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	Form	990-T	E	Exempt Organization Bus			Tax Re	turn	<u> </u>	OMB No 1545-0047
•	. • •			(and proxy tax und		· · · ·	22	) [ [ 202	ا ۸	2019
			Forca	endar year 2019 or other tax year beginning DEC 1,  Go to www.irs.gov/Form990T for in	<u>-</u>	2015				
	Depar Interna	tment of the Treasury al Revenue Service	O 50	pen to Public Inspection for 1(c)(3) Organizations Only						
	A [	Check box if address changed		Name of organization (			er identification number yees' trust, see ilons )			
	B E	kempt under section	Print	VAN ANDEL INSTITUTE		52	-2000820			
	X		_ or	Number, street, and room or suite no. If a P.O. box	x, see ır	nstructions.				ed business activity code
		408(e) 220(e)	Туре	333 BOSTWICK AVENUE N.	E.				(000	,
	F	408A 530(a)		City or town, state or province, country, and ZIP o GRAND RAPIDS, MI 4950					5 <b>2</b> 30	00
	C Bo	ok value of all assets		F Group exemption number (See instructions.)	<b>&gt;</b>					
	1	, 815, 971, 8	77.	G Check organization type ► 501(c) corp	poration	501(c) trus	1	401(a)	trust	Other trust
	H En	ter the number of the	organiza	tion's unrelated trades or businesses.	1	Descri	e the only (or	first) un	related	
	tra	de or business here 🕨	► INC	COME FROM PASSIVE INVEST	TMEN	NTS . If only or	ie, complete Pa	rts I-V.	If more t	han one,
	des	scribe the first in the b	lank spa	ce at the end of the previous sentence, complete Pa	irts I an	d II, complete a Schedu	le M for each a	additiona	ai trade o	r
		siness, then complete						<u>_</u>		
K)				oration a subsidiary in an affiliated group or a parer	nt-subsi	idiary controlled group?	?		Yes	X No
'				ufying number of the parent corporation.						
L		e books are in care of		CIMOTHY J. MYERS, CFO			phone number	•	<u>616)</u>	234-5000
	Pa	rt I Unrelated	ırac	le or Business Income		(A) Income	(B) E	cpenses		(C) Net
		Gross receipts or sale					ĺ		1	
	b	Less returns and allow		c Balance	1c					
	2	Cost of goods sold (S		Α .	2		<del></del>		<del></del>	<u> </u>
	3	Gross profit, Subtract		/ 3	3		<b>-</b>		$\prec$	
		Capital gain net incom	•	•	4a	2,495		/		2,495.
	b			art II, line 17) (attach Form 4797)	4b 4c	<3,000.				<3,000.>
	_	Capital loss deduction		thip or an S corporation (attach statement)	5	92,086		MT 1	-+	92,086.
	5 6	Rent income (Schedu	•	ship of all 5 corporation (attach statement)	6	72,000	7 0.	<u> </u>	-	32,000.
	7	Unrelated debt-finance	-	ne (Schedule F)	7					
	-			nd rents from a controlled organization (Schedule F)	8	<del></del>	<u> </u>		· †	
	9			in 501(c)(7), (9), or (17) organization (Schedule G)		,	<del> </del>			· · · · · · · · · · · · · · · · · · ·
	10	Exploited exempt activ		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	10		<u> </u>			
	11	Advertising income (S	-	•	711				ľ	
	12	Other income (See ins		,	12	247	•			247.
		Total. Combine lines			13	91,828	•			91,828.
		rt II Deductio	ns No	t Taken Elsewhere (See instructions for	or limita	ations on deductions	.)			
		(Deductions	must b	e directly connected with the unrelated busin	ess inc	come.)				
	14	Compensation of off	icers, di	rectors, and trustees (Schedule K)					14	
	15	Salaries and wages							15	
	16	Repairs and mainten	ance				·		16	
	17	Bad debts							17	
	18	Interest (attach sche	dule) (se	ee instructions)					18	2 502
	19	Taxes and licenses	_		Γ	DEORALE			19	3,503.
	20	Depreciation (attach		· <i>F</i>	١.	RECENTE				
	21		timed or	Schedule A and elsewhere on return	9	[21a]			21b	
_	22	Depletion			B036	OCT <b>21</b> 202	21 19		22	
•	23	Contributions to defe		mpensation plans	m		RS-08C		23	•
	24	Employee benefit pro	_	hadula IX		OCDEN I			24	,,
•	25	Excess exempt exper			<u> </u>	OGDEN, L	11		25 26	
-	26 27	Excess readership co				SEE STA	темемт	٦	26	105,183.
7	27	/		•		SEE SIM	Thrance	١	28	108,686.
-	28 29	Total deductions. A			operating loss deduction. Subtract line 28 from line 13					
	29 30	/		oss arising in tax years beginning on or after Janual					29	<16,858.>
	JU	(see instructions)	crauny i	oss anomy in tax years beginning UH OF diter Janual	. , 1, 20	10			30	0.
	31	7	ayahle ir	ncome. Subtract line 30 from line 29				}	31	<16,858.>
				work Reduction Act Notice, see instructions.					<u> </u>	Form <b>990-T</b> (2019)
	323/0	1 01-21-20 LITA FO	" raper	TOTA 1150000001 AUT 110005, 355 1113010011118.						. 51111 - 5-5 - (2019)

