Return of Organization Exempt From Income Tax

OMB No 1545-0047

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

Department		
Internal Reve	enue S	Service

▶ Do not enter social security numbers on this form as it may be made public 🎜 🗡

Inter	artment of nal Revent	the Treasury ue Service	► Go to www.irs.gov/Form990 for instructions and the latest information.	100	Inspection
A	For the	2018 cale	ndar year, or tax year beginning 06-01 , 2018, and ending 0	5-31	, 20 19
В.	Check if a	applicable :	C Name of organization DEARBORN ORCHESTRAL SOCIETY ENDOWMENT FUND INC	D Employ	er identification number
	Address		Doing business as DOSEF		383049011
\exists	Name ch	_	Number and street (or P O box if mail is not delivered to street address) Room/suite	E Telepho	ne number
\Box	Initial retu	•	PO BOX 2063	·	313-565-2424
\exists			City or town, state or province, country, and ZIP or foreign postal code		313-303-2424
		n/terminated	DEARBORN MI 48123-2063	G Gross re	eceipts \$ 502,371
\vdash	Amended	1		subordinates? Yes No	
Ш	Application	J F			
					s included? Yes No
Ļ		npt status	301(c)(3)	•	,
<u>J</u>	Website:	1,421.1		exemption	
			Corporation	M State	of legal domicile MI
Р	art I	Summ			
	1	•	scribe the organization's mission or most significant activities: TO PROVIDE PERF		
Activities & Governance			RN ORCHESTRAL SOCIETY TO ENSURE ITS ARTISTIC AND FINANCIAL STABILITY A		
паř			OONATED TO THE DOS TO SUPPORT PUBLIC AND YOUTH CONCERTS, AND SCHOLA		
Ve	1		s box $ ightharpoonup$ If the organization discontinued its operations or disposed of more that	า 25% of	its net assets.
Š	1		of voting members of the governing body (Part VI, line 1a) , , , . .	3	6
م ر	4	Number of	of independent voting members of the governing body (Part VI, line 1b)		6
ţį	5	Total nun	nber of individuals employed in calendar year 2018 (Part V, line 2a)	5	0
ţ	6	Total nun	iber of volunteers (estimate if necessary)	6	6
Ą	7a	Total unre	elated business revenue from Part VIII, column (C), line 12	7a	0
	b	Net unrel	ated business taxable income from Form 990-T, line 38	7b	υ
			Prior Y	ear	Current Year
a)	8	Contribut	ions and grants (Part VIII, line 1h)	75,651 88	320 00
Ē	1		service revenue (Part VIII, line 2g)	0	0
Revenue	1	_	range in the control of the control	56,853 86	135,375 39
æ	1		enue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	0	
	1			32,505 74	135,695 39
				49,512 00	
	1		paid to or for members (Part IX, column (A), line 4)	0	30,200 00
	15	Salaries (other compensation, employee benefits (Part IX, column (RESET)	0	
Expenses	16a	Drofeesio	nal fundraising fees (Part IX, column (A), line 11p)		
ĕ			draising expenses (Part IX, column (D), line 25)		
Ĕ			penses (Part IX, column (A), lines 11a-11d, 11f-24e) SEP 0 8 20 9	320	20 00
			Chart M, Soldini (V), miss the tray in	49,832 00	
	ŀ	-			
		Hevenue	less expenses. Subtract line 18 from line 12	82,673 74	96,475.39 End of Year
Net Assets or Fund Balances		T-4-1			
Sse	20		· · · · · · · · · · · · · · · · · · ·	19,922.30	1,265,650 30
a d	21		lities (Part X, line 26)	0	0
_				19,922 30	1,265,650.30
	art II		ure Block		
Un	der penali	ties of perjur	y, I declare that I have examined this return, including accompanying schedules and statements, and to be teledeclaration of preparer (other than officer) is based on all information of which preparer has any know	ne best of r ledae	ny knowledge and belief, it is
	e, correct,	, and compi	A Debatation of property (exist interesting) is because of an interesting in the property in t	4/2	1/2-16
٥.		 	2. 4. 12 acm 6x	7/2	6/2017
Sig		Signa		ite	
He	re	 	Benjamin Bochrad Treasurer		
			or print Name and title	_	l ozu:
Pa	id	Print/Typ	pe preparer's name Preparer's signature Date	Check [if PTIN
	eparei	r		self-emp	oloyed
	e Only		ame Firm	n's EIN ▶	
		,		one no	
Ma	y the IR		this return with the preparer shown above? (see instructions)		Yes No

SCANNED OCT 0-8 2019

Part	
1	Check if Schedule O contains a response or note to any line in this Part III
•	TO PROVIDE A PERPETUAL BASE OF SUPPORT FOR THE DEARBORN ORCHESTRAL SOCIETY TO ENSURE ITS ARTISTIC AND
	FINANCIAL STABILITY ANNUAL INCOME FROM OUR ENDOWMENT IS DONATED TO THE DEARBORN ORCHESTRAL SOCIETY
	TO SUPPORT PUBLIC CONCERTS, YOUTH SCHOLARSHIPS FOR MUSIC LESSONS & CONCERTS
2	Did the organization undertake any significant program services during the year which were not listed on the
_	prior Form 990 or 990-EZ?
	If "Yes," describe these new services on Schedule O.
3	Did the organization cease conducting, or make significant changes in how it conducts, any program
	services?
4	If "Yes," describe these changes on Schedule O Describe the organization's program service accomplishments for each of its three largest program services, as measured by
7	expenses. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others,
	the total expenses, and revenue, if any, for each program service reported.
	(O 1) (T)
4a	(Code:) (Expenses \$ 35,000 including grants of \$ 35,000) (Revenue \$)
	DONATION TO DEARBORN ORCHESTRAL SOCIETY FOR OPERATING EXPENSES
	······
	(Out to a control of the control of
4b	(Code:) (Expenses \$ 3,000 including grants of \$ 3,000) (Revenue \$) DONATION TO DEARBORN ORCHESTRAL SOCIETY FOR SCHOLARSHIP FUND
	DONATION TO DEARBORN ORCHESTRAL SOCIETT TON SCHOLARSHIF TOND
4c	(Code:) (Expenses \$ 700 including grants of \$ 700) (Revenue \$)
	DONATION TO DEARBORN ORCHESTRAL SOCIETY FOR YOUR SOLO ARTIST COMPETITION
4d	Other program services (Describe in Schedule O.)
	(Expenses \$ 500 including grants of \$ 500) (Revenue \$)
4e	Total program service expenses ▶ 39,200

ABDIO

Part	V Checklist of Required Schedules			
			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A	1	~	
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	2		~
3	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		
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? <i>If "Yes," complete Schedule C, Part II</i>	4		,
5	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, 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		v
7	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		~
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, 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		,
10	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	~	
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, 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		,
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		,
C	Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part VIII </i>	11c		<u></u>
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		,
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		~
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		v
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII	12a		~
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		~
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		~
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		~
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 foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV	14b		v
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		v
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV.	16		,
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		,
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		,
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		,
20 a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		~
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return? .	20b		
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	/	

Part	Checklist of Required Schedules (continued)			
			Yes	No
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		•
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		<u>, </u>
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 25a	24a		~
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
C	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	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		/
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		V
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? 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		~
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):			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		~
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		v
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		•
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		~
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M</i>	30		/
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		~
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		•
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? <i>If "Yes," complete Schedule R, Part I </i>	33		7
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1	34		•
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		~
b	If "Yes" to line 35a, 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		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2	36		'
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? If "Yes," complete Schedule R, Part VI	37		•
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? Note. All Form 990 filers are required to complete Schedule O.	38	٧	
Part				
	Check if Schedule O contains a response or note to any line in this Part V	<u> </u>		
			Yes	No
_	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable 1a 0 Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable	 		
b	Enter the number of forms w-2d included in line 1a. Enter -0 in not applicable			
С	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1c	~	
	repercence Serving (Servicing) annual of bure annual of the contract of the co			(2018)

