

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



	uun	
Form	33 U	,

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)

2009
Open to Putatic

خورمو مئس		gi dan Tama wate Garaka	The organization may have to use a copy of this return to satisfy state	reporting requirements.	Open to Public
A	For th	2009	clonder year, or tax year beginning and ending		
В	Chapte 1	Page		D Employer Identific	ation number
_		PES [1806/	WOODWIED DEEN COURSE THE	i	
늗				- 20-21	374107
۲					
F			WOOD WIT CHIEF DAYING		
F					362-4242
F		E	City or town, state or country, and ZIP + 4 TROY, MI 48084	G Grass recespts \$	520,862.
_	cou		arms and address of principal officer:GREC RASSEL	H(a) is this a group to	
		90	0 WILSHIRE DRIVE, TROY, MI 48084	for officer?	ON XX cov
_	Y			H(b) Are all affiliates inci	
÷	Wahai	empi su	WW. WOODWARDDREAMCRUISE. COM		list. (see instructions)
			~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~	H(c) Group exemption	
_	n I			er of formation: 1996] M	State of logal comicile, M.T.
				D AM CORLEGE	CD CL MOD
& Governance	' '	VIST	escribe the organization's mission or most significant activities: TO PROMOT BILITY OF THE WOODWARD AVENUE CORRIDOR, H	E AND CREATE	GREATER
80	2				
ğ	3	Aumhor	no box Lulif the organization discontinued its operations or disposed of mo	ea than 25% of its not ex	
ઢ	4	Number	of voting members of the governing body (Part VI, line 1a)		15
-		Total	of independent voting members of the governing body (Part VI, line 1b)		0
Activities	5	TOTAL TIL	mber of employees (Part V, kins 2s)	5	0
₹.	B	TOTAL OU	niber of voluntoers (estimate if necessary)	6	0
₹	7a	் அவி ப	oss unrelated business revenue from Part VIII, column (C), line 12	78	0.
	<u> </u>	Net unn	tated business taxable income from Form 990-T, Ine 34		0.
	I _		<u> </u>	Prior Year	Current Year
3	B		Rions and grants (Part VIII, line th)	422,241.	456,513.
Revonue	9	Program	I service revenue (Part VIII, line 2g)		
ź		investm	ent income (Part VIII, column (A), lines 3, 4, and 7d)	208.	65.
_	11	Other re	venue (Parl VIII, column (A), lines 5, 6d, Bc, 9c, 10c, and 11e)	-8,625.	59,242.
	12		erue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	413,824.	515,920.
	เบ	Grants (	nd similar amounts paid (Part DC, column (A), lines 1-3)		
	14		peld to or for mombers (Part IX, column (A), lina 4)		
8	15	Sataries	other compensation, employee benefits (Part IX, column (A), thes 5-10)		
Exponses	160	Professi	other compensation, employee benefits (Part IX, column (A), thes 5-10)  onel fundralsing fees (Part IX, column (A), line 11e)  idralsing expenses (Part IX, column (D), line 25)  49,936.		
ğ	Ь	Total fur	idralsing expenses (Part IX. column (D), line 25)	2002年1900年1900年1	2000年11日 ·
w	} 77	Cities ex	penses (Pert IX. column (A), lines 11e-11d, 11f-24f)	445,004.	518,859.
	18	Total ex	pardes. Add lines 13-17 (must equal Part IX, column (A), line 25)	445,004.	518,859.
	19	Revenue	less expenses. Subtract line 18 from line 12	-31,180.	-2,939.
声즶	1			Seginning of Current Year	End of Year
82	20	Total As:	iets (Part X, Ime 16)	134,562.	131,623.
35	21		etities (Part X. line 26)		
Yet Assets or	22	Net asse	its or fund balances. Subtrect line 21 from line 20	134,562.	131,623.
RE	mili.	Sign	ature Block		
		Unde on	estim of perjury. I declary first I have exprinted fills return, broboths accompanying considerate and estimates the Declaration of phaseser (offer their officer) is based on all information of which prepare has any knowledg	s, and to the pest of my knowledg	end belief, it is true, correct,
			the state of the s	<del></del>	
<b>31</b> gu	7	<b>.</b>		1	
Hor	6	<b>₽</b> 5q	nature of officer	Date	
		<b> </b> _			
		Ty	o or print name and little		
Paid		Prepares			's Identifying runder rections
Pres		slanstu	1/3,/11	mptoyed >	015696/
	Only	1000 PM	CHARLER & CHARLER, P.C., CPAS	JEIN ►	·
J. 6	J.111	450 mm.	6443 INKSTER ROAD, SUITE 290		<del></del>
_		ZP . ·	BLOOMFIELD HILLS, MI 48301	Phone no. ► ( 2	48)855-0510
Me	the [	AS dbcu	so this return with the preparer shown above? (see instructions)		X Yes No
93>0	01 004	11-13 U	A For Privacy Act and Paperwork Reduction Act Notice, see the superate in	structions,	Form 990 (2009)

SEE SCHEDULE O FOR ORGANIZATION MISSION STATEMENT CONTINUATION

Form	990 (2009) WOODWARD DREAM CRUISE	, INC.	38-3874107 Pag	₉₀ 2
Pai	t III Statement of Program Service Accomplishmen	ts		
1	Briefly describe the organization's mission: TO PROMOTE AND CREATE GREATER VISI CORRIDOR, HIGHLIGHTING ITS BUSINES			_
	THE PARTICIPATING CITIES OF BERKLE PLEASANT RIDGE, PONTIAC AND ROYAL	Y, FERNDALE, HU		
2	Did the organization undertake any significant program services duri		to di an	
•	the prior Form 990 or 990-EZ?	- •	Yes  X	No
3	Did the organization cease conducting, or make significant changes if "Yes," describe these changes on Schedule D.	in how it conducts, any progra	ım services?     Yes   X	No
4	Describe the exempt ourpose achievements for each of the organiza	tion's three largest program s	arvices by expenses.	
	Section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1)	trusts are required to report th	e amount of grants and	
	affocations to others, the total expenses, and reverue, if any for oac	h program service reported.	·	
43	(Code: )(Expenses 397,538 - Inclu WOODWARD DREAM CRUISE, INC. ("THE ORGANIZED TO PROMOTE AND CREATE GR	WDC") IS A NOT-		7. } ON
	AVENUE CORRIDOR, HIGHLIGHTING ITS			
	COMMUNITIES IN THE PARTICIPATING C	OMMUNITIES OF B	ERKLEY BLOOMFIELD	
	HILLS, BLOOMFIELD TOWNSHIP, FERNDA	LE. HUNTINGTON	WOODS PLEASANT RIDGE	<u> </u>
	PONTIAC AND ROYAL OAK. THE FOCUS	OF THE WDC IS T	O COORDINATE AN ANNU	AT.
	EVENT IN AUGUST WHICH CELEBRATES T	HE AUTOMOBILE C	RUISING ERA OF THE	
	1950'S AND 1960'S.			
	EFFECTIVE SEPTEMBER 30,2009, THE W	DC IS A PUBLIC	CHARITY UNDER SECTION	N
	501(C)3.			
46	(Code ) (Expenses S inclu	ding grants of \$	) (Revenue \$	<del></del> )
			_	
		·		
4ç	(Code: ) (Expenses \$ Inclu	ding grants of S	)(Revenue \$	)
			<del></del>	
		<del></del>		
	······································			
4d	Other program services. (Describe in Schedule O.)			
	(Expenses \$ Including grants of \$	) (Revenue \$	<b>)</b>	
40	Total program service expenses ►s 397,538.			
62 <b>2</b> 000			Farm 990 (2	(600)
C) DA				•
_		3		

	990 (2009) WOODWARD DREAM CRUISE, INC. 38-3874	107	P	C eps
Par	IV Checklist of Required Schedules			
			Yes	No
1	is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?		x	
_	If "Yes," complete Schedulc A		X	
	Is the arganization required to complete Schedule B, Schodule of Contributors?	2	•	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for	3		х
a	public office? If "Yes," complete Schedule C. Part I  Section 501(c)(3) organizations. Did the organization engage in lobbying activities? If "Yes," complete Schedule C, Part II	4		X
5	Section 501(c)(4), 501(c)(5), and 501(c)(6) organizations. Is the organization subject to the section 6033(e) notice and			<del></del> -
•	reporting requirement and proxy tax? If "Yes," complete Schedule C, Part III	5		
6	Did the organization maintain any donor advised funds or any similar funds or accounts where donors have the right to			
•	provide advice on the distribution or investment of amounts in such funds or accounts? If 'Yes,' complete Schedule D, Part I	6		х
7	Did the organization receive or hold a conscrivation easement, including easements to preserve open space,	-		一
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		X
8	Did the organization maintain collections of works of art. historical treasures, or other similar assets? If "Yes," complete			
	Schedule O, Part III	8	Ì	Х
9	Did the organization report an amount in Part X, line 21; serve as a custodian for amounts not listed in Part X; or provide		$\overline{}$	
	credit counseling, debt management, credit ropals, or debt negotiation services? If "Yes," complete Schedule D. Part IV	9	ļ	<u> </u>
10	Did the organization, directly or through a related organization, hold assets in term, permanent, or quasi-ondownents?  If "Yes," complete Schedule D. Part V	10		x
11	Is the organization's answer to any of the following questions "Yes"? If so, complete Schedule D, Parts VI, VII, IX, or X			
	as applicable	11	ļ	x
•	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D.		$\vdash$	<del>-</del>
	Pan VI.	1	1	1
•	Did the organization report an amount for invastments - other securities in Pert X, line 12 that is 5% or more of its total	1	1	]
	assets reported in Part X, line 167 If "Yes," complete Schedule D, Part VII.	Ì	1	
•	Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more of its total	ì	1	1
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII.		1	i
•	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 167 if "Yes," complete Schedule O. Part IX.			{
•	Did the organization report an amount for other liabilities in Part X, hee 257 if "Yes," complete Schedule D. Part X	i		1
•	-Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses		1	l
	the organization's liability for uncertain tax positions under FIN 48? If "Yes," complete Schedule D. Part X.	l	l	
12	Did the organization obtain separate, independent audited financel statements for the tax year? If "Yes," complete Schedule D. Parts XI, XII, and XIII.	12	x	
12A	Was the organization included in consolidated, independent audited financial statements for the tax year?			
	II "Ycs," completing Schedule D, Parts XI, XII. and XIII is optional X	<u> </u>	<u> </u>	Ĺ
13	Is the organization a school described in section 170(b)(1)(A)(ii)? // "Yes," complete Schedule E	13		X
	Did the organization maintain an office, employees, or agents outside of the United States?	143	<u> </u>	X
ь	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,		Ì	l
	and program service activities outside the United States? If "Yes," complete Schedule F, Part I	146	<b>├</b>	X
15	Did the organization report on Part IX. column (A), time 3, more than \$5,000 of grants or assistance to any organization	١	ļ	l .
	or entity incated masine the United States* If "Yes," complete Schedule I' Pan II	15	┼	X
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals libeated dutgide the United States? If 'Yes,' complete Schedule F, Part III	16		x
17	tocated dutside the United States? If 'Yes,' complete Schedule F, Part III  Did the organization report a total of more than \$15,000 of expenses for professional fundralsing services on Part IX.	<del>  ""</del>	$\vdash$	<del>  ^</del>
••	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	17	1	x
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines	<b> </b>	1	† <del></del>
-	1c and 8a7 If "Yes," complete Schedule G, Pert II	18	1	X
19	Did the organization report more than \$15,000 of gross income from garning activities on Part VIII, line 9a? if "Yes,"		1	1
	complete Schedule G, Pert III	19		X
20	Oid the organization operate one or more hospitals? If "Yes," complete Schedule H	20		X
		Form	990	(2009)

09430131 762748 3019 2009.05020 WOODWARD DREAM CRUISE, INC. 3019___1

641.840

, For	n 990 (2009) WOODWARD DREAM CRUISE, INC. 38-3874	107	P	agg 4
Pa	rt IV Checklist of Required Schedules (continued)			
		$\Gamma$	Yes	No
21.	Did the organization report more than \$5,000 of grants and other assistance to governments and organizations in the	ł		1
	United States or Part IX, column (A), line 17 II "Yes," complete Schedule I, Parts I and II	21	ļ	X
22				
	column (A). Ene 2? If "Yes," complete Schedule I, Parts I and III	22		х
23	Did the organization enswer "Yes" to Part VII. Section A, line 3, 4, or 5 about compensation of the organization's current			
	and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete	1	\	1
	Schedule J	23	1	X
242	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 "YCs." answer lines 24b through 24d and complete	(		Į
	Schedule K. If *No*, go to linc 25	243	1	Х
٠	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	245		
	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	İ	]
c	Did the organization act as an 'on behalf of' issuer for bonds outstanding at any time during the year?	240	1	
	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a			
	disqualified person during the year? If "Yes." complete Schedule L. Part I	25a	1	Х
t	Is the organization aware that it ongaged in an excess benefit transaction with a disqualified person in a prior year, and		<b>†</b>	
	that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete		i	
	Schedule L. Part I	25b	•	X
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified		1	
	person outstanding as of the end of the organization's tax year? If "Yes" complete Schedule L. Part II	26	ļ	x
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial			i
	contributor, or a grant selection committee member, or to a person related to such an individual? If "Yes," complete	1	ł	1
	Schodule I., Part III	27	1	X
28	Was the organization a party to a business transaction with one of the following parties, (see Schedule L, Part IV			
	instructions for applicable filing thresholds, conditions, and exceptions);	1	1	}
•	A current or former officer, director, trustee, or key employee? If "Yos," complete Schedule L, Pan IV	28a	1	X
ŧ	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L. Part IV	28b	1	X
•	An entity of which a current or former officer, director, trustee, or key employee of the organization (or a family member) was		1	1
	an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c	ļ.	X
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29	<b>1</b> –	X
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation			
	contributions? If "Yes," complete Schedule M	30	1	X
31	Did the organization liquidate, terminate, or dissolve and cease operations?			
	If "Yes," complete Schedult N. Pari I	31	1	X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its not assots? If "Yes," complete			1
	Schedule N, Part II	32	i _	X
33	Old the organization own 100% of an entity disregarded as separate from the organization under Regulations			1
	sections 301.7701-2 and 301,7701-3? If "Yes," complete Schedule R, Part I	33		X
34	Was the organization related to any tax-exempt or taxable entity?	Г	<u> </u>	
	If "Yes," complete Schedule R. Parts II, III, IV, and V, line 1	34	L	X
35	is any related organization a controlled entity within the meaning of section 512(b)(13)?	Г		
	If "Yes," complete Schedule R, Part V, line 2	35	<u> </u>	X
36	Section 501(c)(3) organizations. Indithe organization make any transfers to an exempt non-charitable related organization?			
	If "Yes," complete Schedule P. Part V. Inc 2	38		X
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			1
	and that is treated as a partnership for federal income tax purposes? If Yos," complete Schedule R, Pan VI	37		X
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 197	1	)	1
	Note. All Form 990 lifers are required to complete Schedule O.	38	ــِــِــ	X
		_	ann.	

