Form 990-PF Department of the Treasury

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.

OMB No. 1545-0047
2023
Open to Public Inspection

Internal Revenue Service For calendar year 2023 or tax year beginning and ending Name of foundation A Employer Identification number GLENN SHAW FAMILY FOUNDATION, 84-3457049 Number and street (or P.O. box number if mail is not delivered to street address) Room/suite B Telephone number 38110 EXECUTIVE DRIVE 100 (734) 595-7727 City or town, state or province, country, and ZIP or foreign postal code C If exemption application is pending, check here 48185 WESTLAND, MI G Check all that apply: Initial return Initial return of a former public charity D 1. Foreign organizations, check here Final return Amended return 2. Foreign organizations meeting the 85% test, check here and attach computation X Name change Address change X Section 501(c)(3) exempt private foundation Check type of organization: E If private foundation status was terminated Section 4947(a)(1) nonexempt charitable trust Other taxable private foundation under section 507(b)(1)(A), check here ... 1 Fair market value of all assets at end of year | J | Accounting method: X Cash Accrual If the foundation is in a 60-month termination Other (specify) (from Part II, col. (c), line 16) under section 507(b)(1)(B), check here ... 101,666. (Part I, column (d), must be on cash basis.) Part I Analysis of Revenue and Expenses (d) Disbursements for charitable purposes (cash basis only) (b) Net investment (c) Adjusted net (a) Revenue and (The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a).) expenses per books income income 112,500 N/A Contributions, gifts, grants, etc., received Check if the foundation is not required to attach Sch. 8 2 Interest on savings and temporary cash investments . . Dividends and interest from securities 5a Gross rents b Net rental income or (loss) 37.517. 62 Net gain or (loss) from sale of assets not on line 10 b Gross sales price for all assets on line 6a 50,562. 7 Capital gain net income (from Part IV, line 2) 37,517. Net short-term capital gain Income modifications 10a Gross sales less returns and allowances b Less: Cost of goods sold o Gross profit or (loss) 11 Other income 150.017. 37,517. Total. Add lines 1 through 11 0. Compensation of officers, directors, trustees, etc. О. 0. Other employee salaries and wages 15 Pension plans, employee benefits 16a Legal fees STMT 1 140. 70. 70. b Accounting fees STMT 2 1,100. 2,200. 1,100 o Other professional fees 17 Interest 18 Taxes Depreciation and depletion 19 Occupancy 20 21 Travel, conferences, and meetings 22 Printing and publications Other expenses STMT 3 410. 205 205. 23 24 Total operating and administrative 2,750. 1,375. 1,375. expenses. Add lines 13 through 23 92,683. 92,683. 25 Contributions, gifts, grants paid 26 Total expenses and disbursements. 95,433. 1,375. 94,058. Add lines 24 and 25 27 Subtract line 26 from line 12: 54,584 & Excess of revenue over expenses and disbursements b Net investment income (if negative, enter -0-) 36,142. N/A o Adjusted net income (if negative, enter -0-)

Part IV Capital Gains a	ind Losses for Tax on In	vestment Income						
	he kind(s) of property sold (for exame rehouse; or common stock, 200 shs			How acquired P - Purchase D - Donation	(c) Date (mo., d	acquired lay, yr.)	(d) Date sold (mo., day, yr.))
18 PUBLICLY TRADEI			12/1	9/23	12/19/2	3		
b								
0								
d								
e							1	
(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other b plus expense of s				ain or (loss s (f) minus		-
a 50,562.		13	,045.				37,51	7.
b								
C								
d								
6								
	g gain in column (h) and owned by t	he foundation on 12/31/6	9.		(I) Gains (C	ol (h) gair	n minus	
(i) FMV as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col. over col. (j), if a	. (i)	C	ol. (k), but i	not less tha (from col.	ın -0-) or	
a							37,51	7.
b								
0						······································		
d								
e				 				
	<i>(,)</i>		``					
2 Capital gain net income or (net ca	oital loss) { If gain, also enter -0	in Part I, line 7 in Part I, line 7	}	2			37,51	7.
Net short-term capital gain or (los	s) as defined in sections 1222(5) an	d (6):	_					
	column (c). See instructions. If (los		ļ					
Part I, line 8			<u>,,,,,,,</u>	<u> 3 </u>		N/A		
Part V Excise Tax Bas	ed on Investment Incom	e (Section 4940(a	ı), 4940	(b), or 4948	- see in	structio	ns)	
1a Exempt operating foundations of	lescribed in section 4940(d)(2), che	ck here 🔝 🔲 and ei	nter "N/A" (on line 1.)			
Date of ruling or determination	letter: (at	ach copy of letter if nece	ssary - se	e instructions)			50	2.
	enter 1.39% (0.0139) of line 27b. Ex			•	}			
	(b)		-					
2 Tax under section 511 (domest	ic section 4947(a)(1) trusts and taxa	ble foundations only: othe	ers, enter -	0-)	2			0.
							50	
***********	tic section 4947(a)(1) trusts and tax							0.
	ne. Subtract line 4 from line 3. If ze						50	
6 Credits/Payments:	ne. Odotract into 4 nom mic o. ii 20	10 01 1003, 611101 0			··· 5			
· ·	nd 2022 overpayment credited to 20	23 6a			o.			
					ŏ:			
	tax withheld at source			· · · · · · · · · · · · · · · · · · ·	ö.			
	tension of time to file (Form 8868)				3000000			
	y withheld	·			0.			^
7 Total credits and payments. Ad		37						<u>o.</u>
	ment of estimated tax. Check here		iched			├		<u>0.</u>
	nd 8 is more than line 7, enter <mark>amo</mark>						50	4.
10 Overpayment. If line 7 is more	than the total of lines 5 and 8, enter	the amount overpaid						
11 Enter the amount of line 10 to b	e: Credited to 2024 estimated tax			Refund	ed 11	i		

