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Department of the Treasury Internal Revenue Service

### **Return of Organization Exempt From Income Tax**

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

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

OMB No 1545-0047 2011 Open to Public Inspection

	For the	2011 ca	alendar year, or tax year beginning , and ending			
<u></u> В	Check if appl		C Name of organization		D Employ	er identification number
Ē	Address cha	1	CADILLAC AREA COMMUNITY FOUNDATION			
님		Ī	Doing Business As		38-	2848513
Ш	Name chang	ge	Number and street (or P O box if mail is not delivered to street address)	Room/suite	E Telepho	one number
	Initial return	- 1	201 N. MITCHELL	101	231	-775-9911
	Terminated		City or town, state or country, and ZIP + 4			
			CADILLAC MI 49601		G Gross rece	upts \$ 2,567,335
닏	Amended re	eturii i	F Name and address of principal officer		G 010301030	
L	Application	pending	DAVID MCCURDY	H(a) Isthisag	roup return for a	ffiliates? Yes X No
			120 W HARRIS STREET	H(b) Are all af	filiates included	yes No
			CADILLAC MI 49601	ļ.		(see instructions)
_						,
<u> </u>	Tax-exem		X   501(c)(3)	H(c) Group ex		
<u>J</u>	Website:					M State of legal domicile MI
<u>K</u>	Form of org		Immary	ai oi ioiiliadoii — 4	700 1	HI State of legal doffliche 1-11
_	Part I					
	1 B		SCHEDULE O	EIVED	1	
ģ	3	SEE	SCHEDOLLE O	The second secon	181	
Š				4 0042	8	
Š			is box > if the organization discontinued its operations or disposed of the citation of the continued its operations or disposed of the citation of the c	∫ ZUIZ	S (20)	
Č	3 2 0	heck th				11
	5   3 N		of voting members of the governing body (Part VI, line 1a)	EN, UT	3 4	11
	B 4 N		of independent voting members of the governing body (Part VI, line 1b)	و الحا		2
	5 T		nber of individuals employed in calendar year 2011 (Part V, line 2a)		5	9
•	₹  6 T	Total nur	nber of volunteers (estimate if necessary)		6	
			elated business revenue from Part VIII, column (C), line 12		7a	0
	<u> b</u> 1	<u>Vet unre</u>	lated business taxable income from Form 990-T, line 34	Pnor Ye	7b	Current Year
		Contabu	tions and grants (Part VIII, line 1h)		4,559	1,368,908
			service revenue (Part VIII, line 2g)		259	330
			ent income (Part VIII, column (A), lines 3, 4, and 7d)	18	0,257	270,827
(	6 10 1 2 11 (		venue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		0	0
			venue – add lines 8 through 11 (must equal Part VIII, column (A), line 12)	33	5,075	1,640,065
_			and similar amounts paid (Part IX, column (A), lines 1–3)	•	7,539	66,185
			paid to or for members (Part IX, column (A), line 4)		0	0
	ا مد ا		, other compensation, employee benefits (Part IX, column (A), lines 5–10)	7	0,083	71,924
2012			onal fundraising fees (Part IX, column (A), line 11e)	<u> </u>	0	71,721
<b>7</b> 0	2   16a	Protessi	ndraising expenses (Part IX, column (D), line 25) ► 8,026		<u>-</u>	
E)		Total lui	expenses (Part IX, column (A), lines 11a–11d, 11f–24e)	8	0,920	90,256
SE.	1 17		penses Add lines 13–17 (must equal Part IX, column (A), line 25)		8,542	228,365
2			e less expenses Subtract line 18 from line 12		6,533	1,411,700
NO!	<u>19</u> ဗ်စ္ဗ	Revenu	e less expenses Subtract line to homeline 12	Beginning of Cu		End of Year
	20 20 20	Total as	sets (Part X, line 16)	5,97	0,225	7,168,505
<u>⊊</u> `.	SE 21		bilities (Part X, line 26)	2	4,078	23,145
2			ets or fund balances Subtract line 21 from line 20	5,94	6,147	7,145,360
SCANNED	Part II		ignature Block			
<u></u>	Under ne	nalties of	nerway I declare that I have examined this return, including accompanying schedules and statements.	and to the best of	of my knowle	dge and belief, it is
(H)	true, corr	ect, and	complete Declaration of preparer (other than officer) is based on all information of which preparer has a	ny knowledge		
-			X John Bish		_   X	
	Sign		Signature of officer		Date	
	Here		JOHN H. BISHOP ASSIST	TANT TRI	EASURE	R
			Type or print name and title			
•		PrinVT	ype preparer's name Preparer's signature	Date	Check	If PTIN
1	Paid	JOHN	H. BISHOP, C P.A July C7	4 6/5/	/2_self-em	ployed P00061198
!	Preparer		hame BAIRD, COTTER AND BISHOP, P.C.	<u>'</u> . [	Firm's EfN ▶	38-1995866
1	Use Only		134 WEST HARRIS			<del></del>
			address CADILLAC, MI 49601		Phone no	231-775-9789
	May the II	RS disci	uss this return with the preparer shown above? (see instructions)			X Yes No
	For Pape	rwork l	Reduction Act Notice, see the separate instructions			Form 990 (2011)
	DAA					/A 1

Form 990 (2011)

DAA

	tiv Checklist of Required Schedules			age 3
			Yes	No
	s the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes,"		,,	1
	complete Schedule A	1	X	<del> </del>
	s the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	2	- A	<b></b>
	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I	3		Х
	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h)	<u> </u>	_	<u> </u>
	election in effect during the tax year? If "Yes," complete Schedule C, Part II	4		x
	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues,	<del>                                   </del>		
	assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C,			
	Part III	5		Х
	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors			
	have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If			<b>[</b>
	"Yes," complete Schedule D, Part I	6	X	l
	Did the organization receive or hold a conservation easement, including easements to preserve open space,	<u>                                   </u>		
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		Х
	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes,"	<u> </u>		
	complete Schedule D, Part III	8		Х
	Did the organization report an amount in Part X, line 21, serve as a custodian for amounts not listed in Part			
	X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes,"			
	complete Schedule D, Part IV	9	1	X
	Did the organization, directly or through a related organization, hold assets in temporarily restricted			
	endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10	X	
	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI,			
	VII, VIII, IX, or X as applicable			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes,"			
_	complete Schedule D, Part VI	11a	X	
b	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? If "Yes," complete Schedule D, Part VII	11b		Х
С	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? If "Yes," complete Schedule D, Part VIII	11c		Х
d	the state of the s			
	reported in Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		Х
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		Х
f	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 (ASC 740)? If "Yes," complete Schedule D, Part X	11f		X
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			
	Schedule D, Parts XI, XII, and XIII	12a	Х	
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if			ì
	the organization answered "No" to line 12a, then completing Schedule D, Parts XI, XII, and XIII is optional	12b		X
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		<u>X</u>
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a	ļ	X
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking,			
	fundraising, business, investment, and program service activities outside the United States, or aggregate	ļ	1	
	foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV	14b		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? If "Yes," complete Schedule F, Parts II and IV	15	<u> </u>	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? If "Yes," complete Schedule F, Parts III and IV	_16	ļ	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? If "Yes," complete Schedule G, Part I (see instructions)	17		<u>X</u>
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on			
	Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18	<b> </b>	X
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a?		}	] _
	If "Yes," complete Schedule G, Part III	19_	<del> </del>	X
20a		20a		X
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	_   20b	1	L

			Yes	No
21	Did the organization report more than \$5,000 of grants and other assistance to any government or organization			
	in the United States on Part IX, column (A), line 19 If "Yes," complete Schedule I, Parts I and II	21	_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? If "Yes," complete Schedule I, Parts I and III	22	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? If "Yes," complete Schedule J	23		_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? If "Yes," answer lines 24b			
	through 24d and complete Schedule K. If "No," go to line 25	24a		_X_
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year			
	to defease any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a				
	with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		X
b	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?			
	If "Yes," complete 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			3.7
	disqualified person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II	_26		X
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled			
	entity or family member of any of these persons? If "Yes," complete Schedule L, Part III	27		X
	Was the organization a party to a business transaction with one of the following parties (see Schedule L,	27		
28	Part IV instructions for applicable filing thresholds, conditions, and exceptions)		]	
_	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a	1	Х
a b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete	200		- 41
	Schedule L, Part IV	28b		Х
С	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof)			
·	was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		Х
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		X
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified		·	
	conservation contributions? If "Yes," complete Schedule M	30		X
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N,			
	Part I	31		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes,"			
	complete Schedule N, Part II	32		X
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			
	sections 301 7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part I	33		X
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II, III,			
	IV, and V, line 1	34		<u>X</u>
35a		35a		_X_
b		25:		v
	meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		X
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable	20		v
٠-	related organization? If "Yes," complete Schedule R, Part V, line 2  Did the organization conduct more than 5% of its activities through an entity that is not a related organization	36		<u>X</u>
37	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R,			
		37		Х
20	Part VI  Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and	31		
38	192 Note: All Form 990 filers are required to complete Schedule O	38	×	
	137 Marie And Official Biologica de regiones de complete Concessio C	ו חנ	^ '	

