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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.

2013

OMB No 1545-0047

Department of the Treasury Internal Revenue Service

► Attach to Form 990 or Form 990-EZ.

Information about Schedule A (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

Open to Public Inspection

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			ciety Endowment						110		049011			
	rt I			rity Status (All orga	•					Instruction	ons.			
1	•		•	ation because it is: (Fo		-		-	-	n				
2	☐ 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.)													
3	☐ A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii).													
4	□ A	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:												
5		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.)												
6 7	☐ 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 pub described in section 170(b)(1)(A)(vi). (Complete Part II.)										public			
8	8 A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.)													
9	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 11	☑ Ar	organization	on organized ar one or more pub	d operated exclusively and operated exclusive plicity supported organ	ely for th	ne benefi describe	t of, to _l d in sect	perform tion 509(a	the funct a)(1) or so	tions of, ection 50	9(a)(2). S			
e By checking this box, I certify that the organization is not controlled directly or indirectly other than foundation managers and other than one or more publicly supported organization 509(a)(2).								d [] indirectled organi	Type III-t y by one izations o	Non-func or more described	tionally in disqualif I in secti	ied pe on 509	rsons 9(a)(1)	
f	org	ganizatıon, d	check this box	a written determination							oe III su	pportii	ng 	
g	fol	lowing pers	ons?	he organization accep					•					
	(i)			ndirectly controls, eitlody of the supported (Yes	No	
• • •			•	• • • • • • • • • • • • • • • • • • • •	•	~						+	√	
• • •			ember of a person described in (i) above?									 	√	
h		•	•	ion about the support	., .,						11g(ii	<u> </u>		
(i) Name of supported organization		f supported	,	(iii) Type of organization (described on lines 1–9 above or IRC section (see instructions))			,		(vi) Is the organization in col (i) organized in the U.S.?			vii) Amount of monetary support		
				(occ moraciono))	Yes	No	Yes	No	Yes	No	1			
A) Dearborn Orchestral Society			38-6092467	501 (c) 3			✓		/				25,950	
B)														
C)														
D)									, .					
Ξ)														
	,													

0425874015 Nov. 07, 2014 LTR 2694C 0 R 38-3049011 201405 67 00021647

DEARBORN ORCHESTRAL SOCIETY ENDOWMENT FUND INC PO BOX 2063 DEARBORN MI 48123



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DECLARATION

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

Signature of officer or trustee

Date

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