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

2012

Open to Public Inspection

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

For calendar year 2012 or tax year beginning

, 2012, and ending

, 20

<p>Name of foundation Southfield Radiology Assoc Fountn</p> <p>Number and street (or P O box number if mail is not delivered to street address) 22250 Providence Dr Suite 207</p> <p>City or town, state, and ZIP code SOUTHFIELD MI 48075-</p> <p>G Check all that apply</p> <table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 15%; vertical-align: top;"> <input type="checkbox"/> Initial return <input type="checkbox"/> Final return <input type="checkbox"/> Address change </td> <td style="width: 15%; vertical-align: top;"> <input type="checkbox"/> Initial return of a former public charity <input type="checkbox"/> Amended return <input type="checkbox"/> Name change </td> </tr> </table> <p>H Check type of organization</p> <table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 15%; vertical-align: top;"> <input checked="" type="checkbox"/> Section 501(c)(3) exempt private foundation <input type="checkbox"/> Section 4947(a)(1) nonexempt charitable trust </td> <td style="width: 15%; vertical-align: top;"> <input type="checkbox"/> Other taxable private foundation </td> </tr> </table> <p>I Fair market value of all assets at end of year (from Part II, col. (c), line 16) ► \$ 111,076.</p> <p>J Accounting method</p> <table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 15%; vertical-align: top;"> <input checked="" type="checkbox"/> Cash <input type="checkbox"/> Other (specify) _____ </td> <td style="width: 15%; vertical-align: top;"> <input type="checkbox"/> Accrual </td> </tr> </table> <p>(Part I, column (d) must be on cash basis)</p>		<input type="checkbox"/> Initial return <input type="checkbox"/> Final return <input type="checkbox"/> Address change	<input type="checkbox"/> Initial return of a former public charity <input type="checkbox"/> Amended return <input type="checkbox"/> Name change	<input checked="" type="checkbox"/> Section 501(c)(3) exempt private foundation <input type="checkbox"/> Section 4947(a)(1) nonexempt charitable trust	<input type="checkbox"/> Other taxable private foundation	<input checked="" type="checkbox"/> Cash <input type="checkbox"/> Other (specify) _____	<input type="checkbox"/> Accrual	<p>A Employer identification number 20-1752541</p> <p>B Telephone number (see instructions) 248-353-7620</p> <p>C If exemption application is pending, check here ► <input type="checkbox"/></p> <p>D 1 Foreign organizations, check here 2 Foreign organizations meeting the 85% test, check here and attach computation ► <input type="checkbox"/></p> <p>E If private foundation status was terminated under section 507(b)(1)(A), check here ► <input type="checkbox"/></p> <p>F If the foundation is in a 60-month termination under section 507(b)(1)(B), check here ► <input type="checkbox"/></p>																																																																																																																															
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<p>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 instr))</p> <p>Revenue</p> <table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 15%; vertical-align: top;"> 1 Contributions, gifts, grants, etc., received (attach schedule) </td> <td style="width: 15%; vertical-align: top;"> 100,511. </td> <td style="width: 15%; vertical-align: top;"> </td> <td style="width: 15%; vertical-align: top;"> </td> </tr> <tr> <td style="width: 15%; vertical-align: top;"> 2 Check ► <input type="checkbox"/> if the foundation is not required to attach Sch B </td> <td style="width: 15%; vertical-align: top;"> </td> <td style="width: 15%; vertical-align: top;"> </td> <td style="width: 15%; vertical-align: top;"> </td> </tr> <tr> <td style="width: 15%; vertical-align: top;"> 3 Interest on savings and temp cash investments </td> <td style="width: 15%; vertical-align: top;"> 592. </td> <td style="width: 15%; vertical-align: top;"> 592. </td> <td style="width: 15%; vertical-align: top;"> 592. </td> </tr> <tr> <td style="width: 15%; vertical-align: top;"> 4 Dividends and interest from securities </td> <td style="width: 15%; vertical-align: top;"> </td> <td style="width: 15%; vertical-align: top;"> </td> <td style="width: 15%; vertical-align: top;"> </td> </tr> <tr> <td style="width: 15%; vertical-align: top;"> 5a Gross rents b Net rental income or (loss) </td> <td style="width: 15%; vertical-align: top;"> </td> <td style="width: 15%; vertical-align: top;"> </td> <td style="width: 15%; vertical-align: top;"> </td> </tr> <tr> <td style="width: 15%; vertical-align: top;"> 6a Net gain/(loss) from sale of assets not on line 10 b Gross sales price for all assets on line 6a </td> <td style="width: 15%; vertical-align: top;"> </td> <td style="width: 15%; vertical-align: top;"> </td> <td style="width: 15%; vertical-align: top;"> </td> </tr> <tr> <td style="width: 15%; vertical-align: top;"> 7 Capital gain net income (from Part IV, line 2) </td> <td style="width: 15%; vertical-align: top;"> </td> <td style="width: 15%; vertical-align: top;"> </td> <td style="width: 15%; vertical-align: top;"> </td> </tr> <tr> <td style="width: 15%; vertical-align: top;"> 8 Net short-term capital gain </td> <td style="width: 15%; vertical-align: top;"> </td> <td style="width: 15%; vertical-align: top;"> </td> <td style="width: 15%; vertical-align: top;"> </td> </tr> <tr> <td style="width: 15%; vertical-align: top;"> 9 Income modifications </td> <td style="width: 