Pa	At V Statements Regarding Other IRS Filings and Tax Compliance	V				$\Box$
	Check if Schedule O contains a response to any question in this Part	<u>v</u>			Yes	No
1a	Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable	1a	1		1.00	1
b	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable	1b	0			1
c	Did the organization comply with backup withholding rules for reportable payments to vendors and	t				
	reportable gaming (gambling) winnings to prize winners?			1c	X	
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax		1			I
	Statements, filed for the calendar year ending with or within the year covered by this return	2a	2			1
b	If at least one is reported on line 2a, did the organization file all required federal employment tax re	etums?		2b	X	ļ
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instruction	ions)				1
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?			3a	4	X
b	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O			3b	4	-
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other	ner authority				
	over, a financial account in a foreign country (such as a bank account, securities account, or other	r financial				
	account)?				Ц	X
b	If "Yes," enter the name of the foreign country					Ī
	See instructions for filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Finance	cial Account	S	_		1,7
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year	r)		5a		X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transfer or a good To	nsaction?		5b	_	X
С	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?			5c	+	<del> </del>
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and di	ia ine				X
	organization solicit any contributions that were not tax deductible?	utions or		6a	<del>'- </del>	1 A
þ		Julions of		6b		]
_	gifts were not tax deductible?  Organizations that may receive deductible contributions under section 170(c).			- 0.	-	<del> </del>
7	5 the second of payment in excess of \$75 made partly as a contribution and partly	for goods				
а	and services provided to the payor?	ioi goodo		7a	. [	X
_	remaining the state of the value of the goods or seques provided?			71	$\overline{}$	1
b	5 the state of	it was				
С	required to file Form 8282?			70	:	X
d	2002 filed during the year	7d	1			
e	and the same and finds directly or indirectly to pay premitims on a personal benefit	fit contract?		7e		X
f	the same and promiting directly or indirectly on a personal banefit or	ontract?		7f		Х
g	to a second a contribution of qualified intellectual property, did the organization file	e Form 8899	as required?	7 <u>c</u>	$\Box$	Х
h	to the contribution of care boats auralance or other vehicles, did the organization	nızatıon file	a Form 1098-C?	7H		X
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) support	orting		ļ		1
	organizations. Did the supporting organization, or a donor advised fund maintained by a sponso	rıng				
	organization, have excess business holdings at any time during the year?			8		X
9	Sponsoring organizations maintaining donor advised funds.					1
а				98		<u> X</u>
b				91		X
10	Section 501(c)(7) organizations. Enter:	مد ا	1	[		1
a		102		<del></del>		1
t		101	<u> </u>	<del></del>		
11	Section 501(c)(12) organizations.Enter	امما	_1			Ī
á		113				Ī
t		111	_			1
	against amounts due or received from them )		<del></del>		_	ŧ
12	to file and the rest received or account during the year	121		12	a	+
		121	J			
13	to the second to require qualified health plans up more than one state?			13	<u> </u>	†
•	Note. See the instructions for additional information the organization must report on Schedule O			13	<del></del>	<del></del>
	the appropriation is required to mointain by the states in which			į		Į
	the organization is licensed to issue qualified health plans	131	ь	E E		ŧ
	- and a second of second on hand	130				1
14	and a summer of the summer of		•	14	a	X
	b If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Sche	edule O		14		1
_	······································					

Form 990 (2011) CADILLAC AREA COMMUNITY FOUNDATION 38-2848513 Page 6 Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a Part VI ' "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions Check if Schedule O contains a response to any question in this Part VI Section A. Governing Body and Management Yes No Enter the number of voting members of the governing body at the end of the tax year 11 1a If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O. Enter the number of voting members included in line 1a, above, who are independent 11 1b Did any officer, director, trustee, or key employee have a family relationship or a business relationship with 2 any other officer, director, trustee, or key employee? Х 2 Did the organization delegate control over management duties customarily performed by or under the direct 3 supervision of officers, directors, or trustees, or key employees to a management company or other person? 3 Did the organization make any significant changes to its governing documents since the pnor Form 990 was filed? 4 Did the organization become aware during the year of a significant diversion of the organization's assets? 5 Did the organization have members or stockholders? 6 Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body? 7a Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body? 7b Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following Х The governing body? 8a Each committee with authority to act on behalf of the governing body? Х 8h Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at 9 the organization's mailing address? If "Yes," provide the names and addresses in Schedule O 9 Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code) Yes No 10a Did the organization have local chapters, branches, or affiliates? 10a Х If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? Χ 10b 11a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? 11a **b** Describe in Schedule O the process, if any, used by the organization to review this Form 990 12a Did the organization have a written conflict of interest policy? If "No," go to line 13 Х 12a Were officers, directors, or trustees, and key employees required to disclose annually interests that could give use to conflicts? Х 12b c Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," Х describe in Schedule O how this was done 12c Did the organization have a written whistleblower policy? Х 13 13 Did the organization have a written document retention and destruction policy? Х 14 14 Did the process for determining compensation of the following persons include a review and approval by 15 independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? The organization's CEO, Executive Director, or top management official Х 15a Other officers or key employees of the organization 15b 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? 16a X b If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements? Section C. Disclosure List the states with which a copy of this Form 990 is required to be filed > ΜI 17 Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply Own website | X | Another's website | X | Upon request Describe in Schedule O whether (and if so, how), the organization made its governing documents, conflict of interest policy, 19 and financial statements available to the public during the tax year State the name, physical address, and telephone number of the person who possesses the books and records of the 20 JOHN H. BISHOP 8475 S. 45 ROAD organization > 231-775-2252 MI 49601

CADILLAC

Form 990 (2011)	CADILLAC	AREA	COMMUNITY	FOUNDATION	38-2848513

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

Check if Schedule O contains a response to any question in this Part VII

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

- 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, if any 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 neither the organization nor any related organizations compensated any current officer, director, or trustee

(A) Name and Title	(B) Average hours per week (describe hours for	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D)  Reportable compensation from the organization	(E)  Reportable compensation from related organizations	(F) Estimated amount of other compensation
	related organizations in Schedule O)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	(W-2/1099-MISC)	(W-2/1099-MISC)	from the organization and related organizations
(1)LINDA KIMBEL										
EXECUTIVE DIRECTOR	30.00	X		<u> </u>		<u> </u>		35,625	0	0
(2)BARBARA DARRIGAN										
TRUSTEE	1.00	X			ļ	-	_	0	0	0
(3) CHRIS HUCKLE	1 00	۱,,		١,,	ĺ		Ì	_		
SECRETARY	1.00	X	_	X	<del> </del> -	├├-	$\dashv$	0	0	0
(4) DAVID MCCURDY	1 00	X	1				ı			
PRESIDENT	1.00	1-2-	$\vdash$	-	<del> </del> -	<del>   -</del>		0	0	0
(5) DAVID PETERSON	1.00	$ _{\mathbf{x}}$		Х						_
VICE PRESIDENT (6) JOHN BISHOP	1.00	^	-	≏	├-	-	-	0	0	0
	1.00	x		х				0	0	_
ASST TREAS. (7) ROBERT VANDELLEN					$\vdash$		ᅥ		0	0
TRUSTEE	1.00	Х		х	ŀ			o	0	0
(8) SCOTT HUNTER							7			<u> </u>
TREASURER	1.00	Х		Х		1 1	ĺ	o	o	0
(9) BRIAN JONES							Į			<u>~</u>
TRUSTEE	1.00	X						o	o.	0
(10) TANIA LEBARON										<u>·</u> <u>·</u>
TRUSTEE	1.00	X						0		0
(11) MICHAEL LUEDER			ļ			i i	ĺ			
TRUSTEE	1.00	X						0	0	0
(12) DEAN DEKRYGER							İ			<u> </u>
ASST. SECRETARY	1.00	X				$\sqcup \bot$	_	0	0	0
(13) LAURIE MELSTROM TRUSTEE	1.00	Х						0	0	0
(14)										<u>-</u>

Form **990** (2011)

