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Form 990-PF

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

OMB No 1545-0052

595

Form 990-PF

2011

Department of the Treasury Note. The foundation may be able to use a copy of this return to satisfy state reporting requirements Internal Revenue Service For calendar year 2011 or tax year beginning 10/01/11, and ending 09/30/12Employer Identification number Name of foundation Pardee Cancer Treatment Fund of 38-3532130 Gratiot County Number and street (or P O box number if mail is not delivered to street address) Telephone number (see instructions) 315 E Warwick Drive, Suite C 989-463-9319 City or town, state, and ZIP code If exemption application is pending, check here MΙ 48801 Alma G Check all that apply. Initial return of a former public charity Initial return 1 Foreign organizations, check here Amended return Final return 2. Foreign organizations meeting the 85% test, check here and attach computation Address change Name change Check type of organization: X Section 501(c)(3) exempt private foundation If private foundation status was terminated under section 507(b)(1)(A), check here Section 4947(a)(1) nonexempt charitable trust ____ Other taxable private foundation Cash | Accrual I Fair market value of all assets at J Accounting method: If the foundation is in a 60-month termination under section 507(b)(1)(B), check here end of year (from Part II, col. (c), Other (specify) Modified cash 0 (Part I, column (d) must be on cash basis) line 16) ▶ \$ (d) Disbursements Part I Analysis of Revenue and Expenses (The total of (a) Revenue and (b) Net investment (c) Adjusted net for chantable amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a) (see instructions)) expenses per ıncome ıncome purposes books (cash basis only) 202,523 Contributions, gifts, grants, etc., received (attach schedule) Check ▶ If the foundation is **not** required to attach Sch B 2 595 595 595 Interest on savings and temporary cash investments 3 SCAPREVERue\00 2 Dividends and interest from securities 5a Gross rents b Net rental income or (loss) Net gain or (loss) from sale of assets not on line 10 Gross sales price for all assets on line 6a Λ Capital gain net income (from Part IV, line 2) Net short-term capital gain Income modifications 10a Gross sales less returns & allowances b Less. Cost of goods sold Gross profit or (loss) (attach schedule) C 11 Other income (attach schedule) 595 595 12 Total. Add lines 1 through 11 203,118 Compensation of officers, directors, trustees, etc. 13 Expenses 14 Other employee salaries and wages 15 Pension plans, employee benefits Legal fees (attach schedule) 16a Stmt 1 20 Accounting fees (attach schedule) Operating and Administrative Other professional fees (attach schedule) 17 Interest S 18 Taxes (attach schedule) (see instructions) Ö 40 Stmt 2 19 Depreciation (attach schedule) and depletion 公 20 Occupancy 21 Travel, conferences, and meetings OODEN 232 22 Printing and publications Stmt 3 25,988 23 Other expenses (att. sch.) 24 Total operating and administrative expenses. Add lines 13 through 23 26,644 0 202,575 202 25 Contributions, gifts, grants paid 229,219 202 Total expenses and disbursements. Add lines 24 and 25 26 Subtract line 26 from line 12: 27 -26,101Excess of revenue over expenses and disbursements 595 Net investment income (if negative, enter -0-)

Adjusted net income (if negative, enter -0-)

		-PF(2011) Pardee Cancer Treatment Fu	38-353213 Beginning of year	Pag End of year		
	Part II	Balance Sheets Attached schedules and amounts in the description should be for end-of-year amounts only (See inst		(a) Book Value	(b) Book Value	(c) Fair Market Value
٦	1	Cash—non-interest-bearing		194,389	168,437	
	2	Savings and temporary cash investments		131/303	100,100	
	3	Accounts receivable				
	·	Less: allowance for doubtful accounts ▶				Ī
	4	Pledges receivable				
	•	Less: allowance for doubtful accounts				Ī
	5	Grants receivable				
	6	Receivables due from officers, directors, trustees, and other				
	·	disqualified persons (attach schedule) (see				
		instructions)				
	7	Other notes and loans receivable (att. schedule)			······································	
	•	Less: allowance for doubtful accounts	0			Ť
	8	Inventories for sale or use	O			
Assets	9	Prepaid expenses and deferred charges	'			
155	10a	Investments—U.S. and state government obligations (attach schedule)				
-	b	Investments—corporate stock (attach schedule)				
		Investments—corporate bonds (attach schedule)				
	С 11	Investments—land, buildings, and equipment, basis				
	""	Less accumulated depreciation (attach sch.)				†
	12	·				
	13	Investments—mortgage loans Investments—other (attach schedule)				
	14	Land, buildings, and equipment basis	5,315			
	14	Less accumulated depreciation (attach sch) Stmt 4	2,662	2,802	2,653	1
	15	Other assets (describe		2,002	2,000	<u> </u>
	16	Total assets (to be completed by all filers—see the)			· · · · · · · · · · · · · · · · · · ·
	10	Instructions Also, see page 1, Item I)		197,191	171,090	
_	17	Accounts payable and accrued expenses		137/131	1717090	,
	18	Grants payable			· · · · · · · · · · · · · · · · · · ·	1
Š	19	Deferred revenue				1
Liabilities	20	Loans from officers, directors, trustees, and other disqualified pers	sons		 -	1
abi	21	Mortgages and other notes payable (attach schedule)	30110			1
Ë	22	Other habilities (describe)			1
	23	Total liabilities (add lines 17 through 22)	,	0	(5 1
_		Foundations that follow SFAS 117, check here	► X		· · · · · · · · · · · · · · · · · · ·	1
Ś		and complete lines 24 through 26 and lines 30 and 31.				
ë	24	Unrestricted		197,191	171,090)[
<u>a</u>	25	Temporarily restricted			-:	1
Ba	26	Permanently restricted			<u> </u>	1
2		Foundations that do not follow SFAS 117, check here	▶ 🗂		· · · · · · · · · · · · · · · · · · ·	1
교		and complete lines 27 through 31.				
ŏ	27	Capital stock, trust principal, or current funds				
ets	28	Paid-in or capital surplus, or land, bldg., and equipment fund			·	1
Net Assets or Fund Balances	29	Retained earnings, accumulated income, endowment, or other fur	nds			1
Ť	30	Total net assets or fund balances (see instructions)		197,191	171,090	<u></u>
ž	31	Total liabilities and net assets/fund balances (see		=======================================	2.2,050	1
		instructions)		197,191	171,090	
-	Part I		Balances	<u> </u>	_,_,_,	T
_		net assets or fund balances at beginning of year—Part II, column (agree with		
		of-year figure reported on prior year's return)	.=,, 00 (· · · · · · · · · · · · · · · · · · ·	1	197,191
2		amount from Part I, line 27a			2	-26,101

