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Form **990-PF**

Department of the Treasury Internal Revenue Service (77)

Return of Private Foundation

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

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

OMB No 1545-0052

2007

ror	calei	idar year 2007, or tax yea	ar beginning		<u>, and e</u>	nding					
G C	Check		nıtıal return	Final return	Amended ret	urn	Address	chang	e	Name change	
Use	the	IRS Name of foundation					A Employ	er iden	ntification	number	
	abel										
Oth	erwi		CHIROPRACTIC				38-	<u>-314</u>	6611		
	print		O box number if mail is not d	elivered to street address)		Room/suite	B Telepho	one nur	nber		
	r type	LETO M TOM	IA STREET				517	7-36	7-22	25	
	Spe ructio	I ('ith) or town ctate a	nd ZIP code							ending, check here	
		LANSING, N	MI 48933							s, check here	
H C	Check	type of organization:	X Section 501(c)(3) e:	xempt private foundation			2. Foreig	in organi	izations me	eting the 85% test, mputation	
	<u>] Se</u>	ction 4947(a)(1) nonexem	npt charitable trust	Other taxable private four	idation						
1 Fa	ur ma	rket value of all assets at o		ing method: X Cash		rual	unders	e round ection !	jation sta 507(b)(1)	tus was terminated (A), check here	
(fr	om i	Part II, col. (c), line 16)		ther (specify)						60-month termination	
	\$	355	5 , 891 . (Part I, colu		h basis.)					(B), check here	
Pa	ırt l	Analysis of Revenue an	nd Expenses	(a) Revenue and		vestment		djusted		(d) Disbursements	
		necessarily equal the amounts	ımns (b), (c), and (d) may not its in column (a))	expenses per books		ome		ncome	1101	for charitable purposes (cash basis only)	
	1	Contributions, gifts, gran	ts, etc., received	359,748							
	2		n is not required to attach Sch. B				 				
_	3	Interest on savings and tempor	orary	110		110.				STATEMENT 1	
2010,	4	Dividends and interest fro	om securities		1		 				
20	5a	Gross rents									
≔	١.	Net rental income or (loss)					† 		-		
.	١.	Net gain or (loss) from sale of	assets not on line 10		-		 				
o o	b	Gross sales price for all	assets flot off filler to								
FEB Revenu	7	assets on line 6a Capital gain net income (from	Part IV line 2)			0.					
<u>~</u>	8	Net short-term capital gai	•		-						
	9	Income modifications	111		 		 				
2	_	Gross sales less returns and allowances			+		├				
		and allowances Less Cost of goods sold			+		 				
CANNED		Gross profit or (loss)			+		 				
D	11	Other income			 		 				
	12	Total. Add lines 1 throug	h 11	359,858		110.	 		0.		
_	13			339,638	•	0.	1		0.	0.	
	14	Compensation of officers, directly of the complex of the complex of the complex of the complex of the compensation of officers, directly of the compensation of	•		+				0.		
		· •	· ·		+		 				
es S		Pension plans, employee	Denems		+		 				
Expenses		Legal fees					 				
xbe		Accounting fees			 		 	 -			
	1	Other professional fees			 	RECE	MED-	 			
ıţi	17	Interest			 			맹			
Administrative	18	Taxes	_	<u> </u>	 ം -	JAN 2 7	2010	Ϊ́			
Ë		Depreciation and depletio	n		1 4 -	- CAIV A V	20.0	8			
rb.		Occupancy		<u> </u>	 			그때			
Ą	21	Travel, conferences, and i	-		++-	OGDER	N, UT				
and		Printing and publications					 				
ing		Other expenses			+		 				
Operating	24	Total operating and adm				•			ا ۾	_	
ĕ		expenses. Add lines 13 ti	-	0	<u> </u>	0.	 		0.	<u> </u>	
		Contributions, gifts, grant	· ·		 		├ ──				
	26	Total expenses and disb	ursements.			_	i				
		Add lines 24 and 25		0	<u></u>	0.			0.	<u>0.</u>	
	27	Subtract line 26 from line	12:					•			
]	a	Excess of revenue over expens	ses and disbursements	359,858	•——		<u> </u>				
		Net investment income @ Adjusted net income @ne	·			110.			0.	* *	

LHA For Privacy Act and Paperwork Reduction Act Notice, see the instructions.

