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Form

Department of the Treasury Internal Revenue Service

Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except black lung benefit trust or private foundation)

The organization may have to use a copy of this return to satisfy state reporting requirements

OMB No 1545-0047 2008 Open to Public Inspection

			1	3 - 1		T Mopadan
<u>A</u>	For the 2008 ca	alendar ye	ear, or tax year beginning , and ending			
В	Check if applicable	Please	C Name of organization		D Emplo	yer identification number
L	Address change	use IRS	MICHIGAN RECREATION & PARK A	SSOC.		
	Name change	label or print or	Doing Business As		38-	-2457661
⊢	ì	type.	Number and street (or P O box if mail is not delivered to street address)	Room/suite	E Teleph	none number
느	Initial return	See	2465 WOODLAKE CIRCLE	180	517	7-485-9888
	Termination	Specific	City or town, state or country, and ZIP + 4		G Gross rece	
	Amended return	Instruc- tions.	OKEMOS MI 48864		0 0,000,000	
\vdash		1	e and address of principal officer		H(a) Is this	a group return for
	Application pending	''				
					H(b) Are all	affiliates
		1			include	attach a list (see instructions)
_	Tax-exempt statu	us X	501(c) (3) ◀ (insert no) 4947(a)(1) or 527		" 140,	attach a list (see liistructions)
÷			IRPAONLINE.ORG		H(a) Group	exemption number
<u>, </u>	Type of organization			Year of formation		M State of legal domicile
	***************************************	ummai		real of loinfation		State of legal domicile
						
	1		ne organization's mission or most significant activities	TTMV		
e S	A MI		DRIVEN ORGANIZATION COMMITTED TO PROVIDING QUA			
Jan L	PRO		ONAL PARK AND RECREATION PROGRAMS AND SERVICES			
/eri	FISC		TEGRITY AND PROGRESSIVE LEADERSHIP TO MICHIGAN			
Ó	2 Check th			25% of its assets	1 - 1	1.0
قه	3 Number	-	members of the governing body (Part VI, line 1a)		3	13
} Activities & Governance	4 Number	•	endent voting members of the governing body (Part VI, line 1b)		4	13
Ξ	5 Total nu	mber of e	employees (Part V, line 2a)		5	11
ک ہے	6 Total nu	mber of v	olunteers (estimate if necessary)		6	150
2010	7a Total gro	oss unrela	ated business revenue from Part VIII, line 12, column & EIVED		7a	5,000
	b Net unre	elated bus	siness taxable income from Form 990-T, lihe 34		7b	
4			I grants (Part VIII, line 1h)	Prior Yea		Current Year
9	8 Contribu		I grants (Part VIII, line 1h)		8,100	72,250
JAN (Revenue	9 Program		revenue (Fait VIII, line 29)		1,991	1,411,162
~~ §	10 Investme		ne (Part VIII, column (A), lines 3, 4, and 7d OGDEN, UT		0,258	211
\Box	11 Other re			9,526	23,133	
<u> </u>	12 Total rev	9,875	1,506,756			
SCANNED .	13 Grants a			<u> </u>		
K	14 Benefits		r for members (Part IX, column (A), line 4)			
တ္တန	15 Salaries,		impensation, employee benefits (Part IX, column (A), lines 5–10)	365	5,471	338,121
Sus	16a Profession	onal fund	raising fees (Part IX, column (A), line 11e)			
ďx	b Total fun	ndraising	expenses (Part IX, column (D), line 25)			
Ш	17 Other ex	rpenses (Part IX, column (A), lines 11a-11d, 11f-24f)		8,629	1,211,576
	18 Total exp	penses A	Add lines 13-17 (must equal Part IX, column (A), line 25)		4 , 100	1,549,697
	19 Revenue	e less exp	penses Subtract line 18 from line 12	-14		-42,941
Net Assets or				Beginning of		End of Year
sset	20 Total ass	•			4,195	307,447
et A	21 Total liab	-	·		2,320	166,110
			d balances Subtract line 21 from line 20	19.	1 , 875	141,337
_ <u>F</u>	Part II Si	ignatur	<u>e Block</u>			<u>_</u>
			es of perjury, I declare that I have examined this return, including accompanying schedules an s true, correct, and complete. Declaration of preparer (other than officer) is based on all inform			
		a beller, it i	a upe-journed, and complete Decial allow of preparer (other trial officer) is based on all miloting	audit of willon prepa	l .	, · · .
Sig	_		J Traces		//	1/16/09
He	re	Signatue	e of officer		Date	
			Fraas			
		Type or	print name and title			
_	. Pre	eparer's	Date Date	Check if	<i>f</i>	Preparer's identifying number (see instructions)
Pa	IIO sigi	nature	11/10	6/09 self- employe	ed ▶ ∐	P00039186
	eparer's		YEO & YEO P C		EIN	▶ 38-2706146
Us	· · · · · · · · · · · · · · · · · · ·	m's name (elf-employ	CC20 CENTRED TON DD CTLTTE 170		Phone	
		dress, and			no ►	517-323-9500
Ma	y the IRS discus	s this ret	urn with the preparer shown above? (see instructions)			Yes No
DA			Paperwork Reduction Act Notice, see the separate instructions.			Form 990 (2008)

) (Revenue \$

Form 990 (2008)

1,044,330 (Must equal Part IX, Line 25, column (B))

