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# Form **990**

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

OMB No 1545-0047

2011

Open to Public

Department of the Treasury Internal Revenue Service

SCANNED UCI 1 6 2012

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. Inspection

<u>A</u> _	For the	2011 cale	ndar year, or tax year begi	nning	June 1	, 2011,	and ending	May	31	, 20 12	
В	Check if	applicable	C Name of organization Dear	born Orches	tral Society I	ndowment F	und Inc		D Employe	er identification nu	ımber
$\Box$	Address		Doing Business As DOSEF	:						38-3049011	
$\Xi$		•	Number and street (or P O be		delivered to str	eet address)	Room/suite		F Telephor	ne number	
H	Name ch		1	0x	40	oot address,	Thousand	l l	E (Ciopiloi		
브	Initial ref	turn	PO BOX 2063	<del></del>			_L			313-565-2424	
Ш	Termina	ted	City or town, state or country	, and ZIP + 4				l l			
	Amende	d return	DEARBORN MI 48123-206	3					<b>G</b> Gross re	ceipts \$	(558)
	Applicat	ion pending	F Name and address of principa	al officer Ro	bert Kuhlma	ın		H(a) Is this a	aroup return :	for affiliates?  Yes	✓ No
	• •	, ,	PO BOX 2063 DEARBORN		063			E .		ncluded? Yes	√ No
-	Tay aya	met status			◀ (insert no )	4947(a)(1) or	527	_		list (see instructio	
÷		mpt status		601(c) ()	(insert no)	4947(a)(1) or	<u> </u>	-		•	,
<u>J</u> _	Website				<del></del>			H(c) Group	<del></del>		
K			<del></del>	Association	Other ►	LY	ear of formation	1992	M State	of legal domicile	<u>MI</u>
Р	art I	Summ	nary								
	1 1	Briefly de	escribe the organization's	mission or	most signific	cant activitie	s: Our mis	sion is to pr	ovide a j	perpetual base o	of
-		support	for the Dearborn Orchestra	I Society to	ensure its an	tistic and fina	ncial stability	y. Annual in	come fro	m our Endowm	ent
ဦ			ed to the Dearborn Orchest			*-**					
na			entary school children.	·	!-\		<u></u>				
Je.			nis box ▶☐ If the organiza	otion discon	tinuad ita ai		dianagad of	more then	050/ of	to not accete	
Governance	2						-		1 1	its het assets.	_
	3		of voting members of the						3	<del></del>	
es	4	Number	of independent voting me	embers of th	e governing	body (Part \	/I, line 1b)		4		9
Ę	5	Total nur	mber of indıviduals emplo	yed in caler	ıdar year 20	11 (Part V, lii	ne 2a) .		5		0
Activities &	6	Total nur	mber of volunteers (estima	ate if necess	sary)				6		9
⋖	7a		related business revenue			C), line#2			7a		0
	b		lated business taxable inc			. //			7b	-	0
_	-	Net unic	iated business taxable in	Some nom	01111 000-1,	10 J	· · · · · · · · · · · · · · · · · · ·	Prior Yea		Current Ye	<u> </u>
		<b>6</b>				12	ર્∥ ⊢			Oblient 16	
ē	8		itions and grants (Part VIII			2012	10 V		400,133		36,653
Ę	9	Program	ı service revenue (Part VIII	l, line 2g) 🍃	100 G	J. 7916	· ][[]		0		0
Revenue	10	Investme	ent income (Part VIII, colu	mn (A), ligrés	3,4, and 7	d). T	<b>A</b> . <b>A</b>		48,542		52,064
Œ	11	Other rev	venue (Part VIII, column (A	A), lines 5,\6	d∬8c, 9c¢,√0	c, and file)	<b>)</b> // .		49,799		(89,275)
	12		enue-add lines 8 through						498,473		(558)
_	13		nd similar amounts paid (		2 / 1				7,050		19,026
					\\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\	10//	· · ⊢				13,020
	14		paid to or for members (F		. //	· .	· - ·		0		
es	15		other compensation, empl		~		s 5–10)		0		0
Expenses	16a	Profession	onal fundraising fees (Part	t IX, column	(A), line 11	e)			0		0
ĝ	b	Total fun	idraising expenses (Part I)	X, column (E	0), line 25) 🕨	<b>-</b>	0				
ú	17	Other ex	penses (Part IX, column (	A), lines 11a	–11d, 11f–2	4e)		<del>-</del>	20		20
	18		penses. Add lines 13-17 (				25) .		7,070		19,046
	19		e less expenses. Subtract			( 7,	'		491.403		(19,603)
	+	110 101100	ress expenses: Cabiract	1110 10 11011	11110 12 .	<u></u>	Re	ginning of Cur	,	End of Ye	
Net Assets or Fund Balances		T. (a)	(D+ )/ 1 40)					<del></del>		2110 07 10	
SSe	20		sets (Part X, line 16) .				· · ·		806,781		787,178
A P	21	Total liab	oilities (Part X, line 26) .						0		0
Ž	22	Net asse	ets or fund balances. Subt	ract line 21	from line 20	<u> </u>			806,781		787,178
P	art II	Signa	ture Block				<u> </u>				
Ur	nder pena	alties of perju	ury, I declare that I have examine	ed this return, in	cluding accom	panying schedu	les and stateme	ents, and to th	e best of r	ny knowledge and	belief, it is
			lete Declaration of preparer (oth							,	
		T	BD 12.1	. 1					0	120/2012	
Sig	n	Sign	13. V. Such	<u> </u>				Dat		12012	
	_	J Sigi	1)	$^{\gamma}$ $R$ .		/		Date	-		
He	ere		DENJAMIN I	- WA	CHRACII	<u> </u>					
		Тур	e or print name and title								
Pa	id	Print/Ty	ype preparer's name	Prepare	er's signature		Date		Check I	ıf PTIN	
		_		1			1		self-emp	_ ,	
	epare	1	name •	· · · · · · · · · · · · · · · · · · ·				C.r.	's EIN ▶		
Us	se On			_ <del></del>							
N 4 -	v the "		address >	aror chouse	above2 /c=	o inotriction		Phor	ne no		
Ma	y the II	no aiscus	ss this return with the prep	parer snown	above? (se	e instruction:	s)	<u></u>		Yes	No_

