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Department of the Treasury

Return of Private Foundation

or Section 4947(a)(1) Nonexempt Charitable Trust Treated as a Private Foundation undation may be able to use a copy of this return to satisfy state reporting re

OMB No 1545-0052

Intern	al Rev	enue Service Note The Touridation may b	te able to use a copy of this	return to satisfy state reput	ung requirements.	
Forc	alen	dar year 2010, or tax year beginning		, and ending	<u> </u>	
G C	heck	all that apply: Initial return	Initial return of a fo	rmer public charity	Final return	n
		Amended return	Address chang	ge	Name change	
Nan	ne of	foundation			A Employer identificatio	n number
L_		FANNIE KRAFT FOUNDATI	ON		38-607017 <u>9</u>)
Num	ber ar	nd street (or P.O. box number if mail is not delivered to street	address)	Room/suite	B Telephone number	
		17515 WEST NINE MILE	ROAD	1040	<u> 248-559-22</u>	222
City	or to	own, state, and ZIP code			C If exemption application is	pending, check here
		SOUTHFIELD, MI 48075			D 1 Foreign organization	
H C	heck	type of organization: X Section 501(c)(3) ex	empt private foundation		Foreign organizations m check here and attach or	eeting the 85% test, omputation
] Sec	ction 4947(a)(1) nonexempt charitable trust	Other taxable private founda	ition	E If private foundation sta	atus was terminated
I Fa	ır ma	rket value of all assets at end of year J Accounting	ng method: X Cash	Accrual	under section 507(b)(1	
(fr	om F	Part II, col. (c), line 16)	her (specify)		F If the foundation is in a	60-month termination
_	\$	1,571,910. (Part I, colui	mn (d) must be on cash b	basis)	under section 507(b)(1	
Pa	rt l	Analysis of Revenue and Expenses	(a) Revenue and	(b) Net investment	(c) Adjusted net	(d) Disbursements
		(The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a))	expenses per books	` income	income	for charitable purposes (cash basis only)
	1	Contributions, gifts, grants, etc , received	100,632.		N/A	
	2	Check If the foundation is not required to attach Sch. B				
	3	Interest on savings and temporary cash investments				
	4	Dividends and interest from securities	34,402.	34,402.		STATEMENT 1
	5a	Gross rents				
	b	Net rental income or (loss)				
•	6a	Net gain or (loss) from sale of assets not on line 10	<22,155.	•		
ž	b	Gross sales price for all assets on line 6a 68,606.				
Revenue	7	Capital gain net income (from Part IV, line 2)		0.		
Œ	8	Net short-term capital gain				
	9	Income modifications				
	10a	Gross sales less returns and allowances				
	b	Less Cost of goods sold				
00	С	Gross profit or (loss)				
	11	Other Income CEN/ED				
\geq	12	Total Add ines 1-through 11	112,879.	34,402.		
	13	Coppo ensation of officers, directors, trustees est	0.	0.		0.
M	14	Oliter employee salaries and wages				
	15	Pension plans, employee benefits				
Ses	16a	Legal fees MANISIM LIV				
E E	Ь	Legal fees COEN, UV Accounting fees STMT 2	4,000.	4,000.		0.
€Ÿ.	С	Other professional fees				
ಾತ	17	Interest				
Z a	18	Taxes STMT 3	20.	20.		0.
į	19	Depreciation and depletion				
	20	Occupancy				
Ad	21	Travel, conferences, and meetings				
Ē	22	Printing and publications				
ig a	23	Other expenses STMT 4	342.	342.		0.
atin	24	Total operating and administrative				
Ser		expenses Add lines 13 through 23	4,362.	4,362.		0.
Õ	25	Contributions, gifts, grants paid	65,800.			65,800.
	1	Total expenses and disbursements				
		Add lines 24 and 25	70,162.	4,362.		65,800.
	27					
	-	Excess of revenue over expenses and disbursements	42,717.			
	l .	Net investment income (if negative, enter -0-)	, , .	30,040.		
	l	Adjusted net income (if negative, enter -0-)			N/A	
0235	01	LHA For Paperwork Reduction Act Notice, see	the instructions.			Form 990-PF (2010)

Form **990-PF** (2010)

