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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

Form **990-PF** (2010)

Inter	nal Reve	enue Service	Note. The foundation may be able	to use a copy of this re	turn to satisfy s	ate reporting	require	ements			
For	calend	lar year 2010, or tax year t	beginning , a	and ending							
G	Check a	all that apply. Initi	ial return Initial re	turn of a former publ	ic charity		Fi	nal return			
		Am		Iress change		e change					
Na Na	me of fo	oundation					loyer i	dentification num	ber		
						38-2641093					
S	SECCHIA FAMILY FOUNDATION					B Telephone number (see page 10 of the instructions)				ons)	
Nu	mber a	nd street (or P O box number if	f mail is not delivered to street addre	ess)	Room/suite	61	6-2	35-0010			,
2	20	LYON SQ. NW			510	C If exe	emption	application is pend	ding, chec	k here	▶ [
		n, state, and ZIP code	·	•		D 1. Foreign organizations, check here					
G	RAN.	D RAPIDS	MI 49503			2. Fo	oreian a	rganizations meeti	na the		
H	Check t	type of organization S	Section 501(c)(3) exempt private	e foundation			-	check here and at	-	putatio	n 🕨 🗍
	Section		aritable trust X Other taxab			E If priv	ate fou	ndation status was	terminat	ed unde	er
		rket value of all assets at	J Accounting method		ccrual	section	on 507(	b)(1)(A), check her	e		
		ear (from Part II, col (c),	Other (specify)			F If the	founda	ition is in a 60-mon	th termina	ation	_
	-		.14 (Part I, column (d) must	be on cash basis)		unde	r sectio	n 507(b)(1)(B), che	ck here		<b>&gt;</b>
P;	art I	Analysis of Revenue an		(a) Revenue and					(d) Di	sburse	ments
		amounts in columns (b), (c),	and (d) may not necessarily equal	expenses per	(b) Net in		(c)	Adjusted net		charita	
		the amounts in column (a) (s	see page 11 of the instructions))	books	inc	ome		income		purpose h basis	
	1	Contributions, gifts, grants, etc	c , received (attach schedule)	100,00	0						
	2	Check ▶ ☐ if the foundate	ion is <b>not</b> required to attach Sch. B.								***************************************
	3		emporary cash investments								
	4	Dividends and interest fro	• •	273,03	2 2	72,998		273,032			
	5a	Gross rents									
ø	Ь	Net rental income or (loss	s)								
Revenue	6a	Net gain or (loss) from sale of assets	· —	774,11	6						
ĕ	b	Gross sales price for all assets on lin									
æ	7	Capital gain net income (f	from Part IV, line 2)			63					
	8	Net short-term capital gair	n					0			
	9	Income modifications									
	10a	Gross sales less returns & allo	owances								
	b	Less Cost of goods sold									
	С	Gross profit or (loss) (atta	ich schedule)								
	11	Other income (attach scho	edule)								
	12	Total. Add lines 1 through	n 11	1,147,14	8 2	73,061		273,032			
<b>-</b>	13	Compensation of officers,	, directors, trustees, etc		0						
nses	14	Other employee salaries a	and wages								
en	15	Pension plans, employee	benefits								
=웃	16a	Legal fees (attach schedu	ıle) SEE STMT 2	7,77	8	3,889					3,889
Z Z M	b	Accounting fees (attach s	chedule) STMT 3	4,48	0	2,240				:	2,240
<u>∞.</u> ≝	С	Other professional fees (attac	th schedule) STMT 4	75,05	7	37,529				3 '	7,528
<u>⊒</u> <u>T</u>	17	Interest						DECE!	ÆD.		
<u> </u>	18	Taxes (attach schedule) (see page 1	14 of the instructions) STMT 5	3,00	0		Щ	NECEN			
A E	19	Depreciation (attach schedule	e) and depletion				Щ			18	
<b>∂</b> 5	20	Occupancy					42	AUG 16	2011	10	
Ţ₹	21	Travel, conferences, and	meetings				لتلل			- KS	
<b>4 5</b>	22	Printing and publications					<u>Ľ.</u>	<del>-</del>	UT		
₹ğ	23	Other expenses (att sch)	STMT 6	35	0	350	<u> </u>		<u> </u>		
CAE .	24	Total operating and adm	inistrative expenses.								
SCANNED AUG 1 / 2011 Operating and Administrative Expe	1	Add lines 13 through 23		90,66		44,008	<u> </u>	0			3,657
ğ	25	Contributions, gifts, grants	s paid	528,02	0					52	8,020
_	26_	Total expenses and disbur	sements. Add lines 24 and 25	618,68	5	44,008	ļ	0		57	1,677
	27	Subtract line 26 from line	12								
	а	Excess of revenue over ex	penses and disbursements	528,46							
	ь	Net investment income (	(if negative, enter -0-)		2	29,053					
	С	Adjusted net income (if r	: =					273,032			

9	25	Temporarily restricted						
اة	26	Permanently restricted				I		
		Foundations that do not follow SFAS 117, check here $\blacktriangleright$ $X$ and complete lines 27 through 31.						
5	27	Capital stock, trust principal, or current funds						
2	28	Paid-in or capital surplus, or land, bldg , and equipment fund						
ו מ	29	Retained earnings, accumulated income, endowment, or other funds	9,963,794	10,492,	257			
2	30	Total net assets or fund balances (see page 17 of the						
וב		instructions)	9,963,794	10,492,	257			
Ż	31	Total liabilities and net assets/fund balances (see page 17			[			
		of the instructions)	10,376,294	10,764,	757			
	Part I	Analysis of Changes in Net Assets or Fund Balances						
1	Total	net assets or fund balances at beginning of year—Part II, column (a), line 30 (mu	ust agree with			ı		
	end-	of-year figure reported on prior year's return)			1	9,	963,	<u>, 794</u>
2	Ente	amount from Part I, line 27a			2		528,	<u>, 463</u>
3	Othe	r increases not included in line 2 (itemize) ▶			3			
4	Add	ines 1, 2, and 3			4	10,	492,	, 257
5	Decr	eases not included in line 2 (itemize)			5			
6	Total	net assets or fund balances at end of year (line 4 minus line 5)-Part II, column (	(b), line 30		6		492,	
						Form 99	}0-PF	(2010)
D/	<b>4</b> A							

)

412,500

272,500

20

21

22

23

Net Assets or Fund Balances

Loans from officers, directors, trustees, and other disqualified persons

Mortgages and other notes payable (attach schedule)

and complete lines 24 through 26 and lines 30 and 31.

