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# **Return of Private Foundation**

#### or Section 4947(a)(1) Nonexempt Charitable Trust Treated as a Private Foundation

OMB No 1545-0052

2009

		the Treasury ue Service	Note		I reated as a Private be able to use a copy of this			rtına requirement	s	2009
		r year 2009, or	<del> </del>		1, 2009	, and endin		AUG 31,		<u> </u>
G C	heck all	that apply	Ini	itial return	Initial return of a fo	rmer public chari	ty	F	inal return	
		<u> </u>		nended return	Address chang	<u></u>		Name change		···············
	the IRS	Name of four	ndation					A Employer ide	ntification n	umber
	ibel erwise.	VETOWI	CH FA	MILY FOUND	ATTON			38-67	50824	
_	orint			oox number if mail is not de	·	Roc	m/suite	B Telephone nu		
	type.	C/OW.	FELO	SAK, 26026	TELEGRAPH	20	0		55-515	1
	Specifi uctions	City of town,						C If exemption app	-	_
		SOUTHE						D 1 Foreign org	ganizations, d	check here
H C	, .	pe of organizati			xempt private foundation Other taxable private founda	*.aa		check here a	nd attach com	ng the 85% test,  outstion
l Fai		et value of all as				Accrual		E If private four under section	dation status	was terminated
		t II, col. (c), lir		·	ther (specify)	Accidat		ľ		-month termination
•	\$		255,	559 . (Part I, colu	ımn (d) must be on cash t	oasis)		under section		
Pa	rt i A	nalysis of Rev	enue and E	xpenses (b), (c), and (d) may not	(a) Revenue and	(b) Net invest	ment	(c) Adjuste		(d) Disbursements for charitable purpose
	n	ecessanly equal ti	he amounts in	column (a) )	expenses per books	income		income	)	(cash basis only)
		ontributions, gif		etc , received not required to attach Sch. B	2,000.			N/A		
		eck <b>► A</b> If the erest on savings a sh investments								· <del>····································</del>
ŀ		sh investments Vidends and int			7,146.	7.	146.		ŝ	tatement
		oss rents								
	<b>þ</b> Ne	et rental income or	(loss)							
e		et gain or (loss) froi oss sales price for			-5,793.					***************************************
Revenue	u as:	sets on line 6a		21,707.			0.			
æ		ipital gain net inco et short-term ca	•	t IV, line 2)			0.			·····
		come modificat	. •						-	· · · · · · · · · · · · · · · · · · ·
	Gr Gr	oss sales less retu d allowances				•••••				<del></del>
	<b>b</b> Le	ss Cost of goods	sold							
	<b>c</b> Gr	oss profit or (lo	oss)							
		her income			3,353.	7	116			
		otal. Add lines of off			1		146. 0.			
		her employee s			1-7.3		<u> </u>			
		ension plans, er		<u> </u>				ļ	···-	
ses	<b>16a</b> Le	gal fees		12 111 15	2011					
bed		counting fees		Stmt 2 b	2,000.	<u>2,</u>	000.			
Ä		her professiona	al fees	Stmt 3	1953.		953.			<del>-</del>
ğ		terest ixes		00,00						
istra		epreciation and	denletion			<del></del>				- mail starting
Administrative Expenses		ссирапсу	oopiotion.							
A		avel, conferenc	es, and med	etings						-
(0)	<b>22</b> Pr	inting and publ	lications							
ing		her expenses		Stmt 4	650.		650.			
Operating		otal operating a			3,603.	2	603.	}		
ô		r <b>penses</b> Add li ontributions, gif		-	10,000.	3,	003.			10,00
		otal expenses a	-		10/0001					10,00
		d lines 24 and			13,603.	3,	603.			10,00
		ubtract line 26 f								
				and disbursements	-10,250.		<u> </u>	<u></u>		
		et investment i				3,	543.	NT / P		***************************************
92350 02-02	C AC	ijusted net inco			Act Notice, see the instruct	ions		N/A		Form QQQ DE (0)
	-10 L	THE FULFILLS	ICY MUL BIID	LahelMnik Vennctiou	ver women, see the instruct	41101				Form <b>990-PF</b> (20