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Part II Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only		Balance Sheets Attached schedules and amounts in the description	Beginning of year	End of	End of year		
P	aπ	column should be for end-of-year amounts only	(a) Book Value	(b) Book Value	(c) Fair Market Value		
	1	Cash - non-interest-bearing	14,193.	14,240.			
	2	Savings and temporary cash investments	25,410.	1,554.	1,554.		
	3	Accounts receivable ►					
		Less: allowance for doubtful accounts ▶					
	4	Pledges receivable ►					
		Less: allowance for doubtful accounts					
	5	Grants receivable					
	6	Receivables due from officers, directors, trustees, and other					
		disqualified persons					
	7	Other notes and loans receivable					
		Less: allowance for doubtful accounts ▶		-			
ets	-	Inventories for sale or use		4 (55)	4 653		
Assets		Prepaid expenses and deferred charges	2,031.	1,673.	1,673.		
⋖	İ	Investments - U.S and state government obligations			400 610		
	b	Investments - corporate stock STMT 5	0.	100,632.	100,619.		
	C	Investments - corporate bonds	25,000.				
	11	Investments - land, buildings, and equipment basis					
		Less accumulated depreciation					
	12	Investments - mortgage loans	4 255 522	4 255 505	4.52.004		
	13	Investments - other STMT 6	1,366,633.	1,357,527.	1,453,824.		
	14	Land, buildings, and equipment; basis					
		Less accumulated depreciation					
	15	Other assets (describe ►)					
			1 422 267	1 475 606	1 571 010		
_		Total assets (to be completed by all filers)	1,433,267.	1,475,626.	1,571,910.		
	ĺ	Accounts payable and accrued expenses	<u> </u>				
	18	Grants payable					
Liabilities		Deferred revenue					
Ē		Loans from officers, directors, trustees, and other disqualified persons					
Ë		Mortgages and other notes payable Other liabilities (describe ▶)		-			
	22	Other habilities (describe					
	23	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					
es	24	Unrestricted					
and	25	Temporarily restricted					
Bal	l .	Permanently restricted					
Fund Balance		Foundations that do not follow SFAS 117, check here			1		
Ē		and complete lines 27 through 31.					
s or	27	Capital stock, trust principal, or current funds	0.	0.			
Assets	28	Paid-in or capital surplus, or land, bldg., and equipment fund	0.	0.			
As	29	Retained earnings, accumulated income, endowment, or other funds	<78,220.	<35,861.	>		
Net	30	Total net assets or fund balances	1,433,267.	1,475,626.			
	İ						
_	31	Total liabilities and net assets/fund balances	1,433,267.	1,475,626.			
F	art	III Analysis of Changes in Net Assets or Fund B	alances				
1	Tota	I net assets or fund balances at beginning of year - Part II, column (a), line	30				
		st agree with end-of-year figure reported on prior year's return)		1	1,433,267.		
2	Ente	r amount from Part I, line 27a		2	42,717.		
3	Othe	er increases not included in line 2 (itemize)		3	0.		
		lines 1, 2, and 3		4	1,475,984.		
5	Dec	reases not included in line 2 (itemize) PREVIOUS YEAR '	S FEDERAL TAX		358.		
6	Tota	I net assets or fund balances at end of year (line 4 minus line 5) - Part II, c	olumn (h). line 30	16	1,475,626.		

,, , , ,

	Losses for Tax on Inv	estment	Income					
(a) List and describe the kind(s) of property sold (e.g., real estate,			(b) How acquired P - Purchase D - Donation		(c) Date : (mo., d	acquired ay, yr.)	(d) Date sold (mo., day, yr.)	
1a REPSOL INT CAP L	rD			Ť	D	10/1	6/97	12/06/10
b EATON VANCE LTD I					D	05/3	0/03	11/29/10
c PIONEER GROWTH					D	11/3	0/06	09/22/10
_d								<u> </u>
е				l				
(e) Gross sales price	(f) Depreciation allowed (or allowable)	10,	t or other basis xpense of sale				ain or (loss s (f) minus	(g)
a 25,226.			<u>25,00</u>					226.
ь 19,677.			25,00		<u> </u>			<5,323.
c 23,703.		-	40,76	 				<17,058.
d								
Complete only for assets showing ga	n in column (h) and owned by the	e foundation	on 12/31/69			II) Gains (C	Col. (h) gain	n minus
(i) F.M.V. as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Ex	cess of col. (1)		C	ol. (k), but i	not less tha (from col.	ın -0-) or
a								226.
b								<5,323.
c								<17,058.
d								
е								
2 Capital gain net income or (net capital	loss) { If gain, also enter in			}	2			<22,155.
3 Net short-term capital gain or (loss) as if gain, also enter in Part I, line 8, colu if (loss), enter -0- in Part I, line 8		(6):		}	3		N/A	A.
Part V Qualification Unde	er Section 4940(e) for F	Reduced	Tax on Net	Inv	estment In	come		
(For optional use by domestic private four	ndations subject to the section 49	40(a) tax on	net investment in	com	9.)			
	·	, ,			,			
If section 4940(d)(2) applies, leave this pa	art blank.							
Was the foundation liable for the section of "Yes," the foundation does not qualify u				rıod?				Yes X No
1 Enter the appropriate amount in each	column for each year; see instruc	tions before	making any entri	es.				
(a) Base period years Calendar year (or tax year beginning in	(b) Adjusted qualifying distri		Net value of no	(c) oncha	ritable-use asse	ts		(d) ibution ratio ivided by col. (c))
2009		.,007.			,234,00			.057542
2008		6,612.			<u>,380,26</u>			.055505
2007		3,375.			,648,80			.047534
2006		,114.			<u>,554,53</u>			.061185
2005	70	,667.		_1	<u>,477,24</u>	2.	1	.047837
2 Total of line 1, column (d)						2		.269603
3 Average distribution ratio for the 5-year the foundation has been in existence in the foundation has been in existence in the foundation has been in existence in the foundation has been in existence in the foundation has been in existence in the foundation has been in existence in the foundation has been in existence in the foundation has been in existence in the foundation has been in existence in the foundation has been in existence in the foundation has been in existence in the foundation has been in existence in the foundation has been in existence in the foundation has been in existence in the foundation has been in existence in the foundation has been in the foundation has bee		ı line 2 by 5,	or by the number	r of ye	ears	3		.053921
4 Enter the net value of noncharitable-u	se assets for 2010 from Part X, lir	ne 5				4		1,456,097.
5 Multiply line 4 by line 3						5		78,514.
6 Enter 1% of net investment income (1	% of Part I, line 27b)					6		300.
7 Add lines 5 and 6						7		78,814.
8 Enter qualifying distributions from Pa	rt XII, line 4					8		65,800.
If line 8 is equal to or greater than line		lb, and comp	olete that part usir	ng a 1	% tax rate.			