Total liabilities (add lines 17 through 22) Foundations that follow SFAS 117, check here

Other liabilities (describe ▶

Unrestricted

OIII 990-PF (2010) SECCHIA				30-20	±1033			raye
	d Losses for Tax on Investm		ne	(b) How a	ogured T			
(a) List and describe 2-story brick wareh	e the kind(s) of property sold (e.g., real estati nouse, or common stock, 200 shs. MLC Co.)	<b>e</b> ,		` P—Pur	chase	c) Date ac) mo , day)		(d) Date sold (mo , day, yr )
	,	<del></del>		D-Doi	nation	<u> </u>		
b					<del></del>			
C								
d								
е						•		
(e) Gross sales price	(f) Depreciation allowed (or allowable)	(	g) Cost or plus exper	other basis		(	(h) Gain e) plus (f)	or (loss) minus (g)
a 63		-						6.
b								
С								
d								
е		[						
Complete only for assets showing	gain in column (h) and owned by the	foundation o	n 12/31/6	i9				(h) gain minus
(i) F M V as of 12/31/69	(j) Adjusted basis as of 12/31/69		(k) Excess	s of col (ı) (j), ıf any				ess than -0-) <b>or</b> om col (h))
a								6
b	and the second s							
С		<del> </del>	<del></del>					
d		<del></del>				<del>.</del>		
e	If gain, also enter i	n Port Lino	<del>,                                    </del>			т.—		
2 Capital gain net income or (net ca	if gain, also enter in gai		•			2		6
3. Net short-term capital gain or (los	s) as defined in sections 1222(5) and		′		<sup>-</sup>			
	column (c) (see pages 13 and 17 of the		ıs) T					
If (loss), enter -0- in Part I, line 8	(c) (ccc pages 15 and 11 cm.					3		
	der Section 4940(e) for Redu	iced Tax o	on Net I	nvestm	ent Incom	ie		
	foundations subject to the section 494							
f section 4940(d)(2) applies, leave th	s part blank							
	ion 4942 tax on the distributable amou ify under section 4940(e) Do not com			ase period	[7			Yes X N
1 Enter the appropriate amount in 6	each column for each year, see page 1	18 of the insti	ructions b	efore mak	ing any entri	es		
(a) Base period years	(b)		Not volue	(c)	able-use asset			(d) abution ratio
Calendar year (or tax year beginning			Net value	_			(col (b) d	0.05339
2009		0,397			,870,19 ,214,2			0.05388
2008		8,180 0,151			$\frac{214,2}{564,2}$			0.04876
2007		8,443			$\frac{304,2}{242,0}$			0.04482
2006 2005		0,100			,727,8			0.04164
2003	33	0 / 1 0 0			, , ,			
2 Total of line 1, column (d)						2	ļ	0.24251
	5-year base period—divide the total or	n line 2 by 5.	or by the					
	as been in existence if less than 5 year		•			3	l	0.04850
•	•							
4 Enter the net value of noncharital	ole-use assets for 2010 from Part X, III	ne 5				4	<u> </u>	<u>12,332,17</u>
5 Multiply line 4 by line 3						5		598,14
								2 20
6 Enter 1% of net investment incom	ne (1% of Part I, line 27b)					6		_2,29
T. Addison Food 0						7		600,43
7 Add lines 5 and 6						<del></del>		000, 43
8 Enter qualifying distributions from	Part XII line 4					8		571 <u>,6</u> 7
	n line 7, check the box in Part VI, line	1b, and comp	olete that	part using	a 1% tax rat		<del></del> е	

Part VI instructions on page 18

	30-FF (2010) SECCHIA FAMILLI FOUNDATION 38-2041093				ige 🕶
_	Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948—see page 18 of the instruction	ions)			
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)				~ ~ 1
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check			4,5	28T
	here and enter 1% of Part I, line 27b				
С	All other domestic foundations enter 2% of line 27b Exempt foreign organizations enter 4% of				
^	Part I, line 12, col (b).				Λ
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-)  Add lines 1 and 2			4,5	221
3	——————————————————————————————————————			<del>-</del> / -	70 +
4	- Carrier of the Common Control of the Carrier of t			4 5	581
5			••••••	<del></del>	70.1
6	Credits/Payments 2010 estimated tax payments and 2009 overpayment credited to 2010  6a 2,300				
a h					
b	Exempt foreign organizations—tax withheld at source  Tax paid with application for extension of time to file (Form 8868)  6c				
c d	Backup withholding erroneously withheld  6d  6d				
7	Total credits and payments Add lines 6a through 6d			2.5	300
8	Enter any penalty for underpayment of estimated tax. Check here X if Form 2220 is attached				2
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed			2.3	283
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid				
.0 I1	Enter the amount of line 10 to be Credited to 2011 estimated tax				
******	art VII-A Statements Regarding Activities	_	_		
1a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it			Yes	No
	participate or intervene in any political campaign?		1a		X
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see page 19				
-	of the instructions for definition)?		1b		$\mathbf{X}_{-}$
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials	Γ			
	published or distributed by the foundation in connection with the activities				
С	Did the foundation file Form 1120-POL for this year?	L	1c		X
d					
	(1) On the foundation ▶ \$ (2) On foundation managers ▶ \$				
е	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed				
	on foundation managers. ► \$				
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?	L	2		X
	If "Yes," attach a detailed description of the activities				
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of	1	- 1		
	incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes	L	3		X
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?		4a		<u>X</u>
þ		/A	4b		
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?	<u> </u>	5		X
	If "Yes," attach the statement required by General Instruction T				
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either		- 1		
	By language in the governing instrument, or	1			
	By state legislation that effectively amends the governing instrument so that no mandatory directions that	1		7.7	
	conflict with the state law remain in the governing instrument?	$\vdash$	6	X	
7	Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col (c), and Part XV		7	^	
8a	Enter the states to which the foundation reports or with which it is registered (see page 19 of the				
	instructions) MI				
b	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General	ł	8b	х	
	(or designate) of each state as required by General Instruction G? If "No," attach explanation	 	00	11	
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for calendar year 2010 or the taxable year beginning in 2010 (see instructions for Part XIV on page	İ	- 1		
			9		х
10	27)? If "Yes," complete Part XIV  Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their				<del></del> -
	names and addresses		10		х
	names and addresses			)-PF	(2010)