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171,090

171,090

3

4

<u>5</u>

3 Other increases not included in line 2 (itemize) ▶

6 Total net assets or fund balances at end of year (line 4 minus line 5)—Part II, column (b), line 30

5 Decreases not included in line 2 (itemize) ▶

4 Add lines 1, 2, and 3

Form 990-PF (2011) Pardee C Part IV Capital Gains and	ancer Treatment Fund Losses for Tax on Investme		38-3532130)	Page 3
(a) List and describ	be the kind(s) of property sold (e.g., real estate, whouse, or common stock, 200 shs MLC Co.)		(b) How acquired P.—Purchase D.—Donation	(c) Date acquired (mo , day, yr)	(d) Date sold (mo , day, yr)
1a N/A			-		
b					
_c					
_d					
8			<u> </u>		
(e) Gross sales pnce	(f) Depreciation allowed (or allowable)	1 '•'	r other basis inse of sale		n or (loss) (f) minus (g)
a					
b				<u> </u>	
С					
d			· · · · · · · · · · · · · · · · · · ·	ļ	
6	<u> </u>				
Complete only for assets showing g	ain in column (h) and owned by the four	ndation on 12/31/69			l (h) gain minus
(i) F M V as of 12/31/69	(j) Adjusted basis as of 12/31/69		ss of col (i) (j), if any	1	t less than -0-) or from col (h))
а		·	<u>.</u>		
b				ļ	
С					
d	 				
е			 -	 	
2 Capital gain net income or (net capi	tal loss) If gain, also enter in I If (loss), enter -0- in I	•		2	
	as defined in sections 1222(5) and (6): olumn (c) (see instructions). If (loss), ent	_			
Part I, line 8				3	
Part V Qualification Und	ler Section 4940(e) for Reduc	<u>ed Tax on Net I</u>	nvestment Inco	me	
(For optional use by domestic private fo	undations subject to the section 4940(a) tax on net investme	ent income)		
If section 4940(d)(2) applies, leave this	part blank.				N/A
Was the foundation liable for the section		• •	e period?		Yes No
If "Yes," the foundation does not qualify	 -				
	ch column for each year, see the instruc	tions before making	any entries		
(a) Base penod years	(b)		(c)	. 0:	(d) stribution ratio
Calendar year (or tax year beginning in)	Adjusted qualifying distributions	Net valu	e of nonchantable-use asse	col (b)	divided by col (c))
2010					
2009					
2008					
2007					·-·
2006		<u>L</u>			
O Tatal of los 4 and and (4)					
2 Total of line 1, column (d)				2	
	rear base period—divide the total on line	2 by 5, or by the			
number of years the foundation has	been in existence if less than 5 years			3	
4 Enter the net value of nonchantable	-use assets for 2011 from Part X, line 5			4	·
5 Multiply line 4 by line 3				5	
6 Enter 1% of net investment income	(1% of Part I, line 27b)			6	
7 Add lines 5 and 6				7	
• • • • • • • • • • • • • • • • • • •					
8 Enter qualifying distributions from P		and normalate 45 -4	A., = 40/ t	8 See the	<u> </u>
Part VI instructions.	ne 7, check the box in Part VI, line 1b, a	ino complete that pai	rt using a 1% tax rate	e. see vie	
					000 DF