Da	Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only	beginning of year	End of	year
Le	column should be for end-of-year amounts only	(a) Book Value	(b) Book Value	(c) Fair Market Value
	1 Cash - non-interest-bearing	19,401.	33,219.	33,219.
	2 Savings and temporary cash investments			<u> </u>
ł	3 Accounts receivable ►			
	Less allowance for doubtful accounts ▶			
	4 Pledges receivable	······	······································	
1	Less allowance for doubtful accounts ▶	Ì		
	5 Grants receivable			<del></del>
	6 Receivables due from officers, directors, trustees, and other			
	disqualified persons			
	7 Other notes and loans receivable			·····
İ	Less allowance for doubtful accounts	•		
<u>"</u>	8 Inventories for sale or use	<del>-</del> -	*****	
Assets	9 Prepaid expenses and deferred charges			
Asi .	· · · · · · · · · · · · · · · · · · ·			
_ ' '	Oa Investments - U S and state government obligations b Investments - corporate stock Stmt 5	267,080.	242 012	222 240
		207,080.	243,012.	222,340.
	c Investments - corporate bonds			<del>\(\text{\tinc{\tint{\texi{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\tin}\text{\tin}\text{\texi\tint{\text{\text{\text{\text{\text{\text{\tin}}\\ \tittt{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\tin}\titt{\text{\tin}\tittitt{\text{\text{\text{\texitile}}\tittt{\text{\texitile}}\tittt{\text{\text{\text{\text{\texitile}}\tittt{\texitile}\tittt{\texitile}\tittt{\texititt{\texitile}}\tittt{\texitile}}\tinttile}\tittt{\tiinttitt{\texitile}\tittt{\texitit</del>
ין	1 Investments - land, buildings, and equipment basis			
	Less accumulated depreciation			
1	2 Investments - mortgage loans			
	3 Investments - other			<del></del>
1	4 Land, buildings, and equipment basis ►			
	Less accumulated depreciation			
1	5 Other assets (describe ►)			
1	6 Total assets (to be completed by all filers)	286,481.	276,231.	255,559.
1	7 Accounts payable and accrued expenses			
1	8 Grants payable			
ဖွ 1	9 Deferred revenue			
Liabilities	Loans from officers, directors, trustees, and other disqualified persons			
api	1 Mortgages and other notes payable			
	2 Other liabilities (describe )			
- 1	· · · · · · · · · · · · · · · · · · ·			
2	3 Total liabilities (add lines 17 through 22)	0.	0.	
	Foundations that follow SFAS 117, check here			
	and complete lines 24 through 26 and lines 30 and 31.			
Ses	4 Unrestricted			
	5 Temporarily restricted			
age 1	6 Permanently restricted			
퉏.	Foundations that do not follow SFAS 117, check here			
ᆵ				
٥,	and complete lines 27 through 31. 7 Capital stock, trust principal, or current funds	241,321.	241,321.	
ets	· · · · · · · · · · · · · · · · · · ·	0.	0.	
ÜΟΙ	Paid-in or capital surplus, or land, bldg, and equipment fund	45,160.	34,910.	
t   6	Retained earnings, accumulated income, endowment, or other funds		276,231.	
Ž	10 Total net assets or fund balances	286,481.	2/0,231.	
۔ ا	T	206 401	276 221	
فلـــ	11 Total liabilities and net assets/fund balances	286,481.	276,231.	
Pa	rt III Analysis of Changes in Net Assets or Fund B	alances		
	otal net assets or fund balances at beginning of year - Part II, column (a), line	3U		206 401
	nust agree with end-of-year figure reported on prior year's return)		1	286,481.
	nter amount from Part I, line 27a		2	-10,250.
	ther increases not included in line 2 (itemize)		3	0.
	dd lines 1, 2, and 3		4	276,231.
	ecreases not included in line 2 (itemize)		5	0.
<u>6 T</u>	otal net assets or fund balances at end of year (line 4 minus line 5) - Part II, co	lumn (b), line 30	6	276,231.
0005	-	-		Form <b>990-PF</b> (2009)

(a) List and descri	be the kind(s) of pi	or Tax on Investment roperty sold (e.g., real estate, n.stock, 200 shs. MLC Co.)	it income	(p) +	low acquired Purchase		) Date acquired (mo , day, yr )	(d) Date sold (mo , day, yr )
1a OMNICOM		11 Stock, 200 Silo 14120 00 /	<del></del>	U	- Donation D		arious	03/29/10
b SLM				<del> </del>	<u>D</u>	_	arious_	06/15/10
C						Ť	ur rour	00710710
d						1	<del></del>	
е				İ				
(e) Gross sales price	(f) Depreciation (or allow		ost or other basis expense of sale				(h) Gain or (loss (e) plus (f) minus	
a 7,995.			7,50					495.
b 13,712.			20,00	0.				-6,288.
С					<del> </del>			
d								
e		\\	10/04/00		<del></del>			
Complete only for assets showing		· · · · · · · · · · · · · · · · · · ·					ains (Col. (h) gain r), but not less tha	
(i) F M V as of 12/31/69	(j) Adjuste as of 12/3		xcess of col (i) r col (j), if any			1	osses (from col	(h))
		31700	7 001 ()7, 11 4119					495.
b	<del> </del>	-		$\dashv$				-6,288.
C	. =							-0,200.
d								···
6				$\dashv$			-	
	( )	f gain, also optor in Part I. line	. 7	<u>5</u> †				
2 Capital gain net income or (net cap	•	f gain, also enter in Part I, line f (loss), enter -0- in Part I, line	e 7	•	2		· · · · · · · · · · · · · · · · · · ·	-5,793.
3 Net short-term capital gain or (loss if gain, also enter in Part I, line 8, c		tions 1222(5) and (6)		۱۱				
If (loss), enter -0- in Part I, line 8	olufilii (C)			•	3		N/A	
	nder Section	4940(e) for Reduce	d Tax on Net	Inve	estment	nco		
Nas the foundation liable for the secti f "Yes," the foundation does not qualif Enter the appropriate amount in ea	y under section 49	40(e) Do not complete this p	art		·			Yes X No
(a) Base period years Calendar year (or tax year beginnin	a in\ Adjust	(b) ed qualifying distributions	Net value of no	(c)	table-use ass	ets	Distri	(d) bution ratio vided by col (c))
2008	9 1117 .	18,514.		-	238,3		(601 (6) 01	•077669
2007		10,650.			304,3			.034991
2006		5,000.			329,9			.015153
2005		8,700.			229,5			.037908
2004		13,646.			227,0	42.		.060103
2 Total of line 1, column (d)							2	.225824
3 Average distribution ratio for the 5			, or by the number	of yea	ırs			
the foundation has been in existen	ce if less than 5 year	ars					3	045165
4 Enter the net value of noncharitable	e-use assets for 20	09 from Part X, line 5					4	237,877.
5 Multiply line 4 by line 3							5	10,744.
6 Enter 1% of net investment income	e /1% of Part I line	27h)					6	35.
7 Add lines 5 and 6	- , : : - <i> </i>							10,779.
	B AW:						7	
8 Enter qualifying distributions from if line 8 is equal to or greater than		ox in Part VI, line 1b, and com	plete that part usin	ng a 19	6 tax rate		8	10,000.
See the Part VI instructions		-	<del></del>					form <b>QQD_DE</b> (2000)