109,382 including grants of \$

4e Total program service expenses ▶ \$

Form 990 (2008) MICHIGAN RECREATION & PARK ASSOC. 38-2457661 Page 3 Part IV **Checklist of Required Schedules** Yes No 1 Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," Х complete Schedule A 1 X 2 Is the organization required to complete Schedule B. Schedule of Contributors? 2 Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I 3 Χ 4 Section 501(c)(3) organizations. Did the organization engage in lobbying activities? If "Yes," complete Χ Schedule C, Part II 4 5 Section 501(c)(4), 501(c)(5), and 501(c)(6) organizations. Is the organization subject to the section 6033(e) notice and reporting requirement and proxy tax? If "Yes," complete Schedule C, Part III 5 Did the organization maintain any donor advised funds or any accounts where donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete X Schedule D, Part I 6 7 Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II 7 Χ 8 Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," Χ 8 complete Schedule D. Part III 9 Did the organization report an amount in Part X, line 21, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D. Part IV 10 10 Did the organization hold assets in term, permanent, or quasi-endowments? If "Yes," complete Schedule D, Part V Did the organization report an amount in Part X, lines 10, 12, 13, 15, or 25? If "Yes," complete Schedule D, Χ Parts VI, VII, VIII, IX, or X as applicable 11 12 Did the organization receive an audited financial statement for the year for which it is completing this return that was prepared in accordance with GAAP? If "Yes," complete Schedule D, Parts XI, XII, and XIII 12 13 13 Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E 14a Did the organization maintain an office, employees, or agents outside of the U S ? 14a Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, and program service activities outside the U S ? If "Yes," complete Schedule F, Part I 14b 15 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any Χ organization or entity located outside the United States? If "Yes," complete Schedule F, Part II 15 16 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance 16 Χ to individuals located outside the United States? If "Yes," complete Schedule F, Part III 17 17 Did the organization report more than \$15,000 on Part IX, column (A), line 11e? If "Yes," complete Schedule G, Part I Χ 18 Did the organization report more than \$15,000 total on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II 18 X 19 Did the organization report more than \$15,000 on Part VIII, line 9a? If "Yes," complete Schedule G, Part III 19 Χ 20 Did the organization operate one or more hospitals? If "Yes," complete Schedule H 20 21 21 Did the organization report more than \$5,000 on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II Χ 22 Did the organization report more than \$5,000 on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III 22 Did the organization answer "Yes" to Part VII, Section A, questions 3, 4, or 5? If "Yes," complete Χ Schedule J 23 Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than 24a \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer questions 24b-24d and complete Schedule K. If "No," go to question 25 24a X 24b b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? c Did the organization maintain an escrow account other than a refunding escrow at any time during the year 24c to defease any tax-exempt bonds? d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? 24d 25a Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction X with a disqualified person during the year? If "Yes," complete Schedule L, Part I 25a b Did the organization become aware that it had engaged in an excess benefit transaction with a disqualified X person from a prior year? If "Yes," complete Schedule L, Part I 25b

Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or

disqualified person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II

Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, or

substantial contributor, or to a person related to such an individual? If "Yes," complete Schedule L, Part III

26

Χ

Χ

26

Part IV Checklist of Required Schedules (continued)

	•		Yes	No
28	During the tax year, did any person who is a current or former officer, director, trustee, or key employee			
а	Have a direct business relationship with the organization (other than as an officer, director, trustee, or			
	employee), or an indirect business relationship through ownership of more than 35% in another entity			
	(individually or collectively with other person(s) listed in Part VII, Section A)? If "Yes," complete Schedule L,			l
	Part IV	28a		X
þ	Have a family member who had a direct or indirect business relationship with the organization? If "Yes,"	1		
	complete Schedule L, Part IV	28b		X
С	Serve as an officer, director, trustee, key employee, partner, or member of an entity (or a shareholder of a			
	professional corporation) doing business with the organization? If "Yes," complete Schedule L, Part IV	28c		X
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		X
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified			
	conservation contributions? If "Yes," complete Schedule M	30		X
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N,			
	Part I	31		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete			
	Schedule N, Part II	32		X
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			
	sections 301 7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part I	33		X
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II,			
	III, IV, and V, line 1	34		<u>X</u>
35	Is any related organization a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete			İ
	Schedule R, Part V, line 2	35		X
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related			
	organization? If "Yes," complete Schedule R, Part V, line 2	36		X
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part			
	VI	37		<u>X</u>

Form **990** (2008)

Statements Regarding Other IRS Filings and Tax Compliance Part V Yes No 1a Enter the number reported in Box 3 of Form 1096, Annual Summary and Transmittal of U.S. Information Returns Enter -0- if not applicable 0 Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable Did the organization comply with backup withholding rules for reportable payments to vendors and reportable 1c Χ gaming (gambling) winnings to prize winners? Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return Χ b If at least one is reported on line 2a, did the organization file all required federal employment tax returns? 2b Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return (see instructions) 3a Did the organization have unrelated business gross income of \$1,000 or more during the year covered by 3a this return? Х 3b If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O 4a At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial 4a account)? If "Yes," enter the name of the foreign country See the instructions for exceptions and filing requirements for Form TD F 90-22 1, Report of Foreign Bank and Financial Accounts Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction? c If "Yes," to question 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity Regarding Prohibited Tax Shelter Transaction? 5c Χ 6a 6a Did the organization solicit any contributions that were not tax deductible? **b** If "Yes," did the organization include with every solicitation an express statement that such contributions or 6b gifts were not tax deductible? Organizations that may receive deductible contributions under section 170(c). a Did the organization provide goods or services in exchange for any quid pro quo contribution of more than 7b If "Yes," did the organization notify the donor of the value of the goods or services provided? Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was Х 7с required to file Form 8282? If "Yes," indicate the number of Forms 8282 filed during the year Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? 7f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? For all contributions of qualified intellectual property, did the organization file Form 8899 as required? 7g For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as X 7h required? Section 501(c)(3) and other sponsoring organizations maintaining donor advised funds and section 8 509(a)(3) supporting organizations. Did the supporting organization, or a fund maintained by a sponsoring X 8 organization, have excess business holdings at any time during the year? Section 501(c)(3) and other sponsoring organizations maintaining donor advised funds. a Did the organization make any taxable distributions under section 4966? 9ь Did the organization make a distribution to a donor, donor advisor, or related person? b Section 501(c)(7) organizations. Enter: 10 10a a Initiation fees and capital contributions included on Part VIII, line 12 10b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities Section 501(c)(12) organizations. Enter. 11 11a a Gross income from members or shareholders Gross income from other sources (Do not net amounts due or paid to other sources against 11b amounts due or received from them) 12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041? 12a If "Yes," enter the amount of tax-exempt interest received or accrued during the year Form 990 (2008)

06746 11/16/2009 11 47 AM Form 990 (2008) MICHIGAN RECREATION & PARK ASSOC. 38-2457661 Page 6 Governance, Management, and Disclosure (Sections A, B, and C request information about policies not required by the Internal Revenue Code.) Section A. Governing Body and Management Yes No For each "Yes" response to lines 2-7b below, and for a "No" response to lines 8 or 9b below, describe the circumstances, processes, or changes in Schedule O See instructions Enter the number of voting members of the governing body 1a 13 Enter the number of voting members that are independent 2 Did any officer, director, trustee, or key employee have a family relationship or a business relationship with Χ any other officer, director, trustee, or key employee? 2 3 Did the organization delegate control over management duties customarily performed by or under the direct 3 supervision of officers, directors or trustees, or key employees to a management company or other person? 4 4 Did the organization make any significant changes to its organizational documents since the prior Form 990 was filed? 5 Did the organization become aware during the year of a material diversion of the organization's assets? 5 6 Does the organization have members or stockholders? 6 7a Does the organization have members, stockholders, or other persons who may elect one or more members of the governing body? 7a 7b b Are any decisions of the governing body subject to approval by members, stockholders, or other persons? 8 Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following The governing body? 8a Χ 8b Each committee with authority to act on behalf of the governing body? b Does the organization have local chapters, branches, or affiliates? 9a b If "Yes," does the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with those of the organization? 9b 10 Was a copy of the Form 990 provided to the organization's governing body before it was filed? All organizations Χ 10 must describe in Schedule O the process, if any, the organization uses to review the Form 990 11 Is there any officer, director or trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O 11 X Section B. Policies Yes No 12a Χ 12a Does the organization have a written conflict of interest policy? If "No." go to line 13 b Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts? 12b c Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," 12c describe in Schedule O how this is done 13 Does the organization have a written whistleblower policy? 13 Does the organization have a written document retention and destruction policy? 14 14 15 Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision The organization's CEO, Executive Director, or top management official? 15a Other officers or key employees of the organization? 15b Describe the process in Schedule O. (see instructions) 16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year? 16a b If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the organization's exempt status with respect to such arrangements?

