

See a Social Security Number? Say Something! Report Privacy Problems to https://public.resource.org/privacy Or call the IRS Identity Theft Hotline at 1-800-908-4490



OMB No 1545-1150

Department of the Treasury Internal Revenue Service

Short Form
Return of Organization Exempt From Income Tax
Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except black lung benefit trust or private foundation)

Sponsoring organizations of donor advised funds and controlling organizations as defined in section 512(b)(13) must file Form 990. All other organizations with gross receipts less than \$500,000 and total assets less than \$1,250,000 at the end of the year may use this form

The organization may have to use a copy of this return to satisfy state reporting requirements

Open to Public Inspection

		The organization may have to use a copy of this fetall to satisfy s				2 2 2 2
			nd ending M	AY 3:		2010
B C	heck if oplicat	please V Name of organization		D Empl	oyerı	dentification number
	Addre chang	ss use IRS tabel or the state of the state o				
]Name chang	FEDERATION SUPPORT FOUNDATION 38				232178
	Initial	Number and street (or P.O. hox, if mail is not delivered to street address)	Room/suit	e E Tele	phone	number
	Term ated	Specific P.O. BOX 2030; 6735 TELEGRAPH ROAD		(2	248)642-4260
		tions City or town, state or country, and ZIP + 4		F Grou	ıp Exe	mption
	Applic	BLOOMFIELD HILLS, MI 48301		Num	ber 🕨	_
	• Sec	ction 501(c)(3) organizations and 4947(a)(1) nonexempt charitable trusts must attach a comple	ted G Acco	ounting me	thod:	Cash X Accrual
		Schedule A (Form 990 or 990-EZ)	i	r (specify)		
I V	Vebsi	te· ►N/A	H Chec	ck ▶ 🖸	₹ if t	he organization is not
JT	ax-ex	rempt status (check only one) $-\mathbb{X}$ 501(c) (3) \blacktriangleleft (insert no.) $\boxed{}$ 4947(a)(1) or	527 required	i to attach	Sched	tule B (Form 990, 990 EZ, or 990-PF)
K (heck	If the organization is not a section 509(a)(3) supporting organization and its gross received	pts are normally	not more t	han \$2	25,000 A Form 990-EZ or
		Form 990 return is not required, but if the organization chooses to file a return, be sure				
L A	dd lin	ies 5b, 6b, and 7b, to line 9 to determine gross receipts; if \$500,000 or more, file Form 990 instead	of Form 990-EZ		\$	0.
	ırt I	Revenue, Expenses, and Changes in Net Assets or Fund Balan			for Pa	rt I)
	1	Contributions, gifts, grants, and similar amounts received			1	
	2	Program service revenue including government fees and contracts			2	
	3	Membership dues and assessments			3	
	4	Investment income			4	
	5a	Gross amount from sale of assets other than inventory 5a		Ī		
	ь	Less, cost or other basis and sales expenses 5b				•
	С	Gain or (loss) from sale of assets other than inventory (Subtract line 5b from line 5a)			5c	
e	6	Special events and activities (complete applicable parts of Schedule G). If any amount is from gai	ming, check here			
Revenue	a	Gross revenue (not including \$ of contributions	.			
ě	-	reported on line 1) 6a				
	ь	Less: direct expenses other than fundraising expenses 6b				
	C	Net income or (loss) from special events and activities (Subtract line 6b from line 6a)			6c	
	7a	Gross sales of inventory, less returns and allowances 7a		Ī		
	b	Less: cost of goods sold 7b				
	c	Gross profit or (loss) from sales of inventory (Subtract line 7b from line 7a)			7c	
	8	Other was a control of the control o	0511/55	₀ [8	
	9	Total revenue Add lines 1, 2, 3, 4, 5c, 6c, 7c, and 8	PEINED		9	0.
	10	Grants and similar amounts paid (attach schedule)		70	10	
	11	Benefits paid to or for members QCT	1 8 2010	S-OSC	11	
ဟ	12	Salaries, other compensation, and employee benefits	T @ 5010	S)	12	
JSe	13		\	그때	13	
Ехрепѕеѕ	14	Occupancy, rent, utilities, and maintenance	DEN, UT	_	14	
ωÛ	15	Printing, publications, postage, and shipping			15	
	16	Other expenses (describe ▶) [16	
	17	Total expenses Add lines 10 through 16			17	0.
	18	Excess or (deficit) for the year (Subtract line 17 from line 9)			18	0.
ets	19	Net assets or fund balances at beginning of year (from line 27, column (A))		Ī		
<u> </u>		(must agree with end-of-year figure reported on prior year's return)			19	0.
£23	20	Other changes in net assets or fund balances (attach explanation)			20	
9 2010 Net Assets	21	Net assets or fund balances at end of year Combine lines 18 through 20		▶ [21	0.
- Pa	art II	 	rm 990 instead o	f Form 990)-EZ.	·
		(See the instructions for Part II.)	(A) Beginnin	g of year		(B) End of year
≥ 22	Cas	sh, savings, and investments			22	
		nd and buildings			23	
Ш 24	Oth	ner assets (describe)			24	
≥ 25	Tot	tal assets		0	_	0.
ANNED 25 26 26	Tol	tal liabilities (describe ►	 		. 26	
O 27	No	t assets or fund balances (line 27 of column (B) must agree with line 21)		0		
<u>√</u> 932 02-0	17 1 08-10	LHA For Privacy Act and Paperwork Reduction Act Notice, see the separate instructions.				Form 990-EZ (2009)

For	m 990-EZ (2009) FEDERATION SUPPORT FOUNDA	O-EZ (2009) FEDERATION SUPPORT FOUNDATION 38 30-02					
P	art III Statement of Program Service Accomplishme	nts (See the instructions for	Part III)		E)	rpenses	
Wh	nat is the organization's primary exempt purpose?TO SUPPORT THE	E JEWISH COMMI	NTTY.	,	-	r section 501(c)(3)	
	scribe what was achieved in carrying out the organization's exempt pu			ıho.		l) organizations and	
	e services provided, the number of persons benefited, and other relevan			ibe	for others)	7(a)(1) trusts, optional	
	GRANTS AND AWARDS GIVEN TO CHARITAE	 			10,0,0,0,0,0		
20	GRANIS AND AWARDS GIVEN TO CHARITAE	PDE OKGANIZATI	. GNO.				
			 	 _			
	(Grants \$) If this amount includes foreign	grants, check here			28a		
29							
	(Grants \$) If this amount includes foreign	grants, check here	•		29a		
30		9			1		
			····				
				_			
	(Grants \$) If this amount includes foreign	grants, check here			30a		
31	Other program services (attach schedule)						
	(Grants \$) If this amount includes foreign	grants, check here			31a		
	Total program service expenses (add lines 28a through 31a)				32	0.	
P	art IV List of Officers, Directors, Trustees, and Key E	Employees. List each one e	ven if not compensated	(See the	e instructions (for Part IV)	
				(d) C	ontributions		
	(a) Name and address	(b) Title and average hours	(c) Compensation		employee	(e) Expense	
	(a) Name and address	per week devoted to	(If not paid, enter		efit plans &	account and	
		position	-0-)	1	deferred	other allowances	
				Con	npensation		
	OBERT P. ARONSON, 6735 TELEGRAPH	DIRECTOR			•		
	DAD, BLOOMFIELD HILLS, MI 48301	0.10	0.		0.	0.	
	OWARD NEISTEIN, 6735 TELEGRAPH	DIRECTOR					
<u>R(</u>	OAD, BLOOMFIELD HILLS, MI 48301	0.10	0.	<u> </u>	0.	0.	
DO	DROTHY BENYAS, 6735 TELEGRAPH ROAD,	DIRECTOR					
	LOOMFIELD HILLS, MI 48301	0.10	0.	ŀ	0.	0.	
	ANCY GROSFELD, 6735 TELEGRAPH ROAD,	DIRECTOR					
	LOOMFIELD HILLS, MI 48301	0.10	0.		0.	0.	
	ORMAN PAPPAS, 6735 TELEGRAPH ROAD,	DIRECTOR	· · ·	1-			
			0.		0	1	
DI	LOOMFIELD HILLS, MI 48301	0.10	0.	 	0.	0.	
		4		1			
		_					
		-					
		" "					
		7					
				 		 	
