form 990-PF, Part I, Line 18 - Taxes

Description	 Total	Inv	Net estment	,	usted Net	haritable Purpose
FEDERAL EXCISE TAX	\$ 13,490	\$	206	\$		\$ 2 200
PAYROLL TAXES	 2,696		396			 2,300
TOTAL	\$ 16,186	\$	396	\$	0	\$ 2,300

Statement 5 - Form 990-PF, Part I, Line 23 - Other Expenses

Description	Total	Net Investment	Adjusted Net	Charitable Purpose
EXPENSES	\$	\$	\$	\$
INSURANCE EXPENSE COMPUTER EXPENSE	9,768 15,046			9,768 15,046

38-6091798

Federal Statements

FYE: 12/31/2023

Statement 5 - Form 990-PF, Part I, Line 23 - Other Expenses (continued)

Description	_	Total	Net Investmer	<u></u>	Adjusted Net	haritable Purpose
OFFICE EXPENSE	\$	1,370	\$	\$		\$ 1,370
DUES		9,601				9,601
BANK SERVICE CHARGES		370				370
POSTAGE		168				168
TELEPHONE		688				688
MISCELLANEOUS		139				139
PRINTING & REPRO		-897				 -897
TOTAL	\$	36,253	\$	0 \$	0	\$ 36,253

Statement 6 - Form 990-PF, Part II, Line 10a - US and State Government Investments

Description	Beginning of Year	End of Year	Basis of Valuation	Fair Market Value
US TREASURY SECURITIES	\$ 3,909,696	\$ 4,504,586	COST	\$ 4,557,957
TOTAL	\$ 3,909,696	\$ 4,504,586		\$ 4,557,957

Statement 7 - Form 990-PF, Part II, Line 10b - Corporate Stock Investments

Description	Beginning of Year	End of Year	Basis of Valuation	Fair Market Value
PUBLICLY TRADED SECURITIES	\$ 35,162,846	\$ 33,319,424	COST	\$ 61,440,412
TOTAL	\$ 35,162,846	\$ 33,319,424		\$ 61,440,412

38-6091798

Federal Statements

FYE: 12/31/2023

Statement 8 - Form 990-PF, Part II, Line 15 - Other Assets

Description	seginning of Year	 End of Year		Fair Market Value
VANGUARD DIVIDEND IN TRANSIT OFFICE SECURITY DEPOSIT	\$ 3,236 800	\$ 4,542 800	\$	4,542 800
TOTAL	\$ 4,036	\$ 5,342	\$_	5,342

Statement 9 - Form 990-PF, Part III, Line 3 - Other Increases

Description	Amount				
PRIOR GRANT RETURNED	\$	500,000			
TOTAL	\$	500,000			

38-6091798 Federal Statements

FYE: 12/31/2023

Statement 10 - Form 990-PF, Part VII, Line 1 - List of Officers, Directors, Trustees, Etc.

Name and Address	Title	Average Hours	Compensation	Benefits	Expenses
JUDITH D. RUMELHART 924 N MAIN ST STE 1 ANN ARBOR MI 48104	VICE PRES	1.00	0	0	0
JENNIFER POTEAT 924 N MAIN ST STE 1 ANN ARBOR MI 48104	TRUSTEE	1.00	0	0	0
DAVID WINSTON INGLISH 924 N MAIN ST STE 1 ANN ARBOR MI 48104	PRESIDENT	5.00	0	0	0
DOUGLAS INGLISH 924 N MAIN ST STE 1 ANN ARBOR MI 48104	TRUSTEE	1.00	0	0	0
TINA S. VAN DAM 924 N MAIN ST STE 1 ANN ARBOR MI 48104	TRUSTEE	2.00	0	0	0
C WENDELL DUNBAR 924 N MAIN ST STE 1 ANN ARBOR MI 48104	SECRETARY	5.00	0	0	0
LYNN T. WHITE 924 N MAIN ST STE 1 ANN ARBOR MI 48104	CHAIRPERSON	1.00	0	0	0
HEATHER KOCH 924 N MAIN ST STE 1 ANN ARBOR MI 48104	TRUSTEE	1.00	0	0	0
STEPHANIE SCHEETS 924 N MAIN ST STE 1 ANN ARBOR MI 48104	TRUSTEE	1.00	0	0	0
BRENDA SHELLENBERGER	TREASURER	10.00	30,000	0	0

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38-6091798 Federal Statements

FYE: 12/31/2023

Statement 10 - Form 990-PF, Part VII, Line 1 - List of Officers, Directors, Trustees, Etc. (continued)

Name and Address	Title	AverageTitle Hours_		Benefits	Expenses	
924 N MAIN ST STE 1 ANN ARBOR MI 48104						
SARAH THOMPSON 924 N MAIN ST STE 1 ANN ARBOR MI 48104	ASSOC. TRUST	1.00	0	0	0	

38-6091798

FYE: 12/31/2023

Federal Statements

Statement 11 - Form 990-PF, Part XIV, Line 2b - Application Format and Required Contents

Description

APPLICATIONS ARE SUBMITTED THROUGH THE FOUNDATION'S WEBSITE, TOWSLEYFOUNDATION.ORG. ALL INFORMATION REQUIRED FOR THE SUBMITTAL IS AVAILABLE THERE. GRANTS ARE NOT MADE TO INSTITUTIONS WHICH UNFAIRLY DISCRIMINATE IN POLICY OR PRACTICE BASED ON AGE, RACE, COLOR, CREED OR SEX.

Statement 12 - Form 990-PF, Part XIV, Line 2c - Submission Deadlines

Description

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

Statement 13 - Form 990-PF, Part XIV, Line 2d - Award Restrictions or Limitations

Description

- 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.

Form 990-PF	Underdistribution and Excess D	2023	
	For calendar year 2023, or tax year beginning	, ending	
Name HARRY A. AI	ND MARGARET D. TOWSLEY		Identification Number

Undistributed Income Carryovers Form 990-PF, Part XII

	Prior Undistributed Income			Next Year Carryover		
Tax Year	Nontaxable or Previously Taxed	Taxable in 2023	Total per Year	Current Year Decreases	Nontaxable or Previously Taxed	Taxable in 2024
Years prior						
20 19			_			
20 20						
20 21						
2022		2,498,392	2,498,392	2,498,392		
2023			3,978,028	667,241		3,310,787
Total Carryove	er to Next Year					3,310,787

^{*} Carryover amount includes 4942(a) amounts

Excess Distribution Carryovers Form 990-PF, Part XII

	1 01111 000 1 1 , 1 011 7(1)	
	Current Year	Next Year
Preceding Tax Year Excess Distributions	Decreases	Carryover
2018		
2019		
2020		
2021		
2022		
Current Year Excess Distribution Generated (2	2023)	0
Total Carryover to Next Year		0

38-6091798

Federal Statements

FYE: 12/31/2023

Taxable Interest on Investments

Description	 Amount	Unrelated Business	Exclusion Code	Postal Code	US Obs (\$ or %)
HUNTINGTON BANK HUNTINGTON MONEY MARKET FUND SCHWAB US TREASURY INTEREST	\$ 81 118,073 95,627		14 14 14		
TOTAL	\$ 213,781				

Taxable Dividends from Securities

Description	 Amount	Unrelated Business	Exclusion Code	Postal Code	US Obs (\$ or %)
CHARLES SCHWAB VANGUARD	\$ 437,051 817,230		14 14		
DOW, CORTEVA, DUPONT	 313,447		14		
TOTAL	\$ 1,567,728				