	TI 990-PF (2010) FANNIE KRAFT FOUNDATION	407.)	<u> 38-60</u>			Page 4
	art VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 49	40(e), or 4	948 - se	e instr	ictio	ns)
1a	a 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 instruction	18)			_	
b	b Domestic foundations that meet the section 4940(e) requirements in Part V, check here 🕨 🔲 and enter 1%)	1		6	01.
	of Part I, line 27b		l l			
C	c All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of Part I, line 12, col.	(b). J				
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		6	01.
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		6	01.
6	Credits/Payments:					
а	a 2010 estimated tax payments and 2009 overpayment credited to 2010 6a 6a	1,673.				
b	b Exempt foreign organizations - tax withheld at source 6b					
C	c Tax paid with application for extension of time to file (Form 8868)					
d	d Backup withholding erroneously withheld 6d 6d					
7	Total credits and payments. Add lines 6a through 6d		7		1,6	73.
8	Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached		8			
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed	>	9			
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid	•	10		1,0	72.
11	Enter the amount of line 10 to be: Credited to 2011 estimated tax	Refunded >	11			0.
Pa	art VII-A Statements Regarding Activities					
1a	a During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participation	ate or intervene	ın		Yes	No
	any political campaign?			1a		Х
b	b Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see instructions for	or definition)?		1b		Х
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any mate	nals publishe	d or			
	distributed by the foundation in connection with the activities.					
C	c Did the foundation file Form 1120-POL for this year?			1c		Х
d	d Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year:					
	(1) On the foundation. ▶ \$ 0 • (2) On foundation managers. ▶ \$	0.			İ	
е	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on fo	undation	_			
	managers. ► \$ 0 .				1	
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?			2	l	Х
	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	ncorporation,	or		İ	i
	bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes			3_		X
4a	a Did the foundation have unrelated business gross income of \$1,000 or more during the year?			4a		Х
b	b If "Yes," has it filed a tax return on Form 990-T for this year?		N/A	. 4b		
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?			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:					
	By language in the governing instrument, or				ĺ	1
	By state legislation that effectively amends the governing instrument so that no mandatory directions that confli	ct with the state	e 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	Х	
	If "Yes," complete Part II, col. (c), and Part XV.					
8a	a Enter the states to which the foundation reports or with which it is registered (see instructions)					
	MI			_		
b	b If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or de	signate)		_		
	of each state as required by General Instruction G? If "No," attach explanation	- '		8b	x	1
9		42(ı)(5) for cale	endar		T -	1
	year 2010 or the taxable year beginning in 2010 (see instructions for Part XIV)? If "Yes," complete Part XIV	.,,,		9		X
10	Did any nersons become substantial contributors during the tay year? Hereat a set of the later than a		<u>тмт 7</u>	10	Y	Ī

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Form 990-PF (2010) FANNIE KRAFT FOUNDATION Part VII-B Statements Regarding Activities for Which F	Form 4720 May Ro D	loguired (assets	38-60701	79 Page <u>6</u>
	Offit 4/20 Way be h	required (continu	uea)	
5a During the year did the foundation pay or incur any amount to:	A045/a\\2	□ v _a	s X No	
 Carry on propaganda, or otherwise attempt to influence legislation (section Influence the outcome of any specific public election (see section 4955); or 		-	אנבבו א	
any voter registration drive?	i to carry on, unectry or mone		s X No	
(3) Provide a grant to an individual for travel, study, or other similar purposes	2		s X No	
(4) Provide a grant to an organization other than a charitable, etc., organization			3 (22) (10)	
509(a)(1), (2), or (3), or section 4940(d)(2)?	0000.1500 000.1011	☐ Ye	s X No	
(5) Provide for any purpose other than religious, charitable, scientific, literary,	or educational purposes, or fo			
the prevention of cruelty to children or animals?	o. ooddanona. parpodoo, or		s X No	
b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify uni	ter the exceptions described i			
section 53.4945 or in a current notice regarding disaster assistance (see instru			N/A	5b
Organizations relying on a current notice regarding disaster assistance check h			▶ □ □	
c If the answer is "Yes" to question 5a(4), does the foundation claim exemption f		ned		
expenditure responsibility for the grant?		/A	s 🔲 No	1 1
If "Yes," attach the statement required by Regulations section 53 494		•		1
6a Did the foundation, during the year, receive any funds, directly or indirectly, to				:
a personal benefit contract?		☐ Ye	s X No	
b Did the foundation, during the year, pay premiums, directly or indirectly, on a p	ersonal benefit contract?			6b X
If "Yes" to 6b, file Form 8870				
7a At any time during the tax year, was the foundation a party to a prohibited tax s	shelter transaction?	☐ Ye	s X No	
b If "Yes," did the foundation receive any proceeds or have any net income attribu			N/A	7b
Part VIII Information About Officers, Directors, Trust Paid Employees, and Contractors	ees, Foundation Ma	nagers, Highly	/	
1 List all officers, directors, trustees, foundation managers and their	compensation.			
(a) Name and address	(b) Title, and average hours per week devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
LAWRENCE H. KRAFT	PRESIDENT, TR	USTEE		
	0.00	0.	0.	0.
MILTON EINSTANDIG	TREAS., SECRE	TARY, TRU	STEE	
	0.00	0.	0.	0.
JACKIE KRAFT	VICE PRESIDEN	T, TRUSTE	E	
	0.00	0.	0.	0.
		1		
O Componentian of five his best unid annulated father than the	hudad on the 4). If a second	ontor PNONE "		
2 Compensation of five highest-paid employees (other than those inc		enter "NUNE."	(d) Contributions to	(e) Expense
(a) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week devoted to position	(c) Compensation	employee benefit plans and deferred compensation	account, other allowances
NONE				
	-	1		
				-
	-			
<u> </u>				
	1			
		-		
	-	1		
Table to make a global and a second of the control		1		
Total number of other employees paid over \$50,000				0