Form 990 (2009)

932004 02-04-10

09430131 762748 3019

2009.05020 WOODWARD DREAM CRUISE, INC. 3019___1

691.840

Form	990 (2009) WOODWARD DREAM CRUISE, INC. 38-3874	107	Pa	ge 5
Par				
			Yes	No
18	Enter the number reported in Box 3 of Form 1096, Annual Summary and Transmittat of			
	U.S. Information Returns, Enter-0-11 not applicable	- 1	- 1	
	Finter the number of Forms W-2G included in fine 1s. Enter O if not applicable 1b 0	- {	ļ	
c	Did the arganization comply with backup withholding rules for reportable payments to vendors and reportable gaming	- 1	- 1	
	(gambling) winnings to prize winners?	10		
<b>2</b> ə	Enter the number of employees reported on Form W-3. Transmittel of Wage and Tax Statements,	- 1	1	
	filed for the calendar year ending with or within the year covered by this return	- 1	1	
b	If at least one is reported on fine 2a, did the organization file all required federal employment tax returns?	20		
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to 8-188 this return. (see instructions)	1	1	
3ø	Did the organization have unrelated business gross Incomo of \$1,000 or more during the year covered by this return?	Эа		<u> </u>
ь	If "Yes," has 4 lited a Form 990-T for this year? If "No." provide an explanation in Schedule O	35	$-\Box$	
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a			
	financial account in a foreign country (such as a bank account, securities account, or other financial account)?	48		X
ь	If "Yes," enter the name of the foreign country:			
	See the instructions for exceptions and fiting requirements for Form TD F 90-22.1, Report of Foreign Rank and			
	Financial Accounts.		1	
Sa	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5e_		X
ь	Did any texable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b_		X
Ç	If "Yes," to line 5a or 5b, did the organization file Form 8886-T. Disclosure by Tax-Exempt Entity Regarding Prohibited			
	Tax Shelter Transaction?	5c_		
Ба	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit			Ī
	any contributions that were not tax deductible?	63		X
ь	If "Yos," did the organization include with every solicitation an express statement that such contributions or gifts			
	were not tax deductible?	6ь_		
7	Organizations that may receive deductible contributions under section 170(c).			
э	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services			
	provided to the payor?	7a_		X
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7ъ		
c	Did the organization sell, exchange, or otherwise dispose of langible personal property for which it was required			
-	to the Form 82827	7¢		X
ರ	if "Yes," indicate the number of Forms 8282 filed during the year			
c	Dig the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal			
	banelit contract?	7e		
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	77		L
9	For all contributions of qualified intellectual property, did the organization file Form 8899 as required?	79	<u> </u>	L
h	For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as required?	7h		ļ
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the			1
	supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings		1	1
	at any time during the year?	<u>B</u>	<u> </u>	
9	Sponsoring organizations maintaining donor advised funds.		1	1
Ð	Did the organization make any taxable distributions under section 4966?	9a		<b>.</b>
b	Did the organization make a distribution to a donor, donor advisor, or related person?	96	ļ	<del> </del>
10	Section 501(c)[7) organizations. Enter:		ļ	l
a	Indiation fees and capital contributions included on Part VIII, line 12		i	ĺ
ь	Gross recempts, included on Form 990, Part VIII, line 12 for public use of club facilities	l	١.	l
11	Section 501(c)(12) organizations. Enter:		<b>\</b>	<b>!</b>
	Gross income from mambers or shareholders 11a	l	1	
b	Gross Income from other sources (Do not net amounts due or paid to other sources against		[	ĺ
	amounts due or received from them.)	ł	1	1
	Section 4947(a)(1) non-exempt charitable trusts. Is the organization (ling Form 990 in lieu of Form 1041?	12a	<del> </del>	<b> </b> -
	If "Yes," ontor the amount of tax exempt interest received or secrued during the year	<u> </u>	000	1255
		FOIT	990	[ <i>7</i> [7]]

	990 (2009) WOODWARD DREAM CRUISE, INC. 38-3874	107	P	age 6
Par	1 VI Governance, Management, and Disclosure For each "Yes" response to large 2 through 7b below, and for a	'No" n	cspon	sc
	to time 8e, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions.		•	
Sec	tion A. Governing Body and Management			
			Yes	No
19	Enter the number of voting members of the governing body	$\neg \neg$	, 40	
ь	For the subsect of the man have the same fact and the	1		i
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other	( )		1
_	·	_	- 1	-
•	officer, director, trustee, or key employee?	-Z		X
3	Did the organization delegate control over management duties customanly performed by or under the direct supervision			
_	of officers, directors or trustees, or key employees to a management company or other person?	]		X
4	Did the organization make any significant changes to its organizational documents since the prior Form 990 was filed?	٩		X
5	Did the organization become aware during the year of a material diversion of the organization's assets?	5		X
6	Does the organization have members or stackholders?	6		X
73	Does the organization have members, stockholders, or other persons who may elect one or more members of the			
	governing body?	7a		Х
ь	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 hald or written actions undertaken during the year			
	by the following:			
а	The governing body?	ا 👡 ا	X	1
	Each committee with guilhouts to get an hobbit of the agreement had a	82		├──
a		8b	Х	
7	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the			l
	organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		<u>X</u>
<u>26c</u>	tion B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)			
			89 Y	No
	Does the organization have local chapters, branchos, or affillates?	100		<u>x</u>
ь	If "Yes," does the organization have written policies and procedures governing the activities of such chapters, affiliates,			
	and branches to ensure their operations are consistent with those of the organization?	10b	i	1
11	Has the organization provided a copy of this Form 990 to all members of its governing body before filing the form?	11		X
11A	Describe in Schedule O the process, if any, used by the organization to review this Form 990.			
125	Does the amarastian have a written conflict of interest policy? If the time to	12a		Х
b	Are officers, directors or trustees, and key employees required to disclose annually interests that could give risc	<u>'-</u> -		<del></del> -
	to confirte?	ا 📖		
c	Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe	120		<del> </del>
_		l l		l
13	on Schedule O how this is done  Does the organization have a written whistleblower policy?	12c		35
14		13		X
	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	1 1		ł
	consens, comparability data, and contemporaneous substantiation of the deliberation and decision?			ĺ
ð	The organization's CEO, Executive Director, or top management official	15a		X
ь	Other officers or key employees of the organization	156		X
	it Yas' to line 153 or 150, describe the process in Schedule O. (See instructions.)			$\Box$
165	Did the organization invest in, contributo assots to, or participate in a joint venture or similar arrangement with a			ĺ
	taxable entity during the year?	160	į	X
ь	If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate its participation			
	in joint vonture arrangements under applicable federal tax law, and taken steps to safeguard the organization's			İ
	exempt status with respect to such arrangements?	16b		i
Sec	tion C. Disclosure	100		
17	List the states with which a copy of this Form 990 is required to be filed NONE			
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available	<del>-</del>		
	public inspection, Indicate how you make these available Check all that apply	tor		
10				
19	Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of interest policy, a	enst br	ncial	
~	statements available to the cubic.			
20	State the name, physical address, and telephone number of the person who possesses the books and records of the organiza	tion, 🕨	·	
	SMZ ADVERTISING - 248-362-4242			
	900 WILSHIRE DRIVE, SUITE 102, TROY, MI 48084			
		Ferm	990 (	2009)

	•		
E	990	ronner	

WOODWARD DREAM CRUISE, INC.

38-3874107

Page 7

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

Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

to Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year. Use Schedule J-2 if additional space is needed.

List all of the organization's current officers, directors, trustices (whether individuals or organizations), regardless of amount of compensation, Enter -0- in columns (D), (E), and (F) if no compensation was paid.

• I ist all of the organization's current key employees. See instructions for definition of "key employee."

• List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (80x 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 compansated employees; and former such persons. (X) Chark this h

(A) Chack this box if the organization did no	(8)			(0	21		(0)	(E)	(F)
Name and Title	Average	١.,		Pos			 eldanaceR	Reportable	Estimatod
	hours per week	nendia zuter statut	C PRINTING	all the		המי ווונישטלוני ונלופ המי מאיז	compensation from the organization (NY-2/1099-MISC)	compensation from related organizations (W-2/1099-MISC)	amount of other componsation from the organization and related organizations
GREG RASSEL PRESIDENT							0.	0.	0
JOHN VAN OPHEM SECRETARY							0.	0.	0
LESLIE HELWIG TREASURER							0.	0.	0
· · · · · · · · · · · · · · · · · · ·									 
<del></del>									
·									

09430131 762748 3019

2009.05020 WOODWARD DREAM CRUISE, INC. 3019___1

WOODWARD (8005) OEE mo-									38-38	74107	<u> </u>	age 8
Part VII Section A. Officers, Directors, Tr	ustees, Key E	mpl	oyee	9, 0	nd I	High	e <b>5</b> 1	Compensated Employ	rees (continued)			
(A) Name and trile	(8) Average			)) Pos	C) Nion	,		(D) Reportable	(E) Reportable		(F) stimate	
	haus pa waak	ני אביז בינוות כופות	711.4:147.53¢	3,47		Popular manufactura	Ϊ	compensation from the organization (W-2/1099-MISC)	compensation from related organizations (W-2/1099-MIS)	con con on ar	mount other mponsa from the ganizet nd relat ganizet	itlor c ion ed
		<u> </u>					_			_ _		
	ļ	4_			L	L	L			_		
		1		_	L	<u> </u>	L					
		1		_	L	_	_			_		
*		+	-	_	_	H	_		}			
	-	+	-	_	-		-					
	-	╁	-	-	-		_					
	<del> </del>	+-				$\vdash$	-			+		
		†		$\vdash$	-		-					
1b Total	not limited to t	hose	llete		L	<u></u>		0 .	COD in annual blo	0.		
componsation from the organization					_				7.000 III I BOITEDA	<u> </u>	<del>,</del>	
3 Did the organization list any former officer			e, ke	v en	oʻqqı	yœ.	or t	nighost compensated e	mployee on		Yes	2
line 1a? If "Yes." complete Schedule J for a For any individual listed on line 1a. Is the s	um of reponat	blo ci	שחשט	ፀባኤ:	ation	า มกต	io t	her compensation from	the organization		<del>                                     </del>	-
and related organizations greater than \$15 Did any person listed on line 1a receive or the organization? If "Yes," complete School	accrue compe	ensat	ion f	rom	any	יחט י	fafs	ed organization for sen	rices rendered to	4	<del> </del>	)     
Section B. Independent Contractors										··		<u>_</u> _
1 Complete this table for your five highest of the organization. NONE	ompenseted in	idept	ende	ent c	conti	ractu	ors t	hat received more than	\$100,000 of com	penaetion	from	
(A) Name and business	s address	<u>.</u>						(8) Description of s	services		(C) ensatio	n
							_					
							4					
	·						4					_
							-{					
2 Total number of Independent contractors \$100,000 in componenting from the area		not E	mute	d to			5100	above) who received n	nore then			_
\$100,000 in compensation from the organ						Ď	_	, abovo, www.readvas.		Foπ	, <del>99</del> 0 (	20

				M CRUISE,	INC.		38-3874	107 Page 9
Pa	rt VI	II Statement of Revenu	Je					
	·				(A) Total revenue	(B) Related or oxompt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512. 513, cr 514
Contributions, gifts, grants and other similar amounts		Federated campaigns				İ		
Be			16			l		ĺ
5 2	•	Fundraising events	. 1c			]		1
0,5	C	Related organizations	1d					
흕틞		Government grants (contribution				{		
호텔	•	All other contributions, gifts, grants,		456 613				Į
58		similar amounts not included above		456,613.		į		ļ
55		Monush controutions included in three to		<del></del>	456 613	}		Ì
<del></del>		Total. Add lines 1a 1f	<del> </del>		456,613.	<del></del>		
_				Busmess Code		ļ		ļ
Program Service Hevenue	2 3			<del> </del>				
훘쁼	t			<u> </u>		ļ_ <b>—</b>		<b> </b>
E	9			<del></del>		\		<b></b>
چچ		<u> </u>		<del></del>	·		<del></del>	
2	•	All other program service reveni		· · · · · · · ·	<del></del>			<del></del>
- 1		<b>-</b>				<del></del>		<del> </del> -
-	3	Investment Income (Including d	hidaada intaa					<del></del>
1	_	Other similar amounts)	•		65.	65.		
	4	Income from Investment of tax-						
- 1	5	Royalties	•	_	· · · · · · · · · · · · · · · · · · ·	<del></del>		<del> </del>
	-		(I) Real	(ii) Personal	<del></del>	<del> </del>		
	6 a	Gross Rents	(4	137.0.33.1.4	1	}		
1	t			<del></del>		<b>\</b>		Í
	c							1
į	c	·						İ
	7 a	Gross amount from sales of	(i) Securities	(ii) Other				<del></del>
- 1		assets other than inventory				ĺ		
1	t	Loss: cost or other basis				\ \		}
- 1		and sales expenses		]				
ļ	c	Gain or (foss)			i	<b>!</b>		
}	c	Net gain or (loss)				<u> </u>		
اع	8 a	Gross Income from fundraising	events (not					
<b>1</b>		including \$	of	<b>1</b>		}		ţ
Revenue		contributions reported on line 1	c). See	1 1	į			
_ = .	_	Part IV, line 18	9			]		ĺ
5			Þ			:	•	
		Net income or (loss) from fundra	-	<u></u>	·	L		
- }	9 3	Gross income from garning activ		} {		1		}
- 1		Part IV, fine 19	я			[		1
l		Less: direct expenses	b			l l		l
l		Net income or (loss) from gamin		r		<del>                                     </del>	<del></del>	ļ
ı	.o a	Gross sales of inventory, less re		69,760.		}		ł
1		and allowances	eb			<b>\</b>		<b>!</b>
		Net income or (loss) from sales		7,270.	59,242.	59,242.		ł
t		Miscellaneous Revenuc		Business Code	37,476.	1,242.		<del> </del>
t	11 8					]		j
	ь			<del>                                     </del>		<del> </del> <del> </del>		
{	c			1		<del>                                     </del>		<del> </del>
1	d	All other revenue				<del> </del>		<del> </del>
	c	***** * * * * * * * * * * * * * * * *				<del></del>		<del></del>
	12	Total revenue. See instructions.			515,920.	59,307.	0.	0.
esiam Susten	10							Farm 990 (2009)

09430131 762748 3019

10 2009.05020 WOODWARD DREAM CRUISE, INC. 3019___1

84B. 169

Form 990 (2009)

WOODWARD DREAM CRUISE, INC.