Part II Balance Sheets Attached schedules and amounts in the description		II Balance Sheets Attached schedules and amounts in the description	Beginning of year	End of year			
27,4525		column should be for end-of-year amounts only.	(a) Book Value	(b) Book Value	(o) Fair Market Value		
	1	Cash - non-interest-bearing	82,832.	101,666.	101,666.		
	2	Savings and temporary cash investments					
	3	Accounts receivable					
		Less: allowance for doubtful accounts					
	4	Pledges receivable					
		Less: allowance for doubtful accounts					
	5	Grants receivable					
ı		Receivables due from officers, directors, trustees, and other					
		disqualified persons					
	7	Other notes and loans receivable					
		Less: allowance for doubtful accounts					
g	8	Inventories for sale or use					
Assets	9	Prepaid expenses and deferred charges	·	·			
<u>۲</u>	10a	Investments - U.S. and state government obligations					
		Investments - corporate stock					
		Investments - corporate bonds					
		Investments - land, buildings, and equipment: basis					
		Less: accumulated depreciation					
	12	Investments - mortgage loans					
	13	Investments - other			<u> </u>		
		Land, buildings, and equipment: basis					
	• •	Less: accumulated depreciation	e segment of the extremely employed the fire that employs by the tremely				
	15	Other assets (describe					
		Total assets (to be completed by all filers - see the					
	10	instructions. Also, see page 1, item I)	82,832.	101,666.	101,666.		
	17	Accounts payable and accrued expenses	32,3321	202/0001	=0=7000		
	18						
	19	Grants payable					
lies	20	Deferred revenue Loans from officers, directors, trustees, and other disqualified persons					
₽	21						
Liabilities		Mortgages and other notes payable Other liabilities (describe)					
	~~	Other indutities (describe					
	23	Total liabilities (add lines 17 through 22)	0.	0.			
	20	T 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1					
		and complete lines 24, 25, 29, and 30.					
Ses	o A	Net assets without donor restrictions					
臣	25						
Ba	20	Net assets with donor restrictions Foundations that do not follow FASB ASC 958, check here					
핕		and complete lines 26 through 30.					
딘	26	Capital stock, trust principal, or current funds	0.	0.			
S S	27	Paid-in or capital surplus, or land, bldg., and equipment fund	0.	Ŏ.			
Net Assets or Fund Balances	28	Retained earnings, accumulated income, endowment, or other funds	82,832.	101,666.			
AS	29	Total net assets or fund balances	82,832.	101,666.			
Ŗ.	49	ividi ilet desete of inua natatives	02/0021	201,000.			
	30	Total liabilities and net assets/fund balances	82,832.	101,666.			
				1 202,000.			
P	art	Analysis of Changes in Net Assets or Fund B	aiances				
 1	Tota	I net assets or fund balances at beginning of year - Part II, column (a), line	29				
			20	1	82,832.		
		r amount from Part I, line 27a	***************************************		54,584.		
		the control of the first of the first of the control of the contro	***************************************		0.		
					137,416.		
		eases not included in line 2 (itemize) ADJUSTMENT TO FM	V FOR BOOKS	5	35,750.		
		I net assets or fund balances at end of year (line 4 minus line 5) - Part II, c		6	101,666.		
٠	ivid	i not assets of fund valances at one of year (time 4 millios line 3) " Part II, C	Oldinii (D), mio 28		200 55		

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 participate or intervene in	9/19/20/21 20/20/20/20 20/20/20/20/20/20/20/20/20/20/20/20/20/2	Yes	
	any political campaign?	1a		<u> </u>
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.			
G	Did the foundation file Form 1120-POL for this year?	10		X
	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year:			
	(1) On the foundation. \$ O . (2) On foundation managers. \$ O .			
6	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation			
	managers. \$0.			
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.	100000		
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
Δa	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	4a		X
	If "Yes," has it filed a tax return on Form 990-T for this year?	4b		
	Was there a liquidation, termination, dissolution, or substantial contraction during the year?	5		X
۰	If "Yes," attach the statement required by General Instruction T.			
ß	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either:			
٥	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	Х	100000000
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	
'	Did the foundation have at least \$0,000 in assets at any time dating the years in 165, complete i art in, cor, (0), and i art in	2000000		
Q a	Enter the states to which the foundation reports or with which it is registered. See instructions.			
U	MI			
h	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate)			
Ū	of each state as required by General Instruction G? If "No," attach explanation	8b	Х	100000000000000000000000000000000000000
۵	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for calendar			garaga d
9	year 2023 or the tax year beginning in 2023? See the instructions for Part XIII. If "Yes," complete Part XIII	9	e erenguelenen der	X
10		10		X
	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
10	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had advisory privileges?			
٠.	Mindre Health of State and Development of	12		х
40	Print 1 Print	13	Х	
, 0	Website address GLENNSHAWFAMILYFOUNDATION . COM	10		
14	The books are in care of LYNETTE HOBYAK Telephone no. (734)	595	-77	27
17	Located at 38110 EXECUTIVE DRIVE, SUITE 100, WESTLAND, MI ZIP+4 48			
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - check here			П
	and enter the amount of tax-exempt interest received or accrued during the year		/A	L
16	At any time during calendar year 2023, did the foundation have an interest in or a signature or other authority over a bank,		Yes	No
10		16	. 55	X
	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	10		
	foreign country			
		orm 990)-PF	(abao)
	TO THE PERSON OF	AIR OO	J 1 3	(CUZO)

Form 990-PF (2023) GLENN SHAW FAMILY FOUNDATION, INC. 84-345 Part VI-B Statements Regarding Activities for Which Form 4720 May Be Required	7049		Page 6
File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.	0.0000000	Yes	No
1a During the year, did the foundation (either directly or indirectly):	1000010000		
(1) Engage in the sale or exchange, or leasing of property with a disqualified person?	1a(1)	19850178036	l x
(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from)	14117		
	1a(2)	0000000	x
a disqualified person? (3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?			X
(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?			X
(5) Transfer any income or assets to a disqualified person (or make any of either available	14(1)		SANSANS.
for the benefit or use of a disqualified person)?	1a(5)	SELECTION S	X
(6) Agree to pay money or property to a government official? (Exception. Check "No"	10(0)		
if the foundation agreed to make a grant to or to emptoy the official for a period after			
termination of government service, if terminating within 90 days.)	1a(6)	450000000	х
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 N/A	16	10,00,00,00	
o 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		Х
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 2023, did the foundation have any undistributed income (Part XII, lines			
6d and 6e) for tax year(s) beginning before 2023?	2a		Х
If "Yes," list the years,,,		(10 mm / 10 m	
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		
o 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?	3a	violet kaisina.	X
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,	10000000		
Schedule C, to determine if the foundation had excess business holdings in 2023.) N/A	3b		177
4a Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a	seituinais	X
b Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that			77
had not been removed from jeopardy before the first day of the tax year beginning in 2023?	4b		X

