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Return of Private Foundation
or Section 4947(a)(1) Trust Treated as Private Foundation
Do not enter Social Security numbers on this form as it may be made public.

OMB No 1545-0052

Department of the Treasury Internal Revenue Service

▶ Information about Form 990-PF and its separate instructions is at www.irs.gov/form990pf.

Open to Public Inspection

_		lendar year 2013 or tax year beginning	AUGUST	1 , 2013, ar	id ending		OLY 31 , 20 14
		of foundation				A Employer identifi	
		AT FOUNDATION				38-27105	
	Numbe	er and street (or P O box number if mail is not delivered	to street address)	l R	oom/suite	B Telephone numb	er (see instructions)
_		EAST MAIN	 		300	248-468-	3100
	City or	town, state or province, country, and ZIP or foreign pos	ital code			C Management and another	
						C If exemption application pending, check here	ation is
_		HVILLE, MI 48167				4	
G	Che	ck all that apply Initial return		of a former pub	lic charity	D 1 7 Oreign Organiza	
		Final return	Amended ret			2. Foreign organiza 85% test, check h	
-	01	Address change	Name change			computation .	
'n		ck type of organization X Section 501(E If private foundation	
1		ection 4947(a)(1) nonexempt charitable trust market value of all assets at J Accord	Other taxable prounting method X Ca			under section 507(b	
'			her (specify)	asii Accida	11	t .	in a 60-month termination (1)(B), check here
		of year (from Part II, col (c), line			~- ~- -	- Under section 50/(b)	(1)(B), Cleck liefe .
		Analysis of Revenue and Expenses (The		casii basis /			(d) Disbursements
L	aiti	total of amounts in columns (b), (c), and (d)	(a) Revenue and expenses per	(b) Net investr	nent	(c) Adjusted net	for charitable
		may not necessarily equal the amounts in column (a) (see instructions))	books	income	}	income	purposes (cash basis only)
. –	_		301,000				(Cash basis only)
:	2	Contributions, qifts, grants, etc., received (attach schedule). If the foundation is not required to attach Sch. B.	301,000		 		
,	3	Therest on savings and temporary cash investments	7,992	7.	992		
•	4	Dividends and interest from securities	275,707	275,			
	_	Gross rents	2.07.0				
	1	Net rental income or (loss)					
as	_	Net gain or (loss) from sale of assets not on line 10	-2,391				
'n	b	Gross sales price for all assets on line 6a 106, 333					
Revenue	7	Capital gain net income (from Part IV, line 2)				(n)	1960
ď	8	Net short-term capital gain				S NUV.	2010 10
	9	Income modifications · · · · · · · · · · · · · · · · · · ·					ch
	10 a	Gross sales less returns and allowances · · · ·				686	
	Ь	Less Cost of goods sold .					(), (-2) ()
	С	Gross profit or (loss) (attach schedule)					
	11	Other income (attach schedule)					
_	12	Total. Add lines 1 through 11	582,308	283,	, 699		
	13	Compensation of officers, directors, trustees, etc					
Ś	14	Other employee salaries and wages					
nse	15	Pension plans, employee benefits				 	ļ
Ωe	16 a	Legal fees (attach schedule)					ļ
ũ	15 16 a b c 17 18 19	Accounting fees (attach schedule)	15,120	15,	,120		
tive	С	Other professional fees (attach schedule)					
tra	17	Interest	2 5 4 5		545		
nis	18	Taxes (attach schedule) (see instructions)	3,546	3,	,546		
Ē	19	Depreciation (attach schedule) and depletion.					
Ac	20	Occupancy					
Operating and	21	Travel, conferences, and meetings					
נק ני	22	Printing and publications		-			
atir	23	Other expenses (attach schedule)					
Ser	24	Total operating and administrative expenses.	18,666	1Ω	, 666		1
ŏ		Add lines 13 through 23	430,600	10	, 000		430,600
	25	Contributions, gifts, grants paid	430,800	1.8	, 666		430,600
-	26	Total expenses and disbursements Add lines 24 and 25	749,200	1	' 		130,000
	27	Subtract line 26 from line 12 Excess of revenue over expenses and disbursements	133,042				
		Net investment income (If negative, enter -0-)	133,042	265	,033		
	1	Adjusted net income (if negative, enter -0-).					
_	<u> </u>	, _ oco a mot mooning in mogalito, cinci -0-/					

Part i		Attached schedules and amounts in the description column should be for end-of-year	Beginning of year	End of	of year	
	artii	amounts only (See instructions)	(a) Book Value	(b) Book Value	(c) Fair Market Value	
	1	Cash - non-interest-bearing	61,533	112,267	112,267	
ı	2	Savings and temporary cash investments		325,164	325,164	
	3	Accounts receivable				
		Less: allowance for doubtful accounts ▶				
	4	Pledges receivable				
		Less allowance for doubtful accounts ▶				
	5	Grants receivable				
	6	Receivables due from officers, directors, trustees, and other				
- 1	_	disqualified persons (attach schedule) (see instructions)	l !			
	7	Other notes and loans receivable (attach schedule)				
		Less allowance for doubtful accounts ▶				
Ø	8					
ssets	9	Inventories for sale or use				
As		Investments - U S and state government obligations (attach schedule),				
		Investments - corporate stock (attach schedule)		2,170,590	2,170,590	
		Investments - corporate bonds (attach schedule)	 	271.07330	2/1/0/350	
	11	Investments - land, buildings, and equipment basis Less accumulated depreciation				
	40	(attach schedule) Investments - mortgage loans	l I			
	12 13	Investments - other (attach schedule)	3,115,405	3,422,187	3,422,187	
ļ	14	Land, buildings, and				
		Less accumulated depreciation	1 1			
	15	(attach schedule) Other assets (describe				
	16	Total assets (to be completed by all filers - see the		· · · · · · · · · · · · · · · · · · ·		
	• -	Instructions Also, see page 1, item I)		6,030,208	6,030,208	
_	17	Accounts payable and accrued expenses				
	18	Grants payable)			
g	19	Deferred revenue				
Liabilities	20	Loans from officers, directors, trustees, and other disqualified persons				
Ď	21	Mortgages and other notes payable (attach schedule)				
ڐ	22	Other liabilities (describe)				
	23	Total liabilities (add lines 17 through 22)	}	ļ		
_		Foundations that follow SFAS 117, check here.				
G		and complete lines 24 through 26 and lines 30 and 31.				
<u> </u>	24	Unrestricted	Ì			
lar	25	Temporarily restricted				
ä	26	Permanently restricted				
Assets or Fund Balances	-0	Foundations that do not follow SFAS 117, ▶ 🗓				
Ē		check here and complete lines 27 through 31.				
ō	27	Capital stock, trust principal, or current funds				
ets	28	Paid-in or capital surplus, or land, bldg , and equipment fund				
1SS	29	Retained earnings, accumulated income, endowment, or other funds	5,696,391	6,030,208		
Net /	30	Total net assets or fund balances (see instructions)	5,696,391	6,030,208		
ž	31	Total liabilities and net assets/fund balances (see				
		instructions)	5,696,391	6,030,208		
E	art l	Analysis of Changes in Net Assets or Fund				
		al net assets or fund balances at beginning of year - Part		must agree with		
		-of-year figure reported on prior year's return)			5,696,391	
2					133,042	
3	Oth	er amount from Part I, line 27a er increases not included in line 2 (itemize) ► MARKET \	ALUE ADJUSTMENT	3	200,775	
		I lines 1, 2, and 3			6,030,208	
5	Dec	creases not included in line 2 (itemize) ▶		5		
		al net assets or fund balances at end of year (line 4 minu	s line 5) - Part II, column (t	o), line 30 6	6,030,208	
					Form 990-PF (2013)	

