Form **990-T** (2019)

		ŀ						4		OMB No 1545-0047
Forr	"990-T		Exempt Organ (and	nization Bu	JSINESS	Income	Iax R	eturn		2019
	۵٬ ۵	For cal	endar year 2019 or other tax	-		and ending	• • • • • • • • • • • • • • • • • • • •	[112	-	2019
	artment of the Treasury		▶Go to www.irs.g	jov/Form990T foi	instructions	and the lates				n to Public inspection fo
Inter	nal Revenue Service Check box if	<b>D</b> o n	ot enter SSN numbers of							
A	address changed	4	Name of organization (   THE HERBER		-	see instructions	)	D Employer i		e instructions )
-	Exempt under section  X 501( C)( 63 )	Print	FOUNDATION	I n. æ G	RACE F	. DON				,
}	<b>—</b>	or	Number, street, and room or s	unte no. If a P.O. hov.	see instructions			<b>∃</b> 38-1	437	485
}	408(e) 220(e) 408A 530(a)	Туре	1018 WEST	· · · · · · · · · · · · · · · · · · ·						s activity code
ì	529(a)	1,750	City or town, state or province			code		(See instru		
<u> </u>		1	MIDLAND	, , , , , , , , , , , , , , , , , , ,		48640		4532	220	900099
_	Book value of all assets at end of year	F G	roup exemption number	r (See instruction						
	540,170,019		heck organization type		corporation	501	(c) trust	401(a) tri	ust	Other trust
Н			zation's unrelated trade			Describe the	only (or	first) unrelated	trade d	or business here
	► GIFT SHOP								_	nly one, complete
			scribe the first in the bla			revious sente	ence, con	nplete Parts I a	nd II, c	complete a
			I trade or business, ther							
I	During the tax year, wa	s the co	orporation a subsidiary in	n an affiliated gr	oup or a par	ent-subsidiar	y controlle	ed group?		Yes X No
	if "Yes," enter the name	e and id	entifying number of the	parent corporati	on					
	The books are in care	of <b>D</b>	TNA HOD				Tel	enhone number	▶ 9	89-631-369
			de or Business Inc	ome		(A) Inc		(B) Expense		(C) Net
1a			421,649			<del></del>				
b	Less returns and allo			c Balance	<b>▶</b> 1c	42	1,649			
2	epst of goods sold (S				2					
3	Gross profit Subtrac				3	18	7,863			187,863
4a	Capital gain net incor	me (atta	ch Schedule D)		4a					
b	Net gain (loss) (Form 47	97, Part I	I, line 17) (attach Form 479)	7) -	4b					
С	Capital loss deductio	n for tru	sts		40					
		artnersh	ip and S corporation (at	ttach						
	Statement)				5	<b>\</b>				
6	Rent income (Schedi	ule C)			6					
	Unrelated debt-finance				7	/				·
8	Interest, annuities, royali	ties, and i	rents from controlled organia	zation (Schedule F	) 8'	<u>-</u>				···-
			01(c)(7), (9), or (17) organiz	(ع) ation (Schedule						
	Exploited exempt act Advertising income (				10					
11 12	Other income (See in		•		12	<del></del>				
13	Total. Combine lines		·		13		7,863		ibild a Karaire lute	187,863
				e (See instru					educt	
11562	connecte	d with	ot Taken Elsewher the unrelated businectors, and trustees (So	néss income.	7					
14	Compensation of offi	cers, dır	ectors, and trustees (Sc	hedule K	KECE	VED	1		14	
15	Salaries and wages			စ္ကြ		70	2		15	120,20
16	Repairs and mainten	ance		C139	NOV 25	2020	31		16	
17	Bad debts			14		ين ا			17	
18	Interest (attach sched	dule) (se	ee instructions)		OGDEN	<u> </u>	1		18	278
19	Taxes and licenses			h	ODEN		اما		19	
20	Depreciation (attach		<i>V</i> .	t		_	20		21b	,
21	•	ımea or	Schedule A and elsew	nere on return		كا	1a		22	
22 23	Depletion  Contributions to defe	rradi co-	nnenestion plans						23	3,979
23 24	Employee benefit pro		npensation plans						24	23,886
25	Excess exempt expe	-	chedule I)						25	
26	Excess readership co								26	
27	Other deductions (att					SEE S	TATE	MENT 1	27	113,238
28	Total deductions. A							_	28	261,582
29	<i>y</i>		ncome before net opera	ting loss deduct	on Subtrac	t line 28 from	line 13		29	-73,719
30			oss arising in tax years							
	instructions)	•	- •	_ <del>_</del>					30	
24/	. I Impolated by amage to	avabla u	nooma Subtract line 30	from line 20					31	-73.719