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8 Enter qualifying distributions from Part XII, line 4
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.

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See the Part VI instructions.

Add lines 5 and 6

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	m 990-PF (2007) MICHIGAN CHIROPRACTIC FOUNDATION 38-314	6611	•	Page 4
P	art VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 - see	instr	uctic	ns)
1:	Exempt operating foundations described in section 4940(d)(2), check here and enter "N/A" on line 1.			
	Date of ruling letter: (attach copy of ruling letter if necessary-see instructions)			
1	Domestic foundations that meet the section 4940(e) requirements in Part V, check here and enter 1%			2.
	of Part I, line 27b			
	All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of Part I, line 12, col. (b)			
2	T			0.
3	Add lines 1 and 2			2.
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-			2.
6	Credits/Payments:			
	a 2007 estimated tax payments and 2006 overpayment credited to 2007			
	Exempt foreign organizations - tax withheld at source			
	Tax paid with application for extension of time to file (Form 8868)			
	1 Backup withholding erroneously withheld 6d			
	Total credits and payments. Add lines 6a through 6d			0.
8	Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached 8			
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed			2.
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid			
	Enter the amount of line 10 to be: Credited to 2008 estimated tax			
	art 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 or intervene in	\top	Yes	No
	any political campaign?	1a	1.00	X
ŀ	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see instructions for definition)?	1b	<u> </u>	X
•	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials published or	10	-	┼^
	distributed by the foundation in connection with the activities.			
c	Did the foundation file Form 1120-POL for this year?	10		X
ì	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year:	16		├ ^
Ì	(1) On the foundation. ► \$ (2) On foundation managers. ► \$ 0.		ŀ	
	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation			
	managers. > \$ 0.			
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?	2		х
_	If "Yes," attach a detailed description of the activities.			 ^
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, or	ł	ļ	
•	bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes	3	İ	x
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	4a		X
	of "Yes," has it filed a tax return on Form 990-T for this year?	1		
5		5		x
-	If "Yes," attach the statement required by General Instruction T.	<u> </u>		 ^
6			1	
-	By language in the governing instrument, or			
	By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state law	İ		ĺ
	remain in the governing instrument?	6		x
7	Did the foundation have at least \$5,000 in assets at any time during the year?	7	х	 ^
·	If "Yes," complete Part II, col (c), and Part XV.			\vdash
8a	Enter the states to which the foundation reports or with which it is registered (see instructions)			
-	MI	1	l	
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)		l	
_	of each state as required by General Instruction G? If "No," attach explanation	8b	х	
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	100		
•	year 2007 or the taxable year beginning in 2007 (see instructions for Part XIV)? If "Yes," complete 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		X
		m 990	-PF	_
	ı vı		'	(/

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X

3b

4a

N/A

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,

b Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that

Form 4720, to determine if the foundation had excess business holdings in 2007)

had not been removed from jeopardy before the first day of the tax year beginning in 2007?

4a Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?