	990 (2011) CADILLAC	AREA CON	stee	<u>N⊥</u> s. K	ev E	mpl	OVE	NDA	ATTON 38 and Highest Com	5-284 pensate	d Employee(continued)			Pa	age
Parl	(A) Name and title	(B) Average hours per week (describe	(d	o not x, unl	Pos check ess pe	C) sition more erson	than o	one n an	(D) Reportable ne compensation an from		(E) Reportable compensation from related organizations	com	(F) timate nount o other pensa	of tion	
		hours for related organizations in Schedule O)	Institutional trustee Individual trustee or director		Officer	Key employee	Highest compensated employee	Former	organizatior (W-2/1099-Mis		(W-2/1099-MISC)	from the organization and related organizations		on ed	
(15)															
(16)															
(17)															
(18)															
(19)							İ								
(20)								-							
(21)												·			
(22)															
(23)															
(24)															
(25)															
1b	Sub-total  Total from continuation sh	oots to Part VII	Sort	ion	Δ	•	1	<b>&gt;</b>	35	,625					
c d	Total (add lines 1b and 1c)	eets to rait vii,	Jec.					•	35	625					
2	Total number of individuals (in			to th	ose	liste	d abo	ove)							
	reportable compensation from	the organization	<u> </u>	0						· · · · · · ·	<u> </u>			-	
3	Did the organization list any fo	ormer officer, dire	ector,	or tr	uste	e, ke	ey em	ploy	yee, or highest com	pensated	i	3		es	No
4	employee on line 1a? If "Yes, For any individual listed on lin organization and related organization."	e 1a, is the sum of	of rep	ortal	ole ç	omp	ensa	tıon	and other compens	sation fro for such	m the				X
5	Individual  Did any person listed on line	1a receive or acci	ue co	ompe	ensa	tion t	from	any	unrelated organiza		dıvıdual	4	$\top$	-	X
	for services rendered to the oction B. Independent Contra		es," c	omp	lete	Sche	edule	J fo	or such person	<del></del>		5			X
1	Complete this table for your fi	ive highest compe	nsate	ed in	depe	ende	nt co	ntra	ctors that received	more tha	n \$100,000 of			·	
	compensation from the organ	(A) nd business address	mper	nsati	on to	r the	cale	enda	ar year ending with o		the organization's tax year (B) stion of services			(C) pensati	
<del></del>	Name a	nd business address						╁		Descrip	otion of services		Comp	èrisati	on
								$\dagger$							
								+							
								+-							
		<u> </u>	_				<u>.</u>	+							
2	Total number of independent								e listed above) who						
	received more than \$100,000										0				

Par	t VII	<ul> <li>Statement of Rever</li> </ul>	nue		·····	(0)	(B)	(C)	(D)
						(A) Total revenue	(B) Related or exempt function revenue	Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
			40				revenue		312, 313, 01 314
		Federated campaigns	1a			I			
돌림		Membership dues	1b			I I		`	
A,		Fundraising events	1c		600				
<u> </u>		Related organizations	1d		600	1			<b></b>
ξĒ		Government grants (contributions)	1e		100,000	•			<b>‡</b>
흘낊	f.	All other contributions, gifts, grants,				İ			<b>‡</b>
ള		and similar amounts not included above	1f		268,308		1		1
Contributions, Giffs, Grants and Other Similar Amounts	-	Noncash contributions included in lines 1a-1	f \$	i		7 360 000			<u> </u>
SE	<u>h</u>	Total. Add lines 1a-1f			<b>P</b>	1,368,908			
힐					Busn Code				ŧ
Š	2a	TRAINING CONFERENCE		}	900099	330	330		
8	b								
ξ	С			}				·	<u> </u>
Ser	d			}					
ᇤ	е					-			
Program Service Revenue		All other program service rever	nue	Į			]		1
ሬ		Total. Add lines 2a-2f			<b>•</b>	330			T
	3	Investment income (including d	ıvıdend	s, interest,					
		and other similar amounts)			<b>•</b>	171,770	171,770		
	4								
	5	Royalties	—т		<u> </u>			<del></del>	
		(ı) Real		(ii) Po	ersonal	1			
	6a	Gross rents				1			1
	b	Less rental exps				1			1
	С	Rental inc or (loss)				1			1
	d				<b>•</b>				<u> </u>
	7a	Gross amount from (i) Securities	<u> </u>	(11)	Other	1			1
		sales of assets other than inventory 1,026,327				1			
	b	Less cost or other				1			
			<u>, 270</u>						1
	С	Gain or (loss) 99	<u>, 057</u>			1			1
		Net gain or (loss)	ı		<b>•</b>	99,057	99,057		<u> </u>
o.	8a	Gross income from fundraising eve	nts						
nue	1	(not including \$				1			
ě	ļ	of contributions reported on line 1c	)			1			
Other Reven		See Part IV, line 18	а						1
흎		Less direct expenses	b			1			1
O		: Net income or (loss) from fund		events	•				
	9a	Gross income from gaming activities	es						
		See Part IV, line 19	а						
		Less direct expenses	b	L		+			•
		: Net income or (loss) from gam		vities	<b>•</b>				
	108	a Gross sales of inventory, less			}				1
		returns and allowances	а						
		Less cost of goods sold	b	L		1			1
	<u>_</u>	Net income or (loss) from sale		entory	<b>P</b>				<del> </del>
	_	Miscellaneous Revenue			Busn Code	1			1
	11:	a							
	1	0			ļ ļ				
	(	C						<del>.</del> -	
	0	d All other revenue			L				
	(	e Total. Add lines 11a-11d			<b>&gt;</b>				
	12	Total revenue. See instruction	ns		<u> </u>	1,640,065	271,157		0

# 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)

require	Check if Schedule O contains a response	to any question in this Part IX	(		
	not include amounts reported on lines 6b,	(A)	(B)	(C)	(D) Fundraising
	Bb, 9b, and 10b of Part VIII.	Total expenses	Program service expenses	Management and general expenses	expenses
/0, (	Grants and other assistance to governments and				<del></del>
	organizations in the U.S. See Part IV, line 21	44,525	44,525		
•	Grants and other assistance to individuals in				
	the U.S. See Part IV, line 22	21,660	21,660		
	Grants and other assistance to governments,				
3	organizations, and individuals outside the			1	
	US See Part IV, lines 15 and 16				
	Benefits paid to or for members				
4	Compensation of current officers, directors,				
	trustees, and key employees	35,625		35,625	
6	Compensation not included above, to disqualified				
6	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)				
	Other salaries and wages	26,398		26,398	
7	Pension plan accruals and contributions (include				
8	section 401(k) and 403(b) employer contributions)				
9	Other employee benefits	5,075		5,075	
10	Payroll taxes	4,826		4,826	
11	Fees for services (non-employees)				
	Management				
C D	Accounting	10,200		10,200	
ď	Lobbying				
u 0	Professional fundraising services See Part IV, line 17				
f	Investment management fees	48,831		48,831	
g	a.,	559		559	
12	Advertising and promotion	221		221	<del></del> ,
13	Office expenses	3,869		3,869	
14	Information technology				
15	Royalties				
16	Occupancy	7,367		7,367	
17	Travel				
18	Payments of travel or entertainment expenses			i i	
	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	2,737		2,737	
20	Interest				
21	Payments to affiliates	<u> </u>			
22	Depreciation, depletion, and amortization	345		345	
23	Insurance	2,437		2,437	
24	Other expenses Itemize expenses not covered				
	above (List miscellaneous expenses in line 24e If	1		1	
	line 24e amount exceeds 10% of line 25, column			1	
	(A) amount, list line 24e expenses on Schedule O)				0.006
;	FUND RAISING EXPENSES	8,026			8,026
ı	DUES	2,758		2,758	<del></del>
(	TELEPHONE	1,690		1,690	
	MISCELLANEOUS	1,216		1,216	
	e All other expenses	600 355	66.305	754 754	0.000
25	Total functional expenses Add lines 1 through 24e	228,365	66,185	154,154	8,026
26	Joint costs Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here   following SOP 98-2 (ASC 958-720)				
DA		. <u> </u>		····	Form <b>990</b> (2011

	rt X	Balance Sheet					
_ <u> </u>	/ \				(A) Beginning of year		(B) End of year
	1	Cash—non-interest bearing			79,058	1	121,231
i		Savings and temporary cash investments			150,945	2	110,260
İ		Pledges and grants receivable, net				3	
		Accounts receivable, net			557	4	
ŀ	5	Receivables from current and former officers, directors, trus	stees, key				
-		employees, and highest compensated employees. Complete	te Part II of				
ļ		Schedule L				5	
ŀ	6	Receivables from other disqualified persons (as defined un					
Į		4958(f)(1)), persons described in section 4958(c)(3)(B), and					
		employers and sponsoring organizations of section 501(c)(	9) voluntar	y			
ള		employees' beneficiary organizations (see instructions)				6	
ssets	7	Notes and loans receivable, net				7	
۲ ۲	8	Inventories for sale or use				8	
	9	Prepaid expenses and deferred charges	. 1			9	300
ļ	10a	Land, buildings, and equipment cost or					
		other basis Complete Part VI of Schedule D	10a	41,947			
ì	b	Less accumulated depreciation	10b	9,630	32,662	_	32,317
	11	Investments—publicly traded securities		5,661,886	11	6,859,608	
	12	Investments—other securities See Part IV, line 11	_	12			
	13	Investments—program-related See Part IV, line 11			13		
	14	Intangible assets		45 115	14	11 500	
	15	Other assets See Part IV, line 11			45,117	15	44,789
	16	Total assets Add lines 1 through 15 (must equal line 34)			5,970,225	16	7,168,505
	17	Accounts payable and accrued expenses		678	17	145	
	18	Grants payable		23,400	18	23,000	
	19	Deferred revenue			19		
	20	Tax-exempt bond liabilities	akadala D			20	
	21	Escrow or custodial account liability Complete Part IV of S				21	
es	22	Payables to current and former officers, directors, trustees		_			
#	1	employees, highest compensated employees, and disquali	illea person	S		22	
Liabilities		Complete Part II of Schedule L				22	
_	23	Secured mortgages and notes payable to unrelated third p				23 24	
	24	Unsecured notes and loans payable to unrelated third part Other liabilities (including federal income tax, payables to r	olated third				<del></del>
	25	parties, and other liabilities not included on lines 17-24). Co					
		of Schedule D	ompicte i a			25	
	200	Total liabilities. Add lines 17 through 25			24,078		23,145
	20	Organizations that follow SFAS 117, check here▶ X	and com	plete	<u> </u>		237213
ဟ္သ	1	lines 27 through 29, and lines 33 and 34.	•	•			
ဥ	27				-105,112	27	-171,124
ala	28				320,149		436,857
<u>0</u>	29				5,731,110		6,879,627
Ë		Organizations that do not follow SFAS 117, check he	re <b>≯</b> 🗍 a	ınd			
<u> </u>		complete lines 30 through 34.	_				
Net Assets or Fund Balances	30					30	
188	31		and			31	
et A	32		ther funds			32	
Ž	33				5,946,147	33	7,145,360
	34			<u></u>	5,970,225	34	7,168,505
_	<u> </u>	•			<del></del>		Form 990 (2011)