Section C. Disclosure

- List the states with which a copy of this Form 990 is required to be filed
 NONE 17
- 18 Section 6104 requires an organization to make its Form 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection. Indicate how you make these available. Check all that apply

Own website Another's website X Upon request

- 19 Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of interest policy, and financial statements available to the public.
- 20 State the name, physical address, and telephone number of the person who possesses the books and records of the 2465 WOODLAKE CIRCLE SUITE 180 organization > TOM FRAAS

48864

517-485-9888

16b

OKEMOS

Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

1a Complete this table for all persons required to be listed. Use Schedule J-2 if additional space is needed

Check this box if the organization did not compensate any officer, director, trustee, or key employee

- List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation, and current key employees. Enter -0- in columns (D), (E), and (F) if no compensation was paid
- List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations
- List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations. List persons in the following order individual trustees or directors, institutional trustees, officers, key employees, highest compensated employees, and former such persons

(A) Name and Title	(B) Average			(4	C)	hat ap		(D) Reportable	(E) Reportable	(F) Estimated
	hours per week	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	compensation from the organization (W-2/1099-MISC)	compensation from related organizations (W-2/1099-MISC)	amount of other compensation from the organization and related organizations
MARY SCHEURER										
DIRECTOR		Х						0	0	0
CARRIE KLINGEI	LSMITH									
VICE PRESIDE		Х			L			0	0	0
JASON JONES]]				
V. PRES - EL		Х						0	0	0
KENDALL KLINGE	ELSMITH									
PAST PRESIDE		Х				Ш		0	0	0
ART SERAFINSKI				ĺ					_	
SECRETARY		Х						0	0	0
ADRIENNE SCHUN	AACHER									
DIRECTOR		Х				\vdash		0.	0	0
LINDA WALTER	i	v								0
PRES - ELECT SUE WELLS	 -	X				\vdash		0	0	0
DIRECTOR		x						o	0	0
GREG HOHENBERG	EER		_			\vdash				<u>~</u>
TREASURER	1	х	ł			1 1		0	0	0
DARRIN DUISTER	RMARS	∺								<u></u> <u></u>
PRESIDENT		Х						0	0	0
DEBRA BILBREY-	-HONSOWETZ									
DIRECTOR	•	X	ı			ii		ol	01	0
KYLE LANGLOIS										
DIRECTOR		Х						0	0	0
LORI IRWIN/DEA	N WALLIN							-		
CO-DIRECTORS		X						0	0	0
DENNIS SCHORNA	ACK		- 1							
EXECUTIVE DI			_					0	0	0
		\dashv								
		-	\dashv			\vdash				
							ŀ			
				[لـــــــــــــــــــــــــــــــــــــ		___		

Par	t VII	Section A	L Officers, Directors, Trus	tees	, Ke	y En	nplo	yees	, and	d Highest Compensated E	mployees (continued)				
	(A)		(B)				C)			(D)	(E)	1	(F)		
	Name'an	d title	Average hours per week	or director		Officer	Key employee	a Highest compensated employee	_	Reportable compensation from the organization (W-2/1099-MISC)	Reportable compensation from related organizations (W-2/1099-MISC)	co oi a	Estima amoun othe impens from t rganiza and rela	t of f sation he ation ated	
													_		
															 ,
										,					-
		_													
-															
	Total								<u> </u>						
		nber of indiv tion ▶ 0	viduals (including those in 1	a) w	ho re	eceiv	ed n	nore	than	\$100,000 in reportable cor	mpensation from the				
	organiza	ion P C	 				_						\neg	Yes	No
4	employer For any i	e on line 1a ndividual list nization and	? If "Yes," complete Scheduted on line 1a, is the sum o	ule J of repo	for s ortat	uch de co	indiv ompo	idual ensa	tion :	ee, or highest compensated and other compensation fro complete Schedule J for s	om		3 4		X
5	Did any p	erson listed	on line 1a receive or accruthe organization? If "Yes,"										5		Х
			Contractors or your five highest comper		ed inc	depe	ndei	nt co	ntrac	ctors that received more that	an \$100,000 of				
	compens	ation from the	he organization (A) Name and business address							Descript	(B) tion of services		Cor	(C)	ion
							_								
			pendent contractors (includ	ling t	hose	in 1) wh	o red	eive	ed more than \$100,000 in			0		
DAA													Form	990 ((2008)