15%; vertical-align: top;"> </td> <td style="width: 15%; vertical-align: top;"> </td> <td style="width: 15%; vertical-align: top;"> </td> </tr> <tr> <td style="width: 15%; vertical-align: top;"> 10a Gross sales less rts & allowances b Less Cost of goods sold </td> <td style="width: 15%; vertical-align: top;"> </td> <td style="width: 15%; vertical-align: top;"> </td> <td style="width: 15%; vertical-align: top;"> </td> </tr> <tr> <td style="width: 15%; vertical-align: top;"> c Gross profit or (loss) (attach schedule) </td> <td style="width: 15%; vertical-align: top;"> </td> <td style="width: 15%; vertical-align: top;"> </td> <td style="width: 15%; vertical-align: top;"> </td> </tr> <tr> <td style="width: 15%; vertical-align: top;"> 11 Other income (attach schedule) </td> <td style="width: 15%; vertical-align: top;"> </td> <td style="width: 15%; vertical-align: top;"> </td> <td style="width: 15%; vertical-align: top;"> </td> </tr> <tr> <td style="width: 15%; vertical-align: top;"> 12 Total. 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(attach schedule) (see instructions) </td> <td style="width: 15%; vertical-align: top;"> 104. </td> <td style="width: 15%; vertical-align: top;"> 104. </td> <td style="width: 15%; vertical-align: top;"> 104. </td> </tr> <tr> <td style="width: 15%; vertical-align: top;"> 19 Depreciation (attach sch) and depletion </td> <td style="width: 15%; vertical-align: top;"> </td> <td style="width: 15%; vertical-align: top;"> </td> <td style="width: 15%; vertical-align: top;"> </td> </tr> <tr> <td style="width: 15%; vertical-align: top;"> 20 Occupancy 21 2013 </td> <td style="width: 15%; vertical-align: top;"> </td> <td style="width: 15%; vertical-align: top;"> </td> <td style="width: 15%; vertical-align: top;"> </td> </tr> <tr> <td style="width: 15%; vertical-align: top;"> 21 Travel, conferences, and meetings </td> <td style="width: 15%; vertical-align: top;"> </td> <td style="width: 15%; vertical-align: top;"> </td> <td style="width: 15%; vertical-align: top;"> </td> </tr> <tr> <td style="width: 15%; vertical-align: top;"> 22 Printing and publications </td> <td style="width: 15%; vertical-align: top;"> </td> <td style="width: 15%; vertical-align: top;"> </td> <td style="width: 15%; vertical-align: top;"> </td> </tr> <tr> <td style="width: 15%; vertical-align: top;"> 23 Other expenses (attach schedule) </td> <td style="width: 15%; vertical-align: top;"> 884. </td> <td style="width: 15%; vertical-align: top;"> 884. </td> <td style="width: 15%; vertical-align: top;"> 884. </td> </tr> <tr> <td style="width: 15%; vertical-align: top;"> 24 Total operating and administrative expenses Add lines 13 through 23 </td> <td style="width: 15%; vertical-align: top;"> 4,839. </td> <td style="width: 15%; vertical-align: top;"> 600. </td> <td style="width: 15%; vertical-align: top;"> 4,239. </td> </tr> <tr> <td style="width: 15%; vertical-align: top;"> 25 Contributions, gifts, grants paid </td> <td style="width: 15%; vertical-align: top;"> 121,778. </td> <td style="width: 15%; vertical-align: top;"> </td> <td style="width: 15%; vertical-align: top;"> 121,778. </td> </tr> <tr> <td style="width: 15%; vertical-align: top;"> 26 Total exp & disbursements Add lines 24 and 25 </td> <td style="width: 15%; vertical-align: top;"> 126,617. </td> <td style="width: 15%; vertical-align: top;"> 600. </td> <td style="width: 15%; vertical-align: top;"> 4,239. </td> </tr> <tr> <td style="width: 15%; vertical-align: top;"> 27 Subtract line 26 from line 12 </td> <td style="width: 15%; vertical-align: top;"> </td> <td style="width: 15%; vertical-align: top;"> </td> <td style="width: 15%; vertical-align: top;"> </td> </tr> <tr> <td style="width: 15%; vertical-align: top;"> a Excess of revenue over expenses and disbursements </td> <td style="width: 15%; vertical-align: top;"> (25,514.) </td> <td style="width: 15%; vertical-align: top;"> </td> <td style="width: 15%; vertical-align: top;"> </td> </tr> <tr> <td style="width: 15%; vertical-align: top;"> b Net investment income (if neg, enter -0-) </td> <td style="width: 15%; vertical-align: top;"> </td> <td style="width: 15%; vertical-align: top;"> </td> <td style="width: 15%; vertical-align: top;"> </td> </tr> <tr> <td style="width: 15%; vertical-align: top;"> c Adjusted net income (if neg, enter -0-) </td> <td style="width: 15%; vertical-align: top;"> </td> <td style="width: 15%; vertical-align: top;"> </td> <td style="width: 15%; vertical-align: top;"> </td> </tr> </table>		13 Compensation of officers, directors, trustees, etc				14 Other employee salaries and wages				15 Pension plans, employee benefits				16a Legal fees (attach schedule)	3,851.	600.	3,251.	b Accounting fees (attach schedule)				c Other professional fees (attach schedule)				17 Interest RECEIVED				18 Taxes. (attach schedule) (see instructions)	104.	104.	104.	19 Depreciation (attach sch) and depletion				20 Occupancy 21 2013				21 Travel, conferences, and meetings				22 Printing and publications				23 Other expenses (attach schedule)	884.	884.	884.	24 Total operating and administrative expenses Add lines 13 through 23	4,839.	600.	4,239.	25 Contributions, gifts, grants paid	121,778.		121,778.	26 Total exp & disbursements Add lines 24 and 25	126,617.	600.	4,239.	27 Subtract line 26 from line 12				a Excess of revenue over expenses and disbursements	(25,514.)			b Net investment income (if neg, enter -0-)				c Adjusted net income (if neg, enter -0-)																																																									
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For Paperwork Reduction Act Notice, see instructions.

