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

OMB No 1545-0052

Depart	ment of	the Treasury		rreate	u as a Private	: Fouri	uatioi	ŀ					
Interna	Revenu	ue Service		te. The foundation may be abl		turn to sat	sfy state re	porting requ	ırement	<u> </u>		Open to Pu	blic Inspection 1
			tax year beginn	ng , a	ind ending			A F1		-4-54			
Nam	e of fou	ndation						A Emplo	oyer ide	ntificatio	n number		
				MT ON				20	270	1070	7		
			LY FOUNDA			Room/su	ıta			0079	instruction	e\	
		-	imber if mail is not deliv			STE		-		3-4		9)	
		state, and ZIP code	DKIAE HOK	<u> </u>		310							
•	AGI			MI 48638				C If exen	nption a	plication	is pending,	check here	▶ _
		all that apply	Initial return		n of a former pub	c chant	v	D 1 Fo	reign or	anızatıon	s, check he	ere	▶ [
•	HOUR E	in that apply	Final return	Amended	•		'		- '	=	s meeting t		
			Address ch	=					•	-	_	computatio	n 🕨 🗌
								- 4					
				01(c)(3) exempt private						iation stat (1)(A), ch		ninated unde	" ▶ [
				trust Other taxabl									
-		ket value of all as	I	Accounting method	Cash X	Accrual					0-month te (B), check h		▶ [
		ear (from Part II,		Other (specify)	h b						,		
	e 16) l			Part I, column (d) must		/ 						(d) Dis	bursements
Pa	rt I		evenue and Expe s (b), (c), and (d) may no		(a) Revenue and expenses per	(b) Net inve		(c	Adjusted (haritable irposes
		the amounts in colu	mn (a) (see instructions))	books		incom	ie		tilcoille			basis only)
-	1	Contributions, gifts	grants, etc., receive	ed (attach schedule)	63,9	56 ১.5	E E	; , , , , , , , , , , , , , , , , , , ,	x** ' ;	化磷钼	F . X	. « \4 ^5 sat	- 12 44 1
	2	Check ▶ ☐ if t	the foundation is not	required to attach Sch B		-	.1.		٠.		,:		٠,
	3			y cash investments								-	1, 66
	4		nterest from secu		499,4	92	49	8,998				,+ 3 x h	*
	5a	Gross rents										P- 11 -7 P-	
a)	ь	Net rental incom	ne or (loss)		* . ***		۶ '	* "	*,	, /- , /-	バドし	CIVE	:U :-
Ď	6a		n sale of assets not on lir	ne 10	2,845,2	69 .	· · ·	·	,			-	70
ě	b	Gross sales price for a		2,928,446	:	[-	2	NOV.	8 71	12 78
Revenue	7	Capital gain net	income (from Pai	t IV, line 2)	. <u> </u>	-	2,84	5,269	. 3	77 1 64	2 ×-	1 4 7 m	13
_	8	Net short-term	•		* * *		~	*			0	\$ = \psi \cdot \cd	JE/
	9	Income modifica			1 4		<u>.</u> .	À	1	<u> </u>	ועטו	<u> </u>	JT:
	10a	Gross sales less retu	irns and allowances		ي د دسمانتي ا		Ride "	** 3. (1	4	44:	1 1 12		<u> </u>
	ь	Less Cost of go			, , , , , , , , , , , , , , , , , , , ,		•		,	****	,-	7.	
	c	Gross profit or ((loss) (attach sche	edule)			·	- 4 1				٠ .	٠ , .
	11	•	attach schedule)	STMT 1	-82,0	43	2	1,539				*** \$	
	12	Total. Add lines			3,326,6	74	3,36	55,806			0	,	
Se	13	Compensation of	of officers, directo	rs, trustees, etc		0							
kpenses	14	Other employee	salaries and wag	es									
þe	15	Pension plans,	employee benefits	;									
Ä	16a	Legal fees (atta	ch schedule)								_	<u> </u>	
ē	ь	Accounting fees	s (attach schedule) STMT 2	12,1			6,058					6,057
ຂຶ້ກຕໍ່ Administrative	С	Other professional	l fees (attach schedu	le) STMT 3	21,5	02	2	21,502					
13	17	Interest											
nis.	18	Taxes (attach sch	edule) (see instructio	ons) STMT 4	5,7	50							
E	19	Depreciation (atta-	ch schedule) and de _l	oletion			···-		_				۲۰۰,
Ş	20	Occupancy							ļ		.	ļ	
₹0.	21		nces, and meeting	ıs	1,5	38			 -			 	1,538
ر ي	22	Printing and pu	blications						<u> </u>			ļ . —	4
يُ	23	Other expenses (att		STMT 5	188,4	76	18	31,890				ļ	1,464
	24	-	g and administra	tive expenses.							^		0.051
د		Add lines 13 th	-		229,3		2(9,450			0		9,059
O	25	Contributions, gifts, g			967,7			· · · · ·	 			 	967,750
-5,	26			s Add lines 24 and 25	1,197,1		2(09,450	1	°- 4 '.	<u>\ \ *4</u>		976,809
Operating	27	Subtract line 26					er (t. f.					'	• •
€	a		•	and disbursements	2,129,5	43					- ;-	-	
Q R	K b		it income (if nega			-	***	56,356	<u> </u> "	17.	<u>;</u>	1 4	, <u>141</u> .
6	″ c	Adjusted net i	ncome (if negative	e, enter -0-)	<i>:</i> \	`	4		<u> </u>		0	<u> </u>	

For Paperwork Reduction Act Notice, see instructions.

Form 990-PF (2012)

If line 8 is equal to or greater than line 7, check the box in Part VI, line 1b, and complete that part using a 1% tax rate. See the

Form 990-PF (2012)

