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Form **990**Department of the Treasury
Internal Revenue Service**Return of Organization Exempt From Income Tax**Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except black lung
benefit trust or private foundation)

OMB No 1545-0047

2009Open to Public
Inspection

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

A For the 2009 calendar year, or tax year beginning**and ending****B Check if applicable**

- ☐ Address change
☐ Name change
☐ Initial return
☐ Terminated
☐ Amended return
☐ Application pending

Please use IRS label or print or type
See Specific Instructions**C Name of organization****ANN ARBOR AREA COMMUNITY FOUNDATION**

Doing Business As

Number and street (or P O box if mail is not delivered to street address)

301 NORTH MAIN STREET

Room/suite

300

City or town, state or country, and ZIP + 4

ANN ARBOR, MI 48104-2113**F Name and address of principal officer**
CHERYL ELLIOTT
SAME AS C ABOVE**D Employer identification number****38-6087967****E Telephone number****(734) 663-0401****G Gross receipts \$****17,227,699.****H(a) Is this a group return**

for affiliates?

☐ Yes☒ No**H(b) Are all affiliates included?**☐ Yes☐ No

If "No," attach a list. (see instructions)

H(c) Group exemption number ▶**I Tax-exempt status:** ☒ 501(c) (3) (insert no.) ☐ 4947(a)(1) or ☐ 527**J Website:** **WWW.AAACF.ORG****K Form of organization** ☒ Corporation ☐ Trust ☐ Association ☐ Other ▶**L Year of formation** **1963****M State of legal domicile** **MI****Part I Summary**

Activities & Governance		Revenue		Expenses		Net Assets or Fund Balances	
1	Briefly describe the organization's mission or most significant activities: COMMUNITY FOUNDATION PROVIDES FINANCIAL ASSISTANCE TO OTHER CHARITABLE ORGANIZATIONS.						
2	Check this box ☐ if the organization discontinued its operations or disposed of more than 25% of its net assets						
3	Number of voting members of the governing body (Part VI, line 1a)	3	16				
4	Number of independent voting members of the governing body (Part VI, line 1b)	4	16				
5	Total number of employees (Part V, line 2a)	5	16				
6	Total number of volunteers (estimate if necessary)	6	244				
7a	Total gross unrelated business revenue from Part VIII, column (C), line 12	7a	-8,200.				
7b	Net unrelated business taxable income from Form 990-T, line 34	7b	-8,200.				
8	Contributions and grants (Part VIII, line 1h)	Prior Year	Current Year				
9	Program service revenue (Part VIII, line 2g)	4,273,079.	3,407,761.				
10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)	-37,576.	446,860.				
11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	2,000.	2,400.				
12	Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	4,237,503.	3,857,021.				
13	Grants and similar amounts paid (Part IX, column (A), lines 1-3)	2,284,402.	2,504,509.				
14	Benefits paid to or for members (Part IX, column (A), line 4)						
15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	651,382.	589,346.				
16a	Professional fundraising fees (Part IX, column (A), line 11e)						
16b	Total fundraising expenses (Part IX, column (D), line 25) ▶ 341,017.						
17	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24f)	465,038.	665,471.				
18	Total expenses - Add lines 13-17 (must equal Part IX, column (A), line 25)	3,400,822.	3,759,326.				
19	Revenue less expenses. Subtract line 18 from line 12	836,681.	97,695.				
20	Total assets (Part X, line 16)	Beginning of Current Year	End of Year				
21	Total liabilities (Part X, line 26)	39,737,991.	47,799,053.				
22	Net assets or fund balances. Subtract line 21 from line 20	1,654,592.	1,660,648.				
		38,083,399.	46,138,405.				

Part II Signature Block

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge.

Sign
Here

Signature of officer

CHERYL ELLIOTT, CEO

Type or print name and title

Date

15 November 2010Paid
Preparer's
Use Only

Preparer's signature

Firm's name (or yours if self-employed), address, and ZIP + 4

DELOITTE TAX LLP
101 N. MAIN ST., SUITE 600
ANN ARBOR, MI 48104-1411

Date

NOV 15 2010

Check if self-employed

☐

Preparer's identifying number (see instructions)

EIN ▶

Phone no ▶ **(734) 769-6200**

May the IRS discuss this return with the preparer shown above? (see instructions)

☒ Yes☐ No

932001 02-04-10

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

Form **990** (2009)

SCANNED DEC 16 2010

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Part III Statement of Program Service Accomplishments**1** Briefly describe the organization's mission:

MISSION: PROVIDE FINANCIAL ASSISTANCE TO OTHER CHARITABLE ORGANIZATIONS. THE ORGANIZATION RECEIVES AND INVESTS CONTRIBUTIONS FROM THE GENERAL PUBLIC AND MAKES GRANTS TO EXEMPT ORGANIZATIONS.

2 Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ?☐ Yes ☒ No

If "Yes," describe these new services on Schedule O.

3 Did the organization cease conducting, or make significant changes in how it conducts, any program services?☐ Yes ☒ No

If "Yes," describe these changes on Schedule O.

4 Describe the exempt purpose achievements for each of the organization's three largest program services by expenses. Section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported.

4a (Code:) (Expenses \$ 3,124,182. including grants of \$ 2,504,509.) (Revenue \$)
THE FOUNDATION FULFILLS ITS EXEMPT PURPOSE BY GRANTING FUNDS TO A VARIETY OF TAX EXEMPT ORGANIZATIONS PRIMARILY IN THE ANN ARBOR AREA SELECTED FROM PROPOSALS PRESENTED.

4b (Code:) (Expenses \$ including grants of \$) (Revenue \$)

4c (Code:) (Expenses \$ including grants of \$) (Revenue \$)

4d Other program services (Describe in Schedule O)

(Expenses \$ including grants of \$) (Revenue \$)

4e Total program service expenses ► \$ 3,124,182.

Part IV Checklist of Required Schedules

	Yes	No
1 Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? <i>If "Yes," complete Schedule A</i>	X	
2 Is the organization required to complete Schedule B, Schedule of Contributors?	X	
3 Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? <i>If "Yes," complete Schedule C, Part I</i>		X
4 Section 501(c)(3) organizations. Did the organization engage in lobbying activities? <i>If "Yes," complete Schedule C, Part II</i>		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 reporting requirement and proxy tax? <i>If "Yes," complete Schedule C, Part III</i>		
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? <i>If "Yes," complete Schedule D, Part I</i>	X	
7 Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? <i>If "Yes," complete Schedule D, Part II</i>		X
8 Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If "Yes," complete Schedule D, Part III</i>		X
9 Did the organization report an amount in Part X, line 21; serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? <i>If "Yes," complete Schedule D, Part IV</i>		X
10 Did the organization, directly or through a related organization, hold assets in term, permanent, or quasi-endowments? <i>If "Yes," complete Schedule D, Part V</i>	X	
11 Is the organization's answer to any of the following questions "Yes"? <i>If so, complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable</i>	X	
• Did the organization report an amount for land, buildings, and equipment in Part X, line 10? <i>If "Yes," complete Schedule D, Part VI</i>		
• Did the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part VII.</i>		
• Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part VIII.</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 16? <i>If "Yes," complete Schedule D, Part IX</i>		
• Did the organization report an amount for other liabilities in Part X, line 25? <i>If "Yes," complete Schedule D, Part X</i>		
• Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48? <i>If "Yes," complete Schedule D, Part X</i>		
12 Did the organization obtain separate, independent audited financial statements for the tax year? <i>If "Yes," complete Schedule D, Parts XI, XII, and XIII</i>	X	
12A Was the organization included in consolidated, independent audited financial statements for the tax year? <i>If "Yes," completing Schedule D, Parts XI, XII, and XIII is optional</i>	Yes	No
		X
13 Is the organization a school described in section 170(b)(1)(A)(ii)? <i>If "Yes," complete Schedule E</i>		X
14a Did the organization maintain an office, employees, or agents outside of the United States?		X
b Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, and program service activities outside the United States? <i>If "Yes," complete Schedule F, Part I</i>		X
15 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the United States? <i>If "Yes," complete Schedule F, Part II</i>		X
16 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals located outside the United States? <i>If "Yes," complete Schedule F, Part III</i>		X
17 Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? <i>If "Yes," complete Schedule G, Part I</i>		X
18 Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? <i>If "Yes," complete Schedule G, Part II</i>		X
19 Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? <i>If "Yes," complete Schedule G, Part III</i>		X
20 Did the organization operate one or more hospitals? <i>If "Yes," complete Schedule H</i>		X