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Part VIII Paid Employees, and Contractors (continued)		
	enter "NONE."	
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
Information About Officers, Directors, Trustees, Foundation Mai Employees, and Contractors (continued) Five highest-paid independent contractors for professional services. If none, enter "NONE." (a) Name and address of each person paid more than \$50,000 NONE **Part IX-A Summary of Direct Charitable Activities** Ist the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information or organizations and other beneficiaries served, conferences convened, research papers produced, etc. **N/A** **Part IX-B Summary of Program-Related Investments** Pert IX-B Summary of Program-Related Investments** Pescribe the two largest program-related investments made by the foundation during the tax year on lines 1 and N/A**		
Total number of others receiving over \$50,000 for professional services		▶ 0
Part IX-A Summary of Direct Charitable Activities	<u></u>	
		Expenses
ı N/A		
2		
3		
		
Part IX-B Summary of Program-Related Investments		
	ar on lines 1 and 2.	Amount
1N/A		
2		
All other program-related investments. See instructions.		

Total. Add lines 1 through 3

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

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

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

income. Enter 1% of Part I, line 27b

Adjusted qualifying distributions Subtract line 5 from line 4

4940(e) reduction of tax in those years.

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65,800.

65,800.

4

5

6

Part XIII Undistributed income (see instructions)

	(a) Corpus	(b) Years prior to 2009	(c) 2009	(d) 2010
1 Distributable amount for 2010 from Part XI,	·			72 204
line 7				72,204.
2 Undistributed income, if any, as of the end of 2010			0	
a Enter amount for 2009 only			0.	
b Total for prior years:		0		
3 Excess distributions carryover, if any, to 2010:		0.		
a From 2005				
b From 2006 19,559.				
c From 2007				
d From 2008 9,135.				
e From 2009 10,023.				
f Total of lines 3a through e	38,717.			
4 Qualifying distributions for 2010 from				
Part XII, line 4: ►\$ 65,800.				
a Applied to 2009, 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			···	
(Election required - see instructions)	0.			
d Applied to 2010 distributable amount				65,800.
e Remaining amount distributed out of corpus	0.			03,0000
5 Excess distributions carryover applied to 2010	6,404.			6,404.
(If an amount appears in column (d), the same amount must be shown in column (a))	0,202.		1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	0/1011
6 Enter the net total of each column as indicated below:				
a Corpus Add lines 3f, 4c, and 4e Subtract line 5	32,313.			
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 2009. Subtract line				
4a from line 2a. Taxable amount - see instr.			0.	
f Undistributed income for 2010. Subtract				
lines 4d and 5 from line 1. This amount must				
be distributed in 2011				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 2005				
not applied on line 5 or line 7	0.			
9 Excess distributions carryover to 2011				
Subtract lines 7 and 8 from line 6a	32,313.	_		
10 Analysis of line 9:				
a Excess from 2006 13, 155.				
b Excess from 2007				
c Excess from 2008 9,135.				
d Excess from 2009 10,023.				
e Excess from 2010				
		-		5 000 DE (0040)

