

FRANK J. KELLEY ATTORNEY GENERAL LANSING 48902

CHARITABLE TRUST -- REGISTRATION STATEMENT

(This form prescribed by the Attorney General in conformity with R.14.2, Sec. 2 by Act No. 101, Public Acts of 1961, as amended.)

OR ESTATE USE ONLY	We will advise you of
	* the registration number.
state of	Date:
ounty of	County:
robate No.	Reg. No.
ill dated	
robate Date	CLASSIFICATION
ate of Appointment of Trustee (s)	() Testamentary
	() Intervivos
* * * *	() Other
1. NAME OF FUND OR TRUST Latvian Foundat	ion
2. ADDRESS (STREET) (CITY OR	
(STREET) (CITY OR	TOWN) (ZIP CODE)
PLACE TRUST IS LEGALLY ESTABLISHED Non-pr	ofit Corporation
4. PURPOSE OF CHARITABLE TRUST See Articl	es of Incorporation, Article II
5. VALUE: (CORPUS OF TRUST) 3,115.05 6. TRUSTEE (S): Name (s) and address (es)	(DATE OF APPRAISAL)
Dr. Valdis Muiznieks-President&Chai	rman Dr. Girts Kaugars-Treasure
2330 Gull Rd., Kalamazoo, MI 49001 Dr. Voldemars Gulens-Ex. Vice Presi	ident MI 49007
Dr. Voldemars Gulens-Ex. Vice Presi 59 Chaplin Crescent, Toronto, Ont.	Can. Imants Freibergs
2330 Gull Rd., Kalamazoo, MI 49001 Dr. Voldemars Gulens-Ex. Vice Presi 39 Chaplin Crescent, Toronto, Ont. Janis Klidzejs-Vice President 3015 Old Sonoma Rd., Napa, CA 94558	ident MI 49007
2330 Gull Rd., Kalamazoo, MI 49001 Dr. Voldemars Gulens-Ex. Vice Presi 39 Chaplin Crescent, Toronto, Ont. Janis Klidzejs-Vice President 3015 Old Sonoma Rd., Napa, CA 94558 Brunis Rubess-Vice President	Imants Freibergs Z850 Willowdale Ave. Montreal 26, P.Q. Canada Janis Penikis-
2330 Gull Rd., Kalamazoo, MI 49001 Dr. Voldemars Gulens-Ex. Vice Presi 39 Chaplin Crescent, Toronto, Ont., Janis Klidzejs-Vice President 3015 Old Sonoma Rd., Napa, CA 94558 Brunis Rubess-Vice President 31 Shallmar Blvd., Toronto 347, Ont	Janis Penikis- Janis Penikis- Leario 1214 E. Belmont Ave.
2330 Gull Rd., Kalamazoo, MI 49001 Dr. Voldemars Gulens-Ex. Vice Presi 39 Chaplin Crescent, Toronto, Ont. Janis Klidzejs-Vice President 3015 Old Sonoma Rd., Napa, CA 94558 Brunis Rubess-Vice President 31 Shallmar Blvd., Toronto 347, Ont Dr. Verners Rutenbergs JrSecretar	Janis Penikis- Lario Ivalia Belmont Ave. South Bend, Indiana 40015 H 44118 Dr. Laimonis Streips
2330 Gull Rd., Kalamazoo, MI 49001 Dr. Voldemars Gulens-Ex. Vice Presi 39 Chaplin Crescent, Toronto, Ont., Janis Klidzejs-Vice President 3015 Old Sonoma Rd., Napa, CA 94558 Brunis Rubess-Vice President 31 Shallmar Blvd., Toronto 347, Ont	Janis Penikis- Izl4 E. Belmont Ave. South Bend, Indiana 40015 A 4+118 Dr. Laimonis Streips 7012 Church St.
2330 Gull Rd., Kalamazoo, MI 49001 Dr. Voldemars Gulens-Ex. Vice Presi 39 Chaplin Crescent, Toronto, Ont. Janis Klidzejs-Vice President 3015 Old Sonoma Rd., Napa, CA 94558 Brunis Rubess-Vice President 31 Shallmar Blvd., Toronto 347, Ont Dr. Verners Rutenbergs JrSecretar	Janis Penikis- Janis Penikis- Lorio South Bend, Indiana 40015 South Bend, Indiana 40015 H 44118 Dr. Laimonis Streips

12. DENEFICIARIES: (Name, address and interest)	
Public at Large	
	CONTRACTOR NOT THE RESERVE OF THE PARTY OF T
13. TRUSTEES' ATTORNEY (name and address)	TRUSTEES' AGENT (name & address)
Talivaldis Cepuritis	Valais Muiznieks, D.C.
Clo American Wating To 1 73	
710 American Nationa Bank Bldg.	2300 Gull Road
Kalamazoo, Michigan	Kalamazoo, Michigan 49001
14. SIGNATURE OF PRINCIPAL OFFICERS OR TRUSTEE	S
Tollis Plunquiers D. G Prenden	to Chaires
July Kaugais, Treasurer	
1	

SUBMIT WITH THIS REGISTRATION THE FOLLOWING:

- 1) Copy of Will, Articles of Incorporation, Deed of Trust, etc. creating the trust.
- 2) Copy of Trustee's Inventory.
- 3) Copy of Trustee's last account or report filed in relation to trust.

