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### Form 990-PF

Department of the Treasury

# **Return of Private Foundation**

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

Note. The foundation may be able to use a copy of this return to satisfy state reporting requirements.

2010

OMB No 1545-0052

			addon may t	JO apio to	ruse a copy or this	TOTALITY TO SULL	or state tope	, tang 10	4211011	onio.		
For	alen	idar year 2010, or tax year beginning				, and ei	nding					
G	heck	all that apply. Initial return		$\sqcup$	Initial return of a fo	•	harity		L		i return	
_		Amended ret	um	L	Address chan	ge		Name o	change			
Nai	ne of	foundation						A Em	ployer	identi	fication	number
								١.			4	
<u> </u>		BISHAI FAMILY FO						+			534	100
Nur	nber a	and street (or P O box number if mail is not deliv		address)			Room/suite	B Tele				0.0
		105 LAKE SHORE R	ED.					<del> </del>			<u>-49</u>	
City	orto	own, state, and ZIP code	DVC	) ( T	40006							ending, check here
		GROSSE POINTE FA			48236			U 1.F	oreign	organ	izations	s, check here
H_(	_				vate foundation				heck he	re and	attach co	eting the 85% test, mputation
<u> </u>		ction 4947(a)(1) nonexempt charitable t			kable private found			E If p	rıvate f	ounda	tion stat	tus was terminated
		arket value of all assets at end of year		-		L Accr	ual	und	ler sect	ion 50	17(b)(1)	(A), check here
		Part II, col. (c), line 16)		her (spec		<u> </u>						60-month termination
<u> </u>	\$	135,750.										(B), check here
Pá	irt E	(The total of amounts in columns (b), (c), and	(d) may not		Revenue and enses per books	(b) Net in		(	c) Adju	sted n ome	et	(0) Disbursements for chantable purposes
	I	necessanly equal the amounts in column (a) )		evhe	· · · · · · · · · · · · · · · · · · ·	, mict		ļ .				(cash basis only)
	1	Contributions, gifts, grants, etc., receive		ļ	10,000.			<del> </del>	N/	A	·····	
	2	Check Interest on savings and temporary	TEACH SCH B	·	613.		613.	<del> </del>				STATEMENT 1
	3	cash investments	•		013.		013	<u>-</u>				STATEMENT 1
	4	Dividends and interest from securities										· · · · · · · · · · · · · · · · · · ·
		Gross rents						<del> </del>				
	_	Net rental income or (loss)		-				<del>                                     </del>				
en n	١.	Net gain or (loss) from sale of assets not on lin Gross sales price for all	e 10				······································	<del> </del>		<del>,</del>	****	What the to
Revenue	_b	assets on line 6a		<u> </u>		,,,,	0.	1			100	
æ	7	Capital gain net income (from Part IV, line 2)		<b></b>			<u>U</u>	•		-1		Ž.
	Ι.	Net short-term capital gain		<u> </u>						흥	SE	P 0 % 2011   9
	9	Income modifications Gross sales less returns		<b></b>			······	-		14		MO I
	10a						<del></del>	<del>                                     </del>		<del>.      </del>	**************************************	ENCINE III
	l	Less Cost of goods sold		ļ				<del></del>		-	Ac. 200	6/15/17 1 W
	l	Gross profit or (loss)										· · · · · · · · · · · · · · · · · · ·
	11	Other income		<b></b>	10,613.		613	<del> </del>				
	12	Total. Add lines 1 through 11  Compensation of officers, directors, trustees,		<del> </del>	0.		013		_			0.
	13	Other employee salaries and wages	eic .	<u> </u>				-	-			
	14	Pension plans, employee benefits	• ••	-		<del>                                     </del>		1				
ses	I	Legal fees						+				
Sue	ı		IT 2	-	1,600.		0.					1,600.
Š	ı	Other professional fees		<b></b>				1				2,000.
Е	17	Interest	• •					1				
and Administrative Expens	18	Taxes	• •					1				
istr	19	Depreciation and depletion	•				<u> </u>	1				., ., .
ä	20	Occupancy			·· · · ·			1				
Adr	21	Travel, conferences, and meetings			<u></u>		=	1				· · -
ď	22	Printing and publications						1				
g	23		IT 3		4,073.		130					3,943.
Operating	l .	Total operating and administrative	_									
Seri	.	expenses. Add lines 13 through 23			5,673.		130.	.				5,543.
Ö	25	Contributions, gifts, grants paid			7,435.			1	***************************************			5,543. 7,435.
		Total expenses and disbursements.	••		<u> </u>			1				
		Add lines 24 and 25			13,108.		130.	.				12,978.
_	27											
	l	Excess of revenue over expenses and disburs	ements	[	-2,495.							
		Net investment income (if negative, enter		<del></del>		''	483				,	· · · · · · · · · · · · · · · · · · ·
	l	Adjusted net income (if negative, enter -0-			*********			1	N/	A	******	***************************************