		-		1			
		-					
				1			
		_					
_				1	_		
				1		i	
				1			
		1					
			 	+			
		-					
		 	ļ	+-			
		4					
		<u> </u>		ļ			
		_					
		l .	i	ı		4	

Form **990-EZ** (2009)

33 bid the organization engage in any activity not previously reported to the IRS? If Yes, attach a detailed description of each activity 34 Were any changes made to the organizing or governing documents? If Yes, attach a conformed copy of the changes 35 If the organization had income from busness activities, such as those reported on Iron generation and income from 590-1. The provided in the organization had reported on from 590-1. The provided income of Form 590-1 and the organization have unrelated business gross income of \$1,000 or more or was it subject to section 6033(e) notice, reporting, and proxy tax requirements? 35 bid fives, has it filed a tax return on Form 990-1 for this year? 36 bid the organization provided in the provided in the instructions on the provided political expenditures, direct or indirect, as described in the instructions 36 bid the organization form 1120-P01 for this year? 37 bid the organization form 1120-P01 for this year? 38 bid the organization form of middle organization form, or make any loans to, any officer, director, trustes, or key employee or were any such loans made in a prior year and still outstanding at the end of the period covered by this return? 38 bid the organization benefit in the period covered by this return? 39 bid the organization benefit in the period covered by this return? 39 bid respectively (17) organizations. Enter. 30 bid benefit in the period covered by this return? 30 bid benefit in the period on the period covered by the return. 39 bid Section 501(c)(2) organizations. Enter amount of tax with the period on the period on the period by the organization during the year under section 4911 to period the period on the period by the organization and the organization and the period by the organization and the organization and the period by the organ	Y	/es	No
Were any changes made to the organizing or governing documents? If Yes, "attach a conformed copy of the changes 34	\neg	- 00	X
35 If the organization had income from business activities, such as those reported on lines 2, 6a, and 7a (among others), but not reported on Form 990-T, attach a statement explaining why the organization did not report the income on Form 990-T or the organization have unrelated business gross income of \$1,000 or more or was it subject to section 6033(e) notice, reporting, and proxy tax requirements? 35 bit if ves, "as it filled a tax return on Form 990-T for this year? 36 bit whe organization undergo a liquidation, dissolution, termination, or significant disposition of net assets during the year? If Yes," complete applicable parts of Sch. N 37a Criter amount of political expenditures, direct or indirect, as described in the instructions 37a Did the organization in Form 1120-P.O. for this year? 38 bit where organization before the form 1120-P.O. for this year? 39 bit where organization before the form of the analysis of the organization before where any such loans made in a prior year and still outstanding at the end of the period covered by this return? 39 bit "ves," complete Schedule L, Part II and enter the total amount involved 39 bit organization before the complete Schedule L, Part II and enter the total amount involved 39 bit organization before the amount of lax imposed on the organization during the year undersection 4911 the properties of the organization short of the organizati		i	X
a Did the organization have unrelated business gross income of \$1,000 or more or was it subject to section \$033(e) notice, reporting, and proxy tax requirements? b If "Yes," has it filled a tax return on Form 990-T for this year? 535 b If "Yes," has it filled a tax return on Form 990-T for this year? 536 b Out the organization undergo a liquidation, dissolution, termination, or significant disposition of net assets during the year? If "Yes," complete applicable parts of Sch. N 737 a finet amount of political expenditures, direct or indirect, as described in the instructions b Did the organization the Form 1120-PCL for this year? 372 383 b If the organization borrow from, or make any loans to, any officer, director, trustee, or key employee or were any such loans made in a prior year and still outstanding at the end of the period covered by this return? 385 b If "Yes," complete Schedule L, Part II and entire the total amount involved 386 385 585 586 587 588 588 588 588 5		-1	
a Did the organization have unrelated business gross income of \$1,000 or more or was it subject to section 6033(e) notice, reporting, and proxy tax requirements? 51 if "Yes, "has it filed a tax return on Form 990-T for this year? 52 but the organization undergo a liquidation, dissolution, termination, or significant disposition of net assets during the year? If "Yes," complete applicable parts of Sch. N 52 a Enter amount of political expenditures, direct or indirect, as described in the instructions 53 but the organization before in 120-POL for this year? 54 but the organization before when, or make any loans to, any officer, director, trustee, or key employee or were any such loans made in a prior year and still outstanding at the end of the period covered by this return? 55 but the organization borrow from, or make any loans to, any officer, director, trustee, or key employee or were any such loans made in a prior year and still outstanding at the end of the period covered by this return? 56 but the organization borrow from, or make any loans to, any officer, director, trustee, or key employee or were any such loans made in a prior year and still outstanding at the end of the period covered by this return? 57 but the organization borrow from, or make any loans to, any officer, director, trustee, or key employee or were any such loans made in a prior year, and still outstanding at the end of the period covered by this return? 58 but the organization set of the period covered by the organization of the organization engage any any section 4955 excess benefit transaction during the year or it is aware that it engaged in an excess benefit transaction during the year or it is aware that it engaged in an excess benefit transaction with a disqualitied person in a prior year, and that the transaction has not been reported on any of the organizations. Enter amount of tax on line 40c reimbursed by the organizations and 501(c)(4) organizations. Enter amount of tax on line 40c reimbursed by the organizations. Pr	1	ĺ	
and proxy tax requirements? 1		1	
b If Yes, has if filed a tax return on Form 990-T for this year? 50 Did the organization undergo a liquidation, dissolution, termination, or significant disposition of net assets during the year? If Yes, complete applicable parts of Sch. N 37a Enter amount of political expenditures, direct or indirect, as described in the instructions ▶ 37a ■ 0. ▶ Did the organization form 120-POL for this year? \$37a ■ Did the organization form 120-POL for this year? \$37a ■ Did the organization form 120-POL for this year? \$37a ■ Did the organization form 120-POL for this year? \$37a ■ Did the organization form or from, or make any loans to, any officer, director, trustee, or key employee or were any such loans made in a prior year and still outstanding at the end of the period covered by this return? \$37a ■ Did the organization form 120-POL for this year? \$38a ■ Did the organization form 120-POL for this year? \$38b ■ N/A \$39a ■ N/A \$39a ■ N/A \$39a ■ Organization School (P) organizations. Enter. \$39a ■ N/A \$39a ■ Organization School (P) organizations included on line 9 \$39a ■ N/A \$	a		X
36 Did the organization undergo a liquidation, dissolution, termination, or significant disposition of net assets during the year? If 'Yes,' and a fenter amount of political expenditures, direct or indirect, as described in the instructions 37 a	b 1	N/	
ocomplete applicable parts of Sch. N 37a			
b Did the organization file Form 1120-POL for this year? 33 a Did the organization borrow from, or make any loans to, any officer, director, trustee, or key employee or were any such loans made in a prior year and still outstanding at the end of the period covered by this return? b If Yes, "complete Schedule L, Part II and enter the total amount involved Section 501(c)(7) organizations. Enter. a Initiation fees and capital contributions included on line 9 B Gross receipts, included on line 9, for public use of club facilities O	;		X
b Did the organization file Form 1120-POL for this year? 38 a Did the organization borrow from, or make any loans to, any officer, director, trustee, or key employee or were any such loans made in a prior year and still outstanding at the end of the period covered by this return? b If Yes, "complete Schedule L, Part II and enter the total amount involved Section 501(c)(7) organizations Enter. a Initiation fees and capital contributions included on line 9 B Gross receipts, included on line 9, for public use of club facilities O			
38 a Did the organization borrow from, or make any loans to, any officer, director, trustee, or key employee or were any such loans made in a prior year and still outstanding at the end of the period covered by this return? b If Yes, complete Schedule L, Part II and enter the total amount involved Section 501(c)(7) organizations Enter. a Initiation fees and capital contributions included on line 9 B Gross receipts, included on line 9, for public use of club facilities Section 501(c)(3) organizations Enter amount of tax imposed on the organization during the year under section 4911 ▶ 0; section 4912 ▶ 0; section 4915 ▶ 0 b Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in any section 4955 excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-E27 If Yes, complete Schedule L, Part 1 c Section 501(c)(3) and 501(c)(4) organizations. Enter amount of tax imposed on organization managers or disqualified persons during the year under sections 4912, 4955, and 4958 d Section 501(c)(3) and 501(c)(4) organizations. Enter amount of tax imposed on organization managers or disqualified persons during the year under sections 4912, 4955, and 4958 d Section 501(c)(3) and 501(c)(4) organizations. Enter amount of tax on line 40c reimbursed by the organization of 100 (c)(4) organizations. Enter amount of tax on line 40c reimbursed by the organization of 100 (c)(4) organizations. Enter amount of tax on line 40c reimbursed by the organization of 100 (c)(4) organizations as the organization aparty to a prohibited tax shelter transaction? If Yes, complete Form 886-T List the states with which a copy of this return is filed ▶ MI b At any time during the calendar year, did the organization have an interest in or a signature or other authority over a financial account in a foreign country. ▶ See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report	ъ		Х
b If Yes, "complete Schedule L, Part II and enter the total amount involved 38 Section 501(c)(7) organizations. Enter. a initiation fees and capital contributions included on line 9 b Gross receipts, included on line 9, for public use of club facilities 39b N/A 40a Section 501(c)(3) organizations. Enter amount of tax imposed on the organization during the year under section 4911 0 ; section 4912 0 . ; section 4955 0 . Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in any section 4956 excess benefit transaction during the year or is it aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZP If Yes," complete Schedule L, Part I 20 Section 501(c)(3) and 501(c)(4) organizations. Enter amount of tax imposed on organization managers or disqualified persons during the year under sections 4912, 4955, and 4956 3 Section 501(c)(3) and 501(c)(4) organizations. Enter amount of tax on line 40c reimbursed by the organization. All any time during the tax year, was the organization a party to a prohibited tax shelter transaction? If Yes," complete Form 8866-T 40 List the states with which a copy of this return is filed MI 41 List the states with which a copy of this return is filed MI 42 The organization's books are in care of DOROTHY BENYAS Telephone no (248)642 Located at 6 7 35 TELEGRAPH RD., BLOOMFIELD HILLS, MI 2 1 Yes," enter the name of the foreign country. See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts 4 A lany time during the calendar year, did the organization maintain an office outside of the U.S.? 1 Yes, enter the name of the foreign country. See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts 4 A life the organization maintain any donor a			
39 Section 501(c)(7) organizations Enter. a Initiation fees and capital contributions included on line 9 b Gross receipts, included on line 9, for public use of club facilities 39a N/A 40a Section 501(c)(3) organizations Enter amount of tax imposed on the organization during the year under section 4911 ▶ 0 . ; section 4912 ▶ 0 . ; section 4955 ▶ 0 . b Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in any section 4956 excess benefit transaction during the year or is it aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-E27 if Yes,* complete Schedule L, Part I c Section 501(c)(3) and 501(c)(4) organizations. Enter amount of tax imposed on organization managers or disqualified persons during the year under sections 4912, 4955, and 4958 d Section 501(c)(3) and 501(c)(4) organizations. Enter amount of tax on line 40c reimbursed by the organizations. At any time during the tax year, was the organization a party to a prohibited tax shelter transaction? If Yes,* complete Form 8866-T List the states with which a copy of this return is filed ▶ MI 10. All organization's books are in care of ▶ DOROTHY BENYAS Telephone no ▶ (248)642 Located at ▶ 6735 TELEGRAPH RD., BLOOMFTELD HILLS, MI b Alany time during the calendar year, did the organization have an interest in or a signature or other authority over a financial account in a foreign country. ▶ See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts c All any time during the calendar year, did the organization maintain an office outside of the U.S.? If Yes,* enter the name of the foreign country. ▶ See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts the Yes,* enter the name of the foreign country. ▶ 42 Did the organization maintain any	a		Х