Part IV Checklist of Required Schedules (continued)

	Yes	No
21 Did the organization report more than \$5,000 of grants and other assistance to governments and organizations in the United States on Part IX, column (A), line 1? <i>If "Yes," complete Schedule I, Parts I and II</i>	X	
22 Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX, column (A), line 2? <i>If "Yes," complete Schedule I, Parts I and III</i>		X
23 Did the organization answer "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? <i>If "Yes," complete Schedule J</i>		X
24a Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? <i>If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25</i>		X
24b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?		
24c Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?		
24d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?		
25a 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? <i>If "Yes," complete Schedule L, Part I</i>		X
25b Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? <i>If "Yes," complete Schedule L, Part I</i>		X
26 Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified person outstanding as of the end of the organization's tax year? <i>If "Yes," complete Schedule L, Part II</i>		X
27 Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor, or a grant selection committee member, or to a person related to such an individual? <i>If "Yes," complete Schedule L, Part III</i>		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):		
28a A current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV</i>		X
28b A family member of a current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV</i>		X
28c An entity of which a current or former officer, director, trustee, or key employee of the organization (or a family member) was an officer, director, trustee, or direct or indirect owner? <i>If "Yes," complete Schedule L, Part IV</i>		X
29 Did the organization receive more than \$25,000 in non-cash contributions? <i>If "Yes," complete Schedule M</i>	X	
30 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M</i>		X
31 Did the organization liquidate, terminate, or dissolve and cease operations? <i>If "Yes," complete Schedule N, Part I</i>		X
32 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If "Yes," complete Schedule N, Part II</i>		X
33 Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? <i>If "Yes," complete Schedule R, Part I</i>		X
34 Was the organization related to any tax-exempt or taxable entity? <i>If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1</i>		X
35 Is any related organization a controlled entity within the meaning of section 512(b)(13)? <i>If "Yes," complete Schedule R, Part V, line 2</i>		X
36 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? <i>If "Yes," complete Schedule R, Part V, line 2</i>		X
37 Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? <i>If "Yes," complete Schedule R, Part VI</i>		X
38 Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19?	X	

Note. All Form 990 filers are required to complete Schedule O.

Part V Statements Regarding Other IRS Filings and Tax Compliance

		Yes	No
1a	Enter the number reported in Box 3 of Form 1096, Annual Summary and Transmittal of U.S. Information Returns. Enter -0- if not applicable.		
1b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable.		
c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	X	
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return.		
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return. (see instructions)	X	
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return?		X
b	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	X	
b	If "Yes," enter the name of the foreign country: CAYMAN ISLANDS, NETHERLANDS ANTILLES See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.		
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?		X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?		X
c	If "Yes," to line 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity Regarding Prohibited Tax Shelter Transaction?		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible?		X
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?		
7	Organizations that may receive deductible contributions under section 170(c).		
a	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?		X
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?		
c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?		X
d	If "Yes," indicate the number of Forms 8282 filed during the year		
e	Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?		X
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?		X
g	For all contributions of qualified intellectual property, did the organization file Form 8899 as required?	X	
h	For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as required?	X	
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year?		X
9	Sponsoring organizations maintaining donor advised funds.		
a	Did the organization make any taxable distributions under section 4966?		X
b	Did the organization make a distribution to a donor, donor advisor, or related person?		X
10	Section 501(c)(7) organizations. Enter:		
a	Initiation fees and capital contributions included on Part VIII, line 12		
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities		
11	Section 501(c)(12) organizations. Enter:		
a	Gross income from members or shareholders		
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them)		
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year		

Part VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions

Section A. Governing Body and Management

	Yes	No
1a Enter the number of voting members of the governing body		
1b Enter the number of voting members that are independent		
2 Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?		X
3 Did the organization delegate control over management duties customarily 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?		X
5 Did the organization become aware during the year of a material diversion of the organization's assets?		X
6 Does the organization have members or stockholders?		X
7a Does the organization have members, stockholders, or other persons who may elect one or more members of the governing body?		X
7b Are any decisions of the governing body subject to approval by members, stockholders, or other persons?		X
8 Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:		
a The governing body?	X	
b Each committee with authority to act on behalf of the governing body?	X	
9 Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O		X

Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code)

	Yes	No
10a Does the organization have local chapters, branches, or affiliates?	X	
b If "Yes," does the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with those of the organization?	X	
11 Has the organization provided a copy of this Form 990 to all members of its governing body before filing the form?	X	
11A Describe in Schedule O the process, if any, used by the organization to review this Form 990.		
12a Does the organization have a written conflict of interest policy? If "No," go to line 13	X	
b Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	X	
c Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this is done	X	
13 Does the organization have a written whistleblower policy?	X	
14 Does the organization have a written document retention and destruction policy?	X	
15 Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?		
a The organization's CEO, Executive Director, or top management official	X	
b Other officers or key employees of the organization	X	
If "Yes" to line 15a or 15b, describe the process in Schedule O. (See instructions)		
16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?		X
b If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the organization's exempt status with respect to such arrangements?		

Section C. Disclosure

17 List the states with which a copy of this Form 990 is required to be filed **MI**

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 for public inspection. Indicate how you make these available. Check all that apply.
☒ Own website ☒ Another's website ☒ Upon request

19 Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of interest policy, and financial statements available to the public.

20 State the name, physical address, and telephone number of the person who possesses the books and records of the organization: **LYNN MARTIN - 734-663-0401**
301 N. MAIN STREET, SUITE 300, ANN ARBOR, MI 48104

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

1a Complete this table for all persons required to be listed. 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, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.

• List 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 (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.

• List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.

• List all of the organization's **former** directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

List persons in the following order: individual trustees or directors; institutional trustees; officers; key employees; highest compensated employees; and former such persons.

☐ Check this box if the organization did not compensate any current officer, director, or trustee

(A) Name and Title	(B) Average hours per week	(C) Position (check all that apply)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
DEBBIE BEUCHE MEMBER	2.50	X						0.	0.	0.
REBECCA BOYLAN MEMBER	2.50	X						0.	0.	0.
FRANK CAMBRIA MEMBER	1.00	X						0.	0.	0.
MICHAEL FINNEY MEMBER	1.00	X						0.	0.	0.
JAY HACK NON-VOTING TRAINEE	1.00	X						0.	0.	0.
BHUSHAN KULKARNI MEMBER	2.00	X						0.	0.	0.
ALEXANDER PEARLMAN MEMBER	1.00	X						0.	0.	0.
JENNIFER POTEAT MEMBER	1.50	X						0.	0.	0.
JOHN W. REED MEMBER	1.50	X						0.	0.	0.
MOLLY RESNIK MEMBER	1.50	X						0.	0.	0.
TESSA ROBERTSON MEMBER	1.00	X						0.	0.	0.
LEVI THOMPSON MEMBER	1.00	X						0.	0.	0.
MARC WEISER MEMBER	0.50	X						0.	0.	0.
BRIAN CAMPBELL MEMBER	2.00	X						0.	0.	0.
PAUL SCHUTT MEMBER	1.50	X						0.	0.	0.
CHERYL ELLIOTT PRESIDENT & CEO	55.00			X				99,300.	0.	2,698.
DOUG WEBER CFO	20.00			X				45,258.	0.	1,261.

Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)

(A) Name and title	(B) Average hours per week	(C) Position (check all that apply)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
MARTHA BLOOM VICE PRESIDENT	20.00			X				37,786.	0.	1,112.
MARTHA DARLING VICE CHAIR	3.00			X				0.	0.	0.
JYOTI GUPTA SECRETARY	2.50			X				0.	0.	0.
HUGH J. MORGAN CHAIR PERSON	3.50			X				0.	0.	0.
DAVID SARNS TREASURER	2.50			X				0.	0.	0.
1b Total								182,344.	0.	5,071.

2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 in reportable compensation from the organization **0**

- 3** Did the organization list any **former** officer, director or trustee, key employee, or highest compensated employee on line 1a? If "Yes," complete Schedule J for such individual
- 4** For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? If "Yes," complete Schedule J for such individual
- 5** Did any person listed on line 1a receive or accrue compensation from any unrelated organization for services rendered to the organization? If "Yes," complete Schedule J for such person

	Yes	No
3		X
4		X
5		X

Section B. Independent Contractors

1 Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization. **NONE**

(A) Name and business address	(B) Description of services	(C) Compensation

2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 in compensation from the organization **0**

Part VIII Statement of Revenue

				(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
Contributions, gifts, grants and other similar amounts	1 a	Federated campaigns	1a				
	b	Membership dues	1b				
	c	Fundraising events	1c				
	d	Related organizations	1d				
	e	Government grants (contributions)	1e				
	f	All other contributions, gifts, grants, and similar amounts not included above	1f	3,407,761.			
	g	Noncash contributions included in lines 1a-1f \$		906,004.			
	h	Total. Add lines 1a-1f		3,407,761.			
Program Service Revenue			Business Code				
	2 a						
	b						
	c						
	d						
	e						
	f	All other program service revenue					
g	Total. Add lines 2a-2f						
Other Revenue	3	Investment income (including dividends, interest, and other similar amounts)		526,944.		-8,200.	535,144.
	4	Income from investment of tax-exempt bond proceeds					
	5	Royalties					
	6 a	Gross Rents	(i) Real (ii) Personal				
	b	Less: rental expenses					
	c	Rental income or (loss)					
	d	Net rental income or (loss)		2,400.		2,400.	
	7 a	Gross amount from sales of assets other than inventory	(i) Securities (ii) Other				
	b	Less: cost or other basis and sales expenses					
	c	Gain or (loss)					
	d	Net gain or (loss)		-80,084.		-80,084.	
	8 a	Gross income from fundraising events (not including \$ _____ of contributions reported on line 1c) See Part IV, line 18	a				
	b	Less: direct expenses	b				
	c	Net income or (loss) from fundraising events					
	9 a	Gross income from gaming activities See Part IV, line 19	a				
	b	Less: direct expenses	b				
	c	Net income or (loss) from gaming activities					
	10 a	Gross sales of inventory, less returns and allowances	a				
	b	Less: cost of goods sold	b				
	c	Net income or (loss) from sales of inventory					
	Miscellaneous Revenue			Business Code			
11 a							
b							
c							
d	All other revenue						
e	Total. Add lines 11a-11d						
12	Total revenue. See instructions		3,857,021.	0.	-8,200.	457,460.	

Part IX Statement of Functional Expenses

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

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

Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1 Grants and other assistance to governments and organizations in the U.S. See Part IV, line 21	2,504,509.	2,504,509.		
2 Grants and other assistance to individuals in the U.S. See Part IV, line 22				
3 Grants and other assistance to governments, organizations, and individuals outside the U.S. See Part IV, lines 15 and 16				
4 Benefits paid to or for members				
5 Compensation of current officers, directors, trustees, and key employees	182,344.	36,383.	64,343.	81,618.
6 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
7 Other salaries and wages	335,015.	119,056.	122,126.	93,833.
8 Pension plan contributions (include section 401(k) and section 403(b) employer contributions)	10,266.	3,084.	3,700.	3,482.
9 Other employee benefits	14,648.	2,324.	6,607.	5,717.
10 Payroll taxes	47,073.	14,127.	16,982.	15,964.
11 Fees for services (non-employees).				
a Management				
b Legal				
c Accounting				
d Lobbying				
e Professional fundraising services See Part IV, line 17				
f Investment management fees	352,566.	352,566.		
g Other	26,639.	8,118.	13,932.	4,589.
12 Advertising and promotion	771.		208.	563.
13 Office expenses				
14 Information technology				
15 Royalties				
16 Occupancy	14,765.	4,436.	5,321.	5,008.
17 Travel				
18 Payments of travel or entertainment expenses for any federal, state, or local public officials				
19 Conferences, conventions, and meetings	19,028.	5,923.	2,991.	10,114.
20 Interest	20,842.	6,262.	7,512.	7,068.
21 Payments to affiliates				
22 Depreciation, depletion, and amortization	46,781.	14,055.	16,861.	15,865.
23 Insurance	6,853.	2,059.	2,470.	2,324.
24 Other expenses. Itemize expenses not covered above. (Expenses grouped together and labeled miscellaneous may not exceed 5% of total expenses shown on line 25 below.)				
a UNCOLLECTIBLE PLEDGE EX	50,000.	0.	0.	50,000.
b EQUIPMENT & MAINTENANCE	29,490.	8,860.	10,629.	10,001.
c DONOR SERVICES	19,533.	6,019.	1,992.	11,522.
d MISCELLANEOUS	14,284.	12,032.	1,160.	1,092.
e ANNUAL REPORT	13,260.	5,304.	1,326.	6,630.
f All other expenses	50,659.	19,065.	15,967.	15,627.
25 Total functional expenses. Add lines 1 through 24f	3,759,326.	3,124,182.	294,127.	341,017.
26 Joint costs. Check here ☐ if following SOP 98-2. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation				

Part X Balance Sheet

		(A) Beginning of year		(B) End of year
Assets	1 Cash - non-interest-bearing		1	
	2 Savings and temporary cash investments	2,365,898.	2	2,783,005.
	3 Pledges and grants receivable, net	506,386.	3	738,538.
	4 Accounts receivable, net		4	
	5 Receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L		5	
	6 Receivables from other disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B). Complete Part II of Schedule L		6	
	7 Notes and loans receivable, net		7	
	8 Inventories for sale or use		8	
	9 Prepaid expenses and deferred charges	14,439.	9	18,042.
	10a Land, buildings, and equipment - cost or other basis. Complete Part VI of Schedule D	10a 1,273,252.		
	b Less: accumulated depreciation	10b 131,603.	1,182,428.	10c 1,141,649.
	11 Investments - publicly traded securities	16,887,857.	11	20,426,193.
	12 Investments - other securities. See Part IV, line 11	17,399,905.	12	20,897,669.
	13 Investments - program-related. See Part IV, line 11		13	
	14 Intangible assets		14	
	15 Other assets. See Part IV, line 11	1,381,078.	15	1,793,957.
16 Total assets. Add lines 1 through 15 (must equal line 34)	39,737,991.	16	47,799,053.	
Liabilities	17 Accounts payable and accrued expenses	51,823.	17	35,731.
	18 Grants payable	591,008.	18	748,496.
	19 Deferred revenue		19	
	20 Tax-exempt bond liabilities		20	
	21 Escrow or custodial account liability. Complete Part IV of Schedule D		21	
	22 Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L		22	
	23 Secured mortgages and notes payable to unrelated third parties	494,500.	23	
	24 Unsecured notes and loans payable to unrelated third parties		24	
	25 Other liabilities. Complete Part X of Schedule D	517,261.	25	876,421.
	26 Total liabilities. Add lines 17 through 25	1,654,592.	26	1,660,648.
Net Assets or Fund Balances	Organizations that follow SFAS 117, check here ☒ and complete lines 27 through 29, and lines 33 and 34.			
	27 Unrestricted net assets	36,522,555.	27	44,043,599.
	28 Temporarily restricted net assets	1,560,844.	28	2,094,806.
	29 Permanently restricted net assets		29	
	Organizations that do not follow SFAS 117, check here ☐ and complete lines 30 through 34.			
	30 Capital stock or trust principal, or current funds		30	
	31 Paid-in or capital surplus, or land, building, or equipment fund		31	
	32 Retained earnings, endowment, accumulated income, or other funds		32	
	33 Total net assets or fund balances	38,083,399.	33	46,138,405.
	34 Total liabilities and net assets/fund balances	39,737,991.	34	47,799,053.