7

909,618

976,809

7 Add lines 5 and 6

Part VI instructions

8 Enter qualifying distributions from Part XII, line 4

	1 990-PF (2012) WOLOHAN FAMILY FOUNDATION 38-2700797			P	age 4
Pa	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 instructions)			1 12	
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check		3	31,!	<u> 564</u>
	here ▶ X and enter 1% of Part I, line 27b				•
С	All other domestic foundations enter 2% of line 27b Exempt foreign organizations enter 4% of				
	Part I, line 12, col. (b)	ĺ			_
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-)				0
3	Add lines 1 and 2			31,	564
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)				0
5	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-	4 2 4		31,	064
6	Credits/Payments	Sac Sa algorithms	, : - ' '		:1;3₽Ч 57,23
а	2012 estimated tax payments and 2011 overpayment credited to 2012 6a 16,786	1 2 4 4 7 1 1 . 4 .	قائم اجتد خیت راجی	د من است. ای مناع	굶륗잗
b	Exempt foreign organizations – tax withheld at source	1	nomed in		25.2524 86.272
C	Tax paid with application for extension of time to file (Form 8868) 6c 25,000	E 7,, 4 :	sarvaria susuri k	e fight.	25 24 -
d	Backup withholding erroneously withheld	incres:	an ijr	Lawlu	******
7	Total credits and payments. Add lines 6a through 6d			11,	<u> 786</u>
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]	.0,2	<u> 222</u>
11	Enter the amount of line 10 to be Credited to 2013 estimated tax ▶ 10,222 Refunded ▶ 11				
· Pa	art VII-A Statements Regarding Activities		V		
1a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it		4 4	Yes	No
	participate or intervene in any political campaign?	-	1a		<u> </u>
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see	1			
	Instructions for the definition)?	Ļ	1b		X
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials	į.		r.á.14,	أعلامه
	published or distributed by the foundation in connection with the activities.	ž	~ ^~ I	AND SEE	#IT##
C	Did the foundation file Form 1120-POL for this year?	-	1c		X
d	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year:	[18-27 18-32	67 ' 28 27,82,82	201 484 201 11
	(1) On the foundation ▶ \$ (2) On foundation managers. ▶ \$		\$ 5 4	1 . 1 . 1 . 1 . 1 . 1 . 1 . 1 . 1 . 1 .	32 23
е	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed		28.,92	72 10 Y2	F
_	on foundation managers > \$	*	الليد ُ.	241	
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?	ŀ	2	•	<u>X</u>
	If "Yes," attach a detailed description of the activities			* 12.43 * 12.43	*
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of		- 1	- 11	ř* i
	incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes		3		$\frac{\mathbf{x}}{\mathbf{x}}$
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	NT / 73	4a		
ь 5	If "Yes," has it filed a tax return on Form 990-T for this year? Was there a liquidation, termination, dissolution, or substantial contraction during the year?	N/A	4b 5		<u>x</u>
J	If "Yes," attach the statement required by General Instruction T	<u> </u>	3	. 75	.00
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either.		12 27		###
u	By language in the governing instrument, or	-	45-3-	2 - 3 - 3 - 1 2 - 3 - 3 - 1	7 + 1 2 2 7 1
	By state legislation that effectively amends the governing instrument so that no mandatory directions that	3	الفائرة	4.4 k	, j
	conflict with the state law remain in the governing instrument?	Į,	****** 6	X	-most of
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 X\	,,	7	X	
, 8a	Enter the states to which the foundation reports or with which it is registered (see instructions)			برع بدد س	* % pt.
ua	MI	ĺ,		X 48	. N
b	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General		4 4	7.27.57 7.25 87.67	
5	(or designate) of each state as required by General Instruction G? If "No," attach explanation	12	8b	X X	
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or	ļ,	8-k-14-		a śd
-	4942(j)(5) for calendar year 2012 or the taxable year beginning in 2012 (see instructions for Part XIV)? If "Yes,"	-		a i ak ak i	arin.S
	complete Part XIV		9		X
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their	r			_
-	names and addresses		10		X
		For		0-PF	

Form	1990-PF (2012) WOLOHAN FAMILY FOUNDATION 38-2700797		Pa	age 5
Pa	art 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 ▶ JAMES WOLOHAN Telephone no ▶ 989-	793-	453	2
	5291 COLONY DRIVE NORTH, STE 1			
	Located at ▶ SAGINAW MI ZIP+4 ▶ 4863	8		
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 – Check here		1	▶ []
	and enter the amount of tax-exempt interest received or accrued during the year			
16	At any time during calendar year 2012, did the foundation have an interest in or a signature or other authority		Yes	No
	over a bank, securities, or other financial account in a foreign country?	16		<u>X</u>
	See the instructions for exceptions and filing requirements for Form TD F 90-22 1 If "Yes," enter the name of		7 7 4	
	the foreign country	<u> </u>		
Pa	art VII-B Statements Regarding Activities for Which Form 4720 May Be Required			
	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.		Yes	No
1a	During the year did the foundation (either directly or indirectly)	,		
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person?	1		· 1
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a	1 1	1	1
	disqualified person?	٠.	,	. 1
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?	١.,٠		:
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?	1.		`
	(5) Transfer any income or assets to a disqualified person (or make any of either available for	1		1 - 1
	the benefit or use of a disqualified person)?		2 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 -	9:17
	(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)	1.	# - -	. 1
þ	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)?	1b	1,000	9 8 1
	Organizations relying on a current notice regarding disaster assistance check here	£ . *	17 27 A 2	# : 1
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? N/A	4	, 2>,	لــــــا
_	· · · · · · · · · · · · · · · · · · ·	1c	. 7	1
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private		7.7	
	operating foundation defined in section 4942(j)(3) or 4942(j)(5))	1.5	i γ _e -4. 13 Seciti	1
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? Yes X No	, `) - k×; '	
	If "Yes," list the years ▶ 20 , 20 , 20 , 20	٠,		
ь	Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2)	1 .	[]	.
~	(relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to	1	w. :	
	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	11	* -i '.	+
_	▶ 20 , 20 , 20 , 20	1.7	. + ₂₂ -	1
3a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise		1,325	
	at any time during the year?			1
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		1.77	
	Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest, or (3) the lapse of		n ala \$	
	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) N/A	3b		
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a		X
b	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its		1 1	<u>:</u>]
	charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2012?	4b	<u> </u>	<u> </u>
		Form 99	0-PF	(2012)