Form **990-PF** (2010)

orm	<u> 1990-PF (2010) SECCHIA FAM</u>	ILY FOUNDATION	38-2	641093			Pag	<u>e                                    </u>
Pa	ɪrt VII-B 🔪 Statements Regard	ing Activities for Which Fo	<u>rm 4720 May Be R</u>	equired (cont	inued)		<del>-</del>	
ia	During the year did the foundation pay	or incur any amount to						
	(1) Carry on propaganda, or otherwise	attempt to influence legislation (sect	tion 4945(e))?	Y	es X No			
	(2) Influence the outcome of any specif	fic public election (see section 4955)	), or to carry on,					
	directly or indirectly, any voter regis	tration drive?		∐ Y	es X No			
	(3) Provide a grant to an individual for t	ravel, study, or other similar purpos	es?	Y	es 🏻 No			
	(4) Provide a grant to an organization of	other than a charitable, etc , organiza	ation described in					
	section 509(a)(1), (2), or (3), or sec	tion 4940(d)(2)? (see page 22 of the	instructions)	Y	es X No			
	(5) Provide for any purpose other than	religious, charitable, scientific, litera	ry, or educational					
	purposes, or for the prevention of c	ruelty to children or animals?		<u></u>	es X No			
þ	If any answer is "Yes" to 5a(1)-(5), did	any of the transactions fail to qualify	under the exceptions de	escribed in				
	Regulations section 53.4945 or in a cur	rent notice regarding disaster assist	ance (see page 22 of the	e instructions)?	_N/A	5b		
	Organizations relying on a current notic	e regarding disaster assistance che	ck here		▶ 📙			
C	If the answer is "Yes" to question 5a(4)	, does the foundation claim exemption	on from the tax					
	because it maintained expenditure resp	onsibility for the grant?		N/A 📗 Y	′es 📙 No			
	If "Yes," attach the statement required I	by Regulations section 53 4945-5(d)	•					
6a	Did the foundation, during the year, rec	eive any funds, directly or indirectly,	to pay premiums					
	on a personal benefit contract?			Y	′es X No	1		
þ	Did the foundation, during the year, pay	premiums, directly or indirectly, on	a personal benefit contr	act?		6b		<u>X</u>
	If "Yes" to 6b, file Form 8870							
7a	At any time during the tax year, was the	foundation a party to a prohibited to	ax shelter transaction?	<u> </u>	∕es ⊠ No			
b	If Yes, did the foundation receive any p	roceeds or have any net income atti	ributable to the transacti	on?	N/A	7b		
P	art VIII Information About O	fficers, Directors, Trustees	, Foundation Mana	agers, Highly	Paid Employe	es,		
	and Contractors		·-	<u> </u>				
1	List all officers, directors, trustees, fou	ndation managers and their comp	ensation (see page 22	of the instruction				
			(b) Title, and average	(c) Compensation	(d) Contributions to employee benefit	(a) Evr	ense acc	ount
	(a) Name and	address	hours per week devoted to position	(If not paid, enter -0-)	plans and deferred		allowanc	
			devoted to position		compensation	<del>-</del>		
PF	ETER F. SECCHIA	GRAND RAPIDS	PRESIDENT	!				
22	20 LYON NW, STE 510	MI 49503	1.00	0	0	<u> </u>		0
J	AMES A. ENS	GRAND RAPIDS	SECRETARY		ļ			
22	20 LYON NW, STE 510	MI 49503	0.50	0	0			0
M.	ARK A. SCHUT	GRAND RAPIDS	TREASURER					
22	20 LYON NW, STE 510	MI 49503	1.00	0	. 0	<del> </del>		0
					<u> </u>			
2	Compensation of five highest-paid er	nployees (other than those include	ed on line 1 — see page	e 23 of the instru	ctions).			
	If none, enter "NONE."		<del></del>	<del></del>	1 (00)	г—		—
			(b) Title, and average	(-) (-)	(d) Contributions to employee benefit	(e) Exp	ense acc	ount,
	(a) Name and address of each em	ployee paid more than \$50,000	hours per week devoted to position	(c) Compensation	plans and deferred	other	allowand	es
					compensation			
N	ONE							
			<del></del>			<del>                                     </del>		
				<del></del>	<del> </del>	<del></del>	_	
							——	
					-	$\vdash$		—
					1	1		
_		250.000		L	I		1	0
ota	al number of other employees paid over \$	000,000	<del></del>			m 990	)_PF /	
					10	・・・・・・・・・・・・・・・・・・・・・・・・・・・・・・・・・・・・・・・	ø-n m (,	_UIU)

Form 990-PF (2010) SECCHIA FAMILY FOUNDATION 38-2641093	Page 7
Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Pa and Contractors (continued)	
3 Five highest-paid independent contractors for professional services (see page 23 of the instructions). If none, ent	ter "NONE."
(a) Name and address of each person paid more than \$50,000 (b) Type of serving NONE	vice (c) Compensation
Total number of others receiving ever \$50,000 for professional sources	
Part IX-A Summary of Direct Charitable Activities	
List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of organizations and other beneficiaries served, conferences convened, research papers produced, etc.	Expenses
1 DEVOS CHILDREN'S HOSPITAL PROVIDED FUNDING FOR HOSPITAL EXPANSION	105,000
MICHIGAN STATE UNIVERSITY ATHLETIC DEPT TRAVEL FUNDING SUPPORT	100,500
3 SEE STATEMENT 9	
4 VAN ANDEL INSTITUTE CAPITAL CAMPAIGN FOR CANCER RESEARCH FACILITY	100,000
on time character for chareful abbunch includin	51,000
Part IX-B Summary of Program-Related Investments (see page 24 of the instructions)	
Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2	Amount
1 N/A	
2	
All other program-related investments. See page 24 of the instructions.	
Total. Add lines 1 through 3	<b>&gt;</b>

Form 990-PF (2010)

571,677

<u>3a</u> 3b

4

h

5

Suitability test (prior IRS approval required)

Cash distribution test (attach the required schedule)

Enter 1% of Part I, line 27b (see page 26 of the instructions)