	KRAFT FOUND				70179 Page 10
Part XIV Private Operating F	 · · · · · · · · · · · · · · · · · ·		-A, question 9)	N/A	
1 a If the foundation has received a ruling					
foundation, and the ruling is effective for			▶ └		<u> </u>
b Check box to indicate whether the four		ng foundation described i		4942(j)(3) or49	942(j)(5)
2 a Enter the lesser of the adjusted net	Tax year		Prior 3 years		
income from Part I or the minimum	(a) 2010	(b) 2009	(c) 2008	(d) 2007	(e) Total
investment return from Part X for					
each year listed					
b 85% of line 2a					
c Qualifying distributions from Part XII,					
line 4 for each year listed					
d Amounts included in line 2c not					
used directly for active conduct of					
exempt activities					
e Qualifying distributions made directly					
for active conduct of exempt activities.	İ				
Subtract line 2d from line 2c Complete 3a, b, or c for the alternative test relied upon;					
a "Assets" alternative test - enter:(1) Value of all assets					
(2) Value of assets qualifying under section 4942(j)(3)(B)(i)					
b "Endowment" alternative test - enter 2/3 of minimum investment return shown in Part X, line 6 for each year listed				:	
c "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>		<u> </u>	<u> </u>
Part XV Supplementary Info			if the foundation	n had \$5,000 or m	ore in assets
Information Regarding Foundation List any managers of the foundation w year (but only if they have contributed)	ho have contributed more		tributions received by th	e foundation before the clo	ose of any tax
LAWRENCE H. KRAFT	· · · · · · · · · · · · · · · · · · ·	·			
b List any managers of the foundation w other entity) of which the foundation h			(or an equally large port	tion of the ownership of a p	partnership or
NONE					
2 Information Regarding Contribu Check here ► X if the foundation the foundation makes gifts, grants, etc.	only makes contributions	to preselected charitable	organizations and does		
a The name, address, and telephone nur	· · · · · · · · · · · · · · · · · · ·			oompote teme Eat by e, an	
h The form in which and leathers about	he culturated and informa-	tron and motorials they	hould include:		
b The form in which applications should	DE SUDTRICEO AND INTORMA	uion and materials they s	a include:		
c Any submission deadlines:					
d Any restrictions or limitations on awar	ds, such as by geographic	al areas, charitable fields	, kinds of institutions, or	r other factors:	

3 Grants and Contributions Paid During the		Payment		
Recipient	If recipient is an individual,			
Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
a Paid during the year	or substantial contributor	700,011		.,
a lab comig the year			TO MAKE DISTRIBUTIONS	
			TO VARIOUS TAX EXEMPT	
			INSTITUTIONS WHICH ARE	
aavr				65 000
SCHEDULE ATTACHED			SELECTED FOR THEIR	65,800.
			EDUCATIONAL, MEDICAL	
			OR HUMANITARIAN DIRECTED ACTIVITIES.	
			DIRECTED ACTIVITIES.	
		'		
	}			
Total			▶ 3a	65,800.
b Approved for future payment				
NONE				
NONE				
Total		<u> </u>	▶ 3b	0
. Julai			► 30	, υ,

Part XVI-A Analysis of Income-Producing Activities

Enter gross amounts unless otherwise indicated.	Unrelated b	usiness income		ded by section 512, 513, or 514	(e)
	(a) Business	(b)	(C) Exclu-	(d)	Related or exempt
1 Program service revenue:	code	Amount	sion code	Amount	function income
a					
b					
С					
d	1 1				
e	- I I				
f					
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					34,402.
5 Net rental income or (loss) from real estate:					
a Debt-financed property					
b Not debt-financed property					
6 Net rental income or (loss) from personal property		- 10-			
7 Other investment income					
8 Gain or (loss) from sales of assets other					.22 155
than inventory			 		<22,155.
9 Net income or (loss) from special events			1		· -
10 Gross profit or (loss) from sales of inventory			-		
11 Other revenue:	l i				
a	_		+		
b					· - · · · · · · · · · · · · · · · · · · ·
c	i I				
d	_				
12 Subtotal. Add columns (b), (d), and (e)	-	0.		0.	12,247.
13 Total. Add line 12, columns (b), (d), and (e)	<u> </u>			13	12,247.
(See worksheet in line 13 instructions to verify calculations.	.)				

Part XVI-B Relationship of Activities to the Accomplishment of Exempt Purposes

Line No	Explain below how each activity for which income is reported in column (e) of Part XVI-A contributed importantly to the accomplishment of
	the foundation's exempt purposes (other than by providing funds for such purposes).
4	INTEREST AND DIVIDENDS AND GAINS ON SALE OF MARKETABLE SECURITIES
	SECURITIES PLUS CONTRIBUTIONS RECEIVED PROVIDE THE FUNDS
8	FOR WHICH THE FOUNDATION WAS FORMED. THIS ALLOWS FOR
	THE DISTRIBUTION TO THE VARIOUS TAX EXEMPT INSTITUTIONS
	WHICH ARE SELECTED FOR THEIR EDUCATIONAL, MEDICAL OR
	HUMANITARIAN DIRECTED ACTIVITIES.