MICHIGAN CHIROPRACTIC FO			<u> 38-31466</u>	11	Page 6
Part VII-B Statements Regarding Activities for Which	Form 4720 May Be	Required (contin	nued)		
5a During the year did the foundation pay or incur any amount to:				j	Ì
(1) Carry on propaganda, or otherwise attempt to influence legislation (section)			es 🗶 No		
(2) Influence the outcome of any specific public election (see section 4955);	or to carry on, directly or indir			i	
any voter registration drive?			es X No		
(3) Provide a grant to an individual for travel, study, or other similar purposes		Y	es 🗶 No	ļ	İ
(4) Provide a grant to an organization other than a charitable, etc., organization	on described in section	_		į	l
509(a)(1), (2), or (3), or section 4940(d)(2)?			es 🗶 No	- 1	
(5) Provide for any purpose other than religious, charitable, scientific, literary	, or educational purposes, or				
the prevention of cruelty to children or animals?			es 🗶 No	- 1	
b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify un	der the exceptions described	ın Regulations			-
section 53.4945 or in a current notice regarding disaster assistance (see instru	uctions)?		N/A	5b	
Organizations relying on a current notice regarding disaster assistance check t			▶		
c If the answer is "Yes" to question 5a(4), does the foundation claim exemption f	rom the tax because it mainta	ined			
expenditure responsibility for the grant?		1/A 🔲 Y	es 🗀 No		
If "Yes," attach the statement required by Regulations section 53.494	5-5(d).				•
6a Did the foundation, during the year, receive any funds, directly or indirectly, to	pay premiums on				
a personal benefit contract?		Y	es 🗶 No		
b Did the foundation, during the year, pay premiums, directly or indirectly, on a p	personal benefit contract?			6b	x
If you answered "Yes" to 6b, also file Form 8870.					
7a At any time during the tax year, was the foundation a party to a prohibited tax s	shelter transaction?	Y	es 🗶 No		
b If yes, did the foundation receive any proceeds or have any net income attribut	able to the transaction?		N/A	7b	
Part VIII Information About Officers, Directors, Trust	ees, Foundation Ma	nagers, Highl	У		
Faiu Employees, and Contractors			·		
1 List all officers, directors, trustees, foundation managers and their		1	-		
(a) Name and address	(b) Title, and average hours per week devoted	(c) Compensation	(d) Contributions to employee benefit plans and deferred	(e) E	xpense nt, other
(a) Name and address	to position	(If not paid, enter -0-)	and deferred compensation	allov	vances
SEE STATEMENT 3		0.	0.		0.
				_	
		1			
Compensation of five highest-paid employees (other than those inc	luded on line 1). If none,	enter "NONE."			
(-) Name and address of each ampleuse need more than \$50,000	(b) Title and average hours per week		(d) Contributions to employee benefit plans and deferred	(e) E	xpense nt, other
(a) Name and address of each employee paid more than \$50,000	devoted to position	(c) Compensation	and deferred compensation	accour	nt, otner /ances
NONE					
					
		 	-		
		 			
Total number of other employees paid over \$50,000	L	<u> </u>			
יסיבו וועוווטפו טו טעופו פוווטוטאפפא טמוע טאפו שָאַטי,טטט)00 PF	0
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Part VIII Information About Officers, Directors, Trustees, Four Paid Employees, and Contractors (continued)	ndation Managers, Highly	
3 Five highest-paid independent contractors for professional services. If none, e	enter "NONE."	
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
· NONE		
Total number of others receiving over \$50,000 for professional services		. ▶ 0
Part IX-A Summary of Direct Charitable Activities		
List the foundation's four largest direct charitable activities during the tax year. Include relevant sometimes of organizations and other beneficiaries served, conferences convened, research papers 1 SELECTED THREE EDUCATIONAL INSTITUTIONS AS	produced, etc.	Expenses
RECIPIENTS.	- Denobarbitie Fond	
2		
3		
4		
Part IX-B Summary of Program-Related Investments		
Describe the two largest program-related investments made by the foundation during the tax year	r on lines 1 and 2.	Amount
1 <u>N/A</u>		
2		
All other program-related investments. See instructions.		
3		

Total. Add lines 1 through 3

Part X Minimum Investment Return (All domestic foundations must complete this part f	Foreign foundations, see	instructions)
1 Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes:		
a Average monthly fair market value of securities	1a	74,775.
b Average of monthly cash balances	1b	2,931.
c Fair market value of all other assets	1c	
d Total (add lines 1a, b, and c)	1d	77,706.
e Reduction claimed for blockage or other factors reported on lines 1a and		
1c (attach detailed explanation)	0.	
2 Acquisition indebtedness applicable to line 1 assets	2	0.
3 Subtract line 2 from line 1d	3	77,706.
4 Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions)	4	1,166.
5 Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	76,540.
6 Minimum investment return. Enter 5% of line 5	6	3,827.
Part XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating for foreign organizations check here and do not complete this part.)	undations and certain	
1 Minimum investment return from Part X, line 6	1	3,827.
2a Tax on investment income for 2007 from Part VI, line 5	2.	
b Income tax for 2007. (This does not include the tax from Part VI.)		
c Add lines 2a and 2b	2c	2.
3 Distributable amount before adjustments. Subtract line 2c from line 1	3	3,825.
4 Recoveries of amounts treated as qualifying distributions	4	0.
5 Add lines 3 and 4	5	3,825.
6 Deduction from distributable amount (see instructions)	6	0.
7 Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1	7	3,825.
Part XII Qualifying Distributions (see instructions)		
1 Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:		
a Expenses, contributions, gifts, etc total from Part I, column (d), line 26	1a	0.
b Program-related investments - total from Part IX-B	1b	0.
2 Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes	2	
3 Amounts set aside for specific charitable projects that satisfy the:		
a Suitability test (prior IRS approval required)	3a	
b Cash distribution test (attach the required schedule)	3b	
4 Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4	4	0.
5 Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment		
income. Enter 1% of Part I, line 27b	5	0.
6 Adjusted qualifying distributions. Subtract line 5 from line 4	6	0.
Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating v	whether the foundation o	