Part	Statements Regarding Other IRS Filings and Tax Compliance (continued)			
			Yes	No
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax	!		
	Statements, filed for the calendar year ending with or within the year covered by this return 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		~
	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, 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			
_	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).	<u> </u>	 -	نـــا
_	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		V
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b 5c		<u> </u>
C C	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	30		
6a	organization solicit any contributions that were not tax deductible as charitable contributions?	6a		,
h	If "Yes," did the organization include with every solicitation an express statement that such contributions or	- Va		Ť
	gifts were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).		_	
	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?	7b		
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was			
	required to file Form 8282?	7c		1
	If "Yes," indicate the number of Forms 8282 filed during the year			
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e_		~
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? .	7f		~
	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		
	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		
	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the	8		
	sponsoring organization have excess business holdings at any time during the year?	-		
	Did the sponsoring organization make any taxable distributions under section 4966?	9a		
	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b	-	
	Section 501(c)(7) organizations. Enter:			
	Initiation fees and capital contributions included on Part VIII, line 12			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities . 10b			
11	Section 501(c)(12) organizations. Enter:			
а	Gross income from members or shareholders			
	Gross income from other sources (Do not net amounts due or paid to other sources			
	against amounts due or received from them.)	40		
	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		1
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year			.
	Section 501(c)(29) qualified nonprotit health insurance issuers. Is the organization licensed to issue qualified health plans in more than one state?	13a		1
	Note. See the instructions for additional information the organization must report on Schedule O.	134		
	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	[ſ
	Enter the amount of reserves on hand	j		1
	Did the organization receive any payments for indoor tanning services during the tax year?	14a		~
	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O.	14b		
	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or			
	excess parachute payment(s) during the year?	15		~
	If "Yes," see instructions and file Form 4720, Schedule N.			
	Is the organization an educational institution subject to the section 4968 excise tax on net investment income?	16		<u>~</u>
	If "Yes," complete Form 4720, Schedule O.			
		Form	リンと	(2018)

Form **990** (2018)

Part	Governance, Management, and Disclosure For each "Yes" response to lines 2 the response to line 8a, 8b, or 10b below, describe the circumstances, processes, or change				
	Check if Schedule O contains a response or note to any line in this Part VI				
Secti	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 6			
ıa	If there are material differences in voting rights among members of the governing body, or		ĺ		1
	if the governing body delegated broad authority to an executive committee or similar				
	committee, explain in Schedule O.		ĺ		
ь	Enter the number of voting members included in line 1a, above, who are independent .	1b 6			
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	1	
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		3		~
4	Did the organization make any significant changes to its governing documents since the prior Form 990		4		1
5	Did the organization become aware during the year of a significant diversion of the organization		5		~
6	Did the organization have members or stockholders?		6	~	
7a	Did the organization have members, stockholders, or other persons who had the power to		.,_		,
	one or more members of the governing body?		7a_		
b	Are any governance decisions of the organization reserved to (or subject to approva stockholders, or persons other than the governing body?		7b		,
U	Did the organization contemporaneously document the meetings held or written actions ur				
8	the year by the following:	idertaken duning			1
а	The governing body?		8a	~	
b	Each committee with authority to act on behalf of the governing body?		8b	~	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cann	ot be reached at			
	the organization's mailing address? If "Yes," provide the names and addresses in Schedule C) <i></i>	9		<u></u>
Secti	on B. Policies (This Section B requests information about policies not required by the	e Internal Reven	ue C		
			-	Yes	No
10a	Did the organization have local chapters, branches, or affiliates?		10a		<u>~</u>
b	If "Yes," did the organization have written policies and procedures governing the activities of affiliates, and branches to ensure their operations are consistent with the organization's exemptions.	npt purposes?	10b	_	
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body bef		11a	~	
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990	,	40-		
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	· · · · · ·	12a 12b		_
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give		120	_	
С	Did the organization regularly and consistently monitor and enforce compliance with the describe in Schedule O how this was done	policy? If res,	12c		
13	Did the organization have a written whistleblower policy?		13		~
14	Did the organization have a written document retention and destruction policy?		14		~
15	Did the process for determining compensation of the following persons include a review a				1
.•	independent persons, comparability data, and contemporaneous substantiation of the deliberation	n and decision?		<u></u>	
а	The organization's CEO, Executive Director, or top management official		15a		~
b	Other officers or key employees of the organization		15b		<u>~</u>
	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 sim		ļ		
	with a taxable entity during the year?		16a		V ,
þ	If "Yes," did the organization follow a written policy or procedure requiring the organization	n to evaluate its			
	participation in joint venture arrangements under applicable federal tax law, and take steps		16h		
Secti	organization's exempt status with respect to such arrangements?		1 1777	<u>i</u>	ш
17	List the states with which a copy of this Form 900 is required to be filed. Michigan				
18	Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A if applicable	e), 990, and 990-7			501(c)
.0	(3)s only) available for public inspection. Indicate how you made these available. Check all the		,555		(0)
	☐ Own website ☐ Another's website ☑ Upon request ☐ Other (explain in Sc				
19	Describe in Schedule O whether (and if so, how) the organization made its governing docume	ents, conflict of int	erest	policy	, and
	financial statements available to the public during the tax year.				
20	State the name, address, and telephone number of the person who possesses the organization	on's books and re	cords	•	
	DENI DACUDACIJ (212) 005 1000 21025 MASTERS CID ESTERO EL 22029 5049				

Form	990	(2018)	
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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 needs	or any relate	d org	aniz	atic	n c	ompe	ensa	ited any curren	t officer, director	r, or trustee.
				(0	C)					
(A)	(B)	/do -	ot ot		ition	e than o	000	(D)	(E)	(F)
Name and Title	Average hours per week (list any	box, office	unles er and	s pe d a d	rson Irect	is both or/trus	n an tee)	Reportable compensation trom	Reportable compensation from related	Estimated amount of other
	hours for related organizations below dotted line)		Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC)	organizations (W-2/1099-MISC)	compensation from the organization and related organizations
(1) BRENDA LEMECHA PRESIDENT	2.00							o	0	0
(2) SANDRA BUTLERVICE PRESIDENT, SECRETARY	3.00							o	_0	0
(3) BENJAMIN BACHRACH TREASURER	4 00							0	0	0
(4) ANINA BACHRACH DIRECTOR	1 00							, 	o	0
(5) PAUL BUTLER DIRECTOR	1.00						-	0	O	0
(6) ALICE PUTRUS DIRECTOR	1.00							0	0	0
(7)										
(8)										
(9)										
(10)										
(11)										
(12)										
(13)					_					
(14)							-			