• <u>Form</u>	990 T (2019) THE HERBERT H. & GRACE A. DOW	38-1437485			Page <b>2</b>
Pa	rt 州 Total Unrelated Business Taxable income				
32	Total of unrelated business taxable income computed from all unrelated trades or l	businesses (see	- 1	1 1	
	instructions)		- 1	32	231,732
33	Amounts paid for disallowed fringes			3β	
34	Charitable contributions (see instructions for limitation rules)			34	
35	Total unrelated business taxable income before pre-2018 NOLs and specific deduce	ctions. Subtract line	-	1	
55	34 from the sum of lines 32 and 33		5	35	231,732
36	Deductions for net operating loss arising in tax years beginning before January 1, 2	2018 (see			
30	instructions)	20.0 (000	6	36	231,732
27	Total of unrelated business taxable income before specific deduction. Subtract line	36 from line 35		37	0
37		; 30 IIOIII IIIIE 33	8	38	1,000
38	Specific deduction (Generally \$1,000, but see line 38 instructions for exceptions)	antouthan line 07	0	30	1,000
39	Unrelated business taxable income. Subtract line 38 from line 37 If line 38 is gr	eater than line 37,		39	0
#161	enter the smaller of zero or line 37	·		39	
	Tax Computation				
40 41	Organizations Taxable as Corporations. Multiply line 39 by 21% (0.21)  Trusts Taxable at Trust Rates. See instructions for tax computation. Income tax	00	•	40	
77 (	the amount on line 39 from: Tax rate schedule or Schedule D (Form			41	
40		11041)		42	
42	Proxy tax. See instructions			43	
43	Alternative minimum tax (trusts only)			44	
44	Tax on Noncompliant Facility Income. See instructions			45	0
45	Total. Add lines 42, 43, and 44 to line 40 or 41, whichever applies			45 ]	
	it VII Tax and Payments	lace l			
46a	Foreign tax credit (corporations attach Form 1118; trusts attach Form 1116)	46a			
b	Other credits (see instructions)	46b		gonido'il	
C	General business credit. Attach Form 3800 (see instructions)	46c			
d	Credit for prior year minimum tax (attach Form 8801 or 8827)	46d			
е	Total credits. Add lines 46a through 46d			46e	
47	Subtract line 46e from line 45			47	
48	Other taxes Check if from Form 4255 Form 8611 Form 8697 Form 8866 Other (att	sch)		48	<del></del>
49	Total tax. Add lines 47 and 48 (see instructions)			49	0
50	2019 net 965 tax liability paid from Form 965-A or Form 965-B, Part II, column (k)	line 3		50	
51a	Payments: A 2018 overpayment credited to 2019	51a		Ljital daan	
b	2019 estimated tax payments	51b		1.54	
С	Tax deposited with Form 8868	51c		d White	
d	Foreign organizations: Tax paid or withheld at source (see instructions)	51d		664,756	
е	Backup withholding (see instructions)	51e		ij <del>u ki</del> jr	
f	Credit for small employer health insurance premiums (attach Form 8941)	51f			
g	Other credits, adjustments, and payments. Form 2439				
3	Form 4136 Other Total	51g			
52	Total payments. Add lines 51a through 51g			52	
53	Estimated tax penalty (see instructions). Check if Form 2220 is attached	1	• m	53	
54	<b>Tax due.</b> If line 52 is less than the total of lines 49, 50, and 53, enter amount owed	ı I		54	0
55	Overpayment. If line 52 is larger than the total of lines 49, 50, and 53, enter amou			55	<u>-</u>
56	Enter the amount of line 55 you want. Credited to 2020 estimated tax ▶	Refunde	d 🕨	56	
,	rt.VI. Statements Regarding Certain Activities and Other Info			00	······································
				····	Yes No
57	At any time during the 2019 calendar year, did the organization have an interest in over a financial account (bank, securities, or other) in a foreign country? If "YES," t	he organization may have	to file		material September
	FinCEN Form 114, Report of Foreign Bank and Financial Accounts. If "YES," enter				
	here >				X
58	During the tax year, did the organization receive a distribution from, or was it the gr	rantor of, or transferor to,	a foreig	gn trust?	X
59	If "YES," see instructions for other forms the organization may have to file. Enter the amount of tax-exempt interest received or accrued during the tax year	•			is a find marcial
	Under regalities of penury, I declare that I have examined this return, including accompanying schedules and st	atements, and to the best of my kno	wledge ar	nd belief, it	
Sig	true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which pr	reparer has any knowledge	Ü	M wi	ay the IRS discuss this retur ith the preparer shown below ee instructions)?
Her	e Denus Velesser   DEXECUTIVE 1	SIRECTOR		(s	
_	Sign thre of officer Date Title	1h			X Yes No
	Print/Type preparer's name Preparer's letterature	Date		Check	If PTIN
Paid	KELLIE M. BOS	111/1	3/2020	self-employed	P00448161
	arer Firm's name ANDREWS HOOPER PAVLIK PLC		Firm's	EIN Þ	38-3133790
Use					
	Firm's address MIDLAND, MI 48640-6824		Phone	no 98	9-835-7721
					Form <b>990-T</b> (2019)