a Initiation fees and capital contributions included on line 9 b Gross receipts, included on line 9, for public use of club facilities Section 501(c)(3) organizations. Enter amount of tax imposed on the organization during the year under section 4911 ▶ 0 ; section 4912 ▶ 0 . ; section 4958 ▶ 0 . b Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in any section 4958 excess benefit transaction during the year or is it aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If Yes,* complete Schedule L, Part I c Section 501(c)(3) and 501(c)(4) organizations. Enter amount of tax imposed on organization managers or disqualified persons during the year under sections 4912, 4955, and 4958 d Section 501(c)(3) and 501(c)(4) organizations. Enter amount of tax imposed on organization managers or disqualified persons during the year under sections 4912, 4955, and 4958 d Section 501(c)(3) and 501(c)(4) organizations. Enter amount of tax on line 40c reimbursed by the organization. e All organizations. All any time during the tax year, was the organization a party to a prohibited tax shelter transaction? If Yes,* complete Form 886-T List the states with which a copy of this return is filed ▶ MI 210 11 List the states with which a copy of this return is filed ▶ MI 211 122 The organization's books are in care of ▶ DOROTHY BENYAS Telephone no ▶ (248) 642 Located at ▶ 6735 TELEGRAPH RD., BLOOMFIELD HILLS, MI b All any time during the calendar year, did the organization have an interest in or a signature or other authority over a financial account in a foreign country. ▶ See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts c All any time during the calendar year, did the organization maintain an office outside of the U S.? If Yes,* enter the name of the foreign country:			
b Gross receipts, included on line 9, for public use of club facilities 40a Section 501(c)(3) organizations. Enter amount of tax imposed on the organization during the year under section 4911 ▶ 0 . ; section 4912 ▶ 0 . ; section 4915 ▶ 0 . ; section 501(c)(3) and 501(c)(4) organizations. Dut the organization engage in any section 4958 excess benefit transaction has not been reported on any of the organizations prior Forms 990 or 990-E72 If Yes,* complete Schedule L, Part I 0 . 40			
40a Section 501(c)(3) organizations Enter amount of tax imposed on the organization during the year under section 4911 ▶ 0.; section 4912 ▶ 0.; section 4915 ▶ 0. b Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in any section 4958 excess benefit transaction during the year or is it aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I c Section 501(c)(3) and 501(c)(4) organizations. Enter amount of tax imposed on organization managers or disqualified persons during the year under sections 4912, 4955, and 4958 d Section 501(c)(3) and 501(c)(4) organizations. Enter amount of tax imposed on organization managers or disqualified persons during the year under sections 4912, 4955, and 4958 d Section 501(c)(3) and 501(c)(4) organizations. Enter amount of tax imposed on organization managers or disqualified persons during the tax year, was the organization a party to a prohibited tax shelter transaction? If "Yes," complete Form 886-T 40 Section 501(c)(3) and 501(c)(4) organizations. Enter amount of tax on line 40c reimbursed by the organization. All any time during the tax year, was the organization a party to a prohibited tax shelter transaction? If "Yes," complete form 886-T 41 List the states with which a copy of this return is filed ▶ MI 42 The organization's books are in care of ▶ DOROTHY BENYAS Telephone no ▶ (248)642 Located at ▶ 6735 TELEGRAPH RD., BLOOMFTELD HILLS, MI ZiP+4 ▶ 483 b At any time during the calendar year, did the organization have an interest in or a signature or other authority over a financial account in a foreign country. ▶ See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts c At any time during the calendar year, did the organization maintain an office outside of the U.S.? 42 Did the organizat			
b Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in any section 4955 ▶ 0. b Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in any section 4958 excess benefit transaction during the year or is it aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I 40 c Section 501(c)(3) and 501(c)(4) organizations. Enter amount of tax imposed on organization managers or disqualified persons during the year under sections 4912, 4955, and 4958			
b Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in any section 4958 excess benefit transaction during the year or is it aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-E27 If Yes,* complete Schedule L, Part I 40 c Section 501(c)(3) and 501(c)(4) organizations. Enter amount of tax imposed on organization managers or disqualified persons during the year under sections 4912, 4955, and 4958			
year or is it aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If Yes,* complete Schedule L, Part I c Section 501(c)(3) and 501(c)(4) organizations. Enter amount of tax imposed on organization managers or disqualified persons during the year under sections 4912, 4955, and 4958 d Section 501(c)(3) and 501(c)(4) organizations. Enter amount of tax on line 40c reimbursed by the organization e All organizations. At any time during the tax year, was the organization a party to a prohibited tax shelter transaction? If Yes,* complete Form 8886-T 1 List the states with which a copy of this return is filed ▶ MI 12 The organization's books are in care of ▶ DOROTHY BENYAS 14 Located at ▶ 6735 TELEGRAPH RD., BLOOMFIELD HILLS, MI 15 At any time during the calendar year, did the organization have an interest in or a signature or other authority over a financial account in a foreign country (such as a bank account, securities account, or other financial account)? 16 Yes,* enter the name of the foreign country. ▶ 17 Yes,* enter the name of the foreign country. ▶ 18 Section 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ in lieu of Form 1041 - Check here and enter the name of the foreign country. ▶ 19 Section 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ in lieu of Form 1041 - Check here and enter the amount of tax-exempt interest received or accrued during the tax year 10 At any time during the calendar year, did the organization maintain an office outside of the U.S.? 11 Yes,* enter the name of the foreign country. ▶ 12 At any time during the calendar year, did the organization maintain an office outside of the U.S.? 13 Section 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ in lieu of Form 1041 - Check here and enter the amount of tax-exempt interest received or accrued during the tax year			
a has not been reported on any of the organization's prior Forms 990 or 990-EZ? If Yes,* complete Schedule L, Part I c Section 501(c)(3) and 501(c)(4) organizations. Enter amount of tax imposed on organization managers or disqualified persons during the year under sections 4912, 4955, and 4958 d Section 501(c)(3) and 501(c)(4) organizations. Enter amount of tax on line 40c reimbursed by the organization. e All organizations. At any time during the tax year, was the organization a party to a prohibited tax shelter transaction? If Yes,* complete Form 8886-T 40 11 List the states with which a copy of this return is filed ▶ MI 12 The organization's books are in care of ▶ DOROTHY BENYAS Located at ▶ 6735 TELEGRAPH RD., BLOOMFIELD HILLS, MI b At any time during the calendar year, did the organization have an interest in or a signature or other authority over a financial account in a foreign country (such as a bank account, securities account, or other financial account)? If Yes,* enter the name of the foreign country. ▶ See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts c At any time during the calendar year, did the organization maintain an office outside of the U S.? If Yes,* enter the name of the foreign country. ▶ 3 Section 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ in lieu of Form 1041 - Check here and enter the amount of tax-exempt interest received or accrued during the tax year 4 Did the organization maintain any donor advised funds? If Yes,* Form 990 must be completed instead of Form 990-EZ 4 Did the organization a controlled entity of the organization within the meaning of section 512(b)(13)? If Yes,* Form 990 must be completed instead of Form 990-EZ	Ì		
c Section 501(c)(3) and 501(c)(4) organizations. Enter amount of tax imposed on organization managers or disqualified persons during the year under sections 4912, 4955, and 4958 d Section 501(c)(3) and 501(c)(4) organizations. Enter amount of tax on line 40c reimbursed by the organization. e All organizations. At any time during the tax year, was the organization a party to a prohibited tax shelter transaction? If Yes, complete Form 8886-T 40 List the states with which a copy of this return is filed ▶ MI 412 The organization's books are in care of ▶ DOROTHY BENYAS Located at ▶ 6735 TELEGRAPH RD., BLOOMFIELD HILLS, MI b At any time during the calendar year, did the organization have an interest in or a signature or other authority over a financial account in a foreign country (such as a bank account, securities account, or other financial account)? If Yes, enter the name of the foreign country. ▶ See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts c At any time during the calendar year, did the organization maintain an office outside of the U.S.? If Yes, enter the name of the foreign country: ▶ 42 Section 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ in fieu of Form 1041 - Check here and enter the amount of tax-exempt interest received or accrued during the tax year 44 Did the organization maintain any donor advised funds? If Yes, Form 990 must be completed instead of Form 990-EZ 45 Is any related organization a controlled entity of the organization within the meaning of section 512(b)(13)? If Yes, Form 990 must be completed instead of Form 990-EZ			
or disqualified persons during the year under sections 4912, 4955, and 4958 d Section 501(c)(3) and 501(c)(4) organizations. Enter amount of tax on line 40c reimbursed by the organization e All organizations. At any time during the tax year, was the organization a party to a prohibited tax shelter transaction? If "Yes," complete Form 8886-T 1. List the states with which a copy of this return is filed ▶ MI 1. List the states with which a copy of this return is filed ▶ MI 1. Located at ▶ 6735 TELEGRAPH RD., BLOOMFIELD HILLS, MI 2. Located at ▶ 6735 TELEGRAPH RD., BLOOMFIELD HILLS, MI 3. At any time during the calendar year, did the organization have an interest in or a signature or other authority over a financial account in a foreign country (such as a bank account, securities account, or other financial account? 1. See the instructions for exceptions and filling requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts 2. At any time during the calendar year, did the organization maintain an office outside of the U.S.? 1. If "Yes," enter the name of the foreign country. 2. Section 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ in lieu of Form 1041 - Check here and enter the amount of tax-exempt interest received or accrued during the tax year 1. In the organization maintain any donor advised funds? If "Yes," Form 990 must be completed instead of Form 990-EZ 3. In the organization accountry of the organization within the meaning of section 512(b)(13)? If "Yes," Form 990 must be completed instead of Form 990-EZ	ь		X
d Section 501(c)(3) and 501(c)(4) organizations. Enter amount of tax on line 40c reimbursed by the organization e All organizations. At any time during the tax year, was the organization a party to a prohibited tax shelter transaction? If Yes,* complete Form 8886-T 40 List the states with which a copy of this return is filed ▶ MI 41 List the states with which a copy of this return is filed ▶ MI 42a The organization's books are in care of ▶ DOROTHY BENYAS Located at ▶ 6735 TELEGRAPH RD., BLOOMFIELD HILLS, MI b At any time during the calendar year, did the organization have an interest in or a signature or other authority over a financial account in a foreign country (such as a bank account, securities account, or other financial account)? If "Yes," enter the name of the foreign country. ▶ See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts c At any time during the calendar year, did the organization maintain an office outside of the U S.? If "Yes," enter the name of the foreign country: ▶ 43 Section 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ in lieu of Form 1041 - Check here and enter the amount of tax-exempt interest received or accrued during the tax year 44 Did the organization maintain any donor advised funds? If "Yes," Form 990 must be completed instead of Form 990-EZ 45 Is any related organization a controlled entity of the organization within the meaning of section 512(b)(13)? If "Yes," Form 990 must be completed instead of Form 990-EZ			