	Form 99	QT (2019				52-	-2000820 Page 2
	Part	: M	Total Unrelated Business Taxable Income	•	·		
	32	Total o	of unrelated business taxable income computed from all unrelated trades or businesses (see i	nstructions)	- 1	32	<16,858.>
	33	Amoun	nts paid for disallowed fringes		•	33	
	34	Charita	able contributions (see instructions for limitation rules)			34	0.
	35	Total u	inrelated business taxable income before pre-2018 NOLs and specific deduction. Subtract line	34 from the su	m of lines 32 and 33	36	<16,858.>
	36	Deduct	tion for net operating loss arising in tax years beginning before January 1, 2018 (see instruct	ions)		36	
	37	Total of	of unrelated business taxable income before specific deduction. Subtract line 36 from line 35		7		<16,858.>
	38	Specifi	ic deduction (Generally \$1,000, but see line 38 instructions for exceptions)		8	38	1,000.
	39	Unrela	ated business taxable income. Subtract line 38 from line 37. If line 38 is greater than line 37	,			
1	<u> </u>	enter th	he smaller of zero or line 37			39	<16,858.>
	Part	yí:	Tax Computation		<del></del>		
	40	Organi	izations Taxable as Corporations. Multiply line 39 by 21% (0.21)		<b>•</b>	40	<u></u>
	41	Trusts	Taxable at Trust Rates. See instructions for tax computation, Income tax on the amount on	line 39 from	:		_
		X	Fax rate schedule or Schedule D (Form 1041)		<b>&gt;</b>	41	0.
	42	Proxy t	tax. See instructions		<b>&gt;</b>	42	
	43	Alterna	ative minimum tax (trusts only)			43	
11	44	Tax on	Noncompliant Facility Income. See instructions			44	
11			Add lines 42, 43, and 44 to line 40 or 41, whichever applies			45	0.
	Part		Tax and Payments	1 1		,	<del> </del>
	46 a	Foreign	n tax credit (corporations attach Form 1118; trusts attach Form 1116)	46a	·	۱ ، ا	
	b	Other o	credits (see instructions)	46b		4	
	C		al business credit. Attach Form 3800	46c		<b>-</b>  -	
	d		for prior year minimum tax (attach Form 8801 or 8827)	46d			
	е		credits. Add lines 46a through 46d			46e	
	47		ict line 46e from line 45			47	0.
	48		taxes. Check if from: Form 4255 Form 8611 Form 8697 Form 88	66 Ot	her (attach schedule)	48	
	49		ax. Add lines 47 and 48 (see instructions)		-	49	0.
	50		net 965 tax liability paid from Form 965-A or Form 965-B, Part II, column (k), line 3	15. 1	E 100	50	0.
		•	ents: A 2018 overpayment credited to 2019	1 1	5,190.	4	
			estimated tax payments	51b		-	
			posited with Form 8868 n organizations: Tax paid or withheld at source (see instructions)	51c		┥	
		_	p withholding (see instructions)	51e		1	
			for small employer health insurance premiums (attach Form 8941)	51f		1	
			credits, adjustments, and payments: Form 2439	3"		1	
	A		Form 4136 Other Total	51g		-	
	52		payments. Add lines 51a through 51g	L-V-H-	·	52	5,190.
	53	•	ited tax penalty (see instructions). Check if Form 2220 is attached			53	
	54		ie. If line 52 is less than the total of lines 49, 50, and 53, enter amount owed		▶	54	
	55		avment. If line 52 is larger than the total of lines 49, 50, and 53, enter amount overpaid		10	55.	5,190.
ı).	56	Enter th	he amount of line 55 you want: Credited to 2020 estimated tax	190.	Refunded	56	0.
Ĭ	Part	VI :	Statements Regarding Certain Activities and Other Informatio	<b>n</b> (see ins	tructions)		
	57	At any	time during the 2019 calendar year, did the organization have an interest in or a signature or	other author	rity		Yes No
		over a 1	financial account (bank, securities, or other) in a foreign country? If "Yes," the organization m	nay have to f	le		
		FinCEN	Form 114, Report of Foreign Bank and Financial Accounts. If "Yes," enter the name of the foi	reign country	1		
		here					X
	58	During	the tax year, did the organization receive a distribution from, or was it the grantor of, or trans	sferor to, a f	oreign trust?		X
			"see instructions for other forms the organization may have to file.				
	59		he amount of tax exempt interest received or accrued during the tax year		Aba bass of an in-		allof (the true
	Sign	C	Inder penalies of perjuy, i declare that I have examined this return, including accompanying schedules and stai orrect, and complete. Deplaration of preparer (other than taxpayer) is based on all information of which preparer	has any know	edge	oge and be	aller, it is true,
	Here		Marker 10/14/2021 CED			•	discuss this return with
			Signature of difficel Date Title			ne preparer nstructions)	shown below (see
							, 22 100
			Print/Type preparer's name Preparer's signature Dat			ıf PTIN	I
	Paid		ANNE FULTON anne fulton 10	0/13/21	self- employed		00941863
	•	arer	- DETOTEMEN MAN TER		Firm's EIN		5-1065772
	Use	Only	50 SOUTH SIXTH STREET	<del></del>	THIII S EIN		, 1000114
			Firm's address MINNEAPOLIS, MN 55402		Phone no 6	512-3	397-4000
-	923711 (	01-27-20		<del></del>	1. 2000 1101		Form <b>990-T</b> (2019)

Page 3

Schedule A - Cost of Good	s Sold. Enter	method of inver	ntory v	aluation N/A		·		
1 Inventory at beginning of year	1		6	Inventory at end of year	ır .		6	
2 Purchases	2			Cost of goods sold. St	ubtract I	ine 6		
3 Cost of labor	3		_	from line 5. Enter here	and in f	Part I,		
4a Additional section 263A costs				line 2			7	<u> </u>
(attach schedule)	4a		8	Do the rules of section	263A (	with respect to		Yes No
<ul><li>Other costs (attach schedule)</li></ul>	4b		_	property produced or a	cquired	l for resale) apply to		- <u></u>
5 Total. Add lines 1 through 4b	5		<u> Т</u>	the organization?				X
Schedule C - Rent Income (see instructions)	(From Real	Property and	d Pers	sonal Property L	ease	d With Real Prop	erty)	
1. Description of property								
(1)								
(2)								
(3)								
(4)		- 11.				·		
	<u></u> :	ed or accrued				3(a) Deductions directly	connec	ted with the income in
(a) From personal property (if the percentage of rent for personal property is more than 10% but not more than 50%) (b			personai	onal property (if the percentag property exceeds 50% or if ed on profit or income)	ge	columns 2(a) ar	nd 2(b) (	attach schedule)
(1)					•			
(2)								
(3)								
(4)								
Total	0.	Total			0.			
(c) Total income. Add totals of columns here and on page 1, Part I, line 6, column	n (A)	<b>•</b>		<del></del>	0.	(b) Total deductions. Enter here and on page 1, Part I, line 6, column (B)	<b>_</b>	0 .
Schedule E - Unrelated Det	ot-Financeu	income (see	e instru	ctions)		3. Deductions directly con		with or allegable
			2	. Gross income from		to debt-finance	ed prop	perty
1. Description of debt-fi	nanced property			or allocable to debt- financed property	(a)	Straight line depreciation (attach schedule)		(b) Other deductions (attach schedule)
(1)								
(2)								
(3)								
(4)							Ι.	
4. Amount of average acquisition debt on or allocable to debt-financed property (attach schedule)	of or a	adjusted basis allocable to need property n schedule)	6	Column 4 divided by column 5		7. Gross Income reportable (column 2 x column 6)		8. Allocable deductions (column 6 x total of columns 3(a) and 3(b))
(1)				%				
(2)				%			1	
(3)				%			1	
(4)			1 -	%				
	•			······································		inter here and on page 1, Part I, line 7, column (A)		Enter here and on page 1, Part I, line 7, column (B)
Totals				•		0	.	0 .
Total dividends-received deductions	ncluded in columi	ı 8			<del></del>		7	0.