Form	990-T (2019) THE H	ERBERT H.	& G	RACE	<u>A.</u>	DOW		1437485	Page <b>3</b>		
<u>Sch</u>	edule A - Cost of G							T METHOD	40.540		
1	Inventory at beginning of	-				Inventory at end		i i	6 42,549		
. 2	Purchases	2	22	3,446	7	Cost of goods s		macı			
3	Cost of labor	3				line 6 from line 5	Enter h				
4a	Additional sec 263A costs	4-				ın Part I, line 2		L	7 233,786		
	(attach schedule)	4a			8	Do the rules of se	ection 26	3A (with respect to	Yes No		
þ	Other costs (attach schedule)	4b				property produce	d or acq	uired for resale) apply			
_5	Total. Add lines 1 through	h 4b 5	27	6,335		to the organization	<u>n?</u>		X		
Sch	edule C – Rent Inco	me (From Real	l Prope	erty and	d Pe	rsonal Proper	ty Lea	sed With Real Pr	operty)		
(se	ee instructions)							<del></del>			
1 Des	<del></del>										
(1)	N/A										
(2)_		<del></del>									
(3)											
(4)								<u></u>			
		2. Rent receiv	ed or accru		-	<del>-</del>		4			
	(a) From personal property (if the					personal property (if the		, ,	ectly connected with the income		
	for personal property is more th			•		r personal property exce based on profit or incom		in columns 2(a) and 2(b) (attach schedule)			
	more than 50%)	······································	`		TOTAL IS	Dased Oil profit of Incom		<del>  '</del>			
(1)		<del></del>	<del></del> _					<del></del>			
(2)			ļ. <u>.</u>					<del> </del>			
(3)								<del></del>			
(4) T-1-	<u></u>		Total						····		
Tota								(b) Total deduction			
(C) I	otal income. Add totals of and on page 1, Part I, line	Columns 2(a) and a	2(D) Ent	er				Enter here and on page Part I, line 6, column			
	edule E – Unrelated		d Incor	ne (see	ınstı	ructions)		T date is mile of condition			
<u> </u>	edule L - Officiated	Debt-i mance	4 111001	110 (300	111311	uctions)	1	3. Deductions directly co	nnected with or allocable to		
						income from or		•	ced property		
	1 Description of debt-f	inanced property	atlocat			to debt-financed property	(a)	Straight line depreciation	(b) Other deductions		
			property					(attach schedule)	(attach schedule)		
(1)	N/A										
(2)											
(3)				<del></del>							
(4)											
	4 Amount of average	5. Average adjusted			6	Column			8 Allocable deductions		
	acquisition debt on or allocable to debt-financed	of or allocable to debt-financed prop				divided	7	Gross income reportable (column 2 x column 6)	(column 6 x total of columns		
	property (attach schedule)	(attach schedule			by	column 5		(colamin 2 x column 6)	3(a) and 3(b))		
(1)				•			%				
(2)							%				
(3)							%				
(4)							%				
								er here and on page 1,			
							Pa	rt I, line 7, column (A)	Part I, line 7, column (B)		
Tota	ls					•	· [				
<u>Tota</u>	l dividends-received ded	uctions included in	column	8				<b>&gt;</b>			