777	990-PF (2009) VETOWICH FAMILY FOUNDATION			6750			Page 4
-	rt VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e),	or 49	48	- see ir	ıstru	ction	ns)
1a	Exempt operating foundations described in section 4940(d)(2), check here   and enter "N/A" on line 1						
	Date of ruling or determination letter (attach copy of letter if necessary-see instructions)						
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check here   and enter 1%		1	<u> </u>	· · · · · · · · · · · · · · · · · · ·		71.
	of Part I, line 27b						
C	All other domestic foundations enter 2% of line 27b Exempt foreign organizations enter 4% of Part I, line 12, col (b)						_
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-)	_	2				0.
3	Add lines 1 and 2	_	3_				71.
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	_	4			_	0.
5	Tax based on investment income. Subtract line 4 from line 3 If zero or less, enter -0-		5	J	· · · · · · · · · · · · · · · · · · ·	ee 11 1	71.
6	Credits/Payments						
	2009 estimated tax payments and 2008 overpayment credited to 2009 6a						
þ	Exempt foreign organizations - tax withheld at source						
C	Tax paid with application for extension of time to file (Form 8868)						
	Backup withholding erroneously withheld 6d 6						_
7	Total credits and payments Add lines 6a through 6d	Ĺ	7				0.
8	Enter any <b>penalty</b> for underpayment of estimated tax. Check here if Form 2220 is attached	.	8				
	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed		9				71.
	Overpayment If line 7 is more than the total of lines 5 and 8, enter the amount overpaid		10				
	Enter the amount of line 10 to be Credited to 2010 estimated tax		11	İ			
	rt VII-A Statements Regarding Activities			·		V	NI.
1 a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or inte	rven <del>e</del> i	n			Yes	
	any political campaign?				1a		X
D	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see instructions for definition				1b		Α.
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials published that the detailed the second to be set to the second to be set to the second	iisned	or				
_	distributed by the foundation in connection with the activities.				4.		Х
	Did the foundation file Form 1120-POL for this year?			•	10		A
u	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year  (1) On the foundation   \$\( \begin{align*} \sqrt{9} \\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	0.					
	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation	<u> </u>					
-	managers > \$ 0.						
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?				2	;	х
_	If "Yes," attach a detailed description of the activities.			ł			
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporal	יח חוד					
•	bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes				3		Х
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?			İ	4a		Х
	of "Yes," has it filed a tax return on Form 990-T for this year?		N	/A	4b		
	Was there a liquidation, termination, dissolution, or substantial contraction during the year?			ľ	5		Х
	If "Yes," attach the statement required by General Instruction T					7	
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either						
	By language in the governing instrument, or						
	By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the	state	law				
	remain in the governing instrument?				6	X	
7	Did the foundation have at least \$5,000 in assets at any time during the year?				7	X	
	If "Yes," complete Part II, col. (c), and Part XV.						
8a	Enter the states to which the foundation reports or with which it is registered (see instructions)						
	MI						
t	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate)						
	of each state as required by General Instruction G? If "No," attach explanation				8b	X	<u> </u>
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for	r calen	dar				
	year 2009 or the taxable year beginning in 2009 (see instructions for Part XIV)? If "Yes," complete Part XIV				9_		X
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses				10		X