Pai	t IV Capital Gains	and Losses for Tax on Inve	stment Income			
	(a) List an	d describe the kind(s) of property sold (e rick warehouse, or common stock, 200 s		(b) How acquired P - Purchase D - Donation	(c) Date acquired (mo , day, yr)	(d) Date sold (mo , day, yr)
1a S	SEE ATTACHED STAT	 		D - Donalion	(, , , , , , , , , , , , , , , , , , ,	
b						
c	_ 					
d						
e						
	(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale		(h) Gain or (lo (e) plus (f) mini	
<u>a</u>						
b	·					
<u>c</u>						
<u>d</u>						
е	 					
	Complete only for assets	showing gain in column (h) and owned			Gains (Col (h) g	
(i) F M V as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col (i) over col (j), if any	COI.	(k), but not less t Losses (from co	
<u>a</u>						
b					··	
C						
d		 		ļ		
<u>e</u>			an also aster a Dod Line 7	 		
	apital gain net income or	(net capital loss)	gain, also enter in Part I, line 7 (loss), enter -0- in Part I, line 7	2		-2,391
		n or (loss) as defined in sections 12:				
	•	rt I, line 8, column (c) (see instr		_		
	art I, line 8	Under Section 4940(e) for Rec	Lucad Tay on Not Investment I	3		
	ction 4940(d)(2) applies,					-
If "Y	es," the foundation does	the section 4942 tax on the distrib not qualify under section 4940(e)	Do not complete this part			Yes No
1	Inter the appropriate am	ount in each column for each year,	see the instructions before making	g any entr	ies	
Cat	(a) Base period years endar year (or tax year beginning in)	(b) Adjusted qualifying distributions	(c) Net value of nonchantable-use assets		(d) Distribution r (col (b) divided by	
	2012	424,415				0.0761
_	2011	401,857				0.0801
	2010	404,947				0.0816
	2009	214,700		,		0.0454
	2008	346,200	4,508,322	 		0.0768
2	Total of line 1, column (d)		2		0.3600
3	Average distribution ratio	for the 5-year base period - divide	the total on line 2 by 5, or by the	}		
	number of years the four	ndation has been in existence if less	than 5 years	3		0.0720
4	Enter the net value of no	ncharitable-use assets for 2013 fro	m Part X, line 5	4		5,909,548
5	Multiply line 4 by line 3			5		425,487
6	Enter 1% of net investme	ent income (1% of Part I, line 27b)		6		2,650
7	Add lines 5 and 6			7		428,137
	Enter qualifying distributi f line 8 is equal to or gi Part VI instructions	ons from Part XII, line 4 reater than line 7, check the box i	n Part VI, line 1b, and complete	8 that part	using a 1% ta	430,600 x rate See th

Par	t VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 - see	instru	ctions	s)
1 a	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)			
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check		2,	650
	here X and enter 1% of Part I, line 27b			
c	All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of			
	Part I, line 12, col (b)			
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-) 2			
3	Add lines 1 and 2 3		2,6	650
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-) 4			
5	Tax based on investment income. Subtract line 4 from line 3 If zero or less, enter -0		2,6	650
6	Credits/Payments:			
	2013 estimated tax payments and 2012 overpayment credited to 2013 6a 3,000			
	Exempt foreign organizations - tax withheld at source			
	Tax paid with application for extension of time to file (Form 8868) 6c			
	Backup withholding erroneously withheld		3 (000
7	Total credits and payments Add lines 6a through 6d		3,	300
8				
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed			350
10 11	Enter the amount of line 10 to be Credited to 2014 estimated tax 350 Refunded 11		:	
	t VII-A Statements Regarding Activities			
	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate	T	Yes	No
	or intervene in any political campaign?	1a		X
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see Instructions for the	1		ſ
_	definition)?	16		х
	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			{
С	Did the foundation file Form 1120-POL for this year?	1c		Х
	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year			
	(1) On the foundation \blacktriangleright \$ (2) On foundation managers \blacktriangleright \$			1
е	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on			ĺ
	foundation managers > \$			
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?	2		X
	If "Yes," attach a detailed description of the activities			l
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation,			
	or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes	3		X
	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	4a		X
þ	If "Yes," has it filed a tax return on Form 990-T for this year?	4b_	~/	A
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?	5_		X
	If "Yes," attach the statement required by General Instruction T			
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either			1
	By language in the governing instrument, or Divides levelation that office with a governing instrument as that as mondatory divides that conflict			1
	By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state legislation that effectively amends the governing instrument so that no mandatory directions that conflict	6	х	ł
7	with the state law remain in the governing instrument?	7	X	
7 8a	Enter the states to which the foundation reports or with which it is registered (see instructions)	<u> </u>	ļ	
va	MICHICAN)		
h	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate)			1
-	of each state as required by General Instruction G? If "No," attach explanation.	86	x	1
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 2013 or the taxable year beginning in 2013 (see instructions for Part XIV)? If "Yes," complete	1		1
	Part XIV	9_		X
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and		}	,
	addresses	10	Х	<u></u>
		Form 9	90-PF	(2013)

