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Form : 990-PF

CHANGE OF ACCOUNTING PERIOD Return of Private Foundation

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

OMB No 1545-0052

Department of the Treasury Internal Revenue Service Note. The foundation may be able to use a copy of this return to satisfy state reporting requirements NOV 1, 2011 OCT 31, 2012 For calendar year 2011 or tax year beginning and ending Name of foundation A Employer identification number 45-3660867 SOCIETY OF THE TRINITARIAN FAMILY Number and street (or P O box number if mail is not delivered to street address) Room/suite B Telephone number 734-751-2587 3650 KNOLL CREEK COURT City or town, state, and ZIP code C If exemption application is pending, check here ANN ARBOR, MI 48105 X Initial return G Check all that apply Initial return of a former public charity D 1. Foreign organizations, check here Final return Amended return Foreign organizations meeting the 85% test, check here and attach computation Address change Name change X Section 501(c)(3) exempt private foundation H Check type of organization E If private foundation status was terminated Section 4947(a)(1) nonexempt charitable trust Uther taxable private foundation under section 507(b)(1)(A), check here I Fair market value of all assets at end of year | J | Accounting method X Cash Accrual If the foundation is in a 60-month termination Other (specify) (from Part II, col. (c), line 16) under section 507(b)(1)(B), check here 676 . (Part I, column (d) must be on cash basis.) **▶**\$ Analysis of Revenue and Expenses Part I (b) Net investment (c) Adjusted net (d) Disbursements (a) Revenue and (The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a)) chantable purposes (cash basis only) expenses per books income income 29,450 Contributions, gifts, grants, etc., received Check In the foundation is not required to attach Sch. B Interest on savings and temporary cash investments SCANNED JAN 1 7 2013 Dividends and interest from securities 5a Gross rents b Net rental income or (loss) 6a Net gain or (loss) from sale of assets not on line 10 Gross sales price for all assets on line 6a 0. 7 Capital gain net income (from Part IV, line 2) Net short-term capital gain Income modifications 10a Gross sales less returns and allowances b Less Cost of goods sold c Gross profit or (loss) 11 Other income 29,450 0 O. Total. Add lines 1 through 11 0. 0. Compensation of officers, directors, trustees, etc Other employee salaries and wages 15 Pension plans, employee benefits 2,790. 0. STMT 1 0. 0. 16a Legal fees **b** Accounting fees c Other professional fees and Administrative 17 Interest Ö 6 JAN **1 4** 2013 18 Taxes Depreciation and depletion 19 20 Occupancy 21 Travel, conferences, 22 Printing and publications STMT 2 884. 0 0. 23 0. Operating Other expenses 24 Total operating and administrative 3,674. expenses. Add lines 13 through 23 0 0. 25,100. 25,100 25 Contributions, gifts, grants paid 26 Total expenses and disbursements. 28,774 0 25,100. 0 Add lines 24 and 25 Subtract line 26 from line 12 676 2 Excess of revenue over expenses and disbursements 0 b Net investment income (if negative, enter -0-) 0 C Adjusted net income (if negative, enter -0-)

LHA For Paperwork Reduction Act Notice, see instructions.

428597.1

Fol	rm 99	00-PF (2011) SOCIETY OF THE TRINITAR	RIAN FAMILY	45-3	3660867 Page 2
		Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only	Beginning of year	End of	
	dri	Column should be for end-of-year amounts only	(a) Book Value	(b) Book Value	(c) Fair Market Value
	1	Cash - non-interest-bearing		676.	676.
	2	Savings and temporary cash investments			
	3	Accounts receivable		1	, , , , , , , , , , , , , , , , , , , ,
		Less allowance for doubtful accounts			·
	4	Pledges receivable ►]		1 1111111111111111111111111111111111111
		Less allowance for doubtful accounts			
	5	Grants receivable			
	6	Receivables due from officers, directors, trustees, and other			
		disqualified persons .			
	7	Other notes and loans receivable			
		Less allowance for doubtful accounts			
ţ	8	Inventories for sale or use			***************************************
Assets	9	Prepaid expenses and deferred charges			
Ä	10a	Investments - U S and state government obligations			
	b	Investments - corporate stock		-	
	C	Investments - corporate bonds			
	11	Investments - land, buildings, and equipment basis	7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7		
		Less: accumulated depreciation]	
	12	Investments - mortgage loans			
	13	Investments - other			
	14	Land, buildings, and equipment basis	"		
		Less. accumulated depreciation]	1	
	15	Other assets (describe ►			
		· · · · · · · · · · · · · · · · · · ·			
	16	Total assets (to be completed by all filers)	0.	676.	676.
	17	Accounts payable and accrued expenses			
	18	Grants payable			
Ş	19	Deferred revenue			
Liabilities	20	Loans from officers, directors, trustees, and other disqualified persons			
abi	21	Mortgages and other notes payable			
	22	Other liabilities (describe)	<u> </u>		
	23	Total liabilities (add lines 17 through 22)	0.	0.	
		Foundations that follow SFAS 117, check here			
		and complete lines 24 through 26 and lines 30 and 31.			
Ses	24	Unrestricted			
ă	25	Temporarily restricted			
Ba	26	Permanently restricted			
Net Assets or Fund Balances		Foundations that do not follow SFAS 117, check here			
Ę		and complete lines 27 through 31.			
50	27	Capital stock, trust principal, or current funds	0.	0.	
set	28	Paid-in or capital surplus, or land, bldg, and equipment fund	0.	0.	
AS	29	Retained earnings, accumulated income, endowment, or other funds	0.	676.	
ē	30	Total net assets or fund balances	0.	676.	
_				_	
	31	Total liabilities and net assets/tund balances	0.	676.	

