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Form 990-PF

Return of Private Foundation

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

2011

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

For calendar year 2011, or tax year beginning 11-01-2011, and ending 10-31-2012

G Check all that apply Initial return Initial return of a former public charity Final return
 Amended return Address change Name change

Name of foundation
MEDICAL SOCIETY FOUNDATION

Number and street (or P O box number if mail is not delivered to street address) 4438 OAKBRIDGE DR - SUITE B
Room/suite

City or town, state, and ZIP code
FLINT, MI 485325400

H Check type of organization Section 501(c)(3) exempt private foundation
 Section 4947(a)(1) nonexempt charitable trust Other taxable private foundation

I Fair market value of all assets at end of year (from Part II, col. (c), line 16) **\$ 197,192** **J** Accounting method Cash Accrual
 Other (specify) _____ (Part I, column (d) must be on cash basis.)

A Employer identification number
38-2872664

B Telephone number (see page 10 of the instructions)
(810) 733-6260

C If exemption application is pending, check here

D 1. Foreign organizations, check here

2. Foreign organizations meeting the 85% test, check here and attach computation

E If private foundation status was terminated under section 507(b)(1)(A), check here

F If the foundation is in a 60-month termination under section 507(b)(1)(B), check here

Part I Analysis of Revenue and Expenses (The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a) (see page 11 of the instructions))

	(a) Revenue and expenses per books	(b) Net investment income	(c) Adjusted net income	(d) Disbursements for charitable purposes (cash basis only)
1 Contributions, gifts, grants, etc., received (attach schedule)	15,941			
2 Check <input type="checkbox"/> if the foundation is not required to attach Sch B				
3 Interest on savings and temporary cash investments				
4 Dividends and interest from securities.	5,644	5,644	5,644	
5a Gross rents				
b Net rental income or (loss)				
6a Net gain or (loss) from sale of assets not on line 10	<input checked="" type="checkbox"/> -4,589			
b Gross sales price for all assets on line 6a 77,508				
7 Capital gain net income (from Part IV, line 2) . . .				
8 Net short-term capital gain				
9 Income modifications				
10a Gross sales less returns and allowances				
b Less Cost of goods sold				
c Gross profit or (loss) (attach schedule)				
11 Other income (attach schedule)				
12 Total. Add lines 1 through 11	16,996	5,644	5,644	

Revenue				
13 Compensation of officers, directors, trustees, etc				
14 Other employee salaries and wages				
15 Pension plans, employee benefits				
16a Legal fees (attach schedule)	<input checked="" type="checkbox"/> 45			45
b Accounting fees (attach schedule)	<input checked="" type="checkbox"/> 2,082	1,249		833
c Other professional fees (attach schedule)	<input checked="" type="checkbox"/> 4,223	4,223		
17 Interest				
18 Taxes (attach schedule) (see page 14 of the instructions)	<input checked="" type="checkbox"/> 401	401		
19 Depreciation (attach schedule) and depletion . . .	<input checked="" type="checkbox"/> 1,280			
20 Occupancy				
21 Travel, conferences, and meetings				
22 Printing and publications				
23 Other expenses (attach schedule)	<input checked="" type="checkbox"/> 27,938			27,938
24 Total operating and administrative expenses.				
Add lines 13 through 23	35,969	5,873		28,816
25 Contributions, gifts, grants paid.	11,000			11,000
26 Total expenses and disbursements. Add lines 24 and 25	46,969	5,873		39,816
27 Subtract line 26 from line 12				
a Excess of revenue over expenses and disbursements	-29,973			
b Net investment income (if negative, enter -0-) . . .		0		
c Adjusted net income (if negative, enter -0-) . . .			5,644	

Part II Balance Sheets	Attached schedules and amounts in the description column should be for end-of-year amounts only (See instructions)	Beginning of year	End of year	
		(a) Book Value	(b) Book Value	(c) Fair Market Value
Assets				
1	Cash—non-interest-bearing	5,672	5,550	5,548
2	Savings and temporary cash investments			
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 (attach schedule) (see page 15 of the instructions)			
7	Other notes and loans receivable (attach schedule) ►			
	Less allowance for doubtful accounts ►			
8	Inventories for sale or use			
9	Prepaid expenses and deferred charges			
10a	Investments—U S and state government obligations (attach schedule)			
b	Investments—corporate stock (attach schedule)	215,837	191,644	191,644
c	Investments—corporate bonds (attach schedule)			
11	Investments—land, buildings, and equipment basis ►			
	Less accumulated depreciation (attach schedule) ►			
12	Investments—mortgage loans			
13	Investments—other (attach schedule)			
14	Land, buildings, and equipment basis ►	33,634		
	Less accumulated depreciation (attach schedule) ►	25,958		
15	Other assets (describe ►)	8,956	7,676	
16	Total assets (to be completed by all filers—see the instructions Also, see page 1, item I)	230,465	204,870	197,192
Liabilities				
17	Accounts payable and accrued expenses			
18	Grants payable			
19	Deferred revenue			
20	Loans from officers, directors, trustees, and other disqualified persons			
21	Mortgages and other notes payable (attach schedule)			
22	Other liabilities (describe ►)			
23	Total liabilities (add lines 17 through 22)		0	
Net Assets or Fund Balances				
24	Unrestricted	230,465	204,870	
25	Temporarily restricted			
26	Permanently restricted			
	Foundations that do not follow SFAS 117, check here ►			
	and complete lines 24 through 26 and lines 30 and 31.			
27	Capital stock, trust principal, or current funds			
28	Paid-in or capital surplus, or land, bldg , and equipment fund			
29	Retained earnings, accumulated income, endowment, or other funds			
30	Total net assets or fund balances (see page 17 of the instructions)	230,465	204,870	
31	Total liabilities and net assets/fund balances (see page 17 of the instructions)	230,465	204,870	

Part III Analysis of Changes in Net Assets or Fund Balances

1	Total net assets or fund balances at beginning of year—Part II, column (a), line 30 (must agree with end-of-year figure reported on prior year's return)	1	230,465
2	Enter amount from Part I, line 27a	2	-29,973
3	Other increases not included in line 2 (itemize) ►	3	4,378
4	Add lines 1, 2, and 3	4	204,870
5	Decreases not included in line 2 (itemize) ►	5	
6	Total net assets or fund balances at end of year (line 4 minus line 5)—Part II, column (b), line 30	6	204,870

Part IV Capital Gains and Losses for Tax on Investment Income

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

Was the foundation liable for the section 4942 tax on the distributable amount of any year in the base period? Yes No
If "Yes," the foundation does not qualify under section 4940(e). Do not complete this part

1 Enter the appropriate amount in each column for each year, see page 18 of the instructions before making any entries.

(a) Base period years Calendar year (or tax year beginning in)	(b) Adjusted qualifying distributions	(c) Net value of noncharitable-use assets	(d) Distribution ratio (col (b) divided by col (c))
2010	13,525	227,990	0 059323
2009	27,404	220,754	0 124138
2008	78,316	215,526	0 363371
2007	53,272	392,375	0 135768
2006	60,557	426,133	0 142108
2 Total of line 1, column (d).			2 0 82470
3 Average distribution ratio for the 5-year 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 0 16494
4 Enter the net value of noncharitable-use assets for 2011 from Part X, line 5.			4 204,72
5 Multiply line 4 by line 3.			5 33,76
6 Enter 1% of net investment income (1% of Part I, line 27b).			6
7 Add lines 5 and 6.			7 33,76
8 Enter qualifying distributions from Part XII, line 4.			8 39,81

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 on page 18.