LHA For Paperwork Reduction Act Notice, see the instructions.

48-1291534

		Rolongo Shoots Attached schedules and amounts in the description	Beginning of year	End of year	ar
P	art	Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only	(a) Book Value	(b) Book Value	(c) Fair Market Value
	1	Cash - non-interest-bearing			
	2	Savings and temporary cash investments	138,245.	135,750.	135,750.
	3	Accounts receivable ►			
		Less allowance for doubtful accounts ▶	, , m W r tons gr		
	4	Pledges receivable ►			
		Less allowance for doubtful accounts ▶			
	5	Grants receivable .			<del></del>
	6	Receivables due from officers, directors, trustees, and other			
		disqualified persons			
	7	Other notes and loans receivable			
		Less allowance for doubtful accounts ▶			
ts	8	Inventories for sale or use			
Assets	9	Prepaid expenses and deferred charges			
Ä	10a	Investments - U S and state government obligations			
	b	Investments - corporate stock			
	C	Investments - corporate bonds			
	11	Investments - land, buildings, and equipment basis			
		Less. accumulated depreciation			
	12	Investments - mortgage loans			
	13	Investments - other			
	14	Land, buildings, and equipment basis ▶	,,		
		Less: accumulated depreciation			
	15	Other assets (describe			
	ļ				
	16	Total assets (to be completed by all filers)	138,245.	135,750.	135,750.
	17	Accounts payable and accrued expenses			
	18	Grants payable			
Š	19	Deferred revenue			
Liabilities	20	Loans from officers, directors, trustees, and other disqualified persons			
abi	21	Mortgages and other notes payable			
	22	Other liabilities (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.			
Ces	24	Unrestricted .	138,245.	135,750.	
<u>a</u>	25	Temporarily restricted			
Ba	26	Permanently restricted			
Ē		Foundations that do not follow SFAS 117, check here			
Ę		and complete lines 27 through 31.			
ō	27	Capital stock, trust principal, or current funds			
set	28	Paid-in or capital surplus, or land, bldg, and equipment fund			
As	29	Retained earnings, accumulated income, endowment, or other funds			
Net Assets or Fund Balances	30	Total net assets or fund balances	138,245.	135,750.	
_					
	31	Total liabilities and net assets/fund balances	138,245.	135,750.	
	art	Analysis of Changes in Net Assets or Fund B	alarices		
1	Tota	I net assets or fund balances at beginning of year - Part II, column (a), line	30		
	(mus	st agree with end-of-year figure reported on prior year's return)		. 1	138,245.
2	Ente	r amount from Part I, line 27a		2	-2,495.
3	Othe	r increases not included in line 2 (itemize)		3	0.
4	Add	lines 1, 2, and 3		4	135,750.
5	Decr	eases not included in line 2 (itemize)		5	0.
6	Tota	net assets or fund balances at end of year (line 4 minus line 5) - Part II, co	olumn (b), line 30	6	135,750.