Form **990** (2011)

Page 12   Part XI   Reconciliation of Net Assets   Check of Schedule O contains a response to any question in this Part XI	3337				
Total revenue (must equal Part VIII, column (A), line 12)  1 Total revenue (must equal Part IXI, column (A), line 12)  2 Total expenses (must equal Part IX, column (A), line 25)  3 Revenue less expenses Subtract line 2 from line 1  4 Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))  5 Other changes in net assets or fund balances (explain in Schedule O)  6 Net assets or fund balances at end of year Combine lines 3, 4, and 5 (must equal Part X, line 33, column (B))  6 Net assets or fund balances at end of year Combine lines 3, 4, and 5 (must equal Part X, line 33, column (B))  7 Part XII Financial Statements and Reporting  Check if Schedule O contains a response to any questron in this Part XII  1 Accounting method used to prepare the Form 990				Pag	<sub>je</sub> 12
1 Total revenue (must equal Part VIII, column (A), line 12) 2 Total expenses (must equal Part IX, column (A), line 25) 3 Revenue less expenses Subtract line 2 from line 1 4 Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A)) 4 Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A)) 5 Other changes in net assets or fund balances (explain in Schedule O) 6 Net assets or fund balances at end of year Combine lines 3, 4, and 5 (must equal Part X, line 33, column (B)) 6 Net assets or fund balances at end of year Combine lines 3, 4, and 5 (must equal Part X, line 33, column (B)) 6 7, 145, 360  Part XII Financial Statements and Reporting Check if Schedule O contains a response to any question in this Part XII  1 Accounting method used to prepare the Form 990					
2 228,365 3 Revenue less expenses Subtract line 2 from line 1 4 Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A)) 5 Other changes in net assets or fund balances (explain in Schedule O) 6 Net assets or fund balances at end of year Combine lines 3, 4, and 5 (must equal Part X, line 33, column (B))  Part XII Financial Statements and Reporting Check if Schedule O contains a response to any question in this Part XII  1 Accounting method used to prepare the Form 990	Check if Schedule O contains a response to any question in this Part XI				$\Box$
2 228,365 3 Revenue less expenses Subtract line 2 from line 1 4 Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A)) 5 Other changes in net assets or fund balances (explain in Schedule O) 6 Net assets or fund balances at end of year Combine lines 3, 4, and 5 (must equal Part X, line 33, column (B))  Part XII Financial Statements and Reporting Check if Schedule O contains a response to any question in this Part XII  1 Accounting method used to prepare the Form 990	1 Total revenue (must equal Part VIII, column (A), line 12)	11	1,64	40,0	065
Revenue less expenses Subtract line 2 from line 1  Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))  Other changes in net assets or fund balances (explain in Schedule O)  Net assets or fund balances at end of year Combine lines 3, 4, and 5 (must equal Part X, line 33, column (B))  Part XII Financial Statements and Reporting Check if Schedule O contains a response to any question in this Part XII  Accounting method used to prepare the Form 990	2 Total expenses (must equal Part IX, column (A), line 25)	2			
A Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))  Other changes in net assets or fund balances (explain in Schedule O)  Net assets or fund balances at end of year Combine lines 3, 4, and 5 (must equal Part X, line 33, column (B))  Part XII Financial Statements and Reporting Check if Schedule O contains a response to any question in this Part XII  Accounting method used to prepare the Form 990  Cash  Accrual Other If the organization changed its method of accounting from a pnor year or checked "Other," explain in Schedule O  2a Were the organization's financial statements audited 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 separate basis  Consolidated basis  Both consolidated and separate basis  Consolidated basis  Both consolidated and separate basis  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  3b   Schedule O   Sche	3 Revenue less expenses Subtract line 2 from line 1	3			
5 Other changes in net assets or fund balances (explain in Schedule O) 6 Net assets or fund balances at end of year Combine lines 3, 4, and 5 (must equal Part X, line 33, column (B)) 6 7, 145, 360  Part XII Financial Statements and Reporting Check if Schedule O contains a response to any question in this Part XII  1 Accounting method used to prepare the Form 990	4 Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4			
Reporting (B))  Part XII Financial Statements and Reporting Check if Schedule O contains a response to any question in this Part XII  1 Accounting method used to prepare the Form 990	5 Other changes in net assets or fund balances (explain in Schedule O)	5			
Part XII Financial Statements and Reporting Check if Schedule O contains a response to any question in this Part XII    Accounting method used to prepare the Form 990	6 Net assets or fund balances at end of year Combine lines 3, 4, and 5 (must equal Part X, line 33,				
Part XII Financial Statements and Reporting Check if Schedule O contains a response to any question in this Part XII    Accounting method used to prepare the Form 990		6	7,14	45,3	360
Check if Schedule O contains a response to any question in this Part XII  1 Accounting method used to prepare the Form 990					
Accounting method used to prepare the Form 990					$\Box$
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  If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were issued on a separate basis, consolidated 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  3b	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?		_ 		
Separate basis X 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  3b	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		2c	Х	
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  3b	Separate basis X Consolidated basis Both consolidated and separate basis				
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  3b			32		y
required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits 3b			3ª	<del></del>	
			35		
	required addition addition, explain with in ouried and or strip despendent to directly order addition			aan	(2014)

# SCHEDULE A (Form 990 or 990-EZ)

**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.

OMB No 1545-0047

2011

Open to Public Inspection

Department of the Treasury Internal Revenue Service Name of the organization

CADILLAC AREA COMMUNITY FOUNDATION 38-2848

Reason for Public Charity Status (All organizations must complete this part.) See instructions

Employer identification number 38 – 2848513

1 444			. formulation become	it is (Earlines 1 through 11 abo	ck only on	e hov \					
. [	gan	ization is not a	private foundation because	it is (For lines 1 through 11, che ciation of churches described in	section 1	70(b)(1)(	Δ)(i)				
1	4	A church, conv	ention of churches, or associated in section 170(b)(1)(A	Mii) (Attach Schedule F )	Jeonon I	(1-)(1-)(/	·/('/·				
2	_	A school descr	ibed in section 170(b)(1)(A	organization described in secti	on 170(h)	(4)/A)/iii)					
3	_	A hospital or a	cooperative nospital service	organization described in secti	on iro(b)	costion 1	70/6\/4	/ <b>A</b> \/:::\	Entor th	a bacait	tal's name
4			arch organization operated	in conjunction with a hospital de	scribed iii	Section	110(0)(1	KAJ(III).	cillei (i	e nospii	iais name,
	_	city, and state	. I for the bonefit of	a college or university award or	operated	by a gove	rmmonta	Lugit do	combad	ın	
5				a college or university owned or	operated	by a gove	iiiiiena	i uiiii ue	samea	11.3	
		section 170(b	)(1)(A)(iv).(Complete Part	l)	dia= 470/	LV4VAV.					
6	Щ	A federal, state	e, or local government or go	vernmental unit described in sec	tion 170(	D)(T)(A)(\ 	/). <del></del>			la la a	
7	Ш			ubstantial part of its support from	i a governi	mentai un	it or from	i the ger	ierai pu	DIIC	
		described in se	ection 170(b)(1)(A)(vi).(Co	mpiete Part II )	,						
8	X	A community t	rust described in section 17	70(b)(1)(A)(vi).(Complete Part II	)						
9	Ш	An organizatio	n that normally receives (1)	more than 33 1/3% of its support	rt from cor	ithbutions	, membe	ersnip te	es, and	gross	
		receipts from a	activities related to its exemp	t functions—subject to certain e	xceptions,	and (2) n	o more t	nan 33 1	1/3% of	its	
		support from g	ross investment income and	unrelated business taxable inco	ome (less :	section 51	1 tax) tr	om busir	nesses		
	_	acquired by th	e organization after June 30	, 1975 See section 509(a)(2). (	Complete	Part III)	17.41				
10		An organizatio	n organized and operated e	xclusively to test for public safety	/ See sec	tion 509(	a)(4).				
11		An organizatio	n organized and operated e	clusively for the benefit of, to pe	errorm the	Tunctions	or, or to	carry ou	t tne	A!	
		purposes of or	ne or more publicly supporte	d organizations described in sec	alon 509(a	)(I) or sec	. 44 - 45 -	n(a)(2). S	ee sec	tion	
			—	e type of supporting organization							
	_	a Type	ı b Type II	c Type III–Functions	, -		d		e III–Otl		
е	Ш	By checking th	nis box, I certify that the orga	nization is not controlled directly	or indirec	uy by one	or more	oisquaii	nea per	sons	
	other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(1)										
		or section 509	l(a)(2)		Tuna I Tu	ا مدا	مالا مست		_		
f				mination from the IRS that it is a	Type I, Ty	pe II, or I	ype III s	ирропп	g		
		organization,	check this box								
g		=		on accepted any gift or contribut	ion irom ai	ny or the					
		following pers	sons?	-tlthltth							[]
				ntrols, either alone or together w	ıın person	s describe	ea in (ii) a	ana			Yes No
		(III) belov	v, the governing body of the	supported organization?							11g(ı)
		(II) A family	member of a person describe	ed in (i) above							11g(II)
		(iii) A 35% c	ontrolled entity of a person d	escribed III (i) or (ii) above?							[11g(iii)]
<u>_h</u>			ollowing information about th		(nu) to the	organization	60.00	nu notifi	(10)	a tha	f) A
(		me of supported	(ii) EIN	(III) Type of organization (described on lines 1–9	1 ' '	sted in your		ou notify nzation in	organizat	is the ion in col	(vii) Amount of support
		rganization		above or IRC section		document?		of your		zed in the	
				(see instructions)	Vac	l No	Yes	oort?	1		
					Yes	No	res	No	Yes	No	
(A)											
				-	<del> </del>		-	ļ	-		
(B)			1								
					+	<del> </del>					
(C)								1			
					-	-	<del> </del>	<u> </u>	<del> </del>		
(D)						1					
					<del> </del>	ļ	-			<del>  </del>	
(E)					1						
				<u> </u>	1						
					1						
Tot	al			<u> </u>	1	<u> </u>	<u> </u>	<u> </u>	<u> </u>	Ll	
For	Pa	perwork Redu	ction Act Notice, see the li	nstructions for					Sched	ule A (F	Form 990 or 990-EZ) 201
For	m 9	990 or 990-EZ.									