11 At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of section \$120(1)\$21 ft. Yes, station schedule (see instructions)  12 Did the foundation acquire a direct or indirect interest in any applicable insurance contract before August 17, 2008?  13 Did the foundation comply with the public inspection requirements for its annual returns and exemption application?  14 The books are in care of ▶ WILLIAM R. FELOSAK  15 Elephone no ▶ 248-355-5151  15 Located at ▶ 26026 TELEGRAPH, SUITE 200, SOUTHFIELD, MI  16 Section 497(4)(1) moneximpt charatable trusts timp form 1809/Fe in les of Form 1941. Check here and enter the amount of lace-sempl interest received or accrued during the year  18 Fert VII-B   Statements Regarding Activities for Which Form 4720 May Be Required  19 File Form 4720 if any item its checked in the "Yes" column, unless an exception applies.  19 Denry the year off the boundation (either interetly or indirectly)  10 Engage in the sale or exchange, or lessing of property with a disqualified person?  11 During the year off the boundation (either interetly or indirectly)  12 Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person?  13 Farmish goods, services, or facilities to (or accept them from) at disqualified person?  14 Pay componsation to, or pay or remburse the expenses of, a disqualified person?  15 Farmish goods, services, or facilities to (or accept them from) at disqualified person?  16 Agree to be yim oney or property to government officia? (Exception Check 'No'  17 If the foundation appear as proxy year in any of the exceptions described in Regulations section 53.94 (1)(3) or an accritent notice regarding disaster assistance (see page 20 of the instructions)?  19 Agree to sym money or properly to government officia? (Exception Check 'No'  18 the foundation end powerment service, if terminally with 190 days?  19 Agree to sym money or properly to properly to govern any or the acts f	Pa	rt VII-A	Statements Regarding Activities (continued)			
12. Did the foundation acquire a direct or indirect interest in any applicable insurance contract before August 17, 2008?  13. Did the foundation comply with the public inspection requirements for its annual returns and exemption application?  14. The books are in case of ▶ WILLITAM R. FELOSAK  15. Section 487(4)(1) monerempt charatable trusts timing form 1809.PF in local of Form 1401. Chack here and enter the amount of tax-exempt interest received or accurate during the year?  15. Section 487(4)(1) monerempt charatable trusts timing form 1809.PF in local of Form 1401. Chack here and enter the amount of tax-exempt interest received or accurate during the year?  16. Part VII-B. Statements Regarding Activities for Which Form 4720 May Be Required  16. File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.  17. Section 487(4) in any item is checked in the "Yes" column, unless an exception applies.  18. Did not be the sale or exchange, or leasing of property with a disqualified person?  19. Borrow money from, lend money to, or otherwise extand credit to (or accept it from) a disqualified person?  19. First Form 4720 if any item is checked in the "Yes" column, unless an exception applies.  19. First Form 4720 if any item is checked in the "Yes" column, unless an exception applies.  19. Borrow money from, lend money to, or otherwise extand credit to (or accept it from) a disqualified person?  19. Early Form 18. Section 487 (18) or embourse the expenses of, a disqualified person?  19. First Six No.  20. First Six No.  21. First Six No.  22. First Six No.  23. First Any income or assets to a disqualified person?  24. First Six No.  25. First Six No.  26. First Six No.  27. First Six No.  28. Annual Six No.  29. First Six No.  29. First Six No.  29. First Six No.  20. First Six No.  20. First Six No.  20. First Six No.  20. First Six No.  20. First Six No.  20. First Six No.  20. First Six No.  20. First Six No.  20. First Six No.  20. First Six No.  20. First Six No.  20. First Six No.	11	At any time	during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of			
12 Dut the foundation acquire a direct or indirect interest in any applicable insurance contract before August 17, 2008?  13 Dut the foundation comply with the public inspection requirements for its annual returns and exemption application?  14 The books are in case of ▶ WILLITAM R. FELOSAK  15 Setten 487(4)(1) monexempt charatible trusts timing from 1890-PF in less of Form 1041 - Check here and enter the amount of tax-exempt interest received or accrued during the year?  15 Setten 487(4)(1) monexempt charatible trusts timing from 1890-PF in less of Form 1041 - Check here and enter the amount of tax-exempt interest received or accrued during the year?  16 Part VII-B   Statements Regarding Activities for Which Form 4720 May Be Required  FIRE Form 4720 if any item is checked in the "Yes" column, unless an exception applies.  16 Degree of the toundation (either directly or indirectly)  17 Engage in the safe or exchange, or lessing of property with a disqualified person?  18 Degree of the toundation (either directly or indirectly)  19 Engage in the safe or exchange, or lessing of property with a disqualified person?  19 Engage in the safe or exchange, or lessing of property with a disqualified person?  19 Engage in the safe or exchange, or lessing of property with a disqualified person?  10 Engage in the safe or exchange, or lessing of property with a disqualified person?  11 Engage in the safe or exchange, or lessing of property with a disqualified person?  12 Engage in the safe or exchange or property with a disqualified person?  13 Enrich Property of the safe or exchange or a disqualified person?  14 Pay compensation to, or pay or remburse the expenses of, a disqualified person?  15 Engage in the safe or exchange or property or property or property or pay or exchange or property or property or pay or exchange or property or property or pay or expert in many or the acts fail to qualify under the exceptions described in Regulations section 53 494 (10)-3 or in a current notice regarding disaster assistance (see pa		section 51	2(b)(13)? If "Yes," attach schedule (see instructions)	11		X
13   X	12	Did the fou	ndation acquire a direct or indirect interest in any applicable insurance contract before			
Webste address   N/A		August 17	2008?	12		X
Webste address   N/A	13			13	X	
tocated at N 26026 TELEGRAPH, SUITE 200, SOUTHFIELD, MI ZIP+4 N8033    Section 4947(a)(1) nonexempt charable trusts filing Form 990-PF in leu of Form 1041 - Check here and enter the amount of tax-exempt interest received or accrued duming the year   N/A						
tocated at N 26026 TELEGRAPH, SUITE 200, SOUTHFIELD, MI ZIP+4 N8033    Section 4947(a)(1) nonexempt charable trusts filing Form 990-PF in leu of Form 1041 - Check here and enter the amount of tax-exempt interest received or accrued duming the year   N/A	14	The books	are in care of ► WILLIAM R. FELOSAK Telephone no ►248-3	55-5	151	_
15 Section 4947(a)(1) nonexempt charitable trusts filling Form 990-PF in lieu of Form 1041 - Check have an enter the amount of fax-exempt interest received or accrued during the year and enter the amount of fax-exempt interest received or accrued during the year fax VIII-B   Statements Regarding Activities for Which Form 4720 May Be Required  File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.  1a During the year did the foundation (either directly or indirectly)  1b Engage in the sale or exchange, or leasing of property with a disqualified person?  2b Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person?  3F Furnish goods, services, or facilities to (or accept them from) a disqualified person?  4Pex No  4Pex No  4Pex No  4Pex No  5Pex No  5Pex No  6Pex Powney form, lend money to, or otherwise extend credit to (or accept it from) a disqualified person?  5Pex No  6Pex No  6Pex No  6Pex No  7Pex No  6Pex No  7Pex No  6Pex No  6Pex No  7Pex No  6Pex No  6Pex No  7Pex No  6Pex No  7Pex No  6Pex No  7Pex No  6Pex No  7Pex No  7Pex No  8Pex	Located at					
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before the first day of the tax year beginning in 2009?  7 Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation defined in section 4942(j)(3) or 4942(j)(5))  8 At the end of tax year 2009, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning before 2009?  8 If "Yes," list the years   8						
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b If "Yes," did it have excess business holdings in 2009 as a result of (1) any purchase by the foundation or disqualified persons after May 26, 1969, (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest, or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Schedule C, Form 4720, to determine if the foundation had excess business holdings in 2009)  10	30		· · · · · · · · · · · · · · · · · · ·			
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had not been removed from jeopardy before the first day of the tax year beginning in 2009?  4b X				4a		<u>X</u>
	t					
		nad not be				