Adjusted qualifying distributions. Subtract line 5 from line 4

qualifies for the section 4940(e) reduction of tax in those years

Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4

Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation

Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income

Form 990-PF (2010) SECCHIA FAMILY FOUNDATION Page 9 Undistributed Income (see page 26 of the instructions) Part XIII (d) (a) (b) (c) 2010 Corpus Years prior to 2009 2009 Distributable amount for 2010 from Part XI, 612,028 line 7 Undistributed income, if any, as of the end of 2010 2 155,884 a Enter amount for 2009 only **b** Total for prior years 20\_\_\_\_\_ , 20\_\_\_\_\_ , 20\_\_\_\_\_ Excess distributions carryover, if any, to 2010 a From 2005 **b** From 2006 c From 2007 d From 2008 e From 2009 f Total of lines 3a through e Qualifying distributions for 2010 from Part XII, 571,677 line 4 ▶ \$ 155,884 a Applied to 2009, but not more than line 2a **b** Applied to undistributed income of prior years (Election required—see page 26 of the instructions) c Treated as distributions out of corpus (Election required—see page 26 of the instructions) 415,793 d Applied to 2010 distributable amount e Remaining amount distributed out of corpus Excess distributions carryover applied to 2010 (If an amount appears in column (d), the same amount must be shown in column (a)) Enter the net total of each column as indicated below: a Corpus Add lines 3f, 4c, and 4e Subtract line 5 b Prior years' undistributed income Subtract line 4b from line 2b 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 d Subtract line 6c from line 6b Taxable amount-see page 27 of the instructions e Undistributed income for 2009. Subtract line 4a from line 2a. Taxable amount-see page 27 of the instructions f Undistributed income for 2010 Subtract lines 4d and 5 from line 1 This amount must be 196,235 distributed in 2011 Amounts treated as distributions out of corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3) (see page 27 of the instructions) Excess distributions carryover from 2005 not applied on line 5 or line 7 (see page 27 of the instructions) Excess distributions carryover to 2011. Subtract lines 7 and 8 from line 6a 10 Analysis of line 9 Excess from 2006 Excess from 2007 Excess from 2008 Excess from 2009 Excess from 2010

	1990-PF (2010) SECCHIA FAMI			38-26410		Page 10
	art XIV Private Operating Fou				VII-A, question 9	)
1a	If the foundation has received a ruling or			ing		
	foundation, and the ruling is effective for		=		L	
b	Check box to indicate whether the foundary		iting foundation descri		942(j)(3) or 494	2(j)(5)
2a	Enter the lesser of the adjusted net	Tax year		Prior 3 years	T	(e) Total
	income from Part I or the minimum	(a) 2010	(b) 2009	(c) 2008	(d) 2007	
	investment return from Part X for					
	each year listed					
b	85% of line 2a					
C	Qualifying distributions from Part XII,	ļ				
	line 4 for each year listed					
d	Amounts included in line 2c not used directly					
	for active conduct of exempt activities					
е	Qualifying distributions made directly					
	for active conduct of exempt activities					
	Subtract line 2d from line 2c					
3	Complete 3a, b, or c for the					
•	alternative test relied upon.					
а	"Assets" alternative test—enter					
_	(1) Value of all assets					
	(2) Value of assets qualifying under					
	section 4942(j)(3)(B)(i)					
<b>.</b>	"Endowment" alternative test—enter 2/3			<u> </u>		***
b	of minimum investment return shown in					
	Part X, line 6 for each year listed					
С	"Support" alternative test—enter					
	(1) Total support other than gross					
	investment income (interest, dividends, rents, payments on					
	securities loans (section					
	512(a)(5)), or royalties)					
	(2) Support from general public		-	*****		
	and 5 or more exempt					
	organizations as provided in					
	section 4942(j)(3)(B)(iii)					
	(3) Largest amount of support from					
	an exempt organization					
	(4) Gross investment income				<u> </u>	
Pa	irt XV Supplementary Inforn	nation (Complete	this part only if	the foundation h	ad \$5,000 or more	e in assets at
	any time during the ye	ear—see page 28	of the instruction	ns.)		
1	Information Regarding Foundation Mar	nagers:				
а	List any managers of the foundation who	have contributed mor	e than 2% of the total	contributions received	by the foundation	
	before the close of any tax year (but only					
	N/A	•		` ' ' '	, ,	
	List any managers of the foundation who	own 10% or more of	the stock of a corporat	ion (or an equally large	e portion of the	
	ownership of a partnership or other entity				,	
	N/A	,	•			
2	Information Regarding Contribution, G	rant. Gift. Loan. Scho	olarship, etc., Program	ns:		
-			to preselected charital		does not accept	
	unsolicited requests for funds If the foun		· ·	=		
				of the mandenons, to	illalviadais oi	
	organizations under other conditions, cor			ld be addressed		
а	The name, address, and telephone numb	er or the person to Wr	iom applications shoul	10 DE AUUIESSEO		
	N/A					
	The form with the state of the					
b	The form in which applications should be	submitted and inform	ation and materials the	ey should include		
	N/A				<del></del>	
С	Any submission deadlines					
	N/A					<u> </u>
d	Any restrictions or limitations on awards,	such as by geographi	cal areas, charitable fi	elds, kinds of institutio	ons, or other	
	factors					
	N/A					
DAA						Form <b>990-PF</b> (2010)

Supplementary Information (continued) 3 Grants and Contributions Paid During the Year or Approved for Future Payment If recipient is an individual, show any relationship to any foundation manager or substantial contributor Foundation Recipient Purpose of grant or status of **Amount** contribution recipient Name and address (home or business) a Paid during the year SEE STATEMENT 10 528,020 528,020 ▶ 3a Total **b** Approved for future payment N/A **▶** 3b **Total** 

Part XVI-A

**Analysis of Income-Producing Activities** 

Enter gross amounts unless otherwise indicated		Unrelated	Unrelated business income		y section 512, 513, or 514	(e)	
4.5		(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	Related or exempt function income (See page 28 of	
_	service revenue	<u> </u>				the instructions)	
a	<del></del>	- }	·	+ +		<del>-</del>	
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u		-	<del></del>	+ +	-	· · · · · · · · · · · · · · · · · · ·	
f		·				· · · · · · · · · · · · · · · · · · ·	
	and contracts from government agencies	-				· · · · · · · · · · · · · · · · · · ·	
-	hip dues and assessments					-,	
	n savings and temporary cash investments						
	and interest from securities			14	273,032		
	I income or (loss) from real estate						
	financed property						
	ebt-financed property						
6 Net renta	I income or (loss) from personal property						
7 Other inve	estment income						
8 Gain or (I	oss) from sales of assets other than inventory			14	63	774,053	
9 Net incon	ne or (loss) from special events						
10 Gross pro	ofit or (loss) from sales of inventory						
11 Other rev	enue a				<u> </u>		
		-		_			
е							
12 Subtotal	Add columns (b), (d), and (e)			0	273,095		
13 Total. Ad	d line 12, columns (b), (d), and (e)				13	1,047,148	
	et in line 13 instructions on page 29 to verify calculat	ions )					
Part XVI-	Relationship of Activities to the A	<u>lccomplishm</u>	ent of Exempt I	<u>Purposes</u>			
Line No. ▼	Explain below how each activity for which incom accomplishment of the foundation's exempt purpose to the second sec						
	instructions)				····		
N/A_							
			<del></del>			<del> </del>	
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				···			
DAA						Form <b>990-PF</b> (2010)	