Form	990-PF(2011) Pardee Cancer Treatment Fund of 38-3532130			Pa	age 4
	Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948—see instructions)				
1a	Exempt operating foundations described in section 4940(d)(2), check here ▶ X and enter "N/A" on line 1.				
	Date of ruling or determination letter: 11/03/05 (attach copy of letter if necessary—see instructions)	1			
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check N/A	1			
	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).				
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			
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			0
6	Credits/Payments.				
а	2011 estimated tax payments and 2010 overpayment credited to 2011 6a 6a				
b	Exempt foreign organizations—tax withheld at source 6b				
С	Tax paid with application for extension of time to file (Form 8868)				
d	Backup withholding erroneously withheld 6d	I			
7	Total credits and payments. Add lines 6a through 6d	7			
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			
11	Enter the amount of line 10 to be. Credited to 2012 estimated tax ▶ Refunded ▶	11			
Pa	rt 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		<u>X</u>
Ь	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		X
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials				
	published or distributed by the foundation in connection with the activities.				
C	Did the foundation file Form 1120-POL for this year?		1c		<u>X</u>
d	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year:				
	(1) On the foundation. ▶ \$ (2) On foundation managers. ▶ \$	_			
θ	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?		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				
	incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes		3		X
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?		4a		X
þ	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	ļ	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				
	By state legislation that effectively amends the governing instrument so that no mandatory directions that				
	conflict with the state law remain in the governing instrument?		6	X	
7	Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col. (c), and Part XV		7	X	
8a	Enter the states to which the foundation reports or with which it is registered (see 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				
-	(or designate) of each state as required by General Instruction G? If "No," attach explanation		8b	Х	
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 2011 or the taxable year beginning in 2011 (see instructions for Part XIV)? If "Yes,"				
	complete Part XIV		9	Х	l _
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their				
	names and addresses		10	l	X_
			Form 9	90-P	(2011)

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P	art VII-B Statements Regarding Activities for Which Form 4	720 May Be Re	equired (conti	nued)				
5a								
	(1) Carry on propaganda, or otherwise attempt to influence legislation (section 494	5(e))?		Yes	X No		I	
	(2) Influence the outcome of any specific public election (see section 4955); or to c	arry on,				- 1	1	
	directly or indirectly, any voter registration drive?			Yes	X No		1	
	(3) Provide a grant to an individual for travel, study, or other similar purposes?			Yes	X No		I	
	(4) Provide a grant to an organization other than a chantable, etc., organization des	scribed in					I	
	section 509(a)(1), (2), or (3), or section 4940(d)(2)? (see instructions)			Yes	X No		ŧ	
	(5) Provide for any purpose other than religious, chantable, scientific, literary, or ed	lucational					I	
	purposes, or for the prevention of cruelty to children or animals?			Yes	X No		I	
b	If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify under to	he exceptions desc	inbed in				1	
	Regulations section 53.4945 or in a current notice regarding disaster assistance (se	ee instructions)?			N/A	5b		
	Organizations relying on a current notice regarding disaster assistance check here				▶ 🔲		I	
C	If the answer is "Yes" to question 5a(4), does the foundation claim exemption from	the tax					1	
	because it maintained expenditure responsibility for the grant?		N/A 🗌	Yes	No No		1	
	If "Yes," attach the statement required by Regulations section 53 4945-5(d).		_				1	
6a	Did the foundation, during the year, receive any funds, directly or indirectly, to pay p	remiums					1	
	on a personal benefit contract?			Yes	X No		1	
b	Did the foundation, during the year, pay premiums, directly or indirectly, on a person	nal 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 shelter	er transaction?		Yes	X No		1	
b	If Yes, did the foundation receive any proceeds or have any net income attributable	to the transaction?) 		N/A	7b		
P	art VIII Information About Officers, Directors, Trustees, Fou	ındation Mana	gers, Highly	Paid I	Employee	es,		
	and Contractors							
1	List all officers, directors, trustees, foundation managers and their compensat	tion (see instructi	ons).					
		(b) Title, and average	(c) Compensation		ontributions to	(a) Eve	pense ac	count
	(a) Name and address	hours per week devoted to position	(if not paid, enter -0-)	employee benefit plans and deferred			r allowan	
		devoted to position		- 00	mpensation			
Se	ee Statement 5							
								
						İ		
				<u> </u>		 		
]						
				-		<u> </u>		
		ļ						
			<u></u>			L		
2	Compensation of five highest-paid employees (other than those included on	line 1—see instru	uctions). If none,	, enter				
	"NONE."	T	I	1		T		
		(b) Title, and average	() Composition		ontributions to ployee benefit	(e) Ex	pense ac	count,
	(a) Name and address of each employee paid more than \$50,000	hours per week devoted to position	(c) Compensation		s and deferred	othe	er allowar	nces
		·		 	mpensation			
N	DNE	ŀ						
		-		 		-		
		}		1				
		 		+		\vdash		
		}	1					
				╁		\vdash		
		}				1		
		 		+		+		
		}						
Tota	Il number of other employees paid over \$50,000		l	<u> </u>		_		
- 54	in named of other employees paid over 400,000	· -				om 90	90-PF	
						A		(-0.1)