Part VI-B Statements Regarding Activities for Which Fo	orm 4720 May Be Re	equirea _{(contini}	ued)		r	,		
5a During the year, did the foundation pay or incur any amount to:				10000000 440000000	Yes			
(1) Carry on propaganda, or otherwise attempt to influence legislation (section				5a(1)	Version 15	X		
(2) Influence the outcome of any specific public election (see section 4955); or to carry on, directly or indirectly,								
any voter registration drive?								
(3) Provide a grant to an individual for travel, study, or other similar purposes?								
(4) Provide a grant to an organization other than a charitable, etc., organization					Will Help			
4945(d)(4)(A)? See instructions				5a(4)	25/00/56/6	X		
(5) Provide for any purpose other than religious, charitable, scientific, literary,						4.00 M		
the prevention of cruelty to children or animals?				5a(5)		X		
b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify und			NT / 7A		New Year	MINERAL		
section 53.4945 or in a current notice regarding disaster assistance? See instru	ctions		N/A	5b		BINGS C		
 Organizations relying on a current notice regarding disaster assistance, check h If the answer is "Yes" to question 5a(4), does the foundation claim exemption from 								
expenditure responsibility for the grant?			N / Z	6d	Province of	38.655.4355		
If "Yes," attach the statement required by Regulations section 53.4945-5(d).		•••••		Uu		as as seed		
6a Did the foundation, during the year, receive any funds, directly or indirectly, to p	av pramiume on							
a personal benefit contract?	• •			6a	12,534,644	х		
b Did the foundation, during the year, pay premiums, directly or indirectly, on a pe				6b		X		
If "Yes" to 6b, file Form 8870.					300 (300			
7a At any time during the tax year, was the foundation a party to a prohibited tax st	netter transaction?			7a	11134147644	Х		
b If "Yes," did the foundation receive any proceeds or have any net income attribut				7b				
8 Is the foundation subject to the section 4960 tax on payment(s) of more than \$								
excess parachute payment(s) during the year?	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			8		Х		
Part VII Information About Officers, Directors, Truste	es, Foundation Mar	agers, Highly		·				
Paid Employees, and Contractors								
1 List all officers, directors, trustees, and foundation managers and th		I t v o	(40)					
(a) Name and address	(b) Title, and average hours per week devoted	(c) Compensation (if not paid,	(d) Contributions employee benefit plant and deferred	ins a	(e) Exp ccount	ense , other		
	to position	enter -0-)	compensation		allowa	nces		
SEE STATEMENT 4		0.	0			0.		
DEE DIMIEMENT 4		· ·	U	+		0.		

		<u> </u>						
2 Compensation of five highest-paid employees (other than those incl		enter "NONE."	(d) Contobutions	ia T	(a) Eve			
(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 employee benefit p ⁾ and deferred	ins a	(e) Exp	, other		
NONE	devoted to position	!	compensation		allowa	nces		
ROVE								
4144								
***************************************				_				
· · · · · · · · · · · · · · · · · · ·		**********						
, , , , , , , , , , , , , , , , , , ,								
Total number of other employees paid over \$50,000						0		
			Fo	rm 99	0-PF	(2023)		

Form 990-PF (2023)

P	art IX Minimum Investment Return (All domestic foundations	must complete this part. Fe	oreign fo	undations,	see instructions.)
1	Fair market value of assets not used (or held for use) directly in carrying out charitable	e, etc., purposes;			
a	Average monthly fair market value of securities			1a	8.
b	Average of monthly cash balances			1b	82,941.
0	Fair market value of all other assets (see instructions)	***************************************		10	
ď	Total (add lines 1a, b, and c)	***************************************		1d	82,949.
е	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			1 2	0.
3	Subtract line 2 from line 1d			3	82,949.
4	Cash deemed held for charitable activities. Enter 1.5% (0.015) of line 3 (for greater am	ount, see instructions)		4	1,244.
5	Net value of nonoharitable-use assets. Subtract line 4 from line 3			5	81,705.
6		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		6	4,085.
P	art X Distributable Amount (see instructions) (Section 4942(j)(3)	and (j)(5) private operating fou	ndations	and certain	
_	foreign organizations, check here and do not complete this part.				
1	Minimum investment return from Part IX, line 6			1	4,085.
2a	Tax on investment income for 2023 from Part V, line 5		502.		
þ	Income tax for 2023. (This does not include the tax from Part V.)				
C	Add lines 2a and 2b			20	502.
3	Distributable amount before adjustments. Subtract line 2c from line 1			3	3,583.
4	Recoveries of amounts treated as qualifying distributions			4	0.
5	Add lines 3 and 4			5	3,583.
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 3			7	3,583.
P	art XI Qualifying Distributions (see instructions)				
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purpo	oses:			
a	Expenses, contributions, gifts, etc total from Part I, column (d), line 26	***************************************		1a	94,058.
Ь	Program-related investments - total from Part VIII-B			1b	0.
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable	e, etc., purposes		2	
3	Amounts set aside for specific charitable projects that satisfy the:		•		
a	Suitability test (prior IRS approval required)	***************************************		3a	
Ь		***************************************		3b	
4	Qualifying distributions. Add lines 1a through 3b. Enter here and on Part XII, line 4			4	94,058.
	***************************************	-			Form 990-PF (2023)

Part XII Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2022	(o) 2022	(d) 2023
Distributable amount for 2023 from Part X, line 7				3,583.
2 Undistributed income, if any, as of the end of 2023:				
a Enter amount for 2022 only			0.	
b Total for prior years:		0.		
3 Excess distributions carryover, if any, to 2023:				
a From 2018				
b From 2019				
o From 2020 40,738.				
d From 2021 89,345.				
e From 2022 93,352.				
f Total of lines 3a through e	223,435.			
4 Qualifying distributions for 2023 from				
Part XI, line 4: \$ 94,058.				
a Applied to 2022, but not more than line 2a			0.	
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 2023 distributable amount				3,583.
e Remaining amount distributed out of corpus	90,475.			
Excess distributions carryover applied to 2023 (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	313,910.			
b Prior years' undistributed income. Subtract				
line 4b from line 2b		0.		
o 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 2022. Subtract line				
4a from line 2a. Taxable amount - see instr			0.	
f Undistributed income for 2023. Subtract				
lines 4d and 5 from line 1. This amount must				
be distributed in 2024				0.
7 Amounts treated as distributions out of				
corpus to satisfy requirements imposed by				
section 170(b)(1)(F) or 4942(g)(3) (Election	_			
may be required - see instructions)	0.			
8 Excess distributions carryover from 2018				
not applied on line 5 or line 7	0.			
9 Excess distributions carryover to 2024.	212 242			
Subtract lines 7 and 8 from line 6a	313,910.			
10 Analysis of line 9:				
a Excess from 2019				
b Excess from 2020 40,738.				
o Excess from 2021 89,345. d Excess from 2022 93,352.				
e Excess from 2023 90,475.			l	