Pa	rt 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	1		
	meaning of section 512(b)(13)? If "Yes," attach schedule (see instructions)	11	<u></u>	X
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified	1		1
	person had advisory privileges? If "Yes," attach statement (see instructions)	12	<u> </u>	X
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?		X	
	Website address			
14	The books are in care of ► MICHAEL P BERMAN, PC Telephone no ► 248-468-	310	0	
	Located at ▶186 EAST MAIN, SUITE 300 NORTHVILLE, MI ZIP+4 ▶ 48167			
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - Check here		>	$\cdot \Box$
	and enter the amount of tax-exempt interest received or accrued during the year	_		
16	At any time during calendar year 2013, 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	l	_ X_
	See the instructions for exceptions and filing requirements for Form TD F 90-22 1 If "Yes," enter the name of			
	the foreign country			
Pa	rt 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
1 8	a 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? Yes X No			
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a			
	disqualified person? Yes X No	1		
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? Yes X No	1		
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? Yes X No	{		[
	(5) Transfer any income or assets to a disqualified person (or make any of either available for	1		1
	the benefit or use of a disqualified person)?	-		1
	(6) Agree to pay money or property to a government official? (Exception. Check "No" if the	1		
	foundation agreed to make a grant to or to employ the official for a period after			i
	termination of government service, if terminating within 90 days)	1		
١	b If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations	1		
	section 53 4941(d)-3 or in a current notice regarding disaster assistance (see instructions)?	1b	1 ~	A
	Organizations relying on a current notice regarding disaster assistance check here	}	1	ł
	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 2013?	1c	<u> </u>	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)).	1	}	1
	a At the end of tax year 2013, did the foundation have any undistributed income (lines 6d and]	1	
	6e, Part XIII) for tax year(s) beginning before 2013? Yes X No	1		
	If "Yes," list the years	1	1	
	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 instructions.)	2b	N	A_
,	c If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here)	
	-	1)	ļ
3	a Did the foundation hold more than a 2% direct or indirect interest in any business enterprise	})
	at any time during the year?		}	}
	b if "Yes," did it have excess business holdings in 2013 as a result of (1) any purchase by the foundation or		1	
	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		1	
	foundation had excess business holdings in 2013)	3b	N	
4	a Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a	-	<u> </u>
	b Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its	1	1	1
	charitable purpose that had not been removed from jeonardy before the first day of the tax year beginning in 2013?	46	1	l X