Part XI Financial Statements and Reporting

1 Accounting method used to prepare the Form 990 ☐ Cash ☒ Accrual ☐ Other _____

If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O.

2a Were the organization's financial statements compiled or reviewed by an independent accountant?

b Were the organization's financial statements audited by an independent accountant?

c If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant?

If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O

d If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were issued on a consolidated basis, separate basis, or both:

☒ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis

3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?

b 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

	Yes	No
2a		X
2b	X	
2c	X	
3a		X
3b		

Form 990 (2009)

Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)

(Complete only if you checked the box on line 5, 7, or 8 of Part I.)

Section A. Public Support

Calendar year (or fiscal year beginning in) ►	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	3915272.	2800450.	5616300.	4273079.	3396698.	20001799.
2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3 The value of services or facilities furnished by a governmental unit to the organization without charge						
4 Total. Add lines 1 through 3	3915272.	2800450.	5616300.	4273079.	3396698.	20001799.
5 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						4386750.
6 Public support. Subtract line 5 from line 4						15615049.

Section B. Total Support

Calendar year (or fiscal year beginning in) ►	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
7 Amounts from line 4	3915272.	2800450.	5616300.	4273079.	3396698.	20001799.
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	749,126.	803,694.	1151782.	457,271.	529,344.	3691217.
9 Net income from unrelated business activities, whether or not the business is regularly carried on						
10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)						
11 Total support. Add lines 7 through 10						23693016.
12 Gross receipts from related activities, etc. (see instructions)					12	
13 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here ► ☐						

Section C. Computation of Public Support Percentage

14 Public support percentage for 2009 (line 6, column (f) divided by line 11, column (f))	14	65.91	%
15 Public support percentage from 2008 Schedule A, Part II, line 14	15	68.16	%
16a 33 1/3% support test - 2009. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization ► ☒			
b 33 1/3% support test - 2008. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization ► ☐			
17a 10% -facts-and-circumstances test - 2009. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization ► ☐			
b 10% -facts-and-circumstances test - 2008. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization ► ☐			
18 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions ► ☐			

Schedule A (Form 990 or 990-EZ) 2009

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

Calendar year (or fiscal year beginning in) ▶	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
1 Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants.")						
2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3 Gross receipts from activities that are not an unrelated trade or business under section 513						
4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5 The value of services or facilities furnished by a governmental unit to the organization without charge						
6 Total. Add lines 1 through 5						
7a Amounts included on lines 1, 2, and 3 received from disqualified persons						
b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
c Add lines 7a and 7b						
8 Public support (Subtract line 7c from line 6)						

Section B. Total Support

Calendar year (or fiscal year beginning in) ▶	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
9 Amounts from line 6						
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
c Add lines 10a and 10b						
11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)						
13 Total support (Add lines 9, 10c, 11, and 12)						
14 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here ▶ ☐						

Section C. Computation of Public Support Percentage

15 Public support percentage for 2009 (line 8, column (f) divided by line 13, column (f))	15	%
16 Public support percentage from 2008 Schedule A, Part III, line 15	16	%

Section D. Computation of Investment Income Percentage

17 Investment income percentage for 2009 (line 10c, column (f) divided by line 13, column (f))	17	%
18 Investment income percentage from 2008 Schedule A, Part III, line 17	18	%

19a 33 1/3% support tests - 2009. If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization ▶ ☐

b 33 1/3% support tests - 2008. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and line 18 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization ▶ ☐

20 Private foundation. If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions ▶ ☐

Schedule D
(Form 990)

Department of the Treasury
Internal Revenue 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.

OMB No 1545-0047

2009

Open to Public
Inspection

Name of the organization

ANN ARBOR AREA COMMUNITY FOUNDATION

Employer identification number

38-6087967

Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" to Form 990, Part IV, line 6.

	(a) Donor advised funds	(b) Funds and other accounts
1 Total number at end of year	83	
2 Aggregate contributions to (during year)	1,099,387.	
3 Aggregate grants from (during year)	735,821.	
4 Aggregate value at end of year	10,122,886.	

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 advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit? ☒ Yes ☐ No

Part II Conservation Easements. Complete if the organization answered "Yes" to Form 990, Part IV, line 7.

1 Purpose(s) of conservation easements held by the organization (check all that apply).

☐ Preservation of land for public use (e.g., recreation or pleasure)	☐ Preservation of an historically important land area
☐ Protection of natural habitat	☐ Preservation of a certified historic structure
☐ Preservation of open space	

2 Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year

	Held at the End of the Tax Year
a Total number of conservation easements	2a
b Total acreage restricted by conservation easements	2b
c Number of conservation easements on a certified historic structure included in (a)	2c
d Number of conservation easements included in (c) acquired after 8/17/06	2d

3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year ▶

4 Number of states where property subject to conservation easement is located ▶

5 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? ☐ Yes ☐ No

6 Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation easements during the year ▶

7 Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year ▶ \$

8 Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)? ☐ Yes ☐ No

9 In Part XIV, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets.

Complete if the organization answered "Yes" to Form 990, Part IV, line 8

- 1a If the organization elected, as permitted under SFAS 116, not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIV, the text of the footnote to its financial statements that describes these items.
- b 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, or research in furtherance of public service, provide the following amounts relating to these items:
- (i) Revenues included in Form 990, Part VIII, line 1 ▶ \$
- (ii) Assets included in Form 990, Part X ▶ \$
- 2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 relating to these items:
- a Revenues included in Form 990, Part VIII, line 1 ▶ \$
- b Assets included in Form 990, Part X ▶ \$

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets (continued)

3 Using the organization's acquisition, accession, and other records, check any of the following that are a significant use of its collection items (check all that apply):

- a ☐ Public exhibition
 b ☐ Scholarly research
 c ☐ Preservation for future generations
 d ☐ Loan or exchange programs
 e ☐ Other _____

4 Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIV.

5 During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection? ☐ Yes ☐ No

Part IV Escrow and Custodial Arrangements. Complete if organization answered "Yes" to Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21.

1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X? ☐ Yes ☐ No

b If "Yes," explain the arrangement in Part XIV and complete the following table.

- c Beginning balance
 d Additions during the year
 e Distributions during the year
 f Ending balance

	Amount
1c	
1d	
1e	
1f	

2a Did the organization include an amount on Form 990, Part X, line 21? ☐ Yes ☐ No

b If "Yes," explain the arrangement in Part XIV

Part V Endowment Funds. Complete if the organization answered "Yes" to Form 990, Part IV, line 10

	(a) Current year	(b) Prior year	(c) Two years back	(d) Three years back	(e) Four years back
1a Beginning of year balance	36522554.	49291680.			
b Contributions	2,503,036.	3,930,684.			
c Net investment earnings, gains, and losses	8,777,334.	-13288593.			
d Grants or scholarships	2,504,509.	2,284,402.			
e Other expenditures for facilities and programs	256,044.	251,624.			
f Administrative expenses	998,773.	875,191.			
g End of year balance	44043598.	36522554.			

2 Provide the estimated percentage of the year end balance held as

- a Board designated or quasi-endowment ► 96.87 %
 b Permanent endowment ► .00 %
 c Term endowment ► 3.13 %

3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by:

- (i) unrelated organizations
 (ii) related organizations

	Yes	No
3a(i)		X
3a(ii)		X
3b		

b If "Yes" to 3a(ii), are the related organizations listed as required on Schedule R?