Form **990** (2011)

2	Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ?	,
3	If "Yes," describe these new services on Schedule O.  Did the organization cease conducting, or make significant changes in how it conducts, any program	
	services?	<i>)</i>
	If "Yes," describe these changes on Schedule O.	
4	Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses. Section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts are required to report the amount grants and allocations to others, the total expenses, and revenue, if any, for each program service reported.	
4a	(Code: ) (Expenses \$ 14,000 including grants of \$ 14,000 ) (Revenue \$ 0 )  Donation to Dearborn Orchestral Society for operating expenses	_
41-	(Onder ) (France & 1700 including small of & 1700 ) (France & 0.)	_
4b	(Code: ) (Expenses \$ 4,726 including grants of \$ 4,726 ) (Revenue \$ 0 )  Donation to Dearborn Orchestal Society for Young Musican Scholarships	
	<u></u>	
4c	(Code:) (Expenses \$ 300 including grants of \$ 300 ) (Revenue \$0 )	_
	Donation to Dearborn Orchestral Society for Youth Artist Solo Competition	
4d	Other program services (Describe in Schedule O.) (Expenses \$ including grants of \$ ) (Revenue \$ )	
4e	Total program service expenses ► 19,026	_
	Form <b>990</b> (20	11)

Part I	V Checklist of Required Schedules			
			Yes	No
	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes,"			
	complete Schedule A	_1_	<b>✓</b>	
	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	_2	<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_		<b>✓</b>
	<b>Section 501(c)(3) organizations.</b> Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If "Yes," complete Schedule C, Part II			,
		4_		<b>✓</b>
	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C,	Ĭ		
	Part III	5		✓
6	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			
	"Yes," complete Schedule D, Part I	6		✓
	Did the organization receive or hold a conservation easement, including easements to preserve open space,			
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		✓_
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes,"			
	complete Schedule D, Part III	_8		<b>✓</b>
9	Did the organization report an amount in Part X, line 21; serve as a custodian for amounts not listed in Part			
	X; or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV			1
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted	9		_
10	endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10	1	
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI,	10 **	*	· *
	VII, VIII, IX, or X as applicable.	\$5'		
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	!	1
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		✓
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		1
d	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? If "Yes," complete Schedule D, Part IX	11d		1
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		1
	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses	1.0	_	<u> </u>
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X .	11f		1
12 a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI, XII, and XIII	12a		✓
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if		<del> </del>	<del></del>
	the organization answered "No" to line 12a, then completing Schedule D, Parts XI, XII, and XIII is optional	12b		✓
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		<b>✓</b>
14 a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		✓
þ	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			,
45	foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV	14b	<u> </u>	<b>/</b>
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.	4-		,
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance	15		<b>✓</b>
	to individuals located outside the United States? If "Yes," complete Schedule F, Parts III and IV	16		1
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		1
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		1
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a?	<del>'</del>	<del>                                     </del>	<del>                                     </del>
	If "Yes," complete Schedule G, Part III	19	1	1
20 a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		<b>✓</b>
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return? .	20b		
		For	m <b>99</b> 0	(2011)

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Part	Checklist of Required Schedules (continued)			
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 1? If "Yes," complete Schedule I, Parts I and II	21	Yes	No
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	•	1
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		1
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		1
	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24b 24c		<b>√</b>
d 25a	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	24d 25a		✓ ✓
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		<b>→</b>
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II.	26		· ✓
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		1
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):	ÿ	, ,	
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		1
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		1
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		1
29 30	Did the organization receive more than \$25,000 in non-cash contributions? <i>If</i> "Yes," <i>complete Schedule M</i> Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If</i> "Yes," <i>complete Schedule M</i>	29		1
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	30		<b>✓</b>
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		<b>▼</b>
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		
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		<b>✓</b>
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		<b>V</b>
b	Did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		1
36	<b>Section 501(c)(3) organizations.</b> Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2	36		1
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>			./

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Part V	Statements Regardin	g Other IRS	Filings and T	ax Compliance

	Check if Schedule O contains a response to any question in this Part V			
4			Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable			
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable			
Ŭ	reportable gaming (gambling) winnings to prize winners?			
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax	1c		✓
	Statements, filed for the calendar year ending with or within the year covered by this return 2a 0			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? .	2b		
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)		-	
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		1
b	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	3b		
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)?	4a		✓
b	If "Yes," enter the name of the foreign country:			
5a	See instructions for filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.			
b	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5a		<b>√</b>
c	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5b 5c		✓
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the	<u> </u>		
	organization solicit any contributions that were not tax deductible?	6a		1
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or			-
	gifts were not tax deductible?	6b		
7_	Organizations that may receive deductible contributions under section 170(c).	, ,	<b>&gt;</b>	
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods			
_	and services provided to the payor?	7a		✓_
b	If "Yes," did the organization notify the donor of the value of the goods or services provided? Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was	7b		
•	required to file Form 8282?	7c		,
d	If "Yes," indicate the number of Forms 8282 filed during the year	-70		
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		<b>√</b>
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? .	7f		<del>`</del>
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		<b>√</b>
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		✓
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting		[	1
	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?			ار,۔
9	Sponsoring organizations maintaining donor advised funds.	8		<u> </u>
а	Did the organization make any taxable distributions under section 4966?	9a		
b	Did the organization make a distribution to a donor, donor advisor, or related person?	9b		<del>-</del>
10	Section 501(c)(7) organizations. Enter:			
<b>a</b>	Initiation fees and capital contributions included on Part VIII, line 12			į
. b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities . 10b			
11 a	Section 501(c)(12) organizations. Enter:  Gross income from members or shareholders			-
b	Gross income from members or shareholders	1		
	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?	12a		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year   12b			- de faces
13	Section 501(c)(29) qualified nonprofit health insurance issuers.			
а	Is the organization licensed to issue qualified health plans in more than one state?	13a		
h	Note. See the instructions for additional information the organization must report on Schedule O.			
b	Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans	- 1	l	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
С	Fortable and A. C.			
14a	Did the organization receive any payments for indoor tanning services during the tax year?	140		
	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14a 14b		<u>✓</u>
	, which is the provide an explanation in ochequie O	<del></del>	990	(2011)
				\_~· · /