323581 12-20-23

Form 990-PF (2023)

a Paid during the year

28129 S. CLEMENTS CIRCLE

CANTON COMMUNITY FOUNDATION

50430 SCHOOL HOUSE ROAD

ST. LEO'S SOUP KITCHEN

8642 WOODWARD AVE DETROIT, MI 48202

REBECCA BUSCH

844 MERCURY CIRCLE

CURTIS FAMILY

LIVONIA, MI 48150

CANTON, MI 48187

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

BENERAL FUND

FOOD WARMER

PC

ÞC

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3 Grants and Contributions Paid During the Year or Approved for Future Payment

	1	1			
LONE TREE, CO 80124					1,700.
STEVE JOHNSON			PC	FAMILY IN NEED	
42204 HARTFORD CT					
CANTON, MI 48187					1,500.
	CONTI	NUATION SHEET	r(S)		92,683.
b Approved for future payment					, , , , , , , , , , , , , , , , , , ,
- Approvad for lotate payment					
					4
NONE					
		j			
	1				
Total				3b	0.
					Corm QQQ-PE (0000)

Part XIII Private			STUDION ,	LNC.	N/A	45/U49 Page 10
<u> </u>				t, question s)	N/A	
1 a If the foundation has	_					
			ne ruling		40.40(3)(0)	10.40(:)(5)
	Г	Tax year	g foundation described in	Prior 3 years	4942(j)(3) or	4942(j)(5)
2 a Enter the lesser of th	· ["	(a) 2023	(b) 2022	(o) 2021	(d) 2020	(e) Total
income from Part I o		(4) 2020	(8) 2022	(0) 2021	(0) 2020	(c) Iviai
investment return fro						
each year listed				·····		
b 85% (0.85) of line 2a						
c Qualifying distributio						
line 4, for each year l						
d Amounts included in						
used directly for activ	1					
exempt activities						
e Qualifying distributio	1					
for active conduct of	· 1					
Subtract line 2d from 3 Complete 3a, b, or c	for the					+
alternative test relied	lupon:					
a "Assets" afternative to	est - enter:					
(1) Value of all asse	1					
(2) Value of assets a under section 49	qualifying 942(j)(3)(B)(i)					
b "Endowment" alterna			· · · · · · · · · · · · · · · · · · ·			
2/3 of minimum inve shown in Part IX, line	e 6, for each year					
listed o "Support" alternative	1	——————————————————————————————————————				
(1) Total support of	I					
investment inco	me (interest,					
dividends, rents						
securities loans 512(a)(5)), or re	oyalties)					
(2) Support from ge				<u> </u>		
and 5 or more e	xempt					
organizations as section 4942(j)(
(3) Largest amount				***************************************		
	nization					
				the foundation	 on had \$5,000 or mo	ore in assets
at any	time during th	e year-see instri	ictions.)			
i Information Rega	•	•				
				butions received by	the foundation before the clo	ose of any tax
		ore than \$5,000). (See so	sction 507(0)(2).)			
SEE STATEME		own 100% or more of the	atook of a corporation (y an aqually force n	ortion of the ownership of a	northographin or
		a 10% or greater interes		n an equally large p	ornon or the ownership of a j	Second only
NONE						
2 Information Rega	rding Contributio	n, Grant, Gift, Loan.	Scholarship, etc., Pro	grams;		
Check here X	if the foundation	only makes contribution	s to preselected charitabl	organizations and	does not accept unsolicited r	equests for funds. If
the foundation make	s gifts, grants, etc., t	o individuals or organiza	tions under other condition	ons, complete items	2a, b, c, and d.	
a The name, address, a	and telephone numbe	er or email address of th	e person to whom applica	tions should be add	dressed:	
b The form in which ap	oplications should be	submitted and informat	ion and materials they sh	ould include:		
o Any submission dead	dlines:					
d Any restrictions or li	mitations on awards,	, such as by geographica	l areas, charitable fields,	kinds of institutions	, or other factors:	

323601 12-20-23

Form 990-PF (2023)

Part XV-A	Analysis	of Income	-Producing	Activities
-----------	----------	-----------	------------	-------------------

Enter gross amounts unless otherwise indicated.	Unrelated business income			ded by section 512, 513, or 514	(e)		
	(a)	(b)	Exclu-	(d)	Related or exempt		
1 Program service revenue:	Business code	Amount	sion code	Amount	function income		
a							
b							
0			L				
d							
8							
g Fees and contracts from government agencies		1	ļ				
2 Membership dues and assessments			<u> </u>				
3 Interest on savings and temporary cash							
investments			!				
4 Dividends and interest from securities							
5 Net rental income or (loss) from real estate:			********				
a Debt-financed property			 				
b Not debt-financed property			-				
6 Net rental income or (loss) from personal							
property							
7 Other investment income							
8 Gain or (loss) from sales of assets other than inventory			18	37,517.			
9 Net income or (loss) from special events			1	0,,0=,,			
10 Gross profit or (loss) from sales of inventory			 				
11 Other revenue:				· · · · · · · · · · · · · · · · · · ·			
a							
b							
0							
d							
e							
12 Subtotal. Add columns (b), (d), and (e)		0.		37,517.			
13 Total. Add line 12, columns (b), (d), and (e)				13	37,517.		
(See worksheet in line 13 instructions to verify calculations.)							
Part XV-B Relationship of Activities to	the Acco	omplishment of Ex	empt	Purposes			
Line No. Explain below how each activity for which inco	ma is reported	in caluma (a) of Dart VV A	aantrib	utad impartantly to the econ	aliahmant of		
Line No. Explain below how each activity for which income the foundation's exempt purposes (other than to			COMMIN	uted importantly to the accom	pusionera or		
the restriction of storage purposes (called than the	oy provious in	illa tol addit barbassa);					