48-1291534 Capital Gains and Losses for Tax on Investment Income Part IV (b) How acquired (a) List and describe the kind(s) of property sold (e.g., real estate, (c) Date acquired (d) Date sold - Purchase (mo, day, yr) (mo, day, yr) 2-story brick warehouse, or common stock, 200 shs MLC Co ) D - Donation 1a NONE b C d 6 (f) Depreciation allowed (q) Cost or other basis (h) Gain or (loss) (e) Gross sales price (or allowable) plus expense of sale (e) plus (f) minus (g) a b d Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69 (I) Gains (Col (h) gain minus col (k), but not less than -0-) or (j) Adjusted basis (k) Excess of col (i) Losses (from col (h)) (i) FMV as of 12/31/69 as of 12/31/69 over col (j), if any h d e If gain, also enter in Part I, line 7 2 Capital gain net income or (net capital loss) If (loss), enter -0- in Part I, line 7 3 Net short-term capital gain or (loss) as defined in sections 1222(5) and (6) If gain, also enter in Part I, line 8, column (c) If (loss), enter -0- in Part I, line 8 Part V Qualification Under Section 4940(e) for Reduced Tax on Net Investment Income (For optional use by domestic private foundations subject to the section 4940(a) tax on net investment income) If section 4940(d)(2) applies, leave this part blank Yes X No Was the foundation liable for the section 4942 tax on the distributable amount of any year in the base period? If "Yes," the foundation does not qualify under section 4940(e) Do not complete this part Enter the appropriate amount in each column for each year, see instructions before making any entries (d)
Distribution ratio
(col (b) divided by col. (c)) (a) Base period years (c) Adjusted qualifying distributions Net value of nonchantable-use assets Calendar year (or tax year beginning in) 12,522. 129,624. .096602 2009 5,008.123,004. .040714 2008 5,931. 113,465. .052272 2007 101,086. 7,544. .074630 2006 6,983 87,115. .080158 2005 .344376 2 Total of line 1, column (d) 2 3 Average distribution ratio for the 5-year base period - divide the total on line 2 by 5, or by the number of years .068875 the foundation has been in existence if less than 5 years 3 134,943. 4 Enter the net value of noncharitable-use assets for 2010 from Part X, line 5 4 9,294. 5 Multiply line 4 by line 3 5. 6 Enter 1% of net investment income (1% of Part I, line 27b) 9,299. 7 Add lines 5 and 6 7 12,978. 8 8 Enter qualifying distributions from Part XII, line 4 If line 8 is equal to or greater than line 7, check the box in Part VI, line 1b, and complete that part using a 1% tax rate See the Part VI instructions.

_	SSU-PF (2014) DISTAL FAMILLI FOUNDATION	1 10 10 (1)	10 10( )		291534		Page 4
	t VI Excise Tax Based on Investment Income (Section 4940)		4940(e), or 4	948 - s	ee instr	uctio	ns)
1a	Exempt operating foundations described in section 4940(d)(2), check here 🕨 🔛 and enter		)				
	Date of ruling or determination letter (attach copy of letter if neces						_
þ	Domestic foundations that meet the section 4940(e) requirements in Part V, check here	X and enter 19	% <b>}</b>	1			5.
	of Part I, line 27b						
C	All other domestic foundations enter 2% of line 27b Exempt foreign organizations enter 4% of	of Part I, line 12, co	of (b) J				
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Other	ers enter -0-)	•	2			0.
3	Add lines 1 and 2			3			5.
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only Oth	ers enter -0-)	-	4			0.
5	Tax based on investment income. Subtract line 4 from line 3 If zero or less, enter -0-			5			5.
6	Credits/Payments						
а	2010 estimated tax payments and 2009 overpayment credited to 2010	6a					
b	Exempt foreign organizations - tax withheld at source	6b					
C	Tax paid with application for extension of time to file (Form 8868)	6c					
d	Backup withholding erroneously withheld	6d					
7	Total credits and payments Add lines 6a through 6d			7			0.
8	Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attach	ed		8			
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed		<b>•</b>	9		-	5.
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid		<b>•</b>	10			
	Enter the amount of line 10 to be Credited to 2011 estimated tax		Refunded -	11			
	rt VII-A Statements Regarding Activities		,	<u> </u>			
**********	During the tax year, did the foundation attempt to influence any national, state, or local legislat	tion or did it partic	pate or intervene	ın		Yes	No
	any political campaign?	•			1a		X
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purpose	s (see instructions	for definition)?		1b		X
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and d			d or	- 1		
	distributed by the foundation in connection with the activities.		<b>,</b>				
c	Did the foundation file Form 1120-POL for this year?				10		x
	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the y	ear		•		1	
_	(1) On the foundation $\triangleright$ \$ 0 • (2) On foundation managers I		0.				
۵	Enter the reimbursement (if any) paid by the foundation during the year for political expenditu			•			
·	managers > \$ 0.	TO TAX II II POSSOG SIII	Todilidation				
2	Has the foundation engaged in any activities that have not previously been reported to the IRS	:2			2	Ì	X
-	If "Yes," attach a detailed description of the activities.			•	-		<del> </del>
3	Has the foundation made any changes, not previously reported to the IRS, in its governing ins	trument articles	of incorporation	\r			
J	bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes		or incorporation, c	,,	3		Х
42	Did the foundation have unrelated business gross income of \$1,000 or more during the year?				4a	<del> </del>	X
	If "Yes," has it filed a tax return on Form 990-T for this year?			N/2		<del>                                     </del>	<del></del>
	Was there a liquidation, termination, dissolution, or substantial contraction during the year?		•		5	<del> </del>	X
٠	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 eith	۵r					
·	By language in the governing instrument, or	GI.					
	<ul> <li>By state legislation that effectively amends the governing instrument so that no mandatory</li> </ul>	directions that con	flict with the ctate	Llaw			
		unections that cor	mict with the State	iaw		x	
7	remain in the governing instrument?	-		•	6	X	
′	Did the foundation have at least \$5,000 in assets at any time during the year?				. 7	<u> </u>	ļ
0-	If "Yes," complete Part II, col. (c), and Part XV.	. <b>.</b>					
89	Enter the states to which the foundation reports or with which it is registered (see instructions ${f MI}$		_		—		
					<b>-</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 designate)					8b	v	
_	of each state as required by General Instruction G? If "No," attach explanation					X	
y	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						v
	year 2010 or the taxable year beginning in 2010 (see instructions for Part XIV)? If "Yes," con				9	<b></b>	X
<u>10</u>	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule	listing their names ar	d addresses		10	1 .	X