USE SUPPLEMENTAL SHEETS IF NECESSARY.

IF IT IS A CORPORATION: This Registration must be signed by a Corporation officer. A copy of the Articles of Incorporation must be enclosed. Where the regulations or By-Laws have provisions necessary to a proper audit, these instruments must also be enclosed.

Page 1 ANNUAL REPORT OF A CHARITABLE TRUSTEE STATE OF MICHIGAN DEPARTMENT OF FRANK J. KELLEY For Calendar Year or other fiscal year ATTORNEY GENERAL ATTORNEY GENERAL beginning ___ __ and ending _ Legal Name of Organization Address (number, street, city or town, postal zone, and state) This return must be filed on or before the last day of the sixth month following the close of the annual accounting period. Registration No. CT (Please type or print clearly) Organizations which perform any charitable function other than the mere acceptance of donations and disbursements of same to other organizations and/or individuals complete Schedule D. Line No. 1. Gross receipts from operations... \$ 5080.00 Less: Cost of operations (Complete Schedule D)..... 3. Gross profit from operations \$ 3080.00 4. Interest 121.53 5. Dividends 7. Royalties .. 8. Gain (or loss) from sale of assets, excluding inventory items ... 9. Other receipts (Attach schedule—Do not include contributions, gifts, grants, etc. (See line 17.).... 10. Total gross receipts (Lines 3 to 9 inclusive) \$ 3201.55 11. Expenses in connection with collecting lines 4 to 9 (from Column 3, Schedule A). DISBURSEMENTS MADE WITHIN THE YEAR OUT OF CURRENT OR ACCUMULATED INCOME, AND ACCUMULATION OF INCOME 12. Expenses of distributing current or accumulated income (from column 4, Schedule A)..... 116.48 13. Contributions, gifts, grants, scholarships, etc. (ATTACH SCHEDULE) 14. Accumulation of income within the year (Line 10 less the sum of lines 11, 12 and 13)..... 16. Aggregate accumulation of income at end of the year (If line 16 exceeds \$4000 attach explanation covering how such accumulation fulfills the trust's purpose; RECEIPTS NOT REPORTED ELSEWHERE

17. Contributions, gifts, grants, etc., received (ATTACH SCHEDULE) Latvian Assoc. of Cleveland 30.00 18. Less: Expenses of raising and collecting amount on line 17 (from column 5, Schedule A). 19. Net contributions, gifts, grants, etc. DISBURSEMENTS MADE OUT OF PRINCIPAL 20. Expenses of distributing principal (from column 6, Schedule A). 21. Contributions, gifts, grants, scholarships, etc.:

Schedule A-Allocation of Expenses

(a) Paid out in prior years (\$_____

(b) Paid within the year ...

	l. Item	2. Total	3. Expenses of raising income	4. Expenses of distributing income	5. Expenses of raising and collecting principal	6. Expenses of distributing principal
(a)	Compensation of officers, and employees					
(b)	Other salaries and wages					
- (c)	Interest					
(d)	Taxes					
(e)	Rent					
(f)	Depreciation (and depletion)					
(g)	Advertising (Attach Schedule)					
(h)	Public Relations					
(i)	Employee retirement expenses					
(j)	Travel					
(k)	Telephone and telegraph					
(1)	Office supplies and equipment					
(m)	Postage and shipping		19/2			
(n)	Printing and publication	116.48		116.48		
(0)	Miscellaneous expenses (Attach schedule)					
(p)	Totals	AMERICAN STREET				
	the state of the state of the state of		Enter on line 11	Enter on line 12	Enter on line 18	Enter on line 20