Page 2

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 or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

A D 13' - O						
on A. Public Support	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total
ar year (or fiscal year beginning in)	(a) 2007	(D) 2000	(6) 2009	(u) 2010	(6) 2011	(f) Total
nembership fees received (Do not	145,523	142,958	196,827	154,559	1,221,411	1,861,278
organization's benefit and either paid						
urnished by a governmental unit to the organization without charge						
	145,523	142,958	196,827	154,559	1,221,411	1,861,278
each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount						1,085,700
						775,578
ion B. Total Support		•	•	•		
lar year (or fiscal year beginning in)▶	(a) 2007	<b>(b)</b> 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total
	145,523	142,958	196,827	154,559	1,221,411	1,861,278
Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar	241,210	186,264	155,435	152,554	270,827	1,006,290
activities, whether or not the business						
loss from the sale of capital assets (Explain in Part IV)	7,128	600	286	259	259	8,532
Total support. Add lines 7 through 10	L		l			2,876,100
Gross receipts from related activities, etc. (	see instructions)	anned third fourth	a se 68h tay yaas a	o o oostroo E01/o)/		
		secona, tnira, iourti	i, or iiith tax year a	s a section 50 f(c)(	3)	<b>.</b> .
organization, check this box and stop nere	nnort Percenta	ne	·····	<del></del>	<del></del> ,	
tion C. Computation of Public Su	column (f) divided h	y line 11 column (	n)		14	26.97 %
Public support percentage for 2017 (line o,	dule A Part II line	14	'77		-	32 80 %
23.4/29/ purpost tost—2011 If the organi	zation did not check	the box on line 13	and line 14 is 33 1	1/3% or more, chec		32 80 70
have and otop here. The organization qualif	ies as a publicly su	pported organizatio	n			▶ □
23 1/3% support test—2010. If the organi	zation did not check	c a box on line 13 o	r 16a, and line 15 is	s 33 1/3% or more,		- L
shock this hay and stop here. The organiz	ation qualifies as a	publicly supported	organization	,		<b>&gt;</b>
10%-facts-and-circumstances test—20°	11. If the organization	on did not check a b	oox on line 13, 16a,	or 16b, and line 14	ls	
10% or more, and if the organization meets	the "facts-and-circ	umstances" test, ch	eck this box and s	top here. Explain i	n	
Part IV how the organization meets the "fac	cts-and-circumstanc	es" test. The organ	ization qualifies as	a publicly supporte	ed	
organization						<b>▶</b> X
10%-facts-and-circumstances test—20	noste the "facts and	d circumetanese" to	et chack this have	nob, or 17a, and in	ne	
15 is 10% or more, and if the organization is	ets the "facts-and-c	ircumetances" test	The organization of	und atop nere. ualifies as a public	lv	
	eta tric Tacta-ariu-c	irodinatantes test	The organization q	juanies as a public	עי	▶ □
supported organization	I not check a boy or	uline 13 16a 16b	17a or 17h check	this box and see		
instructions	THE GROOM & BOX OF	10, 100, 100,	, 6, 6.1668	S.I.S DOX GIIG GCC		<b>&gt;</b>
	Total support. Add lines 7 through 10 Gross receipts from related activities, etc ( First five years. If the Form 990 is for the organization, check this box and stop here tion C. Computation of Public Sur Public support percentage for 2011 (line 6, Public support percentage from 2010 Sche 33 1/3% support test—2011. If the organiz box and stop here. The organization qualif 33 1/3% support test—2010. If the organiz check this box and stop here. The organiz 10%-facts-and-circumstances test—20: 10% or more, and if the organization meets Part IV how the organization meets the "factorganization 10%-facts-and-circumstances test—20: 15 is 10% or more, and if the organization in Explain in Part IV how the organization meets supported organization Private foundation. If the organization did	ar year (or fiscal year beginning in)    Sifts, grants, contributions, and nembership fees received (Do not notude any "unusual grants")    Tax revenues levied for the organization's benefit and either paid to or expended on its behalf    The value of services or facilities    Sumished by a governmental unit to the organization without charge    Total. Add lines 1 through 3    The portion of total contributions by    Bach person (other than a    Bayevernmental unit or publicly    Bayevernmental unit	ar year (or fiscal year beginning in) (a) 2007 (b) 2008  Sifts, grants, contributions, and nembership fees received (Do not holdude any "unusual grants")  Fax revenues levied for the organization's benefit and either paid to or expended on its behalf  The value of services or facilities unished by a governmental unit to the organization without charge  Total. Add lines 1 through 3  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)  Public support. Subtract line 5 from line 4  For B. Total Support  Amounts from line 4  Forsos income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources  Net income from unrelated business activities, whether or not the business is regularly carned on  Other income Do not include gain or loss from the sale of capital assets  (Explain in Part IV)  Gross receipts from related activities, etc (see instructions)  First five years. If the Form 990 is for the organization's first, second, third, fourth organization, check this box and stop here it organization of Public Support Percentage  Public support percentage from 2010 Schedule A, Part II, line 14  33 173% support test—2011. If the organization did not check the box on line 13 ocheck this box and stop here. The organization qualifies as a publicly supported organization 3173% support test—2010. If the organization did not check the box on line 13 ocheck this box and stop here. The organization meets the "facts-and-circumstances" test. Part IV how the organization meets the "facts-and-circumstances" test. Part IV how the organization meets the "facts-and-circumstances" test. Part IV how the organization meets the "facts-and-circumstances" test supported organization  10% or more, and if the organization meets the "facts-and-circumstances" test supported organization  10% or more, and if the organization meets the "facts-and-circ	is year (or fiscal year beginning in)    (a) 2007 (b) 2008 (c) 2009  idits, grants, contributions, and nembership fees received (Do not hotulde any 'unusual grants')  iax revenues levied for the organization's benefit and either paid to or expended on its behalf (The value of services or facilities unished by a governmental unit to the organization without charge (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) Public support Boundard (in the properties) (a) 2007 (b) 2008 (c) 2009  Amounts from line 4  Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources  Net income from unrelated business activities, whether or not the business requisity carned on Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV)  Total support. Add lines 7 through 10  Gross receipts from related activities, etc (see instructions)  First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year a organization, check this box and stop here. The organization did not check the box on line 13, and line 14 is 33 toxy support test—2011. If the organization did not check the box on line 13, and line 14 is 33 1/3% support test—2011. If the organization did not check the box on line 13, and line 14 is 33 1/3% support test—2010. If the organization did not check the box on line 13, and line 14 is 33 1/3% support test—2010. If the organization did not check a box on line 13, 16a, 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. The organization meets the "facts-and-circumstances" test, check this box on line 17, 16a, 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. The organization meets the "facts-and-circumstances" test. Th	aits, grants, contributions, and membership fees received (Do not holded any "unusual grants")  if ax revenues leved for the grants of the value of services or facilities unished by a governmental unit to the grantshe without charge fortal, and lines 1 through 3  The portion of total contributions by supported organization without charge fortal, and lines 1 through 3  The portion of total contributions by supported organization in cluded on ine 1 that exceeds 2% of the amount shown on line 11, cloumn (f)  Public support. Subtract line 5 from line 4  On B. Total Support  Amounts from line 4  Goes a mome from unrelest, dividends, payments received on securities loans, rents, royalies and income from similar sources  Net income from unrelest, dividends, payments received on securities loans, rents, royalies and income from similar sources  Net mome Do not include gain or loss from the sale of capital assets (Explain in Part IV)  Gross receipts from related activities, etc. (see instructions)  First five years, the Form 990 so for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)( organization, check hiss box and stop here.  Total support test—2011. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check his box and stop here. 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, check this box and stop here.  Explain in Part IV how 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 qualifies as a publicly supported organization qualifies as a publicly supported organization qualifies as a publicly supported organization qualifies as a publicly supported organization qualifies as a publicly supported organization qualifies as a publicly supported	at year (or fiscal year beginning in)    (a) 2007 (b) 2008 (c) 2009 (d) 2010 (e) 2011    (b) 2008 (c) 2009 (d) 2010 (e) 2011    (c) 2011    (d) 2007 (b) 2008 (c) 2009 (d) 2010 (e) 2011    (e) 2011    (e) 2011    (f) 2011    (f) 2012    (f) 2012    (f) 2013    (f) 2014    (f) 2015    (f) 2016    (f) 2010    (f) 2010    (f) 2010    (g) 2011    (g) 2015    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 or if the organization failed to qualify under Part II.