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4940(e) reduction of tax in those years.

Part XIII Undistributed Income (see instructions)

,	(a) Corpus	(b) Years prior to 2006	(c) 2006	(d) 2007
1 Distributable amount for 2007 from Part XI,				
line 7				3,825.
2 Undistributed income, if any, as of the end of 2006				
a Enter amount for 2006 only			0.	
b Total for prior years:				
,,		0.		
3 Excess distributions carryover, if any, to 2007:				
a From 2002				
b From 2003				
c From 2004				
d From 2005				
e From 2006				
f Total of lines 3a through e	0.			
4 Qualifying distributions for 2007 from				
Part XII, line 4: ►\$0.				
a Applied to 2006, but not more than line 2a	·		0.	
b Applied to undistributed income of prior				
years (Election required - see instructions)		0.		
c Treated as distributions out of corpus				
(Election required - see instructions)	0.			
d Applied to 2007 distributable amount		····		0.
e Remaining amount distributed out of corpus	0.			
5 Excess distributions carryover applied to 2007 (If an amount appears in column (d), the same amount must be shown in column (a))				0.
6 Enter the net total of each column as indicated below:				
2 Corpus Add lines 3f, 4c, and 4e Subtract line 5	0.			
b Prior years' undistributed income. Subtract				
line 4b from line 2b		0.		
c Enter the amount of prior years'				
undistributed income for which a notice of				
deficiency has been issued, or on which the section 4942(a) tax has been previously	Ì			
assessed		0.		
d Subtract line 6c from line 6b. Taxable				
amount - see instructions		0.		
e Undistributed income for 2006. Subtract line				
4a from line 2a. Taxable amount - see instr.			0.	
f Undistributed income for 2007. Subtract				
lines 4d and 5 from line 1. This amount must				
be distributed in 2008				3,825.
7 Amounts treated as distributions out of				
corpus to satisfy requirements imposed by				
section 170(b)(1)(F) or 4942(g)(3)	0.	·····		
8 Excess distributions carryover from 2002				
not applied on line 5 or line 7	0.			
9 Excess distributions carryover to 2008.	i			
Subtract lines 7 and 8 from line 6a	0.	· · · · · · · · · · · · · · · · · · ·		
10 Analysis of line 9:				
a Excess from 2003	ļ			
b Excess from 2004		ļ		
c Excess from 2005				
d Excess from 2006				
e Excess from 2007				
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Part XIV Private Operating Fo			I-A, question 9)	N/A	
1 a If the foundation has received a ruling or					
foundation, and the ruling is effective for			▶ └	1	
b Check box to indicate whether the found		g foundation described		4942(j)(3) or49)42(j)(5)
2 a Enter the lesser of the adjusted net	Tax year	(1) 0000	Prior 3 years	40,0004	
income from Part I or the minimum	(a) 2007	(b) 2006	(c) 2005	(d) 2004	(e) Total
investment return from Part X for					
each year listed					
b 85% of line 2a					
c Qualifying distributions from Part XII,					
line 4 for each year listed					
d Amounts included in line 2c not					
used directly for active conduct of					
exempt activities					
e Qualifying distributions made directly					
for active conduct of exempt activities.					
Subtract line 2d from line 2c 3 Complete 3a, b, or c for the		- ·			
alternative test relied upon:					
a "Assets" alternative test - enter:					
(1) Value of all assets			ļ		
(2) Value of assets qualifying under section 4942(j)(3)(B)(i)					
b "Endowment" alternative test - enter					
2/3 of minimum investment return shown in Part X, line 6 for each year listed					
c "Support" alternative test - enter:					
(1) Total support other than gross					
investment income (interest,					
dividends, rents, payments on securities loans (section					
512(a)(5)), or royalties)					
(2) Support from general public					
and 5 or more exempt organizations as provided in					
section 4942(j)(3)(B)(iii)					
(3) Largest amount of support from					
an exempt organization					
(4) Gross investment income					
Part XV Supplementary Infor	rmation (Comple	te this part only	if the foundation	had \$5,000 or mo	re in assets
at any time during the	ne year-see the i	nstructions.)		<u>, </u>	
Information Regarding Foundation	n Managers:				
a List any managers of the foundation who	have contributed more t	han 2% of the total cont	ributions received by the	foundation before the clos	se of any tax
year (but only if they have contributed m	ore than \$5,000). (See se	ection 507(d)(2).)			
IONE	 -				
b List any managers of the foundation who	own 10% or more of the	stock of a corporation ((or an equally large porti	on of the ownership of a pa	irtnership or
other entity) of which the foundation has	a 10% or greater interes	t.			
IONE	 ,				
2 Information Regarding Contribution					
Check here ► X if the foundation or	nly makes contributions t	o preselected charitable i	organizations and does i	not accept unsolicited requ	ests for funds. If
	see instructions) to indivi			omplete items 2a, b, c, and	d
the foundation makes gifts, grants, etc. (applications should be	addressed:		
a The name, address, and telephone numb	er of the person to whon				
· · · · · · · · · · · · · · · · · · ·	er of the person to whon				
a The name, address, and telephone numb			nould include:		
a The name, address, and telephone numb b The form in which applications should be			nould include:		
a The name, address, and telephone numb			nould include:		
a The name, address, and telephone numb b The form in which applications should be	e submitted and informat	on and materials they sh		other factors:	
a The name, address, and telephone numb b The form in which applications should be c Any submission deadlines:	e submitted and informat	on and materials they sh		other factors;	