Part \								
	response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. Schedule O							
Casti	Check if Schedule O contains a response to any question in this Part VI	<u>· · · </u>	<u> </u>	V				
Section	on A. Governing Body and Management		Yes	No				
1a	Enter the number of voting members of the governing body at the end of the tax year   1a 9							
	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		1	1				
	committee, explain in Schedule O.			1				
b	Enter the number of voting members included in line 1a, above, who are independent . 1b 9	, Ì						
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with							
_	any other officer, director, trustee, or key employee?	2		<u>✓</u>				
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?			,				
		3		<del>*</del>				
4 5	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?  Did the organization become aware during the year of a significant diversion of the organization's assets?	5		<u></u>				
6	Did the organization have members or stockholders?	6	1	<del>-</del>				
7a	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	✓					
b	Are any governance decisions of the organization reserved to (or subject to approval by) members,		1	_				
	stockholders, or persons other than the governing body?	7b	<b>V</b>					
8	Did the organization contemporaneously document the meetings held or written actions undertaken during							
	the year by the following:	ļ		}				
а	The governing body?	8a	<b>✓</b>					
b	Each committee with authority to act on behalf of the governing body?	8b						
9	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							
Section	on B. Policies (This Section B requests information about policies not required by the Internal Reven	9 C	nde )					
<u>ocçu</u>	on b. I didies (This deciron b requests information about policies not required by the internal rieven	30 00	Yes	No				
10a	Did the organization have local chapters, branches, or affiliates?	10a		<b>✓</b>				
	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?	10b						
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filling the form?	11a	<b>✓</b>					
þ	Describe in Schedule O the process, if any, used by the organization to review this Form 990.			ز				
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a		<b>✓</b>				
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b		<b>√</b>				
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done	40-		,				
12	Did the organization have a written whistleblower policy?	12c		<u></u>				
13 14	Did the organization have a written document retention and destruction policy?	14		1				
15	Did the process for determining compensation of the following persons include a review and approval by	17						
	independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			i				
а	The organization's CEO, Executive Director, or top management official	15a						
b	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			لـــا				
	with a taxable entity during the year?	16a		<b>✓</b>				
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?	404						
Sact:	on C. Disclosure	16b	L	<u> </u>				
17	List the states with which a copy of this Form 990 is required to be filed ▶							
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section	5016	c)(3)s	only)				
	available for public inspection. Indicate how you made these available. Check all that apply.		-,(0,0	-//				
	☐ Own website ☐ Another's website ☑ Upon request							
19	Describe in Schedule O whether (and if so, how), the organization made its governing documents, conflict or	f inte	rest p	olicy,				
	and financial statements available to the public during the tax year.		•	• 1				
20	State the name, physical address, and telephone number of the person who possesses the books and records	of the	)					
	organization: ► Benjamin Bachrach, 21835 Cherry Hill St Dearborn MI 48124, 313-563-1558			_				

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.

- 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 organization compensated any current officer, director, or trustee.

Check this box if heither the organization no	r arry relate	u org	arıız	auo	n c	ompe	กรล	ated any currer	it officer, directo	r, or trustee.	
				((	<b>C)</b>						
(A)	(B)			Pos	ition			(D)	(E)	(F)	
	1	(do not check more than one					one	(D)			
Name and Title	Average		box, unless person is both an					Reportable	Reportable	Estimated	
	hours per	office	er and			or/trust		compensation	compensation from related	amount of other	
	week (describe	유글	3	Officer	<u>~</u>	용표	Former	from the	organizations	compensation	
	hours for	₽₹	≝	₹	Key employee	팔물	Ĭ	organization	(W-2/1099-MISC)	from the	
	related	8 5	\frac{1}{2}	4	Ĕ	est oye	嘎	(W-2/1099-MISC)	(11-2 1000-111100)	organization	
	organizations	o a	١ă	1	응	a S		(** 2, 1000 1100)		and related	
	ın Schedule	l s	🖶		) ğ	뒫	ľ			organizations	
	O)	Individual trustee or director	Institutional trustee		"	Sue				_	
	ì		8	Ì	ì	Highest compensated employee	1		1		
	<del> </del>	-	<u> </u>		<u> </u>	-	⊢	<del></del>	<del></del> -		
<b></b>			ļ								
(1) Robert Kulhman, President	_	ŀ	1								
	2	✓		✓				0	0		0
(2) Sandra Butler, Vice-President											
	1	1		1				o	o		0
(3) John Dolega, Secretary	<del>                                     </del>	<u> </u>	-	Ė	╁─		-	<del> </del>	<u>-</u>	-	_
(3) John Bolega, Secretary	-		1	١,			İ	_			_
	3	✓	Ь	✓			<u></u>	0	0		0
(4) Benjmain Bachrach, Treasurer	j						ľ				
	] 4	1	ł	1	<b>\</b>	<b>.</b>	1	0	l		0
(5) Anina Bachrach	<del>                                     </del>		┰	$\vdash$	1		<del>                                     </del>				_
(O) Annia Dacinach	-	,		i			i				_
	1	✓	ļ				L	0	0		0
(6) Paul Butler	]		1	<b> </b>	1		ŀ		1		
	1	✓			ĺ	l		0	0		0
(7) Patrick Daoust	<u> </u>	_		$\vdash$							_
(1)	1 1	1	]	ł	ŀ		l	۰ ا	l 0		0
(0) p : 10		\ <u> </u>	₩	<del>  -</del>	-		-	<u> </u>	<u> </u>		<u> </u>
(8) David Gregg	1			l	1		!				
	1	✓			l	L		0	0		0
(9) Brenda Lemeche											_
***	1 1	<b>/</b>	1	ì	1	]	1	) 0	) o		0
(40)	<del> </del>	⊢ <del>`</del>	1	├	-	-	⊢	<del> </del>	<del></del>		<u>~</u>
(10)	4			ļ			l				
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(11)	1	1									
<i>^</i>	1	İ		ļ							
(12)	<del>                                     </del>	<u> </u>	1	┢	<del></del>	1	╌	<del>                                     </del>	<del> </del>	<del></del>	—
(12)	4		Į.	Į .	l	ļ l	ļ	ļ	ļ	ļ	
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(13)	1	1			i				1		
	1								1		
(14)	<del>                                     </del>		t -	$\vdash$	<del>                                     </del>	<del></del>	$\vdash$	<del>                                     </del>	<del></del>	<del></del>	_
<u> </u>	1		1	1			1				
		1	1	l	1	1	I	1	1	i	