L	art	Analysis of Changes in Net Assets or Fund B	balances		
1	Tota	net assets or fund balances at beginning of year - Part II, column (a), line	30		
	(mus	st agree with end-of-year figure reported on prior year's return)		1	0.
2	•	r amount from Part I, line 27a		2	676.
		r increases not included in line 2 (itemize)		3	0.
4	Add	lines 1, 2, and 3		4	676.
5	Decr	eases not included in line 2 (itemize)		5	0.
6	<u>To</u> ta	net assets or fund balances at end of year (line 4 minus line 5) - Part II, c	olumn (b), line 30	6	676.
			— ——— ————————————————————————————————		Form 900-DE (2011)

12-02-11

(a) List and desc 2-story brick w	onbe the kind(s) of property sold (e arehouse, or common stock, 200 s	g , real estate, hs MLC Co)	j P	How acquired - Purchase) - Donation	(c) Date acquired (mo , day, yr)	(d) Date sold (mo , day, yr)
1a						
b NC	NE					
<u> </u>						
<u>d</u>						
8	T		L			<u> </u>
(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other plus expense of			(h) Gain or (loss) (e) plus (f) minus (
<u>a</u>		<u> </u>				
<u> </u>						
<u>C</u>						
<u>d</u>						
<u>e </u>						
Complete only for assets showl	ng gain in column (h) and owned b				(I) Gains (Col. (h) gain	
(i) F M V as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col over col (j), if a		C	ol (k), but not less than Losses (from col (h))
a		ļ				
<u> </u>		ļ ,				
<u> </u>						
<u> </u>		 		-		
<u> </u>		<u> </u>				
Capital gain net income or (net ca	apital loss) { If gain, also ent If (loss), enter-	er in Part I, line 7 0- in Part I, line 7	}	2		
Net short-term capital gain or (lo	ss) as defined in sections 1222(5) a				· ·	- 1
If gain, also enter in Part I, line 8		1110 (0)	J			
If (loss), enter -0- in Part I, line 8			<u> </u>	3		
Part V Qualification L	Inder Section 4940(e) fo	r Reduced Tax or	Net Inv	estment In	come	
"Yes," the foundation does not qua	ction 4942 tax on the distributable a	complete this part	•			Yes N
	each column for each year, see ins	tructions before making an				74/
(a) Base period years Calendar year (or tax year beginn	ing in) Adjusted qualifying d	stributions Net valu	e of noncha	ntable-use asset	s Distrib s (col (b) div	(d) oution ratio ided by col (c))
2010				7.7.		
2009						
2008						
2007			 			
2006					_	
-						
Total of line 1, column (d)	F				2	
Average distribution ratio for the the foundation has been in existe	5-year base period - divide the tota ince if less than 5 years	I ON line 2 by 5, or by the n	umber of ye	ears	3	
Enter the net value of noncharital	ble-use assets for 2011 from Part X	, line 5			4	
Multiply line 4 by line 3					5	
Enter 1% of net investment incor	me (1% of Part I, line 27b)	•			6	
Add lines 5 and 6		•			7	<u></u>
Enter qualifying distributions from					8	
If line 8 is equal to or greater that See the Part VI instructions	n line 7, check the box in Part VI, lir	e 1b, and complete that pa	irt using a 1	% tax rate		