Yes X No

N/A

4a Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?

3a Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time

Form 4720, to determine if the foundation had excess business holdings in 2010.)

b Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2010?

b If "Yes," did it have excess business holdings in 2010 as a result of (1) any purchase by the foundation or disqualified persons after May 26, 1969, (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest, or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Schedule C,

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Х

3b

during the year?

Part VIII Information About Officers, Directors, Trustees, Foundary Paid Employees, and Contractors (continued)  3 Five highest-paid independent contractors for professional services. If none, enter	r "NONE."	
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE	(4,7,7,6	
	<del></del>	
Total number of others receiving over \$50,000 for professional services		▶ 0
Part IX-A Summary of Direct Charitable Activities		
List the foundation's four largest direct charitable activities during the tax year. Include relevant statis	stical information such as the	Expenses
number of organizations and other beneficiaries served, conferences convened, research papers pro	duced, etc	
1 N/A		
^		
2		
3		
4		
Doubly B. C		
Part IX-B Summary of Program-Related Investments  Describe the two largest program-related investments made by the foundation during the tax year or	lines 1 and 2	Amount
1 N/A	Timos Fund 2	781104111
1 11/11		
2		
		=
All other program-related investments See instructions		
3		
Total Add lines 1 through 3	<b>&gt;</b>	0.
Total. Add lines 1 through 3	<u> </u>	

P	Art X Minimum Investment Return (All domestic foundations in	must co	mplete this part. Forei	gn four	ndations, se	e instructions.)
1	Fair market value of assets not used (or held for use) directly in carrying out charitab	ole, etc.,	ourposes			
a	Average monthly fair market value of securities	.,		ĺ	1a	0.
b	Average of monthly cash balances			.	1b	136,998.
C	Fair market value of all other assets				10	
d	Total (add lines 1a, b, and c)		_		1d	136,998.
-	Reduction claimed for blockage or other factors reported on lines 1a and	•	•			
-	1c (attach detailed explanation)	1e		0.		
2	Acquisition indebtedness applicable to line 1 assets				2	0.
3	Subtract line 2 from line 1d				3	136,998.
4	Cash deemed held for charitable activities Enter 1 1/2% of line 3 (for greater amount	t, see ins	structions)		4	2,055.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and of				5	134,943.
6	Minimum investment return. Enter 5% of line 5				6	6,747.
P	art XI Distributable Amount (see Instructions) (Section 4942(I)(3) a foreign organizations check here and do not complete this part		private operating founda	tions an	d certain	
1	Minimum investment return from Part X, line 6			·	1	6,747.
2a	Tax on investment income for 2010 from Part VI, line 5	2a		5.		
b	Income tax for 2010 (This does not include the tax from Part VI)	2b				
C	Add lines 2a and 2b				20	5.
3	Distributable amount before adjustments Subtract line 2c from line 1	_			3	6,742.
4	Recoveries of amounts treated as qualifying distributions				4	0.
5	Add lines 3 and 4				5	6,742.
6	Deduction from distributable amount (see instructions)				6	0.
7	Distributable amount as adjusted Subtract line 6 from line 5. Enter here and on Part	t XIII, lin	e 1		7	6,742.
P	art XII Qualifying Distributions (see instructions)					
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., pur	rposes			4.	12 978
a	Expenses, contributions, gifts, etc total from Part I, column (d), line 26				1a	12,978.
	Program-related investments - total from Part IX-B	abla ata	BUFB 6000		1b 2	
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charita	able, etc	, purposes		-	
3	Amounts set aside for specific charitable projects that satisfy the				3a	
a	, , ,				3b	
	Cash distribution test (attach the required schedule)	and Dark	VIII. line A			12,978.
4	Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, a		AIII, III38 4		4	12,510.
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net inve	esunent			_	5
	Income Enter 1% of Part I, line 27b		•		6	12,973.
6	Adjusted qualifying distributions. Subtract line 5 from line 4	whoo co		dation		
	Note. The amount on line 6 will be used in Part V, column (b), in subsequent years v 4940(e) reduction of tax in those years	witeri ca	iculating whether the four	uativii (	juannes for tr	IS SECTION
	4940(e) reduction of tax in those years					