	1990-PF (2012) WOLOHAN FAMILI FOUNDATION		100191					age o
Pa	art VII-B Statements Regarding Activities for Which Forn	n 4720 May Be	Required (c	ontini	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	,		Yes	X No		-1 1	- 1
	(2) Influence the outcome of any specific public election (see section 4955), o	r to carry on,			.			[]
	directly or indirectly, any voter registration drive?			Yes	X No	- ,	- +-+	;
	(3) Provide a grant to an individual for travel, study, or other similar purposes?		ليا	Yes	X No	-	,	
	(4) Provide a grant to an organization other than a chantable, etc., organization	n described in	(E)					
	section 509(a)(1), (2), or (3), or section 4940(d)(2)? (see instructions)		X	Yes	∐ No		. ~	• •
	(5) Provide for any purpose other than religious, charitable, scientific, literary,	or educational					z-	
	purposes, or for the prevention of cruelty to children or animals?			Yes	X No			
b	If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify ur					-,,,		
	Regulations section 53 4945 or in a current notice regarding disaster assistance		5)7		. —	5b		X
	Organizations relying on a current notice regarding disaster assistance check				▶ ∐	1 .		
C	If the answer is "Yes" to question 5a(4), does the foundation claim exemption f	rom the tax	•		Π	-1	1 eg	
	because it maintained expenditure responsibility for the grant?		X	Yes	∐ No		7	
_	If "Yes," attach the statement required by Regulations section 53 4945–5(d)					اسلم. د د		1. 1
6a	Did the foundation, during the year, receive any funds, directly or indirectly, to	pay premiums		V	.	, ,	-	
	on a personal benefit contract?			Yes	X No		E.T	- -}
þ		ersonal benefit cor	itract?			6b	* + ,	X
- .	If "Yes" to 6b, file Form 8870		. —	V	₩	٠,	^ ¥r#€d~	
	At any time during the tax year, was the foundation a party to a prohibited tax s			Yes	X No		iw.T.	700.2
	If "Yes," did the foundation receive any proceeds or have any net income attrib			bly D	N/A	7b		<u> </u>
~ _	Information About Officers, Directors, Trustees, F	-oundation wia	mayers, mig	illy F	aiu Emp	loyet	:5,	
1 1	and Contractors ist all officers, directors, trustees, foundation managers and their compe	neation /see instr	uctions)					
<u> </u>	ist all officers, directors, trustees, foundation managers and their compe	ilsadoli (see ilisti	detions).	1 (4) 00	ontributions to	T		
	(a) Nama and address	(b) Title, and average hours per week	(c) Compensation (If not paid,	emp	oloyee benefit		pense a	
	(a) Name and address	devoted to position	enter -0-)		s and deferred mpensation	othe	r allowa	inces
Q.F.	E STATEMENT 9			1		 		
QE.	D SINIMERI 9	1						
				 		+		
		1						
		† 		1	·	 		
		1						
						1		
2	Compensation of five highest-paid employees (other than those included	on line 1 – see ir	structions). If r	none. e	nter			
-	"NONE."							
		(b) Title, and average		(d) Co	ontributions to			
	(a) Name and address of each employee paid more than \$50,000	hours per week	(c) Compensation		ployee benefit s and defeπed		pense a er allowa	
		devoted to position			mpensation	"	i anome	11063
NC	NE							
		<u> </u>		<u> </u>				
_		<u> </u>						
_		<u> </u>				L		
Tota	I number of other employees paid over \$50,000					•		0
					F	orm 99	0-PF	(2012)

Form 990-PF (2012) WOLOHAN FAMILY FOUNDATION	38-2700797	Page 7
Part VIII Information About Officers, Directors, Trustees, Foundard Contractors (continued)	ındation Managers, Highly Paid I	Employees,
3 Five highest-paid independent contractors for professional services (see ins	structions). If none, enter "NONE."	
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE		
		1
Total number of others recovers ever \$50,000 for professional convec		
Total number of others receiving over \$50,000 for professional services		<u> </u>
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 organizations and other beneficiaries served, conferences convened, research papers produced, etc.	on such as the number of	Expenses
1 N/A		
		· · · · · · · · · · · · · · · · · · ·
2		
3		
	}	
•		
Part IX-B Summary of Program-Related Investments (see ins	structions)	
Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2		Amount
1 N/A		
2		
All other areas mediated investments. See instructions		
All other program-related investments. See instructions 3		
Total, Add lines 1 through 3		

P	art X: Minimum Investment Return (All domestic foundations must complete this part. For	eign f	oundations,
	see instructions)		
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc.,	-	
	purposes:		01 015 051
а	Average monthly fair market value of securities	1a	21,217,351
b	Average of monthly cash balances	1b	0
C	Fair market value of all other assets (see instructions)	1c	01 017 251
d	Total (add lines 1a, b, and c)	1d	21,217,351
е	Reduction claimed for blockage or other factors reported on lines 1a and	7.7	
	1c (attach detailed explanation) 1e 0		^
2	Acquisition indebtedness applicable to line 1 assets	2	0 0 0 0 0 0 0
3	Subtract line 2 from line 1d	3	21,217,351
4	Cash deemed held for charitable activities Enter 11/2% of line 3 (for greater amount, see		
	instructions)	4	318,260
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4.	5	20,899,091
6	Minimum investment return. Enter 5% of line 5	6	1,044,955
P	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	1,044,955
2a	Tax on investment income for 2012 from Part VI, line 5	. हेडा स्थान	
b	Income tax for 2012. (This does not include the tax from Part VI.)	1 4 2 3	
C	Add lines 2a and 2b	2c	31,564
3	Distributable amount before adjustments Subtract line 2c from line 1	3	1,013,391
4	Recovenes of amounts treated as qualifying distributions	4	
5	Add lines 3 and 4	5	1,013,391
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	1,013,391
[P	art XII Qualifying Distributions (see instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes	2 8 - 4 84 4 8 7 94	
а	Expenses, contributions, gifts, etc. – total from Part I, column (d), line 26	1a	976,809
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	las lá	
а	Suitability test (prior IRS approval required)	3a	
ь	Cash distribution test (attach the required schedule)	3b	
4	Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4	4	976,809
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	31,564
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	945,245
	Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foun	dation	
	qualifies for the section 4940(e) reduction of tax in those years		