•	• *								
orm 990 Part X		E KRAFT FO			and Dalat	38-607			ge 13
Part A	Exempt Organ		iters 10 a	nd Transactions a	ing Relati	ionships With Nonch	aritabio	•	
1 Did	the organization directly or indi		f the following	with any other organization	n described i	n section 501(c) of		Yes	No
	Code (other than section 501(c					11 30011011 30 1(0) 01			
	sfers from the reporting found								
	Cash		io onompt or g				1a(1)		Х
	Other assets						1a(2)		X
	er transactions:								
(1)	Sales of assets to a noncharita	ble exempt organizati	on				16(1)		Х
	Purchases of assets from a no						1b(2)		Х
	Rental of facilities, equipment,		_				1b(3)		Х
	Reimbursement arrangements						1b(4)		Х
(5)	Loans or loan guarantees						1b(5)		X
(6)	Performance of services or me	embership or fundrais	ıng solicitatioi	ns			1b(6)		X
c Sha	ring of facilities, equipment, ma	uling lists, other asset	s, or paid emp	oloyees			1c		X
d If th	e answer to any of the above is	"Yes," complete the fo	ollowing sche	dule. Column (b) should alv	ways show th	e fair market value of the goods	, other as:	sets,	
or s	ervices given by the reporting f	oundation. If the foun	dation receive	ed less than fair market valu	ie in any trans	saction or sharing arrangement	show in		
colu	mn (d) the value of the goods,	,				,			
a) Line no	(b) Amount involved	(c) Name of		exempt organization	(d) Des	cription of transfers transactions, an	d sharing ai	rangeme	ents
			N/A						
				 					
		<u> </u>							
		 		 					
		ļ				,		_	
		-							
									
	-								
			 						
	-	 			- -				
	 	 			+				
	 								
2a Isth	ne foundation directly or indirec	tly affiliated with, or ri	elated to, one	or more tax-exempt organi	zations descr	ıbed			
	ection 501(c) of the Code (othe	•		· · ·			Yes	X	No
	es," complete the following sch	, ,							_
	(a) Name of org			(b) Type of organization		(c) Description of relation	nship		
	N/A								
				•					
		1							
			/						
	Under penalties of persury I declar and complete Deplaration of preparation					nd to the best of my knowledge and	pelief, it is t	ue, corre	ect,
Sign	and complete Departion of prep.	are (orneythan taxbayer o	n ilouciary) is ba	ised on all information of which	preparer nas an	y knowledge			
Here	X./	WU		X 6/27	111	TRUSTEE			
	Signature of officer or tr			Date	<u>_</u>	Title			
	Print/Type preparer's n	ame	Preparer j é si	gnature	Date	Check fill If PTII	1		

MY 17 201

self- employed

Firm's EIN

Phone no.

248-559-2222 Form **990-PF** (2010)

Paid

Preparer

Use Only

DANIEL N. KLINE

Firm's name ► EINSTANDIG, KLINE & MEEHAN, LLP

Firm's address ▶ 17515 W. 9 MILE ROAD, SUITE 1040 SOUTHFIELD, MI 48075

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

Department of the Treasury Internal Revenue Service

Schedule of Contributors

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

OMB No 1545-0047

2010

Employer identification number Name of the organization 38-6070179 FANNIE KRAFT FOUNDATION Organization type (check one) Section: Filers of: 501(c)(Form 990 or 990-FZ) (enter number) organization 4947(a)(1) nonexempt charitable trust not treated as a private foundation 527 political organization Form 990-PF X 501(c)(3) exempt private foundation 4947(a)(1) nonexempt charitable trust treated as a 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 J 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,

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).

religious, charitable, etc., contributions of \$5,000 or more during the year

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990, 990-EZ, or 990-PF. Schedule B (Form 990, 990-EZ, or 990-PF) (2010)

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

Schedule B ((Form 990,	990-EZ, or	990-PF) (2010)

Page	$oldsymbol{1}$ of	1 of Par	t I
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Name of organization

Employer identification number

FANNIE KRAFT FOUNDATION

38-6070179

Part I	Contributors (see instructions)		
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
1	LAWRENCE H. KRAFT 4740 LITTLEGATE BLOOMFIELD HILLS, MI 48302	\$50,167.	Person Payroll Noncash X (Complete Part II if there is a noncash contribution)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
2	LAWRENCE H. KRAFT 4740 LITTLEGATE BLOOMFIELD HILLS, MI 48302	\$\$\$\$	Person Payroll Noncash X (Complete Part II if there is a noncash contribution)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
3	LAWRENCE H. KRAFT 4740 LITTLEGATE BLOOMFIELD HILLS, MI 48302	\$25,551.	Person Payroll Noncash X (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 Payroll Noncash Complete Part II if there is a noncash contribution.

Name of organization

Employer identification number

FANNIE KRAFT FOUNDATION

38-6070179

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
1	425 SHARES DIONEX DEL COM PV		
		\$ 50,167.	12/28/10
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
2	1134 SHARES COMCAST CORP NEW CL A	_	
		\\$\$	12/31/10
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
3	306 SCHLUMBERGER LTD	_	
		\$ 25,551.	12/31/10
(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
		_	

(e) Transfer of gift

Transferee's name, address, and ZIP + 4

Relationship of transferor to transferee

FORM 990-PF DIVIDEND	S AND	INTER	EST FROM	SECUF	RITIES	STATEMENT	1
SOURCE		GROSS	AMOUNT		TAL GAINS	COLUMN (A) AMOUNT)
MERRILL LYNCH	-		34,402.		0.	34,40)2.
TOTAL TO FM 990-PF, PART I, L	N 4		34,402.		0.	34,40)2.
FORM 990-PF	AC	COUNTI	NG FEES			STATEMENT	2
DESCRIPTION	EXPE:	A) NSES BOOKS	(B) NET INVI MENT INC		(C) ADJUSTED NET INCOM		
EINSTANDIG, KLINE & MEEHAN		4,000.	4	,000.			0.
TO FORM 990-PF, PG 1, LN 16B		4,000.	4	,000.			0.
FORM 990-PF		TAX	ES			STATEMENT	3
DESCRIPTION	EXPE	A) NSES BOOKS	(B) NET INV MENT IN				
ST OF MI - ANNUAL REPORT		20.		20.			0.
TO FORM 990-PF, PG 1, LN 18 =		20.		20.			0.
FORM 990-PF	0	THER E	XPENSES			STATEMENT	4
DESCRIPTION	EXPE	A) NSES BOOKS	(B) NET INV MENT IN	EST-			
	-						
INVESTMENT FEES		342.		342.			0.