Part VIEB Statements Regarding Activities for	or Which Form 4	720 May Be Requi	red (continued)		
5a During the year did the foundation pay or incur any amou	nt to				
(1) Carry on propaganda, or otherwise attempt to influer	nce legislation (section	4945(e))?	Yes X No	.	
(2) Influence the outcome of any specific public election (see section 4955), or to carry on,					
directly or indirectly, any voter registration drive?					
(3) Provide a grant to an individual for travel, study, or oth				,	
(4) Provide a grant to an organization other than a					
section 509(a)(1), (2), or (3), or section 4940(d)(2)? (s	-			.	
(5) Provide for any purpose other than religious, ch					
purposes, or for the prevention of cruelty to children o		•		.	
b If any answer is "Yes" to 5a(1)-(5), did any of the					
Regulations section 53 4945 or in a current notice regard				5b N/A	
Organizations relying on a current notice regarding disast					
c If the answer is "Yes" to question 5a(4), does the					
because it maintained expenditure responsibility for the gi				, } }	
If "Yes," attach the statement required by Regulations sect					
6a Did the foundation, during the year, receive any fund	• •	ctly, to pay premiums	3		
on a personal benefit contract?	•			.	
b Did the foundation, during the year, pay premiums, direct				6b X	
If "Yes" to 6b, file Form 8870	, or			\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\	
7a At any time during the tax year, was the foundation a pa	rty to a probibited tax	shelter transaction?	Yes X No	.	
b If "Yes," did the foundation receive any proceeds or have				7b \ N/A	
Part VIII Information About Officers, Directors	, Trustees, Found	dation Managers,	Highly Paid Emplo		
and Contractors					
1 List all officers, directors, trustees, foundation n	(b) Title, and average	(c) Compensation (see	(d) Contributions to	(-) F	
(a) Name and address	hours per week	(If not paid,	employee benefit plans and deferred compensation	(e) Expense account, other allowances	
(a) Name and address MICHAEL BERMAN			employee benefit plans		
	hours per week devoted to position	(If not paid,	employee benefit plans		
MICHAEL BERMAN	hours per week devoted to position	(If not paid, enter -0-)	employee benefit plans and deferred compensation	other allowances	
MICHAEL BERMAN 22429 WINDERMERE NOVI MI 48374	hours per week devoted to position TRUSTEE PART-TIME	(If not paid, enter -0-)	employee benefit plans and deferred compensation	other allowances	
MICHAEL BERMAN 22429 WINDERMERE NOVI MI 48374 MANUEL CHARACH 5777 MAPLE, #100 W BLOOMFIELD MI 48322	hours per week devoted to position TRUSTEE PART-TIME MANAGER	(If not paid, enter -0-)	employee benefit plans and deferred compensation	other allowances	
MICHAEL BERMAN 22429 WINDERMERE NOVI MI 48374 MANUEL CHARACH 5777 MAPLE, #100 W BLOOMFIELD MI 48322 NATALIE CHARACH	hours per week devoted to position TRUSTEE PART-TIME MANAGER PART-TIME	(If not paid, enter -0-)	employee benefit plans and deferred compensation	other allowances	
MICHAEL BERMAN 22429 WINDERMERE NOVI MI 48374 MANUEL CHARACH 5777 MAPLE, #100 W BLOOMFIELD MI 48322 NATALIE CHARACH 5777 MAPLE, #100 W BLOOMFIELD MI 48322	hours per week devoted to position TRUSTEE PART-TIME MANAGER PART-TIME MANAGER	(If not paid, enter -0-)	employee benefit plans and deferred compensation 0	other allowances 0	
MICHAEL BERMAN 22429 WINDERMERE NOVI MI 48374 MANUEL CHARACH 5777 MAPLE, #100 W BLOOMFIELD MI 48322 NATALIE CHARACH 5777 MAPLE, #100 W BLOOMFIELD MI 48322	hours per week devoted to position TRUSTEE PART-TIME MANAGER PART-TIME MANAGER PART-TIME	(If not paid, enter -0-)	employee benefit plans and deferred compensation 0 0	other allowances 0 0	
MICHAEL BERMAN 22429 WINDERMERE NOVI MI 48374 MANUEL CHARACH 5777 MAPLE, #100 W BLOOMFIELD MI 48322 NATALIE CHARACH 5777 MAPLE, #100 W BLOOMFIELD MI 48322 2 Compensation of five highest-paid employees	hours per week devoted to position TRUSTEE PART-TIME MANAGER PART-TIME MANAGER PART-TIME	(If not paid, enter -0-)	employee benefit plans and deferred compensation 0 0	other allowances 0 0	
MICHAEL BERMAN 22429 WINDERMERE NOVI MI 48374 MANUEL CHARACH 5777 MAPLE, #100 W BLOOMFIELD MI 48322 NATALIE CHARACH 5777 MAPLE, #100 W BLOOMFIELD MI 48322	hours per week devoted to position TRUSTEE PART-TIME MANAGER PART-TIME MANAGER PART-TIME	(If not paid, enter -0-)	employee benefit plans and deferred compensation 0 0 0 1 - see instructi	other allowances 0 0	
MICHAEL BERMAN 22429 WINDERMERE NOVI MI 48374 MANUEL CHARACH 5777 MAPLE, #100 W BLOOMFIELD MI 48322 NATALIE CHARACH 5777 MAPLE, #100 W BLOOMFIELD MI 48322 2 Compensation of five highest-paid employees "NONE."	hours per week devoted to position TRUSTEE PART-TIME MANAGER PART-TIME MANAGER PART-TIME (other than thos	(If not paid, enter-0-) 0 0 0 ce included on line	employee benefit plans and deferred compensation 0 0 0 1 - see instructi (d) Contributions to employee benefit	ons). If none, enter	
MICHAEL BERMAN 22429 WINDERMERE NOVI MI 48374 MANUEL CHARACH 5777 MAPLE, #100 W BLOOMFIELD MI 48322 NATALIE CHARACH 5777 MAPLE, #100 W BLOOMFIELD MI 48322 2 Compensation of five highest-paid employees	hours per week devoted to position TRUSTEE PART-TIME MANAGER PART-TIME MANAGER PART-TIME (other than those	(If not paid, enter -0-)	employee benefit plans and deferred compensation 0 0 0 1 - see instructi (d) Contributions to	other allowances 0 0 0 ons). If none, enter	
MICHAEL BERMAN 22429 WINDERMERE NOVI MI 48374 MANUEL CHARACH 5777 MAPLE, #100 W BLOOMFIELD MI 48322 NATALIE CHARACH 5777 MAPLE, #100 W BLOOMFIELD MI 48322 2 Compensation of five highest-paid employees "NONE."	hours per week devoted to position TRUSTEE PART-TIME MANAGER PART-TIME MANAGER PART-TIME MANAGER PART-TIME (other than thos	(If not paid, enter-0-) 0 0 0 ce included on line	employee benefit plans and deferred compensation 0 0 0 1 - see instructi (d) Contributions to employee benefit plans and deferred	ons). If none, enter	
MICHAEL BERMAN 22429 WINDERMERE NOVI MI 48374 MANUEL CHARACH 5777 MAPLE, #100 W BLOOMFIELD MI 48322 NATALIE CHARACH 5777 MAPLE, #100 W BLOOMFIELD MI 48322 2 Compensation of five highest-paid employees "NONE." (a) Name and address of each employee paid more than \$50,000	hours per week devoted to position TRUSTEE PART-TIME MANAGER PART-TIME MANAGER PART-TIME MANAGER PART-TIME (other than thos	(If not paid, enter-0-) 0 0 0 ce included on line	employee benefit plans and deferred compensation 0 0 0 1 - see instructi (d) Contributions to employee benefit plans and deferred	ons). If none, enter	
MICHAEL BERMAN 22429 WINDERMERE NOVI MI 48374 MANUEL CHARACH 5777 MAPLE, #100 W BLOOMFIELD MI 48322 NATALIE CHARACH 5777 MAPLE, #100 W BLOOMFIELD MI 48322 2 Compensation of five highest-paid employees "NONE." (a) Name and address of each employee paid more than \$50,000	hours per week devoted to position TRUSTEE PART-TIME MANAGER PART-TIME MANAGER PART-TIME MANAGER PART-TIME (other than thos	(If not paid, enter-0-) 0 0 0 ce included on line	employee benefit plans and deferred compensation 0 0 0 1 - see instructi (d) Contributions to employee benefit plans and deferred	ons). If none, enter	
MICHAEL BERMAN 22429 WINDERMERE NOVI MI 48374 MANUEL CHARACH 5777 MAPLE, #100 W BLOOMFIELD MI 48322 NATALIE CHARACH 5777 MAPLE, #100 W BLOOMFIELD MI 48322 2 Compensation of five highest-paid employees "NONE." (a) Name and address of each employee paid more than \$50,000	hours per week devoted to position TRUSTEE PART-TIME MANAGER PART-TIME MANAGER PART-TIME MANAGER PART-TIME (other than thos	(If not paid, enter-0-) 0 0 0 ce included on line	employee benefit plans and deferred compensation 0 0 0 1 - see instructi (d) Contributions to employee benefit plans and deferred	ons). If none, enter	
MICHAEL BERMAN 22429 WINDERMERE NOVI MI 48374 MANUEL CHARACH 5777 MAPLE, #100 W BLOOMFIELD MI 48322 NATALIE CHARACH 5777 MAPLE, #100 W BLOOMFIELD MI 48322 2 Compensation of five highest-paid employees "NONE." (a) Name and address of each employee paid more than \$50,000	hours per week devoted to position TRUSTEE PART-TIME MANAGER PART-TIME MANAGER PART-TIME MANAGER PART-TIME (other than thos	(If not paid, enter-0-) 0 0 0 ce included on line	employee benefit plans and deferred compensation 0 0 0 1 - see instructi (d) Contributions to employee benefit plans and deferred	ons). If none, enter	
MICHAEL BERMAN 22429 WINDERMERE NOVI MI 48374 MANUEL CHARACH 5777 MAPLE, #100 W BLOOMFIELD MI 48322 NATALIE CHARACH 5777 MAPLE, #100 W BLOOMFIELD MI 48322 2 Compensation of five highest-paid employees "NONE." (a) Name and address of each employee paid more than \$50,000	hours per week devoted to position TRUSTEE PART-TIME MANAGER PART-TIME MANAGER PART-TIME MANAGER PART-TIME (other than thos	(If not paid, enter-0-) 0 0 0 ce included on line	employee benefit plans and deferred compensation 0 0 0 1 - see instructi (d) Contributions to employee benefit plans and deferred	ons). If none, enter	
MICHAEL BERMAN 22429 WINDERMERE NOVI MI 48374 MANUEL CHARACH 5777 MAPLE, #100 W BLOOMFIELD MI 48322 NATALIE CHARACH 5777 MAPLE, #100 W BLOOMFIELD MI 48322 2 Compensation of five highest-paid employees "NONE." (a) Name and address of each employee paid more than \$50,000	hours per week devoted to position TRUSTEE PART-TIME MANAGER PART-TIME MANAGER PART-TIME MANAGER PART-TIME (other than thos	(If not paid, enter-0-) 0 0 0 ce included on line	employee benefit plans and deferred compensation 0 0 0 1 - see instructi (d) Contributions to employee benefit plans and deferred	ons). If none, enter	
MICHAEL BERMAN 22429 WINDERMERE NOVI MI 48374 MANUEL CHARACH 5777 MAPLE, #100 W BLOOMFIELD MI 48322 NATALIE CHARACH 5777 MAPLE, #100 W BLOOMFIELD MI 48322 2 Compensation of five highest-paid employees "NONE." (a) Name and address of each employee paid more than \$50,000	hours per week devoted to position TRUSTEE PART-TIME MANAGER PART-TIME MANAGER PART-TIME MANAGER PART-TIME (other than thos	(If not paid, enter-0-) 0 0 0 ce included on line	employee benefit plans and deferred compensation 0 0 0 1 - see instructi (d) Contributions to employee benefit plans and deferred	ons). If none, enter	
MICHAEL BERMAN 22429 WINDERMERE NOVI MI 48374 MANUEL CHARACH 5777 MAPLE, #100 W BLOOMFIELD MI 48322 NATALIE CHARACH 5777 MAPLE, #100 W BLOOMFIELD MI 48322 2 Compensation of five highest-paid employees "NONE." (a) Name and address of each employee paid more than \$50,000	hours per week devoted to position TRUSTEE PART-TIME MANAGER PART-TIME MANAGER PART-TIME MANAGER PART-TIME (other than thos	(If not paid, enter-0-) 0 0 0 ce included on line	employee benefit plans and deferred compensation 0 0 0 1 - see instructi (d) Contributions to employee benefit plans and deferred	ons). If none, enter	
MICHAEL BERMAN 22429 WINDERMERE NOVI MI 48374 MANUEL CHARACH 5777 MAPLE, #100 W BLOOMFIELD MI 48322 NATALIE CHARACH 5777 MAPLE, #100 W BLOOMFIELD MI 48322 2 Compensation of five highest-paid employees "NONE." (a) Name and address of each employee paid more than \$50,000	hours per week devoted to position TRUSTEE PART-TIME MANAGER PART-TIME MANAGER PART-TIME MANAGER PART-TIME (other than thos	(If not paid, enter-0-) 0 0 0 ce included on line	employee benefit plans and deferred compensation 0 0 0 1 - see instructi (d) Contributions to employee benefit plans and deferred	ons). If none, enter	
MICHAEL BERMAN 22429 WINDERMERE NOVI MI 48374 MANUEL CHARACH 5777 MAPLE, #100 W BLOOMFIELD MI 48322 NATALIE CHARACH 5777 MAPLE, #100 W BLOOMFIELD MI 48322 2 Compensation of five highest-paid employees "NONE." (a) Name and address of each employee paid more than \$50,000	hours per week devoted to position TRUSTEE PART-TIME MANAGER PART-TIME MANAGER PART-TIME MANAGER PART-TIME (other than thos	(If not paid, enter-0-) 0 0 0 ce included on line	employee benefit plans and deferred compensation 0 0 0 1 - see instructi (d) Contributions to employee benefit plans and deferred	ons). If none, enter	