Pa	rt V	III Staten	nent of Rev	/enue						
	-						(A) Total revenue	(B) Related or exempt function	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
'0 '0		Federated can		1a				revenue		312, 313, 0(314
Program Service Revenue Contributions, gifts, grants	1a			1b					1	
P. B.	b	Membership d		1c				1	Ī	
fts, r ar	С.	Fundraising ev		-					1	
igi	d	Related organi		1d					1	
sin	е	Government grants	•	1e					1	
utic Je	f	All other contribution and similar amounts				70 250			1	
ti et				ш.		72,250			1	
on	g	Noncash contribution		1a-1f 3	B		70 050		1	
0,0	<u>h</u>	Total. Add line	s 1a–1f			<u>▶ !</u>	72,250		<u>-</u>	
nue						Busn. Code	056 071	05.6 07.1		
evel	2a	PROGRAM	EVENT REVE	ENUE			856,971	856,971		267 670
e R	b	ANNUAL (CONFERENCE	& WOR	KSHOPS	ļ	267,679	1.15 05.6		267,679
ζį	C	MEMBERSI	HIP DUES			<u> </u>	145,856	145,856		
Sel	d	WALK MI	CHIGAN				61,769	61,769		40.402
Ta II	е	SPORT TO	OURNMENT FE	EES			42,483		5 000	42,483
ō	f	All other progra		/enue		L	36,404	755	5,000	30,649
<u>-</u>	g	Total. Add line					1,411,162			
	3	Investment inc	ome (including	g divide	nds, intere	st, and				0.4.4
		other similar a	mounts)			▶	211			211
	4	Income from ir	estment of ta	ax-exer	npt bond pr	oceeds 🕨				
	5	Royalties				<u> </u>				
			(ı) Rea	<u> </u>	(II) F	Personal			Ī	
	6a	Gross Rents			<u> </u>					
	b	Less rental exps							1	
	С	Rental inc or (loss)							‡	
	_d	Net rental inco	me or (loss)			<u> </u>				
	7a	Gross amount from sales of assets	(ı) Securi	ties	(11) Other			1	
		other than inventory								
	b	Less cost or other								
		basis & sales exps							1	
	С	Gain or (loss)							1	
	đ	Net gain or (lo	ss)			•				
	8a	Gross income fro	om fundraising ev	vents						
ne		(not including \$							1	
/en		of contributions r	eported on line 1	c)					1	
Re		See Part IV, line	18		a				1	
Other Revenue	b	Less. direct ex	penses	1	b [1	
ਰ	С	Net income or	(loss) from fur	ndraisir	gevents	•				
	9a	Gross income fro	m gamıng actıvıt	ties.					I	
		See Part IV, line	19		a				1	
	b	Less direct ex	penses	j	b					
	С	Net income or	(loss) from ga	ımıng a	ctivities	▶.				
	10a	Gross sales of	inventory, les	s						
		returns and all	owances		a					
	b	Less cost of g	oods sold	1	b					
		Net income or		les of ir	rventory	•				
			ellaneous Reven			Busn. Code				
	11a	MISCELLAN	EOUS				17,588	17,588		
	b	GOLF BENE	•				2,973			2,973
	c	CONFERENC		•			2,572			2,572
	d	All other reven					,			
	е	Total. Add line					23,133			
	12	Total Revenue		n. 2a 3	. 4, 5, 6d, 7	d. 8c.	-1			
	_	9c, 10c, and 1		,, •		▶	1,506,756	1,082,939	5,000	346,567

Form 990 (2008)

Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns.

All other organizations must complete column (A) but are not required to complete columns (B), (C), and (D).

	. All other organizations must complete column (A) but are not required to complete columns (B), (C), and (D).											
	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses							
1	Grants and other assistance to governments and			<u> </u>								
•	organizations in the U.S See Part IV, line 21			1								
2	Grants and other assistance to individuals in	 										
2	the U.S. See Part IV, line 22											
_	•				······································							
3	Grants and other assistance to governments,			1								
	organizations, and individuals outside the											
	U.S See Part IV, lines 15 and 16				······································							
4	Benefits paid to or for members				······································							
5	Compensation of current officers, directors,											
	trustees, and key employees											
6	Compensation not included above, to disqualified											
	persons (as defined under section 4958(f)(1)) and											
	persons described in section 4958(c)(3)(B)											
7	Other salaries and wages	276,325	355	275,970								
8	Pension plan contributions (include section 401(k)											
•	and section 403(b) employer contributions)	8,364		8,364								
9	Other employee benefits	35,194		35,194	= 							
10	Payroll taxes	18,238		18,238								
11	Fees for services (non-employees)											
	Management											
a	*		-									
D	Legal											
c	Accounting											
d	Lobbying				<u> </u>							
е	Professional fundraising services See Part IV, line 17	ļ .										
f	Investment management fees											
g	Other											
12	Advertising and promotion											
13	Office expenses											
14	Information technology											
15	Royalties											
16	Occupancy	37,364	5	37,359								
17	Travel	14,256		14,256								
18	Payments of travel or entertainment expenses			j								
	for any federal, state, or local public officials											
19	Conferences, conventions, and meetings											
20	Interest	266		266								
21	Payments to affiliates											
22	Depreciation, depletion, and amortization	7,479	7,479	-								
23	Insurance											
24	Other expenses. Itemize expenses not											
44	covered above. (Expenses grouped together											
				1								
	and labeled miscellaneous may not exceed											
	5% of total expenses shown on line 25 below.)		707,749									
а	EVENT LODGING & TRAVEL	707,749 179,826	179,826									
b	WORKSHOP/CONFERENCE EXPEN		99,616									
С	WALK MICHIGAN EXPENSES	99,616	99,616	26 761								
d	NPSI	36,761		36,761								
е	TOURNMENT EXPENSES	28,256	28,256	30 050								
f	All other expenses	100,003	21,044	78,959								
25	Total functional expenses. Add lines 1 through 24f	1,549,697	1,044,330	505,367								
26]										
	SOP 98-2 Complete this line only if the organization reported in column (B) joint costs											
	from a combined educational campaign and											
	fundraising solicitation											
DAA					Form 990 (2008)							

Pi	art)	C Balance Sheet									
			(A) Beginning of year		(B) End of						
			100				100				
	1	Cash—non-interest bearing	275,272	_1_	1		437				
	2	Savings and temporary cash investments	_213,212	2	1	<i>J J ,</i>	431				
	3	Pledges and grants receivable, net	20 201	3	 	1 /	376				
	4	Accounts receivable, net	38,381	4		14,	3/0				
	5	Receivables from current and former officers, directors, trustees, key		_							
		employees, or other related parties Complete Part II of Schedule L		5							
	6	Receivables from other disqualified persons (as defined under section			1						
		4958(f)(1)) and persons described in section 4958(c)(3)(B) Complete			1						
		Part II of Schedule L		6_							
ţ	7	Notes and loans receivable, net	200	7	ļ						
Assets	8	Inventories for sale or use	988	8	<u> </u>		101				
ğ	9	Prepaid expenses and deferred charges	44,610	9	<u> </u>	<u>36,</u>	404				
	10a	Land, buildings, and equipment: cost basis 10a 84,593			‡						
	b	Less accumulated depreciation Complete			1						
		Part VI of Schedule D 10b 57, 474	17,371	10c			<u>119</u>				
	11	Investments—publicly traded securities	84,784	11_	ļ	69,	518				
	12										
	13	Investments—program-related. See Part IV, line 11	13_	ļ <u>. </u>							
	14	Intangible assets		14							
	15	Other assets See Part IV, line 11	2,689	15			<u>493</u>				
	16	Total assets. Add lines 1 through 15 (must equal line 34)	464,195	16			447				
	17	Accounts payable and accrued expenses	57,311	17		<u>29,</u>	<u>504</u>				
	18	Grants payable		18							
	19	Deferred revenue	215,009	19	1	36 <u>,</u>	<u>606</u>				
	20	Tax-exempt bond liabilities		20							
Liabilities	21	Escrow account liability Complete Part IV of Schedule D		21	<u></u>						
	22	Payables to current and former officers, directors, trustees, key									
		employees, highest compensated employees, and disqualified			Į.						
Ë		persons Complete Part II of Schedule L		22							
	23	Secured mortgages and notes payable to unrelated third parties		23							
	24	Unsecured notes and loans payable		24							
	25	Other liabilities Complete Part X of Schedule D		25	<u> </u>						
	26	Total liabilities. Add lines 17 through 25	272,320	26	1	66,	110				
S		Organizations that follow SFAS 117, check here ▶ X and			1						
ces		complete lines 27 through 29, and lines 33 and 34.			1						
lar	27	Unrestricted net assets	180,796	27	1	35,	879				
Ва	28	Temporarily restricted net assets	11,079	28	<u> </u>	5,	<u>458</u>				
פַ	29	Permanently restricted net assets		29							
בַּ		Organizations that do not follow SFAS 117, check here ▶			#						
Ē		and complete lines 30 through 34.			<u> </u>						
S	30	Capital stock or trust principal, or current funds		30	_						
šet	31	Paid-in or capital surplus, or land, building, or equipment fund		31							
\S	32	Retained earnings, endowment, accumulated income, or other funds		32							
Net Assets or Fund Balan	33	Total net assets or fund balances	191,875	33	1	41,	337				
ž	34	Total liabilities and net assets/fund balances	464,195	34	31	07,	447				
P	art)		- ***								
			<u> </u>			Yes	No				
1	Ace	counting method used to prepare the Form 990 Cash X Accrual Ott	her								
2 a		ere the organization's financial statements compiled or reviewed by an independent accountar	nt?		2a	Χ					
b		ere the organization's financial statements audited by an independent accountant?			2b		Х				
-		Yes" to lines 2a or 2b, does the organization have a committee that assumes responsibility for	r oversight of				[
•		e audit, review, or compilation of its financial statements and selection of an independent acco			2c	Χ_					
3=		a result of a federal award, was the organization required to undergo an audit or audits as set									
		Single Audit Act and OMB Circular A-133?			3a		X				
Ь		Yes," did the organization undergo the required audit or audits?		•	3b						
		and the second s				990	(2008)				