	990-PF (2011) SOCIETY OF THE TRINITARIAN FAMILY At VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4		3660		otio	Page 4
	Exempt operating foundations described in section 4940(d)(2), check here and enter "N/A" on line 1	340	300 11	1511 4	CHO	13/
10	Date of ruling or determination letter (attach copy of letter if necessary-see instructions)					
h	Domestic foundations that meet the section 4940(e) requirements in Part V, check here and enter 1%	1				0.
	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)					
	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				0.
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					
	2011 estimated tax payments and 2010 overpayment credited to 2011					
	Exempt foreign organizations - tax withheld at source 6b					
	Tax paid with application for extension of time to file (Form 8868) 6c					
	Backup withholding erroneously withheld 6d					
	Total credits and payments Add lines 6a through 6d	7				0.
8	Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached	8			_	
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed	9				0.
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid	10				
	Enter the amount of line 10 to be Credited to 2012 estimated tax ► Refunded ►	11		-		
	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 participate or intervene	ın	ſ		Yes	No
	any political campaign?		ľ	1a		X
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see instructions for definition)?		Ī	1b		X
	If the answer is "Yes" to 10 or 1b, attach a detailed description of the activities and copies of any materials published	ed or	Ī			
	distributed by the foundation in connection with the activities.		1			
C	Did the foundation file Form 1120-POL for this year?			10		X
d	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year		ľ			
	(1) On the foundation \blacktriangleright \$ 0 • (2) On foundation managers \blacktriangleright \$					
е	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation					
	managers > \$O.					
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, of	r	i			
	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
b	If "Yes," has it filed a tax return on Form 990-T for this year?	N	/A	4b	_	
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?		ļ	5		X
	If "Yes," attach the statement required by General Instruction T.					
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either		i			
	By language in the governing instrument, or		1			
	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?		1	6	X	
7	Did the foundation have at least \$5,000 in assets at any time during the year?			7	X	
	If "Yes," complete Part II, col. (c), and Part XV.					
8a	Enter the states to which the foundation reports or with which it is registered (see instructions)		<u> </u>			
_	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)		ļ			
_	of each state as required by General Instruction G? If "No," attach explanation			8b	X	
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for cale	ndar	}	_		37
4.0	year 2011 or the taxable year beginning in 2011 (see instructions for Part XIV)? If "Yes," complete Part XIV	mve	ا م	9	v	<u>X</u>
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses S	TMT	3	10	X	

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	Ht 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 instructions)	11		x
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had advisory privileges?			
	If "Yes," attach statement (see instructions)	12		X
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	X	
	Website address ► N/A			
14	The books are in care of ► FRANK CZAJKA Telephone no ►734-75	1-2	587	
	Located at ► 3650 KNOLL CREEK COURT, ANN ARBOR, MI ZIP+4 ► 48		50,	
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - Check here	103	_	$\overline{\Box}$
	and enter the amount of tax-exempt interest received or accrued during the year	M	/A	
16	At any time during calendar year 2011, did the foundation have an interest in or a signature or other authority over a bank,		Yes	No
10		1 1	res	Х
	securities, or other financial account in a foreign country?	16		Δ
	See the instructions for exceptions and filing requirements for Form TD F 90-22 1. If "Yes," enter the name of the foreign	1		
D.	country Country Cart VII-B Statements Regarding Activities for Which Form 4720 May Be Required	Ь		
1.5		T 7	V	NI -
4.	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.	 	Yes	NO
18	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?			
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from)			
	a disqualified person?			
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? Yes X No			
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?			
	(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)?			
	(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)			
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 instructions)? N/A	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?	10		X
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))			
а	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? Yes X No			
	If "Yes," list the years > , , , , ,			
t	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 instructions) N/A	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			
	 ,,,			
3a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time			
	during the year?			
b	o 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.) N/A	3b		
48	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a		X
	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		Х