Part VIII	Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employ and Contractors (continued)	rees,
3 Five h	ighest-paid independent contractors for professional services (see 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 numbe	er of others receiving over \$50,000 for professional services	
Part IX-A	Summary of Direct Charitable Activities	
	dation's four largest direct charitable activities during the tax year. Include relevant statistical information, such as the number of and other beneficianes served, conferences convened, research papers produced, etc.	Expenses
1		
2		
	N/A	
3		
. ———		
4		
Part IX-B	Summary of Program-Related Investments (see instructions)	
	two largest program-related investments made by the foundation during the tax year on lines 1 and 2	Amount
1		
	N/A	
2		
	gram-related investments. See instructions	
3		
- -		
	nes 1 through 3	
LOTAL Add I	ines 1 through 3	

Par	ŧΧ	Minimum Investment Return (All domestic foundations must complete this part. Foreignsee instructions.)	gn foundati	ons,
1	Fair	market value of assets not used (or held for use) directly in carrying out charitable, etc.,		- ''- '
	purp	oses		
а	Aver	age monthly fair market value of securities	1a	5,334,276
b	Aver	age of monthly cash balances	1b	665,265
С	Fair	market value of all other assets (see instructions)	1c	
, d	Tota	Il (add lines 1a, b, and c)	1d	5,999,541
е	Red	uction claimed for blockage or other factors reported on lines 1a and		
	1c (a	attach detailed explanation)1e		
2	Acqu	usition indebtedness applicable to line 1 assets	2	
3	Subt	tract line 2 from line 1d deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see	3	5,999,541
4	Cash	deemed held for charitable activities Enter 1 1/2% of line 3 (for greater amount, see		
	instr	uctions)	4	89,993
5		value of noncharitable-use assets. Subtract line 4 from line 3 Enter here and on Part V, line 4	5	5,909,548
6	Mini	mum investment return. Enter 5% of line 5	6	295,477
Par	t XI	Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foun and certain foreign organizations check here ► and do not complete this part)	dations	
1	Mınır	mum investment return from Part X, line 6	1	295,477
2 a	Tax	on investment income for 2013 from Part VI, line 5		
b	Inco	me tax for 2013 (This does not include the tax from Part VI) 2b	}	
С	Add	lines 2a and 2b	2c	2,650
3	Distr	ributable amount before adjustments Subtract line 2c from line 1	3	292,827
4	Rec	overies of amounts treated as qualifying distributions	4	
5		lines 3 and 4	5	292,827
6	Ded	uction from distributable amount (see instructions)	6	
7	Dist	ributable amount as adjusted Subtract line 6 from line 5 Enter here and on Part XIII,		
	line	<u> 1</u>	7	292,827
Par	t XII	Qualifying Distributions (see instructions)		
1		ounts paid (including administrative expenses) to accomplish charitable, etc., purposes		
а		penses, contributions, gifts, etc - total from Part I, column (d), line 26	1a	430,600
b		gram-related investments - total from Part IX-B	1b	
2	Am	ounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc,		
	-	poses	2	
3		ounts set aside for specific charitable projects that satisfy the] _]	
а	Sur	tability test (prior IRS approval required)	3a	
b	Cas	sh distribution test (attach the required schedule)	3b	
4		alifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4	4	430,600
5		undations that qualify under section 4940(e) for the reduced rate of tax on net investment income	_	A 6-1
	Ent	er 1% of Part I, line 27b (see instructions)	5	2,650
6		iusted qualifying distributions. Subtract line 5 from line 4	6	427,950
	Not	te. The amount on line 6 will be used in Part V, column (b), in subsequent years when c qualifies for the section 4940(e) reduction of tax in those years	calculating v	nether the foundation

Form 990-PF (2013)

Pa	rt XIII Undistributed Income (see instru	ictions)			
		(a)	(b)	(c)	(d)
1	Distributable amount for 2013 from Part XI,	Corpus	Years prior to 2012	2012	2013
	line 7				292,827
2	Undistributed income, if any, as of the end of 2013				
а	Enter amount for 2012 only				
	Total for prior years 20,20,20				
3	Excess distributions carryover, if any, to 2013				
а	From 2008	İ			
b	From 2009				
С	From 2010 160, 373				
d	From 2011				
е	From 2012				
	Total of lines 3a through e	588,105			
4	Qualifying distributions for 2013 from Part XII,		<u> </u>		
	line 4 ⁻ ▶ \$ 430,600				
а	Applied to 2012, but not more than line 2a				<u> </u>
	Applied to undistributed income of prior years				
	(Election required - see instructions)				
С	Treated as distributions out of corpus (Election required - see instructions)				
A	Applied to 2013 distributable amount				292,827
	Remaining amount distributed out of corpus	137,773			
5	Excess distributions carryover applied to 2013				
	(If an amount appears in column (d), the same		<u> </u>		
6	amount must be shown in column (a)) Enter the net total of each column as		1		
٠	indicated below:				
а	Corpus Add lines 3f, 4c, and 4e Subtract line 5	725,878			<u> </u>
ь	Prior years' undistributed income Subtract				}
	line 4b from line 2b				<u> </u>
С	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	ļ			ļ
d	Subtract line 6c from line 6b Taxable				
	amount - see instructions	<u> </u>		ļ <u>-</u>	ļ
е	Undistributed income for 2012 Subtract line 4a from line 2a Taxable amount - see				
	instructions				ļ
f	Undistributed income for 2013 Subtract lines		1	1	
-	4d and 5 from line 1. This amount must be	ļ			
	distributed in 2014		 		
7	Amounts treated as distributions out of corpus				
	to satisfy requirements imposed by section		İ	ļ	
	170(b)(1)(F) or 4942(g)(3) (see instructions)				
8	Excess distributions carryover from 2008 not applied on line 5 or line 7 (see instructions)	122,798			
	Excess distributions carryover to 2014.			 	
9	Subtract lines 7 and 8 from line 6a	603,080			
10	Analysis of line 9		 		
a	Excess from 2009)			}
b	Excess from 2010 160, 373	1			
c	Excess from 2011 154, 583	1			
d	Excess from 2012 150, 351]	{	1	
	Excess from 2013 137, 773]		<u> </u>	