, 2017/11	Exempt Organiza	•	dana mansaction	ne and iterationships w			
1 Did the org			he following with any o	ther organization described		Yes	No
in section 5	501(c) of the Code (other	er than section 501(c)(3)	organizations) or in sec	ction 527, relating to political			
organizatıo							ĺ
	rom the reporting found	dation to a noncharitable e	exempt organization of	Ť			<b> </b>
(1) Cash					1 <u>a(1)</u>		X
(2) Other a					1a(2)		X
b Other trans		tabla avennt ernenineten			45.41		v
		table exempt organization oncharitable exempt orga			1b(1) 1b(2)		X
	of facilities, equipment,	, ,	ilization		1b(3)		X
	ursement arrangements				1b(4)		X
	or loan guarantees				1b(5)	1	Х
	•	embership or fundraising	solicitations		1b(6)		Х
_		nailing lists, other assets,			1c		X
d If the answ	er to any of the above i	is "Yes," complete the foll	lowing schedule Colur	nn (b) should always show the	fair market		
value of the	e goods, other assets, o	or services given by the re	eporting foundation If	the foundation received less tha	an fair market		
value ın an	y transaction or sharing	arrangement, show in co	olumn (d) the value of	the goods, other assets, or sen			
(a) Line no	(b) Amount involved	(c) Name of noncharitable	e exempt organization	(d) Description of transfers, to	ransactions, and sharing arrang	ements	
I/A	<del> </del>				<del></del>		
	<del> </del>	<u> </u>					
		<del></del>		<del></del>			
		<del>                                     </del>					
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	<u> </u>		<del></del>				
		<u> </u>	<u> </u>				
	•	ctly affiliated with, or relate			$\sqcap$ $\checkmark$	es X	1
	` '	Code (other than section	501(c)(3)) or in section	n 52/7		es <u>r</u>	.] No
	mplete the following sc  a) Name of organization		pe of organization	(c) Descri	ption of relationship		
N/A	y Harris of Organization	(2) 1)	po or organization	(0) = 11			
		<del></del>		· · · · · · · · · · · · · · · · · · ·	<del> </del>		
Under p	enalties of perjury, I declare	e that I have examined this re	turn, including accompany	ying schedules and statements, and	to the best of my knowledge an	d	
ign belief, it	is true, correct, and comple	ete Declaration of preparer (d	other than taxpayer or ticu	ciary) is based on all information of v	which preparer has any knowled	ige	
lere		200	8/1/		SIDENT		
Sig	nature of officer or trustee	<del></del> _	Drate	Title			
	Lype preparer's name		Preparer's signat	ture	Date	Check	$\overline{}$
aid				/ / //	<b>/</b>	self-em	ployed
• —	A SCHUT	COMPANIES	MARK A SCI	HUT ZJUWY	07/08/11		
- }		COMPANIES, P.			PTIN P00006 Firm's EIN ▶ 38 - 256		
Firm's		LAKE MICHIGA D RAPIDS, MI	49534	•	Phone no 616-45		
,	GVAIN	YELLDO' HT	_ 4)))1	<del></del>	Form <b>99</b>		
					1 01111 00		,20.0)

Schedule B (Form 990, 990-EZ, or 990-PF)

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

2010

**Employer identification number** 

SECCHIA FAMI	LY FOUNDATION	38-2641093			
Organization type (check o	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 for	undation			
	527 political organization				
Form 990-PF	501(c)(3) exempt private foundation				
	4947(a)(1) nonexempt charitable trust treated as a private foundate	ation			
	X 501(c)(3) taxable private foundation				
	is covered by the <b>General Rule</b> or a <b>Special Rule</b> . )(7), (8), or (10) organization can check boxes for both the General Rule ar	nd a Special Rule See			
General Rule					
	n filing Form 990, 990-EZ, or 990-PF that received, during the year, \$5,000 one contributor. Complete Parts I and II	or more (in money or			
Special Rules					
sections 509(a)(1)	c)(3) organization filing Form 990 or 990-EZ that met the 33 1/3% support to and 170(b)(1)(A)(vi), and received from any one contributor, during the year 00 or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h or (ii) Form 990.	ar, a contribution of the			
the year, aggregate	c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from e contributions of more than \$1,000 for use exclusively for religious, charitates, or the prevention of cruelty to children or animals. Complete Parts I, II,	ible, scientific, literary, or			
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 <b>General Rule</b> applies to this organization because it received nonexclusively religious, charitable, etc., contributions of \$5,000 or more during the year.					
990-EZ, or 990-PF), but it r	hat is not covered by the General Rule and/or the Special Rules does not finals answer "No" on Part IV, line 2 of its Form 990, or check the box on ling certify that it does not meet the filing requirements of Schedule B (Form	ne H of its Form 990-EZ, or on			
For Paperwork Reduction A	ct Notice, see the Instructions for Form 990, 990-EZ, or 990-PF.	Schedule B (Form 990, 990-EZ, or 990-PF) (2010)			

Schedule B (Form 990, 990-EZ, or 990-PF) (2010)	Page	1_	of	1	of Par
Name of organization	Employer ide	entific	cation	n nun	nber
SECCHIA FAMILY FOUNDATION	38-2643	L09	3		

Part I	Contributors (see instructions)		
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
1	SIBSCO, LLC 220 LYON NW SUITE 510 GRAND RAPIDS MI 49503	\$ 100,000	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
110.	Namo, address, and Em. V	\$	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
		<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)

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## Federal Statements

38-2641093 FYE: 12/31/2010 Statement 1 - Form 990-PF, Part I, Line 6a - Sale of Assets