If the organization fails to qualify under the tests listed below, please complete Part II.)

Secti	on A. Public Support			·····			
alend	lar year (or fiscal year beginning in)▶	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(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 fumished 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						
	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
	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						
С	Add lines 7a and 7b						
8	Public support (Subtract line 7c from		,				
	line 6)		<u>ŧ</u>	<u> </u>	1	<u> </u>	
Sec	tion B. Total Support dar year (or fiscal year beginning in)►	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total
9	Amounts from line 6	(2) 255.	(2) 2000	(0) 2000	(4) 2010	(6) 2011	(i) rotal
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		,				
С	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)  First five years. If the Form 990 is for the	organization's first	second third four	th, or lifth tax year	as a section 501(a)		
14	organization, check this box and stop here		Scoons, uma, rour	ui, oi iiiui tax yeal	as a section so I(C)	,(~ <i>)</i>	▶ □
Sec	ction C. Computation of Public Su	pport Percent	age				
15	Public support percentage for 2011 (line 8,	column (f) divided	by line 13, column	(f))		15	%
16	Public support percentage from 2010 Sche	dule A, Part III, line	e 15			16	%
Sec	ction D. Computation of Investmen	nt Income Per	centage				
17	Investment income percentage for 2011 (li	ne 10c, column (f)	divided by line 13, o	column (f))		17	%_
18	Investment income percentage from 2010	Schedule A, Part II	I, line 17			18	%
19a							. —
	17 is not more than 33 1/3%, check this bo						▶ [_]
b	33 1/3% support tests—2010. If the orga line 18 is not more than 33 1/3%, check this	nization did not che	eck a box on line 14	or line 19a, and lir	ne 16 is more than	33 1/3%, and	▶ □
	Private foundation. If the organization did						
20	Private foundation. If the organization oil	HOL CHECK A DOX U	11 m 10 17, 13a, 01 1	OD, CHECK HIS DOX	and see monucion	S	

Schedule A (Form 990 or 990-EZ) 2011	CADILLAC AREA	COMMUNITY	FOUNDATION	38-2848513

Part IV • Supplemental Information. Complete this part to provide the explanations required by Part II, line 10, Part II, line 17a or 17b; and Part III, line 12 Also complete this part for any additional information. (See instructions).

SUPPORT SCHEDULE - UNUSUAL GRANTS

DONATIONS FROM 2 ESTATES IN 2008 \$ 496,314

DONATION FROM AN ESTATE IN 2011 \$ 147,497

PART II, LINE 10 - OTHER INCOME DETAIL

FUND RAISING \$ 7,128

TRAINING CONFERENCE \$ 1,404

PART II, LINE 17A - 10% FACTS AND CIRCUMSTANCE TEST - 2011

THE FOUNDATION HAS A CONTINUOUS PROGRAM FOR SOLICITATION OF FUNDS THROUGH

MAILINGS, INDIVIDUAL CONTACTS AND AN ANNUAL PHILANTHROPIST OF THE YEAR

DINNER. IN 2011, THE FOUNDATION RECEIVED DONATIONS FROM 241 INDIVIDUALS AND BUSINESSES.

THE FOUNDATION HAS AN ELEVEN PERSON GOVERNING BODY THAT REPRESENTS VARIOUS INTERESTS IN THE CADILLAC COMMUNITY. NONE OF THE INDIVIDUALS THAT HAD CONTRIBUTIONS THAT EXCEEDED 2% OF THE AMOUNT ON PART II LINE 11F WERE ON THE GOVERNING BODY OF THE FOUNDATION OR INVOLVED IN MANAGEMENT.

THE FOUNDATION MAKES GRANTS AND SCHOLARSHIPS TO A WIDE VARIETY OF ORGANIZATIONS AND INDIVIDUALS.

Page 4

#### 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, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b. 
➤ Attach to Form 990. ➤ See separate instructions.

OMB No 1545-0047 2011 Open to Public Inspection

Schedule D (Form 990) 2011

ame o	of the organization		Employer i	dentification number
C7	ADILLAC AREA COMMUNITY FOUNDATION	1	38-2	848513
Pa		ds or Other Similar Funds or Acc		
_	organization directors	(a) Donor advised funds	(t	p) Funds and other accounts
1	Total number at end of year	9		0
2	Aggregate contributions to (during year)	1,010,079		
3	Aggregate continuously to (coming year)  Aggregate grants from (during year)	15,565		
4	Aggregate value at end of year	2,288,864		
5	Did the organization inform all donors and donor advisors in writing that the			
,	funds are the organization's property, subject to the organization's exclus	ave legal control?		X Yes No
6	Did the organization inform all grantees, donors, and donor advisors in wi	nting 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?			X Yes No
Pa	rt II Conservation Easements. Complete if the organ	nization answered "Yes" to Form 99	0, Part	IV, line 7.
1	Purpose(s) of conservation easements held by the organization (check a			
•	Preservation of land for public use (e g , recreation or education)	Preservation of an historically impo	ortant land	l 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 conserva	ation contribution in the form of a conservati	ion	
	easement on the last day of the tax year			
				Held at the End of the Tax Year
а	Total number of conservation easements		2a	
b			2b	· · · · · · · · · · · · · · · · · · ·
С			2c	···
d	Number of conservation easements included in (c) acquired after 8/17/06	6, and not on a		
	historic structure listed in the National Register		2d	
3	Number of conservation easements modified, transferred, released, extir	iguished, or terminated by the organization	during the	•
	tax year ▶			
4	Number of states where property subject to conservation easement is loc			
5	Does the organization have a written policy regarding the periodic monitor	oring, inspection, handling of		
	violations, and enforcement of the conservation easements it holds?			☐ Yes ☐ No
6	Staff and volunteer hours devoted to monitoring, inspecting, and enforcing	g conservation easements during the year		
7	Amount of expenses incurred in monitoring, inspecting, and enforcing co.	nservation easements during the year		
8	Does each conservation easement reported on line 2(d) above satisfy the	e 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 easement	nts in its revenue and expense statement, a	nd	
	balance sheet, and include, if applicable, the text of the footnote to the or	ganization's financial statements that descr	ibes the	
_	organization's accounting for conservation easements			
	organizations Maintaining Collections of Art, I Complete if the organization answered "Yes" to Fe	orm 990, Part IV, line 8		
1:	a If the organization elected, as permitted under SFAS 116 (ASC 958), not	to report in its revenue statement and balar	nce sheet	
	works of art, historical treasures, or other similar assets held for public ex		ice of	
	public service, provide, in Part XIV, the text of the footnote to its financial			
t	o If the organization elected, as permitted under SFAS 116 (ASC 958), to r			
	works of art, historical treasures, or other similar assets held for public ex	xnibition, education, or research in furtheran	nce 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	W		\$
2			e the	
	following amounts required to be reported under SFAS 116 (ASC 958) re	erating to these items		<b>c</b>
	a Revenues included in Form 990, Part VIII, line 1		<b>P</b>	<b>D</b>
	b Assets included in Form 990, Part X			9