Page 8

•	(A)	(D)			(0	,			ł	ļ	- 1			
	V 4				Posi	tióh			(D)	(E)			(F)	
	Name and title	(B) Average	•				than o		Reportable	Reportable			ımated	ı
	Name and the	hours per					or/trust		compensation	compensation fro	m	am	ount of	
		week (list any			_	Key		·	from the	related organizations			ther	on
		hours for related	Individual trustee or director	Institutional trustee	Officer	∋у е	Highest compensated employee	Former	organization	(W-2/1099-MIS	c)		ensatı m the	QII.
		organizations	dual	tion	٦.	employee	st cc yee	"	(W-2/1099-MISC)				nizatio	
		below dotted line)	trus	altr		oyee	gmc						related nization	
			itee	uste		Ü	ensa					.		
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(23)					1									
1b	Sub-total													
C	Total from continuation sheets to Part		 . A	•	•		•							
d	Total (add lines 1b and 1c)			•	•		•	•	0			_		
	Total number of individuals (including but							ابدرا			<u>U</u>	4		
2	reportable compensation from the organic		to th	USE	1150	eu a	auove	;) W	no received inc	ne man prou,	000 0	''		
	reportable compensation from the organic	Zation					_						Yes	No
	IN the same and the later of the same and th	et				1	١		laaa aa b.ab					+10
3	Did the organization list any former of employee on line 1a? If "Yes," complete S							mp	-		atea	3		V
	• • •							• •			•			+
4	For any individual listed on line 1a, is the	sum of rep	ortat	ole c	com	per	satio	n aı	nd other comp	ensation from	the	l		1
	organization and related organizations	greater tha	an \$1	50,0	JUU	? 11	"Yes	s,	complete Sch	eaule J for s	ucn	4		\ <u>\</u>
-	Individual	· · ·				• •		• •					 	 •
5	Did any person listed on line 1a receive o for services rendered to the organization?											5		1
Castia		ii res, c	ompie	318	3011	eau	ie J i	0/ 3	uch person	· · · · ·	•	_ 5	l	
	n B. Independent Contractors													
1	Complete this table for your five highest of													
	compensation from the organization. Rep	ort comper	isatio	n to	rtn	e ca	aiena	ar y	ear ending with	n or within the	orgai	nizatio	on S t	ax
_	year.	 -												
	(A) Name and business addi	ess							(B) Description of se	ervices	Co	(C) mpens	ation	
		-										,		
					_									
_														
														
2	Total humber of independent contractor	•	_					tho	ose listed abo	ve) who				1

Form **990** (2018)

Part	VIII	Statement of Revenue					
		Check if Schedule O contains a	response or note to	any line in this	Part VIII		🗆
				(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
s, Grants Amounts	1a b c	Federated campaigns Membership dues Fundraising events	1a 1b 1c				
Contributions, Gifts, Grants and Other Similar Amounts	d e f	Related organizations Government grants (contributions) All other contributions, gifts, grants,	1d 1e				,
Contribuand Oth	g h	and similar amounts not included above Noncash contributions included in lines 1a— Total. Add lines 1a—1f		320			
	0.		Business Code				
Program Service Revenue	2a b						
rvice	С						
n Se	d e			-			
ograr	f	All other program service revenue	e .				
<u> </u>	g	Total. Add lines 2a–2f					
	3	Investment income (including and other similar amounts)	interest, ►	45,892 79	45,892 79		
	4	Income from investment of tax-exen	npt bond proceeds ▶				
	5	Royalties	(ii) Personal				
	6a	Gross rents					
	b	Less: rental expenses					
	C d	Rental income or (loss) Net rental income or (loss)		'			
	7a	Gross amount from sales of (i) Securition	es (II) Other				
		assets other than inventory 456,1	58 43				
	b	Less: cost or other basis and sales expenses . 366,6	75.83				
	С	Gain or (loss) 89,4	32.60				
	d	Net gain or (loss)	. <u> </u>	89,482 60	89,482 60		
venue	8a	Gross income from fundraising events (not including \$					
Other Revenue		of contributions reported on line 1c See Part IV, line 18	a		,		
δ		Less: direct expenses					
		Gross income from gaming activit See Part IV, line 19	ies.	-			
		Less: direct expenses				<u></u>	
		Net income or (loss) from gaming Gross sales of inventory, le returns and allowances	ess			·	
		Less: cost of goods sold					
	С	Net income or (loss) from sales o	f inventory > Business Code	<u> </u>			
	11a			<u>'</u>			-
	b						
	C						
	d	All other revenue					
	e 12	Total revenue See instructions	1	125 605 20	135 375 30		

Form 99	0 (2018)				Page 10
Part	IX Statement of Functional Expenses		<u> </u>		
Seçtio	n 501(c)(3) and 501(c)(4) organizations must com	plete all columns. Al	l other organization	s must complete co	olumn (A).
	Check if Schedule O contains a respons				
	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 domestic organizations and domestic governments. See Part IV, line 21	39,200	39,200		·
2	Grants and other assistance to domestic individuals. See Part IV, line 22				
3	Grants and other assistance to foreign organizations, foreign governments, and foreign individuals See Part IV, lines 15 and 16				
4 5	Benefits paid to or for members Compensation of current officers, directors, trustees, and key employees				
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 8	Other salaries and wages Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)				
9	Other employee benefits				
10	Payroll taxes				
11	Fees for services (non-employees):				
а	Management				
b	Légāl [
С	Accounting				
d	Lobbying				<u></u>
е	Professional fundraising services. See Part IV, line 17				
f g	Investment management fees Other. (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O.)				
12	Advertising and promotion	-			
13	Office expenses	20 00		20 00	
14	Information technology		-		
15	Royalties				
16	Occupancy				
17	Travel				- 1
18	Payments of travel or entertainment expenses for any federal, state, or local public officials				
19	Conferences, conventions, and meetings .				
20	Interest				
21	Payments to affiliates				
22	Depreciation, depletion, and amortization .				
23	Insurance				
24	Other expenses Itemize expenses not covered above (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.)				
а		-			
b			-		
C		-		-	
d		-			
e	All other expenses				
25	Total functional expenses. Add lines 1 through 24e	39,220 00	39,200 00	20 00	·
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)	35,225 00		25 00	

Р	art X	Balance Sheet			
		Check if Schedule O contains a response or note to any line in this Par			
			(A) Beginning of year		(B) End of year
	1	Cash—non-interest-bearing		1	
	2	Savings and temporary cash investments	47,500		53,946
	3	Pledges and grants receivable, net		3	
	4	Accounts receivable, net		4	
	5	Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L		5	
		•		3	
S	6	Loans and other 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)(0) voluntary employees' beneficiary organizations (see instructions). Complete Part II of Schedule L	h	6	
Assets	7	Notes and loans receivable, net		7	- :
Asi	8	Inventories for sale or use		8	
	9	Prepaid expenses and deferred charges		9	
	10a	Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D			
	ь	Less: accumulated depreciation 10b		10c	
	11	Investments—publicly traded securities	1,272,423	11	1,211,704
	12	Investments—other securities. See Part IV, line 11		12	
	13	Investments—program-related. See Part IV, line 11		13	
	14	Intangible assets		14	
	15	Other assets. See Part IV, line 11	<u></u>	15	_
	16	Total assets. Add lines 1 through 15 (must equal line 34)	1,319,922		1,265,659
	17	Accounts payable and accrued expenses		17	
	18	Grants payable		_18	
	19	Deferred revenue		19	
	20	Tax-exempt bond liabilities		20	·
	21	Escrow or custodial account liability. Complete Part IV of Schedule D .		21	
Liabilities	22	Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and			
jab		disqualified persons. Complete Part II of Schedule L		22	
	23	Secured mortgages and notes payable to unrelated third parties		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 of Schedule D		25	
	26	<u> </u>			0
	20	Total liabilities. Add lines 17 through 25			1
es		complete lines 27 through 29, and lines 33 and 34.			
Ĕ	27	Unrestricted net assets		27	
Ē	28	Temporarily restricted net assets		28	
D	29	Permanently restricted net assets		29	_
Net Assets or Fund Balances		Organizations that do not follow SFAS 117 (ASC 958), check here ▶ ☑ and			
5		complete lines 30 through 34.		****	angenete without this property and the second section of
ţ	30	Capital stock or trust principal, or current funds		30	-
SSe	31	Paid-in or capital surplus, or land, building, or equipment fund		31	
ξ	32	Retained earnings, endowment, accumulated income, or other funds.	1,319,922		1,265,659
Se	33	Total net assets or fund balances	1,319,922		1,265,659
	34	Total liabilities and net assets/fund balances	1.319.922	34	1,265,659,

1,265,659, Form **990** (2018)