Des	Description			How Received							
Whom Sold	Date Acquired	Date Sold		Sale Price	Cost	Expense	Se	Depreciation	ا دا	Net Gain / Loss	SS
FIDELITY- SHORT TERM	VARIOUS	VARIOUS	₩	PURCHASE 350,000 \$	\$ 076,838		₩		w	-3,	-3,370
FIDELIII - LONG IERM V TEGACY 4700 SHORT TERM	VARIOUS	VARIOUS		487,498 PIRCHASE	547,017					-59,519	519
LEGACY 4700 LONG TERM	VARIOUS	VARIOUS		455,566 PURCHASE	409,344					46,	46,222
LEGACY 4702 SHORT TERM	VARIOUS	VARIOUS	N	,718,703 PURCHASE	1,934,216					784,487	487
	VARIOUS	VARIOUS		70,116	63,883				   	6,	6,233
TOTAL			ۍ 4	4,081,883 \$	3,307,830 \$		φ."		တ္ <mark>။</mark>	774,	053
	:	Statement 2	7	orm 990-PF, Pa	Form 990-PF, Part I, Line 16a - Legal Fees	egal Fees					
Description		,	Ţ	Total	Net Investment		Adjusted Net	ted t	ું	Charitable Purpose	
MIKA MEYERS BECKETT &	JONES	' ຜ·' 		7,778	\$ 3,889	' ซ <sub>้</sub> '			৵	3,889	
TOTAL		₩"		7,778	\$ 3,889	φ" "		0	\$	3,889	- "
		Statement 3 - For	3 - For	n 990-PF, Part	m 990-PF, Part I, Line 16b - Accounting Fees	ounting F	ees				
Description			Ĕ	Total	Net Investment	, I	Adjusted Net	ted	하	Charitable Purpose	
HENDON & SLATE, P.C. TOTAL		<b>ጭ</b> ՝ ጭ		4,480	\$ 2,240	ω' w		0	w w	2,240	
		."				<b>"</b>					

<del>1.</del>3

## Federal Statements 400147 SECCHIA FAMILY FOUNDATION

FYE: 12/31/2010 38-2641093

	Charitable Purpose	14,071 23,457	37,528
		ស	.v. ∥
ssional Fees	Adjusted Net	v.	w
rm 990-PF, Part I, Line 16c - Other Professional Fees	Net Investment	14,072 23,457	37,529
1, Line 1(		₩	<b>₩</b>
1 990-PF, Part	Total	28,143 46,914	75,057
t 4 - Form		₩	w
Statement 4 - For	Description	NORRIS PERNE & FRENCH LEGACY TRUST BANK	TOTAL

Charitable Purpose	w w	
Adjusted Net	\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	
Net Investment	& &	
Total	\$ 3,000	
Description	INCOME TAX TOTAL	

Statement 5 - Form 990-PF, Part I, Line 18 - Taxes

	Statement 6 - Fo	rm 990-PF, I	Part I, Line	nt 6 - Form 990-PF, Part I, Line 23 - Other Expenses	xpenses			
Description	F	Total	- Inve	Net Investment	Adjusted Net	_	Charitable Purpose	<u>e</u> e
			w		ጭ		ᡐ	
EXPENSES								
BANK CHARGES		350		350				
TOTAL	₩	350	₩	350	w	0	w	

# Federal Statements

400147 SECCHIA FAMILY FOUNDATION 38-2641093 FYE: 12/31/2010

	Fair Market Value	\$ 1,227,295 5,382,281 3,388,955 1,526,077 1,462,473 \$ 12,987,081
nt Investments	Basis of Valuation	
JS and State Governmen	End of Year	\$ 563,603 4,213,106 3,043,534 1,370,531 1,313,410 \$ 10,504,184
Statement 7 - Form 990-PF, Part II, Line 10a - US and State Government Investments	Beginning of Year	\$ 563,603 4,785,286 3,381,865 1,360,592 \$ 10,091,346
Statement 7 - Form	Description	UNIVERSAL FOREST PRODUCTS NORRIS PERNE & FRENCH LEGACY TRUST 4700 LEGACY TRUST 4701 LEGACY TRUST 4702 LEGACY TRUST 4702

400147 SECCHIA FAMILY FOUNDATION

38-2641093

Federal Statements

FYE: 12/31/2010

### Statement 8 - Form 990-PF, Part II, Line 15 - Other Assets

Description		Beginning of Year	 End of Year	_	Fair Market Value
LIFE INSURANCE	\$	134,140	\$ 134,140	\$_	180,600
TOTAL	\$ <u></u>	134,140	\$ 134,140	\$_	180,600

400147 SECCHIA FAMILY FOUNDATION

38-2641093

### Federal Statements

FYE: 12/31/2010

### Statement 9 - Form 990-PF, Part IX-A, Line 3 - Summary of Direct Charitable Activities

### Description

GRAND RAPIDS COMMUNITY LEGENDS
PROVIDED FUNDING FOR COMPLETION OF STATUARY TO MEMORIALIZE
KEY LEADERS OF THE GRAND RAPIDS COMMUNITY AND HISTORICAL
FIGURES THAT HAVE AN HISTORICAL INTEREST TO THE COMMUNITY.

400147 SECCHIA FAMILY FOUNDATION 38-2641093 FYE: 12/31/2010

## Federal Statements

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## Federal Statements

38-2641093 FYE: 12/31/2010

Statement 10 - Form 990-PF, Part XV, Line 3a - Grants and Contributions Paid During the Year (continued)

	Amount	1,000	200	1,000	350	1,000	275	2,000	300	2,000	2,000	2,500	1,000	1,000	300	100	2,600	100	6,000
	Purpose	NERS CUP BENEFIT	ERKEN FUND					SERIES	FIELD SPONSORSHIP	) GIFT	CITY POOLS SUMMER 2010		BUILDING CHARACTER CELEBRATION	SECCHIA/ALLEN FUND	SHIPS	CHOIR TRIP TO ITALY	INST FOR CULINARY ARTS	BRANCH ED DEPT	10
		2010 WINNERS	JIMMY GERKEN	GIFT	SUPPORT	GIFT	GIFT	SPEAKER SERIES	FIELD SI	YEAR END GIFT	CITY POC	GIFT	BUILDING	SECCHIA,	SCHOLARSHIPS	CHOIR TH	INST FO	MI BRANC	GIFT 2010
	Status	PUBLIC	PUBLIC	PUBLIC	PUBLIC	PUBLIC	#210 PUBLIC	NE PUBLIC	SE PUBLIC	PUBLIC	PUBLIC	PUBLIC	PUBLIC		E 104 PUBLIC	PUBLIC	PUBLIC	PUBLIC	PUBLIC
Address	Relationship	BOX 8881 NONE	_	2915 HALL ST SE NONE	2915 HALL ST SE NONE	MICHIGAN NE NONE	TIEKY PLACE #2 NONE	EAST BELTLINE NONE	O CASCADE ROAD NONE	THIRD NONE	. BOX 31 NONE	MONROE C	3 WALKE NONE	PEARL ST NW NONE	NONE		<b>3</b>	NONE	272 PEAKL ST NW NONE
Name	Address	z	EGK HIGH SCHOOL GRAND RAPIDS MI 49506	EGR SCHOOL FOUNDATION GRAND RAPIDS MI 49506	EGR LACROSSE GRAND RAPIDS MI 49506			F MELJER GARDENS GRAND RAPIDS MI 49525	FOREST HILLS GIRLS LACROS GRAND RAPIDS MI 49546	FRESH AIR FUND NEW YORK NY 10017	4	E OF THE	_	GERALD R. FORD FOUNDATION GRAND RAPIDS MI 49504	~	CATHOLIC CENTR GRAND RAPIDS			GR_PUBLIC MUSEUM GRAND RAPIDS MI 49504