23   30   30   30   30   30   30   30					Exempt (	Controlled O	rganızatı	ons						
23   30   30   30   30   30   30   30	Name of controlled organization	ation	ıdentıfı	cation	3. Net unr (loss) (see	elated income instructions)			made included in		included in the controlling		connected with income	
(3)   (4)   (1)   (2)   (3)   (4)   (2)   (2)   (3)   (4)   (2)   (3)   (4)	(1)													
(4)  New or invalidation come plose)  7. Takeble income  8. Net invalidation come plose) (pase instructions)  8. Net invalidation come plose) (pase instructions)  9. Total of specified perpensive medial perpensive medial perpensive medial perpensive in the controlling agranazion's green income.  10. Part of columns 5 and 10.  Celler free and on plags 1, Part I, line 8, column (A)  10. Description of income  11. Description of income  12. Amount of income  13. Description (see instructions)  23. Description (see instructions)  14. Set existed (pase instructions)  5. Total dedictification (political plass cost 4)  (pase instructions)  5. Total dedictification (political plass cost 4)  (pase instructions)  6. Net income plose) (pase instructions)  6. Net income plose) (pase instructions)  7. Exists assumptive columns of pase 1, Part I, line 8, column (B) (pase instructions)  6. Net income plose) (pase instructions)  7. Exists assumptive columns or pase 1, Part I, line 8, column (B) (pase instructions)  6. Net income plose) (pase instructions)  7. Exists assumptive columns or pase 1, Part I, line 8, column (B) (pase instructions)  7. Exists assumptive columns or pase 1, Part I, line 8, column (B) (pase instructions)  9. Net income plose) (pase instructions)  1. Description of income (pase instructions)  2. Gross (pass instructions)  4. Net income plose) (pass instructions) (pass instructions	(2)				<u> </u>									
Nonexempt Controlled Organizations   S. Net intellect income food   S. Total of specified payments   10, Perior column 8 that is included in the correcting organizations of great markets   11, Description of media   11, Description of	(3)				.						$-\downarrow$	<del> </del>		
1, Description of Exempt Activity Income Offices Proceedings   1, Not Income Income Offices Proceedings   1, Description of Exempt Activity Income Offices Proceedings   1, Description of Exempt Provided Description Offices Proceedings   1, Description Offices Procee	(4)				<u> </u>							• 40		
(1) (2) (3) (4)  Add columns 5 and 10 Enter here and on page 1, Part 1. En	· · · · · · · · · · · · · · · · · · ·	nizations			<del> </del>			<del></del>						
29	7. Taxable Income				9. Total		nents	10. Part of colur in the controlli gross	nn 9 thai ng organ income	t is included ization's				
Add columns 5 and 1)   Enter here and on page 1, Part 1, line 8, column (8)   Column 5 and 10   Enter here and on page 1, Part 1, line 8, column (8)   Column 5 and 10   Enter here and on page 1, Part 1, line 8, column (8)   Column 5 and 10   Enter here and on page 1, Part 1, line 8, column (8)   Column 5 and 10   Enter here and on page 1, Part 1, line 8, column (8)   Column 5 and 10   Enter here and on page 1, Part 1, line 8, column (8)   Column 5 and 10   Enter here and on page 1, Part 1, line 8, column (8)   Column 5 and 10   Enter here and on page 1, Part 1, line 8, column (8)   Column 5 and 10   Enter here and on page 1, Part 1, line 8, column (8)   Column 5 and 10   Enter here and on page 1, Part 1, line 8, column (8)   Column 5 and 10   Enter here and on page 1, Part 1, line 8, column (8)   Column 5 and 10   Enter here and on page 1, Part 1, line 8, column (8)   Column 5 and 10   Enter here and on page 1, Part 1, line 8, column (8)   Column 5 and 10   Column 6 a	(1)													
Add columns 5 and 10 Enter here and on page 1, Part 1, line 8, column (A)  (see instructions)  1. Description of income  2. Amount of income  2. Amount of income  3. Description of (effect here and on page 1, Part 1, line 8, column (A)  (see instructions)  (1)  (2)  (3)  (4)  Enter here and on page 1, Part 1, line 8, column (B)  (see instructions)  (see instructions)  (see instructions)  (a)  (b)  Enter here and on page 1, Part 1, line 8, column (C)  (see instructions)  (see instructions)  (see instructions)  (col 3 plus cel 4)  (col 4 plus cel 4)  (col 3 plus cel 4)  (col 4 plus cel 4)  (col 4 plus cel 4)  (col 4 plus cel 4)  (col 6 plus cel 4)  (col 7 plus cel 4)  (col 7 plus cel 4)  (col 8 plus cel 4)  (col 8 plus cel 4)  (col 9 plus cel 4)  (col 9 plus cel 4)  (col 1 plus cel 4)  (col 2 plus cel 4)  (col 2 plus cel 4)  (col 3 plus cel 4)  (col 1 plus cel 4)  (col 2 plus cel 4)  (col 3 plus cel 4)  (col 3 plus cel 4)  (col 3 plus cel 4)  (col 4 plus cel 4)  (col 6 plus cel 4)  (col 6 plus cel 4)  (col 7 page 1, pert 1, line 8, column (C)  (col 7 pert 1, line 8, column (C)  (col 8 plus cel 4)  (col 9 plus cel 4)  (col 9 plus cel 4)  (col 1 plus cel 4)  (col 2 plus cel 4)  (col 3 plus cel 4)  (col 2 plus cel 4)  (col 3 plus cel 4)  (col 3 plus cel 4)  (col 4 plus cel 4)  (col 2 plus cel 4)  (col 4 plus cel 4)  (col 2 plus cel 4)  (col 2 plus cel 4)  (col 3 plus c	(2)	<u></u>												
Add columns 6 and 11 Enter here and on page 1, Part 1, line 8, column (A)  Schedule G - Investment Income of a Section 501(c)(7), (9), or (17) Organization  (see instructions)  1. Description of income  2. Amount of income  2. Amount of income  2. Amount of income  3. Described (without achievedule)  (1)  (2)  (3)  (4)  Enter here and on page 1, Part 1, line 8, column (B)  For the search or page 1, Part 1, line 8, column (	(3)													
Fotals  Column (A)  Column (A)  Column (B)  Column (C)  Column (C)	(4)	<u> </u>												
Schedule G - Investment Income of a Section 501(c)(7), (9), or (17) Organization  (see instructions)  1. Description of income  2. Amount of income  2. Amount of income  3. Deductions derively convention (statch schedule) (statc								Enter here and	on page	1, Part I,	Enter h	are and on page 1, Part I,		
(see instructions)  1. Description of income 2. Amount of income 2. Amount of income 3. Description of income directly connected (estach schedule) (estach s	Totals						▶			0.		0.		
1. Description of income 2. Amount of income directly connected (attach schedule) (effects echedule) (effect			ne of a S	Section	501(c)(7	'), (9), or ( <sup>·</sup>	17) Org	anization						
(2) (3) (4)    Enter here and on page 1, Part I, line 9, column (8)   Part I, line 9, column (9)   Part	1. Des	scription of inco	me			2. Amount of	Income	directly conne	cted	4. Set-asides (effach schedule)		4. Set-asides		and set-asides
(2) (3) (4)    Enter here and on page 1, Part I, line 9, column (6)   Part I, line 9, column (7)   Part I, line 9, column (8)   Part I, line 9, column (9)   Part	(1)													
Enter here and on page 1, Part 1, line 9, column (R)	(2)				•									
Enter here and on page 1,   Part I, line 9, column (8)	(3)													
Part   line 9, column (A)   Part   line 9, column (B)	(4)													
(see instructions)  1. Description of exploited activity  1. Description of exploited activity bit includes a directly connected with production of unrelated and exploited activity bit includes a directly connected with production of unrelated and exploited activity bit includes activity bit includes activity bit includes a directly connected with production of unrelated and exploited activity bit includes activities														
(See instructions)  1. Description of exploited activity urrestated business income from trade or business (column 2 minus column 3) if a gan, compute cols 5 through 7  1. Description of exploited activity urrestated business income from trade or business (column 2 minus column 3) if a gan, compute cols 5 through 7  1. Description of exploited activity urrestated business income industrial activity and or bus	Totals									····		0.		
1. Description of exploited activity uriseted business income from trade or business (column 3, 5, 6, recenses at thousands business income from trade or bu	=	-	Activity	Incom	e, Other	Than Adv	ertisin	g Income						
(2) (3) (4)  Enter here and on page 1, Part 1, line 10, col (A)  O . O .  Schedule J - Advertising Income (see Instructions)  Part I Income From Periodicals Reported on a Consolidated Basis  1. Name of periodical  2. Gross advertising uncome  3. Direct advertising gain or (loss) (col 2 minus col 3) if a gain, compute col 3 if a gain, compute col 3 if a gain, compute col 3 if a gain, compute col 5 through 7  (1) (2) (3) (4)		unrelated incom	business e from	directly with pi of ur	connected roduction rrelated	from unrelated business (co minus colum gain, compute	trade or lumn 2 n 3) If a cols 5	from activity to is not unrelate	from activity that attributable to		expenses (column 6 minus column 5, but not more than			
(3) (4)  Enter here and on page 1, Part I, line 10, col (A) Ine 10, col (A)  Schedule J - Advertising Income (see instructions)  Part I Income From Periodicals Reported on a Consolidated Basis  1. Name of periodical  2. Gross advertising income  2. Gross advertising costs advertising costs (soil 2 minus column 4)  (1) (2) (3) (4)	(1)	.]												
(4)  Enter here and on page 1, Part 1, line 10, cot (A)  Schedule J - Advertising Income (see instructions)  Part I Income From Periodicals Reported on a Consolidated Basis  1. Name of periodical  2. Gross advertising encome advertising costs advertising costs advertising costs (solumn 6 minus col 3) If a gain, compute cols 5 through 7  (1)  (2)  (3)  (4)	(2)													
Enter here and on page 1, Part I, line 10, cot (A)  Schedule J - Advertising Income (see instructions)  Part I Income From Periodicals Reported on a Consolidated Basis  1. Name of periodical  2. Gross advertising income  3. Direct advertising gain or (loss) (cot 2 minus cols 5 through 7  (1)  (2)  (3)  (4)	(3)													
Schedule J - Advertising Income (see instructions)  Part I Income From Periodicals Reported on a Consolidated Basis  1. Name of periodical 2, Gross advertising income 1. Name of periodical 3. Direct advertising costs of 1. Name of periodical 2. Gross advertising costs of 1. Name of periodical 3. Direct advertising costs of 1. Name of periodical 3. Direct advertising costs of 1. Name of periodical 3. Direct advertising costs of 1. Name of periodical 3. Direct advertising costs of 1. Name of periodical 3. Direct advertising costs of 1. Name of periodical 3. Direct advertising costs of 1. Name of periodical 4. Advertising gain or (loss) (col 2 minus col 3) If a gain, compute costs 5 through 7  (1) (2) (3) (4) (4) (5) (6) (6) (7) (1) (1) (1) (1) (1) (1) (1) (1) (1) (1	(4)	page 1	, Part I,	page	1, Part I,		J	-	<u></u>			on page 1,		
Part I Income From Periodicals Reported on a Consolidated Basis  2. Gross advertising advertising costs Income  3. Direct advertising costs or income  4. Advertising gain or (loss) (col 2 minus cols 3). If a gain, compute cols 5 through 7  5. Circulation income  6. Readership costs (column 6 minus column 5, but not more than column 4)  (1)  (2)  (3)  (4)	Totais 🕨	<u>·                                    </u>										0.		
1. Name of periodical  2. Gross advertising advertising costs  3. Direct advertising costs  3. Direct advertising gain or (loss) (col 2 minus cols 5 through 7  5. Circulation income  6. Readership costs (column 6 minus column 4)  (1)  (2)  (3)  (4)	Schedule J - Advertis	ing Incor	ne (see ii	nstructio	ns)							<del> </del>		
1. Name of periodical advertising advertising costs advertising costs advertising costs (advertising costs) advertising costs (3) if a gain, compute cols 5 through 7  (1)  (2)  (3)  (4)	Part I Income From	Periodic	als Repo	orted o	n a Cons	solidated	Basis							
(2) (3) (4)	1. Name of periodical		advertising	adv		or (loss) (co	ol 2 minus un, compute		on			costs (column 6 minus column 5, but not more		
(2) (3) (4)	(1)													
(3) (4)	(2)													
(4)	(3)													
	(4)					<u> </u>								
'otals (carry to Part II, line (5)) ▶ 0 . 0 . 0 . 0 .														
	Totals (carry to Part II, line (5))	<b>•</b>	(	).[	0							0.		

