

# See a Social Security Number? Say Something! Report Privacy Problems to https://public.resource.org/privacy Or call the IRS Identity Theft Hotline at 1-800-908-4490



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)

OMB No 1545-0047

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

7	A F	or th	e 2008 calendar year, or tax year beginning DEC 1, 2008 and ending	NOV 30, 2009				
Ī	Вс	heck if	Please C Name of organization	D Employer identifi	cation number			
	aţ	pplicab	use IRS WADE E. AND VIOLA SACKNER FOUNDATION					
		Addre chang						
		]Name	Doing Business As	38-6	092077			
		]Initial return	Number and street (or P.O. Dox if mail is not delivered to street address)   Room/s	suite E Telephone numbe	r			
		Termi ation	instruc-	616-	831-1758			
		Amen	City or town, state or country, and ZIP + 4	G Gross receipts \$	3,546,624.			
	L	Application pendi		H(a) Is this a group re	etum			
		penui	F Name and address of principal officer:MICHAEL J. TAYLOR	for affiliates? Yes X No				
-			250 MONROE AVE NW, PO BOX 306, GRAND RAPID	OS, H(b) Are all affiliates inc	luded? Yes No			
-			empt status: X 501(c) ( 3 ) ◀ (insert no.)		list. (see instructions)			
_			te: ► N/A	H(c) Group exemption				
			organization Corporation Trust Association X Other ► Found L	Year of formation: 1955 N	State of legal domicile: MI			
L	<del>} 2</del>		Summary MO FUND	CUAD TOAD TE OD	CANTGAGTONG			
<b>~</b>	8	1	Briefly describe the organization's mission or most significant activities: TO FUND	CHARITABLE OR	GANIZATIONS			
2010	& Governance	•	Chapte this have if the approximation disposationed to accompliance and for					
6	Ne		Check this box if the organization discontinued its operations or disposed of r		s. 8			
~= •	ဗိ		Number of voting members of the governing body (Part VI, line 1a)  Number of independent voting members of the governing body (Part VI, line 1b)	3	- 0			
<b>⊘</b> ~	S		Total number of employees (Part V, line 2a)	5	0			
APR	Activities		Total number of volunteers (estimate if necessary)	··· · · · · · · · · · · · · · · · · ·	8			
$\triangleleft$	흏ㅣ		Tetal and a 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		0.			
	۱ ۲		Net unrelated business taxable income from Form 990-T, line 34	7b	0.			
SCANNED	$\neg$			Prior Year	Current Year			
2		8	Contributions and grants (Part VIII, line 1h)		- Carrone Tour			
	Revenue		Program service revenue (Part VIII, line 2g)					
O	<u>8</u>		Investment income (Part VIII, column (A), lines 3, 4, and 7d)	<187,522.	> 43,967.			
Ø	<b>-</b>		Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)					
_		12	Total revenue - add lines 8 through:14 (must equal Part VIII, column (A), line 12)	<187,522.	<del>43,967.</del>			
	- 1	13	Grants and similar amounts paid (Part/IX, column.(A), lines 1-3)	468,885.	461,960.			
		14	Benefits paid to or for members (Part IX, column (A), line 4)					
	8	15	Salaries, other compensation, employee benefits (Part IX column (A), lines 5-10)					
	Sua	16a	Professional fundraising fees (Part IX, column (A), line (1) e)					
	Expenses		Total fundraising expenses (Part-IX, column (D), line 25)					
			Other expenses (Part IX column (A) lines 1 1 a 1 i d, 11f-24f)	51,136.	45,032.			
	l		Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	520,021.	506,992.			
_	- 6	19	Revenue less expenses. Subtract line 18 from line 12	<707,543.	<463,025.>			
و	38			Beginning of Year	End of Year			
955	疆		Total assets (Part X, line 16)	8,934,396.	8,471,371.			
1	3ĕ		Total liabilities (Part X, line 26)	0 024 206	0 471 271			
ŕ	E Day	<u>22</u> nt ∏	Net assets or fund balances. Subtract line 21 from line 20	8,934,396.	8,471,371.			
E	- 444	E 34		nts, and to the best of my knowledge	and belief it is true correct			
			Under penalties of penjury, declare that I have examined this return, including accompanying schedules and stateme and complete Declaration of preparer (other than officer) is based on all information of which preparer has any knowle	odge.				
S	ign		Mulul A Marko Director	1 1 1 1 00	ch 72 2010			
	lere	, [	Signature of officer	Date	1. 2 1010 10			
			MICHAEL J. TAYLOR, DIRECTOR/SECRETARY					
		- 1	Type or print name and title	<del> </del>				
_	-14		Preparer's signature of 3/14/10		's identifying number			
	aid		signature V Solution & Mark CPA 3/16/10	self- employed	ructions)			
	repa se O	rer's	Firm's name (or PANGLEY MARKS, LLP yours if	EIN ►				
U	at U	'''' <b>y</b>	333 BRIDGE NW 11TH FLOOR address, and					
_			GRAND RAPIDS, MI 49504-5356	Phone no. ► ( 6	16)774-9004			
<u>M</u>	lay t	he IF	S discuss this return with the preparer shown above? (see instructions)		X Yes No			
83	2001	12-18	2-08 LHA For Privacy Act and Paperwork Reduction Act Notice, see the separate	instructions.	Form <b>990</b> (2008)			

C/O MICHAEL J. TAYLOR Form 990 (2008) 38-6092077 Page 2 Part III Statement of Program Service Accomplishments (see instructions) Briefly describe the organization's mission: TO PROVIDE FUNDING TO CHARITABLE ORGANIZATIONS SO THEY MAY PROVIDE RESOURCES PRIMARILY REGARDING HEALTH ISSUES TO THOSE IN NEED. Did the organization undertake any significant program services during the year which were not listed on Yes X No If "Yes", describe these new services on Schedule O. If "Yes", describe these changes on Schedule O. Describe the exempt purpose achievements for each of the organization's three largest program services by expenses. Section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported. (Code: ) (Expenses \$ including grants of \$ ) (Revenue \$ SEE ATTACHED SCHEDULE FOR GRANTS TO CHARITABLE ORGANIZATIONS 4h (Code: ) (Expenses \$ including grants of \$ ) (Revenue \$ (Code: ) (Expenses \$ including grants of \$ ) (Revenue \$ 4d Other program services. (Describe in Schedule O.) (Expenses \$ including grants of \$ ) (Revenue \$

(Must equal Part IX, Line 25, column (B).)

4e Total program service expenses ►\$

38-6092077

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Part IV Checklist of Required Schedules Yes No Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? X Х 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 X 3 Section 501(c)(3) organizations. Did the organization engage in lobbying activities? If "Yes," complete Schedule C, Part II 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 Did the organization maintain any donor advised funds or any accounts where donors have the right to provide advice Х on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D. Part I 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 X 7 Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete X 8 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 Did the organization hold assets in term, permanent, or quasi-endowments? If "Yes," complete Schedule D, Part V ......... 10 11 Did the organization report an amount in Part X, lines 10, 12, 13, 15, or 25? If "Yes," complete Schedule D, 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 X 12 X 13 Is the organization a school as described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E 13 14a Did the organization maintain an office, employees, or agents outside of the U.S.? X 14a b 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 Х 15 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity X 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 to individuals located outside the United States? If "Yes," complete Schedule F, Part III X 16 X 17 Did the organization report more than \$15,000 on Part IX, column (A), line 11e? If "Yes," complete Schedule G, Part I ...... 17 Did the organization report more than \$15,000 total on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II X 18 18 X 19 Did the organization report more than \$15,000 on Part VIII, line 9a? If "Yes," complete Schedule G, Part III 19 X 20 20 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 . . . . 21 22 Х 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 X 23 24a Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$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 ...... Х 24a . . . . **b** Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? ....... 24b c Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds? 24c 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 with a X 25a **b** Did the organization become aware that it had engaged in an excess benefit transaction with a disqualified person from a prior year? If "Yes," complete Schedule L, Part I X 25b 26 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 Х 26 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

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			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, Part IV	28a		X
b	Have a family member who had a direct or indirect business relationship with the organization?			
	If "Yes," complete Schedule L, Part IV	28b		X
c	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		_ <u></u>
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	- 1	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		X
35	Is any related organization a controlled entity within the meaning of section 512(b)(13)?			
	If "Yes," complete 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		X
		Form 9	990 (2	20087

Form **990** (2008)