Pa	ri XIV. Private Op	erating Foundations	s (see instructions a	nd Part VII-A, questi	on 9)				
1 a	If the foundation has				ating				
	foundation, and the ruling	g is effective for 2013, enter the date of the ruling \ldots			▶∟	.► N/A			
b	Check box to indicate wh	ether the foundation is a	private operating found	ation described in section	49	42(J)(3) or 4942(J)(5)			
2 a	Enter the lesser of the ad-	Tax year		Prior 3 years	,	(e) Total			
	justed net income from Part	(a) 2013	(b) 2012	(c) 2011	(d) 2010				
	I or the minimum investment return from Part X for each	1							
	year listed	Ĺ							
b	85% of line 2a								
,	Qualifying distributions from Part								
·	XII, line 4 for each year listed								
d	Amounts included in line 2c not								
	used directly for active conduct	Ì	1	ł					
	of exempt activities			 		·			
	directly for active conduct of				}				
	exempt activities. Subtract line				,				
3	2d from line 2c Complete 3a, b, or c for the	}	 						
	alternative test relied upon		ļ]	}				
а	"Assets" alternative test - enter]		ļ				
	(1) Value of all assets								
	(2) Value of assets qualifying under section								
	4942(j)(3)(B)(i)		<u></u>						
ħ	"Endowment" alternative test-	ļ.		Ì					
	enter 2/3 of minimum invest-	1	ĺ						
	ment return shown in Part X, line 6 for each year listed								
c	"Support" alternative test - enter			1	1				
	(1) Total support other than	1		}	}				
	gross investment income (interest, dividends, rents]	1	}	}			
	payments on securities			}	1	Į			
	loans (section 512(a)(5)),		})		ļ			
	or royalties)		 						
	public and 5 or more				}				
	exempt organizations as provided in section 4942								
	(j)(3)(B)(III)		 	 					
	(3) Largest amount of sup- port from an exempt								
	organization		 	 	<u> </u>				
	(4) Gross investment income	nton, Information	Complete this par	t only if the found	lation had \$5.0	000 or more in assets			
		e during the year - s		t only is the rounc	iation nad \$5,0	ou of filore in assets			
1	Information Regardin								
				re than 2% of the tota	al contributions re	eceived by the foundation			
•	before the close of an	v tax vear (but only if t	hey have contributed	more than \$5,000) (S	ee section 507(d)((2))			
				, ,					
MA	NUEL CHARACH	NATALIE	CHARACH	f the steel of a corn	oration (or an or	qually large portion of the			
ì	clist any managers of ownership of a partne	rehip or other entity) of	own 10% or more to	n has a 10% or greater	interest	luany large portion or the			
	ownership of a partile	rship or other entity) o	it which the roundation	irilas a 10 % or greater	merest				
NC	NE								
2		•							
	Check here ► X If	the foundation only	makes contributions	to preselected char	itable organizatio	ns and does not accep			
				ants, etc (see instruc	tions) to individua	als or organizations under			
	other conditions, com								
	a The name, address, a	and telephone number	or e-mail address of	the person to whom ap	plications should b	e addressed			
	b The form in which app	olications should be su	ibmitted and informati	on and materials they	should include				
	c Any submission dead	lines:							
	•								
_	d Any restrictions or I	imitations on awards	s, such as by geogr	aphical areas, charita	ible fields, kinds	of institutions, or other			
	factors								

Part XV Supplementary Information (continued)

3 Grants and Contributions Paid Durin Recipient Name and address (home or business)	ng the Year or Appr	oved for F	uture Payment	
Recipient	show any relationship to	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	or substantial contributor	recipient	Contribution	
Name and address (home or business) a Paid during the year SEE ATTACHED SCHEDULE	any foundation manager or substantial contributor N/A	recipient	ALL CONTRIBUTIONS WERE MADE IN ACCORDANCE WITH THE TERMS OF THE FOUNDATION	430,600
		<u> </u>		430,600
Total	 		▶ 3a	430,800
b Approved for future payment				

Part XVI-	A Analysis of Income-Produ	icing Activ	vities			
	amounts unless otherwise indicated.		ated business income	Excluded by	y section 512, 513, or 514	(e)
•	service revenue	(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	Related or exempt function income (See instructions.)
_				· -		(Occ manuchons.)
· · · · · · · · · · · · · · · · · · ·						
				 		
		 		 		
f	and contracts from government agencies					
-	ship dues and assessments					
	on savings and temporary cash investments			14	7,992	
	is and interest from securities		-	14	275,707	
	al income or (loss) from real estate	<u> </u>			2.07.07	
	-financed property					
	debt-financed property			1		
	I income or (loss) from personal property					
	vestment income	<u> </u>		18	-2,391	
	oss) from sales of assets other than inventory			 	2,331	
	me or (loss) from special events					
•	rofit or (loss) from sales of inventory			 		
	venue: a	<u> </u>				
		·				
					-	
						
e	Add columns (b) (d) and (e)				281,308	
	l. Add columns (b), (d), and (e)				'	281,308
	dd line 12, columns (b), (d), and (e) heet in line 13 instructions to verify calc					
Part XVI-			complishment of F	xemnt Purr	noses	
Line No. ▼	Explain below how each activit accomplishment of the foundation					
			N/I	A		
			 			
				<u>. </u>		
			-			
						·
				···		

,. Form 990	n_DE	2013)									Da	ige 13
Part 2				ansfers To and	Transacti	ons and	Relations	ships Wi	th None	chari		
in Oi	sec rgan	e organization direct tion 501(c) of the Co izations?	ly or indirectly ode (other than	section 501(c)(3) (organızation	s) or in sec					Yes	No
(1	1) Ca	fers from the reportin								1a(1)	_	X
b O	ther	her assets transactions less of assets to a no								1a(2) 1b(1)		X
(2	2) Pi	rchases of assets fro ental of facilities, equi	om a noncharita	ble exempt organiz	ation	,				1b(2) 1b(3)		X
(4	4) Re	embursement arrange ans or loan guarantee	ements							1b(4) 1b(5)		X
(€	6) Pe	erformance of service	s or membersh	up or fundraising so	olicitations .					1b(6) 1c		X
d If	the alue	answer to any of th of the goods, other in any transaction or	ie above is "Ye assets, or servi	s," complete the f ces given by the r	following so eporting for	hedule Co undation if	olumn (b) s the found	hould alwa	ays show ived less	than	faır m	arket
(a) Line	no	(b) Amount involved	(c) Name of n	oncharitable exempt org	janization	(d) Descrip	ption of transfe	ers, transaction	ns, and shar	ing arra	ngemer	nts
												