					, , , , , , , , , , , , , , , , , , , ,		
323621 12-20-23					Form 990-PF (2023)		

Form 000 PF		y shaw fai	ILLY FO	OUNDATION, I	NC.	8	4-3457049	Paga 13
Part XV	Information Fine Exempt Organ	legarding Trar	isfers to	and Transactions	and Relation	ships With N	oncharitable	Fago 13
1 Did the	organization directly or inc	diractly engago in any	of the Inflas	lan with any other provets	at kadinaak maita	and the total	133821	Zant NI
(ving) (men entirek 30 (CHO) O(O)	INIZANONSI OF IN SACII	nn 597 roisii	to la nolilical avacatuatta a	annii nesciwed IV	section 201(c)		/es No
≰ 119U\$10	rs from the taporting found	dalion to a noncharite	n tamaxa alda	เตลท์รลโดย ณ์				
(1) Ca.	sh		anto orientals o	Agintaltati At.			NA P	334-123
(2) 0#	sh Tor essals	.,,	************			***		<u> </u>
b Other tr	tor essals ensactions:	*********************	************		***************************************		18(2)	X
								. N. S.
(2) Pu	les el assets lo a noncharit Chases el assets trom a no	nocument organiza	Aragrimian					X_
(3) Re	rchases of assets from a ne ntel of lacifilies, equipment	or other assale	OI DOING BEING	** }***********************		*******************	15(2)	X
(4) Rei	ntel of lacifilies, equipment imbursement arrangements	, -: 01 <i>201 020013</i>	***************	******************************		*************	16(3)	<u>X</u> _
								X
(6) Par	ans or loan guarantees formance of services or ma	pothoroble or funderi					1515)	X
								X
	an improvious of a sign restrictiff from	eninia nota amici sest	us. Or baib er	BINAVRAS			1 4 1	X
								3,
column	ces given by the reporting t (d) the value of the goods,	other aparts areas	nuation recen	leg legg than tait market v	aluu in any transac	lion or sharing ærer	igement, ahow in	
(a) Line no.	(b) Amount involved	DUINT SESSIO, OF ZELA	CAR TACGIARD					
\\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ 	(o) variages and state	(c) usine o		e exampl organization	(d) Chascri	byou of Asuaters' Arves	ctions, and starting arrang	eineme
		 	<u> </u>					
								
		 						
								
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	· · · · · · · · · · · · · · · · · · ·							
	···							
						-		
		<u> </u>						

2a is the for	undation directly or Indirect	lly affiliated with, or r	elated to, one	or more lax-exempt organ	nizalinas dascribad			
in section	n 501(c) (olimi lian secilo:	n 501(c)(3)) or in sac	ilon 527?			•	l v.	X No
b !!"Yes," (rompioto mo temaning acite	edate.		<u>·</u>	************	***********************	— 1 164	177 140
	(a) Name of erg	anization		(b) Type of organization	1	(e) Description o	Irelationshin	
	N/A			· · · · · · · · · · · · · · · · · · ·	T	3,7,000,000	. TORATION SIND	
					1			
		-	·		<u> </u>			
		<u> </u>						
					1			
Und	or permitten of perjury, I declare bellef, it is thus, correct, seef con	that y pure examined this	return, (activities	ectompanying schedules and	sistements and a te	E beel of you knowled		
Sign.	bellef, it is que, conect, and con	Poly . Decision of pra	perce (other than	i inspayen in cused on ditinlog	nation of which prepar	er has any knowledge.	Work fue this disch	
Here	Whom !	1000		13/25/24			shakn belon? Se	i Inatr,
Sign	nature of officer or trustos	A MINA	4	0.6%	PRESIDE	W.T.	X Yes	No
	Print/Typo preparer's nar		Pranacne's el		Tille	Ohr bulgoophu"	1	
Paid	AARON PARISH			PARISHO	03/02/24		B012455-	^
Preparer	Firm's name PLANS		Pr.r.c		147104124	<i>I</i> -,	P0134535	<u>y</u>
Use Only	1		.,	-		Firm's EIN 3	8-1357951	
	Firm's address 1000	HOONGHAD	DR . 3	TE. 400	•	 		
	ANN	ARBOR, MI	48104	· · · · · ·		Dhane - /	7341 665 0	464
						гряоне по,	734) 665-9	
							Farm 990-P	£ (2023)

Part XIV Supplementary Information	1			· · · · · · · · · · · · · · · · · · ·
3 Grants and Contributions Paid During the Ye	***************************************	1		
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	Purpose of grant or contribution	Amount
BRITTANY MURRAY/JUSTIN FORTENBERRY 8712 AUGUST STREET WESTLAND, MI 48185	or substantial contributor	recipient	FAMILY IN NEED	2,756.
VFW AUXILIARY #9885 6440 N HIX ROAD WESTLAND, MI 48185		PC	GENERAL FUND	2,020.
WAYNE FORD CIVIC LEAGUE 1661 WAYNE ROAD WESTLAND, MI 48185		PC	VETERANS THANKSGIVING	5,000
LEAPS & BOUNDS FAMILY SERVICES 8129 PACKARD WARREN, MI 48089		PC	JENERAL FUND	1,500
SLEEP IN HEAVENLY PEACE PO BOX 85304 WESTLAND, MI 48185		₽C	JENERAL FUND	15,000
PLYMOUTH FOSTER CARE CLOSET 40540 E. ANN ARBOR TRAIL PLYMOUTH, MI 48170		PC	GENERAL FUND	6,623.
KINIGHTS OF COLUMBUS 3144 S. WAYNE ROAD WAYNE, MI 48184		PC	GENERAL FUND	15,000
MI WORK MATTER 19215 MERRIMAN ROAD LIVONIA, MI 48152		PC	GENERAL FUND	500
WAYNE - WESTLAND FOUNDATION 36745 MARQUETTE WESTLAND, MI 48185		₽C	GENERAL FUND	2,500
LISA DUNHAM 1323 CORRIGAN STREET ELBURN, IL 60119 Total from continuation sheets		PC	FAMILY IN NEED	10,000 60,899

Schedule B

Department of the Treasury

Internal Revenue Service

(Form 990)

Schedule of Contributors

Attach to Form 990, 990-EZ, or 990-PF.
Go to www.irs.gov/Form990 for the latest information.