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18 Enter the number reported in Box 3 of Form 1096, Annual Summary and Transmittal of U.S., Information Returns. Enter Or if not applicable 1 1 0 0   b Enter the number of Forms W2G included in fine 1 Enter Or if not applicable 1 1 0 0   c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?  2e Enter the number of employees reported on Form W3. Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return.  2	7	To a section to the section and the section an				-
U.S. Information Returns. Enter 0- if not applicable be Enter the number of Forms W2G included in line 1a. Enter 0- if not applicable   1b	4-	Fatantha anni anni anni anni anni anni anni an	1 1	[	Yes	No
b Enter the number of Forms W-2G included in line 1a. Enter O- if not applicable   1b	1a	· · · · · · · · · · · · · · · · · · ·			:	
Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming gramming within so prize witners?  2a Enter the number of employees reported on Form W3, Transmittal of Wage and Tax Statements, 2a 0 life of the calendar year ending with or within the year covered by this return.  2b If at least one is reported on line 2a, did the organization file all required federal employment tax returns?  Note. If the sum of lines is a and 2a is greater than 250, you may be required to e-file this return. (see instructions)  3b If I'res, 'has it filed a Form 990-T for this year? If 'No,' provide an explanation in Schedula 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 is a foreign country (such as a bank account, or or other financial account)?  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, or other financial account)?  5c ent the name of the foreign country. ★  5c et in 'Yes,' enter the name of the foreign country. ★  5c Was the organization a party to a prohibited tax shelter transaction?  5c lift 'Yes,' to question Sa or Sb, did the organization file form 8886-Ti, Disclosure by Tax-Exempt Entity Regarding Prohibited Tax Shelter Transaction?  5c lift the organization solicit any contributions that were not tax deductible?  5c lift the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?  5c lift the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?  5c lift the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?  5c lift the organization provide goods or services in exchange for any quici pro quo contribution of more tha				<del>-</del> ∔	1	
gambling) winnings to prize winners?  2a Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filled for the calendar year ending with or within the year covered by this return.  5 If at least one is reported on line 2a, did the organization file all required federal employment tax returns?  5 Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return. Gee instructions of the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return. Gee instructions of the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return. Gee instructions of the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return. Gee instructions of the file of the property in the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return. Gee instructions of the file of the greater of the property in the year covered by this return?  3a X the file of a first of the file of the greater output 1 the year of the file of the year covered by this return?  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 first the analysis of the file of the file of the property is an interest than 2 the file of the greater output 1 the file of the second of the file of		***************************************		4		
2a Enter the number of employees reported on Form W3, Transmittal of Wage and Tax Statements, filled for the calendar year ending with or within the year covered by this return.  2b If all least one is reported on line 2a, did the organization file all required federal employment tax returns?  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 Dct the organization have unrelated business gross income of \$1,000 or more during the year ecvered by this return?  3a X the file of Form 10 this year? If *No.* provide an explanation in Schedule O  3b If *Yes.* has it filed a Form 990-T for this year? If *No.* provide an explanation in Schedule O  3b If *Yes.* the still filed a Form 990-T for this year? If *No.* provide an explanation in Schedule O  3b If *Yes.* the still 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)?  4b If *Yes.* the term ame of the foreign country:  5ce the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.  5a Was the organization a party to a prohibited tax shelter transaction?  5b If *Yes.* to question 5a or 5b, did the organization that it was or is a party to a prohibited tax shelter transaction?  5c If *Yes.* to question 5a or 5b, did the organization that it was or is a party to a prohibited tax shelter transaction?  5c Id the organization should with every solicitation an express statement that such contributions or gifts were not tax deductible?  6c Id the organization should with every solicitation an express statement that such contributions or gifts were not tax deductible?  6c Id the organization should with every solicitation an express statement that such contributions or gifts were not tax deductible?  6c Id the organization should be provided to express organization	C		eportable gaming			İ
filled for the calendar year ending with or within the year covered by this return.	22		i I	·  !C		ļ
b if at least one is reported on line 2a, did the organization file all required federal employment tax retums?  2b   Mohe if the sum of lines 1 a 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 this return?  3a   X    b if Yes,* has if filed a Form 990-T for this year? If *No,* provide an explanation in Schedule O  4a At any time during the callendary 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 account)?  4a At any time during the callendary 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 account)?  5a   Vissor,* enter the name of the foreign country.*  5b   Y'ses,* center the name of the foreign country.*  5c   Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?  5a   Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?  5b   X    b   If Yes,* to question 5a or 5b, did the organization that it was or is a party to a prohibited tax shelter transaction?  5b   X    c   If Yes,* duestion 5a or 5b, did the organization that was or is a party to a prohibited tax shelter transaction?  5c   Vissor,* did the organization solicit any contributions that were not tax deductible?  6c   Did the organization solicit any contributions that were not tax deductible?  6c   Did the organizations shelt may receive deductible contributions under section 170(c).  6c   Did the organization shelt may receive deductible contributions under section 170(c).  6c   Did the organization shelt may receive deductible contributions under section 170(c).  6c   Did the organization that the year of the value	24		20	0		
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 this return?  3a X  bi If Yes, has filled a Form 990-T for this year? If 'No, 'provide an explanation in Schedule O  3b If Yes, has filled a Form 990-T for this year? If 'No, 'provide an explanation in Schedule O  3b If Yes, at any time during the celendar 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 account)?  5b If Yes, enter the name of the foreign country: See the instructions for exceptions and filling requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.  5c Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?  5c Was the organization aparty to a prohibited tax shelter transaction?  5c Was the organization aparty to a prohibited tax shelter transaction?  5c Was the organization shot in any contributions that were not tax deductible?  5c Was If Yes, 'did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?  6c Was If Yes, 'did the organization provide goods or services in exchange for any quid pro quo contribution of more than \$75?  7c Was If Yes, 'did the organization notify the donor of the value of the goods or services provided?  7d Was If Yes, 'did the organization notify the donor of the value of the goods or services provided?  7d Was If Yes, 'did the organization with the donor of the value of the goods or services provided?  7d Was If Yes, 'did the organization with the donor of the value of the goods or services provided?  7d Was If Yes, 'did the organization shall provide goods or services provided?  7e Was If Yes, 'did the organization with the donor of the value of the goods	ь	• • • • • • • • • • • • • • • • • • • •		<b>→</b>		•
3a		•		20	-	
b If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O 43 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 a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?  b 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.  54 Was the organization a party to a prohibited tax shelter transaction?  55 Was the organization accountry the organization that it was or is a party to a prohibited tax shelter transaction?  56 If "Yes," to question 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity Regarding Prohibited Tax Shelter Transaction?  56 If "Yes," did the organization solicit any contributions that were not tax deductible?  70 Did the organization solicit any contributions that were not tax deductible?  80 If "Yes," did the organization notify the donor of the value of the podos or services provided?  71 If "Yes," did the organization notify the donor of the value of the podos or services provided?  72 If If "Yes," indicate the number of Forms 8282 filed during the year  73 If If "Yes," indicate the number of Forms 8282 filed during the year  74 If Yes, "indicate the number of Forms 8282 filed during the year  85 If "Yes," indicate the number of Forms 8282 filed during the year  96 If "Yes," indicate the number of Forms 8282 filed during the year  97 If Yes, "and the organization, during the year, receive any funds, directly or indirectly, on a personal benefit contract?  98 If Yes, "Indicate the number of Forms 8282 filed during the year and the property of the organization, during the year, receive any funds, directly or indirectly, on a personal benefit contract?	32	•	•	22		Y
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 account)?  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?  5a Was the organization aparty notify the organization that it was or is a party to a prohibited tax shelter transaction?  5b If Yes, 't or question 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity Regarding Prohibited Tax Shelter Transaction?  5b If Yes, 'did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?  6c Did the organization still any organization or services in exchange for any quid pro quo contribution of more than \$75?  7a Was If Yes, 'did the organization notify the donor of the value of the goods or services provided?  6b If Yes, 'indicate the number of Forms 8282 filed during the year  7c Did the organization organization promesses and property for which it was required to file Form 8282?  6c If Yes, 'indicate the number of Forms 8282 filed during the year  7c Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?  7e X  7f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?  77 Did the organization of qualified intellectual property, did the organization file Form 8899 as required?  77 The X  8 Section 501(e)(3) and other sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organization, or a fund maintained by a sponsoring organization, have excess business holdings at any time during the year?  9 Section 501(e)(7) organizatio			a by this return			
financial account in a foreign country (such as a bank account, securities account, or other financial account)?  b 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.  5a 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 8866 T, Disclosure by Tax-Exempt Entity Regarding Prohibited Tax Shelter Transaction?  5b X  Tax Shelter Transaction?  6a Did the organization solicit any contributions that were not tax deductible?  5c Did the organization solicit any contributions that were not tax deductible?  6b Did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?  7 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 \$75?  7a X  If "Yes," did the organization notify the donor of the value of the goods or services provided?  7b Did the organization ontify the donor of the value of the goods or services provided?  7c X  7d If "Yes," inclicate the number of Forms 8282 filed during the year  e Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?  7e X  7f Did the organization, during the year, pay premiums, directly or indirectly, to pay premiums on a personal benefit contract?  77 If X  9 For all contributions of qualified intellectual property, did the organization file a Form 1098-C as required?  7g X  8 Section 501(c)(3) and other sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organizations maintaining d			authority over a	36		
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9 Section 501(c)(3) and other sponsoring organizations maintaining donor advised funds. a Did the organization make any taxable distributions under section 4966? b Did the organization make a distribution to a donor, donor advisor, or related person? 9b 10 Section 501(c)(7) organizations. Enter: N/A a Initiation fees and capital contributions included on Part VIII, line 12 b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b 11 Section 501(c)(12) organizations. Enter: N/A a Gross income from members or shareholders b Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.) 11a 12a 12a		avance business baldings of acciding during the conflict	janization, nave	1 .	f	
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b Did the organization make a distribution to a donor, donor advisor, or related person?  Section 501(c)(7) organizations. Enter: N/A  a Initiation fees and capital contributions included on Part VIII, line 12  b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities  10b  Section 501(c)(12) organizations. Enter: N/A  a Gross income from members or shareholders  b Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)  11a  12a  Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?				92	ı	
a Initiation fees and capital contributions included on Part VIII, line 12 b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities  10b Section 501(c)(12) organizations. Enter: N/A a Gross income from members or shareholders b Gross income from other sources (Do not net amounts due or paid to other sources against 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?	_		•• ••	<del></del>		
a Initiation fees and capital contributions included on Part VIII, line 12  b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities  10b  Section 501(c)(12) organizations. Enter: N/A  a Gross income from members or shareholders  b Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)  11a  11b  12a  10a  10b		/-		30		····
b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities  11 Section 501(c)(12) organizations. Enter: N/A  a Gross income from members or shareholders  b Gross income from other sources (Do not net amounts due or paid to other sources against 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?	а	1	10a			
a Gross income from members or shareholders	b			7	1	
b Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)				7		
amounts due or received from them.)	a	Gross income from members or shareholders	11a	╛		
12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	ь	Gross income from other sources (Do not net amounts due or paid to other sources against		] ]		
		amounts due or received from them.)	11b	] ]	1	
b If "Yes," enter the amount of tax-exempt interest received or accrued during the year N/A 12b	12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form	1041?	12a		
	<u>b</u>	If "Yes," enter the amount of tax-exempt interest received or accrued during the year N/A	12ь			