Part	VII Section A. Officers, Directors, Trust	ees, Key E	mploy	/ees	s, ar	nd H	lighes	st C	ompensated E	mployees (con	tinued)
	(A) Name and title		(B) Average ours per week  (C) Position (do not check more than o box, unless person is both officer and a director/trustr			an	(D)  Reportable compensation from	related	(F) Estimated amount of other		
		(describe hours for related organizations in Schedule O)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC)	organizations (W-2/1099-MISC	compensation
(15)							ă.				
(16)								-			
(17)											
(18)		_							-		
(19)											
(20)					_						
(21)											
(22)											
(23)											
(24)					-						
(25)											
1b c	Sub-total			•	•		•	<b>&gt; &gt; &gt;</b>	0 0		0 0
2	Total number of individuals (including but reportable compensation from the organi	not limited	to th					e) w	<u> </u>	ore than \$100,	<u></u> _
3	Did the organization list any former of employee on line 1a? If "Yes," complete s	ficer, direc	tor, c					-	oloyee, or high	•	
4	For any individual listed on line 1a, is the organization and related organizations individual										
5	Did any person listed on line 1a receive of for services rendered to the organization?									zation or individuo	dual
Section	n B. Independent Contractors				-	_					<u> </u>
1	Complete this table for your five highest of compensation from the organization. Repyear.	•		•							•
	(A) Name and business add	ress			_				(B) Description of s	ervices	(C) Compensation
none											
			_					ļ			
2	Total number of independent contractor	rs (ıncludır	ng bu	ıt n	ot I	lımıt	ed to	th	iose listed ab	ove) who	,

Part	: VIII	Statement of Revenue					
1				(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
nts nts	1a	Federated campaigns 1a				· · · · · · · · · · · · · · · · · · ·	
ira	b	Membership dues 1b					a alte
Š, Ğ	С	Fundraising events 1c					
ar /	d	Related organizations 1d					
s, G	е	Government grants (contributions) 1e					
ion 'Si	f	All other contributions, gifts, grants,					
but		and constant and control of the control	36,653				
ğ	g	Noncash contributions included in lines 1a-1f: \$					
Contributions, Gifts, Grants and Other Similar Amounts	h	Total. Add lines 1a-1f	. ▶	36,653			1
		Business					
Ven	<b>2</b> a						
Program Service Revenue	b			-			
ig	С		i				
Şeu	d						
Ē	е						
gre	f	All other program service revenue .					
P.	g	<b>Total.</b> Add lines 2a–2f	. ▶				*
	3	Investment income (including dividends, into	erest,				· · · · ·
		and other similar amounts)	. ▶	42,035	42,035		
	4	Income from investment of tax-exempt bond proceed	eds▶		-		
	5	Royalties	. ▶ [				
		(i) Real (ii) Persi	onal				
	6a	Gross rents				y	,
	b	Less: rental expenses		*	*,	, i **\	
}	С	Rental income or (loss)					
	d	Net rental income or (loss)	. ▶			a to the present of the manager WA.	
	7a	Gross amount from sales of (i) Securities (ii) Oth	ier		,		,
		assets other than inventory					
	b	Less cost or other basis					
		and sales expenses .	_			*	1
	С	Gain or (loss) 10,039			CONTROL OF CHARGOS AS AN ON		
	d	Net gain or (loss)	. ▶	10,030	10,030		
e	_						
Ĭ.	8a	Gross income from fundraising					۸
Š		events (not including \$		1			in the second se
Other Reven		of contributions reported on line 1c). See Part IV, line 18 a					ŧ
He l	L	<u> </u>					
ō	b	Less: direct expenses b					
	C	Net income or (loss) from fundraising events Gross income from gaming activities.	. ▶				
	30	See Part IV, line 19 a					
	b	Less: direct expenses b					1
	C	Net income or (loss) from gaming activities	. •				
	_	Gross sales of inventory, less	•				
	100	returns and allowances a					
	h	Less: cost of goods sold b					
	b	Net income or (loss) from sales of inventory .	. •		·		
}		Miscellaneous Revenue Business					
ŀ	11a	Unrealized Capital Losses		(89,275)	(89,275)		
	b			(03,273)	(03,273)		
	C			<del></del>			
	d	All other revenue	+				
	e	<b>Total.</b> Add lines 11a–11d	. •	(89,275)			
	12	Total revenue. See instructions.		(558)	(37,210)		