Pa	rt XIII! Undistributed Income	e (see instruction	s)			
		- <u></u>	(a)	(b)	(c)	(d)
1	Distributable amount for 2012 from Part	XI.	Corpus	Years prior to 2011	2011	2012
-	line 7			٠,		1,013,391
2	Undistributed income, if any, as of the er	nd of 2012				
	Enter amount for 2011 only			4 4	959,907	. 4 *
	Total for prior years: 20 , 20	20				
	Excess distributions carryover, if any, to					. 4 , 5
3	From 2007	2012	1 1 1	را بازار وسند مرتا	a be a second of second of	
	From 2008		1,		Ben and the second section of the second section of the second second section of the section of the second section of the sect	
D	From 2009	·		أأخر والمراجع والسيار أميا		
ن	From 2010		· · · · · · · · · · · · · · · · · · ·	· , , , , , , , , , , , , , , , , , , ,		" " " " " " " " " " " " " " " " " "
_	From 2011		ta andre h	*:		
e	•		The second second second second		ماده محوره بيسم مو سم کارگراه ده	1-7-2 - 1-7721-38
	Total of lines 3a through e	VII	7947127	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	Territoria Trans.	11. " + + + + 1. T. + + 1. T.
4	Qualifying distributions for 2012 from Pa	irt All,	10 me co my production (%)	र १७३ स्क्रम्बर में १०००	Part Strate	
_	line 4. ▶ \$ 976,809	٦-			959,907	
	Applied to 2011, but not more than line 2		7 4 2 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4	M + M 2 2 3	4 24 7 4 2 7 4 1 2 7 4	B. C. C. S. S. S. C.
D	Applied to undistributed income of prior y	years	5 - Lynn 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1		*****	
	(Election required – see instructions)	'la atra-a	- rhynass - 10,174 fffran	17 7	12th 4" 11 12 18 th n 4	> = = = = = = = = = = = = = = = = = = =
С	Treated as distributions out of corpus (E	ection			1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	
	required – see instructions)		424 - 744 - 15 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 -	STATE AND THE	NEL CONTRACTOR	16,902
	Applied to 2012 distributable amount		****** *** ***************************	2 4 6 9 1	1 % k / 2 % % k 2 1 1 1 1 2 1 1 1 1 2 1 1 1 1 2 1 1 1 1 2 1	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
е -	Remaining amount distributed out of cor			5 .	7 8 6 7 7 7 8 M 4 1 4 1 1	4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4
5	Excess distributions carryover applied to		7 187 8 1 2 2 4 11	A STATE OF THE STA	1 7 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	1 mg 2 mg
	(If an amount appears in column (d), the	same	The second of the second		1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	
_	amount must be shown in column (a))		N SER ATTE & A PER LANGE OF	W 44 pm 2 1 1 1 1 2 1 2 2 2 2 2 2 2 2 2 2 2 2		The state of the s
6	Enter the net total of each column as		1 2 18 18 18 18 18 18 18 18 18 18 18 18 18	- 1		1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
	indicated below:	., -	Land Bill Till W.	3 (Tall 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		1 1 K 22
	Corpus Add lines 3f, 4c, and 4e Subtra		a natural the Page	(1 4 % m + m + m + m + m + m + m + m + m + m	. 3/5	-15 5- x secul 1
b	Prior years' undistributed income. Subtra	act			gr. 7 18 5 - 1 18 18 2 -	THE LEFT A
	line 4b from line 2b		1.1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		2. + 25 4 KM - MM 4 5 5	Fragility Andr
С	Enter the amount of prior years' undistril				A STATE OF THE STA	**************************************
	income for which a notice of deficiency h				-15-1 8 4 5-17-3 8 A	37 4 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
	been issued, or on which the section 49	42(a)	A. 182		**************************************	Life
	tax has been previously assessed		S. 1. 21 . 27 . 2 . 2 . 2 . 3 . 3 . 3		82 B 1 7 7 8 - 1 8 .	4 1 V3 F2 L 6-
d	Subtract line 6c from line 6b Taxable		1.4.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1			
	amount - see instructions	. 1	B. in Table 200	2 M	, , , , , , , , , , , , , , , , , , ,	11 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
е	Undistributed income for 2011 Subtract	tiine	MARKET AND THE TO	- 14 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1		A 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4
	4a from line 2a Taxable amount - see		1. 2. 1. 1. 2. 2. 2. 2. 2. 2. 2. 2. 2. 2. 2. 2. 2.	The last of the		'day oray teams.'-
_	instructions	4 l	of the first war and the area	* 1.4 mm 9 mm 1.7 1.7 1.7 1.7 1.7 1.7 1.7 1.7 1.7 1.7	PARTE 1874 3	- ,
Т	Undistributed income for 2012 Subtract		2 Mills made to 1 & Many control	A Salar and an and salar s	1 1 1 1 1 1 2 2 2 2 2 2 1 1 1 1 1 1 1 1	
	4d and 5 from line 1. This amount must	be				996,489
_	distributed in 2013		7, 7, 7, 7, 7, 7, 7, 7, 7, 7, 7, 7, 7, 7	1 19 mat - 2 miles " f was sel	~ W > % X 1 , J > \ max	· 1 · 1 · 1 · 1 · 1 · 1 · 1 · 1 · 1 · 1
7	Amounts treated as distributions out of				Parador Port	I to the k
	to satisfy requirements imposed by sect			The state of the s		
	170(b)(1)(F) or 4942(g)(3) (see instruct			- 14 pr - 2 - 3 - 2 - 2		1. 184 14 15 16 17 44
8	Excess distributions carryover from 200			12		74. 3
•	applied on line 5 or line 7 (see instruction Excess distributions carryover to 20)	•		. 14 %	Tap C T T Than	Pistanist P
9	Subtract lines 7 and 8 from line 6a	10,			The state of the s	
40			45 4 2 - 1 min 2 2 2 2 4			All (1) \$ Tetal \$ 100 Te
10	Analysis of line 9	1		「		
a	Excess from 2008		- 1 mm 1	de for the diffe	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	
b	Excess from 2009					y -1 g
C	Excess from 2010		144.0	W. T. P. S. T. T. P.	1441、 1777年 1787年 1787年 1	1 3 to 1 " " " " " 2 con 3 co " " 1 co " 2 co
d	Excess from 2011		H× すなこながくさび	Light to a be a few or the state of	· · · · · · · · · · · · · · · · · · ·	
_ <u>e</u>	Excess from 2012	1	3+ 10 4 2 4 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	The state of the s	1 * * * * * * * * * * * * * * * * * * *	15.

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

N/A

factors N/A

Part XV. Supplementary Information (c	ontinued)			
Part XV. Supplementary Information (c 3 Grants and Contributions Paid During the	ne Year or Approved for	r Future Payment		
Recipient	If recipient is an individual, show any relationship to any foundation manager	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	or substantial contributor	recipient		
	any foundation manager	recipient	contribution	967,750
Total b Approved for future payment N/A			▶ 3a	967,75
Total			▶ 3b	

	iter gross am	ounts unless otherwise indicated.	Unrelated	d business income	Excluded	by section 512, 513, or 514	(0)
_			(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	(e) Related or exempt function income (See instructions)
1	•	rvice revenue					<u> </u>
	a				 		
			-		· -		
			-				
	e f					-	
	·	d contracts from government agencies	- · · · · - 				-
2	-	o dues and assessments					
	-	savings and temporary cash investments			<u> </u>		
4		nd interest from securities			14	499,492	
		come or (loss) from real estate	***********	2.87 4 4.1. 18.14 - July			** Con St. P
•		anced property	S 1 with S work to pe you wang papers	2 Waste William Company of the last		Short and the shippenship they have the set of	
		t-financed property					
6		come or (loss) from personal property	1		<u> </u>	****	
		tment income					
8		s) from sales of assets other than inventory			18	2,845,269	
	•	or (loss) from special events	-				
		or (loss) from sales of inventory				-	
	Other reven						
		STATEMENT 12		-103,582		21,539	
	e						
12	Subtotal A	dd columns (b), (d), and (e)	3 204 3	-103,582	10 300	3,366,300	
13	Total. Add	line 12, columns (b), (d), and (e)				13 _	3,262,718
<u>(S</u>	ee worksheel	in line 13 instructions to verify calculations)			-		- ,-
\$≥ 4	Part XVI-E						
	Line No.	Explain below how each activity for which incor	ne is reported in i	column (e) of Part XV	'I-A cont	ributed importantly to t	he
_		accomplishment of the foundation's exempt pu	rposes (other tha	n by providing funds t	or such	purposes) (See instru	uctions)
_	N/A						
							