e All organizations. At any time during the tax year, was the organization a party to a prohibited tax shelter transaction? If "Yes," complete Form 8886-T 40 41 List the states with which a copy of this return is filed ▶ MI 42a The organization's books are in care of ▶ DOROTHY BENYAS Located at ▶ 6735 TELEGRAPH RD., BLOOMFIELD HILLS, MI 5 At any time during the calendar year, did the organization have an interest in or a signature or other authority over a financial account in a foreign country (such as a bank account, securities account, or other financial account)? 6 If "Yes," enter the name of the foreign country. ▶ See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts 6 At any time during the calendar year, did the organization maintain an office outside of the U S.? 1 If "Yes," enter the name of the foreign country. ▶ 43 Section 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ in lieu of Form 1041 - Check here and enter the amount of tax-exempt interest received or accrued during the tax year 44 Did the organization maintain any donor advised funds? If "Yes," Form 990 must be completed instead of Form 990-EZ 45 Is any related organization a controlled entity of the organization within the meaning of section 512(b)(13)? If "Yes," Form 990 must be completed instead of Form 990-EZ			ſ
e All organizations. At any time during the tax year, was the organization a party to a prohibited tax shelter transaction? If "Yes," complete Form 8886-T 40 List the states with which a copy of this return is filed ▶ MI 42a The organization's books are in care of ▶ DOROTHY BENYAS Telephone no ▶ (248) 642 Located at ▶ 6735 TELEGRAPH RD., BLOOMFIELD HILLS, MI ZIP+4 ▶ 483 b At any time during the calendar year, did the organization have an interest in or a signature or other authority over a financial account; in a foreign country (such as a bank account, securities account, or other financial account)? If "Yes," enter the name of the foreign country. ▶ See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts c At any time during the calendar year, did the organization maintain an office outside of the U.S.? If "Yes," enter the name of the foreign country: ▶ 43 Section 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ in lieu of Form 1041 - Check here and enter the amount of tax-exempt interest received or accrued during the tax year 44 Did the organization maintain any donor advised funds? If "Yes," Form 990 must be completed instead of Form 990-EZ 45 Is any related organization a controlled entity of the organization within the meaning of section 512(b)(13)? If "Yes," Form 990 must be completed instead of Form 990-EZ		ļ	ı
transaction? If "Yes," complete Form 8886-T List the states with which a copy of this return is filed MI 42a The organization's books are in care of DOROTHY BENYAS Telephone no (248) 642 Located at 6735 TELEGRAPH RD., BLOOMFIELD HILLS, MI ZIP+4 483 b At any time during the calendar year, did the organization have an interest in or a signature or other authority over a financial account in a foreign country (such as a bank account, securities account, or other financial account)? If "Yes," enter the name of the foreign country. See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts c At any time during the calendar year, did the organization maintain an office outside of the U S.? If "Yes," enter the name of the foreign country: Section 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ in lieu of Form 1041 - Check here and enter the amount of tax-exempt interest received or accrued during the tax year 43 N/ 44 Did the organization maintain any donor advised funds? If "Yes," Form 990 must be completed instead of Form 990-EZ 45 Is any related organization a controlled entity of the organization within the meaning of section 512(b)(13)? If "Yes," Form 990 must be completed instead of Form 990-EZ		l	I
List the states with which a copy of this return is filed ►MI 42a The organization's books are in care of ► DOROTHY BENYAS Telephone no ► (248)642 Located at ► 6735 TELEGRAPH RD., BLOOMFIELD HILLS, MI ZIP+4 ► 483 b At any time during the calendar year, did the organization have an interest in or a signature or other authority over a financial account in a foreign country (such as a bank account, securities account, or other financial account)? If "Yes," enter the name of the foreign country. ► See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts c At any time during the calendar year, did the organization maintain an office outside of the U S.? If "Yes," enter the name of the foreign country: ► 43 Section 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ in lieu of Form 1041 - Check here and enter the amount of tax-exempt interest received or accrued during the tax year 44 Did the organization maintain any donor advised funds? If "Yes," Form 990 must be completed instead of Form 990-EZ 45 Is any related organization a controlled entity of the organization within the meaning of section 512(b)(13)? If "Yes," Form 990 must be completed instead of Form 990-EZ			
42a The organization's books are in care of ▶ DOROTHY BENYAS Located at ▶ 6735 TELEGRAPH RD., BLOOMFIELD HILLS, MI b At any time during the calendar year, did the organization have an interest in or a signature or other authority over a financial account in a foreign country (such as a bank account, securities account, or other financial account)? If "Yes," enter the name of the foreign country. ▶ See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts c At any time during the calendar year, did the organization maintain an office outside of the U.S.? If "Yes," enter the name of the foreign country: ▶ 43 Section 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ in lieu of Form 1041 - Check here and enter the amount of tax-exempt interest received or accrued during the tax year 44 Did the organization maintain any donor advised funds? If "Yes," Form 990 must be completed instead of Form 990-EZ 45 Is any related organization a controlled entity of the organization within the meaning of section 512(b)(13)? If "Yes," Form 990 must be completed instead of Form 990-EZ	e		X
Located at ► 6735 TELEGRAPH RD., BLOOMFIELD HILLS, MT b At any time during the calendar year, did the organization have an interest in or a signature or other authority over a financial account in a foreign country (such as a bank account, securities account, or other financial account)? If "Yes," enter the name of the foreign country. ► See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts c At any time during the calendar year, did the organization maintain an office outside of the U S.? If "Yes," enter the name of the foreign country: ► Section 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ in lieu of Form 1041 - Check here and enter the amount of tax-exempt interest received or accrued during the tax year 1			
b At any time during the calendar year, did the organization have an interest in or a signature or other authority over a financial account in a foreign country (such as a bank account, securities account, or other financial account)? If "Yes," enter the name of the foreign country. See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts c At any time during the calendar year, did the organization maintain an office outside of the U S.? If "Yes," enter the name of the foreign country: Section 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ in lieu of Form 1041 - Check here and enter the amount of tax-exempt interest received or accrued during the tax year N/ Did the organization maintain any donor advised funds? If "Yes," Form 990 must be completed instead of Form 990-EZ Is any related organization a controlled entity of the organization within the meaning of section 512(b)(13)? If "Yes," Form 990 must be completed instead of Form 990-EZ 45 Is any related organization a controlled entity of the organization within the meaning of section 512(b)(13)? If "Yes," Form 990 must be completed instead of Form 990-EZ			0
over a financial account in a foreign country (such as a bank account, securities account, or other financial account)? If "Yes," enter the name of the foreign country. See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts c At any time during the calendar year, did the organization maintain an office outside of the U.S.? If "Yes," enter the name of the foreign country: Section 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ in lieu of Form 1041 - Check here and enter the amount of tax-exempt interest received or accrued during the tax year N/ Did the organization maintain any donor advised funds? If "Yes," Form 990 must be completed instead of Form 990-EZ Is any related organization a controlled entity of the organization within the meaning of section 512(b)(13)? If "Yes," Form 990 must be completed instead of Form 990-EZ 45 Is any related organization a controlled entity of the organization within the meaning of section 512(b)(13)? If "Yes," Form 990 must be completed instead of Form 990-EZ	01	<u>. </u>	
account)? If "Yes," enter the name of the foreign country. See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts c At any time during the calendar year, did the organization maintain an office outside of the U S.? If "Yes," enter the name of the foreign country: 3 Section 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ in lieu of Form 1041 - Check here and enter the amount of tax-exempt interest received or accrued during the tax year 43 N/ 44 Did the organization maintain any donor advised funds? If "Yes," Form 990 must be completed instead of Form 990-EZ 45 Is any related organization a controlled entity of the organization within the meaning of section 512(b)(13)? If "Yes," Form 990 must be completed instead of Form 990-EZ 45 Is any related organization a controlled entity of the organization within the meaning of section 512(b)(13)? If "Yes," Form 990 must be completed instead of Form 990-EZ	_		
If "Yes," enter the name of the foreign country. See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts At any time during the calendar year, did the organization maintain an office outside of the U.S.? If "Yes," enter the name of the foreign country: Section 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ in lieu of Form 1041 - Check here and enter the amount of tax-exempt interest received or accrued during the tax year At Did the organization maintain any donor advised funds? If "Yes," Form 990 must be completed instead of Form 990-EZ Is any related organization a controlled entity of the organization within the meaning of section 512(b)(13)? If "Yes," Form 990 must be completed instead of Form 990-EZ At Section 4947(a)(1) nonexempt charitable trusts filing Form 990 must be completed instead of Form 990-EZ At Did the organization maintain any donor advised funds? If "Yes," Form 990 must be completed instead of Form 990-EZ At Did the organization a controlled entity of the organization within the meaning of section 512(b)(13)? If "Yes," Form 990 must be completed instead of Form 990-EZ	Y	⁄es	No
See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts c At any time during the calendar year, did the organization maintain an office outside of the U S.? If "Yes," enter the name of the foreign country: Section 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ in lieu of Form 1041 - Check here and enter the amount of tax-exempt interest received or accrued during the tax year 1	b L		_X_
c At any time during the calendar year, did the organization maintain an office outside of the U.S.? If "Yes," enter the name of the foreign country: ► Section 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ in lieu of Form 1041 - Check here and enter the amount of tax-exempt interest received or accrued during the tax year Lambda N/ 44 Did the organization maintain any donor advised funds? If "Yes," Form 990 must be completed instead of Form 990-EZ 45 Is any related organization a controlled entity of the organization within the meaning of section 512(b)(13)? If "Yes," Form 990 must be completed instead of Form 990-EZ 45 Is any related organization a controlled entity of the organization within the meaning of section 512(b)(13)? If "Yes," Form 990 must be completed instead of Form 990-EZ			
If "Yes," enter the name of the foreign country: Section 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ in lieu of Form 1041 - Check here and enter the amount of tax-exempt interest received or accrued during the tax year 1			
Section 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ in lieu of Form 1041 - Check here and enter the amount of tax-exempt interest received or accrued during the tax year 43 N/ 44 Did the organization maintain any donor advised funds? If "Yes," Form 990 must be completed instead of Form 990-EZ 45 Is any related organization a controlled entity of the organization within the meaning of section 512(b)(13)? If "Yes," Form 990 must be completed instead of Form 990-EZ 45 Is any related organization a controlled entity of the organization within the meaning of section 512(b)(13)? If "Yes," Form 990 must be completed instead of Form 990-EZ	c		X
and enter the amount of tax-exempt interest received or accrued during the tax year 1. A			
Did the organization maintain any donor advised funds? If "Yes," Form 990 must be completed instead of Form 990-EZ 45 Is any related organization a controlled entity of the organization within the meaning of section 512(b)(13)? If "Yes," Form 990 must be completed instead of Form 990-EZ 45 Completed instead of Form 990-EZ			Ш
Form 990-EZ 45 Is any related organization a controlled entity of the organization within the meaning of section 512(b)(13)? If "Yes," Form 990 must be completed instead of Form 990-EZ 46 Completed instead of Form 990-EZ	A		
Form 990-EZ 45 Is any related organization a controlled entity of the organization within the meaning of section 512(b)(13)? If "Yes," Form 990 must be completed instead of Form 990-EZ 46 Completed instead of Form 990-EZ	\ <u>\</u>	/	NI-
Form 990-EZ 45 Is any related organization a controlled entity of the organization within the meaning of section 512(b)(13)? If "Yes," Form 990 must be completed instead of Form 990-EZ 46 Completed instead of Form 990-EZ	Y	res	No
45 Is any related organization a controlled entity of the organization within the meaning of section 512(b)(13)? If "Yes," Form 990 must be completed instead of Form 990-EZ	.		77
completed instead of Form 990-EZ	1		X
			7.7
Г		0.53/	X