3 Grants and Contributions Paid During the Y		ayment		
Recipient	If recipient is an individual, show any relationship to	Foundation status of	Purpose of grant or	Amount
Name and address (home or business)	any foundation manager S or substantial contributor r		contribution	Amount
a Paid during the year				
NONE				
Total b Approved for future payment	<u> </u>	 	<u> </u>	
ALMER COLLEGE, 1000 BRADY C., DAVENPORT, IA 52806	z		SCHOLARSHIPS FOR STUDENTS OF	
ATIONAL UNIVERSITY, 200	NONE		CHIROPRACTIC SCHOLARSHIPS	7,00
ROOSEVELT RD., LOMBARD, 60148	NONE		FOR STUDENTS OF CHIROPRACTIC	7,00
FE UNIVERSITY, 1269 ARCLAY CIRCLE, MARIETTA,			SCHOLARSHIPS FOR STUDENTS OF	
30060	NONE		CHIROPRACTIC	7,00
Total			▶ 3b	21,00

Part XVI-A	Analysis of Income-Producing	Activities
	in any one or interest in touring ,	, , , , , , , , , , , , , , , , , , , ,

ter gross amounts unless otherwise indicated.	Unrelated	ousiness income		by section 512, 513, or 514	(e)
	(a) Business	(b)	(C) Exclu-	(d)	Related or exempt
Program service revenue:	code	Amount	code	Amount	function income
·					
·					
1					
e	l I				
Fees and contracts from government agencies					
Membership dues and assessments					
Interest on savings and temporary cash					
investments			14	110.	
Dividends and interest from securities					•
Net rental income or (loss) from real estate:					
a Debt-financed property					
Not debt-financed property					
Net rental income or (loss) from personal					
property					
Other investment income		·-·			
Gain or (loss) from sales of assets other					
than inventory					
Net income or (loss) from special events					
Gross profit or (loss) from sales of inventory			_		
Other revenue:					
a	_				
b					
·	_				
d					<u> </u>
e	_				
Subtotal. Add columns (b), (d), and (e)		C).	110.	
Total. Add line 12, columns (b), (d), and (e)				13	11
e worksheet in line 13 instructions to verify calculations.)					
art XVI-B Relationship of Activities	to the Accom	plishment of I	Exempt F	Purposes	
•		·		<u> </u>	
ne No. Explain below how each activity for which inc	come is reported in d	olumn (e) of Part XV	I-A contribute	ed importantly to the accomp	lishment of
the foundation's exempt purposes (other that	n by providing funds	for such purposes).			