4 Describe in Part XIV the intended uses of the organization's endowment funds

Part VI Investments - Land, Buildings, and Equipment. See Form 990, Part X, line 10.

Description of investment	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land				
b Buildings	1,123,500.		31,598.	1,091,902.
c Leasehold improvements				
d Equipment	149,752.		100,005.	49,747.
e Other				
Total. Add lines 1a through 1e (Column (d) must equal Form 990, Part X, column (B), line 10(c))				1,141,649.

Schedule D (Form 990) 2009

Part XI Reconciliation of Change in Net Assets from Form 990 to Audited Financial Statements

1	Total revenue (Form 990, Part VIII, column (A), line 12)	1	3,857,021.
2	Total expenses (Form 990, Part IX, column (A), line 25)	2	3,759,326.
3	Excess or (deficit) for the year. Subtract line 2 from line 1	3	97,695.
4	Net unrealized gains (losses) on investments	4	7,891,460.
5	Donated services and use of facilities	5	
6	Investment expenses	6	
7	Prior period adjustments	7	
8	Other (Describe in Part XIV.)	8	65,851.
9	Total adjustments (net). Add lines 4 through 8	9	7,957,311.
10	Excess or (deficit) for the year per audited financial statements. Combine lines 3 and 9	10	8,055,006.

Part XII Reconciliation of Revenue per Audited Financial Statements With Revenue per Return

1	Total revenue, gains, and other support per audited financial statements	1	11,591,329.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:		
a	Net unrealized gains on investments	2a	7,674,893.
b	Donated services and use of facilities	2b	
c	Recoveries of prior year grants	2c	
d	Other (Describe in Part XIV.)	2d	65,851.
e	Add lines 2a through 2d	2e	7,740,744.
3	Subtract line 2e from line 1	3	3,850,585.
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:		
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	
b	Other (Describe in Part XIV.)	4b	6,436.
c	Add lines 4a and 4b	4c	6,436.
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)	5	3,857,021.

Part XIII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return

1	Total expenses and losses per audited financial statements	1	3,708,406.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:		
a	Donated services and use of facilities	2a	
b	Prior year adjustments	2b	
c	Other losses	2c	
d	Other (Describe in Part XIV.)	2d	
e	Add lines 2a through 2d	2e	0.
3	Subtract line 2e from line 1	3	3,708,406.
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:		
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	
b	Other (Describe in Part XIV.)	4b	50,920.
c	Add lines 4a and 4b	4c	50,920.
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)	5	3,759,326.

Part XIV Supplemental Information

Complete this part to provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, lines 1b and 2b; Part V, line 4; Part X, line 2; Part XI, line 8; Part XII, lines 2d and 4b, and Part XIII, lines 2d and 4b. Also complete this part to provide any additional information.

PART V, LINE 4: BEGINNING WITH THE 2009 REPORTING YEAR, THE COMMUNITY

FOUNDATION'S BOARD OF TRUSTEES DETERMINED THAT ASSETS THAT WOULD QUALIFY AS DONOR-RESTRICTED ENDOWMENTS, BUT FOR THE FOUNDATION'S VARIANCE POWER, SHOULD BE CLASSIFIED AS BOARD-DESIGNATED ASSETS. THESE ARE INCLUDED IN THE PERCENT REPORTED ON SCHEDULE D, PART V, LINE 2A. THE INTENDED USE OF THE FUNDS IS DETERMINED BY THE DONORS, AND THE INVESTMENT AND SPENDING POLICIES ARE DETERMINED BY THE BOARD, FOLLOWING THE UNIFORM PRUDENT MANAGEMENT OF INSTITUTIONAL FUNDS ACT (UPMIFA).

Part XIV Supplemental Information (continued)**PART XI, LINE 8 - OTHER ADJUSTMENTS:**

CHANGE IN VALUE OF CHARITABLE REMAINDER TRUST: 65851.

PART XII, LINE 2D - OTHER ADJUSTMENTS:

CHANGE IN VALUE OF CHARITABLE REMAINDER TRUST: 65851.

PART XII, LINE 4B - OTHER ADJUSTMENTS:

AGENCY ENDOWMENT FUND GIFTS - SFAS 136: 1010.

AGENCY ENDOWMENT FUND INVESTMENT INCOME - SFAS 136: 12923.

AGENCY ENDOWMENT FUND REALIZED GAINS - SFAS 136: -7497.

PART XIII, LINE 4B - OTHER ADJUSTMENTS:

AGENCY ENDOWMENT FUND EXPENSES - SFAS 136: 20467.

AGENCY ENDOWMENT FUND GRANTS - SFAS 136: 30453.

Name of the organization

Employer identification number
38-6087967

ANN ARBOR AREA COMMUNITY FOUNDATION

Part I	General Information on Grants and Assistance
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- 1** Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?

- 2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.**

Part II	Grants and Other Assistance to Governments and Organizations in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Check this box if no one recipient received more than \$5,000. Use Part IV and Schedule I-1 (Form 990) if additional space is needed	☐	▲

[illegible]

- | | | |
|---|--|-----|
| 2 | Enter total number of section 501(c)(3) and government organizations | 75. |
| 3 | Enter total number of other organizations | |

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

Schedule I (Form 990) 2009

ANN ARBOR AREA COMMUNITY FOUNDATION
FORM 990, SCHEDULE I, PART II, LINE 1

ORGANIZATION	ADDRESS	TAX ID	PURPOSE OF GRANT	TOTAL GRANTS
a2ethics.org	PO Box 131384 Ann Arbor, MI 48113	80-0220600 501 (c) (3)	operating support	6,000
American Civil Liberties Union Fund of Michigan	2966 Woodward Avenue Detroit, MI 48201	23-7243421 501 (c) (3)	operating support	12,500
American Friends Service Committee	1501 Cherry St Philadelphia, PA 19102	23-1352010 501 (c) (3)	operating support	10,000
Amnesty International USA, Inc	5 Penn Plaza New York, NY 10001	52-0851555 501 (c) (3)	operating support	10,000
Ann Arbor Academy	111 East Mosley Ann Arbor, MI 48104	20-8035148 501 (c) (3)	scholarship support	52,556
Ann Arbor Art Center	117 W Liberty Ann Arbor, MI 48104	23-7205537 501 (c) (3)	2009 Fund Distribution Marketing—Year 101 Purchase of "Bike Hoop" General Operating ArtMakers Teens 2009-2010	4,970 1,000 1,000 4,500 6,250
Ann Arbor Center for Independent Living	3941 Research Park Drive Ann Arbor, MI 48108	38-2133063 501 (c) (3)	2009 Fund Distribution Creating a Gathering Place for our Disability Community	6,795 6,747
Ann Arbor Film Festival	308 1/2 S State Ann Arbor, MI 48104	38-2379836 501 (c) (3)	External communications initiative	5,000
Ann Arbor Public Schools	2555 S State Street Ann Arbor, MI 48104	38-6004028 501 (c) (3)	Pioneer High School Academics and Athletics	7,780
Ann Arbor Senior Center, City of Ann Arbor	1320 Baldwin Ave Ann Arbor, MI 48104	38-6004534 Gov't	Sustainability plan	16,949
Ann Arbor SPARK Foundation	201 S Division Ann Arbor, MI 48104	38-3416745 501 (c) (3)	Business Acceleration Services	50,000
Ann Arbor Summer Festival	310 Depot Street, Suite 3 Ann Arbor, MI 48104	38-23077397 501 (c) (3)	Pilot Volunteer program Matching campaign operating support	5,000 1,000 8,000
Ann Arbor Symphony Orchestra	220 E Huron St., Suite 470 Ann Arbor, MI 48104	38-6069701 501 (c) (3)	Sustaining Family Concert Series for 09-10 Season Symphony Guild	20,000 1,000