Form 990-l	Z (2009) FEDERATION SUPPORT FOUNI	DATION 38		30-02321	.78	Page 4
Part VI	Section 501(c)(3) organizations and section organizations and section 4947(a)(1) nonexempt charitable and 51.	4947(a)(1) nonexempt		sts only. All s	ection 50	
46 Did th	ne organization engage in direct or indirect political campaign activities	on behalf of or in opposition to o	candidates for public		Ye	s No
office	? If "Yes," complete Schedule C, Part I		·		46	\rightarrow
47 Did th	ne organization engage in lobbying activities? If "Yes," complete Sc	hedule C, Part II			47	X X X
	organization a school as described in section 170(b)(1)(A)(ii)? If "Ye			_	48	X
	ne organization make any transfers to an exempt non-charitable related	d organization?			49a	X
	s," was the related organization a section 527 organization?				49b	
	plete this table for the organization's five highest compensated employ \$100,000 of compensation from the organization. If there is none, ente	·	s, trustees and key e	mployees) who ea	ch received	l more
	(a) Name and address of each employee paid more than \$100,000 NONE	(b) Title and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans & deferred compensation	(e) Exp accour other allo	it and
		-				
51 Comp	number of other employees paid over \$100,000 plete this table for the organization's five highest compensated indeper hization. If there is none, enter "None." NONE		ved more than \$100	,000 of compensa	tion from t	he
	(a) Name and address of each independent contractor paid mor	e than \$100,000	(b) Type of ser	vice (c)	Compens	ation
						