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Page 6

Part VI Governance, Management, and Disclosure (Sections A, B, and C request information about policies not required by the Internal Revenue Code.)

Sec	tion 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,		100								
	processes, or changes in Schedule O. See instructions.										
1a	Enter the number of voting members of the governing body	5									
	Enter the number of voting members that are independent	5									
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other	_									
	officer, director, trustee, or key employee?	2	1	X							
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision	<u> </u>									
	of officers, directors or trustees, or key employees to a management company or other person?	3		х							
4	Did the organization make any significant changes to its organizational documents since the prior Form 990 was filed?	4		X							
5	Did the organization become aware during the year of a material diversion of the organization's assets?	5	<b></b> -	X							
6	Does the organization have members or stockholders?	6	<del> </del>	X							
_	Does the organization have members, stockholders, or other persons who may elect one or more members of the			<del></del>							
	governing body?	7a		х							
b	Are any decisions of the governing body subject to approval by members, stockholders, or other persons?	7b		X							
_	8 Did the organization contemporaneously document the meetings held or written actions undertaken during the year										
_	by the following:										
а		8a	х								
	Each committee with authority to act on behalf of the governing body?	8b	X	_							
	Does the organization have local chapters, branches, or affiliates?	9a		Х							
	If "Yes," does the organization have written policies and procedures governing the activities of such chapters, affiliates,	- 34									
_	and branches to ensure their operations are consistent with those of the organization?	9ь									
10	Was a copy of the Form 990 provided to the organization's governing body before it was filed? All organizations must	30									
	describe in Schedule O the process, if any, the organization uses to review the Form 990	10	Х								
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							
Sec	tion B. Policies										
			Yes	No							
12a	Does the organization have a written conflict of interest policy? If "No," go to line 13	12a		X							
	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," describe	1=4									
	in Schedule O how this is done	12c									
13	Does the organization have a written whistleblower policy?	13		X							
14	Does the organization have a written document retention and destruction policy?	14		X							
15	Did the process for determining compensation of the following persons include a review and approval by independent										
	, and the state of										
	persons, comparability data, and contemporaneous substantiation of the deliberation and decision:										
а	persons, comparability data, and contemporaneous substantiation of the deliberation and decision:  The organization's CEO, Executive Director, or top management official?	15a		X							
	persons, comparability data, and contemporaneous substantiation of the deliberation and decision:  The organization's CEO, Executive Director, or top management official?  Other officers or key employees of the organization?			X							
	The organization's CEO, Executive Director, or top management official?	15a 15b									
b	The organization's CEO, Executive Director, or top management official?  Other officers or key employees of the organization?  Describe the process in Schedule O. (see instructions)										
b	The organization's CEO, Executive Director, or top management official? Other officers or key employees of the organization?	15b		X							
b 16a	The organization's CEO, Executive Director, or top management official?  Other officers or key employees of the organization?  Describe the process in Schedule O. (see instructions)  Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?										
6 16a	The organization's CEO, Executive Director, or top management official?  Other officers or key employees of the organization?  Describe the process in Schedule O. (see instructions)  Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?  If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate its participation	15b		X							
b 16a	The organization's CEO, Executive Director, or top management official?  Other officers or key employees of the organization?  Describe the process in Schedule O. (see instructions)  Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	15b		X							
b 16a b	The organization's CEO, Executive Director, or top management official?  Other officers or key employees of the organization?  Describe the process in Schedule O. (see instructions)  Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?  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	15b		X							
b 16a b	The organization's CEO, Executive Director, or top management official?  Other officers or key employees of the organization?  Describe the process in Schedule O. (see instructions)  Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?  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?	15b		X							
b 16a b	The organization's CEO, Executive Director, or top management official?  Other officers or key employees of the organization?  Describe the process in Schedule O. (see instructions)  Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?  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?  List the states with which a copy of this Form 990 is required to be filed MI	16a		X							
b 16a b Sec:	The organization's CEO, Executive Director, or top management official?  Other officers or key employees of the organization?  Describe the process in Schedule O. (see instructions)  Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?  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?  Ition C. Disclosure  List the states with which a copy of this Form 990 is required to be filed MI  Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available.	16a		X							
b 16a b Sec:	The organization's CEO, Executive Director, or top management official?  Other officers or key employees of the organization?  Describe the process in Schedule O. (see instructions)  Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?  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?  Ition C. Disclosure  List the states with which a copy of this Form 990 is required to be filed MI  Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available public inspection. Indicate how you make these available. Check all that apply.	16a		X							
b 16a b Sec:	The organization's CEO, Executive Director, or top management official?  Other officers or key employees of the organization?  Describe the process in Schedule O. (see instructions)  Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?  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?  List the states with which a copy of this Form 990 is required to be filed MI  Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available public inspection. Indicate how you make these available. Check all that apply.  Own website Another's website X Upon request	15b 16a 16b	ncial	X							
b 16a b Sec 17 18	The organization's CEO, Executive Director, or top management official?  Other officers or key employees of the organization?  Describe the process in Schedule O. (see instructions)  Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?  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?  Ition C. Disclosure  List the states with which a copy of this Form 990 is required to be filed MI  Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available public inspection. Indicate how you make these available. Check all that apply.	15b 16a 16b	ncial	X							
b 16a b Sec 17 18	The organization's CEO, Executive Director, or top management official?  Other officers or key employees of the organization?  Describe the process in Schedule O. (see instructions)  Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?  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?  tion C. Disclosure  List the states with which a copy of this Form 990 is required to be filed MI  Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available public inspection. Indicate how you make these available. Check all that apply.  Own website Another's website X Upon request  Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of interest policy, statements available to the public.	16a 16b	ncial	X							
b 16a b Sec 17 18	The organization's CEO, Executive Director, or top management official?  Other officers or key employees of the organization?  Describe the process in Schedule O. (see instructions)  Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?  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?  List the states with which a copy of this Form 990 is required to be filed MI  Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available public inspection. Indicate how you make these available. Check all that apply.  Own website Another's website X Upon request  Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of interest policy,	16a 16b	ncial	X							
b 16a b Sec 17 18	The organization's CEO, Executive Director, or top management official?  Other officers or key employees of the organization?  Describe the process in Schedule O. (see instructions)  Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?  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?  tion C. Disclosure  List the states with which a copy of this Form 990 is required to be filed ►MI  Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available public inspection. Indicate how you make these available. Check all that apply.  Own website Another's website X Upon request  Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of interest policy, statements available to the public.  State the name, physical address, and telephone number of the person who possesses the books and records of the organiz MICHAEL J. TAYLOR, DIRECTOR − 616−831−1758	16a 16b		x							

Form 990 (2008)

C/O MICHAEL J. TAYLOR

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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.
- 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.