Part II Balance Sheets		Attached schedules and amounts in the description column should be for end-of-year amounts only (See inst.)	Beginning of year	End of year	
			(a) Book Value	(b) Book Value	(c) Fair Market Value
Assets	1 Cash - non-interest-bearing	20,021.	111,076.	111,076.	
	2 Savings and temporary cash investments	116,568.			
	3 Accounts receivable ►				
	Less allowance for doubtful accts ►				
	4 Pledges receivable ►				
	Less allowance for doubtful accts ►				
	5 Grants receivable				
	6 Receivables due from officers, directors, trustees, and other disqualified persons (attach schedule) (see 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 govt obligations (attach schedule)				
	b Investments - corporate stock (attach schedule)				
	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 ►					
Less accumulated depreciation (attach schedule) ►					
15 Other assets (describe ►)					
16 Total assets (to be completed by all filers - see the instructions. Also, see page 1, item 1)	136,589.	111,076.	111,076.		
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)					
Net Assets or Fund Balances	Foundations that follow SFAS 117, check here ► <input type="checkbox"/>				
	and complete lines 24 through 26 and lines 30 and 31.				
	24 Unrestricted				
	25 Temporarily restricted				
	26 Permanently restricted				
	Foundations that do not follow SFAS 117, ck. here ► <input checked="" type="checkbox"/>				
	and complete lines 27 through 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	136,589.	111,076.		
30 Total net assets or fund balances (see instructions)	136,589.	111,076.			
31 Total liabilities and net assets/fund balances (see instructions)	136,589.	111,076.			