DAA

SCHEDULE A

(Form 990 or 990-EZ)

Public Charity Status and Public Support

To be completed by all section 501(c)(3) organizations and section 4947(a)(1) nonexempt charitable trusts.

► Attach to Form 990 or Form 990-EZ. ► See separate instructions.

Open to Public

OMB No 1545-0047

Inspection

Department of the Treasury Internal Revenue Service Name of the organization

MICHIGAN RECREATION & PARK ASSOC.

Employer identification number 38-2457661

P	art I	Reas	on for Public Charity	Status (All organizations	must c	omplete	e this p	oart.) (see in	struct	ions)			
The	orga	nızatıon is not	a private foundation because	e it is: (Please check only one or	rganizatio	n)								-
1		A church, co	nvention of churches, or asso	ociation of churches described in	section	170(b)(1)((A)(i).							
2	П	A school des	cribed in section 170(b)(1)(/	A)(ii). (Attach Schedule E)										
3	П			ce organization described in sec	tion 170(t)(1)(A)(iii). (Attac	h Sched	ule H)					
4	П	•	•	d in conjunction with a hospital d	•					the hose	oital's name	٠.		
	_	city, and state	- •					,,,,,,						
5		•		of a college or university owned o	or operate	d by a gov	/ernmen	tal unit d	lescribe	ed in				
Ĭ	ш	•	b)(1)(A)(iv). (Complete Part	-	or operato	, - 5-								
6				···) overnmental unit described in se	ction 170	/h\/1\/ / \/	v۱							
7	Н	· ·		substantial part of its support from			•	m the c	oneral r	aublic.				
•	ш	=			ili a govei	illicital u	01 110	in the g	ciiciai p	Jublic				
۰	\Box		section 170(b)(1)(A)(vi). (Co	•	1.5									
8	X			70(b)(1)(A)(vi). (Complete Part I				horobio	foos o	-d				
9	Δ	_) more than 33 1/3 % of its supp							•			
				pt functions—subject to certain										
		• •	-	d unrelated business taxable inc	-		orriax)	rom bus	messe	S				
40	\Box		-), 1975 See section 509(a)(2).	-	•	4-1441 4							
10	Н	•	•	exclusively to test for public safe	•)				
11	Ш	•		exclusively for the benefit of, to p				-		-41				
		purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See section												
		509(a)(3). Check the box that describes the type of supporting organization and complete lines 11e through 11h a Type I b Type II c Type III–Functionally Integrated d Type III–Other												
е	Ш	By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified												
		persons other than foundation managers and other than one or more publicly supported organizations described in section												
		509(a)(1) or section 509(a)(2)												
f		. •		rmination from the IRS that it is a	a type i, i	ype II, or	ı ype III	supporti	ng					
		_	check this box			.								Ш
g		Since August	t 17, 2006, has the organizat	ion accepted any gift or contribu	tion from a	any of the								
		following per										_		
		(i) A persor	n who directly or indirectly co	ntrols, either alone or together w	ith persor	is describ	ed in (ii)				_		Yes	No
		and (III)	below, the governing body of	the supported organization?							110	-		
		(ii) A famıly	member of a person describ	ed in (i) above?							119			
		(iii) A 35% c	ontrolled entity of a person d	escribed in (i) or (ii) above?							119	(iii)		
h		Provide the f	following information about th	ne organizations the organization	supports	·								
(i)	Name	of supported	(ii) EIN	(ili) Type of organization	(IV) Is the	organization	(v) Did y	ou notify	(vi)	ls the	(vii)	4mou	nt of	
	org	anization		(described on lines 1–9		sted in your		nization in	organizat		s	иррог	t	
				above or IRC section (see instructions))	governing	document?		of your port?	1	zed in the S?				
				(300 manuchons),	Yes	No	Yes	No	Yes	No				
		•		-										
		·			<u> </u>				ļ			_		
-					 					-		_		
					 					-		_		
		·			ļ						· -			
Гota	l													