3	Ω	_	1	4	3	7	4	Q	5

Schedule F – Interest, Ann	nuities, Roya	Ities, and Re		rom Controlled			tions (see ir	nstructio	ns)	
Name of controlled organization		2 Employer tification number	,		4 To	tal of specified ments made	5 Part of column 4 that included in the controllin organization's gross incor		ing connected with income	
(1) <b>N/A</b>										
(2)							ļ			
(3)			_				ļ			
(4)							<u> </u>			
Nonexempt Controlled Organiz	ations		<del></del>			<del></del>		<del></del>		
7. Taxable Income		Net unrelated income ss) (see instructions)		9 Total of specific payments made		included in	olumn 9 that is the controlling s gross income	1	Deductions directly sected with income in column 10	
(1)										
(2)	i							ļ		
(3)										
(4)					_					
Totals					▶	Enter here a	ns 5 and 10 and on page 1, 3, column (A)	Ente	d columns 6 and 11 r here and on page 1, I, line 8, column (B)	
Schedule G - Investment	Income of a	Section 501(	c)(7),	(9), or (17)	Orga	anization (	see instructi	ons)		
1 Description of income		2. Amount of inc		3 Dedidirectly contacts at tack s	uctions onnected	3	4 Set-asides attach schedule)		5. Total deductions and set-asides (col. 3 plus col. 4)	
(1) <b>N/A</b>										
(2)										
(3)										
(4)										
Totals		Enter here and on Part I, line 9, colu	page 1, mn (A).					Ento Pa	er here and on page 1, rt I, line 9, column (B).	
Schedule I – Exploited Exc	empt Activity	/ Income. Ot	her Th						1.7	
Description of exploited activity	2 Gross unrelated business income from trade or business	3 Expense directly	es with of	4 Net income (lof from unrelated tr or business (colu 2 minus column If a gain, compu cols 5 through	oss) rade umn 3)	5 Gross incom from activity the is not unrelate business incom	at attribu	penses utable to umn 5	7 Excess exempt expenses (column 6 minus column 5, but not more than column 4)	
(1) N/A										
(2)										
(3)										
(4)						-				
Totals	Finter here and or page 1, Part I, line 10, col (A)	Poter here an page 1, Par line 10, col	nd on rt I, (B)						Enter here and on page 1, Part II, line 25	
Schedule J - Advertising	Income (see i	nstructions)								
Bartilla Income From I			a Con	solidated	Basis	3				
Name of periodical	2 Gross advertising income	3. Direct advertising c		4 Advertising gain or (toss) (c 2 minus col 3) a gain, comput cols 5 through	ol If	5 Circulation income		adership osts	7 Excess readership costs (column 6 minus column 5, but not more than column 4)	
(1) N/A										
(2)										
(3)										
(4)										
			T i							
Totals (carry to Part II, line (5))				<u>~</u>					Form <b>990-T</b> (2019	

Income From Periodicals Reported on a Separate Basis (For each periodical listed in Part II, fill in columns 2 through 7 on a line-by-line basis.) 4. Advertising 7 Excess readership 2 Gross gain or (loss) (col costs (column 6 3. Direct 5. Circulation 6 Readership advertising 2 minus col 3) If minus column 5, but 1 Name of periodical advertising costs costs ıncome not more than income a gain, compute cols 5 through 7 column 4) (1) N/A (2) (3) (4) Totals from Part I Enter here and on Enter here and on Enter here and page 1, Part I, page 1, Part I, on page 1, Part II, Inne 20 line 11, col (A) line 11, col (B) Totals, Part II (lines 1-5) Schedule K - Compensation of Officers, Directors, and Trustees (see instructions) 3. Percent of 4. Compensation attributable to time devoted to 1. Name 2 Title unrelated business business (1) N/A % (2) % (3) % (4) ▶ Total. Enter here and on page 1, Part II, line 14

Form **990-T** (2019)

# SCHEDULE M (Form 990-T)

#### Unrelated Business Taxable Income from an Unrelated Trade or Business

For calendar year 2019 or other tax year beginning

and endine

▶Go to www.irs gov/Form990T for instructions and the latest information.

Do not enter SSN numbers on this form as it may be made public if your organization is a 501(c)(3).