OMB No. 1545-0047

2023

Name of the organization **Employer Identification number** GLENN SHAW FAMILY FOUNDATION, 84-3457049 Organization type (check one): Filers of: Section: Form 990 or 990-EZ ____ 501(c)() (enter number) organization 4947(a)(1) nonexempt charitable trust not treated as a private foundation 527 political organization Form 990-PF X 501(c)(3) exempt private foundation 4947(a)(1) nonexempt charitable trust treated as a private foundation 501(c)(3) taxable private foundation Check if your organization is covered by the General Rule or a Special Rule. Note: Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions. General Rule X For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions. **Special Rules** For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of (1) \$5,000; or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h; or (ii) Form 990-EZ, line 1. Complete Parts I and II. For an organization described in section 501(c)(7), (8), or (10) filling Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I (entering

Caution: An organization that isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990), but it must answer "No" on Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on its Form 990-PF, Part I, line 2, to certify that it doesn't meet the filing requirements of Schedule B (Form 990).

religious, charitable, etc., contributions totaling \$5,000 or more during the year _______\$

For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions exclusively for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box

is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., purpose. Don't complete any of the parts unless the General Rule applies to this organization because it received nonexclusively.

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

"N/A" in column (b) instead of the contributor name and address), II, and III.

Schedule B (Form 990) (2023)

Employer identification number

GLENN SHAW FAMILY FOUNDATION, INC.

84-3457049

(a) No. rom Part I	(b) Description of noncash property given AFFIRM HOLDINGS INC (b) Description of noncash property given (b) (b) (b)	(c) FMV (or estimate) (See instructions.) \$ 48,795. (c) FMV (or estimate) (See instructions.)	(d) Date received 02/09/23 (d) Date received
(a) No. rom (a) No. rom rart I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d)
No.	Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d)
ło. om	(b)		
o. om	(b)	i l	
	Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	
(a) No. rom 'art i	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
(a) No. rom Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
(a) No. From Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received

Name of organization

Employer identification number

GLENN	SHAW	FAMILY	FOUNDATION	, INC.

84-3457049

Part I	Contributors (see instructions). Use duplicate copies of Part I if additional space is needed.							
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution					
1	GLENN AND PATTY SHAW 50240 THETFORD CT WEST CANTON, MI 48187	\$\$.	Person X Payroll Noncash X (Complete Part II for noncash contributions.)					
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution					
		\$	Person Payroll Noncash Complete Part II for noncash contributions.)					
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution					
-		\$	Person Payroll Oncash Complete Part II for noncash contributions.)					
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution					
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)					
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution					
_			Person Payroll Onncash Complete Part II for noncash contributions.)					
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution					
		\$	Person Payroll Oncash Complete Part II for noncash contributions.)					

Schedule B (Form 990) (2023) Page 4 Name of organization Employer Identification number GLENN SHAW FAMILY FOUNDATION, INC. 84-3457049 Exclusively religious, charitable, etc., contributions to organizations described in section 501(o)(7), (8), or (10) that total more than \$1,000 for the year from any one contributor. Complete columns (a) through (e) and the following line entry. For organizations completing Part III, enter the total of exclusively religious, charitable, etc., contributions of \$1,000 or less for the year. (Enter this info. once.) \$_ Use duplicate copies of Part III if additional space is needed. (a) No. from (b) Purpose of gift (c) Use of gift (d) Description of how gift is held Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from Part I (b) Purpose of gift (c) Use of gift (d) Description of how gift is held (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from Part I (b) Purpose of gift (c) Use of gift (d) Description of how gift is held (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. (b) Purpose of gift (c) Use of gift (d) Description of how gift is held (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee

Form **2220**

Underpayment of Estimated Tax by Corporations

Department of the Treasury Internal Revenue Service

GLENN SHAW FAMILY FOUNDATION,

Attach to the corporation's tax return.

FORM 990-PF

OMB No. 1545-0123

Name

Go to www.irs.gov/Form2220 for instructions and the latest information.

Employer identification number

84-3457049

Note: Generally, the corporation is not required to file Form 2220 (see Part II below for exceptions) because the IRS will figure any penalty owed and
bill the corporation. However, the corporation may still use Form 2220 to figure the penalty. If so, enter the amount from page 2, line 38, on the
estimated tax penalty line of the corporation's income tax return, but do not attach Form 2220.

INC.

Part I Required Annual Payment					
1 Total tax (see instructions)	*******			1	502.
2 a Personal holding company tax (Schedule PH (Form 1120),	line 26)	included on line 1	2a		
b Look-back interest included on line 1 under section 460(b)		*******			
contracts or section 167(g) for depreciation under the inco			2b		
o Credit for federal tax paid on fuels (see instructions)			20		
d Total. Add lines 2a through 2c				2d	
3 Subtract line 2d from line 1. If the result is less than \$500,	do not o	complete or file this form.	The corporation		
does not owe the penalty	•••••		*********	3	502.
4 Enter the tax shown on the corporation's 2022 income tax					
or the tax year was for less than 12 months, skip this line a	ind ente	r the amount from line 3 o	n line 5	4	
5 Required annual payment. Enter the smaller of line 3 or I					
enter the amount from line 3 Part II Reasons for Filing - Check the boxes to				5	502.
Part II Reasons for Filing - Check the boxes to even if it does not owe a penalty. See instruction	elow tha	at apply. If any boxes are o	checked, the corporation	must file Form 2220	
The corporation is using the adjusted seasonal inst					
7 X The corporation is using the annualized income ins			. 41		
8 The corporation is a "large corporation" figuring its Part III Figuring the Underpayment	III'SI 180	uirea installment based o	n the prior year's tax.		
estate in Figuring the Onto-paymont	~	/a\	/53	<i>(</i> 2)	7.25
9 Installment due dates. Enter in columns (a) through (d) t	ha \square	(a)	(b)	(0)	(d)
15th day of the 4th (Form 990-PF filers: Use 5th month),	IIE				
6th, 9th, and 12th months of the corporation's tax year	9	05/15/23	06/15/23	09/15/23	12/15/23
10 Required installments. If the box on line 6 and/or line 7	-	00/10/20	00/13/23	03/13/23	12/13/23
above is checked, enter the amounts from Sch A, line 38. I	.				
the box on line 8 (but not 6 or 7) is checked, see instruction					
for the amounts to enter. If none of these boxes are checked					
enter 25% (0.25) of line 5 above in each column	' I I				
11 Estimated tax paid or credited for each period. For	. '				
column (a) only, enter the amount from line 11 on line 15.					
See instructions	اددا				
Complete lines 12 through 18 of one column					
before going to the next column.					
12 Enter amount, if any, from line 18 of the preceding column	12				
13 Add lines 11 and 12					
14 Add amounts on lines 16 and 17 of the preceding column	14				
15 Subtract line 14 from line 13. If zero or less, enter -0-	15				
16 If the amount on line 15 is zero, subtract line 13 from line					
14. Otherwise, enter -0-	16				
17 Underpayment. If line 15 is less than or equal to line 10,					
subtract line 15 from line 10. Then go to line 12 of the next					
column. Otherwise, go to line 18	. 17				
18 Overpayment. If line 10 is less than line 15, subtract line 1	0				
from line 15. Then go to line 12 of the next column	. 18				

For Paperwork Reduction Act Notice, see separate instructions.