Sch	edule A (Form 990 or 990-EZ) 2008 MT (<u>3-245/661</u>	Page 2
P	art If Support Schedule for O (Complete only if you che				(1)(A)(iv) and	170(b)(1)(A)(vi)	
Sec	ction A. Public Support	ONGE THE BOX	<u> </u>	<u> </u>			
	elendar year (or fiscal year beginning in)	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
1	Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants.")						
2	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3	The value of services or facilities furnished by a governmental unit to the organization without charge						
4	Total. Add lines 1-3						
5	The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						
_6	Public support. Subtract line 5 from line 4						
Sec	tion B. Total Support						
Ca	lendar year (or fiscal year beginning in) ▶	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
7	Amounts from line 4						
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
9	Net income from unrelated business activities, whether or not the business is regularly carried on						
10	Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV)				······································		
11	Total support. Add lines 7 through 10					L	
12	Gross receipts from related activities, etc. (see instructions)				12	
13	First five years. If the Form 990 is for the c	organization's first,	second, third, fourt	h, or fifth tax year a	as a section 501(c)(3)	_
	organization, check this box and stop here						>
Sec	tion C. Computation of Public Su	pport Percenta	age				
14	Public support percentage for 2008 (line 6,	column (f) divided	by line 11, column	(f))		14	%
15	Public support percentage from 2007 Schei	dule A, Part IV-A, Iı	ne 26f			15	%
16a	33 1/3 % support test—2008. If the organiz	zation did not checl	the box on line 13	3, and line 14 is 33	1/3 % or more, ch	eck this box	
	and stop here. The organization qualifies a	s a publicly suppor	ted organization				▶ ∐
b	33 1/3 % support test—2007. If the organiz	zation did not checl	ca box on line 13 o	or 16a, and line 15	is 33 1/3 % or moi	re, check this	
	box and stop here. The organization qualifi	es as a publicly su	pported organization	on			▶ ∐
17a	10%-facts-and-circumstances test—2008	. If the organization	did not check a be	ox on line 13, 16a,	or 16b, and line 14	4 is 10% or	
	more, and if the organization meets the "fac	ts-and-circumstand	ces" test, check this	s box and stop her	e. Explain in Part	IV how the	
	organization meets the "facts-and-circumsta	ances" test. The org	ganızatıon qualifies	as a publicly supp	orted organization	1	▶ ∐
b	10%-facts-and-circumstances test—2007	. If the organization	did not check a bo	ox on line 13, 16a,	16b, or 17a, and li	ne 15 is 10% or	
	more, and if the organization meets the "fac	ts-and-circumstand	ces" test, check this	s box and stop her	e. Explain in Part	IV how the	_
	organization meets the "facts-and-circumsta	ances" test. The org	ganization qualifies	as a publicly supp	orted organization	1	▶ _
18	Private foundation. If the organization did	not check a box on	line 13, 16a, 16b,	17a, or 17b, check	this box and see	nstructions	

Schedule A (Form 990 or 990-EZ) 2008

Section A. Public Support

Calendar year (or fiscal year beginning in) ▶

(b) 2005

(c) 2006

38-2457661

(e) 2008

(d) 2007

Page 3

(f) Total

Support Schedule for Organizations Described in Section 509(a)(2) (Complete only if you checked the box on line 9 of Part I.)

(a) 2004

1	Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants")	252,6 <u>2</u> 6	224,240	244,318	207,130	218,106	1,146,420
2	Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose	1,376,010	1,419,540	1,462,844	1,435,440	1,288,360	6,982,194
3	Gross receipts from activities that are not an unrelated trade or business under section 513						
4	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5	The value of services or facilities furnished by a governmental unit to the organization without charge						
6	Total. Add lines 1-5	1,628,636	1,643,780	1,707,162	1,642,570	1,506,466	8,128,614
	Amounts included on lines 1, 2, and 3 received from disqualified persons						
	Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of 1% of the total of lines 9, 10c, 11, and 12 for the year or \$5,000 Add lines 7a and 7b						
с 8	Public support (Subtract line 7c from	1,628,636	1,643,780	1,707,162	1,642,570	1,506,466	
0	line 6)	1,020,030	1,043,700	1,707,102	1,012,010		8,128,614
Sec	tion B. Total Support	<u></u>			<u> </u>		
	endar year (or fiscal year beginning in) ▶	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
9	Amounts from line 6	1,628,636	1,643,780	1,707,162	1,642,570	1,506,466	8,128,614
10a	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	3,977	7,150	10,354	10,152	221	31,854
b	Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
С	Add lines 10a and 10b	3,977	7,150	10,354	10,152	221	31,854
11	Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV)						
13	Total support. (Add lines 9, 10c, 11,	1,632,613	1,650,930	1,717,516	1,652,722	1,506,687	
	and 12)	LI					8,160,468
14	First five years. If the Form 990 is for the organization, check this box and stop here	_	econd, third, fourth	n, or fifth tax year as	a section 501(c)(3)	▶ 🗆
Sec	tion C. Computation of Public Su	pport Percenta	ge		<u> </u>		
15	Public support percentage for 2008 (line 8,	column (f) divided b	y line 13, column (f))		. 15	99.6097 %
16	Public support percentage from 2007 Sche	dule A, Part IV-A, lir	ne 27g			16	99.6409 %
<u>Sec</u>	tion D. Computation of Investmer						
17	Investment income percentage for 2008 (lin	ie 10c, column (f) di	vided by line 13, co	olumn (f))		17	0.3903 %
18	Investment income percentage from 2007 S					<u> 18 </u>	0.3591 %
19a	33 1/3 % support tests—2008. If the organ						► X
	17 is not more than 33 1/3 %, check this bo						
b	33 1/3 % support tests—2007. If the organ						⊾ □
	line 18 is not more than 33 1/3 %, check thi					anization	I H
20	Private foundation. If the organization did	not check a box on	iine 14, 19a or 19b	o, cneck this box and		Schodulo A /Form 99	0 as 000 EZ) 2009

Schedule A (Form 990 or 990-EZ) 2008 MICHIGAN RECREATION & PARK ASSOC.

Page 4

Supplemental Information. Complete this part to provide the explanation required by Part II, line 10;

SCHEDULE D (Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

▶ Attach to Form 990. To be completed by organizations that answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11, or 12.