### 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).		,

	Check if Schedule O contains a respon	se to any question	in this Part IX		🗆
	t include amounts reported on lines 6b, 7b, , 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				1
_	organizations in the United States. See Part IV, line 21	19,026	19,026		
2	Grants and other assistance to individuals in the United States. See Part IV, line 22				1
3	Grants and other assistance to governments,				1
	organizations, and individuals outside the				*
	United States. See Part IV, lines 15 and 16		<u> </u>		
4	Benefits paid to or for members				
5	Compensation of current officers, directors,				
_	trustees, and key employees		<u> </u>		
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				-	
7 8	Other salaries and wages		<del></del>		
Ū	section 401(k) and 403(b) employer contributions)				
9	Other employee benefits				
10	Payroll taxes		<del></del>		
11	Fees for services (non-employees):				<u> </u>
а	Management				
b	Legal				
C	Accounting				
d	Lobbying				
е	Professional fundraising services. See Part IV, line 17				
f	Investment management fees				
g	Other				
12	Advertising and promotion				
13 14	Office expenses				
15	Royalties	-			
16	Occupancy				
17	Travel	-		<del></del>	
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials	ı			
19	Conferences, conventions, and meetings .				
20	Interest				
21	Payments to affiliates				
22	Depreciation, depletion, and amortization .	<del></del>			
23	Insurance				
24	Other expenses. Itemize expenses not covered				r
	above. (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column				t 1
	(A) amount, list line 24e expenses on Schedule O.)				!
а	Michigan Corporation Filing Fee	20		20	
b					
С					
d					
е	All other expenses				
25	Total functional expenses. Add lines 1 through 24e	19,046	19,026	20	
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    If following SOP 98-2 (ASC 958-720)				
	15110 thing 001 00 2 (100 500-120)				

Part X **Balance Sheet** (A) (B) Beginning of year End of year 87.646 1 Savings and temporary cash investments . . . . . . 2 25.343 2 25,764 3 Pledges and grants receivable, net . . . . . . . . 3 4 5 Receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of 5 Receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions) . . . . . 6 Assets 7 8 8 9 Prepaid expenses and deferred charges . . . 9 10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D 10a Less: accumulated depreciation . . . . b 10b 10c Investments—publicly traded securities . . . . . . . . 11 693,782 11 761.414 12 Investments—other securities. See Part IV, line 11 . . . . . . . 12 13 Investments—program-related. See Part IV, line 11 . . . . . . . . 13 14 14 15 15 16 Total assets. Add lines 1 through 15 (must equal line 34) . . . . . 806,781 787,178 16 17 17 18 Grants payable . . . . . . . . . . . . . . . 18 19 19 20 20 21 Escrow or custodial account liability. Complete Part IV of Schedule D. 21 Payables to current and former officers, directors, trustees, key 22 \_iabilities employees, highest compensated employees, and disqualified persons. 22 Secured mortgages and notes payable to unrelated third parties . . . 23 23 24 Unsecured notes and loans payable to unrelated third parties . . . 24 25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24) Complete Part X 25 Total liabilities. Add lines 17 through 25 . . . . 26 ol 26 0 Organizations that follow SFAS 117, check here ▶ □ and complete Net Assets or Fund Balances lines 27 through 29, and lines 33 and 34. 27 27 28 28 29 29 Organizations that do not follow SFAS 117, check here ▶ □ and complete lines 30 through 34. Capital stock or trust principal, or current funds . . . . . . . . . 30 30 31 Paid-in or capital surplus, or land, building, or equipment fund . . . 31 32 Retained earnings, endowment, accumulated income, or other funds. 32 33 806,781 787.178 33 Total liabilities and net\_assets/fund balances . . . . . 806,781 34 787.178

Par	Reconciliation of Net Assets				
	Check if Schedule O contains a response to any question in this Part XI	<u> </u>	<del></del>		
1	Total revenue (must equal Part VIII, column (A), line 12)	1			(558)
2	Total expenses (must equal Part IX, column (A), line 25)	2			9.046
3	Revenue less expenses. Subtract line 2 from line 1	3		(19	,604)
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4		800	6,781
5	Other changes in net assets or fund balances (explain in Schedule O)	5			0
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		78	7,177
Part	XII Financial Statements and Reporting				-,
	Check if Schedule O contains a response to any question in this Part XII				
				Yes	No No
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," ex Schedule O.	olain	īn *		
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		. 2a		
b					<u> </u>
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for over of the audit, review, or compilation of its financial statements and selection of an independent account	ersigl	ht ? <b>2c</b>		
	If the organization changed either its oversight process or selection process during the tax year, ex Schedule O.	plain i	in *		* \$
d	If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the years usued on a separate basis, consolidated basis, or both:	ar wei	re		,
	☐ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis				
3а	As a result of a federal award, was the organization required to undergo an audit or audits as set the Single Audit Act and OMB Circular A-133?	forth i	in <b>3a</b>		1
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not under required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits.	rgo th			
				m <b>990</b>	(2011)
			1 011	000	(5011)

#### **SCHEDULE A** (Form 990 or 990-EZ)

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

OMB No 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service

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.

Name of the organization Employer identification number **Dearborn Orchestral Society Endowment Fund** 38-3049011 Reason for Public Charity Status (All organizations must complete this part.) See instructions. The organization is not a private foundation because it is: (For lines 1 through 11, check only one box.) 1 A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). ☐ A school described in section 170(b)(1)(A)(ii). (Attach Schedule E.) ☐ A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state: An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv). (Complete Part II.) ☐ A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II.) ☐ A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.) ☐ An organization that normally receives: (1) more than 331/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions-subject to certain exceptions, and (2) no more than 331/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See section 509(a)(2). (Complete Part III.) 10 An organization organized and operated exclusively to test for public safety. See section 509(a)(4). 11 An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See section 509(a)(3). Check the box that describes the type of supporting organization and complete lines 11e through 11h. **b** ✓ Type II **c** Type III–Functionally integrated e 🗹 By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified persons other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(1) If the organization received a written determination from the IRS that it is a Type II, or Type III supporting Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons? (i) A person who directly or indirectly controls, either alone or together with persons described in (ii) and No 11g(i) 11g(ii) (iii) A 35% controlled entity of a person described in (i) or (ii) above? . . . . . . . 11g(iii) Provide the following information about the supported organization(s). (i) Name of supported (ii) EIN (iii) Type of organization (iv) Is the organization (v) Did you notify (vi) Is the (vii) Amount of organization in col (i) listed in your (described on lines 1-9) the organization in organization in col support governing document? col (i) of your above or IRC section (i) organized in the support? US? (see instructions)) Yes Yes Yes No (A) Dearborn Orchestral Society 38-6092467 510(c) 3 19,026 (B) (C) (D) (E)