ANN ARBOR AREA COMMUNITY FOUNDATION
FORM 990, SCHEDULE I, PART II, LINE 1

ORGANIZATION	ADDRESS	TAX ID	PURPOSE OF GRANT	TOTAL GRANTS
Ann Arbor Teen Center, Inc - Neutral Zone	310 E Washington Street Ann Arbor, MI 48104	38-3407568 501(c) (3)	operating support Recording studio Support the drop-in program Friend of Youth Philanthropy Award	13,925 20,000 5,000 500
Arthur R Marshall Foundation	Merrill Lynch, 101 N Clematis St West Palm Beach, FL 33401	65-0819331 501(c) (3)	summer camp for high school students	5,000
Arts Alliance of the Ann Arbor Area	202 East Huron, Suite 202 Ann Arbor, MI 48104	26-0638491 501(c) (3)	Implementation of Cultural Plan Annual Membership Sponsorship support Creative Conversations	200,000 350 250
Big Brother/Big Sisters of Washtenaw County	2890 Carpenter Rd, Suite 1400 Ann Arbor, MI 48108	26-0344984 501(c) (3)	2009 Fund Distribution	11,244
Bird Center of Washtenaw County, Inc	2229 Needham Road Ann Arbor, MI 48104	83-0406863 501(c) (3)	operating support	6,500
Catholic Social Services	4925 Packard Road Ann Arbor, MI 48108	38-1654500 501(c) (3)	Older adult critical services stabilization Blueprint for Aging Fr Patrick Jackson House Human resources software	15,000 20,000 4,400 2,500
Chelsea Center for the Arts	400 Congdon St Chelsea, MI 48118	38-3255762 501(c) (3)	operating support	6,000
Cleary University	3601 Plymouth Rd Ann Arbor, MI 48105	38-1393841 501(c) (3)	to provide scholarships for deserving students	13,200
Community Action Network	PO Box 130076 Ann Arbor, MI 48113	38-2792610 501(c) (3)	Summer in the park 2009 Fund Distribution More than music Adjusting to a changing funding landscape	12,000 16,343 4,500 20,000
Corner Health Center	47 N Huron St Ypsilanti, MI 48157	38-2329742 501(c) (3)	operating support Health care and support for low income adolescents	13,363 25,000
Council of Michigan Foundations	1 S Harbor Avenue, Suite 3 Grand Haven, MI 49417	38-6263347 501(c) (3)	2009 Member dues	5,360
Covenant Presbyterian Church	5171 Jackson Road Ann Arbor, MI 48103	501(c) (3)	Nations Light/general fund	10,000

ANN ARBOR AREA COMMUNITY FOUNDATION
FORM 990, SCHEDULE I, PART II, LINE 1

ORGANIZATION	ADDRESS	TAX ID	PURPOSE OF GRANT	TOTAL GRANTS
Dispute Resolution Center of Michigan	110 N Fourth Ave Ann Arbor, MI 48107	38-2489201 501(c)(3)	2009 Fund Distribution/Truancy Prevention Mediation	8,105
Eastern Michigan University - Financial Aid O	Starkweather Hall, 1st Floor Ypsilanti, MI 48197	38-6005986 501(c)(3)	Scholarships	7,300
Eastern Michigan University Foundation	1349 S Huron Ypsilanti, MI 48197	38-2953297 501(c)(3)	The B Side The Business Side of Youth	29,741
Ecology Center of Ann Arbor	110 N Division Ann Arbor, MI 48104	38-1912803 501(c)(3)	Creating an Ann Arbor Area Clean Energy Program	58,000
Ele's Place	1145 W Oakland Lansing, MI 48915	38-2976751 501(c)(3)	operating support	11,200
Emerson School	5425 Scio Church Road Ann Arbor, MI 48103	23-7442766 501(c)(3)	Mini-grant Award Financial aid 2009 Spending distribution	400 4,000 1,543
Evangelical Homes of Michigan	18000 Coyle Avenue Detroit, MI 48235-2825	38-1299215 501(c)(3)	Memory support center	23,066
First Presbyterian Church	1432 Washtenaw Avenue Ann Arbor, MI 48104	38-1360543 501(c)(3)	2010 Operating Budget support for Boy Scout Troop 7	10,000 5,500
Food Gatherers	PO Box 131037 Ann Arbor, MI 48113	38-2853858 501(c)(3)	The BIG Community harvest operating support	92,000 15,500
Friends of CASA	2270 Platt Road Ann Arbor, MI 48104	38-3481707 501(c)(3)	advocacy for abused & neglected children Community involvement model	10,000 18,000
Friends of the Ypsilanti Freighthouse	PO Box 970919 Ypsilanti, MI 48197	72-1577759 501(c)(3)	Restoration project	103,300
Friends School in Detroit	1100 St Aubin Street Detroit, MI 48207	38-1753900 501(c)(3)	operating support	10,000
Growing Hope	PO Box 980129 Ypsilanti, MI 48198	74-3091845 501(c)(3)	Operating support/update, configure, replace & seal duct work	6,000
Habitat for Humanity	170 April Drive Ann Arbor, MI 48103	38-2874694 501(c)(3)	Financial homeownership readiness program, operating support	16,486
Hope Unlimited	PO Box 2707 Los Alamitos, CA 90720	33-0480141 501(c)(3)	general fund	10,000

ANN ARBOR AREA COMMUNITY FOUNDATION
FORM 990, SCHEDULE I, PART II, LINE 1

ORGANIZATION	ADDRESS	TAX ID	PURPOSE OF GRANT	TOTAL GRANTS
Housing Bureau for Seniors, Inc	2401 Plymouth Road, Suite C Ann Arbor, MI 48105	38-6006309 501 (c) (3)	Elder Care and Cost Assistance Program	14,958
Humane Society of Huron Valley	3100 Cherry Hill Road Ann Arbor, MI 48105	38-1474931 501 (c) (3)	operating support Capital Campaign	10,000 220
Interfaith Hospitality Network of Washtenaw County	4290 Jackson Road Ann Arbor, MI 48103	38-3052598 501(c)(3)	Capacity building for donor & volunteer mgmt, operating support	18,000
Jewish Family Services of Washtenaw County	2245 S State St, #200 Ann Arbor, MI 48104	41-2147486 501 (c) (3)	Patient partners program	21,530
Kali's Cure for Paralysis Foundation, Inc	5475 Blue Heron Drive Alma, MI 48801	26-2473236 501 (c) (3)	operating support	5,000
Michigan State University	252 Student Services Building Michigan State University East Lansing, MI 48824-1113	38-6005984 501 (c) (3)	Scholarships Operating support designated for the Department of Advertising, Pu	2,500 2,000 2,500
Michigan Theater Foundation, Inc	603 E Liberty Ann Arbor, MI 48104	38-2269013 501 (c) (3)	to support programming, events and special initi Operating Support	5,373 8,950
Neighborhood Senior Services	PO Box 995 Ann Arbor, MI 48106	38-2112496 501 (c) (3)	NSS Bridge funding plan operating support 2009 annual spending distribution	22,819 1,000 134
Ozone House, Inc	1705 Washtenaw Avenue Ann Arbor, MI 48104	38-1916505 501 (c) (3)	support services for at-risk youth non-residential youth and family support program general operating	5,000 25,000 1,450
Packard Health	3174 Packard Ann Arbor, MI 48108	38-2269817 501(c)(3)	Packard expansion, operating	27,000
Peace Neighborhood Center	1111 N Maple Road Ann Arbor, MI 48103	23-7437867 501 (c) (3)	operating support 2009 Spending distribution Peace Neighborhood youth services bridge grant	17,100 1,965 15,000
Planned Parenthood Mid-Michigan Alliance	P O Box 3673 Ann Arbor, MI 48106	38-1707521 501 (c) (3)	Teen sisters playing it safe refurbishing of the ann arbor clinics operating support	2,500 7,500 9,500
SafeHouse Center	4100 Clark Road Ann Arbor, MI 48105	38-2121751 501 (c) (3)	operating support	5,645