Page	1	2
raye	,	4

					<u> </u>
Par	XI Reconciliation of Net Assets				
	Check if Schedule O contains a response or note to any line in this Part XI		<u>.</u>		
1	Total revenue (must equal Part VIII, column (A), line 12)	1		13	5,695
2	Total expenses (must equal Part IX, column (A), line 25)	2		3	9,220
3	Revenue less expenses. Subtract line 2 from line 1	3		g	6,475
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4		1,31	9,922
5	Net unrealized gains (losses) on investments	5		-14	9,747
6	Donated services and use of facilities	6			
7	Investment expenses	7			
8	Prior period adjustments	8			
9	Other changes in net assets or fund balances (explain in Schedule O) , . , . , . , .	9			
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line	-			
	33, column (B))	10		1,26	5,650
Part	XII Financial Statements and Reporting				
	Check if Schedule O contains a response or note to any line in this Part XII				
				Yes	No
1	Accounting method used to prepare the Form 990: 🗹 Cash 🔲 Accrual 🔲 Other		1 .		
	If the organization changed its method of accounting from a prior year or checked "Other," ex	plaın ın			
	Schedule O.				
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		
	If "Yes," check a box below to indicate whether the financial statements for the year were com	oiled or			
	reviewed on a separate basis, consolidated basis, or both:				J
	Separate basis Consolidated basis Both consolidated and separate basis		 		
b	Were the organization's financial statements audited by an independent accountant?		2b		
	If "Yes," check a box below to indicate whether the financial statements for the year were audite	ed on a			
	separate basis, consolidated basis, or both:				
	Separate basis Consolidated basis Both consolidated and separate basis		L		
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for or				
	of the audit, review, or compilation of its financial statements and selection of an independent account		2c		
	If the organization changed either its oversight process or selection process during the tax year, ex	plaın ın			
	Schedule O.		-		
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?		3a_		
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits?		0.		
	required audit or audits, explain why in Schedule O and describe any steps taken to undergo such a	udits.	3b	202	
			Forr	n 990	(2018)

SCHEDULE A (Form 990 or 990-EZ)

Public Charity Status and Public Support

2018

OMB No. 1545-0047

Open to Public

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.

▶ Go to www.irs.gov/Form990 for instructions and the latest information.

Inspection

PARBORN DECHESTRAL SOCIETY ENDOWNENT FUND INC. Part Reason for Public Charity Status (All organizations must complete this part.) See instructions.	Name of the organization							
Reason for Public Charity Status (Ali organizations must complete this part.) See instructions. The organization is not a private foundation because it is: (For Inters 1 through 12, check only one box.) 1	DEARBORN ORCHESTRAL SOCIETY ENDOWMENT FUND INC 38-3049011							
1	Part I Reason for Public Chari	ity Status (All	organizations must				ns.	
2							_ ′	
3		☐ A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i).						
4 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 III.) 6 A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(iv). (Complete Part III.) 7 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)(iv). (Complete Part III.) 8 A community trust described in section 170(b)(1)(A)(A)(iv). (Complete Part III.) 9 An aggradulural research organization described in section 170(b)(A)(A)(iv) operated in conjunction with a land-grant college or university.) 10 An organization that normally receives. (1) more than 33/3% of its support from contributions, memberably feets, and gross. (1) more than 33/3% of its support from contributions, memberably feets, and gross. (1) more than 33/3% of its support from contributions, memberably feets, and gross. (1) more than 33/3% of its support from contributions, memberably feets, and gross. (1) and group from gross investment income and unrelated business taxable income fless section 509(a)(4). 11 An organization organization and operated exclusively to test for public safety. See section 509(a)(4). 12 An organization organization 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). The public p							1 <i>J</i>	
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.)	3 A hospital or a cooperative hos	pital service org	janization described ii	n section	170(b)(1	I)(A)(iii).		
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). A norganization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(iv). (Complete Part II.) A nagricultural research organization described in section 170(b)(1)(A)(iv) operated in conjunction with a land-grant college or university or a non-land-grant college of agriculture (see instructions). Enter the name, city, and state of the college or university or a non-land-grant college of agriculture (see instructions). Enter the name, city, and state of the college or university. 10			onjunction with a hosp	oital desc	rıbed in s	section 170(b)(1)(A)(iii). Enter the	
The 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 III) An agricultural research organization described in section 170(b)(1)(A)(vi) operated in conjunction with a land-grant college or university or a non-land-grant college of agriculture (see instructions). Enter the name, city, and state of the college or university. An organization that normally receives: (1) more than 331/a% 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/a% of its support from gross investment income and unrelated business stable income (less section 509(a)(4). An organization organized and operated exclusively to test for public safety. See section 509(a)(4). An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organization described in section 509(a)(1) or section 509(a)(2). See section 509(a)(2). Check the box in lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g.			college or university	owned o	r operate	ed by a government	al unit described in	
A community trust described in section 170(b)(1)(A)(vi). (Complete Part II) □ An agricultural research organization described in section 170(b)(1)(A)(x) operated in conjunction with a land-grant college or university or a non-land-grant college of agriculture (see instructions). Enter the name, city, and state of the college or university. 10 □ 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 509(a)(2) no more than 331/3% of its support from gross investment income and unrelated business taxable income (less section 509(a)(2) no more than 331/3% of its support from gross investment income and unrelated business taxable income (less section 509(a)(4). 11 □ An organization organized and operated exclusively to test for public safety. See section 509(a)(4). 12 □ An organization organization apperated exclusively to 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)(2). Check the box in lines 12a through 12d that describes the type of supporting organization of organization organization and complete lines 12e, 12t, and 12g. □ □ Type 1. A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supporting organization organization or elect a majority of the directors organization(s), the supporting organization or elect amajority of the directors organization(s), the supporting organization organization or elect amajority of the directors organization(s), the supported organization(s), see instructions. You must complete Part IV, Sections A and C. □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □	7 An organization that normally r	eceives a subs	tantial part of its sup				the general public	
9 An agricultural research organization described in section 170(b)(1)(A)(b) operated in conjunction with a land-grant college or university. 10 An organization that normally receives: (1) more than 331-% 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-% of its support from gross investment income and unrelated business taxable income (less section 501 tax) from businesses acquired by the organization organization after June 30, 1975. See section 509(a)(2). Complete Part III.) 11 An organization organized and operated exclusively to test for public safety. See section 509(a)(2). Check the box in lines 12a through 12d that describes the type of supporting organization and complete lines 12a, 12t, and 12g. a Type I. A supporting organization operated, supervised, or controlled by its supported organization(s) typically by giving the supporting organization operated, supervised, or controlled by its supported organization(s) typically by giving the supporting organization. You must complete Part IV, Sections A and B. b Type II. A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s) (see instructions). You must complete Part IV, Sections A, D, and E. 1 Type III functionally integrated. A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions). You must complete Part IV, Sections A, D, and E. 2 Type III functionally integrated. A supporting organization operated in connection with its supported organization(s) (see instructions). You must complete Part IV, Sections A, D, and E. 3 Type III nortionally integrated. The organization operated in connection with its supported organization (s) (see instructions). You must comple				Dart II \				
or university or a non-land-grant college of agnoulture (see instructions). Enter the name, city, and state of the college or university or a non-land-grant college of agnoulture (see instructions). Enter the name, city, and state of the college or university or a non-land-grant college of the college of university of the support from contributions, membership fees, and gross receipts from activities related to the seventy functions—subject to certain exceptions, and (2) no more than 331-4% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization organizate and operated exclusively to test for public safety. See section 509(a)(4). 11					avatad in	consumption with a li	and grant college	
receipts from activities related to its exempt functions—subject to certain exceptions, and (2) no more than 33/3% of its support from gross investment income and unrelated business taxable income (less section 509(a)(2). (Complete Part III.) 11	or university or a non-land-gran	ation described it college of agr	in section 170(b)(1)(iculture (see instruction	ns). Ente	erated in er the nan	ne, city, and state of	the college or	
12	receipts from activities related t support from gross investment acquired by the organization af	to its exempt full income and uniter June 30, 197	nctions—subject to corelated business taxal 75. See section 509(a	ertain exc ble incom a)(2). (Cor	ceptions, ie (less se nplete Pa	and (2) no more that ection 511 tax) from art III.)	n 33¹/₃% of its	
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 in lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g. a								
Check the box in lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g. a	12 An organization organized and	operated exclus	sively for the benefit o	f, to perfo	orm the fu	unctions of, or to car	ry out the purposes	
the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization. You must complete Part IV, Sections A and B. b Type II. A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s). You must complete Part IV, Sections A and C. c Type III functionally integrated. A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions). You must complete Part IV, Sections A, D, and E. d Type III non-functionally integrated. A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions). You must complete Part IV, Sections A and D, and Part V. e Check this box if the organization received a written determination from the IRS that it is a Type II, Type III functionally integrated, or Type III non-functionally integrated supporting organization. f Enter the number of supported organizations g Provide the following information about the supported organization(s). (i) Name of supported organization (ii) EIN	of one or more publicly support Check the box in lines 12a throu	ted organizatio igh 12d that des	ns described in secti scribes the type of sup	i on 509(a oporting c	i)(1) or se organizatio	ection 509(a)(2). See on and complete line	e section 509(a)(3). es 12e, 12f, and 12g.	
control or management of the supporting organization vested in the same persons that control or manage the supported organization(s). You must complete Part IV, Sections A and C. c	the supported organization(s) the power to	regularly appoint or e	lect a ma	jority of t	rted organization(s), the directors or trust	typically by giving ees of the	
c Type III functionally integrated. A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions). You must complete Part IV, Sections A, D, and E. d Type III non-functionally integrated. A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions). You must complete Part IV, Sections A and D, and Part V. e Check this box if the organization received a written determination from the IRS that it is a Type II, Type III, Type III functionally integrated, or Type III non-functionally integrated supporting organization. f Enter the number of supported organizations 1	control or management of the	ne supporting o	rganization vested in	the same	with its s persons	supported organization that control or mana	on(s), by having age the supported	
its supported organization(s) (see instructions). You must complete Part IV, Sections A, D, and E. d	• , ,	-				ah amal fi imatiama	the integrated with	
d	c iype III functionally integr	ated. A suppor i) (see instructio	ting organization oper	rated in C lete Part	IV, Secti	ions A, D, and E.	my integrated with,	
that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions). You must complete Part IV, Sections A and D, and Part V. e							orted organization(s)	
Check this box if the organization received a written determination from the IRS that it is a Type II, Type III functionally integrated, or Type III non-functionally integrated supporting organization. Integrated organizations integrated organizations integrated supporting organization. Provide the following information about the supported organization (ii) EIN (iii) Type of organization (described on lines 1–10 above (see instructions)) (A) DEARBORN ORCHESTRAL SOCIETY 38-6092467 10 Characteristic in the organization (iv) Is the organization of the support (see instructions) (iii) Integrated in your governing document? Yes No (A) DEARBORN ORCHESTRAL SOCIETY 38-6092467 10 (B) (C) (D) (D) (E)	that is not functionally integ	rated. The orga	nization generally mus	st satisfy	a distribu	ution requirement an	d an attentiveness	
f Enter the number of supported organizations. g Provide the following information about the supported organization(s). (i) Name of supported organization (ii) EIN (iii) Type of organization (described on lines 1–10 above (see instructions)) (iv) Is the organization support (see instructions) (iv) Amount of monetary support (see instructions) (vi) Amount of other support (see instructions) (A) DEARBORN ORCHESTRAL SOCIETY 38-6092467 10 (B) (C) (D) (E)	e Check this box if the organi	zation received	a written determination	on from th	ne IRS th	at it is a Type I, Type	e II, Type III	
g Provide the following information about the supported organization (ii) Type of organization (described on lines 1–10 above (see instructions)) (A) DEARBORN ORCHESTRAL SOCIETY 38-6092467 10 (B) (C) (D) (E)							1	
(described on lines 1–10 above (see instructions)) Support (see instructions) Support (see instructions)	g Provide the following information	about the supp	orted organization(s).					
(A) DEARBORN ORCHESTRAL SOCIETY 38-6092467 10 39,200 0 (B) (C) (D) (E)	(i) Name of supported organization	(n) EIN	(described on lines 1-10	listed in you	ur governing	support (see	other support (see	
DEARBORN ORCHESTRAL SOCIETY 38-6092467 10 39,200 0 (B) (C) (D) (E)				Yes	No			
(C) (D) (E) (E)	(A) DEARBORN ORCHESTRAL SOCIETY	38-6092467	10	~		39,200	0	
(D) (E)								
(E)	(C)							
	(D)	-						
	(E)			_	_			
						_		