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Part VIII	Information About Officers, Directors, Trustees, Foundation	dation Managers, Highly Paid E	mployees,
	and Contractors (continued)		
3 Five highe	st-paid independent contractors for professional services (see instru	uctions). If none, enter "NONE."	
_	(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE			
			
			
Total number of o	others receiving over \$50,000 for professional services		•
Part IX-A	Summary of Direct Charitable Activities		
	four largest direct chantable activities during the tax year. Include relevant statistical information su her beneficianes served, conferences convened, research papers produced, etc	ch as the number of	Expenses
1 Assis	ts individuals with cancer related e	expenses	
		-	
			202,576
2			
			<u> </u>
3			
4			
•			
Part IX-B	Summary of Program-Related Investments (see instr	uctions)	
	gest program-related investments made by the foundation during the tax year on lines 1 and 2		Amount
1 N/A			
2			
All other program-rel	lated investments. See instructions		
3			
Total. Add lines 1	1 through 3	_	· [

Form	990-PF(2011) Pardee Cancer Treatment Fund of 38-3532130		Page 8
Pa	Minimum Investment Return (All domestic foundations must complete this part. Foreign	foun	dations,
	see instructions.)		
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc.,		
	purposes.		
а	Average monthly fair market value of securities	1a	0
b	Average of monthly cash balances	1b	222,388
C	Fair market value of all other assets (see instructions)	1c	0
d	Total (add lines 1a, b, and c)	1d	222,388
0	Reduction claimed for blockage or other factors reported on lines 1a and		
	1c (attach detailed explanation)		
2	Acquisition indebtedness applicable to line 1 assets	2_	0
3	Subtract line 2 from line 1d	3	222,388
4	Cash deemed held for chantable activities. Enter 1½% of line 3 (for greater amount, see		
	instructions)	4	3 , 336
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	219,052
6	Minimum investment return. Enter 5% of line 5	6	10,953
Pe	Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating		
	foundations and certain foreign organizations check here X and do not complete this part.)		
1	Minimum investment return from Part X, line 6	1	
2a	Tax on investment income for 2011 from Part VI, line 5		
b	Income tax for 2011. (This does not include the tax from Part VI.)		
С	Add lines 2a and 2b	2c	
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	
4	Recovenes of amounts treated as qualifying distributions	4	
5	Add lines 3 and 4	5	
6	Deduction from distributable amount (see instructions)	6	
7	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII,		
	line 1	7	
P .	A \$64		
Pē	Qualifying Distributions (see instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:		
а	Expenses, contributions, gifts, etc —total from Part I, column (d), line 26	1a	202,575
b	Program-related investments—total from Part IX-B	1b	
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc.,		
	purposes	2	_
3	Amounts set aside for specific charitable projects that satisfy the:		
а	Suitability test (prior IRS approval required)	3a	L
b	Cash distribution test (attach the required schedule)	3b	
4	Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4	4	202,575
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income.		
	Enter 1% of Part I, line 27b (see instructions)	5	0
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	202,575
	Note. The amount on line 6 will be used in Part V. column (h), in subsequent years when calculating whether the foundation	<u> </u>	

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

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Analysis of line 9: Excess from 2007 Excess from 2008 Excess from 2009 Excess from 2010 Excess from 2011

The form in which applications should be submitted and information and materials they should include:

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

Any submission deadlines:

factors.

DAA

Supplementary Information (continued)

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	Foundation status of recipient	Purpose of grant or contribution	Amount		
Name and address (home or business)	or substantial contributor	Todiploint				
<pre>a Paid during the year Gratiot Comm. Hosp Various None MI 48801 MidMi Med Ctr - Gratiot</pre>	N/A	Medical	Expense	89,126		
Various None MI 48801	N/A	Medical	Expense	15,795		
Other hospitals Various None MI 48801	N/A	Medical	Expense	14,851		
Doctors Various None MI 48801	N/A	Medical	Expenses	38,296		
Pharmacies Various None MI 48801	N/A	Medical	Expense	7,722		
Patient reimbursements Various None MI 48801	N/A	Medical	Expense	13,827		
Patient Insurance Premium Various None MI 48801	N/A	Medica]	Expense	20,143		
Other medical expenses Various None MI 48801	N/A	Medical	Expense	2,815		
				202 575		
Total	T	<u>, </u>	<u>▶ 3a</u>	202,575		
b Approved for future payment ${\rm N/A}$						
Total			▶ 3b			

38-3532130

Part)	XVI-A Analysis of Income-Producing Act	vities				
*****	oss amounts unless otherwise indicated	1	d business income	Exclude	d by section 512, 513, or 514	/->
J		(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	(e) Related or exempt function income (See instructions)
1 Prog	ram service revenue:					(See insudctions)
				-		
				 		· -
				 		