					<u> </u>	
d Total	number of other independent contractors each receiving over \$100,00	00	>			
 Sign	Under penalties of perjury, I declare that I have examined this return, including a correct, and complete Deplacation of preparer (other than officer) is based on all	accompanying schedules and statemen I information of which preparer has any	its, and to the best of m knowledge	y knowledge and beli		
Here	Signature of officer DOROTHY BENYAS, DIRECTOR			Date	<u>-</u>	
	Type or print name and title		·····			
Paid Preparer's	Preparer's signature MICHAEL F. FENBERG	Date Che 10/13/10 emp		parer's identifying nui	nber (See in:	str)
Use Only	Firm's name (or yours BAKER TILLY VIRCHOW KE	RAUSE, LLP	EIN	<u> </u>		
	if self employed), ONE TOWNE SQUARE, SUIT	re 600	Phor			
	addiess, and ZIP+4 SOUTHFIELD, MI 48076		no	248-37	2-73	00

► X Yes No

May the IRS discuss this return with the preparer shown above? See instructions

SCHEDULE A (Form 990 or 990-EZ)

Public Charity Status and Public Support

OMB No 1545-0047 2009

Open to Public

Department of the Treasury Internal Revenue Service

Name of the organization

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.

➤ Attach to Form 990 or Form 990-EZ. ➤ See separate instructions.