Schedule B-Balance Sheets

	ASSETS	Seginning of Year		End of Year			
		Amount	Total	Amount	OI I GOLF	Total	
1.	Cash					Total	
2.	seconitie (acaladible				-		
	Less: Reserve for bad debts Notes receivable						
	Less: Reserve for bad debts						
4.	210 4 021101109						
	anivestments in governmental obligations						
	in ron-governmental bonds etc						
8.	Investments in corporate stocks (See Instruction 5b) Mortgage loans						
••	Other investments (Attach schedule)						
200	provide (and depletable) assets (Attack schedule)						
	Less: Reserve for depreciation (and depletion)						
12.	Other assets (Attach schedule)			Cally Table 1			
13.	Total assets						
	LIABILITIES AND NET WORTH						
14.	Accounts payable						
40.	Contributions, girts, grants, etc., payable						
80. 1	policis, notes, and morigages payable						
	Other liabilities (Attach schedule)		Market Services				
	a) Preferred stock				77.0		
U	O) Common stock						
TAB. I	remperatup certuicates						
man .	inicipal or other capital			A The St			
22. /	eserves (Attach schedule) accumulated income or earned surplus:				V. Talk S		
(0	Attributable to ordinary income				建 78 2		
(L	Attributable to gains from sale of assets						
23. T	stal liabilities and net worth						
CONTRACTOR DESCRIPTION OF THE PERSON OF THE							
1. Is	this charitable trust exempt from Federal In-			HO TO BE A ROLL OF			
	me Tax?	(c) Have ar	by part of your se	rvices or assets			
		made av	vailable to him?	•••••	☐ Yes	□ No	
2. If	you acquired capital assets out of income,	(d) Durches					
att	ach itemized list and amount thereof.	from you	any securities or	other property			
3 Ha	Vo conv. ch	nom you	?		Yes	□ No	
the	ve any changes not previously reported to	(e) Sell any	committee - 1				
of	Attorney General been made in your articles incorporation or bylaws or other instruments	The state of the s	securities or other p	property to you?	☐ Yes	□ No	
of	similar import?	(f) Receive	any of your incom	e or corpus in			
If '	Yes," attach a copy of the amendments.	other tran	nsactions?	corpus in	7 Vos		
] Yes	□ No	
4. Ha	ve you had any sources of income or en-	If answer to	any question is "yes	" attach detail-			
gag	ged in any activities not previously reported. The The	ed statement	unless previously	reported.			
If "	Yes," attach detailed statement.						
5 D.	the second secon	6. Do you hold	10 percent or mor	re of any class			
3. Dia	the creator of your organization, or a con-	of stock in a	ny corporation?	····· [] Yes	□ No	
ciet	utor to your organization, or a brother or		ach schedule givin	g complete de-			
orl	er (whole or half blood), spouse, ancestor, ineal descendent of such creator or contrib-	tails.					
utor	or a corporation owned (50 percent or more	7. Attach sah	ulo atul				
of v	roting stock) directly or indirectly by such	of recipients	ule giving name, cit of benefits, and amo	y, and address			
	for or contributor:		or belieffis, dild amo	unts paid each.			
		8. Does this cho	critable trust either	Policit from 11			
(a) I	Borrow any part of your income or corpus? Yes No	public or sell	memberships to the	public?	1 0		
			and the second second	publicr	Yes	□ No	
(b) i	deceive any compensation for personal	9. Has tax exem	ption been denied o	r cancelled by			
S	ervices from you? Yes No	any governme	ent agency?	·····	Yes	□ No	
					105		
I swee	or under oath that this report (including any accompand to the best of my knowledge and bolist to a true	maring asked 1		11.75			
me on	nd to the best of my knowledge and belief is a true, of	correct and ac-	es and stateme	nts) has been	examin	ed by	
		con and con	ipiere report.				
Subsc	ribed and sworn to before me this day						
		Title () Place	of execu-	tion	
of	, A.D. 19				- STOCE	2011	
		Title (- 11		
(N-	ture Seal)) Place	of execu	tion	
(140	Notary Seal) Notary Public						
		Title () Place	of average	lon	

FORM CT-1.INV.



FRANK J. KELLEY ATTORNEY GENERAL

CHARITABLE TRUST INVENTORY DESCRIPTION OF ASSETS No. 1 - STOCK сомм. NO. SHARES PAR CORPORATION NAME: BOOK MARK TOTAL None TOTAL No. 1 - (STOCK) No. 2 - BONDS NAME: INT. % SERIES YEAR OTHER VALUE TOTAL Specific information to follow Trainsuspos TOTAL No. 2 (BONDS) No. 3 - REAL ESTATE LOCATION: APPRAISAL VALUE None TOTAL No. 3 (REAL ESTATE) No. 4 - OTHER ASSETS NAME OF ACCOUNT: AMOUNT Bank account and investment in bonds 13710 TOTAL No. 4 (OTHER ASSETS) 13, 710.05 TOTAL ASSETS: ADD 1 THROUGH 4 13,710.05 No. 5 - LIABILITIES NAME OF ACCOUNT: AMOUNT Repayable loans to members

TOTAL No. 5 (LIABILITIES)

10,595.00

CAPITAL: Total Assets LESS: Total Liabilities

5,115.05

UNDER PENALTY OF PERJURY; I declare that I have examined this Registration Form including the Items above stated and to the UNDER PENALTY OF PERJURY: I declare that the best of my knowledge and belief it is true; correct and complete.

6-16-197/ Taldis Russpuring

SIGNATURE OF TENSTEE/OFFICER

Rendent . Chairma

(MAKE ADDITIONAL SCHEDULE IF NECESSARY)