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# 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,			,	
line 7				6,742.
2 Undistributed income, if any, as of the end of 2010				
a Enter amount for 2009 only			0.	
h Total for prior years				
		0.		
3 Excess distributions carryover, if any, to 2010	11141111 1-			
a From 2005 2,661.				
b From 2006 2,560.				
c From 2007 361.				
d From 2008				
e From 2009 6,057.				
f Total of lines 3a through e	11,639.			
4 Qualifying distributions for 2010 from				
Part XII, line 4 ► \$ 12,978.				
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				6,742.
e Remaining amount distributed out of corpus	6,236.			
5 Excess distributions carryover applied to 2010 (If an amount appears in column (d), the same amount must be shown in column (a) )	0.			0.
6 Enter the net total of each column as indicated below:				
2 Corpus Add lines 3f, 4c, and 4e Subtract line 5	17,875.			
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	2,661.		·····	
9 Excess distributions carryover to 2011.				
Subtract lines 7 and 8 from line 6a	15,214.			
10 Analysis of line 9				
a Excess from 2006 2,560.				
<b>b</b> Excess from 2007 361.				
E Excess from 2008				
d Excess from 2009 6,057.				
e Excess from 2010 6,236.				5 000 DE (0040)

d Any restrictions or limitations on awards, such as by geographical areas, charitable fields, kinds of institutions, or other factors

3 Grants and Contributions Paid During the Year or Approved for Future Payment						
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of	Purpose of grant or contribution	Amount		
Name and address (home or business)	or substantial contributor	recipient				
a Paid during the year	or substantial contributor	recipient				
SEE STATEMENT 5				7 425		
Total  b Approved for future payment	<u> </u>	T	<b>▶</b> 3a	7,435.		
NONE						
Total			<b>▶</b> 3b	0.		

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

Enter gross amounts unless otherwise indicated	Unrelated	d business income	Exclu	ded by section 512, 513, or 514	(e)
Litter gross amounts unless otherwise mulcated	(a)	(b)	(C) Exclu-	(d)	Related or exempt
1 Program service revenue	Business code	Amount	code	Amount	function income
	7000	· · · · ·	1		
a			1		
b	<del>  </del>		1		
<u> </u>	·				<u></u>
d	<del></del>		+		
e			<del></del>		<u> </u>
f					
g Fees and contracts from government agencies		<u> </u>			
2 Membership dues and assessments					·
3 Interest on savings and temporary cash			١		
investments .			14	613.	
4 Dividends and interest from securities					
5 Net rental income or (loss) from real estate			1		
a Debt-financed property			<u> </u>		
b Not debt-financed property					
6 Net rental income or (loss) from personal					
property					
7 Other investment income					
8 Gain or (loss) from sales of assets other					
than inventory	1 1				
9 Net income or (loss) from special events					
10 Gross profit or (loss) from sales of inventory	-		-		
11 Other revenue			<u> </u>		
	1				
a	-		+-		
b			<del> </del>		
<u> </u>			+		
<u> </u>	-				
e	1	0.	+	613.	0.
12 Subtotal Add columns (b), (d), and (e)	<u> </u>	<u> </u>	<u> </u>	· . · · · · · · · · · · · · · · · · · ·	610
13 Total. Add line 12, columns (b), (d), and (e)	•		•	. 13	013.
(See worksheet in line 13 instructions to verify calculations )					<del></del>
Part XVI-B Relationship of Activities to	o the Acco	emplishment of E	xemp	t Purposes	
			A A I	h	
Line No. Explain below how each activity for which income the foundation's exempt purposes (other than			A CONTIII	buted importantly to the accor	nplishment of
the foundation's exempt purposes (other than	by providing ful	ids for such purposes)		<del></del>	
		<del> </del>			
	-				
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	<del>_</del>			<del></del>	
				**	
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	<u>-                                    </u>				<u>-</u>