X Check this box if the organization did no (A)	(B)				C)	,		(D)	(E)	(F)
Name and Title	Average			Pos	ition			Reportable	Reportable	Estimated
	hours per week	director	$\overline{}$		Key employee	Highest compensated components		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
MOLLY KRAUSS										_
TRUSTEE			X	<u> </u>	<u> </u>	<u> </u>		0.	0.	0.
ROBERT HAIGHT TRUSTEE			х					o .	0.	0
CHERYL POEL BREMER			^		<u> </u>	-	<u> </u>	0.		0.
TRUSTEE			Х					0.	0.	0.
JAMES A. LENTZ										
TRUSTEE			Х					0.	0.	0.
BRIAN JAMES										
TRUSTEE			X					0.	0.	0.
RICHARD T. HIGGINS				x				0.	0.	0.
MICHAEL J. TAYLOR										
DIRECTOR/SECRETARY				X				0.	0.	0.
TERESA SCHALL				X				0.	0.	0.
	-								-	

	rt VIII Section A. Officers, Directors, Tr (A)	(B)		<u> </u>		C)			(D)	(E)			(F)	
	Name and title	Average	- I					LA	Reportable compensation	Reportable			stimat	
		hours per week	Individual trustee or director	,		poloyee	Highest compensated emoloyee	Γ	from the organization (W-2/1099-MISC)	compensati from relate organizatior (W-2/1099-MI	d ns	com fr org an	mount other opense rom th panizat d relat anizat	ation e ion ed
			ļ											
			-				_							
													-	
							_			- · · · · · · · · · · · · · · · · · · ·		. <u> </u>		
		-												<del></del>
			-							-				
						_								_
				-										
	Total						<u> </u>		0.	· · · -	0.			0.
2	Total number of individuals (including those compensation from the organization				ore	tha			000 in reportable	<u></u>	<b>&gt;</b>			(
_										_	ſ		Yes	No
3	Did the organization list any former officer, line 1a? If "Yes," complete Schedule J for s								ighest compensated en			3		Х
4	For any individual listed on line 1a, is the su	ım of reportab	le co	mpe	ensa	tion	anc	oth	ner compensation from t		· · ·			
E	and related organizations greater than \$150			•								4		X
5	Did any person listed on line 1a receive or a the organization? If "Yes," complete Sched	•				any	unr	elate	ed organization for servi	ces rendered to	ŀ	5		X
Sec	tion B. Independent Contractors												, , , ,	
1	Complete this table for your five highest co the organization. NONE	mpensated inc	lepe	nde	nt co	ontr	acto	rs ti	hat received more than S	\$100,000 of com	pensa	ition f	rom	
	(A)							T	(B)	Т		(C	)	
	Name and business	address						4	Description of se	ervices	Cc		sation	)
								$\perp$						
2	Total number of independent contractors 6	oludos *b = = =		١					then \$100,000	ongotics.				<del></del>
	Total number of independent contractors (in from the organization	0	: III	, wn	o re	CEIV	eu n	nore	s man proujoud in comp	EUSAUUT				

				J. TAYLOR		<del></del>	38-6092	0// Page 9
Pa	rt VI	II Statement of Reve	nue					
					(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
इइ	1 a	Federated campaigns	1a					
Contributions, gifts, grants and other similar amounts	ь	Membership dues	1b			-		
S, B	c	Fundraising events	1c					
a a		Related organizations	1 1				=	į .
S,E		Government grants (contribu	· · · ·   <del>   -  </del>			1		
Sign		All other contributions, gifts, gran						
절	-	similar amounts not included abo	1 1	i				
FO		Noncash contributions included in lines				<u> </u>		
SE		Total. Add lines 1a-1f			•	Ī		ĺ
$\neg$		Total / Ida III co Ta II		Business Code				· · · · · · · · · · · · · · · · · · ·
	2 a			Business Code		Ţ <b>j</b>	•	
Program Service Revenue	2 B				· · · · · · · · · · · · · · · · · · ·			
Ser	_			<u> </u>		<del>                                     </del>		<del></del>
EŞ	C				<del></del>			
28	d		<del>· · · · · · · · · · · · · · · · · · · </del>		<del> </del>			
요	e	All -All		<del></del>	<del> </del>			
_	T	All other program service reve			.4			
-+		Total. Add lines 2a-2f			· · · · · · · · · · · · · · · · · · ·			
	3	Investment income (including			230,045.			220 045
Ī	_	other similar amounts)		. 1	230,043.			230,045.
	4	Income from investment of ta						
	5	Royalties		i I				
	_		(i) Real	(ii) Personal		<b> </b>		
l	6 a			<b></b>			1	
		Less: rental expenses		<del>                                     </del>		1		
ĺ	_	Rental income or (loss)	L			1	#	
	d	, ,	<del></del>		·····			
	7 a	Gross amount from sales of	(i) Securities	(ii) Other			1	
	_	assets other than inventory	3,316,579.	<del> </del> [			`	
1	Ь	Less: cost or other basis	_					
		and sales expenses					1	
		Gain or (loss)			1106 070	.106 070	. 1	
- 1		Net gain or (loss)		<b>_</b>	<186,078.	><186,078.	>	
9	8 a	Gross income from fundraisin					1	
E I		including \$		[				
é		contributions reported on line	1c). See	ľ			1	
Other Revenue		Part IV, line 18						
튑		Less: direct expenses		L		1	1	
Ĭ		Net income or (loss) from fund	_	<b>•</b>	<del></del>			
ŀ	9 a	Gross income from gaming ac						
		Part IV, line 19	a				į	
ł	b	Less: direct expenses	b			<b></b>	ŀ	
1		Net income or (loss) from gam	-	🕨				
	10 a	Gross sales of inventory, less	returns	,			1	
j		and allowances	a				1	
-	b	Less: cost of goods sold	<b>b</b>					
L	c	Net income or (loss) from sale	s of inventory	🕨				
L		Miscellaneous Revenu	е	Business Code				
- 1	11 a							
	b							
	c							
	d	All other revenue						
	e	Total. Add lines 11a-11d		<b>&gt;</b>				
	12	Total Revenue. Add lines 1h, 2g, 3, 4		c, and 11e	43,967.	<186,078.>	0.	230,045.
832009 02-02-0	) 09							Form <b>990</b> (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).

	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				
	organizations in the U.S. See Part IV, line 21	461,960.			
2	Grants and other assistance to individuals in				
	the U.S. See Part IV, line 22			ļ	
3	Grants and other assistance to governments,				
	organizations, and individuals outside the U.S.				
	See Part IV, lines 15 and 16			ļ	
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				
8	Pension plan contributions (include section 401(k)				
•	and section 403(b) employer contributions)				
9	Other employee benefits				· · · · · · · · · · · · · · · · · · ·
10	Payroll taxes		·	<del> </del>	
11	Fees for services (non-employees):				
a	Management	13,377.	<del></del>	13,377.	
b	Legal	6,017.	<del></del>	6,017.	
	Accounting	0,017.		0,017.	
d	Lobbying				
6	Professional fundraising services See Part IV, line 17	25,638.		25,638.	
f	Investment management fees	25,030.		23,030.	·
9	Other				<del></del>
12	Advertising and promotion				<del></del>
13	Office expenses				
14	Information technology				<del></del>
15 16	Royalties				
16	Occupancy				
17	Travel	-			<del></del>
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings		· · · · · · · · · · · · · · · · · · ·		
	Interest				<del></del>
21	Payments to affiliates			ļ	
22	Depreciation, depletion, and amortization				·
23	Insurance				
24	Other expenses. Itemize expenses not covered above (Expenses grouped together and labeled miscellaneous may not exceed 5% of total expenses shown on line 25 below.)				
а					····
ь					
c	•		,		-
d					•
e					·
	All other expenses			<u> </u>	
	Total functional expenses. Add lines 1 through 24f	506,992.	0.	45,032.	0.
	Joint Costs. Check here	300,332.		73,032.	
	· 1				
	SOP 98-2. Complete this line only if the organization			İ	
	reported in column (B) joint costs from a combined educational campaign and fundraising solicitation				
	educational campaign and idituralshig Solicitation		_		_