				ļ		
			<u> </u>	-		
f				-		
-	Fees and contracts from government agencies		 	 		
	nbership dues and assessments			14	595	
	rest on savings and temporary cash investments	<u> </u>		14	293	
	dends and interest from securities			<u> </u>		
	rental income or (loss) from real estate:	-		-		
	Debt-financed property			 		
	Not debt-financed property			+ -	 	
	rental income or (loss) from personal property	 		 		
	er investment income			+		
	n or (loss) from sales of assets other than inventory income or (loss) from special events					
	ss profit or (loss) from special events			 		
	er revenue: a			1		
		 		 		
		·				
				1		
12 Subt	total. Add columns (b), (d), and (e)		(595	0
	al. Add line 12, columns (b), (d), and (e)		1		13	595
	rksheet in line 13 instructions to verify calculations.)					
See wor	rksheet in line 13 instructions to verify calculations.) XVI-B Relationship of Activities to the Acti	complishm	ent of Exempt P	urpose	s	
See wor Part : Line ▼	No. Explain below how each activity for which income is accomplishment of the foundation's exempt purpose.	s reported in col	umn (e) of Part XVI-A	contribut	ed importantly to the	3.)
See wor Part	No. Explain below how each activity for which income is accomplishment of the foundation's exempt purpose.	s reported in col	umn (e) of Part XVI-A	contribut	ed importantly to the	s.)
See wor Part : Line ▼	No. Explain below how each activity for which income is accomplishment of the foundation's exempt purpose.	s reported in col	umn (e) of Part XVI-A	contribut	ed importantly to the	5.)
See wor Part : Line ▼	No. Explain below how each activity for which income is accomplishment of the foundation's exempt purpose.	s reported in col	umn (e) of Part XVI-A	contribut	ed importantly to the	s.)
See wor Part : Line ▼	No. Explain below how each activity for which income is accomplishment of the foundation's exempt purpose.	s reported in col	umn (e) of Part XVI-A	contribut	ed importantly to the	5.)
See wor Part : Line ▼	No. Explain below how each activity for which income is accomplishment of the foundation's exempt purpose.	s reported in col	umn (e) of Part XVI-A	contribut	ed importantly to the	3.)
See wor Part : Line ▼	No. Explain below how each activity for which income is accomplishment of the foundation's exempt purpose.	s reported in col	umn (e) of Part XVI-A	contribut	ed importantly to the	5.)
See wor Part : Line ▼	No. Explain below how each activity for which income is accomplishment of the foundation's exempt purpose.	s reported in col	umn (e) of Part XVI-A	contribut	ed importantly to the	5.)
See wor Part : Line ▼	No. Explain below how each activity for which income is accomplishment of the foundation's exempt purpose.	s reported in col	umn (e) of Part XVI-A	contribut	ed importantly to the	3.)
See wor Part : Line ▼	No. Explain below how each activity for which income is accomplishment of the foundation's exempt purpose.	s reported in col	umn (e) of Part XVI-A	contribut	ed importantly to the	5.)
See wor Part : Line ▼	No. Explain below how each activity for which income is accomplishment of the foundation's exempt purpose.	s reported in col	umn (e) of Part XVI-A	contribut	ed importantly to the	3.)
See wor Part : Line ▼	No. Explain below how each activity for which income is accomplishment of the foundation's exempt purpose.	s reported in col	umn (e) of Part XVI-A	contribut	ed importantly to the	5.)
See wor Part : Line ▼	No. Explain below how each activity for which income is accomplishment of the foundation's exempt purpose.	s reported in col	umn (e) of Part XVI-A	contribut	ed importantly to the	5.)
See wor Part : Line ▼	No. Explain below how each activity for which income is accomplishment of the foundation's exempt purpose.	s reported in col	umn (e) of Part XVI-A	contribut	ed importantly to the	5.)
See wor Part : Line ▼	No. Explain below how each activity for which income is accomplishment of the foundation's exempt purpose.	s reported in col	umn (e) of Part XVI-A	contribut	ed importantly to the	3.)
See wor Part : Line ▼	No. Explain below how each activity for which income is accomplishment of the foundation's exempt purpose.	s reported in col	umn (e) of Part XVI-A	contribut	ed importantly to the	5.)
See wor Part : Line ▼	No. Explain below how each activity for which income is accomplishment of the foundation's exempt purpose.	s reported in col	umn (e) of Part XVI-A	contribut	ed importantly to the	5.)
See wor Part : Line ▼	No. Explain below how each activity for which income is accomplishment of the foundation's exempt purpose.	s reported in col	umn (e) of Part XVI-A	contribut	ed importantly to the	5.)
See wor Part : Line ▼	No. Explain below how each activity for which income is accomplishment of the foundation's exempt purpose.	s reported in col	umn (e) of Part XVI-A	contribut	ed importantly to the	
See wor Part : Line ▼	No. Explain below how each activity for which income is accomplishment of the foundation's exempt purpose.	s reported in col	umn (e) of Part XVI-A	contribut	ed importantly to the	5.)
See wor Part : Line ▼	No. Explain below how each activity for which income is accomplishment of the foundation's exempt purpose.	s reported in col	umn (e) of Part XVI-A	contribut	ed importantly to the	3.)
See wor Part : Line ▼	No. Explain below how each activity for which income is accomplishment of the foundation's exempt purpose.	s reported in col	umn (e) of Part XVI-A	contribut	ed importantly to the	3.)
See wor Part : Line ▼	No. Explain below how each activity for which income is accomplishment of the foundation's exempt purpose.	s reported in col	umn (e) of Part XVI-A	contribut	ed importantly to the	
See wor Part : Line ▼	No. Explain below how each activity for which income is accomplishment of the foundation's exempt purpose.	s reported in col	umn (e) of Part XVI-A	contribut	ed importantly to the	