38 3874107 Page 10

Part IX | Statement of Functional Expenses

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

	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	Total expenses	(B) Program service expenses	(C) Management and general expenses	(0) Fundraising expenses
1					
_	organizations in the U.S. See Part IV, line 21				
2		j	į	1	
_	the U.S. See Part IV, Ime 22	<del></del>			
3	Grants and other assistance to governments,	j	İ	j	
	organizations, and individuals outside the U.S.			1	
_	See Part IV, Incs 15 and 16				
4 5	Benefits paid to or for members	<del></del>	<del></del>	<del></del>	
,	trustees, and key amployees		į,	į.	
6	Compensation not included above, to disqualified	<del></del>		<del></del>	
•	persons (as defined under section 4958(I)(1)) and	į.		İ	
	persons described in section 4958(c)(3)(B)		j		
7	Other salaries and wages	<del></del>	<del></del>	<del></del>	
8	Pension plan coninbutions (Include section 401(k)				
	and section 403(b) employer contributions)	ļ	İ	f	
9	Other employee benefits				<del></del>
10			<del></del>	<del></del>	
11	Fees for services (non employees):	<del></del>		<del></del>	
	Management	84,000.	28,000.	36,960.	19.040
ь	Lacal	47,073.	7.061.	14,122.	25,890
	Accounting	5,500.	-,,002.	5,500.	03,070
	1				
	Professional fundraising services. See Part IV. line 17		<del></del>		<del></del>
1	Investment management fees		<del></del> -		
9	Other		<del></del>	<del></del>	<del></del>
•	- Advertising and promotion	13,435.	13,435.		<del></del>
13	Office expenses	2,803.		2,803.	<del></del>
14	Information technology	12,515.	5,006.	2,503.	5,006
15	Royattles				
16	Occupancy				
17	Travel	<del></del>			
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials	i			
19	Conferences, conventions, and meetings	2,804.	2,804.		
20	Interest				~ <del></del> _
21	Payments to affiliates				
22	Depreciation depletion, and amortization				
23	Insurance	9,497.		9,497.	
24	Other expenses, llemize expenses not covared above. (Expenses grouped together and labeled miscollaneous may not exceed 5% of total expenses shown on line 25 below.)				
В	SPONSORSHIP EXPENSE	225,212.	225,212.		
ь	SPECIAL EVENT EXPENSE	83.789.	83,789.	<del></del>	
-	SANITATION EQUIPMENT RE	32,231.	32,231.	<del></del>	<del></del>
ď					
e			~		
1	All other expenses				
25	Total functional expenses, Add hines 1 through 241	518,859.	397,538.	71,385.	49,936
26	Joint costs. Check here L II following		<del></del>		
	SOP 98-2. Complete this line only if the organization	ļ			
	• • • • •	1	1	1	
	reported in column (B) joint costs from a combined	1	i	i	

Form 990 (2009)

WOODWARD DREAM CRUISE, INC. Form 990 (2009)
Part X Balance Sheet

38-3874107 Page 11

			(A) Beginning of year		(8) End of year
	1	Cash - non-interest-bearing		1	
Į	2	Savings and temporary cash investments	134,562.	2	131,623.
ĺ	3	Pludges and grants receivable, not		3	
ļ	4	Accounts receivable, net		4	
[	5	Receivables from current and former officers, directors, trustees, key			
- 1		employees, and highest componsated employees. Complete Part II			
ł		of Schedule L.		5	
- 1	6	Receivables from other disqualified persons (as defined under section			
- 1		4958(I)(1)) and persons described in section 4958(c)(3)(B). Complete			
		Part II of Schedule L		6	
2	7	Notes and loans receivable, net		7	
Assets	В	Inventories for sale or use		8	
₹	9	Prepaid exponses and deferred charges		9	
- 1	10a	Land, buildings, and equipment: cost or other	<del></del>	-	
- 1		besis. Complete Part VI of Schedule D 103			
l	ь	Less. accumulated depreciation 10b		10c	
ŧ	11	Investments - publicly traded securities		11	
ſ	12	Invostments - other securdies. See Part IV, line 11	·	12	
- 1	13	Investments program-related See Part IV, line 11		13	
1	14	intargible assets		14	
1	15	Other assets. See Part IV, line 11		15	
Į	16	Total assets. Add lines 1 through 15 (must equal line 34)	134,562.	16	131,623
一	17	Accounts payable and accrued expenses		17	
1	18	Grants payable		18	
- (	19	Deferred revenue		19	
	20	Tax-exempt bond labilities		20	
• {	21	Escrow or custodial account Rability, Complete Part IV of Schedule D		21	
2	22	Payables to current and former officers, directors, trustees, key employees.			
abilitles		highest compensated employees, and disqualitied persons. Complete Part II			
- I		of Schedule L	İ	22	
- 1	23	Secured mortgages and notes payable to unrelated third parties		23	
- 1	<b>Z</b> 4	Unsecured notes and loans payable to unrelated third parties		24	
- 1	25	Other liabilities. Complete Part X of Schedule D		25	
	26	Total fiabilities. Add lines 17 through 25	0.		0
		Organizations that follow SFAS 117, check here > [X] and complete			
8		lines 27 through 29, and lines 33 and 34.		' 1	
und Balances	27	Unrestricted not assets	134,562.	27	131,623
<b>6</b> (	28	Temporarily restricted not assets		28	
9	29	Permanently restricted net assets		29	
ات		Organizations that do not follow SFAS 117, check here L and			
		complete lines 30 through 34.		1	
\$	30	Capital stock or trust principal, or current funds		30	
ا ۋ	31	Paid-n or capital surplus, or land, building, or equipment fund		31	
flet Assuts or	32	Retained partitions, endowment, som mulated increme, or other funds		32	
ž	33	Total not assets or fund balances	134.562.	33	131,623
	34	Total Estifices and res assets/fund balances	134.562.	34	131,623

Form 990 (2009)

613011 03-04 10

			Yes	No
1	Accounting method used to prepare the Form 990: [X] Cash   Accrual   Other			
	If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O.	1		ĺ
28	Were the organization's financial statements compiled or reviewed by an Independent accountant?	2a	l	X
ь	Were the organization's financial statements audited by an independent accountant?	20	Х	
C	If "Yes" to fine 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit,			Г
	review, or compliation of its financial statements and selection of an independent accountant?	20	X	1
	If the organization changed either its eversight process or selection process during the tax year, explain in Schedule O.			
ď	If "Yes" to line Za or Zb, check a box below to indicate whether the linancial statements for the year were issued on a	1		1
	consolidated basis, separate basis, or both:		}	1
	[X] Separate basis     Consolidated basis     Both consolidated and separate basis			ļ
35	As a result of a federal award, was the organization required to undergo an audit or audits as sot forth in the Single Audit		<b>,</b>	
	Act and OMR Circular A 133?	3.0	l	X
ь	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit			
	or audits, explain why in Schedule O and describe any steps taken to undergo such audits.	Эъ	1	1

\$37012 02-04-10

SCHEDULE A (Form 990 or 990-EZ)

Department of the Treesury Internal Revenue Service

### **Public Charity Status and Public Support**

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.