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

Concude B (1 cint ccc)	AREA COMMUN	rt Historical Tree	SUITAS AF		348513 imilar Assets	Page 2 (continued)
	on and other records of	back any of the follows	no that are a	conficant	use of its	(continued)
3 Using the organization's acquisition, access collection items (check all that apply)				sigrillicarit	use of its	
a Public exhibition		oan or exchange prog	rams			
<b>b</b> Scholarly research	e 📋 C	Other				
c Preservation for future generations						
4 Provide a description of the organization's c	ollections and explain ho	ow they further the orga	anization's ex	empt purpo	ose in Part	
XIV						
5 Dunng the year, did the organization solicit	or receive donations of a	irt, historical treasures,	or other simil	ar		
assets to be sold to raise funds rather than	o be maintained as part	of the organization's c	ollection /	warad "V	oo" to Form 00	Yes No
Part IV Escrow and Custodial Ar	rangements. Com int on Form 990, Pa	ipiete ii trie organi. art X. line 21	zauon ansv	vereu i	es to roini 93	o, Pail IV,
1a Is the organization an agent, trustee, custoo	ian or other intermedian	v for contributions or of	her assets no	ot .		
included on Form 990, Part X?		,				Yes No
b If "Yes," explain the arrangement in Part XIV	and complete the follow	ving table				
b ii ies, explain the arrangement are	·	· ·				Amount
c Beginning balance					1c	
d Additions during the year					1d	
e Distributions during the year					1e	
f Ending balance					1f	
2a Did the organization include an amount on l	Form 990, Part X, line 21	2				Yes No
b. If "Yes." explain the arrangement in Part XI	/					
Part V Endowment Funds. Com	plete if the organiza	ation answered "Y	es" to Form	1990, Pa	art IV, line 10	
	(a) Current year	(b) Prior year	(c) Two yea		(d) Three years bac	k (e) Four years back
1a Beginning of year balance	5,902,411	5,332,454	4,49	9,710		
<b>b</b> Contributions	1,152,788	136,752	14	0,962		
c Net investment earnings, gains, and						
losses	26,597	600,324		6,012		
d Grants or scholarships	51,560	66,062	3	3,667		
e Other expenditures for facilities and						
programs						
f Administrative expenses	116,556	101,057		0,563		
g End of year balance	6,913,680	5,902,411		2,454		
2 Provide the estimated percentage of the cu	rrent year end balance (	line 1g, column (a)) he	ld as			
a Board designated or quasi-endowment	1.00%					
b Permanent endowment ► 99.00 s						
c Temporarily restricted endowment ▶	%					
The percentages in lines 2a, 2b, and 2c sh	ould equal 100%					
3a Are there endowment funds not in the poss	ession of the organization	on that are held and ad	ministered for	tne		Yes No
organization by						
(i) unrelated organizations						3a(i) X 3a(ii) X
<ul><li>(ii) related organizations</li><li>b If "Yes" to 3a(ii), are the related organization</li></ul>	ne lieted as required on	Schedule R2				3b
	he organization's endow	ment funds				
Part VI Land, Buildings, and Eq	uipment. See Forn	n 990. Part X. line	10			·, · -· · -· ·
Description of property	(a) Cost or other t	I		(c) A	ccumulated	(d) Book value
2001,000	(investment)	(oth	er)	de	preciation	
1a Land			32,000			32,000
b Buildings						
c Leasehold improvements			821		785	36
d Equipment			9,126		8,845	281
e Other						
Total. Add lines 1a through 1e (Column (d) mus	t equal Form 990, Part X	column (B), line 10(c)	))		<b>&gt;</b>	32,317

Part VII -	orm 990) 2011 CADILLAC AREA COMM Investments—Other Securities. See Ford	<u>m 990, Pa</u>	rt X, line 12		
	(a) Description of security or calegory (including name of security)		(b) Book value	(c) Method of Cost or end-of-yea	
(1) Financial d					
	ld equity interests				
(3) Other	id equity interests				
(A)					<del></del>
(B)					· · · · · · · · · · · · · · ·
(C)					
(D)			· · · · · · · · · · · · · · · · · · ·		
(E)					
(F)					
(G)					
(H)					
<u>(I)</u>		<b></b>			
	n (b) must equal Form 990, Part X, col (B) line 12) Investments—Program Related. See For		art X line 13	<u></u>	
Part VIII	(a) Description of investment type	1111 000, 1	(b) Book value	(c) Method o	valuation ———
	(a) Description of investment type	į	(a) Doon value	Cost or end-of-ye	
(1)					
_(2)					<u> </u>
_(3)					
_(4)					· · · · · · · · · · · · · · · · · · ·
(5)					
_(6)		<del></del>	·	<del></del>	
_(7)		<del></del>	· · · · · · · · · · · · · · · · · · ·		
(8)					
				<del>                                     </del>	
(10)				<u> </u>	
	nn (b) must equal Form 990, Part X, col (B) line 13)	45			
Part IX	Other Assets. See Form 990, Part X, line				
	(a) Descri	ption			(b) Book value
(1)					
_(2)			<del> </del>		
_(3)					
(4)			·		
_(5)				<del></del>	
(6)			<del></del>		
_(7)				<del></del>	
(8)					
_(9)			· · · · · · · · · · · · · · · · · · ·		
(10)			<del> </del>		
	nn (b) must equal Form 990, Part X, col (B) line 15)	i== 05		<u> </u>	
Part X	Other Liabilities. See Form 990, Part X, I	ine 25.	(h) Daab salaa		
<u>1</u>	(a) Description of liability	<del></del> -	(b) Book value	-	
	al income taxes		· · · · · · · · · · · · · · · · · · ·	4	
(2)				4	
(3)		-	<del> </del>	-[	
(4)				4	
(5)				4	
(6)		<u> </u> .	. –	4	
(7)				4	
(8)				-	
(9)				_	
(10)			<del>~~~~</del>	4	
(11)			<del></del>	4	
<u>\!\!\</u>	mn (b) must equal Form 990, Part X, col (B) line 25)				

<sup>2.</sup> FIN 48 (ASC 740) Footnote In Part XIV, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48 (ASC 740)

Sched	ule D (Form 990) 2011 CADILLAC AREA COMMONITY FOUND				Page 4
	t XI · Reconciliation of Change in Net Assets from Form 990 to	Audite	d Financial Stateme	nts	
1	Total revenue (Form 990, Part VIII, column (A), line 12)			1	<u>1,640,065</u>
2	Total expenses (Form 990, Part IX, column (A), line 25)			2	228,365
3	Excess or (deficit) for the year Subtract line 2 from line 1			3	1,411,700
4	Net unrealized gains (losses) on investments			4	-212,487
5	Donated services and use of facilities			5	
6	Investment expenses			6	
7	Pnor period adjustments			7	
8	Other (Describe in Part XIV )			8	
9	Total adjustments (net) Add lines 4 through 8			9	<u>-212,489</u>
10_	Excess or (deficit) for the year per audited financial statements. Combine lines 3 and 9			10	1,199,211
Pa	rt XII Reconciliation of Revenue per Audited Financial Stateme	nts Wit	th Revenue per Retu	rn	<del></del>
1	Total revenue, gains, and other support per audited financial statements			1 1	1,427,578
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12		l		
а	Net unrealized gains on investments	2a	-212,487		
b	Donated services and use of facilities	2b		1 1	
С	Recoveries of prior year grants	2c		1 1	
d	Other (Describe in Part XIV)	2d		4	
е	Add lines 2a through 2d			2e	-212,487
3	Subtract line 2e from line 1	ſ	ı	3	1,640,065
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:	İ			
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a		1 1	
b	Other (Describe in Part XIV)	4b		1 1	
С	Add lines 4a and 4b			4c	
5	Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12)			5	1,640,065
_P:	art XIII Reconciliation of Expenses per Audited Financial Statem	ents w	ith Expenses per Re		200 265
1	Total expenses and losses per audited financial statements			1	228,367
2	Amounts included on line 1 but not on Form 990, Part IX, line 25	1	1		
а		2a		- 1	
b	Pnor year adjustments	2b		1 1	
C		2c		1	
C		2d	2	7 I	
€	• •== ·····			2e	200 255
3	Subtract line 2e from line 1	ſ	1	3	228,365
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		- 1	
i	Other (Describe in Part XIV.)	_ 4b		- 1	
•	Add lines 4a and 4b			4c	200 265
5	Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18)	<del> </del>	<del> </del>	5	228,365
_P	art XIV Supplemental Information		14 B (1941 4) 100		
Cor	replete this part to provide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 3, and 9, Part III, lines 3, and 9	es 1a and	4, Part IV, lines 1b and 2b	), 	
	V, line 4, Part X, line 2, Part XI, line 8, Part XII, lines 2d and 4b, and Part XIII, lines 2d and	a 4b. Ais	o complete this part to prov	viae	
any I	additional information PART XI, LINE 8 - RECONCILIATION OF CHANGES	- OI	THER		
I	ROUNDING DIFFERENCE		\$		-2
	PART XIII, LINE 2D - EXPENSE AMOUNTS INCLUD	ED IN	N FINANCIALS \$	- OTI	HER 2

Page 5

SCHEDULE I (Form 990)

Governments, and Individuals in the United States Grants and Other Assistance to Organizations,

Complete if the organization answered "Yes" to Form 990, Part IV, line 21 or 22.