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	136,589.
2 Enter amount from Part I, line 27a	2	(25,514.)
3 Other increases not included in line 2 (itemize) ► <u>Rounding</u>	3	1.
4 Add lines 1, 2, and 3	4	111,076.
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	111,076.

Part VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 - see instructions)

1a Exempt operating foundations described in section 4940(d)(2), check here ► and enter "N/A" on line 1
 Date of ruling or determination letter _____ (attach copy of letter if necessary - see instr)

1 1

b Domestic foundations that meet the section 4940(e) requirements in Part V, check here ►
 and enter 1% of Part I, line 27b

2 2 0

c All other domestic foundations enter 2% of line 27b Exempt foreign organizations enter
 4% of Part I, line 12, col (b)

3 3

4 4 0

5 5 0

6 Credits/Payments

6a	
6b	
6c	
6d	

7 Total credits and payments Add lines 6a through 6d

8 Enter any penalty for underpayment of estimated tax Check here if Form 2220 is attached

9 Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed

10 Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid

11 Enter the amount of line 10 to be Credited to 2013 estimated tax ► Refunded ►

Part 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 in any political campaign?

1a Yes X

b Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see the instructions for
 definition)?

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

1b Yes X

c Did the foundation file Form 1120-POL for this year?

d Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year
 (1) On the foundation ► \$ _____ (2) On foundation managers ► \$ _____

e Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed
 on foundation managers ► \$ _____

2 Has the foundation engaged in any activities that have not previously been reported to the IRS?
 If "Yes," attach a detailed description of the activities

2 Yes X

3 Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of
 incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes

3 Yes X

4a Did the foundation have unrelated business gross income of \$1,000 or more during the year?
 b If "Yes," has it filed a tax return on Form 990-T for this year?

4a Yes X

5 Was there a liquidation, termination, dissolution, or substantial contraction during the year?
 If "Yes," attach the statement required by General Instruction T

5 Yes X

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 X

7 Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col (c), and Part XV

7 Yes X

8a Enter the states to which the foundation reports or with which it is registered (see instructions)►

8b If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or
 designate) of each state as required by General Instruction G? If "No," attach explanation

8b Yes 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 calendar year 2012 or the taxable year beginning in 2012 (see instructions for Part XIV)? If "Yes,"
 complete Part XIV

9 Yes X

10 Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their
 names and addresses

10 Yes X

M3

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 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? Website address ►	13	X
14	The books are in care of ► Richard E Baker Located at ► 2000 Town Center Su MI SOUTHFIELD	Telephone no ► 248-353-7620 ZIP+4 ► 48075-	
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - Check here and enter the amount of tax-exempt interest received or accrued during the year	► 15	
16	At any time during calendar year 2012, 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? See instructions for exceptions and filing requirements for Form TD F 90-22 1 If "Yes," enter the name of the foreign country ►	16	Yes X

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)	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> X No
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person?	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> X 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"/> X No
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> X No
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> X 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"/> X 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"/> X 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 the instructions)? Organizations relying on a current notice regarding disaster assistance check here	► <input type="checkbox"/>	
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 2012?		<input checked="" type="checkbox"/> 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))		
a	At the end of tax year 2012, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning before 2012? If "Yes," list the years ► 20____, 20____, 20____, 20____	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> X No
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 the instructions)		
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?	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> X No
b	If "Yes," did it have excess business holdings in 2012 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 2012)		
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?		
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 2012?		<input checked="" type="checkbox"/> X