Schedule A (Form 990 or 990-EZ) 2018

Part							
•	(Complete only if you checked the						alify under
	Part III. If the organization fails to	qualify unde	er the tests lis	sted below, p	lease comple	ete Part III.)/	
	on A. Public Support	1	4.20045		1 (1) 0047	1 (-) 0040	(6) T-4-1
_	dar year (or fiscal year beginning in)	(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total
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	<u> </u>					
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		L V				
	on B. Total Support		/\ // 2245\		(0 0047	() 0040	(0 T-1-1
	dar year (or fiscal year beginning in)	(a) 2014	(b)/2015\	(c) 2016	(d) 2017	(e) 2018	(f) Total
7 8	Amounts from line 4	/					
9	Net income from unrelated business activities, whether or not the business is regularly carried on						
10	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
11 12 13	Total support. Add lines 7 through 10 / Gross receipts from related activities, etc. First five years. If the Form 990 is for the			d. third. fourth	o. or fifth tax v	12 ear as a section	on 501(c)(3)
	organization, check this box and stop he				1		
Secti	on C. Computation of Public Suppor	rt Percentag	e		<u> </u>		
14	Public support percentage for 2018 (line			1, column (f))	\.	14	%
15 16a	Public support percentage from 2017 Sci 331/3% support test—2018. If the organ box and stop here. The organization qua	zation did not	check the box		 nd line 14 is 3	15 31/3% or more,	check this
b	331/3% support test—2017. If the organithis box and stop here. The organization	zation did not	check a box o	n line 13 or 16		ıs 33¹/3% or m	ore, check
17a							
b	10%-facts-and-circumstances test—2 15 is 10% or more, and if the organization resupported organization	ation meets th	e "facts-and-o	circumstances	" test, check	this box and	stop here.
18	Private foundation. If the organization di instructions						see \ ▶ □