Part	Support Schedule for Organiza	tions Descr	ribed in Sect	ions 170(b)(1	I)(A)(iv) and	170(h)(1)(A)(v		age Z
	(Complete only if you checked the	ne box on line	e 5. 7. or 8 of	Part I or if th	e organizatio	on failed to gu	יי alıfv unde	er
	Part III. If the organization fails to	qualify und	er the tests lis	sted below, p	lease compl	ete Part III.)	u, uc	
Secti	on A. Public Support					<u> </u>		
Calen	dar year (or fiscal year beginning in)	(a) 2007	<b>(b)</b> 2008	(c) 2009	(d) 2010	(e) 2011	(f) Tota	al
1	Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")		:					
2	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf							
3	The value of services or facilities furnished by a governmental unit to the organization without charge							
4	Total. Add lines 1 through 3							
5	The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)			,				
6	Public support. Subtract line 5 from line 4.					*		
	on B. Total Support		T	·				
Calen 7	dar year (or fiscal year beginning in)  Amounts from line 4	(a) 2007	<b>(b)</b> 2008	(c) 2009	(d) 2010	<b>(e)</b> 2011	(f) Tota	al
8	Amounts from line 4							
9	Net income from unrelated business activities, whether or not the business is regularly carried on	, <u>,</u>						
10	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)						_	
11 12	Total support. Add lines 7 through 10 Gross receipts from related activities, etc.	•	•			12		
13	First five years. If the Form 990 is for the organization, check this box and stop her							
Secti	on C. Computation of Public Suppor			· · · · · ·	· · · · ·	· · · · ·	· · •	<u>.                                    </u>
14	Public support percentage for 2011 (line 6			1 column (fl)		14	<del></del>	<del>%</del>
15	Public support percentage from 2010 Sch					15		<del>//</del>
16a	331/3% support test—2011. If the organization qual	ation did not	check the box	on line 13, and	d line 14 is 331	1/3% or more, c	heck this	
b	331/3% support test—2010. If the organicheck this box and stop here. The organi	izatıon did no zatıon qualıfıe	ot check a box s as a publicly	on line 13 or supported org	<sup>r</sup> 16a, and line janization .	e 15 is 33¹/₃% · · · · ·	-	
17a								
b	10%-facts-and-circumstances test—20 15 is 10% or more, and if the organizate Explain in Part IV how the organization m supported organization	10. If the orga ion meets the eets the "facts	anization did no e "facts-and-cii s-and-circumst	ot check a box rcumstances" ances" test. T	on line 13, 16 test, check the he organization	Sa, 16b, or 17a his box and <b>st</b> on qualifies as a	op here. a publicly	
18	Private foundation. If the organization did							_

### 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.)

	ir the organization talls to quality	dilaci tile te	2313 H31CG DCIC	W, picase of	ompicie i ait	··· <i>)</i>	
	on A. Public Support						
	dar year (or fiscal year beginning in) ▶	(a) 2007	<b>(b)</b> 2008	(c) 2009	(d) 2010	(e) 2011	<b>(f)</b> 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			<u> </u>			
	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		<u> </u>				
7a	Amounts included on lines 1, 2, and 3		<del>                                     </del>				
	received from disqualified persons .						
ь	Amounts included on lines 2 and 3		<del>                                     </del>		<del> </del>		
_	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.)	-	'	No.		13, 23	
	on B. Total Support			- <u></u>			
Calen	dar year (or fiscal year beginning in) 🕨	(a) 2007	<b>(b)</b> 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total
9	Amounts from line 6						
10a	Gross income from interest, dividends,						
	payments received on securities loans, rents,		1				
	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.)					<u> </u>	
13	Total support. (Add lines 9, 10c, 11,						
	and 12.)				<u> </u>		
14	First five years. If the Form 990 is for the				-		
O 4*	organization, check this box and stop he		<u> </u>	· · · · ·	<u> </u>	· · · ·	<u> </u>
	on C. Computation of Public Suppor					——————————————————————————————————————	<del></del>
15	Public support percentage for 2011 (line 8	s, column (t) d	livided by line 13	3, column (f))		15	%
16 Socti	Public support percentage from 2010 Sch	nedule A, Part	iii, line 15 .	<del></del>		16	%
<u> 17</u>	on D. Computation of Investment In			. Um = 40!	(6)	14-1	
17	Investment income percentage for 2011 (						%
	Investment income percentage from 2010						<u>%</u>
19a	331/3% support tests—2011. If the organ						·
	17 is not more than 331/3%, check this box					-	
b	331/3% support tests—2010. If the organiz						
00	line 18 is not more than 33½%, check this i						
20	Private foundation. If the organization di	u not check a	DOX ON IINE 14,	19a, or 19b, (	cneck this box	and see instruc	ctions -

	Page <b>4</b>
ne 10; . (See	

Schedule A (F	-om 990 or 990-E2) 2011	Page 4
Part IV	<b>Supplemental Information.</b> 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).	
		<b></b>
	······································	

#### **SCHEDULE D** (Form 990)

# **Supplemental Financial Statements**

OMB No 1545-0047

Department of the Treasury Internal Revenue Service Name of the organization

► 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.