Part VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948—see page 18 of the instructions)

1a	Exempt operating foundations described in section 4940(d)(2), check here <input type="checkbox"/> and enter "N/A" on line 1	1	0
Date of ruling or determination letter _____ (attach copy of letter if necessary—see instructions)			
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check here <input checked="" type="checkbox"/> and enter 1% of Part I, line 27b		
c	All other domestic foundations enter 2% of line 27b Exempt foreign organizations enter 4% of Part I, line 12, col (b)		
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-)	2	
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	
5	Tax based on investment income. Subtract line 4 from line 3 If zero or less, enter -0-	5	
6	Credits/Payments		
a	2011 estimated tax payments and 2010 overpayment credited to 2011	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	
8	Enter any penalty for underpayment of estimated tax Check here <input type="checkbox"/> 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 <input type="checkbox"/>	9	
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid <input type="checkbox"/>	10	
11	Enter the amount of line 10 to be Credited to 2012 estimated tax <input type="checkbox"/> 0 Refunded <input type="checkbox"/> 11	11	

Part VII-A Statements Regarding Activities

		Yes	No
1a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any political campaign?	1a	No
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see page 19 of the instructions for definition)?	1b	No
<i>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.</i>			
c	Did the foundation file Form 1120-POL for this year?	1c	
d	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year (1) On the foundation <input type="checkbox"/> \$ _____ (2) On foundation managers <input type="checkbox"/> \$ _____		
e	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers <input type="checkbox"/> \$ _____		
2	Has the foundation engaged in any activities that have not previously been reported to the IRS? <i>If "Yes," attach a detailed description of the activities.</i>	2	No
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? <i>If "Yes," attach a conformed copy of the changes</i>	3	No
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	4a	No
b	If "Yes," has it filed a tax return on Form 990-T for this year?	4b	
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year? <i>If "Yes," attach the statement required by General Instruction T.</i>	5	No
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	Yes
7	Did the foundation have at least \$5,000 in assets at any time during the year? <i>If "Yes," complete Part II, col (c), and Part XV</i>	7	Yes
8a	Enter the states to which the foundation reports or with which it is registered (see page 19 of the instructions) <input type="checkbox"/> 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? <i>If "No," attach explanation.</i>	8b	Yes
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 on page 27)? <i>If "Yes," complete Part XIV</i>	9	No
10	Did any persons become substantial contributors during the tax year? <i>If "Yes," attach a schedule listing their names and addresses</i>	10	No

Part VII-A Statements Regarding Activities (continued)

11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of section 512(b)(13)? If "Yes," attach schedule (see page 20 of the instructions).	11		No
12	Did the foundation acquire a direct or indirect interest in any applicable insurance contract before August 17, 2008?	12		No
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	Yes	
Website address ►GCMS.ORG				
14	The books are in care of ►PETER LEVINE Telephone no ►(810) 733-6260			
	Located at ►4438 OAK BRIDGE DRIVE STE B FLINT MI ZIP +4 ►48532			
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 —Check here ►	15		
	and enter the amount of tax-exempt interest received or accrued during the year ►			
16	At any time during calendar year 2011, did the foundation have an interest in or a signature or other authority over a bank, securities, or other financial account in a foreign country?	16	Yes	No
See the instructions for exceptions and filing requirements for Form TD F 90-22 1 If "Yes", enter the name of the foreign country ►				

Part VII-B Statements Regarding Activities for Which Form 4720 May Be Required

File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.		Yes	No
1a	During the year did the foundation (either directly or indirectly)		
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person?	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person?	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
	(5) Transfer any income or assets to a disqualified person (or make any of either available for the benefit or use of a disqualified person)?	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
	(6) Agree to pay money or property to a government official? (Exception. Check "No" if the foundation agreed to make a grant to or to employ the official for a period after termination of government service, if terminating within 90 days).	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
b	If any answer is "Yes" to 1a(1)–(6), did any of the acts fail to qualify under the exceptions described in Regulations section 53.4941(d)-3 or in a current notice regarding disaster assistance (see page 20 of the instructions)?	1b	
	Organizations relying on a current notice regarding disaster assistance check here. ►		
c	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected before the first day of the tax year beginning in 2011?	1c	
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation defined in section 4942(j)(3) or 4942(j)(5))		
a	At the end of tax year 2011, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning before 2011?	2a	
	If "Yes," list the years ► 20____, 20____, 20____, 20____		
b	Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2) (relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer "No" and attach statement—see page 20 of the instructions)	2b	
c	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here ► 20____, 20____, 20____, 20____		
3a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year?	3a	
	► Yes <input checked="" type="checkbox"/> No		
b	If "Yes," did it have excess business holdings in 2011 as a result of (1) any purchase by the foundation or disqualified persons after May 26, 1969, (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest, or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Schedule C, Form 4720, to determine if the foundation had excess business holdings in 2011).	3b	
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a	No
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 2011?	4b	No

Part VII-B Statements Regarding Activities for Which Form 4720 May Be Required (continued)

5a	During the year did the foundation pay or incur any amount to			
(1) Carry on propaganda, or otherwise attempt to influence legislation (section 4945(e))?		<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
(2) Influence the outcome of any specific public election (see section 4955), or to carry on, directly or indirectly, any voter registration drive?		<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
(3) Provide a grant to an individual for travel, study, or other similar purposes?		<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
(4) Provide a grant to an organization other than a charitable, etc., organization described in section 509(a)(1), (2), or (3), or section 4940(d)(2)? (see page 22 of the instructions).		<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
(5) Provide for any purpose other than religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals?		<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
b	If any answer is "Yes" to 5a(1)–(5), did any of the transactions fail to qualify under the exceptions described in Regulations section 53.4945 or in a current notice regarding disaster assistance (see page 22 of the instructions)? Organizations relying on a current notice regarding disaster assistance check here.	<input checked="" type="checkbox"/>	5b	
c	If the answer is "Yes" to question 5a(4), does the foundation claim exemption from the tax because it maintained expenditure responsibility for the grant?	<input type="checkbox"/> Yes <input type="checkbox"/> No		
<i>If "Yes," attach the statement required by Regulations section 53.4945–5(d).</i>				
6a	Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
b	Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract?		6b	No
7a	At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
b	If yes, did the foundation receive any proceeds or have any net income attributable to the transaction?		7b	

Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors**1 List all officers, directors, trustees, foundation managers and their compensation (see page 22 of the instructions).**

(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
See Additional Data Table				

2 Compensation of five highest-paid employees (other than those included on line 1—see page 23 of the instructions). If none, enter "NONE."