%

Form 990-T (2019) VAN ANDEL INSTITUTE Page 5 Part II | 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 gain or (loss) (col. 2 minus col. 3). If a gain, compute cols. 5 through 7 7. Excess readership costs (column 6 minus column 5, but not more than column 4) 2. Gross advertising income 3. Direct 5. Circulation 6. Readership 1. Name of periodical advertising costs (1) (2) (3) (4) Totals from Part I 0. 0. 0. Enter here and on page 1, Part I, line 11, col (A) Enter here and on page 1, Part I, line 11, col (B) Enter here and on page 1, Part II, line 26 Totals, Part II (lines 1-5) 

Chedule K - Compensation of Officers, Directors, and Trustees

■ Compensation of Officers 

■ 0. (see instructions) 3. Percent of time devoted to business 4. Compensation attributable to unrelated business 2. Title 1. Name (1) % % (2) % (3)

Form 990-T (2019)

0.

(4)

Total. Enter here and on page 1, Part II, line 14

## **SCHEDULE I** (Form 1041)

Department of the Treasury

Internal Revenue Service

**Alternative Minimum Tax - Estates and Trusts** 

Attach to Form 1041.

► Go to www.irs.gov/Form1041 for instructions and the latest information.

OMB No 1545-0092

Nam	e of estate or trust			Employe	r identification number
VA	N ANDEL INSTITUTE			52-2	2000820
Pa	rt I   Estate's or Trust's Share of Alternative Minimur	n Taxable Inco	me	•	
1	Adjusted total income or (loss) (from Form 1041, line 17). ESBTs, se	ee instructions		1	<16,858.>
2	Interest			2	
3	Taxes			3	3,503.
4	Refund of taxes			4	( 247.)
5	Depletion (difference between regular tax and AMT)			5	
6	Net operating loss deduction  Enter as a positive amount			6	
7	Interest from specified private activity bonds exempt from the regula	ar tax		7	
8	Qualified small business stock (see instructions)			8	
9	Exercise of incentive stock options (excess of AMT income over reg	ular tax income)		9	
10	Other estates and trusts (amount from Schedule K-1 (Form 1041), b	ox 12, code A)		10	
11	Disposition of property (difference between AMT and regular tax gain	n or loss)		11	1,467.
12	Depreciation on assets placed in service after 1986 (difference between	reen regular tax and	I AMT)	12	
13	Passive activities (difference between AMT and regular tax income of	or loss)		13	13,823.
14	Loss limitations (difference between AMT and regular tax income or	loss)		14	
15	Circulation costs (difference between regular tax and AMT)			15	· · · • · · · · · · · · · · · · · · · ·
16	Long-term contracts (difference between AMT and regular tax income	ne)		16	
17	Mining costs (difference between regular tax and AMT)			17	<del>,</del>
18	Research and experimental costs (difference between regular tax ar	nd AMT)		18	
19	Income from certain installment sales before January 1, 1987			19	[
20	Intangible drilling costs preference			20	
21	Other adjustments, including income-based related adjustments			21	<1,013.>
22	Alternative tax net operating loss deduction (See the instructions for	r the limitation that a	applies.)	22	
23	Adjusted alternative minimum taxable income. Combine lines 1 thro	ugh 22		23	675.
	Note: Complete Part II below before going to line 24.		1 1		
24	Income distribution deduction from Part II, line 42	N/A	24		
25	Estate tax deduction (from Form 1041, line 19)	N/A	25		
26	Add lines 24 and 25			26	
27	Estate's or trust's share of alternative minimum taxable income. Sub	stract line 26 from li	ne 23	27	675.
	If line 27 is:  \$\bigset\$ \$25,000 or less, stop here and enter -0- on Form 1041, Schedule	G, line 1c. The esta	ate or trust isn't		

- liable for the alternative minimum tax.
- Over \$25,000, but less than \$183,500, go to line 43.
- \$183,500 or more, enter the amount from line 27 on line 49 and go to line 50.

Pa	art II   Income Distribution Deduction on a Minimum Tax Basis N/A		
28	Adjusted alternative minimum taxable income (see instructions)	28	
29	Adjusted tax-exempt interest (other than amounts included on line 7)	29	
30	Total net gain from Schedule D (Form 1041), line 19, column (1). If a loss, enter -0-	30	
31	Capital gains for the tax year allocated to corpus and paid or permanently set aside for charitable		
	purposes (from Form 1041, Schedule A, line 4)	31	
32	Capital gains paid or permanently set aside for charitable purposes from gross income (see instructions)	32	
33	Capital gains computed on a minimum tax basis included on line 23	33 (	
34	Capital losses computed on a minimum tax basis included on line 23. Enter as a positive amount	34	
35	Distributable net alternative minimum taxable income (DNAMTI). Combine lines 28 through 34. If zero		<u> </u>
	or less, enter -0-	35	
36	Income required to be distributed currently (from Form 1041, Schedule B, line 9)	36	
37	Other amounts paid, credited, or otherwise required to be distributed (from Form 1041, Schedule B, line 10)	37	
38	Total distributions. Add lines 36 and 37	38	
39	Tax-exempt income included on line 38 (other than amounts included on line 7)	39	
40	Tentative income distribution deduction on a minimum tax basis. Subtract line 39 from line 38	40	

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 1041.