Open to Public . 2011

Department of the Treasury				► Attach to Form 990.	· ·			Inspection	ton
Internal Revenue Service						Employer ide	Employer identification number		•
Name of the organization ${\sf CA}$	CADILLAC AREA COMMUNITY FOUNDATION	NITY FOUN	DATION			38-2848513	48513		
Part   General I	General Information on Grants and Assistance	Assistance							
1 Does the organization the selection criteria us 2 Describe in Part IV the	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?  Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States	he amount of the gr nce? intoring the use of	ants or assi	stance, the grantees' en the United States	eligibility for the grants	s or assistance, and		X Yes	No 
=	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 Part II can be duplicated if additional space is needed	overnments an recipient that respace is needed	d Organic	zations in the Un	ited States. Com theck this box if n	plete if the orga o one recipient	inization answere	ered "Yes" than \$5,000	<b>_</b>
1 (a) Name and a	(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash arent	(e) Amount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance	
COLLEG				Ì				FEASIBILITY / M	/ MENTOR
CADILLAC	MI 49601	38-3333920	GOV	7,600					
(2) WEXFORD-MISSAUKEE 9907 E 13TH STREET	INI							EARLY CHILDHOOD	DEVE
CADILLAC	MI 49601	38-6028526	GOV	11,220					
(3) CADILLAC AREA YMCA PO BOX 231	ļ	1 C		i c				TEEN IMPACT PROGRAM	GRAM
CADILLAC	ML 49601	30-00T3507	7	5,500					
(4)									
(5)									
(9)									
(7)									
(8)									
(6)									
2 Enter total number of so	Enter total number of section 501(c)(3) and government organizations listed in the line 1 table	organizations listed	in the line 1	table				1	

Schedule I (Form 990) (2011)

non-cash assistance

Grants and Other Assistance to Individuals in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 22 CADILLAC AREA COMMUNITY FOUNDATION Schedule I (Form 990) (2011)

Part III

3337

	(f) Description of n	
	(e) Method of valuation (book, (f) Description of n. FMV, appraisal, other)	
	(d) Amount of non-cash assistance	
	(c) Amount of cash grant	
onal space is needed.	(b) Number of recipients	
Part III can be dublicated it additional	(a) Type of grant or assistance	

1 SCHOLARSHIPS 2 3 4	1.5	21,660			
5 7 Part IV Supplemental Information. Complete this part to provide the information required in Part I, line 2, and any other additional information	plete this part to provi	de the information re	equired in Part I, line	2, and any other additiona	Information

- PROCEDURES FOR MONITORING THE USE OF GRANT FUNDS

~

PART I, LINE

NONPROFIT ORGANIZATIONS APPLY TO THE FOUNDATION ON A FOUNDATION APPROVED

APPLICATION. THE FOUNDATION STAFF REVIEWS THE APPLICATION TO DETERMINE IF

THE NONPROFIT ORGANIZATION HAS EXEMPT TAX STATUS AND IF THE APPLICATION IS

COMPLETE. THE APPLICATIONS THAT MEET THESE QUALIFICATIONS ARE PRESENTED TO

THE BOARD FOR APPROVAL OR REJECTION. FOR GRANTS APPROVED, THE NONPROFITS

MUST PROVIDE A REPORT AT THE CONCLUSION OF THE GRANT VERIFYING ALL FUNDS

HAD BEEN USED AND ANALYZING THE RESULTS FROM THE USE OF THE GRANTS

3337

#### SCHEDULE O (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

### Supplemental Information to Form 990 or 990-EZ

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

• Attach to Form 990 or 990-EZ.

2011
Open to Public inspection

Name of the organization

CADILLAC AREA COMMUNITY FOUNDATION

Employer identification number 38-2848513

FORM 990 - ORGANIZATION'S MISSION OR MOST SIGNIFICANT ACTIVITIES

THE PURPOSE OF CACF IS TO PROVIDE A VEHICLE FOR DONATIONS FROM CIVIC-MINDED CITIZENS IN ORDER TO BUILD PERMANENT ENDOWMENTS FOR THE COMMUNITY FROM WHICH GRANTS ARE AWARDED TO CARRY OUT THE CHARITABLE WISHES OF THE DONORS AND TO IMPROVE THE QUALITY OF LIFE FOR OUR AREA.

FORM 990, PART III, LINE 4D - ALL OTHER ACCOMPLISHMENT GRANTS DISTRIBUTED TO VARIOUS LOCAL ORGANIZATIONS

FORM 990, PART VI, LINE 11B - ORGANIZATION'S PROCESS TO REVIEW FORM 990 NO REVIEW WAS OR WILL BE CONDUCTED

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

THE CONFLICT OF INTEREST APPLIES TO ALL EMPLOYEES AND BOARD MEMBERS & IS

MONITORED ANNUALLY BY THE EXECUTIVE DIRECTOR. BOARD MEMBERS WITH CONFLICT

OF INTEREST ON SPECIFIC ISSUES ABSTAIN FROM VOTING ON THE ISSUE.

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

THE EXECUTIVE COMMITTEE OF THE BOARD OF DIRECTORS REVIEWS THE PERFORMANCE

OF THE EXECUTIVE DIRECTOR & MAKES A RECOMMENDATION FOR COMPENSATION TO THE

ENTIRE BOARD FOR APPROVAL.

FORM 990, PART VI, LINE 19 - GOVERNING DOCUMENTS DISCLOSURE EXPLANATION THE GOVERNING DOCUMENTS, CONFLICT OF INTEREST, POLICY AND FINANCIAL STATEMENTS ARE AVAILABLE AT THE FOUNDATIONS OFFICE FOR THE PUBLIC TO

Schedule O (Form 990 or 990-EZ) (2011)

Employer identification number

Page 2

CADILLAC AREA COMMUNITY FOUNDATION

38-2848513

REVIEW.

Name of the organization

Description 496,314 DONATIONS FROM 2 ESTATES IN 2008 147,497 DONATION FROM AN ESTATE IN 2011 Schedule A, Part II - Unusual Grants Federal Statements 643,811 Amount 1/01/08 \$ 8/31/11 3337 Cadillac Area Community Foundation Date Name 38-2848513 FYE: 12/31/2011 TOTAL 3337 Cadillac Area Community Foundation

38-2848513 Federal Statements

38-2848513 FYE: 12/31/2011

# Schedule A, Part II, Line 5 - Excess Gifts

Donor Name	 Total	 Excess
	\$ 200,744	\$ 143,222
	2,075	
	12,500	
	12,500	
	 1,000,000	 942,478
TOTAL	\$ 1,227,819	\$ 1,085,700

Form 4562

**Depreciation and Amortization** 

(Including Information on Listed Property)

OMB No. 1545-0172

Internal Revenue Service

See separate instructions. (99)

Attach to your tax return.

Identifying number Name(s) shown on return CADILLAC AREA COMMUNITY FOUNDATION 38-2848513 Business or activity to which this form relates INDIRECT DEPRECIATION Election To Expense Certain Property Under Section 179 Part I Note: If you have any listed property, complete Part V before you complete Part I 1 500,000 Maximum amount (see instructions) 1 Total cost of section 179 property placed in service (see instructions) 2 2 Threshold cost of section 179 property before reduction in limitation (see instructions) 2,000,000 3 Reduction in limitation Subtract line 3 from line 2 If zero or less, enter -0-4 Dollar limitation for tax year Subtract line 4 from line 1. If zero or less, enter -0- If married filing separately, see instructions 5 (b) Cost (business use only) (c) Elected cost (a) Description of property 7 Listed property Enter the amount from line 29 Total elected cost of section 179 property Add amounts in column (c), lines 6 and 7 8 Tentative deduction Enter the smaller of line 5 or line 8 9 Carryover of disallowed deduction from line 13 of your 2010 Form 4562 10 10 Business income limitation. Enter the smaller of business income (not less than zero) or line 5 (see instructions) 11 11 Section 179 expense deduction Add lines 9 and 10, but do not enter more than line 11 12 12 Carryover of disallowed deduction to 2012 Add lines 9 and 10, less line 12 13 Note: Do not use Part II or Part III below for listed property Instead, use Part V Special Depreciation Allowance and Other Depreciation (Do not include listed property ) (See instructions) Part II Special depreciation allowance for qualified property (other than listed property) placed in service 14 during the tax year (see instructions) 14 Property subject to section 168(f)(1) election 15 15 16 110 Other depreciation (including ACRS) MACRS Depreciation (Do not include listed property ) (See instructions.) Part III MACRS deductions for assets placed in service in tax years beginning before 2011 17 235 17 If you are electing to group any assets placed in service during the tax year into one or more general asset accounts, check here 18 Section B-Assets Placed in Service During 2011 Tax Year Using the General Depreciation System (c) Basis for depreciation (b) Month and year (d) Recovery (business/investment use (e) Convention (f) Method (a) Depreciation deduction placed in (a) Classification of property period service only-see instructions? 19a 3-year property 5-year property b 7-year property d 10-year property 15-year property 20-year property S/L 25 yrs g 25-year property 27 5 yrs S/L MM h Residential rental 27 5 yrs MM S/L property MM S/L 39 yrs Nonresidential real MM S/L property Section C-Assets Placed in Service During 2011 Tax Year Using the Alternative Depreciation System S/I 20a Class life 12 yrs S/L b 12-year S/L 40 yrs c 40-year Summary (See instructions ) Part IV Listed property Enter amount from line 28 21 21 Total. Add amounts from line 12, lines 14 through 17, lines 19 and 20 in column (g), and line 21 Enter here and on the appropriate lines of your return. Partnerships and S corporations—see instructions 345 22 For assets shown above and placed in service during the current year, enter the portion of the basis attributable to section 263A costs