Form **990-PF** (2009)

All other program-related investments. See instructions

Total. Add lines 1 through 3

P	art X Minimum Investment Return (All domestic foundations must complete thi	s part. Foreign four	ndations, se	e instructions )
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes			
а	Average monthly fair market value of securities		1a	219,000.
	Average of monthly cash balances		1b	22,500.
	Fair market value of all other assets		10	
	Total (add lines 1a, b, and c)		1d	241,500.
	Reduction claimed for blockage or other factors reported on lines 1a and			
	1c (attach detailed explanation)	0.		
2	Acquisition indebtedness applicable to line 1 assets		2	0.
3	Subtract line 2 from line 1d	į	3	241,500.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions)		4	3,623.
5	Net value of noncharitable-use assets Subtract line 4 from line 3 Enter here and on Part V, line 4		5	237,877.
6	Minimum investment return Enter 5% of line 5		6	11,894.
P	art XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operant XI foreign organizations check here  and do not complete this part )	rating foundations an	d certain	
1	Minimum investment return from Part X, line 6		1	11,894.
2 a	Tax on investment income for 2009 from Part VI, line 5	71.		
b	Income tax for 2009 (This does not include the tax from Part VI)			
C	Add lines 2a and 2b		2c	71.
3	Distributable amount before adjustments. Subtract line 2c from line 1	İ	3	11,823.
4	Recoveries of amounts treated as qualifying distributions		4	0.
5	Add lines 3 and 4	Ì	5	11,823.
6	Deduction from distributable amount (see instructions)		6	0.
7	Distributable amount as adjusted Subtract line 6 from line 5. Enter here and on Part XIII, line 1	Ī	7	11,823.
P	art XII Qualifying Distributions (see Instructions)			<u> </u>
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes			
а	Expenses, contributions, gifts, etc total from Part I, column (d), line 26		1a	10,000.
b	Program-related investments - total from Part IX-B	Ì	1b	0.
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes	Ì	2	
3	Amounts set aside for specific charitable projects that satisfy the			
а	Suitability test (prior IRS approval required)		3a	
b	Cash distribution test (attach the required schedule)		3b	
4	Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4	Ī	4	10,000.
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment			
	income Enter 1% of Part I, line 27b		5	O.
6	Adjusted qualifying distributions. Subtract line 5 from line 4	Ť	6	10,000.
	Note The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating who	ether the foundation o	ualifies for th	
	4940(e) reduction of tax in those years	•		

## Part XIII Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2008	(c) 2008	(d) 2009
1 Distributable amount for 2009 from Part XI,				2000
line 7				11,823.
2 Undistributed income, if any, as of the end of 2009			'	11 11 11 11 11 11 11 11 11 11 11 11 11
a Enter amount for 2008 only			0.	
b Total for prior years				
3 Excess distributions carryover, if any, to 2009		0.		
a From 2004 2, 171.				
b From 2005				
c From 2006				
d From 2007				
e From 2008 6,721.				
f Total of lines 3a through e	8,892.			
4 Qualifying distributions for 2009 from	0,032.		***************************************	
Part XII, line 4 > \$ 10,000.				
a Applied to 2008, but not more than line 2a			0.	
b Applied to undistributed income of prior			•	· ······· · · · · · · · · · · · · · ·
years (Election required - see instructions)		0.		
c Treated as distributions out of corpus		~	Hillion valuaria melekarianakia	·
(Election required - see instructions)	0.			
d Applied to 2009 distributable amount		· /	mumarini	10,000.
e Remaining amount distributed out of corpus	0.	······		10,000.
5 Excess distributions carryover applied to 2009	1,823.	<del>- mail's anim massar</del>	<del></del>	1,823.
(If an amount appears in column (d), the same amount must be shown in column (a))	1,023.			1,023.
6 Enter the net total of each column as indicated below:	***************************************			
2 Corpus Add lines 3f, 4c, and 4e Subtract line 5	7,069.			
b Prior years' undistributed income Subtract				***************************************
line 4b from line 2b		0.		
c Enter the amount of prior years'				***************************************
undistributed income for which a notice of				
deficiency has been issued, or on which the section 4942(a) tax has been previously				
assessed		0.		
d Subtract line 6c from line 6b Taxable				
amount - see instructions		0.		
e Undistributed income for 2008 Subtract line				
4a from line 2a Taxable amount - see instr			0.	
f Undistributed income for 2009 Subtract				
lines 4d and 5 from line 1. This amount must				
be distributed in 2010		71		0.
7 Amounts treated as distributions out of				
corpus to satisfy requirements imposed by	_			
section 170(b)(1)(F) or 4942(g)(3)	0.			
8 Excess distributions carryover from 2004				
not applied on line 5 or line 7	348.			
9 Excess distributions carryover to 2010.				
Subtract lines 7 and 8 from line 6a	6,721.			
10 Analysis of line 9				
a Excess from 2005				
b Excess from 2006				
c Excess from 2007				
d Excess from 2008 6,721.				
e Excess from 2009				