(a) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
NONE				
Total number of other employees paid over \$50,000.			<input checked="" type="checkbox"/>	

Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors (continued)
3 Five highest-paid independent contractors for professional services (see page 23 of the instructions). 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 others receiving over \$50,000 for professional services.		

Part IX-A Summary of Direct Charitable Activities

List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of organizations and other beneficiaries served, conferences convened, research papers produced, etc	Expenses
1	
2	
3	
4	

Part IX-B Summary of Program-Related Investments (see page 23 of the instructions)

Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2	Amount
1 N/A	
2	
All other program-related investments. See page 24 of the instructions	
3	
Total. Add lines 1 through 3.	

Part X Minimum Investment Return (All domestic foundations must complete this part. Foreign foundations, see page 24 of the instructions.)

1 Fair market value of assets not used (or held for use) directly in carrying out charitable, etc , purposes		
a Average monthly fair market value of securities.	1a	200,303
b Average of monthly cash balances.	1b	7,537
c Fair market value of all other assets (see page 24 of the instructions).	1c	0
d Total (add lines 1a, b, and c).	1d	207,840
e Reduction claimed for blockage or other factors reported on lines 1a and 1c (attach detailed explanation).	1e	
2 Acquisition indebtedness applicable to line 1 assets.	2	
3 Subtract line 2 from line 1d.	3	207,840
4 Cash deemed held for charitable activities Enter 1 1/2% of line 3 (for greater amount, see page 25 of the instructions).	4	3,118
5 Net value of noncharitable-use assets. Subtract line 4 from line 3 Enter here and on Part V, line 4	5	204,722
6 Minimum investment return. Enter 5% of line 5.	6	10,236

Part XI Distributable Amount (see page 25 of the instructions) (Section 4942(j)(3) and (j)(5) private operating foundations and certain foreign organizations check here and do not complete this part.)

1 Minimum investment return from Part X, line 6.	1	10,236
2a Tax on investment income for 2011 from Part VI, line 5.	2a	
b Income tax for 2011 (This does not include the tax from Part VI).	2b	
c Add lines 2a and 2b.	2c	
3 Distributable amount before adjustments Subtract line 2c from line 1.	3	10,236
4 Recoveries of amounts treated as qualifying distributions.	4	
5 Add lines 3 and 4.	5	10,236
6 Deduction from distributable amount (see page 25 of the instructions).	6	
7 Distributable amount as adjusted Subtract line 6 from line 5 Enter here and on Part XIII, line 1.	7	10,236

Part XII Qualifying Distributions (see page 25 of the instructions)

1 Amounts paid (including administrative expenses) to accomplish charitable, etc , purposes		
a Expenses, contributions, gifts, etc —total from Part I, column (d), line 26.	1a	39,816
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		
a Suitability test (prior IRS approval required).	3a	
b Cash distribution test (attach the required schedule).	3b	
4 Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4	4	39,816
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 page 26 of the instructions).	5	
6 Adjusted qualifying distributions. Subtract line 5 from line 4.	6	39,816

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 4940(e) reduction of tax in those years

Part XIII Undistributed Income (see page 26 of the instructions)

	(a) Corpus	(b) Years prior to 2010	(c) 2010	(d) 2011
1 Distributable amount for 2011 from Part XI, line 7				10,236
2 Undistributed income, if any, as of the end of 2011				
a Enter amount for 2010 only.				
b Total for prior years 20____, 20____, 20____				
3 Excess distributions carryover, if any, to 2011				
a From 2006.				
b From 2007.				
c From 2008.				
d From 2009.				
e From 2010.				
f Total of lines 3a through e.				
4 Qualifying distributions for 2011 from Part XII, line 4 ► \$ _____ 39,816				
a Applied to 2010, but not more than line 2a				
b Applied to undistributed income of prior years (Election required—see page 26 of the instructions)				
c Treated as distributions out of corpus (Election required—see page 26 of the instructions).				
d Applied to 2011 distributable amount.				10,236
e Remaining amount distributed out of corpus	29,580			
5 Excess distributions carryover applied to 2011 (If an amount appears in column (d), the same amount must be shown in column (a).)				
6 Enter the net total of each column as indicated below:	29,580			
a Corpus Add lines 3f, 4c, and 4e Subtract line 5				
b Prior years' undistributed income Subtract line 4b from line 2b.				
c Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed.				
d Subtract line 6c from line 6b Taxable amount—see page 27 of the instructions				
e Undistributed income for 2010 Subtract line 4a from line 2a Taxable amount—see page 27 of the instructions				
f Undistributed income for 2011 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) (see page 27 of the instructions).				
8 Excess distributions carryover from 2006 not applied on line 5 or line 7 (see page 27 of the instructions).				
9 Excess distributions carryover to 2012. Subtract lines 7 and 8 from line 6a	29,580			
10 Analysis of line 9				
a Excess from 2007.				
b Excess from 2008.				
c Excess from 2009.				
d Excess from 2010.				
e Excess from 2011.	29,580			

Part XIV Private Operating Foundations (see page 27 of the instructions and Part VII-A, question 9)

1a	If the foundation has received a ruling or determination letter that it is a private operating foundation, and the ruling is effective for 2011, enter the date of the ruling. ►			
b	Check box to indicate whether the organization is a private operating foundation described in section <input type="checkbox"/> 4942(j)(3) or <input type="checkbox"/> 4942(j)(5)			
2a	Enter the lesser of the adjusted net income from Part I or the minimum 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 Subtract line 2d from line 2c.			
3	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			

Part XV Supplementary Information (Complete this part only if the organization had \$5,000 or more in assets at any time during the year—see page 27 of the instructions.)**1 Information Regarding Foundation Managers:**

a List any managers of the foundation who have contributed more than 2% of the total contributions received by the foundation before the close of any tax year (but only if they have contributed more than \$5,000) (See section 507(d)(2))

b List any managers of the foundation who own 10% or more of the stock of a corporation (or an equally large portion of the ownership of a partnership or other entity) of which the foundation has a 10% or greater interest

2 Information Regarding Contribution, Grant, Gift, Loan, Scholarship, etc., Programs:

Check here if the foundation only makes contributions to preselected charitable organizations and does not accept unsolicited requests for funds If the foundation makes gifts, grants, etc (see page 28 of the instructions) to individuals or organizations under other conditions, complete items 2a, b, c, and d

a The name, address, and telephone number of the person to whom applications should be addressed

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

c Any submission deadlines

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

Part XV 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 or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a Paid during the year				
GREATER FLINT HEALTH COLA 519 S SAGINAW ST STE 306 FLINT, MI 48502	NONE	501 C (3)	GENERAL OPERATIONS	1,000
EMERGENCY MEDICAL CENTRE PC 2284 S BALLENGER HWY STE 2 FLINT, MI 48503	NONE	501 C	INDIGENT CARE	10,000
Total			► 3a	11,000
b Approved for future payment				
Total			► 3b	

Part XVI-A Analysis of Income-Producing Activities

Enter gross amounts unless otherwise indicated

Enter gross amounts unless otherwise indicated		Unrelated business income		Excluded by section 512, 513, or 514		(e) Related or exempt function income (See page 28 of the instructions)
1	Program service revenue	(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	
a						
b						
c						
d						
e						
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.					
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					
7	Other investment income.					
8	Gain or (loss) from sales of assets other than inventory					
9	Net income or (loss) from special events					
10	Gross profit or (loss) from sales of inventory.					
11	Other revenue a					
b						
c						
d						
e						
12	Subtotal Add columns (b), (d), and (e).					1,055
13	Total Add line 12, columns (b), (d), and (e).					1,055
	(See worksheet in line 13 instructions on page 28 to verify calculations)					

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

Part XVII **Information Regarding Transfers To and Transactions and Relationships With Noncharitable Exempt Organizations**

1 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 or

b Other transactions

- (1) Sales of assets to a noncharitable exempt organization.
- (2) Purchases of assets from a noncharitable exempt organization.
- (3) Rental of facilities, equipment, or other assets.
- (4) Reimbursement arrangements.
- (5) Loans or loan guarantees.
- (6) Performance of services or membership or fundraising solicitations.