Schedule I (Form 1041) (2019)

Schedule I (Form 1041) (2019) VAN ANDEL INSTITUTE					5	2-2000820 Page 2
<b>IP</b> a	rt II   Income Distribution Deduction on a Minimum Tax Basis	(conti	nue	d)	N/	Α
41	Tentative income distribution deduction on a minimum tax basis. Subtract line 29	from li	ne S	35.		
	If zero or less, enter -0-				41	
42	Income distribution deduction on a minimum tax basis. Enter the smaller of lir	ne 40 o	r lın	e 41.		:
	Enter here and on line 24				42	<u> </u>
Pa	rt III   Alternative Minimum Tax					
43	Exemption amount				43	\$25,000
44	Enter the amount from line 27	44	<u> </u>		վ՝	
45	Phase-out of exemption amount	45	L_	\$83,500	r	
46	Subtract line 45 from line 44. If zero or less, enter -0-	46	L_		_	
47	Multiply line 46 by 25% (0.25)				47	<del></del>
48	Subtract line 47 from line 43 If zero or less, enter -0-				48	
49	Subtract line 48 from line 44				49	
50	Go to Part IV of Schedule I to figure line 50 if the estate or trust has qualified dividends or ha	as a gaii	n on	lines 18a and 19		
	of column (2) of Schedule D (Form 1041) (as refigured for the AMT, if necessary). Otherwis	e, if line	49	IS;		
	• \$194,800 or less, multiply line 49 by 26% (0.26).					
	<ul> <li>Over \$194,800, multiply line 49 by 28% (0.28) and subtract \$3,896 from the result</li> </ul>	ult			50	
51	Alternative minimum foreign tax credit (see instructions)				51	
52	Tentative minimum tax. Subtract line 51 from line 50				52	<u> </u>
53	Enter the tax from Form 1041, Schedule G, line 1a (minus any foreign tax credit fr				53	
54	Alternative minimum tax. Subtract line 53 from line 52. If zero or less, enter -0	Enter h	iere	and on		
ID.	Form 1041, Schedule G, line 1c				54	
IPE	rt IV   Line 50 Computation Using Maximum Capital Gains Rate			- I A		<u> </u>
	Caution: If you didn't complete Part V of Schedule D (Form 1041), the Schedule D					
	or the Qualified Dividends Tax Worksheet in the Instructions for Form 1041, see the	ne instr	uct	ons	1	
	before completing this part.				-	
55	Enter the amount from line 49  Enter the amount from line 35 of Schodule D (Form 1041), line 13 of the Schodule D Tay	I	t		55_	
56	Enter the amount from line 26 of Schedule D (Form 1041), line 13 of the Schedule D Tax Worksheet, or line 4 of the Qualified Dividends Tax Worksheet in the Instructions for					
	Form 1041, whichever applies (as refigured for the AMT, if necessary)	56	ŀ		1	
57	Enter the amount from Schedule D (Form 1041), line 18b, column (2)	30			┦ `	
31	(as refigured for the AMT, if necessary). If you didn't complete	1				
	Schedule D for the regular tax or the AMT, enter -0-	57				
58	If you didn't complete a Schedule D Tax Worksheet for the regular tax or the	<u> </u>				
-	AMT, enter the amount from line 56. Otherwise, add lines 56 and 57 and enter	1				
	the smaller of that result or the amount from line 10 of the Schedule D Tax		l			ļ
	Worksheet (as refigured for the AMT, if necessary)	58				
59	Enter the smaller of line 55 or line 58				59	1
60	Subtract line 59 from line 55				60	
61	If line 60 is \$194,800 or less, multiply line 60 by 26% (0.26). Otherwise, multiply lin	e 60 b	у			
	28% (0.28) and subtract \$3,896 from the result			•	61	
62	Maximum amount subject to the 0% rate	62		\$2,650		
63	Enter the amount from line 27 of Schedule D (Form 1041), line 14 of the Schedule D					
	Tax Worksheet, or line 5 of the Qualified Dividends Tax Worksheet in the Instructions					
	for Form 1041, whichever applies (as figured for the regular tax). If you didn't					
	complete Schedule D or either worksheet for the regular tax, enter the amount	]				
	from Form 1041, line 23, if zero or less, enter -0-	63	<u> </u>		_	
64	Subtract line 63 from line 62. If zero or less, enter -0-	64	<u> </u>		_	
65	Enter the smaller of line 55 or line 56	65	L		_	
66	Enter the smaller of line 64 or line 65. This amount is taxed at 0%	66	<u> </u>		4	
<u>67</u>	Subtract line 66 from line 65	67	<u>.                                    </u>			L
04004	22 12-12-10				Sche	dule I (Form 1041) (2019)

Schedule I (Form 1041) (2019)

#### SCHEDULE D (Form 1041)

Department of the Treasury Internal Revenue Service **Capital Gains and Losses** 

► Attach to Form 1041, Form 5227, or Form 990-T.

▶ Use Form 8949 to list your transactions for lines 1b, 2, 3, 8b, 9 and 10.

► Go to www.irs.gov/F1041 for instructions and the latest information.

OMB No. 1545-0092

2019

Employer identification number Name of estate or trust 52-2000820 VAN ANDEL INSTITUTE Yes X No Did you dispose of any investment(s) in a qualified opportunity fund during the tax year? If "Yes," attach Form 8949 and see its instructions for additional requirements for reporting your gain or loss. Note: Form 5227 filers need to complete only Parts I and II. Short-Term Capital Gains and Losses-Generally Assets Held One Year or Less (see instructions) (h) Gain or (loss) See instructions for how to figure the amounts to enter on the lines below. (d) (e) (g) Adjustments Subtract column (e) Proceeds Cost to gain or loss from from column (d) and (sales price) (or other basis) Form(s) 8949, Part I This form may be easier to complete if you round off cents to whole dollars. combine the result line 2, column (g) with column (g) 1 a Totals for all short-term transactions reported on Form 1099-B for which basis was reported to the IRS and for which you have no adjustments (see instructions). However, if you choose to report all these transactions on Form 8949, leave this line blank and go to line 1b 1 b Totals for all transactions reported on Form(s) 8949 with Box A checked Totals for all transactions reported on Form(s) 8949 with Box B checked Totals for all transactions reported on Form(s) 8949 with Box C checked 1,333. Short-term capital gain or (loss) from Forms 4684, 6252, 6781, and 8824 <55,991.> SEE STATEMENT 6 Net short-term gain or (loss) from partnerships, S corporations, and other estates or trusts Short-term capital loss carryover. Enter the amount, if any, from line 9 of the 2018 Capital Loss Carryover Worksheet Net short-term capital gain or (loss). Combine lines 1a through 6 in column (h). Enter here and on line 17. <54,658.> column (3) on page 2 Part II | Long-Term Capital Gains and Losses-Generally Assets Held More Than One Year (see instructions) See instructions for how to figure the amounts to enter on the lines below. (h) Gain or (loss) (e) (d) (g) Adjustments Subtract column (e) Proceeds Cost to gain or loss from from column (d) and (or other basis) (sales price) This form may be easier to complete if you round off cents to whole dollars. Form(s) 8949, Part II combine the result with column (g) line 2, column (g) 8 a Totals for all long-term transactions reported on Form 1099-B for which basis was reported to the IRS and for which you have no adjustments (see instructions). However, if you choose to report all these transactions on Form 8949, leave this line blank and go to line 8b 8 b Totals for all transactions reported on Form(s) 8949 with Box D checked Totals for all transactions reported on Form(s) 8949 with Box E checked Totals for all transactions reported on Form(s) 8949 with 10 2,000. Long-term capital gain or (loss) from Forms 2439, 4684, 6252, 6781, and 8824 11 11 SEE STATEMENT 7 <69.942.> 12 Net long-term gain or (loss) from partnerships, S corporations, and other estates or trusts 13 Capital gain distributions 13 .794. 14 Gain from Form 4797, Part I 14 Long-term capital loss carryover. Enter the amount, if any, from line 14 of the 2018 Capital Loss Carryover Worksheet 15 Net long-term capital gain or (loss). Combine lines 8a through 15 in column (h). Enter here and on line 18a, <53,148.> column (3) on page 2