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Part A	(VII	Exempt Organiza	•	insters to and	ıransactior	ns and Relationships Witi	noncharitable		
1 Did	the orga			in any of the follow	wing with any oth	er organization described		Yes	No
	_			=	•	on 527, relating to political			
	anızatıor	, ,		(//)	•				
a Tra	nsfers fr	om the reporting founda	ition to a non	chantable exempt	organization of:				
(1)	Cash						1a(*	0	X
(2)	Other a	ssets					1a(2	<u> </u>	X
b Oth	er transa	actions:							
(1)	Sales o	f assets to a nonchanta	ble exempt o	organization			1b(⁻	<u>) </u>	X
• •		ses of assets from a nor			1		1b(2		X
		of facilities, equipment, of	or other asse	ets			1b(:		X
٠.		rsement arrangements					1b(4		X
		or loan guarantees		6duninina nalisian	4:		1b(:		X
		nance of services or me	-	_			1b(t)		X
	-	acilities, equipment, ma	-	*	, ,	(b) should always show the fair m			
				_		e foundation received less than fai			
		-	_		="	e goods, other assets, or services			
(a) Lin		(b) Amount involved		ne of nonchantable exem			ansactions, and shanng arrangen	ients	
N/A					-				
			ļ				<u> </u>		
			<u> </u>	<u> </u>					
		ļ							
		_					<u> </u>		
			 					-	
					-		<u> </u>		
des	cribed ir	ation directly or indirect section 501(c) of the C mplete the following sch	ode (other t	han section 501(c)	(3)) or in section	527?		Yes X	No No
N/A		(a) Name of organization		(b) Type of o	rganization	(c) Descrip	otion of relationship		
IN / F	<u>, </u>								
									
									
T						tules and statements, and to the best of my	knowledge and belief, it is true,		
Sign Here	correct, a	auteen J	α	wbaugh	In all information of w	S 3012 Chai	,		No
	▼ Sign	ature of officer or trustee/		$\overline{}$	D'ate	Title			
Paid Propaga		pe preparer's name ael R. Zimmern	nan	4	Preparar's signatur		Date 11/05/1	3	t lf
Use Only			Yeo,	P.C.	· y perpo	1 1	PTIN P0003		7
				an Ave.		·	Firm's EIN ▶ 38-27		
			and, MI		2518		Phone no 989-6		
	•							990-P	

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

OMB No 1545-0047

Employer identification number

2011

Pardoe Cance	r Treatment Fu	und of		
Gratiot Co		und of	38-3532130	
Organization type (check o			100_0002100	_
Filers of:	Section:			
Form 990 or 990-EZ	501(c)()(c	(enter number) organization		
	4947(a)(1) nonexe	empt charitable trust not treated as a private foundation	n	
	527 political organ	nization		
Form 990-PF	X 501(c)(3) exempt	private foundation		
	4947(a)(1) nonexe	empt chantable trust treated as a private foundation		
	501(c)(3) taxable [private foundation		
Instructions. General Rule		r 290. RE that received, during the year, \$5,000 or more		
	nne contributor Complete P	r 990-PF that received, during the year, \$5,000 or more Parts I and II.	(in money or	
Special Rules				
under sections 509	a)(1) and 170(b)(1)(A)(vı) a ,000 or (2) 2% of the amou	n 990 or 990-EZ that met the 33 1/3% support test of the and received from any one contributor, during the year, unt on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-E	a contribution of	
during the year, total	I contributions of more than	on filing Form 990 or 990-EZ that received from any one in \$1,000 for use exclusively for religious, charitable, sc cruelty to children or animals. Complete Parts I, II, and I	ientific, literary,	
dunng the year, cor not total to more the year for an exclusiv	tributions for use exclusivel in \$1,000. If this box is chec ely religious, charitable, etc. iization because it received	on filing Form 990 or 990-EZ that received from any one sely for religious, charitable, etc., purposes, but these conceed, enter here the total contributions that were received, purpose. Do not complete any of the parts unless the dinonexclusively religious, charitable, etc., contributions	ntributions did ved during the e General Rule	
990-EZ, or 990-PF), but it n	ust answer "No" on Part IV	eneral Rule and/or the Special Rules does not file Scher I, line 2, of its Form 990; or check the box on line H of in the not meet the filing requirements of Schedule B (Form 9)	its Form 990-EZ or on	