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	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
(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 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 the instructions)? Organizations relying on a current notice regarding disaster assistance check here ► <input 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? If "Yes," attach the statement required by Regulations section 53.4945-5(d)	<input type="checkbox"/> Yes <input type="checkbox"/> No		
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	6b	X
b Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract? If "Yes" to 6b, file Form 8870	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
7a At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction? b If "Yes," did the foundation receive any proceeds or have any net income attributable to the transaction?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	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 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 comp	(e) Expense account, other allowances
See Attach.		0		

2 Compensation of five highest-paid employees (other than those included on line 1 - see 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 ►

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 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 info such as the number of organizations and other beneficiaries served, conferences convened, research papers produced, etc

1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30	31	32	33	34	35	36	37	38	39	40	41	42	43	44	45	46	47	48	49	50	51	52	53	54	55	56	57	58	59	60	61	62	63	64	65	66	67	68	69	70	71	72	73	74	75	76	77	78	79	80	81	82	83	84	85	86	87	88	89	90	91	92	93	94	95	96	97	98	99	100	101	102	103	104	105	106	107	108	109	110	111	112	113	114	115	116	117	118	119	120	121	122	123	124	125	126	127	128	129	130	131	132	133	134	135	136	137	138	139	140	141	142	143	144	145	146	147	148	149	150	151	152	153	154	155	156	157	158	159	160	161	162	163	164	165	166	167	168	169	170	171	172	173	174	175	176	177	178	179	180	181	182	183	184	185	186	187	188	189	190	191	192	193	194	195	196	197	198	199	200	201	202	203	204	205	206	207	208	209	210	211	212	213	214	215	216	217	218	219	220	221	222	223	224	225	226	227	228	229	230	231	232	233	234	235	236	237	238	239	240	241	242	243	244	245	246	247	248	249	250	251	252	253	254	255	256	257	258	259	260	261	262	263	264	265	266	267	268	269	270	271	272	273	274	275	276	277	278	279	280	281	282	283	284	285	286	287	288	289	290	291	292	293	294	295	296	297	298	299	300	301	302	303	304	305	306	307	308	309	310	311	312	313	314	315	316	317	318	319	320	321	322	323	324	325	326</

Part X Minimum Investment Return (All domestic foundations must complete this part Foreign 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
b	Average of monthly cash balances	1b 137,208 .
c	Fair market value of all other assets (see instructions)	1c
d	Total (add lines 1a, b, and c)	1d 137,208 .
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	3 137,208 .
4	Cash deemed held for charitable activities Enter 1 1/2% of line 3 (for greater amount, see instructions)	4 2,058 .
5	Net value of noncharitable-use assets. Subtract line 4 from line 3 Enter here and on Part V, line 4	5 135,150 .
6	Minimum investment return. Enter 5% of line 5	6 6,758 .

Part XI Distributable Amount (see 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 6,758 .
2 a	Tax on investment income for 2012 from Part VI, line 5	2a
b	Income tax for 2012 (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 6,758 .
4	Recoveries of amounts treated as qualifying distributions	4
5	Add lines 3 and 4	5 6,758 .
6	Deduction from distributable amount (see instructions)	6
7	Distributable amount as adjusted Subtract line 6 from line 5 Enter here and on Part XIII, line 1	7 6,758 .

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 125,917 .
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	3a
a	Suitability test (prior IRS approval required)	3b
b	Cash distribution test (attach the required schedule)	4 125,917 .
4	Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4	
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income Enter 1% of Part I, line 27b (see instructions)	5
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6 125,917 .