Schedule D (Form 1041) 2019 VAN ANDEL INST	TITUTE				52-	200	0820 Page
Part III Summary of Parts I and II			(1) Beneficiaries'	(2)	Estate	's	(3) Total
Caution: Read the instructions before comp	pleting this part				trust's		
17 Net short-term gain or (loss)		17		< 54	,65	8.>	<54,658.>
18 Net long-term gain or (loss):						_	
a Total for year		18a		<53	<u>,14</u>	8.>	<53,148.>
<b>b</b> Unrecaptured section 1250 gain (see line 18 of the works	heet)	18b					······
c 28% rate gain		18c	,	105			105 006
19 Total net gain or (loss). Combine lines 17 and 18a		19					<107,806.>
Note: If line 19, column (3), is a net gain, enter the gain of	n Form 1041, line 4 (or Form 9	90-T, I	Part I, line 4a) If line:	s 18a an	d 19, d	column	(2), are net gains,
go to Part V, and don't complete Part IV If line 19, column Part IV   Capital Loss Limitation	n (3), is a net loss, complete F	art IV	and the Capital Loss	Carryove	r work	sneet,	as necessary.
20 Enter here and enter as a (loss) on Form 1041, line 4 (or	Form 990-T, Part I, line 4c, if a tru	ist), the	smaller of:				
a The loss on line 19, column (3) or b \$3,000					20		3,000.
Note: If the loss on line 19, column (3), is more than \$3,00 Loss Carryover Worksheet in the instructions to figure you.		ne 23 (e	or Form 990-T, line 3	39), is a l	oss, c	omplet	e the Capital
Part V Tax Computation Using Maxim	num Capital Gains Rate	es					
Form 1041 filers. Complete this part only if both lines 18a and	l 19 in column (2) are gains, or an	amour	nt is entered in Part I o	r Part II a	nd the	re is an	entry on Form 1041,
line 2b(2), and Form 1041, line 23, is more than zero.							
Caution: Skip this part and complete the Schedule D Tax V	Norksheet in the instructions if:	;					
<ul> <li>Either line 18b, col. (2) or line 18c, col. (2) is more that</li> </ul>	n zero, or						
<ul> <li>Both Form 1041, line 2b(1), and Form 4952, line 4g ar</li> </ul>							
Form 990-T trusts. Complete this part only if both lines 18a an							
39, is more than zero. Skip this part and complete the Schedul				) or line	18C, CO	l. (2) is	more than zero.
21 Enter taxable income from Form 1041, line 23 (or Form 99	IU-1, line 39)	21			ł		
22 Enter the smaller of line 18a or 19 in column (2)	00						
but not less than zero	22	┥					
23 Enter the estate's or trust's qualified dividends from					<u> </u>		
Form 1041, line 2b(2) (or enter the qualified dividends included in income in Part I of Form 990-T)	23				ŀ	•	
24 Add lines 22 and 23	24	-			ļ.		
25 If the estate or trust is filing Form 4952, enter the		7	-				
amount from line 4g; otherwise, enter -0-	25						
28 Subtract line 25 from line 24. If zero or less, enter -0-		26			ł		
27 Subtract line 26 from line 21, If zero or less, enter -0-		27			1		
28 Enter the smaller of the amount on line 21 or \$2,650		28	<del></del>				
29 Enter the smaller of the amount on line 27 or line 28		29			l	1	
30 Subtract line 29 from line 28. If zero or less, enter -0 This	s amount is taxed at 0%		•	<b></b>	30		
31 Enter the smaller of line 21 or line 26		31					
32 Subtract line 30 from line 26		32			]	1	
33 Enter the smaller of line 21 or \$12,950		33					
34 Add lines 27 and 30		34			ŀ	1	
35 Subtract line 34 from line 33. If zero or less, enter -0-		35					
36 Enter the smaller of line 32 or line 35		36			<u> </u>		
37 Multiply line 36 by 15% (0.15)				<b></b>	37	l	
38 Enter the amount from line 31		38					
39 Add lines 30 and 36		39					
40 Subtract line 39 from line 38. If zero or less, enter -0-		40					
41 Multiply line 40 by 20% (0.20)				<b>&gt;</b>	41		
42 Figure the tax on the amount on line 27. Use the 2019 Tax	Rate Schedule for Estates						<del> </del>
and Trusts (see the Schedule G instructions in the instruct	ions for Form 1041)	42					
43 Add lines 37, 41, and 42		43					
44 Figure the tax on the amount on line 21. Use the 2019 Tax	Rate Schedule for Estates			-			
and Trusts (see the Schedule G instructions in the instruction	ions for Form 1041)	44	<u> </u>				
45 Tax on all taxable income. Enter the smaller of line 43 or	line 44 here and on Form 1041, S	Schedu	le				
G, Part I, line 1a (or Form 990-T, line 41)					45	L	

#### SCHEDULE D (Form 1041)

ALTERNATIVE MINIMUM TAX Capital Gains and Losses

► Attach to Form 1041, Form 5227, or Form 990-T.

▶ Use Form 8949 to list your transactions for lines 1b, 2, 3, 8b, 9 and 10.

► Go to www.irs.gov/F1041 for instructions and the latest information.

OMB No. 1545-0092

Department of the Treasury Internal Revenue Service Employer identification number Name of estate or trust 52-2000820 VAN ANDEL INSTITUTE Did you dispose of any investment(s) in a qualified opportunity fund during the tax year? Yes If "Yes," attach Form 8949 and see its instructions for additional requirements for reporting your gain or loss. Note: Form 5227 filers need to complete only Parts I and II. Short-Term Capital Gains and Losses-Generally Assets Held One/Year or Less (see instructions) See instructions for how to figure the amounts to enter on the lines below. (h) Gain or (loss) (d) Adjustments Subtract column (e) **Proceeds** Cost from column (d) and to gain or loss from or other basis) (sales price) Form(s) 8949, Part I combine the result with column (g) This form may be easier to complete if you round off cents to whole dollars. line 2, column (g) 1 a Totals for all short-term transactions reported on Form 1099-B for which basis was reported to the IRS and for which you have no adjustments (see instructions). However, if you choose to report all these transactions on Form 8949, leave this line blank and go to line 1b 1 b Totals for all transactions reported on Form(s) 8949 with Box A checked Totals for all transactions reported on Form(s) 8949 with Box B checked Totals for all transactions reported on Form(s) 8949 with Box C checked 1,333. Short-term capital gain or (loss) from Forms 4684, 6252, 6781, and 8824 <55,991.> SEE STATEMENT 9 Net short-term gain or (loss) from partnerships, S corporations, and other estates or trusts Short-term capital loss carryover. Enter the amount, if any, from line 9 of the 2018 Capital Loss Carryover Worksheet Net short-term capital gain or (loss). Combine lines 1a through 6 in column (h). Enter here and on line 17, <54,658.> column (3) on page 2 Part II Long-Term Capital Gains and Losses-Generally Assets Held More Than One Year (see instructions) See instructions for how to figure the amounts to enter on the lines below. (e) (h) Gain or (loss) (d) Adjustments Subtract column (e) Proceeds Cost to gain or loss from from column (d) and (or other basis) (sales price) This form may be easier to complete if you round off cents to whole dollars. Form(s) 8949, Part II with column (g) line 2, column (g) 8 a Totals for all long-term transactions reported on Form 1099-B for which basis was reported to the IRS and for which you have no adjustments (see instructions). However, if you choose to report all these transactions on Form 8949, leave this line blank and go to line 8b 8 b Totals for all transactions reported on Form(s) 8949 with Box D checked Totals for all transactions reported on Form(s) 8949 with Totals for all transactions reported on Form(s) 8949 with 10 Box F checked 2,000. Long-term capital gain of (loss) from Forms 2439, 4684, 6252, 6781, and 8824 11 11 <69,942. SEE STATEMENT 10 12 Net long-term gain or floss) from partnerships, S corporations, and other estates or trusts 12 13 Capital gain distributions 13 14,613. Gain from Form 4797, Part I 14 14 Long-term capital/loss carryover. Enter the amount, if any, from line 14 of the 2018 Capital Loss 15 Carryover Worksheet 15 Net long-term/capital gain or (loss). Combine lines 8a through 15 in column (h). Enter here and on line 18a, 16 <53,329.> column (3) of page 2