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.

	Yes	No
1a(1)		No
1a(2)		No
1b(1)		No
1b(2)		No
1b(3)		No
1b(4)		No
1b(5)		No
1b(6)		No
1c		No

2a Is the foundation directly or indirectly affiliated with, or related to, one or more tax-exempt organizations?

described in section 501(c) of the Code (other than section 501(c)(3)) or in section 527? Yes No

b If "Yes," complete the following schedule

(a) Name of organization	(b) Type of organization	(c) Description of relationship	
<p>Under penalties of perjury, 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, and complete. Declaration of preparer (other than taxpayer or fiduciary) is based on all information of which preparer has any knowledge.</p>			
<p>*****</p>	<p>2013-06-13</p>	<p>*****</p>	
<p>Signature of officer or trustee</p>	<p>Date</p>	<p>Title</p>	
<p>Sign Here Paid Preparer's Use Only</p>	<p>Preparer's Signature</p>	<p>Date</p>	
	<p>ANITA ABROL</p>	<p>2013-06-13</p>	<p>Check if self-employed <input checked="" type="checkbox"/></p>
	<p>Firm's name</p>	<p>LEWIS & KNOPF CPAS</p>	<p>Firm's EIN <input checked="" type="checkbox"/></p>
	<p>Firm's address</p>	<p>5206 GATEWAY CENTRE SUITE 100</p>	<p>Phone no (810) 238-4617</p>

May the IRS discuss this return with the preparer shown above? See instructions Yes No

Form 990PF Part VIII Line 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
PETER LEVINE 	EXEC DIRECT 3 00	0	0	0
4438 OAK BRIDGE DR STE B FLINT, MI 48532				
ALLEN TURCKE MD 	PRESIDENT 1 00	0	0	0
4438 OAK BRIDGE DR STE B FLINT, MI 48532				
ROBERT SODERSTROM 	BOARD MEM 1 00	0	0	0
4438 OAK BRIDGE DR STE B FLINT, MI 48532				
EDWIN GULLEKSON 	BOARD MEM 1 00	0	0	0
4438 OAK BRIDGE DR STE B FLINT, MI 48532				
JAGDISH SHAH 	BOARD MEM 1 00	0	0	0
4438 OAK BRIDGE DR STE B FLINT, MI 48532				
SHAFI AHMED MD 	BOARD MEM 1 00	0	0	0
4438 OAK BRIDGE DR STE B FLINT, MI 48532				
SAMASANDRAPALYA KIRAN 	BOARD MEMBER 1 00	0	0	0
4438 OAK BRIDGE DR STE B FLINT, MI 48532				
WALTER GRIFFIN 	BOARD MEMBER 1 00	0	0	0
4438 OAK BRIDGE DR STE B FLINT, MI 48532				
CHERYL THOMS 	MEMBER 1 00	0	0	0
4438 OAK BRIDGE DR STE B FLINT, MI 48532				

2011

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.

Name of organization

MEDICAL SOCIETY FOUNDATION

Employer identification number

38-2872664

Organization type (check one)**Filers of:****Section:**

Form 990 or 990-EZ

501(c)() (enter number) organization
 4947(a)(1) nonexempt charitable trust **not** treated as a private foundation
 527 political organization

Form 990-PF

501(c)(3) exempt private foundation
 4947(a)(1) nonexempt charitable trust treated as a private foundation
 501(c)(3) taxable private foundation

Check if your organization is covered by the **General Rule** or a **Special Rule**.**Note.** Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions**General Rule—**

For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, \$5,000 or more (in money or property) from any one contributor Complete Parts I and II

Special Rules

For a section 501(c)(3) organization filing Form 990 or 990-EZ, that met the 33^{1/3}% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), and received from any one contributor, during the year, a contribution of the greater of **(1)** \$5,000 or **(2)** 2% of the amount on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1 Complete Parts I and II

For a section 501(c)(7), (8), or (10) organization filing Form 990, or 990-EZ, that received from any one contributor, during the year, aggregate contributions of more than \$1,000 for use *exclusively* for religious, charitable, scientific, literary, or educational purposes, or the prevention of cruelty to children or animals Complete Parts I, II, and III

For a section 501(c)(7), (8), or (10) organization filing Form 990, or 990-EZ, that received from any one contributor, during the year, contributions for use *exclusively* for religious, charitable, etc , purposes, but these contributions did not aggregate to more than \$1,000 If this box is checked, enter here the total contributions that were received during the year for an *exclusively* religious, charitable, etc , purpose Do not complete any of the parts unless the **General Rule** applies to this organization because it received nonexclusively religious, charitable, etc , contributions of \$5,000 or more during the year ► \$ _____

Caution. An Organization that is not covered by the General Rule and/or the Special Rules does not file Schedule B (Form 990, 990-EZ, or 990-PF), but it **must** answer "No" on Part IV, line 2 of its Form 990, or check the box in the heading 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)

Name of organization
MEDICAL SOCIETY FOUNDATION

Employer identification number

38-2872664

Part I **Contributors** (see Instructions) Use duplicate copies of Part I if additional space is needed

(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
1	ALLEN TURCKE MD 730 E RIVER RD FLUSHING, MI 48433	\$ <u>10,500</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution)
—	—	\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution)
—	—	\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution)
—	—	\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution)
—	—	\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution)
—	—	\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution)
—	—	\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution)
—	—	\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution)
—	—	\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution)

Name of organization MEDICAL SOCIETY FOUNDATION			Employer identification number 38-2872664
Part II Noncash Property (see Instructions) Use duplicate copies of Part II if additional space is needed			
(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
		\$ _____	_____

Name of organization
MEDICAL SOCIETY FOUNDATION

Employer identification number

38-2872664

Part III <i>Exclusivel/y religious, charitable, etc., individual contributions to section 501(c)(7), (8), or (10) organizations aggregating more than \$1,000 for the year. (Complete columns (a) through (e) and the following line entry)</i> For organizations completing Part III, enter the total of <i>exclusivel/y religious, charitable, etc., contributions of \$1,000 or less</i> for the year (Enter this information once See instructions) ► \$ Use duplicate copies of Part III if additional space is needed			
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
<hr/> <hr/> <hr/>			
(e) Transfer of gift			
Transferee's name, address, and ZIP 4		Relationship of transferor to transferee	
<hr/> <hr/>		<hr/> <hr/>	
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
<hr/> <hr/> <hr/>			
(e) Transfer of gift			
Transferee's name, address, and ZIP 4		Relationship of transferor to transferee	
<hr/> <hr/>		<hr/> <hr/>	
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
<hr/> <hr/> <hr/>			
(e) Transfer of gift			
Transferee's name, address, and ZIP 4		Relationship of transferor to transferee	
<hr/> <hr/>		<hr/> <hr/>	
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
<hr/> <hr/> <hr/>			
(e) Transfer of gift			
Transferee's name, address, and ZIP 4		Relationship of transferor to transferee	
<hr/> <hr/>		<hr/> <hr/>	

Form 4562

Depreciation and Amortization
(Including Information on Listed Property)

OMB No 1545-0172

2011

Department of the Treasury
Internal Revenue Service (99)

► See separate instructions. ► Attach to your tax return.