400147 SECCHIA FAMILY FOUNDATION

## Federal Statements

38-2641093 FYE: 12/31/2010

Statement 10 - Form 990-PF, Part XV, Line 3a - Grants and Contributions Paid During the Year (continued)

Name	Address			
Address	Relationship	Status	Purpose	Amount
WHEELCHAIR SPORTS ASSO 2	235 WEALTHY STREET S	SE PIRI,IC	ርተፑጥ	250
TDATIO	900 FULLER ST SE		1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	
		PUBLIC	FUND DRIVE 2010	300
GRAND HAVEN AREA COMM FND 1 GRAND HAVEN MI 49417	SOUTH HARBOR NONE	PUBLIC	KITCHEL-LINDOUIST DUNE PRESERVE	200
	185 OAKES STREET SW			
GRAND RAPIDS MI 49503	NONE	PUBLIC	GRPD AWARDS PROGRAM	1,000
	NONE	PUBLIC	GIFT	100
GRAND VALLEY STATE UNIVER 1	CAMPUS DRIVE	7 T T T T T T T T T T T T T T T T T T T	SPEAKED SEPTES CIET - 2010	12 500
ANK	919 FILLEY ST	FOBILC		200
	NONE	PUBLIC	RAQUEL IZZO PROJECT	1,000
	1627 W. LAKEWOOD BLVD	£		
	NONE		DR MISSION	100
HEART OF UNITED WAY WEST 1 GRAND RAPIDS MT 49503	118 COMMERCE AVENUE NONE	SW PUBLIC	GIFT	5,500
NOI	PO BOX 890			
49518	NONE	PUBLIC	TAKING PRIDE IN HOPE - 5 OF 5	2,000
AN FNDN	302 SHELDON BLVD SE			,
MI 49503	NONE	PUBLIC	GIFT 2010	1,250
1	935 BAXTER ST SE	( 		-
GRAND RAPIDS MI 49506 TIMENILE DIABETES	NONE 26 BROADWAY 14TH F1	PUBLIC FI.OOR	KIDE FOR JOBS	000'T
.0004	NONE	PUBLIC	2010 GIFT	200
Ð	1700 BUTTERWORTH ST	0.2		
GRAND		PUBLIC	PROMISE CELEBRATION	2,000
BASKET	2055 OAK INDUSTRIAL DR NE	DR NE		
49505	_		SOMETHING'S GRILLIN	1,000
SOCIE	1311 MAMARONECK AVE	01		i I
LAINS NY 10605	NONE	PUBLIC	2010 GIFT	200
LOCAL FIRST GRAND RAPIDS MT 49506	949 WEALTHY SE STE . NONE	ZUI PUBLIC	2010 GIFT	1,000
	140 WEST MAIN ST			
MIDLAND MI 48640	NONE	PUBLIC	TAX ANALYSIS PROJECT	8,500

400147 SECCHIA FAMILY FOUNDATION 38-2641093

Federal Statements

FYE: 12/31/2010

Statement 10 - Form 990-PF, Part XV, Line 3a - Grants and Contributions Paid During the Year (continued)

Name	Address			
Address	Relationship	Status	Purpose	Amount
	2900 E. BELTLINE AVE			c c
GRAND RAPIDS MI 49525 MFI, TROTTER MINISTRIES 2	NONE 225 COMMERCE SW	PUBLIC	Z010 G1F1	0000
GRAND RAPIDS MI 49503	NONE	PUBLIC	2010 GIFT	1,000
ML KING ACADEMY FOOD DRIV 5	5512 GLENWOOD HILLS NONE	PKWY PUBLIC	FOOD DRIVE	200
	ᆣ			
	NONE	PUBLIC	MEMBERSHIP	10,000
NORTH BANK COMMUNITIES FU O GRAND HAVEN MI 49417	ONE SOUTH HARBOR DRIVE NONE PUBLIC	VE PUBLIC	YEAR END GIFT	200
	6450 N. OCEAN BLVD			
33435	NONE	PUBLIC	SUPPORT GROUP	1,000
OKIENTAL INSTITUTE CHICAGO II, 60637	LISS EAST SØIR SIKEE NONE	PUBLIC	GIFT FOR 2010	2,500
	401 HACKENSACK AVE			
r 07601	NONE	PUBLIC	GIFT	2,000
(	161 OTTAWA AVE NW	() 	GIAG STICITURE INTREE TO COLUMN TO C	0.11
GRAND RAPIDS MI 49503	NONE	PUBLIC	36TH ANNUAL ANTIQUE FAIR	OCT
CA 94132		PUBLIC	HONOR OF GAIL SECCHIA 70TH	1,000
	2706 S. JACKSON ST			
TTLE WA 98144		PUBLIC	GENERAL FUND	3,000
1	820 MONROE AVE NW	{   		(C)
S MI 49503	e de la companya de l	PUBLIC W	GIFT	006,2
SILENT OBSERVER  APENS   I MONKOE CENTER ST N NONE	NW PITRITC	MAY 4 2010 EVENT	1,000	
HIGAN	PO BOX 474		,	•
		PUBLIC	BASKETBALL SPONSOR	2,000
FOUND	111 LIBRARY NE			( ( )
GRAND RAPIDS MI 49503	NONE	PUBLIC	SUSTAINABILITY FUND	19,380
UICA GRAND RAPIDS MI 49503	LZU LYON NW NONE	PUBLIC	COMTEMP ARTS	2,000
) ) )	ONE OLYMPIC PLAZA			
COLORADO SPRINGS CO 80		PUBLIC	US OPEN SPONSOR	1,000
USO VEIS FUND WASHINGTON DC 20090	F.U. BUA 36322 NONE	PUBLIC	NSO SHOW	100
•				