/LHA

## ALTERNATIVE MINIMUM TAX

Schedule D (Form 1041) 2019 VAN ANDEL INSTITUTE				5	2-20	000820 Page 2
Part III Summary of Parts I and II		(1) Beneficiaries'	(2)	Estate's	s	(3) Total
Caution: Read the instructions before completing this part.				r trust's		
17 Net short-term gain or (loss)	17		<54	,658	8.>	<54,658.>
18 Net long-term gain or (loss);			l			
a Total for year	18a		<53	,329	9.>	<53,329.>
b Unrecaptured section 1250 gain (see line 18 of the worksheet)	18b					<del></del>
c 28% rate gain	18c					
19 Total net gain or (loss). Combine lines 17 and 18a	19		<u>&lt;107</u>	<u>,98</u>	7.>	<107,987.>
Note: If line 19, column (3), is a net gain, enter the gain on Form 1041, line 4 (or Form	990-T,	Part I, line 4a) If line	s 18a an	d 19, c	olumn	(2), are net gains,
go to Part V, and don't complete Part IV If line 19, column (3), is a net loss, complete Part IV   Capital Loss Limitation	Part IV	and the Capital Loss	Carryove	r Works	neet,	as necessary
20 Enter here and enter as a (loss) on Form 1041, line 4 (or Form 990-T, Part I, line 4c, if a t	rust), the	e smaller of:		П		
a The loss on line 19, column (3) or b \$3,000	,,			20	(	3,000.)
Note: If the loss on line 19, column (3), is more than \$3,000, or if Form 1041, page 1, Loss Carryover Worksheet in the instructions to figure your capital loss carryover.	line 23 (	or Form 990-T, line	39), ıs a i	loss, co	mplet	e the Capital
Part V Tax Computation Using Maximum Capital Gains Rat	tes					
Form 1041 filers. Complete this part only if both lines 18a and 19 in column (2) are gains, or a		nt is entered in Part I o	r Part II a	ind there	e is an i	entry on Form 1041,
line 2b(2), and Form 1041, line 23, is more than zero.						•
Caution: Skip this part and complete the Schedule D Tax Worksheet in the instructions	ıf:					
• Either line 18b, col. (2) or line 18c, col. (2) is more than zero, or						
<ul> <li>Both Form 1041, line 2b(1), and Form 4952, line 4g are more than zero.</li> </ul>						
Form 990-T trusts. Complete this part only if both lines 18a and 19 are gains, or qualified divide						
39, is more than zero. Skip this part and complete the Schedule D Tax Worksheet in the instru			2) or line	18c, col.	. (2) IS	more than zero.
21 Enter taxable income from Form 1041, line 23 (or Form 990-T, line 39)	21	<u> </u>		1		
22 Enter the smaller of line 18a or 19 in column (2)		1				
but not less than zero 22	_			i		
23 Enter the estate's or trust's qualified dividends from						
Form 1041, line 2b(2) (or enter the qualified dividends						
included in income in Part I of Form 990-T)						
24 Add lines 22 and 23 24						
25 If the estate or trust is filing Form 4952, enter the						
amount from line 4g; otherwise, enter -0-		<del>-</del>				
26 Subtract line 25 from line 24. If zero or less, enter -0-	26			1 1		
27 Subtract line 26 from line 21. If zero or less, enter -0-	27	· · · · · · · · · · · · · · · · · · ·		1 1		
28 Enter the smaller of the amount on line 21 or \$2,650	28			1 1		
29 Enter the smaller of the amount on line 27 or line 28	29	<u></u>				
30 Subtract line 29 from line 28. If zero or less, enter -0 This amount is taxed at 0%	31	. 1		30		
31 Enter the smaller of line 21 or line 26 32 Subtract line 30 from line 26	32	· · · · · · · · · · · · · · · · · · ·		1		
33 Enter the smaller of line 21 or \$12,950	33			1		
34 Add lines 27 and 30	34	Ť		†		
35 Subtract line 34 from line 33. If zero or less, enter -0-	35	<del>_</del>		j		
36 Enter the smaller of line 32 or line 35	36	<u> </u>		1		
37 Multiply line 36 by 15% (0.15)		<u> </u>	<b></b>	37		
	38	. 1		<u> </u>		·····
38 Enter the amount from line 31 39 Add lines 30 and 36	39		-			
	40			1 1		
40 Subtract line 39 from line 38. If zero or less, enter -0- 41 Multiply line 40 by 20% (0.20)		<u></u>	_	41		
42 Figure the tax on the amount on line 27. Use the 2019 Tax Rate Schedule for Estates	ı			''		
and Trusts (see the Schedule G instructions in the instructions for Form 1041)	42	,   -				
43 Add lines 37, 41, and 42	43		-			
44 Figure the tax on the amount on line 21. Use the 2019 Tax Rate Schedule for Estates	1					
and Trusts (see the Schedule G instructions in the instructions for Form 1041)	44					
45 Tax on all taxable income. Enter the smaller of line 43 or line 44 here and on Form 1041,						
G, Part I, line 1a (or Form 990-T, line 41)	, Joneau	110	•	45		

**General Business Credit** 

▶ Go to www.irs.gov/Form3800 for instructions and the latest Information.

OMB No 1545-0895

Department of the Treasury Internal Revenue Service (99) Name(s) shown on return

► You must attach all pages of Form 3800, pages 1, 2, and 3, to your tax return.

Attachment Sequence No 22

Identifying number

VAN	ANDEL INSTITUTE 52-2	000820	
Par			
	(See instructions and complete Part(s) III before Parts I and II.)		
1	General business credit from line 2 of all Parts III with box A checked	1	
2	Passive activity credits from line 2 of all Parts III with box B checked 2		
3	Enter the applicable passive activity credits allowed for 2019. See instructions	3	
4	Carryforward of general business credit to 2019. Enter the amount from line 2 of Part III with box C checked. See instructions for statement to attach	4	1
5	Carryback of general business credit from 2020. Enter the amount from line 2 of Part III with box D checked. See instructions	5	
6	Add lines 1, 3, 4, and 5	6	1.00
Part	II Allowable Credit		
7	Regular tax before credits		
	• Individuals. Enter the sum of the amounts from Form 1040 or 1040-SR, line 12a, and Schedule 2 (Form 1040 or 1040-SR), line 2, or the sum of the amounts from Form 1040-NR, lines 42 and 44		
	Corporations. Enter the amount from Form 1120, Schedule J, Part I, line 2; or the applicable line of your return	7	
8	Estates and trusts Enter the sum of the amounts from Form 1041, Schedule G, lines 1a and 1b; or the amount from the applicable line of your return  Alternative minimum tax:		
•	Individuals. Enter the amount from Form 6251, line 11		
	• Corporations. Enter -0	8	
	• Estates and trusts. Enter the amount from Schedule I (Form 1041), line 54	<del>                                     </del>	
9	Add lines 7 and 8	9	0.00
10a	Foreign tax credit		
b	Certain allowable credits (see instructions)	1	
c	Add lines 10a and 10b	10c	0.00
11	Net income tax. Subtract line 10c from line 9. If zero, skip lines 12 through 15 and enter -0- on line 16	11	0.00
12	Net regular tax. Subtract line 10c from line 7. If zero or less, enter -0 12		
13	Enter 25% (0.25) of the excess, if any, of line 12 over \$25,000. See		
	instructions	<b>↓</b> -	
14	Tentative minimum tax.		
	Individuals. Enter the amount from Form 6251, line 9		
	• Corporations, Enter -0		
	• Estates and trusts. Enter the amount from Schedule I (Form 1041), line 52		
15	Enter the greater of line 13 or line 14	15	
16	Subtract line 15 from line 11. If zero or less, enter -0	16	0.00
17	Enter the smaller of line 6 or line 16	17	
	C corporations: See the line 17 instructions if there has been an ownership change, acquisition, or		
	reorganization.		