ORM 990-PF CORPORATE STOCK				STATEMENT				
DESCRIPTION						BOOK VALUE	FAIR MARKET	r
SCHEDULE ATTACHED					•	100,632.	100,63	19.
TOTAL TO FORM 990-PF,	PART	ART II, LINE 10B 100,632.			100,6	19.		
FORM 990-PF			OTHE	R I	NVESTMENTS		STATEMENT	6
DESCRIPTION					VALUATION METHOD	BOOK VALUE	FAIR MARKE' VALUE	r
SCHEDULE ATTACHED					COST	1,357,527.	1,453,8	24.
TOTAL TO FORM 990-PF,	PART	II,	LINE	13	:	1,357,527.	1,453,8	24.
FORM 990-PF	LIST				TIAL CONTRIB	UTORS	STATEMENT	7
NAME OF CONTRIBUTOR				AD	DRESS			
LAWRENCE H. KRAFT					 40 LITTLEGA OOMFIELD HI	TE LLS, MI 48302		

SERTA RESTOKRAFT MATTRESS CO., INC. 38025 JAY KAY DRIVE ROMULUS, MI 48174

Fannie Kraft Foundation

Form 990-PF 12/31/10

EIN# 38-6070179 Southfield, Michigan 48075

		Beginning			
		of Year	End of Year		
		Book	Book	Market	
Other Investments - Corporate Stock	Quantity	Value	Value	Value	
Comcast Corp New Cl A	1,134	0	24,914	24,914	
Dionex Del Com PV	425	0	50,167	50,154	
Schlumberger Ltd	306	0	25,551	25,551	
Totals		0	100,632	100,619	

5/16/2011

Fannie Kraft Foundation

Form 990-PF 12/31/10

EIN# 38-6070179 Southfield, Michigan 48075

		Beginning		
		of Year	End	of Year
		Book	Book	Market
Corporate Bonds	Shares	Value	Value	Value
Repsol Int Capital Ltd - 7 46% pfd	0	25,000	0	0
Totals		25,000	0	0

Fannie Kraft Foundation

Form 990-PF 12/31/10

EIN# 38-6070179 Southfield, Michigan 48075

		Beginning		
		of Year	End of	Year
		Book	Book	Market
Other Investments	Quantity	Value	Value	Value
American Capital Inc Builder CL C	1,963	122,663	125,765	98,024
Blackrock Global Allocation Fd	15,689	185,858	213,202	284,593
Eaton Vance Limited Duration Inc FD	1,250	25,000	0	0
Israel Bond	1,000	1,656	1,656	1,000
Ivy Asset Strategy Fund CL C	16,599	411,395	411,395	393,902
Loomis Sayles Global Markets Fd Cl C	5,972	88,098	88,980	91,856
Loomis Sayles Strategic Income Fund CL C	36,272	431,372	456,699	539,362
MFS International New Discovery CL C	2,146	59,830	59,830	45,087
Pioneer Growth Opportunities Fd	0	40,761	0	0
Totals		1,366,633	1,357,527	1,453,824

5/3/2011

EIN# 38-6070179 Southfield, Michigan 48075 Checks Paid as of December 31, 2010

	Amount		
Name of Organization	<u>Paid</u>	<u>Address</u>	City, State, Zip
Agency for Jewish Education	1,000	6735 Telegraph Road, Ste. 370	Bloomfield Hills, MI 48301
Alzheimer's Disease Research	1,500	20300 Civic Center Drive, Ste 100	Southfield, MI 48076
Anti-Defamation League	1,000	25800 Northwestern Hwy #980	Southfield, MI 48075
Children's Hospital of MI Foundation	4,000	3911 Beaubien	Detroit, MI 48201
Gleaners Community Food Bank	3,500	2131 Beaufait	Detroit, MI 48207
Holocaust Memorial Center	13,250	28123 Orchard Lake Road	Farmington, MI 48334
Hospice of Michigan	1,000	400 Mack Avenue	Detroit, MI 48201
Israel Guide Dog Center for Blind	1,000	732 S Settlers Circle	Warrington, PA 18976
Jewish Hospice & Chaplaincy Network	12,000	6555 W Maple Road	West Bloomfield, MI 48322
Juvenile Diabetes Foundation	3,500	24359 Northwestern Hwy, Ste 225	Southfield, MI 48075
Kadıma	1,000	15999 W Twelve Mile Road, Ste 2	Southfield, MI 48076
Karmanos Cancer Institute	3,600	4100 John R Mailcode NC0605	Detroit, MI 48201
Kids Kicking Cancer	2,000	645 Griswold, Ste 444	Detroit, MI 48226
Michigan Humane Society	250	26711 Northwestern Highway	Southfield, MI 48034
National Kidney Foundation	3,000	1169 Oak Valley Drive	Ann Arbor, MI 48108
Roeper School	2,000	41190 Woodward Ave	Bloomfield Hills, MI 48304
Temple Beth El	2,550	7400 Telegraph Road	Bloomfield Hills, MI 48301
The Friendship Circle	3,000	6892 West Maple Road	West Bloomfield, MI 48322
Wayne State University	2,000	5201 Cass Avenue	Detroit, MI 48202
Yad Ezra	3,750	2850 W Eleven Mile Road	Berkley, MI 48072
Other organized charities	900		
Total	65,800		