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

ONCH NO. 1545-COAT

2009

Open to Public Inspection

A school described in section 170(b)(1)(A)(ii). (Attach Schedule E.)  A hospital or a cooperative hospital scribed organization described in section 170(b)(1)(A)(iii). Enter the hospital's name. city, and state:  An enginal research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name. city, and state:  An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iii). (Complete Part II.)  A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v).  A norganization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(v). (Complete Part II.)  A community trust described in section 170(b)(1)(A)(v). (Complete Part III.)  An organization that normally receives: (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exampt functions - subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment incume and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975.  See section 509(a)(2). (Complete Part III.)  An organization organized and operated exclusively to test for public safety, See section 509(a)(4).  An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organization described in section 509(a)(1) or sociton 509(a)(2). See section 509(a)(3). Check the box that describes the type of supporting organization and complete lines 11e through 11h.  a	lame of t	he organizati							E	mployer	identification	ոսաթեւ	
tel grantston is not a physic foundation because it is: For lives 1 through 11, chock only one box.]  A school described in section 1700k 1(AX)(ii). (Attach Schedule E.)  A hospital or a coperative hospital scycle or grantstation described in section 1700k 1(AX)(iii).  A hospital or a coperative hospital scycle or grantstation described in section 1700k 1(AX)(iii).  A negative research organization operated in confunction with a hospital described in section 1700k 1(AX)(iii).  A negatization operated for the benefit of a college or unkersity owned or operated by a governmental unit described in section 1700k 1(IAX)(iii). (Complete Part III)  A norganization operated growment or governmental unit described in section 1700k 1(IAX)(iii). (Complete Part III)  A norganization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 1700k 1(IAX)(iii). (Complete Part III)  A norganization that normally receives: (1) more than 33 1/39/ of 4s support from contributions, membership lees, and grass receipts from activities related to its scentific unit receiptions, and (2) no more than 33 1/3% of 4s support from grass investment incurre and unrelated business trabble income (less section 511 tat) from businesses acquired by the organization after June 30, 1975. See section 509(3)(2). Complete Part III of the scenible street is section 509(3)(2). Complete Part III of the scenible street is section 509(3) (2). Complete Part III of the scenible street is section 509(3) (3). Check the box that described in section 509(3) (3). Check the box that described the type of supported prophication and completes lines 1 in through 111.  A norganization organized and operated exclusively for the bonefiel of the particularies described in 509(3)(1) or section 509(3)(2). See section 509(3)(3). Check the box that described in the section 509(3) (3). See section 509(3)(3). Check the box that foundation managers and ordered the control of the supported organization (iii			WOODWAR	D DREAM CRUI	Se, 1	NC.			Ì	3 (	3387410	7	
A church, convention of churches, or association of churches described in section 170(b) 1(A)(ii).  A church described in section 170(b) 1(A)(iii). (Attach Schedule E.)  A hospital on a cooperative hospital storkes organization described in section 170(b) 1(A)(iii).  A medical research organization operated for the benefit of a college of unknown in a hospital described in section 170(b) 1(A)(iii). Enter the hospital's name, city, and state;  An organization operated for the benefit of a college of unknown which is the section 170(b) 1(A)(iii).  An organization operated for the benefit of a college of unknown in the property of unknown in the property of the section 170(b) 1(A)(iii).  A community from the organization and organization that normally receives it in more than 33 1/3% of as support from contributions, membership fees, and gross receipts from activaties related to the exempl functions a subject to entain exceptions, and (2) no more than 33 1/3% of as support from gross investment incurs and unrelated burstness stable income (less section 511 tax) from businesses acquired by the organization and completed exclusively for the benefit of, to add mit the functions of the property of the bord of the benefit of, to add mit the functions of, or to carry out the purposes of one or more publicly supported organizations and completed insent 1et through 11.  An organization organized and operated exclusively for the benefit of, to add mit the functions of, or to carry out the purposes of one or more publicly supported organizations and completed insent 1et through 11.  An organization organized and operated exclusively for the benefit of, to add mit the functions of, or to carry out the purposes of one or more publicly supported organization and completed insent 1et through 11.  An organization organized and operated exclusively for the benefit of the benefit of the public specific organization of the benefit of the benefit of the benefit of the benefit of the benefit of the benefit of the benefit of the bene	Part I	Reason	for Public Char	ity Status (All organi	zations mu	st comple	te this per	1.) See ins	tructions.				
A school described in section 170(b) 11(A)(ii). (Attach Schedule E.)  A notical research organization operated in continution with a hospital described in section 170(b) 11(A)(iii). Enter the hospital's name. city, and state.  A norganization operated for the benefit of a college or unkersity owned or operated by a governmental with described in section 170(b) 11(A)(iii). Enter the hospital's name. city, and state.  A norganization operated for the benefit of a college or unkersity owned or operated by a governmental with described in section 170(b) 11(A)(ii).  A norganization that normally reserves a substantial part of its support from a governmental unit or from the general public described in section 170(b) 11(A)(ii).  A norganization that normally reserves a substantial part of its support from a governmental unit or from the general public described in section 170(b) 11(A)(ii).  A norganization that normally reserves a subject to certain ecophism, and (2) no more than 33 1/3% of its support from contributions, memberathip fees, and gross recepts from activities related to its scenario 170(b) 11(A)(ii).  A norganization approximation operated in section 170(b) 11(A)(iii) and its support from gross investment incurs and unrelated business teaches. Subject to certain ecophism, and (2) no more than 33 1/3% of its support from contributions, memberathip fees, and gross recepts from activities related to its scenario 170(b) 11(A) organization organization approximated accustion 501(a) 11 (a) organization organization organization organization organization organization organization organization organization organization organization organization organization organization organization organization organization organization organization organization organization organization organization organization organization organization organization organization organization organization organization organization organization organization organization organization organization organization organization organization organizat	he oman	ization is not a	private foundation	because it is: (For lines	1 through	11. chock	only one l	oox.)					
A hospital or a cooperative hospital sontee organization described in section 170(b) 1(IA)(iii). Enter the hospital's name.  A hospital research organization operated in conjunction with a hospital described in section 170(b) 1(IA)(iii). Enter the hospital's name.  City, and state.  An organization operated for the benefit of a college or unkcircity owned or operated by a governmental unit described in section 170(b) 1(IA)(iii). Complete Part II.)  A foderal, state, or local government or governmental unit described in section 170(b) 1(IA)(iii). Complete Part II.)  A community frust described in section 170(b) 1(IA)(iii). (Complete Part II.)  A community frust described in section 170(b) 1(IA)(iii). (Complete Part II.)  A community frust described in section 170(b) 1(IA)(iii). (Complete Part II.)  A community frust described in section 170(b) 1(IA)(iii). (Complete Part II.)  An organization than normally receives a subject to certain exceptions, and (2) no more than 33 1/3% of its support from contributions, membership leas, and gross receipts from activities related to its oxempt functions—a subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment incurs and unrelated burstees (1) and the substances activities related to its oxempt functions—a subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment incurs and unrelated burstees (1) and the substances activities related to its oxempt functions and complete III and the substances acquired by the organization related exclusively for the benefit of, to parker than functions of, or to carry out the purposes of one or more publicly supported organization organization described in section 509(a)(i) or socion 509(a)(i).  An organization general and an exception of substances organization substances and complete III in the complete III is a support organization organization organization and complete III is a Type III.  I fly organization from the III is a support organization organization	1 <u>   </u>	A church, co	nvention of churchs	s, or association of chur	ches desc	nbed in so	ction 170	<b>ХРХ 1ХА)</b> (i)	)_				
A medical responsive from operated for conjunction with a hospital disscribed in section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state:  An organization operated for the banefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(ii).  A notice state, or local government or povernmental unit described in section 170(b)(1)(A)(ii).  A norganization that normally receives a substantial cart of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(ii).  A community must described in section 170(b)(1)(A)(ii). (Complete Parl III.)  A community must described in section 170(b)(1)(A)(iii). (Complete Parl III.)  An organization that normally receives: (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from attrivities related to its common function state in the contribution of the support from gross investment income and unrelated business tasable income (less section 511 tax) from businesses acquired by the organization after Aune 30, 1975. See section 509(a)(1) (Complete Parl III)  An organization organized and operated exclusively for the benefit of, to parlow the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or socilon 509(a)(2). See section 509(a)(3). Check the box that describes the type of supporting organization and complete times 1 to through 11th.  a	2 L	A school des	enbed in section 17	/D(b)(1)(A)(ii)_ (Attach Sc	hadule E.)								
city, and state:  An organization operated for the benefit of a collogo or university owned or operated by a governmental with described in section 170(b) (1)(A)(w). (Complete Part II.)  A federal state, or local government or povernmental unith described in section 170(b) (1)(A)(w).  A regularation that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b) (1)(A)(w).  A community inside described in section 170(b) (1)(A)(w).  A community inside described in section 170(b) (1)(A)(w).  A community inside described in section 170(b) (1)(A)(w).  A community inside section 509(a)(1).  A community inside section 509(a)(2).  A community inside section 509(a)(2).  A community inside section 509(a)(2).  A community inside section 509(a)(2).  A community inside section 509(a)(2).  A community inside section 509(a)(2).  A community inside section 509(a)(2).  A community inside section 509(a)(2).  A community inside section 509(a)(2).  A community inside section 509(a)(2).  A community inside section 509(a)(2).  A community inside section 509(a)(2).  A community inside section 509(a)(2).  A community inside section 509(a)(3).  An organization organized and operated exclusively for the benefit of to public safety. See section 509(a)(3).  A community inside section 509(a)(3).  A community inside section 509(a)(3).  A community inside section 509(a)(3).  A community inside section 509(a)(3).  A community inside section 509(a)(3).  A community inside section 509(a)(3).  A community inside section 509(a)(3).  A community inside section 509(a)(3).  A community inside section 509(a)(3).  A community inside section 509(a)(3).  A community inside section 509(a)(3).  A community inside section 509(a)(3).  A community inside section 509(a)(3).  A community inside section 509(a)(3).  A community inside section 509(a)(3).  A community inside section 509(a)(3).  A community inside section 509(a)(3).  A community inside section 509(a)(3).  A community inside s	э 🔲												
city, and state:  An organization operated for the benefit of a collogo or university owned or operated by a governmental with described in section 170(b) (1)(A)(w). (Complete Part II.)  A federal state, or local government or povernmental unith described in section 170(b) (1)(A)(w).  A regularation that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b) (1)(A)(w).  A community inside described in section 170(b) (1)(A)(w).  A community inside described in section 170(b) (1)(A)(w).  A community inside described in section 170(b) (1)(A)(w).  A community inside section 509(a)(1).  A community inside section 509(a)(2).  A community inside section 509(a)(2).  A community inside section 509(a)(2).  A community inside section 509(a)(2).  A community inside section 509(a)(2).  A community inside section 509(a)(2).  A community inside section 509(a)(2).  A community inside section 509(a)(2).  A community inside section 509(a)(2).  A community inside section 509(a)(2).  A community inside section 509(a)(2).  A community inside section 509(a)(2).  A community inside section 509(a)(2).  A community inside section 509(a)(3).  An organization organized and operated exclusively for the benefit of to public safety. See section 509(a)(3).  A community inside section 509(a)(3).  A community inside section 509(a)(3).  A community inside section 509(a)(3).  A community inside section 509(a)(3).  A community inside section 509(a)(3).  A community inside section 509(a)(3).  A community inside section 509(a)(3).  A community inside section 509(a)(3).  A community inside section 509(a)(3).  A community inside section 509(a)(3).  A community inside section 509(a)(3).  A community inside section 509(a)(3).  A community inside section 509(a)(3).  A community inside section 509(a)(3).  A community inside section 509(a)(3).  A community inside section 509(a)(3).  A community inside section 509(a)(3).  A community inside section 509(a)(3).  A community inside s	□ 4	A medical res	search organization	operated in conjunction	with a hos	pital desc	ribed in se	ection 170	(b) II(A)	ii). Enter t	he hospital's r	ame.	
section 170bh 11(A)(-). (Complete Part II.)  A federal, state, or local government or governmental unit described in section 170bh 11(A)(-).  A community rust dress excited in section 170(b) 11(A)(-).  A community rust dressribed in section 170(b) 11(A)(-).  A community rust dressribed in section 170(b) 11(A)(-).  A community rust dressribed in section 170(b) 11(A)(-).  A community rust dressribed in section 170(b) 11(A)(-).  A community rust dressribed in section 170(b) 11(A)(-).  A community rust dressribed in section 170(b) 11(A)(-).  A community rust dressribed in the section 170(b) 11(A)(-).  A community rust dressribed in the section 501(a)(-).  A community rust dressribed in section 501(a)(-).  A community rust dressribed in section 501(a)(-).  A community rust dressribed in section 501(a)(-).  A community rust dressribed in section 501(a)(-).  A community rust dressribed in section 501(a)(-).  A community rust dressribed in section 501(a)(-).  A community rust dressribed in section 501(a)(-).  A community rust dressribed in section 501(a)(-).  A community rust dressribed in section 501(a)(-).  A community rust dressribed in section 501(a)(-).  A community rust dressribed in section 501(a)(-).  A community rust dressribed in section 501(a)(-).  A community rust dressribed in section 501(a)(-).  A community rust dressribed in section 501(a)(-).  A community rust dressribed in section 501(a)(-).  A community rust dressribed in section 501(a)(-).  A community rust dressribed in section 501(a)(-).  A community rust dressribed in section 501(a)(-).  A community rust dressribed in section 501(a)(-).  A community rust dressribed in section 501(a)(-).  A community rust dressribed in section 501(a)(-).  A community rust dressribed in section 501(a)(-).  A community rust dressribed in section 501(a)(-).  A community rust dressribed in section 501(a)(-).  A community rust dressribed in section 501(a)(-).  A community rust dressribed in section 501(a)(-).  A community rust dressribed in section 501(a)(-).  A communi	-	city, and state	ie:								•		
A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v).  An organization that normally receives in substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(4). (Complete Part II.)  A community riust described in section 170(b) 1)(A(4)). (Complete Part III.)  A community riust described in section 170(b) 1)(A(4)). (Complete Part III.)  A community riust described in section 170(b) 1)(A(4)). (Complete Part III.)  A community riust described in the second from properties and (2) no more than 33 1/3% of its support from gross investment income and unrelated business trauble income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See section 509(a)(1) (Complete Part III.)  An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organization and complete lines 11 te through 11th, a   Type III. Other the box that describes the type of supporting organization and complete lines 11 te through 11th, a   Type III. Other    By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified persons other than foundation managers and other than one or more publicly supported directly or indirectly by one or more disqualified persons other than foundation managers and other than one or more publicly supported directly or indirectly by one or more disqualified persons of the than one or more publicly supported directly or indirectly by one or more disqualified persons of the than one or more publicly supported directly or indirectly by one or more disqualified persons?  If the organization, check this box  Since August 17, 2008, has the organization accopied any gift or contribution from any of the following persons?  If A person who directly or indirectly controls, either above 7.  If A person who directly or indirectly	5	An organizati	ion operated for the	benefit of a college or v	niversity o	whed or o	perated by	y a govern	mental vr	it describ	ed In		