BISHAI FAMILY FOUNDATION 48-1291534 Form 990-PF (2010) Page 13 Part XVII Information Regarding Transfers To and Transactions and Relationships With Noncharitable **Exempt Organizations** Yes No Did the organization directly or indirectly engage in any of the following with any other organization described in section 501(c) of the Code (other than section 501(c)(3) organizations) or in section 527, relating to political organizations? a Transfers from the reporting foundation to a noncharitable exempt organization of Х (1) Cash 1a(1) X (2) Other assets 1a(2) b Other transactions X (1) Sales of assets to a noncharitable exempt organization 1b(1) X 1b(2) (2) Purchases of assets from a noncharitable exempt organization X (3) Rental of facilities, equipment, or other assets 1b(3) X 1b(4) (4) Reimbursement arrangements X (5) Loans or loan guarantees 1b(5)  $\overline{\mathbf{x}}$ (6) Performance of services or membership or fundraising solicitations 1b(6) X c Sharing of facilities, equipment, mailing lists, other assets, or paid employees d If the answer to any of the above is "Yes," complete the following schedule Column (b) should always show the fair market value of the goods, other assets, or services given by the reporting foundation. If the foundation received less than fair market value in any transaction or sharing arrangement, show in column (d) the value of the goods, other assets, or services received (b) Amount involved (c) Name of noncharitable exempt organization (a) Line no (d) Description of transfers, transactions, and sharing arrangements N/A 2a Is the foundation directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described X No in section 501(c) of the Code (other than section 501(c)(3)) or in section 527? Yes b If "Yes," complete the following schedule (b) Type of organization (c) Description of relationship (a) Name of organization N/A Under penalties of penury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, which premarer has any knowledge and complete. Declaration of preparer (other than taxpayer or fiduciary) is based on all information of A Sign Here PRESIDENT/DIRECTOR Signature of officer or trustee Date Title Print/Type preparer's name Check Preparer's signature Date self- employed P0018004

PAMELA MAY

STERLING HEIGHTS, MI 48313

08/11/11

Firm's EIN

Phone no

Form **990-PF** (2010)

586-254-1040

Paid

Preparer

**Use Only** 

PAMELA MAY

Firm's name ► UHY ADVISORS MI, INC.

Firm's address ► 12900 HALL ROAD, STE. 500

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

Department of the Treasury Internal Revenue Service

### **Schedule of Contributors**

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

OMB No 1545-0047

2010

\$

Name of the organization **Employer identification number** BISHAI FAMILY FOUNDATION 48-1291534 Organization type (check one): Filers of: Section: 501(c)( Form 990 or 990-EZ ) (enter number) organization 4947(a)(1) nonexempt charitable trust not treated as a private foundation 527 political organization 501(c)(3) exempt private foundation Form 990-PF 4947(a)(1) nonexempt charitable trust treated as a private foundation 501(c)(3) taxable private foundation Check if your organization is covered by the General Rule or a Special Rule. Note. Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions. **General Rule** [X] For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II. **Special Rules** For a section 501(c)(3) organization filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), and received from any one contributor, during the year, a contribution of the greater of (1) \$5,000 or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h or (ii) Form 990-EZ, line 1. Complete Parts I and II. For a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, aggregate contributions of more than \$1,000 for use exclusively for religious, charitable, scientific, literary, or educational purposes, or the prevention of cruelty to children or animals. Complete Parts I, II, and III. ☐ For a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions for use exclusively for religious, charitable, etc., purposes, but these contributions did not aggregate to more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc.,