_							
_							
_							

<u> </u>	330-77 (20	(12) NOLIOILAIN .				30-2700131	<u> </u>		rage 13
Pa	irt XVII	-	_	ransfers To a	nd Transact	ions and Relationships	With Noncharita	ble	
1	Did the error	Exempt Organiz	-	as in any of the fe	-llevene with env	other eventation described		Y€	s No
•						other organization described section 527, relating to political		116	s No
	organization		ici tilali seci	uon sorto,(s) orga	ariizations) or iii	section 327, relating to political			1 1
а	•	rom the reporting foun	idation to a n	oncharitable exen	nnt organization	of		-7 -4	
_	(1) Cash				p. 0.g		Į.	la(1)	X
	(2) Other a	ssets						a(2)	Х
b	Other trans	actions.							
	(1) Sales o	f assets to a noncharr	table exemp	t organization				lb(1)	X
	(2) Purcha	ses of assets from a r	nonchantable	e exempt organiza	tion			(b(2)	Х
	(3) Rental of	of facilities, equipment	t, or other as	sets				lb(3)	X_
	• -	ırsement arrangement	ts					lb(4)	X
		or loan guarantees						lb(5)	<u> </u>
		nance of services or m					[lb(6)	X
	-	facilities, equipment, n	•	•	• •	(1-)	<u>.</u>	1c	_ X
a					_	umn (b) should always show th			
		_			_	If the foundation received less t			
_	a) Line no	(b) Amount involved	T	e of noncharitable exem		of the goods, other assets, or se		ngements	
<u>1/7</u>		(0),	(5)		.pg	(4,000)			····
<u>.,, -</u>			†		•		-		
					· 		·		
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				-		<u> </u>			
			 						
			 						
			ļ						
			 				·		<u>.</u>
22	Is the found	dation directly or indire	ctly affiliated	L with or related to	one or more to	x-exempt organizations			
		n section 501(c) of the	•					Yes	X No
b		mplete the following so	-		. (0)(0)// 0 0		_		
		a) Name of organization		(b) Type of	organization	(c) Descr	ption of relationship		
	N/A								
									
	Under		that I have aver			schedules and statements, and to the t	nest of my knowledge and h	aliaf it is t	
						n of which preparer has any knowledge			
>:	_	1.0.	_				May the IRS discus with the preparer s		1
Sig: Her		/ ////				0.0	(see instructions)?	-	No No
Ter		0/1 4/ V V	\		111	. U. 2013 🔪 TREE	ASURER		
	Sigh	lature of officer or trustee	X		Date				
		ype preparer's name			Preparer's signati		Date		$\overline{\Box}$
	- 101013	The bichaigs a liquid				200 50	Date		eck lif
aid	LAUR	A M. EBEL			1 Daw	ra IVI. Ebel	11/71	13	
•	arer Firm's		EWS HO	OPER PAVI	IK PLC		PTIN POO	1842	32
Jse	Only Firm's	address ► 5300	GRATIC	OT RD			Firm's EIN ▶ 38-3	31337	90
		CACTI	M TAKE	T 10630_	6035		080-	107-	5300

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

Department of the Treasury Internal Revenue Service

Name of the organization

Schedule of Contributors

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

OMB No 1545-0047

Employer identification number

Schedule B (Form 990, 990-EZ, or 990-PF) (2012)

2012

WOLOHAN FAMILY FOUNDATION 38-2700797 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 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 331/3 % 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 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)

For Paperwork Reduction Act Notice, see the Instructions for Form 990, 990-EZ, or 990-PF.

Name of organization WOLOHAN FAMILY FOUNDATION Page 1 of 1 of Part I
Employer identification number 38-2700797

Part I	Contributors (see instr	uctions). Use du	uplicate copies of	Part I if ad	ditional space is	needed.	
(a) No.	Name, add	(b) ress, and ZIP + 4		Total c	(c) ontributions	Type of co	
1	CHRISTINE WOLOHA 1705 CROSBY ROAI WAYZATA		55391	\$	17,000	Person Payroll Noncash (Complete Part a noncash cont	
(a) No.	Name, addi	(b) ress, and ZIP + 4		Total c	(c) ontributions	(d Type of co	•
2	RICHARD P. WOLON 4409 SUNFLOWER I	HAN DRIVE	20853	\$	13,206	Person Payroll Noncash (Complete Part a noncash cont	X
(a) No.	Name, addı	(b) ress, and ZIP + 4		Total c	(c) ontributions	(d Type of co	
3	CHRIS R. WOLOHAN 455 NORTHWEST HV	AA 330 4	75039	\$	26,000	Person Payroll Noncash (Complete Part a noncash cont	X Il if there is
(a) No.	Name, add	(b) ress, and ZIP + 4		Total c	(c) ontributions	(d Type of co	•
				\$		Person Payroli Noncash (Complete Part a noncash cont	Il if there is
(a) No.	Name, add	(b) ress, and ZIP + 4		Total c	(c) ontributions	(d Type of co	
				\$		Person Payroll Noncash (Complete Part a noncash cont	Il if there is
(a) No.	Name, add	(b) ress, and ZIP + 4		Total c	(c) ontributions	(c Type of co	
				\$		Person Payroll Noncash (Complete Part a noncash cont	

Federal Statements

Form 990-PF - General Footnote

Description

DURING 2012, MANAGEMENT CHANGED THE BOOK METHOD OF ACCOUNTING TO THE MODIFIED CASH BASIS TO BE CONSISTENT WITH THE METHOD USED TO REPORT INCOME ON THE TAX RETURN. THE CHANGE IN NET ASSETS WAS NEEDED TO ADJUST FOR THE PRIOR YEAR ACCUMULATED UNREALIZED GAINS ON MARKETABLE SECURITIES AND TO ADJUST FOR FLOW-THROUGH EARNINGS RECORDED IN PRIOR YEARS ON THE TAX RETURN, BUT NOT RECOGNIZED FOR BOOK PURPOSES. IN ADDITION, AT THIS TIME MANAGEMENT CHANGED THE JUDGMENT APPLIED TO THE FAIR MARKET VALUE OF NON-MARKETABLE ASSETS HELD.