An organization that normally freeevers is substantial part of its support from a governmental und in from the general public described in section 170(b)(1)(A)(4)(-). (Complete Part II.)  A community must described in section 170(b)(1)(A)(A)(-). (Complete Part III.)  An organization that normally receives: (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exampl functions - subject to certain exceptions, and (2) no more than 33 1/3% of its support from goss investment increase and unrelated business teasible income (less section 511 tas) from businesses acquired by the organization after June 30, 1975.  See section 509(a)(2). (Complete Part III.)  An organization organized and operated exclusively for the borish of, to perform the functions of, or to carry out the purposes of one or more publicly supported organization adescribed in section 509(a)(1) or section 509(a)(2). See section 509(a)(3). Check the box that describes the type of supporting organization and complete lines 11 the through 11th.  a													
An organization that normally freeevers is substantial part of its support from a governmental und in from the general public described in section 170(b)(1)(A)(4)(-). (Complete Part II.)  A community must described in section 170(b)(1)(A)(A)(-). (Complete Part III.)  An organization that normally receives: (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exampl functions - subject to certain exceptions, and (2) no more than 33 1/3% of its support from goss investment increase and unrelated business teasible income (less section 511 tas) from businesses acquired by the organization after June 30, 1975.  See section 509(a)(2). (Complete Part III.)  An organization organized and operated exclusively for the borish of, to perform the functions of, or to carry out the purposes of one or more publicly supported organization adescribed in section 509(a)(1) or section 509(a)(2). See section 509(a)(3). Check the box that describes the type of supporting organization and complete lines 11 the through 11th.  a	e []	A federal, sta	ite, or local governm	ent or governmental uni	it describe	d in sectio	n 170(b)	1)[AHUL					
section 170(http://wii.) (Complete Part II.)  A community trust described in section 170(b)(1)(A)(wi). (Complete Part II.)  A community trust described in section 170(b)(1)(A)(wi). (Complete Part III.)  An organization that normably receives: (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities referred to its exempt functions - subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment incure and unrelated business treated business treated business treated business treated in section 509(a)(1).  An organization organized and operated exclusively to test for public safety. See section 509(a)(4).  An organization organized and operated exclusively for the bonefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See section 509(a)(3). Check the box that describes the type of supporting organization and complete lims 11e through 11h., a	7   X	An organizati	ion that normally rec	nac Isitneteduz a zeve	of its supp	ocit from a	governm	antal und d	or from the	: മാരാവ	oublic describe	ed in	
An organization that normally receives: (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions - subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment incurre and unrelated business tasable income (less section 509(a)(2).  An organization organized and operated exclusively to test for public safety. See section 509(a)(4).  An organization organized and operated exclusively for the bonefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or socion 509(a)(2). See section 509(a)(3). Check the box that describes the type of supporting organization and complete lims 11 of through 11th, and 11th 11th 11th 11th 11th 11th 11th 11t							•						
An organization that normally receives: (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions - subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment incurre and unrelated business tasable income (less section 509(a)(2).  An organization organized and operated exclusively to test for public safety. See section 509(a)(4).  An organization organized and operated exclusively for the bonefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or socion 509(a)(2). See section 509(a)(3). Check the box that describes the type of supporting organization and complete lims 11 of through 11th, and 11th 11th 11th 11th 11th 11th 11th 11t	в [ ]	A community	trust described in s	section 170(b)(1)(A)(vi).	(Complete	Part II.)							
activities related to the exempt functions - subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization either June 30, 1975.  See section 509(a)(2), (Complete Parl III.)  An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations and exembed in section 509(a)(1) or section 509(a)(2). See section 509(a)(3), Check the box that describes the type of supporting organization and complete funes 11e through 11h.  a	e [ ]												
incure and unrelated business taxable income (lass section 511 tax) from businesses acquired by the organization after June 30, 1975.  See section 509(a)(2). (Comblete Part III.)  An organization arganized and operated exclusively to test for public safety, See section 509(a)(4).  An organization arganized and operated exclusively for the bonefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organization and complete times 11e through 11h.  a		activities rela	red to its exempt fur	nctions - subject to certa	ain excepti	ons, and (	2) no mori	e than 33 °	1/3% of it	s support	from gross inv	estment	
See section 509(a)(2). (Complete Part III.)  An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organization and camplete times 11 e through 11h.  a		income and i	melated business t	axable income (less sec	tion 511 ta	x) from bu	spessor:	acquired to	y tho ora	anization (	atter June 30,	1975.	
An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in exciton 509(a)(1) or socilon 509(a)(2). See section 509(a)(3). Check the box that describes the type of supporting organization and complete lines 11 et through 11h.  a	, <del>-</del>	Sec section	509(a)(2). (Complete	Part III.)							•		
more publicly supported organizations described in section 509(a)(1) or socilon 509(a)(2). See section 509(a)(3). Check the box that describes the type of supporting organization and complete lines 11e through 11h.  a [] Type II b [] Type II c [] Type III - C [] Type III - C [] Type III - Other organization should directly or indirectly by one or more disqualfied persons other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2).  If the organization occaved a written determination from the IRS that II is a Type II. Type III or Type III supporting organization, check this box.  Sinco August 17, 2006, has the organization accepted any gift or contribution from any of the following porsons?  (i) A person who directly or indirectly controls, either above or together with persons described in (ii) and (iii) below, the governing body of the supported organization?  (iii) A family member of a person described in (i) above?  (iii) A 33% controlled entity of a person described in (i) or (i) above?  (iii) A 33% controlled entity of a person described in (ii) or (i) above?  (iii) I fill (iii) I fill organization (iii) I fill (iv) I file organization in col. (i) I fill (iv) I fill (iv) I fill (iv) I fill (iv) I fill (iv) I fill (iv) I fill (iv) I fill (iv) I fill (iv) I fill (iv) I fill (iv) I fill (iv) I fill (iv) I fill (iv) I fill (iv) I fill (iv) I fill (iv) I fill (iv) I fill (iv) I fill (iv) I fill (iv) I fill (iv) I fill (iv) I fill (iv) I fill (iv) I fill (iv) I fill (iv) I fill (iv) I fill (iv) I fill (iv) I fill (iv) I fill (iv) I fill (iv) I fill (iv) I fill (iv) I fill (iv) I fill (iv) I fill (iv) I fill (iv) I fill (iv) I fill (iv) I fill (iv) I fill (iv) I fill (iv) I fill (iv) I fill (iv) I fill (iv) I fill (iv) I fill (iv) I fill (iv) I fill (iv) I fill (iv) I fill (iv) I fill (iv) I fill (iv) I fill (iv) I fill (iv) I fill (iv) I fill (iv) I fill (iv) I fill (iv) I fill (iv) I fill (iv) I fill (iv) I fill (i	اليا ه	An organizati	on orpanized end ol	perated exclusively to te	ist for publ	ic safety, :	See sectio	on 509(a)(4	<b>1</b> ).				
more publicly supported organizations described in section 509(a)(1) or socilon 509(a)(2). See section 509(a)(3). Check the box that describes the type of supporting organization and complete lines 11e through 11h.  a [] Type II b [] Type II c [] Type III - C [] Type III - C [] Type III - Other organization should directly or indirectly by one or more disqualfied persons other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2).  If the organization occaved a written determination from the IRS that II is a Type II. Type III or Type III supporting organization, check this box.  Sinco August 17, 2006, has the organization accepted any gift or contribution from any of the following porsons?  (i) A person who directly or indirectly controls, either above or together with persons described in (ii) and (iii) below, the governing body of the supported organization?  (iii) A family member of a person described in (i) above?  (iii) A 33% controlled entity of a person described in (i) or (i) above?  (iii) A 33% controlled entity of a person described in (ii) or (i) above?  (iii) I fill (iii) I fill organization (iii) I fill (iv) I file organization in col. (i) I fill (iv) I fill (iv) I fill (iv) I fill (iv) I fill (iv) I fill (iv) I fill (iv) I fill (iv) I fill (iv) I fill (iv) I fill (iv) I fill (iv) I fill (iv) I fill (iv) I fill (iv) I fill (iv) I fill (iv) I fill (iv) I fill (iv) I fill (iv) I fill (iv) I fill (iv) I fill (iv) I fill (iv) I fill (iv) I fill (iv) I fill (iv) I fill (iv) I fill (iv) I fill (iv) I fill (iv) I fill (iv) I fill (iv) I fill (iv) I fill (iv) I fill (iv) I fill (iv) I fill (iv) I fill (iv) I fill (iv) I fill (iv) I fill (iv) I fill (iv) I fill (iv) I fill (iv) I fill (iv) I fill (iv) I fill (iv) I fill (iv) I fill (iv) I fill (iv) I fill (iv) I fill (iv) I fill (iv) I fill (iv) I fill (iv) I fill (iv) I fill (iv) I fill (iv) I fill (iv) I fill (iv) I fill (iv) I fill (iv) I fill (iv) I fill (i	14   ]	An organizati	ion organized and o	perated exclusively for ti	he bonein	of, to perf	orm the fi	nctions of	or to car	ry out the	purposes of o	ne or	
describes the type of supporting organization and complete lines 11e through 11h.  a Type II b Type II c Type III - Cher  d Type III - Cher  d Type III - Cher  d Type III - Cher  d Type III - Cher  d Type III - Cher  d Type III - Cher  d Type III - Cher  d Type III - Cher  d Type III - Cher  d Type III - Cher  d Type III - Cher  d Type III - Cher  d Type III - Cher  d Type III - Cher  d Type III - Cher  d Type III - Cher  d Type III - Cher  d Type III - Cher  d Type III - Cher  d Type III - Cher  d Type III - Cher  d Type III - Cher  d Type III - Cher  d Type III - Cher  d Type III - Cher  d Type III - Cher  d Type III - Cher  d Type III - Cher  d Type III - Cher  d Type III - Cher  d Type III - Cher  d Type III - Cher  d Type III - Cher  d Type III - Cher  d Type III - Cher  d Type III - Cher  d Type III - Cher  d Type III - Cher  d Type III - Cher  d Type III - Cher  d Type III - Cher  d Type III - Cher  d Type III - Cher  d Type III - Cher  d Type III - Cher  d Type III - Cher  d Type III - Cher  d Type III - Cher  d Type III - Cher  d Type III - Cher  d Type III - Cher  d Type III - Cher  d Type III - Cher  d Type III - Cher  d Type III - Cher  d Type III - Cher  d Type III - Cher  d Type III - Cher  d Type III - Cher  d Type III - Cher  d Type III - Cher  d Type III - Cher  d Type III - Cher  d Type III - Cher  d Type III - Cher  d Type III - Cher  d Type III - Cher  d Type III - Cher  d Type III - Cher  d Type III - Cher  d Type III - Cher  d Type III - Cher  d Type III - Cher  d Type III - Cher  d Type III - Cher  d Type III - Cher  d Type III - Cher  d Type III - Cher  d Type III - Cher  d Type III - Cher  d Type III - Cher  d Type III - Cher  d Type III - Cher  d Type III - Cher  d Type III - Cher  d Type III - Cher  d Type III - Cher		more publich	supported organization	ations described in secti	ion 509(a)(	1) or socia	on 509(a)(	2). See se	ction 509	(a)(3). Che	ck the box th	at	
By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified persons other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2).  If the organization received a written determination from the IRIS that it is a Type II. Type III. Type III.  Supporting organization, check this box  Sinco August 17, 2008, has the organization accepted any gift or contribution from any of the following porsons?  (i) A person who directly or indirectly controls, either alone or together with persons described in (ii) and (iii) below, the governing body of the supported organization?  (iii) A family member of a person described in (i) above?  (iii) A family member of a person described in (i) or (i) above?  (iii) A standly member of a person described in (i) or (i) above?  (iii) A soft controlled entity of a person described in (i) or (i) above?  (ii) A soft controlled information about the supported organization organization in col. (iii) Islad in your organization in col. (iii) Islad in your organization in col. (iii) organization in col. (ii) Islad in your organization in col. (iii) organization in col. (ii) organization in col. (ii) organization in col. (iii) organization in col. (iii) organization in col. (iii) organization in col. (iii) organization in col. (iii) organization in col. (iii) organization in col. (iii) organization in col. (iii) organization in col. (iii) organization in col. (iii) organization in col. (iii) organization in col. (iii) organization in col. (iii) organization in col. (iii) organization in col. (iii) organization in col. (iii) organization in col. (iii) organization in col. (iii) organization in col. (iii) organization in col. (iii) organization in col. (iii) organization in col. (iii) organization in col. (iii) organization in col. (iii) organization in col. (iii) organization in col. (iii) organization in col. (iii) organization in col. (iii) organization											_		
foundation managers and other than one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(7).  If the organization rocewed a written determination from the IRS that it is a Type II. Type III, or Type III supporting organization, chock this box  Sinco August 17, 2006, has the organization accepted any gift or contribution from any of the following porsons?  (i) A person who directly or indirectly controls, either alone or together with persons described in (i) and (ii) below, the governing body of the supported organization?  (ii) A family member of a person described in (i) above?  (iii) A 35% controlled entity of a person described in (i) or (ii) above?  (iii) A 35% controlled entity of a person described in (i) or (ii) above?  (ii) Name of supported  (iii) FIN  (iii) Fin (iii) Fin (iii) Fin (iii) Fin (iii) Fin (iii) Fin (iii) Fin (iii) Fin (iii) Fin (iii) Fin (iii) Fin (iii) Fin (iii) Fin (iii) Fin (iii) Fin (iii) Fin (iii) Fin (iii) Fin (iii) Fin (iii) Fin (iii) Fin (iii) Fin (iii) Fin (iii) Fin (iii) Fin (iii) Fin (iii) Fin (iii) Fin (iii) Fin (iii) Fin (iii) Fin (iii) Fin (iii) Fin (iii) Fin (iii) Fin (iii) Fin (iii) Fin (iii) Fin (iii) Fin (iii) Fin (iii) Fin (iii) Fin (iii) Fin (iii) Fin (iii) Fin (iii) Fin (iii) Fin (iii) Fin (iii) Fin (iii) Fin (iii) Fin (iii) Fin (iii) Fin (iii) Fin (iii) Fin (iii) Fin (iii) Fin (iii) Fin (iii) Fin (iii) Fin (iii) Fin (iii) Fin (iii) Fin (iii) Fin (iii) Fin (iii) Fin (iii) Fin (iii) Fin (iii) Fin (iii) Fin (iii) Fin (iii) Fin (iii) Fin (iii) Fin (iii) Fin (iii) Fin (iii) Fin (iii) Fin (iii) Fin (iii) Fin (iii) Fin (iii) Fin (iii) Fin (iii) Fin (iii) Fin (iii) Fin (iii) Fin (iii) Fin (iii) Fin (iii) Fin (iii) Fin (iii) Fin (iii) Fin (iii) Fin (iii) Fin (iii) Fin (iii) Fin (iii) Fin (iii) Fin (iii) Fin (iii) Fin (iii) Fin (iii) Fin (iii) Fin (iii) Fin (iii) Fin (iii) Fin (iii) Fin (iii) Fin (iii) Fin (iii) Fin (iii) Fin (iii) Fin (iii) Fin (iii) Fin (iii) Fin (iii) Fin (iii) Fin (iii) Fin (iii) Fin (iii) Fin (iii) Fin (iii) Fin (ii	, ·-·,	• •											
If the organization rocewed a written determination from the IRS that it is a Type II. Type III supporting organization, chock this box  Sinco August 17, 2008, has the organization accepted any gift or contribution from any of the following porsons?  (i) A person who directly or indirectly controls, either alone or together with persons described in (i) and (ii) below, the governing body of the supported organization?  (iii) A family member of a person described in (i) above?  (iii) A 35% controlled entity of a person described in (i) or (i) above?  (iii) A 35% controlled entity of a person described in (i) or (i) above?  (iii) A 50% controlled entity of a person described in (i) or (i) above?  (iii) I 11g(ii) 1 11g(iii) 1 11g(iii) 1 11g(iii) 1 11g(iii) 1 11g(iii) 1 11g(iii) 1 11g(iii) 1 11g(iii) 1 11g(iii) 1 11g(iii) 1 11g(iii) 1 11g(iii) 1 11g(iii) 1 11g(iii) 1 11g(iii) 1 11g(iii) 1 11g(iii) 1 11g(iii) 1 11g(iii) 1 11g(iii) 1 11g(iii) 1 11g(iii) 1 11g(iii) 1 11g(iii) 1 11g(iii) 1 11g(iii) 1 11g(iii) 1 11g(iii) 1 11g(iii) 1 11g(iii) 1 11g(iii) 1 11g(iii) 1 11g(iii) 1 11g(iii) 1 11g(iii) 1 11g(iii) 1 11g(iii) 1 11g(iii) 1 11g(iii) 1 11g(iii) 1 11g(iii) 1 11g(iii) 1 11g(iii) 1 11g(iii) 1 11g(iii) 1 11g(iii) 1 11g(iii) 1 11g(iii) 1 11g(iii) 1 11g(iii) 1 11g(iii) 1 11g(iii) 1 11g(iii) 1 11g(iii) 1 11g(iii) 1 11g(iii) 1 11g(iii) 1 11g(iii) 1 11g(iii) 1 11g(iii) 1 11g(iii) 1 11g(iii) 1 11g(iii) 1 11g(iii) 1 11g(iii) 1 11g(iii) 1 11g(iii) 1 11g(iii) 1 11g(iii) 1 11g(iii) 1 11g(iii) 1 11g(iii) 1 11g(iii) 1 11g(iii) 1 11g(iii) 1 11g(iii) 1 11g(iii) 1 11g(iii) 1 11g(iii) 1 11g(iii) 1 11g(iii) 1 11g(iii) 1 11g(iii) 1 11g(iii) 1 11g(iii) 1 11g(iii) 1 11g(iii) 1 11g(iii) 1 11g(iii) 1 11g(iii) 1 11g(iii) 1 11g(iii) 1 11g(iii) 1 11g(iii) 1 11g(iii) 1 11g(iii) 1 11g(iii) 1 11g(iii) 1 11g(iii) 1 11g(iii) 1 11g(iii) 1 11g(iii) 1 11g(iii) 1 11g(iii) 1 11g(iii) 1 11g(iii) 1 11g(iii) 1 11g(iii) 1 11g(iii) 1 11g(iii) 1 11g(iii) 1 11g(iii) 1 11g(iii) 1 11g(iii) 1 11g(iii) 1 11g(iii) 1 11g(iii) 1 11g(iii) 1 11g(iii) 1 11g(iii) 1 11g(	c  j	By checking	this box, I certify the	at the organization is not	controlled	directly o	u induccti	y by one o	r more dis	quaffied (	persons other	than	
supporting organization, chock this box  Sinco August 17, 2006, has the organization accepted any gift or contribution from any of the following porsons?  (i) A person who directly or indirectly controls, either alone or together with persons described in (i) and (iii) below, the governing body of the supported organization?  (ii) A family member of a person described in (i) above?  (iii) A 135% controlled entity of a person described in (i) or (i) above?  (ii) Name of supported Provide the following information about the supported organization(s).  (iii) FIN   (iii) Fye of organization (distance in a col. (i) Itside in your organization in col. (ii) Itside in your organization in col. (ii) organization in col. (ii) organization in col. (iii) organization (see Instructions))  (v) Is the organization organization in col. (ii) organization in col. (ii) organization in col. (ii) organization in col. (ii) organization in col. (iii) organization in col. (iii) organization in col. (iii) organization in col. (iii) organization in col. (iii) organization in col. (iii) organization in col. (iii) organization in col. (iii) organization in col. (iii) organization in col. (iii) organization in col. (iii) organization in col. (iii) organization in col. (iii) organization in col. (iii) organization in col. (iii) organization in col. (iii) organization in col. (iii) organization in col. (iii) organization in col. (iii) organization in col. (iii) organization in col. (iii) organization in col. (iii) organization in col. (iii) organization in col. (iii) organization in col. (iii) organization in col. (iii) organization in col. (iii) organization in col. (iii) organization in col. (iii) organization in col. (iii) organization in col. (iii) organization in col. (iii) organization in col. (iii) organization in col. (iii) organization in col. (iii) organization in col. (iii) organization in col. (iii) organization in col. (iii) organization in col. (iii) organization in col. (iii) organization in col. (iii) organization in col. (ii		foundation m	ranagers and other t	han one or more public!	y supporte	id organiza	ations des	cribed in s	oction 50	9(a)(1) or :	section 509(a)	(7).	