2019

OMB No 1545-0047

pen to Public Inspection for

231,732

Department of the Treasury
Internal Revenue Service
Name of the organization

THE HERBERT H. & GRACE A. DOW

Unrelated Business Activity Code (see instructions) ▶ 900099

Other income (See instructions, attach schedule)

Total. Combine lines 3 through 12

Employer Identification number 38 – 1437485

Describe the unrelated trade or business ▶ INVESTMENT UBI (A) Income (B) Expenses (C) Net Part IIII **Unrelated Trade or Business Income** Gross receipts or sales c Balance b Less returns and allowances 1c 2 2 Cost of goods sold (Schedule A, line 7) Gross profit Subtract line 2 from line 1c 3 4a Capital gain net income (attach Schedule D) 4a Net gain (loss) (Form 4797, Part II, line 17) (attach Form 4797) 4b isandra de la filia de la maioria de la composición de la composición de la composición de la composición de l La composición de la Capital loss deduction for trusts 4c С Income (loss) from partnership and S corporation (attach SEE STMT 1 5 231,732 5 6 Rent income (Schedule C) Unrelated debt-financed income (Schedule E) 7 Interest, annuities, royalties, and rents from a controlled 8 organization (Schedule F) Investment income of a section 501(c)(7), (9), or (17) 9 organization (Schedule G) 10 10 Exploited exempt activity income (Schedule I) 11 Advertising income (Schedule J) 11

Deductions Not Taken Elsewhere (See instructions for limitations on deductions ) (Deductions must be directly connected with the unrelated business income.)

12

13

231,732

14	Compensation of officers, directors, and trustees (Schedule K)	14	
15	Salaries and wages	15	
16	Repairs and maintenance	16	
17	Bad debts	17	
18	Interest (attach schedule) (see instructions)	18	
19	Taxes and licenses	19	
20	Depreciation (attach Form 4562)	MANAG	_
21	Less depreciation claimed on Schedule A and elsewhere on return	21b	0
22	Depletion	22	
23	Contributions to deferred compensation plans	23	
24	Employee benefit programs	24	
25	Excess exempt expenses (Schedule I)	25	
26	Excess readership costs (Schedule J)	26	
27	Other deductions (attach schedule)	27	
28	Total deductions. Add lines 14 through 27	28	
29	Unrelated business taxable income before net operating loss deduction. Subtract line 28 from line 13	29	231,732
30	Deduction for net operating loss arising in tax years beginning on or after January 1, 2018 (see		
	instructions)	30	
31	Unrelated business taxable income Subtract line 30 from line 29	31	231,732

For Paperwork Reduction Act Notice, see instructions.

Schedule M (Form 990-T) 2019

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38-1437485

## **Federal Statements**

#### Statement 1 - Form 990-T, Part II, Line 28 - Other Deductions

Description		Amount
OCCUPANCY	\$	62,731
TRAVEL		906
POSTAGE, MAILING SERVICE		18
MISCELLANEOUS		650
INFORMATION TECHNOLOGY & SOFTWARE		4,638
MEMBERSHIPS AND SUBSCRIPTIONS		232
BANK FEES		214
SUPPLIES		22,321
OTHER PROFESSIONAL FEES		21,263
PRINTING AND PUBLICATIONS		265
TOTAL	\$ <u></u>	113,238

38-1437485

### **Federal Statements**

Investment UBI .Statement 1 - Form 990-T, Schedule M, Line 5 - Income (Loss) from Partnerships or S-Corps

Name of Partnership or S-Corp	 Gross Income	Direct Deductions (Pa	rt. only)	Net Income
45-3135867 RCP FUND VIII LP	\$ 94,241	\$		\$ 94,241
36-4766444 RCP FUND IX LP	-19,897			-19,897
32-0457025 RCP FUND X LP	-13,771			-13,771
35-2491286 RCP DIRECT II LP	59,116			59,116
35-2550581 RCP FUND XI LP	-12,427			-12,427
37-1860110 RCP FUND XII LP	-28,128			-28,128
83-0557610 RCP FUND XIII LP	-41,583			-41,583
62-1570892 GT GLOBAL HEDGE LP	74,551			74,551
62-1451003 GT PARTNERS, L.P.	151,617			151,617
37-1884177 RCP DIRECT III	-31,423			-31,423
90-0852883 RCP SEC. OPP. II	-1,810			-1,810
38-3431245 NCTI LP	 1,246			1,246
TOTAL	\$ 231,732	\$	0	\$ 231,732