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Part VII-B Statements Regarding Activities for Which I	Form 4720 May Be F	Required (contin	ued)	
5a During the year did the foundation pay or incur any amount to				
(1) Carry on propaganda, or otherwise attempt to influence legislation (section	n 4945(e))?	Ye	s X No	
(2) Influence the outcome of any specific public election (see section 4955), o	r to carry on, directly or indire	ectly,	į	1 1
any voter registration drive?		Ye	s X No	1 1
(3) Provide a grant to an individual for travel, study, or other similar purposes	?	T Ye	s X No	1 1
(4) Provide a grant to an organization other than a charitable, etc., organizatio	n described in section			1 1
509(a)(1), (2), or (3), or section 4940(d)(2)?		☐ Ye	s X No	
(5) Provide for any purpose other than religious, charitable, scientific, literary,	or educational purposes, or fe	or		1 1
the prevention of cruelty to children or animals?	. , ,		s X No	
b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify und	der the exceptions described i			
section 53 4945 or in a current notice regarding disaster assistance (see instru		•	N/A	5b
Organizations relying on a current notice regarding disaster assistance check h	•		▶□	
c If the answer is "Yes" to question 5a(4), does the foundation claim exemption f		ned		
expenditure responsibility for the grant?		/A 🗌 Ye	s No	
If "Yes," attach the statement required by Regulations section 53 494				
6a Did the foundation, during the year, receive any funds, directly or indirectly, to	` '		1	1 1
a personal benefit contract?	Fay Premiente on	☐ Ya	s X No	1 1
b Did the foundation, during the year, pay premiums, directly or indirectly, on a p	ersonal benefit contract?			6b X
If "Yes" to 6b. file Form 8870.			 	
7a At any time during the tax year, was the foundation a party to a prohibited tax s	shelter transaction?	☐ Ye	s X No	
b If "Yes," did the foundation receive any proceeds or have any net income attribu				7b
Information About Officers Directors Truct		nagers Highly		
Part VIII Paid Employees, and Contractors	ooo, i oanaanon ma	nagoro, mgm,	,	
1 List all officers, directors, trustees, foundation managers and their	compensation.			
	(b) Title, and average	(c) Compensation	(d) Contributions to employee benefit plans	(e) Expense
(a) Name and address	hours per week devoted to position	(If not paid, enter -0-)	and deferred compensation	account, other allowances
FRANK CZAJKA	PRESIDENT SEC			
3650 KNOLL CREEK COURT				
ANN ARBOR , MI 48105	10.00	0.	0.	0.
NANCY CZAJKA	VICE PRESIDEN			
3650 KNOLL CREEK COURT	1102 111201211			
ANN ARBOR , MI 48105	0.25	0.	0.	0.
ANTHONY CZAJKA	ASSISTANT SEC			
3650 KNOLL CREEK COURT				
ANN ARBOR , MI 48105	0.25	٥.	0.	0.
ANN ANDON / HI 40105	0.23		0.	
	-			
2 Compensation of five highest-paid employees (other than those inc	luded on line 1). If none.	enter "NONE."		<u> </u>
	(b) Title, and average		(d) Contributions to	(e) Expense
(a) Name and address of each employee paid more than \$50,000	hours per week devoted to position	(c) Compensation	employee benefit plans and deferred	account, other allowances
NONE	devoted to position		compensation	allowalices
NONE				
	1			
				
	{			
		 		
	-			
	-			
T 1 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 -	<u> </u>	<u> </u>		
Total number of other employees paid over \$50,000	·		<u> </u>	0

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

Part X Minimum Investment Return (All domestic foundations must complete this part. For	oreign foundations, see	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	0.
b Average of monthly cash balances	1b	<u> </u>
c Fair market value of all other assets	10	
d Total (add lines 1a, b, and c)	1d	748.
e Reduction claimed for blockage or other factors reported on lines 1a and		
1c (attach detailed explanation) 1e	0.	
2 Acquisition indebtedness applicable to line 1 assets	2	0.
3 Subtract line 2 from line 1d	3	748.
4 Cash deemed held for charitable activities Enter 1 1/2% of line 3 (for greater amount, see instructions)	4	11.
5 Net value of noncharitable-use assets. Subtract line 4 from line 3 Enter here and on Part V, line 4	5	737.
6 Minimum investment return. Enter 5% of line 5	6	37.
Part XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating four foreign organizations check here and do not complete this part)	ndations and certain	\
1 Minimum investment return from Part X, line 6	1	37.
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)		
c Add lines 2a and 2b	2c	0.
3 Distributable amount before adjustments Subtract line 2c from line 1	3	37.
4 Recoveries of amounts treated as qualifying distributions	4	0.
5 Add lines 3 and 4	5	37.
6 Deduction from distributable amount (see instructions)	6	0.
7 Distributable amount as adjusted Subtract line 6 from line 5 Enter here and on Part XIII, line 1	7	37.
Part XII Qualifying Distributions (see 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	25,100. 0.
b Program-related investments - total from Part IX-B	1b	0.
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)	<u>3</u> b	
4 Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4	4	25,100.
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	5	0.
6 Adjusted qualifying distributions. Subtract line 5 from line 4	6	25,100.
Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the f	oundation qualifies for the	section