Since August 17, 2006, has the organization accepted any gift or contribution from any of the following porsons?  (i) A person who directly or indirectly controls, either alone or together with persons described in (i) and (iii) below, the governing body of the supported organization?  (ii) A family member of a person described in (i) above?  (iii) A family member of a person described in (i) or (i) above?  (ii) Name of supported organization about the supported organization (ascribed on lines 1-9 above or IRC scribed or lines 1-9 above or lines 1-9 above or lines 1-9 above or lines 1-9 above or lines 1-9 above or lines 1-9 above or lines 1-9 a	1	If the organiz	mw s bevecen neits	ten datermination from t	the IRS th	ath Is a Ty	pe I. Type	II. or Typ:	e I))				
(ii) A family member of a person described in (i) above?  (iii) A family member of a person described in (i) above?  (iii) A 35% controlled entity of a person described in (i) above?  (iii) A 35% controlled entity of a person described in (i) above?  (ii) Name of supported organization about the supported organization(s).  (ii) Name of supported organization about the supported organization in col. (ii) Island in your organization in col. (ii) Island in your organization in col. (ii) organization in col. (iii) organization in col. (iii) organization in col. (iv) organization in col. (iv) organization in col. (iv) organization in col. (iv) organization in col. (iv) organization in col. (iv) organization in col. (iv) organization in col. (iv) organization in col. (iv) organization in col. (iv) organization in col. (iv) organization in col. (iv) organization in col. (iv) organization in col. (iv) organization in col. (iv) organization in col. (iv) organization in col. (iv) organization in col. (iv) organization in col. (iv) organization in col. (iv) organization in col. (iv) organization in col. (iv) organization in col. (iv) organization in col. (iv) organization in col. (iv) organization in col. (iv) organization in col. (iv) organization in col. (iv) organization in col. (iv) organization in col. (iv) organization in col. (iv) organization in col. (iv) organization in col. (iv) organization in col. (iv) organization in col. (iv) organization in col. (iv) organization in col. (iv) organization in col. (iv) organization in col. (iv) organization in col. (iv) organization in col. (iv) organization in col. (iv) organization in col. (iv) organization in col. (iv) organization in col. (iv) organization in col. (iv) organization in col. (iv) organization in col. (iv) organization in col. (iv) organization in col. (iv) organization organization in col. (iv) organization organization organization organization organization organization organization organization organization organization organization organization organiza													
the governing body of the supported organization?  (ii) A family member of a person described in (i) above?  (iii) A 35% controlled entity of a person described in (i) or (i) above?  Provide the following information about the supported organization(s).  (ii) Name of supported organization are supported organization (v) Did you notify the organization in col. (ii) Islaed in your organization in col. (ii) Islaed in your organization in col. (ii) organization in col. (ii) organization in col. (iv) organization in col. (iv) organization in col. (iv) organization in col. (iv) organization in col. (iv) organization in col. (iv) organization in col. (iv) organization in col. (iv) organization in col. (iv) organization in col. (iv) organization in col. (iv) organization in col. (iv) organization in col. (iv) organization in col. (iv) organization in col. (iv) organization in col. (iv) organization in col. (iv) organization in col. (iv) organization in col. (iv) organization in col. (iv) organization in col. (iv) organization in col. (iv) organization in col. (iv) organization in col. (iv) organization in col. (iv) organization in col. (iv) organization in col. (iv) organization in col. (iv) organization in col. (iv) organization in col. (iv) organization in col. (iv) organization in col. (iv) organization in col. (iv) organization in col. (iv) organization in col. (iv) organization in col. (iv) organization in col. (iv) organization in col. (iv) organization in col. (iv) organization in col. (iv) organization in col. (iv) organization in col. (iv) organization in col. (iv) organization in col. (iv) organization in col. (iv) organization in col. (iv) organization in col. (iv) organization in col. (iv) organization in col. (iv) organization in col. (iv) organization in col. (iv) organization in col. (iv) organization in col. (iv) organization in col. (iv) organization in col. (iv) organization in col. (iv) organization in col. (iv) organization in col. (iv) organization in col. (iv) organization in col. (iv) organizatio	9	Sinco Augusi	17, 2006, has the c	organization accepted ar	ny gift or c	ontribution	s from any	of the following	owing po	sons?			
(ii) A family member of a person described in (i) above?  (iii) A 35% controlled entity of a person described in (i) or (i) above?  Provide the following information about the supported organization(s).  (ii) Name of supported organization (discribed on lines 1-9 above or IRC saction (see instructions))  (iii) FIN  (iii) FIN  (iii) FIN  (iii) FIN  (iii) FIN  (iii) FIN  (iii) FIN  (iii) FIN  (iii) FIN  (iv) Is the organization (v) Did you notify that organization in col. (i) organization in col. (i) organization in col. (i) organization in col. (i) organization in col. (i) organization in col. (i) organization in col. (i) organization in col. (i) organization in col. (i) organization in col. (i) organization in col. (i) organization in col. (i) organization in col. (i) organization in col. (ii) organization in col. (ii) organization in col. (ii) organization in col. (ii) organization in col. (ii) organization in col. (ii) organization in col. (ii) organization in col. (ii) organization in col. (ii) organization in col. (ii) organization in col. (ii) organization in col. (iii) organization in col. (iii) organization in col. (iii) organization in col. (iii) organization in col. (iii) organization in col. (iii) organization in col. (iii) organization in col. (iii) organization in col. (iii) organization in col. (iii) organization in col. (iii) organization in col. (iii) organization in col. (iii) organization in col. (iii) organization in col. (iii) organization in col. (iii) organization in col. (iii) organization in col. (iii) organization in col. (iii) organization in col. (iii) organization in col. (iii) organization in col. (iii) organization in col. (iii) organization in col. (iii) organization in col. (iii) organization in col. (iii) organization in col. (iii) organization in col. (iii) organization in col. (iii) organization in col. (iii) organization in col. (iii) organization in col. (iii) organization in col. (iii) organization in col. (iii) organization in col. (iiii) organization in col. (iii) organiza		(i) A perso	n who directly or ind	lirectly controls, either al	lone or tog	ether with	persons i	badnakab	ın (ii) and	(iii) below,	Ψ.	es No	
Provide the following information about the supported organization (s).		the gove	eming body of the si	? roitaxinagio behoqqu							[11g(i)]		
(i) Name of supported organization (described on lines 1-9 above or IRC sacition (see instructions))  (ii) FIN (III) Type of organization (described on lines 1-9 above or IRC sacition (see instructions))  (iv) Is the organization (v) Did you notify the organization in col. (i) described on lines 1-9 above or IRC sacition (see instructions))  (iv) Is the organization in col. (i) organization in col. (i) organization in col. (i) organization in col. (ii) of your support?  (vi) Is the organization in col. (i) organization in col. (ii) organization in col. (ii) organization in col. (ii) organization in col. (ii) organization in col. (iv) organization in col. (iv) organization in col. (iv) organization in col. (iv) organization in col. (iv) organization in col. (iv) organization in col. (iv) organization in col. (iv) organization in col. (iv) organization in col. (iv) organization in col. (iv) organization in col. (iv) organization in col. (iv) organization in col. (iv) organization in col. (iv) organization in col. (iv) organization in col. (iv) organization in col. (iv) organization in col. (iv) organization in col. (iv) organization in col. (iv) organization in col. (iv) organization in col. (iv) organization in col. (iv) organization in col. (iv) organization in col. (iv) organization in col. (iv) organization in col. (iv) organization in col. (iv) organization in col. (iv) organization in col. (iv) organization in col. (iv) organization in col. (iv) organization in col. (iv) organization in col. (iv) organization in col. (iv) organization in col. (iv) organization in col. (iv) organization in col. (iv) organization in col. (iv) organization in col. (iv) organization in col. (iv) organization in col. (iv) organization in col. (iv) organization in col. (iv) organization in col. (iv) organization in col. (iv) organization in col. (iv) organization in col. (iv) organization in col. (iv) organization in col. (iv) organization in col. (iv) organization in col. (iv) organization in col. (iv) organization in col. (iv)		(ii) A family	member of a persor	of occuped in (i) above?							. 11g(il)		
(ii) Name of supported organization organization (discribed on lines 1-9 above or IRC snotton (see instructions))  (iii) Type of organization organization (discribed on lines 1-9 above or IRC snotton (see instructions))  (iv) Is the organization (v) Did you notify that organization in col. (i) discontinuous organization in col. (ii) discontinuous organization in col. (ii) organization in col. (ii) organization in col. (ii) organization (support)  (vii) Is the organization organization organization in col. (ii) organization in col. (ii) organization in col. (ii) organization in col. (ii) organization in col. (ii) organization in col. (ii) organization in col. (ii) organization in col. (ii) organization in col. (ii) organization in col. (iii) organization in col. (iii) organization in col. (iii) organization in col. (ii) organization in col. (iii) organization in col. (iii) organization in col. (iii) organization in col. (iii) organization in col. (iii) organization in col. (iii) organization in col. (iii) organization in col. (iii) organization in col. (iii) organization in col. (iii) organization in col. (iii) organization in col. (iii) organization in col. (iii) organization in col. (iii) organization in col. (iii) organization in col. (iii) organization in col. (iii) organization in col. (iii) organization in col. (iii) organization in col. (iii) organization in col. (iii) organization in col. (iii) organization in col. (iii) organization in col. (iii) organization in col. (iii) organization in col. (iii) organization in col. (iii) organization in col. (iii) organization in col. (iii) organization in col. (iii) organization in col. (iii) organization in col. (iii) organization in col. (iii) organization in col. (iii) organization in col. (iii) organization in col. (iii) organization in col. (iii) organization in col. (iii) organization in col. (iii) organization in col. (iii) organization in col. (iii) organization in col. (iiii) organization in col. (iii) organization in col. (iii) organization in col. (iiii	_	(III) A 35% (	controlled entity of a	person described in (i)	or (ii) abov	8 <b>7</b>				,	11g(iii)		
organization (described on lines 1-9 above or IRC section (see instructions))  Organization (described on lines 1-9 above or IRC section (see instructions))  Organization (described on lines 1-9 above or IRC section (see instructions))  Organization in col. (i) itsied in your organization in col. (ii) organization in col. (ii) organization in col. (ii) organization in col. (ii) organization in col. (ii) organization in col. (ii) organization in col. (ii) organization in col. (ii) organization in col. (ii) organization in col. (iii) organization in col. (iii) organization in col. (iii) organization in col. (iii) organization in col. (iii) organization in col. (iii) organization in col. (iii) organization in col. (iii) organization in col. (iii) organization in col. (iii) organization in col. (iii) organization in col. (iii) organization in col. (iii) organization in col. (iii) organization in col. (iii) organization in col. (iii) organization in col. (iii) organization in col. (iii) organization in col. (iii) organization in col. (iii) organization in col. (iii) organization in col. (iii) organization in col. (iii) organization in col. (iii) organization in col. (iii) organization in col. (iii) organization in col. (iii) organization in col. (iii) organization in col. (iii) organization in col. (iii) organization in col. (iii) organization in col. (iii) organization in col. (iii) organization in col. (iii) organization in col. (iii) organization in col. (iii) organization in col. (iii) organization in col. (iii) organization in col. (iii) organization in col. (iii) organization in col. (iii) organization in col. (iii) organization in col. (iii) organization in col. (iii) organization in col. (iii) organization in col. (iii) organization in col. (iii) organization in col. (iii) organization in col. (iii) organization in col. (iii) organization in col. (iii) organization in col. (iii) organization in col. (iii) organization in col. (iii) organization in col. (iii) organization in col. (iii) organization in col. (i	h	Provide the f	noitametri gnlwolld	about the supported on	ganization	(s).							
organization (described on lines 1-9 above or IRC section (see instructions))  Organization (described on lines 1-9 above or IRC section (see instructions))  Organization (described on lines 1-9 above or IRC section (see instructions))  Organization in col. (i) itsied in your organization in col. (ii) organization in col. (ii) organization in col. (ii) organization in col. (ii) organization in col. (ii) organization in col. (ii) organization in col. (ii) organization in col. (ii) organization in col. (ii) organization in col. (iii) organization in col. (iii) organization in col. (iii) organization in col. (iii) organization in col. (iii) organization in col. (iii) organization in col. (iii) organization in col. (iii) organization in col. (iii) organization in col. (iii) organization in col. (iii) organization in col. (iii) organization in col. (iii) organization in col. (iii) organization in col. (iii) organization in col. (iii) organization in col. (iii) organization in col. (iii) organization in col. (iii) organization in col. (iii) organization in col. (iii) organization in col. (iii) organization in col. (iii) organization in col. (iii) organization in col. (iii) organization in col. (iii) organization in col. (iii) organization in col. (iii) organization in col. (iii) organization in col. (iii) organization in col. (iii) organization in col. (iii) organization in col. (iii) organization in col. (iii) organization in col. (iii) organization in col. (iii) organization in col. (iii) organization in col. (iii) organization in col. (iii) organization in col. (iii) organization in col. (iii) organization in col. (iii) organization in col. (iii) organization in col. (iii) organization in col. (iii) organization in col. (iii) organization in col. (iii) organization in col. (iii) organization in col. (iii) organization in col. (iii) organization in col. (iii) organization in col. (iii) organization in col. (iii) organization in col. (iii) organization in col. (iii) organization in col. (iii) organization in col. (i				till Free of	<del>,</del>								
descriped on lines 1-9 show or IRC satethon (see instructions))  Yes No Yes No Yes No Yes No Yes No Yes No Yes No Yes No Yes No Yes No Yes No Yes No Yes No Yes No Yes No Yes No Yes No Yes No Yes No Yes No Yes No Yes No Yes No Yes No Yes No Yes No Yes No Yes No Yes No Yes No Yes No Yes No Yes No Yes No Yes No Yes No Yes No Yes No Yes No Yes No Yes No Yes No Yes No Yes No Yes No Yes No Yes No Yes No Yes No Yes No Yes No Yes No Yes No Yes No Yes No Yes No Yes No Yes No Yes No Yes No Yes No Yes No Yes No Yes No Yes No Yes No Yes No Yes No Yes No Yes No Yes No Yes No Yes No Yes No Yes No Yes No Yes No Yes No Yes No Yes No Yes No Yes No Yes No Yes No Yes No Yes No Yes No Yes No Yes No Yes No Yes No Yes No Yes No Yes No Yes No Yes No Yes No Yes No Yes No Yes No Yes No Yes No Yes No Yes No Yes No Yes No Yes No Yes No Yes No Yes No Yes No Yes No Yes No Yes No Yes No Yes No Yes No Yes No Yes No Yes No Yes No Yes No Yes No Yes No Yes No Yes No Yes No Yes No Yes No Yes No Yes No Yes No Yes No Yes No Yes No Yes No Yes No Yes No Yes No Yes No Yes No Yes No Yes No Yes No Yes No Yes No Yes No Yes No Yes No Yes No Yes No Yes No Yes No Yes No Yes No Yes No Yes No Yes No Yes No Yes No Yes No Yes No Yes No Yes No Yes No Yes No Yes No Yes No Yes No Yes No Yes No Yes No Yes No Yes No Yes No Yes No Yes No Yes No Yes No Yes No Yes No Yes No Yes No Yes No Yes No Yes No Yes No Yes No Yes No Yes No Yes No Yes No Yes No Yes No Yes No Yes No Yes No Yes No Yes No Yes No Yes No Yes No Yes No Yes No Yes No Yes No Yes No Yes No Yes No Yes No Yes No Yes No Yes No Yes No Yes No Yes No Yes No Yes No Yes No Yes No Yes No Yes No Yes No Yes No Yes No Yes No Yes No Yes No Yes No Yes No Yes No Yes No Yes No Yes No Yes No Yes No Yes No Yes No Yes No Yes No Yes No Yes No Yes No Yes No Yes No Yes No Yes No Yes No Yes No Yes No Yes No Yes No Yes No Yes No Yes No Yes No Yes No Yes No Yes No Yes No Yes No Yes No Yes No Yes No Yes No Yes No Yes No Yes No Yes No Yes No Yes No Yes No Yes No Yes No Yes No Yes No Yes No Yes No Yes No Yes No Yes No Yes No Yes No		-	(ii) FIN		(iv) is the c	rganization			(vi)	s the	(vli) Amou	nt of	
(see instructions)) Yes No Yes No Yes No	orga	บุระเรอบ	-	(described on lines 1-9	IN COL (1) III	garnways 1100 lu ADfil	organizat		(i) organi	ted in the	entbot	1	
ntal					<b></b>								
				(see instructions))	YC\$	No	Yes	No	Yes	No			
					}		ነ	1		1 1			
					<b> </b>			<b></b> .		$\vdash$			
					( :			[		1 [			
					<del> </del>				<u> </u>				
				1				]					
					}			<b> </b>	<b></b>	<b>├</b> ─┤			
		Ì		ı				1		1 1			
					<del></del>		ļ	<b> </b>		<b>├</b> ──┤			
		Ì	Ì	,	}		· '	]		1 1			
					<del> </del>		<u> </u>	<b></b>					
	ntal	ļ	ı I		[			[		į į			
		rivara Art	d Daggeron-L Clarker	etion Act Matics	<del></del>	<u></u>	L	L					