FEDERATION SUPPORT FOUNDATION 38

Inspection
Employer identification number

30-0232178

Part i	Reason	for Public Char	ity Status (All organiz	ations mu	st complet	te this part	:) See inst	tructions				
The organ	ization is not a	private foundation l	pecause it is (For lines 1	through	11, check	only one b	ox)					
1	A church, cor	nvention of churches	s, or association of churc	ches desc	ribed in se	ction 170	(b)(1)(A)(i)).				
2			0(b)(1)(A)(II). (Attach Sc									
з 🗀			al service organization of	•		170(b)(1)((A)(in).					
4	· ·		perated in conjunction					(b)(1)(A)(ii	ii). Enter t	he hospital's name,		
	city, and stat				•				•	•		
5	An organizati	on operated for the l	benefit of a college or ur	niversity ov	wned or or	perated by	a govern	mental uni	t describ	ed in		
		(b)(1)(A)(ıv). (Comple	=	•		ĺ						
6 🔲	A federal, sta	te, or local governme	ent or governmental unit	t described	d in sectio	n 170(b)(1	I)(A)(v).					
7	An organizati	on that normally reco	eives a substantial part	of its supp	ort from a	governme	ntal unit o	r from the	general	public described in		
	section 170(b)(1)(A)(vi). (Complete Part II)											
8 🗌	A community	trust described in s	ection 170(b)(1)(A)(vi).	(Complete	Part II)							
9 🗌	An organizati	on that normally reco	eives (1) more than 33 1	1/3% of its	support f	rom contri	butions, m	nembershi	p fees, ai	nd gross receipts from		
	activities rela	ted to its exempt fur	octions - subject to certa	ıın exceptı	ons, and (2) no more	than 33 1	/3% of its	support	from gross investment		
	income and u	inrelated business ta	axable income (less sect	ion 511 ta	x) from bu	sinesses a	cquired b	y the orga	ınızatıon a	after June 30, 1975		
	See section	509(a)(2). (Complete	Part III)									
10	An organizati	on organized and op	erated exclusively to te	st for publ	c safety. S	See sectio	n 509(a)(4	I).				
11 X	An organizati	on organized and op	erated exclusively for th	ne benefit d	of, to perfo	orm the fur	nctions of,	or to carr	y out the	purposes of one or		
	more publicly	supported organiza	tions described in section	on 509(a)(1	1) or section	on 509(a)(2) See sec	tion 509(a)(3). Che	eck the box that		
	describes the	type of supporting	organization and comple	ete lines 1°	1e through	11h						
	a X Type I	b] Type II 💢 🐧	: 🔲 Тур	e III - Fund	tionally int	egrated		d 🗀	Type III - Other		
е 🗀	By checking	this box, I certify tha	t the organization is not	controlled	directly o	r ındırectly	by one o	r more disc	qualified	persons other than		
	foundation m	anagers and other the	nan one or more publicly	y supporte	d organiza	ations desc	cribed in s	ection 509	9(a)(1) or	section 509(a)(2).		
f	If the organiz	ation received a writ	ten determination from t	he IRS tha	at it is a Ty	pe I, Type	II, or Type	e III				
	supporting of	rganization, check th	is box							\mathbf{x}		
g	Since August	t 17, 2006, has the o	rganization accepted ar	ny gift or co	ontribution	from any	of the folk	owing pers	sons?			
	(i) A perso	n who directly or ind	rectly controls, either al	one or tog	ether with	persons d	lescribed i	ın (ıı) and (ш) below,	Yes No		
	the gove	erning body of the su	ipported organization?							11g(ı) X		
	(ii) A family	member of a person	described in (i) above?							11g(iı) X		
	(iii) A 35% d	controlled entity of a	person described in (i) o	or (II) above	9?					11g(iii) X		
h	Provide the fe	ollowing information	about the supported or	ganization	(s)							
(i) Name	of supported	(II) EIN	(III) Type of	(iv) Is the o	rganization	(v) Did you	notify the	(vi) ls	the	(vii) Amount of		
	anization	, ,	organization (described on lines 1-9		sted in your			organizátic (i) organiz	ed in the	support		
			above or IRC section	governing	document?	(i) of your	support?	U.S	.?			
			(see instructions))	Yes	No	Yes	No	Yes	No			
JEWIS	H]				-				
FEDER	ATION O	38-1359214	7	X		X		X		0.		
								<u> </u>				
								<u></u> .				
·												
		l :			1	1	ľ	I .	1 1			

LHA For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ.

Schedule A (Form 990 or 990-EZ) 2009

0.

ns 170(b)(1)(A)(iv) at	(e) 2009	(f) Total
007 (d) 2008	(e) 2009	(f) Total
007 (d) 2008	(e) 2009	(f) Total

8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Net income from unrelated business activities, whether or not the business is regularly carried on Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV) 11 Total support. Add lines 7 through 10 Gross receipts from related activities, etc. (see instructions) 13 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here Section C. Computation of Public Support Percentage % 14 Public support percentage for 2009 (line 6, column (f) divided by line 11, column (f)) 14 15 Public support percentage from 2008 Schedule A, Part II, line 14 15 % 16a 33 1/3% support test - 2009. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization b 33 1/3% support test - 2008. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization 17a 10% -facts-and-circumstances test - 2009. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more,

and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization

b 10% -facts-and-circumstances test - 2008. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the

meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization

organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization.

18 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions.

(b) 2006

(c) 2007

(d) 2008

(e) 2009

(f) Total

Schedule A (Form 990 or 990-EZ) 2009

Section B. Total Support

7 Amounts from line 4

Calendar year (or fiscal year beginning in)