Part			<del></del>
Note:	If you are not required to report any amounts on line 22 or 24 below, skip lines 18 through 25 and enter -	0- on li	ne 26.
18	Multiply line 14 by 75% (0.75). See instructions	18	
19	Enter the greater of line 13 or line 18	19	
20	Subtract line 19 from line 11. If zero or less, enter -0	20	
21	Subtract line 17 from line 20. If zero or less, enter -0	21	·····
22	Combine the amounts from line 3 of all Parts III with box A, C, or D checked	22	
23	Passive activity credit from line 3 of all Parts III with box B checked 23		
24	Enter the applicable passive activity credit allowed for 2019. See instructions	24	
25	Add lines 22 and 24	25	
26	Empowerment zone and renewal community employment credit allowed. Enter the smaller of line 21 or line 25	26	0.00
27	Subtract line 13 from line 11. If zero or less, enter -0-	27	0.00
28	Add lines 17 and 26	28	0.00
29	Subtract line 28 from line 27. If zero or less, enter -0	29	0.00
30	Enter the general business credit from line 5 of all Parts III with box A checked	30	
31	Reserved	31	
32	Passive activity credits from line 5 of all Parts III with box B checked		
33	Enter the applicable passive activity credits allowed for 2019. See instructions	33	<u> </u>
34	Carryforward of business credit to 2019. Enter the amount from line 5 of Part III with box C checked and line 6 of Part III with box G checked. See instructions for statement to attach	34	1
35	Carryback of business credit from 2020. Enter the amount from line 5 of Part III with box D checked. See instructions	35	
36	Add lines 30, 33, 34, and 35	36	1.00
37	Enter the <b>smaller</b> of line 29 or line 36	37	0.00
38	Credit allowed for the current year. Add lines 28 and 37.		
	Report the amount from line 38 (if smaller than the sum of Part I, line 6, and Part II, lines 25 and 36, see instructions) as indicated below or on the applicable line of your return.  • Individuals. Schedule 3 (Form 1040 or 1040-SR), line 6, or Form 1040-NR, line 51  • Corporations. Form 1120, Schedule J, Part I, line 5c		
	Estates and trusts. Form 1041, Schedule G, line 2b	38	0.00
		<del></del>	Form 3800 (2019)

r Onn Suc	30 (2019)				, age (	
Name(s)	shown on return		Identifylr	ng numb	ər	
VAN ANDEL INSTITUTE			52-2000820			
Part I		ructio	ons)			
	ete a separate Part III for each box checked below. See instructions.					
	General Business Credit From a Non-Passive Activity E Reserved					
	General Business Credit From a Passive Activity  F   Reserved					
	General Business Credit Carryforwards  General Business Credit Carryforwards  General Business Credit Carryforwards					
	General Business Credit Carrybacks  H  Reserved	000 0	Tour our,			
	ou are filing more than one Part III with box A or B checked, complete and attach first an a	dditio	nal Part III con	nhinina	amounts from	
					<b>▶</b> □	
	(a) Description of credit		(b)		(c)	
			If claiming the c		Enter the	
	in any line where the credit is from more than one source, a separate Part III is needed for each rough entity		from a pass-thro entity, enter the		appropriate amount	
1a	Investment (Form 3468, Part II only) (attach Form 3468)	1a	chity, chief the			
b	Reserved	1b				
c	Increasing research activities (Form 6765)	1c				
d	Low-income housing (Form 8586, Part I only)	1d				
e	Disabled access (Form 8826) (see instructions for limitation)	1e				
f	Renewable electricity, refined coal, and Indian coal production (Form 8835)	1f				
	Indian employment (Form 8845)	1g				
9 h	Orphan drug (Form 8820)	1h			,,	
;	New markets (Form 8874)	1i			-	
:	Small employer pension plan startup costs (Form 8881) (see instructions for limitation)	1 <u>j</u>				
J L	Employer-provided child care facilities and services (Form 8882) (see instructions	٠,				
k	for limitation)	1k				
	Biodiesel and renewable diesel fuels (attach Form 8864)	11				
m	Low sulfur diesel fuel production (Form 8896)	1m	<del></del>			
n	Distilled spirits (Form 8906)	1n				
0	Nonconventional source fuel (carryforward only)	10		-		
	Energy efficient home (Form 8908)	1p				
p q	Energy efficient appliance (carryforward only)	1q				
r	Alternative motor vehicle (Form 8910)	1r	· · · · · · · · · · · · · · · · · · ·			
s	Alternative fuel vehicle refueling property (Form 8911)	1s				
t	Enhanced oil recovery credit (Form 8830)	1t				
u	Mine rescue team training (Form 8923)	1u				
v	Agricultural chemicals security (carryforward only)	1v				
w	Employer differential wage payments (Form 8932)	1w				
x	Carbon oxide sequestration (Form 8933)	1x				
	Qualified plug-in electric drive motor vehicle (Form 8936)	1y			<del></del>	
y z	Qualified plug-in electric vehicle (carryforward only)	1z				
aa	Employee retention (Form 5884-A)	1aa				
bb	General credits from an electing large partnership (carryforward only)	1bb				
ZZ	Other, Oil and gas production from marginal wells (Form 8904) and certain other					
	credits (see instructions)	1zz				
2	Add lines 1a through 1zz and enter here and on the applicable line of Part I	2			0.00	
3	Enter the amount from Form 8844 here and on the applicable line of Part II	3				
4a	Investment (Form 3468, Part III) (attach Form 3468)	4a	-			
b	Work opportunity (Form 5884)	4b	90-080659	17	1	
С	Biofuel producer (Form 6478)	4c				
d	Low-income housing (Form 8586, Part II)	4d				
e	Renewable electricity, refined coal, and Indian coal production (Form 8835)	4e				
f	Employer social security and Medicare taxes paid on certain employee tips (Form 8846)	4f				
g	Qualified railroad track maintenance (Form 8900)	4g				
h	Small employer health insurance premiums (Form 8941)	4h			,	
i	Increasing research activities (Form 6765)	4i				
j	Employer credit for paid family and medical leave (Form 8994)	4j				
z	Other	4z				
5	Add lines 4a through 4z and enter here and on the applicable line of Part II	5			1.00	
6	Add lines 2, 3, and 5 and enter here and on the applicable line of Part II	6			1.00	

FORM 990-T INCOME (LOSS) FROM PARTNERSHIPS	STATEMENT 1
DESCRIPTION	NET INCOME OR (LOSS)
PRIVATELY HELD COMPANIES - ORDINARY DIVIDENDS - DIVIDEND INCOME PRIVATELY HELD COMPANIES - INTEREST INCOME - INTEREST INCOME	14,201. 74,860.
PRIVATELY HELD COMPANIES - OTHER INCOME - OTHER INCOME (LOSS) PRIVATELY HELD COMPANIES - ORDINARY INCOME - ORDINARY	17,428.
BUSINESS INCOME (LOSS) PRIVATELY HELD COMPANIES - ROYALTY INCOME - ROYALTIES PRIVATELY HELD COMPANIES - CANCELLATION OF DEBT INCOME -	<19,882.> 983.
OTHER INCOME (LOSS) TOTAL INCLUDED ON FORM 990-T, PAGE 1, LINE 5	92,086.
FORM 990-T OTHER INCOME	STATEMENT 2
DESCRIPTION	AMOUNT
STATE REFUNDS	247.
TOTAL TO FORM 990-T, PAGE 1, LINE 12	247.
FORM 990-T OTHER DEDUCTIONS	STATEMENT 3
DESCRIPTION	AMOUNT
TAX PREPARATION/CONSULTING FEES INVESTMENT INTEREST EXPENSE PORTFOLIO DEDUCTIONS	38,415. 66,765. 3.
TOTAL TO FORM 990-T, PAGE 1, LINE 27	105,183.

# VAN ANDEL INSTITUTE

FORM 990-T	CONTRIBUTIONS	STATEMENT 4		
DESCRIPTION/KIND OF PROPERTY	METHOD USED TO DETERMINE FMV	AMOUNT		
CONTRIBUTION FOR 2019	N/A	58,507,000.		
TOTAL TO FORM 990-T, PAGE 2, I	58,507,000.			