4940(e) reduction of tax in those years

Part XIII Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2010	(c) 2010	(d) 2011
1 Distributable amount for 2011 from Part XI,		,		
line 7		•		37.
2 Undistributed income, if any, as of the end of 2011				1 11 - Will 1 1000 - William
a Enter amount for 2010 only			0.	
b Total for prior years	i*!''' *-mf*! '!'! . i.i.i.i.			
		0.		
3 Excess distributions carryover, if any, to 2011			<u>' mala-add''</u>	711111
a From 2006				
b From 2007				
c From 2008				
d From 2009				
e From 2010				
f Total of lines 3a through e	0.			
4 Qualifying distributions for 2011 from				
Part XII, line 4 ▶\$ 25, 100.				
a Applied to 2010, but not more than line 2a			0.	
b Applied to undistributed income of prior				
years (Election required - see instructions)		0.		
c Treated as distributions out of corpus				
(Election required - see instructions)	0.			
d Applied to 2011 distributable amount			''	37.
e Remaining amount distributed out of corpus	25,063.			37.
·	23,003.		.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	0.
5 Excess distributions carryover applied to 2011 (If an amount appears in column (d), the same amount must be shown in column (a))	U •			0.
6 Enter the net total of each column as indicated below:				
a Corpus Add lines 3f, 4c, and 4e Subtract line 5	25,063.			
b Prior years' undistributed income. Subtract				
line 4b from line 2b		0.		
c Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously		0		
assessed		0.		
d Subtract line 6c from line 6b Taxable		0.		
amount - see instructions		0.		
e Undistributed income for 2010 Subtract line			0.	
4a from line 2a Taxable amount - see instr	······	······································	0.	
f Undistributed income for 2011 Subtract				
lines 4d and 5 from line 1. This amount must				0.
be distributed in 2012	······································			
7 Amounts treated as distributions out of				
corpus to satisfy requirements imposed by	0.			
section 170(b)(1)(F) or 4942(g)(3)				
8 Excess distributions carryover from 2006	0.			
not applied on line 5 or line 7				
9 Excess distributions carryover to 2012.	25 062			
Subtract lines 7 and 8 from line 6a	25,063.			
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 25,063.				

Part XIV Private Operating Fo		INITARIAN FO		N/A	660867 Page 10
1 a If the foundation has received a ruling or			m-A, question 9)	N/A	
foundation, and the ruling is effective for					
b Check box to indicate whether the found	•	ū	In section	4942(j)(3) or 4	942(j)(5)
2 a Enter the lesser of the adjusted net	Tax year		Pnor 3 years	1 4042()/(0/ 01	342())(3)
income from Part I or the minimum	(a) 2011	(b) 2010	(c) 2009	(d) 2008	(e) Total
investment return from Part X for					
each year listed					
b 85% of line 2a					
c Qualifying distributions from Part XII,					
line 4 for each year listed					
d Amounts included in line 2c not					
used directly for active conduct of					
exempt activities					
e Qualifying distributions made directly					
for active conduct of exempt activities			B		
Subtract line 2d from line 2c Complete 3a, b, or c for the alternative test relied upon a "Assets" alternative test - enter (1) Value of all assets					
(2) Value of assets qualifying under section 4942(j)(3)(B)(i)			_		
b "Endowment" alternative test - enter 2/3 of minimum investment return shown in Part X, line 6 for each year listed					
c "Support" alternative test - enter					
(1) Total support other than gross investment income (interest, dividends, rents, payments on securities loans (section 512(a)(5)), or royalties)					
(2) Support from general public and 5 or more exempt organizations as provided in section 4942(j)(3)(B)(iii)					
(3) Largest amount of support from					
an exempt organization					
(4) Gross investment income			<u> </u>	1	
Part XV Supplementary Info			if the foundation	n had \$5,000 or m	ore in assets
at any time during the	ne year-see inst	ructions.)			
Information Regarding Foundation List any managers of the foundation who year (but only if they have contributed m SEE STATEMENT 4	have contributed more	e than 2% of the total con section 507(d)(2))	tributions received by the	foundation before the cl	ose of any tax
b List any managers of the foundation who other entity) of which the foundation has			(or an equally large porti	on of the ownership of a	partnership or
NONE					
2 Information Regarding Contribution Check here ▶ ☐ If the foundation on the foundation makes grfts, grants, etc.	nly makes contributions (see instructions) to ind	to preselected charitable ividuals or organizations	organizations and does i under other conditions, c	not accept unsolicited rec omplete items 2a, b, c, ar	uests for funds If ad d
a The name, address, and telephone numb	er of the person to who	om applications should be	e addressed		
CHE CHARENER C					
SEE STATEMENT 5 b The form in which applications should be	e submitted and inform	ation and materials they s	should include		
c Any submission deadlines					
A Laboratoria de la constante		and among the link of the second	. Lundo of 11.	adh an Cand	
d Any restrictions or limitations on awards	, such as by geographic	cai areas, charitable fields	s, kinds of institutions, or	otner factors	