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).

purpose. Do not complete any of the parts unless the General Rule applies to this organization because it received nonexclusively

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

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)

	4	-	
age	⊥ of	1	of Part I

Schedule B	(Form 990	990-F7	or 990-PF)	(2010)
COLICE GIC C	(1 01111 330)	330-12	0. 330 1 . ,	40.00

Name of organization

Employer identification number

# BISHAI FAMILY FOUNDATION

48-1291534

Part I	Contributors (see instructions)		
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
1	YOUSEF & EILEEN BISHAI  105 LAKESHORE DRIVE  GROSSE POINTE FARMS, MI 48236	\$\$.	Person X Payroll
(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 Oncash 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

Page of of Employer identification number

# BISHAI FAMILY FOUNDATION

48-1291534

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
		\$	
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		- - - \$	
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		- - - - - - - - - - - - - -	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		-   - - - -   \$	
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		- - - - \$	
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		- - - - - - \$	

FORM 990-PF INTEREST ON SAVI	NGS AND TEM	PORARY CASH II	NVESTMENTS	STATEMENT 1
SOURCE				AMOUNT
INTEREST ON SAVINGS			-	613.
TOTAL TO FORM 990-PF, PART I,	LINE 3, CO	LUMN A	=	613.
FORM 990-PF	ACCOUNTI	NG FEES		STATEMENT 2
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	
ACCOUNTING FEES	1,600.	0.		1,600.
TO FORM 990-PF, PG 1, LN 16B	1,600.	0.		1,600.
FORM 990-PF	OTHER E	XPENSES		STATEMENT 3
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOM	
CLERICAL POSTAGE & SUPPLIES BANK CHARGES OFFICE EXENSES TRAVEL, CONFRENCES, MEETINGS FEES & DUES COMMISSIONS MISCELLANEOUS	600. 215. 130. 300. 2,105. 105. 460. 158.	0. 130. 0. 0. 0.		600. 215. 0. 300. 2,105. 105. 460. 158.
TO FORM 990-PF, PG 1, LN 23	4,073.	130.		3,943.

FORM 990-PF PART XV - LINE 1A STATEMENT 4
LIST OF FOUNDATION MANAGERS

NAME OF MANAGER

YOUSEF B. BISHAI, M.D. TURID EILEEN BISHAI

	AND CONTRIBUTIONS DURING THE YEAR	STATI	EMENT 5
RECIPIENT NAME AND ADDRESS	RECIPIENT RELATIONSHIP AND PURPOSE OF GRANT	RECIPIENT STATUS	AMOUNT
AMERICAN RED CROSS 2025 E STREET NW WASHINGTON, DC 20006	NO RELATIONSHIP GENERAL SUPPORT	501(C)(3)	100.
GROSSE POINTE HISTORICAL SOCIETY 381 KERCHEVAL GROSSE POINTE FARMS, MI 48236	NO RELATIONSHIP GENERAL SUPPORT	501(C)(3)	440.
GROSSE POINTE WAR MEMORIAL 32 LAKESHORE GROSSE POINTE FARMS, MI 48236	NO RELATIONSHIP GENERAL SUPPORT	501(C)(3)	100.
NORSK HOSTFEST ASSOCIATION PO BOX 1347 MINOT, ND 58702	NO RELATIONSHIP GENERAL SUPPORT	501(C)(3)	3,250.
SALVATION ARMY 16130 NORTHLAND SOUTHFIELD, MI 48075	NO RELATIONSHIP GENERAL SUPPORT	501(C)(3)	100.
WARREN SEVENTH-DAY ADVENTIST CHURCH 12100 E 13 MILE WARREN, MI 48093	NO RELATIONSHIP GENERAL SUPPORT	501(C)(3)	2,500.