38-2700797	Federal 9	Federal Statements		
Statement 1	ı	Form 990-PF, Part I, Line 11 - Other Income	Income	•
Description		Revenue per Books	Net Investment Income	Adjusted Net Income
RCP FUND II LP RCP FUND III LP RCP FUND IV LP WAYZATA OPPORTUNITIES FUND WAYZATA OPPORTUNITIES FUND RCP SECONDARY FUND RCP SCONDARY FUND RCP FUND II LLC - UBI WAYZATA OPPORTUNITIES FUND II RCP FUND IV LP - UBI RCP FUND III LP - UBI RCP SECONDARY FUND - UBI RCP SECONDARY FUND - UBI			\$ -1,954 -317 -14 -683 28,490 -4,111 128	
		\$ -82,043	\$ 21,539	\$
Statement 2	- Form 990-PF,	Part I, Line 16b - Accounting Fees	nting Fees	
AUDIT, TAX PREP, ACCING ASSISTAN	Total \$ 12,115 \$ 12,115	Net Investment \$ 6,058 \$ 6,058	Adjusted Net	Charitable Purpose \$ 6,057
Statement 3 - Form		990-PF, Part I, Line 16c - Other Professional Fees	essional Fees	
Description BROKER FEES - MORGAN STANLEY TOTAL	Fotal \$ 21,502 \$ 21,502	Net Investment \$ 21,502 \$ 21,502	Adjusted Net	Charitable Purpose \$
				1-3

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38-2700797	Federal	Federal Statements		
35	Statement 4 - Form 990	4 - Form 990-PF, Part I, Line 18 - Taxes	axes	
Description	Total	Net Investment	Adjusted Net	Charitable Purpose
FEDERAL EXCISE TAXES UBI TAXES TOTAL	\$ 13,000 -7,250 \$ 5,750	w w	y	\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \
Statement 5	- Form 990-PF,	Part I, Line 23 - Other Expenses	Expenses	
Description			Adjusted Net	Charitable Purpose
	φ.	\$	·Ω·	·γ
EXFENSES TAXES, LICENSES & FEES OFFICE SUPPLIES MISCELLANEOUS PORTFOLIO DEDUCTIONS - K-1S DADTHRESHIP MONDEDICTIELE EXP	1,249 66 149 181,890 5,122	181,890		1,249 66 149
TOTAL	\$ 188,476	\$ 181,890	\$	\$ 1,464
				4-5

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Federal Statements

38-2700797

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Description		Beginning of Year	End of Year	Basis of Valuation	Fair Market Value
VARIOUS BROKERAGE ACCOUNTS	· የኦ	8,713,912	\$ 15,057,382	MARKET	\$ 15,057,382
ACO INC		58,823	58,823	MARKET	58,823
RCP FUND II LP		1,351,827	1,956,056	MARKET	1,956,056
RCP FUND III LP		964,586	864,492	MARKET	864,492
RCP FUND IV LP		830,999	940,597	MARKET	940,597
WAYZATA OPPORTUNITIES FUND LLC		1,481,012	2,220,246	MARKET	2,220,246
WAYZATA OPPORTUNITIES FUND OFFSHORE		422,788	422,788	MARKET	422,788
WAYZATA OPPORTUNITIES FUND II LP		1,118,626	1,315,955	MARKET	1,315,955
WAYZATA OPPORTUNITIES FUND III, LP			-235	MARKET	-235
RCPDIRECT LP		520,000	857,830	MARKET	857,830
VILLAGE GREEN		***************************************	-25,218	MARKET	-25,218
TOTAL	\ \ \ \	15,462,573	\$ 23,668,716		\$ 23,668,716

Federal Statements

Statement 7 - Form 990-PF, Part II, Line 15 - Other Assets

Description	 Beginning of Year		End of Year	_	Fair Market Value
PREPAID FEDERAL TAXES	\$ 5,918	\$_	2,918	\$_	2,918
TOTAL	\$ 5,918	\$	2,918	\$_	2,918

Statement 8 - Form 990-PF, Part III, Line 3 - Other Increases

Description	 Amount
UNREALIZED GAIN ON INVESTMENTS SEE GENERAL FOOTNOTE	\$ 1,573,518 4,500,082
TOTAL	\$ 6,073,600

38-2700797	Federal	Federal Statements	S		
Statement 9 - Form 990-PF.	90-PF, Part VIII, Line	e 1 - List of O	, Part VIII, Line 1 - List of Officers, Directors, Trustees,	rustees, Etc.	
Name and Address	Title	Average Hours	Compensation	Benefits	Expenses
JAMES L WOLOHAN 5291 COLONY DRIVE NORTH SAGINAW MI 48638	VICE PRES	0.75	0	0	0
RICHARD P WOLOHAN 5291 COLONY DRIVE NORTH SAGINAW MI 48638	DIRECTOR	0.25	0	0	0
MICHAEL J WOLOHAN 5291 COLONY DRIVE NORTH SAGINAW MI 48638	VICE PRES	0.75	0	0	0
MARY K NESS 5291 COLONY DRIVE NORTH SAGINAW MI 48638	DIRECTOR	0.25	0	0	0
SHARON L WOLOHAN 5291 COLONY DRIVE NORTH SAGINAW MI 48638	SECRETARY	0.25	0	0	0
CHRISTINE M WOLOHAN 5291 COLONY DRIVE NORTH SAGINAW MI 48638	PRESIDENT	3.00	0	0	0
PATRICIA A KREMIN 5291 COLONY DRIVE NORTH SAGINAW MI 48638	DIRECTOR	0.25	0	0	0
TERI HULL 5291 COLONY DRIVE NORTH SAGINAW MI 48638	TREASURER	0.75	0	0	0
SHARON MCGRANN 5291 COLONY DRIVE NORTH SAGINAW MI 48638	DIRECTOR	0.25	0	0	0
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Federal Statements

Statement 10 - Form 990-PF, Part XV, Line 1a - Managers Who Contributed Over 2% or \$5,000

Name of Manager	 Amount
JAMES WOLOHAN	\$ 447,650
CHRISTINE WOLOHAN	 268,200
TOTAL	\$ 715,850