Part XV Supplementary Information				
3 Grants and Contributions Paid During the		Payment		
Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager	Foundation status of	Purpose of grant or contribution	Amount
<u></u>	or substantial contributor	recipient		
a Paid during the year				
MR. AND MS. KLEIN	NONE		FUNERAL EXPENSE	
2627 N. DETTERMAN			ASSISTANCE FOR LOSS OF	
JACKSON , MI 49201			SON	400
CROSS CATHOLIC OUTREACH		PUBLIC CHARITY	FOOD FOR THE POOR	
2700 N. MILITARY TRAIL STE 240				
BOCA RATON , FL 33427-3908			-	500.
JOSEPH CAMPBELL	NONE		NEEDY FATHER - TO	
6601 CHERRY HILL RD			ASSIST IN FUNERAL	
YPSILANTI , MI 48198		 -	COSTS FOR LOSS OF SON	1,000.
ANTHONY COSICA	NONE		ASSIST MAN WITH	
4418 CHAMBERLAIN STREET			CEREBRAL PALSY FOR	
WAYNE , MI 48184		 	TRANSPORATION	1,600.
MORGAN FISH	NONE		ECONOMIC ASSISTANCE TO	
1406 W. CROSS STREET	NONE		NEDDY MAN	
YPSILANTI MI 48197				500,
	ONTINUATION SHE	ET(S)	▶ 3a	25,100.
b Approved for future payment				
NONE				
			-	-
		<u> </u>		
Total			► 3b	0.

Part XVI-A	Analysis	of Income	-Producing	Activities

nter gross amounts unless otherwise indicated	oss amounts unless otherwise indicated Unrelated business income			by section 512, 513, or 514	(e)	
1 Program service revenue	(a) Business code	(b) Amount	(C) Exclu- sion code	(d) Amount	Related or exempt function income	
a			- - - 	-		
b		<u> </u>				
C						
d	1 1					
e	1	·				
f					. <u> </u>	
g Fees and contracts from government agencies					<u>- · - · · · · · · · · · · · · · · · · ·</u>	
Membership dues and assessments						
Interest on savings and temporary cash investments						
Dividends and interest from securities						
Net rental income or (loss) from real estate						
a Debt-financed property						
b Not debt-financed property						
Net rental income or (loss) from personal	<u> </u>					
property						
Other investment income						
Gain or (loss) from sales of assets other						
than inventory						
Net income or (loss) from special events		-				
Gross profit or (loss) from sales of inventory		-				
Other revenue						
a	-					
b						
C		_				
d	1					
e						
Subtotal Add columns (b), (d), and (e)		().	0.		
Total. Add line 12, columns (b), (d), and (e)				13		
ee worksheet in line 13 instructions to verify calculations.)						
Part XVI-B Relationship of Activities	to the Accon	plishment of	Exempt P	urposes		
Line No. Explain below how each activity for which inc				I importantly to the accom	plishment of	
▼ the foundation's exempt purposes (other tha	n by providing fund:	s for such purposes)				
				-		
					<u>-</u> -	
						
		-				

123621 12-02-11

		TY OF THE	TRINI	TARIAN	FAMIL	<u>Y</u>	45-3	<u> 660867</u>	Pa	ge 13
Part X	VII Information Re	egarding Tran	isfers To a	ind Transa	ctions a	nd Relations	hips With Nond	haritable	•	
	Exempt Organ	izations								
1 Did t	he organization directly or indi	rectly engage in any	of the following	g with any othe	r organizatio	in described in sect	on 501(c) of		Yes	No
the (Code (other than section 501(c	(3) organizations) o	r in section 52	7, relating to po	litical organi	ızatıons?				1
a Tran	sfers from the reporting found:	ation to a noncharita	ibte exempt org	ganization of				-		·
(1)	Cash							1a(1)		X
(2)	Other assets				_			1a(2)		X
b Othe	r transactions									
(1)	Sales of assets to a noncharita	ble exempt organiza	tion					16(1)		X
	Purchases of assets from a no							1b(2)		X
	Rental of facilities, equipment,	•	3					1b(3)		X
• •	Reimbursement arrangements	V. V						1b(4)		Х
• •	Loans or loan guarantees							1b(5)		X
	Performance of services or me	mhershin or fundra	isina saliaitatia	ne				1b(6)		X
	ing of facilities, equipment, ma							10		<u>X</u>
	answer to any of the above is	_			n) chould alu	vave chow the fair r	narket value of the god		ote	
	ervices given by the reporting f									
	mn (d) the value of the goods,			- 1000 than latt	valu	a any transaction	onering arrangeme	, 011011 111		
(a) Line no	(b) Amount involved			exempt organi	zation	(d) Description	of transfers, transactions	and sharing an	rangeme	nts
(-,	(2)	(6)	N/A			(4) 5000.5.00	101 04101010, 04100000010	and onlaring an	<u>angome</u>	
			217 22			1				
							.			
		<u> </u>						 -		
										