Attachment
Sequence No 179Name(s) shown on return
MEDICAL SOCIETY FOUNDATIONBusiness or activity to which this form relates
INDIRECT DEPRECIATIONIdentifying number
38-2872664**Part I Election To Expense Certain Property Under Section 179****Note:** If you have any listed property, complete Part V before you complete Part I.

1 Maximum amount (see instructions)	1	500,000
2 Total cost of section 179 property placed in service (see instructions)	2	
3 Threshold cost of section 179 property before reduction in limitation (see instructions)	3	2,000,000
4 Reduction in limitation Subtract line 3 from line 2 If zero or less, enter -0-	4	
5 Dollar limitation for tax year Subtract line 4 from line 1 If zero or less, enter -0- If married filing separately, see instructions	5	

6	(a) Description of property	(b) Cost (business use only)	(c) Elected cost	
7 Listed property Enter the amount from line 29	7			
8 Total elected cost of section 179 property Add amounts in column (c), lines 6 and 7	8			
9 Tentative deduction Enter the smaller of line 5 or line 8	9			
10 Carryover of disallowed deduction from line 13 of your 2010 Form 4562	10			
11 Business income limitation Enter the smaller of business income (not less than zero) or line 5 (see instructions)	11			
12 Section 179 expense deduction Add lines 9 and 10, but do not enter more than line 11	12			
13 Carryover of disallowed deduction to 2012 Add lines 9 and 10, less line 11 ►	13			

Note: Do not use Part II or Part III below for listed property. Instead, use Part V.**Part II Special Depreciation Allowance and Other Depreciation (Do not include listed property.) (See instructions.)**

14 Special depreciation allowance for qualified property (other than listed property) placed in service during the tax year (see instructions)	14	
15 Property subject to section 168(f)(1) election	15	
16 Other depreciation (including ACRS)	16	1,280

Part III MACRS Depreciation (Do not include listed property.) (See instructions.)**Section A**

17 MACRS deductions for assets placed in service in tax years beginning before 2011	17	
18 If you are electing to group any assets placed in service during the tax year into one or more general asset accounts, check here ►		

Section B—Assets Placed in Service During 2011 Tax Year Using the General Depreciation System

(a) Classification of property	(b) Month and year placed in service	(c) Basis for depreciation (business/investment use only—see instructions)	(d) Recovery period	(e) Convention	(f) Method	(g) Depreciation deduction
19a 3-year property						
b 5-year property						
c 7-year property						
d 10-year property						
e 15-year property						
f 20-year property						
g 25-year property			25 yrs		S/L	
h Residential rental property			27 5 yrs	MM	S/L	
			27 5 yrs	MM	S/L	
i Nonresidential real property			39 yrs	MM	S/L	
				MM	S/L	

Section C—Assets Placed in Service During 2011 Tax Year Using the Alternative Depreciation System

20a Class life					S/L	
b 12-year			12 yrs		S/L	
c 40-year			40 yrs	MM	S/L	

Part IV Summary (see instructions)

21 Listed property Enter amount from line 28	21	
22 Total Add amounts from line 12, lines 14 through 17, lines 19 and 20 in column (g), and line 21 Enter here and on the appropriate lines of your return Partnerships and S corporations—see instructions	22	1,280
23 For assets shown above and placed in service during the current year, enter the portion of the basis attributable to section 263A costs	23	

Part V

Listed Property (Include automobiles, certain other vehicles, certain computers, and property used for entertainment, recreation, or amusement.)

Note: For any vehicle for which you are using the standard mileage rate or deducting lease expense, complete **only** 24a, 24b, columns (a) through (c) of Section A, all of Section B, and Section C if applicable.

Section A—Depreciation and Other Information (Caution: See the instructions for limits for passenger automobiles.)

24a Do you have evidence to support the business/investment use claimed? Yes No **24b** If "Yes," is the evidence written? Yes No

(a) Type of property (list vehicles first)	(b) Date placed in service	(c) Business/investment use percentage	(d) Cost or other basis	(e) Basis for depreciation (business/investment use only)	(f) Recovery period	(g) Method/Convention	(h) Depreciation/deduction	(i) Elected section 179 cost

25 Special depreciation allowance for qualified listed property placed in service during the tax year and used more than 50% in a qualified business use (see instructions) **25**

	%							
	%							
	%							

26 Property used more than 50% in a qualified business use

	%							
	%							
	%							

27 Property used 50% or less in a qualified business use

	%				S/L -			
	%				S/L -			
	%				S/L -			

28 Add amounts in column (h), lines 25 through 27 Enter here and on line 21, page 1 **28**

29 Add amounts in column (i), line 26 Enter here and on line 7, page 1 **29**

Section B—Information on Use of Vehicles

Complete this section for vehicles used by a sole proprietor, partner, or other "more than 5% owner," or related person

If you provided vehicles to your employees, first answer the questions in Section C to see if you meet an exception to completing this section for those vehicles

30 Total business/investment miles driven during the year (do not include commuting miles)	(a) Vehicle 1		(b) Vehicle 2		(c) Vehicle 3		(d) Vehicle 4		(e) Vehicle 5		(f) Vehicle 6	
	Yes	No										
31 Total commuting miles driven during the year												
32 Total other personal (noncommuting) miles driven												
33 Total miles driven during the year Add lines 30 through 32												
34 Was the vehicle available for personal use during off-duty hours?												
35 Was the vehicle used primarily by a more than 5% owner or related person?												
36 Is another vehicle available for personal use?												