Statements
Federal

Name		Address			
Address	Re	Relationship Status		Purpose	Amount
ADRIAN DOMINICAN SISTERS		1257 EAST SIENA HEIGHTS	TIS		
	N/A	N/A	OPEN - UNREST	UNRESTRICTED	2,000
ALLIANCE DEFENSE FUND	4 / N	ISIOO N. 90TH STREET	ODFN - IINREST	CHESTATE	000
	¢ /v	614 W SUPERIOR ST		ALC: L	
ALMA MI 48801	N/A	N/A	OPEN - UNREST	UNRESTRICTED	1,000
LIS ST.	PAUL	226 SUMMIT			
SAINT PAUL MN 55102	N/A		OPEN - UNREST	UNRESTRICTED	2,000
AXIS	4 / N	F.O. BOX 635/2	ENDOWMENT FIIND		000.7
CATHOLIC MEDICAL MISSION BOARD	4 / 1	10 WEST 17TH STREET		٥	
NEW YORK NY 10011	N/A	N/A	OPEN - UNRESTRICTED	RICTED	2,000
ES		228 W. LEXINGTON			
1201	N/A	N/A	WATER BASED F	PROJECTS	100,000
, ,	,	2424 18TH AVE S			0
MINNEAPOLIS MN 55404 N/A	N/A		OUT OF SCHOOL	HIME	10,000
CALLUNEN S AEALIA CARE FOUNDAL ROSEVIIIE MN 55113	N/N	CENTRE FOINT N/A	LVE MOTHER BABY CENTER	A F L N E	10.000
		1021 BURT			2
7.	N/A		OPEN - UNRESTRICTED	RICTED	7,500
COVENANT HOUSE		2959 MARTIN LUTHER KING	В		
DETROIT MI 48208	N/A		OPEN -	UNRESTRICTED	100,000
		600 SW THIRD STREET			
POMPANO BEACH FL 33060	N/A	N/A	OPEN - UNRESTRICTED	RICTED	14,000
DELTA COLLEGE		1961 DELTA RD UNIV CENTER	ENTER		
BAY CITY MI 48710	N/A	N/A	INNOVATION CA	INNOVATION CAPITAL CAMPAIGN	20,000
EAST SIDE SOUP KITCHEN		940 E GENESEE AVE			
SAGINAW MI 48607-1778	N/A	N/A	OPEN - UNRESTRICTED	RICTED	11,000
		901 EAST 78TH STREET			
	N/A	-	OPEN -	UNRESTRICTED	2,000
FIELD NEUROSCIENCES INSTI		4677 TOWNE CENTER SUITE	ITE 1		
SAGINAW MI 48604	N/A	N/A	OPEN - UNREST	UNRESTRICTED	5,000
FOOD FOR THE POOR		6401 LYONS ROAD			
COCONUT CREEK FL 33073	N/A		OPEN - UNRESTRICTED	RICTED	83,000
		2303 WEST MARKET STREET			
	N/A	:	MINISTRY OF F	FATHER MARC IN HAITI	20,000
	,	P.O. BOX 465618	po martin	(0
CINCINNATI OH 45246-5618	N/A	N/A	OPEN - UNRESTRICTED	RICTED	80,000

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Federal Statements

Statement 11 - Form 990-PF, Part XV, Line 3a - Grants and Contributions Paid During the Year (continued)

Name	Address	1	
	Relationship Status	Purpose	Amount
	1601 JOSLYN ROAD		
N/A	N/A P.O. BOX 1982	OPEN - UNRESTRICTED	1,000
48602-1982 N/A	N/A	OPEN - UNRESTRICTED	7,500
SERV	925 N. RIVER ROAD	מחשט ד משט מרונון ואמר (((((
4 / N	P.O. BOX 543	OFEN - UNRESIKICIED	000,07
N/A		OPEN - UNRESTRICTED	150,000
KELLOG SCHOOL OF MANAGEMENT	2001 N. SHERIDAN ROAD		
N/A	N/A 1119 COMMONWEALTH AVE	OPEN- UNRESTRICTED	2,500
N/A	_	OPEN - UNRESTRICTED	2,000
N/A		OPEN - UNRESTRICTED	1 000
FOR LUKULA	P.O. BOX 6883		000
		MISSION TRIP	750
4) IX	800 HINGHMAN STREET	יייייייייייייייייייייייייייייייייייייי	6
MICHIGAN STATE UNIVERSITY	IN/A 101 MARSHALL ADAMS HALL	SISIERS OF MERCI	10,000
EAST LANSING MI 48824 N/A		ELI & EDYTHE BROAD ART MUSEUM	1,000
	320 S. MAIN STREET		
N/A	N/A 114 STIIADT BOAN NE	RECOGNITION PROGRAM TOP 5 GRAD	1,000
N/A	N/A	OPEN - UNRESTRICTED	5
SCH	5802 WEISS ST		
N/A		STUDENT SCHOLARSHIPS	2,500
FOR HUMAN 48607-1126 N/A	316 S JEFFERSON AVE.	OBEN - MOSCHELLER	0
	P.O. BOX 3204	OF EN ONNESTRICIED	9,000
N/A	N/A	OPEN - UNRESTRICTED	8,500
, ;	70 EAST LAKE ST. SUITE	12	
N/A STSTERS OF MERCY OF ALMA MICHIGAN	N/A 1965 MTCHTGAN AVE	OPEN - UNRESTRICTED	200
N/A	N/A	OPEN- UNRESTRICTED	10,000
6/10	630 EAST WAYZATA BLVD		
N/A	N/A	OPEN - UNRESTRICTED	12,000

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Statements

Statement 11 - Form 990-PF, Part XV, Line 3a - Grants and Contributions Paid During the Year (continued)

Federal Statements

Statement 12 - Form 990-PF, Part XVI-A, Line 11 - Other Revenue

Description

	Business Code	_	Unrelated Amount	Exclusion Code	Exclusion Amount	Related Income
RCP FUND II LP		ċ		16 \$	-1,954	Ċ
RCP FUND III LP		\$			•	Ÿ
RCP FUND IV LP				16	-317	
JAYZATA OPPORTUNITIES	PIND			16	-14	
				16	-683	
AYZATA OPPORTUNITIES	FUND			16	28,490	
CP SECONDARY FUND				16	-4,111	
CPDIRECT FUND					·	
CP FUND II LLC - UBI				16	128	
AYZATA OPPORTUNITIES	900099 FD UB		-606			
	900099		-88,408			
AYZATA OPPORTUNITIES	FUND 900099		-980			
CP FUND IV LP - UBI	900099		-12,775			
CP FUND III LP - UBI			·			
CP SECONDARY FUND - UI	900099 3I		4,168			
CPDIRECT FUND - UBI	900099		-1,714			
	900099		-5,050			
ILLAGE GREEN	900099		1,783			
TOTAL		\$_	-103,582	\$	21,539	\$

Wolohan Family Foundation 20-0748605 12/31/2012

Form 990-PF, part VII-B, Line 5c

The following information is provided in accordance with IRC Sec 4945(h)(3) and Reg. 53.4945-5(d) to demonstrate that the foundation exercised expenditure responsibility in regard to its grants.

Name and Address of Grantee	Amount of Grant Date of Grant	Date of Grant	Purpose of Grant	To the Grantor's Knowledge, Grantee Has Diverted a Portion of Funds from the of Funds from the Grant Of Funds from the Grant Of Funds from the Grante Of Funds from the Grante Of Funds from the Grante	Amounts Expended by Grantee	Dates of Reports Received from the Grantee	Dates of Reports Received from the Grantee's Reports
The Temple Theatre Foundation 201 N. Washington Avenue Saginaw, MI 48607	\$ 80,000 1.	12/20/2012	Operations	No	The 2012 financial statements were received in 2013.	statements were I	eceived in 2013.