38-6092077 Page 11

1   Cash - non-interest-bearing   2   3   382,820			- Delance Greek	(A) Beginning of year		(E End o		
Programment of the programment and former officers, directors, trustees, key employees, or other related parties. Complete Part I I of Schedule I.  Receivables from current and former officers, directors, trustees, key employees, or other related parties. Complete Part I I of Schedule I.  Receivables from current and former officers, directors, trustees, key employees, and persons described in section 4958(c)(3)(6). Complete Part I I of Schedule I.  Part I I of Schedule I.  Part I I of Schedule I.  Part I of Schedule I.  P		1	Cash · non-interest-bearing	443,252.	. 1	38	32,8	20
A   Accounts receivable, net   5   Receivable from current and former officers, directors, trustees, key employees, or other related parties. Complete Part II of Schedule L   5		2	Savings and temporary cash investments		2			
A   Accounts receivable, net   5   Receivable from current and former officers, directors, trustees, key employees, or other related parties. Complete Part II of Schedule L   5		3	Pledges and grants receivable, net		3			
employees, or other related parties. Complete Part II of Schedule L		4			4			
Fig. 6 Receivables from other disqualified persons (as defined under section 4958(c)(3)(B). Complete Part II of Schedule L  7 Notes and loans receivable, net  8 Prepaid expenses and deferred charges 9 Prepaid expenses and deferred charges 10a Land, buildings, and equipment: cost basis 1 Less: accumulated depreciation. Complete Part VI of Schedule D  11 Investments: publicly traced securities 12 Investments: publicly traced securities 12 Investments: publicly traced securities 13 Investments: publicly traced securities 14 Intengible assets 15 Investments: publicly traced securities 16 Total assets. Add lines 1 through 15 (must equal line 34) 17 Accounts payable and accrued expenses 18 Grants payable 19 Deferred revenue 19 Deferred revenue 20 Tax exampt bond liabilities 20 Tax exampt bond liabilities 21 Escow account liability. Complete Part IV of Schedule D 22 Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L 23 Secured mortgages and notes payable to unrelated third parties 25 Other liabilities. Add lines 17 through 25 26 Total liabilities. Add loans payable 27 Chef liabilities. Complete Part IV of Schedule D 28 Total liabilities. Add loans payable 29 Permanently restricted net assets 29 Organizations that follow SFAS 117, check here IX and complete lines 27 through 29, and lines 33 and 34.  27 Unrestricted net assets 29 Organizations that follow SFAS 117, check here IX and complete lines 27 through 34. 30 Capital stock or trust pnnopal, or current funds 31 Paidra or capital surplus, or land, building, or equipment fund 40 0 11 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0		5	Receivables from current and former officers, directors, trustees, key					
4958(f)(1) and persons described in section 4958(c)(3)(B). Complete Part II of Schedule L  7 Notes and loans receivable, net		-	employees, or other related parties. Complete Part II of Schedule L		5			
Part II of Schedule L  7 New Technology 8 Inventories for sale or use 9 Prepaid expenses and deferred charges 9 Prepaid expenses and deferred charges 10 Land, buildings, and equipment: cost basis 10 Less: accumulated depreciation. Complete Part V of Schedule D  11 Investments - publicly traded securities 12 Investments - publicly traded securities 13 Investments - publicly traded securities 14 Intamplete assets 15 Other assets. Popyram-related. See Part IV, line 11 15 Investments - program-related. See Part IV, line 11 16 Total assets. Add lines 1 through 15 (must equal line 34) 17 Accounts payable and accrued expenses 18 Grants payable 19 Deferred revenue 19 Deferred revenue 20 Tax-exempt bond liabilities 21 Excerve account liability. Complete Part IV of Schedule D 22 Payables to current and former officers, directors, fursites, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L 23 Secured mortgages and notes payable to unrelated third parties 24 Unsecured notes and notes payable to unrelated third parties 25 Total liabilities. Add lines 17 through 25 26 Total liabilities. Complete Part IV of Schedule D 27 Total liabilities. Complete Part IV of Schedule D 28 Total liabilities. Add lines 17 through 25 29 Pornanently restricted and assets 29 Organizations that do not follow SFAS 117, check here IX and complete lines 30 through 34. 27 Unrestricted net assets 28 Total liabilities. Add lines 17 through 25 29 Pornanently restricted and assets 29 Organizations that do not follow SFAS 117, check here IX and complete lines 30 through 34. 30 Capital stock or frust principal, or current funds 31 Paide in or capital surplus, or land, building, or equipment fund 4 Capital stock or frust principal, and reverse the form 990: IX Cash IX Accrual Other 4 Accounting method used to prepare the Form 990: IX Cash IX Accrual Other 5 No. 17 Total liabilities. Add lines 25 total page 17 through 34. 31 Paide in eassets or fund balances 32 Were the organization's financial statements		6	Receivables from other disqualified persons (as defined under section					
7   Notes and loans receivable, net   7			4958(f)(1)) and persons described in section 4958(c)(3)(B). Complete					
8		į –	Part II of Schedule L		6		•	
8	इ	7	Notes and loans receivable, net		7			
9   Prepard expenses and detered charges   10a   10a   10b   10c   10	SSe	8			8			
10a Land, buldings, and equipment: cost basis   10a   10b   10c   11c	₹	9			9			
b Less: accumulated deprecuation. Complete Part VI of Schedule D Investments - publicly traded securities It investments - publicly traded securities It investments - publicly traded securities It investments - problecty traded securities It investments - toprogram-related. See Part IV, line 11 It intangible assets It inta		10a	1 1	-				
Part Vi of Schedule D   106		Ь	- , ,		1 1		•	
11					10c			
12   Investments - other securities. Sae Part IV, line 11		11			† · · · †			
13		12	· · · · · · · · · · · · · · · · · · ·	8,464,266.		8,07	0,46	55.
14		13						
15		14			14			
16   Total assets. Add lines 1 through 15 (must equal line 34)   8,934,396   16   8,471,371.     17   Accounts payable and accrued expenses   17   17   18   18   19   19   19   19   19   19		15	Other assets. See Part IV, line 11	26,878.	15	1	8,08	36.
17 Accounts payable and accrued expenses		16		8,934,396.	16			
18   Grants payable   18   19   19   19   19   19   19   19		17						
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23 Secured mortgages and notes payable to unrelated third parties  24 Unsecured notes and loans payable  25 Other liabilities. Complete Part X of Schedule D  26 Total Itabilities. Add lines 17 through 25  27 Organizations that follow SFAS 117, check here inines 27 through 29, and lines 33 and 34.  28 Temporarily restricted net assets  29 Permanently restricted net assets  30 Capital stock or trust principal, or current funds  31 Paid-in or capital surplus, or land, building, or equipment fund  32 Retained earnings, endowment, accumulated income, or other funds  33 Total net assets or fund balances  34 Total liabilities and net assets/fund balances  35 As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?  29 As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?	abi				1			
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27 Unrestricted net assets  28 Temporarily restricted net assets  29 Permanently restricted net assets  Organizations that do not follow SFAS 117, check here ► X and complete lines 30 through 34.  30 Capital stock or trust principal, or current funds  31 Paid-in or capital surplus, or land, building, or equipment fund  32 Retained earnings, endowment, accumulated income, or other funds  33 Total net assets or fund balances  34 Total liabilities and net assets/fund balances  35 Total net assets or fund balances  36 Financial Statements and Reporting  Part XI Financial Statements and Reporting  Yes No  1 Accounting method used to prepare the Form 990: X Cash Accrual Other  2a Were the organization's financial statements compiled or reviewed by an independent accountant?  2b Were the organization's financial statements and selection of an independent accountant?  2c If 'Yes' to lines 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant?  3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?			Organizations that follow SFAS 117, check here ▶ □ and complete					
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34 Total liabilities and net assets/fund balances 8,934,396 34 8,471,371.  Part XI Financial Statements and Reporting  Yes No  1 Accounting method used to prepare the Form 990: X Cash Accrual Other  2a Were the organization's financial statements compiled or reviewed by an independent accountant?  b Were the organization's financial statements audited by an independent accountant?  c If "Yes" to lines 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant?  3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?	ō		complete lines 30 through 34.					
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34 Total liabilities and net assets/fund balances 8,934,396 34 8,471,371.  Part XI Financial Statements and Reporting  Yes No  1 Accounting method used to prepare the Form 990: X Cash Accrual Other  2a Were the organization's financial statements compiled or reviewed by an independent accountant?  b Were the organization's financial statements audited by an independent accountant?  c If "Yes" to lines 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant?  3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?	\ss	31	Paid-in or capital surplus, or land, building, or equipment fund	0.	31			
34 Total liabilities and net assets/fund balances 8,934,396 34 8,471,371.  Part XI Financial Statements and Reporting  Yes No  1 Accounting method used to prepare the Form 990: X Cash Accrual Other  2a Were the organization's financial statements compiled or reviewed by an independent accountant?  b Were the organization's financial statements audited by an independent accountant?  c If "Yes" to lines 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant?  3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?	₹ a	32	Retained earnings, endowment, accumulated income, or other funds	<245,019.	>32	<24	5,01	9.
34   Total liabilities and net assets/fund balances   8,934,396. 34   8,471,371.     Part XI   Financial Statements and Reporting   Yes   No     1   Accounting method used to prepare the Form 990:   X   Cash   Accrual   Other     2a   Were the organization's financial statements compiled or reviewed by an independent accountant?   2a   X     b   Were the organization's financial statements audited by an independent accountant?   2b   X     c   If "Yes" to lines 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant?   2c     3a   As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit     Act and OMB Circular A-133?   3a   X	Z	33	Total net assets or fund balances	8,934,396.	33	8,47	1,37	$\overline{1.}$
Part XI Financial Statements and Reporting  Yes No  Accounting method used to prepare the Form 990: X Cash Accrual Other  Were the organization's financial statements compiled or reviewed by an independent accountant?  Were the organization's financial statements audited by an independent accountant?  If "Yes" to lines 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant?  As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?			Total liabilities and net assets/fund balances	8,934,396.	34	8,47	$\overline{1,37}$	$\overline{1.}$
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c If "Yes" to lines 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant?  3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?  3a X	b							
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Act and OMB Circular A-133? 3a X	3a				le Audit			_
			and OMB Consular A 1000			I . I		X
	<u>b</u>	If "Ye						_

# **SCHEDULE A**

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

# **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 Inspection

OMB No 1545-0047

Name of the organization WADE E. AND VIOLA SACKNER FOUNDATION C/O MICHAEL J. TAYLOR

LHA For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990.