Schedule B (Form 990, 990-EZ, or 990-PF) (2011)	Page	1	of	1 of Part	<u>t I</u>
Name of organization	Employer id	entifi	cation	number	
Pardee Cancer Treatment Fund of	38-353	213	0		

Part I	Contributors (see instructions). L	Jse duplicate copies of Pa	art I if additional space is nee	eded.
(a) No.	(b) Name, address, and Z	IP + 4	(c) Total contributions	(d) Type of contribution
1	Elsa U. Pardee Foundat 812 West Main Street Midland	tion MI 48640	\$ 175,000	Person X Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and Z	IP + 4	(c) Total contributions	(d) Type of contribution
			\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and Z	IP + 4	(c) Total contributions	(d) Type of contribution
			\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and Z	IP + 4	(c) Total contributions	(d) Type of contribution
			\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and Z	IP + 4	(c) Total contributions	(d) Type of contribution
			\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and Z	IP + 4	(c) Total contributions	(d) Type of contribution
			\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution.)

Form **4562**

Depreciation and Amortization

(Including Information on Listed Property)

OMB No 1545-0172

179

Department of the Treasury Internal Revenue Service

(99)

► See separate instructions.

► Attach to your tax return.

Name(•	Cancer Tre		ınd of		identifyi		ber 2130
	ss or activity to which this form relates							
77 11111	<u>ndirect Depreciati</u>				- -	·		
₽ŧ	ert E Election To Expen							
	Note: If you have a		, complete Pai	t V before you c	omplete Part I			<u> </u>
1	Maximum amount (see instructions	•					1	500,000
2	Total cost of section 179 property p	•	· ·				2	2 000 000
3	Threshold cost of section 179 prope	•	•	structions)			3	2,000,000
4	Reduction in limitation. Subtract line		·				4	
5_	Dollar limitation for tax year. Subtract line	e 4 from line 1. If zero or	less, enter -0 If man	med filing separately, se	e instructions		5	
6	(a) Description	of property		(b) Cost (business use on	ily) (c)	Elected cost		
				<u> </u>				
7	Listed property. Enter the amount fi	rom line 29		<u> </u>	7			
8	Total elected cost of section 179 pr	operty. Add amounts	in column (c), line:	s 6 and 7			8	
9	Tentative deduction. Enter the sma	ller of line 5 or line 8					9	
10	Carryover of disallowed deduction f	from line 13 of your 20	010 Form 4562				10	
11	Business income limitation. Enter the	ne smaller of business	s income (not less	than zero) or line 5 (see instructions)		11	
12	Section 179 expense deduction. Ac						12	
13	Carryover of disallowed deduction t				13			
Note	: Do not use Part II or Part III below	for listed property. Ins	tead, use Part V.					
P	art II Special Depreciati	on Allowance a	nd Other Dep	reciation (Do no	t include liste	d proper	ty.) (See instructions)
14	Special depreciation allowance for							
	during the tax year (see instructions			• , .			14	i
15	Property subject to section 168(f)(1	•					15	
16	Other depreciation (including ACRS						16	404
******	rt III MACRS Depreciat		de listed prope	erty.) (See instru	ctions.)			
	in totto popionat			tion A	3.3.1.3.7			
17	MACRS deductions for assets place	ed in service in tay ve	ars beginning hef	ore 2011	 		17	0
18	If you are electing to group any assets placed	•			re D			
<u></u>	Section B—	Assets Placed in Se	rvice During 201	1 Tax Year Using th	e General Depre	ciation S	/stem	
	(a) Classification of property	(b) Month and year placed in service	(c) Basis for depre (business/investmen only-see instruc	eciation (d) Recovery	(e) Convention	(f) Meth		(g) Depreciation deduction
19a	3-year property							
b	5-year property	1						
	7-year property	1						
d	4.	1						
	15-year property	1						
<u>_</u>	20-year property	1						
	25-year property	1		25 yrs.		S/L		
<u>x</u>	Residential rental		· · · · · · · · · · · · · · · · · ·	27.5 yrs.	ММ	S/L		
•••	property			27.5 yrs.	MM	S/L		
<u> </u>	Nonresidential real			39 yrs.	MM	S/L		
•	property	-		00 Jis.	MM	S/L	_	
	<u>.:</u>	ssets Placed in Serv	ice During 2011	Tax Year Using the				m
20a			1			S/L	_	
		†		12 yrs.		S/L		
<u>b</u>			 		MM	S/L	•	
	40-year	tructions \		40 yrs.	I IAIIAI	<u> </u>	<u> </u>	<u> </u>
	art IV Summary (See ins						24	
21	Listed property. Enter amount from		40 100 '	ali	1 		21	
22	Total. Add amounts from line 12, li and on the appropriate lines of you	-			. Enter here		22	404

portion of the basis attributable to section 263A costs

For assets shown above and placed in service during the current year, enter the

051744730 Pardee Cancer Treatment Fund of

Federal Statements

38-3532130 FYE: 9/30/2012 Statement 1 - Form 990-PF, Part I, Line 16b - Accounting Fees