Form **8868**

(Rev January 2011)

Department of the Treasury Internal Revenue Service

Application for Extension of Time To File an Exempt Organization Return

File a separate application for each return.

OMB No 1545-1709

	are filing for an Automatic 3-Month Extension, complete					▶ [X]
-	are filing for an Additional (Not Automatic) 3-Month Exte	•	· · · · · · · · · · · · · · · · · · ·		0000	
	complete Part II unless you have already been granted ar		· · · · · · · · · · · · · · · · · · ·			_
	nic filing (e-file). You can electronically file Form 8868 if yo					•
•	to file Form 990-T), or an additional (not automatic) 3-mon		•		•	
	to file any of the forms listed in Part I or Part II with the exc					
	Il Benefit Contracts, which must be sent to the IRS in pape	er format (s	see instructions). For more details on the	e electro	onic filing of t	his form,
	w.rs.gov/efile and click on e-file for Charities & Nonprofits					
Part				 -		
A corpo	ration required to file Form 990-T and requesting an autom	atic 6-mor	oth extension - check this box and comp	olete		
Part I o	•					
	r corporations (including 1120-C filers), partnerships, REMI	Cs, and tn	usts must use Form 7004 to request an	extensi	on o f time	
o file in	come tax returns.					
Type o	Name of exempt organization			Employ	yer identifica	ation number
print			ļ			
T.1 - b 4b.	FANNIE KRAFT FOUNDATION			<u> 38</u>	<u>-60701</u>	79
File by thi due date		ee instruct	ions			
filing your return Se		NO. 1	1040			
instructio		ireign addi	ress, see instructions			
	SOUTHFIELD, MI 48075					
Enter ti	ne Return code for the return that this application is for (file	a separat	te application for each return)			0 4
Applic	ation	Return	Application			Return
Is For	ation	Code	Is For			Code
Form S	90	01	Form 990-T (corporation)			07
Form S		02	Form 1041-A			08
Form 9		03	Form 4720			09
Form 9		04	Form 5227			10
	990-T (sec 401(a) or 408(a) trust)	05	Form 6069			11
	990-T (trust other than above)	06	Form 8870			12
10111	VALERIE KERN	1 00	1 00/10			
• The	books are in the care of > 17515 W NINE M	TLE S	HITTE 1040 - SOUTHETE	C.T.S	MT 480	75
	ephone No ► 800-644-0680	<u> </u>	FAX No ▶		111 100	-, -
	ne organization does not have an office or place of busines	e in the l li	·			
	ns is for a Group Return, enter the organization's four digit			ue ie for	the whole or	oup chock this
box 🌗	If it is for part of the group, check this box					
	request an automatic 3-month (6 months for a corporation				JIS THE CATED	31011 13 101
•		•	ation return for the organization named		The extension	n
	is for the organization's return for	Ji Olganiza	ation retain for the organization named	above	THE EXICHSION	•
	► X calendar year 2010 or					
			nd and an			
	tax year beginning	, ai	nd ending		_	
^	If the top year entered in line 1 is far less than 12 mostles	abaal, saa	son	nal retur	_	
2	If the tax year entered in line 1 is for less than 12 months,	cneck reas	son Initial return Fir	iai retur	П	
	Change in accounting period					
30	If this application is for Form 990-BL, 990-PF, 990 T, 4720	or 6060	enter the tentative tay less any	Τ		
3а	•••	, or bubs,	enter the tentative tax, less any	1		0
1	nonrefundable credits. See instructions		u refundable eradita and	<u>3a</u>	\$	0.
b	If this application is for Form 990-PF, 990-T, 4720, or 606		<u>-</u>			1 672
	estimated tax payments made Include any prior year ove			3b_	\$	1,673.
С	Balance due. Subtract line 3b from line 3a Include your p	=		-		^
	by using EFTPS (Electronic Federal Tax Payment System)			3c	[_\$	0.
LHA	on. If you are going to make an electronic fund withdrawa For Paperwork Reduction Act Notice, see Instruction		TOTH GOOD, SEE FORM 6453 EU and FOR	11 06/9		ent instructions 1868 (Rev. 1-2011)
	TO FAPELWOIL DEGLETON ACTIVOLICE, SEE INSTRUCTION	13.			FORM	.000 (⊓ev. 1′∠UII)