3 Grants and Contributions Paid During the Y	ear or Approved for Future	Payment		
Recipient  Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of	Purpose of grant or contribution	Amount
a Paid during the year	or substantial contributor	recipient		
ARTEM MARYCHIN ADDRESS ON FILE	NONE		SCHOLARSHIP	5,000
HELEN MARIE BERG ADDRESS ON FILE	NONE		SCHOLARSHIP	2,500
CONSEVANCY OF SW FLORIDA ADDRESS ON FILE	NONE	ТАХ-ЕХЕМРТ	GRANTS	1,000
DETROIT ZOO ADDRESS ON FILE	NONE	ТАХ-ЕХЕМРТ	GRANT	1,500
				10.006
Total  b Approved for future payment		<del></del>	<b>▶</b> 3a	10,000
None				
Total		<u> </u>	▶ 3b	(

## Part XVI-A Analysis of Income-Producing Activities

Enter gross amounts unless otherwise indicated	Unrelate	ed business income		ded by section 512, 513, or 514	(e)
1 Program service revenue	(a) Business code	(b) Amount	(C) Exclu- sion code	(d) Amount	Related or exempt function income
•	- 000				
b					
•			-		
d		<del></del>			<del>-</del>
8	-				
1					
g Fees and contracts from government agencies					
2 Membership dues and assessments					
3 Interest on savings and temporary cash				, ,	
investments					
4 Dividends and interest from securities			14		7,146.
5 Net rental income or (loss) from real estate					
a Debt-financed property					
b Not debt-financed property			1		
6 Net rental income or (loss) from personal					
property					
7 Other investment income					
8 Gain or (loss) from sales of assets other					
than inventory			18	-5,793.	
9 Net income or (loss) from special events					
10 Gross profit or (loss) from sales of inventory					
11 Other revenue					
a					
b			-		-
<u> </u>			-	-	
d		_			
12 Subtotal Add columns (b), (d), and (e)	<del> </del>	0.	<del> </del>	-5,793.	7,146.
13 Total Add line 12, columns (b), (d), and (e)			J		1,353.
(See worksheet in line 13 instructions to verify calculations )				13_	17555.
Part XVI-B Relationship of Activities to	the Acc	omplishment of Ex	emp	t Purposes	
Line No.   Explain below how each activity for which incor		···			nnlishment of
the foundation's exempt purposes (other than t				outed importantly to the door	
4 INVESTMENT INCOME IS US	ED TO	FUND ACTIVIT	IES		
4 INVESTMENT INCOME IS US INVESTMENT INCOME IS US					
		. , ,			
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923621 02-02-10

Form	990-F	PF (2009) VETOW	VICH FAMILY	FOUNDATION			38-6750824	l Pa	ge 1 <b>3</b>
Pa	rt X\	Information Re Exempt Organ		ers To and Transaction	s and	Relationships Wi	ith Noncharitabl		
1	Did th	e organization directly or indi	rectly engage in any of t	he following with any other organi	zation de	escribed in section 501(c)	of	Yes	No
				section 527, relating to political of	rganızatı	ons?			
а	Trans	fers from the reporting found	lation to a noncharitable	exempt organization of					
	(1) (						1a(1)		<u> X</u>
	(2) (	Other assets					1a(2)	<u> </u>	X
b		transactions							.,
		Sales of assets to a noncharita	-				1b(1)	7	X
		Purchases of assets from a no		inization			1b(2)		X
		Rental of facilities, equipment,					1b(3)	$\overline{}$	X
		Reimbursement arrangements Joans or loan guarantees	,				1b(4) 1b(5)		X
		Performance of services or me	embershin or fundraising	n solicitations			1b(6)		X
		ng of facilities, equipment, ma					10(0)	1	X
			•	owing schedule. Column (b) shoul	d always	show the fair market valu		sets	
	or sei	rvices given by the reporting f	foundation. If the founda	tion received less than fair market			•	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
(a) Li		nn (d) the value of the goods, (b) Amount involved		s received ncharitable exempt organization		(d) Description of transfers	, transactions, and sharing a	rrangeme	ents
<del></del>				N/A		, , ,	,		
				· · ·			<del></del>		
				-					
				· · · · · · · · · · · · · · · · · · ·					
					<u> </u>	<del></del>			
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			-				···		
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		-						<del></del> -	
						V			
2a	Is the	foundation directly or indirec	tly affiliated with, or rela	ted to, one or more tax-exempt or	ganızatıo	ns described			
	ın sec	ction 501(c) of the Code (othe	r than section 501(c)(3)	) or in section 527?			Yes	X	□No
<u>b</u>	If "Ye:	s," complete the following sch			<u> </u>				
		(a) Name of org	ganization	(b) Type of organizati	on	(c) Descrip	otion of relationship		
		N/A							
<del></del>	Indos	anna la de la compania del compania del compania de la compania del la compania de la compania de la compania de la compania de la compania de la compania de la compania de la compania de la compania de la compania de la compania de la compania de la compania della compania d	have as mined this action is						
1	and cor	nplete Declaration of prepare (other	er tran taxpager or fiducian	cluding accompanying schedules and si is based on all information of which pre	parer has	any knowledge	age and belief, it is true, con	eci,	
١,		TITE U.	Velouse	¥7-/1- 1/	, ,	x fresident	<i>†</i>		
<u>e</u>	Si	gnature of officer or trustee		Date		Title	<u> </u>		
Sign Here		Preparer's	<del></del>	Date	Date	Check if	Preparer's identi	ifying nun	nber
igi	's ≥	signature				self- employed		•	
2)	ž ž Ç	Firm's name (or yours		<del> </del>	1	EIN ►			
٩	Preparer's Use Only	if self-employed),							
		address, and ZIP code				Phone n	0		
		<del></del>	<del></del>				Form <b>99</b>	0-PF	2009)