						_ 						
												
												
										<u>.</u>		
			 -									
												
d	lescr	foundation directly bed in section 501(c) s," complete the follo	of the Code (o							Y	es X] No
		(a) Name of organization	<u>n</u>	(b) Type of	organization			c) Descriptio	n of relations	hip		
												
		_ 					·					
												
	Time		that I have aver	and the sature regulation	200000000000000000000000000000000000000	thodulas and st	Tampate and t	o the best of	mu kanulada	a and I	alief it	ie toie
Sign	corre	er penalties of penury, I declaration of penur	f preparer (other than t	axpayer) is based on all info	rmation of which	preparer has any	knowledge	m. F	May the IRS	discus	s this	return
Here	Sig	gnature of officer or trustee	mail	Date	<u> </u>	Title	me !		with the pr (see instruction	eparer (s)? X	shown Yes	below No

248-468-3100 Form **990-PF** (2013)

P00060163

PTIN

38-2694747

Check

Firm's EIN

Phone no.

self-employed

Paid

Preparer

Use Only

Print/Type preparer's name

MICHAEL

Firm's name

Firm's address

P. BERMAN

► MICHAEL P BERMAN,

▶ 186 EAST MAIN, SUITE 300

NORTHVILLE, MI 48167

Date 10/27/14

Preparer's signature

Schedule B

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

Department of the Treasury Internal Revenue Service

Schedule of Contributors

▶ Attach to Form 990, Form 990-EZ, or Form 990-PF. ▶ Information about Schedule B (Form 990, 990-EZ, or 990-PF) and its instructions is at www.irs.gov/form990. OMB No 1545-0047

Employer identification number

Schedule B (Form 990, 990-EZ, or 990-PF) (2013)

Name of the organization		Employer identification number				
MANAT FOUNDATION		38-2710511				
Organization type (check one	1					
Filers of:	Section:					
Form 990 or 990-EZ	501(c)() (enter number) organization					
	4947(a)(1) nonexempt charitable trust not treated as a pr	vate foundation				
	527 political organization					
Form 990-PF	X 501(c)(3) exempt private foundation					
	4947(a)(1) nonexempt charitable trust treated as a private	e foundation				
	501(c)(3) taxable private foundation					
Instructions General Rule), (8), or (10) organization can check boxes for both the General Rul	e and a Special Rule See				
	filing Form 990, 990-EZ, or 990-PF that received, during the year, one contributor. Complete Parts I and II	\$5,000 or more (in money or				
Special Rules						
under sections 509 the greater of (1) \$5	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					
during the year, total	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						
990-EZ, or 990-PF), but it mu	is not covered by the General Rule and/or the Special Rules does st answer "No" on Part IV, line 2, of its Form 990, or check the boo coertify that it does not meet the filing requirements of Schedule B	x on line H of its Form 990-EZ or on its				

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

Name of organization
MANAT FOUNDATION

Employer identification number 38-2710511

Part I Contributors (see instructions). Use duplicate copies of Part I if additional space is needed.

(a)	(b)	(c)	(d)
No.	Name, address, and ZIP + 4	Total contributions	Type of contribution
1	MANUEL & NATALIE CHARACH 5777 MAPLE ROAD, #100 WEST BLOOMFIELD, MI 48322	\$300,000	Person X Payroll Noncash (Complete Part II for noncash contributions)
(a)	(b)	(c)	(d)
No.	Name, address, and ZIP + 4	Total contributions	Type of contribution
2	MICHAEL BERMAN 22429 WINDERMERE NOVI, MI 48374	\$1,000	Person Payroll Noncash (Complete Part II for noncash contributions)
(a)	(b)	(c) Total contributions	(d)
No.	Name, address, and ZIP + 4		Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions)
(a)	(b)	(c)	(d) Type of contribution
No.	Name, address, and ZIP + 4	Total contributions	
		\$	Person Payroll Noncash (Complete Part II for noncash contributions)
(a)	(b)	(c)	(d)
No.	Name, address, and ZIP + 4	Total contributions	Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions)
(a)	(b)	(c)	(d)
No.	Name, address, and ZIP + 4	Total contributions	Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions)

Name of organization

MANAT FOUNDATION

Employer identification number

38-2710511

Part II Noncash Property (see instructions). Use duplicate copies of Part II if additional space is needed

·			
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$ \$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$ \$	
a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$ 	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$ \$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
 		\$ \$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received

:	•								
	(Form 990, 990-EZ, or 990-PF) (2013)		Page ·						
	rganization		Employer identification number						
	FOUNDATION	1 11 11 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	38-2710511						
Part III	that total more than \$1,000 for the y For organizations completing Part III, e contributions of \$1,000 or less for the Use duplicate copies of Part III if additi	ear. Complete columns (a) enter the total of exclusively e year. (Enter this information	to section 501(c)(7), (8), or (10) organizations through (e) and the following line entry. √ religious, charitable, etc., on once. See instructions.) ►\$						
(a) No.	<u> </u>								
from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held						
		~-~-							
-		~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~							
		(e) Transfer of gift							
	Transferee's name, address, an	d ZIP + 4	Relationship of transferor to transferee						
(a) No. from Part ((b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held						
	(e) Transfer of gift								
	Transferee's name, address, an	d ZIP + 4	Relationship of transferor to transferee						
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held						
- -									
		(e) Transfer of gift							
	Transferee's name, address, ar	nd ZIP + 4	Relationship of transferor to transferee						
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held						

Relationship of transferor to transferee

Transferee's name, address, and ZIP + 4

(e) Transfer of gift

Manat Foundation 186 East Main, Ste 300 Northville, MI 48167			38-2710511 Form 990PF YE 7/31/14
PAGE 1, LINE 1			
Contributions -			
Contributors	Date Received		Amount
Manuel & Natalie Charach 5777 Maple Road #100 West Bloomfield, MI 48322	12/23/13	\$	300,000.00
Michael Berman 22429 Windermere Novi, MI 48374	12/23/13		1,000.00
Total		\$_	301,000.00
PAGE 1, LINE 16 (B) Accounting Fees - Bookkeeping Service & Tax B	Return Preparation	\$ ₌	15,120.00
PAGE 1, LINE 18			
Taxes - Federal Income Tax Nonprofit Corporation Info	rmation Update	\$	3,526.00
Total		\$_	3,546.00
PAGE 2, LINE 10(B)			
Corporate Stock Investments	-		
Apple Inc		\$	23,422.00
AT&T Inc			88,975.00
Avalonbay Communities Inc			7,404.00
Berkshire Hathaway Inc			21,950.00
Black Hills Corp			184,485.00
Citigroup Inc			54,620.00