**ANN ARBOR AREA COMMUNITY FOUNDATION
FORM 990, SCHEDULE I, PART II, LINE 1**

ORGANIZATION	ADDRESS	TAX ID	PURPOSE OF GRANT	TOTAL GRANTS
Shelter Association of Washtenaw County	PO Box 7370 Ann Arbor, MI 48107	38-2533030 501 (c) (3)	Shelter association health clinic operating support	22,063 25,146
SOS Community Services	101 S Huron Street Ypsilanti, MI 48197	38-2037588 501 (c) (3)	2009 annual spending distribution Housing crisis help for this recession	52 6,000
Southeast Michigan Land Conservancy	8383 Vreeland Road Superior Twp , MI 48198	38-2812223 501(c) (3)	Strategic and conservation planning	8,453
Stewardship Network	416 Longshore Dr Ann Arbor, MI 48105	56-2471470 501(c) (3)	operating support	6,000
Susquehanna University	Selinsgrove, PA 17870	23-1353385 501 (c) (3)	operating support	6,000
Swarthmore College	500 College Avenue Swarthmore, PA 19081-1397	23-1352683 501 (c) (3)	designated as follows	6,000
The New Horizons Foundation	4570 Hilton Parkway, Suite 203 Colorado Springs, CO 80919	84-1123082 501(c) (3)	Noble Heart Fund	6,000
The Sword of the Spirit	4828 S Hagadorn Road East Lansing, MI 48823	38-3002347 501(c) (3)	EOT BTY Travel Fund	6,000
The Wellness Community of Southeast Michigan	2010 Hogback Rd , Suite 3 Ann Arbor, MI 48105	05-0597871 501 (c) (3)	Support of cancer patients, their families and f operating support	12,228 1,000
Town of Palm Beach United Way	44 Coconut Row, M201 Palm Beach, FL 33480	59-0637885 501 (c) (3)	operating support	6,000
Trinity Evangelical Lutheran Church	1400 W Stadium Ann Arbor, MI 48103	38-1717842 501 (c) (3)	operating suport	5,500
True Pursuit, Inc	7233 Dexter-Ann Arbor Road Dexter, MI 48130	04-3825482 501(c) (3)	general fund	30,000
United Way of Washtenaw County	2305 Platt Road Ann Arbor, MI 48104	38-1951024 501 (c) (3)	Washtenaw success by 6 2009 annual spending distribution campaign 2010 budget local community needs	196,700 26 1,000 10,000 1,122
University of Michigan	Office of Financial Aid 515 E Jefferson Room 2011 Ann Arbor, MI 48106	38-6006309 501 (c) (3)	Scholarships/Various departments	205,641

ANN ARBOR AREA COMMUNITY FOUNDATION
FORM 990, SCHEDULE I, PART II, LINE 1

ORGANIZATION	ADDRESS	TAX ID	PURPOSE OF GRANT	TOTAL GRANTS
Washtenaw Association for Community Advocacy	NEW Center 1100 North Main, Suite 205 Ann Arbor, MI 48104	38-6029205 501 (c) (3)	2009 spending distribution	6,036
Washtenaw Community College	PO Box D-1, SC 207 Ann Arbor, MI 48106-1610	38-2575395 501 (c) (3)	Scholarships/Various needs	105,800
Washtenaw County - Office of Community Development	P O BOX 8645 Ann Arbor, MI 48107	38-6004894 501 (c) (3)	Senior Unmet Needs Barrier Busters eviction prevention	18,347 4,959
Washtenaw Housing Alliance	PO Box 7993 Ann Arbor, MI 48107	38-3551639 501 (c) (3)	Blueprint to end homelessness	50,000
Washtenaw Intermediate School District	1819 S Wagner Road Ann Arbor, MI 48103	38-1717462 Gov't	Early college alliance	300,000
Wild Swan Theater	410 S Maple Road Ann Arbor, MI 48104	38-2457214 501 (c) (3)	Bridge funding/general operating support	16,276
Ypsilanti Meals on Wheels	1110 W Cross St Ypsilanti, MI 48197	38-2038528 501(c) (3)	Home delivered meals for the frail elderly	5,000
Ypsilanti Youth Orchestra	2080 Whitaker Road Ypsilanti, MI 48197	38-3496940 501(c) (3)	Musical instrument purchase	12,600
TOTAL				<u>2,420,217</u>

**SCHEDULE M
(Form 990)**

Department of the Treasury
Internal Revenue Service

Noncash Contributions

► **Complete if the organizations answered "Yes" on Form 990, Part IV, lines 29 or 30.**
► **Attach to Form 990.**

OMB No 1545-0047

2009

Open to Public Inspection

Name of the organization

ANN ARBOR AREA COMMUNITY FOUNDATION

Employer identification number

38-6087967

Part I Types of Property

	(a) Check if applicable	(b) Number of contributions	(c) Revenues reported on Form 990, Part VIII, line 1g	(d) Method of determining revenues
1 Art - Works of art				
2 Art - Historical treasures				
3 Art - Fractional interests				
4 Books and publications				
5 Clothing and household goods				
6 Cars and other vehicles				
7 Boats and planes				
8 Intellectual property				
9 Securities - Publicly traded	X	16	902,768.	QUOTED MARKET PRICE
10 Securities - Closely held stock				
11 Securities - Partnership, LLC, or trust interests				
12 Securities - Miscellaneous				
13 Qualified conservation contribution - Historic structures				
14 Qualified conservation contribution - Other				
15 Real estate - Residential				
16 Real estate - Commercial				
17 Real estate - Other				
18 Collectibles				
19 Food inventory				
20 Drugs and medical supplies				
21 Taxidermy				
22 Historical artifacts				
23 Scientific specimens				
24 Archeological artifacts				
25 Other ► ()				
26 Other ► ()				
27 Other ► ()				
28 Other ► ()				

29 Number of Forms 8283 received by the organization during the tax year for contributions for which the organization completed Form 8283, Part IV, Donee Acknowledgment

29

0

30a During the year, did the organization receive by contribution any property reported in Part I, lines 1-28 that it must hold for at least three years from the date of the initial contribution, and which is not required to be used for exempt purposes for the entire holding period?

b If "Yes," describe the arrangement in Part II

31 Does the organization have a gift acceptance policy that requires the review of any non-standard contributions?

32a Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash contributions?

b If "Yes," describe in Part II

33 If the organization did not report revenues in column (c) for a type of property for which column (a) is checked, describe in Part II

Yes No

30a		X
31	X	
32a	X	

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

Schedule M (Form 990) 2009

Part II **Supplemental Information.** Complete this part to provide the information required by Part I, lines 30b, 32b, and 33.
Also complete this part for any additional information.

SCHEDULE M, LINE 32B: MARKETABLE SECURITIES ARE SOLD THROUGH BROKERS.

SCHEDULE O
(Form 990)

Department of the Treasury
Internal Revenue Service

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.

OMB No 1545-0047

2009

Open to Public
Inspection

Name of the organization

ANN ARBOR AREA COMMUNITY FOUNDATION

Employer identification number

38-6087967

FORM 990, PART VI, SECTION B, LINE 11: PRIOR TO FILING, FORM 990 AND FORM 990T ARE REVIEWED BY THE AUDIT COMMITTEE, AND COPIES ARE PROVIDED TO ALL MEMBERS OF THE BOARD.

FORM 990, PART VI, SECTION B, LINE 12C: IN THE EVENT A BOARD MEMBER HAS A CONFLICT OF INTEREST WITH RESPECT TO A MATTER BEFORE THE BOARD, THAT MEMBER IS REQUIRED TO ABSTAIN FROM VOTING ON THAT ISSUE.