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 instructions)

	(a) Corpus	(b) Years prior to 2011	(c) 2011	(d) 2012
1 Distributable amount for 2012 from Part XI, line 7				6,758.
2 Undistributed income, if any, as of the end of 2012				
a Enter amount for 2011 only				
b Total for prior yrs 20 20 20				
3 Excess distribs carryover, if any, to 2012				
a From 2007				
b From 2008				
c From 2009 117,693.				
d From 2010 125,962.				
e From 2011 115,170.				
f Total of lines 3a through e 358,825.				
4 Qualifying distributions for 2012 from Part XII, line 4 ► \$ 125,917.				
a Applied to 2011, but not more than line 2a				
b Applied to undistributed income of prior years (Election required - see instructions)				
c Treated as distributions out of corpus (Election required - see instructions)				
d Applied to 2012 distributable amount				
e Remaining amt distributed out of corpus				
5 Excess distribs carryover applied to 2012 (If an amount appears in column (d), the same amount must be shown in col (a))				6,758.
6 Enter the net total of each column as indicated below:				
a Corpus Add lines 3f, 4c, & 4e Subtract line 5 477,984.				
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 instructions				
e Undistributed income for 2011 Subtract line 4a from line 2a Taxable amount - see instructions				
f Undistributed income for 2012 Subtract lines 4d and 5 from line 1 This amount must be distributed in 2013				
7 Amounts treated as distributions out of corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3) (see instructions)				
8 Excess distributions carryover from 2007 not applied on line 5 or line 7 (see instructions)				
9 Excess distributions carryover to 2013. Subtract lines 7 and 8 from line 6a 477,984.				
10 Analysis of line 9				
a Excess from 2008 117,693.				
b Excess from 2009 125,962.				
c Excess from 2010 115,170.				
e Excess from 2012 119,159.				

Part XIV Private Operating Foundations (see 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 2012, enter the date of the ruling ►			
b	Check box to indicate whether the foundation is a private operating foundation described in section 4942(j)(3) or 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 foundation had \$5,000 or more in assets at any time during the year - see 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 instructions) to individuals or organizations under other conditions, complete items 2a, b, c, and d

a The name, address, and telephone number or e-mail 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 See Attachment				121,778.
Total			► 3a	121,778.
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 instructions)
		(a) Business code	(b) Amount	(c) Excl code	
1	Program service revenue				
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	900099	592 .		
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)		592 .		
13	Total Add line 12, columns (b), (d), and (e)				592 .

(See worksheet in line 13 instructions to verify calculations)

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

Line No. ▼	Explain below how each activity for which income is reported in column (e) of Part XVI-A contributed importantly to the accomplishment of the foundation's exempt purposes (other than by providing funds for such purposes) (See instructions)
n/a	

Schedule of Contributors

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

OMB No 1545-0047

2012

Name of the organization
Southfield Radiology Assoc Fountn

Employer identification number
20-1752541

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, 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 do 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 I, 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

Southfield Radiology Assoc Fountn

Employer identification number
20-1752541**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) Total contributions	(d) Type of contribution
1	Gerard K Surmann CLARKSTON MI 48348-	\$ 4,893.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution)
2	John FK Brown GROSSE POINTE MI 48230-	\$ 7,316.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution)
3	Allan D Fraiberg FARMINGTON MI 48334-	\$ 7,316.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution)
4	Roger L Gonda BRIGHTON MI 48114-	\$ 7,316.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution)
5	Lisa Govila BIRMINGHAM MI 48009-	\$ 7,316.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution)
6	Thomas M Hall MILFORD MI 48381-	\$ 7,316.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution)

Name of organization

Southfield Radiology Assoc Fountn

Employer identification number

20-1752541

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) Total contributions	(d) Type of contribution
7	Denis R Lincoln BLOOMFIELD HILLS MI 48301-	\$ 7,316.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution)
8	Edsa Negussie FARMINGTON MI 48336-	\$ 7,316.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution)
9	David L Osher Franklin MI 48025-	\$ 7,316.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution)
10	Mehram Salari NOVI MI 48377-	\$ 7,316.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution)
11	James E Selis BIRMINGHAM MI 48009-	\$ 7,827.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution)
12	Jehan R Barbat ORCHARD LAKE MI 48324-	\$ 7,316.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution)

Name of organization

Southfield Radiology Assoc Fountn

Employer identification number

20-1752541

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) Total contributions	(d) Type of contribution
13	Brian J Puzsar NOVI MI 48377-	\$ 7,316.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution)
14	Michael J Swofford LIVONIA MI 48152-	\$ 7,316.	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)

US 990	Legal Fees	2012		
Description	Expenses per books	Net investment income	Adjusted net income	Charitable purposes
Seyburn Kahn	2,351.	300.	2,051.	2,051.
Seyburn Kahn	1,500.	300.	1,200.	1,200.
	3,851.	600.	3,251.	3,251.