Charitable Purpose	φ.	o
Adjusted Net	\$	O
Net Investment	\$	o o
Total	20	20
	\$	w.
Description	Indirect Accounting Fees	Total

Statement 2 - Form 990-PF, Part I, Line 19 - Depreciation

	Adjusted Net Income	ጥ								\$
	Net Investment Income	w								\$
	Current Year Depreciation	⟨ ∿			33	289	1	56	25	\$ 404
	Life	10	10	10	10	Ŋ	1167	5	10	
	Method	ц	ī	/L	/L	ī	/L	/L	/L	
	Prior Year Depreciation	226 S/	/s 00E	1,255 S/	362 8/	I/S 96	/s	18 S/	/S	2,257
Description	Cost Fassis De	226 \$	300	(Chair & Desk) 1,255	395	er 1,442	1,167	e 276	inet 253	5,314 \$
	Date Acquired	Storage Cabinet 2/09/01 \$	File Cabinet (2) 8/09/00	Office Equipment 7/12/00	Lateral File 8/15/02	HP Probook Computer 6/15/11	Color Laserjet 6/15/11	Peachtree Software 6/15/11	Vertical File Cabinet 10/12/11	Total \$

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712
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051744730 Pardee Cancer Treatment Fund of 38-3532130

Federal Statements

FYE: 9/30/2012

r Expenses
- Othe
23
Line
Part I,
990-PF, I
3 - Form
Statement 3

Expenses Contracted services of fice expenses Total Total Total Adjusted Net S Adjusted Net Contracted Services of Funiture & Equipment S 1,058 (Charitable Purpose	0		Net FMV	0
Description Total Total Investment \$ Investment \$, w	· s	uipment	Accumulated Depreciation	
Description \$ acted services e expenses ance ge tlaneous al Statement 4 - Form 99 E & Equipment al	ر ا د	\ \ \ \ \ \	nd, Building, and Equ	1	
Description \$ acted services e expenses ance ge tlaneous al Statement 4 - Form 99 E & Equipment al	' w		F, Part II, Line 14 - La	٦ 	
1 404404 1 1.4	w.	ses ntracted services fice expenses surance stage scellaneous Total	Statement 4 - Form 99		ture & Equipment \$ Total \$

Statement 5 - Form 990-PF, Part VIII, Line 1 - List of Officers, Directors, Trustees, Etc.

Expenses	0	0	0
Benefits	0	0	0
Compensation	0	0	0
Average Hours	1.00	1.00	1.00
Title	Chair	Vice Chair	Director
Name and Address	Kathleen Crumbaugh 315 E Warwick Drive, Suite C Alma MI 48801	Chuck Fortino 315 E Warwick Drive, Suite C Alma MI 48801	Nancy Fenn 315 E Warwick Drive, Suite C Alma MI 48801

	•
	,
	•
	•
) Pardee Cancer Treatment Fund of	
51744730	

Federal Statements

11/5/2012 12:36 PM

051744730 Pardee Cancer 38-3532130 FYE: 9/30/2012

					,
Statement 5	Statement 5 - Form 990-PF, Part VIII, I	VIII, Line 1 - List of Etc. (continued)	Part VIII, Line 1 - List of Officers, Directors, Trustees, Etc. (continued)	Trustees,	•
Name and Address	Title	Average Hours	Compensation	Benefits	Expenses
Tom Steere 315 E Warwick Drive, Suite C Alma MI 48801	Director	1.00	0	0	0
Roger Keck 315 E Warwick Drive, Suite C Alma MI 48801	Director	1.00	0	0	0
Robin Whitmore 315 E Warwick Drive, Suite C Alma MI 48801	Director	1.00	0	0	0
Vicki Root 315 E Warwick Drive, Suite C Alma MI 48801	Director	1.00	0	0	0
Dr. Jamey Seals 315 E Warwick Drive, Suite C Alma MI 48801	Director	1.00	0	0	0
Janet Sherwood 315 E Warwick Drive, Suite C Alma MI 48801	Secretary	1.00	0	0	0
Becky Hirschman 315 E Warwick Drive, Suite C Alma MI 48801	Treasurer	1.00	0	0	0
Mick Koutz 315 E Warwick Drive, Suite C Alma MI 48801	Director	1.00	0	0	0
Brad Vibber 315 E Warwick Drive, Suite C Alma MI 48801	Director	1.00	0	0	0

2

Statement 5 - Form 990-PF, Part VIII, Line 1 - List of Officers, Directors, Trustees, Name and Ec. (continued) Address Title Hours Compensation Benefits Expenses Director 1.00 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	051744730 Pardee Cancer Treatment Fund of 38-3532130 FYE: 9/30/2012	Federal Statements	nts	11/6	11/5/2012 12:36 PM
Average Hours Compensation Benefits Expenses 1.00 0 0 0 Director 1.00 0 0 6	Statement 5 - Form 990-		of Officers, Directors	, Trustees,	•
Suite C Director 1.00 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	e and ress			Benefits	Expenses
	Suite C			0	O LO