OMB No 1545-0047

2008

Open to Public Inspection

Nam	e of the organization		Employe	er identification nu	mber
М	ICHIGAN RECREATION & PARK ASSOC.		38-2	457661	
	Organizations Maintaining Donor Advised Funthe organization answered "Yes" to Form 990, F	ds or Other Similar Funds or Ac			
		(a) Donor advised funds	(b)	Funds and other ac	counts
1	Total number at end of year		<u> </u>		
2	Aggregate contributions to (during year)				
3	Aggregate grants from (during year)				·
4	Aggregate value at end of year				,
5	Did the organization inform all donors and donor advisors in writing that t	the assets held in donor advised			
	funds are the organization's property, subject to the organization's exclusive			Yes	□No
6	Did the organization inform all grantees, donors, and donor advisors in w	•		_	_
	used only for charitable purposes and not for the benefit of the donor or o	donor advisor or other		_	
	impermissible private benefit?			Yes	No_
Pa	art II Conservation Easements. Complete if the orga	nization answered "Yes" to Form	1990, P	art IV, line 7.	
1	Purpose(s) of conservation easements held by the organization (check a	ll that apply).			
	Preservation of land for public use (e g , recreation or pleasure)	Preservation of an historically imp		d area	
	Protection of natural habitat	Preservation of certified historic st	ructure		
	Preservation of open space				
2	Complete lines 2a-2d if the organization held a qualified conservation co	ntribution in the form of a conservation eas	sement		
	on the last day of the tax year				
				Held at the End	of the Year
а	Total number of conservation easements		2a		
b	Total acreage restricted by conservation easements		2b		
С	Number of conservation easements on a certified historic structure include	ded in (a)	2c	-	
d	Number of conservation easements included in (c) acquired after 8/17/06		2d		
3	Number of conservation easements modified, transferred, released, extir	nguished, or terminated by the organization	n during		
	the taxable year				
4	Number of states where property subject to conservation easement is loc				
5	Does the organization have a written policy regarding the periodic monitor	oring, inspection, violations, and		П.,	П.,
_	enforcement of the conservation easements it holds?			∐ Yes	∐ No
6	Staff or volunteer hours devoted to monitoring, inspecting, and enforcing			– –	
7	Amount of expenses incurred in monitoring, inspecting, and enforcing ea		-		
8	Does each conservation easement reported on line 2(d) above satisfy the	e requirements of section		Yes	□No
^	170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)?			☐ Tes	□ NO
9	In Part XIV, describe how the organization reports conservation easemer balance sheet, and include, if applicable, the text of the footnote to the or				
	the organization's accounting for conservation easements.	ganization's infancial statements that desc	11003		
Pa	organizations Maintaining Collections of Art, H	listorical Treasures, or Other Si	imilar A	ssets.	
	Complete if the organization answered "Yes" to				
				-	
1a	If the organization elected, as permitted under SFAS 116, not to report in	its revenue statement and balance sheet	works of		
	art, historical treasures, or other similar assets held for public exhibition, of	education, or research in furtherance of pu	blic servic	ce,	
	provide, in Part XIV, the text of the footnote to its financial statements that	t describes these items			
b	If the organization elected, as permitted under SFAS 116, to report in its i				
	historical treasures, or other similar assets held for public exhibition, educ	cation, or research in furtherance of public	service,		
	provide the following amounts relating to these items				
	(i) Revenues included in Form 990, Part VIII, line 1		•	\$ _ _	- - -
	(ii) Assets included in Form 990, Part X		>	\$	
2	If the organization received or held works of art, historical treasures, or of		e the		
	following amounts required to be reported under SFAS 116 relating to the	ese items:			
a	Revenues included in Form 990, Part VIII, line 1		>	\$ _ _ _ _ _ _	
b	Assets included in Form 990, Part X		•	\$	

Sche	dule D (Form 990) 2008 MICHIGAN	RECREATION &	PARK ASSOC	:. 38-2 <i>4</i>	457661	Page 2
	art III Organizations Maintaining				Similar Assets	(continued)
3	Using the organization's accession and other items (check all that apply)					
		. 🗆		_		
а	Public exhibition		r exchange progran	15		
b	Scholarly research	e Other			- -	
С	Preservation for future generations					
4	Provide a description of the organization's collect XIV	llections and explain how the	ey further the organi	zation's exempt pur	pose in	
5	During the year, did the organization solicit or assets to be sold to raise funds rather than to	be maintained as part of the	e organization's coll	ection?	[Yes No
Pa	rt IV Trust, Escrow and Custod				ed "Yes" to Fo	rm 990,
	Part IV, line 9, or reported	<u>an amount on Form 9</u>	90, Part X, line	<u>21. </u>		
1a	Is the organization an agent, trustee, custodia	n or other intermediary for o	contributions or othe	r assets not	_	
	included on Form 990, Part X?				Ĺ	Yes No
b	If "Yes," explain the arrangement in Part XIV a	and complete the following t	able			
						Amount
С	Beginning balance				1c	
d	Additions during the year				1d	
e	Distributions during the year				1e	
f	Ending balance				1f	
	Did the organization include an amount on Fo	orm 990 Part X line 212				Yes No
	If "Yes," explain the arrangement in Part XIV.	1111 330, 1 art X, iii C 21:			۷	_ 163 110
,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	ert V Endowment Funds. Comp	lete if organization an	swered "Yes" to	Form 990 Pa	rt IV. line 10.	
T.C	Endownient i unus. Comp	(a) Current year	(b) Prior year	(c) Two years back	(d) Three years ba	ck (e) Four years back
4-	Decrease of very holonor	(a) carrone year	(2) (1107) (21	(c)	(2,	
1a	Beginning of year balance					
b	Contributions					
С	Investment earnings or losses	··				
d	Grants or scholarships					
e	Other expenditures for facilities					
	and programs					
f	Administrative expenses					
g	End of year balance			<u> </u>	<u> </u>	
2	Provide the estimated percentage of the year	end balance held as				
а	Board designated or quasi-endowment	%				
b	Permanent endowment ▶ %					
c	Term endowment ▶ %					
3a	Are there endowment funds not in the posses	sion of the organization that	t are held and admir	istered for the		
	organization by					Yes No
	(i) unrelated organizations					3a(i)
	(ii) related organizations					3a(ii)
b	If "Yes" to 3a(ıı), are the related organizations	listed as required on Scheo	lule R?			3b
4						<u> </u>
	ert VI Investments—Land, Build			Part X. line 10).	
	Description of investment	(a) Cost or other basis	(b) Cost or oth		epreciation	(d) Book value
	booking as in the surface of the sur	(investment)	basis (other	l l		, ,
4	Land	 	 			
	•••		 			
	Buildings		+			
	Leasehold improvements		+			
	Equipment		0.4	E03	57 171	27,119
	Other .			<u>, 593</u>	57,474	
Tota	. Add lines 1a-1e (Column (d) should equal F	orm 990, Part X, column (B)), line 10(c))		•	27,119

Schedule D (Form 990) 2008 MICHIGAN RECREATION &		38-2437661	Page 3
Part VII Investments—Other Securities. See Form 990), Part X, line 12.		
(a) Description of security or category	(b) Book value	(c) Method of value	uation
(including name of security)	1	Cost or end-of-year ma	arket value
inancial derivatives and other financial products	<u> </u>		
Closely-held equity interests			
Other			
			
	- "		
			
			-
			
Total. (Column (b) should equal Form 990, Part X, col. (B) line 12)			
Part VIII Investments—Program Related. See Form 99	0, Part X, line 13.		
(a) Description of investment type	(b) Book value	(c) Method of value	uation
(-)		Cost or end-of-year m	arket value
	 		
	-		<u> </u>
	-	-	
			-
			
			
		-	
			
		-	
			
Total. (Column (b) should equal Form 990, Part X, col. (B) line 13)	<u> </u>	<u> </u>	
Part IX Other Assets. See Form 990, Part X, line 15.			
(a) Description			(b) Book value
			
· · · · · · · · · · · · · · · · · · ·			
			·-
			
Total. (Column (b) should equal Form 990, Part X, col (B) line 15)		•	
Part X Other Liabilities. See Form 990, Part X, line 25	5		
	(b) Amount	1	
(a) Description of liability	(b) Amount	4	
Federal income taxes		4	
	<u> </u>	<u> </u>	
]	
		1	
	-	1	
	 	-	
		-	
		.	
	<u> </u>	_	
		1	
Total. (Column (b) should equal Form 990. Part X. col. (B) line 25.)		1	
(0) 0.00.00 (0) 0.00.00 (0)		nuzation's liability for	
n Part XIV, provide the text of the footnote to the organization's financial state	ements that reports the orga	mization s nability for	
uncertain tax positions under FIN 48.			