Line No.	Explain below how each activity for which income is reported in column (e) of Part XVI-A contributed importantly to the accomplishment of the foundation's exempt purposes (other than by providing funds for such purposes).
	
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_	art A	Exempt Organ		and Transactions a	nd Relationships With Nonch	ıarıtable)	
1	Did th		rectly engage in any of the following	ng with any other organization	n described in section 501(c) of		Yes	No
•			c)(3) organizations) or in section 52		` ,		103	140
			dation to a noncharitable exempt or		zations			
•	(1) C		ation to a nonchartable exempt of	gamzanon oi.		10/1		v
		ther assets				1a(1)		X
,		transactions:				1a(2)		
٠		ales of assets to a noncharita	able exempt organization			45/43		v
			oncharitable exempt organization			1b(1)		X
		ental of facilities, equipment,	• =			1b(2)		X
		leimbursement arrangements				1b(3)		X
		oans or loan guarantees	,			1b(4)		X
			embership or fundraising solicitation	nne		1b(5)		
,			ailing lists, other assets, or paid em			1b(6) 1c		X
					rays show the fair market value of the good		oto	
•					ays snow the fair market value of the good: In any transaction or sharing arrangemen		eis,	
			other assets, or services received.		on any dansaction of sharing arrangement	G SHOW III		
(a)	Line no	(b) Amount involved	(c) Name of noncharitable		(d) Description of transfers, transactions, a	nd sharing ag	angeme	nts
<u> </u>			N/A		(2) Seed prior of dialogs, dialogs for the	10 Sharing ar	a igonie	
			11/11					
				· · · · · · · · · · · · · · · · · · ·	-			
				· · ·				
				 				
				·		.		
			1					
		"						
2 a	ls the	foundation directly or indirect	tly affiliated with, or related to, one	or more tax-exempt organiza	ations described			
			r than section 501(c)(3)) or in sect	• =		Yes	X	No
b		," complete the following sch	, , , , ,					, 110
		(a) Name of org		(b) Type of organization	(c) Description of relation	nship		
	-	N/A				<u> </u>		
		_						
					nts, and to the best of my knowledge and belief, it	ıs true, солтес	zt,	
	and com	plete Declaration of preparer (other	or than taxpany or fiduciary) is lased on	all information of which preparer ha	as any knowledge			
	L	//M//K	MIMIL	1712201	2			
e	Sıg	nature of officer or trustee		Date	Title			
gn Here		Preparer's		. Da	te Check If Prepare	arer's SSN or	PTIN	
- 1	_^뉴	signature Man	uma Blooms	LPA I	-8-2010 self- employed ►			
	Paid spare se On	Firm's name (or yours MANE	R COSTERISAN PO		EIN ▶			
	Paid Preparer's Use Only	if self-employed). 2425		, SUITE 1				
		address, and ZIP code LANS	ING, MI 48912	-3291	Phone no. (51'	7)323-	-75(0 0
						Form 990.		