Form 2220 (2023)

Go to Part IV on page 2 to figure the penalty. Do not go to Part IV If there are no entries on line 17 - no penalty is owed.

Form 2220 (2023)

Part IV Figuring the Penalty

			(a)	(b)	(0)	(d)
after th (C corp and S c Form 9	ne date of payment or the 15th day of the 4th month e close of the tax year, whichever is earlier. corations with tax years ending June 30 corporations: Use 3rd month instead of 4th month. 90-PF and Form 990-T filers: Use 5th month of 4th month.) See instructions	19				
Number	of days from due date of installment on line 9 to the					
date sho	wn on line 19	20				
Number	of days on line 20 after 4/15/2023 and before 7/1/2023	21				
Underpa	yment on line 17 x Number of days on line 21 x 796 (0.07)	22	\$	\$	\$	<u>\$</u>
Number	of days on line 20 after 6/30/2023 and before 10/1/2023	23				
Underpa	yment on line 17 x Number of days on line 23 x 736 (0.07)	24	\$	\$	\$	\$
Number	of days on line 20 after 9/30/2023 and before 1/1/2024	25				
Underpa	yment on line 17 x Number of days on line 25 x 8% (0.08)	26	\$	s	\$	<u>s</u>
Number	of days on line 20 after 12/31/2023 and before 4/1/2024	27				
Underpa	yment on line 17 x Number of days on line 27 x 836 (0.08)	28	\$	\$	\$	S
Number	of days on line 20 after 3/31/2024 and before 7/1/2024	29	-	-		
Underpa	yment on line 17 x Number of days on line 29 x *%	30	\$	\$	\$	\$
Number	of days on line 20 after 6/30/2024 and before 10/1/2024	31				
Underpa	yment on line 17 x Number of days on line 31 x *96 366	32	\$	\$	\$	\$
Number	of days on fine 20 after 9/30/2024 and before 1/1/2025	33				
Underpa	yment on line 17 x Number of days on line 33 x *96	34	\$	\$	\$	\$
Number	of days on line 20 after 12/31/2024 and before 3/16/2025	35				
Underpa	yment on line 17 x Number of days on line 35 x *96	36	\$	\$	\$	\$
Add fines	3 22, 24, 26, 28, 30, 32, 34, and 36	37	\$	\$	\$	\$
Donali.	Add columns to through the of Eas 02 Patrick of	4-11	on and as the set 4400 to			
	 Add columns (a) through (d) of line 37. Enter the to other income tax returns 	eat he	ere and on Form 1120, lit	ie 34; or the comparable		38 \$

^{*} Use the penalty interest rate for each calendar quarter, which the IRS will determine during the first month in the preceding quarter. These rates are published quarterly in an IRS News Release and in a revenue ruling in the Internal Revenue Bulletin. To obtain this information on the Internet, access the IRS website at www.irs.gov. You can also call 800-829-4933 to get interest rate information.

Form 2220 (2023)

FORM 990-PF

Schedule A Adjusted Seasonal Installment Method and Annualized Income Installment Method See instructions.

Form 1120-S filers: For lines 1, 2, 3, and 21, "taxable income" refers to excess net passive income or the amount on which tax is imposed under section 1374(a), whichever applies.

Part I Adjusted Seasonal Installment Method

Caution: Use this method only if the base period percentage for any 6 consecutive months is at least 70%. See instructions.

		(-)	T (2.)		
1 Enter taxable income for the following periods.		(a) First 3 months	(b)	(0)	(d)
a Tau unau 6 - air-ui i - 0000	,	FIISE 3 MORURS	First 5 months	First 8 months	First 11 months
h Tou year hasing in 0004	1a 1b				
o rax year beginning in 2021	10				
o Tax year beginning in 2022	1, 1				
2 Enter taxable income for each period for the tax year beginning in	10				
2023. See the instructions for the treatment of extraordinary items	2				
and one institutions for the deathers of expansionally senies	-				
3 Enter taxable income for the following periods.		First 4 months	First 6 months	First 9 months	Entire year
taxable into the tell the tell thing periods.					
a Tax year beginning in 2020	За				
	oa				
b Tax year beginning in 2021	3b				
- tanyon augming in 2021	90				
o Tax year beginning in 2022	30				
4 Divide the amount in each column on line 1a by the					
amount in column (d) on line 3a	4				
5 Divide the amount in each column on line 1b by the					
amount in column (d) on line 3b	5		!		
6 Divide the amount in each column on line 1c by the					
amount in column (d) on line 3c	6				
,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,					
7 Add lines 4 through 6	7				
8 Divide line 7 by 3.0	8				
9a Divide line 2 by line 8	9a				
b Extraordinary items (see instructions)	9b				
o Add lines 9a and 9b	90				
10 Figure the tax on the amt on In 9c using the instr for Form					
1120, Sch J, line 1, or comparable line of corp's return	10				
11a Divide the amount in columns (a) through (c) on line 3a					
by the amount in column (d) on line 3a	11a				
b Divide the amount in columns (a) through (c) on line 3b					
by the amount in column (d) on line 3b	116				
o Divide the amount in columns (a) through (c) on line 3c					
by the amount in column (d) on line 3c	110				
12 Add lines 11a through 11c	12		·		
13 Divide line 12 by 3.0	13				
14 Multiply the amount in columns (a) through (c) of line 10					
by columns (a) through (c) of line 13. In column (d), enter					
the amount from line 10, column (d)	14				
16 Enter any alternative minimum tax (trusts only) for each					
payment period. See instructions	15				
16 Enter any other taxes for each payment period. See instr.	16				
17 Add lines 14 through 16	17			· · · · · · · · · · · · · · · · · · ·	
18 For each period, enter the same type of credits as allowed					
on Form 2220, lines 1 and 2c. See instructions	18				
19 Total tax after credits. Subtract line 18 from line 17. If					
zero or less, enter -0-	19				
312821 02-05-24					