Sche	dule D (Form 990) 2008 MICHIGAN RECREATION & PARK A	ssoc.	38-24576	61	Page 4
Pi	ert XI Réconciliation of Change in Net Assets from Form 990 to	Finan	cial Statements		
1	Total revenue (Form 990, Part VIII, column (A), line 12)			1	
2	Total expenses (Form 990, Part IX, column (A), line 25)			2	
3	Excess or (deficit) for the year Subtract line 2 from line 1			3	
4	Net unrealized gains (losses) on investments			4	
5	Donated services and use of facilities			5	
6	Investment expenses			6	
7	Pnor period adjustments			7	
8	Other (Describe in Part XIV)			8	
9	Total adjustments (net) Add lines 4-8			9	
10_	Excess or (deficit) for the year per financial statements. Combine lines 3 and 9			10	
Pa	Reconciliation of Revenue per Audited Financial Statement	ents W	<u>ith Revenue per Re</u>	turn	
1	Total revenue, gains, and other support per audited financial statements			1	
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12		I		
а	Net unrealized gains on investments	2a		4 1	
b	Donated services and use of facilities	2b		4 1	
С	Recoveries of prior year grants	2c		- 1	
d	Other (Describe in Part XIV)	2d	<u> </u>	- 1	
е	Add lines 2a through 2d			2e	
3	Subtract line 2e from line 1		ſ	3	
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:	ļ			
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a		-	
b	Other (Describe in Part XIV)	4b		4 1	
С	Add lines 4a and 4b			4c	
5	Total revenue Add lines 3 and 4c. (This should equal Form 990, Part 1, line 12)			5	
	rt XIII Reconciliation of Expenses per Audited Financial Statem	nents v	vitn Expenses per i	<u>keturn</u>	
1	Total expenses and losses per audited financial statements			1-1-1-	
2	Amounts included on line 1 but not on Form 990, Part IX, line 25	1	1		
а	Donated services and use of facilities	2a_		- 1	
b	Prior year adjustments	2b	<u> </u>	-	
С	Losses reported on Form 990, Part IX, line 25	2c		-{	
đ	Other (Describe in Part XIV)	_2d		┨	
e	Add lines 2a through 2d			2e	
3	Subtract line 2e from line 1	1 1		3	
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:				
	Investment expenses not included on Form 990, Part VIII, line 7b	4a		1 1	
b	,	_4b_		┥╻╿	
	Add lines 4a and 4b			4c 5	
	Total expenses Add lines 3 and 4c. (This should equal Form 990, Part I, line 18) rt XIV Supplemental Information			1 3 1	
			d 4. Dod IV Jugo 4h		
	plete this part to provide the descriptions required for Part II, lines 3, 5, and 9, Part III, lin		u 4, Part IV, lines ID		
ino z	b; Part V, line 4, Part X, Part XI, line 8, Part XII, lines 2d and 4b; and Part XIII, lines 2d a	and 4D.			
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Schedule D (F	om 990) 2	800	MIC	HIG	AN I	REC	REA	\mathtt{TIC}	N = N	<u>& I</u>	PARK	(A	<u> SS</u> (DC.	 3	<u>8-2</u>	<u>457</u>	<u>66</u> 2	L				Page 5
Schedule D (F Part XIV	Sùpple	ement	al Info	orma	tion	(conti	rued)							-									
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SCHEDULE O'
(Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Information to Form 990

▶ Attach to Form 990. To be completed by organizations to provide additional information for responses to specific questions for the Form 990 or to provide any additional information.

2008 Open to Public

Inspection

OMB No. 1545-0047

Name of the organization

MICHIGAN RECREATION & PARK ASSOC.

Employer identification number 38-2457661

FORM 990 - ORGANIZATION'S MISSION OR MOST SIGNIFICANT ACTIVITIES RECREATION AND PARKS TRADE.

FORM 990, PART III, LINE 4D - ALL OTHER ACHIEVEMENTS
WALK MICHIGAN PROMOTES THE HEALTH BENEFITS OF PHYSICAL
ACTIVITY AND CHANGING BEHAVIOR THAT LEAD MICHIGAN
CITIZENS TO PHYSICALLY ACTIVE LIFESTYLES. THE ANNUAL
BRIDGE WALK PROVIDES AWARNESS TO THE PUBLIC AND AN EVENT
FOR CITIZENS TO PARTICIPATE.

MEMBER PUBLICATIONS AND MEMBERSHIP SERVICES.

FORM 990, PART VI, LINE 10 - ORGANIZATION'S PROCESS USED TO REVIEW FORM 990
THE FORM 990 WILL BE REVIEWED BY THE BUSINESS MANAGER BEFORE BEING FILED.
THE BUSINESS MANAGER WILL ENSURE THAT NET ASSETS TIE OUT TO THE BOOKS.

FORM 990, PART VI, LINE 12C - ENFORCEMENT OF CONFLICTS POLICY

THERE IS ALWAYS A LINE OF COMMUNICATION OPEN BETWEEN THE BOARD OF DIRECTORS

AND THE EMPLOYEES OF THE ASSOCIATION. IF ANY CONFLICT OF INTERESTS ARISE,

THE EMPLOYEES ARE REQUIRED TO REPORT IT TO THE BOARD.

FORM 990, PART VI, LINE 15A - COMPENSATION PROCESS FOR TOP OFFICIAL

THERE IS A PERSONNEL COMMITTEE, AS A SUBSET OF THE BOARD OF DIRECTORS. THIS

COMMITTEE REVIEWS AND APPROVES CHANGES TO THE COMPENSATION OF ALL EMPLOYEES

OF THE ASSOCIATION.

Schedule O (Form 990) 2008

Page 2

Name of the organization

MICHIGAN RECREATION & PARK ASSOC.

Employer Identification number

38-2457661

FORM 990, PART VI, LINE 19 - GOVERNING DOCUMENTS DISCLOSURE EXPLANATION.
GOVERNING DOCUMENTS ARE MADE AVAILABLE TO THE PUBLIC BY REQUEST.