FORM 990, PART VI, SECTION B, LINE 15: THE BOARD REVIEWS THE COMPENSATION OF THE CEO USING COMPARABILITY DATA, AND CONTEMPORANEOUSLY SUBSTANTIATES ITS DELIBERATIONS AND DECISION. THE CEO REVIEWS THE COMPENSATION OF OTHER OFFICERS USING COMPARABILITY DATA, AND PRESENTS HER COMPENSATION RECOMMENDATIONS IN SUMMARY TO A COMMITTEE OF THE BOARD FOR APPROVAL. HER REVIEW AND THEIR DECISION IS SUBSTANTIATED CONTEMPORANEOUSLY. THE TRUSTEE COMMITTEE ANNUALLY REVIEWS OFFICER/KEY STAFF COMPENSATION AT THE SAME TIME.

FORM 990, PART VI, SECTION C, LINE 19: GOVERNING DOCUMENTS AND POLICIES ARE AVAILABLE UPON REQUEST. FINANCIAL STATEMENTS ARE AVAILABLE ON THE ORGANIZATION'S WEBSITE, AAACF.ORG. FORM 990 IS AVAILABLE ON GUIDESTAR.ORG AND AAACF.ORG.

FORM 990, PART XI, LINE 2C:
PROCESS OF OVERSIGHT OF THE AUDIT OF ORGANIZATION'S FINANCIAL STATEMENTS AND SELECTION OF AN INDEPENDENT ACCOUNTANT BY THE AUDIT COMMITTEE HAS NOT CHANGED FROM LAST YEAR.

**Application for Extension of Time To
Exempt Organization Return**

▶ File a separate application for each return.

COPY

OMB No. 1545-1709

- ♦ If you are filing for an **Automatic 3-Month Extension**, complete only **Part I** and check this box ▶ ☒ **X**
- ♦ If you are filing for an **Additional (Not Automatic) 3-Month Extension**, complete only **Part II** (on page 2 of this form).

Do not complete Part II unless you have already been granted an automatic 3-month extension on a previously filed Form 8868.**Part I Automatic 3-Month Extension of Time.** Only submit original (no copies needed)A corporation required to file Form 990-T and requesting an automatic 6-month extension - check this box and complete Part I only ▶ ☐

All other corporations (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request an extension of time to file income tax returns

Electronic Filing (e-file) Generally, you can electronically file Form 8868 if you want a 3-month automatic extension of time to file one of the returns noted below (6 months for a corporation required to file Form 990-T). However, you cannot file Form 8868 electronically if (1) you want the additional (not automatic) 3-month extension or (2) you file Forms 990-BL, 6069, or 8870, group returns, or a composite or consolidated Form 990-T. Instead, you must submit the fully completed and signed page 2 (Part II) of Form 8868. For more details on the electronic filing of this form, visit www.irs.gov/efile and click on e-file for Charities & Nonprofits

Type or print File by the due date for filing your return. See instructions	Name of Exempt Organization	Employer identification number
	ANN ARBOR AREA COMMUNITY FOUNDATION	38-6087967
	Number, street, and room or suite no. If a P.O. box, see instructions 301 NORTH MAIN STREET, NO. 300	
	City, town or post office, state, and ZIP code. For a foreign address, see instructions ANN ARBOR, MI 48104-2113	

Check type of return to be filed (file a separate application for each return)

- | | | |
|--|---|------------------------------------|
| ☒ Form 990 | ☐ Form 990-T (corporation) | ☐ Form 4720 |
| ☐ Form 990-BL | ☐ Form 990-T (sec. 401(a) or 408(a) trust) | ☐ Form 5227 |
| ☐ Form 990-EZ | ☐ Form 990-T (trust other than above) | ☐ Form 6069 |
| ☐ Form 990-PF | ☐ Form 1041-A | ☐ Form 8870 |

NINA CAVIT

- The books are in the care of ▶ 301 N. MAIN STREET, SUITE 300 - ANN ARBOR, MI 48104
Telephone No ▶ 734-663-0401 FAX No ▶

- If the organization does not have an office or place of business in the United States, check this box ▶ ☐
- If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) _____ If this is for the whole group, check this box ▶ ☐ If it is for part of the group, check this box ▶ ☐ and attach a list with the names and EINs of all members the extension will cover

- 1 I request an automatic 3-month (6-months for a corporation required to file Form 990-T) extension of time until AUGUST 15, 2010, to file the exempt organization return for the organization named above. The extension is for the organization's return for
▶ ☒ calendar year 2009 or
▶ ☐ tax year beginning _____, and ending _____

- 2 If this tax year is for less than 12 months, check reason ☐ Initial return ☐ Final return ☐ Change in accounting period

3a If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions	3a	\$
b If this application is for Form 990-PF or 990-T, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit	3b	\$
c Balance Due Subtract line 3b from line 3a. Include your payment with this form, or, if required, deposit with FTD coupon or, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions	3c	\$ N/A

Caution If you are going to make an electronic fund withdrawal with this Form 8868, see Form 8453-EO and Form 8879-EO for payment instructions

- If you are filing for an **Additional (Not Automatic) 3-Month Extension**, complete only **Part II** and check this box ☒ **X**

Note. Only complete Part II if you have already been granted an automatic 3-month extension on a previously filed Form 8868.

- If you are filing for an **Automatic 3-Month Extension**, complete only **Part I** (on page 1).

Part II Additional (Not Automatic) 3-Month Extension of Time. Only file the original (no copies needed)

Type or print File by the extended due date for filing the return. See instructions.	Name of Exempt Organization	Employer identification number
	ANN ARBOR AREA COMMUNITY FOUNDATION	38-6087967
	Number, street, and room or suite no. If a P.O. box, see instructions. 301 NORTH MAIN STREET, NO. 300	For IRS use only
	City, town or post office, state, and ZIP code. For a foreign address, see instructions. ANN ARBOR, MI 48104-2113	

Check type of return to be filed (File a separate application for each return):

- ☒ Form 990
 ☐ Form 990-EZ
 ☐ Form 990-T (sec. 401(a) or 408(a) trust)
 ☐ Form 1041-A
 ☐ Form 5227
 ☐ Form 8870
☐ Form 990-BL
☐ Form 990-PF
☐ Form 990-T (trust other than above)
☐ Form 4720
☐ Form 6069

STOP! Do not complete Part II if you were not already granted an automatic 3-month extension on a previously filed Form 8868.

NINA CAVIT

- The books are in the care of ☒ **301 N. MAIN STREET, SUITE 300 - ANN ARBOR, MI 48104**

Telephone No ☒ **734-663-0401**

FAX No. ☐

- If the organization does not have an office or place of business in the United States, check this box ☐

- If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) ☐. If this is for the whole group, check this box ☐. If it is for part of the group, check this box ☐ and attach a list with the names and EINs of all members the extension is for.

4 I request an additional 3-month extension of time until **NOVEMBER 15, 2010**

5 For calendar year **2009**, or other tax year beginning _____, and ending _____

6 If this tax year is for less than 12 months, check reason. ☐ Initial return ☐ Final return ☐ Change in accounting period

7 State in detail why you need the extension

ADDITIONAL TIME IS NEEDED TO GATHER THE INFORMATION NECESSARY TO FILE A COMPLETE AND ACCURATE RETURN.

8a If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions.	8a	\$
b If this application is for Form 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit and any amount paid previously with Form 8868.	8b	\$
c Balance Due. Subtract line 8b from line 8a. Include your payment with this form, or, if required, deposit with FTD coupon or, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions.	8c	\$ N/A

Signature and Verification

Under penalties of perjury, I declare that I have examined this form, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete, and that I am authorized to prepare this form.

Signature ☒

Title ☒ **CPA**

Date ☒ **8/9/10**

Form 8868 (Rev 4-2009)