Conocophillips

20,625.00

Manat Foundation 186 East Main, Ste 300 Northville, MI 48167	38-2710511 Form 990PF FYE 7/31/14
PAGE 2, LINE 10(B)(CONTINUED)	
Corporate Stock Investments -	
Consolidated Edison Inc	196,315.00
Costco Wholesale Corp	62,884.00
DTE Energy Co	341,418.00
DTE Energy Co (PS)	82,341.00
Duke Energy Corp	61,527.00
Entergy Corp	65,547.00
Exelon Corp	93,240.00
Ford Motor Co	25,530.00
HCP Inc	228,415.00
HSBC Holdings PLC	65,175.00
JP Morgan Chase	22,430.00
Omega Healthcare Investors Inc	31,059.00
Pepco Holdings Inc	40,275.00
Public Service Enterprise Group Inc	18,464.00
Public Storage	36,780.00
Qwest Corp (CTL)	26,400.00
Qwest Corporation	38,595.00
Royal Bank Scotland Group	24,520.00
Senior Hsg Pptys Tr	22,860.00
Simon Property Group Inc	25,229.00
Southern Co	121,212.00
Spectra Energy Corp	40,920.00
Starbucks Corp	15,536.00

Manat Foundation 186 East Main, Ste 300 Northville, MI 48167		38-2710511 Form 990PF FYE 7/31/14
PAGE 2, LINE 10(B) (CONTINUED)		
Corporate Stock Investments -		
Ventas Inc		6,350.00
Washington Prime Group Inc		1,417.00
Wells Fargo Company		74,670.00
Total	\$ <u>_2</u>	2,170,590.00
PAGE 2, LINE 13		
Other Investments (Mutual Funds) -		
Advent Claymore Conv Secs & Income Fund	\$	8,975.00
Alliancebernstein Global High Inc Fund		162,014.00
American Capital Income Fund		138,538.00
American Funds Bond Fund		93,686.00
American High Income Fund		140,258.00
American Income Fund of America (Cl C)		42,738.00
American Income Fund of America (Cl F)		184,500.00
Blackrock Cap & Inc Strat Fund		36,600.00
Blackrock Engy & Resrc Fund		26,570.00
Blackrock Fixed Income		21,725.00
Blackrock Res & Commodity		46,956.00
Calamos Strategic Total Return		58,000.00
Clearbridge Energy MLP Total Return Fund		57,050.00
Credit Suisse High Income Fund		38,490.00
DWS Multi Market Inc Fund		137,850.00
Franklin Income Fund		85,030.00

Manat Foundation 186 East Main, Ste 300 Northville, MI 48167 38-2710511 Form 990PF FYE 7/31/14

PAGE 2, LINE 13 (CONTINUED)

Other	Investments	(Mutual	Funds)) -
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First Trust Senior Loan & Limited Duration	16,596.00
Loomis Sayles Bond Fund	13,804.00
Loomis Sayles Strategic Inc Fund	63,957.00
Lord Abbett Bond Debenture Fund	48,265.00
Pax World High Yield Bond Fund	5,606.00
Pimco Income Strategy Fund	77,090.00
Principal Global Diversified Inc Fund	26,920.00
Prudential Short Duration High Yield Fund	42,750.00
Reaves Utility Income Fund	267,199.00
Tortoise MLP Fund	28,462.00
Vanguard Emerging Mkts Stk Index Fd Admiral Shs	128,185.00
Vanguard High-Yield Corporate Fund Admiral Shs	505,968.00
Vanguard Long-Term Inv-Grade Fund Admiral Shs	61,706.00
Vanguard Long-Term Treasury Fund Admiral Shs	166,383.00
Vanguard Short-Term Inv-Grade Fund Admiral Shs	132,937.00
Vanguard Small-Cap Index Fund Admiral Shs	115,705.00
Vanguard Windsor II Fund Admiral Shs	392,176.00
Wells Fargo Advantage Income Fund	9,180.00
Western Asset High Inc Fund	18,040.00
Western Asset WW Inc Fund	22,278.00
Total	\$ <u>3,422,187.00</u>

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Mana	at Foi	ındati	lon			
186	East	Main	St,	Ste	300	
Nort	chvill	Le, Mi	483	167		

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PAGE 11, LINE 3(A)

Contributions To Charities -

Ann Arbor Academy	\$ 1,000.00
American Friends of Magen David Adom	160,000.00
Anti-Defamation League	500.00
Channel 56 WTVS	1,000.00
Children's Hospital of Michigan Foundation	500.00
Children's Leukemia	500.00
Congregation Beth Ahm	3,200.00
Forgotten Harvest	500.00
Friends of the Israel Defense Forces	1,000.00
Gilda's Club	1,000.00
Gleaners Food Bank	500.00
Hebrew Free Loan	500.00
Holocaust Memorial Center	2,200.00
JARC	2,800.00
Janice Charach Gallery	30,000.00
Jewish Community Center	10,000.00
Jewish Federation	85,000.00
Jewish Senior Life	50,000.00
Kadima	2,800.00
Kids Kicking Cancer	1,000.00
Make-A-Wish Foundation	1,000.00
National Kidney Foundation	500.00

Manat Foundation 186 East Main, Ste 300 Northville, MI 48167	38-2710511 Form 990PF FYE 7/31/14
PAGE 11, LINE 3(A) (CONTINUED)	
Contributions To Charities -	
Project Haiti Inc	2,500.00
Ronald McDonald House	500.00
Simon Wiesenthal Center	500.00
Tamarack Camps	66,000.00
Temple Shir Shalom	3,600.00
United States Holocaust Museum	500.00
Variety, The Children's Charity	500.00
World Jewish Congress	1,000.00
Total	\$ <u>430,600.00</u>

Manat Foundation 186 East Main, Ste 300 Northville, MI 48167 38-2710511 Form 990PF FYE 7/31/14

PAGE	3, LINE 1(A) - CAPITAL GAINS AN	D LOSSES					
		_ i		1	Gross		
		How	Date	Date	Sales	Cost	Gain /
	Kınd(s) of Property Sold	Acquired	Acquired	Sold	Price	Basis	(Loss)
1	Centurylink Inc	P	Various	11/06/13	16,846.00	18,008.00	(1,162.00
2	Exelon Corp	Р	Various	04/25/14	32,197.00	36,519.00	(4,322.00
3	Microsoft Corp	P	Various	08/07/13	16,440.00	16,064.00	376.00
4	Mondelez International Inc	P	Various	08/23/13	15,457.00	12,792.00	2,665.00
5	Waste Management Inc	P	Various	01/31/14	12,398.00	12,184.00	214.00
6	Quest Corp	Р	Various	05/25/14	12,995.00	13,157.00	(162.00
					106,333.00	108,724.00	(2,391.00