(Rev. January 2013)

Application for Extension of Time To File an **Exempt Organization Return**

OMB No 1545-1709

File a separate application for each return. Department of the Treasury Internal Revenue Service ► X If you are filing for an Automatic 3-Month Extension, complete only Part I and check this box If you are filing for an Additional (Not Automatic) 3-Month Extension, complete only Part II (on page 2 of this form) Do not complete Part II unless you have already been granted an automatic 3-month extension on a previously filed Form 8868 Electronic filing (e-file). You can electronically file Form 8868 if you need a 3-month automatic extension of time to file (6 months for a corporation required to file Form 990-T), or an additional (not automatic) 3-month extension of time. You can electronically file Form 8868 to request an extension of time to file any of the forms listed in Part I or Part II with the exception of Form 8870, Information Return for Transfers Associated With Certain Personal Benefit Contracts, which must be sent to the IRS in paper format (see instructions) For more details on the electronic filing of this form, visit www.irs gov/efile and click on e-file for Charities & Nonprofits Automatic 3-Month Extension of Time. Only submit original (no copies needed). A corporation required to file Form 990-T and requesting an automatic 6-month extension - check this box and complete Part I only All other corporations (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request an extension of time to file income tax returns Enter filer's identifying number, see instructions Type or Name of exempt organization or other filer, see instructions Employer identification number (EIN) or print WOLOHAN FAMILY FOUNDATION 38-2700797 Number, street, and room or suite no. If a P.O. box, see instructions Social security number (SSN) File by the due date for 5291 COLONY DRIVE NORTH filing your City, town or post office, state, and ZIP code For a foreign address, see instructions return See MI 48638 SAGINAW instructions 04 Enter the Return code for the return that this application is for (file a separate application for each return) **Application** Return **Application** Return Is For Code Is For Code Form 990 or Form 990-EZ Form 990-T (corporation) 07 Form 990-BL Form 1041-A 80 Form 4720 (individual) 03 Form 4720 09 10 Form 990-PF Form 5227 04 Form 990-T (sec 401(a) or 408(a) trust) 05 Form 6069 11 Form 990-T (trust other than above) 06 Form 8870 12 JAMES WOLOHAN 5291 COLONY DRIVE NORTH, STE 1 The books are in the care of ➤ SAGINAW MI 48638 Telephone No ▶ 989-793-4532 FAX No ▶ If the organization does not have an office or place of business in the United States, check this box If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) If this is I if it is for part of the group, check this box for the whole group, check this box and attach a list with the names and EINs of all members the extension is for I request an automatic 3-month (6 months for a corporation required to file Form 990-T) extension of time until 08/15/13 , to file the exempt organization return for the organization named above. The extension is for the organization's return for ▶ X calendar year 2012 or tax year beginning , and ending If the tax year entered in line 1 is for less than 12 months, check reason: Initial return Change in accounting period If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any 41,786 nonrefundable credits. See instructions If this application is for Form 990-PF, 990-T, 4720, or 6069, enter any refundable credits and 16,786 estimated tax payments made. Include any prior year overpayment allowed as a credit 3b Balance due. Subtract line 3b from line 3a Include your payment with this form, if required, by using

EFTPS (Electronic Federal Tax Payment System) See instructions.

25,000

Form 8868 (R	Rev. 1-2013)						Page 2
	filing for an Additional (Not Automatic) 3-Month E	Extension, o	complete only Part II and ch	eck this box		·	▶ X
	omplete Part II if you have already been granted an a		•		8868	i.	
 If you are 	filing for an Automatic 3-Month Extension, compl	lete only Pa	art I (on page 1).				
ERantill线	Additional (Not Automatic) 3-Month E	Extension	of Time. Only file the	original (no	cop	pies needed).	
			Ent	er filer's Iden	tifylr	ng number, see	instructions
Type or	Name of exempt organization or other filer, see instructions Employer identification number (EIN						N) or
print	1101 0 11 11 11 11 11 11 11 11 11 11 11						
File by the	WOLOHAN FAMILY FOUNDATIO	<u>N</u>		38-2700	<u> 79</u>	7	
due date for	Number, street, and room or suite no. If a P.O bo	ox, see instri		Social securit	y nui	mber (SSN)	
filing your	5291 COLONY DRIVE NORTH		STE 1				
return. See instructions	City, town or post office, state, and ZIP code. For	-					
	SAGINAW MI	48638	5				
Enter the Rete	urn code for the return that this application is for (file	a separate	application for each return)			•	04
Application	1	Return	Application			 	Return
Is For	•	Code	Is For				Code
	r Form 990-EZ	01		(A) 图(2)图(A)	1	C-1-1-1-1-1	MELLE
Form 990-B		02	Form 1041-A	THE RESERVE AND ADDRESS OF THE PERSON NAMED IN COLUMN TWO IS NOT THE PERSON NAMED IN COLUMN TWO IS NAMED I			08
Form 4720		03	Form 4720				09
Form 990-P	 	04	Form 5227				10
	(sec. 401(a) or 408(a) trust)	05	Form 6069				11
	(trust other than above)	06	Form 8870				12
	t complete Part II if you were not already grante						
for the whole glist with the no	or a Group Return, enter the organization's four digit group, check this box	t of the grou	up, check this box	If this is and attack	h a		
	x year entered in line 5 is for less than 12 months, c	•		al return			
Cha	ange in accounting period						
ADD]	detail why you need the extension ITIONAL TIME IS REQUESTED ACCURATE RETURN.	TO GÀ	THER INFORMATIO	N TO PR	ĖP	ARE A CO	MPLETE
	pplication is for Form 990-BL, 990-PF, 990-T, 4720,	, or 6069, er	nter the tentative tax, less any			_	44 55
	ndable credits See instructions.			To d	8a	\$	41,786
b If this application is for Form 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated tax payments made. Include any pποτ year overpayment allowed as a credit and any							
						41 706	
	amount paid previously with Form 8868 8b \$					<u>41,786</u>	
	Balance due. Subtract line 8b from line 8a. Include your payment with this form, if required, by using EFTPS					0	
(Electro	onic Federal Tax Payment System) See instructions	·			8c	\$	
Linder penalti	Signature and Verific		st be completed for P	_	and t	a the best of my	
	nd belief, it is true, correct, and complete, and that is					Door or ing	
Signature •	Laure M. Elel		tle ► CPA			Date > 8	114113
_	. –					Form 88 (68 (Rev 1-2013)