# Schedule B

Department of the Treasury Internal Revenue Service

Name of the organization

#### Schedule of Contributors

► Attach to Form 990, 990-EZ, or 990-PF.

OMB No 1545-0047

**Employer identification number** 38-6750824 VETOWICH FAMILY FOUNDATION Organization type (check one). Filers of: Section: Form 990 or 990-EZ 501(c)( ) (enter number) organization 4947(a)(1) nonexempt charitable trust not treated as a private foundation 527 political organization Form 990-PF 501(c)(3) exempt private foundation 4947(a)(1) nonexempt charitable trust treated as a private foundation 501(c)(3) taxable private foundation Check if your organization is covered by the General Rule or a Special Rule. Note. Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule See instructions. **General Rule** For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II. **Special Rules** For a section 501(c)(3) organization filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), and received from any one contributor, during the year, a contribution of the greater of (1) \$5,000 or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h or (ii) Form 990-EZ, line 1 Complete Parts I and II For a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, aggregate contributions of more than \$1,000 for use exclusively for religious, charitable, scientific, literary, or educational purposes, or the prevention of cruelty to children or animals. Complete Parts I, II, and III. For a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions for use exclusively for religious, charitable, etc., purposes, but these contributions did not aggregate to more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., purpose. Do not complete any of the parts unless the General Rule applies to this organization because it received nonexclusively religious, charitable, etc., contributions of \$5,000 or more during the year ▶ \$ Caution. An organization that is not covered by the General Rule and/or the Special Rules does not file Schedule B (Form 990, 990-EZ, or 990-PF), but it must answer "No" on Part IV, line 2 of its Form 990, or check the box on line H of its Form 990-EZ, or on line 2 of its Form 990-PF, to certify that it does not meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF). LHA For Privacy Act and Paperwork Reduction Act Notice, see the Instructions Schedule B (Form 990, 990-EZ, or 990-PF) (2009)

for Form 990, 990-EZ, or 990-PF.

Name of organization

Employer identification number

#### VETOWICH FAMILY FOUNDATION

38-6750824

Part I	Contributors (see instructions)		
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
1	CORRELL ASSOCIATES  26026 TELEGRAPH  SOUTHFIELD, MI 48033	\$ 2,000.	Person X Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
		<b>\$</b>	Person Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
		\$	Person Payroli Noncash (Complete Part II if there is a noncash contribution.)

Name of organization

Employer identification number

#### VETOWICH FAMILY FOUNDATION

38-6750824

Part II	Noncash Property (see instructions)		
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		<b>\$</b>	
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		<b>\$</b>	
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\ \ \$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		*	
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received

Schedule B (Form 990, 990-EZ, or 990-PF) (2009) of Part III Name of organization Employer identification number VETOWICH FAMILY FOUNDATION 38-6750824 Part III Exclusively religious, charitable, etc., individual contributions to section 501(c)(7), (8), or (10) organizations aggregating more than \$1,000 for the year. Complete columns (a) through (e) and the following line entry. For organizations completing Part III, enter the total of exclusively religious, charitable, etc., contributions of \$1,000 or less for the year. (Enter this information once. See instructions.) (a) No. from Part I (b) Purpose of gift (c) Use of gift (d) Description of how gift is held (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from (b) Purpose of gift (c) Use of gift (d) Description of how gift is held Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from (b) Purpose of gift (c) Use of gift (d) Description of how gift is held Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from (b) Purpose of gift (c) Use of gift (d) Description of how gift is held (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee

Form 990-PF Dividence	ds and Inter	est from Secu	rities	Statement 1		
Source	Gross		ital Gains ividends	Column (A) Amount		
RAYMOND JAMES	· · · · · · · · · · · · · · · · · · ·	7,146.	0.	7,146.		
Total to Fm 990-PF, Part I,	Ln 4	7,146.	0.	0. 7,146		
Form 990-PF	Accounti	ng Fees		Statement 2		
Description	(a) Expenses Per Books	(b) Net Invest- ment Income	(c) Adjusted Net Incom	(d) Charitable Purposes		
ACCOUNTING	2,000.	2,000.		0.		
To Form 990-PF, Pg 1, ln 16b	2,000.	2,000.		0.		
Form 990-PF	Other Profes	sional Fees		Statement 3		
Description	(a) Expenses Per Books	(b) Net Invest- ment Income	(c) Adjusted Net Incom			
INVESTMENT ADVISOR	953.	953.		0.		
To Form 990-PF, Pg 1, ln 16c	953.	953.		0.		
Form 990-PF	Other E	xpenses		Statement 4		
Description	(a) Expenses Per Books	(b) Net Invest- ment Income	(c) Adjusted Net Incom			
FILING FEES	650.	650.		0.		
To Form 990-PF, Pg 1, ln 23	650.	650.		0.		