BISHAI FAMILY FOUNDATION			48-1291534
BREAST CANCER 3 DAY C/O JOYCE MILLER 205 N. MICHIGAN AVE., STE. 2630 CHICAGO, IL 60601	NO RELATIONSHIP GENERAL SUPPORT	501(C)(3)	50.
HAZEL PARK EDUCATIONAL FOUNDATION 1620 E. ELZA HAZEL PARK, MI 48030	NO RELATIONSHIP GENERAL SUPPORT	501(C)(3)	70.
THE COMPASS FOUNDATION, INC. 1202 RIVERDALE RD BALTIMORE, MD 21204		501(C)(3)	200.
GLOBAL VILLAGE MINISTRIES 8783 BLUFFVIEW BERRIEN SPRINGS, MI 49103	NO RELATIONSHIP GENERAL SUPPORT	501(C)(3)	500.
PARALYZED VETS OF AMERICA 7 MILLBROOK RD WILTON, NH 03086		501(C)(3)	50.
AMERICAN LUNG ASSOCIATION P.O. BOX 7000 ALBERT LEA, MN 56007	NO RELATIONSHIP GENERAL SUPPORT	501(C)(3)	50.
MACOMB COUNTY FOR THE PERFORMING ARTS FOUNDATION 14500 E 12 MILE WARREN, MI 48088	NO RELATIONSHIP GENERAL SUPPORT	501(C)(3)	25.
TOTAL TO FORM 990-PF, PART XV, LI	NE 3A		7,435.

SCHEDULE E		ОТН	ER EXPENS	ES 	ST.	ATEMENT	1
SAN JUAN BASIN	ROYALTY TR	UST 75-6279	9898 - FOR	r WORTH, TX	76116		
DESCRIPTION						AMOUNT	
ADMINISTRATION	EXPENSES						9.
TOTAL TO SCHED	ULE E, PAGE	1, LINE 18	3				9.
SCHEDULE E	INCOME OR	(LOSS) FROM	1 PARTNERS	HIPS AND S C	CORPS ST.	ATEMENT	2
NAME							
ANY NOT EMPLOYER AT ID NO. RIS	X	PASSIVE LOSS	PASSIVE INCOME	NONPASSIVE LOSS	SEC. 179 DEDUCTION		
CEDAR FAIR, L. 34-1560655	P. P	0.					
CAPTIAL HOUSIN 52-1265285			170.				
CHEVY CHASE AS 04-2929305	P	.P.	1,429.			•	
UNITED DOMINIO 54-1776887	P	38.					
Y.B. BISHAI MD 38-1880333 X	S *			3,292.			
AT RISK CARRYO 38-1880333 X JOLEEN ENTERPR	s *			11,302.			
38-2916190 X AT RISK CARRYO	S	1,769.		20,084.			
38-2916190 X YOUSEF AND TUR 38-2456584 YOUSEF AND TUR	S ID BISHAI F P	3,711.		3,033.			
38-2456584 ATLAS RESOURCE 27-0213766 CONSOLIDATED C	P APITAL INST		575 <b>.</b>				
PROPERTIES SER 94-2744492	IES A P		226.				
TOTALS TO SCH.	E, LN. 29	9,229.	2,400.	37,711.			

If you a	8 (Rev. 1-2011)					
-	re filing for an Additional (Not Automatic) 3-Month Ext	tension, c	complete only Part II and check this bo	x		Page  ► X
tote. On	y complete Part II if you have already been granted an a				3868.	<del></del>
	re filing for an Automatic 3-Month Extension, complet					
Part II	Additional (Not Automatic) 3-Month E			oples r	eeded).	
	Name of exempt organization			T		fication number
Гуре or	, ,				-	
orint	BISHAI FAMILY FOUNDATION			4	8-1291	.534
File by the extended	Number, street, and room or suite no. If a P.O. box, se	ee instruc	tions.			
lue date for	105 LAKE SHORE RD.					
iling your eturn See	City, town or post office, state, and ZIP code. For a fo	reign add	ress, see instructions.			
nstructions	GROSSE POINTE FARMS, MI 482	236				
Enter the	Return code for the return that this application is for (file	a separa	te application for each return)			0 4
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Applicati	on	Return	Application			Return
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Form 990	· · · · · · · · · · · · · · · · · · ·	02	Form 1041-A		•••••	08
Form 990		03	Form 4720			09
orm 990		04	Form 5227			10
	T (sec. 401(a) or 408(a) trust)	05	Form 6069			11
	T (trust other than above)	06	Form 8870			12
	o not complete Part II if you were not already granted			slv file	d Form 886	
	indication in the second secon				<u> </u>	
	YOUSEF BISHAI					
	YOUSEF BISHAI	ROAD		ıs.	MT 482	
■ The bo	ooks are in the care of   105 LAKE SHORE	ROAD	- GROSSE POINT FARM	ıs,	MI 482	
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