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

Department of the Treasury Internal Revenue Service Name of organization

Schedule of Contributors

Supplementary Information for line 1 of Form 990, 990-EZ, and 990-PF (see instructions) OMB No 1545-0047

Employer identification number

M:	ICHIGAN CHIROPRACTIC FOUNDATION	38-3146611				
Organization type (check of						
Filers of:	Section:					
Form 990 or 990-EZ	501(c)() (enter number) organization					
	4947(a)(1) nonexempt chantable trust not treated as a private foundation					
	527 political organization					
Form 990-PF	X 501(c)(3) exempt private foundation					
	4947(a)(1) nonexempt charitable trust treated as a private foundation					
	501(c)(3) taxable private foundation					
	is covered by the General Rule or a Special Rule . (Note: <i>Only a section 501(c)(7), (and a Special Rule-see instructions.)</i>	8), or (10) organization can check boxes				
General Rule-	,					
	filing Form 990, 990-EZ, or 990-PF that received, during the year, \$5,000 or more (in plete Parts I and II.)	money or property) from any one				
Special Rules-						
sections 509(a)(1)	c)(3) organization filing Form 990, or Form 990-EZ, that met the 33 1/3% support te /170(b)(1)(A)(vi), and received from any one contributor, during the year, a contributi line 1 of these forms. (Complete Parts I and II.)					
aggregate contribi	c)(7), (8), or (10) organization filing Form 990, or Form 990-EZ, that received from an utions or bequests of more than \$1,000 for use <i>exclusively</i> for religious, charitable, prevention of cruelty to children or animals. (Complete Parts I, II, and III)	· • • • • • • • • • • • • • • • • • • •				
some contribution \$1,000 (If this box charitable, etc., pu	For a section 501(c)(7), (8), or (10) organization filing Form 990, or Form 990-EZ, that received from any one contributor, during the year, some contributions for use exclusively for religious, charitable, etc., purposes, but these contributions did not aggregate to more than \$1,000 (If this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., purpose Do not complete any of the Parts unless the General Rule applies to this organization because it received nonexclusively religious, charitable, etc., contributions of \$5,000 or more during the year.)					
they must check the box in	t are not covered by the General Rule and/or the Special Rules do not file Schedule the heading of their Form 990, Form 990-EZ, or on line 2 of their Form 990-PF, to o 3 (Form 990, 990-EZ, or 990-PF).	the state of the s				
	uction Act Notice, see the Instructions Sched 990-EZ, and Form 990-PF.	ule B (Form 990, 990-EZ, or 990-PF) (2007)				

723452 12-27-07

Schedule B (Form 990, 990-EZ, or 990-PF) (2007)

(Complete Part II if there is a noncash contribution)

FORM 990-PF INTEREST ON SAVINGS	AND TEMPORARY CA	SH INVESTMENTS	STATEMENT 1
SOURCE			AMOUNT
UBS CASH ACCOUNT			110.
TOTAL TO FORM 990-PF, PART I, LIN	IE 3, COLUMN A		110.
FORM 990-PF			
FORM 990-PF	OTHER ASSETS		STATEMENT 2
DESCRIPTION	OTHER ASSETS BEGINNING OF YR BOOK VALUE	END OF YEAR BOOK VALUE	STATEMENT 2 FAIR MARKET VALUE
	BEGINNING OF		FAIR MARKET

	I - LIST OF OFFICERS, DIRECTORS EES AND FOUNDATION MANAGERS		STATEMENT 3	
NAME AND ADDRESS	TITLE AND AVRG HRS/WK		EMPLOYEE BEN PLAN CONTRIB	
MARK LIMBERG, D.C. 416 W IONIA STREET LANSING, MI 48933	PRESIDENT 1.00	0.	0.	0.
JAMES SOMMERS, D.C. 416 W IONIA STREET LANSING, MI 48933	SECRETARY 1.00	0.	0.	0.
ROYCE NEWMAN, D.C. 416 W IONIA STREET LANSING, MI 48933	DIRECTOR 1.00	0.	0.	0.
KEVIN MOODY 416 W IONIA STREET LANSING, MI 48933	DIRECTOR 1.00	0.	0.	0.
JACK BARTON, D.C. 416 W IONIA STREET LANSING, MI 48933	DIRECTOR 1.00	0.	0.	0.
ROBERT DUCHARME, D.C. 416 W IONIA STREET LANSING, MI 48933	DIRECTOR 1.00	0.	0.	0.
ERIC SEIF, D.C. 416 W IONIA STREET LANSING, MI 48933	DIRECTOR 1.00	0.	0.	0.
TOTALS INCLUDED ON 990-PF, PAG	GE 6, PART VIII	0.	0.	0.