Section C—Questions for Employers Who Provide Vehicles for Use by Their Employees

Answer these questions to determine if you meet an exception to completing Section B for vehicles used by employees who are not more than 5% owners or related persons (see instructions)

37 Do you maintain a written policy statement that prohibits all personal use of vehicles, including commuting, by your employees?													Yes	No
38 Do you maintain a written policy statement that prohibits personal use of vehicles, except commuting, by your employees? See the instructions for vehicles used by corporate officers, directors, or 1% or more owners														
39 Do you treat all use of vehicles by employees as personal use?														
40 Do you provide more than five vehicles to your employees, obtain information from your employees about the use of the vehicles, and retain the information received?														
41 Do you meet the requirements concerning qualified automobile demonstration use? (See instructions)														

Note: If your answer to 37, 38, 39, 40, or 41 is "Yes," do not complete Section B for the covered vehicles

Part VI	Amortization					
(a) Description of costs	(b) Date amortization begins	(c) Amortizable amount	(d) Code section	(e) Amortization period or percentage	(f) Amortization for this year	
42 Amortization of costs that begins during your 2011 tax year (see instructions)						

43 Amortization of costs that began before your 2011 tax year **43**

44 Total. Add amounts in column (f) See the instructions for where to report **44**

TY 2011 Accounting Fees Schedule

Name: MEDICAL SOCIETY FOUNDATION

EIN: 38-2872664

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
ACCOUNTING FEES	2,082	1,249		833

TY 2011 Compensation Explanation

Name: MEDICAL SOCIETY FOUNDATION

EIN: 38-2872664

Person Name	Explanation
PETER LEVINE	
ALLEN TURCKE MD	
ROBERT SODERSTROM	
EDWIN GULLEKSON	
JAGDISH SHAH	
SHAFI AHMED MD	
SAMASANDRAPALYA KIRAN	
WALTER GRIFFIN	
CHERYL THOMS	

Note: To capture the full content of this document, please select landscape mode (11" x 8.5") when printing.

TY 2011 Depreciation Schedule

Name: MEDICAL SOCIETY FOUNDATION

EIN: 38-2872664

Description of Property	Date Acquired	Cost or Other Basis	Prior Years' Depreciation	Computation Method	Rate / Life (# of years)	Current Year's Depreciation Expense	Net Investment Income	Adjusted Net Income	Cost of Goods Sold Not Included
FURNITURE	1999-04-01	6,129	6,129	S/L	7 0000				
CREDENZA	2000-01-04	312	312	S/L	7 0000				
FURNITURE	2001-02-12	1,619	1,619	S/L	7 0000				
FURNITURE	2005-06-21	3,151	2,850	S/L	7 0000	301			
CONFERENCE ROOM REMODEL	2005-09-01	14,698	6,043	S/L	15 0000	979			
COMPUTER	2004-11-19	1,225	1,225	S/L	5 0000				
COPIER	2004-07-01	6,500	6,500	S/L	7 0000				

Note: To capture the full content of this document, please select landscape mode (11" x 8.5") when printing.

TY 2011 Gain/Loss from Sale of Other Assets Schedule

Name: MEDICAL SOCIETY FOUNDATION

EIN: 38-2872664

Name	Date Acquired	How Acquired	Date Sold	Purchaser Name	Gross Sales Price	Basis	Basis Method	Sales Expenses	Total (net)	Accumulated Depreciation
AMGEN INC	2009-05	PURCHASE	2011-11		695	603			92	
AMGEN INC	2009-05	PURCHASE	2011-11		289	283			6	
PHILIP MORRIS INTERNATIONAL	2009-05	PURCHASE	2011-11		1,516	842			674	
AMGEN INC	2011-03	PURCHASE	2011-12		900	800			100	
AMGEN INC	2011-03	PURCHASE	2011-12		1,200	1,059			141	
AMGEN INC	2011-03	PURCHASE	2011-12		300	264			36	
AMGEN INC	2010-05	PURCHASE	2011-12		1,440	1,356			84	
AMGEN INC	2010-05	PURCHASE	2011-12		600	529			71	
MOTOROLA SOLUTIONS INC COM NEW	2009-02	PURCHASE	2011-12		235	79			156	
MOTOROLA SOLUTIONS INC COM NEW	2009-05	PURCHASE	2011-12		607	313			294	
HOME RETAIL GROUP PLC	2011-03	PURCHASE	2012-01		324	649			-325	
HESS CORPORATION	2007-08	PURCHASE	2012-01		290	289			1	
HESS CORPORATION	2007-04	PURCHASE	2012-01		678	681			-3	
HESS CORPORATION	2007-08	PURCHASE	2012-01		283	289			-6	
VIACOM INC CL B	2009-05	PURCHASE	2012-01		596	291			305	
TNT EXPRESS NV ADR	2011-09	PURCHASE	2012-02		2,536	1,602			934	
TNT EXPRESS NV ADR	2011-09	PURCHASE	2012-02		1,277	830			447	
TNT EXPRESS NV ADR	2011-09	PURCHASE	2012-02		929	623			306	
TNT EXPRESS NV ADR	2011-09	PURCHASE	2012-02		174	116			58	
KOREA ELEC PWR CORP	2009-05	PURCHASE	2012-02		793	807			-14	
MOTOROLA SOLUTIONS INC COM NEW	2009-05	PURCHASE	2012-02		235	120			115	
MOTOROLA SOLUTIONS INC COM NEW	2009-05	PURCHASE	2012-02		140	72			68	
SOCIETE GENERALE	2009-05	PURCHASE	2012-02		364	652			-288	
SOCIETE GENERALE	2010-05	PURCHASE	2012-02		562	778			-216	
SOCIETE GENERALE	2010-05	PURCHASE	2012-02		246	327			-81	
TOYOTA MTR CORP	2010-09	PURCHASE	2012-02		658	559			99	
UNION PACIFIC CORP	2009-05	PURCHASE	2012-02		1,743	728			1,015	
VIACOM INC	2009-05	PURCHASE	2012-02		239	112			127	
VIACOM INC	2009-05	PURCHASE	2012-02		338	157			181	
LINCOLN NATL CORP IND	2011-02	PURCHASE	2012-03		271	297			-26	