Schedule A (Form 990 or 990-EZ) 2018

Part							
	 (Complete only if you checked the 						nder Part II.
	If the organization fails to qualify	under the te	sts listed bel	ow, please co	omplete Part	11.)	
Secti	ion A. Public Support	_\					
Caler	ndar year (or fiscal year beginning in) 🕨	(a) 2014	(b) 2015	(c) 2016	(d) 2017	/ (e) 2018	(f) Total
1	Gifts, grants, contributions, and membership fees				/	1	
_	received. (Do not include any "unusual grants")						
2	Cross receipts from admissions, merchandise sold or services performed, or facilities	\		l	/		
	furnished in any activity that is related to the	\ \					
	organization's tax-exempt purpose						
3	Gross receipts from activities that are not an	\					
	unrelated trade or business under section 513		<u> </u>		<u>'</u>		
4	Tax revenues levied for the	j	\]		
	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		\		•		
e	Total. Add lines 1 through 5			/			
6 7a	Amounts included on lines 1, 2, and 3					<u> </u>	
	received from disqualified persons .		X .				
b	Amounts included on lines 2 and 3		- / \				
	received from other than disqualified		/ /	Į.			
	persons that exceed the greater of \$5,000			N			
	or 1% of the amount on line 13 for the year			 \			
С	Add lines 7a and 7b		î .	- \			
8	Public support. (Subtract line /c from			1		-	
	line 6.)			\			
Secti	on B. Total Support	/		1			
Calen	dar year (or fiscal year beginning in)	(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total
9	Amounts from line 6			\			
10a	Cross income from interest, dividends,			\			
	payments received on securities loans, rents,			•			
	royalties, and income from similar sources .	/			\		
b	Unrelated business taxable income (less	ľ			\		
	section 511 taxes) from businesses				\		
	acquired after June 30, 1975						
C	Add lines 10a and 10b/.						
11	Net income from unrelated business				\		
	activities not included in line 10b, whether				\		
	or not the business is regularly carried on				 \	 	
12	Other income. Do not include gain of loss from the sale of capital assets			,	\	Į l	
	(Explain in Part VI.)					\	
13	Total support. (Add lines 9, 10c, 11.					 \ 	
•••	and 12.)					\	
14	First five years. If the Form 990 is for the	e organization	's first secon	d third fourth	or fifth tax v	ear as a sectio	n 501(c)(3)
• •	organization, check, this box and stop he					1	▶ □
Secti	on C. Computation of Public Suppor			<u> </u>			
15	Public support percentage for 2018 (line 8			13. column (fl)		15 \	%
16	Public support percentage from 2017 Sch						
	on D. Computation of Investment Inc					1	
17	Investment income percentage for 2018 (I			y line 13, colu	mn (f))	17	%
18	Investment income percentage from 2017	Schedule A, F	Part III, line 17			18	\ %
19a	331/3% support tests-2018. If the organi	zation did not	check the box	on line 14, ar	nd line 15 is n	nore than 331/39	
	17 is not more than 331/3%, check this box						
b	331/3% support tests-2017. If the organiz						1
	line 18 is not more than 331/3%, check this b	oox and stop h	ere. The organi	zation qualifies	as a publicly s	upported organ	ızatıon 🕨 🔲
20	Private foundation If the executation di	d not abook a l	hay on line 14	100 or 10h o	shook this how	and and instru	otions -

Part IV Supporting Organizations

(Complete only if you checked a box in line 12 on Part I. If you checked 12a of Part I, complete Sections A and B. If you checked 12b of Part I, complete Sections A and C. If you checked 12c of Part I, complete Sections A, D, and E. If you checked 12d of Part I, complete Sections A and D, and complete Part V.)

	Sections A, D, and E. If you checked 12d of Part I, complete Sections A and D, and complete P	art v	<u>.) </u>			
Secti	on A. All Supporting Organizations					
			Yes	No		
1	Are all of the organization's supported organizations listed by name in the organization's governing					
	documents? If "No," describe in Part VI how the supported organizations are designated. If designated by	<u> </u>				
	class or purpose, describe the designation. If historic and continuing relationship, explain.	1	~			
2	Did the organization have any supported organization that does not have an IRS determination of status					
	under section 509(a)(1) or (2)? If "Yes," explain in Part VI how the organization determined that the supported					
_	organization was described in section 509(a)(1) or (2).	2		~		
3a	Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer	<u></u>				
_	(b) and (c) below.	3a		~		
b	Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and					
	satisfied the public support tests under section 509(a)(2)? If "Yes," describe in Part VI when and how the organization made the determination.	3b				
	Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B)	SD				
G	purposes? If "Yes," explain in Part VI what controls the organization put in place to ensure such use.	3c				
42	Was any supported organization not organized in the United States ("foreign supported organization")? If	30				
- a	"Yes," and if you checked 12a or 12b in Part I, answer (b) and (c) below.	4a	 	~		
h	Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign					
b	supported organization? If "Yes," describe in Part VI how the organization had such control and discretion	ł				
	despite being controlled or supervised by or in connection with its supported organizations.					
С	Did the organization support any foreign supported organization that does not have an IRS determination	4b				
	under sections 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in Part VI what controls the organization used					
	to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B)	ļ				
	purposes.	4c				
5a	Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes,"					
	answer (b) and (c) below (if applicable). Also, provide detail in Part VI, including (i) the names and EIN					
	numbers of the supported organizations added, substituted, or removed; (ii) the reasons for each such action;					
	(iii) the authority under the organization's organizing document authorizing such action; and (iv) how the action	L	 			
	was accomplished (such as by amendment to the organizing document).	5a		~		
þ	Type I or Type II only. Was any added or substituted supported organization part of a class already		ļ			
	designated in the organization's organizing document?	5b		-		
C	Substitutions only. Was the substitution the result of an event beyond the organization's control?	5c		ļ		
6	Did the organization provide support (whether in the form of grants or the provision of services or facilities) to					
	anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or					
	benefit one or more of the filing organization's supported organizations? If "Yes," provide detail in Part VI.					
7	Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor	6		<u> </u>		
,	(as defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity					
	with regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).	7		~		
8	Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7?	<u> </u>	 	<u> </u>		
	If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).	8		~		
9a	Was the organization controlled directly or indirectly at any time during the tax year by one or more					
•	disqualified persons as defined in section 4946 (other than foundation managers and organizations described	l				
	In section 509(a)(1) or (2))? If "Yes," provide detail in Part VI.	9a		~		
b	Did one or more disqualified persons (as defined in line 9a) hold a controlling interest in any entity in which					
	the supporting organization had an interest? If "Yes," provide detail in Part VI.	9b				
C	Did a disqualified person (as defined in line 9a) have an ownership interest in, or derive any personal benefit					
	from, assets in which the supporting organization also had an interest? If "Yes," provide detail in Part VI.					
10a	Was the organization subject to the excess business holdings rules of section 4943 because of section					
	4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated	L	ļ	<u> </u>		
	supporting organizations)? If "Yes," answer 10b below.					
b	Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to	<u> </u>		<u> </u>		
	determine whether the organization had excess business holdings.)	10b	1	1		

Part	Supporting Organizations (continued)			
	s and the state of		Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?	Į.		
а	A person who directly or indirectly controls, either alone or together with persons described in (b) and (c) below, the governing body of a supported organization?	11a	ļ	~
b		11b	<u> </u>	-
	A 35% controlled entity of a person described in (a) or (b) above? If "Yes" to a, b, or c, provide detail in Part VI.	11c		~
	ion B. Type I Supporting Organizations	1		
	· · · · · · · · · · · · · · · · · · ·		Yes	No
1	Did the directors, trustees, or membership of one or more supported organizations have the power to			
	regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the			
	tax year? If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or			
	controlled the organization's activities. If the organization had more than one supported organization, describe how the powers to appoint and/or remove directors or trustees were allocated among the supported			
	organizations and what conditions or restrictions, if any, applied to such powers during the tax year.	<u> </u>	 	ļ
_		1_		
2	Did the organization operate for the benefit of any supported organization other than the supported			
	organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated,			
	Supervised, or controlled the supporting organization.		-e	TREAT T-1/2
Sacti	on C. Type II Supporting Organizations	2		
Jecu	on C. Type if Supporting Organizations		Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors		103	110
•	or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control			
	or management of the supporting organization was vested in the same persons that controlled or managed			
	the supported organization(s).	1		~
Secti	on D. All Type III Supporting Organizations			
			Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the	1		
	organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax			
	year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the organization's governing documents in effect on the date of notification, to the extent not previously provided?	<u> </u>		
_		1		
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how			
	the organization maintained a close and continuous working relationship with the supported organization(s).	2		
3	By reason of the relationship described in (2), did the organization's supported organizations have a			
•	significant voice in the organization's investment policies and in directing the use of the organization's			
	income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's			
	supported organizations played in this regard.	3		
Secti	on E. Type III Functionally Integrated Supporting Organizations			
1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see	instru	ctions	s).
а	The organization satisfied the Activities Test. Complete line 2 below.			
b	The organization is the parent of each of its supported organizations. Complete line 3 below.			
C	The organization supported a governmental entity. Describe in Part VI how you supported a government entity (see ın:		
2	Activities Test. Answer (a) and (b) below.		Yes	No
а	Did substantially all of the organization's activities during the tax year directly turther the exempt purposes of			
	the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify those supported organizations and explain how these activities directly furthered their exempt purposes,			
	how the organization was responsive to those supported organizations, and how the organization determined			
	that these activities constituted substantially all of its activities.	2a	<u> </u>	
b	Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more	 -		
_	of the organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the			
	reasons for the organization's position that its supported organization(s) would have engaged in these			
	activities but for the organization's involvement.	2b		
3	Parent of Supported Organizations. Answer (a) and (b) below.			
а	Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or			
	trustees of each of the supported organizations? Provide details in Part VI.	3a		
b	Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each			لـــــــــ
	of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard.	3b		

Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Org	ganı	zations	
1 Check here if the organization satisfied the Integral Part Test as a qualifying instructions. All other Type III non-functionally integrated supporting organ			
Section A—Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1 Net short-term capital gain	1		
2 Recoveries of prior-year distributions	2		
3 Other gross income (see instructions)	3		
4 Add lines 1 through 3.	4		
5 Depreciation and depletion	5		
6 Portion of operating expenses paid or incurred for production or			
collection of gross income or for management, conservation, or			
maintenance of property held for production of income (see instructions)	6		
7 Other expenses (see instructions)	7		
8 Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)	8		
Section B—Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year):			
a Average monthly value of securities	1a		
b Average monthly cash balances	1b		
c Fair market value of other non-exempt-use assets	1c		
d Total (add lines 1a, 1b, and 1c)	1d		
e Discount claimed for blockage or other factors (explain in detail in Part VI):			
2 Acquisition indebtedness applicable to non-exempt-use assets	2		
3 Subtract line 2 from line 1d.	3		
4 Cash deemed held for exempt use. Enter 1-1/2% of line 3 (for greater amount,	4		
see instructions). 5 Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
6 Multiply line 5 by .035.	6		
7 Recoveries of prior-year distributions	7		
8 Minimum Asset Amount (add line 7 to line 6)	8		
Section C—Distributable Amount			Current Year
1 Adjusted net income for prior year (from Section A, line 8, Column A)	1		
2 Enter 85% of line 1.	2		
3 Minimum asset amount for prior year (from Section B, line 8, Column A)	3		
4 Enter greater of line 2 or line 3.	4		
5 Income tax imposed in prior year	5		
6 Distributable Amount. Subtract line 5 from line 4, unless subject to			
emergency temporary reduction (see instructions).	6		
7 Check here if the current year is the organization's first as a non-functionall	y int	egrated Type III supporti	ng organization (see

	lle A (Form 990 or 990-EZ) 2018			Page 7
Part		3) Supporting Organi	zations (continued)	
Sect	ion D—Distributions			Current Year
1	Amounts paid to supported organizations to accomplish	exempt purposes		
2	Amounts paid to perform activity that directly turthers exe	empt purposes of suppo	orted	
	organizations, in excess of income from activity		<u> </u>	
3_	Administrative expenses paid to accomplish exempt purp	poses of supported orga	nizations	
	Amounts paid to acquire exempt-use assets			
- 5 6	Qualified set-aside amounts (prior IRS approval required) Other distributions (describe in Part VI). See instructions.			
$\frac{3}{7}$	Total annual distributions. Add lines 1 through 6.	·		
	Distributions to attentive supported organizations to which	h the organization is res	enoneive	
•	(provide details in Part VI). See instructions.	on the organization is res	ponsive	
9	Distributable amount for 2018 from Section C, line 6			
10	Line 8 amount divided by line 9 amount			
Sect	ion E—Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2018	(iii) Distributable Amount for 2018
1	Distributable amount for 2018 from Section C, line 6		F16-2010	Amount for 2010
			l <u>-</u>	
2	Underdistributions, if any, for years prior to 2018 (reasonable cause required—explain in Part VI). See instructions.			
3	Excess distributions carryover, if any, to 2018			
а	From 2013	· -		
b	From 2014	ļ <u>-</u>		
С	From 2015			
d	From 2016			
е	From 2017			
f	Total of lines 3a through e			
<u> </u>	Applied to underdistributions of prior years			
<u>h</u>	Applied to 2018 distributable amount			
<u>i</u>	Carryover from 2013 not applied (see instructions)			
<u> </u>	Remainder. Subtract lines 3g, 3h, and 3i from 3f.			
4	Distributions for 2018 from			
	Section D, line 7: \$			<u> </u>
	Applied to underdistributions of prior years			<u></u>
<u> </u>	Applied to 2018 distributable amount Remainder. Subtract lines 4a and 4b from 4.			
	Remaining underdistributions for years prior to 2018, if			
3	any. Subtract lines 3g and 4a from line 2. For result			
	greater than zero, explain in Part VI. See instructions.			
6	Remaining underdistributions for 2018. Subtract lines 3h			<u></u>
	and 4b from line 1. For result greater than zero, explain in Part VI. See instructions.	1		
7	Excess distributions carryover to 2019. Add lines 3j and 4c.			
8	Breakdown of line 7:			
а	Excess from 2014			
′ b	Excess from 2015			
С	Excess from 2016			
d	Excess from 2017			
е	Excess from 2018	i l		_

Part VI	Supplemental Information. Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; Part III, line 12; Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c; Part IV, Section B, lines 1 and 2; Part IV, Section C, line 1; Part IV, Section D, lines 2 and 3; Part IV, Section E, lines 1c, 2a, 2b, 3a, and 3b; Part V, line 1; Part V, Section B, line 1e; Part V, Section D, lines 5, 6, and 8; and Part V, Section E, lines 2, 5, and 6. Also complete this part for any additional information. (See instructions.)
01 Majority	of directors or trustees (Part IV, Sect. C)
TWO OF TH	HE SUPPORTING ORGANIZATION'S DIRECTORS ARE ALSO THE PRESIDENT AND TREASURER OF THE SUPPORTED
ORGANIZA	TION. THE SUPPORTED AND SUPPORTING ORGANIZATION HAVE HAD A LONG AND CONSISTENT RELATIONSHIP
	·
	·
	h

SCHEDULE D (Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

► Complete if the organization answered "Yes" on Form 990, Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b. ► Attach to Form 990.

► Attach to Form 990.

Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No 1545-0047

Open to Public Inspection

Employer identification number Name of the organization DEARBORN ORCHESTRAL SOCIETY ENDOWNMENT FUND INC 38-3049011 Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" on Form 990, Part IV, line 6, (a) Donor advised funds (b) Funds and other accounts Total number at end of year 2 Aggregate value of contributions to (during year) 3 Aggregate value of 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 held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? ☐ Yes ☐ No Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose Part II Conservation Easements. Complete if the organization answered "Yes" on Form 990, Part IV, line 7. Purpose(s) of conservation easements held by the organization (check all that apply). Preservation of land for public use (e.g., recreation or education) Preservation of a historically important land area Protection of natural habitat Preservation of a certified historic structure Preservation of open space Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year. Total number of conservation easements . 2a 2b Number of conservation easements on a certified historic structure included in (a) . . . Number of conservation easements included in (c) acquired after 7/25/06, and not on a 2d 3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax vear ▶ 4 Number of states where property subject to conservation easement is located ▶ 5 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? 6 Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year 7 Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements. Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Part III Complete if the organization answered "Yes" on Form 990, Part IV, line 8. If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIII, the text of the footnote to its financial statements that describes these items. b If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items: \$ If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items. Assets included in Form 990, Part X . . .