US 990	Taxes	2012		
Description	Expenses per books	Net investment income	Adjusted net income	Charitable purposes
Equipment Lease Tax Payments	104. 104.		104. 104.	104. 104.

US 990

Other Expenses

2012

Description	Expenses per books	Net investment income	Adjusted net income	Charitable purposes
McLeod Agency (Directors Liab.)	844.		844.	844.
Northern Trust Service Charge	40. 884.		40. 884.	40. 884.

SOUTHFIELD RADIOLOGY ASSOC FOUNDATION

EIN: 20-1752541

2012 FORM 990-PF - RETURN OF PRIVATE FOUNDATION

PART VIII - Information about Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors

Line 1: List all officers, directors, trustees, foundation managers and their compensation (see 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 comp.	(e) Expenses account, other allowances
Roger L Gonda, Jr. 22250 Providence, Ste 207 Southfield, MI 48075	President (varies)	-0-	-0-	-0-
Allan D. Frailberg 22250 Providence, Ste 207 Southfield, MI 48075	Vice President / Treasurer (varies)	-0-	-0-	-0-
Henry Nirenberg 2000 Town Center Suite 1500 Southfield, MI 48075	Secretary (varies)	-0-	-0-	-0-

Southfield Radiology Associates Foundation
EIN 20-1752541
2012 Form 990-PF, Part X, Line 1b

Date	Savings (7029)	Checking (5664)	Checking (8080)	First Place CD	Total
January	\$ 118,641	\$ 1,002	\$ 116,568	\$ 236,211	
February	\$ 15,964	\$ 982	\$ 116,568	\$ 133,514	
March	\$ 12,173	\$ 962	\$ 116,568	\$ 129,703	
April	\$ -	\$ 129,317	\$ 117,155	\$ 246,472	
May	\$ -	\$ 115,073	\$ -	\$ 115,073	
June	\$ -	\$ 115,029	\$ -	\$ 115,029	
July	\$ -	\$ 115,030	\$ -	\$ 115,030	
August	\$ -	\$ 111,120	\$ -	\$ 111,120	
September	\$ 100	\$ 111,020	\$ -	\$ 111,120	
October	\$ 100	\$ 110,976	\$ -	\$ 111,076	
November	\$ 111,076	\$ -	\$ -	\$ 111,076	
December	\$ 111,076	\$ -	\$ -	\$ 111,076	
Total	\$ 222,352	\$ 146,778	\$ 810,511	\$ 466,859	\$ 1,646,500 00
Average					\$ 137,208 33

SOUTHFIELD RADIOLOGY ASSOC FOUNDATION
EIN: 20-1752541
2012 FORM 990-PF - RETURN OF PRIVATE FOUNDATION

PART XV Supplementary Information

Line 3a Grants and Contributions Paid During the Year or Approved for Future Payments
(NOTE All contributions were made for the purpose of furthering the organization's charitable purpose).

Name and Address	Foundation Status of Recipient	Purpose of Grant or Contribution	Amount
Providence Health Foundation P.O. Box 673271 Detroit, MI 48267	Active 501(c)(3)	Providence Health Foundation	\$100,000
Providence Health Foundation P.O. Box 673271 Detroit, MI 48267	Active 501(c)(3)	Friend's Ball	\$2,440
Providence Health Foundation P.O. Box 673271 Detroit, MI 48267	Active 501(c)(3)	Charity Golf Outing	\$1,000
GE Healthcare Financing Svc On behalf of: Garden City Hospital 6245 Inkster Road Garden City, MI 48135	n/a	Ultrasound Lease Payment	\$3,292
GE Healthcare Financing Svc On behalf of: Garden City Hospital 6245 Inkster Road Garden City, MI 48135	n/a	Purchase of Ultrasound Equipment	\$14,245