Name	Date Acquired	How Acquired	Date Sold	Purchaser Name	Gross Sales Price	Basis	Basis Method	Sales Expenses	Total (net)	Accumulated Depreciation
LINCOLN NATL CORP IND	2011-02	PURCHASE	2012-03		541	593			-52	
LINCOLN NATL CORP IND	2011-02	PURCHASE	2012-03		269	297			-28	
MOTOROLA SOLUTIONS INC	2009-05	PURCHASE	2012-03		252	120			132	
MOTOROLA SOLUTIONS INC	2009-05	PURCHASE	2012-03		403	193			210	
MOTOROLA SOLUTIONS INC	2011-08	PURCHASE	2012-04		152	121			31	
GENWORTH FINANCIAL INC CL A	2008-01	PURCHASE	2012-04		141	547			-406	
GENWORTH FINANCIAL INC CL A	2006-06	PURCHASE	2012-04		283	1,516			-1,233	
GENWORTH FINANCIAL INC CL A	2006-12	PURCHASE	2012-04		31	169			-138	
GENWORTH FINANCIAL INC CL A	2008-09	PURCHASE	2012-04		68	178			-110	
GENWORTH FINANCIAL INC CL A	2008-09	PURCHASE	2012-04		169	454			-285	
GENWORTH FINANCIAL INC CL A	2010-10	PURCHASE	2012-04		393	724			-331	
GENWORTH FINANCIAL INC CL A	2010-11	PURCHASE	2012-04		12	23			-11	
GENWORTH FINANCIAL INC CL A	2010-11	PURCHASE	2012-04		61	113			-52	
GENWORTH FINANCIAL INC CL A	2010-11	PURCHASE	2012-04		90	169			-79	
GENWORTH FINANCIAL INC CL A	2010-11	PURCHASE	2012-04		88	169			-81	
GENWORTH FINANCIAL INC CL A	2010-11	PURCHASE	2012-04		89	169			-80	
GENWORTH FINANCIAL INC CL A	2010-11	PURCHASE	2012-04		131	248			-117	
MOTOROLA SOLUTIONS INC	2009-05	PURCHASE	2012-04		272	128			144	
MOTOROLA SOLUTIONS INC	2010-02	PURCHASE	2012-04		494	248			246	
MOTOROLA SOLUTIONS INC	2010-02	PURCHASE	2012-04		254	128			126	
PERUSAHAAN PERSEROAN TELEKOMUNIKASI	2011-02	PURCHASE	2012-04		517	502			15	
PERUSAHAAN PERSEROAN TELEKOMUNIKASI	2011-02	PURCHASE	2012-04		753	736			17	
PERUSAHAAN PERSEROAN TELEKOMUNIKASI	2011-02	PURCHASE	2012-04		205	204			1	
RAYTEHON COMPANY	2009-05	PURCHASE	2012-04		530	447			83	
RAYTEHON COMPANY	2009-05	PURCHASE	2012-04		265	223			42	
RAYTEHON COMPANY	2009-05	PURCHASE	2012-04		325	268			57	
SEKISUI HOUSE	2006-06	PURCHASE	2012-04		749	1,092			-343	
SEKISUI HOUSE	2007-09	PURCHASE	2012-04		213	277			-64	
PITNEY BOWES	2009-05	PURCHASE	2012-05		259	342			-83	
CA INC	2009-03	PURCHASE	2012-06		452	276			176	

Name	Date Acquired	How Acquired	Date Sold	Purchaser Name	Gross Sales Price	Basis	Basis Method	Sales Expenses	Total (net)	Accumulated Depreciation
CA INC	2009-05	PURCHASE	2012-06		1,198	783			415	
PFIZER INCORPORATED	2009-05	PURCHASE	2012-06		2,274	1,722			552	
LOEWS CORPORATION	2009-03	PURCHASE	2012-07		41	23			18	
LOEWS CORPORATION	2009-05	PURCHASE	2012-07		164	104			60	
LOEWS CORPORATION	2009-05	PURCHASE	2012-07		208	131			77	
MERCK & CO INC NEW	2009-05	PURCHASE	2012-07		1,117	687			430	
MERCK & CO	2010-05	PURCHASE	2012-07		258	204			54	
PERUSAHAAN PERSEROAN TELEKOMUNIKASI	2011-02	PURCHASE	2012-07		529	510			19	
PERUSAHAAN PERSEROAN TELEKOMUNIKASI	2011-02	PURCHASE	2012-07		512	510			2	
PFIZER INCORPORATED	2010-03	PURCHASE	2012-07		142	103			39	
PFIZER INCORPORATED	2010-04	PURCHASE	2012-07		1,607	1,156			451	
PITNEY BOWES	2009-05	PURCHASE	2012-07		131	228			-97	
PITNEY BOWES	2009-05	PURCHASE	2012-07		119	205			-86	
AGEAS SPONSORED ADR	2012-08	PURCHASE	2012-08		11				11	
PITNEY BOWES	2012-01	PURCHASE	2012-08		292	428			-136	
PITNEY BOWES	2012-01	PURCHASE	2012-08		528	739			-211	
AON PLC CLASS A	2007-08	PURCHASE	2012-08		309	294			15	
CARREFOUR SA SPONS ADR	2009-10	PURCHASE	2012-08		1,061	2,276			-1,215	
CARREFOUR SA SPONS ADR	2009-10	PURCHASE	2012-08		322	702			-380	
PITNEY BOWES	2009-05	PURCHASE	2012-08		239	411			-172	
SANOFI ADR	2008-04	PURCHASE	2012-08		331	307			24	
SANOFI ADR	2008-04	PURCHASE	2012-08		331	305			26	
VIACOM INC CL B	2009-05	PURCHASE	2012-08		926	403			523	
VODAFONE GROUP PLC SPONS	2006-08	PURCHASE	2012-08		357	263			94	
VODAFONE GROUP PLC SPONS	2008-07	PURCHASE	2012-08		208	181			27	
VODAFONE GROUP PLC SPONS	2008-09	PURCHASE	2012-08		417	303			114	
WELLS FARGO COMPANY	2006-06	PURCHASE	2012-08		406	412			-6	
AGEAS SPONSORED ADR	2012-04	PURCHASE	2012-09		970	775			195	
AMERICAN INTL GROUP	2012-05	PURCHASE	2012-09		624	561			63	
ING GROEP	2012-05	PURCHASE	2012-09		718	619			99	

Name	Date Acquired	How Acquired	Date Sold	Purchaser Name	Gross Sales Price	Basis	Basis Method	Sales Expenses	Total (net)	Accumulated Depreciation
BEST BUY CO INC	2012-04	PURCHASE	2012-09		361	432			-71	
BEST BUY CO INC	2012-04	PURCHASE	2012-09		271	325			-54	
BEST BUY CO INC	2012-04	PURCHASE	2012-09		271	330			-59	
BEST BUY CO INC	2012-04	PURCHASE	2012-09		181	221			-40	
BEST BUY CO INC	2012-05	PURCHASE	2012-09		668	806			-138	
BEST BUY CO INC	2012-07	PURCHASE	2012-09		144	154			-10	
MOSAIC COMPANY	2012-02	PURCHASE	2012-09		530	495			35	
PACCAR INC	2011-09	PURCHASE	2012-09		353	312			41	
POLYUS GOLD INTL	2011-11	PURCHASE	2012-09		250	251			-1	
UBS AG REG	2012-08	PURCHASE	2012-09		434	544			-110	
AON PLC	2009-09	PURCHASE	2012-09		361	344			17	
ASTRAZENECA PLC	2010-02	PURCHASE	2012-09		606	569			37	
ASTRAZENECA PLC	2010-02	PURCHASE	2012-09		936	876			60	
ASTRAZENECA PLC	2010-02	PURCHASE	2012-09		2,556	2,408			148	
ASTRAZENECA PLC	2010-02	PURCHASE	2012-09		187	175			12	
BARRICK GOLD	2009-05	PURCHASE	2012-09		914	883			31	
CVS CAREMARK	2009-11	PURCHASE	2012-09		457	288			169	
CAMECO CORP	2011-03	PURCHASE	2012-09		815	1,193			-378	
CARREFOUR SA	2009-10	PURCHASE	2012-09		223	501			-278	
CARREFOUR SA	2009-10	PURCHASE	2012-09		61	132			-71	
CISCO SYSTEMS INC	2011-05	PURCHASE	2012-09		552	491			61	
CA INC	2009-05	PURCHASE	2012-09		1,651	1,096			555	
EAST JAPAN RAILWAY CO	2011-03	PURCHASE	2012-09		216	233			-17	
FINMECCANICA SPA	2010-08	PURCHASE	2012-09		826	2,108			-1,282	
FINMECCANICA SPA	2010-11	PURCHASE	2012-09		213	562			-349	
GAZPROM OAO	2010-10	PURCHASE	2012-09		438	493			-55	
GOLDMAN SACHS	2010-08	PURCHASE	2012-09		548	723			-175	
HALLIBURTON COMPANY	2008-11	PURCHASE	2012-09		227	123			104	
HARTFORD FINL SVCS	2006-06	PURCHASE	2012-09		346	1,681			-1,335	
HARTFORD FINL SVCS	2007-07	PURCHASE	2012-09		182	963			-781	