(a) 2005

Schedule	Α	(Form	990	or	990)-F7)	2009

Schedule A (Form 990 or 990-EZ) 2009	Organizations	Dosoribad in	Section 500/a	V(2)		Page 3
Part III Support Schedule for Section A. Public Support	Organizations	Described in	Section 509(a	バイノ (Complete on!	y if you checked the bo	ox on line 9 of Part I
	(-) 0005	4 > 0000	4 3 0007		1 ,,,,,,,,,,	40 T. I. I
Calendar year (or fiscal year beginning in) 1 Gifts, grants, contributions, and	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
membership fees received (Do not		1				
include any "unusual grants ")						
2 Gross receipts from admissions,		 				
merchandise sold or services per- formed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3 Gross receipts from activities that						
are not an unrelated trade or bus-						
iness under section 513						
4 Tax revenues levied for the organ-						
ization's benefit and either paid to or expended on its behalf						
5 The value of services or facilities						
furnished by a governmental unit to		1				
the organization without charge	<u> </u>					
6 Total. Add lines 1 through 5						
7a Amounts included on lines 1, 2, and						
3 received from disqualified persons	s <u></u>					
b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
c Add lines 7a and 7b						
8 Public support (Subtract line 7c from line 6)						
Section B. Total Support						
Calendar year (or fiscal year beginning in)	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
Calendar year (or fiscal year beginning in)9 Amounts from line 6	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
- ' '	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
9 Amounts from line 6 10a Gross income from interest, dividends, payments received on securities loans, rents, royalties	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
Amounts from line 6 10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources		(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
 9 Amounts from line 6 10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources b Unrelated business taxable income 		(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
 9 Amounts from line 6 10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources b Unrelated business taxable income (less section 511 taxes) from businesses 		(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
 9 Amounts from line 6 10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 		(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
 9 Amounts from line 6 10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 c Add lines 10a and 10b 11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on 12 Other income Do not include gain or loss from the sale of capital 		(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
 9 Amounts from line 6 10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 c Add lines 10a and 10b 11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on 12 Other income Do not include gain 		(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
9 Amounts from line 6 10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 c Add lines 10a and 10b 11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on 12 Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV)						
 9 Amounts from line 6 10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 c Add lines 10a and 10b 11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on 12 Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV) 13 Total support (Add lines 9, 10c, 11, and 12) 14 First five years. If the Form 990 is ficheck this box and stop here 	or the organization	s first, second, the				
 9 Amounts from line 6 10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 c Add lines 10a and 10b 11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on 12 Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV) 13 Total support (Add lines 9, 10c, 11, and 12) 14 First five years. If the Form 990 is ferred 	or the organization	s first, second, the				
 9 Amounts from line 6 10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 c Add lines 10a and 10b 11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on 12 Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV) 13 Total support (Add lines 9, 10c, 11, and 12) 14 First five years. If the Form 990 is ficheck this box and stop here 	or the organization	s first, second, the	rd, fourth, or fifth t			
 9 Amounts from line 6 10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 c Add lines 10a and 10b 11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on 12 Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV) 13 Total support (Add lines 9, 10c, 11, and 12) 14 First five years. If the Form 990 is fine check this box and stop here Section C. Computation of Public support percentage for 2009 16 Public support percentage from 200 	or the organization olic Support Pe (line 8, column (f) column (f	s first, second, the ercentage divided by line 13, and till, line 15	rd, fourth, or fifth to		on 501(c)(3) organiz	ration,
 9 Amounts from line 6 10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 c Add lines 10a and 10b 11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on 12 Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV) 13 Total support (Add lines 9, 10c, 11, and 12) 14 First five years. If the Form 990 is fine check this box and stop here Section C. Computation of Published 15 Public support percentage for 2009 	or the organization olic Support Pe (line 8, column (f) column (f	s first, second, the ercentage divided by line 13, and till, line 15	rd, fourth, or fifth to		on 501(c)(3) organiz	eation,
 9 Amounts from line 6 10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 c Add lines 10a and 10b 11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on 12 Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV) 13 Total support (Add lines 9, 10c, 11, and 12) 14 First five years. If the Form 990 is from the sale of capital assets (Explain in Part IV) 15 Public support percentage for 2009 16 Public support percentage from 200 Section D. Computation of Investment income percentage for 201 	or the organization olic Support Pe (line 8, column (f) ole Schedule A, Pari estment Income 2009 (line 10c, column (c) ole state (c) ole	s first, second, the ercentage divided by line 13, till, line 15 the Percentage mn (f) divided by line	rd, fourth, or fifth to		on 501(c)(3) organiz	eation,
 9 Amounts from line 6 10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 c Add lines 10a and 10b 11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on 12 Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV) 13 Total support (Add lines 9, 10c, 11, and 12) 14 First five years. If the Form 990 is find the support percentage for 2009 15 Public support percentage from 200 16 Public support percentage from 200 17 Investment income percentage from 201 18 Investment income percentage from 201 	or the organization Olic Support Pe (line 8, column (f) of the schedule A, Part estment Income to the schedule A, Column (f) of the schedule A, Part estment Income to the schedule A, Part estment Income	s first, second, the ercentage divided by line 13, till, line 15 the Percentage mn (f) divided by line 17	column (f))	ax year as a secti	15 16 17 18	% % %
 9 Amounts from line 6 10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 c Add lines 10a and 10b 11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on 12 Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV) 13 Total support (Add lines 9, 10c, 11, and 12) 14 First five years. If the Form 990 is for check this box and stop here Section C. Computation of Public support percentage for 2009 16 Public support percentage from 200 Section D. Computation of Inventage 33 1/3% support tests - 2009. If the 	or the organization olic Support Pe (line 8, column (f) olic Schedule A, Part estment Income 2009 (line 10c, column 12008 Schedule A, Part error estment Income conganization did	s first, second, this ercentage divided by line 13, till, line 15 ee Percentage mn (f) divided by line Part III, line 17 not check the box	column (f)) ne 13, column (f)) on line 14, and line	ax year as a secti	15 16 17 18 33 1/3%, and line 1	% % %
 9 Amounts from line 6 10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 c Add lines 10a and 10b 11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on 12 Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV) 13 Total support (Add lines 9, 10c, 11, and 12) 14 First five years. If the Form 990 is fine check this box and stop here Section C. Computation of Public support percentage from 200 Section D. Computation of Inventage 10 and 13 and 13 linvestment income percentage from 19a 33 1/3% support tests - 2009. If the more than 33 1/3%, check this box 	or the organization Dlic Support Pe (line 8, column (f) o 8 Schedule A, Part estment Incom 2009 (line 10c, colu a 2008 Schedule A, e organization did and stop here. The	s first, second, the ercentage divided by line 13, till, line 15 ee Percentage mn (f) divided by line Part III, line 17 not check the box e organization qual	rd, fourth, or fifth to column (f)) ne 13, column (f)) on line 14, and line fies as a publicly s	ax year as a section	15 16 17 18 33 1/3%, and line 1 2ation	% % % % 17 is not
9 Amounts from line 6 10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 c Add lines 10a and 10b 11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on 12 Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV) 13 Total support (Add lines 9, 10c, 11, and 12) 14 First five years. If the Form 990 is fine check this box and stop here Section C. Computation of Public support percentage for 2009 16 Public support percentage from 2005 Section D. Computation of Involventian 33 1/3% support tests - 2009. If the more than 33 1/3%, check this box b 33 1/3% support tests - 2008. If the	or the organization olic Support Pe (line 8, column (f) ole Schedule A, Part estment Incom 2009 (line 10c, column 2008 Schedule A, e organization did and stop here. The e organization did	s first, second, the ercentage divided by line 13, and lill, line 15 ercentage mn (f) divided by line 17 not check the box erganization quality not check a box on	column (f)) on line 14, and line fies as a publicly so line 14 or line 19	e 15 is more than supported organia, and line 16 is n	15 16 17 18 33 1/3%, and line 1 cation nore than 33 1/3%,	% % % % 17 is not
 9 Amounts from line 6 10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 c Add lines 10a and 10b 11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on 12 Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV) 13 Total support (Add lines 9, 10c, 11, and 12) 14 First five years. If the Form 990 is fine check this box and stop here Section C. Computation of Public support percentage from 200 Section D. Computation of Inventage 10 and 13 and 13 linvestment income percentage from 19a 33 1/3% support tests - 2009. If the more than 33 1/3%, check this box 	or the organization olic Support Pe (line 8, column (f) ole Schedule A, Part estment Incom 2008 Schedule A, e organization did and stop here. The e organization did neck this box and s	s first, second, the ercentage divided by line 13, at III, line 15 ercentage mn (f) divided by line 17 mot check the box erganization qual mot check a box of top here. The organization	column (f)) on line 14, and line fies as a publicly so in line 14 or line 19a unization qualifies a	e 15 is more than supported organia, and line 16 is nas a publicly supports organias and publicly supports organias and supports organias and supports organias organ	15 16 17 18 33 1/3%, and line 1 cation nore than 33 1/3%, ported organization	% % % % 17 is not

FO	RM 990-EZ	INFORMATION REGARDING TRANSFERS ASSOCIATED WITH PERSONAL BENEFIT CONTRACTS		S'	ratei	ИЕИТ	1
A)	DIRECTLY OR	ANIZATION, DURING THE YEAR, RECEIVE ANY FUNDS, INDIRECTLY, TO PAY PREMIUMS ON A PERSONAL TRACT?	[]	YES	[X]	NO
B)		ANIZATION, DURING THE YEAR, PAY PREMIUMS, INDIRECTLY, ON A PERSONAL BENEFIT CONTRACT?	[]	YES	[X]	NO