400147 SECCHIA FAMILY FOUNDATION 38-2641093 FYE: 12/31/2010

## Federal Statements

# Statement 10 - Form 990-PF, Part XV, Line 3a - Grants and Contributions Paid During the Year (continued)

Name	Address			
Address	Relationship	Status	Purpose	Amount
W.M. STRATEGIC ALLIANCE	951 WEALTHY STREET SE	ш		
GRAND RAPIDS MI 49506	NONE	PUBLIC	INTERNS PROJECT	1,000
WEISS HOSPICE	28 CRESCENT ST			
MIDDLETOWN CT 06457	NONE	PUBLIC	MEMORY OF JANET MATTSON	1,000
YOUTH TUTORING PROGRAM OF 1425 MICHIGAN ST	1425 MICHIGAN ST NE			
GRAND RAPIDS MI 49503	NONE	PUBLIC	YEAR END GIFT - SSA	2,000
HELEN DEVOS CHILDRENS HOS	100 MICHIGAN ST NE			
GRAND RAPIDS MI 49503	NONE	PUBLIC	PLEDGE 5 OF 5	105,000
GR COMMUNITY LEGENDS	220 LYON NW			
GRAND RAPIDS MI 49503	NONE	PUBLIC	2010 GIFT	100,000
MICHIGAN STATE UNIVERSITY	JENISON FIELD HOUSE			
EAST LANSING MI 48824	NONE	PUBLIC	COACHES RECRUITING FUND	100,500
VAN ANDEL INSTITUTE	333 BOSTWICK AVE NE			
GRAND RAPIDS MI 49503	NONE	PUBLIC	BRINGING HOPE TO LIFE	51,000
TOTAL				528,020

400147 SECCHIA FAMILY FOUNDATION **Federal Statements** 38-2641093 FYE: 12/31/2010 **Tax-Exempt Dividends from Securities** Unrelated Exclusion Postal InState Description Business Code Muni (\$ or %) Amount Code Code 34 14 \$ 34 \$ TOTAL **Taxable Dividends from Securities** US Unrelated Exclusion Postal Obs (\$ or %) Description Amount **Business Code** Code Code 14 272,998 TOTAL \$ 272,998

Form 8868 (Rev January 2011)

### Application for Extension of Time To File an Exempt Organization Return

Department of the Treasury
Internal Revenue Service

File a separate application for each return.

If you are filing for an Automatic 3-Month Extension, complete only Part I and check this box
If you are filing for an Additional (Not Automatic) 3-Month Extension, complete only Part II (on page 2 of this form)

Do not complete Part II unless you have already been granted an automatic 3-month extension on a previously filed Form 8868

**▶** X

OMB No 1545-1709

Electronic fil	ing (e-file). You can electronically file Form 8868 if yo	ou need a 3-	month automatic extension of time to file	(6 mont	ths for	
a corporation	required to file Form 990-T), or an additional (not auto	omatic) 3-m	onth extension of time. You can electroni	cally file	Form	
8868 to reque	est an extension of time to file any of the forms listed i	n Part I or P	art II with the exception of Form 8870, In	formatio	n	
Return for Tra	ansfers Associated With Certain Personal Benefit Cor	ntracts, whic	h must be sent to the IRS in paper forma	t (see		
instructions)	For more details on the electronic filing of this form, v	ısıt www ırs	gov/efile and click on e-file for Charities &	Nonpre	ofits	
Part I	<b>Automatic 3-Month Extension of Time</b>	. Only sul	omit original (no copies needed)			
A corporation	required to file Form 990-T and requesting an autom	atic 6-month	extension-check this box and complete			
Part I only						▶ 🗌
All other corp	orations (including 1120-C filers), partnerships, REMI	Cs, and trus	ts must use Form 7004 to request an ext	ension o	of time	
to file income						
Type or	Name of exempt organization			Employ	er identification i	number
print				• •		
File by the	SECCHIA FAMILY FOUNDATION	N		38-2	641093	
due date for	Number, street, and room or suite no. If a P.O. box					
filing your return See instructions	220 LYON SQ. NW	.,	510			
	City, town or post office, state, and ZIP code For a	foreign add				
	I	49503				
Enter the Ret	urn code for the return that this application is for (file	a separate a	pplication for each return)			04
Application		Return	Application			Return
Is For	•	Code	Is For			Code
Form 990		01	Form 990-T (corporation)			07
Form 990-E	31	02	Form 1041-A			08
Form 990-E		03	Form 4720		-	09
Form 990-F		04	Form 5227			10
	(sec 401(a) or 408(a) trust)	05	Form 6069		<del></del>	11
Form 990-T (trust other than above)			Form 8870			12
1 01111 330-1	MARK A. SCHUT CPA	06	1 1 0111 0070		•	<del></del>
	4575 LAKE MICHIGAN D	D VIM				
The books	are in the care of ▶ GRAND RAPIDS	17 1444			MI 495	34
	e No ▶ 616-735-3052	FAX No	. •		173	<b>J</b> 1
•	anization does not have an office or place of business					▶ □
-	or a Group Return, enter the organization's four digit (			IS IS		, _
	group, check this box					
	names and EINs of all members the extension is for	mo group,				
	st an automatic 3-month (6 months for a corporation r	enured to fi	le Form 990-T) extension of time			
	08/15/11 , to file the exempt organization retuined			2		
	organization's return for		gamzation named above The extension i	•		
<b>▶</b> X	calendar year 2010 or					
	tax year beginning , and ending					
	tax year beginning , and ending					
2 If this to	ax year entered in line 1 is for less than 12 months, ch	neck reason	☐ Initial return ☐ Final return			
	change in accounting period					
20 If this -	pplication is for Form 990-BL, 990-PF, 990-T, 4720, o	or 6060 .cc*	or the tentative tax less any	Τ	<u> </u>	
		, ooos, cill	or the terrialise tax, iess any	3a	\$	0
	indable credits. See instructions	enter any re	fundable credits and	Ja	<b>*</b>	
	pplication is for Form 990-PF, 990-T, 4720, or 6069, on the detay payments made Include any prior year overpa			3b	\$	2,300
esumat	eu lax payments made include any phoi year overpa	iyiri <del>cht al</del> low	cu as a cicuit	70	L <del>V</del>	<u> </u>

(Electronic Federal Tax Payment System) See instructions 3c Caution. If you are going to make an electronic fund withdrawal with this Form 8868, see Form 8453-EO and Form 8879-EO for

c Balance due. Subtract line 3b from line 3a Include your payment with this form, if required, by using EFTPS

payment instructions