**Employer identification number** 38-6092077

Schedule A (Form 990 or 990-EZ) 2008

Part I	Reason	for Public Cha	rity Status (All organi	izations m	ust comple	ete this pa	rt.) (see in:	structions)	·			
The orga	nization is not a	a private foundation	because it is: (Please c	heck only	one organ	zation.)						
1	A church, co	nvention of church	es, or association of chu	rches des	cribed in s	ection 17	0(b)(1)(A)(	i).				
2	A school des	cribed in section 1	70(b)(1)(A)(ii). (Attach S	chedule E	.)							
3	A hospital or	a cooperative hosp	oital service organization	described	d in <b>sectio</b> i	n 170(b)(1	) <b>(A)(iii)</b> . (A	ttach Sche	edule H.)			
4	A medical res	search organization	operated in conjunction	with a ho	spital desc	ribed in s	ection 17	<mark>0(ь)(1)(А)</mark> (і	ii). Enter t	he hospita	i's nam	ie,
	city, and stat	te:										
5 🗀	An organizat	on operated for the	benefit of a college or u	iniversity o	owned or o	perated b	y a govern	mental un	ıt describe	ed in		
	section 170	(b)(1)(A)(iv). (Comp	lete Part II.)									
6 🗔	A federal, sta	ate, or local governm	nent or governmental un	it describe	ed in <b>secti</b> e	on 170(b)	(1)(A)(v).					
7 🗔	•	~	ceives a substantial part					or from the	general c	oublic desc	nbed i	n
		( <b>b)(1)(A)(vi).</b> (Compl			•	•			,			.,
8 🗀	1		section 170(b)(1)(A)(vi).	(Complete	e Part II.)							
9 🗀	1		ceives: (1) more than 33		•	from conti	ributions. r	membersh	ip fees, an	d aross re	ceipts :	from
			inctions · subject to cert						-	_	•	
			taxable income (less sec							_		
		509(a)(2). (Complet	•					-,			,	٠.
10	1	· · · · · · · · · · · · · · · · · · ·	perated exclusively to te	est for pub	olic safety.	See secti	on 509(a)(	4). (see ins	structions)			
11 X	1		perated exclusively for t								of one o	or
	•		ations described in sect						-			
			organization and comp				,					
	a X Type I		<b>¬</b> ·	_	pe III - Fund		tegrated		d $\square$	Type III - 0	Other	
е 🗀	1		at the organization is not			_	_	r more dis	qualified p	••		n
			than one or more publicl				-		-			•
f			tten determination from						- (-)(-)		(-7(-)	
	_	rganization, check t				,, -, -, -,	, =, .,,,,					
g		-	organization accepted a		ontribution	n from any	of the foll	owina pen	sons?	•	• •	
J			directly controls, either a			-		- ,			Yes	No
			upported organization?		<b>J</b>	рановно		() (	,,	11g(i)	130	X
		- ·	n described in (i) above?			• • • • •			•	11g(ii)		Х
	•	*	person described in (i)		 /e?					11g(iii)		X
h			about the organizations						•	(**9(***/		<u> </u>
	1 101100 1110 11	onowing intomitation	about the organizations	s and organ	inzanon so	pports.						
		400 -400	(iii) Type of	(iv) Is the	organization	(v) Did vo	u notify the	(vi) is	tho			
	e of supported	(II) EIN	organization		isted in your		tion in col.	Lorganizatio	on in col l	(vii) Am		
OIG	janization		(described on lines 1-9		document?		r support?	(i) organiz U.S	ed in the	sup	port	
			above or IRC section (see instructions))	Yes	No	Yes	No	Yes	No			
SEE S	CHEDULE		(00000000000000000000000000000000000000	<del>                                     </del>	<del> </del>				-			
I	JOHLEDGEE		501C(3)		x	x		х		16	1,96	50
			5010(5)	<del> </del>	<del>  ^</del> -	_ <del>^</del> _			+	- 40	1,00	<del>,,,</del>
			1					ľ				
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							1					
		<del> </del>		<u> </u>	<del>                                     </del>		<u> </u>	<del> </del>				
	İ						!	1				
		······································		-	ļ			ļ	_	-		
	ļ				]						1 0.	- ^
Total	E.	. '	T	ì	1	E	3	:	. 1	40	1,96	) U .

Schedule	A (Form	990 or 990	-F7) 2008

	Support Schedule for	Organization	s Described in	Sections 170	)(b)(1)( <u>A</u> )(iv) aı	nd 170(h)(1)(A)(	Page 2
	(Complete only if you checke						, <b>v</b> 1,
Se	ction A. Public Support						<del></del>
	endar year (or fiscal year beginning in)	(a) 2004	<b>(b)</b> 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
	Gifts, grants, contributions, and	, , , , , , , , , , , , , , , , , , ,	19,200	10,200	10/200/	10/200	(i) Total
	membership fees received. (Do not				1		
	include any "unusual grants.")			1			
2	Tax revenues levied for the organ-						
_	ization's benefit and either paid to			1	İ		
	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				<del> </del>		<del> </del>
5	The portion of total contributions				1	<del> </del>	<del> </del>
Ŭ	by each person (other than a						
	governmental unit or publicly				1	Ī	
	supported organization) included	:					
	on line 1 that exceeds 2% of the				1		1
	amount shown on line 11,	•		Ī	1		
	column (f)	:		İ	1		1
6	· ····· ·· ·· ·· ·· ·· ·· ·· ··				<u> </u>		
	Public Support. Subtract line 5 from line 4 ction B. Total Support	·		ł	1		
	endar year (or fiscal year beginning in)	(a) 2004	<b>(b)</b> 2005	(c) 2006	(d) 2007	(a) 2009	(A Takal
	Amounts from line 4	(a) 2004	(b) 2003	(0) 2000	(a) 2001	(e) 2008	(f) Total
8	Gross income from interest.			-			
٠	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					<del>                                     </del>	
10	or loss from the sale of capital						
	assets (Explain in Part IV.)						
44							
	Total support. Add lines 7 through 10 [Gross receipts from related activities,	oto (oso instructi			<u> </u>	10	<del></del>
			•		····· ·· · · · · · · · · · · · · · · ·	12	
13	First five years. If the Form 990 is for				•		. □
Sec	organization, check this box and stop ction C. Computation of Publi		rcentage		· · · · · · · · · · · · · · · · · · ·	<u></u>	
	Public support percentage for 2008 (li		<del></del>	oluma (fl)		14	
	Public support percentage from 2007					15	
	33 1/3% support test - 2008. If the o					<del></del>	<u>%</u>
	stop here. The organization qualifies						x and
Ь	33 1/3% support test - 2007. If the o		-				<b>-</b>
	and stop here. The organization quali			••			is box
172							
. , a	10% -facts-and-circumstances test						
	and if the organization meets the "fact					rt iv now the organ	ization
	meets the "facts-and-circumstances" t						
J	10% -facts-and-circumstances test						
	more, and if the organization meets the organization meets the 'facts-and-circ				-		▶□
	THE PROPERTY OF THE PROPERTY O	CONTRACTOR DESIGNATION	coe urumilization f	いるのいきょ みち み ひいりいん	IN SHITTEN MICH OF OR		