Open to Public Inspection

			Employer technication number
Dearb	orn Orchestral Society Endowment Fund Inc		38-3049011
Par	Organizations Maintaining Done	or Advised Funds or Other Similar Fu	nds or Accounts. Complete if the
	organization answered "Yes" to F		•
		(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year		
2	Aggregate contributions to (during year) .		
3	Aggregate grants from (during year)		
4	Aggregate value at end of year		
5	Did the organization inform all donors and	donor advisors in writing that the assets I	held in donor advised
-	funds are the organization's property, subje-		
6	Did the organization inform all grantees, do	<del>-</del>	
•	only for charitable purposes and not for the		
		or a control of control	
Par		lete if the organization answered "Yes"	'to Form 990 Part IV June 7
1	Purpose(s) of conservation easements held		to romi 990, Fait IV, line 7.
•			-6 b4
	Protection of natural habitat	recreation or education) Preservation o	
		☐ Preservation of	of a certified historic structure
2	Preservation of open space	tion hold a graphical concentration contribute	and the forms of a second of
2	Complete lines 2a through 2d if the organizate easement on the last day of the tax year.	mon held a qualified conservation contributi	ion in the form of a conservation
	easement on the last day of the tax year.		
_	Total annula and a superior the superior to		Held at the End of the Tax Year
a			
b	Total acreage restricted by conservation eas		
C.	Number of conservation easements on a ce		
ď	Number of conservation easements include		
_	historic structure listed in the National Regis		
3	Number of conservation easements modifie	d, transferred, released, extinguished, or ter	rminated by the organization during the
_	tax year >		
4	Number of states where property subject to		
5	Does the organization have a written po		· ·
	violations, and enforcement of the conserva		_ :== _ ::=
6	Staff and volunteer hours devoted to monitor	ring, inspecting, and enforcing conservation	n easements during the year
	<b>&gt;</b>		
7	Amount of expenses incurred in monitoring,	inspecting, and enforcing conservation eas	sements during the year
	<b>\$</b>		
8	Does each conservation easement reported		
9	In Part XIV, describe how the organization re	ports conservation easements in its revenu	e and expense statement, and
	balance sheet, and include, if applicable, the	e text of the footnote to the organization's fi	nancial statements that describes the
	organization's accounting for conservation e		
Part	Organizations Maintaining College	ctions of Art, Historical Treasures, o	r Other Similar Assets.
	Complete if the organization answ	ered "Yes" to Form 990, Part IV, line 8.	·
1a	If the organization elected, as permitted un-		
	works of art, historical treasures, or other		
	public service, provide, in Part XIV, the text	of the footnote to its financial statements the	at describes these items.
b	If the organization elected, as permitted u		
	works of art, historical treasures, or other	sımılar assets held for public exhibition, e	
	public service, provide the following amount	s relating to these items:	
	(i) Revenues included in Form 990, Part VIII	, line 1	<b>&gt;</b> \$
	(ii) Assets included in Form 990, Part X		<b>&gt;</b> \$
2	If the organization received or held works	of art, historical treasures, or other similar	ar assets for financial gain provide the
	following amounts required to be reported u		
а	Revenues included in Form 990, Part VIII, lin	· · · · · · · · · · · · · · · · · · ·	
	Assets included in Form 990. Part Y		· · · · <b>\$</b>

Part	Organizations Maintaining	Collections of A	Art, Historical	Treasures,	or Ot	her Similar As	sets (conti	inued)
3	Using the organization's acquisition, a collection items (check all that apply):							
а	☐ Public exhibition		d ∏ Loar	n or exchang	e progi	rams		
b	☐ Scholarly research							
c	☐ Preservation for future generations		e 🗆 Ouik					
_			بينمط سنماسيم امص	Ale	AL			
4	Provide a description of the organizati	ion's collections a	ind explain now	tney furtner	tne org	janization's exer	npt purpose	in Part
_	XIV.							
5	During the year, did the organization assets to be sold to raise funds rather	solicit or receive of than to be mainta	donations of art, ined as part of th	, historical tr ne organizati	easure: on's co	s, or other simili illection?	ar 🔲 Yes	□ No
Part	line 9, or reported an amount			ganization a	answe	red "Yes" to Fo	orm 990, Pa	art IV,
1a	Is the organization an agent, trustee, included on Form 990, Part X?						ot Yes	□ No
b	If "Yes," explain the arrangement in Pa	art XIV and comple	ete the following	table:		l A	mount	
С	Beginning balance				1c	<del></del>		
d	Additions during the year				1d	<del></del> -		
e	Distributions during the year				1e			
f	Ending balance				1f			
2a	Did the organization include an amoun		art X, line 21? .		• •		☐ Yes	∐ No
	If "Yes," explain the arrangement in Pa			107	. 6			
Par	Endowment Funds. Comple							
		(a) Current year	(b) Prior year	(c) Two years	s back	(d) Three years back		
1a	Beginning of year balance	806,781	315,37	В			2.0	
b	Contributions	36,653	400,13	3			1 x 1 1 x 1	<u> 41 (.</u>
С	Net investment earnings, gains, and							₹? [
	losses	(37,210)	49,79	9			1. 7. p. s.	-
d	Grants or scholarships	19,026	7,05	O			45.5	•- 1
е	Other expenditures for facilities and						1000	%S 4 4
	programs						2 m 2 m 2 m 2 m 2 m 2 m 2 m 2 m 2 m 2 m	<i>\$</i> :
f	Administrative expenses	20	2	2			1 2	
g g	End of year balance	787,178	806,78				, ye, w	7- 34
2	Provide the estimated percentage of the				// bold (		1 37,	
	Board designated or quasi-endowmen		•	g, column (a,	)) Held a	45.		
a			5%					
b	***************************************	15%						
С	Temporarily restricted endowment							
0-	The percentages in lines 2a, 2b, and 2							
3a	Are there endowment funds not in the	possession of the	e organization tr	nat are neld a	and ad	ministered for tr		
	organization by:						Ye	s No
	(i) unrelated organizations						3a(i)	✓
	(ii) related organizations						3a(ii)	✓
b	If "Yes" to 3a(ii), are the related organized	zations listed as re	equired on Sched	dule R? .			3b	1
4	Describe in Part XIV the intended uses	of the organization	n's endowment	funds.				
Part	VI Land, Buildings, and Equip	ment. See Form	990, Part X, III	ne 10.	•	<del></del>	-	
	Description of property	(a) Cost or oth (investme	1.7	or other basis other)		Accumulated epreciation	(d) Book va	ılue
1a	Land		·	- "		· ·		
b	Buildings							
c	Leasehold improvements		<del></del>					
d	Equipment							
e	Other	-		<del></del>				
	Add lines 1a through 1e. (Column (d) m		00 Port V ==1:	n /D) 1i= - 10	Val 1			
ı vtal.	Aug mies la unough le lo <i>duinii (a) ili</i>	iusi euuai FUIII 98	ου. Γαιι Λ. CUIUM	ıı idə. iine 10	rici.i .			