Parl						
3 .	Using the organization's acquisition, a collection items (check all that apply):	accession, and oth	ner records, chec	k any of the follow	wing that are a sig	inificant use of its
a	Public exhibition		d 🗌 Loan	or exchange prog	rams	
b	Scholarly research		e 🗌 Other	r 		
C	Preservation for future generations					
4	Provide a description of the organizat XIII.	tion's collections a	nd explain how t	hey further the org	ganization's exemp	ot purpose in Part
5	During the year, did the organization assets to be sold to raise funds rather					☐ Yes ☐ No
Parl						
	Complete if the organization 990, Part X, line 21.				-	
1a	Is the organization an agent, trustee, included on Form 990, Part X?					: Yes No
b	If "Yes," explain the arrangement in Pa	art XIII and comple	te the following to	able:		 -
						nount
C	Beginning balance					
d	Additions during the year					
e	Distributions during the year					
f	Ending balance					☐ Yes ☐ No
2a h	If "Yes," explain the arrangement in Pa	•			•	
Par		art Alli. Officer fiere	il tile explanation	THUS DECIT PROVIDE	ca offi art Affi .	· · · <u> </u>
	Complete if the organization	answered "Yes"	on Form 990. f	Part IV. line 10.		
		(a) Current year	(b) Prior year	(c) Two years back	(d) Three years back	(e) Four years back
1a	Beginning of year balance	1,319,922	1,116,369	1,032,568	1,034,181	1,048,397
b	Contributions	320	75,652			
C	Net investment earnings, gains, and				10	
	losses	(15,412)	177,093	119,231	(25,868)	(23,839)
d	Grants or scholarships	39,200	49,512	36,590	24,350	45,830
е	Other expenditures for facilities and programs					
f	Administrative expenses	20	320	320	170	20
g	End of year balance	1,265,650	1,319,922			989,168
2	Provide the estimated percentage of the			, column (a)) held	as:	
а	Board designated or quasi-endowmer		5%			
b	Permanent endowment	15%				
С	Temporarily restricted endowment	0%	2007			
32	The percentages on lines 2a, 2b, and 2 Are there endowment funds not in the	•		at are held and ad	ministered for the	
Ja	organization by	possession or the	e organization the	at are neld and ad	ministered for the	Yes No
	(i) unrelated organizations					3a(i) V
	(ii) related organizations					3a(ii)
b	If "Yes" on line 3a(ii), are the related or					3b
4	Describe in Part XIII the intended uses					
Part						
	Complete if the organization	answered "Yes"	on Form 990, F	Part IV, line 11a.	See Form 990, F	'art X, line 10.
	Description of property	(a) Cost or oth (investme	1 , ,	1	Accumulated epreciation	(d) Book value
1a	Land					
b	Buildings					
C	Leasehold improvements					
d	Equipment					
e	Other					
Total.	Add lines 1a through 1e. (Column (d) m	iust equal Form 99	O, Part X, column	(B), line 10c.)	•	

SCHEDULE (Form 990)

Department of the Treasury Internal Revenue Service Name of the organization

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

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

▶ Go to www.irs.gov/Form990 for the latest information.

2018

OMB No 1545-0047

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Employer Identification number

° □

✓ Yes 383049011 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? General Information on Grants and Assistance DEARBORN ORCHESTRAL SOCIETY ENDOWMENT FUND Part I

7	2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.	zation's procedure	es tor monitoring t	he use of grant fur	ds in the United	States.		
Part	II Grants and Other Assistance to Domestic Organs Part IV, line 21, for any recipient that received mor	sistance to Doi	mestic Organiza	ations and Dom an \$5,000. Part I	estic Governm	unizations and Domestic Governments. Complete if the organization than \$5,000. Part II can be duplicated if additional space is needed.	the organization answapace is needed.	inizations and Domestic Governments. Complete if the organization answered "Yes" on Form 990, e than \$5,000. Part II can be duplicated if additional space is needed.
	Name and address of organization or government	(b) EiN	(c) IRC section (if applicable)	(d) Amount of cash grant	(a) Amount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance
(1) PO BC	(1) DEARBORN ORCH SOC PO BOX 2063 DBN MI 48123	38-6092467	501(C) 3	39,200				see form990 Part III
(2)								
(6)								
<u>4</u>								
(2)						,		
9								
(2)								
(8)								
6)								
(10)								
(11)								
(12)								
0 0	Enter total number of section 501(c)(3) and government organizations listed in the line 1 table	501(c)(3) and gov	vernment organizat	tions listed in the li	ne 1 table			A
2	Enter total number of other organizations listed in the line 1	ganizations lister	In the line 1 table					

Schedule I (Form 990) (2018)

Cat No 50055P

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

Grants and Other Assistance to Domestic Individuals. Complete if the organization answered "Yes" on Form 990, Part IV, line 22. Part III can be duplicated if additional space is needed.

(f) Description of noncash assistance .		-						additional information.	all expenditures of the grants					Schedule I (Form 990) (2018)
(e) Method of valuation (book, FMV, appraisal, other)								n (b); and any other	ciety, and must approve					
(d) Amount of noncash assistance								ine 2; Part III, colum	Dearborn Orchestral Soc	5 1 1 1 2 3 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4				
(c) Amount of cash grant								required in Part I, I	it respectively of the [4 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1			·	
(b) Number of recipients							i	le the information	asurer, and Presider					
(a) Type of grant or assistance	-	2	8	4	5	9		Part IV Supplemental Information. Provide the information required in Part I, line 2; Part III, column (b); and any other additional information.	he President and Vice President of DOSEF are the Treasurer, and President respectively of the Dearborn Orchestral Society, and must approve all expenditures of the grants					

SCHEDULĘ O (Form 990 or 990-EZ)

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.

► Go to www.irs.gov/Form990 for the latest information.

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2018

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Employer identification number

Department of the Treasury Internal Revenue Service Name of the organization

38-3049011 DEARBORN ORCHESTRAL SOCIETY ENDOWMENT FUND INC 01 Officers, directors, etc. family relationship (Part VI, line 2) PAUL AND SANDRA BUTLER ARE MARRIED; BEN AND ANINA BACHRACH ARE MARRIED; NO BUSINESS RELATIONSHIPS EXIST, 02 Members or stockholder classes and rights (Part VI, line 6) ALL SEASON SUBSCRIBERS TO THE DEARBORN SYMPHONY CONCERTS ARE MEMBERS 03 Governing body meeting documentation (Part VI, line 8a, 8b) MINUTES ARE KEPT OF BOARD MEETINGS AND THE ANNUAL MEETING THESE ARE AVAILABLE IN THE DEARBORN SYMPHONY OFFICE, OR BY REQUEST BY EMAIL THERE ARE NO COMMITTEES WITH AUTHORITY TO ACT WITHOUT APPROVAL OF THE BOARD 04 Form 990 governing body review (Part VI, line 11) A DRAFT OF THE 990 FORM AND SCHEDULES IS EMAILED TO ALL MEMBERS OF THE BOARD OF TRUSTEES, AND DISCUSSED BY EMAIL OR AT A BOARD MEETING IF NECESSARY 05. Form 990 availability to public (Part VI, line 18) FORM 990 AND RELATED DOCUMENTS ARE KEPT IN THE DEARBORN SYMPHONY OFFICE, AND ARE AVAILABLE UPON REQUEST 06 Governing documents etc. available to the public (Part VI, line 19) ALL GOVERNING DOCUMENTS AND PUBLIC RECORDS ARE KEPT IN THE DEARBORN SYMPHONY OFFICE, AND ARE AVAILABLE UPON REQUEST THE ANNUAL FINANCIAL REPORT WAS PUBLISHED AND DISCUSSED AT OUR ANNUAL MEETING. 07 General explanation attachment FORM 990 PART III, LINE 4D - CHILDREN'S CONCERT SUPPORT \$500 00