Sahadula A	Earm 00	000 E7	2000
Schedule A	יפפ ווווטדן	J OF 990-EZ	) とししむ

P	art III Support Schedule for	Organizations	Described in	Section 509(a	1)(2) (Complete or	ah if yay abaakad tha b	Page 3
Se	ction A. Public Support	<u></u>	Described iii	90011011	-74-7 (Complete of	ny ii you checkeu the b	ox on line 9 of Part
	lendar year (or fiscal year beginning in)	(a) 2004	<b>(b)</b> 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
1	Gifts, grants, contributions, and					1 , , , , , ,	10, 10.00
	membership fees received. (Do not						
	include any "unusual grants.")				1		
2	Gross receipts from admissions.						
	merchandise sold or services per-						
	formed, or facilities furnished in any activity that is related to the	·					
	organization's tax-exempt purpose	-					
3	Gross receipts from activities that					· · · · · · · · · · · · · · · · · · ·	
_	are not an unrelated trade or bus-		ł				
	iness under section 513						
4	Tax revenues levied for the organ-						
•	ization'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	1					
R	Total. Add lines 1 · 5			- · · · · · · · · · · · · · · · · · · ·			<del></del>
	Amounts included on lines 1, 2, and		<u>-</u> -				·
- ' '	3 received from disqualified persons						
ŧ	Amounts included on lines 2 and 3 received		<del></del>				
	from other than disqualified persons that	1			i		
	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					<del>                                     </del>	
	Public support (Subtract line 7c from fine 6.)						
	ction B. Total Support	<u> </u>	<u> </u>		<u> </u>	<u> 1</u>	<del></del>
	endar year (or fiscal year beginning in)	(a) 2004	<b>(b)</b> 2005	(c) 2006	(d) 2007	(e) 2008	60 Total
	Amounts from line 6	(4) 2004	(6) 2003	(6) 2000	(0) 2007	(e) 2006	(f) Total
	Gross income from interest.						<del></del>
	dividends, payments received on						
	securities loans, rents, royalties and income from similar sources						
t	Unrelated business taxable income						<del></del>
	(less section 511 taxes) from businesses						
	acquired after June 30, 1975					1	
c	Add lines 10a and 10b		-				<del></del>
11	Net income from unrelated business					<del> </del>	
	activities not included in line 10b,					1	
	whether or not the business is regularly carried on	[				1 1	
12	Other income. Do not include gain	-					
	or loss from the sale of capital						
13	assets (Explain in Part IV.) Total support (Add lines 9, 10c, 11, and 12)						<del></del>
	First five years. If the Form 990 is for	the organization's	first second thir	t fourth or fifth to	V VOOT OO O OOST	25 501(5)(3) 2722-175	
• •	check this box and stop here		· · · · · · · · · · · · · · · · · · ·				ation,
Sec	tion C. Computation of Publ				······································	· · · · · · · · · · · · · · · · · · ·	···
	Public support percentage for 2008 (I			olumo (fl)		15	
	Public support percentage from 2007					16	<u>%</u>
	tion D. Computation of Inves				<u></u>	110	%
	Investment income percentage for 20			a 13 column (A)	<del></del>	17	
	Investment income percentage from 2				•	<del>   </del>	
					46 in many 45 -	22.1/29/ and be 43	<u>%</u>
100	33 1/3% support tests - 2008. If the						is not
L	more than 33 1/3%, check this box as						
D	33 1/3% support tests - 2007. If the						nd
00	line 18 is not more than 33 1/3%, che						▶
∠U	Private foundation. If the organization	n did not check a b	oox on line 14, 19a	, or 190, check thi		structions	

# 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.

2008
Open to Public Inspection

Name of the organization

WADE E. AND VIOLA SACKNER FOUNDATION

C/O MICHAEL J. TAYLOR

Employer identification number 38-6092077

Pa	organizations Maintaining Donor Adviser organization answered 'Yes' to Form 990, Part IV, line		ds or Accounts. Complete if the
	organization answered Tes to Form 990, Part IV, line	(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year		
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 v	writing that the assets held in donor adv	rised funds
	are the organization's property, subject to the organization's		<del></del>
6	Did the organization inform all grantees, donors, and donor ad	•	
Ŭ	for charitable purposes and not for the benefit of the donor of		·
Pa	rt # Conservation Easements. Complete if the org		
1	Purpose(s) of conservation easements held by the organization		Ture regime r.
•	Preservation of land for public use (e.g., recreation or pl		storically important land area
	Protection of natural habitat		ified historic structure
	Preservation of open space	reservation of cert	med matoric structure
2	Complete lines 2a-2d if the organization held a qualified conse	orgation contribution in the form of a con-	manustian annual an the last day.
_	of the tax year.	ervation contribution in the form of a con	inservation easement on the last day
	of the tax year.		Hold at the End of the Year
_	Total number of conservation easements		Held at the End of the Year
a h	Total acreage restricted by conservation easements		2a
b			2b
d			2d
3	Number of conservation easements modified, transferred, rele		
J	year	eased, extinguished, or terminated by tr	le organization during the taxable
4	Number of states where property subject to conservation eas	ament is located	
5	Does the organization have a written policy regarding the period		and .
•	enforcement of the conservation easements it holds?	<b>.</b>	
6	Staff or volunteer hours devoted to monitoring, inspecting, an		
7	Amount of expenses incurred in monitoring, inspecting, and e		
8	Does each conservation easement reported on line 2(d) above		
Ü		· · · · · · · · · · · · · · · · · · ·	
9	In Part XIV, describe how the organization reports conservatio		
9	-	•	· · · · · · · · · · · · · · · · · · ·
	include, if applicable, the text of the footnote to the organization conservation easements.	on s financial statements that describes	s the organization's accounting for
Da	T III Organizations Maintaining Collections of	Art Historical Transuras or C	Thor Similar Assets
1 C4	Complete if the organization answered "Yes" to Form 9		other Sillinar Assets.
	Complete if the organization answered Tes To Form's	30, Fart IV, IIII 6 8.	-
4.	If the experimentary planted as associated and of CCAD 44C and	A	
ła	If the organization elected, as permitted under SFAS 116, not		
	treasures, or other similar assets held for public exhibition, edit		iblic service, provide, in Part XIV, the text of
	the footnote to its financial statements that describes these its		
b	If the organization elected, as permitted under SFAS 116, to re		
	or other similar assets held for public exhibition, education, or	research in furtherance of public service	e, provide the following amounts relating to
	these items:		
	(i) Revenues included in Form 990, Part VIII, line 1		<b>&gt;</b> \$
	(ii) Assets included in Form 990, Part X		· · · · ▶ \$
2	If the organization received or held works of art, historical treas	sures, or other similar assets for financia	al gain, provide
	the following amounts required to be reported under SFAS 116	6 relating to these items:	
а	Revenues included in Form 990, Part VIII, line 1		<b>▶</b> \$
b	Assets included in Form 990, Part X		> \$ > \$

		CHAEL J. I					3	38 <u>–60</u>	9207	17	Page 2
Pa	rt III Organizations Maintaining	Collections of	Art, His	storical T	reasures,	or Oti	ner Simila	ar Asse	ts (con	tinue	<u></u>
3	Using the organization's accession and other	er records, check a	any of the	following th	at are a sigr	ificant u	se of its coll	ection ite	ems (che	ck all	
	that apply):			_							
а	Public exhibition		d [	Loan or exc	change prog	grams					
b	Scholarly research		е 🗀	Other							
C	Preservation for future generations										
4	Provide a description of the organization's of	collections and exp	lain how	they further t	lhe organiza	ition's ex	empt purpo	se in Par	t XIV.		
5	During the year, did the organization solicit										
	to be sold to raise funds rather than to be m							[	Yes		□No
Pa	rt IV Trust, Escrow and Custodia reported an amount on Form 990, Pa	I Arrangemen	ts. Com	olete if organ	ization ansv	vered 'Y	es" to Form	990, Par	t IV, line	9, or	
12	Is the organization an agent, trustee, custoo		adion, fo	r contribution							
10			-						٦.,		¬
	on Form 990, Part X?							∟	」 Yes		No
	in res, explain the arrangement in Fait Aiv	and complete the	lollowing	table:					<u> </u>		
_	Paginning belongs								Amour	<u>it</u>	
6	Beginning balance						. 1c			<del></del>	
u											
•	Distributions during the year						[				
20	Ending balance								7.,	<del></del>	<del></del>
	Did the organization include an amount on F		ne 21?	• • • • • • • • • • • • • • • • • • • •	• • • • • • • • • • • • • • • • • • • •				<b>Yes</b>	_	No
	b If "Yes," explain the arrangement in Part XIV.  Part V Endowment Funds. Complete if organization answered "Yes" to Form 990, Part IV, line 10.										
	* TEINGOWINCITE I UNGS. COMplete	_			1		(A) There was	and beats	4 3 5		
10	Beginning of year balance	(a) Current year	(0)	Prior year	(c) Iwo ye	ars Dack	(d) Three ye	ars Dack	(e) Fou	ryears	Dack
h	Contributions		<del></del>	***************************************	<u> </u>		·				
	Investment earnings or losses		- <del>[</del>	······································						*********	·····
4	Grants or scholarships		<del>-[</del>								
	Other expenditures for facilities		<del> </del>							<del>~~~~</del>	·····
•			Į.		•						
			ļ								
'	Administrative expenses		<del></del>	•••••					······································		
2	End of year balance				1		·				
٤,	Provide the estimated percentage of the year Board designated or quasi-endowment		as:								
a 5	Permanent endowment		%								
•		% %									
			:A! AL								
Ja	Are there endowment funds not in the posse	ession of the organ	ization th	at are neid a	na aaminist	erea tor t	ine organiza	tion	ſ		<del>г</del>
	by: (i) unrelated organizations								10.0	Yes	No
									3a(i)		
	(ii) related organizations				• • • • •	••			3a(ii)		
4	If "Yes" to 3a(ii), are the related organizations								_3b_	ل	L
Par	Describe in Part XIV the Intended uses of the tVI Investments - Land, Building	e organization's end	pont S	TUNOS.	Dort V. line	10		<del>-</del>			
1 441				1				1	445 .		
	Description of investment	(a) Cost or basis (inves		(b) Cost basis (		(c) L	epreciation	İ	(d) Book	( valu	е
12	Land		·······································	Dasis (	ottiel)	<del> </del>				·	
	Land										
	Buildings						<del>_</del>				
	Leasehold improvements		-				<del></del>				
	Equipment							<del> </del>			
	Other										
rotal	. Add lines 1a-1e. (Column (d) should equal Fo	orm 990, Part X, co	iumn (B),	line 10(c).)				<u> </u>			0.