032071 62-05 10

Form 990 or 990-EZ.

09430131 762748 3019

2009.05020 WOODWARD DREAM CRUISE, INC. 3019 ___ 1

BLOOMFIELD CABLE

## CIS2LBNKFG

02/01/2011 00:30

	dule A (Form 990 or 990-(Z) 2009 W	OUDWARD D	KEAM CRUI	SE, INC.		38-387	4107 Page 2
Par		_		Sections 170	(b)(1)(A)(iv) and	3 170(b)(1)(A)(v	7)
	(Complete only if you chacket	d the box on line 5	, 7, or 8 of Part I.)				
Sec	tion A. Public Support						
Cale	ndar year (or fiscal year beginning in)	(a) 2005	(b) 2005	(c) 2007	(4) 2008	(e) 2009	(f) Total
1	Gifts, grants, contributions, and						
1	membership toes received. (Do not						
i	include any "unusual grants.")	407,280.	391,932.	449,022.	422,241.	455,842.	2126317.
2	Tax revenues levied for the organ-						
i	ization's benefit and either paid to						
4	or expended on its behalf	ļ				ļ	
3	The value of services or facilities						
	furnished by a governmental unit to			•			
	the organization without charge						
4	Total, Add lines 1 through 3	407.280.	391,932.	449,022.	422,241.	455,842.	2126317.
5	The portion of total contributions						<del></del>
	by each person (other than a					1	
	governmental unit or publicly						
	supported organization) included				ł	1	1
	on line 1 that exceeds 2% of the	j					
	amount shown on line 11,						
	column (f)	!					
	Public support. Subtract Are 5 from the A.						2126317.
	tion B. Total Support	·			<del></del>	L	
Cale	ndar year (or liscal year beginning in)	(a) 2005	(p) 500e	(c) 2007	(d) 2008	(e) 2009	(f) Total
	Amounts from fine 4	407,280.	391,932.	449,022.	422,241.	455,842.	2126317.
	Gross income from Interest.			1,000		100,0101	020032
	dividends, payments received on				}		
	socurities loans, renta, royalties				)	)	
	and income from similar sources	650.	758.	1,019.	1,232.	836.	4.495.
	Not income from unrelated business			-/0-/-	1,050.	330.	1,175.
	activities, whether or not the		'		1	}	
	business is regularly carned on				j	Í	
	Other Income Do not include gain						
	or loss from the sale of capital	1			1		
	assets (Explain in Part IV.)						
11	Total support, Add lines 7 through 10						2130812.
12	Gross receipts from related activities.	etc. (see Instructi	ons)		<u></u>	12	272,886.
	First five years. If the Form 990 is fo			d fourth or GHb to			
	organization, check this box and stor			o, 100121, 01 14111 1	ar your as a section	1, 55 No/P)	<b>►</b> [ ]
	tion C. Computation of Pub		rcentage		<del></del>	<u>, , , , , , , , , , , , , , , , , , , </u>	<u></u>
14	Public support percentage for 2009 (	the 6, column (f) d	wided by line 11. o	ohumo (fi)		14	99.79 %
15	Public support percentage from 2008	Schedulo A. Part	II, line 14			15	%
160	33 1/3% support test - 2009.If the o	rganization did no	t check the box on	line 13, and the 1	14 is 33 1/3% or m		
	stop here. The organization qualifics	as a publicly supp	noited organization	1			<b>▶</b> [X]
ъ	33 1/3% support test - 2008.If the o	inganization did no	t check a box on F	ne 13 or 16a and	the 15 is 33 1/3%	of more check th	ie hox
	and stop here. The organization qua	lifies as a publicity :	supported omaniz	ation			▶□
17e	10% -facts-and-circumstances tes	it - 2009.If the one	anization did not c	heck a box on ligh	13 162 or 16b s	and fine 14 is 10%	or more
	and if the organization moots the "fac	ts-end-circumstan	cos' tost check the	re box and stoo t	ree Evolais is Pa	d IV how the coos	de more,
	mosts the "lacts-and-circumstances"	lest. The omaniza	tion qualifies as a	Outliety Supporter	d aragaization	it is now the organ	<b>▶</b> []]]
ь	10% -facts-and-circumstances tes	i - 2008. II the one	anization did not el	hock a how as we	yuniculiun		. Fl.il
-	more, and if the organization meets t	he facts and circu	imstances" test of	hork this has and	stop have bester	rai une me 13 ls sia Part III baushi	1070 01
	organization meets the "facts-and-cir	Cumsiances lest	The programmation	unis non ook and	sop nere, capies	tuttan in ingerial	, ⊾1 ⁻ 1
18	Private foundation. If the organization	an did not check a	bes on line 13, 15	40641100 03 M (ALII)#	any supported organisation and	and see is stablish	. " 🖺 🖁
				yy ru, or tri		dule A (Form 990	
					J. 141	(um 330	~ 024-551 5003

937022

09430131 762748 3019

2009.05020 WOODWARD DREAM CRUISE, INC. 3019___1

Schedule A (Form 990 or 990 EZ) 2009 Part III   Support Schedule for O	rganizations	Described in	Section 509(a	)(2) (Complete only	I you checked the bo	Page 3 ox on line 9 of Part I.
Section A. Public Support				<del></del> _		
Calendar year (or fiscal year beginning in)	(a) 2005	(P) SD08	(c) 2007	[a] 5008	(e) 2009	(f) Total
n Gifts, grants, contributions, and membership fees received. (Do not				į		
include any "unusual grants")		1				
2 Gross receipts from admissions.		<del> </del>		<del>                                     </del>		
merchandise seld or services per-		1	1	}	)	
tormed, or facilities furnished in		1		1	1	
any activity that is related to the organization's tax-exempt purpose						
· · · · · · · · · · · · · · · · · · ·		<del></del>	<del> </del>	ļ		
3 Gross receipts from activities that are not an unrelated trade or bus-			i	_		
Indes under section 513		1		ł	1	
4 Tax revenues levied for the organ-	<del></del>			<del> </del>	<del> </del>	
ization's benefit and cliffic paid to			1		Ì	•
or expended on its behalf					1	
5 The value of services or facilities		<del></del>	<del></del>	<del> </del>	<del> </del>	
furnished by a governmental unit to		į	1	ľ	1	
the organization without charge		Ì	1	ł	i I	
6 Total Add lines 1 through 5		<del> </del>	<del>                                     </del>	·	<del>                                     </del>	
			<del> </del>		<del> </del>	
7a Amounts included on lines 1, 2, and					1	
3 (occived from disqualified persons b Amaunta hubitud un thes 2 and 3 resolved		<del></del>		<del>                                      </del>		<del></del>
And urine wer gestread becaus pay			1	•		
explosed the pression of \$5,000 or 1% of the street of the year						
c Add lines 7a and 7b			1			
8 Public support (Street Prints) Section B. Total Support		<u> </u>				
	4-1-000-	T 41	1	·	<del></del>	,
Calendar year (or fiscal year beginning in)	(a) 2005	(P) 500E	(c) 2007	(d) 2008	(e) 2009	(f) Total
9 Amounts from line 6		<del>{</del>	<del> </del>	ļ	·{	<u> </u>
dividends, payments received on		1	1			
securities loans, rents, royalties and income from smilar sources	·					
b Unrelated business taxable income						
(less section 5.11 laxes) from businesses		1				
acquired after June 30, 1975				<u> </u>	<u> </u>	
c Add lines 10e and 10b						
11 Net income from unrelated business	_					
activities not included in line 10b, whether or not the business is			1	•		
regularly carried on				1		
12 Other income. Do not include gain or loss from the sale of capital						
ASSETS (Explain in Part IV.)		<u> </u>		<u> </u>		
13 Total support (Acta Bring 9 10c, 11, and 12.)		<u> </u>				
14 First five years, If the Form 990 is for	the organization	's first, second, thi	rd, fourth, or fifth t	ex year as a section	on 501(c)(3) organiz	Ation,
check this box and stop here	<u></u>			<del> </del>		<u></u> <u>                              </u>
Section C. Computation of Public						
15 Public support parcentage for 2009 (fin	ne 8. column (l) (	divided by line 13.	column (N)		15	%
16 Public support percentage from 2008	Schedule A. Par	t III, line 15			16	%
Section D. Computation of Inves						
17 Invostment income percentage for 200	79 (line 10c, cotu	mn (1) divided by li	ne 13. column (1)		17	
18 Investment income percentage from 2	008 Schadule A	Part III, line 17	· ······ · · · · · · · · · · · · · · ·		18	9%
190 33 1/3% support tests - 2009. If the t	bib noitazinsgro	not check the box	on line 14, and line	e 15 is more than	33 1/3%, and line 1	7 is not
more than 33 1/3%, check this box an	dstop here. The	organization qual	fics as a publicly e	supported organiz	atlon	
b 33 1/3% support tosts - 2008, if the c	organization did	not check a box or	iling 14 or line 19a	a, and line 16 is m	ore than 33 1/3%,	and
line 18 is not more than 33 1/3%, chec	k this box ands	top here. The orga	nization qualifies :	as a publicly supp	orted organization	<b>&gt;</b> ] 1
20 Private foundation, if the organization	did not check a	box on line 14, 19	a, or 19b, check t	his box and ese in	structions	<u></u> ▶ <u>[_</u> _
b 33 1/3% support tosts - 2008, if the cline 18 is not more than 33 1/3%, chec 20 Private foundation, if the organization	organization did : :k this box ands	not check a box or top here. The orga	n line 14 or line 19: Inization qualifies :	a, and line 16 is m as a publicly supp his box and eae in	ore than 33 1/3%, a	

BURYARD OF PRINC

09430131 762748 3019

16 2009.05020 WOODWARD DREAM CRUISE, INC. 3019___1 CIS2LB_{NKFG}

0425876265 Dec. 30, 2010 LTR 2695C 0 R 38-3874107 200912 67 00049702

WOODWARD DREAM CRUISE INC 900 WILSHIRE DRIVE STE 102 TROY MI 48084

20970

#### DECLARATION

Under penalties of perjury, I declare that I have examined the return identified in this letter, including any accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct and complete: I understand that this declaration will become a permanent part of that return.

Signature of officer or trustee

Treasurer Woodward Dream Corrise

0425876265

Dec. 30, 2010 LTR 2695C 0 R

38-3874107 200912 67

00049702

WOODWARD DREAM CRUISE INC 900 WILSHIRE DRIVE STE 102 TROY MI 48084

3

DECLARATION

20829

Under penalties of perjury, I declare that I have examined the return identified in this letter, including any accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct and complete. I understand that this declaration will become a permanent part of that return.

Signature of officer or trustee

2-1-11

Date

Treasurer Woodward Dream Cruise, Inc

648: 169

2486427624

**CIS2LBNKFG** 

#### Schedule D (Form 990)

Dispersional of the Truckey Internal Revision Service

# Supplemental Financial Statements ► Complete if the organization answered "Yes." to Form 990.

Part IV, line 6, 7, 8, 9, 10, 11, or 12.

▶ Attach to Form 990. ▶ See separate Instructions.