										
	 									
	 	 								
										
										
•——						 				
						 	- · ·			
	 									
										
				 						
0- 1- 1-	a facindation diseath, as indicas	 								
	e foundation directly or indirec	-			empt organiz	zations described			v	No
	ection 501(c) of the Code (othe	•	(3)) or in sect	ION 52/7				L Yes		⊿ ио
b If "Yes," complete the following schedule (a) Name of exposuration (b) Type of exposuration (c) Decomplise of relationships of relationships of the complete of relationships of the complete of the comple							rionehin.			
(a) Name of organization (b) Type of organization (c) Descrip						(c) Description of relat	lionship			
	N/A									
				-						
										
										
	flader accelluse of a court I dealers	# = 1 h = 1 = = = = = = = = = = = = = = =					bank of our bounded on			
<u>.</u> .	Under penalties of perjury, I declare and belief, it perjure, correct, and correct, and correct.							May the IRS of return with the	discuss t	this
Sign	I (Minds)	(B. 12		1///	1/12			shown below	(see ins	tr)?
Here	o caraco	cell le	<u> </u>		<u>رر</u>	PRESI	DEN.I.	X Yes	· L	J No
	Signature of officer or trustee		D-4	Date		Title	Chaok - 4 1 a	TINI		
	Print/Type preparer's n	amė	Preparer's si	ignature	,	Date		TIN		
	RICHARD D.	an-	Z.U	Yend	1		self- employed		a = -	
Paid	HENDRICKS,		RICHAR	D D. HE	ENDRI	01/11/13		P00091		
Prepa	I	MANN ROBS	SON				Firm's EIN ► 38	-36357	06	
Use C	·									
	Firm's address ► 55			CLE STE	300					_
ANN ARBOR, MI 48108							Phone no 73	<u>4-761-</u>	<u> 200</u>	5

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

Department of the Treasury Internal Revenue Service

Schedule of Contributors

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

OMB No 1545-0047

2011

Name of the organization **Employer identification number** SOCIETY OF THE TRINITARIAN FAMILY 45-3660867 Organization type (check one): Filers of: Section: 501(c)(Form 990 or 990-EZ) (enter number) organization 4947(a)(1) nonexempt charitable trust not treated as a private foundation 527 political organization Form 990-PF X 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 X For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II. **Special Rules** For a section 501(c)(3) organization filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi) and received from any one contributor, during the year, a contribution of the greater of (1) \$5,000 or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1. Complete Parts I and II. For a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, total 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 total 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 on line H of its Form 990-EZ or on Part II, 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).

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990, 990-EZ, or 990-PF. Schedule B (Form 990, 990-EZ, or 990-PF) (2011)

Name of organization

Employer identification number

SOCIETY OF THE TRINITARIAN FAMILY

45-3660867

30CIE	II OF THE INITIARIAN FAMILI		-3000007
Part I	Contributors (see instructions). Use duplicate copies of Part I i	f additional space is needed.	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	FRANK AND NANCY CZAJKA 3650 KNOLL CREEK COURT ANN ARBOR , MI 48105	\$\$.	Person X Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 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 ZIP + 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 ZIP + 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 ZIP + 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 ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution.)

Employer identification number

SOCIETY OF THE TRINITARIAN FAMILY

45-3660867

Part II	Noncash Property (see instructions). Use duplicate copies of P	art 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
	.12	\$\$	990, 990-EZ, or 990-PF) (

Schedule B (Form 990, 990-EZ, or 990-PF) (2011) Page 4 Name of organization Employer identification number SOCIETY OF THE TRINITARIAN FAMILY 45-3660867 Exclusively religious, charitable, etc., individual contributions to section 501(c)(7), (8), or (10) organizations that total more than \$1,000 for the year. Complete columns (a) through (e) and the following line entry. For organizations completing Part III, enter Part III the total of exclusively religious, charitable, etc., contributions of \$1,000 or less for the year (Enter this information once.) 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 (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from (b) Purpose of gift (c) Use of gift (d) Description of how gift is held Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from (b) Purpose of gift (c) Use of gift (d) Description of how gift is held Part (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from (b) Purpose of gift (c) Use of gift (d) Description of how gift is held Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee

FORM 990-PF	LEGAL	FEES	Si	TATEMENT	1
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME		(D) CHARITAI PURPOSI	
BUTZEL LONG LEGAL FEES	2,790.	0.	0.	0	
TO FM 990-PF, PG 1, LN 16A =	2,790.	0.	0.		0.
FORM 990-PF	OTHER E	XPENSES	Si	ATEMENT	2
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITAI PURPOSI	
IRS FILING FEE STATE OF MICHIGAN FILING FEE BANK NEW CHECK FEES	850. 20. 14.	0. 0. 0.	0. 0. 0.		0.
TO FORM 990-PF, PG 1, LN 23	884.	0.	0.		0.
	SUBSTANTIA	L CONTRIBUTORS	S Si	ATEMENT	3
NAME OF CONTRIBUTOR	ADDR	ESS			
FRANK CZAJKA					
NANCY CZAJKA		KNOLL STREET ARBOR , MI 481			
FORM 990-PF	PART XV - L OF FOUNDATI		S	TATEMENT	4

NAME OF MANAGER

FRANK CZAJKA NANCY CZAJKA FORM 990-PF

GRANT APPLICATION SUBMISSION INFORMATION PART XV, LINES 2A THROUGH 2D

STATEMENT

5

NAME AND ADDRESS OF PERSON TO WHOM APPLICATIONS SHOULD BE SUBMITTED

FRANK CZAJKA 3650 KNOLL CREEK COURT ANN ARBOR , MI 48105

TELEPHONE NUMBER

734-751-2587

FORM AND CONTENT OF APPLICATIONS

LETTER FORMAT WITH DETAILED DESCRIPTION AND FULL CONTACT INFORMATION (NAME, ADDRESS, EMAIL, PHONE, ETC...) ADDITIONAL INFORMATION MAYBE REQUIRED IF A BACKGROUND CHECK IS DEEMED NECESSARY.

ANY SUBMISSION DEADLINES

ANNUAL

RESTRICTIONS AND LIMITATIONS ON AWARDS

PREFERENCE GIVEN TO THE STATE OF MICHIGAN. DISTRIBUTIONS WILL ONLY BE CONSIDERED IN INSTANTS WHERE THE REQUEST IS IN CONFORMITY WITH FOUNDATION INCORPORATING DOCUMENTS AND 1023 APPLICATION.

3 Grants and Contributions Paid During the Y				
Recipient	If recipient is an individual, show any relationship to	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	any foundation manager or substantial contributor	recipient	contribution	Aniount
MR. AND MS. WESLEY SMITH	NONE		ECONOMIC ASSISTANCE	
27950 ANN ARBOR TRAIL WESTLAND , MI 48185			FOR COUPLE	
MESILIAND , MI 40103				2,0
PRIESTS FOR LIFE		PUBLIC CHARITY	PRO LIFE APOSALATE	
P.O. BOX 141172				
STATEN ISLAND , NY 10314-9920		-		1,0
DISCRETIONARY TRUST FOR DEANNA AIKMAN	NONE	1	HELP WOMEN WITH	
2315 NORTH HARRIS RD YPSILANTI MI 48198			DISEASE	1,5
20470				1,3
CROSS ROADS INC		PUBLIC CHARITY	PRO LIFE DONATION	
P.O. BOX 2219				
COLUMBIA MD 21045				3
ST. VINCENT DE PAUL OF ANN ARBOR		DIIBI.TC CHARTTY	CONTRIBUTION FOR THE	
1001 BROADWAY		FOBBIC CHARIII	POOR	
ANN ARBOR , MI 48108				2
JUSTIN BISHOP	NONE		INDIGENT FAMILY	
909 SHERIDAN STREET YPSILANTI MI 48197		-	ASSISTANCE	10,7
indigrant , in 4015,				10,/
MR. AND MS. FLOYD BENEFIEL	NONE		HELP FOR INDIGENT	
6098 S. WESTVIEW ST.			OCTOGENARIAN COUPLE	
LITTLETON , CO 80120				4,4
ROBERT DUFF	NONE		HELP FOR PARALYZED	
1128 WEST MAIN			SENIOR CITIZEN	
WATERBURY CT 06708				1,0
				<u> </u>
Total from continuation about				
Total from continuation sheets				21,1