C/O MICHAEL J. TAYLOR Schedule D (Form 990) 2008 38-6092077 Page 3 Part VII Investments - Other Securities. See Form 990, Part X, line 12. (a) Description of security or category (c) Method of valuation: (b) Book value (including name of security) Cost or end-of-year market value Financial derivatives and other financial products Closely-held equity interests CORPORATE AND GOVERNMENT SECURITIES 8,070,465. Cost 8,070,465. Total. (Col (b) should equal Form 990, Part X, col (B) line 12.) Part VIII Investments - Program Related. See Form 990, Part X, line 13. (c) Method of valuation: (a) Description of investment type (b) Book value Cost or end-of-year market value Total. (Col (b) should equal Form 990, Part X, col (B) line 13.) 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. (a) Description of liability (b) Amount Federal income taxes Total. (Column (b) should equal Form 990, Part X, col (B) line 25.) In Part XIV, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions

under FIN 48.

Sche	dule D (Form 990) 2008 C/O MICHAEL J. TAYLOR	_		38-6092077	Page 4
Pa	t XI Reconciliation of Change in Net Assets from Form 990 to F	inancial Sta	tements		
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				
7	Prior period adjustments				
8	Other (Describe in Part XIV)			· · <del>- · · · · · · · · · · · · · · · · ·</del>	
9	Total adjustments (net). Add lines 4-8		9		
10	Excess or (deficit) for the year per financial statements. Combine lines 3 and 9		<del></del>		
	t XII Reconciliation of Revenue per Audited Financial Statemen			Return	
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:				
		ایم			
a	Net unrealized gains on investments			1 1	
b	Donated services and use of facilities	2b		-	
c	Recoveries of prior year grants		<del></del>	-	
d	Other (Describe in Part XIV)		<del></del> -	┥ .	
e	Add lines 2a through 2d			2e	
3	Subtract line 2e from line 1			3	
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:	1			
а	Investment expenses not included on Form 990, Part VIII, line 7b	1	<u> </u>	4 1	
Ь	Other (Describe in Part XIV)			4	
C	Add lines 4a and 4b		••	4c	
5	Total revenue. Add lines 3 and 4c. (This should equal Form 990, Part I, line 12.)			5	
Pa	t XIII Reconciliation of Expenses per Audited Financial Statemen			r Return	
1	Total expenses and losses per audited financial statements			1	
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:				
а		2a		4 1	
Ь	Prior year adjustments	2b			
C	Losses reported on Form 990, Part IX, line 25			1	
d	Other (Describe in Part XIV)	2d		] ]	
е	Add lines 2a through 2d			2e	
3	Subtract line 2e from line 1			3	
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:				
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a			
Ь	Other (Describe in Part XIV)	4b			
C	Add lines 4a and 4b			4c	
5	Total expenses. Add lines 3 and 4c. (This should equal Form 990, Part I, line 18.)		-	5	
Par	XIV Supplemental Information				
	lete this part to provide the descriptions required for Part II, lines 3, 5, and 9; Part III, III t XI, line 8; Part XII, lines 2d and 4b; and Part XIII, lines 2d and 4b.	nes 1a and 4; Pa	art IV, lines 1	b and 2b; Part V, line 4;	; Part
				<del></del>	
				<del></del>	
_		<del></del>		<del></del>	

SCHEDULE I				:			OMB No 1545-0047
		Governn	ants and Other Assistance to Organization Governments, and Individuals in the U.S.	Governments, and Individuals in the U.S.	vā.		2008
Dopartment of the Treasury Internal Revenue Service	▲ Comp	Complete if the organization answered "Yes," on Form 990, Part IV, lines 21 or 22. ▶ Attach to Form 990.	n answered "Yes," on F ▶ Attach to Form 990.	," on Form 990, P₂ m 990.	art IV, lines 21 or 22.		Open to Public inspection
f the organization WADE E. C/O MICH	VIOLA J. TAY	KNER	FOUNDATION				Employer identification number 38-6092077
Part   General Information on Grants and Assistance	nd Assistance						
1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection	to substantiate the	e amount of the grants	or assistance, the	grantees' eligibility	/ for the grants or ass	listance, and the select	ion
criteria used to award the grants or assistance?	stance?	:	٠			٠	X Yes
2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.	ocedures for monit	toring the use of grant	funds in the United	d States.			
	Governments and	d Organizations in the	United States. C	complete if the orga	inization answered "Y	'es" on Form 990, Part	IV, line 21, for any
recipient that received more than \$5,000. Check this box if no one recipient received more than \$5,000. Use Part IV and Schedule I-1 (Form 990) if additional space is needed	\$5,000. Check this	box if no one recipien	t received more th	an \$5,000. Use Pa	rt IV and Schedule I-	1 (Form 990) if addition	al space is needed
1 (a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal,	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
MAKY FREE BED FUND 235 WEALTHY ST. SE							
GRAND RAPIDS, MI 49503	38-2643392		152,244.	0			
AMERICAN CANCER SOCIETY MICH DIV							
ST							
LANSING, MI 48906	38-1387120		76,129.	0.			
AMERICAN RED CROSS OF W. CENTRAL							
MI - 1050 FULLER NE - GRAND							
RAPIDS, MI 49503	53-0196605		76,129.	0			
SALADIN SHRINE TRUST FOR CHILD.							
4200 SALADIN DR. SE							
GRAND RAPIDS, MI 49506	38-3514188		76,129.	0			
HEART OF W. MICH UNITED WAY							
MS							
GRAND RAPIDS, MI 495034106	38-1360923		76,129.	0			
GEORGE SLYKHOUSE SCHOLARSHIP C/O							
GRAND RAPIDS COMMUNITY FOUNDATION							
1/0 GR COMM.							
``]	38-2877959		5,200.	0.			
	nd government or	ganizations			:		•9
_	8	;					<b>A</b>
LHA For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990.	ction Act Notice,	see the Instructions 1	or Form 990.				Schedule I (Form 990) 2008

C/O MICHAEL J. TAYLOR

Grants and Other Assistance to Individuals in the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 22. Use Schedule I-1 (Form 990) if additional space is needed. Schedule I (Form 990) 2008
Part III Grants and Oth

Page 2

38-6092077

(f) Description of non-cash assistance (e) Method of valuation (book, FMV, appraisal, other) Part IV Supplemental Information. Complete this part to provide the information required in Part I, line 2, and any other additional information. (d) Amount of non-cash assistance (c) Amount of cash grant (b) Number of recipients (a) Type of grant or assistance

Schedule I (Form 990) 2008

832102 12-18-08

#### SCHEDULE O (Form 990)

**Supplemental Information to Form 990** 

Department of the Treasury Internal Revenue Service ► 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

Name of the organization

WADE E. AND VIOLA SACKNER FOUNDATION C/O MICHAEL J. TAYLOR

Employer identification number 38-6092077

Form 990, Part I, Item K, Other Organization Type:
Foundation
Form 990, Part VI, Section A, line 10: REVIEWED AT ANNUAL METING.
Form 990, Part VI, Section C, Line 19: BY REQUEST ONLY. THE ORGANIZATION DOES NOT HAVE A WEBSITE.
Form 990, Part VII Contact Addresses for Officers, Directors, Etc: MOLLY KRAUSS - MARY FREE BED GUILD INC. 235 WEALTHY S.E.
GRAND RAPIDS, MI 49503
ROBERT HAIGHT - HEART OF W. MICH 118 COMMERCE AVE SW  GRAND RAPIDS, MI 495034106
CHERYL POEL BREMER - AMERICAN RED CROSS 1050 FULLER AVE NE GRAND RAPIDS, MI 49503
JAMES A. LENTZ - SALADIN SHRINE TEMPLE 4200 SALADIN DR SE GRAND RAPIDS, MI 49546
BRIAN JAMES - GRAND RAPIDS LODGE #34 233 FULTON ST EAST GRAND RAPIDS, MI 495033270
RICHARD T. HIGGINS - 8643 E. FULTON SE ADA, MI 49301

## **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

Name of the organization WADE E. AND VIOLA SACKNER FOUNDATION C/O MICHAEL J. TAYLOR	Employer identification number 38–6092077
TERESA SCHALL - AMERICAN CANCER SOCIETY 129 JEFFERSON SE	
GRAND RAPIDS, MI 49503	
<u>.</u>	