Part VII	Investments - Other Securities	. See Form 990, Part X	, line 12.	, ago e
(8	a) Description of security or category (including name of security)	(b) Book value	(c) Method of valu Cost or end-of-year m	
(1) Financia	I derivatives			-
(2) Closely-	held equity interests			
(3) Other				
(A)				
(B)				
(C)				
(D)	•••••			
(E)	••••••			<u> </u>
(F)				
(G)	•••••			
(H)				
(1)	41 1 15 000 D 11/4 1/DV 101 D			
	(b) must equal Form 990, Part X, col (B) line 12)	L Coo Forms 000 Dord	/ line 12	9
Part VIII	Investments – Program Related		·	
	(a) Description of investment type	(b) Book value	(c) Method of value Cost or end-of-year m	
(1)				
(2)			<del></del>	
(3)				
(4)				
(5)				
(7)		· · · · · · · · · · · · · · · · · · ·		
(8)	· · · · · · · · · · · · · · · · · · ·			
(9)			-	
(10)				
	(b) must equal Form 990, Part X, col (B) line 13.) ▶			
Part IX	Other Assets. See Form 990, Pa	irt X, line 15.		
		) Description		(b) Book value
(1)		· · · · · · · · · · · · · · · · · · ·		··· -
(2)				
(3)				
(4)				
(5)			·	
(6)			_	
(7)		<del></del>		
(8)				
(9)				
(10)	umn (b) must equal Form 990, Part X, c	ol (P) lino 15 )	<del></del>	
Part X	Other Liabilities. See Form 990,		<u> </u>	<del></del>
1.	(a) Description of liability	(b) Book value	1	
	I income taxes	(2) 2001 14:00	-	
(2)			-	E
(3)			-	
(4)			-	
(5)				E
(6)				: :
(7)				
(8)				
(9)				<u> </u> 
(10)				, , ,
(11)				
	(b) must equal Form 990, Part X, col. (B) line 25)			-

Page	4

Part	XI Reconciliation of Change in Net Assets from Form 990 to A	udited Financial Statem	ents	- <del></del>
1	Total revenue (Form 990, Part VIII, column (A), line 12)		1	-
2	Total expenses (Form 990, Part IX, column (A), line 25)		2	
3	Excess or (deficit) for the year. Subtract line 2 from line 1		3	
4	Net unrealized gains (losses) on investments		4	
5	Donated services and use of facilities		5	
6	Investment expenses		6	
7	Prior period adjustments		7	<u> </u>
8	Other (Describe in Part XIV.)		8	
9	Total adjustments (net). Add lines 4 through 8		9	
10	Excess or (deficit) for the year per audited financial statements. Combine		10	
	XII Reconciliation of Revenue per Audited Financial Statem			urn
1	Total revenue, gains, and other support per audited financial statements		1	
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:		-	
a	Net unrealized gains on investments	2a		
b	Donated services and use of facilities		-	
c	Recoveries of prior year grants	<del></del>	7	
d	Other (Describe in Part XIV.)		┪	
e	Add lines 2a through 2d		7 26	 <b>-</b> -
3	Subtract line 2e from line 1		3	_+
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:		<u>                                    </u>	*
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a		
b	Other (Describe in Part XIV.)		$\dashv$	
c	Add lines <b>4a</b> and <b>4b</b>		40	-
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line			<del></del>
Part	XIII Reconciliation of Expenses per Audited Financial Stater			leturn
1			1	
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:			
а	Donated services and use of facilities	2a		
b	Prior year adjustments	2b	7	
C	Other losses	2c		^
d	Other (Describe in Part XIV.)	2d	7	
e	Add lines 2a through 2d		26	e
3	Subtract line <b>2e</b> from line <b>1</b>		3	
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:			
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a		
b	Other (Describe in Part XIV.)	4b		
C	Add lines <b>4a</b> and <b>4b</b>		40	
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, lin	ne 18.)	5	
Part	XIV Supplemental Information			
	lete this part to provide the descriptions required for Part II, lines 3, 5, and			
	, line 4; Part X, line 2; Part XI, line 8; Part XII, lines 2d and 4b; and Part XIII	, lines 2d and 4b. Also cor	nplet	e this part to provide
any a	ditional information.			
			<b>-</b> -	
			<b></b> -	·
			·	
			· <b></b>	

Schedule D (For	m 990) 2011	Page 5
Part XIV	Supplemental Information (continued)	
	•••••••••••••••••••••••••••••••••••••••	*
	······································	
		•••••
		·

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

# Supplemental Information to Form 990 or 990-EZ

OMB No 1545-0047

2011

Open to Public Inspection

Department of the Treasury Internal Revenue Service

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.

Name of the organization	Employer identification number
Dearborn Orchestral Society Endowment Fund Inc	38-3049011
Part VI, & All season subscribers to the Dearborn Symphony Concerts are members	
Part VI, 7a. Members attending the annual meeting elect the Board of Trustees	
Part VI. Th. Mombors attending the approach meeting emprove the approach budget proposed by the Reard of Trustees	
Part VI, 7b. Members attending the annual meeting approve the annual budget proposed by the Board of Trustees	
Part VI, 11b. A draft of the 990Form and Schedules is emailed to all members of the Board of Trustees, and discussed at a Board Meeting	
	•••••
	·····
·····	·····
	•••••••••••••••••••••••••••••••••••••••