Form 990-PF	Corporate Stock		State	Statement 5 Fair Market Value		
Description		Book Value				
RAYMOND JAMES	_	243,0	12.	222,340.		
Total to Form 990-PF, Part II, 1	243,0	12.	222,340.			
	st of Officers, Di		State	ement 6		
Name and Address	Title and Avrg Hrs/Wk	Compen- sation	Employee Ben Plan Contrib			
PETER C. VETOWICH 3650 MAXWELL COURT BLOOMFIELD HILLS, MI 48301	PRESIDENT 0.00	0.	0.	0.		
CONNIE L. VETOWICH 3650 MAXWELL COURT BLOOMFIELD HILLS, MI 48301	SECRETARY 0.00	0.	0.	0.		
PETER M. VETOWICH 2176 EAGLES REST DRIVE APOPKA, FL 32712	VICE-PRESIDENT 0.00	0.	0.	0.		
DR. LEANNE VETOWICH-WEINERTH 4130 HIGHFIELD ROYAL OAK, MI 48073	VICE-PRESIDENT 0.00	0.	0.	0.		
WILLIAM R. FELOSAK 26026 TELEGRAPH, SUITE 200 SOUTHFIELD, MI 48034	VICE-PRESIDENT 0.00	0.	0.	0.		
Totals included on 990-PF, Page	6, Part VIII	0.	0.	0.		

Fårm 886	8 (Rev. 1-2011)					Dama 0		
	re filing for an Additional (Not Automatic) 3-Month Ex	tension, o	complete only Part II and check this h	OOX		Page 2 ► X		
	y complete Part II if you have already been granted an a				8868	(**)		
	re filing for an Autómatic 3-Month Extension, comple	te only Pa	art I (on page 1)					
Part II	Additional (Not Automatic) 3-Month E	xtensio	n of Time. Only file the original (no	copies	needed)			
Type or	Name of exempt organization					Employer identification number		
print	VETOWICH FAMILY FOUNDATION			38-6750824				
Number, street, and room or suite no. If a P.O box, see instructions.  due date for C/O W. FELOSAK, 26026 TELEGRAPH, No. 200								
filing your return See instructions	City, town or post office, state, and ZIP code For a for SOUTHFIELD, MI 48033							
Enter the	Return code for the return that this application is for (file	e a separa	te application for each return)			0 4		
	pplication Return Application				Return			
Is For		Code	ls For			Code		
Form 990		01						
Form 990		02	Form 1041-A			08		
Form 990		03	Form 4720			09		
Form 990	-rr -T (sec. 401(a) or 408(a) trust)	04	Form 5227		<del></del>	10		
	-T (trust other than above)	05 06	Form 6069 Form 8870			11		
	o not complete Part II if you were not already granted			uch file	od Form 9969	12		
• The bo	poks are in the care of ▶ 26026 TELEGRAPH	H. SU	ITE 200. SOUTHFIELD	_ MT	- 48033			
	one No. ► 248-355-5151	,	FAX No ▶	,	10033			
-	organization does not have an office or place of business	s in the Ur						
	s for a Group Return, enter the organization's four digit			his is fo	or the whole group.	check this		
box ▶	If it is for part of the group, check this box		ich a list with the names and EINs of a					
4 I re	quest an additional 3-month extension of time until		15, 2011					
<b>5</b> For	calendar year, or other tax year beginning	SEP 1	, 2009 , and ending	AUG	31, 2010			
6 If th	e tax year entered in line 5 is for less than 12 months, c	heck reas	on Initial return	Final	return			
	Learning Deriod							
	te in detail why you need the extension							
CF	RTAIN BROKER INFORMATION NEI	EDS TO	O BE VERIFIED.					
0- 1645	000 DL 000 DE 000 T 4700		<del></del>			<del></del>		
	us application is for Form 990-BL, 990-PF, 990-T, 4720, o	or 6069, e	nter the tentative tax, less any			0		
	refundable credits. See instructions			8a_	\$	0.		
	us application is for Form 990-PF, 990-T, 4720, or 6069,	•						
tax payments made Include any prior year overpayment allowed as a credit and any amount paid  previously with Form 8868.  8b \$					٥			
	ance due. Subtract line 8b from line 8a. Include your pa	wmont wit	h this form if required by using	8b	\$	0.		
	PS (Electronic Federal Tax Payment System) See instru		ir this form, ir required, by using	8c	\$	0.		
			d Verification					
Under pena	alties of periury, I declare that I have examined this form, includ	ing accomp	panying schedules and statements, and to ti	he best o	of my knowledge and	belief,		
it is true, co	prrect, and complete, and that I apri authorized to prepare this fo	rm				,		
Signature	► KUULUM TOURM TITLE ► T	VICE-	PRESIDENT	Date	• <b>*</b> 4   18   11	<u> </u>		
					Form <b>8868</b> (F	Rev. 1·2011)		
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	Announced Co		nt Filmola	1				
Approved Copy at Foundation								
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