Open to Public Inspection

Nam	o of the organization WOODWARD DREAM CRU	ISE INC.	Employer identification number 38-3874107
Par		d Funds or Other Similar Funds of	Accounts Complete the
	organization answered "Yes" to Form 990, Part IV, line		Compate in the
		(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year	10/00/07/02/02/07/07	(a) ronds and other accounts
2	Aggregate contributions to (during year)		<del></del>
3			
4	Aggregate grants from (during year)		
	Aggregate value at end of year		
5	Did the organization inform all donors and donor advisors in	writing that the assets held in donor advised	funds
_	are the organization's property, subject to the organization's	exclusive legal control?	Yes   No
6	Did the organization inform all grantees, donors, and donor a		
	for charitable purposes and not for the benefit of the donor of		
<u> </u>	impermissible private benefit?		Yes No
Pai			tV, line 7.
1	Purpose(s) of conservation casements held by the organizati		
	Proservation of land for public use (e.g., recreation or p		
	Protection of natural habitat	Preservation of a certified	d historic structure
	Proservation of open space		
2	Complete lines 2a through 2d if the organization held a qualif	red conservation contribution in the form of a	s conservation casement on the lest
	day of the tax year.		
			Held at the End of the Tax Year
a	Total number of conservation casements		23
b	Total acreage restricted by conservation easymonts		26
C	Number of conservation casements on a certified historic str		2c
d	Number of conservation easements included in (c) acquired in		2d
3	Number of conservation easements modified, transferred, rel		
	year >	to the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of th	gamestion buring the lax
q	Number of states where property subject to conservation ea	sement is located .	
5	Opes the organization have a written policy regarding the per		
_	violations, and enforcement of the conservation easements if		Yes No
6	Staff and voluntoor hours devoted to monitoring, inspecting,	and optomice operation assumests during	
7	Amount of expenses incurred in monitoring, inspecting, and	neferming contracting entermals of the the	ng trie year
В	Does each conservation easement reported on line 2(d) above	to period the marilements of posting the	e year > 5
•	and section 170(h)(4)(D)(-2)	e satisty the requirements of section 170(h)(	v):R)(i)
9	and section 170(h)[4](B)(a)?		Yos   No
•	In Part XIV, describe how the organization reports conservations and applicable the text of the factors of applicable the text of the factors of the factors of the factors of the factors of the factors of the factors of the factors of the factors of the factors of the factors of the factors of the factors of the factors of the factors of the factors of the factors of the factors of the factors of the factors of the factors of the factors of the factors of the factors of the factors of the factors of the factors of the factors of the factors of the factors of the factors of the factors of the factors of the factors of the factors of the factors of the factors of the factors of the factors of the factors of the factors of the factors of the factors of the factors of the factors of the factors of the factors of the factors of the factors of the factors of the factors of the factors of the factors of the factors of the factors of the factors of the factors of the factors of the factors of the factors of the factors of the factors of the factors of the factors of the factors of the factors of the factors of the factors of the factors of the factors of the factors of the factors of the factors of the factors of the factors of the factors of the factors of the factors of the factors of the factors of the factors of the factors of the factors of the factors of the factors of the factors of the factors of the factors of the factors of the factors of the factors of the factors of the factors of the factors of the factors of the factors of the factors of the factors of the factors of the factors of the factors of the factors of the factors of the factors of the factors of the factors of the factors of the factors of the factors of the factors of the factors of the factors of the factors of the factors of the factors of the factors of the factors of the factors of the factors of the factors of the factors of the factors of the factors of the factors of the factors of the factors of the factors of the factors of the factors	on essements in its revenue and expense st	alement, and balance sheet, and
	include, if applicable, the text of the footnote to the organization	(IDN's linancial statements that describos the	corganization's accounting for
Pai	conservation easements.  1 III Organizations Maintaining Collections of	Art Minterior Library	Circlin A
	Complete if the organization answered "Yes" to Form	POD Pod W To 0	er Similar Assets.
	Complication or Garantian enswered Tex 10 Point	390, Part IV, MIC B	<del></del>
	If the execution elected as asserted as a second		
.0	If the organization elected, as permitted under SFAS 116, no	igisd beit memetate eunever til in nodol of	nco sheet works of art, historical
	treasures, or other similar assets held for public exhibition, ex	ducation, or rescarch in furtherance of public	service, provide, in Part XIV, the text of
	the footnote to its financial statements that describes these if		
0	If the organization elected, as permitted under SFAS 116, to	report in its revenue statement and balance	sheet works of art, historical treasures,
	or other similar assets held for public exhibition, education, o	r research in furtherance of public service, p	rovide the following amounts relating to
	these items:		
	(i) Revenues included in Form 990, Part VIII, line 1		<b>&gt;</b> 5
	(ii) Assers included in Form 980, Part X		<b>▶</b> \$
2	in the didentifation received or held works of est, historical tite	ನಿ5U/93. Or other similar ಇತ್ತರತ್ನ (or financial pa	ain, provide
	The following amounts required to be reported under SFAS 1	16 relating to these items:	
2	Revolues included in Form 990, Part VIII, line 1		<b>&gt;</b> \$
ь	Assets included in Form 320, Part X	*** * *** ***** * ** ** * * * * * *	<b>&gt;</b> \$
I_HA PSTES PSTES	For Privacy Act and Paperwork Reduction Act Notice, see	the Instructions for Form 990.	Schedule D (Form 990) 2009

		D DREAM CR			38-3	874107 Page 2
Par	1 III Organizations Maintaining C					
3	Using the organization's acquisition, access	ion, and other record	ds, check any of the	following that are a	significant use of I	ts collection dems
	(check all that apply):					
a	Public exhibition	•	Loan or exc	change programs		
ь	Scholarly research	•	Other			
c	Preservation for future generations		<u></u>	-		
4	Provide a description of the organization's c	collections and expla	in how they further t	the organization's ex	empt purpose in F	art XIV.
5	During the year, did the organization solicit of					
	to be sold to misc funds rather than to be m	lo neq ea banishis	th <u>e organization</u> 's c	allection?		Yes   No
Par	t IV Escrow and Custodial Arran	igements. Compl	ete il organization a	nswered "Yes" to Fo	rm 990, Part IV, le	ne 9. or
	reported an amount on Form 990, Pa					
13	Is the organization an agent, trustee, custod	lian or other intermo	dary for contribution	ns or other assets no	rt included	
	on Form 990, Part X?					Tyes [ No
b	If "Yes," explain the arrangement in Part XIV	and complete the to	ollowing table:			
	-		· ·			Amount
C	Beginning balance				1c	
d	Additions during the year			· ··· · · · · · · · · · · · · · · · ·	18	<del></del>
6	Distributions during the year				1e	
1	Ending balance				11	
2a	Did the organization include an amount on F	om 990. Parl X. line				Yes _ No
	If "Yes," explain the arrangement in Part XIV				·· · · · · · · · · · · · · · · · · · ·	1763 122,7140
	1 V Endowment Funds. Complete		swered "Yes" to Fo	om 990 Part IV bor	10	
		(a) Current year	(b) Pror year	(c) Two years back		ck (e) Four years back
1a	Beginning of year balance	Toy ochlant yaar	(o) r (o) year	(C) 1410 YEB 3 DROK	luj mist years on	CK (6) LOUI SERIS DACK
ь	Onetally diese		<del></del>	<del>                                     </del>	<del></del>	<del> </del>
c	Net investment earnings, gains, and losses	<del></del>	<del> </del>			<del></del>
_	Grants or scholarships			<del> </del>		<del></del>
	Other expenditures for facilities				<del>                                     </del>	<del> </del>
٠		ł			1	
	and programs	<b></b>		<del></del>	<del> </del>	<del> </del>
	Administrative expenses		<u> </u>	<del>                                     </del>		<del></del>
g	End of year balance		<u> </u>	Д	L	<u> </u>
2.	Provide the estimated percentage of the year	ar end balance held i				
	Board designated or quasi-endowment		%			
	Permanent endowment >	%				
		.%				
Ja	Are there endowment funds not in the possi	ession of the organiz	ration that are held a	and administered for	the organization	<del></del>
	by:					Yes No
						33(1)
_	(ii) related organizations					3s(ii)
	If "Yes" to 3a(ii), are the related organization	is listed as required (	on Schedule R?			36
- A	Describe in Part XIV the intended uses of the	o organization's end	owment funds.	<del></del>		
1						
	Description of investment	(a) Cost or obasis (investi	- 1		Accumulated epreciation	(d) Book value
1a	Land					<del></del>
b	Buildings	[			1	
c	Leasehold improvements					
	Equipment					<del></del>
- 8	Other					
Tota	. Add lines 1a through 10. (Column (d) must e	gual Form 990, Parl	X, column (B), line	10(c))		0.

ÇIS2LBNKFG

hedule'0 (Form 990) 2009 WOODWARD DI Part VIII Investments - Other Securities. S	on Form 900 Pag Y lie	- 13		-3874107	
(a) Description of security or category	00 POINT 550, Part X, III	19 12.	(c) Method of valua		
(including name of socurity)	(b) Bock value		Cost or end of-year mark		
ancial derivatives					
nach-held equity interests					
her					
	1				
	<del> </del>				
	<del> </del>			<del></del>	
	<del>                                     </del>		<del></del>		
	•				
tel (Cnt/n) must equal form ODD, Dark Y, and (D) time 12 1	<del> </del>			<del></del>	
tal. (Cot (2) must equal Form 990, Part X, cot (B) time 12.)	<del></del>				
art VIII Investments - Program Related.	Sce Form 930, Part X, I	ine 13.			
(a) Description of investment type	(b) Book value	ļ	(c) Method of value Cost or end-of-year mar		
	<del> </del>				
	<del> </del>	<del></del>			
	<del></del>				
	-				
	1			<del></del> -	
	<del></del>				
	<del> </del>	<del></del>			
70-141					
oral. (Col (b) must equal form 990. Part X, col (B) line 13 )					
Part IX Other Assets. See Form 990, Part X, III					
	) Description			(b) Book v	alue
				·	
	······································				
		····			
				····	
	- <del>-</del>				
tal. (Column (b) must equal Form 990, Part X, col (B) In	or 15 )				
art X Other Liabilities. Soc Form 990, Part X	/ Jan 25	<del></del>			
(a) Description of Exhility	r, Ing 23.		<del></del>		
		(b) Amount			
deral income taxes					
	<del></del>	<del></del>	-1		
			<b>→</b>		
			7		
			<b>⊣</b>		
			1		
tal. (Column (b) must equal Form 990. Part X col (R) E	7P 25 J	·····	{		
tal. (Column (b) must equal Form 990, Part X, col (B) & FIN 48 Footnots. In Part XIV, provide the text of the fo		Can't formation in the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contrac			<u> </u>

Schodule D (Form 990) 2009 WOODWARD DREAM CRUISE, INC.		38 38	74107 Page
Part XI   Reconciliation of Change in Net Assets from Form 990 to Audited Fit	nancial Stat	ements	
1 Total revenue (Form 890, Part VIII, column (V), line 12)	··   !		515,920
2 Total expenses (Form 990, Part IX, column (A), Ene 25)	5		518,859
3 Excess or (defict) for the year. Subtract line 2 from line 1	3		-2,939
4 Not unrealized gains (losses) on investments	4		
5 Donated services and use of facilities	5		
6 Investment expenses	6		
7 Prior period adjustments	1 - 1		
8 Other (Describe in Part XIV.)	В		
9 Total adjustments (riet). Add lines 4 through 8	· \-		
10 Excess or [delicit] for the year per audited financial statements. Combine lines 3 and 9	10	<u></u>	2,939
Part XII   Reconciliation of Revenue per Audited Financial Statements With Re	evenue per	Return	
1 Total revenue, gains, and other support per audited (mancial statements		11	485,252
2 Amounts included on line 1 but not on Form 990, Part VIII, line 12:			
a Net unrealized gains on investments 28		1 1	
b Donated services and use of facilities 25		1 1	
		<b>-</b> 1	
Charles (Danaba Landa Ama)	19.717	၂	
		4 (	19,717
		2e	465,535
3 Subtract line 2e from line 1 4 Amounts included on Form 990. Part VIII, line 12, but not on line 1:		3	403,533
a Investment expenses not included on Form 990, Part VIII, line 7b	E0 20E	4	
b Other (Describe in Part XIV.)	50.385	긔 ㅣ	50 000
c Add lines 4a and 4b		4c	50,385
5 Iotal revenue. Add lines 3 and 4c. (This must equal Form 930, Part I, line 12.)		5	515,920
Part XIII Reconciliation of Expenses per Audited Financial Statements With E			
1 Total expenses and losses per audited financial statements		11	531,840
2 Amounts included on line 1 but not on Form 990, Part IX, line 25:		F 1	
a Donated services and use of facilities		_	
b Prior year adjustments 26		] [	
c Otherlosses 2c		] ]	
d Other (Describe in Part KIV.)	21.091	]	
c Add lines 2a through 2d		2e	21,091
3 Subtract line 2e from line 1		3	510,749
4 Amounts included on Form 990, Part IX, line 25, but not on line 1;			
a Investment expenses not included on Form 980, Part VIII, line 75		1 1	
b Other (Describe in Part XIV.)	8,110	.j	
c Add lines 4a and 4b		4c	8,110
5 Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)		5	518,859
Part XIV Supplemental Information			
Complete this part to provide the descriptions required for Part III, lines 3, 5, and 9; Part III, lines 18 and 4, time 2; Part XI, line 8; Part XII, lines 2d and 4b; and Part XIII, lines 2d and 4b. Also complete this part to PART X: THE AUDITED FINANCIAL STATEMENTS DO NOT CONT	o provide any a	1b and 2b; I ddhional info	Part V, line 4: Par primation.
FOOTNOTE REGARDING THE ORGANIZATION'S LIABILITY FOR	UNCERTA	IN TAX	<del>-</del>
POSITIONS UNDER FIN 48.			
PART XII, LINE 2D . OTHER ADJUSTMENTS:			
COST OF REVENUE POSTED TO EXPENSES ON FINANCIAL STAT	EMENT:	10518.	
CURRENT YEAR ACCOUNTS RECEIVABLE: 9199.		<del></del>	
37054 201-10		Schedule	D (Farm 990) 20

09430131 762748 3019

24 2009.05020 WOODWARD DREAM CRUISE, INC. 3019___1

Schedule D (Form 990) 2009 WOODWARD DREAM CRUISE, INC.   Part XIV  Supplemental Information (continued)	38-3874107 Page 5
PART XII, LINE 4B - OTHER ADJUSTMENTS:	
PRIOR YEAR ACCOUNTS RECEIVABLE: 50385.	
PART XIII, LINE 2D - OTHER ADJUSTMENTS:	
COST OF REVENUE POSTED TO EXPENSES ON FINANCIAL STATEMENT:	10518.
CURRENT YEAR ACCOUNTS PAYABLE: 3149.	
PRIOR YEAR INVENTORY: 7424.	
PART XIII, LINE 4B OTHER ADJUSTMENTS:	
CURRENT YEAR INVENTORY: 2326.	
PRIOR YEAR ACCOUNTS PAYABLE: 5784.	
	•
017.71.h 07.70.1 10	Schedule D (Form 990) 2009

25 09430131 762748 3019 2009.05020 WOODWARD DREAM CRUISE, INC. 3019__1

SCHEDULE O

#### Supplemental Information to Form 990

Complete to provide information for responses to specific questions on Form 990 or to provide any additional information.

Attach to Form 990.

2009 Open to Public trappection

Unpartment of the Imagery Institute Sortes  Attach to Form 990.	i.	trapaction						
Name of the organization WOODWARD DREAM CRUISE, INC.	Emptoyer ide 38 - 387	entification number 4107						
FORM 990, PART I, LINE 1, DESCRIPTION OF ORGANIZATION M	ISSION:							
BUSINESSES AND RESIDENTIAL COMMUNITIES IN THE PARTICIPATING CITIES OF								
BERKLEY, FERNDALE, HUNTINGTON WOODS, PLEASANT RIDGE, PO	NTIAC AND	ROYAL						
OAX, MICHIGAN.								
FORM 990, PART VI, SECTION B, LINE 11: NO REVIEW WAS OR	WILL BE (	CONDUCTED.						
	·							
PORM 990, PART VI, SECTION C. LINE 19: NO REVIEW WAS OR	WILL BE	CONDUCTED.						
FORM 990, PART XI, LINE 2C								
THE PROCESS HAS NOT CHANGED.								
		<del></del>						

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

Schedule O (Form 990) 2009