Name	Date Acquired	How Acquired	Date Sold	Purchaser Name	Gross Sales Price	Basis	Basis Method	Sales Expenses	Total (net)	Accumulated Depreciation
HARTFORD FINL SVCS	2008-09	PURCHASE	2012-09		36	127			-91	
HOME RETAIL GROUP	2011-03	PURCHASE	2012-09		263	547			-284	
HOME RETAIL GROUP	2011-06	PURCHASE	2012-09		471	911			-440	
INGERSOLL RAND	2006-12	PURCHASE	2012-09		227	187			40	
KINROSS GOLD CORP	2010-02	PURCHASE	2012-09		649	1,269			-620	
LOEWS CORPORATION	2009-05	PURCHASE	2012-09		206	131			75	
LOEWS CORPORATION	2009-05	PURCHASE	2012-09		411	261			150	
MS&AD INS GROUP HLDGS	2007-10	PURCHASE	2012-09		217	516			-299	
MERCK & CO INC	2010-05	PURCHASE	2012-09		392	306			86	
METLIFE INC	2008-10	PURCHASE	2012-09		273	227			46	
METLIFE INC	2009-05	PURCHASE	2012-09		410	365			45	
MICROSOFT CORP	2009-05	PURCHASE	2012-09		791	530			261	
JPMORGAN CHASE	2006-06	PURCHASE	2012-09		372	426			-54	
NOBLE ENERGY	2009-05	PURCHASE	2012-09		345	223			122	
NOKIA CORP	1990-07	PURCHASE	2012-09		473	2,217			-1,744	
NOKIA CORP	2009-11	PURCHASE	2012-09		238	1,186			-948	
NOKIA CORP	2010-04	PURCHASE	2012-09		140	610			-470	
NOKIA CORP	2011-02	PURCHASE	2012-09		230	773			-543	
NOKIA CORP	2011-03	PURCHASE	2012-09		132	379			-247	
NOKIA CORP	2011-05	PURCHASE	2012-09		266	668			-402	
OCCIDENTAL PETE CORP	2010-03	PURCHASE	2012-09		578	571			7	
NEWCREST MINING	2006-07	PURCHASE	2012-09		25	17			8	
NEWCREST MINING	2006-07	PURCHASE	2012-09		355	221			134	
NEWCREST MINING	2008-08	PURCHASE	2012-09		406	338			68	
NEWCREST MINING	2008-08	PURCHASE	2012-09		60	42			18	
NEWCREST MINING	2008-09	PURCHASE	2012-09		271	170			101	
NEWCREST MINING	2009-12	PURCHASE	2012-09		90	92			-2	
PFIZER INCORPORATED	2010-04	PURCHASE	2012-09		191	136			55	
PFIZER INCORPORATED	2010-04	PURCHASE	2012-09		167	118			49	
PHILIP MORRIS INTL	2009-05	PURCHASE	2012-09		357	168			189	

Name	Date Acquired	How Acquired	Date Sold	Purchaser Name	Gross Sales Price	Basis	Basis Method	Sales Expenses	Total (net)	Accumulated Depreciation
RAYTHEON COMPANY	2009-05	PURCHASE	2012-09		456	357			99	
SANOFI ADR	2008-09	PURCHASE	2012-09		288	244			44	
SANOFI ADR	2009-05	PURCHASE	2012-09		123	94			29	
SEKISUI HOUSE	2007-09	PURCHASE	2012-09		37	48			-11	
SEKISUI HOUSE	2008-09	PURCHASE	2012-09		335	320			15	
SEKISUI HOUSE	2009-05	PURCHASE	2012-09		47	50			-3	
SEVEN & I HOLDINGS	2009-05	PURCHASE	2012-09		363	304			59	
SHISEIDO CO LTD	2009-05	PURCHASE	2012-09		192	246			-54	
SWISSCOM AG	2006-06	PURCHASE	2012-09		804	658			146	
TIME WARNER INC	2010-10	PURCHASE	2012-09		425	315			110	
TIME WARNER INC	2010-10	PURCHASE	2012-09		510	379			131	
TOYOTA MTR CORP	2010-09	PURCHASE	2012-09		393	350			43	
UNION PACIFIC	2009-05	PURCHASE	2012-09		480	194			286	
UNUM GROUP	2010-05	PURCHASE	2012-09		350	405			-55	
VIACOM INCL CL B	2009-05	PURCHASE	2012-09		297	134			163	
WELLS FARGO COMPANY	2006-06	PURCHASE	2012-09		440	446			-6	
WELLS FARGO COMPANY	2006-06	PURCHASE	2012-09		640	618			22	
CA INC	2009-05	PURCHASE	2012-10		640	435			205	
KINROSS GOLD CORP	2010-02	PURCHASE	2012-10		353	574			-221	
KINROSS GOLD CORP	2010-08	PURCHASE	2012-10		246	356			-110	

TY 2011 Investments Corporate Stock Schedule

Name: MEDICAL SOCIETY FOUNDATION

EIN: 38-2872664

Name of Stock	End of Year Book Value	End of Year Fair Market Value
PUBLICLY TRADED SECURITIES	191,644	191,644

TY 2011 Land, Etc. Schedule**Name:** MEDICAL SOCIETY FOUNDATION**EIN:** 38-2872664

Category / Item	Cost / Other Basis	Accumulated Depreciation	Book Value	End of Year Fair Market Value
FURNITURE & FIXTURES	33,634	25,958	7,676	
LEASEHOLD IMPROVEMENTS				

TY 2011 Legal Fees Schedule

Name: MEDICAL SOCIETY FOUNDATION

EIN: 38-2872664

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
LEGAL	45			

TY 2011 Other Expenses Schedule

Name: MEDICAL SOCIETY FOUNDATION

EIN: 38-2872664

Description	Revenue and Expenses per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
EXPENSES				
SUBCONTRACT EXPENSES	26,400			26,400
COMMUNICATIONS	1,538			1,538

TY 2011 Other Increases Schedule

Name: MEDICAL SOCIETY FOUNDATION**EIN:** 38-2872664

Description	Amount
UNREALIZED GAIN/LOSS	4,378

TY 2011 Other Professional Fees Schedule

Name: MEDICAL SOCIETY FOUNDATION**EIN:** 38-2872664

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
INVESTMENT FEES	4,223	4,223		

TY 2011 Taxes Schedule

Name: MEDICAL SOCIETY FOUNDATION**EIN:** 38-2872664

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
FOREIGN TAX ON DIVIDENDS	401	401		