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Form 2220 (2023)

Form 2220 (2023)

FORM 990-PF

Part II Annualized Income Installment Method

······································						
			(a)	(b)	(0)	(d)
00 4 1/ 1/			First 2	First 3	First 6	First 9
20 Annualization periods (see ins	tructions)	20	months	months	months	months
21 Enter taxable income for each	annualization period. See					montto
instructions for the treatment	of extraordinary items	21	-625.	-625.	-1,170.	-1,255.
22 Annualization amounts (see in	structions)	22	6.000000	4.000000	2.000000	1.333330
23a Annualized taxable income. Mu	ultiply line 21 by line 22	23a	-3,750.	-2,500.	-2,340.	1 672
b Extraordinary items (see instru	ictions)	23b			2,340.	-1,673.
		230	-3,750.	-2,500.	-2,340.	1 672
24 Figure the tax on the amount o	n line 23c using the			2,500.		-1,673.
instructions for Form 1120, Sc	hedule J, line 1,					
or comparable line of corporati	ion's return	24			1	
25 Enter any alternative minimum	tax (trusts only) for each					
payment period. See instruction	ns	25				
26 Enter any other taxes for each p	naumant pariod Can igner					
and any and takes to each	payment period, 586 mstr.	26				
27 Total tax. Add lines 24 through	26	27				
28 For each period, enter the same						
on Form 2220, lines 1 and 2c. S	See instructions	28				
29 Total tax after credits. Subtract	line 28 from line 27 If	20				
zero or less, enter -0-		29				
30 Applicable percentage		30	25%	50%	75%	100%
31 Multiply line 29 by line 30		31	ľ	ļ		
Part III Required Instal						
Note: Complete lines 32 through	h 38 of one column					
before completing the next colu			ist	2nd	3rd	4th
32 If only Part I or Part II is comple		F	installment	installment	installment	installment
each column from line 19 or line	31 If both parts ore					
completed, enter the smaller of	the amounts in each					
column from line 19 or line 31		20			_	
33 Add the amounts in all preceding	G columns of line 39	32	0.	0.	<u>0.</u>	0.
Can instructions		33		ţ.		
34 Adjusted seasonal or annualize	d Innome installments	30				
Subtract line 33 from line 32. If a		24		ĺ		
35 Enter 25% (0.25) of line 5 on page	ge 1 of Form 2220 in	34				
each column. Note: "Large corpo	arations " see the					
instructions for line 10 for the an		ar	126.	100		
36 Subtract line 38 of the preceding	Looling from line 97 of	35	140,	125.	126.	125.
the propeding as how		٠. ا		106		
,g ********************************		36		126.	251.	<u> </u>
37 Add lines 35 and 36		37	126.	251	225	
00 5		31	1200	251.	377.	502.

Form 2220 (2023)

0.

0.

** ANNUALIZED INCOME INSTALLMENT METHOD USING STANDARD OPTION

0.

See instructions

38 Required installments. Enter the smaller of line 34 or line 37 here and on page 1 of Form 2220, line 10.

0.

FORM 990-PF	LEGAI	, FEES	£	STATEMENT 1		
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES		
LEGAL FEES	140.	70.		70.		
TO FM 990-PF, PG 1, LN 16A	140.	70.		70.		
FORM 990-PF	ACCOUNTI	NG FEES	S	TATEMENT 2		
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES		
TAX PREP FEES	2,200.	1,100.		1,100.		
TO FORM 990-PF, PG 1, LN 16B	2,200.	1,100.		1,100.		
FORM 990-PF	OTHER E	XPENSES	S	ТАТЕМЕНТ 3		
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES		
OFFICE EXPENSE REGISTRATION FEES	390. 20.	195. 10.		195. 10.		
FO FORM 990-PF, PG 1, LN 23	410.	205.		205.		

FORM 990-PF PART VII - LIST TRUSTEES AND	OF OFFICERS, DIE FOUNDATION MANAGE	RECTORS SERS	STAT	EMENT 4
NAME AND ADDRESS	TITLE AND AVRG HRS/WK	COMPEN- SATION	EMPLOYEE BEN PLAN CONTRIB	EXPENSE ACCOUNT
DOUGLAS MARTIN SHAW 38110 EXECUTIVE DRIVE, SUITE 100 WESTLAND, MI 48185	PRESIDENT 0.25	0.	0.	0.
LYNETTE KATHLEEN HOBYAK 38110 EXECUTIVE DRIVE, SUITE 100 WESTLAND, MI 48185	TREASURER 0.25	0.	0.	0.
STEVEN DONALD JOHNSON 38110 EXECUTIVE DRIVE, SUITE 100 WESTLAND, MI 48185	DIRECTOR 0.25	0.	0.	0.
JOELLE LYNN BOROS 38110 EXECUTIVE DRIVE, SUITE 100 WESTLAND, MI 48185	DIRECTOR 0.25	0.	0.	0.
CARL ALBERT JOHNSON, JR. 38110 EXECUTIVE DRIVE, SUITE 100 WESTLAND, MI 48185	DIRECTOR 0.25	0.	0.	0.
HOLLY ANN COZZA 38110 EXECUTIVE DRIVE, SUITE 100 WESTLAND, MI 48185	SECRETARY 0.25	0.	0.	0.
GLENN SHAW, JR. 38110 EXECUTIVE DRIVE, SUITE 100 WESTLAND, MI 48185	CHAIRMAN OF THE 0.25	BOARD 0.	0.	0.
PATRICIA SHAW 38110 EXECUTIVE DRIVE, SUITE 100 WESTLAND, MI 48185	DIRECTOR 0.25	0.	0.	0.
COTALS INCLUDED ON 990-PF, PAGE 6,	PART VII	0.	0.	0.

FORM 990-PF

PART XIV - LINE 1A LIST OF FOUNDATION MANAGERS

STATEMENT 5

NAME OF MANAGER

GLENN SHAW, JR. PATRICIA SHAW